

Technique for Preparing for and Conducting Parent-Child Sessions

1. Assessing the parent's readiness

Parents need to be emotionally ready and possess adequate levels of specific skills before they can effectively participate in parent-child sessions. There is no specific "test" or "score" that parents have to achieve; rather, you should be monitoring the parent's progress in three areas over the course of your individual sessions with the parent:

- **Is the parent emotionally ready?**
At the outset of treatment, it's normal for parents to be distressed (tearful, angry, vengeful, etc.). As the parent develops effective coping strategies and engages in cognitive processing of his or her reactions, distress should decrease. When the parent can effectively dispute upsetting thoughts and tolerate hearing you share the child's trauma narrative, the parent is emotionally ready.
- **Does the parent have the ability to actively support the child?**
Can the parent "get past" their own emotional reaction and identify things to say to the child that will be helpful and supportive? This might include maintaining eye contact, asking non-judgmental questions, and making accurate, reflective statements about the child's narrative.
- **Does the parent have any specific or unique concerns?**
It is critical that you talk openly with parents about any particular anxieties they may have about joint sessions. For example, they may feel that a child is angry at them for not knowing about the abuse, or that they will not be able to avoid crying when their child is physically present. Preparing for these potential problems and rehearsing responses will significantly reduce parents' anxieties.

2. Assessing the child's readiness

Typically, children should be fairly comfortable discussing the trauma narrative with you before you consider conducting parent-child sessions. Like their parents, children may have specific concerns about face-to-face discussions with their parents about their traumatic experiences. Identifying these and preparing for them will help ensure the success of the joint sessions.

3. Remind everybody about the rationale for parent-child sessions

Although you should have introduced the idea of joint parent-child sessions at the beginning of treatment, it is always useful to mention it again at this point. For parents, the key points to reiterate are that:

- parents have the opportunity to demonstrate their comfort in hearing and talking about the trauma, while also modeling appropriate coping;
- the child has an opportunity to share the narrative and experience a sense of pride further alleviating feelings of shame and distress associated with the trauma;
- parent-child communication about the trauma is enhanced, and misunderstandings and areas of confusion can be cleared up; and
- the groundwork is laid for therapeutic parent-child interactions to continue after formal therapy is over. For children, you should emphasize the importance of communicating openly to eliminate any possible misunderstandings, and the parent's desire to be helpful and supportive.

4. Prepare the parent

Your goal is to teach or coach the parent to make appropriate responses to the child. Parents will vary considerably in their ability to do this; some may require almost no assistance, but others may need several sessions to gain the necessary skills and confidence. Because you are trying to teach the parent how to respond therapeutically to the child, it should not be surprising that many of the things that parents need to learn are basic counseling skills. These include:

- praising the child ("I am very impressed by how much courage you're showing by telling me about this," "Wow — what a great job you've done in counseling! You've worked really hard on this.");
- asking open-ended, non-threatening questions ("How did you decide to tell someone about what happened?") as opposed to questions that could be perceived as critical ("Why didn't you tell me before?");
- rehearsing responses to the trauma narrative by incorporating the child's trauma narrative into role plays in which you play the child and the parent practices appropriate responses; and
- preparing to discuss the child's questions for the parent. You will be aware of areas of confusion or curiosity that the child has and will want to ask the parent during joint sessions ("Is my mom mad at me because her boyfriend got in trouble?"). Parents should practice responding to these questions in an empathic, effective way.

5. Prepare the child

Young children can simply be told that they will be showing their trauma narrative (book, poem, etc.) to their parent so that the parent can see what you've been working on. Older kids may require more thorough preparation that includes role plays of sharing the trauma narrative with the parent. If the trauma narrative does not include information that you know the parent will be asking (e.g., why a child chose to tell a particular person), you may need to practice with the child how to handle questions about such issues.

