



Title: A rich portrait of the non-violent resistance multi-parent therapeutic programme

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A RICH PORTRAIT OF THE NON-VIOLENT RESISTANCE  
MULTI-PARENT THERAPEUTIC PROGRAMME

By

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A thesis submitted to the University of Bedfordshire in partial fulfilment of  
the requirements for the degree of Professional Doctorate in Systemic  
Practice

June 2014



Figure 1: Etching 1 (hard ground and *chine-collé*)

## Abstract

Non-violent resistance group therapy is an innovative way of working with parents whose children are violent and out of control. The programme brings about change on a number of levels, some of which were beyond our expectations. This research aims to both look into the clinical practice and to develop a research method which can do it justice.

My aim was to research into those areas which are 'felt': beyond the known and the written about. In order to do this I take aspects of the research method portraiture (Lawrence-Lightfoot and Hoffmann Davis, 1997) and bring them together with rich description, rich pictures and arts research practices, so as to create a new qualitative inquiry method which I call 'rich portraiture'.

I describe the development of rich portraiture as a research method and show how I applied it to my practice. At the heart of my dissertation is a complex and layered rich portrait which inquires into the particular experiences of the facilitators of and participants in this groupwork programme (Day and Heismann, 2010).

Rich portraiture draws on the performative abilities of clinicians: music, poetry, film, quilt making, painting, dance, sculpture, writing. Detailed narrative portraits of participants and facilitators are located in their social and political context and combined with a juxtapositioning of performance and text which moves into that tacit dimension in which we *know* more than we can tell (Polanyi, 1966). This is 'performance in use' (Cho and Trent, 2009, p 1). My preferred performance method is painting. I made artworks which resonated with the lived experiences of the facilitators and parents who participated in the non-violent resistance therapy programme. As additional layers of performance the paintings were

shown in venues where they were viewed by audiences at events during which I spoke and showed films of me working.

In this thesis I show how participants and facilitators embody the principles of non-violent resistance and how they perform them in the group. This 'living' of non-violent resistance creates change in people's lives on a number of levels, some of them profound.

I argue that there is a gap in the research methods which we use to look at our systemic practice. We constantly seek to creatively enhance our clinical practice so we should also be exploring emerging embodied and performative research practices. This would reflect the shift, in our therapeutic work with clients, towards embodiment (Shotter, 2010), the corporeal (Sheets-Johnstone, 2009) affective or performance turn (Denzin, 2003, 2006).

My thesis both describes clinical practice in detail and sets out a new research method.

## Declaration

I declare that this thesis is my own unaided work. It is being submitted for the degree of Professional Doctorate in Systemic Practice at the University of Bedfordshire.

It has not been submitted before for any degree or examination in any other University.

Name of candidate: Elizabeth M Day

Signature:

Date: 6 June 2014

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# Acknowledgements

I would like to thank:

- All the parents, facilitators and conversational partners who have shared this journey with me
- Haim Omer for his inspiration
- Peter Lang, Martin Little and John Shotter, the original doctoral team from the KCC Foundation
- Ravi Kohli, my Director of Studies at the University of Bedfordshire
- Gail Simon, my supervisor, who was unfailingly supportive
- Elisabeth Heismann, who co-authored the group programme with me
- Gilda Flores Acqueveque and the Latin American families
- Friends and colleagues who provided support and encouragement
- My family, who took on the lion's share of sorting out my mother's affairs after her death so that I could write

and

- My partner and friend Gaby Charing, who always believed that I could do this

With special thanks to Gemma's daughter, whose beautiful drawings capture the spirit of non-violent resistance therapy

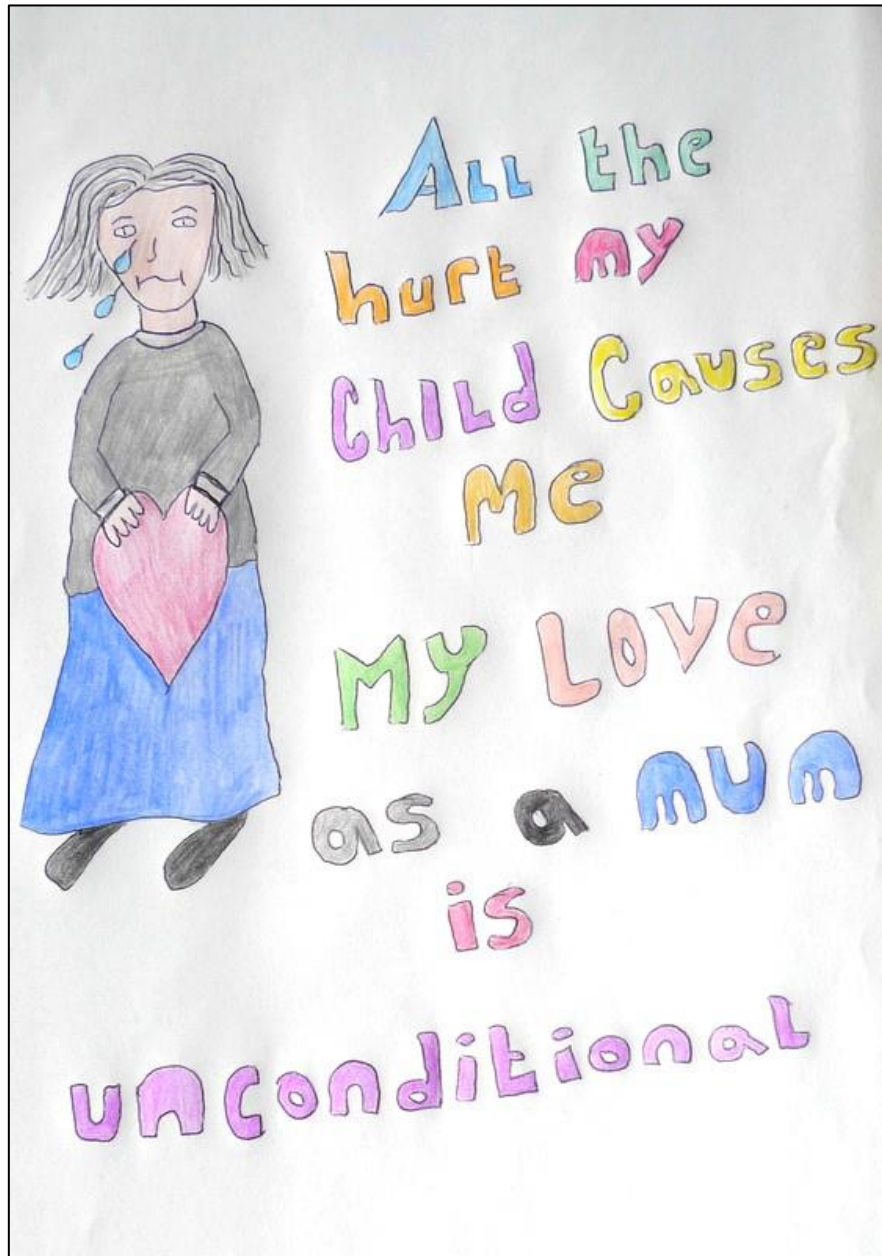


Figure 2: Unconditional love 1

Certain experiences have come to mark for us turning points in the healing process. They include strong collective feelings of sharing and belonging together; emerging expressions of trust; embodied expressions of emotion; feelings of relief of tension experienced as physical relaxation; and, perhaps surprisingly, ourselves becoming involved in strong emotions and evidencing love.

(Seikkula and Trimble, 2005, p 473.)

If no painting comes to be the painting,  
if no work is ever absolutely completed and done with,  
still  
each creation changes,  
alters,  
enlightens,  
deepens,  
confirms,  
exalts,  
recreates,  
or creates in advance  
all the others.

If creations are not a possession,  
it is not only that,  
like all things,  
they pass away;  
it is also that  
they have almost their whole life before them.

Merleau-Ponty (1964), recast as poetry by Holzman (2013)

## Preface

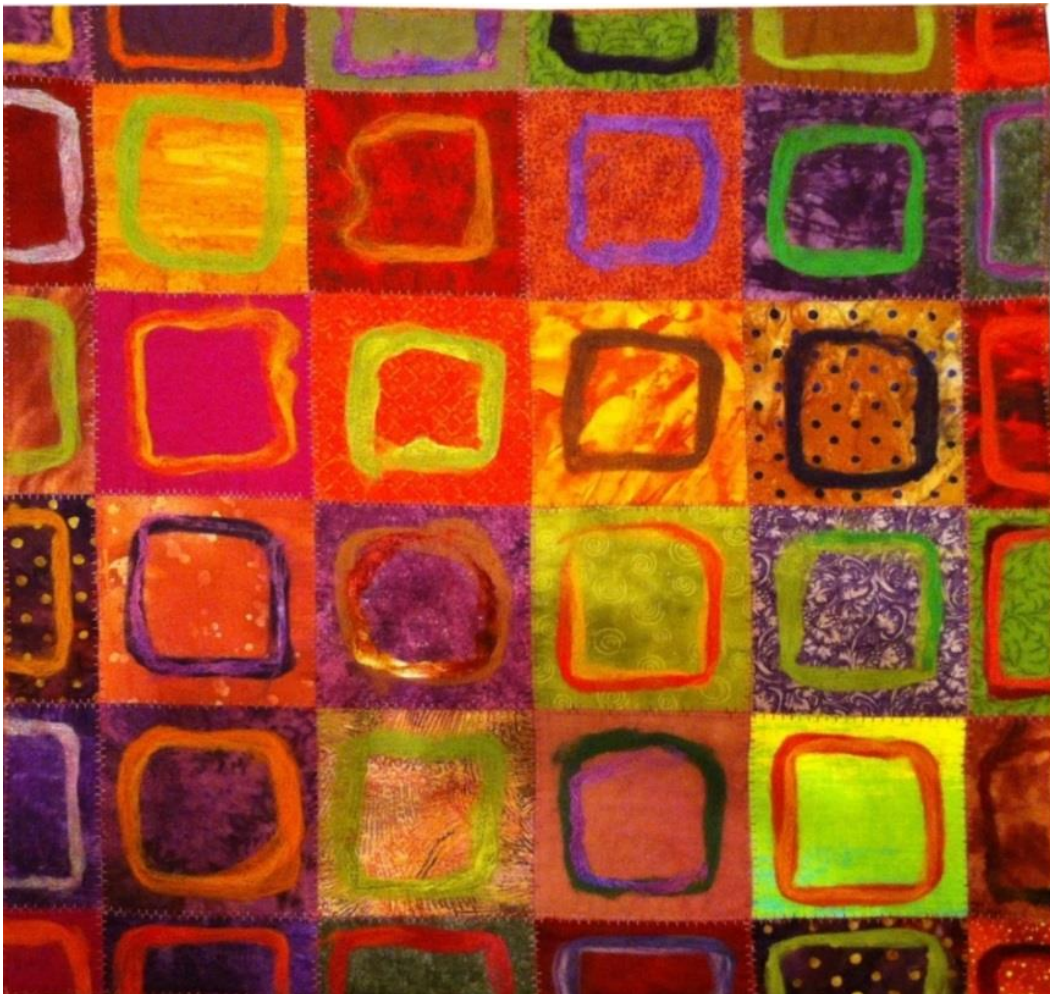


Figure 3: Rosemary Muntus *Red Squares Embellished*

I hold a wall hanging in my hands. It is made by my friend Rosemary Muntus, a quilter and artist. The piece is made up of squares stitched together. Each square has a smaller image loosely drawn onto it, rough

shapes, stitches and felting, many colours carefully combined into a whole design. The shapes and colours are coherent, they fit together, but the juxtaposition is dynamic, the colours complementary; each part is unique, yet stitched together into a whole which says something deeper about the subject (the whole is more than the sum of its parts, Bateson, 1973). The squares at the edges are incomplete; they hint at continuation and speak of a landscape not yet explored, namely the areas beyond the frame and the current focus.

This dissertation is like Rosemary's tapestry/weaving/patchwork. It consists of different aspects, views, and lived and told stories, from the world of the non-violent resistance therapy programme. It is polyphonic, multivocal; it draws on the voices of many participants: graduate parents<sup>1</sup>, facilitators and graduate parent facilitators, and my own voice as both facilitator and researcher. These voices are woven into a series of narrative and visual portraits which hang together as a group portrait and capture the richness and uniqueness of the programme. This is not all there is to see; the landscape extends beyond this frame, just as the non-violent resistance therapy programme continues to develop and evolve, but my current area of inquiry relates to this moment in time and these participants.

I focus on two different aspects of this inquiry: the content of the practice, and the form of the research process which describes it.

I am fascinated by what happens in our groups, by what seems so special about our approach, and also by my unique method of inquiring into it, which I have called 'rich portraits'. As befits the invitation posed by a systemic practice doctorate, this is a multi-layered and multi-textured piece of work. I look into the landscape in different ways: by travelling

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<sup>1</sup> Graduate parents are parents who have successfully completed the programme and who are invited to speak about their experiences to new parents and to participate as facilitators in future groups.

through it, by making maps, by listening and observing, by talking to other travellers. The ground covered is the same, but the rich mix of perspectives makes a multidimensional portrait, something which communicates more than representation or description.

At heart I remain an artist. I use my systemic artistry to weave together the elements which make this a *good* portrait: one which resonates with the reader/viewer and makes you feel, as John Shotter (2011) would say, 'Ah yes; now I get it! I understand *why* this is important.'

Many of the innovators in non-violent resistance therapy have stories to tell of struggles with their own children. I cannot tell such a story; I have no biological children. But I have had significant relationships, and most of them have not been particularly easy. I have had to think creatively in order to find strength and resilience. Persistence and de-escalation are key skills I have acquired in order to maintain my health and well-being. These experiences have taught me a lot about surviving and building relationships. I have not always been successful. Sometimes it is important to know when to call it a day and move on, but parents cannot do that.

Recently, I and my partner have been adopted as foster mothers by a Nigerian lesbian who has temporary leave to remain in the UK. In my sixties I suddenly find myself a parent. This is both unexpected and extraordinarily touching; I feel very special to have been chosen in this way.

## Introduction

I am going to set out the main elements of this thesis as a way of introducing the reader to the context for my work, the area of my clinical practice, my research methods, and the practitioners (writers, clinicians, researchers, artists) who have inspired me on this journey.

This is a practice doctorate; my practice as a systemic psychotherapist is the centre of my research focus. Therefore this thesis is also about me, about how I make sense of things, about my feelings and the journey I make as I explore my practice. I use my ability to make visual art as a further way of opening up that tacit dimension (Polanyi, 1966) in which knowing exists beyond language.

### Work context

I work in the National Health Service (NHS)<sup>2</sup>. I am a systemic family therapist employed by an NHS Foundation Trust in a Child and Adolescent Mental Health Service (CAMHS). CAMHS provides an assessment and treatment service to children and young people under the age of eighteen who have severe and enduring mental health problems. I am one of a multi-disciplinary team that also includes psychiatrists, clinical psychologists, child and adolescent psychotherapists, mental health nurses, social workers and occupational therapists. I work with children

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<sup>2</sup> Founded in 1948, the NHS is the world's largest publicly funded health service; it is also one of the most efficient, egalitarian and comprehensive.

and young people in the context of their families and wider social, educational and professional networks.

The Trust provides mental health services in three London boroughs. I work in one of the outer borough CAMHS, which has specialist teams for different client groups: high risk adolescents, children with neurodevelopmental and learning disabilities, children who are adopted or looked after by the local authority, children under five years of age, and generic clients (everyone else). I belong to the generic team, but work closely with the other teams and with systemic family therapists based in the adolescent and neurodevelopmental teams.

The non-violent resistance therapy project is unusual in being a joint endeavour between two CAMHS.<sup>3</sup>

## Clinical practice

Family Therapy helps people in close relationship help each other. It enables family members, couples and others who care about each other to express and explore difficult thoughts and emotions safely, to understand each other's experiences and views, appreciate each other's needs, build on strengths and make useful changes in their relationships and their lives.

(Association of Family Therapy website)

As a systemic family therapist I work with families facing difficult situations that are affecting everyone in the family. In particular, we meet parents desperate to find strategies for helping their children, who have significant mental health problems and are acting in dangerous and out-of-control ways.

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<sup>3</sup> Each borough's CAMHS is partly funded by its local authority. Co-operative working can be difficult, especially when local authorities are controlled by different political parties.



The non-violent resistance therapeutic programme was inspired by the work of Haim Omer (2004, 2010). Omer applied the approach of social and political non-violent resistance to work with individual families where the parents had lost their presence and their voice in their child's life. De-escalation, active resistance and the rebuilding of relationships brought about profound changes in how the families functioned, and improved the wellbeing of both parents and children.

In 2006 I and colleagues, who included in particular Elisabeth Heismann, had the idea of using the non-violent resistance approach to work with parents in groups. In 2010 Pavilion Publishing brought out our manual which set out how to run the multi-parent group programme (Day and Heismann).

Since then I have participated in seventeen programmes using this approach. I have co-led fourteen of them and supervised three. In that time I have worked with more than four hundred parents. Our materials and methods have been translated into Spanish, Flemish, Dutch, Turkish and German. This is a significant and substantial body of work which has credibility and authority. In 2011 we won the London Safeguarding Children Board's inaugural award for innovative practice. Our project has been visited by teams from Sweden and Switzerland wanting to learn from us. Many copies of the manual have been sold and it is being used to run groups in Australia, the United States, Europe and Scandinavia. The April 2014 issue of *Context*, the magazine of the Association of Family Therapy, is devoted to non-violent resistance therapy and includes an article about delivering the group programme to Latin American families (appendix 8, Day and Flores Acqueveque).

Non-violent resistance therapy is a new intervention which produces unexpectedly dramatic and consistent results over a period of time. My dissertation focuses on the group programme and explores the experiences of parents and facilitators as a way of understanding what

makes it special. I shall describe the therapeutic practices of non-violent resistance in more detail in chapters 2 and 10.

## Research methods

My thinking about research owes a great deal to voices associated with the school of KCC<sup>4</sup> and the imagination which created the Professional Doctorate in Systemic Practice and continues to carry it forward: among others, Peter Lang, Martin Little, John Shotter, Kevin Barge, Glenda Fredman and Gail Simon.

This is not a traditional research thesis. I did not begin with a hypothesis, then test my hypothesis using the tools prescribed by my already chosen research method. I have had several inquiries from researchers asking about my hypothesis, study design, tools and measures. I fear they have been disappointed by my replies.

I begin from a sense of wonder and curiosity. The first time parents told me their lives had been transformed by our programme, I felt an urge to understand more about their experience. I had no fixed idea about what was going on, just a need to explore in whatever way I could. This exploration took a number of directions that I could not have predicted, because I happened upon them along the way. If I had begun with a traditional approach to research, the journey would have been a lot simpler because I would have had a map and a compass and a guidebook. As it is, I have had to rely on the travellers and teachers whom I met and was introduced to on the journey. I have often felt lost and as if I was wandering in that grey no-man's land that exists between

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<sup>4</sup> The School would exist as a forum for the elaboration of thinking, practice and research. This would proceed in a systemic, social constructionist vein which would be the common language of the programmes in the School. At the same time members of the School would make different contributions which are uniquely their own. The activities in the life of the school might be carried on in a "learned-not-knowing" flow of exploration, i.e., with an "attitude of curiosity" to do with what "the other" can teach us, rather than our seeking to teach them. Shotter, 16 March 2012.

frontiers, waiting for someone to hold out their hand to me. I have learned that I have to take the initiative; no one can do it for me.

My research is relational, embodied, aesthetic, moral, ethical, dialogical and collaborative. The ideas are emergent. The research methods develop from within the experience of my practice. They are coherent with my practice and situated within it.

In this thesis I tell the story of this practice, how it evolved and how I went about exploring the experiences of parents and facilitators. The dissertation is arranged in a portfolio style, in the spirit of the original thinking by Peter Lang and Martin Little about how this doctorate might be different from those that had gone before. There is a narrative which leads the reader through the elements of the portfolio and creates a coherent account of the research and the practice. There is a logical sequencing of the pieces of narrative, but you can also treat it as a patchwork (like Rosemary's piece about squares) and move around.

A research method I have drawn on as a way of understanding the group is 'portraiture' (Lawrence-Lightfoot and Hoffmann Davis, 1997). This is fitting for someone who is a painter. I have taken the liberty of extending portraiture into a research practice that I have called rich portraits. Rich portraits bring together the thick, detailed narratives of the work of Lawrence-Lightfoot and Hoffmann Davis and augment them with arts research methods (Knowles and Cole, 2008; Leavy, 2009) and performance ethnography (Denzin, 2003).

I present a tapestry or collage of narrative and visual portraits. The portraits, like paintings, invite the reader/viewer into a relationship. They are performative and relational, existing in the different conversations they evoke, in the questions they pose to the reader, and in the reader's own thoughts and ideas. The intention is to stimulate future conversations in families, between parents, with children, in workplaces, in clinical

settings, and also to offer a way of bringing arts research methods into systemic family therapy settings.

## Inspiring journey companions

John Shotter (2012b) creates an invitation to think of research as a journey.

... the outcomes of our inquiries as practitioners are not to be measured in terms of their end points – in terms of their objective outcomes – but in terms of what we learn along the way, in the course of the unfolding movements they led us into making.

(Shotter, 2012b, p1.)

My journey into researching my practice is characterised by what Shotter calls 'witness thinking': the act of researching from within, rather than attempting to look from outside. Indeed, I question whether it is possible ever to be completely objective, entirely neutral. I believe that categorising people and social interaction as things which can be treated objectively betrays the meaning of relationship.

My companions on this journey have been systemic writers, clinicians, qualitative research inquirers, arts researchers, artists and friends. Some have inspired me through their written work, some have moved me through their paintings, and some have entered into conversations which enabled me to explore my ideas in a deeper way or to take a different direction. All of them have been generous with their ideas and their work.

## The shape of the dissertation

The dissertation has fifteen chapters arranged in four parts, and an introduction, conclusion, appendices and references.

### 1 Introduction

## 2 Part 1 (Chapters 1 - 3)

In order to provide a more detailed explanation of the clinical context for my research, I introduce the practice in focus and tell the story of the development of the non-violent resistance therapy programme. I locate the programme in the wider context of groupwork, parenting programmes and multi-family therapy.

## 3 Part 2 (Chapters 4 - 9)

I develop aims and objectives for the research. I locate my research methods within the wider systemic and qualitative inquiry field and make connections with arts qualitative research. I describe how I developed rich portraits and set out criteria for evaluating my research.

## 4 Part 3 (Chapters 10 - 11)

I introduce the scope and structure of the rich portrait. I present the rich portrait of the non-violent resistance therapy group, parents and facilitators.

## 5 Part 4 (Chapters 12 - 15)

I discuss and reflect on the rich portrait and the processes through which it was created: I explore the contribution of rich portraits as a research method to the field of systemic inquiry. I discuss the role of performance and the performative aspects at the centre of the non-violent resistance programme. I present some thoughts and ideas about future developments.

## 6 Conclusion and forward thinking

7 Appendices and references. This includes a DVD inserted into the back cover.

# Part 1

## Non-violent resistance therapy



Figure 4: Escalation

# Chapter 1

## Introduction to the practice in focus

My inquiry explores a therapeutic group programme for parents who have lost their parental presence<sup>5</sup> (Omer 2000, 2004, 2010) and whose children (who have significant mental health problems) have taken control of the home environment. The programme draws on the principles of non-violent resistance.

The following contexts are central and are introduced here. They are explored in more detail as the practices are described in chapters ten and eleven.

### Non-violent resistance

Non-violent resistance is a form of political and social struggle in which people come together to resist oppression through their physical presence and embodied protest (e.g. occupations, sit-ins, marches and strikes). The concepts have been applied by Haim Omer and others (Avraham-Krehwinkel and Aldridge, 2010; Jakob, 2006, 2011; Ollefs and von Schlippe, 2008; Weinblatt and Omer, 2008) to situations in which parents find themselves dealing with children who show extreme forms of violent and self-destructive behaviour.

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<sup>5</sup> Parental presence: a child's or young person's sense that their parent is there for them; that the parent is a safe, solid and dependable person who can be relied upon; that the parent knows their whereabouts and cares about what they are doing. The child knows what the parent's values are and what the parent believes about right and wrong.

The most well-known exponents of political and social non-violent resistance are Mahatma Gandhi and Martin Luther King. Many famous protests have been rooted in non-violent resistance: the Salt March in India in 1930, Rosa Parks, who refused to move from her seat on a bus in Montgomery Alabama in 1955, the march on Washington in 1963, the occupation of Tahrir square in 2011 (Roberts and Garton Ash, 2009). Non-violent resistance has been theorised by Bayard Rustin (1971) and Gene Sharp (1973).

Judith Butler (1997, p 147) describes the actions of Rosa Parks as *performative*.

in laying claim to the right for which she had no prior authorization, she endowed a certain authority on the act, and began the insurrectionary process of overthrowing those established codes of legitimacy.

(Butler 1997, p 147.)

Butler's choice of Rosa Parks's non-violent actions as an example of a performative act underlines the potency of non-violent resistance as a moral imperative to challenge and bring about relational change in the family and the wider community. I shall make further connections with writing on performance and performative research in chapter 5.

In social work and mental health settings the principles of non-violent resistance are applied therapeutically to situations where the natural order in the home has been upset and children and young people are displaying violent and/or oppressive behaviour towards parents and siblings.

Initially, Haim Omer and his team (Weinblatt, Avraham-Krehwinkel and others) worked with the idea of parental presence as central to their model. Then Weinblatt introduced them to Gene Sharp's book *The Politics*



*of Nonviolent Action* (1973). The team took inspiration from the principles and methods outlined by Sharp and began to focus on de-escalation and resistance and to develop the non-violent resistance framework and the innovative strategies they would go on to use so successfully in their therapeutic work with families.

In my workplace we were inspired by this work to develop a therapeutic groupwork programme, based on non-violent resistance, for parents whose children had severe mental health difficulties and behavioural problems. Many of the children and young people were displaying violent and aggressive behaviour, others were self-destructive (stealing, drinking, using drugs, self-harming, putting themselves at risk sexually), while some had withdrawn from social interaction completely (refusing to leave the bedroom, go to school or leave the house). About half of the children and young people had a diagnosis of conduct disorder (CD) as well as a diagnosis or features of autistic spectrum disorder (ASD), attention deficit hyperactivity disorder (ADHD), obsessive compulsive disorder (OCD), anxiety disorders, emerging personality disorder or depression. A small number had psychosis.

Characteristically, parents needing this programme feel that their child is in control, that they are 'walking on eggshells'. They are extremely distressed, and have lost any sense of how to change things. They are often themselves contributing to the escalation and chaos. Because of their shame and fear of how others will perceive them, they are isolated. Often they have told no one, not even close family, just how bad things are. Those who are working sometimes lose their job because their employer cannot tolerate repeated absences, or they may give up work because they feel so stressed. Parents score highly on depression and anxiety questionnaires (Omer, 2010) and this finding is borne out by our own research. We give participants a depression and anxiety questionnaire before and after each group programme. Strikingly, at a

recent introductory session, eleven of the twelve parents who attended said they were taking anti-depressants.

On reflection, I wonder how the reader will react to my use of medical diagnoses to describe young people and their behaviour. Does the use of a label locate the problem within the child and pathologise them? I argue that a label or name is only part of a complex process of making sense of a young person's difficulties in the context of their family, environment and social network. In my agency we *only* see children and young people who are presenting with mental health problems. It is possible to use labels to reduce a person to a diagnosis, to put them into a box or silo, or to control their access to benefits and resources. However, in my work with families I find that a diagnosis can be helpful if it enables the adults to gain a different perspective, to widen their understanding of their child, to give them more choices. I used to believe that parents who wanted a diagnosis were desperate to find something wrong with their child; now, when they tell me they have always known their child is different, I listen very carefully to what they say. Most parents want the best for their child and want to find out how to help them. Their despair results from their trying, and failing, to make sense of their child's escalating distress and worsening behaviour, and from their fruitless attempts to persuade someone to take them seriously and help. Professionals may fall into the trap of seeing demanding parents as simply aggressive and unreasonable, which can lead to parents making even more demands and sometimes behaving unreasonably. Similarly, young people often sense that they are different: they find it hard to make and keep friends, they find complex social interaction bewildering, their high level of expectation of themselves leads to frustration and disappointment; they feel increasingly cut off and isolated; in extreme cases they can become suicidal. A diagnosis can relieve the pressure and reduce self-blame. Among a number of languages I draw on in this research, I need to be able to use the language of diagnosis in order to engage with the grammar of the

medical profession and the current trend towards care pathways, the clustering of clients by diagnosis, and payment by results (Department of Health PbR, 2013), a system in which funding is tied to specific treatments and outcomes.

We have run our programme many times and have been surprised by how effective it is. Most families' lives not only improve (which we would hope might happen for some of them), but are quite transformed (which we had not expected – although we know now to expect it). Non-violent resistance as a therapeutic intervention has better engagement and fewer drop-outs than other parenting approaches (Ollefs and von Schlippe, 2006) and in our group parents are inspired to go on to become supporters and facilitators of future programmes. Graduate parents (those parents who have completed the programme) now run their own thriving parents' support group. Parents say:

It had made such a difference to our lives that we felt we wanted to give something back to everyone who had supported us through that process.

We believed that it had made a huge difference to our families and had realised how many other people were out there struggling and that this could reach out to them and help them as well.

Our way of using non-violent resistance as a therapeutic group intervention differs from the model used by Omer (2004). Omer and his team see parents for individual coaching sessions. They have psychology trainees who regularly telephone parents and provide ongoing support. We chose instead to develop our intervention as a group programme. We did this for both practical and clinical reasons: we could see more parents if we saw them all together, and we found parents gave one another

support and learned from one another every bit as much as they did from us.

A parenting programme is a structured intervention to improve relationships and behaviour; it can be delivered either to parents in a group or to individuals and their families or to a mixture of both. We have chosen to deliver ours to parents in a group and not to include the children. However, contextually our programme has more in common with multi-family therapy than it does with a parenting programme. I discuss this in more depth in chapter three.

Multi-family therapy (Asen, Dawson and McHugh, 2001; Laqueur, 1972) brings whole families together and provides interventions in a group setting. Our programme is an adaptation of multi-family therapy, which I will call 'multi-parent therapy', because we see parents together in a group setting without their children.

Our programme is based on systemic principles; it uses systemic and narrative methods and techniques (circular questions, deconstructing episodes, reframing, internalised other interviewing, re-storying, outsider witnessing teams, enactment, sculpting).

Working with people in a group has significant inherent benefits: it decreases isolation, fosters mutual support, empowers parents. It is collaborative and cost effective in a climate of ever increasing cost efficiencies which inevitably erode services over time<sup>6</sup>.

The energy and focus for this research derive from my feeling of excitement about what has been happening in our group programme. I had not intended to embark on a doctorate, but I did want to find out more about how non-violent resistance was helping parents, and the doctoral programme happened to come along at the right time.

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<sup>6</sup> In the NHS services are expected to make year-on-year efficiency savings. Our service spends most of its money on staff; we can only save money by reducing the number of staff we employ.

At the time I wrote:

I first began to think about research into the non-violent resistance group when, as a group of facilitators, we were meeting to review our second group programme. Somewhat to our surprise the group had been quite transformational for some parents; one couple who had already consulted solicitors about divorce and whose children were going into care had rebuilt their relationship with each other and also with their children, who were less violent, remained at home and had started attending school again. As facilitators we felt that the experience had changed us too. It seemed as if it was not possible to be committed to teaching the principles of non-violent resistance and the ways of transforming relationships and for this to remain confined to the clinical setting. As we spoke about what had happened and I began to outline some ideas for looking at this more closely I realised that I was seized by the idea of researching into the programme. Not long after this I received an invitation from Peter Lang of the KCC Foundation to an information weekend about the doctorate; it felt like a moment of synchronicity or kairos (Stern, 2004).

My ideas about research have developed since then, but the passion and commitment have not changed. My research focuses on the stories of participants and facilitators in order to explore their ideas about what it is about the programme that is transformative. It makes connections between the non-violent resistance principles, our collaborative stance, the systemic approach used to deliver the programme and the people who come together to facilitate and participate in it.

## Chapter 2

### The story of becoming a non-violent resistance practitioner

In this chapter I tell the story of how I and my colleagues met Haim Omer and how his work on non-violent resistance therapy offered us a way forward with families whom we had previously found hard to engage successfully. I also set out the non-violent resistance developments which were part of that journey.

#### A first meeting with non-violent resistance

I work as a systemic psychotherapist for an NHS Foundation Trust in the Child and Adolescent Mental Health Service (CAMHS). The Trust's head of family therapy is Marcus Averbek. In 2005 Marcus arrived back from the European Family Therapy conference in Germany and started telling us about a new intervention called non-violent resistance developed in Israel by Haim Omer. Marcus was very enthusiastic, but I could not quite understand what non-violent resistance was and how we might use it.

Marcus and another family therapist, Peter Jakob from East Kent, invited Haim Omer over to deliver two training days.

I drive down to Dover arriving in the early morning. The light is watery and the air has a chill in it. The venue for the two days is high up on a hill looking down on the town. Standing

outside I can see out across the English Channel and smell the sea air. It is a modern building with lots of windows. I get cold standing in the fresh breeze and it's a relief to go inside and get warm. The hall is laid out with rows and rows of chairs. There is going to be a big audience. I sit at the front. I always like to sit close to the speaker because I feel more connected.

Haim is immediately engaging. He speaks about non-violent resistance in a clear, straightforward way which makes the concepts easy to grasp. Above all, the ideas make sense! I immediately start thinking of families whom I had not known how to help: Haim seems to know them and is describing them in the examples he gives. I begin to feel hope for my clients in this new approach. We so often fail with these families, leaving both them and us feeling frustrated and let down.

A typical situation would be:

Mr and Mrs Brown come to see me with their fourteen-year-old son Wayne. They describe a catalogue of behaviour: stealing from them, coming home late, disappearing, demanding money, drinking, fighting, hitting his mother, lack of respect, lying, and so on. As they catalogue Wayne's faults, he sits there sullenly, refusing to speak. I try to draw him out, and ask if there is anything that may be going well. His parents think that I am not taking their complaints seriously and redouble their efforts to ensure I understand just how much of a problem he is. Wayne gets up, swears, and leaves the room, slamming the door as he goes. I offer the parents a further appointment without him. They say, *'But he's the one with the problem, not us'*. They don't come back. A year later Wayne is referred again; everything is the same but much worse.

Of course this is a simplification. Children and young people with behavioural difficulties are hard to help. Often their behaviour seems to be no problem for them at all - except that it gets them into trouble; however, they are generally angry, unhappy, and frustrated with their inability to change things for the better, although they are unable to articulate this. Their behaviour is best understood as a communication.

The International Classification of Diseases version ten (ICD 10) is a diagnostic tool which is used worldwide to report on the incidence and prevalence of diseases and which provides a common language for describing presenting problems. Two clinical diagnoses in ICD 10 describe the sorts of behavioural problems that we often see in children and young people: conduct disorder (CD) and oppositional defiant disorder (ODD). Both are now referred to generically as conduct disorders. When I first heard about conduct disorder it seemed to me that it was a convenient way of pathologising children who did not do as they were told. The characteristics of ODD are that the child is persistently negative, defiant and hostile. CD includes more destructive and antisocial behaviour (e.g. hurting people or animals, fire setting, stealing). The diagnoses remain essentially descriptions of behaviour and say little about social, emotional or environmental contexts.

The UK National Institute for Health and Care Excellence (NICE) has issued clinical guidelines on recognition, intervention and management of antisocial behaviour and conduct disorders in children and young people (2006). These guidelines are regularly reviewed, most recently in March 2012.

The guidelines recommend parenting programmes for children up to the age of twelve (or the developmental age of twelve) with behavioural problems and conduct disorders. The best way of helping these children and young people is to involve their parents in a parenting intervention -



but that is not usually what parents want to hear. It can be hard to sell them the idea at this stage.

You didn't hear me. HE'S THE ONE WITH THE PROBLEM, NOT ME!

Haim Omer's stories offer us ideas about these situations. He is doing something different and it works! During the breaks we buzz with ideas. Haim speaks for two days. I hardly notice the time pass; I hang on his every word. Haim can speak like this and hold an audience in several different languages. What he says is always accessible. He never uses notes. It feels as if he is speaking directly to me.

I am particularly struck when Haim says how important it is for parents to be able to describe their pain and distress without the child being there. If the child is there you cannot let parents tell you just how bad things are - which they need to do in order to feel heard - because it further damages the relationship between them and the child, which would be unethical. Non-violent resistance therapy gives us permission to work with these families in a different way, to make more space to be humane with parents and listen to their stories.

Much later one of our facilitators, Tatiana, tells me:

For me as a psychiatrist I would think more about the pain of the young person with psychosis. I wouldn't think so much about the pain experienced by the mother. So facilitating helped me put things into perspective. I think I played down the pain of the parents before. I always thought, 'They're the parents; they need to do whatever needs to be done'. I think that was unfair. I should be more realistic in my expectations of them and more attuned to their pain, their grief and their sense of loss so that I can engage with them in change. We think, 'Well, that's a responsible adult, that's a child, and if

the child is unwell then the adult needs to take on more things', and we don't realise that they've taken on so much already.

Haim Omer introduces us to a set of non-violent resistance principles which are similar to some of the main parenting approaches but also go against some common practices. For example, 'Strike while the iron is hot' (immediacy) is replaced with 'Strike while the iron is cold.' Rewards for good behaviour and sanctions for bad behaviour are removed and replaced with small, unconditional gestures of love which are made regardless of how behaviour has been.

### Our first non-violent resistance project

When we get back we start a non-violent resistance steering group. We buy lots of copies of Haim's book and use the chapter called 'The parents' instruction manual' with families. The chapter is quite hard to read; it is a translation from the Hebrew and the language is cumbersome and in places rather outdated. We decide to write our own version. This is our first non-violent resistance project.

Three of us work on the booklet: Elisabeth Heismann, Miriam Spyrou and me. The booklet is printed and we win an award for it from our Trust. It is popular and as it becomes more widely known we start getting orders from other organisations and have to reprint it.

### The first multi-parent group

Elisabeth and I and the rest of the group are keen to start seeing families and trying out our newly acquired skills. I have some rooms already booked for family therapy which I offer to give up once every three weeks for our new non-violent resistance clinic. However, in an afternoon we can see only two sets of parents, three if we really push things. As we try to decide how to manage the time between us (and the increasing number of parents we want to use non-violent resistance with) the idea of seeing

the parents all together in a group is born. In this way we can all be involved, we only need one time slot and we can see as many parents as we like.

We accept everyone who is referred, and in April 2007 we run our first multi-parent non-violent resistance group with fifteen parents. We decide what to cover and how to structure the sessions as we go along. When a couple from this first group tell us we have not only stopped their three children going into care but also saved their marriage, we are complete converts!

As we run more programmes we create resources like the map and the wristband.

The map

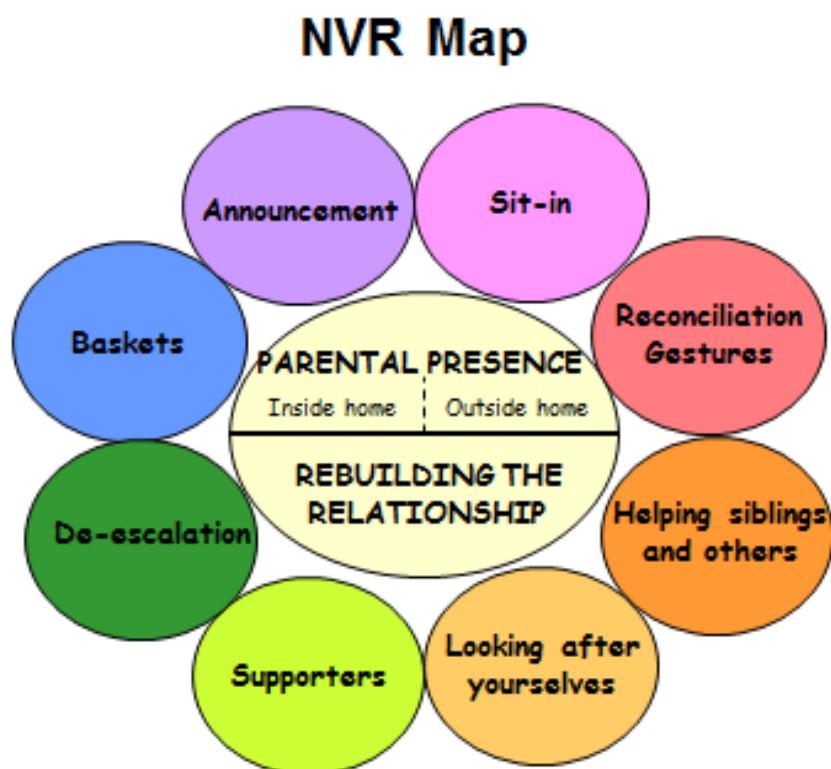


Figure 5: Non-violent resistance map, Amaryllis Kontoslavlaki, 2007

One of our facilitators creates a map showing the principles of non-violent resistance. She conceptualises the elements like the spokes of a wheel, with the key principles forming the hub. In order for non-violent resistance to work, parents need to be able to put the bits together and understand how they fit. With even a few spokes in place, the wheel starts to turn again and things begin to move in the family. The more elements parents are able to add, the more smoothly the wheel turns. Soon it gathers its own momentum and the pace of change increases.

### The wristband

A presentation by a staff member from the local Autism Advisory Service gives me the idea for the non-violent resistance wristband. In some schools children who are on the autistic spectrum are encouraged to wear coloured wristbands to help communicate their emotions to others. The wristband also serves as a reminder to staff that a child is on the spectrum. I want something that reminds parents, when they feel at their most frustrated or desperate, to uphold the principles of non-violent resistance.

The wristband has these words embossed in the silicone

*non-violent resistance - unite - resist - persist - repair*

### The manual

Elisabeth and I go on to write the non-violent resistance programme manual. It brings together all the work we have done to set up our group programme. We set out the background to the programme, the history of non-violent resistance, the main principles, and the research evidence. Each part of the programme is described in a way that allows other people to follow in our footsteps and run their own non-violent resistance parent group. The manual includes a CD-ROM with the hand-outs, leaflets and materials we have developed. There are also filmed role-plays on a DVD. Haim Omer writes a preface to the manual and contributes a piece

on research and non-violent resistance developments across a number of countries. Uri Weinblatt and Peter Jakob write pieces for us to include.

### The conference

In 2011, in partnership with Peter Jakob, we organise the first international non-violent resistance conference. One hundred and fifty delegates attend from all over the world. The conference is held in the Royal Naval College in Greenwich, a World Heritage site, beautiful Wren buildings looking out over the Thames.

### The DVD

In 2012 we produce a new DVD in partnership with Peter Jakob which includes: Haim Omer being interviewed by our graduate parents, interviews with me and Elisabeth, and, most powerful of all, our graduate parents interviewing one another about their experiences.

## Chapter 3

### Group programmes and group therapy

Working with people in groups has a tradition within the informal community work field dating back to the 1800s: the ragged school movement, boys' and girls' clubs, settlements, and adult education (Smith, 2004). Groupwork as psychotherapy emerged in the 1900s, when it was found to be effective in the treatment of patients with tuberculosis (Pratt, 1905) and, later, those with psychological difficulties related to trauma experienced during World War II. In the 1940s and 1950s the work of Bion (1961) with groups at the Tavistock clinic led to what became known as the Tavistock model (The New York Center for the Study of Groups, Organizations, and Social Systems, 2014), which is one of the three main psychodynamic group psychotherapy models, along with the interpersonal and group analytic models (Montgomery, 2002).

Groupwork is an effective intervention in social work and therapy and can empower marginalised people and communities to harness their abilities in order to bring about change (Furman et al, 2009; Kurland and Salmon, 1993; Preston-Shoot, 2007; Yalom and Lesczc, 2005).

I want to locate the non-violent resistance therapy programme within this wider field of therapeutic groups, rather than within the narrower field of parenting programmes. This is because the intent of the non-violent resistance programme is therapeutic change rather than behaviour

modification. Furthermore, we are working with the parents of children with significant mental health difficulties. However, in the next section I shall describe briefly the various types of parenting programme, before showing why I think our programme fits better with a multi-family therapy approach.

## Parenting programmes

A number of group parenting programmes are used to address behavioural problems in children. The two most widely known, with the largest evidence base (dating back more than thirty years), are the Incredible Years and the Positive Parenting Program (Triple P). The Incredible Years was developed in the United States by Carolyn Webster-Stratton (2009, 2013); it is used extensively in the UK. Triple P was developed in Australia and is widely used here. Both are used in a number of western countries and in cities like Hong Kong and Singapore which have significant western influence. The programmes' main aims are to change the child's behaviour, help the child develop self-regulation, and empower and educate the parents.

The Department for Education Commissioning Toolkit lists fifty-one different parenting interventions and uses a star rating system to indicate the effectiveness of each one. This star rating is based on the outcomes of research trials. The more trials there are, particularly if they are randomised control trials, the better. The longer the programme has been in existence the more research there will have been and therefore the number of stars is likely to be higher.

On its website the Department says:

All of the interventions listed here have some objective evidence of consistently improving outcomes for parents and children. This means that the parenting programme has undergone an evaluation that has:

- observed a statistically significant positive change in one child outcome or one parent/child outcome
- observed this change with standardised measures completed by the parents before and after participating in the programme
- observed this change with at least 20 families representative of the target population
- observed no negative changes in the parents' or child's behaviour

([www.education.gov.uk/commissioning-toolkit](http://www.education.gov.uk/commissioning-toolkit))

Any programme that helps parents understand child development and adopt acceptable and nurturing strategies for managing behaviour is likely to have positive outcomes. An intervention which brings parents together in a safe setting to share their experiences and offers appropriate advice on child care will reduce isolation, engender support and make people feel better (Asen and Scholz, 2010). This is the basis on which many longstanding organisations for parents have been built and have thrived, for example the Mothers' Union, Gingerbread and, more recently, Families Need Fathers and the web site Mumsnet.

We have data from more than five hundred parents who have completed the programme. Non-violent resistance is in the process of being considered for inclusion in the Department for Education's Commissioning Toolkit. The effect of not being in the Toolkit is pervasive. Our local authority runs a number of parenting programmes, including non-violent resistance. Because it is not listed in the Toolkit, the local authority refused initially to include the extremely positive outcomes of the non-violent resistance programme in their parenting programme report. Programmes with less positive outcomes were included.



The Toolkit covers a range of parenting interventions, which fall into four main groups, with some overlaps. Group one is general parenting programmes (the Solihull Approach, Raising Children, Family Foundations), group two is programmes for behavioural difficulties (The Incredible Years, Triple P, Mellow Parenting, Take 3), group three is programmes targeted at particular types of family (mothers and infants in prison, children on a child protection plan, children with ADHD, children with learning difficulties), group four is intensive programmes which target more extreme antisocial and offending behaviour (Functional Family Therapy (FFT), Multisystemic Therapy (MST), Mentalisation-Based Treatment for Families, Multidimensional Treatment Foster Care). Group four also includes programmes targeting specific groups (children who sexually abuse others, children who have been abused, young people who misuse substances, children in foster care).

The parenting programmes in groups one, two and three are mainly group interventions, whereas the programmes in group four are delivered to individuals and their families by teams of workers and are therefore costly to deliver. Interventions in group four have a strong systemic basis and were developed by therapists working with the whole family.

The Department for Education (2012) promotes intensive, cost-effective and evidence-based interventions for looked-after children and children on the edge of care or custody: FFT, MST, Multidimensional Treatment Foster Care and Keeping Foster and Kinship Carers Safe and Supported – based on Multidimensional Treatment Foster Care principles. FFT, MST and Multidimensional Treatment Foster Care were all developed in the United States.

Because of the quite proper emphasis on evidence-based practice, non-violent resistance needs to be included in the list of approved treatments for behavioural problems in order for NHS and other providers to feel able to use it. There are randomised control trials (RCTs) under way for non-

violent resistance in a number of countries. They include an interesting RCT in Israel which shows very promising preliminary results (Omer and Shimshoni, 2012)<sup>7</sup>.

In the NHS there is a push towards RCTs, which are seen by many as the gold standard in evidence-based research (Grossman and Mackenzie, 2005). A properly funded RCT involves teams of clinicians and researchers working for several years. Subjects are allocated randomly either to a specific treatment arm or to treatment as usual (TAU). An RCT scores highly in terms of traditional standards of validity, reliability and transferability.

Non-violent resistance RCTs are under way in Holland and Germany. If funding were available, it would in principle be possible to set up an RCT in this country which compared our manualised programme to TAU; except that there is no obvious TAU for our families because of the complexity of their problems. To compare our programme to the other parenting programmes (Webster-Stratton and Triple P for example) would not be to compare like with like.

Clearly, this is not the sort of research that I am doing. Each group that we run is unique; the growth and development of the participants is shaped in joint action. Participants create new stories together, and each group changes the way in which we run the next group. The process is living and dynamic and demands a research method that can capture that and do it justice. My method needs to foreground the voices of the

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<sup>7</sup> 242 families took part in a randomised control trial in which a quarter of parents received a single session of coaching on increasing their parental presence in order to discourage risky driving behaviour in their teenage sons. Cars were fitted with in-vehicle data recorders which recorded driving patterns and families were randomly allocated to one of four groups: 1) feedback from the data recorder went to parents, 2) feedback from the data recorder went to the young person only, 3) feedback from the data recorder went to parents plus parents had a single coaching session, 4) a control group in which feedback went to the researchers only. Preliminary results show that young male drivers whose parents received a single coaching session in parental vigilance showed statistically significantly safer driving behaviour compared with the other three groups.

parents and facilitators who have made this extraordinary journey with me.

The non-violent resistance therapy programme has more in common with multi-family therapy than with a traditional parenting programme, because it is a therapeutic group intervention based on systemic principles.

### Multi-family therapy

Multi-family therapy is an established way of working with families in a group. The approach emerged in the United States in the 1940s and 1950s. Peter Laqueur (1972) is acknowledged as the founding father of multi-family therapy (Asen and Scholz, 2010). In 1951 Laqueur began bringing the families of patients with psychosis together in a group to help them understand what was happening with their family member who was unwell, what schizophrenia was, what treatments were being used and why. Being with other families in a group seemed to help not only the relatives but also the patient. Over a period of fifteen years Laqueur was able to reduce readmissions to hospital by 80%. Multi-family therapy is now used with a wide range of problems including psychosis, schizophrenia, eating disorders, substance misuse, the management of chronic illness and pain, and child abuse and neglect. It is a systemic therapeutic approach which in the UK owes much to the influence of the anti-psychiatry movement (Szasz, 1974) and to Minuchin's work on the effects of social context and poverty (Minuchin et al, 1967). It also connects back to the emergence of groupwork in this country and the social-change ethos of the ragged schools movement (Webster, 1973). In the UK multi-family therapy is epitomised by the work of Asen, Cooklin, Dawson, Eisler, McHugh, the Marlborough Family Service<sup>8</sup> in London (Asen, Dawson and McHugh, 2001; Asen and Scholz, 2010; Dawson and

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<sup>8</sup> The Marlborough Family Service has a forty-year history of doing multi-family work, and the model they have developed is known as the Marlborough Family Model.

McHugh, 2012), and the eating disorders service at the Maudsley Hospital.

