

Child and adolescent to parent violence and abuse (CAPVA)

(These procedures are informed by "<u>Understanding CAPVA</u>- a literary review on child and adolescent to parent violence and abuse for the Domestic Abuse Commissioner's Office" By Victoria Baker and Helen Bonnick November 2021)

Defining child and adolescent to parent violence and abuse (CAPVA)

In the UK, there is currently no agreed legal definition for CAPVA. However, broadly speaking, CAPVA can be defined as:

A pattern of harmful, and in some cases, controlling, behaviour by children or adolescents towards parents or caregivers, where abusive behaviour can be physical, verbal, emotional, psychological, financial, property-based or sexual. Abusive behaviour can represent an intentionally harmful and controlling dynamic with similarities to the 'emotional terrorism' of intimate partner abuse, or can be unintentionally harmful, representing 'functional' or 'expressive' forms of aggression used to communicate distress, anxiety or trauma. In many cases, it can involve both forms, or can begin as expressive violence and develop into more coercive forms of abuse as time goes on. Abuse also often extends to other family members such as siblings or grandparents.

Although there is no clear threshold for differentiating between CAPVA and those behaviours 'typical' of teenage rebellion such as shouting, swearing and storming out of rooms, key distinguishing characteristics are that it represents a pattern of behaviour and that the pattern of behaviour is harmful.

It is clear that, similar to other forms of family abuse, power, control, fear and harm are key defining aspects. Further, as with other forms of abuse, CAPVA is similarly characterised by secrecy, shame and stigma. This contributes to it being a 'hidden' and 'hard to reach' form of family violence, with parents often denying or minimising the abuse to protect themselves from judgement or retaliatory abuse, or to protect their child from criminalisation or being taken into care.

Although for some families, CAPVA can sit within a wider pattern of child and adolescent violence and, in some cases, can develop from early-onset persistent (EOP) behavioural difficulties and temperamental hyperactivity, CAPVA is a distinct form of abuse that often sits outside of more general patterns of child and adolescent aggression. For some parents, their child's behaviour towards them can sit in stark contrast to the behaviour demonstrated towards teachers, peers, or even other family members. That said, although CAPVA should be seen as distinct from broader forms of child and adolescent violence, such generalised aggression can still be a potential risk factor for it. Violence and aggression by children and adolescents is not always abusive however, sometimes representing behaviours used in self-defence or in protection of others, or a one-off event triggered by environmental stressors. It can also be reactive behaviour taking place within the context of acute episodes of mental ill health.

CAPVA can take a range of forms including physical violence, verbal abuse, emotional and psychological abuse, and economic and material abuse. Although rare, abuse can also be sexual in nature. Examples of typical abuse:

Abuse type	Typical behaviours involved		
Physical	Punching, kicking, pulling hair, pushing, throwing or pinning, trapping, biting, throwing or hitting with objects.		
	In more extreme cases, strangling, using weapons such as knives, the use of poison/gas, and burning/scalding.		
Verbal	Shouting and swearing to argue, challenge and intimidate. Demeaning, sarcastic and critical language used to humiliate, hurt, and undermine parents' sense of self.		
Emotional or psychological	Derogatory names, withholding affection, manipulation, threats, intimidation, blackmail and coercion to obtain control over the household, psychological tactics, e.g. hiding household objects, using 'silent treatment' and other 'mind games', social/obstructive tactics.		
	The threatening of self-harm and use of risky and endangering behaviour.		
	The use of sexualised language to demean and humiliate.		
Economic or material	Destruction of property, e.g. smashing up rooms, kicking or punching holes in walls and doors, smashing windows, destroying parents' personal possessions. The demanding or theft of money and goods, the selling of property, endangering employment, incurring fines, endangering tenancies.		

