

Supporting Parenting Skills between Knowledge and Affectivity

by Alessandro Ridolfi*, Mario Landi**, Nerina Landi**, Elisabetta Pistolesi*

Introduction

An increasing number of separations in couples with children, along with a growing number of single parent families and family situations characterized by suffering due to psycho-social issues (poverty, marginalization, etc.) are leading the Mental Health Services to be increasingly involved with interventions of psychological support, aimed at strengthening parenting skills. These interventions, addressed to parents, have been ordered by the Juvenile Court, with a specific mandate to the operators of the Child and Adolescent Mental Health Services.

The concept of parenting skills is very wide and involves biological, psychological and social components (Di Blasio, 1995). In general terms, such a construct can be operationalized through a series of parameters relating to personal qualities, as well as to interpersonal and social skills (Bornstein, 1991). The term "parenting skills" actually refers to a set of qualities, skills and individual attitudes involving different theoretical aspects, some being more focused on "skills", others on intrapersonal factors, and others on relational aspects.¹ Despite this difficulty to accept a single definition of "skills", it seems anyway possible to refer to the quality of the mental representations (in particular those with an emotional valence) related to the parental role. For a parent this function is usually a relevant self-representational dimension, which plays an important role also in the various models that have deepened the issue of evaluating parenting skills. This function corresponds to a specific variation of the self, which represents an even wider, multi-determined or integrative process of self-representation. The role played by the network of knowledge and memories salient as to the sense of self and personal identity, as well as the role of the emotional-motivational systems involved (Rameson, Satpute & Lieberman, 2010) are crucial to this integrative process of self-representation. As shown by decades of research on general and clinical psychology, such systems are, in humans, the main "organizers", which configure the constituting qualities of psychic experience and their adaptive significance. Such systems are also involved in the representations of interpersonal relationships, understanding and social causality (Lieberman, 2007). Given this setting, the clinical process of support to parenting skills turns out to be focused on the re-elaboration of the representations of oneself as a parent, which can be viewed as a greater personal awareness, aimed at developing processes of change. In order to explain the rationale of the proposed model of intervention, and its implications, it is necessary:

- to deepen the assessment process of parenting skills, by extending it beyond an exclusively "nosographic" set of evaluation;
- to use theoretical and clinical references within an evolutionary perspective, individualizing the work with parents and exploiting the resources that may be present in them;
- to deepen the role of the "experience organizing" systems and the functions related to psychic/emotional adjustment, focusing our analysis on their spectrum of activity, in relation to the representation of oneself as a parent and to one's understanding of social world, expectations, values and so on.

*Psychologist – ASL 10 – Florence, Italy.

** Children Neuropsychiatrist – ASL 10 – Florence, Italy.

Mailing address: Alessandro Ridolfi, via G. Papi, 23 – 59100 Prato. ridolfialessandro@tiscali.it

The authors declare that the content of this article is original and that it has not been sent to any other review or web site.

¹ See Vicentini, www.genitorialita.it

Regarding the assessment process, integration between collecting information with an idiographic and a nomothetic perspective seems to represent a convergence point, in the current paradigms of clinical research, which is gaining widespread assent, also as to the adoption of different research methods consistent with the object of study (Muran, 2009; Widiger, Simonsen, Sirowatka and Regier, 2006). It is known that the idiographic perspective focuses on the historical-individual aspect and is more oriented towards dimensional investigation, whereas the nomothetic perspective has a classificatory nature, and is more oriented to the recognition of signs and symptoms according to an atheoretical conception. Part of the current research on the mental functioning of the human being, especially in childhood and adolescence, appears to require an overcoming of a static and descriptive view of the person. The renewed interest in dimensional models of personality, within an evolutionary perspective, is an example of this approach, which tends to focus on an integrative conception of the assessment process (Albasi, 2008; Dazzi, Lingiardi & Gazzillo, 2009, Fava et al. 2009, PDM, 2006).

Moreover, the importance of an evolutionary approach emerges in clinical practice, where it is especially difficult to apply *tout court* the nosographic type of concepts, because of their insensitivity in grasping the dimension of individual change (evolutionary). An action primarily based on a diagnostic and nosographic evaluation, beyond time, shows in fact evident difficulties in grasping "the moving target" (Williams, Ferrara, Aloï & Gazzillo, 2009). A setting emphasizing only the assessment of dimensional aspects is equally inadequate, since it produces profiles that are excessively idiosyncratic and individualistic and, although relatively stable, are not static and do not help professional exchange. This is especially true in relation to the systems and functions that are at the base of the Self, which show qualitative changes in relation to time. Clinically, the syndromic classifications, which in most cases correspond, within a polythetic perspective, to "multiple entry" diagnoses, tend to definitively stabilize, or conversely, to constantly change, so it becomes necessary to add diagnoses to diagnoses (Dazzi, Lingiardi & Gazzillo, *op. cit.*; Faravelli, 2004). Instead, in an evolutionary perspective, change finds a diachronic reading-key, which allows a more advanced level of articulation and the organization, over time, of sense and meanings related to oneself.

For several decades, both the Infant Research and Developmental Psychology have stressed the importance of an evolutionary conception of bio-psycho-social development. Research related to these areas has highlighted the need for a comprehensive approach to one's experience of oneself, resulting from the interaction between the various organizational systems of one's psychic activity and related mental functions. In relation to the early stages of development, the Infant Research has devoted specific attention to the role played by interpersonal processes, focusing on the child-caregiver relationship. Several studies, starting from Bowlby's attachment theory (1969; 1973; 1980; 1988) have shown the importance of that relationship in structuring first the child's, then the adult's ability to adapt to the environment. This area of study has been particularly significant from a heuristic point of view, since it produced fields of research having important clinical implications (Sameroff & Emde, 1991). An example of this approach is reflected in the patterns that link attachment model, evolution of the reflective function and life environment (Fonagy & Target, 1997).