Asen and Scholz (2010) have a table which sets out their rationale for multi-family therapy. It contains many of the elements which have emerged from my own conversations with our participants and facilitators, but omits the particular value of having a diverse group. Their table (ibid, p 5) includes:

- creating solidarity
- overcoming stigmatisation and social isolation
- stimulating new perspectives
- learning from each other
- being mirrored in others
- positive use of group pressure
- mutual support and feedback
- discovering and building on competencies
- experimenting with 'foster' families and swapping
- intensifying interactions and experiences
- raising hopes
- practising new behaviours in a safe space
- strengthening self-reflectiveness
- promoting openness and increasing self-confidence through 'public' exchanges and interactions

Many of these elements are found also among the therapeutic factors identified by Yalom and Lesczc (2005) as influencing the process of change and recovery among group therapy clients:

- universality - feeling of having problems similar to others, not being alone
- altruism - helping and supporting others
- instillation of hope - encouragement that recovery is possible

- guidance - nurturing support and assistance
- imparting information - teaching about problems and recovery
- developing social skills - learning new ways to talk about feelings, observations and concerns
- interpersonal learning - finding out about themselves and others from the group
- cohesion - feeling of belonging to the group, valuing the group
- catharsis – release of emotional tension
- existential factors – life and death are realities
- imitative behaviour – modelling another’s manners and recovery skills
- corrective recapitulation of family of origin issues – identifying and changing the dysfunctional patterns or roles one played in one’s primary family

In the following table I compare multi-family therapy with non-violent resistance therapy.

Figure 6: Comparison of Multi-Family Therapy and Non-Violent Resistance Therapy

Multi-Family Therapy	Non-Violent Resistance Therapy
<ul style="list-style-type: none"> <li>▪ creating solidarity</li> </ul>	<ul style="list-style-type: none"> <li>• identifying personal values and their origins (gender, culture, religion, family, upbringing)</li> </ul>
<ul style="list-style-type: none"> <li>▪ overcoming stigmatisation and social isolation</li> </ul>	<ul style="list-style-type: none"> <li>• committing to non-violence (words and actions)</li> </ul>
<ul style="list-style-type: none"> <li>▪ stimulating new perspectives</li> </ul>	<ul style="list-style-type: none"> <li>• breaking the taboo of silence</li> </ul>
<ul style="list-style-type: none"> <li>▪ learning from each other</li> </ul>	<ul style="list-style-type: none"> <li>• finding connections in difference</li> </ul>
<ul style="list-style-type: none"> <li>▪ being mirrored in others</li> </ul>	<ul style="list-style-type: none"> <li>• recognising relational patterns</li> </ul>
<ul style="list-style-type: none"> <li>▪ positive use of group pressure</li> </ul>	<ul style="list-style-type: none"> <li>• finding a sense of purpose and feeling grounded</li> </ul>
<ul style="list-style-type: none"> <li>▪ mutual support and feedback</li> </ul>	<ul style="list-style-type: none"> <li>• experiencing an embodied sense of parental presence – feeling different physically</li> </ul>
<ul style="list-style-type: none"> <li>▪ discovering and building on competencies</li> </ul>	<ul style="list-style-type: none"> <li>• sharing experiences and hurts</li> </ul>
<ul style="list-style-type: none"> <li>▪ experimenting with 'foster' families and swapping</li> </ul>	<ul style="list-style-type: none"> <li>• developing support networks</li> </ul>
<ul style="list-style-type: none"> <li>▪ intensifying interactions and experiences</li> </ul>	<ul style="list-style-type: none"> <li>• envisioning and holding onto hope</li> </ul>
<ul style="list-style-type: none"> <li>▪ raising hopes</li> </ul>	<ul style="list-style-type: none"> <li>• repositioning - getting a feel for the child's experience</li> </ul>
<ul style="list-style-type: none"> <li>▪ practising new behaviours in a safe space</li> </ul>	<ul style="list-style-type: none"> <li>• learning new ways of living and doing relationships</li> </ul>
<ul style="list-style-type: none"> <li>▪ strengthening self-reflectiveness</li> </ul>	<ul style="list-style-type: none"> <li>• laughing together</li> </ul>
<ul style="list-style-type: none"> <li>▪ promoting openness and increasing self-confidence through 'public' exchanges and interactions</li> </ul>	<ul style="list-style-type: none"> <li>• forgiving oneself</li> </ul>
	<ul style="list-style-type: none"> <li>• witnessing and supporting others</li> </ul>

Looking at the comparison table, I am struck by how non-violent resistance foregrounds values and beliefs. Non-violent resistance is not only about what you *do* but also about what you *believe*. Like multi-family therapy it involves far more than teaching skills and techniques to parents.

Multi-family therapy encourages entire families to be therapeutic to one another, while the therapist decentralises herself (Asen and Scholz, 2010). Our programme does this with parents while focusing on how they can be therapeutic with their children.

Our intervention was developed by family therapists but is not family therapy in its traditional form. Some of our parents will already have had family therapy, or will go on to have family therapy after the programme finishes, and this element is built in to the Latin American non-violent resistance project. Our therapy programme was developed by systemic family therapists and uses a systemic approach as well as systemic methods and techniques (Burnham, 1992) and this locates it firmly within the systemic tradition.

Where hierarchies have become reversed in the home, parents need to take responsibility for making changes and responding in a different way. So we do not see the group as one in which whole families come together, although that might be a development in the future.

Multi-family therapy is usually focused around a particular presenting problem. Ivan Eisler and his team at the Maudsley hospital run a well-known and well-researched multi-family therapy group for young people with eating disorders (Eisler, 2005), in which the whole family attend. At points during the sessions parents and children are seen separately, but it is essentially a programme for the entire family. A similar programme runs in Dresden in Germany. The purpose of these programmes is somewhat different from ours, as they are specifically focused on

reducing the symptoms of anorexia nervosa through a programme of enactment (families eating meals together) and supporting parents to develop skills and strategies to manage and endure the ensuing escalation and patterns of conflict (Eisler, 2005; Scholz et al, 2005). While our programme is ostensibly built around a common presenting problem, it is the particular combination of parents' distress and hopelessness coupled with cyclical patterns of escalation which invites non-violent resistance therapy and de-escalation as a clinical intervention.

I would argue strongly that non-violent resistance therapy is an inherently systemic way of working with parents, just as multi-family therapy is inherently systemic. It pays attention to the many stories in families, particularly those untold and unheard stories of strength and resilience (Pearce and Pearce, 1998). It values clients as important authors of these new stories and experts in 'local knowledge' (Geertz, 1983) – the ways in which their own families work. In the non-violent resistance therapy programme the involvement of graduate parents, and their specific role, acknowledges and harnesses this strength and expertise: parents reposition themselves in relation to the problem that first brought them to the group and become a resource and a story of hope for new parents.

I want to use non-violent resistance when I sense that the child's violent or self-destructive behaviour shows itself within a particular relational pattern: parents have lost parental presence. In their interaction with their children parents usually exhibit high levels of expressed emotion (Brown et al, 1972); in their response to challenging behaviour they can be unnecessarily punitive or far too submissive. Incidents escalate quickly and end up in verbal or physical violence, or in parents giving in to their child's demands. Many parents find themselves alternating their responses: sometimes they end up screaming and shouting, at other times they give in. This leaves them feeling demoralised and ineffective.



Haim Omer (2010) describes non-violent resistance as moving parents from speaking from an 'I' position to speaking from a 'we' position. This particularly systemic repositioning reduces isolation and creates networks and systems of concern (Lang and McAdam, 1995).

## Part 2

## Research



Figure 7: Strike when the iron is cold

## Chapter 4

### Developing aims and objectives for the research

My aims and objectives emerged from conversations about the research with facilitators and parents. At the beginning I did not know how I was going to do the research; I focused at this point on what our team might want to know more about. We began speaking about moments when it seemed as if something important had happened in the group. One of our graduate parents called this an 'Ah-ha!' moment, another called it a 'revelation' moment – one in which something new is revealed to the self. The ways in which they were described showed that these were striking, felt and embodied living moments (Shotter and Katz, 1998).

It was ethically important to include parents and their ideas in conversations about research. Systemic family therapy pays attention to the many stories in families, particularly untold and unheard stories of strength and resilience (Pearce, 1989; Roberts, 1994; White and Epston, 1990). In the non-violent resistance therapy programme the role of graduate parent acknowledges and harnesses this strength and expertise. The power balance is shifted, so that parents contribute to one another's learning and insights and to the continuing development and design of the programme itself.

Striking moments (Gergen, 2009; Lang et al, 1990; Shotter and Katz, 1998) have been an ongoing theme for me, in my clinical practice and as

a researcher. I think of striking moments as having a range of dimensions: impact, speed and time.

Some are truly those moments when it is possible to see someone stop, as if they have been struck by lightning, and their face changes. Some moments are quieter and slower, less gaudy and showy in their apparel. Some are moments which happen incrementally and sequentially over time.

This research is partly about exploring the particular qualities and moments that non-violent resistance therapy seems to bring about, which enable significant and profound change in participants and their relationships. There are many ways in which this objective might be approached, but I wanted to locate the research within our collective clinical practice. Although this research is my sole responsibility and I am exploring a practice in which I am a key practitioner, it is also a collaborative endeavour. The most exciting developments and moments come when we (facilitators and participants) co-create practice together.

In order for my research methods to be coherent with the practice of non-violent resistance therapy, they needed to emerge from the activity of living practice. This means that I could not know how this was going to take shape until it happened. Systemic qualitative inquiry methods fit well with these objectives, and qualitative inquiry researchers and academics have been solid and dependable companions on my journey: Conquergood, Denzin, Ellis, Etherington, the Gergens, Lincoln, Shotter, and many others.

The broad aim of my research is:

to explore the special strengths, qualities and relationships within the non-violent resistance therapy group programme in order to understand more about how it works.

Within this aim my objectives are:

- to listen for the stories of participants
- to listen for the stories of facilitators
- to pay attention to the diversity and richness of stories lived and told
- to research from within the programme and the practice rather than by taking an observer position
- to create thick descriptions of stories of the group
- to develop creative ways of performing research
- to do justice to the experiences of participants and facilitators
- to keep the reader in mind and to communicate from a position informed and led by practice
- to write in a way that makes my work accessible to the widest range of readers possible without compromising the academic requirements of a doctoral thesis
- to contribute to the field of systemic practice and research.

In the next chapters I explore some aspects of systemic research and qualitative inquiry in more depth.

In chapter 9 I set out criteria for evaluating and critiquing my research.

## Chapter 5

### Qualitative inquiry and systemic research

Qualitative inquiry takes many different forms. It can range from research which is premised on traditional positivist assumptions through to the most wildly creative endeavours. At the most basic level it may involve the observation, analysis and description of meaning-making in human interaction from a traditional positivist perspective. Traditional researchers begin from a position which holds that people and their relationships can be described in objective accounts (Denzin and Lincoln, 1998a).

While some qualitative research remains firmly embedded in such traditional ways of thinking, the field of qualitative inquiry (as epitomised by the journal *Qualitative Inquiry* and the forum *Qualitative Social Research*) has developed in more challenging and innovative directions.

Qualitative inquiry has a moral and ethical purpose (Pearce and Walters, 1996 p10).

Critical researchers start from an ethical principle and do research designed to emancipate people from patterns of social relations prejudged to be oppressive, to expose

patterns of exploitation, or to subvert structures of power that allow some people to be dominated by others.

It also has a strong sense of politics, which involves consideration of oppression and social responsibility. This links it into the ethical aspects of systemic ways of thinking and practising (Burnham, 2005).

De Beer (2003) quotes Denzin in describing seven moments in the development of qualitative inquiry in which new sensibilities have emerged over the past hundred or so years. In a paper which she presented at the British Educational Research Association Annual Student Conference she uses the table below to illustrate this progression.

Figure 8: Seven moments in the development of qualitative inquiry

Moments	1	2	3	4	5	6	7
	Traditional period - colonial research	Modernist phase	Blurred genres phase	Crises of representation	Post-modern experimental	Post-experimental	Seventh moment
Time period	1900 ⇄	1950 ⇄	1970 ⇄	1986 ⇄	1990 ⇄	1995 ⇄	2000 ⇄
Characteristics / emphasis / focus	Positivism and objectivity in ethnographers' fieldwork and reports	Methodological rigour and procedural formalism  Challenges to positivism (symbolic interactionism)	Many alternative approaches emerged, creating competition and confusion (e.g. hermeneutics, structuralism, phenomenology, feminism)  Borrow from many different disciplines ('bricoleur')	Production of reflective texts: reflexivity, power, privilege, race, gender, class, all undermining traditional notions of validity and neutrality	Triple crisis of representation, legitimation and praxis  Creative and interpretive nature of writing; perspectives of writer; evaluation and quality  Refusal to privilege any method or theory  Activist (democratic racial justice) / political and participatory approaches	Boundaries expanded to include creative nonfiction, autobiographical ethnography, poetic representations, multimedia presentations	Researchers cease debating differences and celebrate the marvelous variety of their creations

De Beer extends the idea of 'bricolage' (from the French word *bricolage*) into the seventh moment. Denzin and Lincoln (1998a) describe a *bricoleur* as someone who works with their hands, making things by devious means. I think of *bricolage* as bits and pieces (*bric-à-brac*); an assemblage of things which are ornamental or unusual and which can be placed together to make an interesting and curious display. A *bricoleur* can turn their hand to anything and make sense of whatever they come across, a Jack-of-all-trades; but I am reminded also of a magpie attracted to things that are glittering and shiny and grab attention. This seems a good metaphor for a research dissertation. I think of myself as someone who has a practical approach to therapy and research. I am not doing this for the intellectual endeavour - I struggle with some of the more academic and technical language - but for the good that can come out of the research: offering new ideas to beleaguered clinicians and generating hope for families and children in distress.

### Witness thinking or thinking systemically

When we come across something in our practice which strikes us as important, ground-breaking, significant, we *feel* it. My breath catches in my chest, I hold still, I don't want to frighten it away; I cannot quite see it yet, but I glimpse it flickering on the edge of my field of vision. This is an embodied response; it helps point us in a direction, helps us know where to explore next (Shotter, 2011, 2012b). In this research I begin from this sense of something significant happening; this is my starting point and the markers along the path occur in the same way. The pieces of art I made happened because they felt like the right thing to do next. This is a far cry from the Cartesian search for certainty (Bernstein, 1983), which has visited me at various points in the process of undertaking this systemic research doctorate. The need for certainty (Mason, 1993) and the tyranny of objectivity are sometimes overwhelming in the face of deadlines and confusion; my supporters at these times of crisis are systemic writers, thinkers and practitioners.



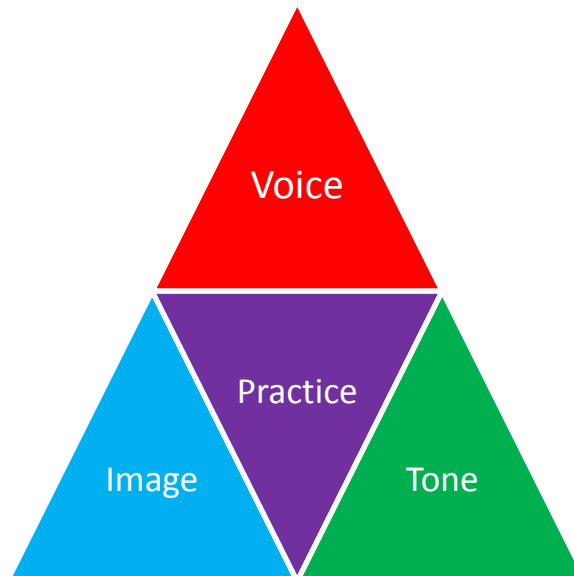
## Validity

Triangulation, looking at the same thing from three different viewpoints, is a traditional method of addressing the question of whether research has validity, although a more critical view of triangulation argues that having three different sources does not make a rumour an authentic voice (Hammersley, 2008). Denzin and Lincoln (1998c) see triangulation as an alternative to validation rather than a tool. The rigour, breadth and depth of bringing a range of methods to the research activity, as the *bricoleur* does, leads to an in-depth understanding and a level of satisfying complexity. I explore my practice in a number of ways, each of which contributes to the portraits that I construct of the group and its participants.

Laurel Richardson (1998) transforms the idea of two dimensional triangulation into three dimensional crystallization. The crystal, multifaceted and with many points, is a living growing shape which remains sharp, contained and reflective.

Figure 9 shows my early thinking about addressing validity. I have placed my practice in the centre. At the top I have placed 'voice' – this represents my conversations with parents and facilitators. On the left is 'image' – this represents the pictures I made and the drawings which were done by a young person. On the right is 'tone' – this represents my participation in sessions where I did not speak the language being used and had to listen for the tone and cadence of communication rather than to the words and their meaning. Each of the external triangles is a lens or window into my practice.

Figure 9: Triangulation



My thinking about research belongs within the feminist tradition (Oakley, 1981): conversations are valued as relational activities in which meaning is socially constructed between people (Burr, 1995; Gergen, 2009; Pearce, 2009) rather than sterile transcripts or as data to be analysed.

### Moments of feeling and movement

Whenever you try to capture and isolate a moment, you lose part of the sense of the life in which it exists. James (1890) provides an example: to think of a stream as made up of objects (pail sized, spoon sized, pints and barrels of water) is to lose the sense of the free water that surrounds them and which is an integral part of the living whole and constantly in movement.

I have always been struck physically by significant moments in therapy, and in life, and have struggled to find ways of writing about what seems to happen in such living or poetic moments (Shotter and Katz, 1998). James (1890) describes groping toward something as a moment in which there is a vague feeling, a tendency which tells us that something is

happening, even though we are as yet unaware of what it is and unable to name it. It is in movement that a baby first thinks about the world, and this comes before language (Sheets-Johnstone, 2009). The mind is embodied and we apprehend and enter a moment in a physical way. Our first response is physical (trembling, shock, intake of breath, tingling), then we begin to think about what is happening and may be able to put our feelings into words.

An 'Ah-ha!' moment is a moment when understanding shifts and a new way of seeing things is opened up. These moments are embodied, striking, arresting; people experience the moment in a felt, physical way. I see people stop, take a breath; it is as if, literally, the 'penny has dropped'.

In describing what happens I am reminded of the physical experience of waiting for someone.

I lean against the wall  
waiting in the sun  
the warm bricks soft and red  
my muscles relaxed

I was here early  
I don't want to miss her  
She's not here yet but it's still not time

Time ticks on

She should be here now  
but the street is empty  
colourless  
waiting

Time slows

The moment is shaped by the time and my feelings

Will she come?

Has something happened?

Is she almost here,

far away,

not coming?

Suddenly she appears in the distance

and my heart leaps

time collapses

the emotional context turns on itself

cartwheeling through 180 degrees;

a new space opens up

a set of interlinked cogs shift gear,

move to a different rhythm

the music in my head modulates to a new key.

This is what a moment of change *feels* like to me.

Daniel Stern writes (2004) about what happens in the present moment.

He makes a distinction between *chronos* - linear time, which is always moving forward - and *kairos* - the propitious moment in which opportunities unfold. This idea of *kairos* excited me. It gave me the same feeling as I have when I am in an unfolding moment in therapy with a client; the moment in which I stop breathing and the air thickens in the room because something different is happening.

Dewey (Alexander, 1987) writes about consummatory moments, particularly in relation to artistic experience. This connects for me with my original training as a painter and reminds me of times when I created

something which seemed to be *more* than me. At Chelsea College of Art in the 1960s I worked with others in a very large studio subdivided by temporary partitions. The day after beginning a new painting, I would take care to approach my space by an unusual route. I wanted to capture some of the strangeness of what I had created as this occurred in a fleeting moment – a bit like home looking strange after you have been away on holiday; the moment soon evaporates as things become familiar again, at which point they become unremarkable, part of the usual picture.

Perhaps a consummatory moment is also a moment of strangeness and awe in which Dewey's 'richness, texture, variation and complexity' (Alexander, 1987, p 174) come together. Perhaps this connects to Bateson's 'difference that makes a difference' (1973, p 286, 1979) and to David Epstein (2008), who aims to offer his client an idea that is far enough away for the client to have to stretch for it, but not beyond the client's reach.

Daniel Goleman (2003) offers Varela's analysis of what happens in the brain during a moment of recognition. He shows how the brainwaves change as the mind processes and then recognises an image.

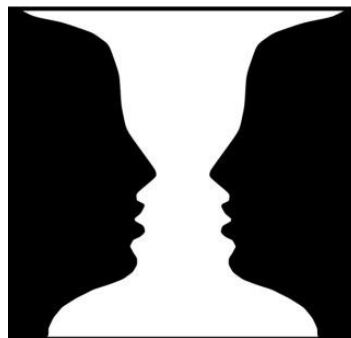
Varela uses an example of an arrangement of seemingly arbitrary black and white shapes that, when looked at, can be recognised as the head of a woman. When the viewer recognises the image they push a button. This process takes milliseconds and can be captured on an electroencephalogram. There is a brain pattern at the moment of seeing the image, then the moment of recognition, and then a new brain pattern formed in the moment of action (pushing the button).

Varela (Goleman, 2003, p 322) argues that the process of recognition takes place

not only in the perceptual sphere, but in the larger context ... of memory, expectation, posture and movement, and intention.

When someone is shown an image which can be perceived in two different ways (a classic example is the vase / two faces image below) they may not be able to see both perspectives.

Figure 10: Vase / two faces image



Some people have to be coached into seeing the second image in the picture; but once they have seen both they are sensitised to both. This seems particularly significant in relation to 'Ah-ha!' moments. When they are in a group, parents have conversations with one another and with facilitators, so that more opportunities to experience these moments are created. Parents can be introduced to the idea of seeing additional perspectives.

There was an 'Ah-ha!' moment for me when I thought about pictures with dual images (some are more complex than the vase / heads one) and how difficult it can be to see both. The personal experience of not being able to see something that others have already 'got' can be frustrating and humiliating. This helped me understand what the difficulty might be for parents who hang on to the story of their child as the problem. Shotter (2009) describes this as a difficulty of the will: the need to overcome the impulse to see only one aspect of the picture.

Pearce (1989, 2007) describes critical moments in conversation, when what happens changes the meaning that is given to the interaction, and the participants act in a way which comes out of the particular meanings they have constructed. Pearce says it is important to recognise these critical moments and to act wisely in them (2007, p 1). I think that we have many opportunities for these critical moments in non-violent resistance therapy. Maybe one way of thinking about the differences between moments when change occurs and moments when it does not is to look at whether such moments were recognised as critical by the participants and how the participants acted. Pearce says that it is more useful to ask '... how the moment was made rather than what it was about' (2007, p 4).

When Oliver (2004) describes making moments of significance work in consultation, she is writing about moments made in the present that emerge from stories lived and told (Pearce, 1989).

Moments of significance are identified as opportunities for constructive change created out of vital connections and disconnections between stories lived and told in the process of engagement in the consultation.

(Oliver, 2004, p 1)

This is useful for me, because much writing focuses on the relationship in significant encounters between two people, whereas Oliver is writing about a group experience.

Maturana and Varela's (1980) work on neurophenomenology emphasises the embodied condition of the human mind.

Elsbeth McAdam (2009) speaks about the embodied nature of presence. As an example, she describes a research project in which it was shown that parents had an immediate sense of whether the clinician who was

going to see them and their child would be able to listen to their story and focus on their needs. This strikes me as particularly significant in the context of non-violent resistance where one of the central concepts is parental presence (Omer, 2000, 2004). The parents taking part in our programme feel that they have lost their parental presence. This may be because they are no longer able to be physically present, or it may be that, while physically present, they have withdrawn their emotional presence. A key part of non-violent resistance therapy is helping parents regain their presence.

Fredman (2004) invites the reader to think in the moment and to name the emotion they are feeling. This fits for me with the developing self-reflexivity (Burnham, 2005) that we see parents acquiring in non-violent resistance therapy.

### Multiple moments

Seikkula (2014) describes a session/meeting as vertical polyphony (inner voices) and horizontal polyphony (people present). He draws these ideas from Deleuze (Hulse and Nesbitt, 2010), who describes melody as horizontal polyphony and harmony as vertical polyphony. I want to show even more than this: many people, each with their own inner voice and stories, in moments across multiple sessions. I face the challenge of finding ways of portraying multiple moments in time on the same research canvas (Dorothy Smith quoted in Denzin and Lincoln, 1998c p 66).

This was done to great effect by artists like Giotto and Giovanni di Paolo, who depicted their characters during different episodes in time within the same painting. An example is Giovanni di Paolo's panel *St John the Baptist Retiring to the Desert* (circa 1454), which can be seen in the National Gallery in London. St John appears on the left of the panel leaving his home, and in the top section of the panel entering the mountains and desert region. This painting has always entranced me; the



sense of deepening dimensionality is created by multiple moments frozen in time within a landscape.

Simon Watney (2013), art historian and lecturer in contextual studies, comments:

Medieval artists had no time for the Aristotelian notion of the unities of time or space [or action – my addition]. They took it for granted that the viewer understood the convention according to which St John for example ... could stride out of one little town on the left of the picture and appear again crossing a landscape, finally arriving at a third destination on the right hand side, all within the same picture space.

The video artist Bill Viola slows down, explodes and explores moments in time. He develops multiple moments in an interesting way in his video piece *The Voyage* (from the installation *Going Forth by Day*, 2002 which references the Giotto fresco cycle in the Scrovegni Chapel in Padua). The same character appears at different moments in time during a journey at the end of his life. This device speaks to something quite special that the artist is able to portray about episode, movement and time.

My portraits contain similar elements; they seek to capture a range of moments for the group and the participants which are presented together as if they happened at the same time. This seeing from many perspectives resonates with other theoretical movements and ideas: Bateson's double description (1979), and the cubist movement, especially the work of Picasso, Braque and Gris, in which the subject is broken up and reassembled from many viewpoints, creating both a more detailed description and a meta-description at the same time.

The artist Richard Long achieves something similar in his work. I am struck by the way in which he uses visual images and text to create accounts of journeys into and across landscapes. Richard Long journeys

into the landscape, bringing back photographic evidence of moments which punctuate his passing. His work inspired my thinking about the research landscape, the landscape of the group, and my journey into it. On reflection, I think that my visit to the Richard Long retrospective at Tate Britain in 2009 was the beginning of my thinking about art as a legitimate way of doing research. My ideas about research and the shape of this dissertation have been significantly influenced by visual artists.

When a striking moment starts to unfold in the therapy room, it is as if the air begins to thicken. Time slows down and the moment unfolds second by second, breath by breath. I think of this as the 'texture' of the moment within a larger landscape that describes the process of the group, the group members and their relationships with one another and with non-violent resistance therapy.

I have the idea of exploring this texture by using visual images and text together. The visual image would be created by me as an emotional response to the feel of the group session; the text would come from the words which seemed significant, chosen by parents and facilitators.

In 2012 I go to the David Hockney exhibition *A Bigger Picture* at the Royal Academy. It gives me so many ideas about research that I sit and write them down.

Same views of the same places at different times of the year. This resonates with what I am doing. Multiple views of the same and different groups at different points in time. All of these contribute to a portrait, a rich picture of the place. This helps me create an account of the rationale for the way I am working. Hockney's view is not always the same. Sometimes he puts all of the different viewpoints together or overlays or overlaps them: collage, *bricolage*, moments in time, punctuations. The light keeps coming and going in the

galleries; it must be the sun outside. It illuminates in different ways. How does this relate to research? The light affects how brightly the areas of the portrait are seen. When the light is bright the more vibrant colours sing in the room. As the light changes the quieter, softer areas are revealed – the detail, the complexity, the range and subtlety of the colouring. Now I am in the iPad room. Lots of images, made day after day from slightly different viewpoints, telling the story of the arrival of spring, the flowering of summer. It connects me with the changes in the group: the beginnings of movement, developing relationships, new life. Now, I watch the films. Two or more images of the same landscape projected simultaneously and next to each another. Each taken by a different camera mounted on the same moving vehicle. There is something hypnotic about the experience of being in front of the immense screens, immersed in the slow journey into the landscape, not being able to see the edges, aware of times when the cameras seem slightly out of synch with one another, the depth of the detail and the added dimensions of time and season. There is something very moving about the successive journeys at different times of the year through the same landscapes. I watch them over and over again, mesmerised: an extraordinarily textured portrait of Yorkshire. Then there is a film shot from lots of different stationary cameras. Dancers in vibrant primary colours cartwheel through a brightly coloured interior landscape. The films are all shown together at the same time on multiple screens. Some of the views overlap, others join seamlessly, while others seem dislocated. It reminds me of the split screen views on my recordings of the non-violent resistance therapy group. Rich portrait seems exactly the right description.

I've been thinking about the idea of portraiture. What I am working towards is the idea of making a picture of the non-violent resistance therapy group. It is a portrait, but more of a cubist portrait. Fractured, deconstructed narrative descriptions are reassembled on the canvas plane to form a complex multifaceted portrait. The group and the experiences of participants are described and experienced from different positions. My way of doing this is not just visual; it is also about sound and cadence. I draw on ideas from soft systems rich pictures, but have not found that they do justice to the richness and complexity of my experience of the group.

In chapter seven I explore how my ideas developed in the context of arts qualitative inquiry.

## Ethnography

*Ethnos* is a Greek word which describes people who share a distinctive culture or racial group. Ethnography is the study of peoples and groups: how they make meaning of their lives, and the beliefs they live by. Ethnographers lived amongst the people they studied but were essentially outsiders, observers of systems that were foreign to them. There are many ways in which ethnography can be done (Agar, 1986; Denzin, 1997; Denzin and Lincoln, 1998) and ways in which ethnography has evolved from the ways in which it was originally done by anthropologists.

Autoethnography includes the researcher as the subject or explores something through the senses and responses of the researcher. The voice of the researcher and the way in which the research is written moves the reader, bringing a felt and embodied understanding to the topic which amplifies the experience (Ellis and Bochner, 2000; Gergen and Gergen, 2002).

Interpretive autoethnography is more messy, more fragmented, made up of a *bricolage* of moments which create a patchwork of stories (Denzin, 2014).

## Performance

Denzin (2003), quoted by Smith and Gallo (2007, p 523), defines performance as

an interpretive event involving actors, scripts, stories, and interactions, and performance texts as poems, plays, staged or improvised readings, or texts of natural conversations.

In this same way the exhibition of the paintings I produced in response to the experience of being part of the non-violent resistance programme was another layer of performance.

In the exhibition the paintings were hung chronologically. Below each one was a text incorporating the resonant words and testimonies from parents and children. Films run on a loop showed the paintings being made. Viewers were invited to contribute their thoughts and make comments in a book.

## Chapter 6

### Portraiture

The artist stands before her subject confident that, after various conversations back and forth, a relationship of trust has been forged. The person whose portrait is being painted relaxes on the chaise. The artist's eye moves from sole of bright blue shoe, to rounded hip, to resting elbow, to melancholy eyes. What major forms emerge for the artist as central to the figure she is interpreting on canvas? How will she organise these emergent central forms into a cohesive whole that will make sense to a viewer and seem an apt portrayal to the subject of the work? Imprinted with the unique style of the artist, the final portrait does not contain every detail of what the artist sees; but in its organization of central shapes against a backdrop that illuminates the whole, the artist somehow captures the essence of the subject. Rising from her chaise to take in the final work, the subject nods with a look of both surprise and interest, "Yes" she says, "I can see that that is me."

(Jessica Hoffman Davis 2003 p 200)

Portraiture (Hoffmann Davis, 2003; Lawrence-Lightfoot, 2005; Lawrence-Lightfoot and Hoffmann Davis, 1997) is a qualitative research method, developed by educational researchers, with its roots in ethnography. Rich,

contextualised narratives create cohesive and coherent portraits that embody what is good, resonant, colourful and special about the subject. The background creates the context, a description of the setting: social, political, economic, cultural, historical, geographical and aesthetic. The activity of portraiture is to listen for the stories that emerge from being immersed in the subject rather than to listen to the stories which are told. It is an active research method in which positionality, voice and a search for goodness are key elements of the process.

I shall use the descriptions, developed by Lawrence-Lightfoot and Hoffmann Davis, of 1) context, 2) voice, 3) relationship, 4) emergent themes, 5) aesthetic whole, to describe some of how I have positioned the portraits.

#### 1) Context

Nothing exists in a vacuum. As a portrait painter I set my subject within a background which draws on those multiple aspects of identity and context which bring life and meaning to the picture. The elements which are included move the portrait beyond the physical into those gaps between stories, into untold and unknown stories which exist in the margins.

#### 2) Voice

My voice is unique. I bring my voice to the creation of the portrait. I choose to portray those aspects that I judge to be germane to the realisation of an authentic and ethical whole created in dialogue with others. I listen for the voices of my colleagues and participants. I pay attention to their stories and look for those threads that I can weave into a vocal tapestry.

#### 3) Relationship

The portrait is created in the relationships between and with my participants. My systemic practice needs to be visible in the approach I take. I value transparency and a collaborative stance. While I take full

responsibility for the positions I take and what I create, I always hold my participants in the forefront of my endeavours. For this work to be moral and ethical, my systemic positionality needs to show in my relationships with participants.

#### 4) Emergent themes

This is an iterative process. Themes emerge within relationships, and shape, and are shaped by, the research journey. I listen for the quieter and more marginalised voices. I listen for what resonates, the rituals that have emerged. I trace the patterning and the texture of the surface. I look for the spaces, the tensions, the sharpness of the edges, the plasticity, the *chiaroscuro*.

#### 5) Aesthetic whole

I balance the themes into a coherent whole that resonates with my experience of the non-violent resistance therapy group and the experiences of facilitators and participants. I hope that the portrait communicates something about the special quality of the group experience, and why people are so committed to putting something back into a programme that they only came to because they were desperate and at the end of their tether.

In September 2012 I write to Jessica Hoffmann Davis explaining how I am using portraiture and asking whether she knows of others who are incorporating painting as an extension of the methodology.

She replies

Your sense of metaphor etc. position you well for the work at hand, but as for the incorporation of actual art making, the methodology may seem constrained. I would recommend to you the work of Professor Rita Irwin at the University of British Columbia. You can see examples of ideas for employing art making itself as a research approach, i.e. to



make sense of things at  
<http://m1.cust.educ.ubc.ca/artography>. There are articles in  
the Springer International Handbook of Art Education which  
address related topics and might suggest to you others in the  
field that could be of help. That said, I thank you for  
describing your most interesting and important work and wish  
you all the best with your doctorate. Jessica

I go to the website and discover the world of arts qualitative inquiry.

## Chapter 7

### Arts qualitative inquiry

Some years ago, while sitting behind the screen supervising family therapy trainees, I started drawing. I drew as a way of exploring what was happening in the reflective process. I was fascinated by isomorphism and the interplay and complexity of the stories that individuals and systems brought into the room. Seikkula et al (2012) describe this intersubjectivity (Husserl, 1999; Stern, 2004) as multi-actor dialogues: a complex interplay between inner voices and those people present in the room.

My first attempts to develop my drawings into paintings were not entirely satisfactory, but felt like the beginning of working towards something the nature of which was not yet apparent.

Much later I found myself developing these ideas in the context of research and qualitative inquiry.

In the example on the next page (figure 11) the clients and the therapist are in the top two thirds of the picture while the team are in the smaller section below. The supervisor is positioned on the left traversing the screen, the link between the two rooms.

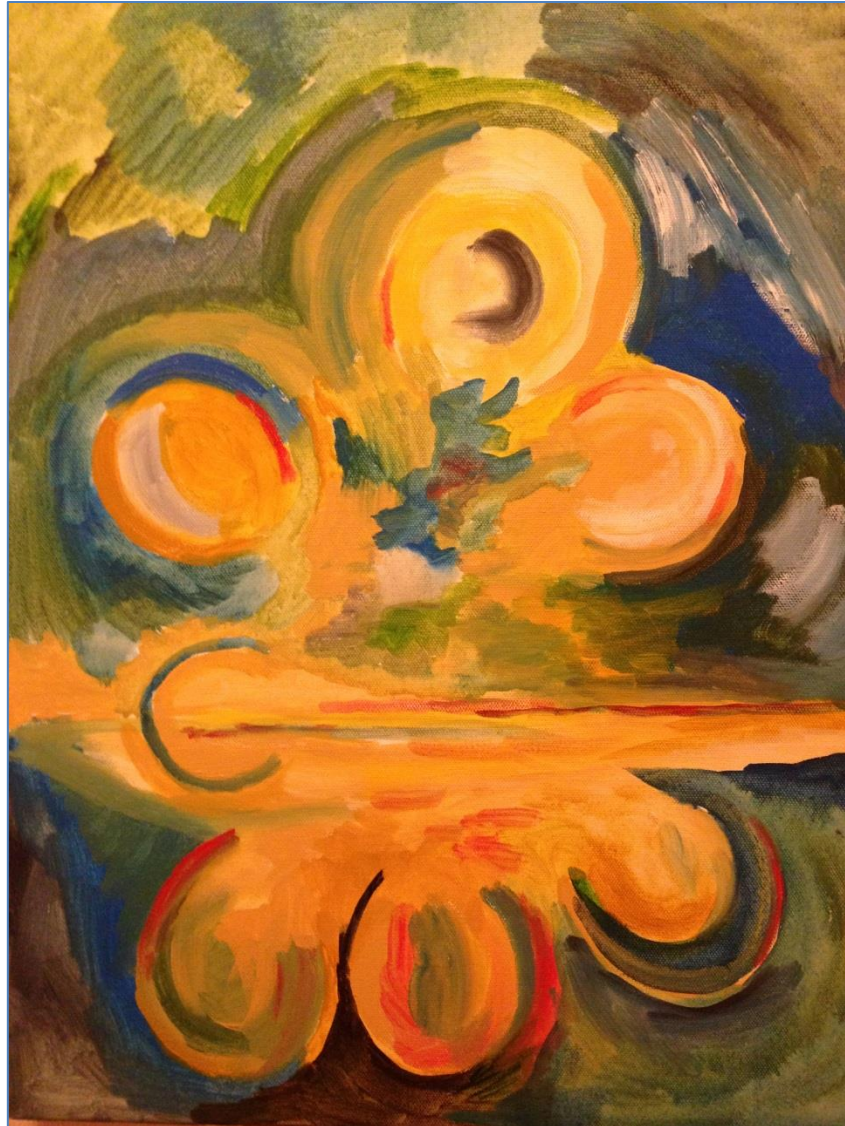


Figure 11: Systemic session - acrylic on board, 2007

When the artist responds to the world by making art, this is a reflexive, felt response, a living inquiry (Dewey, 1934; Merleau-Ponty, 1962, 1964; McNiff, 1998a; Springgay et al, 2005). In the context of research it is also a performative act (Cho and Trent, 2009). In my research it is intended to extend my ability to show what happens between people in the non-violent resistance therapy group. I produce works of art as part of a multi-layered reflexive embodied inquiry (Etherington, 2004, p 212).

These works stand on their own and the viewer and reader are invited into a relationship with the pictures and the written portraits.

### Iterative recursive abduction

The activity of portrait making is embodied and iterative (Agar, 1986, 2006). The experience of being grabbed by something, carried away, transported, is *abduction*.

### Reflection

I remember the moment John Shotter said to me, 'What you are doing is iterative recursive abduction'. I had never heard of it. What was it? It seemed to be what I was fumbling my way towards. Was it all right to be naming what I was doing afterwards? Wasn't that like putting the chicken before the egg, the cart before the horse? But these things are interdependent; one cannot exist without the other. I try to calm myself down. It's going to be all right, it will make sense in due course; just stick with it. In relation to iterative recursive abduction, John mentions the name of Michael Agar. I search for him on the internet. I find papers and books!

This is a journey. I do not start out knowing it all; in fact, at the beginning it feels as if I do not know anything. I soak up ideas. I am hungry, but a lot of what I put in my mouth is hard to chew, strange tasting, oddly textured, indigestible; I feel that I have taken on more than I can manage. At these points I go back to my practice. Here I feel safe and on firmer ground. I take back with me those theoretical ideas I have encountered that resonate, I talk to my colleagues and I begin exploring my practice from a more theoretical position. Now I return to the theory and have another go at it. Each time I manage to bite off a little bit more, but it is a slow and difficult process, this moving between theory, practice and my ideas about research.

## Portraiture

I owe my connection with portraiture to Kevin Barge, who mentioned it to me in a throwaway line as I left the final meeting of our doctoral group. 'There's something called portraiture you might find interesting' he said; and I did.

The artist engages with the person who is the subject of the portrait in an exploration of light, tone, angle, plane and character. Each mark is a reflection of how the painter responds to the sitter. In my experience this is a felt response. My arm moves the brush in response to what I see, but although I am thinking about what I am doing, it is above all a physical, embodied activity (Merleau-Ponty, 1962, 1964). The act of *making* is central. The brush and the colours are an extension of my arm, of my eye, of my heart. Each brushstroke changes the painting, so that it is always emerging, always on the way to becoming. Some aspects of the emerging portrait are surprising; they invite me to take different directions, to explore more slowly, faster, with more precision, with greater vigour, with a broader brush.

If we discover the right method, the one which is in synchrony with our interests and experiences, it will constantly unfold new meanings and possibilities, provide order, and ensure consistency, while encouraging depth and complexity.

(McNiff, 1998a, p151)

Arts-based researchers are not "discovering" new research tools, they are carving them.

(Leavy, 2009, p1)

Arts-based research offers us an opportunity to 'get at' something in our research that we are grasping for but which is somehow beyond the edge

of articulation (Leavy, 2009, p5). This is not because the methods are not sufficiently rigorous or analytic, but because there is a limit to the meaning that words can make; feelings are bigger than words. The introduction of new and different research practices allows for alternative voices and visions to be opened up and presented to the audience.

How do arts-based practices fit as a way of 'knowing' something in relation to research? Eisner (2008) explores the origin of the belief that the arts reflect and evoke emotion and are therefore a sensory distraction from rational and analytic ways of making sense of the world. Eisner (*ibid*) shows how Plato's theory of knowledge privileges mathematics as the highest form of scientific truth, while the arts are side-lined.

Conversely, Aristotle offers a more rounded view of knowledge, describing three forms: *epistēmē* (scientific knowledge), *technē* (skill and craft knowledge) and *phronesis* (practical wisdom). Here the emphasis is more on knowing as a verb and practical activity rather than on knowledge as a noun and object. The expectation that knowledge can be equated with certainty is located in this quest for scientific truth which has also led to the debasing of practical and making activities (Dewey, 1929).

The positivist emphasis on a search for scientific, objective and knowable truth also affects the way in which validity and reliability are framed. Qualitative inquiry methods can be constrained by external demands about validity which have their origins in the scientific and quantitative paradigm (Eisner, 2008). Therefore I have crafted my own criteria for judging my research practice, which are set out in chapter 9.

Sage now publish a *Handbook of the Arts in Qualitative Research* (Knowles and Cole, 2008); fifty-four chapters covering a wide range of research practices. McNiff (1998a, 1998b) has written extensively on art-based activity as a valid research methodology, and contributes the third chapter in the handbook. McNiff (*ibid*) describes research practices in which the making of art (painting, sculpture, performance, dance, film,

poetry, drama) was the research method. He was writing from within the profession of creative arts therapy (music therapy, art therapy, dance therapy, drama therapy) and is himself an art therapist. McNiff (1998a p180) argues that

any creative discipline can be a means of exploring  
therapeutic practice

As someone who is not an art therapist, I wondered initially if I could lay claim to this way of doing research. My training as a painter and art teacher gave me the authority to use art this way in my therapeutic practice, but I had no grounding in using art as research. When I made art in response to the experience of being part of the non-violent resistance therapy group, I was doing what felt important as a way of understanding the experience in a *larger* way. At this point I had very little knowledge about arts-based research practices; I was acting from a *feeling* that this making was an important part of the process, without being able to articulate why. I drew on a wide range of pre-existing knowledge and skills relating to techniques, materials, and the use of colour, shape and form. I would argue that this makes my work a valid part of the research practices that I am using. The pieces communicate something about those elements of the therapeutic experience that cannot be described in words. They resonate with the experience and add something to the description that amplifies it.

Sylvia Wilson (2002) created photography and textile art to construct and communicate her personal experience of loss. In her paper *Collecting Rocks, Leaves, and Seeds: A Journey Through Loss* she explored the evidence and debates around the practice of art as a research methodology, arguing:

If we have a holistic view of research and art production, both the process of creating, the research, and the final product

are integral to the final outcome. Neither can be separated out as independent parts. Rather it becomes an interplay of image, inquiry, and art production.

(Wilson, 2002, p6)

This fluid space in which art as practice and art as research act together and create new possibilities has a strong resonance for me with systemic practice. The fluidity of such spaces generates ambiguity, complexity and paradox; uncomfortable and undesirable experiences for researchers seeking certainty and precision.

A/r/tography (Springgay et al, 2005; Leavy, 2009) is a particular model of arts-based research in education which draws on the work of Merleau-Ponty to describe an enacted living inquiry with embodiment at its heart.

To be engaged in the process of a/r/tography means to inquire in the world through a process of art making and writing. It is a process of double imaging that includes the creation of art and words that are not separate or illustrative of each other but instead, are interconnected and woven through each other to create additional meanings.

(Springgay et al, 2005, p 899)

Making art as a means of inquiring into practice is not about the production of artefacts but is an 'active participation of doing and meaning making' (*ibid*).

The letters A, R and T in a/r/tography represent the different aspects of Artist, Researcher and Teacher brought together in an embodied method in which research both breathes and listens, incorporating both art making and writing. While I have been a teacher, I would not describe myself in that way now; I take artistic liberty with the T in a/r/tography and think of the letters as representing the different aspects of Artist,



Researcher and *Therapist*. Art and text together create a double imaging (*ibid*) or double description (Bateson, 1973, 1979) which moves research into the tacit dimension (Polanyi, 1966).

Springgay et al (2005, p 902) see a/r/tography as an

aesthetic encounter, where the process of meaning making and being are inextricably connected to an awareness and understanding of art.

A/r/tography combines text with visual imagery, which seems to make it specifically about visual art rather than the arts more generally. This fits well with how I have developed my particular way of researching, because I have included text in my paintings, but it limits the method to visual artists. If I want to develop a research method for therapists which explores ways of moving beyond the written word, then it needs not to be limited by the ability to make visual images. Arts-based research practices incorporate a wide range of arenas in which performative inquiry can take place: poetry, video, music, textiles, drama, performance.

O'Riley (2011) suggests that the important contribution art makes to research is one of incompleteness, what he calls 'provisionality': art is always waiting to interact with the viewer in order to extend its function and create new meanings in that dialogue. Art privileges the idea of open-endedness, of a continuing unfolding of meaning.

Ingold (2011, p 198) argues that written texts, painting, drawing and walking through the landscape are all equally valid and

are but outward, sensible forms that give shape to the inner generative impulse that is life itself.

Dewey (1934) describes art as being yet another way in which the social and political landscape manifests itself. He uses the metaphor of mountains in a landscape with the arts being the peaks. Dewey is not

saying that the arts are more elevated than the rest of the landscape but that they are an inseparable and integral part of the unfolding contours and resonant with the underlying geography. Art reflects life; it is not better, it just *is*.

Portraiture, while not an arts-based research method in a practical way (it involves no art making), has its origins in the reflexive relationship between the artist and her subject. In this dissertation the stories of participants and facilitators are presented as portraits. I draw on portraiture (Hoffmann Davis, 2009; Lawrence-Lightfoot and Hoffmann Davis, 1997; Lawrence-Lightfoot, 2005), rich pictures (Checkland, 2000; Checkland and Scholes, 1990; Cushman and Venters, 2004) and arts research methodologies (Leavy, 2009; McNiff, 1998a; Springgay et al, 2005; Wilson, 2002) to create an extended form of portraiture that I have called rich portraits, which has its roots in ethnography and combines narrative and visual texts and techniques.

In the next chapter I describe how I developed rich portraits and the various ideas and methods that I drew on in the process.

## Chapter 8

### The development of rich portraits as a research method

My use of the word 'rich' in rich portraits comes partly from the systems theory tool 'rich pictures', but also references thick (rich) description (Geertz, 1973; Ponterotto, 2006; Ryle, 1971) and rich stories (Roberts, 1994; White, 1991; White and Epston, 1990).

Rich pictures are a systems tool for thinking creatively about, and understanding, complex problems or situations. They incorporate text, images, doodles and drawings and can be produced by an individual or a group. The aim of a rich picture is to explore and understand something rather than to communicate to others. The Open University teaching module on rich pictures has an animated rich picture which describes the process as starting with moving from messy confusion to a group of themes to explore.

The following is an abbreviation of the voiceover.

Draw what you see happening in the situation; everything that is problematic and significant, emotions and relationships, groupings and connections. A rich picture can cope with any sort of messy chaos. It pours down your arm onto the page. It isn't about converting ideas that you have

already verbalised into a visual format. It's about exploring ideas you haven't had yet. It's about exploring the mess. In order to learn something new you have to go through a state of unknowing.

(Open University)

There are a number of images of rich pictures available on the internet, but most of them are made up of text linked together with lines; where there are drawings, they are more like doodles than pictures. The Open University teaching tool says that most people don't like using rich pictures. I suspect it is too hard to break away from language and do something that draws on a different, more embodied way of responding.

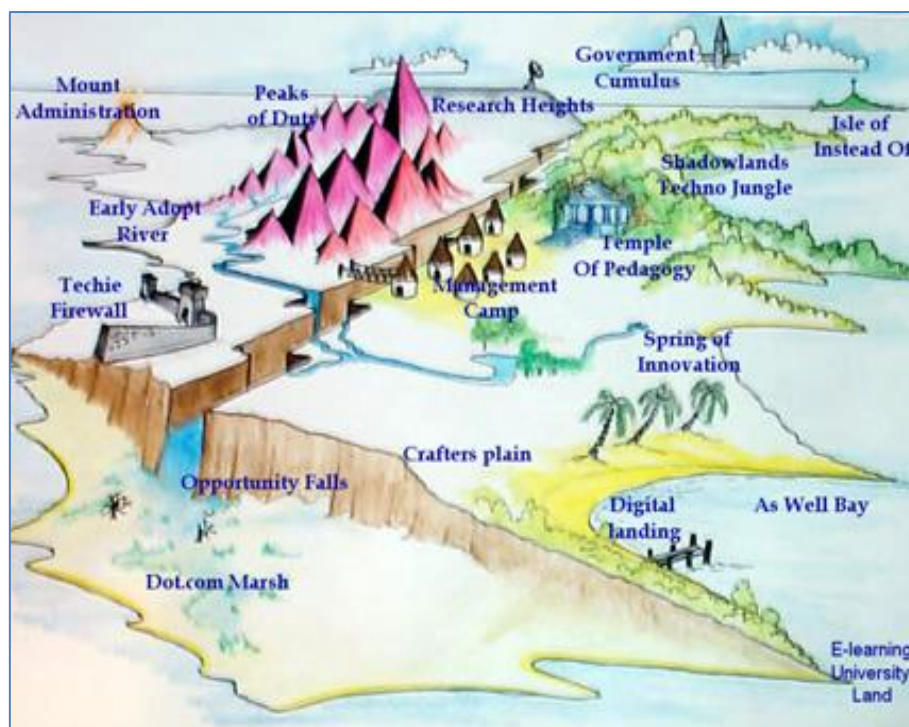


Figure 12: E-Learning rich picture

Figure 12 is an example from the internet of a rich picture (although most are not as colourful or as visually literate as this one), put together by a group exploring the opportunities and threats universities face in

embarking on a transition to e-learning (Professor Gilly Salmon, 2008, reproduced with kind permission of JISC Advance, University of Northumbria).

As soon as I started thinking about research, I started drawing – one of my preferred ways of thinking. I wanted to find a way of using this physical and visual way of responding to ideas as part of my research method.