(Adapted from Baker, 2021)

As with all forms of abuse, the forms that CAPVA takes is often very specific to the parent-child relationship, leveraging the legal and moral obligations for parents to provide for their children, as well as the unique parent-child bond. For example, children can attempt to undermine the parental role by threatening to call the police or social services with false claims of abuse, make repeated verbal attacks on parental capacity, and manipulate the close parent-child bond by threatening or carrying out self-harm in acts of 'self-sabotage'. Although some of these acts may happen occasionally as part of typical teenage behaviour, what makes them abusive is their repeated nature, with parents reporting that the continual use of such tactics undermines their sense of self and well-being, while forcing them to alter their own behaviours to avoid abuse. However, the way in which CAPVA presents does vary from family to family, with no 'one size fits all'

Age range for these procedures

Adolescence is defined as the period following the onset of puberty during which a young person develops from a child into an adult. In UK legal terms people are regarded as adults when they reach the age of 18, however, through adolescence,

the brain is going through a development continuum, maturing from back to front. The posterior regions, especially those above the spinal column, are largely responsible for motor control. Their earlier maturation helps account for the quick acquisition of locomotion and other movement skills by young people. Maturation of many sensory regions also occurs early, enabling a growing person to learn from the surrounding world. The maturing of the forward regions of the brain, particularly the frontal lobe, doesn't occur until late adolescence or early adulthood; some researchers say the region's maturation may not be complete until age 30. The frontal lobe is the seat of executive function, a term for the cognitive processes that allow us to plan, make decisions and judgments, formulate insight, and assess risk. (Harvard Medical School).

CAPVA is typically reported as beginning in early to mid-adolescence, peaking between 14 and 16 years and declining after 18 (US Criminal Justice Data). This ae range is not covered by the definition of domestic abuse included in the Domestic Abuse Act 2021, which focuses on people being 16 or over. However, these age profiles are likely to have been identified due to the structures of services and the research samples used, with recommendations calling for a focus on the parent-child relationship, rather than specific age ranges. Other studies have shown that violence and abuse towards parents does not necessarily stop at age 18, but for some, continues into adulthood, with a US study finding that 10% of assaults committed by 18-25 year-olds involved parents as victims and two survey studies of 18-25 year-olds in Australia and Spain identifying past year rates of between 5 and 14.7% for violence and abuse towards parents. Further, in the US study, when looking at total assaults towards parents across all age ranges, 51% were committed by adults aged 18 and over. Despite this, adult violence towards parents (aside from 'elder abuse') remains relatively unexplored.

These procedures will therefore consider the age ranges for Child and Adolescent to Parent Violence and Abuse:

A child

- (a) aged under 16;
- (b) aged 16-17
- (c) someone who is 18 or over, up to the age of 30, but has a relationship with the person because they are
 - i. their biological parent
 - ii. someone who has had parental responsibility for them

A parent

Someone who is a biological parent or who has or has had parental responsibility for the child

Gender

CAPVA is a highly gendered; with the majority of population, community, criminal justice and clinical/service studies finding that mothers are significantly more likely than fathers to experience physical, verbal, emotional and psychological aggression from their children. Studies where severe physical aggression is measured, tend to begin to resemble the ratio of about 80% mothers to 20% fathers.

As regards the gender of children and adolescents, findings are mixed. However, the most typical presentation in clinical and criminal justice samples is adolescent sons abusing mothers. Although, similar to community studies, clinical and criminal justice studies have identified daughters as more likely to use emotional and verbal

aggression, and sons, physical aggression, which could explain why sons are more likely to be represented in police and clinical statistics.

Barriers to reporting

Like all forms of family abuse, CAPVA is characterised by the secrecy, shame and stigma surrounding it, with family members less likely to report violence by other family members than they are violence by strangers. This 'veil of secrecy' makes CAPVA particularly well hidden and hard to reach with parents feeling too embarrassed and ashamed to report abuse, often blaming themselves as 'failed parents' or fearful as to what may happen to their child if they do come forward. Unfortunately, in many cases, parents who do disclose can often be met with a lack of understanding – both by extended family and by the support services intended to help. When considering why the Incidents of CAPVA reported to the police /agencies are under-reported and likely to be much higher, the following need to be considered;

- Parent victims are understandably reluctant to disclose or report violence from their child
- Parents can feel isolation, guilt and shame surrounding their child's behaviour towards them, and fear that their parenting skills may be questioned and that they will be blamed or disbelieved
- Many parents worry that their child may be taken away from them and/or criminalised
- Parents may not know where to get support or those who seek help find that appropriate help and support is not always available, or they receive mixed responses
- Parents report mixed responses which often confirm their fears of being blamed, held to account or disbelieved.
- Police response to criminalise the child or remove the child from the family home may not be what the parent wishes
- There are some situations where a criminal justice response may be appropriate in the interests of safety, and the parent(s) may support the removal of their child or even ask for it
- Appropriate housing may need to be considered and where this is not always available, agencies should ensure that adequate safeguarding is in place and that the right safety plans are put in place
- Children/abusers may not understand the impact of their actions. They
 may also choose not to disclose due to guilt or fear of the social care and
 justice system
- Children/abusers may have significant diagnosed or undiagnosed learning difficulties or mental health needs that impact on their behaviours

What are the impacts of CAPVA?

