



Overcoming aggression, harm and the dependence trap: Non Violent Resistance in families with a child on the autism spectrum

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Editorial comment

Peter Jakob, a Consultant Clinical Psychologist and Michelle Shapiro, a highly specialist Clinical Psychologist, work for Partnership Projects UK Ltd which offers training and consultancy on Non-Violent Resistance (NVR). In this chapter, they give details on the methods used within the NVR approach with individuals with autism and their families. NVR was not specifically designed for autism but the authors' experiences of working with families with children with autism suggest that it can be very effective. They argue that high levels of anxious arousal in young people with autism can create vulnerability for aggressive behaviour, but that many peaceful young people are testament to the fact that being on the autism spectrum is not sufficient in and of itself for being aggressive.

Many families of children and adults with autism do not experience aggression and violence from their children, but a significant number do and this chapter will be of great interest to family members and staff who live and work with this group. The term NVR basically refers to responses to aggressive acts which are not violent, and which aim to de-escalate the situation and reconcile parents with their children and vice versa – raising 'parental presence' becomes the alternative to being punitive or critical of their child. Acts of conciliation without conditions attached are used, and showing and expressing interest in the individual's activities which perhaps have come to worry, annoy or irritate family members are also advised. So understanding and cooperation and non confrontation are key, in addition to not over-accommodating to the individual, whilst respecting the difficulties that autism may bring. The strategies used in NVR can also be used just as effectively by professionals working with individuals with autism.

Introduction: Aggression and family intervention

Violent, aggressive and controlling behaviours in some young people on the autism spectrum present risks and challenges to parents, siblings, teachers and members of the wider family and community. For the young person, aggressive behaviour has serious consequences such

as alienation within the family and increasing social exclusion. Parents' difficulties range from physical injury and fear of their child, which can take on the form of post-traumatic stress and sheer helplessness, to confusion about which behaviours they can and cannot hold their child responsible for, and to what they should attribute such behaviours: 'Is it him, or is it the autism?'. Some

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parents may have been told their child has a conduct disorder – but what does this mean and what interventions does it suggest? They may experience shame and believe they have failed as parents, feel severe anger or hostility, and have a sense of loss resulting from the increasing disaffection in the relationship with their child. Parents' relationships with one another often suffer under the burden of severe stress, especially as rifts resulting from different parenting styles widen under the impact of what are experienced as unsurmountable difficulties.

The entire family can become isolated, when contact with other families is avoided by parents who anxiously anticipate problematic incidents involving their child, not feeling understood by parents with neurotypical children. Children tend to threaten against, or blame, parents for informing other people outside the family about their violent behaviour, isolating the family further. Parents often feel protective towards their child and can become reluctant to engage in prescribed parenting practices, further raising the barrier towards constructive engagement. Professionals in turn may experience parents as uncooperative, and can construe the family as dysfunctional. Parents who experience child-to-parent violence often feel controlled by their child. Their accounts resemble those given by victims of adult domestic violence (Holt, 2012). Repetitive patterns of aggressive or otherwise harmful child behaviour have a coercive effect (Patterson et al, 1984).

Siblings of an aggressive young person on the autism spectrum often express hostility towards their brother or sister and feel neglected. A sibling may develop negative beliefs about their parents, perceiving them as uncaring and unjust, or as weak; 'weak' parents cannot be burdened with the knowledge that the sibling has been intruded upon, hurt or otherwise victimised (Omer et al, 2008). Often scared of the young person on the autism spectrum, siblings may become submissive – in a similar way to the parents – and accommodate their brother or sister to such a degree that their own psychological needs are no longer met. Where siblings show anger, their expression of emotion and escalating responses add to an atmosphere of increasing tension and distrust in the family.

Increasing social exclusion and criminalisation are dire consequences for the young person on the autism spectrum, arising from their own violent or harmful behaviour. They may feel alienated and bereft of support – support they require even more than others in order to negotiate the social ambiguities of the neurotypical world around them. If anxiety and fear are constant background emotions in the experience of the young person, they require more emotional containment in the face of an external world which will accommodate them less than the family. However, parents struggle to remain emotionally self-regulated in the wake of aggressive incidents, or in Hughes and Baylin's words (2012), to be 'the adult in the room', making it difficult to provide the very containment the young person needs. A parent with survival reactivity in the face of a child's aggressive behaviour – whether hyper-aroused in fight or flight mode, or feeling immobilised or submissive – is a caregiver experiencing a loss of parental presence.

