

“Who am I after narcissistic abuse?”

**Early trauma biography
among people who find themselves in
repeated adult narcissistic relationships.**

Thesis

by

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1. Introduction

After having my own experiences with 'narcissistic relationships' both within family and later in partner relationships I found myself in a place where both my physical and mental health was suffering.

While seeking for help in the Norwegian health care system, I found that psychologists were well informed about 'how narcissists operate' with manipulating, gaslighting, lying and so on. But none, that I met at this point, seemed to have any knowledge about how to heal the trauma I suffered 'after narcissistic abuse' - or trauma at all.

After I got so sick that I had to quit my job, I started my healing journey first by slowly training as an NLP Coach to understand more of myself. In my searching for spot on help for my experiences I turned to other countries and did several trainings which covered 'after narcissistic abuse', somatic exercises, trauma, neuroscience and many more. This brought me to a much healthier place, both physically and mentally. And luckily, research in trauma and neuroscience has come a long way since I started my journey in the early 2000s. Now, after more than 2 years of doing IoPT work, I have been shown very early traumas that never before have hit the surface. IoPT has taken me to the core of my early trauma biography.

Along the way in my healing journey, I realised that my purpose in this life is to break the generational cycle of trauma in our family system and to help others doing the same. The lack of knowledge in the healthcare system made it clear to me that our society need more trauma informed therapists with this understanding and knowledge.

**Purpose: break the generational cycle of trauma
in our family system and help others doing the same**

During my journey I saw how perpetrator-victim dynamics are strongly present in these abusive relations and that the perpetrators are as traumatised as the victims, which is the reason both parts behave as they do. This has been a huge learning and take away from the psychotrauma work and has been transformative in how I see and understand what's been going on.

This insight is crucial for survivors of 'narcissistic abuse' to have to
1) separate themselves from their abuser
2) be able to focus on themselves instead of their abuser, and
3) move on with their lives in a healthier and non-traumatised way.

It is also crucial to realise that it is not the 'narcissistic abuse' that needs to be healed, but the early childhood trauma that makes us vulnerable to be abused.

**It is not the 'narcissistic abuse' that needs to be healed, but
the early childhood trauma that makes us vulnerable to be abused.**

2. The aim of the project

Many clients come for help to heal from trauma after narcissistic abuse. I want to offer my clients a healing program that give them the healing experience they both want - and need.

During my work with people suffering from trauma after narcissistic abuse in adult relationships I often hear statements like:

- My trauma stems from a recent (often romantic) narcissistic relationship.
- My childhood was good.
- I never heard my parents fighting.
- I had everything that I needed as a child.
- My parents were not narcissistic.
- Why am I a «douchebag magnet»?
- I have never experienced something like this in my whole life.
- The narcissist has ruined my life.

There is a difference in what many clients want - and what they actually need. As we can see in the statements above, clients very often address the root cause to be the narcissist that they are in a relation with, have left or have been discarded by. And just as often, they claim that their childhood was good.

My hypothesis is that these damaging relationships in adulthood stems from childhood trauma – for both the victims and the perpetrators - and I want to use the opportunity with this thesis to search for proof and confirmations for this hypothesis.

Hypothesis: damaging relationships experienced as narcissistic abuse are rooted in early childhood trauma for both the victims and the perpetrators

The clients often want to talk about and work with their issues with the narcissist, but what they actually need is to work with their own childhood trauma. However, I recognise that there are stages in the healing process after narcissistic abuse which includes phases where the client needs to overcome the first shock of what has been going on and the realisation that their person (often in romantic relationships) isn't who he/she claimed to be. Additionally, there will be a phase of information seeking to understand what has happened. From an outsider point of view, it may seem unnecessary that the client needs to dive into these stages. Nevertheless, my experience is that it is essential for the clients to visit these phases because they are not able to move on to self-healing without some understanding of all the craziness they have experienced.

The clue is to not be stuck in these phases as many are after narcissistic abuse.

I hope to create a thesis which underpins the necessity to turn the focus away from the abuser as soon as possible after the first shock and research phases and start working on themselves. Many clients have focused far too long outside themselves (on the abuser) and have a lot of resistance to move on and get to the point where they start working on themselves.

The documentation from this thesis will hopefully be a help to start their early trauma healing sooner.

Testing of a method for future IoPT work in groups

In the planning of the project an approach and a plan for implementation had to be drawn up. The thesis works as a test arena to check out how this approach works and if it is suitable for future work in groups. The method and approach I have chosen is thoroughly described in chapter 3.

What will be the benefits for the client?

First and foremost, healing of their own trauma biography. This includes overcoming their own victim attitudes, e.g., shame, guilt, disgust, submissiveness, Stockholm Syndrome, co-dependency, pain, chronic diseases, and/or addictions.

