

Loved and Harmed:
Deceptive Caregiving and the Psychology of Adult Relational Fear
A One-Day Clinical Workshop with
Christiane Sanderson

Live event in Belfast
25 September 2026, Friday
Times:
10:00am to 4:00pm, London UK

Venue:
The Gasworks, 3 Cromac Pl, Belfast BT7 2JB

CPD hours: 5

All live attendance tickets now include complimentary access to a video recorded version for 1 year



Note: no online streaming is available for this event. Lunch is provided to delegates attending in person.

"She always said she loved me."

The client says it almost apologetically.
The therapist hears something else.

"She sacrificed a lot for us."

And yet the texture of the childhood being described feels different. The guilt that arrived whenever the child tried to assert independence. The subtle blame when the parent felt distressed. The constant sense of responsibility for the caregiver's emotional world.

Nothing overtly abusive. Nothing easily nameable.

But over time the child learned something essential.

Love meant obligation. Care meant compliance. Safety depended on managing someone else's feelings.



By adulthood, these lessons are rarely visible as memories alone. They appear as patterns — self-doubt, hyper-responsibility, fear of disappointing others, and a persistent uncertainty about whether one's own needs are legitimate at all.

For therapists, these clients can be both deeply engaged and quietly unreachable. They appear thoughtful, cooperative, even insightful — yet something in the relational space remains guarded.

Often what we are encountering is the long shadow of deceptive caregiving.

When Care Becomes Control

In some families, caregiving becomes intertwined with subtle forms of emotional control. Children may grow up navigating dynamics such as affection that feels conditional, guilt used to maintain closeness, emotional dependency from the caregiver, blame when the child asserts autonomy, and loyalty expectations that suppress independent identity.

These dynamics are rarely recognised as abuse at the time. They may exist alongside genuine care, affection, and sacrifice. But the psychological consequences can be profound.

Drawing on Bowlby's foundational work on internal working models, contemporary attachment research shows that it is not dramatic rupture alone that shapes the developing self — it is the sustained quality of the relational environment (Bowlby, 1988; Ainsworth & Bowlby, 1991). When that environment is characterised by unpredictability, conditional approval, and emotional parentification — a process first identified by Ivan Boszormenyi-Nagy in which the child is required to meet the psychological needs of the parent rather than the reverse — the child's internal model of relationships is built on a distorted foundation.

Children raised in such environments often learn that safety depends on anticipating others' needs, suppressing their own feelings, avoiding conflict, and maintaining emotional loyalty at all costs. Over time, these adaptations shape attachment, identity, and relational expectation in ways that persist far into adulthood.

Loyalty conflicts occupy a particular place in this picture.

Children who have been psychologically manipulated by caregivers face a distinctive bind: the person causing harm is also the person they depend on, love, and are expected to protect. They cannot afford to see clearly. The cost of recognition — the loss of the relationship, the destruction of the family narrative — is too high. So they turn the confusion inward. Something must be wrong with them.

The context here in Northern Ireland adds particular weight. A landmark study by Queen's University Belfast (Walsh et al., 2025) — the first of its kind — found that 60% of adults in Northern Ireland reported at least one adverse childhood experience, with nearly one in five experiencing four or more. The clinicians in this room are not working at the margins. They are working with the mainstream.

The Psychology of Relational Compliance

One of the most common adaptations emerging from manipulative caregiving is relational compliance. Not the simple politeness expected in childhood, but a deeper relational pattern — built around self-monitoring, accommodation, and the suppression of authentic need.

As adults, these individuals may struggle to trust their own perceptions, fear disappointing others, feel responsible for other people's emotional states, apologise excessively or minimise their needs, and experience intense shame when asserting boundaries. Research on emotional parentification consistently identifies



chronic self-doubt, a pervasive need to please, and difficulty forming and maintaining intimate relationships as long-term sequelae (Jurkovic, 1997; Schorr et al., 2023).