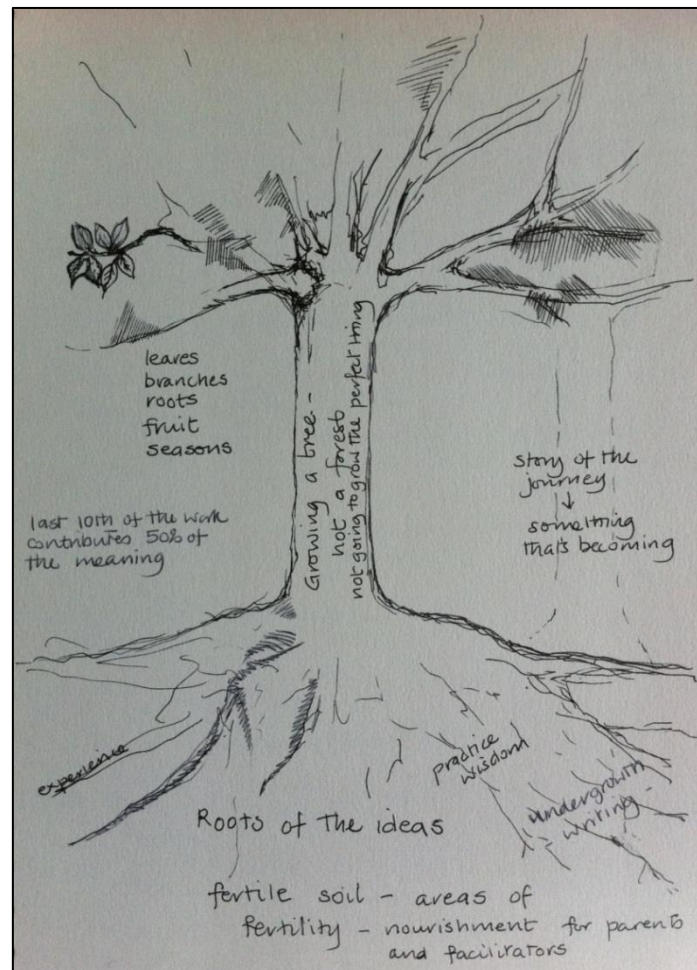


Figure 13: Ideas drawing

When I was introduced to it by a friend, the idea of rich pictures sounded very exciting. But the examples of rich pictures I found were visually disappointing. I wanted my method to be rich in a number of ways. I did

not want it to look thin, flat or monochrome. I wanted to bring a textural richness which was not just about words and narrative but was also performative and colourful. Here I mean colourful as in a richly textured and complex performance rather than necessarily having to incorporate pigments; although that is my own preferred medium. I wanted the work to have artistic merit and beauty.

I call my method rich portraits because it belongs to the tradition and methodology of portraiture (Lawrence-Lightfoot and Hoffmann Davis, 1997), while also being an exploration in which colour, form and texture combine with texts. However, locating it within arts research methodologies or arts-based research practices means the method also has a strong relationship with the practice of a/r/tography.

Having created my own rich portrait using texts and painting, I began to read more about arts-based research and found many connections with performance and performative research. I had struggled with how to set out my research method so that others could use it; it seemed limited by my personal use of fine art. Was I expecting everyone else to want to do their rich portrait in the same way as me? This led me to think much more widely about the performative aspect of rich portraits. Arts-based research practices seem to take almost limitless forms. Therefore I needed to set out my method in a way which enabled other researchers to replace painting with their own preferred arts-based practice.

A rich portrait combines narrative textual portraits with arts-based performance. Like portraiture, rich portraits are constructed from within the relationship between the portraitist and the subject of the portrait. In this sense rich portraits are both relational and dialogical.

### The key parts of the process

In setting out the elements of the process of making a 'rich portrait' I am reminded that the map is not the territory (Bateson, 1973; Korzybski,

1933); a map can never say everything about the subject being mapped, nor will another person's map look the same. There are many ways of looking and many different positions from which to take a view. With this proviso, I set out my method, with an invitation to others to connect with my ideas and develop them in their own way.

Every rich portrait will be presented differently, and this will depend both on the subject of the portrait and the particular arts-based practice which the researcher selects. For the same reason there is no particular order to the stages of the research, save that the bringing together of the elements into an aesthetic whole will generally be the last phase.

I began my own inquiry with making pieces of art, but I might as easily have started with the narrative portraits. The process is hermeneutically recursive, in that each part generates new ideas and points to other ways forward as in iterative recursive abduction (Agar, 2006). McNiff (1998a) p152) says that 'Ideas and methods emerge through the process of artistic expression' and that 'Stock formats limit discovery' (p156). I think the word discovery is unfortunate, as it has a particularly objective meaning in the wider world of research.

#### 1) The invitation to make a rich portrait

The first step needs to be the selection of the area of study or interest. The subject may select itself, as clinicians become aware that their practice invites this sort of research. The nature and complexity of the subject should invite a desire to explore beyond the scope of conventional written research methods. This type of subject has a magical quality to it (Pearce, 1989), something which defies the power of words to define it or do justice to it. Lawrence-Lightfoot and Hoffmann Davis refer to the special quality which marked the projects that they became involved with: arts education projects which flourished in neighbourhoods of extreme poverty and violence and were revered in the neighbourhood (Davis et al, 1993).

The particular qualities of the subject may suggest ways of exploring it, using arts-based practices, or the choice may arise from the skills, interests or abilities of the researcher.

I chose to make visual art on canvas because my first training was in the fine arts and I feel a need to express myself through that medium.

Perhaps the word 'need' is important here; the subject should 'require' as much as 'invite' a research method which goes beyond the more conventional: a moral obligation (Ellis, 2004; Oliver, 1996; Pearce and Walters, 1996) to do justice to the voices of participants.

## 2) Context

An important part of the process is to create a context which breathes life into the subject. The subject should be located within its social, political and economic context. A wonderful example is the District 6 Museum in Cape Town, South Africa, which creates a vivid and multi-layered portrait of a district whose sixty thousand inhabitants were forcibly relocated by the *apartheid* state to the barren, windswept Cape Flats. The museum combines texts, audio, news clippings, testimonials, photographs and reclaimed artefacts. Recreated rooms and the original street layout bring the area back to life and commemorate the people who lived in each home. The geography and political context of the district are an integral part of the portrayal.

A rich portrait includes the historical and theoretical contexts of the subject. I have written about other forms of multi-family group therapy and parenting group programmes and located these within approaches to behavioural problems in children and adolescents with mental health difficulties. I have also written about how my research method developed, and the theoretical ideas and research methods that informed my practice.



Attention needs to be paid to the voice and position of the researcher within the context. I positioned myself as researcher/participant and included a self-portrait to make this clear.

### 3) Voice

The voice of the researcher bears witness (Lawrence-Lightfoot and Hoffmann Davis, 1997). It is a 'we' voice rather than an 'I' voice, multivocal rather than singular. The voice needs to be persuasive, to speak with conviction and belief. This is not a neutral, objective portrayal but one which is intended to embody the qualities of the subject in a way that moves the audience (Denzin, 2014). There is a personal relationship between the author and the audience. The author speaks with a political and moral voice (Ellis, 2004).

Voice is dialogical, an interplay between the subject and the portraitist.

### 4) Relationship

The process of creating a rich portrait is relational, dialogical; it happens in the space between (Flaskas et al, 2005) the portraitist and the area of interest (which might be the portraitist herself). It may be autoethnographical or it may be relationally more distant. It will always require the portraitist to pay attention to the ethical dimensions of the ethnography of performance. Conquergood (1985, p 5) describes four morally problematic stances towards what he calls 'the other': the custodian's rip-off, the enthusiast's infatuation, the sceptic's cop-out and the curator's exhibitionism.

### 5) Emergent stories

The researcher listens for the stories that are spoken, both those that are unique and those that are collective or spoken by several participants. This is not listening only for the stories that are told but also for those that are half told or flicker on the edges of telling in a way that gives us a vague sense of familiarity. James (1890) says that it is this inner sensing

of familiarities, rather than looking for patterns, which enables us to make sense of the world. People tell different stories, but the stories may have the same 'feel' to them or in the way in which they are told. Looking too much for patterns may blind us to the unique qualities of the stories of people's lives.

#### 6) Performance

Denzin (Cho and Trent, 2009, p 3) describes performance texts as 'provocative weavings of stories with theories' and says that 'the effect of performance involves hope/possibility for change at the individual and social levels by means of ethically and politically efficacious performance in and through movement and dialogic exchange.'

In a rich portrait, performance is the arts-research practice which explores and tells the stories of the self or others in the context of a continuous awareness of audience. Performance needs to be imaginative in conception and artistic in representation; in the post-performance phase it needs to involve a reflexive relationship with its audiences (Cho and Trent, 2009).

#### 7) Installation

The final part of the process is the arranging of the parts into an aesthetic whole. The District 6 Museum is an excellent example of this. It is an interactive installation which takes the viewer into recreated rooms where the voices of the inhabitants can be heard and their testimonies read. Another example by Lapum *et al* (2012) transforms the stories of patients who underwent open-heart surgery into a labyrinth-like path winding through an installation of poetry and photography stretching over an area of 1,739 square feet.

Each rich portrait will be unique in conception and performance. Some will be more temporal and ephemeral than others, but there needs to be some way of capturing the less permanent elements (writing about them,

filming, emerging digital processes) so that they become available to others.

My dissertation is limited in its current form by the requirement to produce a bound thesis, but I can also present it as an interactive installation. On the outside wall hang the narrative portraits interspersed with the paintings. In the centre of the room is a circle of ten monitors, facing outwards. Each monitor is showing a film of the making of one of the paintings. It is a wide, circular space which the viewer walks through; there is no beginning or end.

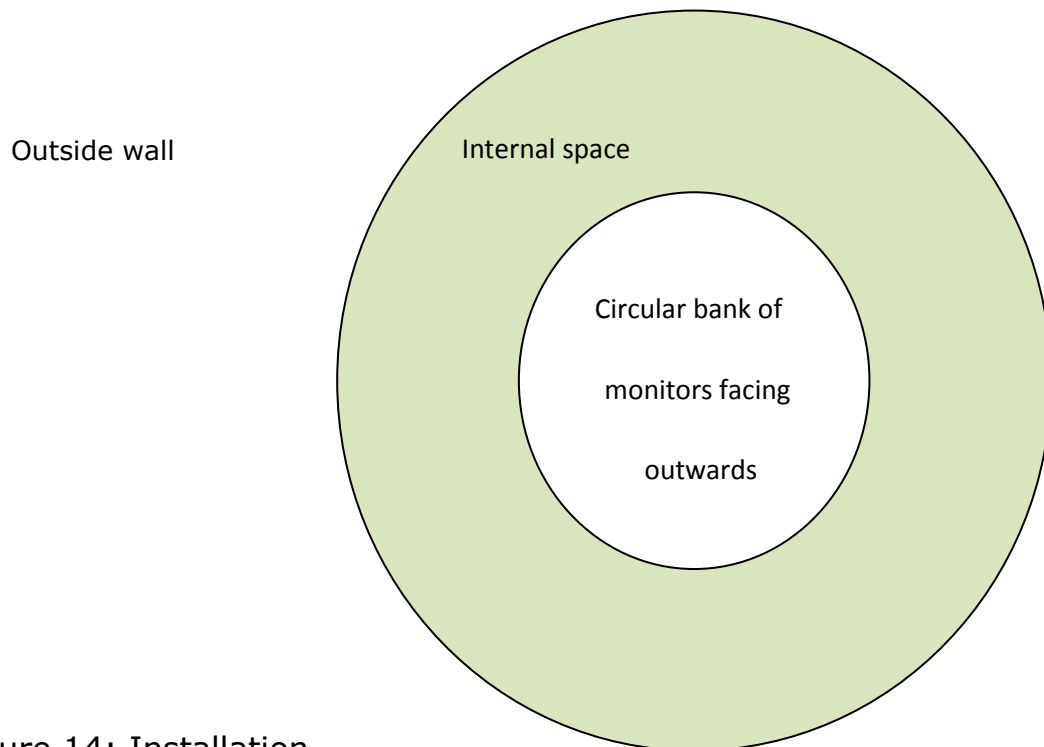


Figure 14: Installation

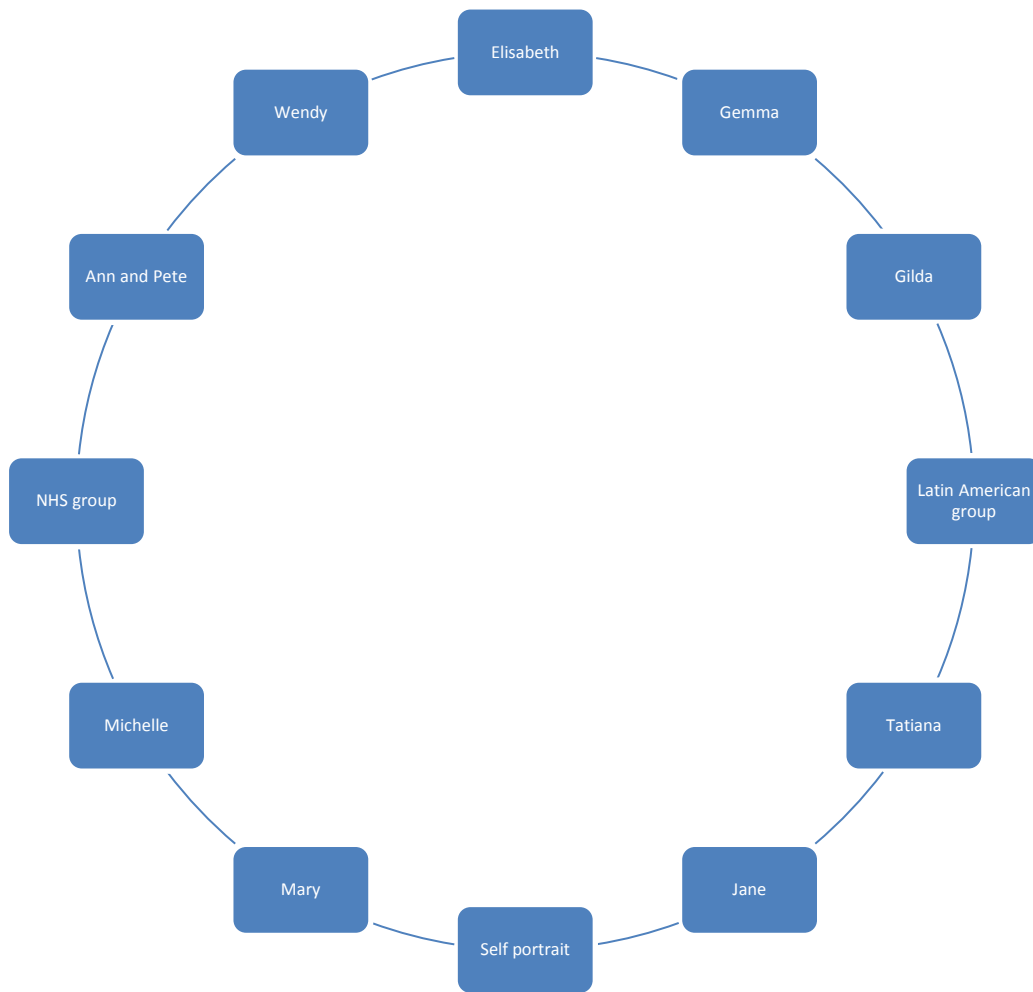


Figure 15: Map of the gallery space

## Chapter 9

### My criteria for evaluating this research

In setting out the criteria that are relevant to my research I draw on the work of Cho and Trent (2009), Denzin (1997, 2003, 2006, 2014), Denzin and Lincoln (1998a, 1998b, 1998c), Ellis (2004), Gergen (2001, 2009), Gergen and Gergen (2002), Hamera and Conquergood (2006), Lincoln (2002), Madison and Hamera (2006), Simon (2011) and Tracy (2010).

While I have chosen to paint as a way of extending my understanding of the life of the group through performance, researchers wanting to use the rich portraits approach might equally employ music, drama, spoken word, dance or other arts practices.

- My research invites the reader into a relationship. It privileges evocative and moving accounts over neutral objectivity.
- The material is presented as a visual and textual performance – an installation.
- The work displays the author's positionality. Perhaps the most important aspect of my position is that my participants are travellers on a journey with me. Above all they are not objects.

I was never seen or treated as an object.

(Lawrence-Lightfoot & Hoffmann Davis, 1997, p 4)

- The work addresses the audience and community in which it was carried out. The context is woven into the portraits; it gives them depth and locates them socially and culturally.
- The work engages or gives voice to silenced or marginalised persons (voice).
- The work explores the author's understanding before, during and after the research experience (critical subjectivity).
- The work demonstrates openness between researchers and participants (reciprocity). As I begin exploring their experiences with them, people have the opportunity to contribute to my work or to step out at any point.
- The research topic is important: the research speaks about issues that are real for families and clinicians and invite moral action.
- The research topic makes sense within the context in which it arises.
- The research values the people who participate in it and involves them in the process.
- The research is presented in an accessible way and speaks to a wide audience that includes professionals, clinicians and parents.
- The methods are clear and coherent with the research questions.
- The description is rich and detailed and incorporates colour and texture.
- The research focuses on showing the stories told by the group from within the practice rather than from outside.
- The research shows self-reflexivity and transparency in both the methods used and the exploration of the practice.
- The research experiments with new methods of making portraits.
- The research has artistic merit.
- The method used ('rich portraits') creates a way of moving beyond words in order to deepen the reader's appreciation of the topic.

- The work in the portfolio embodies the theories, values and practices of systemic practice.
- The process of developing the portraits is dialogical.

### Beneficiaries of the practice

The practice of engaging parents in non-violent resistance therapy aims to reduce conflict, violence and stress in the home. It also seeks to enable parents to reach out to children and young people who are caught in a repetitive cycle of violence and self-destruction that they seem unable to escape. Young people are often vilified in the popular media and there is little understanding or tolerance of those with underlying mental health problems. Our most recent non-violent resistance innovations are a project working with the parents of young people caught up in gang activities, and a project working with the parents of girls who are being sexually exploited.

Research (Gieniusz, 2014) into work in schools shows not only marked reduction in physical and verbal violence when non-violent resistance is introduced but also improved confidence in teaching staff and a significant reduction in teacher burnout. An intervention which can benefit the people who deliver it is a bonus in a climate of ever-increasing demands on staff and pressure on budgets. Group interventions provide good value for money and have good outcomes (Asen and Scholz, 2010).

### Beneficiaries of the research

This research addresses an audience of: researchers, clinicians, service users, community groups and voluntary sector organisations working with children and their families.

The research offers participants an opportunity to reflect on their experience of being part of the non-violent resistance group. This in itself has a therapeutic value: telling the story of the experience in the reflective space of the interview enhances self-reflexivity. The process of

interviewing as part of creating a portrait adds a further dimension. Inviting a participant to view and comment on their portrait creates yet another conversation in a reflective space. Lawrence-Lightfoot and Hoffmann Davis (1997, pp 35-36) argue that this act of seeing oneself through another's eyes is transformative; it changes one's perspective and way of seeing forever.

This expanded vision allows the subject to continue to learn from the glass that is held to experience – from the telling of one's own story through another's voice, and from the clarity that can be gained from artistic perspective.

Jane, the subject of portrait six, described the moment when other parents commented on how tentative and 'pathetic' (her word) she was when speaking to her daughter. This revelation changed for ever the way she did things.

Readers who are clinicians may be bitten by the non-violent resistance bug - the infectious enthusiasm that non-violent resistance generates in even the most weary practitioner. Nothing excites like watching someone who was angry, frightened and tearful transform themselves and become an inspiration for others.

## Positioning

Portraiture usually involves the portraitist being an outsider looking in, starting by taking an observer position - although one that is also characterised by the particular intimacy of the relationship between artist and subject. Hoffman Davis develops the method as a team approach, with the whole team agreeing protocols and ways of developing their portrait – which is usually of an institution.

However, Murakami-Ramalho et al (2008), three black doctoral students, use portraiture to explore their own experience of their developing research identities. Their portraits are created collaboratively and through



the use of personal narratives 'which provide voice, reflexivity, and context to the stories told.' p 806. They create metaphors to portray their identities: *the wanderer*, *the chameleon* and *the warrior*. They draw on the work of Ladson-Billings (2000), who argues that the 'value of storytelling in qualitative research is that it can be used to demonstrate how the same phenomenon can be told in different and multiple ways depending on the storytellers.'

Harding (2005) uses portraiture to create a single portrait which explores the identity, goals and motivation of a white teacher during a year-long exploration of how she uses her understanding of race and racial identity to inform her practice in teaching in a multiracial setting.

I cannot but begin my portrait of non-violent resistance therapy from the inside. I am one of two lead facilitators, so I cannot opt out of facilitating a group and take an external position, nor would I want to do so, or think it desirable. My knowledge is local, insider knowledge. I am part of the developing practice, but I am also changed and developed by my participation. Alongside my portraits of participants is a self-portrait. I use my self-portrait to make connections between the principles of non-violent resistance and those beliefs and practices which are important to me and which have shaped my personal and professional life.

This research into the non-violent resistance therapy group is more than the material for my doctoral thesis. The desire to explore the complexity, richness and vitality of these many-layered relationships came before any thoughts of achieving an academic qualification. The group is like an enormous living organism: rhizomatic, emotional, extraordinarily powerful, and quite magical in its ability to move people.

## Part 3

### The 'rich portrait'

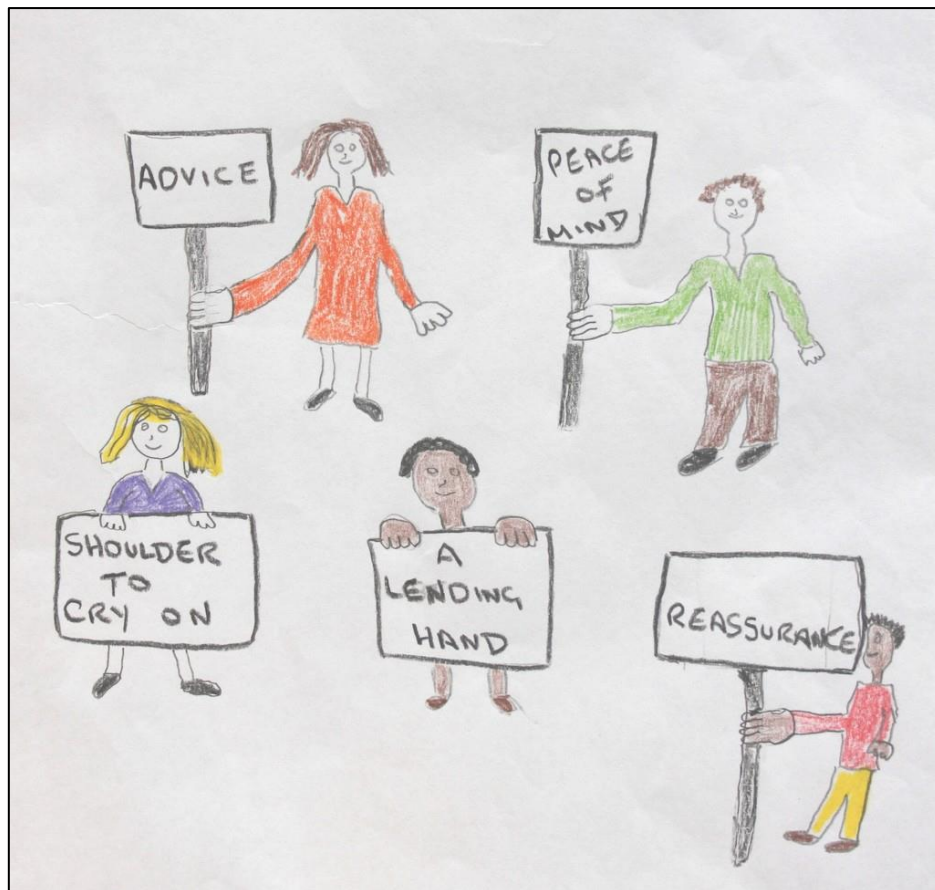


Figure 16: Parents supporting one another

## Chapter 10

### Introduction to the Rich Portrait

This chapter introduces the rich portrait of the non-violent resistance therapy programmes, and the parents and facilitators. It is a multi-layered portrait made up of individual, couple and group portraits interspersed with paintings, interviews and reflective passages. It is not a portrait of a single group but is made up of many moments in time, views from different positions brought together to deepen the dimensionality of the portrayal.

I want to introduce the people whose stories feature in the rich portrait and say a little more about the various parts of the portrait.

There are eleven narrative portraits: four individual graduate parents (Gemma, Wendy, Mary, and Jane), four facilitators (Michelle, Elisabeth, Tatiana and Gilda), a graduate parent couple (Ann and Pete) and two programmes (the Latin American programme, which has its own portrait, and the NHS programme, which is interspersed as chronological sessions between the other portraits). I end with a self-portrait.

The narrative portraits draw on material I collected or had access to. Everyone who participated did so by responding to an invitation to share their experience with me. Participants in the programme gave their written consent to being part of my research and to the filming (appendix

1). This process was reviewed by the NHS Research Ethics Committee, to whom I reported on a regular basis.

## Materials

- I had individual filmed conversations with Mary, Jane, Michelle, Tatiana and Gilda.
- I interviewed Ann and Pete together as a couple.
- Gemma, Wendy and Pete interviewed one another for a DVD which we made to show prospective parents and clinicians.
- I filmed all ten sessions of one of the NHS groups<sup>9</sup> and was also a facilitator.
- I supervised two Latin American groups and was an invited observer of several of their sessions. I participated in the evaluation meeting for the second Latin American group.
- I kept field notebooks for the Latin American groups and the NHS groups.
- During two of the NHS groups I created paintings which drew on my experience of the sessions and the resonant words generated by the team of facilitators in the post-sessions.
- I filmed and transcribed Elisabeth Heismann in conversation with Gemma, Ann and Pete for a workshop on parent participation held in Osnabrück, Germany in 2012.
- I had access to filmed interviews with Elisabeth Heismann and Haim Omer (Haim was interviewed by Wendy, Gemma, Ann and Pete) and a recording of Haim's keynote speech to the first international non-violent resistance conference in 2011.
- All contributions by children and young people come from the booklet *Non-violent resistance – rebuilding family relationships* (2013). The booklet was written by parents with the support of the

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<sup>9</sup> I use the term 'group' to refer to any specific ten-week programme and subsequent review session.

non-violent resistance therapy team and is available from the NHS Foundation Trust.

The portrait of Elisabeth is based on our close working relationship and our shared passion for non-violent resistance therapy, which have evolved over the past eight years.

Some people have chosen pseudonyms, some asked me to choose names for them, while others have used their own names (see appendix 2 for a discussion of this process).

### Introducing the participants

Wendy, Gemma, Ann, Pete and Jane are graduate parent facilitators. They have all completed the non-violent resistance therapy programme as participants and then gone on to co-facilitate future groups. Gemma's daughter made the drawings.

Mary is a graduate parent who attends the parent support group.

Michelle is a clinical psychologist and Elisabeth is a family therapist. They have both worked with me in the NHS and we have all been involved in the non-violent resistance therapy project from the outset. Elisabeth has developed specific programmes for parents of young people involved in gangs and for parents whose daughters are being sexually exploited.

Michelle has developed a programme for parents of children with neurodevelopmental and/or learning difficulties.

Tatiana is a consultant psychiatrist working with high risk adolescents. She co-facilitated one of the NHS groups.

Gilda is a family therapist who co-facilitated several of the NHS groups. She has translated the materials into Spanish and leads a community non-violent resistance therapy programme for Latin American parents delivered by a team of Spanish-speaking facilitators.

## Process

In order to make the narrative portraits I watch the films of my interviews over and over again. I transcribe the conversations. I work with the film running on one side of the computer screen and the document on the other side. I switch between the two sides every thirty seconds. When I look at the transcripts I have made, I cannot but hear the way in which the conversations happened, the feel of the moment, the atmosphere in the room. I try to capture these sensations in the portraits, and add other aspects, episodes and facets of the relationships I have with the participants. I want the portraits to be about multiple moments, not just about what we said to one another during an interview. John Shotter asks why I need to transcribe at all: how much can a written transcript say about living dialogue? But for me transcribing is a good way to get inside the conversation, listening to it in detail with all my senses. This focused listening helps me think about how I want to write as well as what I want to say. The portraits need to evoke the people they portray. They are not representations - a photograph would do that; they are rich explorations that go beneath the surface. I can usually tell when someone has painted from a photograph rather than by being in the landscape or sitting with the subject. Photography has a way of flattening things, of reducing rather than amplifying them. When that process is repeated by painting from the photograph, it seems to reduce the depth even further, to objectify the subject and deaden it. I want my portraits to pick up detail, focus on richness and texture and life. To do this they have to play with the images, zoom in to show the detail and pan back out to locate the portrait in its wider social and political context.

I do not use transcription notation. I want the portraits to be fluid and to convey meaning. Reducing them to texts which focus on the number of seconds between utterances and the detailed recording of speech overlaps does not fit with my research method. Where pauses or gaps seem to be important in relation to the meaning, I have described them in

the narrative. I want to conjure up the feeling of the moment rather than reduce it to something which has an objective kind of accuracy but has lost its vitality. This is the artistic licence and the artistry of the portraitist. A photograph can be accurate (or misleading) but only exceptional photographers such as Edward Burtynsky (<http://www.edwardburtynsky.com>) have the ability to communicate depth, complexity and scale in the way that a painter does.

I think of what I am creating more as *bricolage*.

The product of the *bricoleur's* labor is a *bricolage*, a complex, dense, reflexive, collagelike creation that represents the researcher's images, understandings, and interpretations of the world or phenomenon under analysis.

(Denzin and Lincoln 1998c, p4)

I find that I am falling back into describing this as a linear process; I am thinking 'about' the process from outside rather from 'within' it. It is immensely hard to stay inside when I was brought up in a tradition of objectivity, of looking from the outside in; perhaps I have to do both.

While I strive for a dissertation that is like a portfolio in structure, I cannot escape or break away from the consecutive numbering of the pages or the narrative structure (a series of episodes linked together over time with a common theme, [Mischler, 1991]) which is necessary in order for it to be coherent.

I immerse myself in the portraits; I read and re-read them. I encounter the people whose portraits I have created in the everyday world and I experience them differently: they are more faceted and complex because I have begun to know them in a different way and with a research lens. I show them their portraits. They seem surprised by the way in which I have been writing; they tell me they are pleased. The act of creating the

portrait changes my perspective and my relationship with my subjects. It is as if light shines on them, light which illuminates the shadows and picks up the sparkly bits. I rewrite and refine the portraits to make them stronger, richer, better. I work on the portrait as a painter does, because now it is both something that speaks about the subject and also a work of art.

Having made the portraits, I think about how to organise and display them. I return to Lawrence-Lightfoot and Hoffmann Davis and listen for the metaphors which emerge. I draw on the work of Murakami-Ramalho et al (2008) who create metaphors, *the wanderer*, *the chameleon* and *the warrior*, to name their portraits. I find a name for each of the narrative portraits; metaphors which resonate with my experiences of them as individuals and groups.

- 1 Elisabeth – *the peace-maker*
- 2 Michelle – *the challenger*
- 3 Gilda – *the anchor*
- 4 The Latin American group - *los apasionados (the passionate ones)*
- 5 Jane – *the optimist*
- 6 Wendy – *the presence*
- 7 Ann and Pete – *the champions*
- 8 Mary – *the standard bearer*
- 9 Tatiana – *the peace-bringer*
- 10 Gemma – *the mother*
- 11 Myself – *the portraitist*



## Emergent themes

Lawrence-Lightfoot and Hoffmann Davis (1997) construct their emergent themes using five modes of synthesis, convergence and contrast: repetitive refrains, resonant metaphors, institutional and cultural rituals, triangulation, and revealing patterns. I have adapted their categories to suit the practice that is at the centre of my concern. They usually start from a position of being outsiders looking in. As I am researching from within the practice and not from outside, I have chosen not to focus on institutional and cultural rituals in quite the same way as they do. I watch for the rituals which reveal or present themselves during the inquiry process. I bring a lens of felt or striking moments to the description and identification of the themes. There are many different ways in which I might look at or listen to stories and themes. In portraiture it is important to listen *for* the stories which describe how the project is special and life-changing (Lawrence-Lightfoot and Hoffmann Davis, 1997). Those moments when something special is touched upon are *felt* moments, '*Ah ha!*' moments, *striking* moments.

I talk to a new facilitator who has just had her first experience of the non-violent resistance therapy group. She is a clinician whose main job is as a family therapist in a pressured team working with highly complex, risky and disturbed adolescents. She looks at me in surprise and wonder and says,

It was just so moving. I was so moved by it.

I use this lens of felt, embodied moments as a compass to lead me through the stories in the portraits. I read and re-read the portraits, I look at the paintings, I remember the sounds and lilt of the voices in the Spanish-speaking groups.

The way in which the facilitators care about the participants is an enactment, a direct modelling of new ways of going on, new ways of

doing relationships. Anne Hedvig Vedeler (2011) calls this 'resonance-ability'.

## The power of the group

During the last 30 years, studies have shown the growing benefits of group psychotherapy in a number of areas of life challenges. Through groups, individuals find a forum of peer support, gaining strength as they share their feelings and experiences with others who are facing the same obstacles as themselves. Some gain strength in seeing the resourcefulness of those in the same situation, while others renew their feelings of self-worth through assisting others.

(American Group Psychotherapy Association)

Is what we are doing really different, or would any group run by skilled clinicians make a difference? What is the difference made by non-violent resistance therapy that is greater than the difference made by other parenting interventions? How do I pay attention to the 'feeling' that the difference *is* greater?

In September 2011 the short-list is announced for the inaugural London Children Safeguarding Awards, which are supported by the Social Care Institute for Excellence; our group is on the list. We are visited by a panel of young people who want to meet families involved in the group. Elisabeth and I and two of our graduate parents make a presentation to a panel of childcare experts in London. In December we are announced as joint winners.

The judges drew particular attention to the levels of engagement achieved by the project, commenting: 'The panel saw this as a very positive, cost effective project with strong outcomes for families, and were particularly impressed with the level of engagement with fathers. Our panel of young

assessors were moved by the enthusiasm of the service users they met, who felt the project had saved their families - the young people were particularly impressed that these parents were so engaged in the process.'

([www.oxleas.nhs.uk](http://www.oxleas.nhs.uk))

The judges were *moved* by hearing parents and children speak about their experiences. There was a shift in their relationship with the families and their understanding of the changes that had taken place which was embodied rather than languaged. There was a *felt* response to the stories, which the judges were witnesses to.

This is a profound level of evidence; something that is beyond language.

The Marlborough Model of Mentalisation-Based Multi Family Group Therapy (Marlborough), which is now used in a number of schools, is described by teachers as 'magical' and 'literally just changes children's lives'. This is a schools-based approach for under fourteens which promotes family relationships and delivers positive outcomes. There is clearly a similar experience of participants bonding in a group and things changing for them all.

## Resonances

Anne Hedvig Vedeler (2011, p 87) describes the qualities necessary for what she names 'resonance-ability', what might also be called good listening, although Anne Hedvig's resonance is listening taken to another level.

I will further address how I became interested in exploring how, when the listeners (sic) abstains from assessing or judging, and instead manages to listen with tenderness and openness, with emotional involvement, from a space of unknowing, loss of control, loss of ideas and concepts, she

becomes open for being touched by the other. I have termed this way of listening, listening with compassion. It is about entering into the world of the others, allowing the others to express themselves in their own terms, and respect their unique and emerging otherness.

Here Anne Hedvig is giving a name and a description to the way in which we try to model listening to one another in the group.

### A reflection on my resonance-ability

It is the last Thursday in the month. Our graduate parent support group meets this evening and I am staffing the reception desk. As parents arrive and I greet them, I am struck by the quality of the relationship I have with each of them. Something is different in the relationship. I realise that I don't feel quite the same way with people who have not been part of a group with me. There is something about the development of this shared experience which is now much more noticeable.

I examine the feeling because this is another way to help me explore and portray the special nature of what happens between us. I notice that the timbre of my voice is warmer, I sound more actively enthusiastic. As I examine the feelings in more detail, I realise that they inhabit my body, I feel inspired and invigorated by them. I take a moment for each person, to engage with them on a personal as well as a professional level. How did this happen?

I think about the simple act of making someone a hot drink and offering them food. This is not something we do in any other context at work, although I might fetch someone a glass of water if they were very upset. Does this change the rules which frame the relationship? When we prepare for the group we think about each of the parents and what might

have been going on for them during the week. Creating a warm and welcoming environment is very important to the successful engagement of parents, especially at the beginning. We all work hard to show them that they are special, that we look forward to them coming, that we care about them.

The effect of this warmth is illustrated by Jane's description:

I think when I missed week three because we were in court, and Steve came home and said, 'Oh, everyone sends you their love, and says they're thinking of you' and I thought, 'God, I really missed it' and I think that was probably the point that I realised I really missed being there and that people cared.

This episode was the turning point for Jane, who told me that she had spent the first three weeks just feeling angry with the facilitators and angry about being there.

The following stories and themes emerge quite early on.

- People begin to show their love and care in situations in which love had lost its meaning through lack of enactment.
- People begin to believe that things can be different.
- Non-violent resistance seems to become something to believe in which opens up a new space for parents and brings them together.

### Creating rich stories

One of the keys to making the group interaction therapeutic is always to be on the look-out for change, no matter how small, which can then be nurtured and amplified.

Wendy noticed that her son had begun to put his plate on the draining board instead of just eating his meal (which had been left out for him) and leaving the plate on the table. Over the weeks this changed to him

putting the plate in the sink, and then one day he washed it up (not very well). These changes happened slowly and it would have been easy not to notice them but to focus on the fact that he never thanked his mother for the meal, and didn't wash up, or when he did wash up it was not very well done, nor did he put the plate away. Wendy was encouraged to see these changes as steps forward at a time when things were very bleak. This helped her stay positive and to feel warmer about her son and in turn this encouraged the beginning of the rebuilding of their relationship.

Once you identify a change, you should draw attention to it, ask about the detail and develop it. It is like looking for the tiny end of a thread which can be teased out and developed into a story (Roberts, 1994; White, 1991) that can then be thickened (Geertz, 1973). This is how therapists work to create richer stories when people have a repertoire of thin, impoverished and problem-saturated accounts of their lives (Lang and McAdam, 1995).

What I have described is a standard systemic narrative technique. What is interesting is that when we use it in our group, the parents begin to develop the skill and ability themselves, and enthusiastically start doing it for one another. This is an example of the sort of second-order learning (Schön, 1983) that happens. When we had a focus on 'Ah ha!' moments, we began to notice that more of them happened and that parents were noticing them too. This amplified the effect of the 'Ah ha!' moments; the act of noticing created more moments, or a greater sensitivity to them, which in turn was mirrored in an enhanced sensitivity in the parents to one another's experience.

## Resonant words

After each session I asked facilitators to give me words which described how the session felt for them. These words generated by the facilitators in the post-sessions as reflections on the tone of the evening are resonances

with the experience of being part of the session and appear under each painting.

## Process

Having written the narrative portraits I look at them again in a different way. I listen for the stories that they tell, the patterning that emerges, the metaphors and rituals.

I take these reflections as another lens to refine the portraits through.

I redraw and rework the portraits and create more of a narrative around them. I name the portraits.

I intersperse the new pared-down portraits with the paintings I made as reflections and resonances of the group process.

Between the portraits I introduce interlude / commentary sections. These act as bridges between the portraits, weaving them together into a whole.

In this way I present a sandwiching of our different experiences, layers stacked together, sliced and then arranged sequentially: the different layers of context that exist together at any one time.

This textual sandwiching of resonance, thought and response invites an exploration of the different levels of meaning, feeling and action which are continually at play in groups.

I realise that the reader needs to understand more about how the programme works and the process of enabling parents to acquire the skills of non-violent resistance, so I add a brief outline of each of the eleven sessions as a context for connecting with the movements parents and facilitators make over the duration of the programme.

Each individual portrait has the following parts to it and is numbered from one to eleven in order to mirror the eleven sequential sessions in the group process:

- 1 the topics for that session of the group
- 2 the painting I made after that session, with the resonant words the facilitators generated
- 3 a reflection on the conversation I had while making the painting
- 4 the narrative portrait
- 5 a bridging piece to the next portrait

I call the whole piece (the eleven individual portraits) a rich portrait (singular) because, although it is made up of separate sections, each of which relates to one person/couple/group, these are aspects or multiple views of the non-violent resistance therapy programme.

### Key concepts in non-violent resistance therapy

The following concepts are referred to by participants in the portrait and are explained here for the benefit of the reader.

- Parental presence: A child's or young person's sense that their parent is there for them, that the parent is a safe, solid and dependable person who can be relied upon. A child's sense that their parent knows their whereabouts and cares what they are doing. The child knows what their parent's values are and what they believe about right and wrong.
- Rebuilding the relationship: When relationships have become characterised by violence and coercion, there are very few opportunities for people to relate more positively. Parents feel so negative that they can hardly bear to look at their child. In an attempt to regain control parents have sometimes removed everything from the child (including the bedroom door), but still nothing changes and the child remains angry, hostile and confrontational. The relationship needs to be rebuilt.
- De-escalation: Parents learn to identify when things are escalating and to step out of the pattern. Two types of escalation tend to



occur: one where the escalation ends in violence and another where the parent gives in. Parents often do both.

- **Baskets:** Parents prioritise unwanted behaviours by placing them in three differently sized baskets. The large basket contains the largest number of behaviours, and is to be ignored; the medium-sized basket is for behaviours to negotiate over; and the small basket is for the one or two behaviours that the parent is going to resist actively. The small basket must not contain more than two things.
- **Announcement:** Parents carefully construct an announcement that they will make to their child explaining that they are going to resist the named small-basket behaviour, that they love their child and they want things to be better. They commit to a non-violent stance (verbal and physical). There are no threats or warnings. The announcement is short and specific. Parents practise making the announcement until it embodies and resonates with both their love for their child and their stance of resistance.
- **Sit-in:** If the child repeats one of the small-basket behaviours (for example, punching a sibling), parents will plan a sit-in. They will enter the child's bedroom and sit down, announcing, in a calm and quiet way, that they are going to wait there until the child can suggest a way of changing things. They offer to assist the child in thinking about ways forward. Then they sit quietly for up to an hour (depending on the age/ability of the child) to demonstrate their love and their commitment to working towards change in a peaceful way.
- **Reconciliation gestures:** Parents make regular gestures of love for their child. These are small gifts (items of food, repairs to things that have been broken, special messages) which are made irrespective of how the child has behaved and without expecting anything in return. Reconciliation gestures are intended to help the

parent enact feelings of warmth and love. If the gesture is spurned, parents do not react.

- Helping siblings and others: Parents commit to supporting siblings and others who have been the victims of their child's violence.
- Looking after yourself: Parents make time for themselves and for activities that they enjoy.
- Supporters: Parents identify individuals who can support them and their child; they are specific about how they want these people to help them resist the small-basket behaviours.
- 'Strike while the iron is cold': Wait until things are calm and then act without escalating the situation. Don't act in the heat of the moment.
- Active resistance: Parents choose to resist attempts to engage them in escalation. They resist the temptation to have the last word.
- Withdrawal of services: Parents no longer respond to unreasonable demands: internet access throughout the night, bribing the child to attend school, unlimited taxi and laundry services.
- Breaking the silence: Telling others about the child's behaviour.
- Graduate parents: Parents who have completed the programme.

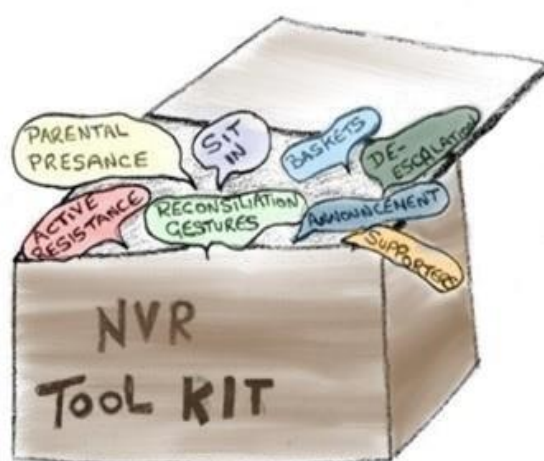


Figure 17: Non-violent resistance tool kit

## Chapter 11

### The rich portrait



Figure 18: Etching 2 (hard ground and *chine-collé*)

## Session 1

### Topic: Escalation, de-escalation and active resistance

In this first session parents are just beginning to get to know one another.

We introduce them to the idea of de-escalation by showing them some different examples of how escalation happens (live role-plays and videos) and invite them to reflect on the connections they make with their own situations.

In small groups we ask for more detail of what happens, and deconstruct the episodes described, looking for instances in which parents had the chance to do something differently or managed to step away from the prevailing pattern.

We speak about active resistance. This is not ignoring the child's behaviour or passively walking away; it is asking parents to make a positive decision to act in a different way or choose not to respond to provocation.

At this stage parents are hugely comforted to find they are not alone in the dilemmas and challenges they face. The experience of being able to tell their personal story to other parents who are neither shocked nor judgemental is immensely supportive. As the weeks progress, and parents begin to trust one another, more stories and details emerge.

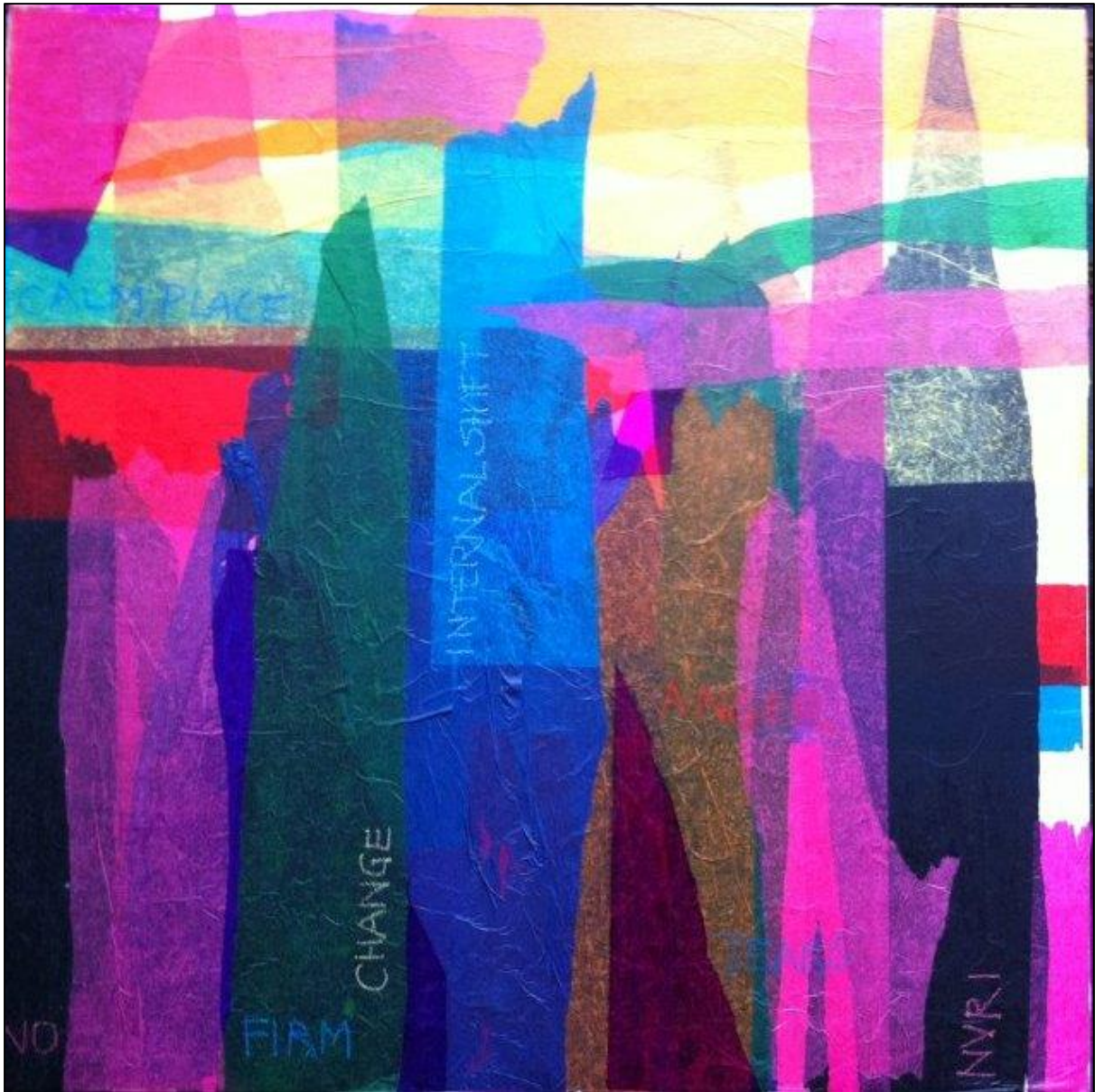
We ask parents to notice how they feel physically when things begin to escalate at home. What do they notice in their bodies? This is the beginning of helping people become more self-aware, more connected to their own embodied responses, so that they can identify when things are beginning to get heated and learn to reflect-in-action (Schön, 1983)

rather than being caught up in the emotion of the moment and acting in a way they later regret.

The session ends with a brief mindfulness exercise which introduces parents to ways in which they can get in touch with their bodies and begin to relax.

Picture 1

Figure 19: Picture 1



The resonant words are:

- ❖ internal shift
- ❖ calm place
- ❖ no
- ❖ firm
- ❖ tears
- ❖ anger
- ❖ change



## Making picture 1

I am in conversation with my partner, Gaby Charing, as I make the picture.

I begin by explaining that I want to get a feel for what happened during the evening but I don't know how easy it is going to be. I put some pink on the right-hand side of the canvas.

'I think of pink as quite a calming colour. I want to get some texture into it too. One of the words that came out in the post-session was calm place.'

I use a much darker pink/red.

'I'm not sure how any of this will fit with what we've done this evening. One of the other words that was quite key was tears - a lot of people were very upset. I'm playing with the word text-ure. Building layers of texture up but also incorporating text into it. I want it to be quite fractured. The colour pulls together. There was a lot of emotion this evening but already shifts were happening.'

I create a dark purple area

'I think I can do things with the tissue paper that might not be possible with other materials, to build up layers of texture. You get very different experiences, very different emotional engagement from parents, particularly where you have couples. So I was trying to get some way of feeling what it's like when people begin to intersect. I was thinking that the colours would probably emerge in the doing of it. I don't want to think too much about it. I certainly don't want to make it too pretty.'

I make a large black jagged shape, then a big area of thicker, scrunched-up texture.

'I wanted in the texture to show some of the complexity of bringing people together. They each bring with them their own stories, their own experiences, and they're meeting other parents who also have their own stories. A number of our parents have got mental health difficulties; they've got histories of abuse, domestic violence, and so on. So all of these things are interacting together.

'I'm beginning to get this mixture of layers where I can't tell whether a green is a green or if it's a green overlaid with a yellow or if it's a yellow overlaid with a blue and I think that's what happens when you get groups together. You get this amazing interaction where people learn from one another in a way that you could not possibly create if you were working with them individually. They benefit so much from helping one another. I also want to show the interaction between the facilitators.'

I place a dark sliver within an existing pink area then add more pink on the edge.

'One of the things that happened in the group this evening was that there were some internal shifts, so I want to show something shifting from one place to another.'

