

Training Evaluation Report – DDP Level 1

Title: Dyadic Developmental Psychotherapy (DDP) Level One

Venue: Online

Date: 30 April, 1,14,15 May 2024

Length: 28 hours/ 4 days

Trainer: Joy Gamble

Certification: Dyadic Developmental Practice, Psychotherapy & Parenting - Level One

Applicant relevant qualifications: Cert. in counselling skills, MA in Music Therapy

Applicant Professional Role: Music Therapist, HCPC Registered

Summary of the training

I applied for funding to undertake Level 1 DDP training to better help the young people I work with, many of whom have experienced developmental trauma in their early years. The DDP approach (created by Dan Hughes) assists therapists to effectively support children, young people, and their families. In this model, theory, and research in the areas of developmental trauma, attachment theory, intersubjectivity and child development are integrated to produce a therapeutic approach used for relationship development and trauma resolution. Having worked with young people for three years I have become increasingly convinced of the importance of involving parents/caregivers in the therapeutic process. A child cannot be treated in isolation. The success of therapy with these children relies upon the relationship they can develop with their therapist and caregivers. The therapist's task is to create an atmosphere of emotional safety so that the children can begin to develop trust and discover new ways of relating and being. It is also necessary that the therapist develops a relationship of trust with the parents. It is important that there is a consistency of approach in the therapy room and at home. This differs from the 'neutral' stance and solution-based approach that practitioners have traditionally adopted and is characterised by intersubjective connection, curiosity, and empathy.

The therapist's role is to support the parents to understand what is going on for their child, how to relate and parent constructively, to help him or her feel more secure. DDP training specifically focuses on supporting both parents and children in the therapeutic process, to achieve a better long-term outcome for the child and those they live with. There are several levels of training necessary to qualify as a DDP practitioner.

My experience of the training

I attended the online Level I training course led by DDP Practitioner Joy Gamble. This provided a framework within which to consider the key DDP concepts underpinning the DDP approach, including PACE, attachment history and safety, intersubjectivity and attunement, reciprocal relationships, polyvagal theory, and the role of the parent in supporting their child.

Joy's approach was relational and inclusive; she engaged directly with the group and ensured that every member's voice was valued and brought into the discussion. She thus incorporated the PACE approach into her teaching style. It was flexible and group-led, building a sense of safety and belonging within the group, and encouraging free dialogue, reflection, and active engagement. She employed carefully chosen examples of recorded case studies, and

observed and experiential role plays alongside the discussion, to consolidate her teaching and create an enriching learning environment.

The recorded examples of Dan Hughes' work which Joy showed the group put flesh on the bones of the theoretical principles and provided first-hand experience of the approach. The role-plays gave opportunity to practise and apply PACE skills to our own personal casework.

The opportunity to reflect on our own practice and personal experiences and integrate them into the learning process was a valuable aspect of the training for me. It was remarkable to discover the wide application of the PACE approach, reinforced by the presence on the course of colleagues from a range of backgrounds. I learnt a lot from our small group work and the sharing of individual experiences and insights.

Although I was familiar with PACE before I commenced the training, the course enhanced my understanding of how it works in practice, and convinced me of the effectiveness of the approach.

Since completing the DDP training I have sought to further integrate the DDP framework into my therapeutic work with adopted children and young people. It has also strengthened my belief in the importance of working with both children and their carers. In my current work context, I am advocating for a more systemic approach to working with children, to build better relationships and dynamics within the family unit. To this end I hope to engage in further training (Level 2) to continue to hone and develop my skills and understanding.

I am extremely grateful for the funding provided by FPSA which has enabled me to benefit from this transformative training opportunity.