Impacts on	parents/carers	the young person	siblings
Physical health	Minor or serious injuries as a result of violence by child/adolescent	Minor injuries from hitting parents, hitting/smashing walls or objects, self-harm or risky behaviour, being restrained	Minor injuries from direct or indirect violence from sibling
Emotional health	Low self-esteem from feeling like a 'failed parent', shame and guilt, poor mental health, stress and anxiety from 'walking on eggshells'	Low self-esteem, shame and guilt, poor mental health, stress and anxiety, trauma from historic or ongoing victimisation	Distress from witnessing violence and abuse
Property/finances	Damage to property or personal belongings, financial implications of replacing/mending, loss of earnings and endangering of rental agreements, paying off debts owed by child (often in context of drug debts)	Removal of privileges, potential reparation, own belongings damaged	Belongings damaged
Relationships	Damaged relationship with abusive and non-abusive children, partner conflict, loss from child separation, diminished support network	Damaged relationships with parents and siblings, loss from separation, reduced social contact with peers	Damaged relationships with sibling, loss from separation, lack of parental attention
Education/work	Potential job loss due to needing to spend more time with child and addressing issues	Missed school, wider aggression resulting in exclusion, reduced life chances	-
Legal consequences	Fines for missed school and child anti-social behaviour, potential legal consequences of harming child through restraining or fighting back, as well as legal consequences of refusing a child under 18 entry to the home (child abandonment)	Arrest and legal orders due to violence and abuse	-
Space, movement and personal agency	Parents' social contact limited as needing to stay in the home, parents (particularly mothers) hiding in rooms for protection, parents forced to take/drive child places	Lack of freedom of movement through grounding, refused entry to home, moved out of home	Avoiding the home

Links with later intimate partner violence and abuse

There is a scarcity of longitudinal research exploring the possible connection between CAPVA and the development of violence and abuse in intimate relationships, with the current body of evidence limited mainly to cross-sectional examinations finding that adolescents who use violence towards parents are more likely to use violence towards intimate partners than those who do not.

Links with parricide (the killing of a parent or step-parent)

The literature on CAPVA and parricide (the killing of a parent or step-parent) are distinct and disconnected, with only a handful of studies attempting to explore the possible connection between the two phenomena. This is surprising 'given that both operate along a spectrum of violence towards parents'. Although researchers have argued that parricide is distinct from CAPVA – involving older perpetrators and victims – others suggest that parricide could in fact represent 'the culmination of an offence trajectory' - a trajectory which is shaped over time by gender and generation (Holt & Shon). Evidence in support of this comes from a recent exploration of 'adult family homicide (AFH)' using domestic homicide reviews (DHRs), where the majority of cases (72.7%) involved parricide. Cases included those where non-fatal violence towards parents escalated to eventual fatal violence, often in contexts of care and co-dependency, where both victims and perpetrators were acting as 'carers' for the other, or forced to live in the same household due to circumstances such as divorce/separation or financial difficulties. Historic and ongoing contexts of abuse from parents, as well as perpetrator mental health issues, were also prevalent. Although DHRs are limited in their historical analyses and 'looking back' timeline, similar to CAPVA, parricide appears to involve a complex interplay of intrapersonal (mental health, substance misuse, offending), interpersonal (child abuse, interparental violence, concurrent violence) and structural (homelessness, poverty, disability) factors that culminate in parricide taking place. Also similar to CAPVA, these complex interactions often involve overlapping forms of family violence.

Assessing CAPVA

The need for a joined up safeguarding approach

Child and adult safeguarding responses will need to be considered to ensure a Whole Family response; it is important that the needs of the parent victim and 'child' causing the abuse are considered to ensure an appropriate and safe response.

