# NOT JUST ANOTHER HOLE IN THE WALL

*AN INVESTIGATION INTO CHILD AND YOUTH PERPETRATED*

*DOMESTIC PROPERTY VIOLENCE*

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A thesis submitted in partial fulfilment of the requirements

for the degree of Doctor of Philosophy

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# Abstract

Violence by children and young people against their parents, often described as parent abuse, is a problem that has been less recognised and researched than other forms of family violence. The present study explored a distinct form of parent abuse—that being the causing of intentional loss of, or damage to, parental property, referred to as Domestic Property Violence (DPV). A questionnaire was designed to gather quantitative data on what gets damaged, how often, and by whom. Additionally, rich, qualitative information about how parents made meaning of their experiences and how they were affected by, and responded to, DPV was gathered using in-depth interviews with 14 participants, and later analysed using interpretative phenomenological analysis. Although the questionnaire attracted just 30 responses, this information was used to inform the subsequent qualitative phase of the research. When combined, the quantitative and qualitative data demonstrated that DPV happens in some families, and when it does, it has the potential to cause significant financial, emotional, and relational harm. An ecological meaning-making theoretical framework emerged from the data and illuminated connections between social and cultural influences on personal theories of causation, impacts, and responses to DPV, including help seeking. The findings of the present study have important implications for supporting parents experiencing DPV and other forms of parent abuse. Help seeking was shown to not always be a positive experience, particularly when help was not available, the problem was viewed as trivial, or parents were made to feel they were wholly responsible for their children's misconduct. Conversely, parents benefited from services that offered an opportunity for private disclosure without critical judgement, practical advice, and support. One objective of the research was to increase awareness of the many and complex causes and impacts of parent abuse, and the wide range of families that may be affected, in order to promote better screening within health and social support services.

# Chapter One: Introduction

## *1.1 Conception of the Research*

Over the past 15 years I have had the privilege of working with many young people and their families in my role as a clinical psychologist with a child and adolescent mental health service, and through my work with the Youth Court. During this time I have met numerous young people for whom aggressive interactions with family members are an almost daily occurrence. A number of the parents of these young people have reported abusive behaviours ranging from name-calling to assaults with fists and weapons. The intentional damage of parental property through aggressive acts has been a common concern for many.

Parents' reports very often reveal that their children have been violent for many years. Yet even when helping agencies have been involved in relation to other matters, this type of family violence is often not disclosed or addressed. While the establishment of a trusting therapeutic relationship can facilitate disclosure, I expect that many of the parents and young people I have worked with have maintained their silence on this issue, despite my enquiries.

In order to better understand the actions of these young people and the plight of their parents, I searched for related research. I had assumed that children behaving abusively toward parents and caregivers would be considered a sub-type of family violence, and thus be the focus of a portion of family violence research initiatives. After all, family violence is a significant problem for many New Zealanders, affecting people from all walks of life and taking many forms. Accordingly, the development of strategies for prevention and

early intervention is considered a government priority (Ministry of Social Development, 2002). Despite this focus, I found there has been minimal investigation into the issue of parent abuse.

Increasing awareness and growing concern about family violence have generated new studies that enable us to know more about the factors that cause and maintain abusive interactions within families. However, to date, the vast majority of research initiatives have studied adult perpetrated violence, namely partner abuse or child abuse (Gebo, 2007; Kethineni, 2004; Straus, Gelles, & Steinmetz, 2006), even though family violence can involve a range of other family members. Violence by children and young people against their parents, referred to throughout the present study as parent abuse, is a less recognised and researched form of family violence (Kennair & Mellor, 2007; Walsh & Krienert, 2009).

Harbin and Maddin first addressed the issue of parent abuse as a distinct form of family violence in their 1979 study entitled *Battered parents: A new syndrome*. More recently this form of family violence has received increasing attention (Bobic, 2002; Browne & Hamilton, 1998; Ibabe, Jaureguizar & Diaz, 2009; Victims Support Agency, 2008), yet continues to lag behind with respect to family violence research. A quantitative analysis of family violence research conducted by the New Zealand Family Violence Clearinghouse in 2006 identified "violence toward parents" (p.16) as a specific gap in the literature. Indeed, my own literature review (to follow in chapter two) supported this finding. Therefore, I was motivated to conduct research that would advance current knowledge of the causes and correlates of parent abuse and inform the development of theory and clinical practice. This led me to the University of Canterbury's School of Social Work and

Human Services where members of the academic staff had earlier produced a paper

entitled *Adolescent violence towards parents* (Crichton-Hill, Evans, & Meadows, 2006).

Discussions about the topic of parent abuse and viable research projects ensued. My

supervision team of Associate Professor Kate van Heugten and Nikki Evans assisted me to

develop a research proposal that narrowed the focus of the investigation to a study of a

particular form of parent abuse, that being intentional property violence.

## *1.2 Child and Youth Perpetrated Domestic Property Violence*

Despite the dearth of literature on parent abuse, several definitions of the phenomenon

have been developed. In 2001, Cottrell defined parent abuse as "any act of a child that is

intended to cause physical, psychological, or financial damage to gain power and control

over a parent" (p.3). Similarly, Eckstein (2002) referred to the issues of power and control

in parent abuse, **referring to young people gaining power over their parents by intentionally**

**manipulating, threatening, and intimidating them**. Both researchers described parent abuse

as an intentional behaviour, making the point that it is important to distinguish between

behaviour toward parents that is impulsive, inconsiderate, or irresponsible, from that

which is deliberately employed to cause harm.

Acts of parent abuse are often grouped under three broad categories; physical abuse (for

example, hitting, pushing, kicking, spitting, and damaging property), psychological abuse

(for example, verbal abuse such as name-calling and belittling, playing mind games,

making unrealistic demands, lying, threatening harm to self and others, and withholding

affection), and financial abuse (for example, stealing parents' money and property,

intentionally damaging domestic property, and incurring debts that parents are required to

repay). Types of parent abuse can be classified in more than one way: for example,

spitting, while a physical act, can have significant psychological implications. Similarly, property damage can be situated under each of the three categories. Most children and young people who abuse their parents use a combination of physical, psychological, and financial abuse (Cottrell, 2001).

My clinical experiences have shown me that young people are capable of intentionally causing damage to parental property, in some cases producing serious emotional and financial harm. Yet a thorough review of international parent abuse literature did not identify any studies focussing on child and youth perpetrated violence against parental property as a distinct form of parent abuse. Several authors have, however, provided descriptions of property damage by children (Biering, 2007; Bonnar, 1999; du Bois, 1998; Eckstein, 2007; Howard & Rottem, 2008; Jenkins, 1999; Kethineni, 2004; Paterson et al., 2002; Price, 1996; Stewart, Burns, & Leonard, 2007). Gallagher (2007) described it as a behaviour that is both common and frequent. Researchers have tended to classify property violence under a general heading of physical abuse (Stewart et al., 2007).

Domestic property violence (DPV) was the focus of my study and is defined as the actions of children and young people that result in the loss or damage of parental property, where those actions are carried out as a means of causing emotional distress or financial harm, intimidating, threatening, or assuming control over a parent. My definition reflects the ideas and descriptions of other parent abuse researchers, particularly those of Cottrell (2001) and Eckstein (2004).

DPV is a form of violence that has been neglected by those investigating the broader area of parent abuse, yet may well account for a significant proportion of abusive acts.

Reported case studies have indicated that DPV may precede (Charles, 1986) or co-occur with other forms of parent abuse (Gallagher, 2004b; Laurent & Derry, 1999). Investigating DPV may enable us to better understand how violence begins and escalates within families. In the absence of any specific studies we can only speculate where DPV fits within the broad range of abusive acts or how parents compare DPV to other forms of abusive behaviour.

## 1.3 Aims of the Research

Broadly, in the present study I aimed to discover the nature and impact of DPV by exploring parent and caregiver experiences of child and youth DPV, their perceptions of factors that had led to DPV, and the ways in which they had responded to, or dealt with DPV. More specifically, participants were invited to reflect on and discuss:

1. Their experiences and descriptions of DPV (the nature, extent, and context of DPV).

2. Factors that they believed to have led to DPV, and enabled DPV to continue.

3. The perceived impact of DPV on themselves and others.

4. Their responses to DPV and factors that influenced their reactions.

5. Experiences of assistance and support with DPV.

6. Perceived requirements for additional support and identified barriers to accessing support.

7. Their experiences of other forms of parent abuse and perceived connections with DPV.

A central goal of the research was to advance knowledge about parents' explanations for the DPV, and the impacts of this problem. A methodology was selected to enable

participant data to direct a process of theory investigation and critique, and to generate new theory about child and youth perpetrated DPV that will address current theoretical gaps and shortcomings. An additional goal of the research was to increase both awareness and understanding of DPV, encouraging further discussion and better methods for screening, prevention, and intervention.

## 1.4 Structure of the Thesis

Chapter two contains a review of parent abuse literature commencing with a commentary on various limitations of the extant research, including methodological and measurement issues. This chapter also considers the dearth of New Zealand research and the consequences of that for those affected by parent abuse in this country. The chapter continues with a description of international findings on parent abuse prevalence and demographic information about both the perpetrators of parent abuse, and the targets of their violence. Types of parent abuse are then summarised, followed by an account of the various impacts of parent abuse on parents/caregivers, other family members, and the young people that behave abusively. Finally, methods of intervention in cases of parent abuse are described and discussed.

In the third chapter I introduce a number of popular academic theories found by me to be relevant to the three broad domains of the research; explanations for the DPV, impacts, and responses to the DPV. The concept of meaning-making is introduced here, with a discussion about why meaning-making is a central theme, or rather a theoretical framework through which I later present the findings of this study. Both academic theories and personal meaning-making are introduced with the intention of later comparing them, identifying points of similarity and difference, and revealing important gaps in existing

knowledge about why some young people engage in DPV. Ecological models of parent abuse are discussed, demonstrating the importance of considering various levels of influence on the problem of DPV.

Following on from this, I provide a brief account of systemic factors related to parent abuse as it occurs in New Zealand. The content in chapter four has been included as a means of providing a social, cultural, and political backdrop to the later presented findings chapters. New Zealand family and youth violence problems are discussed, along with related legislation, policy, and social services.

In chapter five I describe how I set about studying this phenomenon, providing a rationale for my chosen methodology. Specifically, I explain why I combined two methods in the study—a questionnaire and in-depth interviews. Data collection and analysis processes are then presented. In the final sections, the sensitive nature of the study topic and several important ethical considerations are examined.

The sixth chapter is the first of four results chapters and is largely dedicated to providing a summary of the findings from the questionnaire phase. I prepared this chapter using a framework that aligns with the aims of the study. Findings from the interviews are also introduced here, to support and illuminate the questionnaire findings, however, a more comprehensive analysis of the interview data is offered in the next three chapters.

Chapter seven, entitled *Making sense of DPV—participant perspectives*, is the first of the qualitative data analysis chapters. In this chapter I report and discuss participants' personal theories about the causes of their children's DPV, using the earlier described meaning-

making theories as a framework for understanding how participants attempt to make sense of their experiences. Meaning-making continues as a central theme in the next two chapters dedicated to discussing the impact of DPV (chapter eight), and participants' responses to DPV (chapter nine). I consider the findings in light of the trauma, grief and loss, coping, and help seeking literature earlier introduced in chapter four.

In the final chapter I combine the findings from each of the analysis chapters, and engage in a comprehensive and critical consideration of explanations for DPV and its outcomes. The goal is to contribute a phenomenological and an ecological dimension to existing theory about the causes and impacts of parent abuse. Finally, I consider the implications of my findings, both theoretical and practical, before discussing the limitations of this research, and offering suggestions for advancing knowledge of DPV and other forms of parent abuse through future research.

## 1.5 Conclusion

Chapter one provided an introduction to the thesis. I described how the research had its genesis in my clinical experience, which gave rise to my concern to know more about the problem of parent abuse, specifically domestic property violence by children and young people. I then offered a definition of this problem, before explaining that the aim of the research was to investigate the nature and impact of DPV by exploring parents' and caregivers' experiences of DPV.

Additionally, a précis of each of the thesis chapters demonstrates how the thesis is structured, beginning with a description of current research findings, before moving into a discussion of existing theory and its limitations, followed by an introduction of alternative

theoretical frameworks. Next, information about parent abuse in New Zealand is provided

in order to assist the reader to contextualise the later presented findings and discussion.

Chapter two now follows with a discussion of the available literature on parent abuse. It

begins with a commentary on the limitations of existing research, before summarising

salient findings and identifying gaps in our current knowledge of this problem.

# Chapter Two: Literature Review

## *2.1 Introduction*

Parent abuse studies have generally involved large surveys, generating quantitative findings in order to establish prevalence and identify demographic correlates such as gender and age (Agnew & Huguley, 1989; Brezina, 1999; Pagani et al., 2003; Peek , Fischer, & Kidwell, 2006; Ulman & Straus, 2003). Other researchers have provided retrospective analyses of documents such as police reports (Evans & Warren-Sohlberg, 1988), youth court documents (Kethineni, 2004), and medical records (Laurent & Derry, 1999). While most of the research is quantitative, several reports of qualitative analyses (Eckstein, 2004; Jackson, 2003; Haw, 2010; Holt, 2009, 2011; Stewart et al., 2007) can be found in the literature, along with a number of clinical reports (Charles, 1986; Gallagher, 2004a; Micucci, 1995; Robinson, Wright, & Watson, 1994; Sheehan, 1997). Additionally, my literature search found three descriptions of mixed-method studies on parent abuse (Edenborough, Jackson, Mannix, & Wilkes, 2008; McClosky & Lichter, 2003; Paterson et al., 2002).

Although parent abuse studies form a relatively small body of research, the findings are difficult to summarise. Walsh and Krienert (2007) explained "due to the potential for extreme variability across small clinical samples and the resulting lack of generalizability many of the findings of past work across characteristics such as victim/offender age gender, race,… are inconclusive at best, dubious at worst, and undeniably contradictory" ( p. 566). Therefore, early in chapter two I provide a brief description of the short-comings of the available corpus of research, as these influence almost all of the following

information in some way or another. Before doing so, I begin with a discussion of the various terms used by researchers, demonstrating that a broad literature search strategy is required in order to capture parent abuse material.

## *2.2 Terminology*

Parent abuse has been one of several terms used by authors and researchers to describe children and young people behaving abusively toward their parents. Other descriptions have included adolescent-to-parent abuse (Eckstein, 2007), adolescent-to-parent violence (Cornell & Gelles, 1982), battered parent syndrome (du Bois, 1998; Harbin & Maddin, 1979), child-to-parent violence (Brezina, 1999; Gebo, 2007; Walsh & Krienert, 2007), juvenile victimisation of parents (Buel, 2002), parental abuse (Bobic, 2002; Browne & Hamilton, 1998; Cochran, Brown, Adams, & Doherty, 1994; Walsh & Krienert, 2009), parent-directed physical aggression (Nock & Kazdin, 2002), violence against parents (Ibabe et al., 2009), violence toward parents (Peek et al., 1985), youth-on-parent battering (Kethineni, 2004), and youth-to-parent aggression (Boxer, Gullan, & Mahony, 2009). Affected parents have been described as abused (Charles, 1986; Pagani et al., 2003), victimised (Gallagher, 2004b; Routt & Anderson, 2011), battered (Charles, 1986; du Bois, 1998; Livingston, 1986; Pagani et al., 2003), and maltreated (Browne & Hamilton, 1998) by children and young people who have been described as aggressive (Nock & Kazdin, 2002; Pagani et al., 2003), abusive (Charles, 1986), assaultive (Maddin & Harbin, 1983; Routt & Anderson, 2011), and domestically violent (Rybski, 1999).

Although, there are various ways to describe children and young people behaving abusively toward parents, I have consistently and deliberately used the term parent abuse, despite my own initial reservations, various comments fielded throughout the course of

this research indicating confusion with the term, and statements made by other researchers. For example, Edenborough et al. (2003) suggested that the term parent abuse "convolutes the direction of the violence and the targets of the abuse", preferring the term "child-to-mother" violence, because both the instigator (the child) and the target (the mother) of the violence are identified (p. 465). Indeed, the most common criticism of the term parent abuse has been that it creates confusion, with some believing that parent abuse refers to parents behaving in an abusive manner. Interestingly, when the word abuse follows other words such as elder abuse, partner abuse, and child abuse, the same confusion is unlikely to ensue. In the case of parent abuse, misinterpretation seems to reflect how we are conditioned to think of parents abusing children, and not of children abusing their parents. Persisting with the term parent abuse, therefore, reflects my deliberate stance to maintain a well accepted template for describing interpersonal violence.

## *2.3 Research Limitations*

As previously mentioned, the problem of parent abuse has attracted relatively few empirical studies when compared to other forms of family violence. This is possibly due to the topic remaining socially and politically unpalatable. Walsh and Krienert (2009) posited that dominant "cultural views about family and a general reluctance in modern society to place blame on children for norm-violating behavior", have contributed to a lack of research on "child-initiated violence against parents" (p. 1451).

Additionally, the "sparse and contradictory" (Agnew & Huguley, 1989, p. 701) nature of existing parent abuse research appears to be associated with a number of methodological and measurement issues (Walsh & Krienert, 2009). One such measurement issue is the

fact that parent abuse can be defined in a variety of ways, ranging from narrow constructs to more inclusive definitions, extending as broadly as parricide (the killing of one's parent) and elder abuse. Interestingly, Walsh and Krienert (2009) compared non-lethal forms of child to parent violence with parricide and they found that the two differ significantly across a range of characteristics. For example, compared to perpetrators of child to parent violence, parricide offenders are more likely to be older, male, and white. Consequently, they proposed that child to parent violence and parricide have different aetiologies, but then go on to speculate that child to parent violence and parricide are "connected through a complex escalation process" with child to parent violence occurring at an earlier stage of a family violence cycle (Walsh & Krienert, 2009, p. 1471). In general, child to parent violence and parricide have been treated as two separate problems by researchers and authors.

Elder abuse refers to the abuse and neglect of persons aged 65 years or more, by persons with whom they have a relationship implying trust (Ministry of Health, 2007). In the case of elder abuse, the victim may be the parent of the abuser, however, perpetrators are adult-aged children. Both perpetrator and victim age are important factors distinguishing elder abuse from parent abuse. Parricide and elder abuse are not the focus of the present study.

### 2.3.1 Defining parent abuse

There continues to be a lack of agreement by researchers on how best to define parent abuse and this has likely hindered progress in studying this form of family violence (Nock & Kazdin, 2002), and contributed to the variation in reported prevalence rates (Paterson et al., 2002).  Furthermore, many studies have restricted definitions of parent abuse to physical assaults, even though non-physical forms of abuse, such as verbal and

psychological abuse can cause similar levels of distress and are common (Cottrell & Monk, 2004). For example, Ibabe et al. (2009) found that 48% of young people reported for violence against parents in Bilbao, Spain (*N*=103 young offenders) had been both physically and psychologically violent. Thirty-eight percent of offence reports described psychological abuse exclusively.

Definitions of parent abuse can be hard to arrive at given the difficulties distinguishing "normal" from "abusive" child and youth behaviour (Bobic, 2002). When considering parent abuse, a distinction needs to be made between what could be considered normal levels of interpersonal conflict and what is abuse (Cottrell, 2001). For example, it is widely accepted that infants will engage in temper tantrums before they develop language to express their needs, and the skills required for problem-solving, reasoning, and making compromises.

Tantrums by young children may involve hitting or damaging property, however, most parents and professionals would not consider this behaviour to be violent or abusive, but rather, a normal part of early child development (Boxer et al., 2009; Moeller, 2001). In general, studies exploring the prevalence of physical aggression in children from school entry to early adolescence have found that physical aggression is uncommon. All, but a relatively small group of boys and girls, who present with notably aggressive behaviour, show a pattern of desisting aggression with age (Broidy et al., 2003).

Most available studies of parent abuse focus on adolescent-age children and their interactions with parents and caregivers. This is perhaps not surprising given that adolescence is a time of changeable moods and resistance to parental limit setting and as

such, the "centre of power in a parent/adolescent relationship can be ambiguous" (Victims Support Agency, 2008, p.45). Kennair and Mellor (2007) reported that episodes of conflict between children and their parents are normal, particularly during adolescence, but go on to make the distinction between age-appropriate defiance and abuse. They described the former as the normal process of individuation from a parent while the latter is an attempt to obtain control of a parent. Cottrell (2001) also commented on adolescence as a time of change and conflict, referring to young people attempting to acquire a sense of separateness from their parents. She explained that there are important differences "between resistance and aggression, between separating from a parent and trying to take control of a parent, between 'normal' teenage behaviour and 'parent abuse'" (Cottrell, 2001, p. 5).

### 2.3.2 Measuring parent abuse

Measuring parent abuse is an additional challenge for researchers, given the lack of suitable instruments for evaluating abusive behaviours (Nock & Kazdin, 2002). Gallagher (2008) described the limitations of existing and commonly employed quantitative measures (specifically the Conflict Tactics Scale, see Straus, 1979), suggesting they oversimplify interpersonal violence by "de-contextualising violent acts" (p. 49). As such, results tell us little about the meaning and context of child and youth violence toward parents, and this might account for the differing results produced by surveys and other forms of data collection on parent abuse (Gallagher, 2008).

### 2.3.3 Sampling issues

Walsh and Krienert (2009) highlighted an over-reliance on parent abuse studies based on small, cross-sectional samples from clinical populations and case studies. Additionally,

parent abuse researchers have often drawn their samples from narrowly defined

populations, such as only or largely Caucasian participants (Boxer et al., 2009; Laurent &

Derry, 1999), clinical populations (Boxer et al., 2009; Laurent & Derry, 1999; Nock &

Kazdin, 2002; Paterson et al., 2002), or single-mothers (Livingston, 1986), meaning that in

many cases the generalisability of findings is limited (Nock & Kazdin, 2002).  Parent

abuse research based on varying and narrowly defined populations has produced results

that are difficult to compare (Browne & Hamilton, 1998). Interestingly, Cornell and Gelles

first noted this concern in 1982, yet over 25 years on, the issue remains largely unchanged.

Data that derive from large surveys have often been similarly restricted by including, for

example, only male perpetrators (Brezina, 1999; Peek et al., 1985), or by excluding pre-

adolescent children (Brezina, 1999; Peek et al., 1985). Fathers as victims have also been

excluded in some studies (Boxer et al., 2009; Livingston, 1986; Stewart et al., 2007;

Ulman & Straus, 2003). Other cohorts such as step-parents and foster-parents appear to

have been neglected altogether.  Consequently there are important gaps in our knowledge

about the influence of factors such as gender and relationship-type on the development of

parent abuse that could be obscuring the number of fathers, step-parents, and foster-

parents experiencing parent abuse.

### 2.3.4 Reasons for low reporting rates

Parent abuse studies have frequently relied on self reporting of abusive behaviour by

children and young people (Agnew & Huguley, 1989; Cornell & Gelles, 1982; Peek et al.,

1985), or reports from parents (Nock & Kazdin, 2002; Paterson et al., 2002). As a result,

reporting biases may have impacted findings, for example, due to social desirability

seeking by young persons or their parents. Social desirability seeking is the tendency for

research participants to provide responses in a manner that will be viewed favourably by others (Eckstein, 2007).

Underreporting by both victimised parents and perpetrators of parent abuse is common (Gelles, 1997; Hodgson, 1999; Howard & Rottem, 2008; Livingston, 1986) and "associated with a sense of shame that parents cannot protect themselves against the violence of those with whose care and protection they are charged" (Bailey, 2002, p. 103). Bobic (2002) reviewed related literature and concluded that shame is the main reason for low reporting rates. Consequently, parent abuse remains a "well kept secret" (Cottrell, 2001, p.3) as parents who are abused by their children and young people are reluctant to talk about their experiences (Agnew & Huguley, 1989; Bailey, 2002; Eckstein, 2004; Gebo, 2007; Routt & Anderson, 2011). Similarly, both Paterson et al. (2002) and Cottrell (2005) reported that abusive young people also frequently underreport or minimise acts of parent abuse.