Parenting a child on the autism spectrum requires greater than ordinary abilities. The ability to provide guidance, the ability to set and maintain appropriate limits, the ability to discern between wants and needs of the child, what is autism-specific necessary adjustment and what is accommodation to controlling behaviour, the ability to remain attuned to their child, decipher distress signals and address the child's psychological needs – are all diminished, when parents become chronically anxious, angry or submissive.

Person centred approaches seek to address underlying causes of child aggression. High levels of anxious arousal in young people with autism can create vulnerability for aggressive behaviour, but many peaceful young people are testament to the fact that being on the autism spectrum is not a sufficient condition for developing chronic aggressiveness. Whilst a diagnosis of autism can be helpful in accessing support and educational adjustment, parents are rarely provided with sufficient resources for responding effectively to seriously challenging behaviour. There is a growing evidence base for the effectiveness of Non Violent Resistance (NVR) in reducing child to parent violence, harmful and self-destructive behaviour (Gieniusz, 2014). An integration of NVR with Cognitive



Behavioural Therapy (CBT) is proving to be very helpful for helping anxious young people who find it hard to deal with the challenges of the outside world, become avoidant and socially withdrawn, and refuse to engage in therapy (Lebowitz and Omer, 2013). There has been no specific outcome study for NVR with children and young people on the autism spectrum to date, but a UK pilot study for NVR involving some young people with autism has shown promising results (Newman et al, 2013). NVR does not require the young person to participate in family treatment. This gives parents a way out of the impasse they often experience, when services which are directly tailored to the young person fail to bring about a change, or their child refuses to engage constructively with therapy.

Principles and methods in NVR

NVR has been developed by the team around Haim Omer (Omer, 2004, 2011). The approach supports family members and communities around the young person in resisting harmful behaviour. Parents learn to refuse to give in to controlling behaviour, whilst making carefully planned efforts at reconciliation with their child. They challenge the young person after incidents of aggressive behaviour under carefully controlled conditions and with the support of non-blaming, non-critical other adults. At the same time, parents learn to recognise their own escalatory responses, in order to de-escalate and reduce angry confrontation. Asking the child or adult, Why did you do that? is immediately blaming the child and not seeing other factors in this, including the actions of parents or staff. When children or adults have experienced lots of negative comments and blame, just the smallest indication of criticism can have a massive, negative effect.

The child or adult with autism is usually better at escalation than the parents or staff as they are less inhibited and have more energy, so if parents also act to increase escalation there is a destructive spiralling upwards of the situation. NVR works to prevent this.

Therapists or behaviour support practitioners using NVR promote the engagement of adults from outside of the family to help overcome isolation and develop an increasingly large support network. Overcoming the

barrier of shame enables parents to 'break the silence' and build a network of supportive adults, so they no longer feel alone and overwhelmed in responding to the challenges they face. By realising that others around the family learn about the violence, and hearing their expression of concern, young people become more self-conscious in regard to their own behaviour.

Some of the better known methods in NVR for challenging a young person's destructive behaviour are the *Announcement*, the *Sit-in* and the *Campaign of Concern* (*Message Campaign*).

The Announcement

The parents set a boundary to aggression or other harmful behaviour by declaring in a formal way, that they will from now on resist this behaviour, will not keep it a secret any longer, and will involve other adults to help the family. They reassure that they will not do anything to humiliate the young person or act aggressively themselves (which can, for example, include an apology for having shouted at the child in the past). The Announcement also includes a positive description of the child, and a positive vision for the future. It can be in written or drawn form, illustrating what is expected of the child and what the parents will do. It is written in a neutral, operational way and clearly states the concerns for siblings, parents and for the young person themselves in relation to peers or exclusion from activities, when very difficult incidents occur. Parents are advised to choose which actions to work on (usually those which are most damaging to the family) and to stick to these and not to add in others. The Announcement also includes positive statements about their child. Parents will pledge that they will be non violent and will not shout, for example: 'I have shouted at you in the past, but I am not going to shout any more.'

A Sit-in

In this method, the parents sit with their child quietly after a sufficient period of time, so their own and their child's psycho-physiological arousal has decreased sufficiently to allow less escalatory communication. The posture of the parents or staff should also be relaxed and not confrontational. A phrase used is to 'strike whilst the iron is cold' (ie after the heat of the argument).



A deferred response is much better as parents and staff can then plan what they are going to say and do and are less likely to be angry or to anxiously avoid challenging the child. Adults are also advised to state exactly what the child and others did in the incident, rather than asking tangential questions such as, 'Do you remember what happened?' or, 'How do you think Mrs X felt?'

Parents and staff make a demand, such as saying, 'We need to have a solution. You will get upset again in the future, but we need to know what you will do from now on when you get upset, so you don't hit your mother or anyone else.'