Affirming the behaviour as abuse

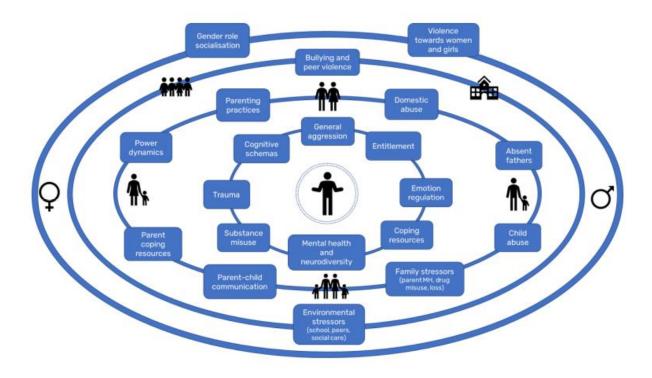
While it is recognised that children who are victims themselves can still act in a way which is abusive, referring to them as perpetrators indicates a greater level of intent and accountability and the term 'perpetrator' can be problematic, as they may also be victims in their own right or have specific disabilities and/or physical/learning needs which need to be considered. It is however very important that affirmation is given that the behaviour to the parent is abusive

The need for professional curiosity

Professional curiosity is a core part of any professional's role. It involves exploring and understanding what is happening rather than making assumptions or accepting things at face value. There may be many factors contributing to the presentation of child/ adolescent to parent abuse and it will require sensitivity to explore and understand the factors contributing to the nature of the relationship and abuse.

An ecological approach

The use of Urie Bronfenbrenner's nested ecological systems theory as a framework to help analyse and organise explanations for the CAPVA, according to whether they sit at the level of the child or 'ontogeny' (e.g. age, psychology, development); the family or 'microsystem' (e.g. histories of domestic abuse, child abuse, parenting); the community/social structures or 'exosystem' (e.g. peer violence, school issues, neighbourhood violence, poverty); or wider culture and society – the 'macrosystem' (e.g. gender socialisation, media messaging) is useful as it can help to explain why CAPVA happens but also, how the factors and contexts may interact with one another. Key influencing factors to be explored within an ecological approach:



(Figure adapted from Baker, 2021)

Considerations at the individual 'ontogenic' level

Considerations centred at the level of the individual, such as child/adolescent mental health difficulties, neurodevelopmental conditions, personality, and cognitive 'traits' are some of the most widely investigated and referenced in the CAPVA literature. This information needs to be more than the identification of 'profiles' of young people using violence and abuse towards parents and identifying the co-occurring difficulties that they may be experiencing, there is a need to explore and explain to explain the ways in which these factors specifically shape the development and maintenance of the CAPVA dynamic itself. Care needs to be taken not to focus on factors in a disempowering way, and care should be taken to ensure that the child or young person is not viewed as inherently damaged and therefore as fundamentally unchangeable. There is a need to thoroughly explore the individual's history as well as current information, to provide robust evidence rather than causal explanations. Below are some brief considerations from research (more information is available in the full document referenced at the top of these procedures)

Anti-social patterns of behaviour

Reviews of the literature have highlighted wider patterns of youth aggression as being a significant risk factor for CAPVA,

Emotion, cognition and personality

Children and adolescents using violence and abuse towards parents have been identified as having less empathy, lower self-esteem and self-confidence, and poorer emotion regulation abilities than their non-abusive peers.

Although only explored in a handful of studies, poor emotion regulation in the form of low frustration tolerance and stress adaptability has been identified as a predictor of CAPVA

Violence leading from emotion dysregulation has been referred to by some as 'expressive violence' or 'reactive aggression'; referencing 'behaviour that is primarily an outburst rather than being intended to control others'. Expressive violence can easily turn into more instrumental forms of violence intended to control parents, with 'no unambiguous boundaries between these forms'. The issue of CAPVA and emotion dysregulation is also particularly prominent in studies exploring the role of neurodivergence, as well as trauma (including institutional trauma as a result of separation), with such studies emphasising violence and abuse as being a functional response to anxiety and distress

Anger has also been identified as a potential predictor of CAPVA, with poor anger management identified as a quality of abusive children. Anger should be understood as an emotion, whereas violence should be seen as a choice. Thus, an alternative and more useful framing may be that violence is anger inappropriately expressed or a destructive and maladaptive way of managing emotion.