In a lifetime perspective, the Developmental Psychology has given particular attention to the identification of relationships between the evolutionary dynamics of representational systems and the potential risk/ protection factors, in order to identify the existing individual resources and those that can be activated for a better adaptation to the environment.

Compared to the interventions aimed at supporting parenting skills, the evolutionary approach seems to benefit only in part from the assessment process, which is neither designed to capture the dimension of individual meaning, nor to properly consider the temporality in which most mental processes happen to change. Furthermore, the opinion that the subjectivity present in everybody is elusive, from a nosographic point of view, despite the formal correctness of any diagnostic label, is

now widely shared. Thus, the diagnostic process becomes primarily a nosographic, comparative one, in this way losing its ability to approach a person in "real terms". Under these conditions this process turns out to be no more than partially able to grasp a person's strength and resources (Lopez, Snyder & Rasmussen, 2003). It is particularly important to emphasize this, in interventions aimed at consolidating and promoting "skills", in order to avoid models of intervention exclusively based on the detection and correction of a deficit.

The concept of development: evolutionary considerations.

As to the general problem of assessing mental processes, representations and interpersonal relationships, some epistemological clarifications are needed.

Part of the current clinical research has increasingly opened to "pluralistic" positions, based on theoretical models interested in mutual validation, within a view to multidisciplinary integration of knowledge and disciplines (Wilson, 1998). In recent years, good examples of this approach have been given by the combination between research in the field of affective neuroscience and models of psychopathology; or affective neuroscience and assessment of psychotherapeutic interventions. These areas of research have found a meeting ground in the analysis of psychobiological development as well as in the change processes of human beings. While coming from different directions, such areas have offered alternative, but easy to integrate, interpretations of the analyzed processes (Fosha, Siegel & Solomon, 2009; Menoni & Iannelli, 2010).

In the research aimed at a clinical evaluation of psychotherapeutic intervention, for example, several studies have focused on the role played by repair processes in therapy. These processes have been conceived as a possibility of recovery and change, in relation to potentially pathogenic phenomena, mainly of an interpersonal nature, which may have occurred during development (Fosha, Siegel & Solomon, *op. cit.*; Menoni & Iannelli, *in press*; Schore, 2009a, b).

Even in a context of wider research, affective neuroscience has directed its focus to the phylogenetic and ontogenetic development of the brain structures. Such research is increasingly confirming the importance of the interaction processes with the "human environment". Environmental influences and biologically predetermined progressions would be underlying the development of brain structures and mental functions themselves, as well as the evolution of both of them, through processes of allostatic modulation over time (epigenesis) (Panksepp & Northoff, 2009; Menoni & Iannelli, *op. cit.*).

In summary, mental processes would be facing, over time, a change in their functional organization, both in relation to internal evolutionary factors and to experiences of the living environment. As it is known, the main systems (emotions, motivations, cognitions, memories, expectations) involved in the creation of mental representations are activated during development and in "normal" conditions come together and take part in the construction of one's sense of self (Kohut, 1971, 1977). This process of building a self has a potentially high adaptive value, since it is through it that people come into play, in real relationships (Rameson, Sapute & Lieberman, 2010; Uddin, Iacoboni, Lange, & Keenan, 2007). The perception of personal integrity and identity, therefore, corresponds to a process of integration of systems and is experienced through the perception of oneself as an individual entity, with its own sphere of personal meanings that evolve with time. This is, in other words, a process of progressive differentiation that consolidates in development (involving, for example, differentiation processes of the psychic experience of self-other; integration processes of the contradictory experiences of one's self; attribution processes of causality, development of morality, etc.). The perception of oneself as a separate entity highlights experiences of separation and other representations that are relatively autonomous, although established in a relationship, in this way giving rise to a process of personal representation with a recognized and recognizable sense of self (Stern, 1989).

"Organizing systems" and functions of affective psychological adjustment.

Several authors have studied, from the clinical side, the cognitive-emotional structure of mental representations, understanding it essentially as a syntactic structure, made up of "elementary units" capable of differentiating themselves starting from experience (Westen, Gabbard & Blagow, 2006). These units take the form of propositions specified by a subject, an object and an existing relationship. The same fundamental polarities of consciousness identified by psychoanalysis (subject / object, pleasure / displeasure, active / passive) can be considered as the basic guidelines for building proto-representations of oneself. They appear to be at the base of the processes that differentiate experience, and they have direct implications, along with the memory systems, in the perception of the continuity, in space and time, of one's being.

More recently, within the contexts of the attachment theory, of the Infant Research and of some current psychoanalytic research, a particular interest in the formation and progressive integration of the basic syntactic cognitive-affective structures has manifested. The Internal Working Models (Bowlby, 1969), the Representations of Generalized Interactions (Stern, 1985; 1989) and the Model Scenes (Lichtenberg, 1989; Lichtenberg, Lachmann & Fosshage, 1992) are examples of how this syntactic architecture is thought to be organized.

It is known, by now, that the various systems mentioned above are involved in the structuring of a psychic experience, by "stabilizing it", organizing it and allowing the self to represent itself in largely predictable transactions with the environment. In the specific case of interventions aimed at supporting parenting skills, parents go to the meeting bringing their history, which, although problematic, is consistent in its own way. That is their life-story, endowed with an emotional significance, which they have entrusted with their sense of psychic integrity and identity of themselves as persons. They feel certain motivations, experience certain emotions, have their own memories and expectations, recognize themselves in values that maybe they pursue.

