

10 Tactics of Coercive Control, Torture Within a Family

The abuser strives for absolute power over all aspects of adult and child victims' lives

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Coercive control and the severe abuse professionals refer to as “torture” can occur in intimate partner relationships and also in parent–child relationships. Often, coercion and violence flow throughout toxic family systems, involving any combination of adults and children. The term “coercive control” has been used to describe the **dominating tactics of intimate partner abuse**, and the term “**intrafamilial child torture**” has been used to describe a mix of coercion and severe violence against a child. Here, we discuss the tactics that abusers may use with both their children and their partners, so survivors and advocates can learn what to watch for and how to help.

Victimization of Adults and Children

Coercive control and intrafamilial child torture can show up in different ways. In some families, a man abuses a female partner, and both partners torture one or more of their children. In other families, the father is the sole perpetrator. Sometimes, the mother is neither victim nor perpetrator; but she fails to secure help for her tortured children—out of fear, a **loss of perspective** or in response to threats, such as the perpetrator threatening to kill the entire family if the mother seeks help.

For the rest of this article, we will use the words “victim” or “target” to describe the person who is victimized by coercive control or intrafamilial child torture—distinguishing only where necessary. We will also use gendered terms (male/female, mother/father) to explain how severe family violence most typically shows up in heterosexual families—with an abusive father and a victimized mother. However, families can be made up of people of a range of genders and sexual orientations, and any person could potentially be a victim or a perpetrator. (In the **well-known case** of the Harts, a couple consisting of two mothers apparently tortured and eventually killed their six adopted children and themselves).

10 Familial Torture Tactics

Abusers often use some combination of deliberate **physical** and **sexual abuse, intentional deprivation**, and methodical **psychological abuse** to control their children and partners. In child torture and intimate partner coercive control, the abuser intentionally inflicts harm on the victim, even if they later explain their behaviors as “lessons” or the result of being intoxicated or enraged. The perpetrator’s goal is to gain and retain absolute power over all aspects of the victim’s thoughts and actions.

Let us examine the tactics:

1. **Isolation.** **Isolation** deprives victims of social support and creates obstacles to resisting the abuser’s domination. Victims depend on the abuser for most meaningful social interactions. The isolation can include interfering with connections with family, coworkers/peers, friends and neighbors. Children might be homeschooled, not allowed to play with neighborhood children or punished for developing friendships with classmates. In extreme forms, the

child or partner is kept locked in a room or home alone for hours or days at a time—or even longer.

2. Degradation. **Degrading** a person induces fear, shame and low self-esteem. The abuser may constantly criticize, mock, insult and demean the target. In extreme forms, the target may not be allowed to bathe for long periods of time or may be forced to eat spoiled food or food fit for animals, not given access to a toilet, kept in filthy surroundings or denied privacy. These forms of degradation (and others) reduce the victim to “animal level” concerns—survival above all else.
3. Gaslighting and Mind Games. **Gaslighting** and **mind games** lead a target to feel confused, disoriented and unstable. Abusers deny their victims’ experience. They deny their own abusive actions, change the sequence of events, tell victims that they are lying or misremembering, and may repeat their false version of events so often that the target becomes confused about what really happened. Victims come to doubt their own memory and intelligence; they learn not to trust their own senses. While this type of abuse is terribly harmful to an adult, it is even more devastating to a young child’s brain that is still forming and lacks the maturity to distinguish clearly between reality and make-believe.
4. Physical Abuse. Abusers demonstrate their omnipotence and ownership of the victim’s body through physical abuse. They use pain to control, terrorize, and punish the victim. The physical abuse may be ritualized, as in, “If you talk back, I will stick hot peppers in your mouth.” Or the physical abuse may be unpredictable, or both. The mere threat of physical abuse causes **chronic fear**. In some cases, the physical abuse is “minor” but constant, such as shaking, pushing, or yanking hair multiple times throughout the day, but it can also be so extreme that it causes permanent disability or death.
5. Physical Deprivation and Weakening. Abusers may deprive their targets of **sleep**, movement, **nutritious food**, needed **medications** and water. They may also weaken them through interrogations that last hours, **giving them drugs**, poisoning them, forcing them to overexert themselves or maintain stress positions, or depriving them of protection from heat or cold. All these strategies weaken the victims’ physical and mental ability to resist or escape.
6. Sexual Abuse. Any and all **sexual acts between an adult and a child** or teen in their care must be considered abusive, including sexualized punishments,

sexual manipulations, direct sexual contact, forced observation while toileting or bathing, taking sexualized images, and exposure to pornography. In an intimate relationship, all forms of **coerced** or forced sex are abusive. With both child and adult victims, the sexual abuse may provide the abuser with sexual gratification or financial benefit or may simply provide another avenue to demonstrate dominance. Such sexual abuse is extremely demoralizing and traumatic for both adults and children.

