

Helping parents contain their distress: An examination of psychoanalytical parent work

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Abstract: By analysing a clinical case conducted by the author, this paper describes how a psychoanalytical method of working can help parents who are distressed about their child's behaviour. This case involved parents whose child had been offered individual psychotherapy because of his difficult behaviour at both school and home. During the parent work the author struggled to consider the parents' projected feelings, especially their anger and helplessness. Through the parent work the parents began to treat their anger a little differently. This paper illustrates the process of parent work and tries to understand the relationship between the child and the parents by looking at transference and counter-transference. It discusses ways in which the parents were helped to make sense of their child's challenging behaviour, and discusses how the parent worker can function as a role model when considering how to respond to emotional distress. The parents' internal and external difficulties, which may have influenced their ability to function as 'good enough' parents, are also discussed.

Keywords: containment, transference and counter-transference, distress, parent work

Introduction

When I lived in Europe I had the opportunity to work with a non-European family; the father was a businessman and had been transferred from his home country by his company. In parent work the mother and father communicated a great deal to me through projective identification. While working with them I was sometimes overwhelmed by these projected feelings, and struggled to understand them. In this paper I am firstly going to explore the emotional relationship between these parents and their child by looking at transference and counter-transference. Secondly, I will psychoanalytically examine

the process of parent work and how such work helped these parents, and also consider how the psychoanalytical way of working can help or even recover parental functions. Thirdly, I would like to explore certain internal and external aspects of the mother and father which probably affected their capacity to function as parents.

Rustin (1998) distinguishes four main categories of parent work when children have been in psychotherapy: supportive work with parents with the prime aim of protecting and sustaining the child's psychotherapy; work with parents to support them in their parental functioning, in other words helping parents to make sense of their child's behaviour

and relationships; work with parents where the focus is on changing how the family functions; and finally individual psychotherapy for one or both parents, even if the original referral is due to a particular concern for the child. In recent years children with various difficulties have begun to have psychotherapy. Alongside the children's difficulties have changed, techniques & knowledge for working with parents have also been developed (for example Klauber, 1998 and Tsiantis, Boethious, Hallerfors, Horne, & Tischler, 2000). Sutton & Hughes (2005) identify the central issues of parent work as being knowledge of family processes, child development and psychopathology. These areas overlap greatly, and can all be understood through transference and counter-transference. Rustin (2009) emphasises the importance of thinking about parents' anxieties in order to understand their real everyday experience of looking after children. She argues that working with the parents offers them a model of how to respond to emotional distress, and she stresses the importance of giving meaning to behaviour. She adds that the urge to blame and reject both others and ourselves is most helpfully modified by finding meaning in our destructive impulses.

A clinical case

Referral reason

A 9-year-old boy whom I shall call A was referred to our clinic by the family doctor. A was reported to have sometimes run away from school and from home. He had threatened to commit suicide a couple of times. The referral letter also mentioned that his parents had taken to a couple of paediatricians when he was younger

because of his communication difficulties, but no formal diagnosis or intervention had been offered.

Family background

A lived with his father and the mother, who were a businessman and housewife. The father had been transferred to a European city several months prior to his son's referral, and it was the first time they had lived abroad.

Identifying features have been changed to maintain confidentiality.

Family work

For about a year I worked with the family together with Mrs. B, a senior colleague of mine. We usually invited them a few times each term to a meeting in order to explore A's difficulties and to discuss what would be helpful for A and the family. The sessions were held in English. In the family sessions A did not spontaneously join in with our conversations, but seemed to be listening to us adults while drawing pictures. Through this family work the difficult relationship between A and his mother became clearer. According to the mother, A had been a very difficult baby and cried a lot both day and night; she said that when she tried to cuddle him he twisted his body, and she found it difficult to soothe him. He suffered from asthma and eczema, and had never been dry at night. Mrs. B and I thought that the physical symptoms showed that his rage or infantile feelings had not been successfully contained and that consequently he had failed to internalise any kind of containing object. We also came to understand that the mother was suffering from considerable anxiety and seemed to be overwhelmed by A's difficult behaviour. We thought that it would be helpful for A to have his own space and time to understand

his feelings, and that the mother needed therapeutic support to manage her own anxiety. In addition we felt that in order to support the whole family it would be helpful to work with both parents. The family was subsequently offered individual psychotherapy sessions for A that would be conducted by a child psychotherapist in addition to the parents' sessions with me. I saw the mother every week and the father fortnightly due to his work restrictions. A's therapy sessions and the parental sessions were provided on the same day and at the same time. Sessions lasted 50 minutes.