[...] clinically relevant aspects of the self include the consistency of one's individual sense of self (e.g., one's perception of being able to act in reality, or a sense of self-continuity over the time); the nature of one's implicit and explicit, constantly recurring representations; one's (implicit and explicit) self-esteem and its modulation; one's dreaded, desired and ideal self-representations, which serve as standards and guides to one's behavior (Westen, Gabbard & Blagow, *op. cit.*).

The work of supporting parenting skills corresponds to a clinical process that starts by welcoming the parents' personal history and recognizing their experience, and then arrives at a "confrontation" and a more systematic elaboration of this experience.

On the base of these premises, some considerations on the systems involved in the processes of elaborating cognitive and emotional information about one's self will be recalled briefly. The memory, emotion and motivation systems are primarily synchronic, although each of them could either serve as a trigger for the others, or perform independent functions; this latter case is especially frequent in situations where the integrity of one's self-representation is not at stake (e.g., in the process of learning information, in the satisfaction of physiological needs, etc.); situations which depend on the high levels of interconnection between the systems investigated in this work.

Memory systems. It is well known that memory systems are connected to the learning and retrieval of information, as well as to the reconstruction of one's life experience and the building of one's sense of self. The representation of information in memory systems has been conceptualized in different ways by different theoretical models (Raaijmakers & Shiffrin, 1992; Raaijmakers, 2008). In the organization of knowledge and subsequent processing of the responses, certain specific characteristics of one's brain activity play a prominent role. The level of interconnection and integration between one's different systems of neuronal population is particularly relevant. These systems are members of relatively distinct anatomical and functional areas (Sporn, Tononi & Edelman, 2000). Thus, the representation of one's mnemonic function as a static process (to which corresponds a physical store of information, which is crystallized and organized in catalogs, so that it becomes "dusty") turns out to be permanently surpassed and a more active role of memory in the construction of one's identity is confirmed. Those models that refer to the weight of these

interconnections highlight their importance, in relation to the process of conceptual association and in relation to the consolidation of an associative network (see the micro-cognitive models, such as the Parallel Distributed Processes). The variation in "weight" would be attributable to several factors, of which the emotional-motivational ones would play a major role, in determining the most probable associative path, within an overall reconfiguration of the whole network. Ultimately, these factors would be central in determining the final meaning of one's experience.

On the clinical level, the reconstruction of one's personal history and relationship with one's partner (the child's father or mother) represents the emotional and motivational key junction. It is actually the history of oneself as a child, as a young person and then as a parent, starting from one's parental experience, the most important factor in order to strengthen one's parenting skills. This work of historical reconstruction, within a clinical process, aims at clarifying the connections and the personal and deepest meanings of one's parental experience, establishing itself as an opportunity for emotional contact, awareness and potential change, and giving value to the resources that are still present in parents.

Motivational Systems. Various recent acquisitions, regarding the interconnected systems of an emotional-motivational nature and their development over time, offer a key to understanding the processes of adjustment and maladjustment to the environment; a key that is also useful within the clinical setting (Lichtenberg, 1989; Liotti & Ardevini, 2008).

When the motivational systems are not consistently activated in relation to the identification and integration of internal-external information, this may be considered as a lower degree of adaptation, which results in different psychopathological conditions, where patterns of systems activated in a competitive manner emerge (e.g., in eating disorders, the motivation systems are short-circuited by the systems of self-representation, according to constantly competitive dynamics). Especially in early childhood, a prolonged conflict between one's different emotional and motivational systems is critical in determining the experience of distress. In these circumstances one can get into traumatic conditions, with critical outcomes, as it can happen in the cases of antagonistic processes, especially those regarding the search for closeness versus flight, activated by the presence of maltreatment or by frightened / frightening parents (Crittenden, 1997).

It was particularly Lichtenberg, within the tradition of psychoanalytic studies, the one who extended the concept of motivation, by identifying five motivational systems, which in the course of development articulate themselves and modulate in time:

- 1) the need to psychologically adjust one's psychological requirements;
- 2) the need for attachment and, later on, for affiliation;
- 3) the need for exploration and assertiveness;
- 4) the need to react adversely, through antagonism or withdrawal (or both);
- 5) the need for sensual enjoyment and sexual excitement.

Motivational systems seem to show a kind of allostatic evolutionary dynamics, i.e., those which look for the best possible balance, on the basis of the present internal and external conditions, and therefore are potentially changing and reorganizing themselves, moment by moment.

Westen, Gabbard & Blagow (2006) have pointed out that the "*quality and intensity of the emotions related to different representations is what at the same time tends to move every effort towards health, or to activate movements, or problematic conflicts*" (op. cit.).

In a clinical perspective, it is particularly important to support the parents' increasing awareness of themselves, of their motivation, of what they expect from their child and what they want for him/her (in fact, what sometimes one wishes for oneself). It is important to work on what they can "see", with respect to their needs and motivations, by coming to appreciate that the child is a person in herself, a real person with strengths and weaknesses.

Often this is difficult to accept!

Aah! My son is marvelous! He never cried when I left him at the nursery!

Or, another mother:

Look at this, if it's normal ... he's playing alone, as if some aliens were here; it looks like he's talking to an imaginary friend: he looks stupid, sometimes!

And also:

He 's so childish (referring to an eight-year-old child) ... I would like him to be able to defend himself, I try to teach him, but this is how he is! We even brought him to play football, but he couldn't play ... then we took him to another team ... he can't impose himself ... mah!

The motivational systems, although autonomous, are very close to the emotional systems, and together they give significance to the reconstruction of one's past history, to the present moment, and to the construction of one's perspectives, expectations and life plan.