I create a blue shape replicating an existing one but in another slightly different plane, then carefully place a final piece of torn pink over the dark area on the right. I stand back and look at the finished piece.

'I rather like the way it's come out. I wanted to show something about the real multi-layeredness of what we do. Because we're not just working with people, we're working with their families, their children, their memories, and all of that comes together and connects together, in a really complex way.'

When the painting is dry I write the words on it with oil pastels.



## Narrative portrait 1 – Elisabeth: the peacemaker

We first meet when I start working in CAMHS in 2004.

Elisabeth, German, blonde, Buddhist, like a dog with a bone, persistent, gentle, kind, generous, always connecting parents to their love for their child. Elisabeth is a teacher who travelled to Zimbabwe to live and work.

Daring, resourceful, indefatigable, a breaker of rules; or maybe rules just do not seem particularly relevant. I am inspired by Elisabeth's tenacity and absolute ability to carry things forward and make them happen. She sometimes seems completely without fear or apprehension.

Elisabeth is deeply spiritual. We attend a friend's wedding in Patna, capital of the Indian state of Bihar. Indian friends are horrified that I am going to Bihar. 'Why on earth are you going there? It's lawless, full of bandits!', one of them says to me. Our friend's family drive us round in vehicles with armed security guards in the back. We have lunch with the Maharajah in his palace with lilac-painted stucco walls. Elisabeth is a Buddhist. She takes me and my partner to the wonderful brick ruins of the fifth-century university at Nalanda. We spend the night in Bodh Gaya, where the Buddha is said to have found enlightenment in the shade of the Bodhi tree. A descendant of the original tree still grows in the grounds of the main temple. There are pilgrims everywhere. It is an extraordinarily peaceful experience. The nearby town of Gaya, so devastatingly portrayed by Aravind Adiga (2008) in his novel *The White Tiger*, seems uniformly monochrome. The poverty is grinding. My overwhelming impression is that everything and everyone in Gaya is covered with a film of greyish dust in contrast to the bright colours and the gleaming temples of Bodh Gaya. Our Indian friends warn us not to walk about in Bodh Gaya after dark, but Elisabeth strides forth and I follow gingerly, hesitatingly; everything is fine.

Non-violent resistance therapy has its roots in this world. Several of the people I meet who work in non-violent resistance are Buddhist, others meditate regularly; they don't advertise the fact but I come to know it gradually and by chance during conversations. I am not religious in any way but I enjoy the quiet and the resonating ring of the singing bowl which Elisabeth brings when she leads a loving kindness meditation on our family therapy team day. The words seem very apt.

May I be happy  
May I be well  
May I be safe from harm  
May I be filled with loving kindness

May you be happy  
May you be well  
May you be safe from harm  
May you be filled with loving kindness

The loving-kindness meditation begins with the self, then focuses on people we already feel warm towards, then strangers, then people we have negative or hostile feelings about. This quiet focusing on wishing oneself and others well and the repetitive refrain is peaceful, restorative and healing.

May we be happy  
May we be well  
May we be safe from harm  
May we be filled with loving kindness

We often end the final session of the programme with the loving-kindness exercise. We do not use it as a meditation but as a form of mindfulness

and relaxation. Parents need to practise being kind to themselves and to their children. They need moments of space in their busy lives, as do we.

Elisabeth has a profound wish that parents feel better, happier about their lives and that they love their children and themselves. She believes that parents need to experience the changes in themselves in an embodied way; developing the ability to listen carefully to how their bodies communicate, and learning again what peace feels like.

## Commentary – Belief

As I write this portrait of Elisabeth, I reflect on the spiritual thread that runs through the programme, which a number of my conversational partners will allude to in their portraits. I had not been aware before in quite this way how our work reaches back into religion and belief. Moral philosophy, ethics and the search for ways of defining goodness (Foot, 2003) make more connections for me than religion. As a member of the LGBTQ<sup>10</sup> community, I have a somewhat jaundiced view of religion, coloured most recently by the experience of witnessing speakers against the Marriage (Same Sex Couples) Bill drawing on religion as a reason for their opposition (Hansard, 2.21 pm 5/2/13).

The Church of England and the Catholic Church object to gay marriage.

Ian McKellen delivered the Chancellor's Lecture at the University of Ulster on 3 February 2013. He observed (BBC):

The Heavens have not fallen in – though some blame Tsunami and earthquakes, even 9/11, on God's response to advances in gay freedom.

Practising as a counsellor in an LGBT mental health service, I witnessed at first hand the distress religious intolerance can cause people for whom belief is an important part of their lives.

So I am resistant to the idea that non-violent resistance therapy is based in religion. There is a religious basis for non-violence but this is *passive* non-violence as opposed to non-violent resistance or non-violent *struggle* (Sharp, 1973). Non-violent resistance as described in the portraits clearly does have an affinity with spirituality and the enactment of morality and

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<sup>10</sup> LGBT – lesbian, gay, bisexual, trans (gender), queer.

goodness. There is something fundamental in the principle that the way that we act prefigures who we become and what we communicate about how to act (Pearce, 1989). When we change how we act we also change who we want to become. The act of becoming is an aesthetic and ethical one. It is strongly connected to morality and moral logic (Oliver, 1992, 1996; Pearce, 1989, 2007). The practice of non-violent resistance therapy brings together the domains of explanation and production under the domain of aesthetics (Lang, Little and Cronen, 1990), with an added spiritual dimension. This principle is eloquently described by Michelle in the next portrait.

## Session 2

### Topic: Parental presence in the home

In this second session we help parents to map out where they feel they have parental presence in the home and where they need to develop it more. We do this in a very practical way.

We ask parents to draw the floor plan (Coppersmith, 1980) of their home and mark which rooms they 'feel' their parental presence in; where they feel less welcome; and any parts which are 'no go' areas for them. Each parent describes what they have drawn to their small group. We ask questions to add detail and complexity to the account.

This is a revealing activity (although it appears to be quite playful), which shows up difficulties in the home that may never have been spoken about before. Parents often realise for the first time just how curtailed their parental presence has become. There may be rooms they are never allowed into; some reveal that they only feel safe when they are locked in their own bedroom. Conversely, they may discover that they are more present than they imagined and have more influence in their children's lives than they feared.

Some parents realise with new clarity just how much their other children have been affected by the child who is the focus for the intervention. Some siblings are neither allowed into the living room nor allowed to watch the family television.

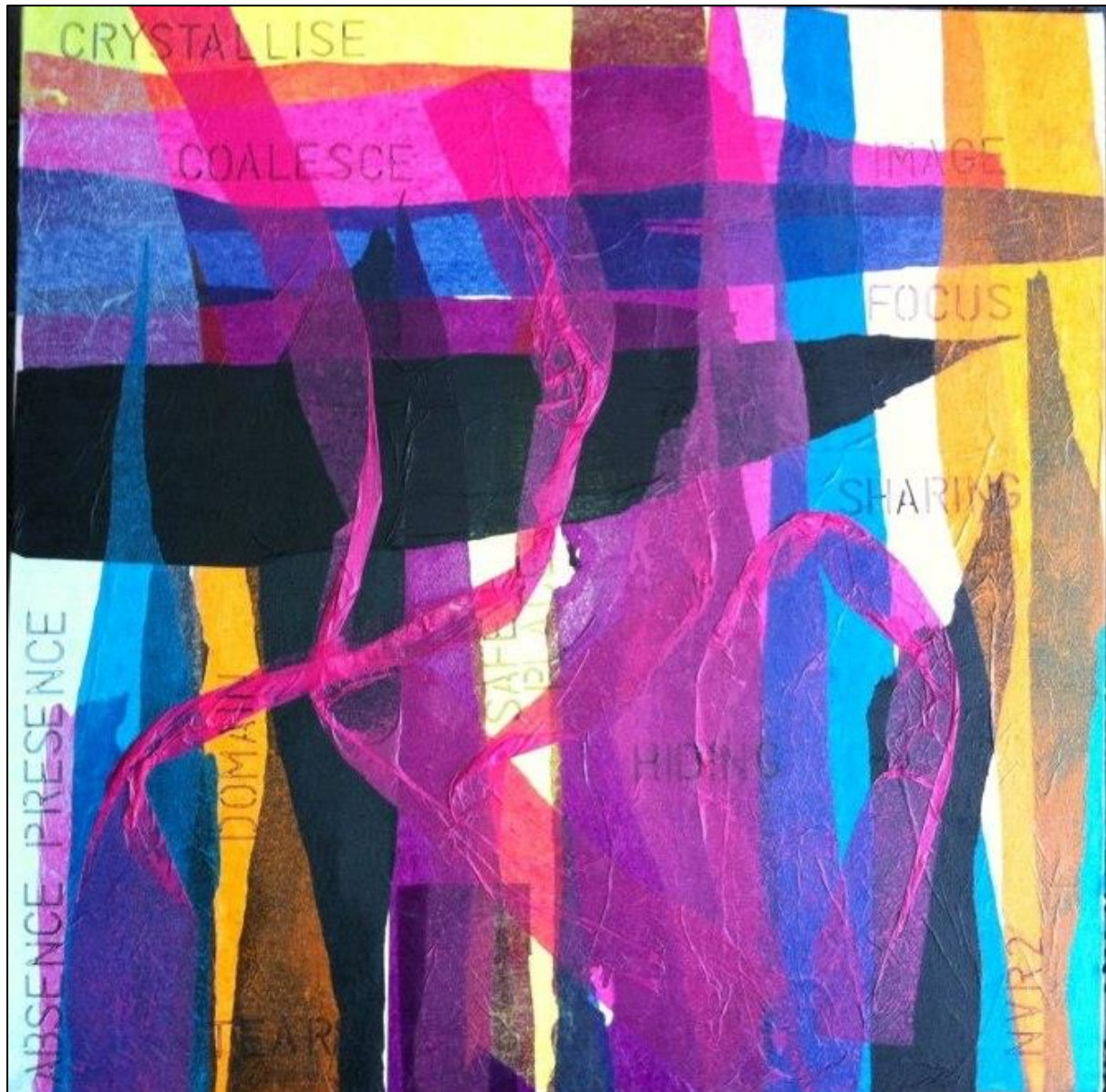
This exercise allows the facilitators to develop a fledgling narrative of agency and help parents to make plans to extend their parental presence and to identify others whom they can ask for support.

Parents are encouraged to feel the sense of parental presence in their bodies: we ask them how they feel as they enter the room: do they walk through the centre or creep round the walls?

The mindfulness exercise allows space for parents to relax, become aware of their breathing and connect with their physical bodies.

Picture 2

Figure 20: picture 2



The resonant words are:

- ❖ group forming
- ❖ tears
- ❖ domain
- ❖ focus
- ❖ coalesce
- ❖ image
- ❖ crystallise
- ❖ sharing
- ❖ absence
- ❖ presence
- ❖ hiding
- ❖ safe place



## Making picture 2

I am in conversation with a friend and neighbour, Kathy West, as I make the second picture.

She asks me about how I choose the colours. I speak about the resonance between emotion, colour, light, intensity and space.

'I also want to use the shapes to describe the intensity and edginess of the feel of the evening. The tissue paper is quite fragile and this fits well with the fragility (Ricoeur in Kearney, 1996) of some of the participants as well as enabling gaps to open up in the picture plane.'

Kathy's questions lead me to reflect that it is more difficult for me to talk about the process this time; the first time seemed easier. She asks how this affects how I feel about myself. I seem unable to connect with this question and revert back to describing the group that evening. On reflection, I am interested in how difficult it is for me to talk about what I am doing. When I invited people to have a conversation with me about the process, I imagined that this would add another layer to the performance, but it seems to get in the way of me making the picture.

Kathy asks me whether I am going to show the pictures to the parents. I tell her that I am thinking of having an exhibition, and maybe showing parts of the films as well, and asking people about their reflections on this as an experience.

'I am trying to put more curves in this time because I want to show some more recursiveness; the way in which things fold back on each other. I think that's part of what we are doing in helping people to look at the patterns that occur in their lives.'

Kathy thinks that it makes a more complex picture.

'What we do with people is quite complex, although it can look deceptively simple. The shifts people make are extraordinarily profound and there is something about the interaction of parents together which really makes a big difference.'

We talk more about the differences between this week and last week.

'I think the words generated this week are more definite. Parents are beginning to grapple with the difficulties they've got in a different way. Things seem to shift and begin to form a picture, which didn't happen the first week. The group has come together very fast. When people start thinking about some of their difficulties, all sorts of painful things begin to come up.'

The picture I've made seems quite dark and twisted. The shapes are jagged and torn; there are some lighter places but they seem on the edges. The *safe place* seems hard to reach and far away.

Figure 21: Picture 2 – detail



## Narrative portrait 2 – Michelle: the challenger

Michelle and I are meeting in that time between the Christmas and New Year holidays when you just do not know whether things are going to be peaceful and quiet, because families are enjoying the break, or fraught with upset and chaos. Mental health services for adults are used to crises and admissions at this time of the year; the expectations and hype of Christmas sadly contrast with frustration, disappointment and loneliness, often fuelled by alcohol. Things are more unpredictable for children. Even those families who felt they could not manage without an appointment may forget to turn up. I always hope this is because they have better things to do together than coming to see me, but I know this is not true of all of them.

Michelle and I first met eight years ago. She is a clinical psychologist. Most of our psychologists are quite young, but, like me, Michelle is older. We both chose clinical training later in our careers and I think our longer life experience shows in our ability to weather the impact of some of the distressing stories we hear.

Michelle's passion is working with trauma, and there is plenty of opportunity for that. She is independent, committed and highly skilled. My feeling is that she may not be an easy person to manage; she is too free-spirited and passionate. She makes things happen, and I suspect she finds ways to evade rules and restrictions that may frustrate her managers.

We both become involved in non-violent resistance therapy at the beginning. In addition, Michelle has now developed her own non-violent resistance programme for parents whose children have learning disabilities and/or neurodevelopmental disorders such as autism.

As we enter the room it seems quite strange to meet in this rather formal way in front of the camera, and it makes me a bit nervous. It is not the camera that makes me nervous, but the responsibility of making the best use of the time we have. I want the conversation to evolve and I feel really excited about this rare opportunity to spend time with Michelle. We have been concentrating on doing non-violent resistance for a long time, with not much space to reflect or even to meet, as we have been involved in different groups and are based in different community centres. Michelle sits down and composes herself. She is quiet, calm and contained.

I explain about the threads of my research and a little about portraiture in order to create a context for our conversation. I then ask Michelle about striking moments for her. She pauses and folds her hands in her lap.

If I think back to my involvement with non-violent resistance, what does stand out is the group process; there is something about parents coming together with other parents which is profoundly therapeutic.

What I like about non-violent resistance is the balance between education and experiential, and I like watching parents go through the process of resisting, resisting and then the penny dropping. So it's at different times and in different ways that the penny drops. For us as well. I've had the experience of suddenly revisiting something when someone says something differently, and I suddenly go, 'My goodness!'. So it's a deepening process.

Michelle's voice is very deliberate and precise. It is one of the things I appreciate when I work with her. She is precise (so people know exactly what she wants them to do), she is gentle and thoughtful (so they feel held), but she is insistent and persuasive (so they are willing to push the boundaries of what feels comfortable and take risks in a safe setting).

Michelle can get anyone to role play! I marvel at this particular ability, because I find role play embarrassing. I hate anything that seems like acting. Although I am always happy to play the therapist, I just cannot become a stropky teenager or a frustrated mother. Role play can reposition parents and enable them to get an insight into their child's emotions. It opens up a space for exploration, beyond the wall of violence and aggression that looms in the forefront of their relationships and obscures everything else. Michelle is so quietly confident in her invitations to parents that they are able to surmount their reluctance; they often say that they learn more from this experience than any other (as in the portraits of Jane, and Ann and Pete).

I am transfixed watching Michelle. She is absolutely connected and committed to the person she is working with. Yes, she can be insistent, but it is always done in a respectful way. She wants the best for her clients, believes they can do it, and is willing to push them to get them there.

In the group I have asked facilitators to watch and listen out for times when something new, different or moving happens. I ask Michelle about these moments.

For me one of the 'Ah ha!' moments in the group, and you can see it, is when a graduate parent says, 'Well it *was* tough, you need to persist, this is what it was like for me, and now it works', and everybody is just transfixed by that.

It's like everybody's attention focuses, and so that balance of us clinicians (Michelle holds her right hand up), helping and guiding and supporting with parents (she holds up her left hand and places it precisely level with her right), who are then taking on, so they are actually the new authority. So I just had a little 'Ah ha!' moment myself! It's the graduate

parents and the parents themselves who are taking on the new authority. They're in a different position and they're working *with* us not deferring to us as the knowledgeable, as the authority, but it's a joint authority, it's a working together.

This is one of those striking moments when the air seems to thicken and the words slow down because they are significant. Michelle is touching on something very special about our way of working. At the beginning we were telling parents about non-violent resistance and trying to persuade them to try it. We no longer do this. We run the programme but it is the graduate parents who have the stronger voices. When graduate parents speak people really listen. Their voices are always more authentic and compelling than ours, because they are speaking from their own experience and knowledge.

I know that the first and second sessions are critical, that there have been times when we could be challenged by parents who say, 'Well, I'm letting them get away with it', or 'Are you telling me I'm doing something wrong?', and it's very, very (Michelle is thinking carefully about the right way of saying this) emotionally evocative for the parents. And if they can get past that, if even one parent leads the way by being confrontational, all the others move with them. It seems to be an 'Ah ha!' moment for them, when they get that difference.

We both remember a particular group when three mothers, all sitting together, were really aggressive and challenging towards us. One of them said, 'What do you mean, you're trying to tell us that we've got to change? We haven't got the problem!'

Michelle remembers:

It was the first or second session, and the ability to hold that and to have the group listening, if I remember correctly those parents didn't stay the distance, but still they will have gotten something from it and the others got something huge from it.

Moments of challenge and difficulty offer quite special opportunities for parents to witness how Michelle manages conflict. She is not defensive; she remains curious and open to communicating and finding a way forward. This can be powerful for parents, as a demonstration of a different way of doing things.

We debate a bit about the right words to use. The moments often feel quite spiritual, because what happens seems both moving and magical. It is as if the movement that the group makes is greater than the sum of the changes made by the individuals. The parents' belief in non-violent resistance becomes much stronger and wider than its application to their children's behaviour.

There's something about accessing the greater good in a person and the greater good in the family relationship and the greater good in the group. The expectation that we can do better. That the parents *can* do better. That we know it's difficult to get there but we know they can. And they discover they can.

Michelle has high expectations of people and this helps them achieve. She is there with them, encouraging, supporting, modelling, leading.

My mind leaps to my experience of listening to the Latin American non-violent resistance group and I want to tell Michelle about this.

One of the things I notice when I listen to the non-violent resistance group in Spanish is that the facilitators embody a

sense of hope and containment in the way they use their voices. It's like they communicate a belief that things can be better, and can change, and that people can do that.

This connects for Michelle and we are off, constructing ideas together!

If you look at the non-verbals you're going to see it, people's faces do reflect it. There *is* a feeling of hope. In the first groups, we were blundering, it made sense to us but we weren't sure it would work. Now we've done it enough times that we've got this real confidence, and I think everybody who's coming after us has the advantage of knowing that it really does work.

I realise just how much I regret Michelle not being in our big parent group. She has such energy and commitment. As we continue to speak, we begin to coordinate with one another, starting and finishing one another's sentences!

M When I talk about the groups and doing the non-violent resistance, I feel quite emotional, it's been a humbling experience, it's been an amazing experience.

L I suppose it's one of the things that's beginning to emerge, in talking with people and looking at non-violent resistance, is that the group is part of what makes it work

M that there is an emotional resonance

L and a connectedness of a different quality

M between the parents and the facilitators

L and the concepts of non-violent resistance

M Yes, they're profound in their simplicity



L There's something about it almost being, I was going to use the word religious and I don't really mean that

M I know what you mean but it is actually what religion often is, it's guiding principles on how to live. And so these are guiding principles from a psychological, psychotherapeutic perspective.

So it feels humbling, it's feels like it's definitely got a life and it's got a core of truth. And non-violent resistance itself is an 'Ah ha!' moment. Oh, I don't have to do this, there *is* an alternative way.

L There's a very strong thread of respect for people which I think gets modelled in the group process. People can see that however difficult some of the parents are, that doesn't mean that we treat them with any less respect. I don't ever lose that feeling of respect for people however difficult they've been. I think that's important for people who get into escalation to see that it's possible to not get caught into that pattern. It's helpful to have a number of facilitators because you support one another in not getting caught into that.

There is something very special which happens when we generate ideas together, which is a bit like what happens when parents come together in a group. Michelle is passionate about the difference that being in a group makes.

I have used non-violent resistance with individual clients, but the biggest change happens in groups. There is something about the group itself that moves clients forward. And it can be very small groups of three or four parents. There's something about them talking to each other that makes a huge difference in a way that working with individual parents

doesn't. The couple of extra exercises which we now use, about resisting, that also takes it to a different level, so it's a very alive, evolving organic process.

Michelle is alluding to the new experiential exercises which embody escalation, giving-in, and active resistance. Parents experience how physically unbalanced they feel when the person they are struggling with suddenly gives in. They discover that when you are struggling to overcome someone you cannot look them in the eye; all sense of relationship is subsumed in the effort of trying to win. They learn how it *feels* to do things in a new way.

Graduate parents want to be involved, their involvement helps us, it is invaluable to new parents and it embeds non-violent resistance principles more deeply in their own lives. At the same time, their involvement means that they are constantly speaking about painful personal experiences. This can open up wounds that are just beginning to heal and are still raw underneath; we need to be careful that we don't exploit their enthusiasm. Michelle is a passionate believer in graduate parents, but always aware of the personal risks they take by sharing their stories at a time when they are still vulnerable.

I think about the countless times I have watched Michelle at work: listening with her whole body, paying attention, and gently intervening. Asking questions to clarify and then suggesting new ways forward. Getting parents to craft their announcements so that they embody their love for their child. Insisting that they practise and hone their delivery until the words that they have generated and the way in which they say them slide over one another and finally click together like a scene swimming into sharp focus and coming alive. Michelle never lets up; her attention to detail and nuance is what makes the difference. The parents matter to her and they sense that she means business; she won't let them get away with not trying hard enough or giving up.

## Commentary - Witnessing

The movement between the second and the third session is striking. There is often a lot of challenge and this can be a useful part of the process and life of the group. One parent described how she spent the first few sessions thinking to herself, 'What is this rubbish?'. The next few sessions she just felt confused, but no longer so angry. Then, in the final sessions, things improved and the programme began to make sense. She experienced the facilitators as constant and accepting.

Here I am reminded of more psychodynamic understandings of groupwork and I want to be clear that I am not talking about unconscious processes. I don't find these ideas particularly helpful because they position the therapist as knowing, in a one-up position in relation to the client. My psychoanalytic colleagues call clients 'patients'. Their language constructs a medical and authoritarian version of events in which participants are treated rather than being collaborators in something which we make and achieve together. Systemic psychotherapists have not been immune to taking this position: the shift from first order cybernetics (positioning the therapist as an observer to, and outside, the system) to second order cybernetics (the therapist being part of the system) was a significant advance towards the collaborative stance that is now taken by many therapists (Anderson and Goolishian, 1988; Bateson, 1973; Boscolo et al, 1987; Hoffman, 1985, 1992; Von Foerster, 1991; Von Glasersfeld, 1991).

When Anderson and Goolishian (1992, p 27) describe the move towards a more hermeneutic and interpretive approach to therapy (*the client is the expert*) they pay attention to the artistry which the therapist needs to employ to open up linguistic spaces for new meanings to emerge. They describe the therapist as a 'participant-observer and a participant-facilitator of the therapeutic conversation.'

As facilitators in the non-violent resistance programme, we need to have this artistry, but we also come with knowledge about what works. It is not that we know nothing or that we have no expertise in changing patterns of relating in families, but we need to use our artistry to work collaboratively with participants in order for new patterns to emerge. This is both similar and different to Eia Asen (2012 p 7) who, in conversation with Alan Cooklin, says:

It makes you think our expertise should be primarily to provide the context in which the families can discover and utilise their own resources and make these available to other families.

Our expertise now is **not** knowing what's best for families

I agree with Asen's first point but disagree with the second. Although we do not take an expert position, we do want to change the patterns that perpetuate violence which families have been unable to find a way out of themselves, and which do not resolve naturally or quickly enough to prevent relationships being seriously damaged.

Michelle says something important when she reminds us that the process is tough. Things do not change overnight. What makes a difference for participants is the experience of hearing graduate parents say that they kept at it and things changed.

The power of having graduate parents who can bear witness and bring their personal stories and experiences of struggle is immeasurable. New parents can connect with graduate parents in a way that they can never connect with clinicians.

As Pete says:

We've found repeatedly that after those interview days people have come up to us and said that if they hadn't spoken to us they might not have carried on with the course.

Haim Omer describes how parents can notice their increased parental presence as embodied changes: firstly as a different feeling of strength in the body, secondly as a sense of inhabiting increased physical space, and thirdly as being able to take more time over things, a slowing down and expansion of time. These three aspects of embodied change are important for parents to become aware of, because they provide a direct way of becoming attuned to parental presence. As parents become more attuned to their own parental presence they are more able to recognise change in themselves and others. Witnessing someone else's increased attunement paves the way for one's own.

Vygotsky (1978) describes this interesting aspect of collaborative learning as the zone of proximal development (ZPD). When people learn together the space (zone) becomes one in which learning is optimised and extended. Vygotsky also highlights the importance of the More Knowledgeable Other (MKO) in this process: the parent who leads the way by being able to describe their own experience for others to visualise and learn from. Vygotsky highlights the role that helpers play in learning. People learn more quickly and achieve more if someone else is there with them providing guidance and encouragement. Graduate parents perform this role in the group programme. Parents whose relationships have already begun to improve perform this role for those who are still struggling – they embody hope for the rest of the group. Each time a parent tells a story of struggle and movement they enrich and thicken the story of the group as a place where change happens.

## Session 3

### Topic: The baskets - prioritising difficulties

In this third session we use a set of three differently sized baskets to help parents prioritise the behaviours they are going to focus on. When they have done this, we introduce a fourth basket for their child's special qualities.

The basket exercise is a very practical and tangible way of reducing escalation by limiting the number of behaviours that parents are going to address directly with their child. Parents write down all the behaviours that they want to tackle on slips of paper and then put each piece of paper into one of the three baskets. The large basket is for behaviours which parents are not going to respond to in any way; the middle basket is for behaviours which they are prepared to negotiate over; and the small basket is for the behaviours they are going to focus on. The large basket must have most of the slips of paper, the medium basket can have a few, and the small basket can have no more than two. This process of prioritising is extremely valuable for parents, particularly if two parents disagree on what is most important. Couples cannot move forward until they have come to a shared understanding.

The small basket should contain the most destructive behaviours: violence, self-harm, running away, drug taking.

When parents have sorted out their slips of paper into the three baskets, they explain their choices to their small group, and the others may ask questions or query the selection. Sometimes a parent chooses to put something into the small basket which doesn't make sense to the rest of the small group (homework) while leaving violence (being thrown down

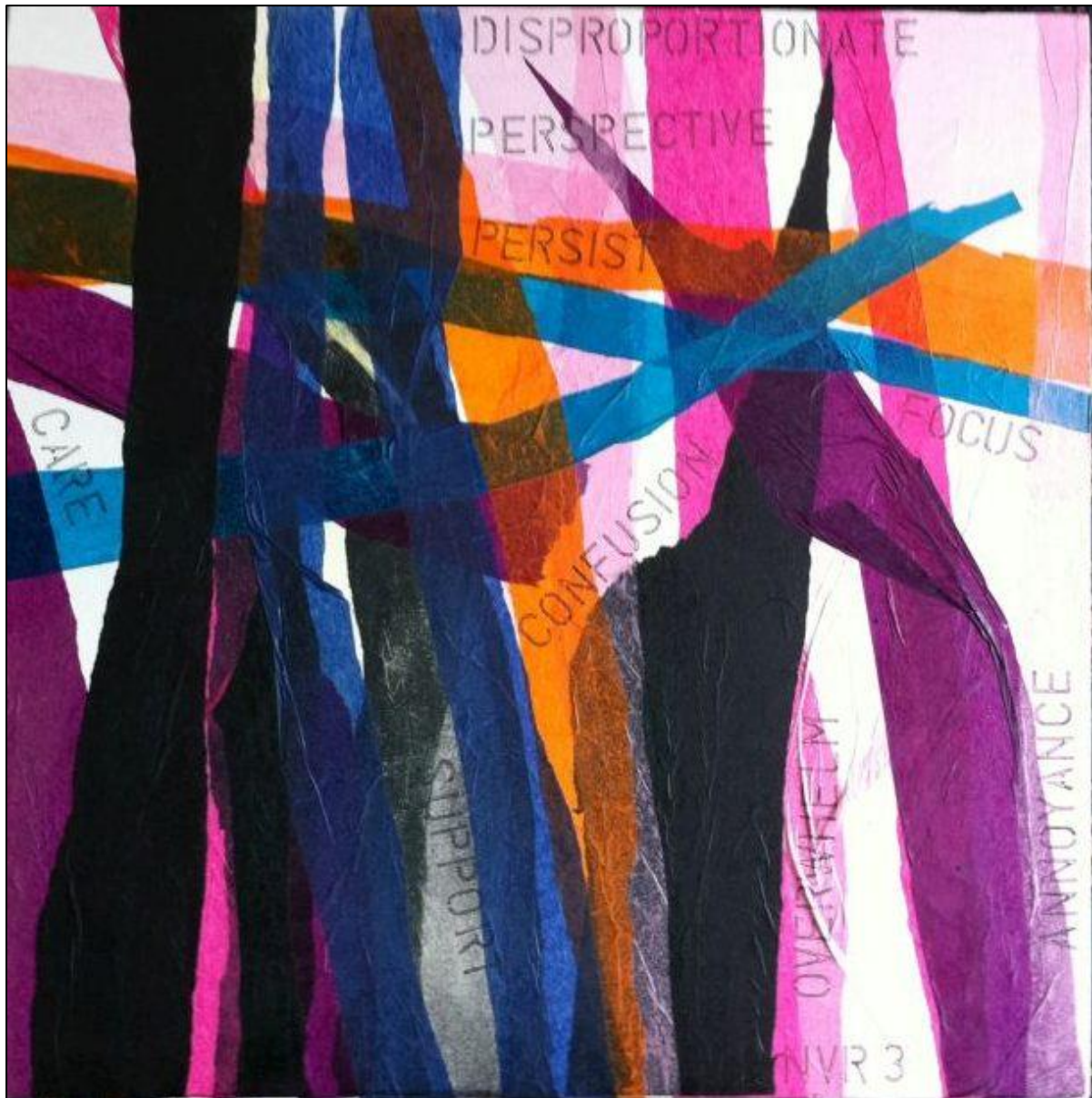
the stairs) in the medium basket. Other parents have more moral authority than facilitators to question this.

The final basket is for those qualities that parents appreciate about in child. This fourth basket is a recent addition and complements the others.

Parents end with a mindfulness exercise which reminds them of the ways in which life flows like a river; they can choose to step out and in at will.

Picture 3

Figure 22: Picture 3



The resonant words are:

- ❖ persist
- ❖ annoyance
- ❖ confusion
- ❖ overwhelm
- ❖ support
- ❖ care
- ❖ focus
- ❖ disproportionate
- ❖ perspective



### Making picture 3

I am in conversation with my partner, Gaby Charing, as I make this picture.

She asks me why I am beginning with a strong section of black on the left. I reply that the group are at the point now where some people are doing well and things are lightening up for them, but for other people things look quite bleak and dark. Parents are beginning to work, and you can already see differences in what they have been able to achieve. Some have worse problems than others, and have had them longer, and that is more difficult. We are asking them to give up existing ways of doing things and do something different; that is not an easy thing for people to do.

I work on a big, pale pink, scrunched-up area on the right because I want to get some texture into the piece; I chose tissue paper because I can play about with it in this way.

Gaby asks whether I have an idea what the finished piece will look like. The answer is no. I am trying to show how people are connecting together, what it feels like emotionally, and to get some movement in, because I didn't with the first one. At the beginning everybody was new; they didn't know one another, they were scared and didn't really know what to expect. I want warmer colours on the right-hand side because there are people who are doing a lot of looking after other people in the group. The words 'care' and 'support' evoke this.

I place a big piece of purple two thirds of the way up, coming in from the left. There is something about how people sometimes get across one another, or the ideas are difficult, and people are trying to find a way of changing things but they are not very certain and are really quite anxious.

What is happening at the moment is that you begin to get some structure, but also a bit of jaggedness. Things happen for parents and they get upset. They are less upset now about what is going on at home, because some of that has reduced dramatically; this means there is more space now for talking about some of the other things that are upsetting: things that have happened in the past which have contributed to the current situation, such as substance misuse, domestic violence, and abuse.

Some parents have been absent from their children's lives in ways they feel very bad about; or they haven't protected them adequately. What they are doing now is grappling with that, and repairing it, which is a difficult thing to do and can make them very vulnerable. People try their best to leave situations which are violent, but they can put themselves and their children at risk by doing so.

What I had in mind when making this piece was to portray something that was quite intense and conflicted but also hopeful and supportive.

It is different from the first two. It has got an awful lot of black in the foreground. You put it on first and then cover it up, but it foregrounds itself.

The picture is predominantly dark and jagged. The shapes are powerful and monumental and get across one another. The overall effect is quite confusing. There's a lot going on, but some lighter clearer areas are beginning to emerge.

### Narrative portrait 3 – Gilda: the anchor

It is a Friday morning in July and the weather is beautiful as I walk along the road next to the park carrying my camera and tripod. I am going to interview Gilda about her Latin American non-violent resistance group. I feel a sense of expectation and excitement building, as well as slight anxiety about whether I will do justice to Gilda's work. I relish the warmth of the sun after so much recent rain. The dust has been washed from the air and it feels clean; the grass is dazzlingly green in the clear light.

It is not long after nine o'clock. The early dog walkers have already been and gone and the next ones have yet to arrive. This area of South London has changed a lot. I have lived here for almost twenty-five years and the transformation is unbelievable. Cafés and trendy shops have sprung up to service the influx of young professionals with double buggies who seem to spend their time blocking the pavements or swapping baby stories over expensive cups of coffee. Where there were once laundrettes and ironmongers, there are now cookware shops and boutiques for children's clothes. The park has been renovated and replanted. The pond in the formal rose garden has been cleared of beer cans and there is an outdoor gym. But the area remains quite mixed. We are less than a mile from where riots erupted in Peckham, bringing groups of hooded youths out onto the streets looting and burning while others circled menacingly on BMX bikes talking on their Blackberries. Just up the road in the other direction the traffic-light control box still has a bullet hole in it. A young man was murdered in the aftermath of a gang-related funeral at the cemetery which backs onto our garden. Helicopters circled all morning, their rotor blades slicing the air in a fluttering, thumping beat, followed by a flurry of sirens and police cars.

Gilda's home is a ground floor flat in a house which faces the park. The flat is long and thin. At the back is a light sunny room which opens onto a

small garden. Just outside the door a wooden table and chairs sit under a pergola which supports a wonderful, leafy grape vine. The grapes are hanging down in small green bunches and Gilda is bemoaning the fact that we have had so much rain this year that she doesn't think the fruit will be as good as usual. Gilda brings bunches of small dark purple grapes to share with us at work during the season and I curb my disappointment as I remember the explosion of sweetness in my mouth.

The door to the garden is open and we decide to have our conversation here, in the sunny room, while there is a respite from the rain that has turned a country beset by drought into one deluged by floods. While I set up my camera Gilda makes me a drink. She brings me a little tray with a cloth on it. There is a teapot for one, a cup, a tiny milk jug and a doughnut on a little plate. I am sure her clients get this sort of welcome.

Meditative music plays quietly in the background; the air is fresh and alive with birdsong. A jug of honeysuckle sits on the bookcase next to the open door. This is the room where Gilda sees clients. I sit on the small sofa and Gilda takes the comfy chair by the door, which is her position when she is the therapist. She radiates confidence, peace and reassurance.

We start talking about how to keep parents attending groups. We both know that engagement is key when people feel desperate for help but ashamed to come forward.

Every time that someone was coming to the group I would pay them special attention and all the facilitators did. That first contact is so important. And every time they would come they felt they'd been waited for. They felt like they were being appreciated. They felt like their presence was very important. And they felt like they contributed as well.

Gilda's commitment to her community is evident in her work. It really matters to her what happens to Latin Americans in London, particularly the women. As with most Latin Americans I have met, a strong political vein runs through everything she does.

Only one Latin American organisation offers counselling. They work in conjunction with the women's refuge. So when the domestic violence worker interviewed clients who were in a difficult place she immediately mentioned, 'Look, you may be interested in this group, you can also take your children and you can have family therapy as well as this parenting workshop.' So those women who came also got family therapy. Some of them brought their partners, others brought their children and the way that we organised the therapy helped because we were in a community centre, so immediately it felt a bit more familiar.

As Gilda starts to talk about the children and the rooms and the play facilities, she becomes really animated and waves her hands about.

The kids just loved it! [Gilda is *so* excited!] Because they could jump in all these toys, you can *imagine*, and we worked a little bit harder to bring them into the conversation, to make a kind of joint conversation as well. [Her voice changes and becomes softer; there is a slight catch in it]. But sometimes it was a blessing they were not hearing what we were talking about; so one therapist could take charge with the couple or the mother and the other could move to a different room for a short while with the kids.

Gilda seems solid, grounded, comfortable in her chair. Her posture exudes calmness. I ask her about those moments in which she felt moved.

To my surprise she begins with the facilitators.

When I was selecting the people to join me in the group I had in my mind that I would be working with other therapists. And a teacher who does special education came. And the work that she did in the group, it was absolutely outstanding! [Gilda's eyes sparkle and she speaks more powerfully]. The way that she engaged and the way that she embraced the whole idea. She was passionate about it but very focussed. I felt very touched by seeing others really want to be involved: their understanding, commitment and dedication. I felt touched because they are all from the same community and it was not just their own learning but it was their desire to engage the parents. So it was their moment of generosity and dedication that really touched me.

I think of my own experience and the long journey that it takes to make a project and group like this happen. It is the people that make the difference and I do not make enough time to appreciate my colleagues.

When the parents started coming, what moved me was to see their despair [she pauses], for several reasons. One because I can say I *know* the Latin American community. I have worked for so many years in different areas with them. So for me it is no surprise to know and to hear where they come from.

Gilda catches herself, pauses then shakes her head.

No, I'm wrong when I say I'm not surprised. What I really want to say is that I'm always surprised. Although I know where they come from, somehow I'm always surprised. So many different stresses because of leaving family behind, then trying to start a different life here, having to face violence, then trying to support their children who do not feel they completely belong here, and there is this breakdown in

the family line, grandparents, cousins, the poverty some mothers have to face. So all those different stresses plus when there is violence because of drugs, because of the behaviour, because of many different reasons, to see them trying to save their family, trying to stay together, or breaking down. So that was the point that most of the families who joined this group were at. And through the programme, to see how their faces start to change. At the beginning they came all grey, no smiles, just tears. Not really wanting to talk much, not really wanting to share much. And slowly, half way through, their faces started to change. So when I saw their faces change then I felt like they started to really believe in the project. In the beginning they came as if, 'Well nothing's worked. We're not going to lose anything if we try one thing more.' But then when they realised, the ideas start sinking into them, or anchoring, and perhaps, I think that Haim Omer said something very true in terms of attachment theory, I think non-violent resistance really works well with the Latin American, or migrant communities, because of the issues of separation. Not just with the couple but with the whole of the rest of the family. And breaking from their own culture and trying to adopt a different one, it creates a lot of different situations. And working within a framework that was embracing, which was encouraging, which could help them to set boundaries, to be giving but to also be firm, it made sense.

When they said, 'I think I can do it' [Gilda says the words very deliberately, slowly and with conviction], that was one of those moments. And when I saw them say, 'We are in a different position now, Gilda. Actually we are not thinking of separating now.' That couple, who came to see how they were

going to break up, at the end they said, 'We have decided we are going to stay together.' And they sang a song to the group to thank us all; it brought tears to our eyes.

The support and commitment within the group spreads out into the wider community like ripples in a pond.

It is heart-breaking, some of the situations. I remember there was this heavily pregnant mother with her eight-year-old son, the son would kick her and the husband was really cruel. She nearly lost her baby. The group was able to organise a small support network for her because she didn't have anyone: no sister, no parents, no cousins. The husband was an Englishman. So she was very isolated. She hardly knew the neighbours who constantly would knock on her door because of the screaming and shouting. And the son has repeated some of that behaviour, that shouting and kicking the mother. But with the support of the group, and with this small network, she was able to start her life again. She was so heavily pregnant it was difficult for her to travel, and she was far away from the centre where we were having our sessions, but she continued until the very end.

We sit quietly for a minute. I think of the young woman's struggle and I feel ashamed that someone from my country caused such pain and distress to someone from Gilda's country. I remember a moment in the group that touched me and ask Gilda if she remembers the mother who thought everyone was an actor.

Oh yes, her story was so dramatic. When she came for the first session and everyone was introducing themselves and saying where they were at and she was listening to one after



the other, and she looked at me and said, 'I think that you have arranged all these for me so that I won't feel so bad.'

We laugh together remembering the session. Gilda speaks about what groups mean to her.

The experience of being in a group is something different. It's more human. You hear what the facilitator is saying and you learn from it, you let it stay in your body and to sink into your mind. But also you learn from the other people's experiences, and sometimes when you hear others say about what happened in their relationship something occurs to you that you haven't thought about. So I think it's in multiple ways, it's a meta kind of conversation that is created in each group. And I suppose that feeling of hope, it may well be because you are not outside of that circle, you are *within* that circle.

But not everyone is able to maintain the changes they have made during the group.

Not all of the families that came were a success story. I know at least one who was in a very difficult situation, she had a very violent daughter who had broken the younger sister's leg and constantly hit her mother. During the project she was able to stay firm and to change her own behaviour, to move from the victim situation, and feeling like she could own her own life. And she stayed well, but I know that she is back at one of the centres asking for help and they have rung to see whether we are going to run again.

I am going to run a new group because I've seen the changes. It is different when you work with a group of families. I like that dynamic because I think the families, when they come in a larger group, their own isolation or

shame, it breaks down. You as a therapist can share some story by saying, 'You're not the only one', but that phrase it becomes like they see. Not just they hear but they actually see it.

She says that it is difficult to get funding, but she will find a way to do so whatever happens. And I believe her. She is superbly resourceful and totally committed to making a difference for her community. She has translated our programme into Spanish and created a DVD with role plays using Spanish actors. All of this was done on a shoestring.

We have been sitting talking for a while now. I want to know if there is anything Gilda wants to add. She says

One of the main points for me is this anchoring factor. They felt attached to something very important which was they were Latin Americans, that they were parents who have similar experiences, and that they could talk about similar themes, not just family problems but the music that they are missing, or the food, or things that were familiar for them.

So the group itself is an anchor in the way that we want parents to be for their children.

Then Gilda cuts to the heart of it.

Some of them needed to get more courage, because in the end courage is needed to change their behaviour.

Gilda has shown that she can challenge authority (back home where that meant risking arrest), make things happen because it is the right thing to do, act with passion and focus, see things through to the end. She describes herself as 'a believer in non-violent resistance.'

Gilda is an anchor for Latin American families struggling with violence and far away from home. They feel held in mind and cared about; this shows in their faces and the warmth with which they greet one another and the facilitators.

## Commentary - Commitment

I am struck by how Gilda speaks about the commitment of the facilitators. Facilitating the group programme is hard work; it requires constant and careful attention to how things are unfolding in the room. It is both exhilarating and exhausting. For Gilda to make her group happen she needed to believe it *could* happen and also do all the practical work that would carry the project through to fruition. She translated all the materials into Spanish, she filmed seven new role plays with Latin American actors, she lobbied for funding, worked with voluntary agencies to promote the programme, recruited volunteer facilitators, recruited families, found a venue, provided a crèche – and none of this happened easily. This is a description of real commitment to an idea. Without the drive to carry things forward, programmes like non-violent resistance cannot happen. The people make the group happen, not the theory; but the theory inspires, because people are rewarded by seeing how the lives of families they work with are transformed.

Commitment is a really important part of what makes the programme work; commitment from facilitators, participants and their supporters. I think of the connection that Gilda makes between immigrants and Haim's metaphor of the anchor. Gilda really does act as an anchor for her community. I rename her portrait 'the anchor'.

The anchor links non-violent resistance with the theory of attachment (Bowlby, 1978). The anchor holds strong because it has several arms or anchoring points. These points represent the network of supporters who help the parent by standing with her to create a safety net for the child. The anchor chain enables the parent to keep connected to the child. If the waters are stormy then the anchor chain can be shortened and more points can be engaged. When things calm down again then the chain is lighter and looser. But the parent always retains an attitude of vigilant

care; they watch for signs of a storm outside and prepare to act if necessary. Haim sees this as a more active way of thinking about attachment and promoting a proactive parenting style for those children who are vulnerable and at risk.

Parents have to be committed to active resistance.

## Session 4

### Topic: Supporters and support systems

In this fourth session parents work on identifying networks of support and specific people who can support them around the behaviours they have placed in their small baskets. It is important for them to begin to break the silence about what has been happening at home, because secrecy maintains the cycle of power and control which some parents are caught up in.

Parents try to identify a specific supporter and think in detail how they want this person to help: what they need the person to do and how they will explain the principles of non-violent resistance so that escalation doesn't happen.

Some parents will not be able to identify anyone at this stage of the programme; many parents are extremely isolated, and thinking about support serves to emphasise their aloneness. This is where other group members begin to create an emerging support network in the room for isolated parents.

It can take time for isolated parents to be able to experience the support which is developing around them and create a new story of no longer being alone. Facilitators take a gentle approach and spend time nurturing the new narrative.

If non-violent resistance is going to work, parents need support; they cannot and should not be alone with their difficulties.

Parents are invited to visualise a time when they felt alone. Then the facilitator invites them to imagine someone who is there supporting them. Parents identify where someone would be physically if they were going to

support them (behind, beside them, at an angle) and what they would do (just be there, have a hand on their shoulder, hold their hand). This leaves parents with an embodied experience of feeling supported which they can draw on at difficult times.

The mindfulness exercise introduces the idea of the enemy within, voices and experiences that undermine a parent's resolve to do things differently.

Picture 4

Figure 23: Picture 4



The resonant words are:

- ❖ people are helping
- ❖ passion
- ❖ commitment
- ❖ inner resource
- ❖ tragic
- ❖ fiercely independent
- ❖ hope
- ❖ despair
- ❖ fun
- ❖ recursivity



## Making picture 4

At the beginning of making picture 4 there is an accident. The camera falls to the ground and lands on the lens. It stops working and the footage is lost. There is nothing to be done, no other camera to use.

As I make the picture I stop from time to time to take a still photograph, using my mobile phone.

The piece I make is lighter than the first three; it seems more structured. When it is dry and I add the words, I do not put in, 'Dog chasing its own tail', because it is too long, but I try to reflect something similar with the tissue paper. I scrunch and twist it.

I realise afterwards that I have got too many 't's in the word commitment. I shall just have to live with it! When you are stencilling or lettering it is hard to keep track of the spelling.

I like the word recursivity (the spell checker does not): it resonates with the constant movement that happens between people as they speak, listen, have inner thoughts and inner talks, then outer talks again - the hermeneutic circle.

When people ask me if I have a favourite picture, I always choose this one. It seems to be the beginning of change, of things opening up, things slotting into place, a bit more space to breathe.

## Narrative portrait 4 – The Latin American group: *los apasionados* (the passionate ones)

I am in Peckham for Gilda's Latin American non-violent resistance group. Peckham is one of the most ethnically diverse places in the UK. Just over twenty-five per cent of residents are White British. Black African and Black Caribbean people make up more than fifty per cent of the population and those numbers are boosted by the influx of people visiting Rye Lane, the main shopping street. It is a colourful, bustling place where shoppers crowd the pavements. Stalls are piled high with green plantains, glossy aubergines and tiny, fiery scotch bonnet peppers. Huge shiny pumpkins are split in two, exposing the creamy orange flesh and seeds. There are bolts of African cloth, fridges full of red snapper and flying fish, hairdressers and innumerable nail salons where masked nail technicians bend over tables while their clients chat; as I pass the doorways I can smell the acetone in the air. There are preachers, smartly dressed men in suits, declaiming to passers-by while others hand out tracts. Flashing lights advertise mobile phone unlocking and cheap calls to Africa, South America and Asia. Damilola Taylor was murdered not far from here by members of the Younger Peckham Boys gang, minutes after CCTV caught him skipping through the pedestrian area in front of the award-winning public library. When I travel I am often the only white person on the bus.

The community centre where the group meets is set back from Rye Lane in an area of streets which has recently become quite gentrified. But the community centre serves people who have been here much longer.

I am providing supervision for the facilitators (Gilda, Angela, Maria and Diana). When I arrive at the centre Gilda lets me in and shows me into the church hall. She points out a small room off the hall in which several children are sitting drawing quietly with a volunteer helper. Gilda explains

that last week the parents brought their children with them, because they had no one to leave them with. She hadn't expected this and had to hastily arrange a crèche.

We walk across the hall into another room. The place smells as if it gets a lot of use; not unpleasant but slightly stale and metallic. I want to be unobtrusive so I sit quietly at the side of the room and start writing down some of my thoughts about what I can see around me.

There are three mothers and one father sitting talking with a facilitator. The room we are sitting in has big letters arranged on the wood-panelled partition wall. They spell 'mothers and toddlers art gallery'. Everyone is speaking in Spanish but my knowledge of non-violent resistance and the few Spanish words that I catch (*'amigos'*, *'casa'*) help me guess what they are discussing. One of the mothers gesticulates and imitates the way her child speaks to her. They are exploring the physical way in which they are each present in their homes: who occupies which rooms, who has the remote control, where do parents feel most present. Soon we are joined by another group who have been working in the room next door; now there are seven parents, two men and five women. The facilitators are handing round refreshments.

One of the mothers says something and everyone laughs. Someone translates for me. The woman says that last week she did not think the group was real. She thought all the other people had been hired just to enable her to talk about her problem with her daughter: she thought she was the only one in this situation. I feel extraordinarily moved. There is a real sense of relief in the room and others speak. There are tears. Everyone looks very emotional. Another woman speaks; the words catch in her throat.

A music group has started up in on the other side of the partition; I can hear children's voices and some childish playing on drums and piano. But

the music does not intrude; somehow what is happening in this room is more than competition for the sounds from next door.

The group finishes and we say goodbye to the parents. We move to the smaller room to try to get away from the drumming, which has increased in intensity. There is an enormous clap of thunder and at the exact same time a massive bolt of lightning illuminates the room. Then there is torrential rain; the storm must be right above us. We look at one another and grin; it has even drowned out the drumming for a moment!

We talk about how the group has gone. I hear more about the stories of the families. One of the mothers showed Angela some photos on her phone of bruising her husband had caused. Angela says she feels like exploding with anger and realises that this isn't helpful to the group. We talk more about how to manage difficult emotions and about risk and some of the situations which have given rise to concerns about safeguarding the children. We discuss strategies and actions.

During the week I think about the session. If the group had not still been going on when I arrived, I would not have had the opportunity to be an observer. I would not have known what it was like to listen and not understand. Because I could not understand what the words meant, I found I was listening to how they were spoken. I could hear tonal differences, colour, warmth and rhythm. I was struck by the musical quality of the voices.