Parent abuse studies that incorporate qualitative methods provide an important contribution to our understanding of issues influencing the underreporting of this problem. For example, Paterson et al. (2002) conducted in-depth interviews to gather data on the experiences of mothers who had been abused by their sons and daughters. They found a shared concern amongst mothers that making others aware of the abusive behaviour would be detrimental to the young person and could result in the loss of their parent-child relationship. Severe abuse by one's own child was described as "humiliating, shameful, depowering, frightening and distressing" (Paterson et al., 2002, p.98). In a later study by Jackson (2003) involving six mothers, all participants reported initially hiding their experiences of parent abuse due to feeling shame and embarrassment. More recently, Haw

(2010) conducted semi-structured interviews with seven mothers who had experienced abuse from an adolescent-aged son or daughter. She found that the mothers commonly felt shame and guilt, and sometimes blamed themselves for the abuse, and that these reactions often resulted in their reluctance to disclose the problem to others.

## 2.4 Prevalence

The small number of existing parent abuse surveys designed to investigate the extent of parent abuse have produced varying prevalence rates (Bobic, 2002; Browne & Hamilton, 1998; Kennair & Mellor, 2007; Paterson et al., 2002; Walsh & Krienert, 2007; Wilson, 1996). Rates of DPV have not been the focus of parent abuse research to date. Rather, most of the available prevalence data relates to physical assaults on parents, perhaps because physical abuse is "more measurable" (Sheehan, 1997, p. 87) than emotional or verbal abuse. Additionally, much of the survey data on parent abuse, particularly with respect to prevalence rates, are based on studies conducted back in the 1970's and 80's, and hence, this information is now quite dated (Cottrell & Monk, 2004; Eckstein, 2004). Consequently, little is known about how often parent abuse of any kind occurs at this time.

In 1980, Straus, Gelles, and Steinmetz published the findings of their comprehensive epidemiological survey of violence in the American family (*N*=2143 families). They found that 18% of children (3-17 years) from intact families had acted violently toward their parents on at least one occasion. Cornell and Gelles (1982) interviewed 608 parents (part of the larger sample from the 1980 Straus et al. survey), and found that 9% of young people (10-17 years old) had behaved violently toward a parent on at least one occasion over the preceding year, with 3% engaging in severe violence.

Peek et al. (1985) based their study on the Youth in Transition survey (Bachman, O'Malley, & Johnson, 1978 cited in Peek et al., 1985) that was conducted in the United States of America from 1966 to 1969, involving male high school-aged youth from both intact and broken families (*N*=1545). They found that 10.8% of the youths reported assaulting a parent in the past three years.

Browne and Hamilton (1998) surveyed 469 British university students and found that 14.5% of students reported violence toward a parent, with 3.8% reporting they had been severely violent toward a parent. They concluded that while parent abuse is not as visible as child abuse it is a "problem too large to ignore" (p.77).

Pagani et al.'s (2003) study took place within a larger childhood development longitudinal investigation involving a representative sample of 2524 Canadian children followed since kindergarten. A smaller group of 15-year-old male and female youth (*n*=778) and their mothers completed a questionnaire designed to measure both verbal and physical aggression toward mothers. The goal of the study was to determine the relationship between parental divorce and parent abuse. Based on mothers' reports, 13% of young people engaged in physical aggression, while a larger percentage of the mothers (51%) described being verbally abused by their children.

When taken together, existing survey data suggest that about 10% of young people physically assault their parents every year and approximately 3% engage in severe violence (Agnew & Huguley, 1989). Gallagher (2008) reported that the prevalence rate of around 10% appears frequently in the literature and is seldom challenged, but he questions whether surveys might be over-estimating the problem. This figure would suggest that

parent abuse occurs with the same frequency as adult-to-adult forms of family violence (Straus & Gelles, 1990). Conversely, several researchers (for example, Charles, 1986; Kethineni, 2004) go further and suggest, based on their own clinical research, that parent abuse is in fact more prevalent than intimate partner violence. However, in light of the aforementioned shortcomings in available parent abuse data it would be premature to make assumptions about the prevalence of parent abuse compared to child abuse or partner abuse, particularly when all forms of family violence are likely to be underreported.

### 2.4.1 Prevalence in clinical populations

It seems reasonable to expect that clinical populations would produce higher rates of parent abuse than samples that are representative of the general population. In a French study, Laurent and Derry (1999) investigated the clinical records of a group of children and young people referred to a psychiatric inpatient setting ($N$=645) and found that 3.4% of patients in their sample had physically assaulted a parent. This finding was below the 10% general population figure frequently quoted, although this may be due to the nature of assessment and documentation of parent abuse by clinicians working in the inpatient psychiatry department where the study was conducted.

Nock and Kazdin (2002) conducted a study of American children referred for outpatient therapy for disruptive behaviour disorders such as conduct disorder and oppositional defiant disorder ($N$=606), and found that 12.2% of the young people in their sample had engaged in physical aggression toward a parent. This finding suggests there is little distinction between clinical populations comprised of youth diagnosed with disruptive behaviour disorders and general populations with respect to parent abuse.

More recently, Boxer et al. (2009) analysed a database of 232 mother-adolescent dyads

referred to a clinic for the treatment of emotional and behavioural disorders, for evidence

of youth-to-parent physical aggression. They found that 57% of sons and 49% of

daughters had aggressed against a parent. Boxer et al. (2009) compared their results to

those earlier obtained by Nock and Kazdin (2002), and concluded that their finding of

higher prevalence may be due to collecting data directly from mothers and their children,

rather than relying, as Nock and Kazdin (2002) had done, on clinician reports. Variations

in findings might reflect methodological issues, cultural differences in rates of parent

abuse, or lend support to Gallagher's (2008) suggestion that survey data that may include

"a great deal of expressive, trivial and defensive violence" has led to the overestimation of

this phenomenon (p. 89).


### 2.4.2 Prevalence in youth offending populations

Prevalence rates of parent abuse by youth offenders have yet to be established, and will be

difficult to obtain given that parent abuse and other forms of youth interpersonal violence

are "highly underreported" through the police and other official channels (Cochran et al.,

1994, p.4). Bradshaw et al. (2006) reviewed studies of violent and oppositional young

people and reported that many parents of youth offenders "have reason to fear their

children, especially mothers" (p. 259).  More recently, Routt and Anderson (2011)

reported on a sample of 1,339 youth offenders in King County, Washington (population

1.8 million) prosecuted between 2001 and 2004 for acts of violence against parents. The

authors concluded that "adolescent-to-parent violence is a significant problem" (p. 15).

It is important to remember, however, that clinical and offending populations may not be representative of young people in general. Both groups are likely to have a different profile or set of factors that have led to their involvement in clinical and judicial services.

## *2.5 Is Parent Abuse on the Rise?*

A review of the existing literature demonstrates that there has been a commonly held belief that child and youth violence in general (Cavadino & Allen, 2000; Cochran et al., 1994; Ellickson & McGuigan, 2000; Fields & McNamara, 2003) and specifically, parent abuse, are on the rise (Cottrell, 2005; Eckstein, 2007; Howard & Rottem, 2008; Laurent & Derry, 1999; Robinson, Davidson & Drebot, 2004; Walsh & Krienert, 2007). For example, in 2004, the BBC News reported that the British police were increasingly concerned about the growing trend of children behaving violently toward their parents. Bonnar (1995) similarly reported that the Australian youth justice system was facing a growing incidence of parent abuse, although like others who refer to an increasing trend, she did not offer any figures to support this claim.

A number of factors may have influenced rates of reporting, such as changing social responses, methods of data collection, and policing strategies. In short, a dearth of related research means there are few reliable statistics available to support or refute the assertion that "we may be seeing a real increase in this phenomenon" (Gallagher, 2008, p.167).

## *2.6 Perpetrators*

This next section describes findings that have been reported in the literature in relation to young people who engage in parent abuse. Factors such as gender, age, and physical size will be discussed, along with data regarding ethnicity and socioeconomic status.

Parent abuse does not appear to be limited to any one gender, age group, family composition, ethnicity, or socioeconomic group (Howard & Rottem, 2008). Interestingly, while parent abuse is a form of youth violence, several parent abuse studies have produced findings that appear to contradict widely held assumptions about the causes and correlates of violence perpetrated by young people, such as the belief that young people who are violent come from violent homes (Ibabe et al., 2009).

Much emphasis has been placed on identifying risk factors for violence in young people. An awareness of these factors is important when studying parent abuse, particularly given several reports that many young people who are abusive to parents have histories of general violence (Cochran et al., 1994; Kratcoski, 1985; McCloskey & Lichter, 2003).

Various studies have shown that violent behaviour by young people is influenced by a range of biological and psychosocial factors (Boswell, 2000; Farrington, 2000; Fields & McNamara, 2003; McCloskey & Lichter, 2003) although few studies have examined more than one level of influence (Bradshaw et al., 2006). No single factor has been found to provide an adequate explanation for the onset of violence.

When describing violent youth, authors have frequently provided extensive information on the personality and behavioural characteristics of the young people they have studied, but little detail about the victims of the violence. It is not always clear from reports on previous research if victims were peers, siblings, parents, or strangers. If parents and caregivers do not form a discernible and significant group of victims in the youth violence literature, and if a significant group of young people who engage in parent abuse are otherwise non-violent, then general youth violence findings are less applicable to parent abuse. Parent abuse may be more strongly associated with certain risk factors or combinations of risk factors for youth violence.

**2.6.1 Gender**

Survey data on parent abuse have frequently contradicted findings from clinical and judicial studies, particularly with respect to perpetrator gender. Several reports based on survey data of children who physically assault parents have found there to be no statistically significant difference between male and female perpetrators and rates of parent assault (Agnew & Huguley, 1989; Browne & Hamilton, 1998; Ulman & Straus, 2003). Conversely, clinical and qualitative studies on parent abuse have consistently found that male children are more often the perpetrators of parent abuse than female children (Charles, 1986; du Bois, 1998; Gallagher, 2004; Jackson, 2003; Laurent & Derry, 1999; Nock & Kazdin, 2002; Sheehan, 1997; Stewart et al., 2007), although violent behaviour perpetrated by female children has been suggested by some to be increasing (Charles, 1986; Cottrell, 2001).

Judicial studies have generally found that boys present with higher rates of abusive behaviour toward parents (Evans & Warren-Sohlberg, 1988; Ibabe et al., 2009; Kethineni,

2004; Walsh & Krienert, 2007). This has been a consistent finding worldwide, and one that fits with both New Zealand and international literature on youth violence in general (Department of Health and Human Services, 2001; Fergusson, Poulton, Horwood, Milne, & Swain-Campbell, 2004; Zimring, 1998). For example, Cochran et al. (1994) found that 77% of the youth restraining order defendants (*N*=757) in Massachusetts, United States of America were males. Similarly, boys were the perpetrators of violence against parents in 80% of the cases of parent abuse reported to the Police Prosecutor for Juveniles in Bilbao, Spain (Ibabe et al., 2009).

Gallagher (2008) conducted a meta-analysis of studies providing gender data and found that 72% of youth described as being violent toward their parents were male. He went on to  provide a useful summation when he wrote "it is clearly not easy to reconcile a close to three to one gender balance as indicated by the clinical, medical, police and court data with the survey data which are overall gender neutral" (p. 106).

### 2.6.2 Gender and type of parent abuse

While male and female children engage in all forms of parent abuse, several studies have found males are more likely to be physically abusive and females more likely to be verbally and emotionally abusive toward their parents (Bobic, 2002; Ulman & Straus, 2003). This distinction may provide an explanation for why boys have been consistently shown to be more likely to abuse their parents in judicial and clinical studies. That is, parents are more inclined to seek legal or clinical assistance following physical assaults than verbal or emotional abuse.  Acts of parent abuse by female children may be perceived as milder and not necessitating law enforcement or judicial intervention.

Many parent abuse studies have examined physical assaults only and this may account for the common finding that males are more abusive toward parents than females. The inclusion of all forms of parent abuse may reveal that daughters are no less, possibly even more, violent toward parents than sons (Bailey, 2002). Interestingly, Evans and Warren-Sohlberg (1988) found girls were more likely than boys to use weapons in the abuse of their parents. Similarly, a study of youth restraining order defendants in Massachusetts found that daughters had been reported to use a weapon more frequently than sons (Cochran et al., 1994). Walsh and Krienert (2007) investigated the use of weapons in parent abuse and found that males were significantly more likely than females to use a gun while female youth were more likely than males to use a knife when fathers were the targets of their violence. Differing findings across judicial reports may in part be related to varying reporting and policing approaches to males and females.

A thorough review of the literature revealed no information regarding gender characteristics of children and young people who engage in DPV. Therefore, it is unknown if males or females are more or less likely to damage their parent's property, or conversely if gender has no influence on this behaviour. The absence of such data has implications for prevention and intervention in cases of DPV.

### 2.6.3 Age and parent abuse

A review of available literature revealed a common finding that parent abuse generally emerges at puberty (Gallagher, 2007), although milder forms of abusive behaviour have often been present during childhood (Cottrell, 2001; Cottrell & Monk, 2004; Pagani et al., 2004). Paulson et al. (1990) reported a gradual increase in risk of youth to parent violence with increasing age, peaking at age 15 and tapering off after age 17. Presumably rates of

parent abuse decline at around age 17-18 when many young people are either choosing to move out of their parents' home and commence independent living, or are aware that eviction from the family home will occur if they continue to behave violently, as their parents no longer feel obliged to provide for them (Eckstein, 2004).

Agnew and Huguley (1989) considered increasing age across genders and found no relationship between age and rates of assaults by male youths. Overall, assaults against parents by young females showed a moderate tendency to increase with age, peaking at 17 to 18 years. In general, higher rates of reported child and youth perpetrated violence against parents are positively correlated with increasing perpetrator age, size, and physical strength (Cottrell & Monk, 2004), as considered further in the next section.

### 2.6.4 Physical development and parent abuse

Findings regarding age, physicality, and parent abuse may be partly explained by the manner in which childhood aggression is described. For example, it is likely that parents often do not consider their child's behaviour to be abusive until the child develops in size and strength and the behaviour is experienced as threatening (Kennair & Mellor, 2007). Harbin and Maddin (1979) suggested that assault is related to physical size and that large children are more likely to physically assault parents. Twenty years later, Brezina (1999) postulated that parent abuse is a response to negative treatment by parents and as children reach puberty they may develop the capacity for physical retaliation in order to minimise parent aggression. Gallagher (2007) also found increasing seriousness of parent abuse with increasing size within his clinical sample.

Increasing physical strength is not always directly correlated with increasing levels of physical force used against parents. Agnew and Huguley (1989) found no consistent relationship between youth size and physical assault. Cottrell and Monk (2004) found that the level of force used by abusive youth was often inversely related to physical strength and power, with stronger youth using intimidation tactics and smaller, weaker youth committing more serious physical assaults.

### 2.6.5 Parent abuse and ethnicity

A number of past studies (see Agnew & Huguley, 1989; Charles, 1986; Kethineni, 2004; Nock & Kazdin, 2002) demonstrated a higher incidence of parent abuse among White than Black families or families of other ethnicities. American researchers, Walsh and Krienert (2007) examined a cross-national sample (*N*=17,957) of young people aged 21 years or younger, reported for incidents of child-to-parent violence and found both offenders and victims were more likely to be Caucasian than any other ethnicity. They concluded that unlike the ongoing debate around gender balance, there was "little question as to the predominant race" of children and young people who abuse their parents, relevant to the percentage of population (Walsh & Krienert, 2009, p.1454).

Various theories have emerged to explain the finding of higher rates of parent abuse among White families. For example, it has been suggested that non-White parents may be less tolerant of child and youth misbehaviour within the home (Charles, 1986; Paulson et al., 1990). Alternatively, differences in reporting rates may reflect differences in the conceptualisation of abuse and violence across ethnic groups, with some groups tolerating higher or more serious levels of aggressive behaviour before considering this to be problematic. A further explanation for higher rates of parent abuse among Caucasian

families compared to other ethnic groups may in part be due to minority groups being less likely to report parent abuse due to distrust of the police and other social institutions (Walsh & Krienert, 2007).

Most of the available data on parent abuse prevalence and ethnicity have come from northern hemisphere studies, restricting the generalisability of findings to other populations, including New Zealand families. In New Zealand, "Māori are significantly over-represented as both victims and perpetrators of violence in families" (Ministry of Social Development, 2004, p. 60), while Māori youth, like other indigenous groups marginalised by a more dominant culture, are consistently over-represented in statistics and other data relating to a range of social problems, including youth violence (Crawford & Kennedy, 2008). Unfortunately, given the lack of New Zealand research on parent abuse, it is unknown if higher reported rates of Māori family violence and Māori youth violence are matched by higher rates of parent abuse within Māori families.

### 2.6.6 Parent abuse and socioeconomic status

Also still unclear is the relationship between parent abuse and socioeconomic status (Cottrell & Monk, 2004). Agnew and Huguley (1989) found overall rates of parent assault were unrelated to socioeconomic status, although they noted "a slight tendency for assault to be highest among those whose parents are in the most prestigious occupations" (p. 707). This is an interesting discovery because it challenges the well-established finding that low socioeconomic status is a risk factor for youth violence (Department of Health and Human Services, 2001).

Others have similarly found parent abuse in higher socioeconomic families (see Charles, 1986; Gallagher, 2004a; Jackson, 2003; Nock & Kazdin, 2002; Paulson et al., 1990). Gallagher (2008) offered a critical review of available parent abuse research, incorporating a summary of findings related to socioeconomic status. He reported that several studies appear to reverse "the trend for violence to be associated with disadvantage", describing this as particularly surprising given that this form of family violence is associated with factors such as sole-parenting, which are "consistently correlated" with low socioeconomic status (p.140). Gallagher (2008) went on to speculate that parent abuse is associated with over-indulgent and lenient parenting practices found in families of greater economic wealth, parental education, and occupational status. Further research is required in order to investigate the relationship between socioeconomic status and parent abuse.

## 2.7 Characteristics of Parents Who Have Been Abused

Qualitative, clinical, and judicial studies have consistently shown that mothers are typically the targets of parent abuse (Cochran et al., 1994; Evans & Warren-Sohlberg, 1988; Ibabe et al., 2009; Kethineni, 2004; Nock & Kazdin, 2002; Routt & Anderson, 2011; Victims Support Agency, 2008; Walsh & Krienert, 2007). According to Robinson et al. (2004) in their historical review of parent abuse research, 82% of parent abuse was against mothers. Gallagher's (2008) review of parent abuse literature found that within two parent families, fathers may also be abused (one-third to one-half of fathers involved in clinical, judicial, and qualitative studies reported parent abuse), but few will be preferentially targeted.

Parent gender differences have been less pronounced in available survey findings, although results have almost always found that mothers are the most likely targets of

parent abuse (Agnew & Huguley; Cornell & Gelles, 1982; Ulman & Straus, 2003). One notable exception was Peek et al.'s (1985) survey of male youth (*N*=1545) aged 13 to 18 years. The researchers asked participants about physical violence toward their parents and found that fathers were more likely to be hit than mothers. However, they suggested in a footnote that this finding may reflect a reporting bias that may have resulted from male youth being reluctant to admit to hitting their mothers. Kennair and Mellor (2007) proposed that this result could in part be due to the fact that Peek et al.'s (1985) study focused on older adolescent males. They also hypothesised that fathers are more likely than mothers to be affected by parent abuse as their male children progress through adolescence.

### 2.7.1 Explanations for the disproportionate abuse of mothers

Peek et al.'s (1985) study aside, my literature review found parent abuse researchers have agreed that mothers are at greater risk of parent abuse than are fathers. One likely explanation for why mothers are more often the targets of parent abuse is that in most cultures women are primarily responsible for parenting. Because mothers are most often in the role of disciplinarian they are most often the victims of parent abuse (Cottrell, 2001; Cottrell & Monk, 2004). Ulman and Straus (2003) proposed that mothers are more involved in parenting tasks and thus more likely to be victims of child to parent violence on a simple "time at risk" basis (p. 56).

Existing parent abuse research has produced mixed findings with respect to family composition, revealing that this form of family violence can occur in two parent and single parent households. That said, mothers parenting alone are considered to be at greatest risk of parent abuse (Pagani et al., 2003; Routt & Anderson, 2011; Stewart et al., 2007).

Livingston (1986) surveyed 151 predominantly Caucasian and middle-class single mothers and concluded that approximately 25% of single mothers are physically assaulted by their young people. He offered two explanations for the higher rates of parent abuse reported by single mothers. Firstly, a child living in a single parent home may be responding violently to the effects of family stress arising from greater social and economic pressures which are more common in single parent households. Secondly, a male adult in the home may exert an inhibiting force by not tolerating a child's violence toward his/her mother (even though he may be violent toward her). When the male adult leaves the home, removing the threat of retaliation, the child feels it is now safe to be violent toward his/her mother.

Teenagers interviewed about their abusive behaviours in the home explained that it is easier to share their emotions (including anger) with their mothers than with their fathers (Cottrell, 2001). Mothers may also more commonly experience parent abuse because they are often smaller than their abusive children and perceived as weaker because of that (Gallagher, 2004a; Kennair & Mellor, 2007; Kethineni, 2004; Routt & Anderson, 2011). The mothers in Jackson's (2003) qualitative study described the increasing physical size and strength of their children as a significant factor in the development of aggressive behaviour.

Conversely, it is likely that fathers are less often the targets of parent abuse because they are generally bigger and stronger than the abusive young person. Therefore, fathers are more likely to successfully physically defend themselves against acts of violence, buffering future episodes of youth aggression (Eckstein, 2004).

Social learning is believed to play a role in explaining the influence of partner abuse on later aggression by children and young people as children exposed to aggressive behaviour are more likely to imitate that behaviour (Boxer, et al., 2009; Kethineni, 2004). Livingston (1986) found that "mothers who had been physically abused in their children's presence reported both more frequent and more severe acts of violence from these children" (p. 930). Similarly, Cornell and Gelles (1982) found that male and female adolescent-age children were more likely to use severe aggression toward their mothers if their mothers had been abused by male partners. Not surprisingly, children from these same homes did not report using any form of violence against their fathers. The authors suggested that children, particularly sons, may learn that mothers are an acceptable target for their violence, having observed male adults behaving abusively toward them. Women participants in Howard and Rottem's (2008) qualitative study described their sons' abusive behaviour matching their fathers' actions, suggesting that "they had learned how to be abusive and violent" from observing their fathers (p. 34).

Cottrell and Monk (2004) also found that mothers and step-mothers were more likely to be the target of child and youth violence. Analysis of their data revealed several important factors related to this finding: i) male youth are influenced by social messages that it is acceptable to control and victimise women; ii) female perpetrators of parent abuse may view their mothers as weak and powerless, in response they engage in abusive behaviour against them as a means of rejecting this image of female vulnerability; iii) fathers' perceived strength and power reduced the likelihood of abuse against them; and iv) many of the families studied were parented only or predominantly by women alone.

The finding that mothers are more often the targets of parent abuse may in part, be the product of methodological designs that have resulted in more mothers being participants in research in this field. Additionally, child and youth violence toward fathers may have been underestimated due to the way violence is defined. Violence toward fathers may be considered to be "defensive or protective" behaviour (Gallagher, 2008, p. 153), rather than parent abuse. Furthermore, when sons react violently toward their fathers, in turn prompting a violent reaction from the adult males, this interaction is sometimes considered to be a fight rather than abuse (Cottrell, 2001). The absence of data relating to DPV means we do not know if DPV more commonly involves parental property belonging to either mothers or to fathers, or if female and male parents and caregivers are similarly affected.