Trauma healing and trauma education also change how the clients view their perpetrator. They will understand that their perpetrator also is a traumatised child with unmet needs who acts in survival strategies and that this is the reason behind their behaviour. This is not as an excuse but to bring in more clarity and understanding in why things are how they are and why traumatised people are attracted to each other.

Benefits:

- **Healing own trauma biography**
- **Overcoming victim attitudes**
- **Change view of perpetrator**
- **Acceptance, forgiveness, self-care and happiness**

When realising this it can be easier to accept and heal, to see the truth as it is and move on from anger and thoughts of revenge after the abuse to a healthier future with more acceptance, forgiveness, self-care and happiness.

The aims of the project are to:

- Verify the hypothesis.
- Verify the importance to turn focus away from perpetrator and back to oneself.
- Testing a method for IoPT trauma work in groups.

3. Method

I have chosen the following procedure in the thesis regarding my contact with the participants, their self-encounters, and their evaluation of the participation. I will describe them consecutively:

- Qualification
- Introduction meeting with all participants
- Self-encounters
- Summary meeting
- Evaluation form

Qualification

The criteria for the clients to participate in this project I defined as:

- Women suffering from trauma after being in adult abusive narcissistic relationship(s)

I had qualifying telephone or video calls with each of the potential participants prior to my final selection of the participants. This resulted in four clients prior to the introduction meeting, whereof one withdrew the day before the introduction meeting. Then I was left with three participants in the group, but I chose to follow the group plan with these three.

After the self-encounters according to plan with the group of three I followed up with two additional participants, working 1-1, also qualified through telephone/video calls.

Introduction meeting with all participants

The group introduction meeting was conducted on Zoom where the facilitating of a safe space already started by having a closed room and everyone was personally welcomed as soon as they joined the room.

The introduction meeting was led by me and supported by a PowerPoint presentation which included the following:

- Information about the project/thesis
- Introducing Franz Ruppert and Marta Thorsheim - IoPT history and development
- Vivian Broughton diagram: process of high stress into trauma
- Introducing "The traumatised psyche" figure
- Self-encounters, the intention method and intention setting
- Resonating (incl. the movie "IoPT Norway & IoPT US: Resonating" with Stephen Gyllenhaal)
- Roles in a self-encounter (IG, RGs, OBS, therapist/facilitator)
- Introducing "Declaration of consent and confidentiality" for all involved to be signed before startup of self-encounters.

I also informed that I had arranged for a backup team of external RGs which consisted of fellow students from the 1st Online Advanced Training and one person from a Norwegian Supervision group.

We were ready to start!

Self-encounters

The project includes both group and 1-1 self-encounters.

Prior to the startup of the self-encounters all participants had signed the confidentiality declaration and consent statement where they accepted that their cases anonymously could be used in my thesis.

The group of participants of three were each offered five self-encounters. The first two self-encounters in groups where they resonated each other, then one self-encounter 1-1 and finally, after experiencing both, they were offered to choose if they wanted group or 1-1 in their final two self-encounters. All three participants chose 1-1 for their two last self-encounters. See reasons for choices in chapter 5.

The two additional participants have conducted respectively three and four 1-1 self-encounters.

A total of 22 self-encounters.

The participants were not given any specific rules for setting up their intentions beyond the standard IoPT criteria's per now of resonating maximum three words and "I" must be resonated.

All self-encounters were conducted in Norwegian.

Summary meeting

After the self-encounters were completed, we joined together again for a summary meeting, both the group and the two single participants.

All participants were given the opportunity to ask questions and share their experiences, learnings and reflections about IoPT theory, their own self-encounters, the way moving forward and what they have learned about themselves.

I informed that I would send an evaluation form, which also included an opportunity to leave a reference about their experiences in the project.

Evaluation form

The evaluation form was sent by e-mail to all participants immediately after the summary meeting. All five participants have answered and returned the form.

4. Self-encounters

In this chapter I will look closer into five self-encounters in the study. One self-encounter from each of the participants.

In the cases below, the following abbreviations will be used:

IG:	Intention Giver	Tol:	Trauma of Identity
ID:	Identification	ToL:	Trauma of Love
A:	Autonomy need	ToS:	Trauma of Sexuality
S:	Symbiotic need	ToP:	Trauma of becoming a Perpetrator
TP:	Traumatized Part		
SP:	Survival Part		
HP:	Healthy Part		

Case 1 (IGs 1st - group):

Intention:	I want <u>good health</u>
Appearing trauma:	Trauma of Identity, Love, Sexuality & becoming a Perpetrator
Symptoms and appearing issues:	Absent mother, sexual incident, shame, confusion, pleasing, inner conflict, self-perpetration, autoimmune disease (cancer), exhaustion.
Statements offered/client's insights:	I'm so tired of being nice and good. I want to be me. (A) I want to be allowed to be me. (A) I want my mother to acknowledge my feelings. (S)

What I saw:

In this very first self-encounter in the project we were shown a split already from the time in the womb when "I" initially resonated. She felt heavy, tears and lost. Lack of connection, floating, nothing to hold on to (Tol, TP). IG relates to it all and says she has never known who she is or what she wants in life other than wanting another family.