The weather is no better next time, even though it is meant to be summer. It is pouring with rain outside and I am late because the rain affects the traffic and everything is jammed. When I arrive a woman with an umbrella is waiting outside; I show her where the doorbell is and we ring it. Gilda lets us in and I follow her into the bigger room where half of the group are working. There are three women and one man. Gilda talks quietly to one of the women. It is fascinating how Gilda's voice modulates

and fits with the woman's voice. Then a man arrives. He is the partner of one of the women and I met them both last week. Now there are two facilitators again. One of the facilitators has a pair of scissors. Now I know what they are doing! I thought they might be working on writing their announcements, but I was wrong. They are doing the baskets exercise.

Gilda's voice goes up and down, lilting. Is it the particular way in which Latin American Spanish sounds? My hairdresser is from Spain and I am used to sitting in the salon surrounded by Spanish-speaking people, but their Spanish does not sound musical like this; it sounds quieter than when I run groups in English. When the conversation is in English I don't have the luxury of listening to cadence, the rise and fall of the voices, because I am too caught up in the meaning. I am not caught up in it here because I cannot understand.

The parents are reading out the strips of paper with the behaviours written on them; they have to decide what they are going to focus on. The couple I do not know are speaking – or at least the mother is; the man is completely silent and his face looks very still. No, he has just joined in the conversation. They sound so sad. The conversation is muted. Gilda asks questions gently and the mother replies. The other facilitator, Maria, joins the conversation. I wonder what difference it makes that I am there.

They have finished the task. Gilda sounds more definite, but she moves on to question the woman who is on her own. How gentle her voice is. Now it is the turn of the couple I met last week. They tell the others about the behaviours they have written down. Maria asks more about the detail; she is clarifying the behaviours. They place the slips in envelopes, three different sizes to represent the three baskets. Gilda speaks again. Her voice is supportive and containing. The tone encourages the parents. It is warm, light, gentle, and yet also seems to draw the parents out. Her voice is leading, a leader of the group, lighting the way forward: what lies

ahead of the parents feels achievable; she engenders confidence. Her voice joins with the parents' voices and lends hope and strength.

One of the mothers is talking about Chile. I wonder if they are thinking about how they would be supported back home. Gilda speaks about family; she must be talking about how parents can develop circles of supporters. They are all a long way from home. Perhaps the sadness is to do with their lack of access to natural support systems in their extended families.

Gilda is standing now; perhaps it is time to fetch the other group. One of the women is telling a story. She is animated. It is the same woman who last time said she thought that this group was not real, that all the other parents were actors, there to encourage her to tell her story.

Gilda comes over to me. They started late today because the room was in a mess and they had to rearrange the furniture. Gilda tells me that the stony-faced man is blind. I was worrying that I was facing him and he would be wondering what I was looking at. Everyone knows who I am; they have all been smiling at me. Gilda reminds me that the church singing will be starting soon next door!

The other group join us. Gilda passes some chocolate round. Is she asking them to do the homework for next week? She says the word *mapa*: does this mean map? I think they must be thinking about the supporters' map.

The music starts next door. It sounds echoey, and electronic drums start beating; they must have a drum machine. It gets louder; we shall have to speak up to get heard over this! Maria is checking that they have everyone's mobile number. They are going to send text messages reminding people to come to the group.

There is singing from next door and someone is using a microphone. It is five to eight, they are going to start in earnest very soon. Actually it is quite tuneful, *a capella* singing: 'For he is worthy, worthy, for he is good'. Now there is an organ too: 'For he is worthy, worthy, for he is good'. I do not think the group can compete. They are sticking at it. Everyone is going to have a turn. Now they are laughing in the face of, 'For he is worthy'. It goes quiet. The man who is blind is speaking; he is smiling. There is another outbreak of *a capella* singing and then the children from the crèche are crowding at the door looking in. They knock on the glass panel and make faces.

Gilda tells me that she has been very touched by something. She says she feels tearful and indeed her eyes are full of tears. A parent said that in making this space for them Gilda had given them back hope. I tell Gilda that I have just been writing about how the sound and cadence of her voice embody and convey hope. This is a profound moment; this is an important part of what makes the group work. Gilda really uses her voice to contain people without constraining them.

Everyone brings food to share and eat together on the last day. It is after all a Latin American group and food is very important! There are lots of photos. There is a group photo of the children, who stand together proudly in a row. Everyone is beaming.

A year later I am with the second group. The group is somewhat different, because most of these families have a social worker because of safeguarding concerns. It is the final session and the parents are getting very excited; everyone is talking a lot. Gilda leans over and tells me that they are talking about how they can get a campaign running to make sure another course happens!

It is a special feeling being in a group like this. I can see and feel the engagement and the group working together like a living organism. There

is a thread joining the participants together. Everyone is listening and giving advice. When one mother seems to fall behind in her understanding, the voices of the others gently reach out and carry her back into the group. Later I discover that she has early onset dementia.

In the closing few minutes everyone shuts their eyes and is quiet. They are remembering back to how they felt when they first came to the group. They talk about their feelings then and how they feel now. The room is silent and then everyone breaks into conversation and laughter. Afterwards Gilda asks them to write a message to someone who might be starting the next group. What would help them to feel better or more hopeful at the beginning?

Gilda organises a graduation event with food and speeches. All the parents are presented with certificates. Parents bring their families and friends, and funders come to hear about the project.

People start to stand up and speak about how their lives have changed – this is unplanned and unexpected. A mother stands up, her eyes filled with tears; she says that as a mother she only did what her parents had done to her. If she had known that there was another way of being a parent she would not have had her first child taken away from her. A child says how much nicer his parents are: they do not argue and no one hits him anymore. The emotion in the room is overwhelmingly positive and full of hope for the future.



## Commentary – Hope

One of the most significant movements to occur during the group is the embodiment of hope. This happens in various ways.

Ann remembers back to the first time that she was part of pre-group interviews.

I know when I first facilitated a programme I sat there thinking, 'A year ago that was me', and at the interviews they were crying and I remember saying to a mum, 'A year ago that was me sitting here crying, I felt just like you, things can change'. You can just give somebody that hope.

My experience of being with the Latin American group was of having to listen beyond language (which I did not understand) for tone and cadence and tacit meaning. Had I not experienced those moments, I might not have realised how powerfully the facilitators embodied hope and containment in the way that they used their voices. This was a revelation. It is much harder to listen for these things when language is present because the meaning of the words dominates communication.

One of the mother's in Gilda's group says:

You have given us back hope.

People can step up to a challenge when they feel there is a possibility of change and they are not alone.

## Session 5

### Topic: The announcement and the self-announcement

In this fifth session parents draft the announcement that they are going to make to their child.

In the announcement to the child, parents assert their own values, make a clear statement about resisting the small-basket behaviours, and declare their love for their child.

Some parents find it difficult to write the announcement because they feel too scared of their child or do not yet believe they have the right to expect things to change. Some parents feel guilty for not having been present in their children's lives as much as they would like because of mental ill health, domestic violence, or alcohol and drug use. Parents need to forgive themselves for not having acted in their child's best interests in the past, and affirm that they are committed to improving things in the future for the whole family. Writing this down creates a 'self-announcement' that parents may or may not choose to share with the group.

The announcement is hard to draft. It needs to be written so that it is just right for the individual child. It needs to speak to the child and convey the parent's strength of commitment and love.

When parents have drafted their announcement they can try it out on other parents and get feedback. They may take the position of their child and experience how it sounds and imagine how it might feel to receive it. This process enables parents to get an insight into their child's experience and to fine-tune their announcement. The activity of crafting and honing an announcement until it conveys and embodies the parent's love and commitment towards their child is complex and profound. Parents who

believe they can no longer feel love for their child are reconnected with their positive emotions. Most parents are extraordinarily moved by reading their announcement out loud to their small group.

This is a performance of love and commitment which changes the relationship because it comes from a position of strength and active resistance.

Picture 5

Figure 24: Picture 5



The resonant words are:

- ❖ patience
- ❖ pleasure
- ❖ fun
- ❖ togetherness
- ❖ kindness
- ❖ tolerance
- ❖ relationship
- ❖ shift
- ❖ positive feedback
- ❖ persistence

## Making picture 5

I am in conversation with my neighbour Kerry while I am making this picture. She has just had her first baby and looks pretty tired.

Kerry says she thinks it must be quite emotionally draining being in the group. I respond that parents are very upset about what is happening; they do not feel they have got any control. We know that if they can find ways to explore what happens in detail, they will begin to feel more in control of themselves and do things differently. Small changes can make a big difference.

*The artwork you're creating at the moment feels quite calm. Was it a calm session?*

Well, yes and no. It was interesting. We had one parent who was really quite angry. She wasn't going to participate. Coming to the group had just made things worse.

*Did she participate in the end?*

Yes. And she said that she and her husband had been arguing less. Which was a huge change. Part of what we model is not getting too caught up by people saying it doesn't make any difference. Because if we get sucked into that, that's exactly what parents are doing at home. They're getting sucked into situations in which their children are acting out.

*It's a negative circle?*

We try simply to say, well, it's difficult, it's early days. Is there any little way in which something might have been different? And we look for the things, maybe just tiny little things, that might be beginning to be different.

[Big slash of black on the right-hand side.]

*And what did the black represent that you just put down?*

Well I suppose I was thinking about that quite difficult bit with that parent who said I'm not going to cooperate with any of it.

*And how old do the children tend to be? Is it a real mix of ages?*

It's varied with each group we've done. The first four groups were predominantly boys, three-quarters boys, and they were mostly adolescents. But this group is mostly girls. It makes for a slightly different dynamic. Crudely, boys who are acting out tend to get into criminal behaviour and girls tend to cut and overdose. So that often the girls have got a different set of presentations from the boys.

*And I suppose the parents need a different sort of set of skills to deal with that?*

It would tax any parent. It's not easy. And parents are doing their best. But with varying levels of success.

*The little black strip that you just put on top of the other black strip?*

It was partly to just pick out the bit at the bottom; I wanted it to be just a bit thicker.

*Different levels and different layers?*

One of the things that happens is that you get all these different layers of how people interact together, you've got people coming with very, very different stories about what life has been like for them. So parents themselves have very different stories of being parented, often with quite a lot of experiences of domestic violence, mental health problems and things like that. So people are often starting from a difficult place. They don't have much experience of having been responded to in a clear, calm and consistent way.

*So those are the skills that you're teaching them?*

Yes, but by modelling it as well. That's not true of everybody of course, but it's true of some people. And one of the difficulties they have often in identifying people who can support them is that their own families are not very helpful, the sorts of suggestions that families may come up with to support our parents are things like hitting the kids or throwing them out.

*So it's going back to their childhoods and their negative experiences?*

It's absolutely unhelpful.

*What do the blue strips represent?*

I don't know ... I've tended not to think too much about what I'm doing while I'm doing it.

*So it's more instinctive?*

We did have tears and anger tonight, but somehow that wasn't reflected in the words the facilitators came up with at the end, which is interesting.

I notice that I can talk to Kerry about what we did this evening; I don't seem able to talk about what I'm doing. Why is this? I had this in mind when I thought about making these films and having these conversations – but maybe I didn't.

I talk about the self-announcement. This is an important development. I am overlaying the purple with sections of dark pink which soften the effect.

Kerry asks whether it was an emotional session.

I don't seem to respond to this question at all except by saying, 'Yes'. I am completely absorbed in the making. I can talk about the practical sequencing of the evening while still making art, but I can't talk about what I am doing.

*The colours have got much more vivid as you've been going along. They were much more calm. It's got more layered. It's about breaking things down into smaller problems.*

Ultimately parents want their children to have a happy life.

The fifth picture is richer and more rhythmical. Although there are fewer spaces things seem to be moving together. The words reflect greater tolerance and less discord.

Writing this now, I wonder what it was like for Kerry, a brand new parent, hearing me talk about the severe end of difficult relationships between parents and their children?



## Narrative portrait 5 – Jane: the optimist

Jane is flustered, and tells me immediately that she has had a bad couple of weeks with her fifteen-year-old daughter, Amy. She looks very upset and I fetch a box of tissues. We set this time up several weeks ago and I wonder whether we should go ahead, but Jane has made the effort to get here. I assure her that she can ask me to stop the camera at any point, and that she will have full control over what is in the transcript. Anything she wants deleted will be. In the end she does not delete anything.

Jane did so well when she was part of the programme that a colleague asked her if she wanted to become a graduate parent facilitator. Soon after this she and I found ourselves working together running a small group for ten weeks. We have worked together several times since and she offered to do this interview with me.

Jane remembers

I sort of wanted to join the group and I sort of didn't. And I felt really defensive, incredibly defensive. We'd spent so many years keeping so many secrets and it was really difficult to open up.

Inviting people into the group and making space for them to speak about things is a series of unfolding moments. The timing can be different for each person. Facilitators have to be prepared to make moment-by-moment judgements about opening things up, providing a containing space for this to happen. This is the art of reflecting-in-action (Schön, 1983), of acting self-reflexively (Burnham, 2005), of always asking, 'What difference will it make if I do or don't ask this question?'

It is important not to underestimate how hard it can be to join a group.

Jane says

This is going to sound awful, but I had an impression in my head of everyone who was going to be there: they were all going to have hundreds of kids, you know and, this sounds really awful, but I thought we were going to be tarred with the same brush, and it was nice to go there and see that there's everybody from all walks of life and all different situations. And I was struck by the different problems that people had.

Steve was more for it than I was, definitely, and I said several times, 'I'm not going, I'm not going', and then once we got there it was all right. We were going through a court case as well at the beginning (Amy had been assaulted). That was another reason that I didn't want to do it, but I think now, with hindsight, I was just looking for any excuse, and I really only did it because I didn't want people to say, 'Well, you're not trying', and that was the only reason that I came to it.

Jane is clearly embarrassed by what she has said, but she has put into words what a lot of parents must feel at the beginning. One of the strengths of our programme is that it is such a mixed group. These situations can happen to anyone. My first-ever session using non-violent resistance was with a head teacher, and six years later our current group also has a head teacher in it. We have had police officers, social workers, doctors, shift workers, secretaries, cooks, people who have been made redundant, people who have never been employed and those whose children are in care or on child protection plans. One father came to the group from the secure ward where he was detained under the Mental Health Act. But some people never start, because they feel too ashamed.

At the beginning Jane was very sensitive to anything she felt was criticism.

And even in the meetings there was a couple of times where I said that I'd done something and, I don't know, one of you said, 'Oh well...'. You know and I was really, really-

Liz I'm so sorry

- no now it's fine, but at the time it wasn't. I remember I was furious one week because I said something about control and somebody said, 'But it's not about control', and I was so mad, I was so furious. I had so much anger and hurt. [Jane pauses] I felt Steve had just completely turned off, well he'd never actually turned on, and it had built up over so many years. But him coming as well made all the difference, although now I think he's slipped, I know he's slipped back more than I have. And so that was part of why these couple of weeks have been so difficult.

I remember Jane and her husband Steve starting the group programme. Jane looked so angry and bewildered for the first few weeks. I knew she had been reluctant to come, but I did not realise just how strongly she resented being there. Jane is white and comes from a middle-class family in which, she says, 'Everyone went to university'. She and Steve have three children; Amy is the middle one. Amy is violent towards her parents, steals from her siblings, uses drugs and is involved in gang activities. She takes risks and has got herself into several dangerous situations in which she has been hurt. Jane often talks about how hard it is to make sense of why they have had such problems with Amy.

The issue upsetting Jane at the moment has led to such an escalation in Amy's violent behaviour at home that the police have been called. But instead of being overwhelmed, Jane can stand back and try to make

sense of what is going on, even if she does not yet know what to do about it.

I think I know what the problem is but I don't know what to do. She's been abused by boys and men since she was about eleven and now she's trying in her head to flip it round so she's offering things to people thinking that she's in control, or at least, that's the way I see it, so I'm just finding all these awful texts and I mean really, really obscene stuff, and I just don't know what to do.

Jane looks so upset. She is trembling and her voice catches, but she takes a deep breath and seems to gather herself together. She sits up straighter in the chair and lifts her head.

But, through everything, I'm still thinking: right, this is active resistance, this is de-escalation. Steve turned the TV off yesterday and I was, '*DONT DO THAT*, don't do that', because that's escalation; but he's so angry. So however bad things are, and I do feel things are just completely out of control, but they're not really. And other than the past two weeks, whenever anything has cropped up, I've always ended up formulating the plan through non-violent resistance and I've said to Steve quite a few times, 'Shall we write an announcement? Shall we do a sit in?'. But he keeps saying, 'I've lost faith, I've lost faith'. [Jane throws up her hands] But I haven't and I want him to do it with me because it's still there, it is still there. You know he keeps saying that he's lost faith, but I said to him last night, 'How can you lose faith if you're not practising it? How can you say it's not working if you're not doing it?'. 'Cos he knows that he's not, and he did come and apologise to me last night, and then he went and spoke to Amy, so I think it kind of got through.

Jane's tenacity and belief in non-violent resistance are quite breathtaking. Do we really inspire people in a way which begins to sound like religious fervour? Just as I am thinking this, Jane says

You know what, it is really bizarre because the way I talk to people about it that's, it is almost like, I don't know, I sound like some nutty religious evangelical, but it's made such a difference. Everyone was floundering, everybody in the house, not just us and Amy, the other two, everybody. And it just completely changed our house so much. And I'm not religious at all, but that is how it sort of felt, it was almost like a conversion, it sounds really silly.

I do put a lot of faith in it. I believe in non-violent resistance because it really did change my life. I am a different person. I couldn't see the light at the end of the tunnel at all before and even if something had changed I was so pessimistic I always expected things to fail. I've completely changed my outlook. I have literally gone from half empty to half full now, which is lovely, it's much nicer being that side. But I've never, ever been like that at all and it's changed me as a person completely. So I want to tell other people.

My sister's children are dreadful, so there's this stuff that I really want to say, but she's really, really angry, she's like where I was, and she did say to me one time, 'Don't you dare quote that stupid little book to me', and it's just like [pleadingly] 'Oooh *please* just listen', but you know there has to be something inside you that wants to change.

I'm absolutely fascinated to find out more about how Jane made what she describes as a complete transformation. I tell her that I think her abilities were always there, just waiting to come out. I do this because I feel a bit

uncomfortable with the idea of non-violent resistance as a conversion and I do believe that Jane was ready to change things with a bit of help. She alone took the risk of coming to the group and engaging in the process knowing that it was going to be difficult. But Jane shakes her head when I mention the difficulty of managing some of the problems that Amy has.

In hindsight I probably hid behind the problems because there were things that I was doing really wrong, but I said to myself, 'Oh well, my eldest is fine, so it's not me', and I think that itself was a problem. Because Amy had problems, I blamed everything on her, which then made things ten times worse, because of the burden I put on her. 'Oh it's all your fault, look what you've done to this family': it just completely exacerbates everything.

And I was half that and half, 'Oh it's all me, everything's my fault.'

So I'm not quite sure how I quite did the two because they are extreme, but I was both. I thought everything was my fault. And I blamed Steve for a lot of stuff as well, for an awful lot of stuff. And at the same time I just blamed everybody, and me as well.

How did Jane get to be so self-reflexive? When did that change happen? How did she get out of that endless see-sawing pattern she describes with everything being Amy's fault or else total self-blame?

I think when I missed week three because we were in court, and Steve came home and said, 'Oh, everyone sends you their love, and says they're thinking of you', and I thought, 'God, I really missed it', and I think that was probably the point that I realised I really missed being there and that people cared.

And also, when you talk to people, they're not 'Oooh' like everybody else. Because I know anyone else I talk to about Amy, they're like, 'Oh my God, what a nightmare, I don't know how you cope', and then there's these people going [and Jane speaks in a calm measured way], 'I know how you feel'. That's huge, absolutely huge.

And I received an email from somebody, who was in this last group, saying how much they missed it and that it was the highlight of their week.

I am extraordinarily moved by this. Jane is talking about parents who devoted their life to their child, never set any boundaries for her and never took any time for themselves. Now their daughter is completely wild and choosing to stay with her boyfriend's alcoholic mother rather than be at home. When they finished the group they both hugged me and, with tears in their eyes, said I had been like a grandparent to them. This was an enormously humbling moment for me. It gave me a sense of the special time and scope of trans-generational influence - something I never expected to have because I have no children.

Those ten weeks you go through so many different emotions, it's massive for everybody. Some people have never spoken about what's happened before. I mean Steve and I spoke about it but on our terms. We spoke about what we wanted to speak about before, but now I would say I'm completely open, I've got nothing to hide. We used to get really angry with Amy before, particularly Steve, but that doesn't happen anymore. There are no secrets. And that's huge as well.

Before the course I thought everything that Amy was doing was to get at me. I don't know if you go into like self-preservation mode, where you become really selfish because

if somebody had asked me if I was selfish I'd have said, 'No way', but I had. I could only think, 'Why would she do that to get at me?'. Now I'm thinking, 'Why did I think that? Why did I ever think that everything was me, me, me?'. But she's still there, thinking that I used to blame her.

I ask if there is any specific moment when Jane remembers something really shifting for her.

Yes, we did a role play of a sit-in, I can't remember who was pretending to be Amy, but anyway me and Steve came in and I went, 'Um, Amy [Jane wheedles and uses a very placating voice], um, um' and I kept going, 'Um, um, OK, please', and then you ask for feedback and they're all going, '*For God's sake!*', and it was like, 'Wow!' because I was so pathetic and you know that was a massive moment for me to change. That was a huge moment for me. And I know everyone says they hate role plays and the thought of doing it just filled me with dread, but that was so insightful. I just couldn't believe how much I got from that.

I was being me and I was just pathetic. But that's how I was. And that still, still sticks in my mind now.

Jane pauses and looks reflective. She takes a deep breath and steadies herself. It is as if she is about to dive into deep water but cannot see whether hidden obstacles lie beneath the surface.

It's also made me reflect a lot on my childhood and the way my parents brought us up. I remind me of my dad, he was a bit like that, and he still is. He just says he's 'so useless' and he does it all the time. And I just want to say, 'Oh stop it, have some confidence'. I can hear bits of me in his attitude and what he says.



I will try not to preach. I don't do it so much at people [Jane giggles irrepressibly], but I did have a stage when I'd have the booklet in my bag like a tract!

To illustrate her transition from desperate, angry parent to thoughtful and resourceful facilitator, Jane ends with a story about helping a friend. They were having lunch together and the friend was desperate for some advice about how to handle her son over an incident that had happened that morning. Jane recognised the mistakes she had made in the past and helped her friend do something different.

My friend said, 'I've never had a problem resolved so easily!' She couldn't believe it. So there's stuff in it that everybody can use.

Jane has gone on to become a parent facilitator in our pilot non-violent resistance gangs programme. This is a new initiative supporting parents whose children are involved in or affected by gangs. I am sure that she will make an invaluable contribution to the lives of parents who cannot see any hope. She is the living embodiment of hope for the future and testifies to this in chapter twelve.

## Commentary - Striking moments and movement

When I ask about striking moments both Ann and Jane remember doing role plays.

When a parent takes their first tentative steps towards finding the words to express both their love and their decision to take a stand against their child's behaviour, things have already begun to change. Writing the announcement is not easy. Once they have written it, the parent practises saying it in front of their small group. They need to be able to read the words so that they convince their child of both their love and their resistance.

Pete read the announcement and Ann imagined herself as their son John and tried to experience how John might feel when they read it to him.

Suddenly, listening to the words, that we loved him, and I just, I suddenly could see why all that anger was actually not anger at all, it was confusion and distress and fear, I think fear, yes I probably felt frightened about how I felt at that point, and out of control.

This was a revelation moment for Ann as she told Pete how frightened she thought their son was. This insight positioned the parents quite differently and opened up a new area of thinking and communication.

Jane's revelation moment was about herself.

We did a role play of a sit in, I can't remember who was pretending to be Amy, but anyway me and Steve came in and I went, 'Um, Amy [Jane wheedles and uses a very placating voice], um, um' and I kept going 'Um, um, OK, please' and then you ask for feedback and they're all going '*For God's sake!*' and it was like, 'Wow!' because I was so pathetic and

you know that was a massive moment for me to change. That was a huge moment for me. And I know everyone says they hate role plays and the thought of doing it just filled me with dread, but that was so insightful. I just couldn't believe how much I got from that.

Ann remembers being asked to speak to delegates at the first non-violent resistance conference. She was extremely anxious and broke down while she was speaking.

I think actually going to the conference was a moment that really struck me, and you asked us to give our testimonies, which at the time was a little traumatic, but I had never expected the reaction of everybody there afterwards. So many people came up to us and thanked us for doing that and said what an impact it had on them and I had no idea that us being there would help really, and help other people.

In these moments Ann and Jane create *performances*. They do something outside what they expected to happen. They move, or are moved by the experience of the performance, to somewhere quite different.

## Session 6

### Topic: Parental values and reconciliation gestures

In this sixth session we focus on rebuilding the relationship between parents and their children.

We begin by thinking about parental values. Where do ideas about how to be a good parent come from? Do they connect with religious beliefs, upbringing, or stories from family and community? How do our values influence how we act as parents? What values do we want our children to have? In this programme parents are fighting *for* their values rather than *against* their children.

Parents continue to work on their announcement. This can be a slow process for people who need time to articulate their values and their relationships and to work out where they stand in relation to their child's behaviour. Time spent rehearsing the announcement is invaluable at this stage. When parents practise until they no longer *sound* angry, they discover that they no longer *feel* so angry.

We introduce the idea of reconciliation gestures – not rewards, but small, unconditional, symbolic representations of love which parents give no matter what has happened.

The group generate a list of reconciliation gestures which will be tried out during the week. Parents are encouraged to expect nothing in return and warned that their gifts may be spurned, but they are asked to conceal their hurt and to continue to work to repair the relationship.

The relaxation exercise uses a mindfulness visualisation to equip parents with the strength to resist escalation and to remain calm and loving.

Picture 6

Figure 25: Picture 6



The resonant words are:

- ❖ belonging
- ❖ surprise
- ❖ care
- ❖ thoughtfulness
- ❖ fragility
- ❖ group work
- ❖ chaos
- ❖ power of the group
- ❖ continuity
- ❖ unity

## Making picture 6

I am in conversation with myself while I make this picture.

We're at a difficult place in the group, interesting as well, things changing, people struggling more. Words from this evening were a bit different as well.

The key word is surprise: people surprising themselves as well as the facilitators. It felt more fragmented tonight, but also more solid, which sounds contradictory.

The group I was with tonight spent the whole time struggling with how they could make an announcement to themselves. How they could *not* get upset? They had to move away from thinking about the children to thinking about themselves. One might say that is what it is all about anyway, but I don't think I've seen it happen as starkly as it did this evening.

We managed to get one parent to focus for a moment on doing things differently, because when she gets upset she's completely overwhelmed and then she can't focus on her child. I think she feels that we haven't really helped her at all, because we haven't solved the problem; but the problem is a relational problem and it's something in the relationship that has to change. That's a hard place to go when you've been struggling for a long time.

When we invite them onto this programme, we think they need to do parenting differently. That sounds judgemental, but it's not meant to. Something has gone awry in the relationship, which we want to be able to help them change, because everybody is suffering - parents suffer, children suffer - and our job is to try to reduce that suffering.

I was feeling that last week's painting was, somehow, too peaceful. I want to do something different with this one, and have some bits going across, because there are all those things that come up when you talk about parental values and people begin to talk about how they were brought up, what the impact of that was, how it made them decide not to do things, or to do things in particular ways. And I think we are beginning to paste different ideas in, trying to gently introduce something which is about profound change happening in relationships.

Reconciliation gestures are a key part of what we are doing and a key part of the programme. To introduce them is a real struggle, because it's so different. And you can see the shock on people's faces. 'You may be really upset inside, but you are not going to react.' Because this is a reparative thing: it is about apologising for past hurts, saying they are going to be forgotten, and acting in a way which enables everyone to move forward. That's hard for parents who have been abused by their child.

Parents begin to take ownership of what is going on and give feedback to one another; they begin to sense that they can make a difference. A lot of parents say that things are very different at home, which is encouraging for them. One parent said that for the first time her partner had supported her, which he had never done before. She felt encouraged by that; but it's something *she's* doing differently that has made the difference. These parents are achieving a lot. They're not used to seeing what they've achieved and sometimes they don't even notice the things they have done. When we are trying to do things differently, it is often easier to notice the pattern that is more familiar, of us failing to do things. We're not so good at noticing the times when we manage to do something different. So the facilitators' job is to draw attention to those ways in which people manage to do things differently, because they are very profound.

Our parents are used to people telling them that they're not doing things right, so when we give feedback we have to be very careful not to repeat pathologising ways of talking about them, which is easily done. This is why one of the words we thought about tonight was 'fragility'. Parents seem quite robust, but actually they are not. They are pretty fragile and it is important for us to pay attention to that fragility and find ways to nurture people.

I fancy some yellow. It feels as if there needs to be some brightness in this. There was a lot of brightness this evening, a lot of distress as well, but it felt as if we were nevertheless able to do lot. We have a tremendous responsibility for people.

There are bigger swathes of colour tonight. I want to make the work larger, more complex, but also starker, because that is what is happening. People are struggling, but that is fine: there is a lot of struggle at this stage. I should like some red; there is something right about the red. There was something vibrant about tonight: upset, diffident, but vibrant too.

There was much overlaying of different experiences, emotions and beliefs. I want to put a little more on, not much. We had a sense of belonging as one of the words tonight, thoughtfulness, continuity, unity, also chaos and fragility, but the key one was this idea of surprise: us being surprised by people, by things they'd managed to do. Really significant, that.

I wonder how it has been different interviewing myself? I think I have probably talked more than when someone else was doing it.



## Narrative portrait 6 – Wendy: the presence

Wendy is a participant in our very first non-violent resistance therapy programme and becomes our first graduate parent facilitator.

Wendy and her husband Hugh are white South Africans who have three children. They get involved in non-violent resistance because of the eldest son, Tim. When they begin the programme, Tim is 16. He is stealing money from home, stealing from his brother, missing school, disappearing and then coming home looking drunk; he is stoned most of the time but his parents do not realise. Eventually, he staggers in one night with a knife wound in his stomach. The family realise that they need help. Their GP refers them to CAMHS and we take them into the non-violent resistance programme.

When Wendy was referred to non-violent resistance she

was mostly pleased because I thought, well, my husband will finally be told that he's not doing things right. Our hierarchy in the home was that he was in charge and then I was more like a big sister to everyone so there was this really bad balance of power in the house. What had happened was that my eldest son had sort of crept up on the power scale and was vying with my husband for the superior male position, which I found very frightening. I don't think my husband, if he had noticed, would ever have acknowledged that that was what was going on.

Wendy is thoughtful; she is able to see the lighter side of things now and has the ability to be very self-reflexive when she recalls what it was like for her the first evening that she and her husband came to the group.

So I went with a bit of an attitude and I thought, 'I'm not going to say a thing, it's *his* fault we're here and *he* can deal with everything and *he* can learn, and everyone's going to hate me because I'm too posh and it's just going to be awful'.

But from the moment I stepped in, all that left, because we were a group of parents and we were all in angst. And we all just suddenly knew each other's pain. We bonded that way, especially in the smaller groups because we were put in with parents with the same problems as us. You were suddenly among people who knew what you were going through and who were going through the same thing and that really in itself was a big support.

Another parent asks what aspects of the programme struck a chord and were most important for Wendy.

I think it would have to be the parental presence because it made me aware of my presence in the home and I still hold on to that because it's very easy for me just to slip off into the kitchen, or up to my bedroom.

As my boys get older I find the male presence really intimidating, and I just want to disappear.

I didn't realise that until I did this course, and knowing that, and knowing that I must take my place, really helped me from within. Now I'm aware of the presence that I bring both in the house and out and about, in life. And that's changed me quite a lot, and so I've been able to cope with my son better, and with my husband.

It's made me realise that I need more of a presence in the marriage as well, which is what inevitably caused the whole

problem with Tim, because I don't think he would have got out of control if I had had a bigger presence in the marriage.

Non-violent resistance principles give Wendy a strategy for managing and supporting her middle son who is the main target for Tim's stealing at home.

It helped with the second son because he's quite bright and he read all the non-violent resistance booklets we came home with. And I think he accepted these reconciliation gestures and the de-escalation without feeling that we were letting the elder son get away with everything. Although I do know when I was deliberately using de-escalation with the second son he said to me, 'Oh it won't work with me, because I've read that, I know what you're doing' - but it did work with him. When we got to the chapter about helping your younger child tell their story, that helped enormously, because I could chat with the second son about how it was for him.

When she begins non-violent resistance, Wendy's relationship with Tim is absolutely dreadful. She is just surviving in the home, keeping her head down, creeping round the walls of the front room, apologising for herself.

I hadn't realised it at the time but I couldn't even look at him. I didn't want to see his face, make eye contact with him - it was terrible. We were hardly speaking. Whereas now I catch myself having conversations with him and I think, 'Wow'. This is a person back; you know he's back in some way. And so it's helped enormously.

That reconciliation thing was very important for me because I could have held on to the anger and resentment, but you know you forgive them, and you forgive them again and again because you know it helps you inside, that reconciliation.

Two years later I meet Tim for the first time. The non-violent resistance programme is up for an award and a group of young judges from the London Safeguarding Children Board want to speak to our clients. A number of young people, including Tim and his younger brother, agree to come along. I talk about non-violent resistance, and at one point I explain about reconciliation gestures and read out a list of ideas put together by parents; it includes, 'Give him a key ring with his initial on it'. I notice Tim reaching into his pocket. He brings out a bunch of keys and just stares at it. He is very still. Then he holds up the big metal T. 'They gave me this. I really like it. I didn't understand why they gave it to me; I'd stolen stuff and everything.' He looks extraordinarily moved. The air in the room thickens. My breath catches in my throat and I can see something click into place for him.

Wendy and Hugh bought Tim the key ring as a reconciliation gesture. He didn't need to know why they were doing it. They didn't make a big deal of it, but it was symbolic of beginning to trust him again: he got back his key to the front door.

A week later vouchers arrive for the young people who gave up their time to support us. Tim is coming in today and I phone Wendy to let her know I'm going to post Tim's brother's voucher to the home to make sure it arrives safely. 'Oh, just give it to Tim,' she says. How things have changed from when she did the washing up with her handbag over her arm to prevent him stealing from her!

Now I just feel so much better as a parent. When I started non-violent resistance I was very despondent and very detached from all my kids. Now I feel like I can embrace being a parent and it's given me the permission I needed to handle things a little bit differently. Because I come from a background where you behaved or you got a smack, and you

were beaten into shape. Now it's given me permission to move away from that and to try something a lot gentler.

So I feel more confident as a parent definitely and I'm aware of my presence as a parent. What I like about it is that I don't feel like I need to be the brilliant parent. I can just keep trying. Because non-violent resistance is great that way. If you get it wrong, that's fine: you just keep on using the same principles, keep on trying, keep on trying. And you slowly chip away at these resistances until you reach a better place.

Wendy is funny and talented, generous with her skills and time. Her eyes sparkle as she plays a number of different mothers for the role plays in our first DVD. She has a career as a writer and has recently trained as a counsellor.

I watch time after time as Wendy engages a group of distressed parents and gives them hope for the future. She has natural people skills.

There is an echo of the memory of how bad things were when Wendy says

I'd have died in some way or other if I hadn't gotten help from non-violent resistance.

The tone of her voice tells me that she means it; it sounds as if it comes from deep inside.

Much later, Tim, now in his early twenties, writes about non-violent resistance.

I wasn't included in the non-violent resistance programme. I was the reason my parents needed the training. There was a shed in the garden, which I had commandeered. It was my party pad. I was drinking a lot, smoking a lot and generally

having a grand time. I discovered that my brother had a stash of cash, which I began dipping into to fund my dope habit. I stole around £200 off him. After that I began filching from my mom's purse. I am not a person accustomed to confrontation, but I put my fists through doors, as a form of anger management. Quite frankly I was surprised that I was strong enough to put my fist through wood like that and it served as sufficient intimidation to make people leave me alone to carry on with my business.

Figure 26: Tim and his friends using Wendy's garden shed to take drugs



My parents began attending the weekly non-violent resistance sessions. I paid little attention to their doings. I just enjoyed

having the house to myself for an evening. At some point, I received a key ring. It was my initial made from a solid piece of metal. For some reason I really appreciated the gesture. It seems to reaffirm my right to hold a set of keys to the house, despite my previous transgressions. It wasn't until recently that I learned that this gift was part of the non-violent resistance program. When there is a rift in a relationship, reconciliation is an important part of the healing process.

Figure 27: Wendy buys a padlock and reclaims her shed



## Commentary - Reconciliation

'Becoming reconciled' has quite a passive ring to it. The reconciliation gestures in non-violent resistance therapy are active and generative. Planning a special treat for someone else makes you feel a better person inside. You have to tap into positive feelings about the person in order to think about what might please them. This generates still more positive feelings and when you feel better about yourself you are more likely to act well.

Here the story of Wendy's reconciliation gesture (the key ring) is told from three different perspectives. I remember Wendy and her husband coming up with the idea at a point when Wendy could hardly bear to be near Tim.

I couldn't even look at him. I didn't want to see his face, make eye contact with him - it was terrible.

That reconciliation thing was very important for me because I could have held onto the anger and resentment but you know you forgive them, and you forgive them again and again because you know it helps you inside, that reconciliation.

Then at a later meeting I witness Tim realising the context for his parents having given him the key ring.

Finally Tim writes about the experience and about his realisation that his parents gave him the key ring in order to repair the relationship.

It wasn't until recently that I learned that this gift was part of the non-violent resistance program. When there is a rift in a relationship, reconciliation is an important part of the healing process.



No one told Tim why he was being given a key ring. No one lectured him about responsibility or handed the key over with an admonishment to behave well or else. It was a silent but powerful gesture which just was. His parents performed their love for him. In time he learned about its meaning but this was not a necessary part of the process.

Wendy identifies one of the most important aspects of a reconciliation gesture when she says

It helps you inside.

The way in which we act pre-figures the person we are becoming.

## Session 7

### Topic: Active resistance

In this seventh session we focus on active resistance, and introduce a range of strategies that parents can use to enhance their parental presence with their child. Parents are encouraged to use their supporters, both for their own support and to provide support to their child.

Parents begin by sharing their stories of reconciliation during the week. Positive stories lift the group up and encourage them to carry on, while parents can commiserate with one another over gestures that were not successful.

Active resistance is about parents working for change, not about trying to control the child. How the parent behaves is the measure of success. Parents learn to stay calm in difficult situations and resist allowing escalation or reacting with hurtful comments.

A circle of concern is a group of people who care about what is happening in a family and who want to improve things for the child, siblings and parents. These are people who will commit to providing support and encouragement in a variety of ways.

A message campaign happens when parents let their supporters know that their child is missing or that there has been a violent or self-destructive incident. The supporters send messages of love and support to the child but also emphasise that the unwanted behaviour needs to stop. These messages can be telephone calls, letters, text messages or emails.

These strategies create a network of support around the child and their family. We end with a relaxation exercise and visualisation.

Picture 7

Figure 28: Picture 7



The resonant words are:

- ❖ creativity
- ❖ trust
- ❖ ideas
- ❖ playfulness
- ❖ humour
- ❖ group
- ❖ belonging
- ❖ bond
- ❖ blamed

## Making picture 7

I am in conversation with my partner, Gaby Charing, while I make this picture.

It was an interesting session this evening. The group are really working together well, and they did what these groups of parents so often do, they came up with a new idea: an extension of the non-violent resistance programme.

One of the things we do this evening is talk about message campaigns: parents get their supporters to send a message to the child when things haven't been going well, a message of support. A lot of our parents don't really have anybody who can provide that. They feel extremely isolated and it's a real problem finding a way to help them with that. It's one of the reasons we do a group, because we believe that meeting with other parents reduces isolation.

Some parents, listening to the suggestion that people might send text messages to their child, said, well, they didn't have anyone who could do that. Two parents from different families had been having a conversation earlier, about a television programme. One had asked how many episodes there had been in that series, and the other had said her daughter would know. She had texted the child and said, 'There's somebody here who wants to know the answer to this question and I think you'll know, so here's her number' and the child had texted the answer back. And the parent who wanted to know the answer had said, 'Well, you say you've got no one who can send messages to your daughter, but I can text your daughter because we've just had this text conversation, so I can do that'.

We were talking about the fact that you might need to look at your child's phone to see who they have been talking to. It is a protective thing, and we don't encourage doing it unless there is a genuine risk issue. One of

the parents had looked at her daughter's phone and seen she had received some really horrible, bullying text messages. They were about an incident that had happened two years ago and the parent had no idea that it was still going on. Three really unpleasant text messages had come this week. And I said, 'That's like a negative message campaign.' Parents got really excited by that and were thinking about how to send positive messages, how they could create a situation in which they sent positive messages to one another's children. I thought that was a really exciting idea for people to come up with.

Gaby asks how I'm choosing the colours but I say I don't really know.

There is a tight band of strips covering a small area still on the right-hand side. I am adding yellow on the outside. Then a strip of pale blue, cool and calm, edging into the blank white area on the left of the canvas. Then a teal blue at an angle into the white area and then more pale blue. Then a dark purple strip, pointed at the top over into the yellow on the far right. Then a darker ultramarine blue on the left-hand side, and another more pointed strip of blue ending before the top of the canvas. The left side is all blue while the right is mostly pink and purple. Now orange on the right, jagged and edging towards the limit of the canvas. There is something vibrant about the orange. I want something lively. There was something much more colourful about tonight.

In some ways the brightness of the colours is to do with the limit of the palette that's available. I wonder what it would be like if I had a palette I was more familiar with: opaque oxide of chromium, Payne's grey, *terre verte*, Naples yellow. The palette is a formal constraint.

The last time there were quite a few bits going across, people saying they felt too upset to come, but it was not like that tonight.

There was tremendous strength tonight in what people were saying.

I think it's finished. I actually want more layers in the middle because there's something about what was going on that is multi-layered; it's the complexity of how people interact together and the difference they make to one another. There's something very subtle about it, something very harmonious about the colours, but something strong and very life enhancing.

Colours that you would not have thought would go together managing to get along.

Just when I think it is finished ... a strip of black slightly to the left of the centre. Yes, that's done!

## Narrative portrait 7 – Ann and Pete: the champions

I am delighted to interview Ann and Pete. They are graduate parents from our seventh non-violent resistance group and have become very active in the non-violent resistance community. They are in their fifties, white, middle class, retired health professionals. They would probably have gone on working but for the stress of their home situation.

When they arrive, Pete teases me about my camera and Ann rebukes him gently. In their first interview I was so nervous that I did not start the camera properly. A couple of weeks later Pete asked me how it went, and I confessed; he immediately offered to repeat the interview. Now they sit rather anxiously in front of the camera for the second time. Pete is wearing a white shirt and a tie for the occasion. They speak carefully and thoughtfully.

Pete: I was brought to non-violent resistance by my son John, who is fourteen. He had become increasingly violent towards members of the family over the course of about four years. When John got violent, or was hurling things, or smashing the house, or breaking his mum, or breaking his sister, or breaking me, I'd restrain him. I'd hold his arms and get him on the floor and he would get into the most dreadful rage - he would kick and bite and try to punch and it would take him a long time to cool down and I'd usually get hurt in the process. One night he got his hands round his mother's throat and I really thought he was going to strangle her. I wasn't quick enough getting my arms round him and he grabbed my hand and broke two of my fingers. He was so wild that night, and so angry about things.

When John was at his most distressed he was constantly looking at the clock, washing his hands and waking his parents up during the night by turning the light on in their bedroom and hurling objects at them while they slept. He refused to see anyone for help. This went on for two years.

Pete: We were really scared when he came through the front door.

Pete and Ann both began working in the NHS when they were eighteen years old. They have an elder daughter who recently went to University.

Pete is a well built, fit man who enjoys riding his motor cycle. John, a rugby player, is already taller than his father, and as strong. Pete and John were at an impasse physically. John would become violent, Pete would attempt to restrain him, but John's violence would escalate. They were locked into a pattern that was going nowhere, without any idea about how to escape. Pete believes that some of this was to do with gender and society's expectations of men and fathers in particular.

My natural reaction as a chap was to stand up to him.

The psychologist working with the family asked Pete to stop restraining John when he became violent. This strategy drew on the non-violent resistance principle of de-escalation in order to create an opening, a disruption in the pattern that had become established. Pete describes this as his Gandhi moment.

It certainly doesn't come naturally. I think I speak for most men. To allow your teenager to hit you so hard that you can't lie down on your back for three nights, it's not easy to do.

And I think if someone hasn't suggested to you that that's the right thing to do you're not going to do it. It was suggested that in non-violent resistance one shouldn't show any sort of violence, including restraint, so I allowed him to lash out. I let



him really hurt me and he was very confused. And he said to his mother, 'What's wrong with Dad?'. He was very confused. He thought I'd gone weak or become very cowardly.

Ann: He said, 'Why isn't Dad stopping me?'

Pete: But almost immediately his extreme violence towards us cut right down. After that we never touched him at all. And I certainly felt better about not restraining. Trying to restrain him escalated the situation and made things worse. He was certainly very confused by it the first time. And afterwards he used to call me every name. 'You're such a coward, you can't even stand up to me.' It felt horrible. It was horrible. Because my natural reaction as a chap was to stand up to him and not be beaten up in my own home. But it wasn't helpful. So why keep doing something that isn't helpful? It was one of the big changes.

I remember Ann and Pete when they came to find out about the group. Ann, anxious and very tearful, Pete tense and giving the impression of being slightly angry and defensive, but I think now this was more how he showed his upset.

Ann and Pete tell me that their experience of working in the NHS meant they had always mixed with a wide variety of people. Things were so difficult at home that this outweighed any embarrassment they might have felt.

Ann: I was very wary about joining a group and needed a lot of encouragement from Pete. I hadn't told family or friends, let alone somebody I had never met before. I found sharing personal experiences and pain very difficult, and the first week I sat there thinking, I don't deserve to be here, and being very humbled by hearing other people's stories. But by

the third week I'd begun to feel that I could begin to share with people. And it was a huge release really to be able to talk about it. I think by then we'd started talking to our neighbours, who are our supporters, just to offload a little bit and share. I found that I got inner strength after a while from just being part of the group. It was just somewhere that you felt supported. I would never have believed that I could feel like that.

Pete: We got support from other people and we were able to support others as well.

Ann: Yes, and two of the people we've kept in touch with and still meet up with and became very close to them. And we sat in small groups and discussed how we could help each other

Pete: ... and encouraged each other as well.

Ann: And the empathy that you felt because you knew it was confidential, you knew they understood. I wouldn't have shared with my sister some of the details that I shared in the small groups. Because I felt they wouldn't judge me and they would understand, because they were feeling it too. Different problems maybe, but they still had the same sort of emotions.

Ann's 'light bulb' moment came when she was asked to put herself into John's shoes.

Ann: I think the other big change was understanding how he felt about things. When we did the role play, I had to be John. I found that extremely [she pauses and catches her breath] distressing because I suddenly saw life as it was for him. Not that I could maybe even begin to feel how he felt but it was very, very uncomfortable, very upsetting, very confused. And

it's hit me, he's in a horrible place, and there was me thinking our family home is ghastly, the general atmosphere was horrible, and I hadn't honestly really thought how horrible it was for him, I just thought he was being jolly difficult. So that was a humbling moment really starting to think, 'My God!'.

I ask what it was that helped Ann see things from John's point of view.

Ann: We were practising the announcement; Pete was reading it to me and I had to react how John would react, and, I don't know, suddenly, listening to the words, that we loved him, I suddenly could see why all that anger was actually not anger at all, it was confusion and distress and fear; I felt frightened about how I felt at that point, and out of control. A long time ago we had a psychologist's assessment for dyslexia and he said, 'I think John is very frightened', and that came back to me and I thought, 'Yes, he is', and I hadn't seen that before, I thought he was just angry.

Ann and Pete found it hard to tell anyone what was going on at home, but now they recognise that some friends and colleagues are in similar situations.

Ann: We've got several professional friends who have got exactly the same problems as we've had but have kept it very hidden, under wraps. And wouldn't probably accept the help that we were desperate to accept.

Pete: One of them recently had his ribs broken by his son, but he still pretends that everything's been fine: his wife let it slip, but he just pretends it didn't happen. 'Go on, it's just playing'. It wasn't. He was hit so hard that his ribs got broken.

Pete's voice is shaking and he blinks.

Ann: It demonstrates that it can happen to anybody, but some just won't admit it. And I suppose I can understand that, because we kept silent about it.

Pete: It's not nice, feeling like a failed parent.

Pete's voice is quite clipped and he sounds emotional. He is sometimes a bit prickly with us professionals. I wonder how easily I would manage the transition from professional to patient.

Pete: I still feel it would have been nice to do it all by myself, but I didn't know about non-violent resistance. And John needed some help as well.

Ann: We understand him much better, and there were issues about going to big family parties and I didn't understand that for John going to a big social gathering was ghastly. And so he would always play up. I thought he was just being difficult, but that wasn't the issue at all. We had to step back and look at it a different way. So it's made us view things very differently and certainly be much more understanding.

Pete: He would get very agitated in the car and if he started getting too warm and if you didn't put the air conditioning on or open the window he would lash out and a fist would come and hit you on the head while you were trying to drive or his sister would be [demonstrates lashing out with right arm] have that done to her just because he was just getting so agitated.

Pete and Ann use non-violent resistance strategies and support from their neighbours to get John to see our psychiatrist.

Ann: When we were successful with the sit-in, it was a gentle experience, we were just sitting on the end of the bed and he was lying in his bed wrapped up in his duvet, exhausted, asking for help really, and was then ready to accept it. And that one was the turning point, because he was so tired, he'd gone to bed in the middle of the afternoon. Well, we were all tired. He never settled till two or so. And we'd done him an announcement saying, we can get you help for your sleep, because he wanted his Dad to prescribe something for him, but Pete had to say, 'I can't do that, you'll have to go and see a different doctor.' I said, 'We can get you help if you agree.' And he said, 'Mum, I'm so tired.' And we said, 'Will you go and see somebody?', and he said, 'Yes'.

John is diagnosed with autistic spectrum disorder, Tourette's syndrome and obsessive compulsive disorder. When John was younger and diagnosed with dyslexia, he responded with violence, so his parents are anxious about what this will mean for them all. To their surprise John is relieved to be able to make sense of his way of seeing the world and is now telling everyone that he's autistic.

Pete: There was a big switch when he found out the reason why he felt different from other people. That was a real turning point actually. It was important to him, he needed to know. And the interesting thing is how, since he stopped being violent, the respect has come back and he asks my opinion about things and seems to think I've got far more knowledge than I actually have.

Things are now very different at home.

Ann: It all seems unreal now, doesn't it? It was an awful nightmare. I hate going back and thinking about it, because it doesn't seem possible.

Pete: One of the cats used to run a mile if he even saw John coming his way. Now that cat jumps on his lap.

Pete speaks with irony: things are still very raw, and this interview evokes bitter feelings about their experiences.

Pete: The cat didn't like the banging of doors very much, and the hurling of the chairs.

Ann: He used to just run away with his ears back, now he trots across the drive with his tail up. Now, when I hear the key in the door when John brings himself home, I don't think [sharp intake of breath] which I used to. I was very scared

Pete: I was scared because he's big and very strong.

Ann: But now I'm pleased to hear that he's home and he shares his day.

Things have changed such a lot. It is hard to imagine how Ann and Pete and their daughter managed to tap into their strengths in the face of such adversity; they have tremendous courage and determination.

Ann is now a co-facilitator in our current group. Pete co-facilitates our group for parents with children on the autistic spectrum.