### 2.7.2 Others affected by parent abuse

Siblings and other family members may be affected both directly and indirectly by a young person's abusive behaviour in the home (Cottrell, 2001; Holt, 2011; Livingston, 1986). Violence between siblings is a widespread problem. In fact sibling abuse is the most common form of family violence (Browne & Herbert, 1997). Unfortunately little attention has been given to investigating the relationship between sibling abuse and parent abuse. Several reports have referred to young people abusing both their parents and their siblings (Charles, 1986; Howard & Rottem, 2008). Kratcoski (1985) compared young persons who had been violent toward parents with young people with no parent abuse histories. He found that young people in the parent abuse group were violent toward siblings to a higher degree than young people who had not behaved abusively toward parents. Sheehan (1997) described a clinical sample (*N*=60) of families referred for therapy to address youth violence. Violence toward both parents and siblings was present

in 36 cases. These and other related findings reveal how violence can take various forms within a family. Alongside research into other forms of violence, there is a need for further research into the occurrence and impact of parent abuse on wider family systems.

## *2.8 Parent Abuse Incidents: Type, Severity, and Precipitating Factors*

Numerous and varied acts of parent abuse are reported in the extant literature including such things as name-calling, hitting, threatening to kill, using weapons to cause injury, and even "rigging booby-traps" (Charles, 1986, p. 346). Less has been written about patterns of escalating abuse or about the context within which parent abuse occurs. The following section provides a summary of research findings related to parent abuse incidents.

### 2.8.1 Types of parent abuse

As mentioned, the majority of parent abuse studies to date have restricted investigation to acts of physical aggression with several parent abuse studies (Browne & Hamilton, 1998) employing the Conflict Tactics Scale developed by Straus (1979), or modified versions of this measure (Boxer et al., 2009; Livingston, 1986). Consequently, physical abuse is commonly operationalised as throwing something at a parent, slapping, kicking, pushing, hitting with fists or with an object, choking, and threatening to use/actually using weapons to harm a parent. While the Conflict Tactics Scale (Straus, 1979) contains an item relating to intentionally damaging someone else's property, parent abuse studies that have employed abridged versions of this measure have not included property violence items.

Pagani et al.'s (2003) study of abusive behaviour toward mothers explored both verbal and physical forms of parent abuse. Physical aggression was defined much like in other studies

(for example, pushing, shoving, punching, kicking, throwing objects, threatening or using weapons), while verbal abuse was operationalised as yelling at, swearing at, or overtly insulting one's mother. Verbal abuse was found to be more prevalent than physical abuse.

Several judicial studies provide an analysis of the various forms that parent abuse can take. For example, in Cochran et al.'s (1994) report on youth restraining order defendants in Massachusetts, 68% of parents reported physical assaults, 51.8% reported threats of serious injury or death, 47.4% reported verbal abuse, and 44% reported property violence. Parents described their young people using weapons in 18% of restraining order applications. Most commonly knives were identified as the weapon (41.7% of cases). Disturbingly a firearm is mentioned in 25% of reports of weapon-use, perhaps reflecting the number of American homes that contain firearms.

Kethineni (2004) studied the records of 83 youth offenders (age 11-18 years) before a Central Illinois County Court charged with violent acts against their parents. She found 75.9% had committed a form of physical assault. The remaining 24.1% had either verbally abused a parent or had intentionally damaged domestic property. More recently the Canadian Centre for Justice Statistics (2007) provided an analysis of police reports of incidents of parent abuse. The report showed that the majority of complaints were about common assaults (60%), followed by uttered threats (18%), and serious assaults (17%).

Taken together, the results showed that physical assaults were the most common reason for seeking police or legal interventions in cases of parent abuse. This is not to say that other forms of parent abuse are less common or less serious happenings.

**2.8.2 Severity**

Eckstein (2004) interviewed 20 parents who had been verbally, physically, or emotionally abused by an adolescent child. In this study verbal abuse was defined as using words to cause hurt, and included swearing, name-calling, and accusations. Physical abuse included any acts that were intentional, or perceived as intentional, that caused physical harm, such as hitting and kicking. Emotional abuse was described as actions (for example, behaving in a hostile or withdrawn manner) and comments that undermined a parent's emotional wellness and functioning. She found that having provided a definition for each form of abuse, parents were able to classify and differentiate experiences of parent abuse. Furthermore, Eckstein (2004) found that parents often assign a hierarchy to the severity of abuse with verbal abuse commonly considered to be the least harmful form of abuse. For example, swearing was considered less serious than breaking something. Direct physical assaults were described as more serious than verbal abuse and property damage. Within the classification of physical assaults, being hit in the arm was considered less serious than being hit on the head.  Of note, emotional abuse was described as the most harmful form of parent abuse. In a later publication, Eckstein (2007) explained, that while some parent abuse researchers combine verbal abuse and emotional abuse into a single category of abuse, her findings have shown that parents delineate acts of verbal and emotional abuse as two different and distinct experiences, causing varying levels of harm.

In Eckstein's (2004) research, parent participants ranked property damage as more serious than verbal abuse and less serious than physical and emotional abuse. A thorough review of the literature found no other reports on parent perceptions of the seriousness of DPV and therefore, further research is needed to understand how parents view DPV compared to other forms of abuse.

### 2.8.3 Precipitants to episodes of parent abuse

Various authors have provided case reports of violence being triggered by young people not having their demands met by their parents. For example, Charles (1986) described a serious physical assault on a father by his 16 year old son in response to the father refusing to buy the boy a new car. One parent in Gallagher's (2004a) article on parents victimised by their children, described her son demanding money and other things, and abusing her when he was not given the items he wanted.

Several researchers have reported that acts of abuse toward parents commonly occur in the context of child to parent disagreements about chores, money, and privileges. Evans and Warren-Sohlberg (1988) analysed police reports of parent abuse, looking specifically at factors that precipitated incidents of aggression. They found that most commonly disputes were due to "home-related problems" (p.12), including conflict with siblings and disputes about chores and privileges, followed in order of descending frequency by arguments about money and spending behaviour, substance use, sexuality, peer selection, and school.

## *2.9 The Impact of Parent Abuse*

Until the present research, no investigations into the impact of child and youth perpetrated domestic property violence had been conducted. Therefore, in the absence of earlier findings, the follow sections provide a more general description of outcomes following parent abuse.

Like other forms of violence, parent abuse has far reaching consequences, with individuals

and families affected by child and youth perpetrated violence in a variety of ways (Bobic,

2002). Direct victims of parent abuse experience a myriad of physical, emotional, social,

and financial symptoms (Howard & Rottem, 2008). Researchers who have employed

qualitative methodologies, such as in-depth interviews with parents affected by parent

abuse, have offered particularly detailed and important findings about the impact of parent

abuse (Eckstein, 2004; Edenborough et al., 2008; Haw, 2010; Howard & Rottem, 2008;

Jackson, 2003; Paterson et al., 2002).


**2.9.1 Physical injuries**

There exist numerous case reports of parent abuse causing injuries requiring medical

attention. For example, Charles (1986) offered examples that revealed the serious nature

of parent abuse, with several parents reporting head injuries and broken bones. One parent

described being severely beaten before losing consciousness. Livingston's (1986) study of

single mothers experiencing parent abuse found that physical assaults resulted in injury in

41% of cases, with 9% of mothers surveyed reporting that they had required

hospitalisation as a result of their child's violence.


Physical injuries are only one form of suffering, and may not be the most significant

impact of parent abuse. Agnew and Huguley (1989) analysed data from an American

national sample of young people who had been violent toward their parents and concluded

that while most physical assaults resulted in "slight" physical injury it was not in fact the

physical pain but rather the negative psychological and social impact of parent assault that

was most devastating.

### 2.9.2 Psychological impacts

Comparable to victims of intimate partner violence (Gallagher, 2007), parents of abusive children and young people are believed to experience "tremendous anxiety, depression and guilt" (Gelles, 1997, p. 109). Themes of diminishing mental health (Bonnar, 1999), parent fear, shame, and embarrassment can be found throughout existing qualitative literature on parent abuse (Edenborough et al., 2008; Haw, 2010; Holt, 2011; Jackson, 2003). Parents have described feeling like they had failed in their parenting and were thus responsible for their child's abusive behaviours (Haw, 2010; Paterson et al., 2002). This belief has led to the underreporting of parent abuse and is unfortunately sometimes reinforced by statements made by the abusive child (Paterson et al., 2002), by family members (Charles, 1986; Howard & Rottem, 2008), and by service providers (Bonnar, 1999).

Webster-Stratton and Herbert (1994) described parents of abusive youth needing to be "on guard" in case of unexpected violence (p. 44). Similarly, participants in Paterson et al.'s (2002) study described chronic fear and anxiety, an experience expressed by the authors as "walking on egg shells" (p. 97). Fear may be associated with a risk of physical injury to themselves (Sheehan, 1997), and to others in their care (Bonnar, 1999). In some cases parental fear stems from concern that others will learn about the abuse and make negative judgments (Bonnar, 1999), or take action to remove the child (Paterson et al., 2002). Unfortunately, victim denial or suppression of the abuse commonly facilitates the continuation of parents' suffering (Agnew & Huguley, 1989).

### 2.9.3 Financial impacts

Although DPV has not been the central focus of past parent abuse research, reports of violent youth intentionally damaging or stealing their parents' property can be found

throughout the literature. For example, one parent in Gallagher's (2004b) study reported

that their child's intentional destruction of property had led to $10000 worth of damage.

Damage to property can result in significant financial costs and also lead to psychological

distress (Howard & Rottem, 2008). Jenkins (1999) described the case of a young person

purposely damaging his mother's collection of special ornamental dolls. The following

passage from an interview transcript in Webster-Stratton and Herbert (1994) presents

another parent's experience of DPV; "…it has been incredibly painful to watch our brand

new house—brand spanking new—be destroyed. …he has caused an incredible amount of

destruction which was painful to watch" (p. 46). This extract demonstrates that DPV, like

all forms of parent abuse, can have a significant emotional impact.

### 2.9.4 Impact on family functioning

Parent abuse may generate a range of enduring detrimental effects not just on the

victimised parent, but on the family unit (Brezina, 1999). Other family members

(particularly siblings) can also be deeply affected, regardless of whether or not they are

direct targets of the violence (Cottrell, 2001; Howard & Rottem, 2008; Laurent & Derry,

1999). Parent abuse can generate other forms of familial conflict such as marital disputes

(Cottrell, 2001), and abused parents may withdraw from friends and family, resulting in

the loss of social networks (Bobic, 2004; Charles, 1986; Kennair & Mellor, 2007) further

intensifying the effects of parent abuse (Howard & Rottem, 2008).

### 2.9.5 Impact on perpetrators

It stands to reason that perpetrators of parent abuse will also experience emotional and

social difficulties. Micucci (1995) proposed that abusive children experience feelings of

inadequacy, helplessness and alienation in response to the negative reactions to their

violence from others. Additionally, young persons who seek to intimidate and distress their parents by engaging in behaviours such as running away from home, associating with deviant peers, and abusing alcohol and drugs, risk physical and emotional harm. Howard and Rottem (2008) found that male youths who had behaved abusively toward their mothers were at risk of homelessness because their behaviours meant they could no longer reside at home. Challenging the idea that abusive young people are unremorseful, Charles (1986) reported on the case of a 29 year old man who at age 16 years, punched his father resulting in serious injury and long-term disability. He recalled an enduring sense of responsibility and regret. This man's experience was similar to the majority of outpatient cases in Charles' study, whereby past episodes of parent abuse, generally denied as being serious by the victim, resulted in unresolved feelings of guilt and subsequent long-standing relationship difficulties between child and parent.

Considering the impact of parent abuse on perpetrators raises a significant point. My study explored parent and caregiver experiences of DPV and other forms of parent abuse, however, it is important to acknowledge that there is another perspective in cases of parent abuse, that being the viewpoint of the abusive young person. This is a key area requiring further exploration, although, it was beyond the scope of my research.

The following section provides a summary of available literature on parent abuse interventions and outcomes. As will be demonstrated, there have been few studies of parent abuse-specific interventions, revealing that this is another important topic requiring further investigation.

## 2.10 Parent Abuse Interventions

Research on parent abuse has tended to focus on establishing prevalence rates, developing theories of causality, and identifying victim and perpetrator characteristics. Less emphasis has been placed on examining intervention programmes and outcomes (Kennair & Mellor, 2007). This may partly be due to the fact that very few intervention programmes for either perpetrators or victims of parent abuse actually exist (Edenborough et al., 2008).

When interventions are designed and offered, these tend to be based on the conceptualisation of parent abuse as a family problem requiring family-based programmes. For example, Micucci (1995) provided a case illustration of adolescent to parent violence successfully treated within a family systems model. The author concluded that it is necessary to identify and disrupt symptomatic patterns of family interaction that maintain adolescent violence toward parents, and that family work needs to be a central component of treatment. Similarly, Paterson et al. (2002) remarked that in cases where ineffective parenting and interpersonal conflict provide an explanation for parent abuse, the family becomes a "natural target for clinical intervention" (p. 91). They evaluated a group intervention that had been designed to support mothers experiencing parent abuse to adapt their beliefs about, and their reactions to, the violence. Participants reported reduced levels of violence following the programme, demonstrating the potential for change in even the most difficult and violent adolescent-parent relationships.

Most of the available commentary on parent abuse interventions, specifically participants' experiences of help seeking, comes from Australian reports (Bobic, 2002; Edenborough et al., 2008; Howard, 2011; Paterson et al., 2008). Bobic (2002) found that in Australia, family and narrative therapy are the interventions most often offered by agencies dealing

with parent abuse. A search of New Zealand literature found no reports of intervention programmes specific to the problem of DPV or other forms of parent abuse in this country.

Although various authors have advocated for the importance of providing family-based interventions for parent abuse (Micucci, 1995; Sheehan, 1997), as previously discussed, child and youth perpetrated violence in the home is influenced by many factors outside of the family, including school, media, and peer group, all of which require careful consideration when designing interventions (Cottrell & Monk, 2004). Bobic (2002) reported that "scapegoating only the families who are subjected to parent abuse further exacerbates the problem of family violence" (p. 13). Interventions based solely on the premise that parent abuse is due to maladaptive child-parent relationships may encourage victim-blaming and associated parent experiences of shame and guilt (Eckstein, 2004). Furthermore, family therapies can present a range of challenges and risks, and as such, may be inappropriate in cases where participation in the therapy process is rejected by family members, or places persons at risk of further violence.

Parent abuse requires multifaceted and integrated approaches to intervention incorporating educational, therapeutic, and social strategies (Cottrell & Monk, 2004). Legal action may also be necessary (du Bois, 1998). Serious care and protection issues arising from the abusive behaviour of children and young people require immediate intervention by agencies such as the police and child protection services. Buel (2002) studied parent abuse in United States families and concluded that parents are reluctant to notify authorities of their child's violence, and those that do seek help from either the justice or the legal systems are unlikely to receive adequate support and assistance. Initiating legal action is often far too guilt-inducing for parents (Holt, 2011), while the threat of legal consequences

may be of little concern to the child (Gallagher, 2004), and fail to act as a deterrent to further acts of parent abuse (Kethineni, 2004).

Fewer studies have examined youth justice approaches to parent abuse (Buel, 2002; Gebo, 2007; Holt, 2009; Hunter, Nixon & Parr, 2010). A lack of formal police and court protocols for responding to parent abuse incidents has been a common finding, along with an emphasis on justice outcomes that hold parents responsible for their children's actions (Holt, 2009). Howard (2011) has remarked on available parent abuse interventions and concluded that parents are often expected to "fix the problem", however, responses which rely solely on invoking parental responsibility, while ignoring important power and control issues in the family, "set the parent up to fail" (p. 7). New Zealand youth justice system responses to parent abuse are discussed further in chapter four.

Support groups provide the opportunity for parents to talk with others with similar experiences, and parents may take comfort from realising they are not alone (Cottrell, 2001; Kennair & Mellor, 2007; Paterson et al., 2002). Edenborough et al.'s (2008) study identified and measured the characteristics and nature of "child-to-mother violence" (p. 465). A number of subthemes emerged from their qualitative analysis, including "Perceived possibilities: actions taken" (p. 468), a subtheme based on the actions participants had taken, or were prepared to take, in response to their experiences of parent abuse. Participants' responses included counselling for their children, medical interventions, and police involvement. The researchers found that participants (all mothers) perceived few possibilities for successful interventions, and those who had received counselling and other forms of support were largely unhappy with the outcomes.

However, talking to other parents who were able to offer advice or positive role modelling was described as helpful.

Unfortunately support groups are uncommon and those that are established often receive little or no financial support (Cottrell, 2001). Furthermore, as reported by Tew and Nixon (2010), experiences of stigma and shame associated with parent abuse likely make it difficult for parents and caregivers to seek any form of support. Those prepared to disclose the parent abuse may struggle to find support in the absence of policy frameworks that acknowledge the problem of parent abuse or services adequately developed to address this problem (Tew & Nixon, 2010).

## 2.11 Conclusion

This chapter began with a summary of the shortcomings in the parent abuse literature offered as a preface to the often contradictory reports of parent abuse research findings. Research efforts have been hindered by small samples, a lack of suitable measurement instruments, and reporting biases. Furthermore, defining parent abuse can be a complex and controversial task. It is, however, generally accepted that mild forms of aggression, particularly during early childhood, and child to parent conflict, particularly during adolescence, are normative. Acts of parent abuse are those which deviate both qualitatively and quantitatively from what would be considered developmentally normal.

Unfortunately, the inconsistencies in the existing findings have perpetuated the vagueness surrounding this phenomenon. Prevalence rates vary widely, despite the attempts of a number of large international studies to elucidate the extent of this form of family

violence. What is generally accepted is that parent abuse is most often perpetrated by young males against their mothers.

With respect to other demographic and risk factors, a lack of parent abuse research means that there is presently an over-reliance on general youth violence literature, which does not always accurately describe  the phenomenon of young people abusing their parents. In fact, parent abuse studies have demonstrated that several well-established youth violence risk factors are unrelated or inversely related to parent abuse. For example, various studies have found that  young persons who abuse their parents are equally likely to be from single parent and two parent homes,  middle and higher socioeconomic status families (Charles, 1986; Gallagher, 2004; Nock & Kazdin, 2002; Paulson et al., 1990), and parented by lenient, overindulgent, or overprotective, rather than abusive or neglectful parents (Gallagher, 2008). Emerging evidence suggests that youth who abuse their parents may be a heterogeneous group with many members not fitting the typical presentation of a violent youth. Again, however, the paucity of related research means it would be premature to draw any firm conclusions.

Several studies using qualitative methods have produced interesting and important findings. For example, Eckstein's (2004) qualitative study provided information that illuminated patterns of communication between young people and their parents, defined three types of parent abuse, and revealed patterns of escalation. Other qualitative research has produced significant findings related to the various, and often serious physical, psychological, social, and financial impacts of this type of family violence.  Unfortunately, there are few available reports on effective methods of intervening in cases of parent

abuse. Further research of this kind will improve public awareness of this problem and support the development of meaningful and effective interventions.

No direct research into parent abuse appears to have been undertaken in New Zealand (Crichton-Hill et al., 2006). Given the dearth of New Zealand research, very little can be said about the nature and extent of parent abuse in this country, and factors that both diminish and increase the risk of New Zealand youth engaging in this form of family violence. In the absence of New Zealand research it is tempting to rely on international findings when speculating about the nature and extent of parent abuse in this country. However, as will be demonstrated in chapter four, New Zealand youth and their parents/caregivers are influenced by a myriad of cultural, social, and political factors that are specific to New Zealand life and, therefore, relevant to the present study.

In order to better understand this phenomenon as it occurs in New Zealand, we require reporting strategies and research involving broad (but commonly accepted) definitions of parent abuse, longitudinal methodologies, and data from multiple informants for comparison. Whereas the present study is neither longitudinal nor multi-informant in design, it is a New Zealand study, and thus long overdue. Furthermore, the study provides an investigation into a type of parent abuse previously neglected by researchers, that being domestic property violence.

# Chapter Three: Theoretical Considerations

## *3.1 Introduction*

I came to the study with an interest in, and knowledge of, family violence literature and theory which undoubtedly influenced my initial reactions to the data emerging from the early stages of analysis. Accordingly, from the outset, it was necessary for me to acknowledge my theoretical biases and be open to other explanations. I was supported in doing so by my supervisors, both of whom encouraged me to think about a broader range of explanations for the findings. This chapter first provides an introduction to a small group of theories that emerged from data analysis. Specifically, I briefly discuss stress theory (Strasburg, 1978), general strain theory (Agnew, 1992), coercion theory (Patterson, 1982), social learning theory (Bandura, 1973), and the broader group of intergenerational transmission of violence theories, before describing a feminist perspective on the problem of parent abuse, and lastly, nested ecological theory (Belsky, 1980). This compilation represents a reflective journey of exploration, consideration, and application, and together the theories shed light on aetiological and outcome factors related to DPV and other forms of parent abuse.

After discussing academic psychosocial theories pertaining to causation, the concept of personal theorising or rather, personal meaning-making is introduced. Meaning-making is a construct that emerged from the interview data, prompting an exploration of meaning-making literature and theories. Furthermore, the design of the study privileges participants' familiarity with DPV and their story telling, and so it is important to consider how and why parents give meaning to their lived experiences of DPV.

Meaning-making is presented as an important theme in the next two sections of this chapter that explore i) how parent abuse impacts on parents, and ii) how parents respond to abusive behaviour by their children. Here again, models of explanation have been selected because emerging data drew my attention to the existence and relevance of these theories.

To follow is a description of current psychosocial theories of aetiology relevant to parent abuse. Theoretical models of DPV are not specifically considered because, quite simply, none appear to exist. Given the complex nature of this problem, a single overarching theory of DPV may not be possible. Nevertheless, a central objective of this research is to develop a theoretical framework relating to DPV by examining the relevance of existing theoretical models of parent abuse, before then combining salient features in a way that both illuminates this phenomenon and identifies gaps in current knowledge.

## 3.2 Psychosocial Theories of Aetiology

The question, "what causes young people to behave abusively toward their parents?" remains largely unanswered because few researchers have attempted to develop dedicated theoretical explanations for parent abuse. In general, those interested in this phenomenon have drawn on existing psychosocial theories of youth violence and family violence, namely, stress theory (Strasburg, 1978), general strain theory (Agnew, 1992), coercion theory (Patterson, 1982), social learning theory (Bandura, 1973), and nested ecological theory (Belsky, 1980). All of these, to some extent, provide useful backgrounds against which to interpret parent abuse research findings. Yet, as will be shown, each has their limitations. To date, no cohesive theory for understanding parent abuse exists.

All of the theories to be described link parenting and family functioning (or more precisely family dysfunction) to parent abuse. According to Cottrell (2001), "there is no definitive explanation for parent abuse; there are, in fact, a multitude of interconnected dynamics contributing to the behaviour" (p. 12). Yet, it seems that researchers persist with meaning-making in a fashion that perpetuates parent and family blaming and ignores broader explanations for parent abuse.

### 3.2.1 Stress theory

Stress theory (Strasburg, 1978) purports that parent abuse results from children and young people possessing inadequate resources to cope with intolerable stress. Experiences of stress may be due to exposure to violence, economic hardship, and other interpersonal, social, and environmental challenges. Various forms of family stress, including intra-family conflict (for example, Kratcoski, 1985), maladaptive parenting practices (for example, Laurent & Derry, 1999), divorce and separation (for example, Pagani et al., 2003), have been correlated with parent abuse. Kratcoski (1985) theorised that "low family functioning and lack of integration" are related to parent abuse (p. 155). The findings of his study supported this premise, with families characterised by frequent disruptions, conflict over money and parenting, intra-familial violence and substance abuse by parents and young people found to experience higher rates of youth to parent violence.

