

What is NVR?

**NVR stands for
Non-Violent Resistance**

Information for Parents

PartnershipProjects

The leading provider of NVR Training for Professionals, and NVR Coaching for Parents / Caregivers

NVR is a parent / caregiver centred, relational approach to responding to the harmful and destructive behaviour of children and young people, both in the home or in school / inpatient / residential settings. It is based on a set of core principles that have their origin in socio-political movements of the 20th century where marginalised groups have resisted oppression and harm. The model was first applied to the family setting by Professor Haim Omer and his colleagues at the University of Tel Aviv from the mid-1990s and was brought to England by Dr. Peter Jakob in 2002.

NVR is not a manualised approach. In the context of an NVR Intervention, the work takes place between the parents / caregivers and the practitioner, and the young person does not need to participate for the work to be effective. Parents and caregivers are coached to change their own responses to the young person's behaviour and to build a community of care around their family. This helps to shift the patterns of interactions that can become entrenched when the young person's behaviour is harmful, destructive and/or violent. By changing the environment around the young person what we see is relationships improving and harmful / destructive behaviour patterns reducing.

NVR is not a 'quick fix' and we would usually recommend working with families once a week for 12 weeks initially to support them in understanding the core principles of NVR and changing their responses. Sessions can be delivered face-to-face or online. Often there will then be a further period of intervention where parents can be supported to embed their learning.

'Working collaboratively with people is more effective than treatment'



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The core principals of NVR

- To learn to resist Non-Violently: Understanding our own responses to the ideas of violence, Non-Violence, and resistance in the context of social differences.
- To think about escalation patterns and the logic of control; exploring ways to de-escalate including non-verbal communication and prioritising behaviours.
- To raise parental presence; the idea of not giving in and not giving up, creating a sense of belonging and safety for the young person and the family.
- To resist harm and carrying out peaceful protest in response to significant incidents of harmful and destructive behaviour
- To build a caring community around each individual family; developing a support network of other adults who show care and support the parents / caregivers as they embed the approach.
- To reconcile and repair relationships with young people; developing reconciliation gestures and ways of making amends.

Working collaboratively with NVR can be helpful wherever we find behaviour that has a harmful, controlling effect on both the child / young person and those around them. Practitioners can coach and therapeutically support parents, parents who have adopted, teachers, foster carers and other adults who are engaged in the care or education of young people to respond Non-Violently to a wide range of internalising and externalising behaviours that are causing harm.

Externalising behaviours might include physical violence, verbal abuse, destruction of property, drug / alcohol misuse, or criminal activity. NVR has also been successfully used in work with parents of gang members. Alternatively, NVR principles and methods can be effectively applied where young people present with Anxiety Disorders, Eating Disorders, Selective Mutism, Self-harm or Suicidal Ideation including where the child or young person is Neuro-diverse and refuse to engage in therapy. An example of this approach would be the SPACE model. <https://www.spacetreatment.net> NVR-based work around young people who have experienced developmental trauma not only helps bring about behavioural improvement, but also reduces the risk of family or placement breakdown. Child-focused NVR helps these children and young people develop more engaged and integrated mental states.

An emerging area of work is with families of adults who show 'Adult Entrenched Dependency' (AED). These are adults who do not fulfil their potential, underperform, and do not engage in work, education or making contributions to the running of their parent's household they are living in. Many of these younger adults become extremely socially withdrawn. A growing, yet widely still unrecognised phenomenon, 'AED' can be linked to anxious avoidance of everyday challenges, more serious anxiety disorders, or enduring mental health problems such as psychosis. The tensions arising in families as a result of AED behaviour patterns tend to feed into highly charged angry and blaming communication, which in turn exacerbates psychotic symptoms. Dependent behaviour of younger adults, regardless of their mental health, undermines the development of life-stage appropriate autonomy.

Is NVR evidence-based?

Working with Non-Violence has changed the lives of many families, often inspiring them to change their outlook on relationships in general. For an up-to-date list of research and publications on NVR go to: <https://www.haimomer-nvr.com/publications-and-research>

How is NVR Delivered?

NVR is delivered by trained practitioners, who come from a variety of different professional backgrounds including family therapists, clinical psychologists, social workers and other mental health professionals. Practitioners work directly, either face-to-face or online, with the adults who are in a parenting / caring role. Within PartnershipProjects, we have a team of highly qualified, experienced and skilled professionals who are all accredited by the NVR Association: <https://www.thenvrassociation.org>

How do I refer my family to PartnershipProjects?

There is a wealth of information about NVR and the referral process on our website. Please use the following link or QR code: <https://www.partnershipprojectsuk.com/non-violent-resistance-nvr/parents/>

Every family will be required to complete a pre-screening questionnaire prior to a referral consultation.