Emotional systems. In evolutionary terms, emotions are like immediate information, capable of organizing one's knowledge and behavior (Trevathen, 1998). If we understand emotions as a form of "basic knowledge", they will offer us data that can be elaborated in self-informative terms, as well as in terms of interpersonal communication and in motivational terms. In self-informative terms, they allow us to identify "what I feel," "how I am," "how I feel". In terms of interpersonal communication, they allow us to communicate our emotional state to someone else. In motivational terms, they allow us to activate a behavior: search for a contact, escape, attack, exploration. Emotions are therefore essential to give meaning to one's experience, to articulate it and finally to share the experience of others (Trevathen, *op. cit.*). Emotional sharing and recognition of others' emotional experiences are especially crucial in the acquisition of "good" parenting skills. In recent years the study of certain brain structures in primates, and particularly of mirror neurons, has offered several ideas that help us understand the "motor imitation". As to humans, these studies are providing us an alternative research perspective, in order to deepen our understanding of the processes of empathy and emotional sharing (Gallese, 2001, 2003; Rizzolatti, Fadiga, Gallese, & Fogassi, 1996; Rizzolatti and Sinigaglia, 2006; Rizzolatti, Fogassi & Gallese, 2001). Within the Infant Research context, particular attention has been paid to studies on the interaction between mother and child (Beebe & Lachmann, 1994). In a recent survey conducted by Ham & Tronick (2009), aimed at analyzing the psycho-physiological interrelations activated during specific interactive mother-child sequences, it has been observed that, under conditions of emotional reciprocity, various physiological parameters of this dyad tend to synchronize.

The human brain seems, therefore, built to respond to relationship, by being emotionally activated and tuned, moment by moment (see the concept of *attunement*, formulated by Stern, 1985). There are many scholars, now, who believe relationship to be essential to the development of the mind-brain system, so much that humans would be "hardwired to connect" (Fosha, Siegel & Solomon, 2009).

Functions of psychological adjustment. Along with the "organizing" systems, to which reference has already been made, also various mental functions play a key role in the construction/understanding of one's sense of self and others. So far we have highlighted how much the evolution of "fluid", rather than static, knowledge structures is mainly based on the availability of a responsive and stimulating relational environment, which allows one to maintain large degrees of freedom, although within largely predictable self/environment transactions.

For reasons of space it is not possible to examine these functions in detail. In order to analyze them, one must refer to specific works, such as Fonagy & Target (1997), regarding the reflective and mentalizing function, which is essential to recognize internal and external mental states, to distinguish between levels of fiction and reality, to develop a distinction between inner and outer world; Stern (1985) regarding the emotional-affective tuning function or *attunement*, through which the processes of emotional sharing allow one to share and participate affectively to the experience of others; Trevathen (1998a; 2009), regarding the construction of an inter-subjectivity, which allows one to develop a progressive capacity of sharing the exploration of the living environment. These are, of course, functions that come into play in the early stages of a child's development, and accompany her/him for an entire life span.

In relation to the focus of intervention on parenting skills, it is clear that deficiency in these functions, starting from the early stages of development, involve:

- difficulties in distinguishing between internal and external world;
- difficulties in recognizing one's and others' emotional condition;
- difficulties in constructing one's representation of oneself and others.

This usually leads to deficits in parenting skills or, even more specifically, to evident psychopathological conditions and disabling incapacities. The consequences of such "parental incapacities" have been studied, for example, with respect to attachment. The experience of an unpredictable maternal care has been generally correlated with the inability to develop consistent expectations and internal working models of relationships that are satisfactory enough to allow a child to grow, to develop an adequate kind of social understanding, to form expectations regarding him/herself and others, and thus to optimally adapt to their significant others (Engels Rutger, Finkenauer, Meeus & Dekovic, 2001; Hughes, 2009). Especially critical were the experiences of disorganized attachment, also in relation to the development of reflective function deficits (Liotti, 1999).

An example of what can be understood as parenting skills can be derived from a short essay by Correale (1996). He shows us the importance of a soothing maternal presence (softening, relaxing, fluidifying), that is, able to validate and ensure her emotional availability to the story of her child's experience, and capable of mitigating it, in case it is traumatic. Referring to the concept, formulated by Adler, of object-self, Correale emphasizes the importance of an "*a posteriori* function". This function is related to the ability of re-elaborating a past experience through narration. In particular, both the lack of redefinitions from the outside (from the mother, in this case) of the experience itself, and a meaningful affective experience, emerge as relevant qualities. This would make it possible to transcend the mere material sharing of the experience, ensuring a subsequent re-elaboration of it. Concrete examples that show this capacity may be the acceptance of the "myth-making-memories" of an event that has never happened, or the sharing of memories of some improbable fiction games.

In general, most likely a parent's inadequate reflective function will not help a child to "mentalize", to use thoughts, words and feelings to understand what happens to him and about him. A frightened, traumatized parent is in turn frightening, traumatic and potentially capable to short-circuit the processes of psychic representation also in the child, who in turn is highly at risk of developing a poor reflective function. In this regard, many studies have focused on such features of the attachment figure, as well as on the development of disorganized attachment patterns (Crittenden, 1997; Fonagy & Target, 1997). Several studies have shown, for example, the significance of reflective function deficits and their "transmissibility", in relation to the development of antisocial or borderline personality disorders (Fonagy, 1997; Liotti, 1999).

Understanding and social causality. In relation to parenting skills, also other abilities/functions, acting as "bridges" between cognitive and affective processes, are becoming focus of attention; in particular, the processes of social understanding and social causality, recently investigated in the 'diagnostic assessment' (Abbate & Massaro, 2007) are of great interest. The concept of social causality, which is adopted here, draws from the formulation given by Westen, Gabbard, & Blagow (2006), and reflects in this way:

"The ability to invest emotionally in relationships - that is, the ability of individuals to take care of another person, overcoming the desire of receiving something in return or the expectation that the other might seek to gratify their needs [...] the ability to feel or anticipate guilty feelings, rather than being primarily concerned about receiving a punishment when a moral infringement has been committed or one suspects to have committed it. The understanding of social causality (i.e., why people do what they do)" (*op. cit.*).