The process of parent work

The parent work lasted for about 10 months until the father, and thus the family, were transferred to another city. I would now like to illustrate the process of parent work in this case and think about the family relationships from a psychoanalytical perspective, that is, think about the relationships between the parents and A by examining the relationships between the parents and myself.

The parents' struggle to contain their distress

From the beginning I found it very difficult to create thinking space with the parents, especially with the mother. The sessions were usually filled with the mother's detailed reports about A: how he told lies, behaved aggressively to her at times, wet his bed a few nights a week and so on. I also struggled to define and maintain boundaries when working with the parents. The mother usually started to talk to me while still in the corridor, although I told her that it would be helpful to wait until we moved into the therapy room. It was also difficult to end the sessions on time. I explained that it would be helpful for the child if the

parents were already back in the waiting room when A's session finished, and I therefore suggested that we should finish 5 minutes before his session did. They agreed with this but whenever I let them know that we had to finish soon, they started to talk about something new or important. This annoyed me, as control of the sessions and my authority in general appeared to be under attack by the parents, albeit in a minor and probably unintentional way.

The following extract outlines a typical session. This session took place about 2 months after the parent work had begun.

Session 7

The parents tell me that A wet his bed badly a few days ago. They explain that the mother asked A if he had put on a nappy and he replied that he had. Father asked him to go to the toilet before going to his bedroom and A replied that he would, but the next morning Father found the bed was wet. They say that A had lied and that he had not put on a nappy. When I ask if they have any thoughts about why A did not put a nappy on, the mother immediately replies "A is too lazy to change from his underwear to a nappy!" (...) The mother says that she really feels devastated when A wets his bed heavily because washing and drying the sheets and duvet are such big jobs. (...) Towards the end of the session I let them know that we have to finish in a few minutes. Father then starts to tell me that the teachers have suggested that A should be registered as a child with Special Educational Needs, and that the class teacher wants a telephone call from Mrs. B or me. It is time to finish, so I say I will discuss this with Mrs. B and that one of us will call the teacher. When I again say that we

have to finish, the mother says "I wrote about A's difficult behaviour this past week" and gives me two pieces of paper and starts to talk again. I feel that this is too much.

It appeared that the relationship between A and his parents at home was being re-enacted in the relationship between the parents and me. There seemed to be no space for thinking about the feelings behind A's behaviour, whether at home or in the session. A probably expressed his distress by bedwetting, which made the mother angry with him. In the session I found myself feeling angry with the parents for blaming A's bedwetting on him alone. The mother talked about how upset she was by A's bedwetting. However, during the sessions I felt as if I were a wet mattress filled with the mother's evacuation of her own distress and I found it difficult to empathise with her. It was only when I started to write my clinical notes that I came to understand the feelings of the mother, who had for a long time had to constantly wash and dry A's wet mattress and duvet.

The family's anger and helplessness

During the parent work, anger and helplessness were powerfully evoked in me to the point that I often felt overwhelmed. The following extract is from a solo session with the mother about 6 months after the parent work started.

Session 19

The mother says that she cannot tolerate being with A. She explains that A told her that some of the younger children at school mocked him because he is short. He blames the mother, saying it is her fault. He complained about his height to her and said that she should have given

birth to a taller child. She says "While I was cooking, A was repeating this for about 2 hours. I almost went mad!" I wonder in my mind why she could not stop him and I suggest that she should show him she has had enough and that she should stop him bullying her. She says that she did ask him to stop but he would not, and so she just tried to ignore him.

I was most struck by the fact that A had carried on complaining to the mother for about two hours; it seemed to me that she had allowed him to continue bullying her. The session illustrated how A and his mother would become victimiser and victim in the absence of the father. It appeared that neither A nor the mother had any internal paternal aspect; in A this could have ceased him bullying and attacking the mother by setting limits on his aggressive behaviour, and in the mother it could have enabled her to better protect herself so as not to become a victim. I wondered why it had happened.