Investigating the psychosocial processes that may be operating within the CAPVA dynamic, a three-year longitudinal study involving 591 adolescents and their parents and found that sons' and daughters' disconnection and rejection 'schemas' (cognitive scripts that inform values and beliefs) predicted combined psychological and physical 'child-to-parent aggression' towards both mothers and fathers, with sons' narcissistic and entitled self-views also predicting child-to-parent aggression towards both parents. Interestingly, a lack of parental warmth in year one of the study predicted these disconnection and rejection schemas in year two, but only in the case of daughters, with a lack of parental warmth predicting narcissism and entitled self-views for sons. This study is useful in highlighting not only the potential cognitive processes that may mediate the effects of parenting on the development of CAPVA in young people but also the ways in which such processes may also be shaped and determined by child/adolescent gender.

Children's sense of entitlement has also frequently been cited as a contributing factor to CAPVA, with young people who use violence towards parents found to have higher levels of demandingness and lower levels of frustration tolerance. This indicates a likely pattern whereby children and adolescents have higher levels of wants and expectations, then struggle to manage their emotions when these are not met. Entitlement has been highlighted as playing an important role in abuse more broadly, with abuse conceptualised as taking place when an individual's sense of entitlement outweighs their sense of responsibility.

Mental health and neurodiversity

Research identified that children and adolescents using violence and abuse towards parents were more likely to have mental health concerns than their non-abusive peers, including Bipolar Disorder, depression and depressive symptomology, suicide attempts and self-harm; with studies also finding higher rates of psychiatric or psychological treatment. However, aside from the identification of higher rates of mental health difficulties in CAPVA samples and higher rates of CAPVA in mental health and clinical samples, the specific processes that may link mental health difficulties with a greater likelihood of violence and abuse towards parents are still mostly unknown.

Research into CAPVA has identified young people's neurodiversity as playing a role in shaping the dynamic, with research referring to diagnoses such as Attention-Deficit Hyperactivity Disorder (ADHD), Conduct Disorder, Oppositional

Defiance Disorder and also Autism Spectrum Conditions (ASCs)4. Indeed. ADHD has been stated as 'the most common diagnosis among CAPVA perpetrators in contact with agencies. Although studies of ADHD have found emotion dysregulation to be a core aspect of the disorder, with a meta-synthesis of young people's experiences indicating a lack of control in the face of overwhelming emotions, such constructions are problematic as they can result in parents being more likely to tolerate and excuse violence and abuse from their children when it does occur, rather than condemn and take action against it. Although disorders like ADHD might make violence from children more likely, this does not and should not excuse it. A small number of studies have sought to explore the ways in which such conditions may shape the development of the CAPVA dynamic, with some highlighting challenges around emotion regulation, empathy and perspective-taking, social anxiety, and sensory overload as playing a role. Within the context of neurodivergence, violence and abuse towards parents can often be conceptualised as a way of communicating distress, or an attempt to control an environment that is confusing and/or frightening. However, further research is needed to more fully explore those environmental and individual factors that may result in CAPVA developing within the context of neurodivergence, as clearly, not all neurodivergent young people with will go on to use violence and abuse in their relationships with parents. It is important that we understand what may be different for those that do.

Substance misuse

Substance use has been identified by numerous studies as being a significant factor in CAPVA, although in the majority of cases, the isolated effect of substance use is small, and the evidence, inconsistent – particularly across adolescent and parent gender. Further research is needed that distinguishes between not only substance use and misuse, but also the specific substances used, parental perspectives on their use, as well as contextual data into the processes through which they may be impacting on the CAPVA dynamic.

The two key mechanisms through which substance use may influence the CAPVA dynamic:

- 1) through their physical effects (i.e., being "high" and "coming down")
- 2) through the conflict relating to the use of substances. It is important to realise that, similar to mental health difficulties, substance misuse may be symptomatic of some of the damaging contexts within which CAPVA may be taking place, such as homes or histories characterised by violence, abuse and trauma, or even parents misusing substances themselves.

Considerations at the family 'microsystemic' level

Parental domestic abuse and child maltreatment

Children and adolescents using violence and abuse towards parents can also be victims themselves, of domestic abuse, child maltreatment, or both. Trauma in childhood, particularly that which stems from victimisation that is 'interpersonal, intentional, and chronic', can have serious developmental consequences throughout the life course, with a range of both short- and long-term implications in terms of emotional, psychological, and physical well-being. Specifically, trauma relating to domestic abuse, or direct violence and abuse by close and trusted family members, have been linked to a range of psychosocial and cognitive difficulties, such as poor mental and emotional well-being and an escalated risk of future violence perpetration. This is particularly true for those children who experience multiple forms of victimisation who, as 'poly-victims', are more likely to experience trauma symptoms and develop emotional and behavioural difficulties as a result.