"I" resonates 4 years asking what happened. IG tells about an incident at age 4 where her 2-year older brother and 2-3 other child friends were in a cabin. IG and one of the boys were told to take their clothes off and lay on top of each other. When done they were bullied by the others, and they were saying in a childish way that "they had sex". The incident indicates ToS. The incident brought up a lot of shame in IG at the time which "I" could recognise. IG can tell that shame also is closely connected to mother saying "Shame on you" to her a lot during childhood, indicating ToL. Due to this, IG has been pleasing and acting as a "good girl", while holding back a lot of feelings (anger) and tears. *Ruppert talks about how children can set their own psyche aside and stop fighting back when the mother degrades and insults the child. Even if the child wants to cry, they suppress the tears and smile instead. Jeg vil leve, elske og bli elsket, page 50. Shame, both because of being sexually degraded and not feeling being loved, is described in Min kropp, mitt traume, mitt jeg, page 47.*

“good” is searching in despair to find out who she is (ToI, SP).

“health” is heavy and tired in body, just wants to lie down (TP), wants to cry but holding it back.

There has been an ongoing inner conflict over years between the part “good” wanting to understand what “good” is - and find it - and on the other hand, the “I” not wanting to be a “good” girl. Mother wants me to be “good”, but she doesn’t see me. *IG don’t feel understood or seen (S, ToL) as described in Jeg vil leve, elske og bli elsket, page 29.* This also indicates that there are underlying HPs in this structure (in “I”) that try to stand up to the perpetrator (mother). But, at a cost. The inner conflict wears out the “health”.

“I” says “I do not love myself”, which might be suppressed anger turned onto herself (ToP, self-perpetration). The IG has suffered with completely exhaustion and fatigue over years, and cancer diagnosis twice later years, which could be a result of this.

Ruppert describes how suppressed feelings, especially anger towards perpetrator parents that not has been expressed, after time can show up as physical phenomena. Min kropp, mitt traume, mitt jeg, page 47. Broughton also describes how the trauma triad produces trauma victims with survival strategies that can turn a trauma victim into a trauma perpetrator, first against oneself. Trauma and identity, page 202.

The *turning point* comes when IG look her “I” in the eyes and asks what she needs. “I” responds: I need YOU! I need you to hold me, hug me, comfort me. IG and “I” starts to hug each other, connecting. The connection and good energy make “good” understand what “good” is and that she wants more of it, she is undernourished. When this happened “health” lost her internet connection and fell out of Zoom. When reconnecting she is still very, very tired.

IG has not felt wanted (ToI), loved (ToL) or protected (ToS) and became a perpetrator to herself (ToP).

What I learned:

IG needs to take care of her health and let herself rest going forward. “I” and “good” came closer and grew a lot. Parts express anger and need to cry, but experience being stopped, which IG confirms she actively still does. Suppressed feelings and self-perpetration can be part of IG developing breast cancer twice.

When IG and her “I” connect (*turning point*), it immediately gives a respond in “good” who then understands what “good” is and wants more of it. IG is undernourished with good. The part “health” does not respond to the turning point and by that indicates that IGs health still is in a deep need for rest.

Since it was the first self-encounter in the project, I wanted to keep it simple for the group. But I recognised during the process that it could have been an option to brought in an ID with mother due to the submissiveness of mother’s needs (pleasing and acting as a “good girl”).

IG has brought with her the victim behaviour as a pleaser into her adult relationships which has made her attracted to and available for submissiveness and exploitation in relationships with persons with narcissistic traits.

I could recognise some of the dynamics in this process in myself. I have used survival strategies (in my case: work) to avoid dealing with a situation that I felt I couldn’t cope with. Which again wore out my health into fatigue and exhaustion. Luckily, I have worked my way out of these unhealthy strategies before they turned into life threatening diseases.

Throughout my IoPT work I've experienced that one of my ways of processing my traumas is through my dreams. After every module and self-encounter, I have experienced deep dreams where I can see changes play out and I receive even deeper understanding and clarity.

After this first self-encounter in my thesis I found that something in me had been triggered which played out in my dreams the following nights. It seems to me that the overall theme of my thesis is the basic trigger and starting up the work with the self-encounters kicked the button.

In my dreams, I expressed healthy anger and was now able to set very clear boundaries with two people in my past where I was stuck in a victim-perpetrator dynamic. In both relations I've been in a victim role and submissive to their behaviour because I felt that I needed them. Now, in the dreams, I put my own needs first and was able to set myself free and let them go.

