The Carter-Jenkins Center
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Working Psychotherapeutically with Children and Adolescents Who Resort to Violence
Themes of the paper

- Is there a difference between aggression and violence?
- Why does someone act violently?
- Are there developmental factors that set someone on the road to violence?
- Are there danger signs or triggers that we can be alert to?
- How can we work with patients who are violent?
- These points will be illustrated with 3 clinical examples
Differences between aggression and violence

**Aggression:**
- a major source of energy
- vital for progressive development
- necessary for assertion and protection of self and other
- necessary for effective learning and work
- necessary for separation and autonomy
- it can be used constructively or destructively

**Violence:**
- A physical attack on the body of another person when this is not developmentally age-appropriate or in response to real physical danger
Causes of the violent act

- The most primitive (physical) response to a perceived threat to the integrity of the psychological self

- An attempted solution to the overwhelming unprocessed trauma of being helpless in the absence of a protective other.

- Self-preservative violence erupts to destroy the person who threatens psychic annihilation of the self
THE 'VICIOUS CIRCLE' OF THE CORE COMPLEX

LONGING for ideal merged relationship (at one)

TOO DISTANT
(FEAR: sense of abandonment, isolation)
(Danger of annihilation)

NARCISSISTIC WITHDRAWAL & DEFENSIVE ATTACK ON THE OTHER
(attempt to seek a safe distance)
(completely separate)

MOVE TOWARDS other

TOO CLOSE
(FEAR: sense of engulfment, permanent loss of self)
(Danger of annihilation)

FLIGHT FROM other

Developmental sources

- Deficient emotional development leaving aggression unbound by love
- Lack of mother’s protective function leading to the building of a rigid internal barrier
- Parental attitudes and handling
- Distorted superego development
Danger signs or triggers to violence

Fears and anxieties:

- Helplessness
- Humiliation
- Fear of annihilation in relation to core complex terrors of engulfment and abandonment
Implications for working with the violent patient

- Don’t focus only on aggression but acknowledge health and strengths
- Consider the developmental factors, dangers and triggers
- Empathise with his feelings, thus offering the missing protective function, but recognise his fear of intimacy
- Try to establish a safe setting but understand that he will be frightened of you
- Be very careful not to seem dismissive, intrusive, humiliating or punitive
- Be aware that his primitive anxieties will trigger your own
- Recognise his potential violence whilst being receptive to his needs
- Perceive him as both a perpetrator and a victim
# REFERENCES

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<thead>
<tr>
<th>Author(s)</th>
<th>Year</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freud, S.</td>
<td>1920</td>
<td>Beyond the pleasure principle <em>S.E. 18</em> (pp. 27-31)</td>
</tr>
<tr>
<td>Heimann, P. &amp;</td>
<td>1972</td>
<td>The psychoanalytical concept of aggression: an integrated summary,</td>
</tr>
<tr>
<td>Valenstein, A.</td>
<td></td>
<td><em>Int.J. Psa. 53</em>: 31-35</td>
</tr>
</tbody>
</table>
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