5. Content of the parent-child sessions

There is not a prescribed number of parent-child sessions that "must" be held; you should exercise your judgment about what the family needs. Similarly, you should decide what topics to address first in joint sessions. The most important aspect of these sessions is having the child share the trauma narrative, which serves as the launching pad for open dialogue about it. Although this is the central goal of parent-child sessions, some families may need to build up to sharing the narrative. In such cases, it may be useful to begin by discussing personal safety skills (e.g., body integrity, safety planning, and relationships). Still other families may do better by discussing specific areas of confusion or concern first. You will need to determine what will likely work best. Regardless of where you start, all three of these topics should be covered eventually.

5. Ending parent-child sessions

It is important to plan to end the joint sessions on a positive note. One very pleasant way to wrap up joint sessions is to encourage the exchange of praise. One place to start is to have parents and kids express appreciation to one another for something positive they did in the last week. These can be either specific (e.g., "Thank you for doing a great job cleaning the dishes last night") or global (e.g., "I'm so proud to be your mom"). Some preparation during individual sessions, however, is generally required so that parents and children can express praise easily and comfortably.

Homework

You will probably want to give some explicit directions to parents about what to talk about with their children outside of session. It is critical that such communication be monitored closely in its early stages. Questions or discussions for which the parent or child is not prepared can have negative consequences and undermine the work being done in parent-child sessions. For this reason, we recommend that parents and children follow the same rules about communication outside of session that they have been using throughout treatment. That is, parents should not query or question children about the trauma or the therapy itself. However, if the child initiates discussion, parents should respond supportively but not encourage in-depth conversations outside your presence. For example:

"Thanks for telling me that; I hope you and your therapist are talking about that; I know how hard it can be to talk about."

You can modify this as the family makes progress. In fact, once parents demonstrate their ability to talk comfortably about the trauma in joint sessions, they may be encouraged to raise the issue when

it comes up naturally at home (e.g. a news report about a similar event). In such a situation, the parent might be encouraged to ask the child, if the news reminded him/her of what happened, while inquiring what he/she thought or felt about the news report.

What about her little sister?

Decisions about whether to include siblings in parent-child sessions can be tricky. There are often very good reasons to consider it (e.g., the sibling does not understand what happened or why family life has been disrupted). As important as these concerns may be, we generally recommend that siblings not be included in parent-child sessions until the identified child victim and parent have achieved the main goals of parent-child sessions. It's also important to clarify that having a sibling join in parent-child sessions is not a substitute for any individual therapy the sibling might need. If and when siblings are included in parent-child sessions, careful thought should be given to the specifics of what information will be shared with the sibling and what won't.

The parent's own trauma issues

Sometimes parents are dealing not only with their child's trauma, but also their memories of their own previous trauma. This can significantly interfere with a parent's ability to maintain an appropriate level of emotionality when hearing the child's trauma narrative and/or their ability to make supportive statements. In such cases, it's likely that you'll have to allow more time for preparatory work before beginning parent-child sessions. You may also want to consider making a referral for the parent to get his or her own therapy.

What if the parent just can't?

While we believe that parent-child sessions can have powerful, long-lasting positive effects on child adjustment and family interactions, these potential benefits are outweighed by the possible damage that can be done by unsupportive and inappropriate parents. (Even these parents, however, can sometimes participate in joint sessions that focus only on practicing coping skills or discussing the trauma in more general terms.) If, no matter how much preparation you do, the parent's own psychological problems prevent them from participating effectively in trauma-focused joint sessions, the answer is simple: skip it. We have found this to be quite rare, and the great majority of parents can participate, at least to some degree.

But we practiced this! What just happened?

Sometimes, even with very well-practiced parents, the unexpected happens. Parents can make inappropriate comments, or children can ask questions that nobody saw coming, sometimes with unpleasant results. Don't panic. Most "unscripted" questions or comments can be reframed in a way that defuses hurt feelings. Alternatively, you can use group or family counseling skills to remind the parent and child to use good communication skills. In extreme cases, parent-child sessions can be suspended and resumed later, after the issue has been discussed individually with the parent and child. Again, this is quite rare, and most problems can be managed in-session.

One place where homework can be appropriate during parent-child sessions is in the discussion of personal safety skills. The [Resources for Therapists](#) and [Resources for Parents](#) section include several books about these issues (OK and not-OK touches, for example) that can be assigned to read and talk about at home between sessions.