Case 2 (IGs 4th - 1-1):

Intention:	! Self-respect
Appearing trauma:	Trauma of Love
Symptoms and appearing issues:	Bullying mother and sister, fighting back, acknowledge split with self-respect.
Statements offered/client's insights:	I need my boundaries to be seen and heard. (S) I need that the two of them takes two steps back and leave me alone. Leave my space, my room. You have nothing to do here. (A) You are on the same page, you and your part "Self-respect".

What I saw:

The part "Self-respect" talks about a childhood with bullying from mother and sister and the need to be respected for being herself. When I ask, "What do you need?" she says:

I need my boundaries to be seen and heard.

I need that the two of them takes two steps back and leave me alone. Leave my space, my room. You have nothing to do here.

When we talk and reflect in between resonances, IG says that she recognises these needs and I say to her: You are on the same page, you and your part "Self-respect". Going back into resonance with "Self-respect" she now screams back at the bullies. Out of resonance again, IG continues: It gave me so much safety when you said that we are on the same page. It was a split there. Now I agree with myself. Now I am drawing very clear boundaries around myself (*turning point*). *Ruppert describes how the child's unmet need for love creates anger and rage and how the hatred needs to split off in the child, Jeg vil leve, elske og bli elsket, page 50.* When the IG here recognises the split in "Self-respect", she is able to express her anger.

I let her sit with this good feeling for a while and I can see a smile coming up in her face.

After this IG goes for the first time in resonance with her "I" who can report that what already happened between IG and "Self-respect" made a change in her. She is excited and is wondering how life will be going forward, very happy. 4-5 years. She feels relieved. A sense of safety is coming in, more joy and safety. She can hear a voice saying: well, it may be possible to flourish here, it is safe here now. I feel pleased.

IG reflects: Now I am in charge. I have a feeling of safety. I can see that my "I" and "Self-respect" now are working together. They want to talk and work together.

What I learned:

This was one of the shortest, yet most beautiful and effective sessions I have facilitated. What came up and then turned in the first part "Self-respect", was already settled in the "I" when the IG went to resonate "I". The IG said she recognised the split after I (as the facilitator) said the sentence: You are on the same page, you and your part "Self-respect". When she repeated that and let that sink in, the turning point was very clear and the energy in the room was so beautiful.

As I said to the IG afterwards, this is what IoPT is about. Seeing the split so clearly, feel it and then be able to integrate the parts again in your psyche so quickly – very elegant!

The lack of self-respect due to the bullying in childhood orchestrated from mother has been an underlying factor for the IG allowing herself into unhealthy relationships with people with exploitative and narcissistic traits.

It was IGs choice to have the first letter in each word in the intention in upper case.

Case 3 (IGs 1st - group):

Intention:	I want to express my authentic self
Appearing trauma:	Trauma of Identity and Love
Identification:	mom
Symptoms and appearing issues:	Nausea triggered in family settings, lack of attachment, grandmother's suicide when in utero, father with explosive anger, suppressed feelings, never cry, anger towards mother.
Statements offered/client's insights:	I need mom to hold me and keep me safe. (S) I need to express my needs loud and clear. (A) I need safety and space to build trust in my own voice and to find my voice for my feelings and needs. (A) I need warmth, care and self-care. (S)

What I saw:

The part "authentic" describes a split already in utero where she feels "not connected to anything". Dark, spinning weightless (ToL, TP). IG tells that her grandmother (mother's mother) committed suicide two months before her birth. Grandmother was miserable, alcoholic and in an arranged marriage she never wanted. Mother took care of grandmother and was a 'good girl'. The part "authentic" says she needs mom to hold her and keep her safe (ToL). *Ruppert talks about how symbiotic entanglements are passed through several generations in Jeg vil leve, elske og bli elsket, page 58.*

The parts "express" and "self" both resonate a young girl 4-6 years old who is a positive, creative child that is straight forward and fearless. IG recognises this. But "self" says something happened and changed her at age 4. She got scared, someone was very angry. IG recognises her father's very explosive anger. She says his eyes was like looking into the Devil. Says that she has been in freeze since age 7-8. "express" says that her palms are now sweating and that it's not as safe to express oneself as she would think. Wish it was, but it isn't, the safety is gone. I can only express what's suitable for others. No memories any longer of being fearless, wants to cry.

Ruppert explains in Hvem er jeg i et Traumatisert og Traumatiserende samfunn, page 96, how victim attitudes are becoming trauma survival strategies as we can see here as the client started to "only express what's suitable for others" (father) to survive. She ID with father's needs.

When the sentence "I need mom to hold me and keep me safe" is offered to IG, she is first resistant and then she rejects it, shedding some tears. She explains that the last time she cried was at the age of 12 in her bed after being bullied at school. Mother came in and sat down. IG explained what happened at school and mother just got up and left. (Repetition of ToL).

The parts "express" and "authentic" responds positively when IG shows emotions with tears (*turning point*) and are now able to express their needs. "authentic" needs IG to express her needs loud and clear. She could now look at IG and recognises something authentic in her. "express" needs safety and space to build trust in her own voice, to find her voice for her feelings and needs.