Kratcoski (1985) is not alone in referring to the influence of parenting style as a contributing factor to parent abuse in some families. The role of parenting styles is frequently mentioned in the current literature. Various studies refer to parent abuse being

related to indulgent, permissive parenting characterised by a lack of boundaries (Charles, 1986; Laurent & Derry, 1999; Micucci, 1995; Paulson et al., 1990; Price, 1996; Robinson et al., 2004). Gallagher (2008) suggested that lenient parents probably have children who are less aggressive overall, however, when such parents do have aggressive children, they are more likely than very strict and harsh parents to be victimised by these children. Parenting practices at the opposite end of the spectrum, such as authoritarian, aggressive and hostile parenting have also been reported to be related to parent abuse (Bailey, 2002; Brezina, 1999; Kethineni, 2004; Pagani et al., 2004; Peek et al., 1985). After finding no relationship between parental reports of stress and rates of parent abuse, Cornell and Gelles (1982) suggested that further research is required to better understand the role personal and family stress plays in children and young peoples' violence toward parents.

### 3.2.2 General strain theory and coercion theory

Brezina (1999) reported on two theories that look specifically at parent abuse as a response to negative and aggressive styles of parenting—general strain theory (Agnew, 1992) and coercion theory (Patterson, 1982). The primary assumption of general strain theory is that delinquency is a young person's coping response to environmental hardship and strain. Agnew (1992) purported that "delinquency may be a method for alleviating strain … for protecting or retrieving valued stimuli, or for terminating or escaping negative stimuli" (p. 60). Proponents of coercion theory contend that child and youth aggression is the product of increasingly aversive interactions with parents. Coercion theory places emphasis on the means with which aggressive behaviours are learned and reinforced (Brezina, 1999). "The key assumption is that coercive [i.e., aggressive] child behaviour may serve the function of terminating aversive intrusions by other family members…. The major reinforcer for attack-instigated aggression is termination of the

attack" (Patterson, 1982, p. 151). What both theories have in common is the premise that aggression is a behavioural strategy that offers children and young people a means of minimising or combating aversive interactions and other forms of negative treatment by family members. They can be said to differ in that general strain theory offers an explanation for the initiation of abusive behaviour toward parents, while coercion theory better explains the persistence of this behaviour (Brezina, 1999).

When Cottrell and Monk (2004) interviewed a number of young women with histories of victimisation by parents they found that acts of parent abuse were typically motivated by a need for self-protection, or as a means of protecting others, such as siblings who were also being victimised. In another study of children and young people who had physically assaulted their parents, four fifths had been recent victims of parental violence (Browne & Hamilton, 1998). It can be concluded, therefore, that in at least some cases, acts of violence perpetrated by a child or young person serve a defensive or retaliatory function.

### 3.2.3 Social learning theory

Bandura (1973) theorised that most human behaviour is learned by observing the behaviour being modelled by others. Several researchers have reported on the applicability of social learning theory in the development of parent abuse (Boxer et al., 2009; Evans & Warren-Sohlberg, 1988; Kratcoski, 1985; Rybski, 1998). The premise is that young people who are raised in families where they observe parents applying violence in response to stress or as a means of solving interpersonal problems, learn that violence is an effective means of getting what they want from others (Kratcoski, 1985). The theory that children adopt the problem-solving tactics used by their parents is also gaining support. In the case of parent abuse, children who have observed violence modelled by their parents, go on to

replicate violent strategies in response to interpersonal problems (Ibabe et al., 2009; Kethineni, 2004).

Boxer et al. (2009) concluded that empirical support for a social learning perspective of parent abuse can be readily found in the literature. Their study of physical aggression toward parents offers further evidence in support of the social learning view. They cautioned, however, that we cannot ignore the findings establishing links between parent abuse and family stress, namely economic hardship, family disruption through divorce, and other factors reducing family stability. Furthermore, Boxer et al. (2009) stated "one can never rule out the possibility of a genetic basis" for the co-occurrence of aggression in families (p. 114). Some children may be genetically predisposed to aggression, which then presents as abusive behaviour toward parents when triggered by certain environmental conditions.

Related to social learning theory is the consistent finding that parent abuse, like generalised youth violence, is strongly associated with other forms of violence in the home (Boxer et al., 2009; Hines & Malley-Morrison, 2005; Ibabe et al., 2009; Kratcoski, 1985; Livingston, 1986). Various authors have purported that children who are violent toward a parent often have been victims of parental violence, either directly or through the witnessing of adult partner abuse (Buel, 2002; Cottrell, 2005; Evans & Warren-Sohlberg, 1988; Howard & Rottem, 2008; Kethineni, 2004; Livingston 1986; McCloskey & Lichter, 2003; Rybski, 1999; Ulman & Straus, 2003). Ibabe et al. (2009) found that 80% of the juvenile offenders reported for acts of parent abuse in their study had experienced some form of family violence. Boxer et al. (2009) studied families referred to a mental health agency for assessment and treatment of emotional and behavioural problems in their

children. They found that youth to parent aggression was significantly more prevalent in youth who had experienced interparental or parent-to-youth physical aggression than youth from non-violent homes. The authors concluded that their findings were consistent with a social learning view. That is, young people exposed to aggressive behaviour within the family were more likely to respond aggressively. They further reported coercive processes (Patterson, 1982), whereby youth were more likely to behave in a physically aggressive manner toward the parent who had aggressed toward them.

Parents are not the only source of social learning for children and young people. Peers, through direct interaction or via the media, provide additional important mechanisms for social learning through imitation, reinforcement, and the transmission of attitudes. In earlier research, Agnew and Huguley (1989) found that young people who assaulted their parents were "more likely to have friends who assault parents" (p. 710), suggesting that peer behaviours and attitudes to the legitimacy of violence may, to a degree, explain parent abuse. Similarly, Cottrell and Monk (2004) found that male youth were influenced by social messages that promote the idea that it is acceptable to control and victimise women, including their mothers. The relationship between peer influence and parent abuse is a complex one, and unfortunately has received little attention from parent abuse researchers, even those who have adopted social learning theory as a framework for explaining this problem.

### 3.2.4 The intergenerational transmission of violence theory

Social learning theory is one of several theories that can be classified under a broader taxonomy known as the intergenerational transmission of violence theory. While considered a theory, the intergenerational transmission of violence theory is more of a

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framework of suppositions (for example, learning and genetic theories) that seek to explain why violence is seen in several generations. The basic premise of the intergenerational transmission of violence theory is that children who are victimised will grow up to victimise others. Although a popular and widely accepted hypothesis, the relationship between childhood experiences of violence and later violent behaviour is complex and difficult to measure. Estimated rates of transmission vary widely across existing studies, many of which fail to consider other likely explanations for violent outcomes (Pears & Capaldi, 2001). Heyman and Smith Slep, (2002) suggested that there is in fact little scientific support for the intergenerational transmission of violence theory. Nevertheless, this "theory" features in several reports on parent abuse and therefore it would appear that the central premise influences meaning-making about parent abuse on numerous levels, including the beliefs and attitudes of researchers, writers, and individuals.

Researchers have suggested that child victims of abusive parenting retaliate by behaving aggressively toward their parents during adolescence and later react violently toward partners in adulthood (Browne & Hamilton, 1998; Cornell & Gelles 1982; Cottrell & Monk, 2004; Gebo, 2007). Parent abuse, in some cases, may indicate that the seeds of aggression planted in childhood produce family violence well before adulthood. Indeed the study of parent abuse provides an important means of exploring ideas concerning the intergenerational transmission of violence (Cornell & Gelles, 1982).

There are risks associated with adopting the intergenerational transmission of violence theory as a principle explanation for parent abuse. Gallagher (2008) rightly cautioned that in doing so, we may strengthen the assumptions that parents of abusive children must have

been abusive and that victimised children "are doomed to repeat the cycle" (p. 156).

Indeed, none of the aforementioned theories can be said to wholly explain the problem of parent abuse. Links between parent abuse and exposure to family stress and adult-perpetrated forms of family violence have been frequently made, yet it would be both premature and inappropriate to draw causal connection at this time. Gelles (1997) reminded us that "perfect associations rarely exist in social science" and that both abuse and violence stem from a "complex set of interrelated factors" (p. 9). Saunders (2003) critically reviewed existing research on the effects of various forms of violence on children's development, pointing out limitations of studies that focus on only one or two forms of violence. He stated that "spurious or misleading conclusions may be drawn from incomplete research. Inaccurate or incomplete causal references may be made because more complex relationships have not been investigated" (p. 369).

We cannot ignore cases of parent abuse that are unrelated to other forms of family violence (Ibabe et al., 2009). Abusive children and young people may come from non-violent families (Eckstein, 2004; Gallagher, 2004a; Price, 1996), suggesting that models of causation need to extend beyond parenting explanations and other family factors. Following a critical review of the literature on children's violence toward parents, Gallagher (2008) referred to the unfortunate tendency for theorists and practitioners to see parent abuse stemming from experiences of child abuse and other forms of family violence. Similarly, Browne and Hamilton (1998) remarked, "blame should not always be placed on the family" (p. 62), while Ibabe et al. (2009) cautioned against making "simple associations" between parent abuse and other forms of family violence, such as child abuse and intimate partner violence, as it "cannot be said that one leads inevitably to the other" (p. 6).

We should not overlook pervasive social factors affecting adolescence (Bobic, 2004), such as the influence of peers, the media, and culture. Bobic (2002) argued that it is largely the psychological school of thought that drives current conceptualisation of parent abuse. As such, explanations for, and subsequent responses to, parent abuse have tended to be based on the notions of either individual disorder or more commonly, family breakdown (Sheehan, 1997). Less often have variables such as "school, television, computer games, community violence or wider social structures" been considered with respect to their role in developing and maintaining interpersonal violence (Bobic, 2002, p. 15). In the next two sections I briefly discuss the application of feminist theories and nested ecological theory (Belsky, 1980) to the problem of parent abuse, as both perspectives go some way to addressing this limitation.

### 3.2.5 Feminist Theories

As discussed in chapter two, male children are most often the perpetrators of parent abuse, while mothers are more often the targets. Given these marked gender differences it is fitting to apply a feminist perspective to the problem of parent abuse. Feminist family violence theorists commonly posit that male dominance exists within the family, and traditional gender roles, male violence against women, and privileged patriarchal beliefs are all means of maintaining male power and control. In the case of parent abuse, studies have found that each of these factors may play a role in the disproportionate abuse of mothers by their sons. For example, with respect to traditional gender roles, the unequal division of childcare and household tasks has been shown to put mothers at greater risk of parent abuse (Cottrell, 2001; Cottrell & Monk, 2004; Ulman & Straus, 2003). Several researchers have found that sons who have watched their mothers being harmed by their

fathers go on to repeat the abusive behaviours of their fathers (Boxer, et al., 2009; Cornell & Gelles, 1982; Howard & Rottem, 2008; Kethineni, 2004; Livingston, 1986), while Cottrell and Monk (2004) found that sons were influenced by social messages that it is acceptable to control and victimise women. However, feminist theoretical frameworks, when applied to the phenomenon of parent abuse, do not readily explain why female children may engage in abusive behaviour toward parents, and why fathers may also be targeted.

### 3.2.6 Nested ecological theory

Cottrell and Monk (2004) examined the applicability of nested ecological theory (Belsky, 1980) to the problem of parent abuse. Briefly, nested ecological theory was initially developed to explore how parents and their children interact, and to explain aetiological factors in cases of child neglect and abuse. Nested ecological theory describes the reciprocal interaction of the macrosystemic, exosystemic, microsystemic, and ontogenic levels of influence on family functioning. Cottrell and Monk (2004) examined the applicability of nested ecological theory to the problem of parent abuse. They described the macrosystem as the cultural values and beliefs that "condone, influence and legitimize the use of violence against others" (p. 1075). In the exosystem they included such things as social isolation, economic hardship, and other factors that influence individual and family environments, heightening the potential for violence. The microsystem referred to communication styles and other "interactive patterns in a family that contribute to violence" (p. 1076). The individual characteristics of the perpetrators of family violence were classified as ontogenic factors, and included such things as communication skills, emotional health factors, and attachment and intimacy styles. Ontogenic factors were seen to be nested within the macrosystem, exosystem and microsystem levels of influence.

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Cottrell and Monk (2004) conducted a qualitative study of common themes in "adolescent-to-parent abuse" and concluded that nested ecological theory effectively considers psychological, sociological, feminist, and cultural factors, thus providing a "valuable addition to our understanding of adolescent-to-parent abuse" (p. 1077).

Interestingly, while Belsky's nested ecological theory appears to be strongly influenced by the earlier theorising of Bronfenbrenner (1979) and his ecological model of child development, it does not include reference to the mesosystem. In Bronfenbrenner's model, mesosystems are central components, describing the "interrelationships among two or more settings in which the developing person actively participates" (Bronfenbrenner, 1979, p. 25). Put another way, "the mesosystem is a system of microsystems" (Bronfenbrenner, 1994, p. 40). Incorporating a focus on mesosystemic factors, for example exploring the interrelationships between parents and their children's educational environments, or between parents and their children's peer group, could improve the applicability and utility of this model to the phenomenon of parent abuse.

While multi-factor, interactionist models such as nested ecological theory seem particularly relevant to the phenomenon of parent abuse, they are yet to have a significant influence on parent abuse research, and therefore, they have not been widely discussed or debated in the literature. This may be partly due to the commonly cited criticism that ecological theories are wide-ranging and vague and thus difficult to investigate (Cottrell & Monk, 2004). Although in the case of parent abuse, the absence of ecological theorising also likely reflects society's preoccupation with finding individual and family-based explanations for this problem.

Investigating important relationships between the various systems is a challenge when applying ecological models of aetiology and impact to social problems. Yet exploring how explanations are made and conveyed by individuals, and by the various systems they encounter, may enhance our understanding of complex phenomena such as parent abuse, particularly when explanations diverge or conflict.

I will next discuss popular theories about meanings and meaning-making, providing an introduction to meaning-making as an interpretative framework for considering participants' discourse about their experiences of DPV. Meaning-making has broader applicability when extended as a framework for understanding how other family members, communities, cultures, social agencies, and societies in general make sense of DPV and other forms of parent abuse. In this thesis, the concept of meaning-making offers a way of bridging the gaps between the various systems posited by ecological theorists, thereby illuminating the ways in which participants both influence, and are influenced by, their children, other family members, their wider social networks, and the various agencies they encounter as a result of the DPV.

## 3.3 Meanings and Meaning-Making

Shaw (2004) suggested that any research of human experience should be interested in meanings and how meaning-making influences everyday life. Such a premise raises the question "how can we tap into the richness of individual experience?" Parent abuse is a topic that is deeply imbued with personal meaning, yet there are very few studies that have directly explored parents' construction of meaning and factors that influence this. The most recent related report came from Holt (2009), and almost by chance. In her paper, Holt explained that her study was designed to explore parents' experiences of the youth

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justice system. While not the focus of the research, experiences of parent abuse were described by a number of parents in the study. Holt's article provided participants' accounts of victimisation by their children, offering an insight into how parents made sense of this problem. Similarly, the design of the present study invited participants to speak about their experiences of DPV and the meanings they assigned. The findings are described in the analysis section of this report.

### 3.3.1 Meanings

Krauss (2005) conceived of meanings as "linguistic categories" that comprise a person's view of reality, and define their actions (p. 762). Furthermore, people have an innate tendency to want to give meaning to, or draw meaning from, life's experiences (Krauss, 2005). Indeed, this inclination is one important characteristic that sets us apart from other species. Bruner (1990) contended that the search for meaning, or rather meaning-making, has played a role in the survival of the human species, as without this ability, "we would be lost in a murk of chaotic experience" (p. 56). Similarly, Frankl (1978) had earlier suggested that a firm sense of meaning was critical in order for a person to achieve optimal human development.

Various schools of theory have influenced research and writing on the issue of meaning making. Notably, proponents of symbolic interactionism have contributed to the meaning-making literature. A core assumption of symbolic interactionism is that "meaning arises in the process of interaction between people" ( LaRossa & Reitzes, 1993, p. 143), and therefore this perspective is well suited to exploring the relationship between the meanings individuals make and social structures. However, symbolic interactionism, while a popular

theory, has been criticised for failing to operationally define key concepts (LaRossa & Reitzes, 1993), including meaning and meaning-making.

Indeed, while the concept of meaning as central to human existence is a well accepted notion, meaning remains difficult to define (Baumeister, 1991; Park, 2010). Davis, Wortman, Lehman, and Silver (2000) referred to meaning as "an explanation for an event that renders it consistent with one's assumptions or understanding of the nature of the social world" (p. 498). Definitions of this kind are appealing because they are uncomplicated and neutral, however, they fail to reflect the sometimes very complex nature of meaning. While humans may naturally seek meaning, explanations may not be inevitable or achievable products of human thinking. Meanings may be difficult to attain, particularly when events are, for example, bewildering, agonizing, unexplainable, unpredicted, or unpalatable, and do not readily fit with a person's understanding of the world. Such may be the case when a parent encounters abuse from his or her child.

In the health-related literature, meanings have frequently been grouped into two categories: global meanings and situational meanings (Skaggs & Barron, 2006). Global meanings provide people with cognitive frameworks with which to make sense of their experiences (Park, 2010). Global meanings are our beliefs, values, and goals (Skaggs & Barron, 2006), and are believed to be highly influential with respect to our emotional, cognitive, and behavioural responses. Situational meanings are commonly formed "in the context of a particular environmental encounter" (Park, 2010, p. 258).

**3.3.2 Meaning-making**

Park (2010) reviewed a large sample of meaning-making studies, noting commonalities across theories, particularly the shared premise that meaning-making happens when a discrepancy exists between an individual's global meaning and his/her situational meaning. The central goal of meaning-making is to resolve this discrepancy. One example of this type of theory is that of Skaggs and Barron (2006), who identified four attributes that are fundamental to the search for meaning: the search for meaning is a process; that process occurs over time (is temporal); is unique to the individual; and it is recursive. They explained that the meaning-making process following an event begins with attempts to change the meaning of the event through the use of reattributions in the continuing pursuit of answers, or by creating illusions in order to re-establish "a sense of efficacy or control over an event" in order to enable a return to congruency (Skaggs & Barron, 2006, p. 565). Existing theories shed light on some aspects of meaning-making while invariably obscuring others (Park, 2010).

There is no singly accepted or consistent definition for meaning-making (Grossman, Sorsoli, & Kia-Keating, 2006), despite the existence of numerous articles across a wide range of disciplines that have consider this issue. Meaning-making may be defined as the way in which people make sense of life events, consider the causes of negative experiences, or find meaning in their own existence. In some studies meaning-making has been described as a process, while in others meaning-making has been viewed as an outcome (Davis, et al., 2000).

The extant meaning-making literature has most commonly described the restoration of meaning following negative or threatening life events (Park, 2010) including significant

losses, serious illness, accidents and other traumas (Davis et al., 2000). Meaning-making is considered an important practice in achieving personal happiness following adversity. Various authors have posited that the key to surviving personal trauma is creating new meaning (Solomon, 2004). Some researchers have disputed the notion that meaning-making is critical to adjustment following stressful life events, while others (Bonanno, Wortman, & Nesse, 2004; Lepore & Kernan, 2009) have found meaning-making was associated with poorer levels of adjustment (for a comprehensive review of the meaning-making literature and findings see Park, 2010).

Research on meaning-making has been hindered by a range of methodological limitations (Park, 2010) creating "conceptual confusion" and disparate findings (Davis et al., 2000, p. 497). Consequently relatively little is known about what meaning-making is and how it impacts on people's lives. Overall, findings from the empirical research on meaning-making are conflicting as to whether meaning-making is a necessary or positive aspect of recovery (Park, 2010). More knowledge about meaning-making pathways, and how they relate to adjustment and recovery following stressful life events, is necessary in order to inform approaches to therapy and other forms of psychosocial intervention (Grossman et al., 2006; Park, 2010).

### 3.3.3 Meanings made

"Meanings made" refers to the outcomes or rather the products of meaning-making processes. Meanings can take many forms. Park (2010) offered a brief summary of common meanings made including acceptance, a sense that an event or experience "made sense", causal understanding, perceptions that the event enabled personal growth or other positive outcomes, and changed one's sense of life's meaning (p. 260). Meaning-making

impacts on emotional wellbeing and behaviour but does not always promote subjective

wellbeing or happiness (Singer, 2004). Indeed meanings made can be both positive and

negative. For example, Park (2010) found several studies showing that meaning-making

that elicited self blame and negative evaluations, generally produced poorer levels of

adjustment.

Meaning-making does not always lead to meaning. Park's (2010) review of meaning-

making studies found several studies where the majority of participants reported that they

had not found meaning following adverse events. She noted, however, that in those studies

involving broader definitions of meanings-made (for example, where meanings were not

just defined as acceptable answers to the question "Why me?"), participants commonly

reported that meaning-making had led to finding meaning.

Park (2010) considered what  happens if an individual's meaning-making does not result

in meanings made, and concluded that little is known about the threshold that

distinguishes helpful and successful meaning-making from processes that either fail to

yield meaning, or are maladaptive and lead to rumination and other difficulties. Gillies and

Neimeyer (2006) found that active meaning-making following bereavement was related to

increased grief and distress, whereas finding meaning in the death was related to lower

ratings of distress. Similarly, following a review of related research, Park (2010)

concluded that meaning-making activity is associated with higher levels of distress, while

the acquisition of meaning is linked with higher levels of adjustment. Long-term meaning-

making, however, has been found to be associated with negative outcomes (Davis et al.,

2000). This may not be the result of meaning-making per se, but associated with the risks

of searching for meaning that is not always available in an ordinary fashion.

Unfortunately, few studies consider the relationship between meaning-making and meanings-made, or both constructs and adjustment subsequent to adverse events. Further research is required in order to advance our knowledge of what happens when an individual's meaning-making efforts fail to yield a meaning (Park, 2010).

### 3.3.4 Factors that influence meaning-making and meanings made

Like those who promote ecological models of human behaviour, meaning-making theorists are similarly interested in the way systems (for example, the individual, the family, the community) interact to influence meaning-making processes and outcomes. In their study of bereavement and meaning, Neimeyer, Prigerson, and Davies (2002) reflected on various factors that impact on meaning-making. They concluded that meaning-making "resides and arises in language, cultural practices, spiritual traditions, and interpersonal conversations, all of which interact to shape the meaning of mourning for a given individual" (p. 248). In the meaning-making literature, language, sociocultural factors, and time are three factors consistently shown to influence meaning-making in response to a range of life events.

### 3.3.4.1 Language

Language is one important system of meaning-making, just as the process of meaning-making and its outcomes are revealed using language. Various authors have written about the centrality of language to meaning-making, and the significance of narrative analysis and interpretation in enhancing our understanding of the ways people attribute meaning to lived experiences (Bruner, 1990; Shaw, 2004).

Language is influenced by many things and thus tells us something about how people interpret experiences and understand phenomenon in the context of history, culture, and society. Language is influenced by dominant discourse, with some ideas and descriptions given privilege over others.

Just as the active use of language in meaning-making is of interest, so too, is the absence of language for describing experiences and phenomena about which very little has been spoken or written. How does the unavailability or unsuitability of language to speak of problems like DPV and other forms of parent abuse impact on parents? Holt (2009) explored how parents constructed their experiences of parent abuse, and how this meaning-making influenced their subjectivities and parenting practices. She found that parents described experiences of anxiety, depression, and chronic stress and she wondered if the impact of parent abuse on emotional wellbeing was influenced by not having language to communicate their experiences.

### 3.3.4.2 Social and culture influences

Meanings are sensitive to sociocultural factors and are influenced by moral dictums (Singer, 2004). Meanings arise from specific circumstances and in our exchanges with others (Bruner, 1990). Dominant meanings associated with parenthood provide an example—and one that is particularly relevant to the present study—of the strength of social and cultural influences. Becoming a parent and raising children is a very important basis for meaning. Indeed, parenthood may be one of the most successful ways of meeting the modern human need for meaning (Baumeister, 1991). Parenting practices are strongly influenced by culturally imposed meanings about parental responsibility and commitment.

