

Creatively Engaging Survivors of Domestic Violence and Their Children in Clinical Work

By Anne Marie M. Ramos, LCSW, RPT-S

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n my 39 years of working with children, teens, and families, I have noticed when I encourage more involvement by parents in a dynamic way in treatment with their child(ren), premature termination was reduced, client satisfaction increased, and goals set were more efficiently met. In a review of the literature and my own subsequent training I found many parent-led, evidence-based therapies were highly effective. These are therapies where the parent is trained to either provide a primary therapy or a therapeutic intervention. For example, one of these therapies, is Filial Therapy where the parent is trained to provide Child Centered Play Therapy to their child. Another is Theraplay where the parent learns to do attachment-based therapeutic play activities with their child. Child Management Training is a highly efficacious parenting method to help a child with conduct disorders. Some research studies indicate certain presenting problems are better served by a family or parent/child approach such as in the case of separation anxiety or anorexia. Children traumatized by domestic violence, I discovered, could also have enhanced and more effective therapeutic outcomes if their caregivers were dynamically involved in treatment.

Trauma informed research indicates children who have a consistent and strong caregiver bond are more resilient to trauma. Developing this resilience through strengthening the bond between parent survivors and their child(ren) is something I have been promoting for more than 25 years. During this

time, I have had the opportunity to be involved as a provider, clinical supervisor, and coordinator of programs to help children and families exposed to domestic violence. In this work, I have observed that parent survivors' concern for their children's mental health needs greatly exceeds the concern for their own needs. They prefer to "start" by making sure their children are "OK."

To address this, and to strengthen the parent/child relationship, I began either creating, repurposing, or using existing resources to provide trauma informed, play-based family interventions to help the family initially begin to process their thoughts and feelings about the trauma together. In these interventions, the parent survivors take an active role or co-facilitate with the clinician. Family feelings thermometers, use of creative arts, game play therapy, and bibliotherapy are among some of the tools I have found consistently effective in helping families with children in trauma processing. The family work not only helps the family adjust to the trauma but also increases the parents' awareness of their children's feelings. This greater awareness often leads to greater sensitivity to the children which, in turn, increases bonding.

I have also observed that parent survivors often lack effective limit setting skills. Why is this? One possible explanation is that much of their and their children's energy and skills during the period of abuse was needed to focus on appeasing the abuser to keep themselves as safe as possible.



With the absence of the abuser via a restraining order or other means, the children may feel freer to be "themselves." They may, for example, express negative emotions more openly which the parents may be at a loss to address. Placating negative emotions, as they were used to doing with the abuser, may be inadequate to address the emotions their children are presenting. The children may also show defiant or disruptive behaviors due to their own difficulties in adjustment or due simply to the fact that they no longer must walk around in fear. Parent survivors may be unused to these new behaviors and do not possess a "toolbox" of strategies for child management. Helping survivors through teaching these skills can be empowering for parents as well as the family system. Children feel safer when their parents are empowered and this, too, facilitates bonding.

I am excited to announce that I will be providing further details on how to implement creative family processing, as well as child management training to survivors, in an upcoming workshop at the NASW-NJ Virtual Annual Conference. The workshop is entitled Healing After Domestic Violence: Working Creatively with Caregivers and Children. If you're interested in learning more about this topic, I hope you'll join me there.

About the Author:

Anne Marie M Ramos, LCSW, RPT-S serves as Director of Children's Services for Jewish Family and Children's Service in Passaic, N.J. She has worked for nearly 40 years with families and children/adolescents as a clinical social worker and supervisor, and has provided workshops for CE credits nationally on topics related to working with this population. She has an extensive background in play therapy and is a Registered Play Therapist – Supervisor through the Association for Play Therapy and has recently become a Certified Autplay Therapy Provider. She is the author of the book, "Parents as Healers: Bringing the Caregiver into the Healing Process Through Play and Home-Based Strategies."