Ann: It's been very rewarding, because when you get to know someone you really want to be able to help them, and we get home and talk about and see if we can come up with any ideas. And it's very rewarding if someone comes back and says actually I tried this and something was a bit better.

I am caught up their enthusiasm. I'm not sure if they know just what a difference they make for new parents and the group just by being able to say, 'We've been there'.

Ann grins at me. 'Passionate believers, aren't we?', she says.

Many months later Pete says

You know if we'd done that interview now, I'd have made much more of the group. The group is so important in making things happen.

## Commentary - Courage

Some parents have experienced years of feeling frightened; this has a traumatising effect and can lead to desensitisation and under-reporting. Parents and siblings have had a range of physical injuries: broken bones, black eyes, concussion, knife wounds, and extensive bruising. The effects of psychological attacks are less visible but equally damaging; they undermine the sense of parental identity, and lead to a loss of self-worth (Pete described the group as a club for 'failed parents'), and mental distress.

Taking a stand against violence requires courage. It means putting yourself and your beliefs at the centre and showing calmness and love.

Mary and Wendy were brave enough to take a different position in their families; they stepped up to the mark and reclaimed their parental presence. Another mother resisted her parents, who instructed her to hit her daughter back, and sought the support of the group to do things a different way.

In standing up to her son's violence, Gemma discovered for the first time what it meant to feel proud of herself as a mother. Wendy discovered new aspects of herself: transforming her life.

Pete stopped physically restraining his son John, as that act of restraint was extremely escalatory. He no longer responded physically when John hit him. John was confused by this behaviour and his extreme violence diminished almost immediately<sup>11</sup>.

When nothing is working, I always consider what I call the 'skid manoeuvre'. When a car starts to skid the right thing to do is to go faster and to steer into the skid rather than brake and turn the wheel in the

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<sup>11</sup> We do not advocate parents putting themselves at risk by remaining in a situation in which they might be hurt.



opposite direction, which is what is instinctive for most people. Sometimes it is a useful strategy to go against what seems intuitive because this opens up new opportunities. Pete felt he had to stand up physically to his son; the result was increased violence and at more extreme levels. Changing direction and doing the unexpected reduced both the incidence and the level of violence.

Some years ago I was asked by staff in a day centre for disabled people to go in and help users become less angry. Staff reasoned that some users were angry with the loss caused by their impairment and needed individual help to get over this (a rather simplistic 'take' on the loss and bereavement model). To the consternation of staff, I started a group for people to come and talk about their anger and frustration. Out of this grew a voluntary organisation that called itself Parent Power, which lobbied to change rules that disadvantaged disabled parents (parents' cars banned from school grounds, wheelchairs banned from the sides of swimming pools) and set up a service for children who were carers. Users had fewer things to be angry about.

When people feel held by a group and don't feel judged by professionals, they are able to be braver. They become more able to work together and connect with their embodied selves.

Gilda identifies a really important point in relation to non-violent resistance when she says:

Some of them needed to get more courage, because in the end courage is needed to change their behaviour.

The alternatives to trying something different are to go on in the same destructive pattern. As Wendy says:

I'd have died in some way or other if I hadn't gotten help from non-violent resistance.

## Session 8

### Topic: The sit-in

We introduce the sit-in as an intervention. This technique draws directly on the repertoire of interventions in political and social direct action. Parents 'sit in' as a peaceful protest after the recurrence of one of the behaviours they identified in their small basket. This will only happen if things are peaceful, and will require careful preparation. The sit-in is not intended to be an escalation, a sanction or a punishment. Parents embody their presence in a silent way by sitting in their child's bedroom and asking their child how they can help them change things. The child is encouraged to come up with suggestions. Any reasonable suggestion is accepted, and then the parents leave. Parents will remain, resisting getting drawn into conversation and debate and without confrontation, for up to an hour.

The success of the sit-in is not related to the child's reaction. The child may swear, storm out and leave, but the parents remain in silent protest. The sit-in is a symbol and performance of parental presence.

One father, who previously never dared enter his violent son's bedroom, now takes his son a cup of tea, sits down on his bed and stays while the boy plays on the computer. Father and son are comfortable in each other's company.

Parents are encouraged to rehearse a sit-in in order to get a sense of how it might feel, and to practise remaining calm and not getting drawn into confrontation. There may be risks associated with the performance of a sit-in and parents need to weigh these up and consider whether the risks are too great. Taking a stand needs courage but should not put parents in danger.

Parents are encouraged to use relaxation and mindfulness tools to support their sit-in performance.

Picture 8

Figure 29: Picture 8



The resonant words are:

- ❖ overwhelmed
- ❖ persistence
- ❖ repetition
- ❖ play
- ❖ different perspectives
- ❖ anger
- ❖ confrontation
- ❖ power
- ❖ tiring
- ❖ silent
- ❖ talking

## Making picture 8

I am in conversation with Julie Melrose, an art therapist colleague, while I make this picture.

When I come to look at the film of our conversation, the DVD does not work, nor does the back-up, so I have to remember some of what we discussed.

I begin by creating a frame around the canvas with torn strips of dark purple. I was not a facilitator in the group this time, but an observer. This happened because not many parents came and we did not want to overwhelm them with facilitators. I watched the group through a one way screen, so felt rather distant from the feeling in the room. I wanted the frame to represent this apartness. However, the words evoke the emotional resonances of the facilitators.

During the week there had been a lot of confrontation between one husband and wife couple, which led to some difficult moments in the group.

Julie asked me about what the colours represented for me, and I found that I was quite resistant to the idea of them being symbolic. I think this comes from having some theoretical differences with the more psychoanalytical way in which art therapists interpret the art work produced by their clients.

Julie told me that art therapists (particularly in training) routinely make art in response to sessions with clients and then take their work to supervision as a way of exploring their clinical practice. This was not something that I knew about and we had an interesting discussion about how this related to what I was doing. Julie saw my work as a way of processing the content of the session, whereas I saw it as a direct

response to the feel of the session. Perhaps, on reflection, the two ideas are not so different.

During our conversation I noticed my reluctance to be drawn into interpretation, and felt I was being a bit prickly with someone who had given up their evening to be part of my research.

## Narrative portrait 8 – Mary: the standard bearer

Mary and her husband John have two daughters, Alice, who is twenty, and Amanda, who is fifteen. Relationships at home are often fraught with heated arguments, sometimes leading to physical confrontations. John and Alice both have hearing impairments which can affect communication. John is concrete in his thinking, which the women sometimes find hard to comprehend. Amanda is anxious about a lot of things and this anxiety leads to fear, frustration and violence. Mary sees herself as a referee trying to keep the peace.

Mary and John are white and describe themselves as working class; they are proud of their culture. Amanda seems less comfortable with her background and less satisfied.

When I first meet John, Mary and Amanda, things are very difficult. Amanda refers to her mother as 'it' or with a swear word; over time this changes to her calling her 'thing' and eventually, in unguarded moments, 'Mum'.

Mary and I meet for this interview over a year later. We use the family room at our community base. It is a bright, cheerful room with lots of new, colourful toys. On two sides there are windows and the room is light and airy. Mary looks a bit unsure about what is going to happen and begins by saying she does not know what sort of help she is going to be to me. She is apologetic and tentative. I explain that I am interested in her experience of being part of the non-violent resistance group.

Mary tells me that she had spent a year or so on her own trying to sort out the problems at home and just felt that she was struggling.

And I suppose I almost felt like I was a martyr, that I had to do it because I was mum.

I remember seeing the family all together and mentioning the non-violent resistance programme, because it seemed as if the parents had surrendered their position to the children. The first thing Mary did was to turn to Amanda in a very tentative way and ask for Amanda's permission to attend the group. She would not do that now, and that is one of the ways in which things have changed.

It was nice to come along to the group, because I suddenly realised there was lots of other people in the same boat. First of all I think we were a bit suspicious of one another, but when we started talking it was good, because suddenly it began to feel there were other people out there, and it began to feel more secure; especially when someone talked about confidentiality. You did begin to feel like you were bonding, I suppose I'm a bit religious really, but it felt like a little thread going around the group, and as the weeks went by you began to feel you were feeding off one other, and if one person was down, you were sort of busy saying, 'Come on, you can do it!' and we were all helping one another. And it was only us that could understand one another because we were all in that situation. I found that refreshing, a bit like recharging.

I know that several of the members of that small group are still in touch two years later. Mary makes the point that, however good they are, the clinicians cannot offer that shared experience which is so important in making people feeling heard and understood and having their experiences validated.

Close friendships develop in the small groups.

I found that my special friendship with one particular lady has really worked well. I've even gone to some social events with her. Perhaps we're lucky the way we clicked, we almost had



an unwritten understanding that we wasn't going to burden one another, but a couple of weeks ago she sent me an email where she was all steamed up, it was over something really stupid that her daughter had done, and I knew that by the end she felt much better and she just said, 'I just had to tell you, I feel better now'. I think she'll probably stay a friend for ages and ages, which is nice.

This has been an important support for Mary, whose husband has not embraced non-violent resistance.

I think you've got to go in believing it, whereas John never believed in it really. And he teeters around and sometimes says, 'Hmm, it did help a bit' [Mary sits back in the chair and laughs], but that's John! I think the worst thing is, the other parent who doesn't believe it so much can say, 'Non-violent resistance is a load of rubbish'. I've had that on one or two occasions, which has really annoyed me, you know. And I think that's why my friend in the group came into it really. She became a big supporter. She's on her own and I think that can help if you've got a husband that's not really into it, you need someone else really.

Mary is very much the flag bearer for non-violent resistance at home. I remember how stressed she used to be and ask about how that has changed.

I like the bit about saying, take time to relax, have a bit of 'me' time. When I took the dog out for a walk, I used to sit on the bench, and just try and remember about the non-violent resistance saying, 'Just enjoy life for yourself'. Just sitting there and looking at the trees and the squirrels and the dogs

walking by. Just enjoying things. Almost spiritual. And saying to yourself, 'I'm not a bad person'.

Mothers in particular worry a lot about their role in their children's difficulties. Feelings of guilt can incapacitate them, preventing them from acting in a different way. Fear, guilt, sadness, pity and protectiveness all have a role to play in the loss of parental presence.

I think when you first go to the course most people are saying, 'I must be a bad mother, where did I go wrong? My mum didn't get it wrong'. But then as the course was going on everyone's supporting one another and saying, 'It could have happened to anyone'. At the non-violent resistance top-up recently, that's what we were all saying.

Moving from a position of guilt and total responsibility allows parents to step back and see the wider picture.

The other thing about the non-violent resistance is it helped me to somehow chill. At the moment Amanda's getting a lot of pressure from school. She's way behind with her coursework. And her OCD behaviours, that had seemed to almost go away, have all come back this weekend. And John said, 'Oh she's doing that thing again with the cutlery in the drawer, and you've just made the bed and she says the sheets are unclean and she's taken them off!' And I said, 'Leave it. Don't worry about it'. I didn't confront her, I just changed the sheets.

Mary speaks in a calm and confident voice. She is no longer apologetic, deferential and fearful.

I just thought, 'Well chill!' I'm not going to go backwards. That's a bit of what the non-violent resistance top-ups do.

We're not going backwards, we're only going forwards. 'It's just a hiccup' as my friend and I would say!

For Mary one of the important changes has been in the quality of her relationship with Amanda.

I really thought that she hated me, there was a big argument between Alice, John and myself, and Amanda could see I was close to tears, and she actually said, 'Are you all right?' and she was concerned, so I could see that she was still there for me. It was lovely to have her say that. And I think she wants to say that she loves me but she can't. But where we are at the moment she'll say, 'Oh my friend wants a word with you', this is on her mobile phone, and she wouldn't normally let me get near to her friends, and then last night she said to me, 'Oh, my friend says you're a really nice mum'. And I think that was possibly what she wanted to say herself.

I am struck by Mary's ability to be reflexive. She is able to observe the interaction between herself and Amanda and to give a positive meaning to it. Mary is cheerful and resilient now, whereas in the past she was fearful and preoccupied with listing the things Amanda had broken and pricing each item. She brought the list every time she came to see Amanda's therapist and seemed unable to see beyond the value of what Amanda had destroyed. She may have thought that this was what we needed to know in order to take things seriously.

I can remember way back when we first had trouble, she chopped up her school blouses. We were left with two blouses. And I can remember doing my nut then, but now I would stay chilled, and say, 'Whatever', and deal with it in a different way, giving her less pocket money or something; I wouldn't have gone on and on about it. And I think because I

stay more chilled she realises she can't really press those buttons any more.

The relationship between Mary and Amanda had been at rock bottom. Amanda hardly spoke to her mother, and if she did it was to be hurtful or abusive.

Just before I come to see you, I was reading my folder and my diary that I kept through all the really bad times, and I thought, 'I'm really surprised that any of us are still here, you know.' Because of all you know the wreckage and whatever we had. But it just shows how unhappy Amanda was at the time, she was crying out for help really.

I always thought that there must be something wrong. Whereas I think John just thought she was really bad. I thought something was really upsetting her. But I just couldn't help her and it was coming out in this violence. There's still quite a bit to fix in the family but I think I can see where it needs fixing. A couple of days ago, Alice was violent towards me and we're now in a situation where I'm trying to sort that out. Because it's like a jigsaw, isn't it? So we're trying to use non-violent resistance to fix it.

Now Mary is able to think about tackling the problems between Alice and John as well. She strikes me as optimistic and up for the challenge.

There's jealousy between the two sisters. You get the situation I think sometimes with sisters where one wants to do really well and doesn't want the other one to do well. I can remember when Amanda was close to being arrested on the third time the police came round, Alice was saying to her, just before the police came, 'Go on, do it, do it, do it, get arrested' which is really...

Mary's words tail off as she remembers the intensity of the moment and what might have happened. She pauses then takes a more positive direction.

Amanda always said that she would never be seen out with me, but just recently I'd gone to the Deaf Club, because I go there to improve my signing, and she came to pick me up. When I came out into the car park she saw my friend Sally, who's totally deaf, and Sally said hello to Amanda and so Amanda signed, 'My name's A-M-A-N-D-A' quite confidently. She picked that up watching me [Mary sounds really proud], and Sally thought she could sign, so then she's going full pelt at her signing and my daughter's going, 'Help, help!'. [Mary collapses in giggles.] And we got home and she said, 'I'd really like to do more signing. You're going to a function; can I come along as well?' That's a massive change, that she will actually be seen with me. That was a nice surprise because it wasn't me that engineered it. I thought, she'll come to me when she's ready. It was nice that it was something that just sort of happened and she asked me recently, 'Have you got the ticket yet?', so she really does want to come.

Sometimes she's talking to me and communicating, not realising she's doing it half the time. She keeps saying, 'Remember, still don't like you, not getting on with you.'

Mary laughs again, then becomes more serious.

I think the course helped me to realise that I could show Amanda that sometimes I'm quite vulnerable and I get scared, and I started to say to her, when we did start to talk about it, 'Well actually I'm quite scared of that, that frightens me.' I was just trying to show her that I'm human and not

superhuman, and somehow it seemed to open up the communication.

It is clear that Mary is gently helping Amanda talk about her guilt for the way she has behaved in the past.

When we bought the house it belonged to an old lady that had died. There was no one else in the family and we found her will and her suitcase by the dustbin and it was very sad. I said to Amanda, 'If the old lady was looking down, I think she'd like us, because we've kept the picture rails and the character of the house.' And Amanda said, 'But would she like me, because of what I've done to the house? Because I've wrecked it haven't I?' And I said, 'I think she would still like you, because I think she probably realises that you were troubled at the time and now you've changed your ways.' When she changed counsellors recently she really didn't want to talk about how violent she had been towards me, but the counsellor said she should talk about it, which was a bit ... [Mary pauses then leans towards me and says quietly] She didn't want to face it.

Mary is warm and generous; able to see humour in difficult situations, always willing to lend a hand or listen to someone else.

I wouldn't be this far if it wasn't for non-violent resistance. My mum and my sister have been good, but it's only people who have been in that situation that can understand. The group helps you to get back a sense of humour in the end.

Breaking the taboo of silence has been helpful for Mary and enabled her to develop networks of support.

The thing that I found useful was when we talked about the taboo bit, that you don't tell anyone that you're having trouble with your daughter. And for the first year I never told my godfather, who I'm quite close to, and he was saying, 'Oh how's Amanda?' and I was saying, 'Oh she's fine, she's fine' and lying through my teeth. And then she didn't send a thank-you note for her birthday present and he was getting quite cross, and in the end I said, 'Well actually I'm sorry but she's not fine', and I told him.

My aunt and uncle, they were both quite shocked; but they sent me a nice letter saying, 'Is there anything we can do to help?' I was just feeling, well I wouldn't quite use the word ashamed, but I didn't really want to admit that we were having major problems. And then I kept in touch with them and was able to say, 'Just a bit of good news, she's on tablets now and we can begin to see a turn round.' That was important I think, to actually admit it. And my neighbour, she knew I was having problems, she could hear it through the wall, but when I went round there to apologise, that opened a gateway to talk about it, and you know she said, 'Other people in my family have had similar problems' and it began to feel a bit better, and she said, 'Is there anything I can do?'

The other graduate parents are hoping that Mary will agree to become a parent facilitator; they think she would be really good at it. When I tell her this Mary looks as if she doesn't believe me. I tell her again and she smiles shyly and says she'll think about it.

Six months later she is facilitating the twelfth group with us.

## Commentary - Presence

Presence is the embodiment of being a parent. It is the solidity of the anchor and a safety line to hold onto in times of trouble, danger and uncertainty.

I am reminded of the parents who, at the end of the final session of one of the programmes, embraced me and said that I had been like a grandparent to them. There is an isomorphic relationship between what we do for the parents and what the parents need to do for their children. When we help parents regain their parental presence so that their children feel more contained and held by them, we give them an experience of what that feels like, by containing and holding them ourselves. This enables parents to act from a base of knowledge and experience which they may not have had during their own childhood.

Haim Omer says that this anchoring is not putting a wall round people but creating a net, something that has holes in it but which also provides safety. The anchor line can be shortened when external forces threaten the young person, and loosened in times of calmness. But the presence is always there, and the parent steps up the level of vigilance and intervention according to changed circumstances.

Pat Crittenden (2008, p xii) introduces her book *Raising Parents. Attachment, parenting and child safety* by saying

loving children and intending well isn't enough.

There is a zone of proximal development (Vygotsky, 1978) in which we are able to provide an attachment or modelling experience for parents which strengthens their ability to weather their children's storms and remain vigilant in relation to their protection and safety.



## Session 9

### Topic: Parental presence outside the home

In this session we talk with parents about extending their parental presence into the child's bedroom and also outside the home.

We do more practice with the sit-in in order to prepare parents to feel able to try this intervention if it becomes necessary.

Some parents are really concerned about their child's interaction with the world outside the home; they know nothing about where their child goes or who their friends are. Sometimes their child is missing for several days at a time. Drug taking, sexual exploitation, criminal behaviour and gang involvement may be suspected and may be a harsh reality.

Strategies for re-establishing parental presence outside the home are discussed and planned.

With the proliferation of social networking sites the outside world can now come directly into the home. The situation where there was a family computer in the living room which parents could monitor has been completely transformed by the emergence of smartphones. Young people can be communicating silently with a wide range of people on small hand-held devices at any time of the day or night. Some of these people will be known to the child, others are only a digital image which may or may not have anything to do with the person on the other end. Some of our parents have children who have been persuaded to strip and carry out sexual acts in front of webcams without knowing who is watching or who the images are going to be shared with. Parents are like immigrants in a new electronic country where their first generation immigrant children speak the language fluently and understand the cultural nuances in a way that they will never be able to do. We discuss ways in which parents can

work alongside their children to understand the internet and develop safe practices.

We end with relaxation.

## Picture 9

Figure 30: Picture 9



The resonant words are:

- ❖ resilience
- ❖ values
- ❖ tears
- ❖ love
- ❖ dangerous love
- ❖ honesty
- ❖ active resistance
- ❖ small acts

## Making picture 9

I am in conversation with my partner, Gaby Charing, while I make this picture.

I begin on the left with a bright orange strip followed by a smaller pink strip to the right and then another orange strip. Gaby asks about my choice of colours and I say that the group has become very close and cohesive with parents feeling comfortable enough to challenge one another. I want to use colours that show the warmth and the bond between the parents.

I explain that we talked a lot about love in this session and about the values that underpin parents' hopes for their children. One of the issues was school attendance. It's the law that you must make your child go to school, but what do you do if your child is too anxious, how do you support a child who is really suffering? Sometimes the parent does their bit to help the child get back to school, but then the teachers cannot let go of the story that this is a child who does not go to school: they pick on the child in the classroom, which makes the child not want to go back. One parent discovered her child was being bullied at school, which isn't acceptable, so she will not make her go. She says her child can go to evening classes later on, and it is not worth trying to force her to go to school when she was being treated badly and no one was prepared to sort it out.

I place a big black strip over the orange sections on the left and say that I thought parents talked in a very thoughtful and eloquent way about how to manage their dilemmas, and were supporting each other.

Parents say that de-escalating has reduced the violence, but things like going to school haven't changed. The violence is completely

counterproductive, but things are difficult in the period between the violence reducing and things changing.

Parents were also talking about the effect of abusive relationships on themselves and their children. I don't think we have had a group which has talked such a lot about love and relationships. We talked about dangerous love, the idea of loving someone to death, and destructive love, not being able to live without someone who's very destructive and violent.

It must be terrible to have a child who is completely off the rails and appears to hate you.

Unless you spend time with parents talking about just how distressing it is, you don't really have any idea. I think teachers have a difficult job and just can't afford to think in that way.

Children can be terribly hurtful, especially unhappy children, and helping parents to see that hurtful comments can be a symptom of unhappiness is a useful thing to do.

I have noticed that I have not wanted to add strips going across the last couple of pictures. I want to continue to show the complexity and layering of experience, but for it to be harmonious, because that is how it feels. There are some bits of white canvas still showing through. In the early pieces that didn't happen, but I quite like the tension it brings.

Sometimes there are patterns that have been going on for generations and there is a limit to what you can do, other than help people see what the patterns are. But there are also patterns which are not generative; where people are not good at helping others grow because there is no understanding of what you need to do for that to happen.

There was a tremendous amount of honesty tonight; people really trying to be honest with one another.

## Narrative portrait 9 – Tatiana: the calm one

Tatiana is supremely elegant, always beautifully dressed, fluent in at least three languages that I know of (maybe more): Spanish, French and English. She recently completed her examinations and can now apply for a post as a consultant psychiatrist. When she gets her results she invites the whole team to a restaurant to celebrate with tall glasses of chilled Prosecco.

It is Thursday morning. I get to work early to set up my equipment. We have to book rooms for seeing clients and there are not enough so they are always in demand. To ease the pressure on others I have booked a room that is usually used for meetings and has a large table in the middle of it.

I really like this room. It has a print by Richard Long called *Waterlines* on the wall, part of a government acquisition scheme which put original art into hospitals. I'm not sure anyone but me realises what the print is or how much it may be worth. I sit in meetings looking at it. The room has an odour of stale cigarette smoke. There is a boarded-up fireplace and the room smells like this whenever it has rained. I think the moisture gets into the soot, the chimney, unswept for decades, invisible behind the boards.

I begin by moving the table and chairs to make us a space that feels right. I want to be able to focus the camera on Tatiana's face; she speaks quite fast and I want the best chance of transcribing accurately what she says.

Tatiana is our first co-facilitator who is also a psychiatrist. Her work in hospital settings has led her to be very focused on risk, and my experience of working with her outside the non-violent resistance group is that she is only satisfied when she has gone over every risk with a fine-

toothed comb and made a plan for each situation – however long that may take. In some ways this makes me wonder how she will take to a programme where she is not in the lead. However, she offers to do the relaxation exercise at the end of each session and we get to know a totally different person. Her father is also a psychiatrist, but trained in psychodrama, and has taught her many things, including relaxation and visualisation, and she is really keen to practise. Tatiana is the first person to change the lighting in the room so that the space is illuminated only by the glow from the corridor and the distant lights of London spread out like a starry blanket beneath us. I don't know why we never thought of doing this before: it is so simple, yet immeasurably deepens the experience of relaxation.

Tatiana was part of our ninth non-violent resistance group, a difficult group with some challenging parents who themselves have very challenging home situations. I want to interview Tatiana because some of her observations during the group took me by surprise. She surprises me again at the beginning by talking about her experience of feeling supported by us.

I felt very supported. I felt I could ask you questions, be very open about kind of the areas that I didn't feel confident with, and that you would listen to me and if you saw that I was struggling then you would support me, so I felt quite secure. And that was really helpful.

I haven't thought to ask new facilitators about their experience of us who have been running the groups for some time. Why did I assume that they would talk about their experience of being with the parents rather than being self-reflexive? I catch myself thinking how easily I default to an 'aboutness' rather than 'witness' position.

Tatiana adds, 'I thought it was quite fun.'

I like that! It was a really difficult group and still she says it was fun. My experience of her during the group was that she really did enjoy it. She would sparkle when talking about it. I sometimes gave her a lift home afterwards and we would talk excitedly about some of the changes that were happening. She often said how beautiful the parents looked. I ask her what she thinks brought about change.

I think having the parents as co-facilitators. So them being able to say things in a way that we were never able to say to them because it would come across as patronising. I thought that the communication between the parents brought about change much more than all the things that we could do. I think they couldn't feel insulted by each other because they all had very difficult situations so I think they learned to speak to each other in a way that they didn't feel blamed or judged or patronised. And in a way they had no choice but to accept that, because they knew that they were in the same boat together. So I think the power of the non-violent resistance group is more about facilitating these conversations between them as opposed to us giving them concepts, which are useful, but it's more about them working them out. I think that was one of the important things. And just the way that activities were organised, that also facilitated the process. Then it was just about adding small touches, at the right times, and helping them move forward in the process. So that's what I really liked about it, that it was more about backing off and not about having to intervene.

Now this is interesting because, although I agree with Tatiana, she's saying that it isn't the principles of non-violent resistance that make the difference. She seems to be saying that it is having graduate parents and parents together in a group that really brings about change. I suppose



this questions the premise that our group works because it is a non-violent resistance group; maybe it works simply because it is a group?

In the end they really take ownership of the non-violent resistance. So it becomes a part of them, it's not something that they've been taught, it's something that they live and it's a way of life. I think that's what makes it particularly powerful. And it's not so much about understanding but about actually living and practising.

She is coming back to non-violent resistance.

During the sessions I was very struck by Tatiana's description of parents looking 'more beautiful', and I ask her how this change shows itself.

They looked younger, less wrinkled, more smiles, there was a feel-good thing about them. It feels like towards the end of each session, the air in the session felt more pure and relaxed. I don't know how to define it but there was a sense of well-being, that had transpired in their whole body: the body language, as well as the facial expression, and the wrinkles.

This fits very well with my own observation. I remember a grandmother arriving one week looking so much younger that we all spontaneously asked what had happened. She told us that she had made an announcement to her husband and spoken to him about her feelings for the first time ever.

The time element is very important. They're more able to give themselves time to think and strategise. Rather than rushing into reaction and escalation.

I am interested in the notion of a model which enables us question participants about what they notice about themselves bodily, located in

space and located in time. Tatiana weaves the idea of time back into the core non-violent resistance principle of de-escalation.

I want to know about those moments in which Tatiana felt moved by the experience of doing non-violent resistance. Tatiana remembers a mother whose son was violent and psychotic.

I was moved several times. That mother of that very violent boy, the one who scared her, I felt very moved by her. I think that was a very moving moment, when we started talking about how difficult things were for them. Because of the way we do assessments here, we don't have that much time to speak to the parents on their own. And so I had a realisation that actually for them it's really terrible. CAMHS is more about the young person, and although we think about the families, actually they don't have a space to vent out exactly what is happening and they probably didn't feel able to in front of the young person for fear of a conflict. So that moved me, that ability of self-sacrificing, giving up lots of things because they think that's the best way forward. So I think that helped me develop more empathy and more understanding of what it is to be in their shoes, and I think I started looking at them and thinking about them differently.

This is a story I did not expect. It makes me think that I have not really understood before how difficult being a doctor can be. Psychiatrists have a clinical responsibility which is enshrined in law; when someone is detained under the Mental Health Act 1983 there has to be a named 'responsible clinician' who is almost always the psychiatrist. Although I also hold clinical responsibility, and would be legally responsible if something went wrong, the focus in my training is not the same. The primary duty of a doctor is to the patient. My primary duty as a family

therapist is to think about the young person in the context of the systems around them. Tatiana explains more:

For me as a psychiatrist I would think more about the pain of the young person with psychosis. I wouldn't think so much about the pain experienced by the mother. So it helped me put things into perspective. And I think I played down the pain of the parents before. I always thought, 'They're the parents, they need to do whatever needs to be done'. I think that was quite unfair actually. So that's why I was quite moved and thought, 'Wow, I didn't think I was hard, but maybe I should be more realistic in my expectations of them and be more attuned to their pain, so that I can engage with them in change.' So it was being in contact with their grief and their sense of loss, and that's not something I have been as attuned to in the past. We think, 'Well that's a responsible adult, that's a child and if the child is unwell then the adult needs to take on more things' and we don't realise that they've taken on so much already.

I experience this moment as very profound. I am impressed by Tatiana's ability to be self-reflexive. She is speaking about how being in the programme has changed *her* and this tells me something important about her engagement and humanity. She has allowed herself to remain open enough in the group to be touched and moved by the pain shown by parents, and this will make her an even better doctor.

It really fosters a sense of autonomy and agency, and they can reflect and be non-judgemental about themselves and draw their own conclusions and accept that they might make mistakes at some point. I think the group enables them to reflect and think on their own. I think that's really the power of non-violent resistance, it's, yes, they're sad that it's ending

but actually they've got all the tools to carry on their own so it might create some sort of strong relationship with us but they're not dependent on us to be able to continue. I think that's really powerful, you know. I think that's what we would aim in therapy to achieve.

Tatiana is showing me so many different sides of herself. She really believes in autonomy and not fostering dependence. Her thinking is much more nuanced than I expected. Perhaps this says more about me and my prejudices than it does about her.

So in that sense it's very few sessions with a lot of skills and strategies being put in that can be long lasting. That's something I've observed with another family. They don't always apply non-violent resistance but I think non-violent resistance hasn't been a lost cause for them because I think they have done some things. Some things have remained. Maybe not as much as we would have liked to but they have taken a lot of it on board.

We finish the interview and I turn the camera off. Tatiana stands up and puts on her scarf then she remembers something more she wants to say. She immediately sits back down and composes herself in front of the camera. I press the 'record' button and the numbers start ticking again on the screen.

Another thing I liked is that it helps people to be creative. I think that's what I liked about it as well. So I think the theory enables them to think, but then they need to find the solutions that work for them. And they need to get out of the old patterns so they're obliged to – how can I explain – the theory in itself doesn't hold all the solutions and they need to tailor things to their needs and use their own expertise as

parents. It boosted their creativity and I think they were more aware of all the things that they knew about their children and that they could use to promote change. And the power of being able to model that to your children helps you get into a really good feedback loop. What I like a lot is that they change themselves but they don't change their child, so they also oblige the child to be creative. So the child needs to make choices. Non-violent resistance gives more freedom to the child in many aspects and enables them more to make their choices as opposed to getting stuck in that same dynamic. So it's interesting, you know, what is actually meant to change the child doesn't do it *per se*, it changes the parents and then it has that knock-on effect. It's a bit paradoxical: because you sell them non-violent resistance by telling them their child is going to behave better but actually it's about them behaving better with themselves, thinking differently and then producing change.

This really captures something important about non-violent resistance. The way that we act has a significant part to play in constructing the person we want to become. If we behave well we feel better about ourselves and make a difference to who we are. It is about taking a moral position; we enhance our self-esteem and are more likely to behave well in the future because we are able to act from a more grounded place.

This interview has given me a very different picture of Tatiana. She is softer, still supremely rigorous, but creative and always thinking about how to help people become more independent so that they no longer need us. I am not sure why this has surprised me; maybe the medical stereotype is more powerful than I realised. Maybe having to be organised around risk most of the time leaves less space for Tatiana to show her creative abilities. I am left wondering what sort of a

psychodrama therapist she might be; she certainly seems to have enjoyed using action methods in the group.

Tatiana gathers up her things: it is almost ten o'clock and time for her next appointment. Her attention to detail and her professional identity shine on her skin but also run through her body like a complex web of synapses.

## Commentary – Support

Tatiana began by talking about the support that Elisabeth and I gave her as a new facilitator. When she spoke about this it surprised me, because I was concentrating on the support we give to parents; although I knew we also supported the new facilitators, I hadn't realised how important this would be for them. Support is a crucial part of the programme at all levels, so I am interested in exploring *how we do what we do*: the rituals that have developed that resonate with what seems important about the culture and life of the non-violent resistance programme.

The following describes some of the ways in which non-violent resistance principles are embedded in the way the programme happens and also in the contextual structure and content of the physical environment.

Engagement and respect for others are at the top of the agenda for the group. If parents don't feel welcome and cared about, they won't stay. It is important they experience this if they are to replicate it at home. Care for others is demonstrated in various ways which are embedded into the set-up of the group:

- There is always someone whose job it is to welcome people as they arrive.
- There is always food and a choice of drinks.
- Arrangements are made for latecomers so that they feel held in mind.
- Parents receive encouraging text messages between sessions to help them feel connected to the group.
- Every session ends with a group relaxation exercise.
- On the walls are quotations which set a tone and context for the group sessions.

Strength does not come from physical capacity. It comes from indomitable will.

Gandhi

I object to violence because when it appears to do good, the good is only temporary; the evil it does is permanent.

Gandhi

You must be the change you want to see in the world.

Gandhi

An eye for an eye will make the whole world blind.

Gandhi

Insanity: doing the same thing over and over again and expecting different results.

Attributed to Einstein

Anyone who has never made a mistake has never tried anything new.

Einstein

We cannot solve our problems with the same thinking that we used when we created them.

Einstein

We can never obtain peace in the outer world until we make peace with ourselves.

Dalai Lama



Happiness is not something ready made. It comes from your own actions.

Dalai Lama

Love is the absence of judgement.

Dalai Lama

The quotations go up each session. Parents wander into the room; sometimes they read the texts and sometimes they do not. After a few weeks they may begin to talk about the sayings that they like the most or the ones they do not really 'get'. Probably the one that most people comment on is the madness of continuing to do something again and again that doesn't work, and expecting change. This strikes a particular chord with parents who, when a sanction fails to produce the right result, have tended to impose more sanctions. The end result is a child who has lost all their possessions because of bad behaviour and now has nothing to lose.

After the group has finished, the non-violent resistance team creates the sense of an ongoing community and a network of support. Research shows (Weinblatt and Omer, 2008) that although at follow-up parents' reduced levels of distress and improved sense of being able to manage are maintained, their sense of being supported drops off over time. So a number of things are put in place to maintain levels of support:

- Parents continue to receive texts after the group has finished, with news about forthcoming events and parent club meetings.
- Graduate parents run three parent club meetings a month which anyone can attend.
- Anyone who has ever been part of a non-violent resistance group receives a quarterly newsletter. The newsletter is written predominantly by graduate parents.

- Parents are welcome to become involved with the development of the project in any way they like, and many take up this offer.

Parents who become involved can do various things:

- On interview days parents provide an opportunity for prospective participants to have a chat over a cup of coffee to find out what it would be like coming to a group.
- Parents become mentors for others and are supported in this.
- Parents speak at conferences and events as equal participants with clinicians.
- Parents are members of the non-violent resistance steering group.
- Parent facilitators attend group supervision sessions.
- Parent facilitators have NHS honorary contracts.
- Parents have completed their own book of parent testimonies.
- Parents have been interviewed for a prospective television programme.

Facilitators learn about the programme by participating as trainees. This is a time honoured KCC way of learning which has its origins in the ideas of Dewey (1934), Schön (1983) and Vygotsky (1978) and mirrors those architectural practices in which trainee architects learn by working on real projects in the studio. Facilitators and parents learn alongside one another and model how support can be provided in a non-judgemental, participatory and respectful way.

About a quarter of graduate parents show an interest in becoming involved after they complete the programme and half of those will go on to register and fill in the application form. There are currently twenty active graduate parents, five of whom have been active for over four years. Active parents facilitate, present and support. An equal number attend the monthly parent club. Everyone receives the newsletter and texts reminding them about activities.

## Session 10

### Topic: Siblings and looking after yourself

In this final session we summarise what we have covered in the programme and pay particular attention to the experience of siblings.

Brothers and sisters can be the target of aggressive behaviour and bullying. They may also be subject to sexual abuse and exploitation. We focus on helping parents give their other children a voice so that they can speak out about their experiences and feel protected. Supporters can play a key role in making a difference to the child who is the target of abuse.

Elderly and vulnerable people living in the family home may also be at risk of violence and financial exploitation. Breaking the taboo of silence creates an opportunity to take action and change things.

Finally, we work with parents to think about how they will look after themselves. They explore the ways in which they already make time for themselves, and extend and develop their thinking about this.

We ask parents to close their eyes and think back to how they felt when they started the programme, to get a real feeling for that embodied emotion. How do they feel now, what is different? How and where do they feel those differences? Which parts of the body still hold on to difficult feelings?

We end with the loving kindness meditation – an exhortation to love oneself and others.

Picture 10

Figure 31: Picture 10



The resonant words are:

- ❖ learning
- ❖ determination
- ❖ acceptance
- ❖ love gestures
- ❖ reconciliation
- ❖ communication
- ❖ sharing
- ❖ strength
- ❖ ending
- ❖ not ending
- ❖ laughter
- ❖ patterns

## Making picture 10

I am in conversation with Gina Medcalf, a painter, while I make this picture.<sup>12</sup>

I explain that I have thought of making pictures in this way in order to do something fairly immediate, something that gives me a sense of overlay and transparency without my having too much control over the shapes; that is why I tear them.

I begin with an orange strip down the middle and Gina asks if they all start in the middle? I do not seem very sure, except that where I start is intuitive.

I explain how we come up with the list of words and Gina asks about 'ending/not ending'. I explain that tonight was the final session but the parents said they did not want to end, so they are going to meet again next week.

I use two strips of the same yellow in different places and Gina asks if it is the same colour: it looks quite different because of the context.

There was something very generative about people tonight. It was fun. People were mostly having a real laugh at the beginning, saying how much they have got out of it.

I lay a slightly wider pink strip to the left edge of the centre colours and Gina says she loves it when one colour overlays another. I like it when the colours bleed into one another (see figure 32 on the next page).

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<sup>12</sup> Gina Medcalf, born in North Wales, lives and works in London. She graduated from the Central School of Art and Design in 1969. From 1973 to 1986 she lived, worked and exhibited in the USA. A Senior Lecturer at Kingston University from 1994 to 2006, she is currently Associate Lecturer in Fine Art at UAL, Chelsea College of Art and Design.

Figure 32: Detail of colour bleeding



I tell Gina something I have noticed about the art work: although it has been the same method of torn strips each time, it has changed over the ten weeks and become much more rhythmical.

G: It's interesting that there's been this flowering with your doctorate.

L: Yes, I think it's very exciting! I've really enjoyed it.

G: It's going quite fast now.

L: It sort of speeds up and then you get the overlaying coming in. But I'd like to find some way of keeping the sense of tension with the edges.

G: You mean maintaining that, somehow, when that layering happens?

L: Yes, maybe I need to just take a section and expand it in some sort of way?

Gina suggests it is easy to take something too far; someone should stop you long before you get there. I say that I felt that about putting the

words on. I stencil on the words generated in the post-session once the painting is dry. It felt like a good idea at the start, but now I have begun not to want to interfere with the surface. However, I think the words are important and I want to get them into it.

Gina asks if the painting has any feeling of the session for me right now.

It doesn't, quite, yet.

There was something really cohesive about the way all those mothers worked together this evening. And there was one who has got a lot more personal difficulties than the others. They have all got problems but hers are more apparent. It can be difficult having someone in a group who needs to talk a lot, because you have to ensure everyone has enough space. The others were quite challenging. We always do a bit in the last session on looking after yourself, and they were saying, 'You know, you aren't looking after yourself' and then she would talk about her child and they would say, 'You're not looking after yourself. That's not talking about you; you've got to look after yourself.' So they work really interestingly together and I want to capture the feeling of that warmth. I think they all hoped she would not come tonight, but she did, and they were able to welcome her and support her, even though they knew that would make the session more difficult for them.

G: And did you have any feelings about that? Would it have been an easier session without her?

L: It would have been different. In some ways it would have been easier, but maybe having her there led to more discussion.

G: Now this is very literal, but I do think it's quite funny, that the main element in a way is glue.

L: Well yes, mm, that's interesting isn't it? Yes it is, it's glue! There is something about gluing people together.

G: Well you chose the method!

L: I did quite a lot of drawings beforehand, and was thinking about how to make something that was a visual way of describing the group. I kept finding that all I ended up with was shapes, sort of boxes, and there was nothing that didn't have edges round it, and although this has got edges to the canvas, I don't think they limit the visual impact.

G: I was just watching you going through all these pieces of paper, choosing the colours, making the shapes, carefully, and gluing them into place in a very deliberate way!

L: There is something about the care with which we work with people. (I glue a wide pink strip slightly to the right of the centre).

G: Well, it's taking shape, isn't it!

L: It's good because then it turns into something different – it keeps changing. But there's something that I'm not quite sure about, about the edges – it's almost as if there are too many edges.

G: You've still got your starting point – still absolutely there.

L: Yes, and still with that white edge

G: Totally visible, all of it, isn't it, the starting point?

L: What I've done with some of the others is put bits going across, but there's something about the way people are working together that doesn't invite that any longer.

G: The counterpoint of it you mean?

L: Yes, it feels quite different.

G: It's such a pleasure, too, to do repetitive things, like the cutting of the bottom and putting the bits over on the right, here. It's such a pleasure to have a procedure like that.



L: Yes, I find it very calming after the evening. Because there's a way in which it transforms it too. It makes it into something different. I've noticed that now I am more likely to respond to things in a visual way.

G: Whereas previously words had supremacy?

L: Well, systemic therapists use words a lot. We have this idea that words create meaning and that the words you use and the stories you tell create new and different realities. So if you help people tell different stories about their lives, it's creating alternative and new identities for them. In helping people notice the things they do well, and working with them to do things differently, you create a new narrative and in that way you change things. Hence the graduate parent movement, which is not only about creating new narratives but creating new opportunities for people who haven't been particularly successful before. We value graduate parents in the same way as we would value one another; we're not the holders of the expert knowledge.

G: No, but you are the authority, finally, aren't you?

L: Not necessarily, no, what we try to do is bring something to people that we can work collaboratively on. With each group we've had parents who have come up with new ideas which we've then incorporated into the programme.

## Narrative portrait 10 – Gemma: the mother

Gemma is small and bird-like, with a mass of curls that tumble round her face. She has a large, close family, but found it hard to tell them just how bad things were at home.

Gemma is talking to Wendy. They are making a film that we can use to bring their voices and stories into the room when we meet with prospective group members. The filming takes place in one of our community bases, part of an old, mostly demolished, hospital complex. There has been so much redevelopment on the site that now the house is at the end of a cul-de-sac, and if you didn't know it was there you would probably miss it.

Gemma begins by explaining a little about how she got involved with non-violent resistance. Her son Jack had had problems from an early age and is now seventeen. Over the years the family had been seen many times by different professionals. When Jack was little, Gemma had been encouraged to use behaviour modification: star charts and rewards. Later, the family had family therapy sessions. Gemma never told anyone that Jack was increasingly violent after these sessions, punishing his mother and sister if they had said anything out of place. A colleague remembers seeing Gemma in the corridor back then, head down, cowed, fearful and apologetic.

He was very violent. It was like living with a violent husband, he took all the control in the house and as a parent I didn't have any say, he just ruled the house. He would lock me in my bedroom and hurt his sister.

Figure 33: Jack punching his sister



Things at home get so dangerous that social workers threaten to take the little girl away if Gemma cannot protect her. When Gemma starts the programme she is quiet and hesitant. She doesn't believe it will make any difference and cannot think how she will ever stand up to Jack. Over the weeks she becomes more confident and begins to look more hopeful.

Once I done the non-violent resistance I learnt to de-escalate the situation so it didn't always be anger and anger at each other and flare up. So that was good the de-escalating. And the baskets was good for me as well because I had so much problems with my son with the violence and just attacking me and my daughter and the cannabis. It made me prioritise them and put just two or one into the small basket. So I was able just to focus on the one problem rather than them all in one go.

Figure 34: Jack suffocating his sister

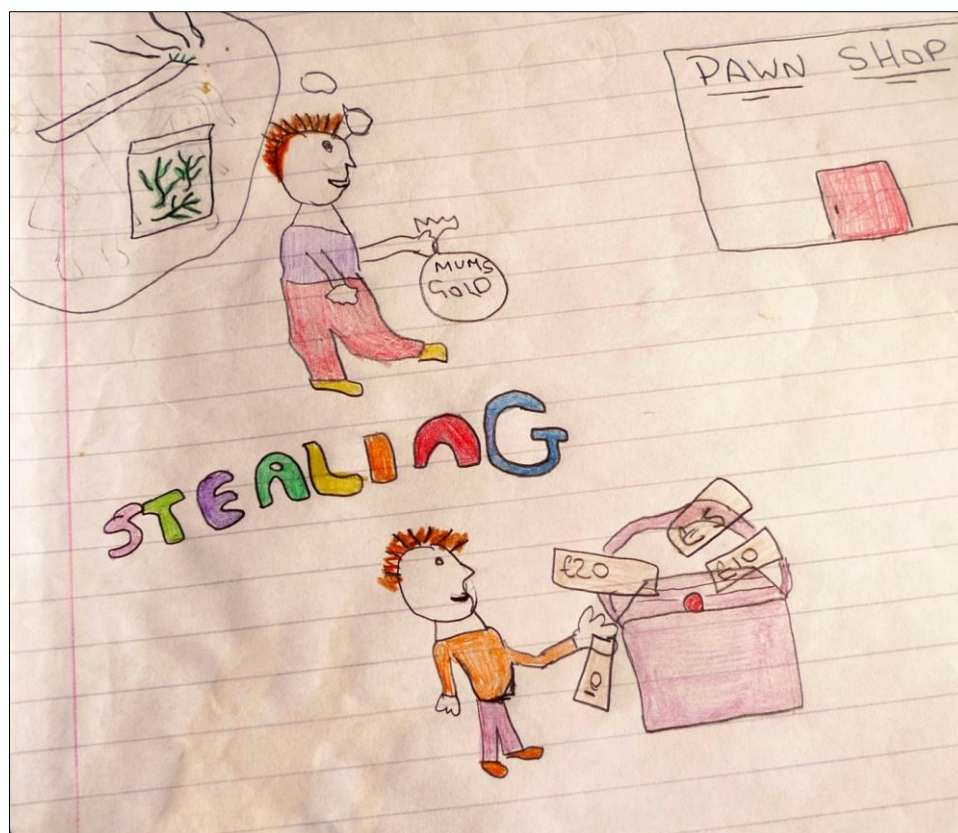


Gemma's first task was to decide what to focus on. Even describing this process from a position of newly acquired confidence, she underplays the level of Jack's violence towards her and her daughter.

Stealing and violence, being violent, that is smashing the walls. They was my two that I put in the basket.

I did want to put the cannabis smoking in my little basket, and I couldn't understand why they were saying, don't put that in the small basket. 'Cos that was my top priority, to get him off the cannabis, and to me that was the one thing that was causing all that anger, all the stealing, it all revolved round the cannabis. So that didn't make sense to me to not to put that in my small basket. As time went on I noticed that the non-violent resistance was right. I couldn't do anything about the cannabis but I could put a stop to the violent outbursts and the stealing. So that's what I focused on.

Figure 35: Jack stealing



Jack stole money from Gemma and her daughter; he took jewellery and other items they could ill afford to lose. He pawned their possessions for cash to buy drugs that he could sell.

Up in the left corner of this drawing you can just see where Gemma's daughter originally drew herself and her mother holding hands, looking on sadly as the young man takes what he wants.

Although she finished school, Gemma didn't find it easy. Putting her thoughts into words was a struggle. Finding the right words to describe where you stand is hard for most parents, but it is the first step to making a change. Parents who come to non-violent resistance have ambivalent feelings about taking a stand. They have a plethora of emotions: fear, anger, hurt, guilt, desperation, sorrow – all these feelings war with one

another, tugging parents in different directions and making it hard to take a position which feels strong and grounded.

I don't know if I had trouble with my son because I brought him up on my own. I felt too guilty. Every time I did give him a punishment when he was younger, I was always riddled with guilt and then I would back down and give in. And that's what I've learned from the non-violent resistance, that if you're suffering with guilt with your child then you're wasting your time.

Gemma went to her mother for help with writing her announcement.

I knew what I wanted to write in the announcement but I couldn't put it down into words. So I did go to my supporter, which was my mum, and she helped me with that, but I did find that very difficult, to put it into words.

Gemma writes her announcement out as a commitment to herself and the stand she is going to make. She sticks it inside the door of her wardrobe. Each day she looks at it and it reminds her to stay strong, that she is resisting her son's violence and stealing. It is a long time before it is safe for Gemma to make her announcement to Jack and then she does it in a note left on his bed.

Much to her surprise Jack's cannabis smoking decreases, and although it doesn't stop completely it seems it no longer triggers rage and violence.

I didn't keep on at him any more and he has just stopped the cannabis. And just things are a lot better round the house. He doesn't go for his sister any more. Because he has a lot of jealousy with me and his sister because she's special needs.



And I used to spend a lot of time with my daughter. It was like he had this thing that I was all for his sister, but I wasn't.

Figure 36: Jack punching the wall



Jack targeted his sister, punching her and calling her hurtful names.

Figure 37: Jack calling his sister names



Gemma reflects on how she herself has changed.

I was scared of my son. I wouldn't have gone into his bedroom. I wouldn't have done a sit-in, I wouldn't have done half the things because I didn't have that positive attitude. I was so jealous of other mums because they had the perfect son.

Gemma's voice is very strong. This is an important message she wants to get over. Feeling guilty because she was a lone parent impaired her ability to set boundaries for her son. Now she believes that she has the right for things to be different and for all three of them to be happy.

The reconciliation gestures brought me closer to my son as well. Once I got to that bit, because even though he might be giving me some bad attitude, I was still there as a parent, I was still showing him I loved him as a parent. Just from little things, that I might text him, 'I love you' or something, just little things. Or say to him, 'Got a DVD if you want to sit and watch it tonight.' And it sort of included him back into the family, because before he was always out in the street. I never used to see my son.

Gemma's lip trembles and her voice is wistful, remembering a time when she hardly saw Jack. Then it strengthens again.

I don't feel downtrodden now. I feel like I've got more parent presence in the house. And I've got a much better relationship with my son.

Gemma beams into the camera and giggles, as if she has discovered something that she never expected to find and didn't really deserve to have. She bubbles like her mass of cascading amber curls.



I feel like I've grown up into a mum [her face lights up and she leans forward]. After all these years I feel like I'm finally there. And I do feel like I've got all the parent control now without having to shout, without having to ground anyone. It's really a nice feeling.

Finally, Gemma reflects on how being a graduate parent facilitator and conference speaker has affected her.

I would say it's made me more of a positive person, and more self-aware, more confident.

Figure 38: Parental presence outside the home



'I am always with you!'

I show this interview to my team as part of a presentation on non-violent resistance therapy. Several of them have tears in their eyes, and so do I. Experienced clinicians are moved by Gemma's testimony. I want to say 'hardened clinicians', but that might imply we have lost our sense of immediacy and engagement with clients, which is not true. What is true is that we hear dreadful and traumatic stories every day, and that experience wears you down. We do not often hear parents articulate this level of authentic transformation. Gemma is radiant! I wonder if talking to Wendy, another parent, rather than one of us makes a difference.