Culturally and socially imposed meanings of parenthood have particular significance when considering the phenomenon of parent abuse and the impact on meaning-making. Holt (2009) prefaced her discussion about parent abuse by describing how popular discourse, political, and legal systems overwhelmingly position parents "as contributory agents to their child's actions, and, in many cases, positioned in tandem with them through constructions of 'problem families'" (p. 2). A point of view, that she remarked has been strongly reinforced by prevailing research paradigms that have produced a range of risk factors associated with parenting behaviours and styles believed to contribute to youth crime (Holt, 2009). Beyond Holt's comments, it is reasonable to assume that gender socialisation influences how parents, both mothers and fathers, construct meaning from the abuse.

Mothers in western culture are socialised to accept responsibility for their children's development and actions, to a greater extent than fathers (Weaver & Coleman, 2005). When children engage in behaviours that are outside acceptable parameters, mothers are frequently considered to be responsible for this outcome—a phenomenon known as mother-blaming. Themes of mother blame permeate western literature, film, and policy, and have done so for decades. Mothers have been blamed for a host of psychological and social problems, "ranging from autism and serial murder to racism and the national debt" (Satter, 1999, p. 501). In a paper prepared by Garey and Arendell (1999) mother-blaming was ordered into the various forms it has taken over the decades. For example, in the 1960's mothers were blamed for youth drug use, sexual activity, and most other forms of rebellion. The mother-blaming phenomenon has been critiqued by a number of scholars (Caplan, 1998; Thurer, 1993) who have argued that mother-blame creates a great sense of guilt and anxiety in women with children, while ignoring important social and cultural

factors that impact on children's wellbeing. Within the field of feminism the mother-blame problem is linked to deeply entrenched mothering beliefs that contain and promote idealised notions about mothers and mothering (Singh, 2004). Despite the efforts of feminist scholars and others involved in the women's movement, a review of journal articles showed that mother-blaming continued to be a strong theme in academic writing during the 70's and 80's (Caplan & Hall-McCorquodale, 1985). It appears that less has been written about mother blaming in recent years, perhaps indicating that there has been a reduced emphasis on mother blaming in academic writing and popular social discourse. Alternatively, a decline in mother blaming may reflect a shift in perceptions of responsibility for misconduct and other problems in children and young people, from mother blaming to father blaming. However, a literature search for father blaming produced only a few references, suggesting that social researchers and writers have been less concerned about this issue. Placing blame on fathers may be socially and academically acceptable and therefore not identified as a distinct issue. When father blaming has been described, it appears to be in the form of authors commenting on a developing political trend toward criticising fathers who are absent from their children's lives, and holding them responsible for a host of social difficulties, including youth offending (Lefever, 2011; Mahadevan, 2011).

Various qualitative studies on parent abuse have demonstrated that mother blaming, or at least mothers perceiving that they are being blamed, has been a consistent and significant finding. Mother and father blaming, and other social and cultural influences likely make it harder for parents to acknowledge their victimisation, seek and gain support, or develop a framework of meaning around their parent abuse experiences.

### 3.3.4.3 Meaning-making across time

Meanings are not static but are constantly reconstructed through a process of self-reflection (Polkinghorne, 1988). The capacity for self-reflection may be influenced by a range of factors, including time. Meaning is said to have multiple levels, with deeper levels of meaning believed to develop over time (Baumeister, 1991). According to Singer (2004), meaning-making and subsequent wisdom involves "ego development, personal adjustment, stress-related growth and maturity" (p. 446). Meaning-making activity is believed to decrease as meaning is made (Park, 2010).

### 3.3.5 The relationship between academic theories of parent abuse and participant meaning-making

Aside from the present investigation, only a small number of parent abuse studies have explored parent explanations and meaning-making (Howard & Rottem, 2008; Jackson, 2003; Stewart et al., 2007). Most of the parent abuse literature has reflected meaning-making of a scholarly and empirical nature. In an earlier section (3.2), I discussed the ways in which researchers and authors have offered explanations for, and given meaning to, parent abuse.

Meaning-making influences research design and subsequent theorising, which in turn influences societal and individual meaning-making. Take, for example, the transmission of parenting theories (of varying quality) through the popular genre of reality television. Television programmes such "Supernanny" (Ricochet Entertainment, 2005) are based on stories about parents who are challenged by their children's behaviour, invite audiences to witness "real" human experience, and are generally accompanied by an "expert" commentary on misbehaving children and maladaptive parenting practices. I argue that

increasing access to popular theoretical explanations through various media has an impact

on individual meaning-making. I will explore this further in the findings chapters, when I

provide accounts of participants' explanations for the violence and the factors that have

influenced their meaning-making.

## 3.4 The Impact of Parent Abuse

Once again, the dearth of related research limits current understanding of how parents who

have experienced DPV and other forms of parent abuse are affected by, and react to, the

abuse. What is well established with respect to family violence in general, is that all forms

of family-based interpersonal violence can be highly distressing, resulting in both physical

and emotional trauma.

### 3.4.1 Trauma

Trauma can be defined as "suffering that fragments the psyche and body's self defence

mechanisms" resulting in a range of symptoms (Williams, 2006, p. 321). Posttraumatic

stress disorder (PTSD) is a serious anxiety disorder, and may develop when a person

experiences a traumatic event or series of events. PTSD can develop in response to a range

of traumatic stressors, including experiences of interpersonal violence. Traumas that are

perpetrated by our loved ones often have the most enduring negative impacts (Allen,

2001). People affected by interpersonal violence can experience multiple symptoms across

a range of domains including affective, cognitive, behavioural, and somatic (Zucker,

Spinazzola, Blaustei, & van der Kolk, 2006). Symptoms of PTSD include pervasive and

intense emotional distress related to the trauma, along with a persistent re-experiencing of

the traumatic event, avoidance of situations and stimuli associated with the trauma, and increased arousal (American Psychiatric Association, 2000).

The negative impacts of chronic abuse on emotional and physical health have been well documented (Crofford, 2007), although much of this literature pertains to women who have experienced partner violence. While different types of trauma can have unique and specific sequelae (Park & Ai, 2006), it seems reasonable to hypothesise that mothers (more often affected by parent abuse than fathers) suffer adverse consequences similar to those seen in females experiencing partner violence.

Chronic traumatisation refers to "traumatic events occurring over time periods ranging from months to years" (Kaysen, Resick, & Wise, 2003, p.249). The existing literature on parent abuse demonstrates that repetitive acts of abuse are common. Repetitive and cumulative experiences of abuse can lead to complex trauma reactions (Williams, 2006).

There are a number of theories that attempt to explain how trauma impacts on lives. Park, Mills, and Edmondson (2010) offered an overview of several of these, including Horowitz's (1986) stress response theory, Janoff-Bulman's (1992) shattered assumptions theory, and Foa, Steketee and Rothbaum's (1989) fear networks theory. These and other cognitive theories place an emphasis on the deleterious way in which traumatic experiences impact on a person's belief structures. Park et al. (2010) developed the shared assumptions of existing theories further by adding that trauma not only impacts on belief structures but also violates a person's life goals. Park (2008) had earlier argued that goal violation is more strongly related to post-trauma distress than is the violation of beliefs.

The meaning-making model developed by Park and colleagues (Park & Ai, 2006; Park et al., 2010) provides a framework for considering how distress develops when traumatic events are discrepant with global meaning. In a recent study of 130 college students who had experienced a trauma, Park et al. (2010) found that appraisals of the degree to which traumatic events violated one's beliefs and goals was fairly strongly associated with posttraumatic stress disorder, with the results mediated through individuals' negative beliefs about self and the world. This research highlighted "the importance of the meaning individuals assign to traumatic events, particularly the role of meaning violation" (Park et al., 2010, p. 1).  The level of trauma and distress a person will experience is influenced by the degree of perceived discrepancy between appraised meaning associated with the traumatic event, and their global meaning or worldviews—the greater the discrepancy, the greater the impact of the experience (Park & Ai, 2006).

The meaning-making model has relevance when considering participants' narratives of abusive experiences and the impacts of such on their everyday lives, their relationships, and their sense of personal identity. Abusive behaviour by one's child represents a significant departure from commonly held beliefs, ideals, and goals related to parenting. Because parenting is very often a central part of an adult's identity and self-worth, DPV and other forms of parent abuse can have a considerable impact.

### 3.4.2 Grief and loss

Existing parent abuse literature demonstrates that parents are affected in a range of ways, with themes of loss (loss of identity, loss of relationships, loss of dreams, loss of parenting confidence) having been a prevalent finding (Bonnar, 1995; Howard & Rottem, 2008; Jackson, 2003; Paterson et al., 2002). Although studies have shown that grief can have

many causes and outcomes (Dallas & Vetere, 2009), theories of grief and loss are generally situated within the body of literature that relates to human reactions to death and dying. Early models of grief and loss tended to be prescriptive and linear with little applicability to the diverse forms that loss and grief may take. To show this, Goldsworthy (2005) provided an analysis of historical and contemporary theories of grief before discussing the concepts of grief and loss in relation to losses other than death and dying. She recommended that researchers and practitioners should take a meaning-making approach to grief and loss, acknowledging the diverse forms that loss can take, and accepting that grief can be a reaction to any type of loss.

Grief can be a reaction to losses that are subtle, symbolic, and unrecognised. Grief that is not publicly recognised is often referred to as disenfranchised grief. The concept of disenfranchised grief is based on the notion that societies possess norms for grieving or rather "grieving rules" that identify "who, when, how, how long, and for whom people should grieve" (Doka, 1989, p. 4). However, grieving rules do not always correspond to the nature of relationships or the experience of loss, resulting in disenfranchised grief. Doka (1989; 2002) explained that disenfranchised grief may happen after bereavement for five reasons. Firstly, the relationship is not recognised or socially sanctioned, as for example, in the case of extramarital affairs and other forms of non-traditional relationships that are not considered to be acceptable within a given society. Secondly, disenfranchised grief may develop when the loss is not recognised or considered to be important, such as, when a relationship changes in a significant and meaningful way inducing a sense of loss. Doka's third reason for disenfranchised grief related to situations where the grieving person is not recognised. For example, in cases when society fails to acknowledge the persons need or capacity to mourn because of factors such as age or intellectual capability.

Disenfranchised grief may also result when the circumstances surrounding the death, such as deaths resulting from stigmatised diseases or suicide, inhibit the seeking or the offering of support. Finally, disenfranchised grief can occur when the bereaved person's style of expressing grief violates the grieving rules of society. For example, the grieving person is perceived to be expressing either too little or too much grief in response to a death. Thompson (2002) wrote that disenfranchised grief is an important concept because it reveals how grief is not simply a psychological issue. Rather, there is an important social dimension to loss and grief. Grief may be intentionally hidden due to social messages that contribute to embarrassment and fear of negative judgement by others, a phenomenon that is sometimes described as self-disenfranchising grief (Kauffman, 1989).

Grief, often disenfranchised, can result when relationships are lost, or changed in significant ways through the impact of interpersonal violence. Reports on parent abuse have consistently referred to the hidden and silent nature of this problem. Abuse at the hands of one's child can cause embarrassment and shame, thus reducing the likelihood that parents will seek support. Consequently, grieving for the losses associated with parent abuse is likely to be a private and lonely task.

In the absence of studies looking specifically at DPV, little is known about loss and grief responses to having one's property damaged or stolen by a family member. There has, however, been research undertaken that has examined the impact of losing possessions as the result of crime (for example, burglary) and natural disasters. Considering the findings of a number of these studies, Ferraro, Escalas, and Bettman (2010) concluded that humans "react to the loss of possessions with intense feelings; they grieve for their loss", often because the things we possess reflect what we find meaningful in life (p. 1). Earlier, Belk

(1988) wrote about the relationship between possessions and identity, describing how people can regard the things they have as an extension of themselves. In this way, possessions may become an important source of identity. Accordingly, the loss of these things can result in the diminishing of self (Sayre, 1994). Parents and caregivers who have experienced their children damaging or destroying special or symbolic possessions may similarly be impacted in this way. Again, their loss and grief may be disenfranchised because others fail to recognise the significance of their relationship with the lost possession.

### 3.4.3 Stigma

Related to the issue of disenfranchised grief is the experience of stigma in cases of parent abuse. Goffman, in his seminal work entitled *Stigma: Notes on the management of spoiled identity* (1963), described stigma as the process by which a person's normal identity is influenced, or rather spoiled, by the negative reactions of others. Goffman referred to two distinct forms of stigma—discredited and discreditable stigma. The first type of stigma is associated with obvious marks or disabilities that lead others to consider the person to be different or inferior. Discreditable stigma relates to problems that are unseen and unknown (Goffman, 1963). It is this latter form of secret stigma that can develop in cases of parent abuse whereby the abuse is carefully concealed by parents who fear others will find out. Consequently, parents may engage in, what Goffman (1963) termed information management in an effort to conceal the behaviour and its consequences from others.

Holt (2012) commented on how research into the issue of parent abuse has been hampered by what she described as a "double stigma". Parents may develop stigma associated with experiencing a form of family violence, which is then compounded by stigma related to

parenting a child with serious behavioural problems, together decreasing their preparedness to discuss their experiences with researchers. Furthermore, parents' experiences of stigma associated with parent abuse mean they are less inclined to seek support with this problem (Tew & Nixon, 2010), a finding that will be discussed further in the next section.

## 3.5 Parent Coping Responses

Coping is commonly defined as "the cognitive and behavioral efforts made to master, tolerate, or reduce external and internal demands and conflicts among them" (Folkman & Lazarus, 1980, p. 223). A paucity of research means that relatively little is know about how parents experiencing parent abuse cope with their children's violence. Furthermore, the broader area of family violence is similarly lacking in coping focused research (Waldrop & Resick, 2004), necessitating a reliance on the larger body of literature on coping in response to everyday stressors and disturbances. There are various difficulties with simply applying findings from general coping research to parent abuse. This is because research findings have often been based on human coping in the face of ordinary life stressors, and not extraordinary experiences, like parent abuse, with unique contextual issues that impact on coping. Furthermore, studies that have looked at coping in the face of family violence generally involve participants who are drawn from help seeking populations, and therefore may not represent the wider population of people affected by family violence (Waldrop & Resick, 2004). This is a particularly relevant point, given that those experiencing parent abuse are often too ashamed or afraid to seek help (Bailey, 2002; Bobic, 2002; Paterson et al., 2002).

Nonetheless, findings from family violence studies on coping may be pertinent to parent abuse. For example, Waldrop and Resick (2004) investigated coping among female victims of intimate partner violence in an attempt to address the complex connections between context, stress, and coping among this population. They found that contextual factors were relevant in the selection of coping strategies and that the women in their study typically used a variety of strategies, with varying degrees of success, to deal with the abuse. Their research has applicability to the issue of parent abuse, because contextual factors such as the frequency and severity of abuse and the quality of available social support are likely to have implications for coping among abused parents.

### 3.5.1 Meaning-making and coping

A search for literature pertaining to the interrelationship between meaning-making and coping reveals that meaning-making has been considered to be both a factor that influences coping and outcomes, and a coping strategy (Aldwin & Yancura, 2004; Park, 2010). Meaning-making coping has often been described as efforts to cognitively redefine, reappraise, or work through experiences (Park, 2005).

Much of the meaning-making literature has been based on studies of post-bereavement coping and recovery. Given the role that grief and loss may play in parents' experiences of DPV and other forms of abuse, theories of coping following loss were considered relevant to the present study. One such theory was Stroebe and Schut's (1999) dual process model of coping following bereavement. This model was built on the premise that following bereavement an individual faces a range of emotional, loss-oriented tasks (for example, focusing on and processing aspects of the loss) and practical, restoration-oriented processes (for example, managing the financial issues that have arisen since the loss and

attending to other life changes). Stroebe and Schut (1999) theorised that most people will oscillate between dealing with emotional challenges and suspending their grief and distress to deal with practical issues. According to their model, oscillation enables respite from dealing with emotional stressors and is deemed necessary for "optimal adjustment over time" (Stroebe & Schut, 1999, p. 216). Although originally developed to describe the manner with which individuals respond to the death of a loved one, the model seems to be applicable to other loss experiences and trauma, including parent abuse. The dual process model of coping with bereavement offers a framework for understanding the adaptive challenges faced by parents of abusive children, and may explain how parents who have been deeply affected by the abuse, continue to carry out the numerous daily tasks of parenting and fulfil the requirements of their other roles.

### 3.5.2 Help seeking

Help seeking is a form of coping. The literature on help seeking offers various theories, considering a range of psychological and social factors, although a framework for understanding help seeking in the event of parent abuse is yet to be developed. Thus, it is necessary to draw from current general models of help seeking in order to elucidate factors relevant to the phenomenon of parent abuse. Help seeking models consistently refer to individual cognitive processes, including "problem recognition and definition, the decision to seek help, and the selection of a help provider", and the manner in which each cognitive step informs the others (Liang, Goodman, Tummala-Narra, & Weintraub, 2005, p. 73).

Shannon, Logan, Cole, and Medley (2006) studied women who had experienced intimate partner violence and found that help seeking is influenced not only by individual factors, like a woman's recognition that a problem exists, or her attitude to help seeking, but also

by cultural values and norms, and social factors, including the availability of help. Meaning-making is relevant here also. Styles of meaning-making will influence help seeking behaviour and be influenced by help seeking experiences. For example, if parents conceptualise their parenting as the cause of their children's violence then they are likely to be unwilling to seek help. Similarly, unhelpful or hurtful reactions from people from whom help or support is sought, may be given negative meaning by a parent and lead them to feel they are blameworthy. The decision to seek assistance with a problem involves a mental "weighing-up" of the benefits of asking for help versus the potential psychological and social costs (Wacker, Roberto, & Piper, 2002).

As explained in chapter one, an important objective of this study was to explore participants' help seeking behaviours and experiences. Information relating to participants' help seeking is provided in the findings chapters presented later in this thesis.

## 3.6 Conclusion

Researchers, in their efforts to understand parent abuse, have relied on psychosocial theories originally designed to explain other types of youth and family violence. As demonstrated, no single available theory appears to adequately explain parent abuse. And while certain theories may be popular, there are risks in adopting them without giving due consideration to some important limitations. Perhaps the most frequently cited assumption has been that parent abuse has its genesis in modelled violence. Exposure to adult-perpetrated family violence does not inevitably lead to parent abuse or other forms of child and youth violence. Indeed the relationship between childhood exposure to adult violence,

whether directly or indirectly, and the onset of violence in children is not a simple one. Accordingly, existing data on this issue should be approached with caution.

Those who have investigated parent abuse have tended to emphasise single-factor theories. Individual and family explanations for parent abuse have been most popular with researchers and writers. However, these explanations, when considered in isolation fail to reflect the complexity of this phenomenon. A comprehensive understanding of parent abuse requires an acknowledgement of the interplay of multiple factors and a move away from parent/family blaming. While multidimensional approaches such as nested ecological theory enable a more complete conceptualisation of parent abuse, they present significant methodological challenges. To date little is known about which combinations of variables best account for parent abuse, and this lack of knowledge impedes efforts at prevention and intervention.

Seeking out parents' explanations is another valuable step toward advancing our knowledge of parent abuse. The present study privileges the personal theorising of participants by adopting meaning-making as a theoretical and interpretative framework. The positioning of meaning-making in this theory chapter, and in subsequent chapters, reflects my developing meta-theory—that meaning-making is an important tenet when considering DPV and other forms of parent abuse.

The relative dearth of parent abuse research also necessitates theorising about the impact of this type of family violence on parents, and their responses. Findings from studies of intimate partner violence have produced various theories and models, many of which have

relevance to parent abuse. Here again, however, the unique nature of this phenomenon means that caution should be shown when applying these findings.

Grief and other forms of emotional distress are influenced by the meanings people assign to adverse experiences.  Thus, emotional outcomes following parent abuse will be related to socio-cultural influences on meaning-making. It seems logical to suggest that impacts might be similar to those created by other forms of interpersonal violence and trauma. However, given the unique nature of the parent-child relationship and the paradox between parental power and parental victimisation, it is equally reasonable to speculate that impacts will differ. In the case of parent abuse, parents are not likely to be wholly passive, nor are they entirely in control.

Lempert (1997) studied abusive adult relationships and found that victimisation and agency, love and violence, can exist simultaneously in interpersonal relationships. Her work has relevance to the problem of parent abuse and offers a framework for considering the complex nature of relationships in cases of parent abuse, particularly how this paradox impacts on parent meaning-making and outcomes.

I posit that meaning-making is one of the most important features distinguishing parent abuse from other experiences of interpersonal violence. Meanings given to parent abuse by affected parents and researchers alike, characteristically place parents (most commonly mothers) at the centre of explanatory models. In the findings chapters I will explore participant meaning-making (processes and outcomes), and the influence of such on the way in which DPV has impacted on participants and their responses to this problem.

# Chapter Four: Parent Abuse—A New Zealand Context

## *4.1 Introduction*

As discussed in the literature review chapter, current knowledge of parent abuse is largely based on the findings of studies exploring the experiences of parents and young people living in northern hemisphere countries. My research involved only New Zealand participants, and therefore the findings reflect aspects of New Zealand society, culture, and politics.

In chapter three, theories of parent abuse were presented, including nested ecological theory as an example of an ecological model applied to the complex problem of parent abuse. Ecological perspectives that consider the various levels of influence on parent abuse provide a useful framework for understanding the factors that are unique to any given population.

Using an ecological perspective it is critical to acknowledge the interplay between political and societal factors and individual level factors such as family relationships. It is appropriate then, to offer a brief description of New Zealand families and the legal and social influences on family life, particularly factors that are relevant to the problem of parent abuse in this country, while also positioning this discussion within a broader international context. In this chapter I provide a New Zealand background for the remaining sections of the thesis, introducing the idea that parent abuse does not only reveal a relationship between children and parents, but also reflects and generates

interactions between families, political forces, and social agencies, and that responses (social and legal) to parent abuse occur with this context.

## *4.2 New Zealand Families*

New Zealand is an ethnically diverse society. Māori are the indigenous people of New Zealand who make up around 15% of the population and are the second largest ethnic group. People of European descent, commonly referred to as "Pākehā", make up around 75% percent. New Zealand is also home to smaller populations of people who identify as Pasifika, Asian, and a range of other ethnic and cultural groups (Statistics New Zealand, 2011).

Important historical events, in particular the establishment of the first European communities in the 1800s and the signing of the Treaty of Waitangi (the founding document of New Zealand) in1840, and international events (for example, world wars, financial crises and advancements in industry and technology), continue to influence New Zealand society today. Biculturalism is a central underpinning imperative of the New Zealand government and society, reflecting the Treaty's binding expectations of a relationship between the nations founding Māori and European cultures. Durie (2005) explained that "biculturalism in New Zealand can be defined by its objectives" (p. 4), and identifies six such aims: i) the acknowledgement and respect of things that are distinctly Māori, such as language and custom; ii) to develop state operated services and facilities in a manner that is more amenable to Māori; iii) to increase Pākehā participation in Māori culture; iv) to include Māori in national institutions, by for example, establishing Māori seats in Parliament; v) to advance the settlement of Māori land claims; and vi) to unite

aspects of Māori and New Zealand European cultures to create a common national identity. These aims have only been partially fulfilled. To date, emphasis has largely centred on increasing recognition of Māori land rights and custom law, and developing Māori governance institutions (Durie, 2005). The issue of biculturalism continues to be debated in New Zealand, with some commentators suggesting that the aforementioned objectives of biculturalism require further advancement. Conversely, others have argued that efforts to achieve biculturalism have gone too far in promoting Māori culture, at the expense of other cultures in New Zealand (Hayward, 2012).

In New Zealand, the construct of family is represented in various ways, ranging from Western models of the nuclear family to whānau—the Māori-language word for extended family groups, with implications for child rearing and other aspects of family life. In traditional Māori families, extended whānau share responsibility for raising, teaching, and disciplining children whereas New Zealand European families have historically subscribed to the idea that biological parents are largely, if not solely, responsible for child rearing. Both models have been challenged by a host of social and political factors. For example, increasing urbanisation has meant traditional Māori child rearing patterns are declining, and both Māori and European communities are experiencing an increase in the number of single parent and blended families (Cribb, 2009). In 2006, 28% of New Zealand families were headed by sole parents, 84% of which were mother-only households. This figure compared with households in the United States (also 28%), the United Kingdom (25%), Australia (22%), Canada (22%), and Ireland (21%), all surveyed that same year (Ministry of Social Development, 2010).