In therapy, these patterns can easily be misinterpreted. Clients may appear cooperative and reflective, yet remain disconnected from their own agency. Their relational sensitivity can mask the depth of fear underlying closeness itself. As Judith Herman's foundational work on complex trauma documented, the survivor of chronic relational harm may present not with overt distress but with a kind of careful, managed presentation that looks to an untrained eye like engagement — and to a trained one like protection (Herman, 1992).

Without a framework for recognising deceptive caregiving, these dynamics may be mistaken for personality pathology, dependency, or resistance.

A Clinical Blind Spot

Much trauma training focuses on overt abuse, neglect, or violence. Yet many therapists encounter clients whose histories contain something harder to name — environments where love and manipulation coexisted, where care was genuine but also controlling.

These clients often carry profound self-doubt, difficulty trusting their own experience, confusion about responsibility and blame, and loyalty conflicts that persist long into adulthood. Because the harm was relational rather than overt, it is frequently minimised — both by clients and by those around them.

The misdiagnosis problem is not incidental. It is structural. When survival adaptations are read as character pathology — when compliance is coded as dependent personality, hypervigilance as anxiety disorder, relational testing as borderline features — treatment is built on a false formulation. The underlying relational wound is never reached.

This workshop offers a conceptual map for the territory most trauma training leaves unnamed.

A Clinical Illustration

Emma (not her real name) grew up with a mother who appeared deeply devoted to her. She described her childhood as 'close.'

Yet Emma also recalled feeling responsible for her mother's emotional wellbeing from an early age. When Emma wanted to spend time with friends, her mother would become tearful and withdrawn. When Emma expressed frustration, she was told she was selfish or ungrateful. When Emma succeeded, her mother often emphasised the sacrifices she had made.

As an adult, Emma struggled with persistent guilt and self-doubt. In relationships she became highly accommodating, often suppressing her own needs to avoid conflict.

In therapy, Emma appeared engaged and thoughtful. She rarely challenged the therapist and often expressed gratitude for the work. Yet whenever the therapist invited her to explore anger or disappointment, Emma quickly redirected the conversation toward understanding others.

The deeper question slowly emerged:

Was Emma protecting others — or protecting herself from the consequences she once feared?

At the point of writing, this question remains open. The loyalty to her mother's narrative has not dissolved. The work continues.

This is the clinical territory this workshop is designed to map.



What This Workshop Will Explore

Drawing on her extensive work in developmental trauma, attachment disruption, and relational harm, Christiane Sanderson will guide participants through the often overlooked psychological consequences of manipulative caregiving. Across the day, the workshop will explore:

- How deceptive or manipulative caregiving shapes attachment and identity — including the role of emotional parentification and conditional approval in distorting internal working models
- The survival adaptations children develop to navigate emotional control — compliance, hypervigilance, self-erasure, and the suppression of need — and how these persist into adulthood
- Loyalty conflicts and identity confusion: how adults struggle to distinguish love from obligation, care from control, and responsibility from guilt
- How these patterns appear in the therapeutic relationship — the over-accommodation, fear of disappointing the therapist, subtle relational testing, and difficulty trusting support that signal this history is live in the room
- How to differentiate survival adaptations from personality pathology — with direct implications for formulation, diagnosis, and treatment planning
- Clinical approaches that help clients rebuild trust, autonomy, and self-definition without reinforcing shame or therapeutic dependency
- Relational micro-interventions designed to create new experience within the therapeutic relationship itself

Participants will leave with a clearer conceptual framework for understanding clients whose histories include subtle but powerful relational manipulation — and the practical tools to begin working with them more effectively.

Why This Training Matters

Many therapists encounter clients whose histories contain a troubling ambiguity: a childhood that looked loving from the outside but left deep internal confusion. Without a language for these dynamics, clinicians may struggle to make sense of the patterns they see in the consulting room — or, more consequentially, may inadvertently reproduce them.