Figure 39: Our home now



## Commentary – Voice

A voice always has a will or desire behind it, its own timbre and overtones.

Bakhtin (1981, p 434) emphasises the importance of finding one's own voice.

In the group programme parents find their voices again: calmer, more loving tones. Gemma's portrait shows how she found her voice as a mother, having never had this before. It also beautifully illustrates the powerful voice that her daughter developed in the process. A young woman with a learning difficulty and selective mutism used drawing to convey her lived experience and the concepts of non-violent resistance.

Figure 40: Heartbreak



The voices of graduate parents are authentic, based in experience and conviction. Their voices lead the way and move parents forward. Facilitators model a stance of openness. Their voices embody hope and hold this for the group.

Much later, Jaakko Seikkula introduces me to the work of Trip Quillman. It provides a different way of thinking about the moving quality of voice that I had observed. Quillman's (2011) exploration of the attunement of the relationship between therapist and client shows that clients respond more to how the therapist says something than to what it is the therapist says. Quillman's work, which looks at autonomic nervous system responses, highlights the importance of prosody (pitch, rhythm and timbre), body posture, gesture and facial expression.

This research process has also been about me finding my own voice. Each time I have to account for what I am doing, my voice grows richer and stronger. There are times when I feel uncertain and unsure and my voice wavers, but this enhances the range of pitch, tone and modulation.

## Session 11 – The review

Topic: Follow-up, learning, evaluation and certificates

The review session brings parents back to reconnect with the group and share stories about their progress and challenges. We celebrate their achievements and hand out certificates.

We invite them to reflect on their journey and think where they want to go to next. This includes asking them whether they want to be involved with future projects as graduate parents.

We ask parents to complete the same set of questionnaires that they filled out at their original interviews. When they have finished, we give them back copies of the answers they gave four months previously, and ask them to compare the results. This gives them a concrete way of seeing how they have changed. Almost all parents will find things have improved. For one or two, things will remain the same, or may even have got worse. Even then, parents generally feel more able to cope.

One of the graduate parents tells the group about the parent club which is run by parents and provides ongoing support. The session often ends with food brought by participants, like this celebration cake with the words 'Thank you' written on it.

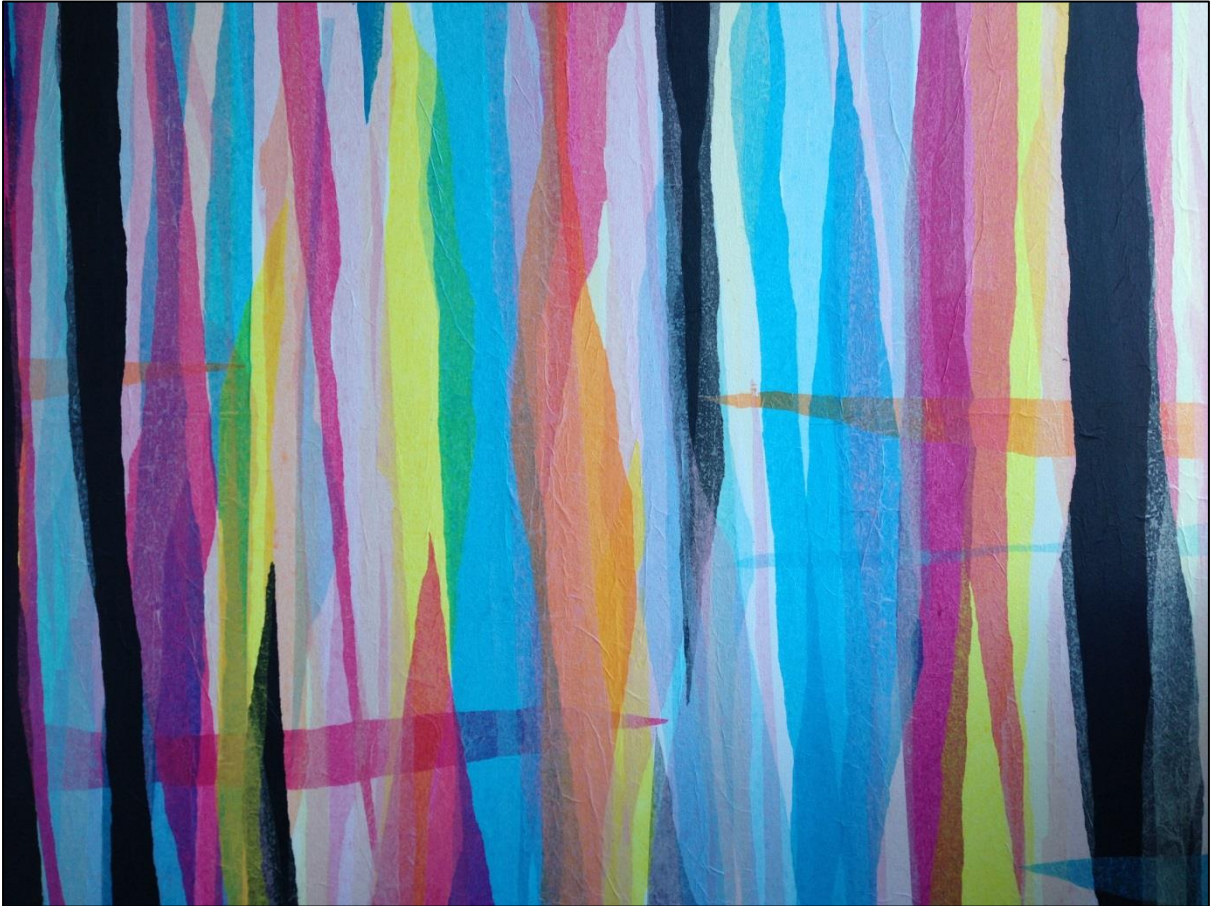


Figure 41: 'Thank you' cake



Picture 11

Figure 42: Picture 11



## Making picture 11

I am on my own when I make this picture.

It is a beautiful summer's evening. To make this final piece I have bought a bigger canvas (40x30 inches). There are no words from facilitators.

Reflecting on the whole process is quite a different thing to do. The piece of work is like a meta-image: it draws on my experience with this group and my participation in previous programmes. It is an immensely peaceful and expansive thing to do. Perhaps the larger canvas size invites me to make bigger sweeps of colour. I have a new camera and can record for longer; I don't feel constrained by time. Also, very importantly, I am making this piece at a weekend, during the day, in the light. The previous pieces were all made in the evening, by artificial light, after a long day.

The room is light and airy, the paste is cool, and I work rhythmically. The brush feels as if it is part of my arm.

I try to connect with all the aspects of non-violent resistance and let myself respond to the feeling. The finished piece is cool, blue and light, with areas of warmth and depth.

## Narrative portrait 11 – Myself: the portraitist

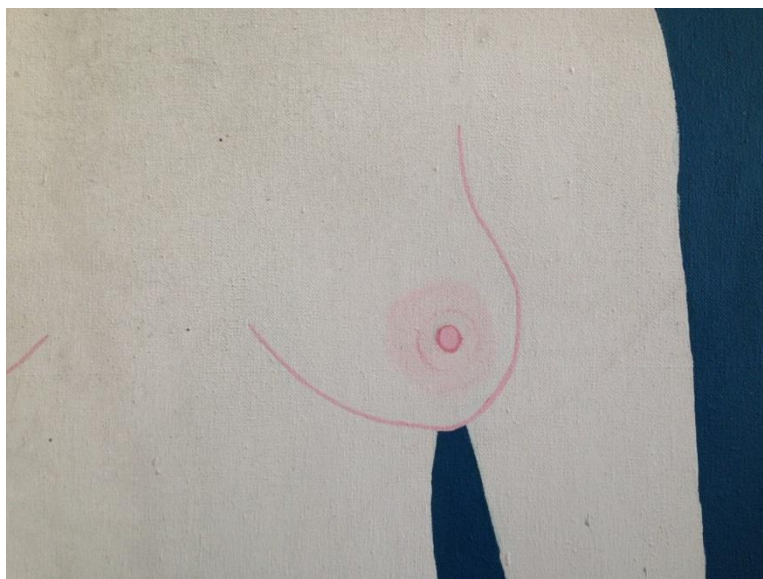
Most artists make self-portraits. There is an irresistible urge to see beyond the image in the mirror, beyond the two-dimensional photograph; to be looking in this way and gazing into the eyes that are doing the looking. In this activity there is a strange oscillation between observing and observed positions, a double description (Bateson, 1973).

I wonder how to make this self-portrait. Should I look in the mirror? Previously I have done it that way. I begin with some self-portraits from long ago. These are part of what Lois Holzman (2005) calls a life (story) of becoming.

### Self-portrait 1

1970. I live at home with my parents. The canvas I am working on in my bedroom is divided into three panels. Each has a view of the middle section of my body, starting mid-thigh and ending at my neck.

Figure 43: Self-portrait 1 - acrylic and emulsion on canvas



I have painted the background with the same emulsion I used for my bedroom walls. The blue is dark, flat and dense. My body is just an



outline. In the first section I am naked except for a pair of DayGlo striped pants - we are just emerging from the sixties after all. The other sections are similar, but the colour of the pants has changed. I am working in the pop art studio at Chelsea. Patrick Caulfield and Allen Jones are among the tutors teaching in the studio and I can see their influence.

I am fascinated by those renaissance paintings in which several views of the same event are portrayed on the canvas simultaneously. There is something about my identity which is multi-faceted, and I play with the images of myself. The painting is never finished, but even forty years later it remains fresh and alive in my mind.

## Self-portrait 2

1974. I am married and sitting in the small kitchen of a flat in the Barbican. We are the first occupants. It is early in the development and most of it has not yet been built. A photograph taken in a photo booth is propped up in front of me. I am working in oils on a piece of MDF. The surface is white and smooth. My palette is Payne's grey and titanium white. I am wearing an imitation military jacket. On the lapel is pinned a badge from the recent Russian exhibition in London. I place myself on the right of the board. As the picture develops I begin to play with image and text. I stencil the words 'self-portrait' into the space on the left. My face looks so white. Like a death mask. I feel dead behind my skin. I begin to stencil the words 'death mask' but in the moment of stencilling I change the spelling of mask so it becomes 'masque'. After all, this is a performance, a masquerade. I like the way I have painted my hair and I like the text. I am less sure about my nose and mouth; I work on them but can't seem to get them right. My eyes are very dark; the pupils are like deep glassy wells.

Figure 44: Self-portrait 2 – oil on MDF



### Self-portrait 3

I am standing in the living room of the flat later the same year. It is evening and already dark outside. I am dancing on my own to a track by Andy Fairweather-Low, 'Standing on the water'. The words resonate with the feeling of the moment. I play it again and again.

The lights are switched off, but my shadow flickers against the white wall, illuminated by the orange glow from the city outside. My shadow appears twice. One shadow overlaps the other, creating darker more solid shapes between. The balcony rail outside creates a horizontal bar across the shadow forms. I stand mesmerised for a while, then get a pad and start to draw. The double shadows and the cross sections resonate with how I am feeling about myself at the moment. I am struggling to make sense of my life and feeling suffocated in a strange and unpleasant sort of marriage. Later the sketch becomes a painting, Payne's grey and opaque oxide of chromium.

A few months later I leave and never go back.

Figure 45: Self-portrait 3 - oil on MDF



## Self-portrait 4

This is about me now. I consider the different relationships in my life and work.

It is like sweeping a telescope across a field of vision. Areas swim into focus, then recede, as my eyes scan across the landscape, pausing, sharpening the focus, moving on again. I choose four relationships to write about that seem most current. They are interlinked.

- Relationship 1 - non-violent resistance therapy
- Relationship 2 - painting

- Relationship 3 - the exhibition
- Relationship 4 - No To Hate

## Relationship 1 - non-violent resistance therapy

Non-violent resistance has become central to my life. It is more than a way of working with families. The principles permeate everything I do. I suppose it has a good fit with the sort of person I am. Escalation is not something that I have ever enjoyed, nor am I very good at it. If I do escalate, it is usually because I am over-tired or feeling unwell and my tolerance threshold is lowered. It does not last long.

The non-violent resistance parent group programme is such an exciting and exhausting endeavour. It has a developmental life of its own. Each session of each group is different. It is like trying to stay connected with a fierce, strong-willed horse. Clinging to the saddle demands total concentration and afterwards my muscles feel like jelly but I am exhilarated and energised.

Non-violent resistance is more like a movement than a clinical intervention. What we achieve in partnership with parents has gone far beyond our expectations.

## Relationship 2 - Making the non-violent resistance series of paintings

I get home about 8.30, have something to eat, then clear the dining room table and cover it with a sheet of plastic. I pour myself a glass of wine. This making the space is calming, mind clearing. I feel myself settle in my body. I fetch the big box of tissue paper and position it on the left of the table. I make sure I have single sheets on the top so that I can choose colours without having to rummage through the box.

I place the clean white canvas on the table. I take a deep breath.

I take out the list of words generated this evening by the facilitators and place it to the right of the canvas.

I pour some PVA<sup>13</sup> into a container and take it into the kitchen. I slowly mix some water into the glue until I have a thin syrupy liquid. I take it back to the dining room and load my brush.

The white space of the canvas beckons me. I hesitate, then it is like plunging off a diving board. It has started and I am away.

I begin by brushing a thin coat of PVA over the canvas. Then I look at the words. I try to connect to them and feel the weight of the evening in my body. I look at the tissue paper. I choose colours instinctively, without thinking too much. I let my body lead the way. I tear the paper. It tears vertically into long, uneven strips. Sometimes I make thin strips, sometimes they are wide, jagged, torn off. It is hard to predict how they will take shape. I work quickly, building up the layers, adding more PVA on top of the wet tissue, brushing it in to form part of the structure of the canvas.

The rhythm of the brushing is calming, cool, and meditational. I lay the torn paper into the wet PVA, running my thumb down the length of the strip to set the tissue into the ground. As I work, I decide whether or not to scrunch the paper, to tear it a little, whether to run it right up to the edge of the canvas. These are aesthetic decisions, led by a feeling about what is right rather than by thought. Some of the darker colours bleed into the medium, creating pictorial tension. The paste is cool. I work on until the piece feels finished. It resonates with the evening.

I feel calm, empty, surprised by what I have made. When the canvas is dry, I stencil on the words.

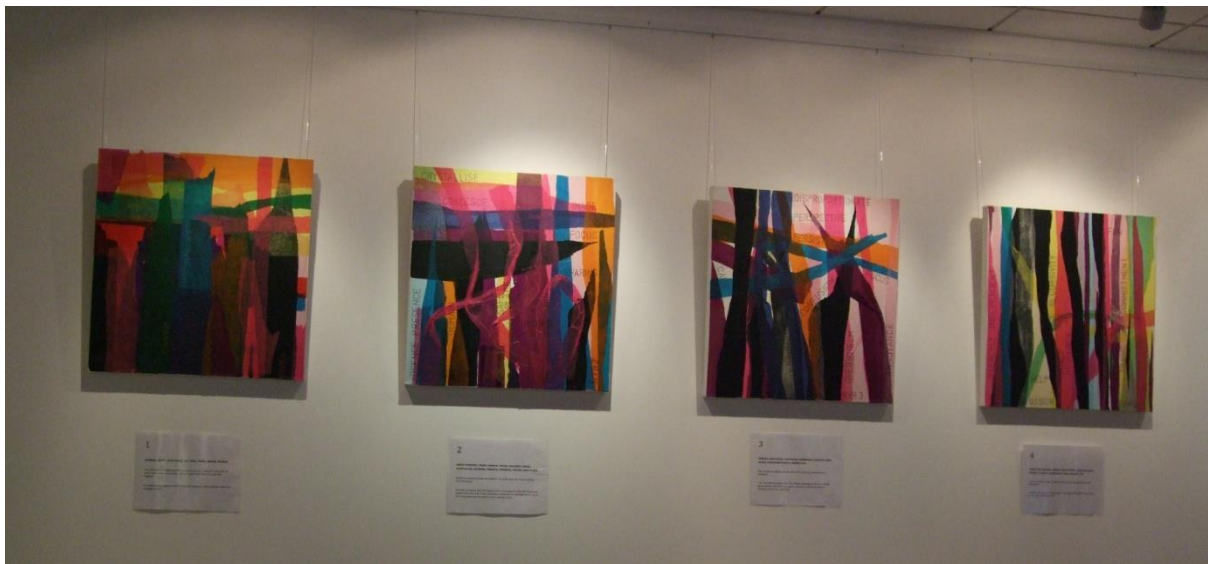
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<sup>13</sup> PVA stands for polymer vinyl acetate - a medium used with acrylic colours, but also a glue which can be mixed with water.

### Relationship 3 - the exhibition

Woolfson and Tay is a bookshop, café and gallery in Bermondsey Square. I sit in the café section with a pot of tea, writing in my notebook. The exhibition in the café space is my work! I am so excited that it is hard to breathe. I gaze round the walls. The paintings shine like jewels in the spotlights. Customers say how uplifting they are. The owners say the staff have a spring in their step: the previous exhibition was rather sombre.

Figure 46: Exhibition at Woolfson and Tay



When I embarked on my doctorate I never imagined I would end up doing this. There is even a poster in the window advertising the show.

I organise three events during the fortnight that the show is on: an opening event which is mostly for people who might be interested in the pictures, a non-violent resistance event which is mostly for parents and clinicians, and a *décrochage* (taking down the exhibition) which is for friends, and anyone else who could not make the other two events. My partner and I have been together a long time but have never celebrated

this. The final event is a celebration. She presents me with roses and says how much she loves me. I am taken by surprise, and everyone applauds.

## Relationship 4 – No To Hate

It is Friday 30 April 1999; early evening at the start of the Early May Bank Holiday. I turn on the television to an incredibly confused scene: smoke in the air, glass and rubble on the ground and people standing looking dazed. A man sits on the kerb with his head in his hands; blood runs down his face. Men stagger away from the blast clinging to one another. A chill runs through my body. I know immediately what this is. This is Soho. These are gay men. This is a bomb. This is the third nail bomb; the others were in Brixton and Brick Lane.

I am often in Soho at weekends, often in Old Compton Street on a Friday where the Admiral Duncan Pub is. I know instantly that someone hates us/me for who we are and that they hate us enough to want to kill us.

The following year I meet someone whose partner is a doctor treating people injured by the Soho bomb. The bomb was a 'dirty' bomb – up to 1,500 four-inch nails and bits of rusty metal, mixed with animal excrement. Wounds do not heal, will not respond to treatment; four survivors have had limbs amputated. The bomb was coated in hatred.

The three bombings took place on the 17<sup>th</sup>, 24<sup>th</sup> and 31<sup>st</sup> of April 1999. Ten years on, in early 2009, a group called 17-24-30 No To Hate is formed to remember the bombings and to fight hate crime. A few months later, in Duncannon Street, which runs alongside South Africa House and into Trafalgar Square in Central London, a gay man called Ian Baynham is verbally abused and physically assaulted by two teenage girls and a twenty-year-old man. Ian Baynham dies in hospital. No To Hate is still at the stage of planning its activities; but in the space of a few days, through Facebook, it organises a vigil in Trafalgar Square. Many thousands of people attend.

I coordinate the support team for that vigil and subsequent ones.

Stuart Milk shakes my hand. Harvey Milk's nephew is so tall. He looks pale and vulnerable in the bitter cold as he waits to speak. The family and friends of Ian Baynham talk quietly together. Sue Perkins reads the names of those who have been killed; the list seems to go on and on. As she leaves the stage she is in tears. Sarah Brown, wife of the Prime Minister, walks up from 10 Downing Street and brings a candle which she places with the others. People hug one another.

We deal with a man who was assaulted some years ago. He never felt able to report it, but tonight has changed that for him. Someone writes down the details of the attack.

In non-violent resistance therapy and in No To Hate, people come together in a group to make something different happen. Both movements are about resisting violence and enlisting supporters to achieve this aim. Both movements aim to repair relationships. The candle-lit vigil in Trafalgar Square has speeches and music but is primarily a silent event; this resonates with parents making an announcement to their children but then remaining silent. The core of the announcement in both campaigns is that violence will no longer be tolerated.

Non-violent resistance and No to Hate *feel* similar: each invites a particular kind of engagement and commitment which goes beyond the group/event/principles in a way which is hard to put words to. In both there is a sense of being carried away by the power of the unfolding process; what Peirce (1906) quoted in Agar (2006) calls 'abduction'.

The sum of what we can achieve together is far more than what we each contribute. Hope is the cornerstone of a better future.



## Commentary – Love

In their paper *Healing elements of therapeutic conversation: dialogue as an embodiment of love* Seikkula and Trimble (2005, p 473) identify particular therapeutic elements that facilitate healing.

Certain experiences have come to mark for us turning points in the healing process. They include strong collective feelings of sharing and belonging together; emerging expressions of trust; embodied expressions of emotion; feelings of relief of tension experienced as physical relaxation; and, perhaps surprisingly, ourselves becoming involved in strong emotions and evidencing love.

Seikkula and Trimble are describing the qualities that make the Open Dialogue approach (Seikkula and Olson, 2003) work so well, but they might be describing the non-violent resistance therapy programme. Love may not be enough, but it is central to the posture that we need to adopt.

Learning to recognise tension held in the body, and how to relax, is new for many parents, who appreciate the time spent at the end of each session doing a mindfulness exercise. Connecting with your emotions in a reflective rather than a reactive way opens up space and provides moments of relief.

Working with an adoptive mother whose son is violent towards her, the team noticed how engaged the two therapists were, how connected, as if we were working alongside her. We noticed how we shared her emotions, how she began to trust us and how we spoke of courage and love. The quality of our engagement when performing non-violent resistance was different from our engagement with the other families we saw that day: closer, shared, connected.

## Part 4

### Discussion and reflections



Figure 47: Reconciliation

## Introduction to part 4

This final part of my dissertation is a reflection and elaboration of my learning. It has been the hardest part to write. The content does not fit easily into the format of the usual discussion and findings section because my ideas emerge in the process of writing, never fixed, always evolving.

Submitting my dissertation is a punctuation in the living activity of research, a cairn built as a way-mark on a wandering, wayfaring journey (Shotter, 2012a) through a landscape of practice. Not an end but a beginning.

When I first began to think about doing research I started by drawing images; I needed to conceptualise what research might look like and the best way for me to do this was to pick up a pen or pencil and draw. I started with a group of solid, cube-like shapes with different layers (which I now see as representing Seikkula's (2014) horizontal and vertical polyphony – the melodic story weaving through and given depth by the harmonic resonances). I moved on from those too-solid, rigid shapes to something more organic and flowing. Here I took the more organic work that I ended up making and sliced through the various layers to create another way of looking at the process.

The power of the portraits to move me has in no way been diminished by the task of writing, rewriting and editing. The writing *into* them, the *reworking* has refined their intensity for me. This is an interesting aspect of the research and in particular its performative aspects. Each time I write it is in some small way a performance. There is no tangible audience, but I cannot write without becoming emotionally engaged and as I write I always have my audience in mind. My intention is to bring the voices in the portraits alive so that they become three dimensional: the portrait communicates the tone, texture and colour which is then

presented in counterpoint to the visual portrait. These are not only portraits; they are performances.

## Chapter 12

### Discussion and reflection on the rich portrait and the process

When I set out on my research journey my aim was:

to explore the special strengths, qualities and relationships within the non-violent resistance therapy group programme in order to understand more about how it works.

Within this aim my objectives were:

- to listen for the stories of participants
- to listen for the stories of facilitators
- to pay attention to the diversity and richness of stories lived and told
- to research from within the programme and the practice rather than by taking an observer position
- to create thick descriptions of stories of the group
- to develop creative ways of performing research
- to do justice to the experiences of participants and facilitators
- to keep the reader in mind and to communicate from a position informed and led by practice

- to write in a way that makes my work accessible to the widest range of readers possible without compromising the academic requirements of a doctoral thesis
- to contribute to the field of systemic practice and research.

In order to fulfil my objectives I created the idea of a *Rich Portrait* and then made one in order to bring my practice to life.

## Resonant themes

During the process certain themes emerged in relation to the group and I have incorporated some of these back into the commentaries which provide a bridge between the individual portraits. It is not my intention to privilege repetition or to assume that a story told more than once has more significance than a unique story. All stories and story tellers are unique (Anderson, 2012), but there is a sense of a coming together and familiarity in some of the themes which connects back into non-violent resistance therapy. They resonate with the turning points in healing identified by Seikkula and Trimble (2005. p 473):

strong collective feelings of sharing and belonging together;  
emerging expressions of trust; embodied expressions of  
emotion; feelings of relief of tension experienced as physical  
relaxation; and, perhaps surprisingly, ourselves becoming  
involved in strong emotions and evidencing love.

### 1) Hope

The Latin American parents identify the importance of hope when they say:

You have given us back hope.

Facilitators mention hope as one of the resonant words in session 4 of group 5 and sessions 5 and 8 of group 9.

When I make the pictures, the feeling of hope is alive and embodied for me in how I place the colours in relation to the space.

When I listen to Gilda speaking in Spanish, I get a real sense of how she uses voice, cadence and tone (prosody) to embody hope, to carry parents forward to a more hopeful place.

Michelle describes something similar when she says of the group

So it feels humbling, it feels like it's definitely got a life and it's got a core of truth.

There is something noble in this movement towards relationships which are more ethical and generative.

## 2) Transformation

There are many examples of ways in which transformation is experienced.

Jane speaks about her own personal transformation.

I do believe in non-violent resistance because it really did change my life. I am a different person. I couldn't see the light at the end of the tunnel at all before and even if something had changed I was so pessimistic I always expected things to fail. I've completely changed my outlook. I have literally gone from half empty to half full now. I've never, ever been like that at all and it's changed me as a person completely.

Ann and Pete describe how one of their cats has sensed the difference in their son John and has begun to trust him again.

One of the cats used to run a mile if he even saw John coming his way. Now that cat jumps on his lap, runs up to him when he gets home, huge change, huge change.

Jane describes the change in her relationship with her husband when she excitedly tells us all that they booked into a hotel in London and celebrated their wedding anniversary for the very first time.

Well, we never had anything to celebrate before.

### 3) Embodied transformation

Gilda and Tatiana describe their perception of how change is embodied in the way that parents look.

Gilda

At the beginning they came all grey, no smiles, just tears. Not really wanting to talk much, not really wanting to share much. And slowly, half way through, their faces started to change. So when I saw their faces change then I felt like they started to really believe in the project.

Tatiana

They looked younger, less wrinkled, more smiles, there was a feel-good thing about them. It feels like towards the end of each session, the air felt more pure and relaxed. I don't know how to define it but there was a sense of well-being that had transpired in their whole body: the body language, as well as the facial expression, and the wrinkles.

I remember a grandmother arriving one week looking so different (much younger and more relaxed) that several people quite spontaneously asked her what had happened to her. She said that for the first time ever in their marriage she and her husband had spoken about their relationship. It was as if she had not had the emotional language before to do this.



#### 4) Language and voice

Parents develop new abilities to communicate. These are not only new ways of using words but also new ways of communicating with their bodies; they feel calmer inside and this shows itself in the ways that they speak, sit, stand and relate verbally and physically.

The programme includes physical exercises and sculpting as well as relaxation. Becoming aware of how tension and meaning are held in your body is the first step towards communicating differently.

I hadn't realised it at the time but I couldn't even look at him. I didn't want to see his face, make eye contact with him - it was terrible. We were hardly speaking.

Role-plays and rehearsals are an important way of parents getting new insights into how they and their children feel in moments of escalation and presence. Ann describes what happened for her.

I suddenly saw life as it was for him. Not that I could maybe even begin to feel how he felt, but it was very, very uncomfortable, very upsetting, very confused. And it hit me, he's in a horrible place, and there was me thinking our family home is ghastly, the general atmosphere was horrible, and I hadn't honestly really thought how horrible it was for him.

The ability to relate better to others, to be able to imagine how others feel and to see different points of view is dialogic and improves relationships. Becoming self-reflexive and appreciating how one's actions impact on other people extends the range of actions available. A story which emerges on a regular basis is one of recovered or repaired couple relationships.

## 5) Belonging

Mary describes the feeling of joining the group.

It felt like coming home.

You just did begin to feel almost like you were bonding, I suppose I'm a bit religious really, but it felt almost like a little thread going around the group, and as the weeks went by you began to feel you were feeding off one other, and if one person was down, you were sort of busy saying, 'Come on, come on, you can do it!', and we were all helping one another. And it was only us that could understand one another really because we were all in that situation. And I found that refreshing, a bit like recharging.

Wendy says

We all just suddenly knew each other's pain. We bonded that way. You were suddenly among people who knew what you were going through and who were going through the same thing and that really in itself was a big support.

Many parents imagine that they are the only family going through this experience; they feel isolated, silenced by secrecy and shame.

Ann says

I found that I got inner strength after a while from just being part of the group. It was just somewhere that you felt supported. I would never have believed that I could feel like that.

## 6) Guilt and shame

Guilt and shame are gendered stories.

The guilt of not being a good enough mother: being blamed, having chosen a partner who became violent, having tolerated the violence for too long, experiencing post-natal depression, having been over-protective, not having been protective enough - variations on these themes seemed to be part of every mother's story.

Fathers felt an obligation to be strong, to enforce discipline, and often ended up physically restraining their sons, while feeling powerless and at a loss with aggressive and defiant daughters. Where violence was the predominant problem, mothers were much more likely to be attacked than fathers. However, faced with a violent daughter, fathers were ashamed and silenced, particularly when they had visible facial injuries which could not be explained away. One father said how important it was for him to try to evoke the feelings he had when he fed his baby daughter and rocked her in his arms, or when he pushed her on a swing. In this way he could reconnect with a time when the predominant feeling was love, and this allowed him to go on in a situation in which, as an adolescent, she was violent and abusive towards the whole family.



Figure 48: Pushing my daughter on the swing

## 7) Welcoming

In the group we emphasise the importance of welcoming parents, letting them know that we care about them. This hospitality (Anderson, 2012 p 15) creates an opening in which people can be drawn into the space and invited to share their stories. Anderson uses the metaphor of the host and the guest as a way of describing the posture that is most likely to encourage clients to feel welcome and valued.

Here is what one of our graduate parents said about speaking at an international conference in Munich.

We were treated like Royalty by all of the professionals and NVR founder members.

On the first night of arrival we were invited out and treated to an Italian meal, compliments of the conference organiser.

The meal was fabulous and we was introduced to some wonderful people, all big names in NVR, before returning to our very impressive hotel.

The following morning we set off on our journey to the university, where it soon became clear exactly how huge this conference was going to be. The nerves set in!

Immediately I felt at ease being greeted by some familiar faces from the restaurant the night before.

Meeting parents in advance of the programme means that they already know a few faces when they come and this helps them feel more connected.

Acting in a courteous and sensitive way to people when we welcome them into our worlds and imagining how they might be feeling (Fredman, 2007)

is the first step in working collaboratively and sets the tone for what happens in therapy (Anderson 2012).

### 8) Resonant words

Encouraging facilitators and graduate parent facilitators to generate words which resonated with the sessions created a different way of reflecting on the therapeutic process. The focus on feeling and emotion rather than action allowed new stories to emerge about movement and development which were then portrayed visually in the picture series.

This was done over two series of sessions and figure 49 compares the words generated at different points in the lives of the two groups.

The words were incorporated into the canvases following ideas developed from the research method a/r/tography (Springgay et al, 2005).

Figure 49: Resonant words

session	First group	Second group
1	internal shift, calm place, no, firm, tears, anger, change	busy, lively, buzzing, guilt, anger, fear, relationships, pain
2	group forming, tears, domain, focus, coalesce, image, crystallise, sharing, absence, presence, hiding, safe place	settling, distress, working, tension, sadness, desperation, focus
3	persist, annoyance, confusion, overwhelm, support, care, focus, disproportionate, perspective	sharing, intense, enjoyable, important, guilt, fear, negative, time, complaint, blank
4	people are helping, passion, commitment, inner resource, tragic, fiercely independent, hope, despair, fun, recursivity	happier, focusing, enlightening, perseverance, gratitude, humility, love, unsure, challenge
5	patience, pleasure, fun, togetherness, kindness, tolerance, relationship, shift, positive feedback, persistence	moan, change, hope, continue, communication, forgive, reflection
6	belonging, surprise, care, thoughtfulness, fragility, groupwork, chaos, power of the group, continuity, unity	no, forgiveness, tears, realisation, emotion, exhaustion, connectedness, values

7	creativity, trust, ideas, playfulness, humour, group, belonging, bond, blamed	stuck, pleased, confusion, ambivalence, resistance, nervous, torn, family, fear
8	overwhelmed, persistence, repetition, play, different perspectives, anger, confrontation, power, tiring, silent, talking	hope, optimism, equilibrium, harmony, encouragement, unison
9	resilience, values, tears, love, dangerous love, honesty, active resistance, small acts	<i>I was not present at this session</i>
10	learning, determination, acceptance, love gestures, reconciliation, communication, sharing, strength, ending, not ending, laughter, patterns	<i>I was not present at this session</i>

### 9) Performing self-worth

I think being a part of this project makes me feel good and I want to help others too.

There was a recursive effect which amplified the experience of being part of the group. This was then further developed in parents when they became parent facilitators and as they went on to speak in other forums and to other audiences. In a reflection of their previous loss of agency, parents continually underestimated the power that their testimonies had to move others.

I think speaking at the conference in 2011 was a moment that really struck me: I had never expected the reaction of everybody there afterwards. So many people came up to us and thanked us for doing that and said what an impact it had on them and I had no idea that us being there would help other people.

In a recent development our graduate parents now have honorary contracts with the Trust and can access training and career development

opportunities. Parents report a reduction in symptoms of anxiety and depression<sup>14</sup> and some are taking their first steps into employment after years without work.

Elisabeth Heismann and four graduate mothers spoke at the third international non-violent resistance conference in Munich in March 2014. One of them wrote this piece describing her experience.

Our time had arrived and I had never experienced nerves like it. I had to take my place at the podium, centre stage to deliver my speech to 200+ people.

I was about to touch people's hearts in a way that I had never thought possible.

WOW!

What a response!

The whole place was in tears, including Professor Haim Omer himself, and a standing ovation which completely overwhelmed me.

I had never felt that empowered in my life.

To receive such positive praise and feedback made me more self-aware of exactly how far I had come in life. Whilst the applause continued and continued I just reflected on my incredible life journey, the feeling was absolutely amazing.

I can hand on heart say it was the best experience of my life, so overwhelming.

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<sup>14</sup> Parents complete anxiety and depression scales before and after the programme as well as scales which assess family functioning, conflict and parental relationships.

We still had people approaching us in tears the following day. I was astonished at the impact we had left with people by sharing our stories.

The process of performing and bearing witness in front of an audience is extremely powerful and affirming. Working collaboratively with parents as partners creates a quite different balance of authenticity and expertise. Parents are supported to re-author (White, 1991) their stories and rebuild their relationships.

Jane (narrative portrait 5) also spoke at the conference.

Throughout the day I listened, with interest to experts in the field of NVR giving lectures on issues affecting parents. All the time, feeling more and more nervous and wondering what on earth they would gain from listening to four mums from London? I needn't have worried. As with the other mothers, NVR has changed the life of everyone in my household, so speaking about my family and our lived experiences, means speaking from the heart, with enthusiasm and passion. Not just explaining how things can change, but being living proof of that change.

The response after our talk was incredible. We each received a hug from an emotional Haim. Many in the auditorium had been moved and approached us to say how appreciative they were that we had shared our testimonies. Some said that they had been inspired to go back and work with parents with renewed vigour after listening to us, which, as far as I'm concerned, makes our appearance at the conference a resounding success.

The conference gave me a chance to reflect on the changes within my family. It really brought home how far we have all



come, both in terms of the closer relationships with have built with each other and how we have all developed as individuals. This is all due to NVR, so it was a delight to be able to attend the conference and give a little back.

It was ground breaking for European clinicians to experience this performance of love and transformation and be touched by the stories of clients who were working alongside professionals in a collaborative way.<sup>15</sup>

Many stories emerged in the research process; these have been the ones that struck me as contributing to the success of the group process. However, there is something special about the people themselves; this is reflected in the portraits, but is in no way replicable, because it is about the magic which happens when people come together.

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<sup>15</sup> In many European countries only psychologists and registered medical practitioners may practise as therapists (Warnecke, 2010).

## Chapter 13

### Reflecting on the pictures

An art practice can re-make one's identity and transform pre-conceptions by re-visioning the familiar.

Sue Austin (2013)<sup>16</sup>

In order to reflect on the pictures I meet with Philomena Francis, an art therapist colleague who is also a painter, and we look at all the canvases together. I arrange them round my living room in chronological order. She immediately sees them as groups. She places the first three next to one another and comments that they work like a triptych.

Figure 50: Triptych 1



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<sup>16</sup> Sue Austin is a multimedia and performance artist who uses her experiences as a wheelchair user to challenge and transform the identity of disabled people and the NHS wheelchair in particular. Her performance art emerges from her embodied responses to the freedoms created by her power chair.

There is a pattern of movement which sweeps from the left through the central panel and over into the right-hand piece. She asks about the sequencing and whether I was aiming for this. Until she put them together in this way I had not seen the movement. I made the pictures as individual pieces and although I always thought of them as a series I did not know how this would be reflected in the work or whether others would see it.

When I made the pictures I was very careful not to pre-figure the one I was working on by looking at the preceding one. Although I knew that I could not separate myself from the picture that had gone before, I did not want to be too influenced by it, by its shape, form and colours. In the week before the making of each new one, I kept the pictures facing the wall so that I did not see them. I am curious now about whether that decision was influenced by a more traditional scientific way of thinking about research, a move towards objectivity. I am more inclined to think that I wanted to come fresh to each canvas in order to have the best chance of creating an immediate response to the evening's session.

Figure 51: Triptych 2



The second triptych again looks like a single piece with movement coming in from the left and continuing over into the centre panel. The right-hand panel has more horizontal movement and feels more broken than the left and centre panels. They work well as a centre piece with two side panels.

Philomena sees the final four panels as a set. I think they can be looked at either as a group of four or as two diptychs. The colours and the shapes have got into a rhythm. The final panel is brighter, calmer and more hopeful.

Figure 52: Group of four



Figure 53: Diptych 1



Figure 54: Diptych 2





The arrangement of the pieces as triptychs and diptychs creates a form of triangulation; there is a coherence in the movement and development from session to session.

The final piece is a stand-alone reflection on the whole experience, not just one group but of having been part of many groups.

Figure 55: Picture 11



During the exhibition of my work Pete and Anne (narrative portrait number 7) speak to me. They say that, in the pieces, I have conveyed how it felt for them being part of the group. The abstract depiction of my emotions and resonances from a facilitator's position mirrors their felt experience as parents and participants.

This is an extraordinary moment for me. When I began the process of making the paintings I was inspired by a feeling that this was an important thing to do. At the time I was not able to articulate why it was important, nor was I familiar with some of the writing that has inspired me since: Dewey's *Art as Experience* (1934), Merleau-Ponty's *Phenomenology of Perception* (1962) and his essay *Eye and Mind*, McNiff's *Art-Based Research* (1998a), Springgay, Irwin and Wilson Kind's paper *A/r/tography as Living Inquiry through Art and Text* (2005).

I provided a comments book and invited visitors (appendix 5) to the exhibition to enter into a dialogue with me and each other about how the work affected them. Although my intention was to create a dialogical space, the responses to my work by parents, facilitators and others are another form of triangulation or crystallisation.

One person feels that the text on the canvases detracts from the experience of colour and shape, as if '[I] don't trust the pictures to speak for themselves'. Someone else disagrees, and says she thinks that 'Visual imagery is more likely to reflect the viewer whereas words can be more specific – so both are good'. I know that the second comment is from an artist, also a mental health activist and survivor, who uses images of text in a very powerful way to convey her experience of psychosis.

The theory is emerging in response to my practice, and the connections I am making in this space to reflect on what got made in the research process.

## Non-violent resistance series 2

I am impelled to create a new set of pieces for a subsequent non-violent resistance therapy group. It is not that I want to replicate the process for reasons to do with validity or triangulation but that I am excited by the experience and want more of it.

There is something about the process being familiar this time that allows me to take more risks in the way I use the materials. The colours are more vivid, more intense, bolder, and the images and the structure seem to change less than in the first series. There is still that same movement towards coordination, calm and lightness over the series, but it seems more subtle. I follow the same process of inviting the facilitators to suggest words that resonate with the sessions, but I do not incorporate the words into the pictures. This is partly because I was not entirely sure what the words added to the visual portraits, and also because the

painter John McLean told me that he thought the text flattened the picture plane.<sup>17</sup> This time I want to focus on the relationship between the viewer and the visual images without the distraction of words.

At the end of the eighth week I come down with a virus that completely wipes me out. I do not get to the last two sessions and so there are only eight canvases. I wonder whether I should try to complete the series but I have missed the moment. I cannot paint something when there is no experience for my arm and eye to resonate with; I could fabricate it but it would be inauthentic. I think about making a piece after sessions 9 and 10 of the next group, but each group feels so different that it just does not feel right. The sequencing and continuity are unlikely to work.

As I write I am struck by how much the work resonates with feeling. It is hard to put this emotional experience into words, which is why I choose to portray it visually. It seems redundant to describe the visual images with words. The images are there to portray what cannot be expressed verbally.

The words generated by the facilitators in the post-sessions are like a counterpoint to the colours, shapes and texture on the canvas. The elements come together to transform the rich pictures into the rich portrait.

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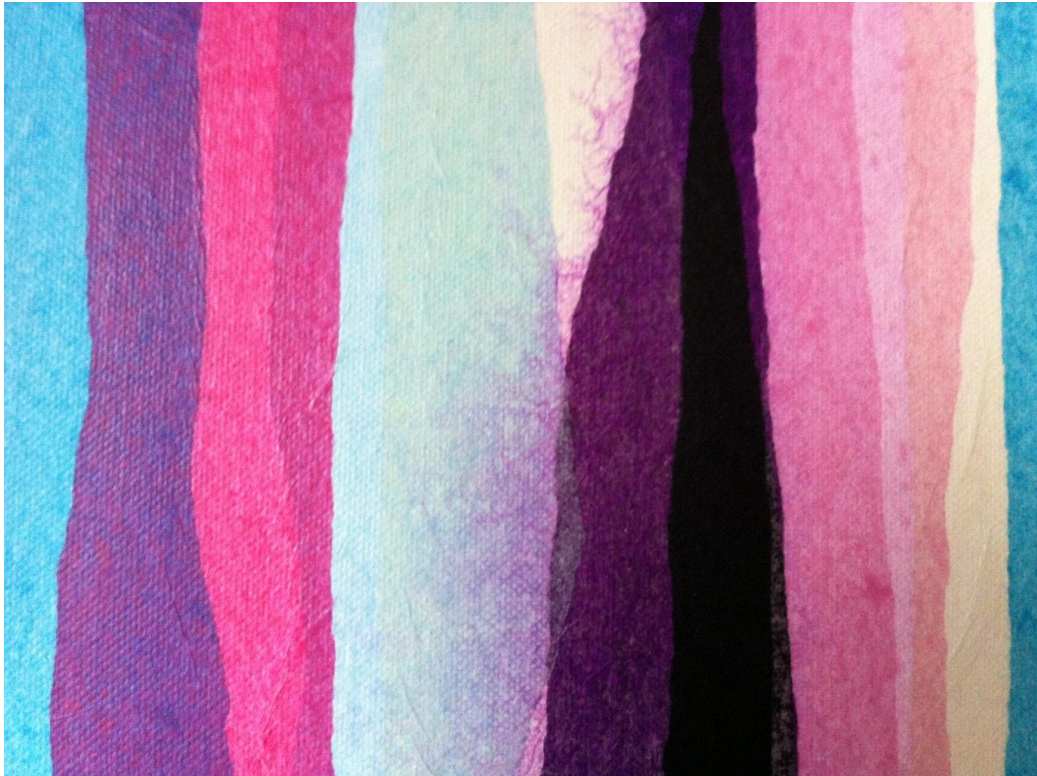
<sup>17</sup> John McLean grew up in Scotland but has been based in London since the 1960s, interspersed with brief periods spent living in America. He has had over forty solo exhibitions worldwide, and his work is represented in many public collections including the Tate Gallery, London; Yale Center for British Art, U.S.A; The Fitzwilliam Museum, Cambridge; Glasgow Museums and Art Galleries; Government Art Collection and Scottish National Gallery of Modern Art.

Figure 56: Pictures 1-8 second series





Figure 57: Detail from non-violent resistance series 2 number 6



The overlapping and bleeding of colours evokes the subtle intimacy of the group and the way in which stories are woven together against a backdrop of different life experiences and cultures. The movement in the group is recursive: participants affect, and are affected by, one another. The group's ability to bring about change has a mystical feel to it. More happens than one would have thought possible.

The emerging pattern and process are smoother than in the first series of pictures. The last two pictures would probably not have been so even and calm. My colleagues tell me that the final two sessions of the group were difficult. Two parents, whose situations were extreme (they both had violent teenagers who were detained under the Mental Health Act), said that they had got nothing from the programme. However, when they

attended the follow-up review session six weeks later they were much more positive. Perhaps the fact that I was not there had more of an impact than I had expected. I was not the only facilitator in their small group but I was the most experienced.

### Reflecting on the making of the pictures

When I made the pictures I invited various people to have conversations with me as I worked and become an audience to the performance. I did this because it seemed to fit as a dialogical way of enhancing the process. I imagined that the conversations would work to expand the experience of resonance with the feelings evoked by being in the group. I filmed the process.

As I watch the films I am struck by just how difficult I find it to engage in the conversations. I am absorbed in the process of making. There are long gaps when the other person asks a question but I am lost in the activity and seem unable to respond. I am curious now how my conversational partners experienced this. Watching myself I am reminded of driving a car: I can keep up a conversation but when the road or the car demand a higher level of concentration I just stop speaking and cease to hear the other person. The levels of context shift in the moment and then back again. This is what I observe happening in the films. There are some interesting moments where the two activities seem to come together; when I am asked questions about what colour or shape I am using. But I sound a bit irritated, as if I don't want to explain - maybe because I have no way of doing so. My choices of colours and shapes, of contrast and texture, are 'felt' not languaged. I try to explain, but am clearly more comfortable talking about what happens in the group.

This discomfort is not there in the conversation with the painter Gina Medcalf. I was quite anxious about inviting an established artist to watch me paint. To my surprise, this was the easiest of all the conversations. I

didn't feel over-awed, and was relieved to speak about colour, line and edge with someone for whom these concepts had a working meaning.

There was something very calming in the meditative quality of making the pictures. This has been strangely mirrored in this process of writing in my clean, white, studio surrounded by the pictures: on my own, away from other people.

The ritual of preparing the canvas and materials before I began each picture created a calm context to work in, one in which difficult clinical situations were processed in a creative and generative way. I approached the bare canvas with a feeling of cleanliness and anticipation; poised on the brink of its becoming (Todes, 2001, quoted in Shotter, 2009). I have noticed that this helps me feel the same way when approaching sessions with families, and creates a different sense of space in which my clinical practice has been re-energised. Fredman (2007) describes a ritual which her team perform which orients their emotions towards the clients they are going to meet. They answer a set of questions which prepare them to think from the clients' position rather than from their professional selves. It is a clearing of the mind, a calming of emotions which might interfere with focusing on the client.

Gina helped me appreciate the pleasure of doing repetitive things, how the procedure of making created a ritual which provided a structure in a sea of feeling. She noticed how I carefully and deliberately cut off the small pieces at the top and bottom of each strip after I had pasted it onto the canvas, placing the bits in a neat pile on the right-hand side of the table. This gave me a different way of appreciating some of the stability that is brought to our practice by the familiar rituals that surround clinical sessions: hypothesising (Cecchin, 1987), pre- and post-session discussions, reflecting team discussions (Andersen, 1987).

On reflection, I wonder what difference it made whether my conversational partners were parents or not. Crittenden (2008) argues that professionals do not want to hear that only a parent can truly understand what it means to be a parent. She says you may think you know, but you do not, and that non-parents deny this. My partner and I have not got biological children, although there are several adults who treat us as surrogate parents. Kathy and Julie have children. Kerry is a new mother. Gina and Philomena have no children. Julie, Philomena and I all work with children professionally. I wonder how this affected the conversations I had. It might have been interesting to ask.

My conversational partners were all women; this was not because I excluded men. Most staff in Child and Adolescent Mental Health Services are female. I did invite two men, but they were unable to participate.

When I made the second set of pictures, I chose to work alone. I played music and filmed the activity, but had no conversational partners.

I watch myself making the first one. I am completely absorbed in the making. Right at the beginning I hear my partner ask if I want the curtains closed, but I don't reply; I am too absorbed to speak. Towards the end I add very small details into the picture: thin strips of dark red like streaks of blood. It is quite different from any of the first series. When the picture is finished I speak to the camera for the first time.

I don't think there's a lot of the laughter in the picture. I suppose in the group that I was in there was more pain.

I watch the second film. I am speaking to the camera this time. I seem much more relaxed and lighter in mood. Ten minutes in and I still haven't started on the canvas. I'm still loading a playlist. As soon as I start painting I stop speaking and don't speak again. The colours are strong reds, dark red and black.

As I write I recall an episode in my life when, as a newly qualified teacher, I taught in a secondary school. Part of my job was to set practical exam papers, one of which was painting from imagination. I chose some themes and a piece of text from *The Waves* by Virginia Woolf, a wonderfully evocative description of the sea and the bars of colour created by the light. I thought it was a great choice!

One of my students pointed out to me that this was a description painted in words; it didn't work as the subject for a painting. Why would you *paint* something that was already the subject of a piece of *writing*? I was humbled by this insight from a fifteen-year-old girl. I hadn't yet articulated (despite my four years at art school) that painting is *beyond* words.

The way I write about the second series of pictures is freer, more expansive. This is mirrored in the bolder sweeps of colour and form. It is like feeling my way through the making, performing at a different level. I can engage more with my senses when I am not involved in outer conversations. I am continuously involved in inner conversations when I paint; the voices of participants crowd the room.

## Chapter 14

### Reflecting on *performance*

Performance itself is a way of knowing.

(Pelias, 2008, p186)

The experience of making the rich portrait and reading about performative research invited me to relate to *performance* on a different level.

I am in a concert at Kings Place, the new development behind Kings Cross station. Penelope Spencer is playing the adagio from Bach's solo violin concerto in G minor. If I close my eyes I hear only the music and the dimensionality of it is diminished. The violin is producing the sound but I am struck by just how much Penelope is playing with her whole body. It is as if the violin is part of her and the sound is coming from somewhere deep within her. As she rises up onto her toes the sound extends with her, it follows her bow and echoes her movements. When I close my eyes the sound is different, I hear it without the added corporeal complexity, although an echo of it remains.

When I get home I listen to a recording of the adagio; it is heart-achingly beautiful but does not have the same impact. I realise that the difference is in the performance. I go to concerts but have never made the connection in quite this

way; I usually find that I am distracted from the music by watching the musicians, so I often close my eyes.

Following on from this experience I made new connections with *performance* and what happens relationally in the groups.

