



# **ANDERIDA ADOLESCENT CARE**

## **THERAPEUTIC NON-VIOLENT RESISTANCE**

### **POLICY & PROCEDURE**

Anderida works within a Non-Violent Resistance (NVR) therapeutic framework. Non-violent resistance advocates that rather than relying on the use of consequences and trying to develop insight into the young person, we aim to raise our presence as care givers. Different models of raising presence give adults the opportunity to challenge behaviour and by doing this the adults create a stronger and more positive internal representation of themselves in the child's mind. Raising presence primary focus is not to change the child but to change the relationship with the child.

Trying to control young people is self-defeating and means the adults are operating within the same logic as the child – control or be controlled. Many harmful and at-risk young people refuse to be controlled the result is 'symmetrical escalation'.

NVR actively promotes working alliances between care givers, parents, local authorities and adults who support young people. Anderida requires the support and participation of young people's social workers in delivering NVR interventions.

#### **To support NVR approaches Anderida may also enlist the help of:**

- Family
- Young People's Peers/Friends and their families
- Teachers
- Independent Reviewing Officers
- The Police (PCSO's)
- Youth Offending Teams
- The local community/neighbours
- Mentors from the wider Anderida team
- Victims of incidents involving the young people
- Therapists

#### **CORNERSTONES OF NVR**

- Refusal to give in and breaking taboos – adult disobedience
- De-escalate
- Develop support
- Raise presence through organised protest
- Reconcile with the child/young person

## **NVR METHODS**

### **Deferring response until the incident is de-escalated or when arousal is lowered**

This enables adults and young people to lower their psycho-physiological arousal and enables emotional self-regulation in the care giver. Giving enough space to become pro-active rather than re-active, carefully planning the action we will take and drawing on support networks.

### **Announcements**

Developed by key people in the child's life to include caregivers, extended family, peers, and professional networks. The announcement is problem specific, concrete, neutral and outlines, the child's strengths, our concern for their harmful behaviour and the intention of the group to take action. The announcement ends on a description of a preferred future.

### **Sit-in**

An agreed number of adults/peers in the young person's life visit the home of the young person. They enter the young person's environment (often the bedroom). The supporters and key adults explain:

- They will no longer accept the problem behaviours (and describe specifically what these are)
- They are here to find a way to solve the problem or 'put things right'
- They will wait until the child suggests a solution or a way to repair the harm caused

The adults will then sit calmly and wait and support each other if they feel threatened, without escalating the situation. Methods to do this will have been agreed in the planning stages of the sit in.

If young people suggest a positive solution, the group will explore that in an open-minded way, before leaving the room and stating they will give the idea a try.

If the child does not put forward any genuine positive idea about what they the child will do to put things right and prevent further occurrences, the group will wait until the agreed sit in time is up. The group will decide in advance of the sit in how long it should last if the child does not put forward a realistic suggestion of how to make things better.

### **Campaign of Concern**

The identified support network for each child will respond when a child puts themselves or others at risk. They will communicate their concern in a variety of ways once informed about harmful incidents by key adults. This may be:

- Visiting the child
- Phoning the child
- Emailing
- Instant messaging
- Texting
- Private message on social media
- Writing a letter

- Video messages
- Other creative and appropriate forms of communication

It is important for the supports to know that this is about making a statement outlining their concern for those affected and the young person. They are instructed not to be drawn into a two-way communication/conversation with the child as it may lead to justification or escalation – neither of which are helpful.

### **Tailing**

This approach is utilised when a child is missing from home. When tailing a child, adults will make use of information they have gathered in order to be physically present in places that they know the young person to frequent. They will build a picture of the young person's activities and those that are involved with the young people; this will enable adults to reach out to those who can become allies.

### **Telephone Round**

The telephone round is a method of manifesting parental presence and showing the young person the resistance when they run away from home, refuse to tell adults where they have been, or if they are coming home. This involves contacting all the people who relate to the child, such as their friends and friend's parents. The adults are encouraged by the NVR co-ordinator to collect as many of their child's friend's numbers as possible, and other acquaintances who know them. The parents call several people on the list, asking them to inform their young person that the parent is concerned for him/her and would like to get in touch with them. Adults cease calling after a reasonable period and resume calling the next day. It is not the object to ensure that the child comes home under all circumstances (although this would be a desired outcome) as this is not possible. Instead, the object is to make adults presence felt in the dangerous environment the child moves in, and to reach out the message of adult presence to the unsafe people connected to the child.

The adults use these telephone conversations in order to gain information about who their young people are associating with, find out about parents of other young people, etc. This process and gathering of information, support the process of 'tailing'.

### **Breaking Taboos**

Adults agree which first step and which subsequent steps to break with the control of the young person. This can be:

- Not giving into demands.
- Doing things within the normal routine of the home or the young person's care plan that adults/peers/siblings have been avoiding for fear that they will respond aggressively.

### **Refusing Services**

Adults refuse services that the young people are misusing; examples are refusing to drive the child somewhere when he or she have been abusive in the car. Shutting down internet access and some phone access when this contributes to harmful behaviour. Refusal of services is not to punish the child it is just parents and caregivers taking reasonable steps to protect themselves and their child.

## **Helpers Meeting**

Helpers meetings are chaired by an adult training/trained in NVR. The child's support networks are invited to the meeting. The following is discussed:

- What the child's violent, aggressive, dangerous and harmful behaviours are.
- How these behaviours affect others.
- What action has been taken so far?
- What has changed in the family/home so far?
- What the key adults need support from their helpers for.
- Any progress with the child.
- Develop action plan for helper support, including e.g. witnessing at sit-ins, taking part in campaigns of concern, acting as stress buffer, mediator, or support person for peers/siblings/other residents.

## **Training**

The management team undertake training in NVR with Partnership Projects to Certificated Practitioner Level, there is scope for those undertaking family work to undertake the additional module to be me NVR UK Accredited Practitioners. The mentoring team undertake training in NVR to foundation level. This is updated through clinical individual supervision, group child focused supervision sessions and management peer NVR supervision.