"I always tell her that the world is bad ...that girl is bad ... I went to mess with the teachers" [a mother, referring to what she tells her daughter].

Social understanding, social causality, the level of standard values and the ability of emotional investment in relationships are important keys to understanding the organizing processes of interpersonal representations. These processes must be properly observed in their implications with respect to parenting skills, and also in relation to potentially psychopathological processes.

A model of parenting support.

Starting from different theoretical references, Winnicott's and Bowlby's studies and researches have underlined, before others, the importance, for a very small child, of some features in the "good enough" caregiver. In particular, two main qualities emerge: the timeliness of response and its appropriateness. Nowadays, many researchers agree that, during a child's first years of life, an inappropriate or untimely maternal care can affect the modulation processes (activation-inhibition) related to cognitive-emotional-motivational configurations. As time goes by, these configurations tend to become stable and structure one's representations of oneself and others, with effects on one's interpersonal relationships (Beebe & Lachmann, 1994; Trevarthen, 1998).

In correspondence with the phases of a child's growth and life, a progressive differentiation of one's parenting skills becomes necessary, in order to enhance responsiveness to the child's development and to the entry into play of different meaning and motivation systems. The "transmissibility" of the reflective functioning has been previously mentioned. For a parent this is a "challenge" (and an opportunity), since it is obvious that parenting skills are not given once and for all, but follow a process of transformation, which may show progressive or regressive changes in relation to critical events, stages of life and resources available (Lopez, 2003).

Today there is wide consensus about the complex nature of the construction processes of one's representations of oneself and the interpersonal world, given the involvement of one's memory, emotion and motivation systems. Such representations, once "stabilized", are believed to be responsible for a coercion of one's decision making process, with critical effects on real relationships. These comprehensive patterns characterize models of insecure attachment, which in the course of development can result in more evident psychopathological forms (Bowlby, 1998b). The literature pertaining to clinical research, of an integrative nature, documents the role played by traumatic relational processes in deconstructing, disjuncting, dissociating the complex sequences of interaction between the systems to which this work has made reference (Van der Kolk, 2006, Schore, 2003a; 2003b; 2009a, b).

G.: I heard from mom, she was in that state ...

Psyc.: How? G.: She was drunk ... drunk.

Psyc.: How did you realize that she had been drinking?

G.: From her voice... she said nonsense ... she meowed ...

Father: (in the presence of G.) She always calls him when she's like this ... if she called him also when she's not like this ... if I call her now I'm convinced that she's drunk ...

If children are not "left alone", their processes of stabilizing representations, and self-confirmation, may be less coercive. The same reasoning applies to adults. A responsive relationship, adjusted to the stages of a child's life, is a potential factor of psychic integrity, as it contributes to the child's resilience (the ability, so to speak, to recover in terms of adaptation/health, despite the traumas and difficulties experienced in relation to socio-relational environments that are highly inadequate or pathogenic). Recent research has shown that the interventions to support parenting skills have produced a reduction in the externalizing symptoms and problematic behaviors of children (Hautmann et al., 2009).

Interventions to support parenting skills are aimed at ensuring a relational process that takes the form of an "accompaniment", to explore and search for personal meaning and significance inherent in the parental function. This work of exploration tries to further, in parents, the acquisition of a capacity to recognize, respect and validate the emotional experience of oneself and one's child. This allows one to develop a progressive capacity of accepting the dimension of otherness, which is necessary for children to grow and for parents to encourage them, in a responsive way, in this direction. In this sense, such interventions try to promote, in parents, a greater awareness and the activation of processes of real change.

A lady says: "To go out at night, sometimes I have to tell my son that I go to work to the house of a very old lady, named Titti. He always asks me: but when's Titti going to die? "

In a later meeting the same lady said:

Last year, my son (an eight-year-old boy!) stood in the middle of myself and my partner to defend me; this man was drunk and violent. My son defended me (she said this smirking).

The general principle, on which interventions are set, is that tolerance to the pain, fear and confusion that can result from contact with feelings of inadequacy, failure, or even anger, can be supported by activating processes of affective balancing. These processes are strengthened by a secure and supportive relationship, built throughout the clinical process, but also stem from the potentially resilient capacities inherent in human development. In a condition of relative relational safety, the motivational processes of exploration are feasible and the processing of emotionally active information can lead to an extension and a new attribution of personal meaning and significance (Siegel, 2009).

The clinical model of intervention to support parenting skills is designed to assist parents in:

- representing and understanding their emotional experience, in relation to their life-history, starting from the reconstruction of narrative sequences (events, memories, episodes and their significance for the person);
- connecting their representations and emotions/experiences, starting from the 'here and now' (*how do you feel while you are saying this?*)
- receiving support during their exploratory processes; parents should perceive themselves as actively involved, not as passive users of a predetermined psycho-pedagogic path;
- strengthening the processes of emotional modulation available to them, with the goal of enhancing their ability to recognize and differentiate their experiences;
- having a space where they can be supported and someone can listen to them, where they can elaborate their direct experiences in the absence of judgement; this enables "adult parents" to orient toward themselves and their parenting aspects, more or less frequently "immature" and / or "unresolved";
- accepting the presence of their most immature and unresolved aspects as sides of themselves that are possible, "but not leading"; in this way one supports the elaboration of a comprehensive psychological process, in which parents feel and discriminate the different aspects determining their behaviors (encouraging, for example, the more mature ones);
- perceiving at some level a subjective, even though small, benefit in the relationship with their child, so as to allow a good parent/operator relationship.

