

# Child and adolescent to parent violence and abuse

## Briefing paper 3 of 3

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Child and adolescent to parent violence and abuse (CAPVA) refers to 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, economic, property-based or sexual.

Abusive behaviour can be intentionally harmful and controlling, and/or unintentionally harmful, functioning to communicate distress, anxiety or trauma.

### So, what can we do?

As highlighted in Briefing Paper 2, there is no one presentation of CAPVA, and indeed, no one 'solution' that can address it. Families seeking help may do so early on or only at breaking point, when behaviours have become seriously harmful and entrenched. Support for families therefore needs to be available along the full spectrum of need –

from prevention and early intervention right through to interventions for complex or enduring needs. Addressing such needs can require input from multiple agencies such as CAMHS, children's social care, education, youth offending, and domestic abuse services. Effective multi-agency working is key to supporting all family members.

### CAPVA intervention matrix

| Level of intervention                      | <u>Who</u> is it for?  | <u>What</u> type of support?   | <u>Where</u> is it delivered?   |
|--|--|--|---|
| <b>Universal approach</b>                  | All families   | Messaging regarding acceptable behaviour and healthy relationships.<br>Anti-bullying programmes<br>Parenting support for all                             | Media campaigns<br>Part of school RHSE<br>Youth work<br>Family centres  |
| <b>Early intervention</b>                  | For families where CYP behaviour is beginning to appear atypical and/or is presenting challenges.<br><br>Families recognised as "at risk" due to diagnosis or circumstances. | Understanding the issues and learning appropriate strategies e.g. de-escalation, communication systems, mediation, conflict resolution, psychoeducation. | Youth work<br>Family support<br>Adoption support<br>Disability support<br>Substance use<br>Bereavement support<br>Domestic abuse services |
| <b>Targeted support</b>                    | For families where CAPVA has become more persistent and is escalating, where early help has not effected change.   | Structured, evidence-informed programmes, delivered to the whole family by trained practitioners.  | Delivered from a multi-agency base, possibly as part of longer-term work on co-occurring issues.  |
| <b>Specialist / high risk intervention</b> | For families where CAPVA is severe and there may be significant risk to welfare and/or life.   | Highly specialist support, potentially coordinated through a MARAC. Harm prevention is key. Multiple agencies working together.                          | Specialist practitioners within residential provision e.g. schools, secure care, hospitals  |

### Pulling it all together – the case studies continued...

The case studies in Briefing Paper 2 highlighted two presentations common to the CAPVA dynamic. Below we will explore the support those families received and the impact they had.

#### Jacob and Alicia



Alicia reached out to a local domestic abuse organisation after seeing a flyer at her GP practice. She talked about her experiences of abuse from her ex-partner and from her son Jacob. They listened, made her feel heard and gave a name to what she was experiencing. Over the following week they helped her to put a safety plan in place at home. They also referred her to a support programme aimed at improving communication between mothers and their children in the wake of domestic abuse, and provided one-to-one and family counselling for Alicia, Jacob and his sister Lena. This gave them each the chance to talk through their experiences in a safe space with practitioners who understood the impact that trauma and abuse has on families. Communication sessions gave Alicia and Jacob the language they needed to talk things

through together, improving their negotiation of conflict at home. Jacob was also referred to a mentoring programme specifically aimed at boys who have experienced domestic abuse. He now meets up once a week with a dedicated male mentor and is becoming more and more involved with local sports clubs, something which has improved his self-esteem and made him less inclined to stay out late with older friends. Jacob is also now less interested in having contact with his father, which has made his moods less erratic and reduced the resentment he held towards his mother. Alicia says Jacob's behaviour at home is now calmer and less reactive, with no physical or verbal abuse in weeks. Lena is now also much happier at home and Jacob much happier at school.

#### Tara, Selene and Abel



After attending a few unhelpful generic parenting programmes, Selene and Abel accessed a parent psychoeducation course on ADHD and autism through Tara's educational psychologist. Tara was referred to a similar course aimed at improving young people's understanding of their own neurodivergence and diagnoses. Tara enjoyed being around other young people with similar experiences and feelings and felt more "normal" than she had for a long time. Selene and Abel gained a better understanding of some of Tara's behaviours and learnt strategies to avoid overloading her after school, or during other family time. They also accessed information on a special education school in the local area, where Tara could receive the in-school

support she needed. However, although Tara's behaviour at home improved, her violent outbursts persisted until Selena and Abel found support through a specialist CAPVA service recommended by CAMHS. The programme lasted 12 weeks and involved both them and Tara. Sessions helped Tara to understand the impact of her behaviour on her parents and helped Selene and Abel to safely implement boundaries and sanctions in a collaborative way. Selene and Abel also connected with an adoption support network, where they received specialist understanding and help, and ongoing support from parents experiencing similar difficulties. Although not gone altogether, Tara's outbursts at home significantly reduced.

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### Making the invisible visible: Asking the right questions

Over the past few years CAPVA has gained greater public visibility, with a range of documentaries, news programmes, articles and websites shining a much-needed light on the issue. But disclosing violence and abuse from a child is something most parents still find difficult to do, making professional inquiry a vital means of initial identification. Acknowledging parental expertise and experience, providing a non-judgemental

environment, and asking direct questions about the behaviours of children and their impacts is key to building trust and gaining valuable understanding. When carrying out assessments, these should be ecological, systemic, trauma-informed, and focused on the needs and voices of all family members. Specialist assessment tools have been developed by several organisations including Respect, PEGS and Bangor University.

### Training, networking and supervision for practitioners

Whilst all practitioners need to be able to recognise CAPVA, specialist training, supervision and networking is also vital to increase service capacity to address the issue directly. The organisations below are specialist providers and conveners.

[PAC-UK \(CPV-NVR\)](#)

[Respect \(RYPP\)](#)

[Who's in Charge?](#)

[Capa](#)

[Newbold Hope](#)

### Resources, links and where to find out more

For a good overview of CAPVA, its programmes and practice approaches read:

- Baker, V. & Bonnicks, H. (2021). Understanding CAPVA: A rapid literature review on child and adolescent to parent violence and abuse for the Domestic Abuse Commissioner's Office; Respect (Full Report [here](#) and Executive Summary [here](#)).
- Bonnicks, H. (2019). *Child to Parent Violence and Abuse: A Practitioner's Guide to Working with Families*; Pavilion Publishing and Media Ltd.
- Holt, A. (ed) (2015). *Working with Adolescent Violence and Abuse Towards Parents*; Routledge.

*Holes in the Wall* is an internationally-accessed knowledge and resource hub regarding child and adolescent to parent violence and abuse and includes links to materials, a directory of services, articles, training and discussions. Visit [www.holesinthewall.co.uk](http://www.holesinthewall.co.uk)

#### About the authors

Helen is an experienced social work practitioner, trainer and CAPVA expert, creating the website 'Holes in the Wall' in 2011 to provide information to parents, practitioners and researchers in the UK and further afield.

Victoria is an experienced academic and third sector researcher, having completed her [PhD thesis](#) on young people's perspectives on violence and abuse towards parents. She also specialises in research on domestic homicide (including parricide) and gender-based violence and harm more broadly.