The part "self" is still on alert regarding the father and is a 'good girl' in order to receive positive attention from him, but needs warmth, care and self-care (SP). She is hurt and afraid of showing emotions. Wants so badly to be released from grief and pain, but don't know how (TP). Says she is afraid and wants to be able to express her needs and feelings.

Brought “mom” in as an ID and she resonated complete rejection of IG and all parts. It seemed like IG is ID with mother’s needs and behaviours (“good girl”) and are using the same survival strategies when triggered later by her father, being the “good girl” and identifying with his needs.

IG got very angry with mother and shouted and expressed anger towards her. The part “express” lost her voice seeing “mom” but was all in again when IG got angry with her.

The part “authentic” felt an enormous longing for mother when she came in and got stuck in the longing (ID). Felt that the IG attacked “mom” from her anger and not from the heart. Then IG expressed the grief behind the anger, that she is deeply hurt, felt ignored during all her childhood and that she is sad because she has been left on her own her whole life.

“authentic” responds immediately: THAT was authentic, NOW I can see you (*turning point*).

What I learned:

Trauma of identity in mother’s womb, no attachment, met mother’s no. Parts express the need to feel and to express needs and feelings. IG has taken on mother’s behaviour of being a “good girl” when father acts out his explosive anger to try to make her needs of positive attention met. Needs are not met either by mother or father. *Ruppert describes how the child when not met by mother seek for love in father. When father also is traumatised, the child ends up in a new emotionally confused and entangled relationship. Jeg vil leve, elske og bli elsket, page 56.*

ID for mother was brought in, but I recognise that also grandmother (mother’s mother) could have been an option for ID and there was also an ID with father in “express”.

Parts need to be acknowledged and taken care of by IG. The needs they show are what is stopping IG from being able to express her authentic self, which is her intention. In other words, the entanglement with mother, father and mother’s mother has affected IGs authenticity and ability to express her authentic self.

The self-encounter was conducted in Norwegian, and the Norwegian expression of the intention was “Jeg vil uttrykke mitt autentiske jeg”. I asked the IG which “Jeg” she wanted to resonate, and she chose the last one, which is named “self” in the English translation. In retrospect I see that I could have maintained that she resonated the first “I”. That would have given a clearer picture of where her “I” was standing.

The IG has brought with her the victim behaviour acting as a “good girl” into her relationship with her father, and later the same behaviour made her attracted to and available for submissiveness and exploitation in adult relationships with persons with narcissistic traits.

Case 4 (IGs 1st – 1-1):

Intention:	<u>I want</u>
Appearing trauma:	Trauma of Love
Symptoms and appearing issues:	Numb, empty, sad, lonely, small and weak. Dad pushing, mom unavailable.
Statements offered/client's insights:	I need mom to see me and take me out of this because I don't want to do it and I can't stand it. (S) I want to do so much, but I gave up my will to please my family. I need to be seen. (S) I need my mom to see me, take care of me and make sure that I feel good. (S)

What I saw:

This client had three 1-1 sessions and chose the same intention all three self-encounters. I will refer from the 1st session that we worked together.

First resonating "I" she says she feels numb and uneasy in the body, and sad. Slight tingling in the hands. Empty, small and weak. 12 years. Sad and alone.

Out of resonance she reflects: At 12, I was controlled by my dad. He forced me to go ice skating and to exercise all the time. It was HIS interest. He was crazy pushing me to ice skate. I wanted my mom to tell dad to calm down, but I felt that she was just happy that he had me as his "project". (ToL, TP).

When offered the sentence: "I need mom to see me and take me out of this because I don't want to do it and I can't stand it.", she completely broke down. A lot of crying and release. Afterwards, she says: THAT was spot on, there was a long period of my life I felt like this.

Going into resonance with her "I" again, she can report that she now is calmer inside, having more peace, 24 years (*turning point* for "I"). At 24 she was pregnant with child number 2.

Moving on to "want", this part struggles in telling what she resonates. Only some single words come out: Live, experience, freedom, love (HP). After mentioning love, she says: now I feel a little sad. Then she moves on with more single words: travel, let go. Then she suddenly put her "want" down on the table (she used objects to represent her parts) and got out of resonance and said she was insecure about what she resonated. (SP).

Offering the sentence: "I want to do so much, but I gave up my will to please my family", the part "want" confirms: Yes, I have given up. My spark of life is gone. 14 years. I ask what she needs, and she says: To be seen. I feel empty. Two sentences are offered: "I need to be seen" and "I need my mom to see me, take care of me and make sure that I feel good" (*turning point* for "want").

IG checks in with her "I" who now says: Now I feel like straightening my back. Strength. The word "determined" come to me. I am determined. Ending with "want" who says another single word: work. Then she says she feels like in a meditative state. It's a good feeling. She feels calm. And 42 years/ my age.