Emotions are used here as a key to one's internal world. In particular, this clinical process is specified by a series of progressively "deeper" options:

- feeling the emotions that arise during the process;
- if possible, directing the person towards the emotions that she/he feels;
- exploring them, trying to catch any possible correspondence between narrative, meanings, motivations and emotions.

Parenting skills consist of skills, aptitudes and attitudes that cannot be learned cognitively.

The work of aiding parents, encouraging them to explore what they "feel" or think is a way of accompanying them through a process of elaboration of their personal issues, emotions and motivations, and the meaning they give to what happens to them.

In clinical practice, a "difficult" family context and the loneliness of a parent are often difficulties hard to overcome, and with which parents sometimes have to cope. In some cases, a child's parents are absent because they are dead or separated, or sometimes there are erratically present, whenever it is comfortable or possible for them. It is the experience of many workers the fact that children can often be, for their parents, a way of blackmailing each other, rather than being suffering children to be helped and supported in their growth. It is not expected, to give an example, that two parents are capable of protecting each other's image in front of their child, especially in circumstances of a conflict between partners in a process of separation.

After many arguments between two separated parents, a father asks his daughter to go to court and testify against her mother!

Sometimes the real child remains in the background, while the imaginary, idealized one prevails. Sometimes the child remains imprisoned in the parents' desire-projection, and represents a caricatural offshoot of them. Sometimes the child is a potential retaliation, a hope for redemption in a life full of frustration and devoid of any gratification.

I stopped skating. I had enough of my mother shouting and screaming from the balustrade during my trainings. For her, I should have become a champion, but I couldn't have fun any longer!

In summary, the work of supporting parenting skills aims at helping parents distinguish between the adults' world (and problems) and the children's world (and problems), in an attempt to "let this child exist as he/she is"; protecting children, helping them in their growth and ultimately tolerating the "distance" that is necessary for their development.

Conclusions

The parental role can be read on multiple levels, which can be conceived as arranged in "layers". At an external, explicit and formal level one can see behaviors, attitudes, and the "space" that explicitly and formally parents have for their children (to a certain extent this coincides with the parental role that our society expects). As one proceeds towards more internal layers, one finds a more personal dimension (which is essentially intrapersonal), which may include feelings of loss, grief, anger, and be characterized by "unresolved stories", loss, abandonments, desires and expectations often frustrated, which have marked and mark a parent's life. It is at this "internal" level of implicit operational representations, which contrasts with the more declarative, prototypical and explicit level, that interventions are aimed, given, above all, the clinical context where they take place.

The implicit, non-conscious dimensions, which are deeply linked to the primary emotional and motivational processes, as well as to the primary representations that have been established, are the innermost dimensions of one's self, on which the work of supporting parenting skills is centered.

Thus, within this model, the clinical process that configures the work of supporting parenting skills

- is characterized by a predominance of exploration, support, validation and comparison processes, with respect to the experience of parenthood;
- pays particular attention to the role played by memory, emotion and motivation systems, in relation to the reconstruction of one's personal history;
- expands the focus of the process of narration/ reconstruction of one's life history (as a child, an adult, a parent), extending it to the present moment and including a social understanding of the

world of social causality and the perspectives/expectations that one has about oneself and one's children;

- supports a process of awareness, also by means of an active confrontation and elaboration of representations, in an effort to mobilize and develop the "reflective processes", recognizing a child's individuality, his/her feelings, desires and specificity.

References

Abbate, L., & Massaro, V. (2007). *La valutazione delle relazioni oggettuali e delle rappresentazioni sociali con il TAT* [The assessment of object relations and social representations with the TAT]. Milano: Raffaello Cortina.

Albasi, C. (2008). *Psicopatologia e ragionamento clinico* [Psychopathology and clinical reasoning]. Milano: Raffaello Cortina.

Beebe, B., & Lachmann, F.M. (1994). Representation and Internalization in Infancy: Three Principles of Salience. *Psychoanalytic Psychology*, 11, 127-165.

Bowlby, J. (1969). *Attachment and Loss* (Vol. 1). New York: Basic Books (trad. It. *Attaccamento e perdita*, Vol. 1, *L'attaccamento alla madre*, Bollati Boringhieri, Torino, 1972).

Bowlby, J. (1973). *Attachment and Loss* (Vol. 2). New York: Basic Books (trad. It. *Attaccamento e perdita*, Vol. 2, *La separazione dalla madre*, Bollati Boringhieri, Torino, 1972).

Bowlby, J. (1980). *Attachment and Loss* (Vol. 3). New York: Basic Books (trad. It. *Attaccamento e perdita*, Vol. 3, *La perdita della madre*, Bollati Boringhieri, Torino, 1983).

Bowlby, J. (1988). *A Secure Base*. London: Routledge (trad. it. *Una base sicura*, Raffaello Cortina, Milano, 1989).

Bowlby, J. (1988b). Developmental psychiatry comes of age. *The American Journal of Psychiatry*, 145, 1-10 (trad. it. in: *Rivista di psichiatria*, 23, 57-68).

Bornstein, M.H. (1991). *Handbook of Parenting* (Vol. 4). Mahwah: Lawrence Erlbaum Associates.

Correale, A. (1996). La funzione a posteriori nel disturbo borderline [The subsequent function in borderline personality disorder] In G.G. Rovera (Eds) *Il paziente borderline* (pp. 395-400). Torino: Centro Scientifico Editore.

Crittenden, P. (1997). *Pericolo, sviluppo e adattamento* [Danger, development and adaptation]. Milano: Masson.