**4.2.1 New Zealand family policy and services**

In New Zealand, various government agencies have been established that share a commitment to protecting and improving the lives of the New Zealand people. Agencies that have a particular focus on supporting and protecting children and families include the Ministries of Social Development, Health, Justice, Women's Affairs, and Youth Development. In New Zealand, the Families Commission Act (2003) defines the family under Section 10(2) as including "a group of people related by marriage, blood, or adoption; an extended family; two or more persons living together as a family; or a whānau or other culturally recognised family group" (Ministry of Social Development, 2004, p. 14). This act directs the Families Commission—an autonomous Crown entity developed with the role of advancing the understanding of the needs of New Zealand families, supporting family-based research, and consulting with other government agencies to support improved family outcomes (Families Commission, 2009).

The Social Report 2010, published by the Ministry of Social Development provided a picture of how New Zealanders "are faring on a range of important social indicators" when compared with people in other developed countries (p.3). In this document, life satisfaction in New Zealand was reported to be "very high overall" (Ministry of Social Development 2010, p. 124) yet, New Zealanders are affected by a range of social and environmental problems including health-related concerns, crime, poverty, family breakdown, and other risk factors that all to some extent, impact on New Zealand children and young people. For example, compared to other countries in the western world, New Zealand has relatively high rates of youth suicide, substance abuse, and adolescent pregnancies (Denny et al., 2011).

As noted above, poverty is a social problem affecting a significant group of New Zealand children. Dwyer and Fletcher (2008) reported that New Zealand's child poverty rate was comparable to countries including Ireland, Canada and Germany, lower than Italy and the United States, higher than rates of child poverty in Australia and the United Kingdom, and three times the average rate of countries from the Nordic region, including Finland, Sweden, Norway and Denmark. Considering the ethnicity of children living in poverty in New Zealand, the authors found that Māori and Pasifika children are more likely than Pākehā children to be residing in impoverished households.

Although relatively geographically isolated, New Zealand is influenced and impacted by international problems, including financial crises and political unrest. Similarly, New Zealanders are influenced by dominant international trends in family life, parenting, and youth development. While relatively little is known about intrafamily functioning and the impact of levels of social, political, cultural, and international influences on families, information is being gathered that demonstrates general risk and protective factors, and the interaction of such in the development and maintenance of various social problems. The New Zealand government funds some of this research, undertaken largely through the Centre for Social Research and Evaluation (CSRE) in the Ministry of Social Development. The CSRE places an emphasis on investigating factors that promote positive social outcomes for children and young people and their families (Ministry of Social Development, 2004). A significant body of research relating to families has been undertaken by non-government organisations and by academic staff and students within New Zealand universities and social research centres including the Children's Issues Centre at the University of Otago and the Roy McKenzie Centre for the Study of Families at Victoria University of Wellington.

## 4.3 Family Violence in New Zealand

Of relevance to the present study is the problem of family violence. It would appear that despite numerous government initiatives, family violence remains a serious concern for New Zealand families. Various New Zealand studies have produced family violence prevalence and pattern data that parallel findings from other countries (Martin, Langley & Millichamp, 2006). Martin et al. (2006) reported on intimate partner violence in New Zealand families, using data from the Dunedin Multidisciplinary Health and Development Study—a longitudinal study of New Zealand children born in Dunedin between 1 April 1972 and 31 March 1973. Nine hundred and sixty-two participants completed an interview designed to investigate exposure to family violence. The authors found that a quarter of participants had witnessed physical or threatened violence between their parents (Martin et al., 2006). Their findings were based on retrospective data. This may limit the epidemiological relevance of the research, especially because increasing public education on family violence over the past two decades may have influenced rates in recent years.

Police statistics revealing a 1.2% increase in recorded family violence assaults for the 2010 calendar year were reported in a media release by the Families Commission in April 2011. The term "assaults" was used in this report, however, the nature of the violence was not specifically defined. Although an increase was reported, this was construed as an indicator of improved rates of reporting and action following an increasing national focus on family violence through various public campaigns, an escalation in anti-violence action by many organisations throughout the country, and better police procedures for dealing with and recording family violence (Families Commission, 2011).

The most significant effort in recent years to influence family violence rates in New

Zealand has been the "It's not OK" campaign launched in 2007 by the Taskforce for

Action on Violence within Families. This campaign is the product of a collaboration

between the Ministry of Social Development and the Families Commission, in association

with organisations including the New Zealand Police and various community groups. The

campaign aims to show that family violence is a serious social problem for all New

Zealanders, and to promote social change by encouraging people to talk about this issue

and take action to prevent violence within families. Evaluative research has been

employed widely throughout the campaign to assess both impact and effectiveness, with

findings revealing that the campaign is making an important difference by both raising

awareness and promoting action (Point Research Ltd., 2010; www.areyouok.org.nz). For

example, McLaren (2010) found that New Zealanders were aware of the "It's not OK"

campaign and they saw the messages as relevant to them.

### 4.3.1 Care and protection of New Zealand children

In New Zealand, adult violence toward children is another serious social concern. The

country has an average of 10 child deaths due to family violence occurring every year, and

a very high number of children and young people admitted to hospital as a result of

assault, maltreatment or neglect by caregivers (http://www.childrensactionplan.govt.nz/).

A comparison of countries in the Organisation for Economic Co-operation and

Development (OECD) found that New Zealand has lower rates of child deaths due to

maltreatment compared to the United States and notably higher rates when compared to

Nordic and most Southern Mediterranean countries. New Zealand's rate of child abuse

related deaths is comparable to that of Belgium, France, and the Czech Republic.

The New Zealand government has developed and adopted laws, polices, and practices that promote the wellbeing of their youngest citizens. In 1993, New Zealand ratified the United Nations Convention on the Rights of Children (UNCROC) and a decade later the enactment of the Care of Children Act (2004) recognised the rights of New Zealand children and young people. Adherence to this important section of legislation along with the requirements of UNCROC is monitored by the Ministry of Youth Development. Additionally, the New Zealand government appoints a Children's Commissioner whose role is "to make sure that children's rights are recognised and supported and that children are treated with respect, dignity and fairness" (Pawson, 2010, p. 5).

Two central social institutions influence the development of New Zealand's young people—the family/whānau and the education system. New Zealand parents are responsible for providing for their children's needs until their children are 16 years of age and children and young people are legally required to attend school until they are 16 years of age (Pawson, 2010). In 2007, the New Zealand Government passed a bill (commonly referred to as the anti-smacking bill) that removed from the Crimes Act the statutory defence of "reasonable force" to correct a child. Consequently, New Zealand parents are not legally able to justify the use of physical discipline. Cases of neglect and abuse of New Zealand children and young people are managed by the New Zealand Police and by the child protection service of the New Zealand Ministry of Social Development— Child, Youth and Family.

Like other western countries, New Zealand law and policy makers have grappled with complex factors relevant to child welfare such as children's rights and parent/family responsibility. In the 1980's, New Zealand child welfare laws and social policies and

practices were considered to be outdated, prompting the development of the New Zealand

Children and Young Persons and their Families Act (CYPFA, 1989). This Act placed

emphasis on partnership between family and state.

One of the most significant outcomes of the new Act was the introduction of family group

conferences as a means of reinforcing this partnership by strengthening family groups to

take steps to care for their children, thus reducing the intervention of state services. Family

group conferences were held in response to both care and protection matters and youth

justice cases. The family group conference model went some way toward answering the

concerns of Māori groups who argued that existing laws and practices failed to honour the

principles of the Treaty of Waitangi by ignoring the customs, values, and beliefs of Māori

people (Doolan, 2007). Family group conferences reintroduced traditional Māori methods

of whānau (extended family), hapu (clan), and iwi (tribe) decision making, and are based

on the core assumption that "children are generally best cared for by their families"

(Lupton & Nixon, 1999, p. 61). Other countries have watched the changes to New

Zealand's child welfare and youth justice responses over the past few decades with

interest. In particular the family group conference model, which has been adopted and

adapted by a number of countries (Dyson, 2007; Lynch, 2008), including Australia,

Canada, the United Kingdom, the Netherlands, South Africa, and the United States

(Nixon, Burford, Quinn, & Edelbaum, 2005). In a later section, youth justice family group

conferences are described in more detail and in relation to the problem of parent abuse.

Care and protection family group conferences are not discussed in this thesis.

## 4.4 Parent abuse and Other Forms of Youth Violence in New Zealand

As previously mentioned, New Zealanders are affected by international politics, events, social changes, and trends. Equally, global influences shape the lives of New Zealand children and young people (Melnick & Jackson, 2002; Wyn & Harris, 2004). New Zealand youth are influenced by European and North American trends in fashion, music, literature, and film, which are all increasingly available to them. Kirsh (2012) reported that "the homes of today's youth are filled with a variety of media options" (p. 73) before describing patterns of media ownership across the industrialised world. For example, more than 99% of homes in New Zealand, the United States and the United Kingdom have a television. New Zealand's internet access rate (72% of households), is below that of both the United Kingdom (79% of households) and the United States (84% of households).

Considering the earlier discussion about global influences on New Zealand youth, one could hypothesise that if parent abuse is becoming increasingly acceptable youth behaviour in other parts of the world, New Zealand youth are likely to be influenced by this. Yet, here again, a lack of related research means that this is purely speculation.

What can be said with confidence is that the problem of youth violence and other offending is attracting increasing government attention. It is estimated that every year between 7,000 and 10,000 youth receive government-funded services due to severe behavioural problems, prompting the development of the Inter-agency Plan for Conduct Disorder/Severe Antisocial Behaviour 2007-2012 (Ministry of Social Development, 2007). This plan was based on the findings of earlier reports revealing problems with service delivery, particularly gaps in availability of specialist interventions and poor coordination between services, and highlights the importance of empirically-supported,

culturally appropriate interventions offered in a timely fashion (Ministry of Social Development, 2007).

Youth violence can take many forms and impact on various groups, although when describing violent youth, authors frequently provide extensive information on the personality and behavioural characteristics of the young people they have studied, but little detail about the victims of the violence. Parent abuse, in particular, has received relatively little attention from youth violence researchers. While there are various sources of statistics relating to youth offending in New Zealand, there are no complete, reliable, or consistent sources of data on police, or other agency involvement in cases of parent abuse. New Zealand is not alone in this regard, with few countries, other than Canada (Canadian Centre for Justice Statistics, 2007) and Australia (Victim Support Agency, 2008), gathering or publishing police-reported data on parent abuse. For example, Hunter et al. (2010) evaluated government responses to parent abuse in the United Kingdom and found "a resounding silence on the issue within both the academic and policy arena" (p. 273).

In a report prepared by Chong (2007) entitled *Youth justice statistics in New Zealand 1992-2006*, the number of police apprehensions were recorded under several broad offence type categories including offending that is "violent", or "other against people", with no classifications indicating who the victim was in each incident. Offending may also be recorded as offences against property. Yet, here again, it is unclear what property is damaged or stolen, or who the victims of this offending are.

As mentioned in chapter two, globally, youth violence findings are generally based on clinical or judicial studies of delinquent youth with well established patterns of serious

violent behaviour requiring intervention by social services (for a summary of youth violence studies see Department of Health and Human Services, 2001). Young people who abuse their parents may be adequately captured in this data, particularly if there is, as Cochran et al. (1999) discovered, significant overlap in factors shared by young people with generalised violence and those who commit violent offences against their parents. Conversely, however, Paterson (1999) reported that acts of parent abuse are, in many, an exception to otherwise non-aggressive interaction styles, making it less likely that these young people will come to the attention of social services such as the police. It is likely that milder forms of violence are not being captured in official statistics, and we are missing expressions of youth violence that occur within the home. Bailey (2002) cautioned that youth perpetrated forms of family violence were being missed in the clinical setting with parents commonly denying or minimising abusive behaviours by their children. In the absence of related data we can only speculate this to be the case in New Zealand. Furthermore, how this presumed level of under-reporting influences social attitudes, policy development, and service delivery, requires investigation.

Similarly, little is known of the experiences of New Zealand parents and caregivers experiencing parent abuse, who are prepared to enlist the help of others. Presumably they are supported by social welfare policies and practices delivered by the Child, Youth and Family service and other government agencies from the justice, health, and education sectors, although as discussed in chapter two, an extensive search found no examples of services designed specifically to support parents and caregivers experiencing parent abuse. Interestingly, each of the three ministry's  described above offer a website with a search option, however, when  parent abuse or a range of  alternative terms (as discussed in chapter two) were searched, no results were found on any of the three.

### 4.5 Police and Youth Justice Responses to Parent Abuse

There appears to be no current data relating to New Zealand parents' experiences of police or court intervention in response to parent abuse incidents. Reports from Australia show that when attending parent abuse incidents, the Australian police can make an application for an interim Intervention Violence Order. Data from the Australian state of Victoria for the 2009-10 period indicated that only 14% of callouts to family violence incidents where a young person was the offender resulted in this action being taken. Unfortunately, there are no reports about the other 86% of incidents, in particular, reasons why Intervention Violence Orders were not initiated by police. Additionally, there are no reports on the number of police initiated Intervention Violence Orders that were later finalised by the court, or the resulting conditions of these orders (Howard, 2011).

When New Zealanders under the age of 16 years come to the attention of the police due to violent behaviours they may be issued with a warning or be referred to the police diversion programme in cases considered to be minor or inconsequential offending. More serious or complicated offending may be referred on to Child, Youth and Family. In many of these cases, a youth justice coordinator will then convene a family group conference with the objective of developing a solution-focused, restorative justice process that brings together the young person, their extended family, and the victim(s) of the young person's offending. Family group conferences aim to hold the youth accountable while exploring methods for enhancing the young person's wellbeing, and changing their behaviour (Becroft, 2006). Youth justice family group conferences are intended to be youth-focused, family-led, and culturally responsive (Connolly, 2007). The final point is particularly relevant given that Māori and Pasifika youth are over-represented in New Zealand's youth

offending statistics (Chong, 2007). As previously mentioned, the New Zealand family

group conference model is highly regarded internationally as an effective method of

responding to both child abuse and neglect and youth offending. In 2006, over 9,000 youth

justice family group conferences were convened with agreement reached in 79% of cases

(Connelly, 2007). The construct of agreement and the broader issue of family group

conference effectiveness can be controversial, however. Ashley and Nixon (2007), writing

about family group conferences in the United Kingdom, suggested that more consideration

and effort were required by child protection and youth justice service providers to ensure

that the efficacy and success of their family group conferences were evaluated by the

criteria set by the children and families involved, rather than simply reflecting agency

demands and conveniences.

The effectiveness of youth justice family group conferences may also be judged by the

frequency with which family group conference agreements are maintained and plans

completed. Maxwell, Robertson, Kingi, Morris, and Cunningham (2004) explored post-

conference activities and compliance with family group conference plans in a New

Zealand sample. They found that a person (very often a family member) would be

nominated during the final stages of the conference to arrange the details of the plans and

to monitor their completion. Child, Youth and Family records of family group conference

plan completion were found to be incomplete in many cases, identifying a significant

service problem with data collection. Furthermore, often victims expressed feeling

disillusioned by the family group conference process because they were not advised of the

young person's progress with the plan, or they did not receive apology letters or reparation

within the expected timeframes.

In theory, care and protection and youth justice responses have moved from being state-driven to a child and family-centred model, with interventions such as family group conferences providing a vehicle for families to respond to, and overcome, family-based problems. However, the resulting model is not without criticism. For example, Stanley (2005) conducted a qualitative investigation of New Zealand statutory social workers and their experiences of assessment in child protection. Among other topics, participants were invited to speak about their involvement in family group conferences. Of interest, only a small number of the 50 participants who spoke about family group conferences, described using this process to assist with decision making. Most reported holding "predetermined ideas about the outcomes they defined as being in the best interests of the child" (Stanley, 2005, p. 192). While this finding relates to care and protection family group conferences, it may reflect a parallel issue within the youth justice system.  Indeed, earlier Maxwell and Morris (1993) had studied the outcomes of 692 New Zealand young people who had come to the attention of the police during 1990/91. Specifically they investigated a group of over 200 who had been referred for a family group conference and  identified several areas of concern: the finding that professionals had a tendency to take over the family group conference process; families lacked the necessary information to make informed choices; the rights of the young people were inadequately regarded during the process; the failure to inform and include victims; and the lack of resources to achieve the desired outcomes for young people and their families (Maxwell & Morris, 1993).

Maxwell et al. (2004) conducted research that aimed to identify factors associated with effective outcomes in the New Zealand youth justice system, and to evaluate the degree to which the aims of the Children and Young Persons and their Families Act (1989) were being achieved. One aspect of their study was to investigate satisfaction with family group

conferences across ethnic groups and then to compare reports from Māori with other ethnicities. They found no significant differences in satisfaction with, or outcomes from, family group conferences for Māori compared with other ethnic groups. Furthermore, overall their findings were largely positive, however, they did identify several important areas requiring improvement in practice. Notably, they found that commonly both youth offenders and the victims of their offending were not adequately or effectively included in decision making at family group conferences. This outcome occurred when conference coordinators did not take the time to create an environment to optimise their involvement (Maxwell et al., 2004).

Jackson and Morris (1999) had earlier researched user empowerment in family group conferences conducted in the United Kingdom, and concluded that the family group conference model in action was most beneficial when there was "adequate attention" given to the wishes and requirements of the young person and their family, rather than an emphasis on meeting "professional agendas" (p. 629). Inadequate information and resourcing were two additional factors shown to undermine family group conference outcomes. Similarly, Judge Andrew Becroft, New Zealand's Principal Youth Court Judge, who writes about this country's youth justice system, including the family group conference model, in a complimentary fashion, cautions that efforts to fully implement the intentions of the Children and Young Persons and their Families Act (1989) "are being thwarted by inadequate resourcing and inconsistent inter-agency co-operation" (Becroft, 2006, p. 122).

Therefore, the current legislation, at least in theory, represents a positive development toward empowering children and their families. However, important practice gaps may

exist, particularly when parents and extended families do not possess the desire or the capacity to provide the necessary care for children. This may be the case when parents are the recipients of abusive behaviour at the hands of their children. When a parent has been abused by their child, attendance at a family group conference may be a traumatic or unsafe experience, particularly if, as previously discussed, they are then expected to implement and monitor the resulting family group conference plan. Holt (2009) raised this issue in her article on the United Kingdom's youth justice response to parent abuse. She cautioned that outcomes, commonly Parenting Orders, place responsibility on parents, not only for their children's violence, but also for managing their children's compliance with their youth justice sentences. Holt (2009) explained that Parenting Orders are issued to the parents of young people in the youth court and generally require the recipient to attend a parenting programme with the aim of addressing parenting deficits that are believed to have contributed to their child's offending. Investigating the experiences of parents who had received a Parenting Order under these conditions, Holt (2009) found that parents of abusive children commonly felt overwhelmed by the expectation that they exert control over their children's behaviour, when they already felt powerless, and fearful that any attempts to do so could lead to violent reactions.

Some areas of the United States appear to be much further along in responding to parent abuse when compared to both New Zealand and the United Kingdom. For example, Seattle, Washington, where the Step UP programme was developed. Step UP has become a "nationally recognised domestic violence counselling programme" for young people who have been abusive toward family members. It is designed to integrate restorative justice principles and involves a partnership approach involving parents, police, the courts, and support agencies (www.kingcountry.gov/courts/step-up/). The programme is delivered

through the domestic violence court, and mandates children to participate in treatment aimed at teaching them to avoid using violence and abuse and begin to take responsibility for their actions. Additionally, parents are supported to learn how to respond to the abuse (Routt & Anderson, 2011). The programme has been evaluated in a number of ways and has consistently been found to produce positive outcomes, namely a reduction in the frequency of parent abuse by young people in the programme (Howard, 2011).

In the absence of New Zealand data and literature little can be said about how services such as the police and Child, Youth and Family respond to requests for assistance from parents abused by their children, or how parents in turn respond to these services. Perhaps the political shift over the past few decades toward empowering children is experienced by parents affected by parent abuse, as disempowering and devaluing of parents. Police and agency responses may be perceived as too "soft" and, therefore, minimising of the abuse (for example, the police diversion scheme), or alternatively too intrusive (for example, referral to a family group conference). It seems reasonable to speculate, however, that the various services that exist to support New Zealand families struggling with family-based problems will have policies and practices that are under-developed with respect to parent abuse interventions.

## *4.6 Conclusion*

An ecological framework was adopted in this study by looking beyond individual factors relevant to the problem of DPV, and recognising the interconnected relationships that exist between children/parents/families and a range of social, cultural, and political systems. For this reason, a brief description of New Zealand factors that are particularly relevant to the

problem of parent abuse in this country was offered as a means of contextualising the remaining sections of this thesis.

Over the past few decades New Zealand has advanced its laws, along with the policies and practices of government agencies, in order to be more responsive to the rights of children, and afford family and whānau greater power and responsibility for caring for their own children. Yet, in spite of numerous efforts to better understand and prevent family-based problems, New Zealand continues to experience a range of serious social problems, including family violence.

In recent years, various government campaigns have been launched, and reports published, to draw attention to both family violence and youth violence (Point Research Ltd., 2010). The most prominent of which being the "It's not OK" family violence campaign. Whereas the campaign intended to challenge notions that family violence is not only about physical forms of abuse and largely perpetuated by adult males against their partners and children, much of the media coverage has focussed on this form of family violence. Comparatively, parent abuse has received limited attention. Unfortunately, there continues to be little emphasis on parent abuse as a distinct form of either youth or family violence.

Consequently, it is likely that New Zealand parents affected by parent abuse either do not know about sources of help, or do not feel able to ask for assistance. In the absence of any related research that reveals otherwise, it seems reasonable to speculate that when parents do seek help, they encounter policies and practices (for example, police and Child, Youth and Family protocols), developed to respond to other forms of youth and family violence. Such practices may not be suitable or successful in cases of parent abuse. That is, they

may place parents at further risk of violence, particularly if they result in a withdrawal of agency support driven by assumptions that parents ought to be, and are capable of, preventing further abuse by their young people. Parents' help seeking attitudes and behaviours are a central focus of the present study. Findings related to participants' experiences of help seeking within a New Zealand context will be discussed in later chapters.

Lastly, New Zealand is making significant efforts to prevent violence in families. Placing emphasis on adult-perpetrated violence may, however, have inadvertently heightened society's reluctance to recognise other forms of family violence. It is likely that for most, family violence perpetrators have an adult face (generally male), and considering parents as victims of their children and young people may require for many, a significant cognitive shift. Social beliefs and reactions to parent abuse are further explored next in chapter five, where I discuss negative attitudes toward this topic, and the other challenges I faced when trying to recruit participants to the study.

# Chapter Five:  Methodology

## *5.1 Introduction*

As previously mentioned, the issue of parent abuse has received scant attention from

family violence researchers. Of the available studies, most have focussed on physical

assault, with few studies having explored other forms of abuse.  Earlier I described my

interest in this issue and reasons for pursuing the present study. In this chapter I describe

the research design and the rationale for selecting this approach to the study of DPV. The

chosen methodologies are discussed before I explain the data collection and analysis

stages. This section concludes with a discussion of ethical matters that required careful

consideration during the design phase, including risk management and boundary issues.

## *5.2 Study Design and Rationale*

This study explored the phenomenon of DPV (what gets damaged, how often, and by

whom), along with parents' reactions and responses to this type of parent abuse. The

design of the study incorporated the concurrent use of two methodologies; one quantitative

(a questionnaire) and one qualitative (in-depth interviews) in nature.