Specifically, children exposed to multiple forms of family abuse have been identified as being at greatest risk of using violence towards parents.

Social learning theory suggests that children learn to use violence either via direct experience or through the observation and imitation of others, a process referred to as 'modelling'. The modelling of violent behaviour by parents has been identified in numerous CAPVA studies as a potential explanation for the phenomenon, where interparental domestic abuse acts as a blueprint for children's own behaviour, resulting in a process of cognitive mediation, whereby 'the child can incorporate the belief that the use of violence is acceptable'. The second aspect of social learning theory – learning via direct experience – suggests that children learn through positive or negative reinforcement that violence will achieve either a positive outcome (such as control or blaming others), or the desistance/avoidance of a negative outcome (such as harm or punishment). The more that abusive behaviours are reinforced, the more they occur, in a coercive cycle of relational aggression

A number of authors have highlighted how interparental domestic abuse can shape the CAPVA dynamic through its impacts on family power dynamics, with mothers parenting through domestic abuse often reporting a subjugation of power due to their partners' use of manipulation, humiliation and blame undermining their position within the family and placing them below their children in the hierarchy. Such subjugation can also extend beyond separation, with analysis of CAPVA case file data highlighting how contact between domestically abusive non-resident fathers and their children can result in increased aggression towards mothers. This distortion of the family power structure has been highlighted as a risk for mother abuse in a number of practice models attempting to address the dynamic. Further, studies exploring the impact of domestic abuse on mothers have found that communication, the mother-child bond, and mothers' confidence in parenting can sometimes be negatively impacted by such experiences, alongside children's normalisation of their mothers as 'victims'. Here we can see the importance of taking a gendered approach to understanding the development of CAPVA, as gender not only influences the way in which CAPVA presents but also the underlying contexts that may precipitate it.

Lastly, it is important to say that the majority of children experiencing interparental domestic abuse do not go on to use violence in their relationships with parents or with intimate partners later in life.

Parenting styles and practices

Parenting 'styles' has been one of the major areas of investigation in relation to CAPVA, having been recognised as a key ecological factor shaping children's social environment and, in turn, their social, emotional and behavioural development. However, this emphasis on CAPVA as being a problem of parenting, has been argued by some, as a form of victim-blaming and, given that mothers are the primary victims of this form of family abuse, a double victimisation of mothers. This is also important given studies have found that parenting which lacks boundaries or behavioural control can in fact be a result of CAPVA, rather than a cause of it, with parents' – particularly mothers' – lack of confidence in the wake of abuse leading to a lack of action to address it and parents' lack of boundaries a tactic of avoiding violence escalation. This is particularly relevant for mothers who are survivors of domestic abuse, who can be disempowered by fathers in their relationships with their children.

Parent-child communication

Only a handful of studies exploring CAPVA have investigated the role that parentchild communication may play in the development of the dynamic. In one exploration of adolescent accounts of violence and abuse towards parents, it was found that poor parent-child communication operated both directly and indirectly to shape the development of the dynamic, with parents shouting or being verbally abusive in the home acting as triggers of emotional dysregulation and feelings of anger, which in turn, lead to violence and abuse towards parents. Second, a lack of open and honest conversations around feelings and perspectives was described as contributing to a general sense of feeling unheard and misunderstood and a gradual decline in the parent-adolescent relationship. As CAPVA became more embedded, young people and parents were much more likely to resort to aggressive forms of communication, leaving them less able to have calm, reflective and productive conversations respectful of each other's experiences, feelings and perspectives. As young people felt less heard, they became more frustrated, resorting to violence and abuse in the absence of positive ways of managing conflict with parents. Further, as a result of these ongoing damaging interactions, some felt unloved and disliked by parents, an identified risk factor for CAPVA.

Considerations at the community/social structure 'exosystemic' level

Exploitation- looking for warning signs of extra-familial harm.

<u>All of us were broken</u> an exploratory study into family experiences of criminal exploitation carried out by Missing People found;

"A notable change was an increase in aggression, anger and violence, particularly towards the family. Parents spoke about their child suddenly seeming to "hate" them and becoming very negative about the rest of the family."