An added dimension opens up when Gilda *performs* hope, when Michelle *performs* persistence, when Elisabeth *performs* love, when parents *perform* transformation. The meaning of *hope*, *persistence*, *love* and *transformation* are communicated through the performance. What happens is infinitely more complex than a description of *hope*, *persistence*, *love* and *transformation*; the meaning is communicated simultaneously on a number of different levels. Some of these levels are visible, because they are the practical literal sense of the word, but some are experienced at a deeper, felt, embodied level. It is as if the performance sinks into the participants through osmosis, and changes them. Witnesses to the performance enter a space in which new things become possible for them (Vygotsky's ZPD, 1978). As Mary describes it

It felt almost like a little thread going around the group, and as the weeks went by you began to feel you were feeding off one other, and if one person was down, you were busy saying, 'Come on, come on, you can do it!' and we were all helping one another.

Performance involves risk taking, not knowing quite what will happen. Not a risk that involves acting without responsibility, but a creative risk, an act of safe uncertainty (Mason, 1993).

When I was at Chelsea Art School my tutor always said, 'Chance your arm, use a large brush'. I think he meant that we should have the courage to trust the expansive embodied activity of painting and not get caught up into believing that control and small marks would do it. McNiff (1998b) has written a book *Trust the Process* subtitled *An Artist's Guide*

*to Letting Go.* 'Letting go' is obviously something that people need permission and encouragement to do.

The Open University module on Rich Pictures says that you have to allow yourself to explore ideas that you have not yet had by letting the messy chaos

pour down your arm onto the page ... In order to learn something new you have to go through a state of unknowing.

To work this way you have to be prepared to take risks. That is where Gilda's words strike a chord.

Some of them needed to get more courage, because in the end courage is needed to change their behaviour.

Not only do the participants need courage to embark on change but the facilitators also need courage and commitment to show the way and accompany the participants on their journey. This means staying with and weathering the initial period of chaos. As Michelle says, when parents witness those moments when facilitators perform courage, they get 'something huge from it'. As therapists and facilitators we need to have the courage to take risks for our clients. We do not have to live their lives, so they deserve that we are brave enough to accompany them on their journey, to support them when they are scared and to illuminate the way when they are uncertain.

Denzin (2006) and Conquergood (1985) foreground the political and ethical aspects of performance as a way of driving forward the agenda of marginalised minorities. Non-violent resistance has a very significant and honourable lineage in political and social direct action (Geertz, 1969). The methods of non-violent resistance (announcements, sit-ins, reconciliation gestures) are performative (Butler, 1997). They are performances of active resistance in the face of violence and oppression. They seek to



bring about positive change in a radical (non-traditional and non-mainstream) way because it is the ethical thing to do.

Lois Holzman (26/2/13) re-writes Merleau-Ponty's (1964) prose as poetry. In this way the text is performed, which extends the meaning and resonates with the idea of making a rich portrait.

If no painting comes to be the painting,  
if no work is ever absolutely completed and done with,  
still  
each creation changes,  
alters,  
enlightens,  
deepens,  
confirms,  
exalts,  
recreates,  
or creates in advance  
all the others.

If creations are not a possession,  
it is not only that,  
like all things,  
they pass away;  
it is also that  
they have almost their whole life before them.

I re-read Glenda Fredman's (2004) book *Performing Emotion*. I understand 'performance' quite differently now. I had read it before but I did not realise I had not understood it. I have a moment of my own.

## Levels of performance

Performance happens on several levels in my research:

- Facilitators and participants *perform* the elements necessary to heal and rebuild relationships (hope, love, commitment).
- Facilitators *perform* systemic practice in the way that they act in the group (Wilson, 2007).
- New directions open up when participants practise and inhabit their *performances* (announcements, sit-ins, active resistance).
- Parents are encouraged to try new ways of acting in situations. Fredman describes this process as *assisted performance* (Vygotsky, 1978 and Newman and Holzman, 1993 in Fredman, 2004).
- Parents *extend their performance* when they develop new elements of the programme like the self-announcement.
- My paintings made after each session are both an extension of the performance and an integral reflection of the social landscape in the way that Dewey (1934) describes in his landscape and peaks metaphor.
- The rich portraits in this dissertation are themselves an additional layer of *performance* and are imagined in the form of a virtual installation.
- In October 2013 I *performed* (declaimed in front of an audience) a pared-down version of the portrait of Gilda's Latin American group at the Association of Family Therapy conference.
- The April 2014 issue of Context (132) is on the theme of non-violent resistance therapy; one of my paintings is on the cover (appendix 7) and inside there is a paper Gilda and I wrote about the Latin American group (appendix 8).

So the layers of performance continue to ripple out; in different formats and with different audiences.

## Chapter 15

### Reflecting on *researching*

Shotter (2010 p vi) says

researchers (practitioner-inquirers) explore the particular possibilities available for next steps in their own current, unique circumstances.

The areas that have opened up for me in researching our practice are the ontological and the performative. As I have shaped the rich portraits I have become increasingly aware of participants moving, in a felt and embodied way, towards becoming better people with richer and more enriching relationships. As relationships with children improve, relationships with partners, friends, neighbours and professionals improve also. This is a dialogical and relational process.

I act, i.e., perform acts, with my whole life, and every particular act and lived-experience is a constituent moment of my life – of the continuous performing of acts.

(Bakhtin, 1993, p3)

It is important to highlight the moral and ethical aspects of non-violent resistance therapy. In our practice, collaboration and participation are embedded at all levels. This creates a sense of community with shared

beliefs and values that adds to the ways in which people are supported to develop and extend their abilities. Facilitators have a moral responsibility to open up a dialogical therapeutic space in which new identities can be constructed and performed.

The rich portrait served my aim of exploring what was special about the group programme. It allowed for a detailed exploration of relationships and moments that happened between people. The use of metaphors to capture the qualities of participants and facilitators gave additional depth to their stories by providing a resonant and relational context.

Interpretive performance autoethnography allows the researcher to take up each person's life in its immediate particularity and to ground the life in its historical moment.

(Denzin, 2014, ebook, chapter 1)

The pictures provided an embodied experience that resonated for parents with their journey through the group. I showed the pictures to audiences in a public gallery, at two conferences and at home. People said they were moved when they viewed the pictures; this included people with no connection with art, therapy or non-violent resistance.

Doing the research changed how I saw the group process. It was as if I was suspended above it, seeing each episode as an ever-evolving and moving part of a patchwork. I was able to zoom in quite sharply on moments without losing my sense of the whole. I was able to take a meta-view of all the groups and see them as a continually evolving network with a rhizomatic character (Anderson, 2012).

I wondered about the sense of spirituality which seemed to come out of the conversations I had with participants. I realised that moral authority is a very important part of what we have been involved with in our work with parents who want to improve their relationships with their children.

There is a particular positional link with those social and political movements who have used non-violent resistance methods to achieve change (Geertz, 1969; Roberts and Garton Ash, 2009). You need to believe that you are in the right, that you are restoring something good, something better than what is currently happening. There does need to be a 'conversion' of some kind, a moment of revelation in which one is seized by the value of doing things differently, which becomes understood at an embodied level.

### Portraiture and Rich Portraits

My research practice is located within portraiture (Lightfoot-Lawrence and Hoffmann Davis, 1997). But it also belongs to the whole area of performative inquiry (Denzin, 2003; Pelias, 2008; Scott-Hoy, 2003), embodiment (Shotter, 2010), the tacit dimension (Polanyi, 1966) and arts-research practices.

Both portraiture and rich portraiture are an approach to research within which something more than words on paper gets constructed. This may be anywhere from the completely ephemeral (happening) to the solid artefact (painting).

The study of painting as an inquiry process takes into account more than the physical and formal practices of creating images on surfaces. Not only in the artist involved in a "doing" performance, but this also results in an image that is a site for further interpretation by viewers and an object that is part of visual culture.

(Sullivan, 2008, p240)

Being a researcher is not dissimilar to being an artist [Wolcott, 1995] because you need to be intuitive, creative, and sensitive to the texture, features, tones, and perspectives of the cultural and social environments.

(Scott-Hoy, 2003, p 269)

In chapter eight I describe how I developed rich portraits as a method for researching into the non-violent resistance multi-parent therapy programme. The doing and making came long before I could locate my activity within research methodology.

As I see it a rich portrait has a number of elements which are interlinked.

1. The area of interest (project, service, initiative) is important to the community or supports a minority or marginalised group.
2. The researcher/research team takes an ethical and collaborative stance and involves participants in the research process.
3. The portrait includes rich and detailed narratives which are consistent with the methods of portraiture.
4. The portrait is located in the political and social context.
5. The portrait includes an arts-based performance which stands alongside the narratives and which adds to the rich dimensionality of the portrait.
6. Audiences participate in the process.
7. Performances are recorded in an appropriate medium and are available as part of the research report.

My choice of working on canvas as a performance medium is directly related to my passion for the fine arts, painting in particular, but there are as many other ways of doing arts research as there are arts practices (Knowles and Cole, 2008): theatre, dance and choreography, poetry, photography, writing (Scott-Hoy and Ellis, 2008), sculpture, video, radio, music, installation, collage, quilt making – the list is limited only when the creativity of artists and makers is exhausted.

In a recent conversation Gail Simon asked whether I thought about *portraiture as the approach to the inquiry and portraits as the product?* This challenged me to think more into the difference, and that was hard. I

think the process is continually evolving and I feel reluctant to make a distinction between the two. Perhaps there is no longer a distinction.

The dividing line between performativity (doing) and performance (done) has disappeared.

(Denzin, 2003, p3)

I want to encourage others to take my ideas and use their own preferred techniques to create portraits which offer a rich depth of performance and narrative description.

Ongoing thoughts about research into systemic practice

At its heart my research privileges felt and embodied responses to practice.

If the *systemic turn* (Bateson, 1973; Minuchin, 1974; the Mental Research Institute in Palo Alto, the Milan School) has become more second order and our focus has shifted from thinking about cybernetic systems to thinking as ourselves as acting within systems and the part that language plays in constructing meanings – the *linguistic turn* (Andersen, 1987; Anderson and Goolishian, 1988) – then the work of Sheets-Johnstone (2009) Shotter (2009, 2010, 2012a, 2012b), and Stern (2004) heralds the *affective or corporeal turn* (Seikkula, 2014). It seems appropriate to be reconnecting at this time with how our bodies resonate and lead the way in our making sense of experience. This should be embodied and articulated in the research practices which we use to explore and understand our therapeutic practice. A performance turn

in which an understanding of human thinking and action is dramatically transformed into a deeper reflexive mode of inquiry.

(Denzin, 2000, 2003, in Cho and Trent, 2009, p 7)

At a time when systemic practitioners are becoming as sensitised to what is felt in the therapy room as we are to what is spoken, we who work in the public sector (as most UK systemic psychotherapists do) are constrained by the current emphasis on particular types of traditional evidence-based research.

In order that the systemic therapy field can compete with research into treatments like cognitive behavioural therapy and manualised approaches which have a natural fit with goal-based outcome measures and systemic clinical outcome and routine evaluation (SCORE) (Carr, 2014; Singh, 2014; Stratton et al 2010), there is a narrowing of the range of acceptable forms of research and an imperative to produce evidence in particular formats. As we endeavour to practise with artistry there is a danger that we are hamstrung by adherence to reductionist research models. The non-violent resistance therapy programme has traditional measures built into it, and results are excellent. However, there is a place for more creative and adventurous research methods that are able to capture and communicate something less quantifiable and more embodied about the quality of people's experiences in therapy.

People are not predictable, which is what makes them so exciting. Relationships between clients and therapists are the most significant, complex and nuanced part of the therapeutic process. Research methods which reduce people to statistics and outcomes do nothing to explore or celebrate the uniqueness of what gets made in therapy. What we know becomes narrower and the way we research becomes dictated by what we need to know (Leppington, 1991). Going beyond words seems a useful way forward (Scott-Hoy and Ellis, 2008).

Non-violent resistance therapy works by creating genuine and authentically embodied relationships between participants and facilitators; a fifth-province dialogical space where we meet on an equal footing and work together (McCarthy, 2010).



My research has foregrounded the importance of love as integral to change. Of course love is not enough. Work with adopters shows that people often believe that love *will* be enough but as Crittenden says *loving children and intending well isn't enough* (2008, p xii). Non-violent resistance is a very active therapy which invites parents to put themselves at the centre of family life in order to act as an anchor for their children (Omer, 2010).

As Wendy says

Knowing that I must take my place really helped me from within. Now I'm aware of the presence that I bring both in the house and out and about, in life. And that's changed me quite a lot and so I've been able to cope with my son better, and with my husband. It's made me realise that I need more of a presence in the marriage as well, which is what inevitably caused the whole problem with Tim, because I don't think he would have got out of control if I had a bigger presence in the marriage.

## Conclusion and forward thinking



Figure 58: Unconditional love 2

## Conclusion

This dissertation describes the journeys that I have undertaken with parents and facilitators. This has been a research journey into our experience of non-violent resistance therapy, using portraiture and rich portraits as a way of inquiring into the unique qualities of the programme. It is a living inquiry which focuses on the unfolding moments in which people come together and looks into those moments in different ways. The central part is the rich portrait of participants which incorporates narratives, commentaries and paintings.

When I first told people about my research they assumed that I was going to get clients to paint. I almost felt selfish when I explained that I was the one making the art. In truth, and this was a bit embarrassing, it hadn't occurred to me to invite parents to express themselves in this way, although it is something I have done in the past. Working with parents using art might be a future project, but would have a different purpose. I wanted to find my own voice; to showcase our practice and honour the contributions of participants and facilitators.

I learnt that non-violent resistance therapy does indeed have a special mix of ingredients that enables magic to happen. The philosophy sets a moral context for change but it is the richness that parents and facilitators bring to it that makes the difference: courage, respect, a willingness to take risks, persistence and love.

I realised that our work belongs more to the world of multi-family therapy than it does to parenting groups, where it is usually located. This endows our work with a rich systemic heritage and gives it authority.

I learnt that research is exciting, that you do not have to know what you are doing when you set out. If you know exactly where you are going and stick to the map, the journey loses its ability to surprise, challenge and enthral. In our therapeutic practice we recognise the need to listen to our bodily responses, but much of our research remains stilted and lifeless in its construction. Alongside the more standard evidence-based methods, we need to develop research that is embodied, performative and rich in order to reflect the lives of the people we work with.

While writing these final sections I receive an email containing the moving testimonials of our graduate mothers who spoke at the non-violent resistance conference in Munich. As I incorporate their voices, I realise how important it is in my work to privilege clients' voices and this is mirrored in an article I wrote for Context in 2009 (appendix 6). This is a personal ethical position, a posture of lived collaboration which is fundamental to my practice and which also fits with the practice of non-violent resistance.

I am struck by the role of gender and the different ways in which shame is constructed for men and women. Our programme manages to involve more fathers than the standard parenting group and this was one of the reasons that we won the London Safeguarding Children Board award for innovative practice. Jude and Rivera (2014) interviewed fathers who had attended the non-violent resistance programme and were told that fathers particularly appreciated the practical tools that they were given and the opportunity to share their experiences with other men. Feelings of failure and loss of a sense of being an effective parent were common to both men and women. We drew on the work of Gandhi, King and Einstein

for inspiration but there were no women's voices and this is something we need to address.

I do a lot more drawing nowadays. I am more likely to respond to ideas and situations in a visual way and I draw more purposefully. I draw in meetings when I am trying to work out how to tackle an organisational problem. I draw with families when I want to help make sense of a muddle of feelings. I feel freed up to do more of this and can account for what I am doing to others. Scott-Hoy (2003) *needed* to draw in order to do research.

I am much more aware of how I use my voice. How I speak is as important as what I say. Now that I have become sensitised to prosody it is with me all the time and this enhances my therapeutic practice in a new way.

As I look back on the experience of writing I reflect on what it has meant for me. The last fifteen months have been particularly challenging. My partner Gaby was diagnosed with bowel cancer in April 2013 and has been in continuous treatment since then. She has a good prognosis, but it is an anxious time for us both, which stretches into the end of the year with yet more surgery. In October 2013 my mother died after several debilitating, dementia-ridden years. My sister and I spent many days sorting through and dismantling our childhood home which, as a shared experience, was strangely therapeutic: a stripping bare and a final ending. I struggled with writing; my emotions were unpredictable and sometimes completely overwhelming.

However, I learnt to stay alive, to continue to be creative in my work with children and families, and to remain excited by non-violent resistance therapy and by making art. We turned a dark, derelict garage into a light and airy studio for me to work in. This surely is a lesson in itself. We face

adversity when we least expect it; what we do with it and our support and conversations with others make a difference to how we go on.

I would hope that others are inspired by my work to find their own ways of making research which goes beyond words, and I look forward to continuing conversations about the ways in which we can live our research practices.

As an example of how to use my ideas in other contexts I am currently piloting a more performative way of looking at outcomes in family therapy. Because systemic work is complex and multi-layered linear measures cannot capture the more embodied aspects of our work. Distance and closeness are multi-dimensional and spatial: the whole family is in the picture not just one dyad. I have always brought small objects to sessions which families can use to create pictures of their relationships. This is a version of sculpting (Satir, 1967) and has a long and significant heritage. I use a camera to record moments or episodes in the work. These photographs can be shared with the family and create opportunities to have conversations about changing relationships. The experience of writing this dissertation has given me the authority to think about this as not only a clinical tool but a valid way of researching into and portraying change and movement. The mini sculpts are like rich portraits: they show aspects of systems that cannot be expressed in words and which are living and moving.

This is not a conclusion but a beginning of a new episode. I look forward to turning what I have written into a book, but do not yet know quite what that might look like; another journey begins.

I end with the words of one of our mothers, a moving and fitting testament to our practice:

## Non-violent resistance (NVR)

I asked for strength .....

NVR gave me tasks to make me strong

I asked for wisdom .....

NVR gave me problems to solve

I asked for prosperity .....

NVR gave me self-worth and energy to work

I asked for courage .....

NVR gave me techniques to overcome

I asked for love .....

NVR challenged me to gain it back

I asked for favours .....

NVR gave me opportunities

I received NOTHING I wanted

but

I received everything that I NEEDED.

# Appendices

Appendix 1	Participant information sheet and consent form
Appendix 2	Reflection on ethics
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Appendix 4	Invitation to parents
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## Appendix 1: Participant information sheet and consent form

### An inquiry into the CAMHS non-violent resistance multi-parent group

You are being invited to take part in a research study. Before you decide it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish. Ask me if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part. Thank you for reading this.

#### **What is the purpose of the study?**

Parents who have attended previous NVR groups tell us that positive changes happen as a result of being in the group. I want to find out more about how and when these changes happen so we can improve the group for future parents.

#### **Why have I been chosen?**

You have been chosen because you have been referred to the next NVR parent programme. Everyone attending the programme will be invited to participate in my study.

#### **Do I have to take part?**

It is up to you to decide whether or not to take part. If you do decide to take part you will be given this information sheet to keep and be asked to sign a consent form. If you decide to take part you are still free to withdraw at any time and without giving a reason. A decision to withdraw at any time, or a decision not to take part, will not affect whether you can attend the NVR parent programme or the standard of care you receive.

#### **What will happen to me if I take part?**

You will participate in the group in the normal way. I will ask you to keep a note of any moments that felt significant for you while you were attending the group. After the group has finished I shall arrange to meet with you to ask you about your experience of being in the group. This meeting will take about 45 minutes. I shall be particularly interested in any moments when you felt that you got a different understanding of the difficulties that happen with your child or “the penny dropped” in some way. I will also be asking about your beliefs about parenting and where you think these came from. I will be recording these conversations and then typing them up. You will be able to see what I have written and you can ask for anything to be taken out that you are not happy with.

#### **What are the possible disadvantages and risks of taking part?**

There are no risks or disadvantages from taking part

**What are the possible benefits of taking part?**

Parents have said that they want to be part of improving things for other families. This research aims to improve the NVR programme so that it benefits as many families as possible.

If you wish to complain, or have any concerns about any aspect of the way you have been approached or treated during the course of this study, the normal National Health Service complaints mechanisms should be available to you.

**Will my taking part in this study be kept confidential?**

All information which is collected about you during the course of the research will be kept strictly confidential. Any information about you which leaves the clinic will not have your name or address on it. You will have the opportunity to check the record I have made of our conversation and to correct anything you think I have got wrong and to change any details that you think might identify you. All DVDs will be kept in a locked cabinet and will be destroyed when the study has been completed.

**What will happen to the results of the research study?**

A summary of the results of the research will be presented to those parents and facilitators who participated. You will be able to choose whether you want me to tell you about the results individually or in a group with other parents. The full document will be part of my Professional Doctorate and will be available at the University of Bedford. I shall write a short summary for publication in the Journal of Family Therapy. Your name will not appear in any report or publication.

The research is sponsored by (name) NHS Foundation Trust. It is not funded and there are no payments to any participants.

The Bromley Research Ethics Committee has reviewed my study.

Please feel free to contact me for further information.

Liz Day,

[www.CamhsCares.nhs.uk](http://www.CamhsCares.nhs.uk)

Thank you for taking part in this study.

**Title of Project: An inquiry into the CAMHS non-violent resistance multi parent group**

Name of Researcher: Elizabeth Day

**Please initial box**

1. I confirm that I have read and understand the information sheet dated 1 May 2009 (version 2) for the above study and have had the opportunity to ask questions.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason and without my medical care or legal rights being affected.

3. I give my consent to being recorded on DVD or video for the purpose of this research study. I understand that any recordings will be kept in a secure locked system and will be destroyed after 3 years.

4. I agree to take part in the above study.

Name of Client	Date	Signature
<hr/>		

Name of Person taking consent (if different from researcher)	Date	Signature
<hr/>		

Researcher	Date	Signature
<hr/>		

- 1 copy for client;
- 1 copy for researcher;
- 1 copy to be kept with notes

## Appendix 2: Reflection on ethics

Researching into clinical practice that one is also involved in is a challenge because the ethical issues can become blurred. The complexity of multiple relationships and the importance of self-reflexivity is usefully explored by Tomm (2002) and Penman (1994).

The usual practice in relation to confidentiality is to anonymise all research participants and to change any specific information which might inadvertently identify them or their location. When writing about clinical practice which is unique to one provider this becomes impossible. Our graduate parents have trained clinicians, written material which is on sale to the public, appear in DVDs, have presented at international conferences and are featured on their own non-violent resistance section of the Trust's website. A Google search of 'non-violent resistance' and 'graduate parent' brings up the website section as the four top results. They are already in the public domain.

One of the key principles of non-violent resistance is a move from keeping things secret to an open sharing of information. However, academic and research ethics' requirements are about protecting vulnerable individuals and establishing confidentiality as a key principle. My dilemma was how to manage this contradiction.

All the names of children and young people referred were anonymised. I asked participants whether they would like to choose names which I could use for them or if they wanted me to choose names. Some parents chose their own pseudonym and others left it to me. A few said they were happy to use their real names. In the final edit I changed all the names so that every parent had a pseudonym because that was what I had stated in the consent form.

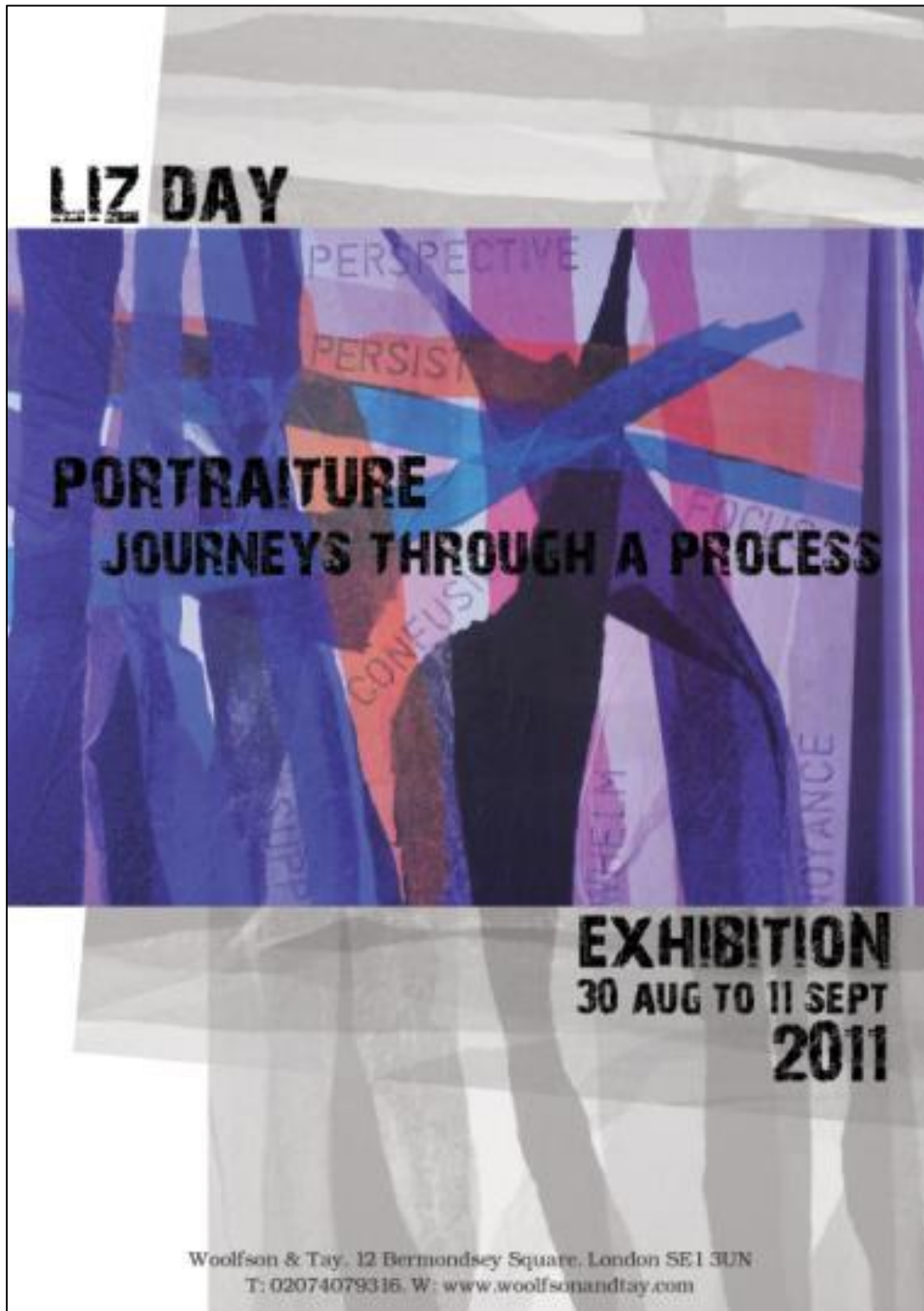
The clinicians were a slightly different matter. They were all professionals already publically known for working in the field: I had a different level of responsibility and they wanted recognition. I offered them the same choices as the parent participants. One chose a pseudonym, the rest asked me to use their own names. I anonymised the Latin American facilitators who worked with Gilda as they were working as volunteers.

Finally, there was the problem of the references and not identifying the Trust. It was not possible to reference accurately without disclosing the name of the Trust since a number of publications are only available directly from the Trust or from their website. One option would have been to remove all reference to the works published by the Trust but this would have led to incompleteness and gaps in the narrative.

Penman, R. (1994) *The participating researcher: theoretical implications in practice*. Paper presented at the International Communication Association and Australian & New Zealand Communication Association Annual Conference, Sydney, July 11-15 1994.

Tomm, K. (2002). The ethics of dual relationships. In A. A. Lazarus (Ed.), *Dual relationships and psychotherapy* (pp. 32-43). New York, NY: Springer.

## Appendix 3: Exhibition poster



## Appendix 4: Invitation to parents

### Portraiture: journeys through a process

You are invited to an event to view a series of pictures about the NVR group created by Liz Day. These are abstract pictures made on Wednesday evenings after each of the group meetings in programme 5. Liz will speak about the work and show some NVR related films.



Tuesday September 6<sup>th</sup> from 6.30 – 8.30  
Refreshments provided

At Woolfson & Tay: Bermondsey's Independent Local  
Bookshop, Café and Gallery.  
12 Bermondsey Square, London SE1 3UN.  
Nearest station London Bridge

This is a closed event with limited space. The only people invited are Graduate Parents, facilitators, people who work for Oxleas and professionals with an interest in NVR.

In order for us to plan catering  
please let me know if you would like to attend

RSVP to [liz.day@oxleas.nhs.uk](mailto:liz.day@oxleas.nhs.uk)  
or telephone 020 3260 5215/5224  
or book direct on [www.woolfsonandtay.com/nvr.html](http://www.woolfsonandtay.com/nvr.html)

exhibition runs from 30<sup>th</sup> August to 11<sup>th</sup> September

## Appendix 5: Invitation to contribute

### COMMENTS BOOK

I am really interested in your thoughts, ideas and reactions to the pictures and information about our NVR group for parents. Please write any comments in the book below. Any comments may be used by me in my writing about NVR but your details will not be included.

If you are an NVR Graduate Parent or facilitator, and you would be willing to be interviewed by me for my doctorate, please take a participant information sheet and consent form.



## Appendix 6: Context article 2009

### **Using Therapeutic Letters**

#### **Heather's story**

I first met Heather when she was ten years old. Heather's mother had died unexpectedly the previous week and her school had made an urgent, concerned referral. Heather's mother had a chaotic lifestyle which involved alcohol, hard drugs and committing criminal offences to fund her habits. When it had become clear that Heather was being put at risk by her mother's behaviour she had gone to live with her father. Heather's father has always been a constant part of her life and took over her care when she was seven years old. Heather had taken a lot of responsibility for her mother. She felt guilty about having "told" on her mother when they had been shoplifting. Her mother had named this act "betrayal" and Heather felt the guilt like a hard stone in her chest.

Heather always wanted her father with her in the sessions. He also needed to bring her, as she was unable to travel on her own because of a visual impairment, caused by her mother's use of drink and drugs throughout her pregnancy. I worked with Heather and her father for a period of time, although we did not meet very often after the first few sessions. Near to the second anniversary of her mother's death, Heather said that she was missing her mother and felt that she had had created enough distance from the guilt to be able to say the things she truly wanted to say to her. Now her mother was not there to listen, Heather wondered how she was going to move on.

I wanted to create an opportunity for Heather to enter into a conversation with her mother in order to open up space for the possibility of reconciliation and forgiveness. I thought that Heather might be able to have a conversation with the internalised aspects of her mother (Karl Tomm, 2005). I was informed by the work of Tom Andersen (1996) who I remembered showing videotape of himself working with a man whose father had died. On Tom's suggestion the man wrote to his father, and read it aloud to Tom in the next session. The man then wrote the letter that he thought his father might have written in reply, again reading this out to Tom. It reminded me powerfully that often our role as therapists is to bear witness.

Heather is a gifted writer who uses her writing to explore and articulate her feelings in a way which seems beyond her years. She was very much the director of her own therapy, although I suggested that she wrote a letter to her mother about how she was feeling. Heather came to the next session with the letter, said a little about how hard it had been to get started, how sometimes she had felt angry and sometimes sad, and then read the letter aloud in a firm and clear voice, not faltering once.

When our work together finished, I asked Heather and her father if we could write something about the work we had done, particularly using the letters

Heather had written. Heather chose the name I should use for her in this article.

### **Heather's letters**

*Dear Mother,*

*After two years of your absence, I'm getting used to you not being here. For the first few months, I'd wait for the phone to ring, for you to interrupt me in the middle of my tea so that it would congeal and turn cold. But the phone calls never again came. I miss you, mother and I'd like to see you again.*

*You turned my world upside down. You were the person that didn't seem to appreciate me. Countless occasions there's been where I've spoken with my Gran and she says that you would have been proud of me but you would have found me a bore. I think I realised that you found me somewhat tedious during your life anyway, as you never encouraged me in my writing and didn't want me to be me. I mean, let's be honest, you obviously had no intention whatsoever of changing your ways. I absolutely loathed you sometimes you cow and on occasions when you had pushed me over the edge with your nonsensical twaddle about changing your ways, I wanted to push you over the edge so I might never have to see your spotty face again. Yes! And that's another thing: your godforsaken spots: I remember! You would stand before the mirror and gouge until the cows come home. Despite all my warnings and efforts to prevent you from scarring yourself, you went on and listened to no one. In the end, you became a scab.*

*Father: "Now there's something to discuss. You treated him so badly and said such terrible things about him behind his back, I would scarcely believe it. And me! I lost count after a while of how many times you and I battled over your lies. Most of the time you behaved with absolute stupidity. You just didn't know when to keep your bloody mouth shut!!!"*

*I love you mother. I don't have anyone to call 'mother' anymore and it hurts. Each time I meet someone who lives only with their mother, I feel a gnawing ache inside because I'm missing you so terribly. I think long and hard about what I will be like when I'm a mother. I resolve to be as different from you as it is possible to be. Unlike you, I'll make the most of my children and encourage them to be fine scholars and whatever else they may want to be. I'll be someone they can look up to, someone who'll set an example. I will be a better mother than you.*

*Sometimes I betrayed you I feel. I was never very patient. I felt hurt by your actions and insulted you, all the while believing you couldn't help it. But you could help it! You could! You could! And yet you never did. You mightily puzzled me, but now two years past your death, I realise why you were you. You were unhappy and abused in the head. Finally your unhappiness turned to fear and you became a coward. Finding solace in the drugs, you stuck to them and abused yourself further. Perhaps for a short while you didn't care what happened to your unborn child? Or perhaps you did care but were unable to*

*see what might happen? Whatever your reasoning, you behaved selfishly and caused misery all around you. You wouldn't be happy hearing this but the truth needs to be said.*

*Over the last couple of years, I have grown and developed. I am no longer a silly ten-year-old, interested in Barbie dolls and such trivialities, but a young girl nearing her adolescent years, full of ideas and hopes for the future. Now, nearly thirteen years old, I haven't got you holding me back, for that is what you did. I couldn't be happy and free to let my heart's desperate dreams fly. I knew that I needed to be away from you to be myself. I just couldn't stand you or the idea of trying to make me just like all other girls.*

*When I was eleven on Christmas Day, I began to keep a diary, something I always wanted to do. I filled it with memories of you and how much I missed you. I went through an odd stage in which I made you seem like some kind of saint. Then I grew up a little and stopped kidding myself. I realised you could never be anything but selfish and cowardly. I loved you, mother, and still do.*

*I'd have liked you to have understood that this letter isn't a lecture or a sermon or mummy telling you off. It is simply a way of expressing my inner feelings and pouring out my hurt heart from the depths of my soul. I am so grateful that I have this gift of expressing my mind. Let's end this heartfelt letter on a happier note and say goodbye as we didn't properly before. All my love goes to you, mother, and is so joyful that you are at last out of pain.*

xxxxxx

*Heather*

Father and I were both tearful, listening to Heather. It was hard to know what to say. I thought about Tom Andersen and being a witness and hoped this would be enough. Then Heather announced that she thought she should write a letter back from her mother to her and would read it out to me. This time, I didn't even get to make the suggestion. About a month later she came with the letter from her mother.

*Dear little Heather,*

*I don't really suppose I should be calling you little anymore should I? When I read the letter you sent me, I went through a stage, just like you did. In my stage though, I became an awful, selfish, cowardly figure – the mum you don't deserve. But then how can I have become it? I am all of these terrible things.*

*If I could, I'd go back to before you were born and have that conversation again with your dad – you know, the one where he tried to advise me about what I should do to ensure the safety of my life and my baby's life – you. You were my only surviving child Heather and the love I feel for you is quite quite*

*inexpressible. I don't want you to be an unhappy little girl, sweetheart. You're growing up fast – that's for sure! But don't grow up too fast. Enjoy your childhood while you have it and enjoy your lifetime. Life is beautiful and you have to grab it before it is too late. I screwed my life up big time and I'm begging you not to share the same fate as Mummy did.*

*What is your favourite song, Heather? I always found that listening to music consoled me when I was angry at your dad or just generally miserable. My favourite song was always Woman by John Lennon. Is it just me that makes you angry or is it other things too? Do your friends at school upset you? Do you think of me when you start to see red? What do you do? When you are frightened, how do you deal with your fear? If you were asking me these things, I'd tell you I turn to the drugs. Well I would tell you that today, but yesterday I'd have probably denied it altogether.*

*You and your dad have a strong bond and that bond is not for me to bargain with. I know this now. I used to get so outrageously jealous of you and dad. But now that I've seen how much of a better parent he is than I'd have been (ever!) I don't need to hate him anymore. I don't want to hate him. I want to be proud of his daughter. I'm not your mummy anymore so I can't guide you through the stages of life but he can and so to be a good person as you say you want to be, you must let him take you through life.*

*I may sound terrible saying this to you, Heather, but sometimes I wonder if there was any amount of time that you had any good feelings or even love for me whatsoever? Because as you know, Mummy couldn't love herself. Alright, you hugged me and told me that you loved me but was it real for you? I don't know whether you ever really looked up to me at all as a role model. Perhaps... I don't know. I'm quite hurt by what you said to me in the letter, but just for once I'm not crashing around, breaking down your dad's front door. I'm talking to you and trusting you with the words I could never say in my short life. I'm hoping you can understand them although I'm sure you can because you are so clever and bright. Not like me. This is the thing that hurts me most, Heather. You and I were so different. It's like you said in your letter to me – that you were mummy and I was Heather. What is it like to be Heather I wonder? Are you happy in yourself, sweetheart? Because that is what matters most, more than anything in the world. I need you to be a happy girl for me. For my part, I am sorry that I couldn't be the mum you so richly deserve.*

*I love you forever, Heather and daddy too.*

xxxxx

## **Heather and her father's reflections**

I'd like to make space now for Heather (now 14) to say something about the process of writing the letters and then reading them out. I was curious about how she reflects on these sessions now.

### **Heather**

Well! My goodness! What a lot of memories all that brings back! At first I wasn't sure how to start my little piece. My dad told me that this article could help other therapists and their clients, and that really did get me thinking. So much time has gone by since I wrote and read those letters and they barely seem real to me now. The letter from my mother to me seems very true to life but also quite confessional, as many of her real letters were. I used techniques from her letters to aid me in writing mine, the sort of things like "I'll change just to please you" and the way she would beat herself up again and again, continually saying sorry etc. But I was never fooled. I knew her like the back of my hand. She was a very predictable person. She always planned her next move but everyone else would know what it was before she did.

There are some things in my letter to her that still hold true now. I'm still resolving to be a much better mother than her and still feeling that she was the child and I was the adult. There is one great change though, namely that I have got out of the confusing mindset I was in when I wrote to her, one minute telling her I loved her and the next showering her with abuse. I now know exactly what my feelings are and I'm quite sure they will never change again. I'm also unspeakably grateful to my dad and to Liz for helping me get through what I had to. They have both been great influences on me.

When I wrote the letter from my mother to me, I had to slip into her role and really force myself to be Kathryn (the name I have chosen for my mother for this article). I had to imagine the feelings she'd feel and couldn't let myself get out of that state of mind. She wouldn't have let herself think that she was as bad as she actually was and so what I imagined her to have written would have been her attempt to redeem herself but deep down with the knowledge that redemption could never be had. We both knew she could never do that. I had to be Kathryn when I wrote the second letter but Heather when I read it, but Heather didn't believe anything that Kathryn wrote. What Kathryn told me was true to herself but complete lies to me.

It's hard to say which of the two letters was harder to write. Kathryn's was hard because I had to tell a mountain of lies while mine was hard because I had to let go of a lot of home truths. Kathryn almost seemed to come back to me when I had to write to her and I found myself actually being careful what I said, as if

she could hear me or was looking over my shoulder. She was doing what she had never done during her life and at the same time holding me back as she always had done. I really truly resented that.

The sessions were fantastic and my dad was always a great help. After every session, I felt a little more relieved and more sure of myself. Confiding all my innermost thoughts to Liz and my dad almost gave me the confidence to be a real individual. I could expand on my already rapidly growing uniqueness and use it without fearing rebukes from others.

Liz, my dad and me are the only three people in the whole world who understand me through and through. In reality, and briefly in the fantasy letter, my mother gave up the struggle between herself and my dad, which lasted all my life. I was never able to turn a blind eye to the situation because most of the time I was caught up in the middle of it. My dad's bitterness towards her was because she wouldn't be a decent parent, not keeping appointments, taking drugs, going on shoplifting trips etc.

Actually, whenever I remember her thieving escapades, I'm reminded of a joke made by my dad about her. We once saw an Indian restaurant called "Mumbai", and dad nudged me and said "No, mum shoplift!" Also, the initials MDB, spotted on a shop in Bexleyheath, were immediately translated to "Mummy's Doughnut Breakfast". This phrase we found highly amusing because she went through a period where she ate nothing but sugary food, probably as a comforter or just as another means of relieving herself of pain. I really appreciate my dad's jokes about her because, on a serious note, they all point to the truth and if that is what matters most (which I'm certain it must do) then that's perfectly good enough for me.

I admit that I was never really patient with my mother. I agree that I could have tried to see and understand things from her point of view, and I'm sorry that she had a miserable life but a child is never at fault. If an adult is miserable because they are a drug addict or an alcoholic etc, it will be because of the way they are developing. Children mustn't ever feel guilt for what isn't their fault or for what they cannot prevent. I made that mistake and I wouldn't wish anyone else to have those horrible feelings. Also, it's never a good idea to try and black out the past. We have to face up to reality and move on but don't hide from the truth because it was a part of our history and we can't ever change history. What's important is that we change our attitude towards whatever has gone or is inevitable. Be as positive as you can be in this life, don't waste any opportunities that come your way and above all, always hope.

## **Heather's Father**

My impression of the therapy sessions is that they were always positive, and while, of necessity, they dealt with deep emotional issues, I always felt that Heather was safe within them and that it was an environment where no subject was unable to be broached for fear that it would be too upsetting.

I had always encouraged Heather to talk, and it was clear that she enjoyed doing so within the sessions and had no hesitation in doing so. Once a session was over, we would usually continue with the subject matter while going on to school.

I think it was an excellent idea of Liz's to have Heather write the letter to her mother and to try and inhabit her mother's personality while writing one back. Having seen a huge number of examples of Heather's writing, I had no doubt that she would be up to the task. Even so, I was taken aback by the power of her writing, especially at the letter written from her mother's point of view. It was so real, and so true to the way that her mother expressed herself, that I sometimes found it difficult to believe that it wasn't written by her actual mother, even though I knew, intellectually, that it wasn't. As such, it affected me quite deeply, and I found myself feeling upset and angry at her mother, both on Heather's behalf and my own. These feelings were far from new, as, obviously, I had been dealing with her mother for years. Still, on the occasions of the writing and reading of the letters, I was compensated by the fact that Heather was able to take control of the situation. She was, at last, able to direct her emotions towards her mother without them being sidestepped or ignored or otherwise diverted, which is what her mother would do when she was alive, having had no wish to be exposed to emotional honesty.

However, I think that there is an aspect of the exercise that hasn't yet fully succeeded, and that is of Heather being able to forgive her mother. While I think she is reconciled to having had the mother she had, she doesn't talk about her with any warmth, positiveness, or love, though is never reluctant to mention her or take part in any conversation about her. In fact she is quite dismissive of what she sees as her mother's inappropriate behaviour, though can laugh at its unintentional comic aspects. I think that this is a stage of development, and that she will one day think of her mother with more fondness, especially when she realises the degree to which intention plays a part in apportioning responsibility. I think that only then will Heather be able to really forgive her mother.

## **Personal reflections**

I wanted to write about Heather's letters to her mother because of the sheer power of her writing and the extraordinary privilege of having been a part of some of the moments that made up this process. Heather's father was a very

important part of what happened and this work was carried on in the many conversations they had outside sessions, including their reflective contributions to this article. I'm not sure now what I think about whether Heather should forgive her mother: I think she will continue to develop this relationship in her own way. Maybe the most important thing for Heather is to have regained a sense of her own identity and her unlimited possibilities.

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Appendix 7: Cover of Context



# Non-violent resistance: *A community-group programme for Latin American families*

Liz Day and Gilda Flores Aqueveque

Non-violent resistance: A community-group programme for Latin American families

There are about 113,000 Latin Americans (refugees and migrants from South America who speak Spanish or Portuguese) living in London (McIlwaine *et al.*, 2011). They come from many different countries. Many Chileans, as well as some Argentinians and Uruguayans, came in the 1970s as political refugees fleeing from the military dictatorships of Pinochet and Bignone. Others, who came before the unskilled work-permit scheme was withdrawn in 1979, included Colombians, Ecuadorians and Bolivians. Latin Americans have a higher rate of employment than the London population as a whole, but are more likely to be employed in low-paying jobs in service industries, even though over a third were employed in professional or management positions back home. Many are isolated through lack of working English and only a fifth of them access mainstream services and resources. The boroughs of Lambeth and Southwark have the highest numbers of Latin American residents.

Their children face significant difficulties in terms of educational achievement. For newly arrived families, there is a lack of familiarity with the new culture, and children often have to take on a carer's role with younger siblings in the family, due to their parents' fragmented work-patterns and antisocial hours (cleaning teams often work through the night while offices are empty). Children find themselves included in adult conversations about the social and financial difficulties faced by the family and may need to act as interpreters for their parents.

Gilda was aware of these issues through her work with Shelter and the Latin American Women's Rights Service. She wanted to create a project that offered support and interventions to parents who were struggling with their children's behaviour. There may be a context of

domestic violence or social services involvement, where parents struggled to control their children using some of the physical methods they themselves had been brought up with.

There is no specific service offering family therapy in a therapeutic setting to the Latin American community, or a non-violent resistance workshop, or these services in their own language; Anahi, a counselling service run by the Latin American Women's Rights Service, is for women only. Gilda wanted to provide a secure space where parents could create their own support networks and access other useful organisations, as well as learning non-violent resistance strategies to help with dealing with challenging and/or violent behaviour at home.

## Isolation and engagement

Migrant and refugee communities are often isolated and their children grow up in two cultures, which can lead to difficulties in communication when new and old values clash. Parents who bring with them ways of parenting that are unacceptable in the UK are faced with the dilemma of how to bring up their children; they can be left feeling deskilled and hopeless. The concept of a 'new authority' (Omer, 2011) that developed from non-violent resistance can help parents find an alternative way, leaving behind the more traditional view of an authority based on strictly enforced discipline and punishment and giving parents a sense of clarity and a new understanding of the roles and responsibilities of adults and children.

Latin Americans are known for their preference for meeting in small groups. There is a particular sense of shame about struggling to cope; language difficulties, domestic violence, aggression, abuse, discrimination, anti-social working hours and issues around migration all

compound this. Social isolation becomes a natural way of coping with the feelings of shame and being a member of an ethnic minority group in a large cosmopolitan city makes it easy to avoid services or to disappear. Creating genuine engagement with support services is particularly challenging. Some migrant communities prefer to use generic services where they are less likely to encounter someone they might know from back home; this can be to do with long standing political differences, fear of retribution or fears about confidentiality. This has not proved to be the case for Latin American families, who have been keen to meet together within a shared cultural setting.

The project was planned and delivered in Spanish by a Latin American family and systemic psychotherapists, a psychologist and by teachers in special education. Given the difficulties of reaching out to migrant communities, the task of recruiting families was a challenge. The team contacted local schools, Latin American charities and organisations. They published articles in local Latin American newspapers, inviting parents to make contact. Gilda was interviewed on the Latin American radio and television stations. A letter outlining the goals of the project was sent to community leaders, churches and local GPs. The London Borough of Southwark Children's Services were offered places for Latin American families whose children were on child-in-need or safeguarding plans. Friends and colleagues were also informed about the project and asked to circulate the information among their contacts.

The programme was designed to work with up to 15 families and offered individual family-support as well as the ten structured-group sessions. The structured sessions followed the format developed by Liz Day and Elisabeth Heismann (2010).

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### Adapting the group to the Latin American community; rituals, language, music and food

The ten-week group programme was specifically tailored. Some non-violent resistance concepts had no equivalent in Spanish so needed creative re-modelling. The booklet, the parent workbook and the DVD were adapted to their culture and language. The role-plays were filmed using Latin American actors and local settings. The gestures, the words used and the body language is all Latin!

Early on, the team realised most families were very isolated, their extended family was not in this country and they had no resources to draw on for childcare while the parents were attending the group. The Latin American Women's Rights Service was able to part fund a crèche worker at the centre, who ran activities for the children.

An important aspect of the sessions was to create new meanings for the group by using different exercises. The group always ended with a non-verbal communication exercise that helped parents give feedback about what the session meant for them. These exercises became really popular and were regarded as an enjoyable ritual, which marked the end of each session.

The group had parents from different backgrounds and a variety of Latin American nationalities. Some had direct involvement from children's services, the police or domestic-violence units. There was violent or anti-social behaviour, and some young people were displaying concerning behaviour because of their involvement with drugs, alcohol and/or gangs outside the home.

Half way through the programme, parents began to develop a sense of belonging, empathy and understanding of their difficulties as parents at home, and in their 'new home' as migrants or refugees in this country. Many had exchanged telephone numbers and were meeting at each other homes to revisit certain aspects of the programme and acting as 'supporters' and friends. As the programme became more familiar and the group gelled, collaborative conversations evolved which deepened the therapeutic impact.

Food and music are very important for Latin Americans, therefore facilitators and parents created a special event that invited the group to bond and to experience a sense of attachment. There was a communal meal where they all brought a typical dish from their country of origin. Parents were also

encouraged to bring their close relatives, friends or partners to this social event if they wanted to.

### Graduation and testimony

At the end of the programme, there was a more formal graduation event to which participants could bring family, friends and significant others to witness their achievements. This event was celebrated with music and food and the awarding of certificates. Funders and supporters were invited. During this event, people stood up and spoke about how their lives had changed – this was unplanned and unexpected. A mother, her eyes filled with tears, said that, as a mother, she only did what her parents had done to her. If she had known there was another way of being a parent, she would not have had her first child taken away from her. A boy stood up and said how much nicer his parents were; they didn't argue and no one hit him anymore. The emotion in the room was overwhelmingly positive and full of hope for the future.

Parents reported that they felt:

1. Less hopeless
2. More confident in their parental abilities
3. Increased self-esteem
4. More empowered
5. A sense of belonging
6. Less depressed
7. There was no physical harm
8. There was less shouting
9. They had more control over their anger

Families said their children's schools had noticed changes in behaviour, with the children seeming more settled and having fewer detentions. The families noticed they shouted less at home and talked more. Mothers had started to learn how to stay calm and avoid getting into heated discussions. They still have passionate conversations, but these are no longer abusive and destructive.

### Conclusion

For Gilda as a facilitator, it was inspiring to see the positive impact the programme had, the parenting strategies learned and the increase in the parents' ability to communicate with their children and with each other. Parents and facilitators co-created new meanings together in the room, and the group setting intensified the effect. Parents felt more hopeful when they heard another parent telling a story of change and moving forward.

For Liz as a supervisor, who spoke no Spanish and who therefore could only listen to how the language sounded, it was extraordinary to witness the ways in which the

facilitators embodied the main principles of non-violent resistance in their voices and their actions. Liz will always remember the mother who spoke to Gilda, with tears in her eyes, and said, "You have given us back hope".

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Liz Day and Gilda Flores Aqueveque first met when Gilda was a family therapy trainee on placement at Oxleas NHS Foundation Trust, where Liz is a family therapist and one of the authors of the group programme for parents (Day and Heilmann, 2010). Gilda is from Chile and Liz has many Chilean friends.



Gilda first learnt about non-violent resistance (Omer, 2004, 2010) during her training at the KCC Foundation. Gilda joined the Oxleas group programme as a facilitator and this gave her the idea of developing a similar resource for the Latin American community in South London.



Liz is principal family therapist at Bexley CAMHS. She is currently completing the professional doctorate in systemic practice at the University of Bedfordshire where her research topic is the non-violent resistance group programme.

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