Broughton describes how the healthy purpose of will is to live, be alive and gain for ourselves the things that we want and need to achieve, in order to live a good life. Further, she talks about the necessity of a healthy connection and correspondence between the "I" and the will. They work together. Without a healthy sense of "I" we either do not access our will, or we do not use our will in a healthy way. Trauma and Identity, page 103.

What I learned:

A short process with a good result. It was IGs first experience with IoPT. The first suggested sentence to "I" made it for the IG. The release was good and deep. There was no connection between "I" and "want", but the underlying trauma was the same.

When using objects to represent parts it is very easy to see by IGs action of physically putting away the part (like in this case, her will) on the table. The action itself speaks louder than words.

On the other hand, the "want" in this session also resonated HPs expressing the words "Live, experience, freedom, love, travel, let go". Her underlying healthy needs are there, but are suppressed by SP.

Giving up her own will for pleasing her family's needs set the IG in a position available for later submissiveness and exploitation in relationships with persons with narcissistic traits.

Case 5 (IGs 3rd – 1-1):

Intention:	I Want to Have Peace
Appearing trauma:	Trauma of Identity and Love
Symptoms and appearing issues:	Avoiding the “I”, chaos, pleasing, talking, overanxiousness, overadaption, a lot of survival strategies going on.
Statements offered/client’s insights:	I need mom to make space for me so I can find my place. (S) I need to be an independent human being. (A) I need my mom to be safe so I can be safe. (S) I need my mom to lead the way and show me the way. (S) I am all alone. I need my mom to see me, I need her warmth and closeness. (S) I need to be heard, get answers, to be recognised and confirmed. (S) I need my mom to remove all the burdens around me so I can have peace. (S) I need my mom to only see ME. (S)

What I saw:

This was the 3rd self-encounter with this client. The previous sessions have been dominated by a lot of survival strategies and the client presented herself from the beginning with “I have ADHD”. She is in and out of her survival strategies and is only capable of short sessions to be able to handle the information coming up.

First, she thinks of talking to her “I” but realises she want to avoid this part because “I” was so “out of control” (*IGs perception*) in the previous session (*self-perpetration, avoiding/not accepting herself*). Broughton talks about how such avoiding can represent the lack of value credited to the persons sense of self from her early experiences in the family, which already indicates the presence of *ToI*. *Trauma and Identity, page 286*.

Goes to “Have” instead who express chaos, 2 years. All synonyms of chaos. I have always had chaos. It gives me guilt. I am not able to fix it. Dependent of others. Need support and belonging (S) and I don’t have that. Need recognition. I’m just following others, am clingy and fussy, trying to find my place. I’m trying my best. My task in the family is to make the others happy (*ToL, survival/pleasing*).

When she decided to check in with the “I” she is still hesitant but recognises that this part is feeling lonely (TP). She says: I’m shocked to see that it has been traumatic to me that no one gave me feedback (S). I have guessed my way. I’m chaos (SP). “Have” and “I” have the chaos in common. I’m lonely inside, but I’m not lonely. I’m always guessing, it’s hard work. I must always be open to everything. I never know what to meet. Don’t trust anyone. I’m lonely (TP). 2 years. (*ToL, alternating TP/SP, destructive behaviours/overadapting*).

IG goes into reflection and says: I have learned a way to live with my loneliness. I need my mom to hold me and show me the way. I need peace. My mom should never have had children. She was adventurous. She got into chaos when she had children. Mom’s upbringing was also chaos. My grandmom had twins with another man than my grandfather before my mom was born. And this other man was kind of a family friend going in and out of the household all the time also after my mom was born. There was a lot of restlessness and rootlessness. (*ToL, ID with mother/grandmother*).

I suggest bringing in an ID as one option and as a second option also suggest that she talks to all parts first. IG chose the latter, moving on to "Peace".

"Peace" feels uneasy, 2 years. She says: Peace? That you'll have when you die. I'm worried for everything. I work hard to always find solutions. I'm solution oriented. I want a system. I need to have a system for everything. I have no memory. Have a lot of uneasiness and anxiety. Jumping from one thing to the other. "Peace" have ADHD. (SP, ID *with her ADHD/ ADHD attribution, autodestructive behaviours*).

Ruppert describes how attributes (as a medical diagnosis) can affect how we see ourselves and how we adapt the behaviour that we believe belongs to this attribute even though the attributes don't describe anything about a person's identity. Hvem er jeg i et Traumatisert og Traumatiserende samfunn, page 33.

I suggest the sentence: I need my mom to remove all the burdens around me so I can have peace. "Peace" responds immediately: YES! (*turning point*). After that IG comes up with her own sentence: I need my mom to only see ME.

IG decides that this first round of talking to all parts is enough for today and we end the session.

What I learned:

I observe that the client goes in and out between TPs and SPs in all parts, all the time. Same as in previous sessions. It is very intense to follow. It seems to me that as soon as she touches into a deep or vulnerable feeling she is very quickly overruled by a SP.