In later sessions the mother talked more about her fearful feelings as a child, and I learned more about her background. Her brother had been violent towards their mother but never when their father was at home. The situations surrounding A's and her brother's violence seemed very similar, and it became clear that her traumatic experiences as a child and the unprocessed difficulties in her original family appeared to be influencing her relationship with A. Thinking about how she had witnessed her brother's violence towards their mother, I assumed that the mother was possibly afraid of her own anger and of expressing it, and furthermore that anger was probably not distinguished from violent behaviour in her mind.

The mother also told me about her own parents. In one session she described them as reliable and respectable, but in another session she described them as very busy and unhelpful. I think that as a child the mother experienced her own mother as being weak and as a victim, and her father as unhelpful and powerless. The mother probably identified with her own mother, who had been a victim of her son's violence, and this could explain why she herself was unable to internalise her parents as containing objects. I think that having no internalised helpful parent, in addition to her identification with her own mother as a victim, made it very difficult for her to function as a resilient parent for A.

An emotionally absent father

The father did not spontaneously talk about his background, and when I asked about it he gave me very little information. When I asked him about his relationship with A I learned that the father used to be very busy; he would come home late, after A had gone to sleep, and leave before A woke up. This suggests that the father had been both physically and emotionally absent for A. The father's attendance at the sessions was regular, but he was usually quiet until I asked him what he thought. He would only speak spontaneously if they had had to sort out something practical. I usually found it difficult to know how the father was feeling, as he appeared emotionally absent in the sessions.

Minsky (1998) is helpful in understanding boys' violence from an Oedipal perspective. She explains that if a father is physically or emotionally absent or, in particular, is abusive, it is difficult for a small boy to resolve his Oedipal crisis by productively identifying with him. She adds that without an emotionally available father, male

identity is forged in the continuing Oedipal phantasy that a boy's life is about being a victor or victim, winner or loser. A had possibly been unable to identify with and internalise a strong and helpful father. Perhaps it had also been difficult for A and his parents to build up a triangular relationship due to the father's emotional absence and this probably affected his capacity to think and resulted in his violent behaviour (Britton, 1989; Feldman, 1989).

The second loss: considerable anxiety and violent behaviour

About 8 months after the parent work started, the parents let me know that the family would be moving to another city, again due to the father being transferred, and that the move was to take place 2 months hence. The city was far away, and so A's therapy and the parent work would have to end. In addition to losing their therapy I thought that following their initial move, the family would experience this new move as a second loss of familiar people. I assumed that this change would surely impact heavily on them. However, the parents said that they were looking forward to moving to a new place. It seemed to me as if they were trying to deny their emotional pain and anxieties.

In a session conducted a few weeks after they informed me of their move, the mother talked about A's severe violence towards her, which had occurred a week earlier.

Session 24

The mother talked about an incident: an After School Club staff member had explained that a boy had lost his Pokemon cards and another child had said that he had seen A with them. The staff member asked her to ask A if he knew anything about them. When A

came home he spontaneously showed the mother his empty trouser pockets, then shouted "I didn't steal the cards!" and suddenly threw one of his shoes at her. A then went to the dining room, where the mother found him holding a kitchen knife with both hands and trembling and sobbing bitterly. When the mother asked him to put it down he did so, but after this he became violent with her again, throwing things and pushing her hard against the furniture, where she hit her elbows and knees. I feel shocked at hearing about this incident. I notice that the father has a blank facial expression, as if he were cut off emotionally. The mother shows me some sore-looking bruises on her elbows and knees; I feel very sorry for both the mother and A. When I ask the mother about her feelings towards A she says that she is very frightened of him. When I ask the father how he feels about A and his violence, he says that this is not the first time and suggests that for the safety of the mother A should go to boarding school.

A's anger towards the mother seemed to escalate whenever he sensed that the mother doubted him. In a discussion about children's violence, Alvarez (1998) stated that if a child is strongly projected into by a caregiver who sees him as violent, even if he isn't, the child could identify with the person's view of him.

Although the parents disagreed with my view, I thought that the forthcoming move was causing the family considerable anxiety and was linked to A's severe violence towards the mother. Listening to the mother's account of this frightening incident I felt both shocked and a deep sense of helplessness, and I wondered what I could do to help this sad family. I felt that

the best I could do was to just listen to them, as I found it difficult to talk about my thoughts and feelings in a helpful way.