Many families may not know or have heard of exploitation, so will not understand what is happening to their child. Professionals need to be mindful that the aims of those who exploit will be to isolate their target form people who care for them, so it is important that consideration is given to the possibility and Solihull All Age Exploitation procedures are considered.

Peer influence and violent victimisation

Although peer influence within the development of wider youth aggression and delinquency is well documented, the role of peers within CAPVA is much less explored. Peer relationships and interactions have been evidenced as playing a role in the development of CAPVA however, with young people using violence and abuse towards parents being more likely to associate with violent peers, friends with behavioural problems and specifically, friends who use violence towards their own parents.

Schooling and education

Young people using violence and abuse at home can often also be experiencing issues within education and schooling, such as a higher level of learning difficulties, an aversion to school authority, and a lack of school engagement. But how might these issues shape the CAPVA dynamic? Young people have articulated how stress relating to school – for example, the stress before an exam – can be a proximal trigger in violent episodes with parents, with stress described as making young people more irritable and less able to have calm conversations at home. Parents and practitioners have also highlighted that young people with early experiences of school 'failure' can end up internalising those negative beliefs and labels, resulting in the use of negative and attention-seeking behaviours. Similar to peer influences,

poor behaviour and/or absence from school can, in turn, then act as a trigger of conflict between parents and their children.

Poverty

Although the evidence on the socioeconomic profile of families experiencing CAPVA is inconsistent, interviews with parents and service providers have highlighted that poverty may place an additional burden on families, with children and adolescents frustrated and resentful due to the lack of activities and opportunities afforded them and subsequently taking this frustration out on parents. However, it must also be emphasised that CAPVA is not class-based, with families from a range of backgrounds affected. It is often difficult to identify the unique contribution of poverty to CAPVA as it shares many of the same risk factors, such as substance misuse, antisocial behaviour, family violence and parenting style. Further research specifically exploring the role of poverty, as well as the intersection of ethnicity and other social identities – drawing on diverse samples – is needed to generate further insight in this area.

Considerations at the sociocultural 'macrosystemic' level

There is a dearth of research investigating the wider cultural factors – such as values and beliefs – that may shape the development of CAPVA. However, a few qualitative studies have explored the role that gender role socialisation may play in shaping the abuse dynamic.

Gender role socialisation

As highlighted previously, CAPVA is a gendered form of family abuse which disproportionately impacts mothers. Despite this, researchers have identified 'a failure by both policy makers and academics to recognise the gendered dimensions of this form of family violence' and much still needs to be done to properly explore how the gender of both parents and children/adolescents shapes the development and experience of CAPVA. Theories attempting to explain why mothers are the most likely victims focus mostly on the gendering of parenthood, that is, parents' differing roles in caregiving and, specifically, mothers' role as primary caregiver. This differentiation means that typically, mothers are physically and emotionally closer to their children than fathers, spend more time with them and therefore are more actively involved in the everyday interactions and decision-making of parenting. This often includes limiting children's movements and privileges, and asking them to do housework or school work – factors that can spark conflict, particularly as children grow older. Such episodes represent tensions that occur during the daily negotiations of power within the parent-child relationship, which become particularly prevalent during adolescence, when young people have a stronger sense of their individual identity and a greater desire to express their personal agency. The feminist exploration of gender 'roles' within the home, in terms of the gendering of parents and of children, is an important concept for understanding CAPVA and the intersection of power, gender and violence within families.

Addressing CAPVA

Support for families experiencing CAPVA comes in a range of different forms, drawing on a variety of practice models and theoretical approaches such as those which are restorative, cognitive behavioural, non-violent, trauma-based, and systemic. In addition, there are approaches based on empowering parents and those

from the domestic abuse field which focus on gender, power and control; these main approaches are briefly outlined below.

Restorative practice

Restorative approaches originate from restorative justice, a political approach intended to give agency back to victims and their communities. The approach uses victim-offender mediation, recognising the harms caused by abuse and attempting to make young people aware of their parents' experiences and perspectives. In this way, the young person is made aware of the repercussions of his/her behaviour, can take responsibility for it, and attempt to mend some of the harm caused by using an agreed resolution. Restorative approaches also aim to reduce the shame and guilt surrounding the abuse (for young people) by focusing on the abuse as behaviours and not as the individual themselves, enabling the development of empathy and accountability. Criticisms of the restorative approach include its lack of recognition of the power imbalance within abuse dynamics, which can, in some cases, serve to further victimise survivors of abuse. Restorative approaches are particularly common to youth justice responses to CAPVA, where responsibility-taking and disrupting pathways to offending are central themes.