Dazzi, N., Lingiardi, V., & Gazzillo, F. (2009). *La diagnosi psicologica: principi, caratteristiche, obiettivi*. [The psychological diagnosis: principles, characteristics, objectives]. In N. Dazzi, V. Lingiardi & F. Gazzillo, (Eds) *La diagnosi in psicologia clinica: Personalità e psicopatologia* (pp. 3-14). Milano: Raffaello Cortina.

Di Blasio, P. (2005) (Ed). *Tra rischio e protezione. La valutazione delle competenze parentali* [Between risk and protection: The assessment of parenting skills]. Milano: Unicopoli.

Engels Rutger C.M.E., Finkenauer, C., Meeus, W., & Dekovic, M. (2001). Parental attachment and adolescents' emotional adjustment: The associations with social skills and relational competence. *Journal of Counseling Psychology*, 48(4), 428-439.

Faravelli, G. (2004). Assessment of psychopathology. *Psychotherapy and Psychosomatics*, 73, 139-141.

Fava, G.A., Rafanelli, C., Baldaro, B., Battaglia, M., Caracciolo, S., Carlomagno, S., et al. (2009) . La clinica psicologica. Fondamenti e linee di sviluppo. [The psychological clinic. Rationale and development guidelines]. *Giornale italiano di psicologia*, 1, 11-17.

- Fonagy, P., & Target, M. (1997). Attachment and reflective function: Their role in self-organization. *Development and Psychopathology*, 9, 679-700 (trad. it. *Attaccamento e funzione riflessiva*, Raffaello Cortina, Milano, 2001)
- Fonagy, P. (1997). *Attachment, the development of the self, and its pathology in personality disorders*. In Maffei C., Derksen J. & Groen H *Treatment of Personality Disorders*. New York: Plenum Press (trad.it. *Attaccamento sicuro e insicuro*. KOS, 129 (giugno), 1996, 26-32)
- Fosha, D. Siegel, D., & Salomon, M. (2009) (Eds). *The Healing Power of Emotion*. New York: Norton.
- Gallese, V. (2003). La molteplice natura delle relazioni interpersonali: la ricerca di un comune meccanismo neurofisiologico [The manifold nature of interpersonal relations: the quest for a common neurophysiological mechanism]. *Networks*, 1, 24-47
- Ham, J., & Tronick, E. (2009). Relational Psychophysiology: Lessons from mother-infant psysiology research on diadically expanded states of consciousness. *Psychotherapy Research*, 19(6), 619-632.
- Hautmann, C., Stein, P., Hanisch, C., Eichelberger, I., Pluck, J., Walter, D., & Dorfner, M. (2009). Does parent management training for children with externalizing problem behavior in routine care result in clinically significant changes? *Psychotherapy Research*, 19(2), 224-233.
- Hughes, D.A. (2009). *Attachment-Focused parenting: Effective Strategies to Care for Children*. New York: Norton.
- Kohut, H. (1971). *The analysis of the self*. New York: International University Press.
- Kohut, H. (1977). *The restoration of the self*. New York: International University Press.
- Lichtenberg, J.D. (1989). *Psychoanalysis and Motivation*. Hillsdale (NJ): The Analytic Press (trad. it. *Il sè e i sistemi motivazionali*, Roma, Astrolabio, 2000).
- Lichtenberg, J.D., Lachmann, F.M., & Fosshage, J.L. (1992). *Self and motivational systems*. Hillsdale, NJ: The Analytic Press, inc (trad. it. *Il sè e i sistemi motivazionali*, Roma, Astrolabio, 2000).
- Lieberman, M.D. (2007). Social Cognitive Neuroscience: A Review of Core Processes. *Annual Review of Psychology*, 58, 259-289.
- Liotti, G. (1999). Il nucleo del Disturbo Borderline di Personalità: un'ipotesi integrativa [The core of Borderline Personality Disorder: integrative hypothesis]. *Psicoterapia*, 5,16/17, 53:65.
- Lopez, S.S. (2003). *The assessment of Adult Attachment Security*, In S.S. Lopez & C.R. Snyder (Eds) *A handbook of models and Measures* (pp. 285-299). Washington: APA.
- Lopez, S.J., Snyder, C.R., & Rasmussen, H.N. (2003). *Striking a Vital balance: Developing a Complementary Focus on Human Weakness and Strenght Trough Positive psychological Assessment. Positive psychological assessment*. In S.S. Lopez & C.R. Snyder (Eds), *A handbook of models and Measures* (pp. 3-20). Washington: APA.
- Liotti, G. (1999). Il nucleo del Disturbo Borderline di Personalità: un'ipotesi integrativa [The core of Borderline Personality Disorder: integrative hypothesis]. *Psicoterapia*, 5(16/17), 53-65.
- Liotti, G., & Ardovini, C. (2008). *Motivi e significati dell'agire interpersonale* [Interpersonal motives and meanings of action] In G. Liotti (Ed), *I sistemi motivazionali nel dialogo clinico: Il manuale AIMIT* (3-23).. Milano: Raffaello Cortina.
- Menoni, E., & Iannelli, K. (2010). *The Integrative Model (EAIE): Evolutività, affettività, intersoggettività, esperienzialità. Una proposta* [The Integrative Model (EAIE): Evolutionary, affectivity, intersubjectivity, experiential. A proposal]. Paper presented at XXVI SEPI Conference international meeting of the Society for Exploration of Psychotherapy Integration & 4th SEPI- Italy conference, Firenze, may.