However, rather than being insistent or goading the child to deliver an answer, parents wait quietly, and get up and leave after a period of time. Insistent parental behaviour is replaced by persistence – parents may repeat the sit-in many times.

An important part is to share this event with others in the family or with friends or staff, so that the family does not remain silent about very difficult events and it does not remain a secret. Single parents are encouraged to talk to their child with a neighbour or friend and in two-parent families, both mother and father are encouraged to talk to the child together to show solidarity and that they mean business. In this way, they build 'adult presence'. If parents show they are frightened of their child, or not confident, this increases their child's feelings of anxiety. Strength not power is advocated and the more confident parents become, the more they stop avoiding their children physically and psychologically. The child also knows other significant people are working together. Very often in families where the child is aggressive, there is a splitting between home and school, for example, where staff and parents may blame each other or feel guilty at not being able to deal successfully with the child's emotions. The family therefore becomes even more isolated. In NVR, the team work to join up those in the child's life.

A Campaign of Concern

This may be conducted for weeks or months; here, supporters of the family communicate their concerns over any recent problematic incident directly to the child, in person, by telephone, text or other media. All of these methods are based on the principle of raising caregiver presence by improving parental emotional self-regulation. Parents learn to communicate their non-acceptance of a harmful or destructive act in a respectful manner, whilst resisting the temptation to give in to their own anxiety and withdrawing, giving in to their anger and escalating along with the child, or yielding to their sense of helplessness and becoming submissive. Parents carefully practise their communication, learning not to respond to cues which in the past have triggered unproductive reactions, whilst remaining attentive to the child, and focused on relaying their expectation of improved behaviour. Raising presence is the main therapeutic factor of the approach, which discourages punitive responses, and does not rely on 'consequences' or reward systems.

Whilst de-escalating during the use of positive action methods and in everyday family life, parents overcome their own submissiveness to the child when they stop giving in to inappropriate demands. At the same time, the focused use of reconciliation gestures supports the development of more positive internal images or representation of the adult in the young person, and more positive internal images of the child in the adult. Reconciliation gestures are fundamentally different from rewards; they are unconditional acts of love and care. By showing their unconditional acceptance of the child as a person through acts of kindness rather than words, parents can re-kindle a dialogue with their child that is focused on child needs and parental care (Jakob et al, 2014). If a parent or teacher says, 'He does not appreciate X ...' this shows that the act of kindness or conciliation was conditional on being thanked. A reconciliation gesture from a parent or teacher is an act which does not require a display of thanks. For example, the parent might say or offer, 'Here, you can have ... X'. If the child shouts, 'Don't want it!' the parent or teacher is advised just to walk away or to say, 'OK, another time ...' – and to maybe re-offer this at a later point, rather than making a verbal or non-verbal negative reply to the effect that the child is ungrateful.



Non Violent Resistance and good practice in autism

A common question is, 'NVR is a social approach – can it work with autism?' Our experience shows that it is indeed suitable for families with a young person on the autism spectrum. Much of the fear young people experience is the result of their struggle for survival in a social environment that is dominated by neurotypical social norms and expectations. However, parents of children who act aggressively rarely experience distress signals that directly express such anxiety, because distress is quickly superseded by anger and aggression. The young person also loses awareness of his or her own anxiety, when they habitually 'flip over' into anger. Perception of threat motivates self-protective action, and angry aggression can become a habitual response. The more a person threatens, the more they feel threatened as they fear retaliation. While fear motivates withdrawal from a threatening situation, anger motivates to control it – more precisely, to remove such triggers, that could potentially elicit fear. If a young person with autism experiences their social environment as threatening, it will be helpful for their parents, teachers and other adults to help reduce its threatening qualities. De-escalation in everyday life dramatically reduces the perceived threat potential of the young person's social environment.

However, de-escalation requires parental strength. Parental submission to their controlling child is different from de-escalation. Anxious submissiveness or avoidance of the child by the parent are not emotionally containing responses; in the short term, a young person may experience relief or satisfaction when controlling others. However, as their parents' helplessness increases, they miss out on the 'anchoring function of attachment' (Lebowitz and Omer, 2013) – the sense of security that emerges from feeling contained by a strong parent. This raises overall anxiety levels. To make matters worse, parents may aim to overcome their helplessness by attempting to control their uncontrollable child. Yet, the parent's fleeting sense of power vanishes with the illusion of control, when the habitually angry young person experiences the parent as an even greater threat and responds even more aggressively than before. When a parent acquires a position of strength and neither

submits, nor attempts to compensate for helplessness by escalating, they can become attuned and respond in an emotionally containing manner. The non violence based positive direct action methods offered by NVR enable parents to acquire such a position of strength.