### 5.2.1 Mixed methods research

Johnson and Onwuegbuzie (2004) defined mixed methods research as "the class of

research where the researcher mixes or combines quantitative and qualitative research

techniques in a single study" (p. 17). Quantitative research methods are typically used to

test or refine pre-existing theories and usually involve large samples in order to generate data, which is later subjected to statistical analyses. Most quantitative studies derive from a positivist epistemological stance (Hesse-Biber & Leavy, 2004). Put simply, positivists consider that reality is out there and available to be studied and understood (ontology) by neutral researchers who observe and manipulate phenomenon in an objective manner in order to uncover truth (epistemology).

In contrast, qualitative methods are theory-generating rather than theory-testing, and generally involve smaller samples. Data derived from qualitative research are non-mathematically analysed (Strauss & Corbin, 1990). Qualitative researchers come from diverse epistemological positions (Hesse-Biber & Leavy, 2004) and employ multiple methodologies that generate experiential data, which is clinically rich but less easy to generalise to the general population. Qualitative research methods are suitable for uncovering human experiences and enabling greater understanding of phenomena about which little is known (Strauss & Corbin, 1990). Qualitative researchers subscribe to the belief that there are multiple realities that are socially constructed, rather than a single truth, and assume a subjective epistemology, interacting with research participants to co-create understanding (Denzin & Lincoln, 2003). Davidson and Tolich (1999) made a distinction between the two research techniques by explaining that quantitative methods provide researchers with breadth, whereas qualitative approaches provide depth.

Quantitative research and qualitative research are generally considered to exist on opposite ends of a spectrum with quantitative methodologies being objective and qualitative methodologies being subjective in nature (Johnson & Onwuegbuzie, 2004; Whitehead, 2007). It has been argued that the epistemological and ontological assumptions associated

with the two methods are incompatible, and therefore, it is inappropriate to unite the two methods in research (Denzin & Lincoln, 2003). Olson (2008) examined the quantitative versus qualitative debate by reviewing the methodologies of various studies and concluded that more overlap occurs between the paradigms influencing these studies than is generally recognised. This idea of incompatibility could be described as a "false dichotomy" (Madey, 1982, p. 225). Reichardt and Rallis (1994) compared quantitative (postpositivist) and qualitative (constructivist) research paradigms before challenging the notion of incompatibility. They found that the paradigms are similar in more ways than they are different. For example, both recognise that researchers are influenced by their past learning and existing knowledge and values, although they respond differently.

Quantitative social science researchers vigorously strive to achieve objectivity, whereas qualitative social science researchers make their knowledge and values explicit. In practice, the paradigms share a common goal of studying (in a rigorous and ethical manner) and improving the human condition, often by increasing awareness and knowledge of social problems and offering solutions to solving them. After studying the compatibility of postpositivism and constructivism, Reichardt and Rallis (1994) concluded that qualitative and quantitative researchers can, and indeed should, work in partnership to solve social problems.

Olson (2008) suggested that researchers should feel able to adopt methodology that is appropriate to the problem they wish to study and not feel they must declare their loyalty to either side of the debate. Similarly, Whitehead and Elliot (2007) encouraged researchers to choose a methodology that offers the best fit for a research topic. Sprague and Zimmerman (2004) also suggested that the independence of these two methods has been

exaggerated. They noted both quantitative and qualitative methods to be valid forms of

social enquiry, with each method informing the other. Quantitative and qualitative

methods do have distinct characteristics, each possessing strengths and weaknesses,

offering different ways of achieving research objectives. Quantitative and qualitative

methods, when combined within the same project, provide complementary information

that can enhance our understanding of a phenomenon (Collins, Onwuegbuzie, & Jiao,

2007; Creswell, Fetters, & Ivankova, 2004; Davidson & Tolich, 1999; Denscombe, 2008;

Morse, 2003).

Qualitative studies can provide greater understanding of important issues, thus generating

hypotheses often required before a quantitative study can be developed. This is

particularly relevant when conducting studies on topics with limited or indeed no previous

research. Conversely, quantitative methods generate data that may uncover issues

requiring closer investigation through the application of qualitative methods. For example

survey data from a large sample may support the development of an in-depth interview

schedule (Green, Caracelli, & Graham, 1989). Mixed methods designs are becoming

increasingly popular in education (Jang, McDougall, Pollon, Herbert, & Russell, 2008),

primary health (Creswell et al., 2004), and social science research (Johnson,

Onwuegbuzie, & Turner, 2007).

As mentioned, the present study combined a quantitative questionnaire and a qualitative

in-depth interview. I determined that the combination of two methodologies would

provide a more meaningful and complete analysis of DPV than would be possible with the

application of either methodology alone. A survey questionnaire was designed in order to

gather quantitative data on what got damaged, how often, and by whom. Additionally, rich

qualitative information about how parents made meaning of their experiences, and how they were affected by, and respond to, DPV was gathered using in-depth interviews.

Throughout the study I integrated the analytical techniques and findings. For example, the quantitative data was studied for the presence of under-explored themes and unexpected findings, which in turn enhanced the gathering and analysis of the qualitative data. Similarly, the qualitative data was used to interpret and enrich the quantitative data.

## 5.3 Qualitative Method

During the initial stages of the qualitative phase of the study, data collection and analysis were based on a grounded theory framework. Grounded theory was developed by sociologists Barney Glaser and Anselm Strauss during the 1960s and offered a clear set of guidelines for conducting research (Charmaz, 2004). Their methods enable the systematic generation of theory from rich data (Glaser, 1998; Glaser & Strauss, 1967; Starks & Brown Trinidad, 2007; Strauss & Corbin, 1990). Data can be generated via quantitative and qualitative methods (Glaser, 1998, 2000). Whitehead (2007) suggested that grounded theory is the methodology that "most closely bridges the 'paradigm gap', or continuum, between quantitative and qualitative research" (p. 114). A grounded theory framework aids researchers to carefully consider their data, uncover significant categories and their unique properties, and reveal important connections between categories (Hesse-Biber & Leavy, 2004).

Grounded theorists allow theory to emerge from the data without imposing pre-existing expectations on the topic being researched (Glaser & Strauss, 1967). Grounded theory is a "flexible, emergent technique" (Charmaz, 2006, p. 29), particularly suited to the study of

phenomena that have not previously been researched. Grounded theory unites the research

process with theoretical development by allowing for concurrent data gathering and

analysis (Glaser & Strauss, 1967). Alternating between collecting and analysing data (the

method of constant comparison) allows for continuing substantiation of developing

theories (Strauss & Corbin, 1990).

Grounded theory strongly influenced the design of the present study and the early stages

of data collection and analysis. As the study progressed my supervision team encouraged

me to consider a range of qualitative research methods. In the course of my reading about

qualitative data analysis I found I was particularly attracted to the principles of

interpretative phenomenological analysis (Smith, 1996).

Interpretative phenomenological analysis is a relatively new method of qualitative

research developed by Jonathan Smith in the 1990's. Brocki and Wearden (2006)

conducted a literature review of interpretative phenomenological analysis studies in health

psychology and found that interpretative phenomenological analysis is becoming very

popular. Indeed, researchers from a range of human, health, and social services have

increasingly employed interpretative phenomenological analysis (Pringle, Drummond,

McLafferty, & Hendry, 2011; Smith, Flowers, & Larkin, 2009).

Interpretative phenomenological analysis offers a systematic approach to understanding

how people give meaning to, or make sense of, their lived experiences (Larkin, Eatough,

& Osborn, 2011). Interpretative phenomenological analysis researchers believe that when

people have significant experiences they later engage in cognitive and affective processes

in an attempt to establish meaning, and there is real value in studying this meaning-making

(Smith et al., 2009). Their primary concern is the individual's personal account, rather than pursuit of objective statements about events or issues (Howes, Benton, & Edwards, 2005). Interpretative phenomenological analysis is a dynamic research approach that supports an intensive exploration of participants' subjective experiences, thus producing a deeper understanding of the topic under investigation (Rodham, McCabe, & Blake, 2009).

An emphasis on examining human experience "in the way it occurs, and in its own terms" (Smith et al., 2009, p. 12), is the phenomenological component of interpretative phenomenological analysis. Phenomenology is one of three key philosophies and practices informing this methodology. Hermeneutics and ideography are the other two. "Hermeneutics is the theory of interpretation" (Smith et al., 2009, p. 21), with a central principle being the hermeneutic circle. Put simply, to understand a single part, you consider the whole; to understand the whole, you consider the parts. When applied to interpretative phenomenological analysis research "the part" may be a single word in an interview transcript and "the whole" the entire sentence from which the word comes. Similarly, the part might be a single interview in a qualitative study (the whole). Interpretation involves approaching the data at various levels, all related to one another yet offering differing perspectives (Smith et al., 2009). Smith and Osborn (2008) used the term double hermeneutic to describe how the researcher aims to make sense of the participant (second order meaning-making), who is making sense of a particular experience or phenomenon (first order meaning-making).

By its very definition, interpretative phenomenological analysis involves interpretation. Analysis is about making sense of a particular experience and this requires an interpretative commitment by the analyst. He or she must be prepared to generate

interpretations that consider meaning, thought, feelings, and action (Reid, Flowers, &

Larkin, 2005), and do so in a manner that is transparent in the analysis. This is because the

researcher's experiences and theoretical assumptions are acknowledged and used in

interpretative phenomenological analysis (Cronin-Davis, Butler, & Mayers, 2009).

Interpretation can take various forms, with analysis generally moving to deeper levels of

interpretation as the study progresses (Smith et al., 2009).

Ideography is a key practice underpinning interpretative phenomenological analysis. In

contrast to nomothetic research, that makes claims at a population level, "ideography is

concerned with the particular" (Smith et al., 2009, p. 29). This can be seen in the focus on

detail and thus the depth of the analysis, and the concern with understanding the particular

experience from the perspective of the individual. Each case is seen as an entity in its own

right and explored in-depth (Smith & Osborn, 2007). Interpretative phenomenological

analysis situates participants in their unique contexts by their individual perspectives,

beginning with a thorough investigation of each case before proceeding to more universal

statements. When this methodology is used to analyse research data, the uniqueness of

each participant is captured along with similarities across participants (Hunt & Smith,

2004). In keeping with the interpretative phenomenological analysis philosophy that

individuals are experts when it comes to their own experiences, research participants are

recruited because of their expertise in the phenomenon being investigated (Reid et al.,

2005).

Interpretative phenomenological analysis has been criticised for the ideographic nature of

analysis, which is seen by some to be a weakness of the methodology because

generalisations can not be made. However, the aim of interpretative phenomenological

analysis is not to make broad generalisations. Rather, researchers who adopt this approach

believe that by gaining insight into the individual they can gain insight into the whole

(Pringle et al., 2011). The aim, therefore, is theoretical transferability, rather than

generalisability (Smith et al., 2009).

An additional criticism of interpretative phenomenological analysis is that the findings

represent one researcher's account and interpretation of the data, raising doubts about the

significance of the findings (Pringle et al., 2011). Smith et al. (2009) have responded to

this concern by explaining that the aim of interpretative phenomenological analysis is to

produce a coherent and credible account that is grounded in the words of the study's

participants, recognising that this is not the only credible account. Indeed many valid

interpretations are possible.  Smith et al. (2009) recommended that researchers using this

methodology counter this criticism by ensuring their analyses are careful, rigorous, and

transparent.

## *5.4 Participants*

Participants were recruited by using flyers posted in a range of locations and by

advertising the study in a number of publications, including school and community

newsletters. The study was open to people residing in Southland, Otago, and Canterbury.

All interviews were conducted in a medium size city in the South Island. Persons

interested in participating were invited to contact me and request a research pack be sent to

them. Research packs contained a copy of an information sheet (Appendix A), an

informed consent form (Appendix B), the study questionnaire (Appendix C), and a

pamphlet offering information about parent abuse and available supports. Research packs

also contained stamped, self-addressed envelopes so that questionnaires could be returned

at no cost to the participant. The information sheet explained that participation in either one or both phases of the study was voluntary. Those interested in participating in the interview were asked to complete and return the informed consent form with details about how they could be conveniently and safely contacted.

Recruitment proved to be a challenge. Many of the services approached via letter or email, particularly schools, chose not to advertise the research. It appeared that some agencies and individuals felt concerned about the nature of the study. Specifically, their concerns appeared to be based on held assumptions that child-to-parent violence is invariably linked to parents behaving abusively toward their children. Accordingly, they thought my focus on parent abuse, rather than child abuse, was misguided. As discussed in chapter four, the issue of parent abuse seems to be a particularly unpalatable topic, in spite of recent national campaigns to increase awareness of family violence. Having encountered this resistance later enabled me to better understand participants' expressed reluctance to speak of their being abused for fear of being judged and blamed. While this issue presented a recruitment challenge, it had the effect of enhancing both my commitment to the study and my desire to document participants' stories and increase public awareness of their plight.

As previously mentioned "parent abuse" is one of a number of terms used to describe children and young people intentionally harming their parents. During the early stages of the recruitment phase I began to suspect that the term parent abuse, as used in the present study, was at times confusing and off-putting. Later, comments made by participants and others confirmed my suspicion. Several people explained that "at first glance" they thought the study was about parents abusing their children. In hindsight, it would have been beneficial to have gathered this sort of feedback before producing the study flyer,

information sheet, and other related documents. A term that described the direction of the violence, such as child-to-parent violence may have reduced confusion and stimulated greater participation. However, as discussed in chapter two, I have deliberately employed the term parent abuse throughout this document in order to maintain the well accepted template of pairing a term for the recipient of the abuse with the word abuse when describing interpersonal violence.

Thirty questionnaires completed by persons who had experienced DPV inflicted by their children (aged 5-18 years) were returned. Fourteen participants were included in the interview phase of the study, and represent a fairly homogenous, convenience sample. They were 12 women and 2 men, with all but two being of European descent. Participants were the biological parent of the child they were describing, except one, a female foster parent. The group included four participants living with abusive children and young people at the time of the study. Parent abuse was a continuing concern for two further parents, even though their children no longer lived with them. The remaining eight participants had previously experienced this form of parent abuse but were no longer doing so. Parents who had previously experienced DPV but who were not doing so at the time of the study were included so as to capture the behaviours of these children and young people retrospectively. This was considered important in order to discern parent abuse trajectories, as it was thought that DPV might be a precursor to other forms of parent abuse. Additionally, it seemed important to incorporate the stories of parents who had previously experienced DPV, as the absence of DPV might increase a person's capacity to process and reflect upon the abuse.

The final 30 questionnaires and 14 interviews fell short of the sample size anticipated during the initial (grounded theory driven) design phase of the study, although proved to be a suitable number of participants for interpretative phenomenological analysis research. Interpretative phenomenological analysis studies are typically conducted on small sample sizes with the aim being to provide a detailed case-by-case analysis of individual transcripts (Smith & Osborn, 2008). In the present study, the final body of interview data allowed for a deep exploration of the issue of DPV.

## 5.5 Data Collection

A questionnaire was developed to collect quantitative data that was then used to provide a numerical picture of the nature, causes, and consequences of child and youth perpetrated DPV (Appendix C). Additionally, questionnaire data was used to inform the preparation of interview plans so that the findings obtained using the questionnaire could be clarified and extended.

Demographic data including the gender, age, and ethnicity of the participant and the child/young person they refer to, was gathered along with information regarding the type, frequency, and severity of DPV and other forms of parent abuse, the age (child's) of onset, triggers for DPV, parents' responses to DPV, and identified support needs. Questionnaire items and design were influenced by my clinical experience and knowledge of parent abuse literature, and feedback from my supervision team and colleagues.

Given the difficulty of quantitatively measuring parents' experiences of parent abuse, participants were invited to participate in face-to-face interviews. In-depth interviewing is widely regarded as an important and powerful method of gathering qualitative data (Rubin

& Rubin, 2004; Whitehead & Annells, 2007). The interviews enabled me to generate rich information about how participants made sense of, and reacted to, their children's violence. More precisely, interview questions focussed on the nature of participants' experiences of DPV, their perceptions of factors that cause and maintain DPV, the impact of DPV on self and others, and responses to DPV, including help seeking behaviours.

A semi-structured interview schedule was used as a guide (Appendix D) with the interview format evolving as new data was gathered and analysed. Typically, participants were invited to describe the nature and extent of DPV by recalling past experiences of this form of abuse with questions designed to explore their beliefs about what had caused this problem (for example, "thinking back, what do you believe led up to this event?"). Interview questions were also developed to investigate the impact of the violence, and participants' reactions to the DPV. Additionally, support experiences and support needs were explored. In all cases, priority was given to establishing rapport with each participant, encouraged by a conversational-type, flexible interviewing style (Schroder & Conrad, 1997). In the present study questions were constructed to be open and nondirective so as to prompt and encourage participants to tell their stories about living with an abusive child. Essentially interviews were a "co-determined interaction", with the interview schedule serving as a loose guide (Smith et al., 2009, p. 58).

All participants agreed to their interviews being audio recorded and later transcribed. I transcribed each of the interviews, taking care to remove all identifying information. Names were replaced with pseudonyms in all but one of the interviews. In this case the participant requested that I use her own name in the transcript and any subsequent research publications. She explained that this was her story and she did not wish to attach any other

name to it. I felt it was important to respect her decision. She did agree to me removing all other names, including (most importantly) that of the child whose behaviour she was describing, and other identifying information from her transcript.

Most of the participants requested a copy of their interview transcripts. These were sent to them with a covering letter requesting that they contact me if they wished to have amendments made, or if they had anything further they wished to add. None of the recipients requested changes to their transcripts.

Following each interview I took a few moments to record my initial impressions on the audiotape. This was done to prevent these thoughts being lost in the delay between the interview and later transcription of the audio recording.

## 5.6 The Data Analysis Process

Throughout the study, data gathering and analysis occurred in concert. This involved an iterative and integrated data analysis process, with analysis moving back and forth between the quantitative and qualitative data sets at various stages. The questionnaire data were analysed using simple descriptive statistical techniques and then used to inform the types of questions asked during the interview phase. Qualitative data were analysed, initially using grounded theory techniques, and later by employing interpretative phenomenological analysis. Neither method has a fully prescribed means of conducting analysis, but rather, they share a number of common, adaptable practices and strategies. Both offer effective ways of studying subjective phenomenon, like parent abuse, which are relatively understudied.

Analysis initially reflected a grounded theory framework and began with transcripts being

read several times each, with particular attention given to the language and metaphors

used by participants to describe their experiences. During initial readings, note taking was

detailed and time consuming. All words or sentences of interest were highlighted, and

coding notes were written in the margins. Transcript documents were then imported to

QSR International's NVivo 8, a computer software programme that assists with the

coding, storage, and retrieval of qualitative data. It is important to note that Glaser (1998)

discourages the use of technology for recording interviews and analysing data in grounded

theory studies. He argues that recording and transcribing interviews are unnecessary and

time consuming, and the use of data analysis tools such as NVivo 8 inhibits creativity.

Nevertheless, I opted to record and transcribe interviews so that I had a complete account

of my interactions with participants. I found, at least initially, that the NVivo 8 programme

greatly assisted with the handling of data, providing a fast method of checking and

comparing information. NVivo 8 enabled me to conduct a range of microanalyses,

including word frequency searches to identify words or terms that appeared with greater

frequency than others, or that were shared by participants when describing their

experiences of DPV. Transcripts were coded line-by-line, with the coded segments of text

initially stored as a long list of free nodes. When connections between free nodes began to

emerge, I clustered related free nodes into groups known in NVivo 8 as tree nodes, and

continued coding at these nodes.

NVivo 8 has a function for preparing and storing memos. Memos are collections of the

researcher's thoughts, ideas, and reactions to the study. I kept memos about my interview

experiences, my developing ideas about interview questions, and important points from

my reading of related literature. Memos captured my first impressions and my emotional

reactions to the data and so were important in facilitating reflective processes. Memo writing is most often, although not exclusively, associated with grounded theory research, where it is seen as "a crucial intermediate step" between collecting data and then the writing up of a research project (Charmaz, 2004, p. 496). Barney Glaser, a co-developer of grounded theory has frequently referred to the value of memo writing, encouraging researchers to produce memos as a means of "capturing, tracking and preserving conceptual ideas" (Glaser, 1998, p. 180).

Part way into the analysis phase of this study I began to move away from grounded theory, preferring to apply an interpretative phenomenological analysis method of analysis described by Smith et al. (2009). Grounded theory had proven a useful approach during the initial phases of the research. I was, however, increasingly finding interpretative phenomenological analysis to be more closely aligned with meaning-making, which, as explained in chapter three, was emerging as a central theoretical and interpretative framework in this study. My newfound interest in interpretative phenomenological analysis prompted me to return to my transcripts and read them again, searching for participants' phenomenological descriptions. This was like starting over in many respects, and it initially felt somewhat disheartening in light of the previous hours of effort I had put into earlier analysis. I soon realised, however, that rather than abandoning these previous efforts, I could use them as a means of cross-checking my developing analyses for convergence and divergence of themes across transcripts. Furthermore, existing memos were valuable when moving into a more conceptual level.

Whereas initially I had found the NVivo 8 programme to be useful in terms of the ease with which chunks of data could be stored and later retrieved, I have a preference for

working with hard copy material, and this became more apparent when I began introducing interpretative phenomenological analysis principles. Hence, I ceased using the computer programme at this point.

Adopting the interpretative phenomenological analysis structure suggested by Smith et al. (2009), I first read over my transcripts again. A familiarity with the data is essential and while I already felt a strong engagement with each transcript, re-reading enabled me to carefully consider participants' perceptions of abuse by their children.

Smith et al. (2009) suggested that having read over the transcripts carefully, the researcher should then begin to make initial notes. I took a hard copy transcription of my first interview and began to make notes, but this time with a phenomenological focus. Specifically, I searched for references to the things that mattered to this participant, such as important relationships, events, and beliefs, and the meanings he or she had assigned to these things. My notes were at times concerned with language, time, and context and were both descriptive and interpretative.

The next recommended phase of analysis is identifying emergent themes. This stage involves the researcher making "an analytic shift" from focussing on the transcript to working mainly with initial notes which should be "very closely tied to the original transcript" (Smith et al., 2009, p. 89). Previously prepared memos assisted greatly with this phase of analysis, as I was able to combine the ideas from these memos with exploratory notes taken from the margins of the transcripts.

Each emergent theme was briefly described in the margin before I literally cut out these themed segments from the pages of the transcripts. Smith et al. (2009) explained that the process of fragmenting participants' experiences and reorganising them can feel uncomfortable. I did indeed have some discomfort in breaking the flow of participant stories and then re-organising the data for further interpretation. At times I chose not to do so, preferring to take note of emerging themes while keeping a descriptive piece of transcript intact for later narrative analysis. This discomfort eased as I became more familiar with interpretative phenomenological analysis and began to better understand how parts of a participant's transcript would later be constructed as a new whole at the completion of the analysis.

I then looked for relationships across themes. At this point I found it helpful to write each emergent theme on a piece of card, and then map out connections by arranging and re-arranging the cards on the floor in ways that they related to one another. I then grouped related themes, and gave each cluster a descriptive name, such as "making sense of DPV". Next, I took the groupings of transcript extracts and placed them in a large envelope with a one-page summary of themes and page number references to related transcript extracts. On the front of the envelope I wrote the list of themes for easy reference at a later time. I then repeated all stages with each of the interview transcripts.

Interpretative phenomenological analysis emphasises an ideographic approach to analysis. Therefore, each transcript needs to be approached in a way that acknowledges its uniqueness. Smith et al. (2009) referred to "bracketing the ideas emerging from the analysis of the first case while working on the second" (p. 96). Bracketing is explained as the researcher setting aside prior knowledge and attitudes, and any ideas that have

emerged from previous interviews and analyses, in order to approach each case on its own terms (Smith et al., 2009).