Whenever the mother talked about A's violence and her complex and insecure feelings towards him, the father would say that A should go to boarding school. The father seemed not to appreciate that he might be able to do something to stop A's violence at home and thus ensure not only the mother's safety but also A's. The mother also appeared to believe that she had no means to stop A's violence. I felt that the family was trapped in a vicious circle in which the mother predominantly took on the role of the victim and A that of the assailant, with the father ever absent. Anger and rage seemed to flow back and forth between the mother and A, but there was no attempt to reflect on or understand these feelings, which were only expressed physically. Parson (2009) notes that violence can be understood as an attempted solution to an overwhelming unprocessed trauma of helplessness in the absence of a protective other. There was no internal or external protective object in the family, which probably made the parents feel helpless.

Later in the same session the father expressed his anger towards me, as the following extract shows.

The father says that they have come to the meetings to get professional advice, but they have not been given any suggestions. I tell the parents that it is important to show A their authority by telling him that violence is unacceptable. When I ask the mother if she has asked him to apologise to her for his violence or whether A has expressed his regret, the mother gives her mobile phone to me, saying A had left a voice message

on it earlier that day. I hear A's tearful apology, which gives me the strong impression that he was remorseful. The mother also gives her phone to the father to listen to. When I say that it would be helpful to think about this message, they keep silent for a while. I say that I feel pain hearing about the incident and listening to A's message, and add that I have the sense that A felt remorse. When I ask the father about his feelings and his thoughts he says "I don't know". He appears to find it quite difficult to think about this painful incident.

When the father expressed his dissatisfaction with my work I could feel his anger towards me, and I found myself feeling the same towards him. This was the first time that he openly showed his feelings in the sessions. I managed to contain both his anger and mine, which I think enabled me to talk about my thoughts and feelings about the incident and helped the parents to do the same, while also allowing them to reflect on what A might be going through. A thinking space for considering the emotional meaning of A's behaviour and feelings seemed to be emerging in this session.

There was one particularly impressive session, very near the end of the work, to which the mother came alone because the father had gone on a business trip. The following extract from the session illustrates the anger which the mother had towards her husband.

Session 28

The mother talks about the house they are planning to rent. She says that it is unfurnished and that they have ordered furniture that needs to be assembled. She is worried about whether the father

will help her to assemble it, because he did not help her at all when the family moved last time. The mother says that when she told him that it would be a big job to put the furniture together, he said that she could buy any screwdriver to build it. She says that she told him she was angry with him and that he should help her. She adds that he looked at her with surprise, but agreed to help her. She says that it was the first time that she had expressed her anger directly to him. She also says that she felt as though she had blown the cobwebs away.

I got the impression that the family dynamics had started to change slightly. Previously the mother only used to say that her husband was very helpful, but now she appeared to be more able to recognise her anger towards him. She also seemed to feel a little safer in expressing this anger. I think that perhaps the parent work had helped the mother to communicate her emotions, especially her anger, a little differently, and certainly more effectively.

Towards the end of the parent work I tried to explore the family's feelings about the end of our work. The mother did express some worries regarding how to manage her life with A without the parent work and A's psychotherapy, but she mainly talked about the positive aspects of their new life. She appeared to idealise the city they were moving to, which I thought was her way of managing her anxiety. At the final meeting the parents thanked me for my work, but I felt that their feelings regarding what we had achieved were complex. I thought that some progress had been made through working with them, but that the family would need further work to become more able to manage their feelings.

Discussion

Changes observed in the parents

As Sutton & Hughes (2005) indicate, looking at transference and counter-transference is helpful for a parent worker seeking to understand parents' feelings and the emotional relationships between the parents and their child. I would therefore like to consider the relationships between A and his parents by looking at transference and counter-transference. When I started working with the parents I sometimes felt as though I was engulfed in chaos and confusion, with no idea of how to help these people with their problems, or even of where to start. During the work I often felt a terrible anger and overwhelming helplessness, which I could intellectually identify as the parents' feelings being projected into me. Despite knowing this, I found it very difficult to create sufficient space to appropriately think about these feelings.