Often, young people with autism who show controlling behaviour do not actualise their potential. Omer (unpublished) addresses the 'dependence trap':

'When the neuro-developmental difficulties, characteristic of ASD, meet with a protective and accommodating parenting style, a Dependence Trap is formed, hindering further development of the young adult with ASD, and distressing both parents and their grown-up child.' (p 1)

Whilst many features of autism, such as central focus in attention to the environment, literalism and reduced theory of mind, sensory sensitivity and a need for predictability require the environment to adjust to a young person with autism, parental over-accommodation can result in a failure of the young person to adapt to the world around them to the best of their potential capabilities. Parents need to balance their protective adjustment with support for their child's adaptation to the environment. The child needs to be supported in this process of adaptation, rather than protectively shielded from it. When the young person learns that controlling their parents can eliminate the need to make effort to adapt, they feel short term relief but then become less capable of surviving in a complex social environment. The ensuing lack of competence raises the potential for distress even further.

Some young people who suffer from stressful, anxiety-related difficulties do not show aggression, but become highly avoidant of anxiety triggers both within and outside the family home, by controlling their environment through passive, non-cooperation. By refusing to cooperate with their parents' reasonable demands and expectations, they fail to realise their potential; young people in this situation will not develop the degree of independence they are capable of. When making a judgement of their child's potential against the constraints placed by autism, parents will often err too readily on the side of



attributing the young person's passivity to an autism-based 'inability'. They may also feel controlled by blame (the child may say things like: 'It's your fault I didn't XXX, you should have let me go on the computer last night ...'), or afraid their child may harm themselves, if they do not comply with his or her wishes.

Non violent responses can lead both the parent and the child out of the dependence trap. Recognising their own patterns of automatic obedience to the child, parents learn to refuse to give in to unreasonable demands by their angry or anxious child. They raise their presence when using positive action methods to protest against either aggressive and violent behaviour or passive non-cooperation, and at the same time repair ruptures in the relationship by using reconciliation gestures. The parents' gradual, unilateral reduction of services makes it increasingly more difficult for the young person to rely on them, promoting more independent behaviour and enabling the growth of competence and an increase in self-confidence. When they withdraw a service, parents may need to replace their previous protection with active support (eg a parent who expects a reasonable contribution to household chores can teach their child how to carry out such chores). When the parents' unilateral reduction of services is opposed by the young person with an act of control such as an aggressive incident, parents are supported in their protest against this, using positive action methods in a non-escalating fashion, rather than resorting to punishment, hostile arguing or verbal self-justification.

Autism-specific ways of working with NVR

NVR can be adapted to the specific needs of families with a child on the autism spectrum. Some of these adaptations are described below.

Mentalisation

Omer (unpublished) coaches parents to use carefully formulated written or verbal mentalising messages, which help the young person appreciate the emotional impact of their behaviour:

'The message consists of four elements:

1. a description of an event in which the son was extremely dependent;
2. the parents' perception of the son's mental or emotional states, yielding the dependent behavior;
3. the parents' emotional and mental state evoked by the event; and
4. how the parents intend to address similar events in the future'. (p 7)

These messages are given tentatively:

[I said to him] you are not doing your part. I guess you might feel over-burdened, yet it makes me feel very frustrated. If you need me to explain again how the rotation works, or how to work the washing machine – I will be happy to do that. Yet, if this reoccurs, I will understand you don't want to take part in the rotation, therefore each of us will be responsible for his own clothes only.' (p 12)

Attachment behaviours

Parents often have difficulty connecting emotionally to their child, when they struggle to access his or her differently focused world of experience, and fail to identify the child's attachment behaviours. Rather than assuming the autistic child 'doesn't do attachment', it is helpful to assume they 'do attachment differently'. Child focused work in NVR gives parents the opportunity to use reconciliation gestures to address unmet psychological needs in the young person (Jakob, 2011). Planning reconciliation gestures helps parents sensitise themselves to unmet attachment needs and increase their awareness of the child's attachment behaviours. A parent who sees the Internet as the enemy because she feels her son uses this excessively to play interactive games such as World of Warcraft, will find it difficult to access his world of experience, creating a relational rupture between them. It is preferable for parents to demonstrate an interest in their child's interest. They can use reconciliation gestures to do this which demonstrate attention and attunement to the child's way of relating to their world of interest.



'I used to switch off when I heard him babble on about the Internet. I guess I could make a point of listening, or ask him to explain some of what he does on the Internet to me.'