When IG told the story about her mother/grandmother, her trauma made more sense. The chaos and lack of connections seems to be generational, but we didn't reach this point in this session as we ended before we put in IDs.

The IG has become a solution seeker in almost every situation and the solutions are created to please the environment's needs. She also says very clear: My task in the family is to make the others happy.

The victim attitude of pleasing others, being overanxious and overadaptive is brought into adult life and made her vulnerable for submissiveness and attracting persons with narcissistic traits seeking solutions identified with the needs of the perpetrators.

It was IGs choice to have the first letter in each word in the intention in upper case.

5. Findings and Reflections

The approach

The approach I chose in how to work with the group turned out very well. Starting up with a group *introduction meeting* was very successful and I experienced that the content in my presentation suited the group well and gave them information about IoPT, support and the feeling of safety they needed. They felt informed and excited to start up with the self-encounters, yet a little nervous of the unknown.

After all self-encounters were conducted, all five participants were invited to a roundup in a *summary meeting* where they were given the opportunity to ask questions and share their experiences, learnings and reflections about IoPT theory, their own self-encounters, the way moving forward and what they have learned about themselves. It was a warm and happy atmosphere in this meeting and all participants expressed gratefulness and joy for what they have experienced and learned through the project. Evaluation form was announced to be sent to them and results from this is presented below. I experienced the approach successful and could easily use this approach with future groups.

Group versus 1-1

The group participants were able to try out both working in groups and 1-1 before they could choose which form that suited them best and which they wanted for the last two meetings. This gave them a sense of being in charge over their own trauma work. It was interesting to hear their reflections over the difference in working in groups or 1-1. Some reflections were that group meetings were experienced as more dramatic, much more emotional and they were surprised by the amount and accuracy of the information the RGs brought in. The 1-1 sessions were experienced as more gently, safe and in control. Some felt it easier to have external RGs than resonating themselves. Despite that, all three group participants chose 1-1 for their last two self-encounters. My reflections on that are that they overall felt it safer to share their experiences and trauma history only with one person but at the same time had a positive experience with the group meetings.

Theoretical view

Ruppert describes how persons with narcissistic trauma survival strategies easily create networks and relationships with traumatised people and make the relations work using extreme threats and emotional abuse which are mechanism they know very well from their own childhood. They treat other people as unloving and unempathetic as they were treated by their parents. Their *victims* feel these narcissistic people treat them in the same way their own traumatised parents did; they don't listen, they are easily aggressive, they present their abusive behaviour as charities, they can't handle relationships and they abuse others in their trauma survival strategies. *Jeg vil leve, elske og bli elsket, page 95-97.*

Ruppert also describes in *Min Kropp, mitt traume, mitt jeg, page 45*, how two traumatised people are attracted to each other on a trauma level because they unconsciously react to each other's split of traumas and feel that they connect as soulmates. Their survival strategies are drawn into the others trauma.

The dynamics described above show how the two types of traumatised people attract to each other in an unhealthy perpetrator-victim dynamic. Both parts unconsciously recognise the familiar feeling of their unhealthy relationships with their parent(s) and acts it out in later adult relationships. And it goes on and on in generations.

People with narcissistic survival strategies are carrying a lot of shame and they refuse to show themselves needy or to show their emotions. The fear of being rejected or degraded make them dismissive for seeking help or expressing their needs, *Jeg vil leve, elske og bli elsket, page 91*. All the love the victims try to give the perpetrators will never reach the perpetrator's original trauma or be enough for him/her to heal. **This is why it is so important for victims of narcissistic abuse to turn their focus away from their abuser and start focusing on themselves.**

Both parts are traumatised, but the only person the victims can help are themselves. By helping themselves, their trauma work, new views and actions will also transform the environment, generational traumas and ultimately world peace.

Self-encounters

All participants in the study were already before we started well aware that they had experienced childhood trauma.

What seems to repeat itself in most of the self-encounters is the tendency, or survival strategy, to please, to submit, as the participants have done with their parent(s) in order to receive the recognition, acceptance or love they needed. To have their needs met they have split off. This has led them into new repeated unhealthy relationships in their adulthood due to living in survival strategies and unresolved childhood trauma.

I have been reflecting on whether or not it matters if the appearing issues is experienced caused by mother or father. In the self-encounters described above we see that both mother (all cases) and father (case 3 and 4) show up. Nevertheless, in the cases where father shows up the turning point appear when the need for mother's protection from father is addressed. The underlying need is mother's love and protection.

Generational trauma shows up in two of the referred cases (case 3 and 5). Information from resonances brought up histories in IGs that was then expressed by IG. In case 3 grandmother (mother's mother) committed suicide when IG was 7 months in mother's womb. Mother was a pleaser to her mother's needs. The pleasing continues in IG. In case 5 the grandmother was living a mixed-up life with two different fathers of her children going in and out of her household and the mother is referred to as chaotic when she got her own children. The same chaos is experienced in IG.