- Menoni, E., & Iannelli, K. (in press). *Modelli di Psicoterapia integrativa e neuroscienze* [Integrative model of psychotherapy and neuroscience]. Roma: Alpes.
- Muran, J.C. (2009). A fusion of horizons for psychotherapy: Introduction to special section. *Psychotherapy Research*, 19(6), 617-618
- Panksepp, J., & Northoff, G. (2009). The trans-species core SELF: The emergence of active cultural and neuro-ecological agents through self-related processing within subcortical-cortical midline networks. *Consciousness and Cognition*, 18(1), 193-215.
- PDM Task Force (2006). PDM: Psychodynamic and Diagnostic Manual. APA. Silver Springs: MD: Alliance of Psychoanalytic Organizations (trad. It. *Manuale diagnostico psicodinamico*, Raffaello Cortina, Milano, 2008)
- Raaijmakers, J.G.W., & Shiffrin, R.M. (1992). Models for recall and recognition. *Annual Review Psychology*, 43, 205-34.
- Raaijmakers, J. (2008). Mathematical Models of Human Memory. In H.L. Roediger, III (Ed), *Cognitive Psychology of Memory (Vol. 2) Learning and Memory: A Comprehensive Reference* (pp. 445-466). Oxford: Elsevier.
- Rameson, L.T., Satpute, A.B. Lieberman, M.D. (2010). The neural correlates of implicit and explicit self-relevant processing. *Neuroimage*, 50, 701-708.
- Rizzolatti, G., Fadiga, L., Gallese, V., & Fogassi, L. (1996). Premotor cortex and the recognition of motor action. *Cognitive brain research*, 3, 131-141.
- Rizzolatti, G., & Sinigaglia, C. (2006). *So quel che fai* [So what you do]. Milano: Raffaello Cortina.
- Rizzolatti, G., Fogassi, L., & Gallese, V. (2001). Neurophysiological mechanisms underlying the understanding and imitation of action. *Nature neuroscience*, 2, 661-670.
- Russell, R.L. (2009). Children and adolescent psychotherapy research: Introduction to the special section. *Psychotherapy Research*, 18(1), 1-4.
- Sameroff, A.J., & Emde, R.E. (1989) (Eds). *Relationship Disturbances in Early Childhood. A Developmental Approach*. New York: Basic Books (trad. it. *I disturbi delle relazioni nella prima infanzia*, Bollati Boringhieri, Torino, 1991).
- Schore, A. (2003a). *Affect regulation and the repair of the self*. New York: Norton.
- Schore, A. (2003b). *Affect dysregulation and disorders of the self*. New York: Norton.
- Schore, A. (2009a). Relational Trauma and the Developing Right Brain. *Annals of the New York Academy Sciences*, 1159, 189-203.
- Schore, A. (2009b). Right brain affect regulation: an Essential Mechanism of development, Trauma, Dissociation and Psychotherapy. In D. Fosh, D. Siegel & M. Salomon (Eds), *The Healing Power of Emotion* (pp. 55-85). New York: Norton.
- Siegel, D. (2009). Emotion as Integration. A Possible Answer to the Question What Is an Emotion? In D. Fosh, D. Siegel & M. Salomon (Eds), *The Healing Power of Emotion* (pp.145-171). New York: Norton.
- Sporn, O, Tononi, G, & Edelman, G.M. (2000). Connectivity and Complexity: the Relationship between Neuroanatomy and Brain Dynamics. *Neural Networks*, 13, 909-922.
- Stern, D. (1985). The Interpersonal world of the Infant. A View from Psychoanalysis and Developmental Psychology (trad. it. *Il mondo interpersonale del bambino*, Boringhieri, Torino, 1987).
- Stern, D. (1989). *The representation of relational patterns: developmental consideration*. In A. J. Sameroff, e R.E. Emde (Eds), *Relationship Disturbances in Early Childhood. A Developmental Approach*. New York: Basic Books

- Trevarthen, C. (1997). *Empatia e biologia* [Empathy and biology]. Milano: Raffaello Cortina, 1998.
- Trevarthen, C. (1998a). The concept and foundations of infant intersubjectivity. In S. Braten (Ed), *Intersubjective Communication and Emotions in Early Ontogeny*. Cambridge: University press Cambridge.
- Trevarthen, C. (2009). The Functions of Emotion in Infancy. The regulation and Communication of Rhythm, Sympathy and Meaning in Human Development. In D. Fosha, D. Siegel & M. Salomon (Eds), *The Healing Power of Emotion* (pp. 55-85). New York: Norton.
- Uddin, L.Q., Iacoboni, M. Lange, C., & Keenan, J.P. (2007). The Self and Social Cognition: the Role of Cortical Midline Structures and Mirrors Neurons. *Trends in Cognitive sciences*, 11(4), 153-157.
- Van der Kolk, B. (2006). Clinical Implications of Neurosciences Research in PTSD. *Annals of the New York Academy Sciences*, 1071, 277-293.
- Westen, D., Gabbard, G.O., & Blagow, P. (2006). Back to the future: Personality as a context for psychopathology, in R.F. Kruger & J.L. Jaccott (Eds). *Personality and psychopathology*, Guilford Press, New York (trad. it "Ritorno al futuro": La struttura di personalità come contesto per la psicopatologia", in N. Dazzi, V. Lingiardi, & F. Gazzillo (Eds). *La diagnosi in psicologia clinica*, Raffaello Cortina: Milano, 2009, pp. 87-122).
- Widiger, T.A., Simonsen, E., Sirowatka, P., & Regier, D.A. (2006) (Eds). *Dimensional Models of Personality Disorders: Refining the research Agenda for DSM V*. Washington D.C.: American Psychiatric Press.
- Williams, R. Ferrara, M., Aloï, A., & Gazzillo, F. (2009). La valutazione della patologia della personalità con la SWAP-200-A: Un'applicazione ad un campione clinico di adolescenti italiani [The assessment of personality disorder with the SWAP-200-A: An application to a clinical sample of Italian adolescents]. *Infanzia e Adolescenza*, 8(2), 98-112.