Emphasis on parental wellbeing

Parents 'taking care of themselves' is seen as an integral part of their parenting in NVR. This should be especially emphasised for parents of children or young people on the autism spectrum from very early on in therapy. Parents who are exhausted and depleted of all hope and internal resources are simply not able to parent effectively, nor are they realistically able to access their sense of compassion, care and even love for their child. Parents have already been through the often frustrating, distressing and confusing process of having a child diagnosed. They also experience a very controlling and demanding child, who frequently dictates the functioning of the household. They may be further judged and criticised for their parenting by family, friends and the professional community. Few parenting experiences could be more demoralising than a child's apparent indifference to the parent, in spite of their best loving efforts. The fact that this is a life-long condition raises the parents' awareness that they are not going to reach an end point where the problem is resolved. It is not just a matter of giving parents permission to act in a self-preservatory manner; practitioners must particularly focus on promoting self-care in the parents, so they are in the best position to undertake the long-term challenge. This may also entail supporting parents to re-claim their own partner or marital relationship. Where problematic child behaviour has led to high levels of parental conflict, guiding parents to exchange gestures of reconciliation with each other can help alleviate stress on the relationship.

Supporting siblings

A principle in NVR warranting special consideration is the support of siblings. These children have often experienced violent or temper outbursts by their sibling, and find that their parents need to spend a large amount of time and energy in trying to manage the child with autism. As a result, parents may devote less time and attention to them, become more impatient and less attuned to their needs. Having witnessed their own

parents' sense of helplessness in managing the child with autism, these children may require therapeutic support. A practitioner using NVR will make contact with these siblings, helping them to understand that the parents are seeking guidance to manage the difficulties in new and different and more effective ways. Psycho-educational work explaining the principles of non violent action will help the sibling appreciate, that, for example, deferred responses by the parent do not mean their brother or sister is 'getting away with it', but that the parents are carefully planning a response to harmful behaviour, which will put them in a stronger position than their previous escalating reactions. This is especially important when parents take action to protect a sibling who is frequently targeted with acts of violence or other harmful or humiliating behaviours. By feeding back to their child which kind of action they have taken to protect them, siblings can feel included in the non violent process itself. The siblings may also need more frequent reconciliation gestures, to remind them that they too are very much in their parents' thoughts.

Fine-tuning behavioural expectations

The need for re-balancing protection from challenges and support of the child to meet developmental challenges has been described above. With the diagnosis comes a sense of permanence of the presenting difficulties, which can lead to accommodation of the child at the expense of support to meet his or her challenges independently. This is where a realistic re-appraisal of each difficulty is needed. A child who is experiencing considerable peer conflict at school, may be doing so for subtle reasons related to their autism. One parent, who had believed her son's angry responses to peers were inevitable, came to understand conflict grew out of his peers' discomfort with her child not understanding acceptable 'body space' or distancing in social interactions; he would stand intrusively close to them. He in turn felt rejected and confused by their behaviour, and reacted to his own distress by becoming aggressive. Action focus in NVR can be helpful in such situations: whilst resisting the aggression, support can be given to master the difficult social interactions that are required for integration into the peer group. Here, the child was simply taught to accept the distance at which his peers felt comfortable – whether he could understand

this guidance or not. His mother used coloured cards to indicate an 'OK' distance (green), a 'bit too close' (amber), and a 'too close' distance (red). No elaborate explanation was given. When a parent is confident they can distinguish between acceptable and unacceptable behaviour and can formulate realistic behaviour goals, the NVR methods – such as the Announcement – promote communication about parental expectations in a clear and non-confrontational, yet powerful manner. Avoiding unhelpful explanations and discussions, and shifting from insistence to persistence enables parents to repeatedly reinforce the guidance they give their autistic child, without endless power struggles or helpless surrender. Stepping back from the 'illusion of control', parents learn they cannot achieve immediate success, but with persistence increase their guiding influence on their child.

Concluding comments

Non violent methods help reduce mutually escalating conflict in families with a child on the autism spectrum. NVR can help bring down the often chronically high levels of psycho-physiological arousal in everyday life, and support the development of more positive images of the parents in autistic young people, who may have experienced their social environment, including the family, as hostile. Presence-raising methods give parents an alternative to punitive responses, when there has been an incident of harmful or aggressive behaviour. Socially isolated families can develop a supportive network of other adults, who take on a variety of helpful functions. Where young people avoid challenges they could potentially cope with, shifting from a protective to a supportive stance enables parents to promote their child's fulfilment of his or her potential. Finally, reconciliation efforts enable the members of the family to reconnect with one another.

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