7. **Rules and Restrictions.** Abusers often establish rules and restrictions that inhibit the target's individual development, expression and liberty. Rules may concern dress, eating, socializing, chores or other areas. These rules are not expressed as preferences but rather as requirements that will be met with consequences if not fulfilled. With a child, these restrictions may inhibit the child from engaging in the very behaviors that children need for their normal development, such as climbing, running, laughing and playing. In extreme forms, the rules concern the most minute aspects of a person's life such as the position they sleep in, the expression on their face or how many squares of toilet paper they can use. These kinds of restrictions make adult and child victims fearful, anxious and inhibited.
8. **Withholding of Attention/The Silent Treatment.** Abusers may exert their power by withholding contact of various kinds. This can include leaving without saying when they will return. It can also include ignoring, refusing to touch and even refusing to acknowledge the victim for hours, days, weeks or even longer. In response, adult and child victims may experience helplessness, hopelessness and feelings of derealization. That is, they may feel detached from themselves and reality.
9. **Economic Abuse and Labor Exploitation.** Abusers **take financial advantage** of their adult partners and children. They may require their partners and children to work and then take their money or coerce or defraud them into taking out loans. They may exploit them sexually for financial gain. Abusers may steal their partners' or children's savings or benefits. Deprived of resources, the victim has reduced ability to escape. Abusers may require victims to engage in an inordinate amount of household chores even when sick or unwell, or when too young to be assigned these tasks. Incessant arduous labor forces victims to focus only on getting through the next few hours or days and makes them unable to plan resistance or escape.

10. Abuse Through Institutions/**Legal Abuse**. Abusers manipulate institutions for their own benefit and/or to harm their victims. When an adult victim calls the police in response to an assault, **the abuser may self-injure** or in some other way persuade the police to **arrest the victim** or take the victim involuntarily for a psychiatric evaluation. If a child or mandated reporter contacts child protective services or the police, the abuser may persuade them that the child is delinquent or mentally ill and needs to be sent to a locked facility. Abusers also use the legal system to increase their control over their victims, by seeking guardianship of adult partners or adult children, and by fighting constant court battles with their ex-partners. All these efforts build a paper trail discrediting the victim's version of events and expanding the abuser's control. Victims also feel helpless as they see the very institutions that should be helping them instead increasing their subjugation by the abuser.

How to Help Victims of Family Torture

While the tactics used to inflict severe coercive control and child torture are similar, the age at which abuse occurs affects people differently. Intrafamilial child torture prevents children from developing normally; therefore, the children need extra support to recover their missed developmental opportunities. Adults who have been subject to coercive control by an intimate partner, but who had relatively intact childhoods, most likely reached their developmental milestones prior to the abuse. Therapy with those adults can therefore focus on helping them "be themselves" again. Many IPV and child torture survivors meet criteria for **PTSD** or complex PTSD and some children meet criteria for **developmental trauma disorder**.

With both adult and child victims, we suggest the following general guidelines:

1. Establish safety. Recovery cannot begin if a child or adult continues to be exposed to abuse or fears being returned to their abuser. They need a safe place to live. Children need a secure, permanent living situation with nurturing, **non-punitive** adults. Adult victims need protection from **stalking** and threats. For children who do not have a non-offending parent, Child Protective Services will need to find a safe and permanent home

for them. These children should have no contact with their torturing parent(s).

2. A medical examination can find and address any possible medical conditions caused by the mistreatment.
3. Trauma-focused psychotherapy can provide relief for both adult and child victims. Promising approaches include a focus on body regulation and ways to feel safe in the body. These techniques help reduce some of the secondary effects of trauma (e.g. difficulty sleeping, hypervigilance, dissociation and numbing). Not every psychotherapist is qualified to provide such treatment.

Additional resources that may help include physical activities such as yoga or dance, and opportunities to write, draw and paint. Children should have a forensic interview at a [child advocacy center](#) to document abuses. Children may also need services to address specific deficits such as physical therapy, occupational therapy and speech therapy. [Recovery is possible](#)—even from severe coercive control and child abuse.

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