A's rage and anger appeared to manifest physically in his bedwetting and violence towards his mother at home. In the parent meetings the mother talked about how she had been suffering from A's unpredictable behaviour; she tended to use the meetings to evacuate what she was feeling towards him. Leaking seemed to be the family's way of treating their unmanageable emotions; in this sense, the sessions seemed to have been used like a toilet. The mother started to talk to me in the corridor before our sessions officially began, and in the sessions the parents did not stop talking when I let them know that it was time to end. My authority and the boundaries of the sessions were being challenged by the parents; in other words, the problems in the relationship between the parents and A were being re-enacted in therapy.

When I could not end the sessions on time I felt like an incompetent parental worker who had failed to maintain boundaries and manage the sessions professionally. Horn (2000) discusses about the sense of shame and failure that parents feel when they seek support for their child. The parents may have felt embarrassed to talk about A's bedwetting, and perhaps felt it portrayed them as 'bad' parents. Horn also indicates that parents' sense of being a 'bad' or 'imperfect' parent is often projected into a professional. I could have explored the feelings within the parent work to understand further the emotional relationships in the family.

I feel that the parent work did succeed in effecting some small changes in the way that the family dealt with anger, and I noted that my feelings towards the family had also shifted. I used to find myself feeling angry with the parents during the sessions, and would only sympathise with the mother about her difficult life after the session had ended. However, in session 24 the communication both between the parents and with me seemed to be much more 'here and now'. When the mother talked about A's extreme violence towards her, I immediately felt sorry for the family and sympathised with them in their struggle to manage their anger and anxieties, while living in a foreign country. This session also featured the direct expression of the father's anger towards me, as well as its containment. The father talked about his dissatisfaction with my work while I sought to contain both his anger and the anger he projected into me.

Another aspect of A's character was illustrated in the session by the mother's playing of his voice message: we all listened to his tearful voice message on her mobile phone, which he had recorded following his violent behaviour towards her. These

aspects of the session seemed to lead to the creation of thinking space which allowed us to reflect on A's violence and on his and his parents' feelings. In session 28, the mother said to me that for the first time she had talked directly to her husband about her anger towards him, and that he had understood her feelings. The parents therefore seemed to be beginning to communicate their anger to each other a little differently.

The parent worker as a parental model: trying to contain distress

The parents seemed to have started to change their responses to their difficult feelings, especially their anger. I would like to consider some factors which may have facilitated these shifts in their attitudes and behaviour. According to the four main categories of parent work identified by Rustin (2009), the main aim of working with A's parents can be regarded as helping them to make sense of A's behaviour and of his relationships with them. Rustin emphasises the importance of assigning meaning to behaviour, and argues that working with parents offers them a model of how to respond to emotional distress. I was sometimes overwhelmed by anger and helplessness and my mind struggled to create thinking space. However, I continued trying to tolerate, contain and understand her unbearable feelings, instead of blaming her or her husband for their poor parenting. I also tried to set firm boundaries by repeatedly telling them that it would be helpful for the family to end the sessions on time. For example, as I described above, in session 24 I successfully managed the anger between the father and me, and this seemed to help the mother to modify her way of responding to her anger. The parent work may have ended prematurely, but

nevertheless, I think that it enabled the parents to see how I responded to their challenges and projected feelings, and therefore helped them to respond to A's difficult behaviour a little differently.

Some other aspects relating to the parents' struggles

In addition to the parents' internal difficulties, as mentioned above, there seemed to be an external aspect that also related to their difficulty in functioning as parents. Living far away from their home country, the family's external situation triggered considerable anxiety and a sense of loss in the parents, which most likely made them use primitive defences. According to Fox (2002), migrant parents who have lost their families, friends, community and familiar language are particularly likely to present with low self-esteem and to struggle with a loss of identity and their adult selves. Perhaps A's parents were experiencing similar emotional difficulties due to the substantial differences in culture and language they were experiencing in their new country. In session 19 A complained about his lack of height; this feeling of smallness could be linked to the mother's feelings of smallness when living abroad, which stemmed from her struggles to function as an adult. Being away from their home country, it may have become more difficult for A's mother and father to fully function as strong parents.

Conclusion

The emotional relationship between the child and the mother still seemed difficult, perhaps because their difficult relationship started when he was a young child and therefore more time was needed to process

the difficulties. However, the parents showed some signs of change towards the end of the work. I believe that psychoanalytical work is helpful for families, especially for those suffering from complicated or intergenerational emotional difficulties to internalise a parent worker as a 'good enough' parent.

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