Christiane Sanderson is one of the most respected voices in the field of developmental trauma and relational harm. With over three decades of clinical practice, research, and teaching, she has shaped how a generation of practitioners understand the long-term consequences of early relational injury. Her work on coercive control, manipulative caregiving, and attachment disruption has informed clinical practice across the UK, Ireland, and internationally.

► A Framework Built From Clinical Reality

Christiane's approach is grounded in accumulated clinical wisdom rather than theoretical abstraction — drawn from decades of work with the presentations that arrive in real consulting rooms, complex, layered, and frequently misread by the systems intended to help them.

► Precision Tools for Complex Presentations

Through carefully sequenced interventions grounded in attachment theory and relational repair, you will gain practical approaches for the specific clinical challenges this population presents — designed for immediate integration into existing practice.

► The Diagnostic Clarity This Work Demands



As recognition of complex relational trauma grows, so does the clinical need for practitioners equipped to formulate these presentations accurately, communicate them credibly, and treat them effectively. This workshop provides the conceptual and practical foundation to do all three.

A Day of In-Person Learning

Held at the contemporary voco Belfast — an IHG property in the heart of the city — this one-day workshop offers clinicians a focused, reflective learning environment combining rigorous clinical content with the collegial exchange that only in-person engagement makes possible.

Who Should Attend

This workshop is particularly valuable for clinicians seeking to deepen their capacity to work with the sequelae of early relational harm:

- Psychotherapists and psychologists working with complex trauma, attachment disruption, and relational presentations
- Practitioners encountering clients with histories of coercive, controlling, or manipulative caregiving
- Clinicians seeking greater precision in differentiating personality pathology from attachment-based survival adaptations
- Mental health practitioners working in family, child, or adult trauma services
- Clinical supervisors supporting practitioners with complex relational caseloads
- Experienced clinicians seeking to refine their formulation and intervention capacity with treatment-resistant presentations

References

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- Herman, J. (1992). *Trauma and Recovery*. New York: Basic Books.
- Jurkovic, G. J. (1997). *Lost Childhoods: The Plight of the Parentified Child*. New York: Brunner/Mazel.
- Schorr, S., & Goldner, L. (2023). “Like stepping on glass”: A theoretical model to understand the emotional experience of childhood parentification. *Family Relations*, 72(5), 3029–3048.
- Walsh, C. et al. (2025). The Prevalence and Impact of Adverse Childhood Experiences in Northern Ireland. Queen’s University Belfast / Northern Ireland Department of Justice.

About the speaker

Christiane Sanderson BSc, MSc. is an Honorary Senior Lecturer in Psychology at the University of Roehampton, of London with 35 years of experience working with survivors of childhood sexual abuse and sexual violence. She has delivered consultancy, continuous professional development and professional training for parents, teachers, social workers, nurses, therapists, counsellors, solicitors, the NSPCC, the Catholic Safeguarding Advisory Committee, the Methodist Church, the Metropolitan Police Service, SOLACE, the Refugee Council, Birmingham City Council Youth Offending Team, and HMP Bronzefield.

She is the author of *Counselling Skills for Working with Shame*, *Counselling Skills for Working with Trauma: Healing from Child Sexual Abuse, Sexual Violence and Domestic Abuse*, *Counselling Adult Survivors of Child Sexual Abuse*, 3rd edition, *Counselling Survivors of Domestic Abuse*, *The Seduction of Children: Empowering Parents and Teachers to Protect Children from Child Sexual Abuse*, and *Introduction to Counselling Survivors of Interpersonal Trauma*, all published by Jessica Kingsley Publishers. She has also written *The Warrior Within: A One in Four Handbook to Aid Recovery from Sexual Violence*; *The Spirit Within: A One in Four Handbook to Aid*



Recovery from Religious Sexual Abuse Across All Faiths and Responding to Survivors of Child Sexual Abuse: A pocket guide for professionals, partners, families and friends for the charity One in Four for whom she is a trustee.

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