Trauma of Love was the common trauma which showed up in all the referred cases. The need for mother's love. Mostly we worked with symbiotic needs or a mix of symbiotic (S) and autonomy (A) needs. All participants have taken on victim attitudes, mostly in the role of pleasing and submissiveness. These attitudes have programmed them to be further exploited later in life, as in narcissistic relationships.

When being aware of these dynamics and where they stem from, the participants have been able to release their trauma and hidden fears of being abandoned because of being themselves. They have also seen how their parents' own traumas has affected their behaviour and this has given new insights in how they view their parents. This understanding allowed them to turn the focus away from anger and pleasing of their parent(s) towards more understanding of why the parent(s) behaved like they did, and then back to themselves with more love, understanding and awareness for themselves.

The question or intention in the title of this thesis «Who am I after narcissistic abuse?», which is a common statement when people seek help after narcissistic abuse could successfully be replaced with «Who was I before narcissistic abuse?» or even better «Who am I?». «Who am I?» ultimately reach the ground issues in every single person's identity, which is what we seek to heal in IoPT.

Evaluation forms

Finally, the evaluation forms show that the overall outcome for the participants have been very positive, and I will refer some of the statements from the evaluation forms below:

What new understandings about yourself have you discovered through the IoPT work?

- A lot of my anger was eligible but repressed. I have also seen my darker sides, destructive behaviour towards myself and others.
- I've learned that due to my traumas I have acted on autopilot in relationships with others.
- I understood why I have difficulties making decisions, standing up for myself and have my own will.

What is different now?

- I am not so easily triggered by my mother anymore.
- I handle stress in a better way. I am stronger in myself when it comes to setting boundaries.
- I am more settled, and my will is easier to get in touch with.
- Calmer, more insight into myself, more patient, greater understanding of survival thoughts and patterns.

How did you experience working with IoPT and with the Intention method (self-encounters)?

- Fantastic! Extremely thorough and goes to the root cause rather than only working with the symptoms.
- Very insightful and very real.
- So fascinating to experience that the method is so spot on.
- To experience that the parts in me had different ages was both terrifying and wonderful. And the fact that these parts actually can talk to each other is even more impressive.
- It is just as exciting and educational every time. Incredibly rewarding!

Would you recommend IoPT to others? Why/Why not?

- I have already recommended it to my whole family. It is a tremendously good tool for working with trauma, which we all have.
- Yes, because it is the most real conversations that you can get.
- Yes, because it is an effective form of treatment. I can see the IoPT/Intention method be integrated in modern psychology in the future.

How did you experience Mona as an IoPT Facilitator, and would you recommend her to others?

- Mona is very professional, and very solid. She is incredibly good at creating rapport, and I had more or less blind trust in her.
- I found Mona to be very present with good questions and help along the way. Felt she was spot on. Mona is very pleasant and professional in her interaction as a therapist. I felt safe and was able to get good results already after the 1st self-encounter. Highly recommended.
- Mona is pleasant and clear - and I feel that she really wants the best for me. She is a therapist that I trust and can rely on.
- Yes, I find that Mona is caring, confident, good at explaining and good at asking questions, which were both clarifying and in-depth. Moreover, she is calm and engaged while making the right demands on me as a client. She is concerned to look after my well-being. In addition, I really liked the way she helped me to ask for what I need. I want to get better at putting my needs into words.

- Yes, absolutely. Mona is confident, knowledgeable with good understanding, insight and compassion. You gain new in-depth insight every time. I experienced that she led the meetings in a good and safe way and brought the threads together.

Final conclusions

- The method used for working with a group was successful.
- Damaging relationships experienced as narcissistic abuse in adulthood seems in all cases to be rooted in the participants early childhood trauma.
- Some cases showed how the perpetrators' attitudes also were rooted in childhood trauma.
- The hypothesis stated in chapter 2 is largely confirmed.
- The study is relevant to show how important it is to turn the focus away from the perpetrator and back to oneself, due to the fact that the perpetrators are dismissive to seek help or heal.
- The question or intention «Who am I after narcissistic abuse?» could be replaced with “Who was I before narcissistic abuse?” or even better “Who am I?”.

6. Concluding remarks

This project has confirmed my hypothesis and given me a backing tool to create a recovery program to heal from the clients' experience of narcissistic abuse in adulthood, which in reality is healing of own childhood trauma.

This project is also a backing tool to fulfil my life purpose of “breaking the generational cycle of trauma in our family system and to help others doing the same”.

The only person we can change is ourselves. When you change the environment will follow. The more trauma work you have done for yourself, the easier it will be to step out of victim attitudes and be YOU in interaction with others. When we all act in resonance with our true self, world peace can grow.

“Trauma work starts within each and one of us and will also transform the environment, generational traumas and ultimately world peace.”

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