Cognitive behavioural approaches

Programmes based on cognitive behavioural principles often focus on the moderation of beliefs, thoughts, feelings and behaviours, using activities to help young people to understand the connections between each and to take ownership of them. Cognitive behavioural approaches operate at the individual level of intervention and are among the more common ways of addressing the issue.

Trauma-informed approaches

Trauma-informed approaches focus on the role of past trauma – particularly in relation to witnessing or experiencing family violence and abuse – and its impact on violent and abusive behaviour in young people. Interventions focusing on trauma explore its impact on parent-child attachment and child development, using a variety of techniques with both parents and children to help develop their understanding of how trauma may have impacted them, how they can better regulate their emotional responses to stressors, and how they can develop a more caring and empathetic relationship built on mutual respect. Trauma-focused approaches are particularly drawn upon when taking place within the context of domestic abuse services and adoption support.

Non-violent resistance (NVR)

Non-violent resistance is based on the principles of parental commitment to non-violence and involves parent training to recognise the dynamic interactions involved in abuse and how escalation occurs. NVR works at the family level, focusing on intrafamilial explanations of abuse, such as interactions and communication. Important NVR concepts include parental presence (as opposed to avoidance), resistance, and 'reconciliation gestures' – focusing on how parents can control their own behaviour to affect change rather than attempting to 'control' that of the child. Non-violent resistance involves the support of friends and family as well as face-to-face support from a counsellor. Currently being used within youth and family therapeutic services in the UK, evidence for its effectiveness is promising, with results from a randomised controlled trial indicating positive outcomes in relation to parenting, parents' sense of helplessness, and mother reported child aggression.

Holt 30 also identifies a number of positive elements of NVR including its placing of CAPVA within a socio-political context and the avoidance of parent blaming.

Systemic/family systems

Like NVR, systemic approaches also work at the family level, focusing on family factors linked to CAPVA, including interactions, communication and family history. Typically taking place within the context of family therapy and social work, it involves therapeutic strategies such as 'supporting parental authority', 'repairing dislocated relationships', 'containing conflicts', and 'discovering and supporting competence'. Such approaches emphasise developing a shared responsibility for change within families by using a strengths-based approach to empower, rather than focusing on the violence and abuse itself.

Solution-focused

Solution-focused approaches to addressing abuse are often brief, assessing the goals of parents and children and providing practical solutions, rather than focusing on the problems themselves. Such approaches aim to give parents and their children the awareness they need to understand their own and others' emotions and the practical tools to communicate and interact more effectively, whilst reducing the feeling of guilt and shame associated with abuse. Domestic abuse-informed Finally, a number of interventions draw on the domestic abuse field, focusing on the role of gender, power and control, parents' and children's past experiences of victimisation, parental empowerment, and maintaining family safety. Such approaches draw heavily on feminist perspectives of social and family power and violence as a form of patriarchal control

Domestic abuse-informed

Drawing on the domestic abuse field, focusing on the role of gender, power and control, parents' and children's past experiences of victimisation, parental empowerment, and maintaining family safety. Such approaches draw heavily on feminist perspectives of social and family power and violence as a form of patriarchal control.

Solihull Pathways

There is a current gap in service for over 18's without care and support needs; the parent as a victim of domestic abuse may be able to access support from domestic abuse services, however there is not a service that would work with the 'child or adolescent' aged 18-30 unless they have care and support needs.



Child to parent Child to parent abuse pathway over abuse under 18.pdf



Further Information

<u>Step-up</u> is a nationally recognized adolescent family violence intervention program designed to address youth violence toward family members. Violent behaviour includes threats, intimidation, property destruction, degrading language and physical violence. The goal of Step-Up is for youth to stop violence and abuse toward their

family and develop respectful family relationships so that all family members feel safe at home. There are a variety of work books and exercises available on the site.

National organisations working with Child and Adolescent to Parent Abuse:

- CAPA First Response;
- Who's in Charge?
- PEGS