Naturally I was influenced by my months of earlier analysis, and so it was especially important that I remain open to new themes emerging from each of the transcripts. Furthermore, given that I had embarked on my research with a grounded theory focus, data gathering and initial analysis reflected this. In particular, the earlier use of the constant comparative method, which had identified emergent themes and subsequently influenced data collection as I sought (in keeping with grounded theory) to utilise these emerging themes. Fortunately this did not stymie my pursuit of phenomenological accounts. Rather, it would appear that my study began and progressed with a phenomenological focus, despite this not being my original intention. From the outset of the investigation I went in search of information regarding the factors that had influenced each participant's meaning-making and actions. I suspect this reflects my clinical psychology background, and a natural tendency to explore human cognitive and affective processes.

Upon completing the aforementioned stages for each transcript I then set my envelopes down in a line so that I could compare the lists of themes. I also prepared a thematic frequency chart, as a way of visually depicting themes relevant to more than one case. This process required that I rethink and relabel some themes. I then developed a set of three master themes, known in interpretative phenomenological analysis research as super-ordinate themes (Smith et al., 2009).  Each super-ordinate theme contained many sub-ordinate themes with a list of associated transcript passages. I was mindful that as analysis progressed I was moving away from the participants and their words. This is necessary

when conducting interpretative phenomenological analysis research as the interpretation of data is of equal importance to the phenomenological component. Throughout the study I remained interested in the lived experience of my participants, with the resulting analysis reflecting this essential participant-researcher collaboration (Smith et al., 2009).

## 5.7 Ethical Considerations

Ethical approval was sought and gained from the University of Canterbury Human Ethics Committee and the Health and Disability Multi-region Ethics Committee.

### 5.7.1 Informed consent and confidentiality

An information sheet provided participants with information about the purpose, nature, procedures, and risks of the research, and their right to withdraw from the project at any stage. Participants were also informed that the findings of the research would be recorded in a thesis and in articles submitted for publication. Additionally interview participants were asked if they wished to receive a summary of the results upon completion of the study.

The qualitative and evolving design of the interview phase of the research presented several important issues with respect to informed consent. Llewellyn, Sullivan, and Minichiello (1999) proposed that the "most ethical approach" is to inform potential participants of the likely procedures (p. 194). This was achieved by describing the types of questions that I intended to ask during the in-depth interviews, and by ensuring that participants were aware of their right to withhold information or withdraw from the study. None of the participants elected to withdraw from the study.

Participants were also informed of my ethical obligation to report instances of abusive behaviour toward children and other persons unable to protect themselves from the violence. This was considered a pertinent issue during the design phase of the study given that the nature of the research meant that disclosures of family-based violence would be elicited and could raise concerns about the safety of persons exposed to such violence. No situations raising such concerns were revealed during the study.

Participants completing questionnaires were not required to provide identifying information unless they wished to be involved in the second phase of the research and were happy to provide their name and contact details. Demographic information was stored separately from questionnaire and interview data. All information (for example, questionnaires, audiotapes, research notes) was stored in a locked filing cabinet. As previously mentioned, identifying information was removed from transcribed interviews. All audio recordings of interviews were destroyed once fully transcribed. Interviews were conducted in settings selected by the participants. Seven interviews were conducted in participants' homes, two were conducted at participants' work places, four were conducted in my office, and one interview took place in a local café.

### 5.7.2 Risk management

When considering the ethics of any research, concern needs to extend beyond matters of anonymity and informed consent (albeit both very important issues), and continue throughout the research project to ensure the protection of the people involved (Tolich, 2001). Researchers should anticipate potential risks and design their research so as to

"facilitate positive outcomes for all research participants" (Hlavka, Kruttschnitt, & Carbone-Lopez, 2007).

Research on victim experiences of family violence has grown dramatically over the past 25 years. Despite this, little is known about the effects of victimisation research on participants (Hlavka et al., 2007, p. 915). Even less is known about the impact of victimisation research on participants in parent abuse research. No reports were found on the effects of interviewing parents about their abuse at the hands of their children.

The World Health Organisation (2001) published guidelines for researching family violence against women and recommended that ethical and safety issues should direct all project decisions. Researchers were described as having an ethical duty to provide participants with information about, or referrals to, services that can provide guidance, help, and support. I concluded that the World Health Organisation (2001) publication had relevance to parents affected by parent abuse, and accordingly the guidelines influenced the design of my study. Specifically, during the planning phase I worked collaboratively with a regional family violence focus group to develop a parent abuse pamphlet. The pamphlet presents a definition of parent abuse, outlines the importance of accessing help, and offers strategies for doing so (including the contact details of relevant support agencies). Parent abuse pamphlets were included in the research packs that were sent to interview participants.

Additionally, it is recommended that family violence research projects be designed in such a way as to incorporate strategies for reducing any participant distress that may be caused by the study (World Health Organisation, 2001). The minimisation of harm was a

fundamental concern from the outset of this study, with careful consideration given to the management of psychological and physical safety issues in response to the interview process. The design of the present study was also guided by Charmaz's (2006) principles for exploring sensitive topics:

- A participant's comfort level was given priority over the pursuit of data.

- Careful attention was given to the appropriateness of using probes to pursue an issue versus simply just listening.

- Every attempt was made to understand and validate each participant's views and experiences.

- Careful attention was paid to the pacing of each interview, with all interviews concluding on a positive note.

I was able to speak with local Māori and Pasifika health advisors and members of the University of Canterbury academic community during the design phase of the research to discuss issues of cultural safety and appropriate methods for sensitively exploring whānau-based violence. My aim was to ensure that participants of all cultures felt able to explore and share their experiences of child and youth perpetrated DPV within a researcher-participant relationship that was respectful of their culture. Furthermore, during the later stages of the study, I shared my findings with Māori colleagues and invited them to comment on the implications for Māori families.

### 5.7.3 Boundary issues and power dynamics

Kidd and Finlayson (2006) advised that sensitive research can produce ethical issues that arise out of the emotional intensity and professional responsibility naturally present in the researcher-participant relationship. Hesse-Biber and Leavy (2004) reminded researchers of

the important power dynamics that exist within researcher-participant relationships and encouraged constant reflection on the ways in which power relations impact on every step along the research path.

Just as sensitive research can cause levels of distress for participants, emotional effects can occur for researchers (Lalor, Begley, & Devane, 2006). I was mindful that being both a clinical psychologist and a researcher could produce tensions and ethical complexities throughout the research process (Yanos & Ziedonis, 2006). I was aware of the importance of remaining in the researcher role and resisting the impulse to assume the role of mental health practitioner. Equally, I was very mindful of the potential for role confusion or conflict. "Therapeutic misconception" can occur when participants assume that all research has a therapeutic goal and is more likely to occur if the researcher is someone known as a treatment provider (Yanos & Ziedonis, 2006). I took steps to avoid this issue by informing participants that my role was that of researcher and that I was not responsible for providing direct care. I also excluded persons with whom I had had previous involvement in the form of a therapist-client relationship from the second stage of the research (in-depth interviews).

I found interviewing to be an exciting, albeit at times exhausting, process. The first two or three interviews were particularly tiring as I grappled with the difference of interviewing as a researcher rather than as a clinical psychologist. This produced a level of pre-interview anxiety that undoubtedly influenced the tone and pacing of the interviews. All of the interviews impacted emotionally on me. I found myself experiencing a range of affective responses, from despair to excited hopefulness. Most commonly I felt both admiration and gratitude that participants would so openly share their experiences.

Kidd and Finlayson (2006) recommended the use of clinical supervision in conjunction with academic supervision as a means of maintaining both the "emotional safety of the researcher" and the "integrity of the research project" (p. 423). I was fortunate to have regular access to both academic and clinical supervision throughout the study.

## *5.8 Limitations of the Study*

This study was an exploration of how a group of New Zealand parents and caregivers experience, and are impacted by, DPV. The first phase of the research involved a questionnaire designed to gather quantitative data. The sample size (*N*=30) of self-selected participants was significantly less than anticipated during the design phase of the study, and can be considered a limitation of the research. A larger sample, including greater numbers of fathers, and also more Māori and Pasifika parents and caregivers would have enabled the generalisation of findings to a broader population. The quantitative phase of the research would have been further enhanced by the inclusion of a comparison group of parents randomly selected to complete the questionnaire. However, as discussed, a central objective of the questionnaire phase of the research was to inform the qualitative phase of the study, rather than to produce data that would stand in isolation and enable broad generalisations.

The questionnaire proved to be a useful tool for gathering a range of information about DPV, although on various items where participants were invited to provide "other" examples, many of them did, indicating that the response categories were not as exhaustive as intended. For example, participants identified forms of DPV not included in

the item list, such as the theft and destruction of parental jewellery and cosmetics, and the intentional damage of household plants, to name a few.

The second phase of the study involved a qualitative approach, specifically interpretative phenomenological analysis, a methodology that is well suited to exploring under-researched and sensitive topics like parent abuse. As noted previously, interpretative phenomenological analysis has been criticised for the ideographic and interpretative nature of analysis limiting the significance and generalisability of the findings. However, as explained (section 5.3), the aim of interpretative phenomenological analysis research is theoretical transferability, rather than generalisability (Smith et al., 2009).

The number of people interviewed was small, although appropriate for an interpretative phenomenological analysis study. It could be argued, however, that participating parents (mainly mothers) may be quite atypical of parents affected by parent abuse in their preparedness to speak about their experiences. Nevertheless, as with all interpretative phenomenological analysis research, the aim of the present study was not to generalise findings from this group to all parents affected by DPV and other forms of parent abuse, but rather, to prompt consideration and further exploration of this phenomenon.

## 5.9 Conclusion

Much consideration went into the design of the present study, however, as discussed, the small sample size in the quantitative phase fell short of the anticipated number of participants. Nonetheless, the combination of two methods, one quantitative and one qualitative, achieved the aims of developing an operational definition of DPV and

exploring how participants respond cognitively, emotionally, and behaviourally to this distinct form of family violence.

The study evolved across time, with the qualitative phase initially involving a grounded theory approach, later combining grounded theory and interpretative phenomenological analysis principles and methods in order to provide a framework for data gathering and analysis. At all times I was mindful of important factors related to researching sensitive topics such as DPV.

In later chapters the three super-ordinate themes that emerged from the qualitative interviews; i) *Making sense of DPV—participants' perspectives*, ii) *Damage done—the various impacts of DPV*, and iii) *Keeping safe and sane* will be presented in turn, and demonstrated by extracts from interview transcripts. The findings will then be discussed in relation to the literature and theoretical considerations provided in earlier chapters. Chapter six now follows with a summary of findings that primarily relate to the quantitative questionnaire data.

# Chapter Six: Quantitative Questionnaire Findings

## *6.1 Introduction*

As previously explained, the present study combined a quantitative questionnaire with in-depth interviews, producing two types of data that could be examined both separately and in an integrated manner. Research that combines two or more methods of data collection can present a number of challenges, including how best to report the findings. Unfortunately, within the mixed methods literature there is little exploration of how the results of research can be written up to emphasise the benefits of this approach (Hesse-Biber, 2010) and consequently there are few guidelines or available exemplars that provide useful templates for doing so (Brymann, 2007). Commonly researchers have reported their quantitative and qualitative data separately in the findings section, before integrating the data in the discussion section.

In this, the first of four findings chapters, emphasis is largely on presenting data from the quantitative questionnaire phase of the study. To a lesser extent, qualitative findings from the in-depth interviews are integrated at various points to extend the quantitative findings. A more comprehensive and deeper analysis of the qualitative findings will be presented in following chapters. Throughout all the analysis chapters quantitative and qualitative findings are shown to interact, reflecting the iterative design of this research. For example, quantitative questionnaire data were studied for the presence of under explored themes and unexpected findings which then influenced the type of questions asked in the in-depth interviews. In-depth interviews produced qualitative findings that were then used to interpret and enrich the quantitative data.

## 6.2 Demographic Summary

A total of 30 participants completed the questionnaire. Twenty-six of the 30 questionnaire respondents were female and four were male. Participants' ages ranged from 25 to 54 years, with a mean age of 37 years. Twenty-two participants (73%) described themselves as New Zealand European, while the remaining eight (27%) were of Māori or Māori/European descent. Most of the participants were reporting on male children ($n$=22), and children between the ages of 15 and 20 years ($n$=23). The mean age of all children in the sample was 15 years. Twenty-three participants described themselves as a "parent", six described themselves as a "step-parent", and one reported being a "foster parent" to the child they were reporting on.

Ten of the participants reported being the only adult in the family home. The majority of participants ($n$=27) reported that there were other children living in their home in addition to the child damaging their property. Age of the child at onset of DPV ranged from five ($n$=1) to 18 ($n$=1) years. Participants most commonly reported DPV commencing between 11 and 13 years ($n$=11), followed by 8-10 years ($n$=9), 14 to 16 years ($n$=5), 5 to 7 years ($n$=4), and 17 to 19 years ($n$=1), with a total sample mean age of 12 years (mean age of onset for male children ($n$=22) - 11years; mean age of onset for female children ($n$=8) - 12 years). Participants were asked if DPV was a current or past problem. Two-thirds of the participants reported that DPV was a continuing problem for them. In summary, the typical questionnaire participant was a New Zealand European mother who shares her home with other children and at least one other adult, reporting on her son, aged between 15 and 20 years at the time of the survey.

## *6.3 Quantitative Questionnaire Findings*

Chapter five provides a description of the questionnaire design process, explaining that a series of questions were developed  to provide a numerical picture of the nature, causes, and consequences of child and youth perpetrated DPV, along with participants' responses to DPV (including help seeking), and support needs.  To follow is a summary of findings from each of the quantitative questionnaire items.

### 6.3.1 DPV: What is it and how often does it occur?

Quantitative questionnaire participants were invited to identify the types of property that had been damaged and the frequency of this damage. Almost all ($n$=28) reported that their child had engaged in two or more types of DPV, while over half of the sample reported damage to five or more types of property (Figure 6.1). The intentional damage of ornaments ($n$=24), household furniture ($n$=24), and structures such as doors and walls through being punched ($n$=24) and kicked ($n$=22) were the most commonly reported forms of DPV. Half of the participants ($n$=15) reported experiencing DPV (of any type) less than once a month, while 11 had experienced at least one form of DPV at a frequency of at least once per month. Three participants indicated they had experienced some form of DPV on a weekly basis, while one participant reported daily experiences of DPV. Figure 6.1 demonstrates participants' reports of the types of DPV they had experienced.
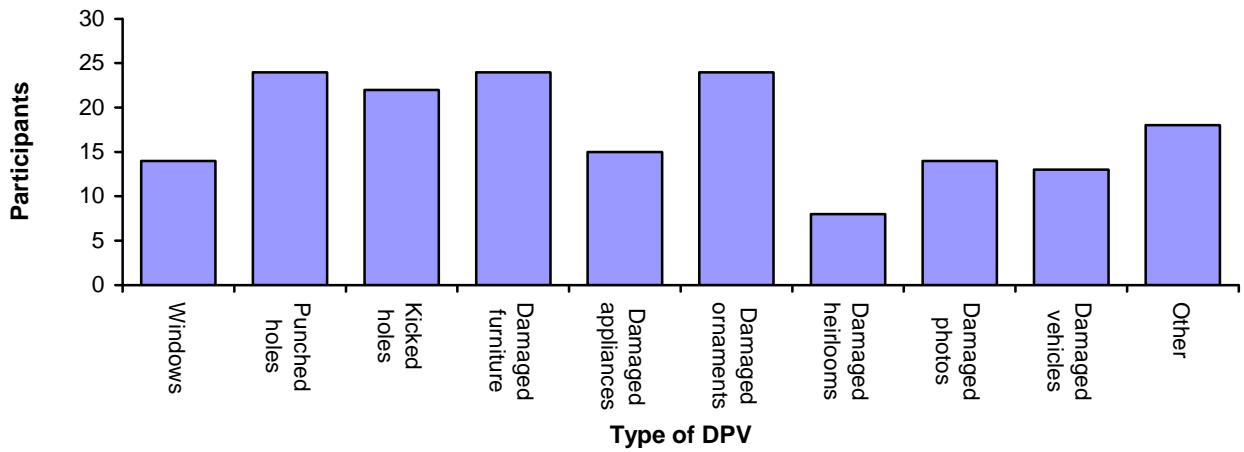
*Figure 6.1.* **The number of participants reporting each type of DPV.**

Participants provided a wide range of examples of other forms of DPV (not included in the item list), including the theft and destruction of personal items of clothing, jewellery, and cosmetics, graffiti on bedroom walls, spitting on walls, the intentional destruction of bedding and curtains, and damage to plants. Male and female children were comparable with respect to the types and frequency of DPV, although there were more reports of males kicking holes in walls and doors, while a greater percentage of the female children, that is, three out of the eight females in the sample, were reported to have damaged heirlooms compared to five of the 22 male children. However, with a sample size of only eight female children compared to 22 male children, such comparisons may not be particularly meaningful.

Interview participants in phase two of the study also described DPV taking various forms as well as discussing their perceptions of why certain items of property had become the target of their children's aggression. Participants explained that DPV was often an

indiscriminate act whereby items were damaged simply because they were within reach. Conversely, items were said to sometimes be selected for damage because of their potential to cause financial or emotional distress, such as family photographs and other items of sentimental value.

### 6.3.2 Who else is affected?

Only three of the 30 participants reported their child had damaged the participant's property and not items belonging to anyone else. All three had previously indicated that there were no other children or adults in their home.

As discussed in chapter two, parent abuse can affect all family members, including siblings (Cottrell, 2001; Howard & Rottem, 2008). In every case where there were children, other than the identified child, living in the home (*n*=27), participants reported that these other children were the victims of DPV. Results revealed that spouses/partners were also targets for DPV at a high rate (*n*=24), followed by grandparents (*n*=11) (Figure 6.2). However, only 20 participants had indicated sharing their home at the time of the study with a spouse or partner, suggesting that their reports of spouse/partner experiences of DPV referred either to past episodes, or may have been due to participants misinterpreting the question. Although the item asked about the frequency of children damaging property belonging to spouses/partners living in the home, some participants may have endorsed this item because property belonging to spouses/partners, who may or may not live in the family home, had been damaged at some time. Similarly, the finding regarding grandparents was surprisingly high and may be explained in the same way.

Twenty of the 30 participants noted their child had damaged property belonging both to other adults and other children in the home. Twenty-six participants reported that their child also damaged their own personal property (Figure 6.2). This was an interesting finding and one that is better understood by considering interview participants' accounts that explain that personal property was sometimes damaged in an indiscriminate fashion, simply because it was in reach of the child. Conversely, deliberate personal property damage was also described by several interviewees, who explained that their children damaged their own property in order to acquire new things. For example, one participant described her child intentionally damaging her own mobile phone before demanding her mother buy her a new one. Sometimes DPV took the form of damaging items given to them by parents as a mechanism for causing emotional harm. For example, one parent had painted a picture for her child, which he later intentionally destroyed. Another reported that her son promptly destroyed the watch she had just given him for his birthday.
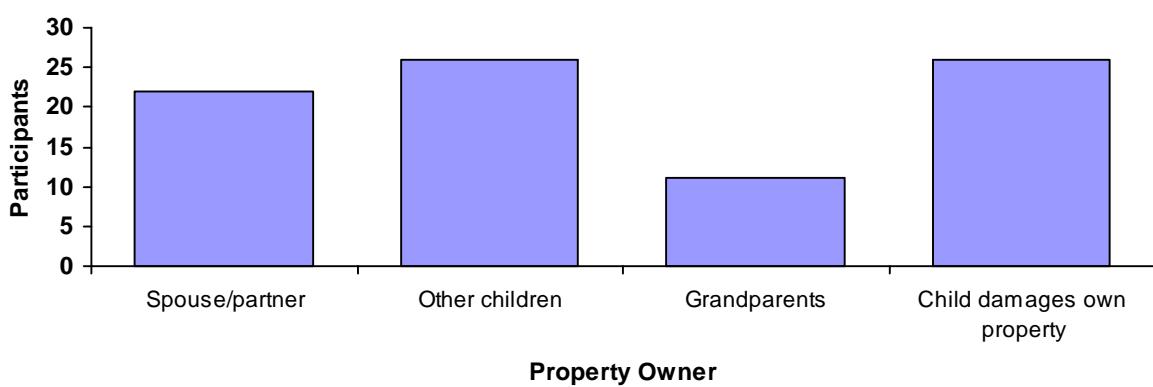


*Figure 6.2*. **Number of participants reporting damage to property belonging to others in the home (not just their own).**

Quantitative questionnaire participants were asked to estimate the cost of their child's

DPV. Twenty-four participants provided a monetary sum, while four others were unsure

of the total cost. Responses ranged from a total of $200-8000 of damage ($M = \$2565$).

Interview participants explained that DPV often has a financial impact, and this can take

quite a toll on the family budget.  However, as will be explored in the following chapters,

generally the emotional and relational impacts of DPV were of greatest concern to parents.

### 6.3.3 Is DPV related to other forms of parent abuse?

One of the aims of the study was to investigate relationships between DPV and other

forms of parent abuse.  Questionnaire participants were asked to describe other ways their

children had acted abusively toward them by endorsing as many items as applicable from

a list of abusive behaviours. Interviewees were also encouraged to talk about their

experiences of varying types of parent abuse. The findings from both groups show that

DPV rarely occurs in isolation but rather is part of a broader pattern of parent abuse. This

is the case for both male and female children. In fact, only one parent reported no other

forms of violence.

### 6.3.3.1 In what other ways does your child/teenager act abusively toward you?

Twenty-nine of the 30 questionnaire participants reported four or more forms of parent

abuse other than DPV, most commonly verbal abuse ($n=29$). Just over half ($n=16$)

reported verbal abuse to be a daily experience. Other reported acts of abuse and aggression

included stealing from the parent ($n=25$), pushing the parent ($n=23$), threatening to harm

the parent ($n=22$), threatening to leave home ($n=21$), threatening to harm self ($n=16$), or

hitting the parent ($n=18$) (Figure 6.3).
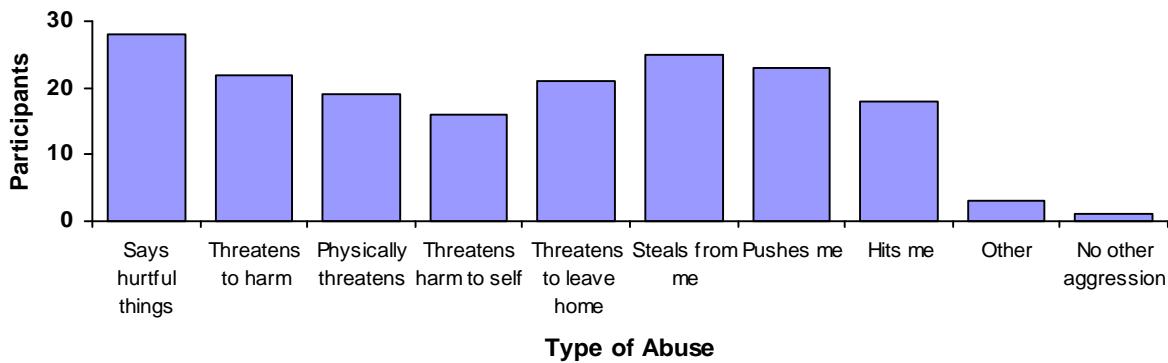
*Figure 6.3.* **Number of participants reporting co-occurring forms of abuse.**

**6.3.3.2 Before the DPV first began, had your child/teenager been abusive in other ways?**

For the majority of questionnaire participants and of interviewees, DPV followed earlier acts of parent abuse. As shown in Figure 6.4, most commonly, questionnaire participants reported previous verbal abuse ($n$=25), emotional abuse in the form of threats to harm others ($n$=24), and theft of parent money and property ($n$=21). Fourteen participants reported being pushed or hit by their child prior to the onset of DPV, with 18 reporting their child had pushed or hit other family members before first engaging in DPV. A similar number reported that their child had been violent toward other (non-family) young people ($n$=18). Teachers were less commonly reported to have been the targets of the child's aggression ($n$=4) before the onset of DPV. Only six participants reported that their child had not been aggressive toward others before the first episode of DPV.
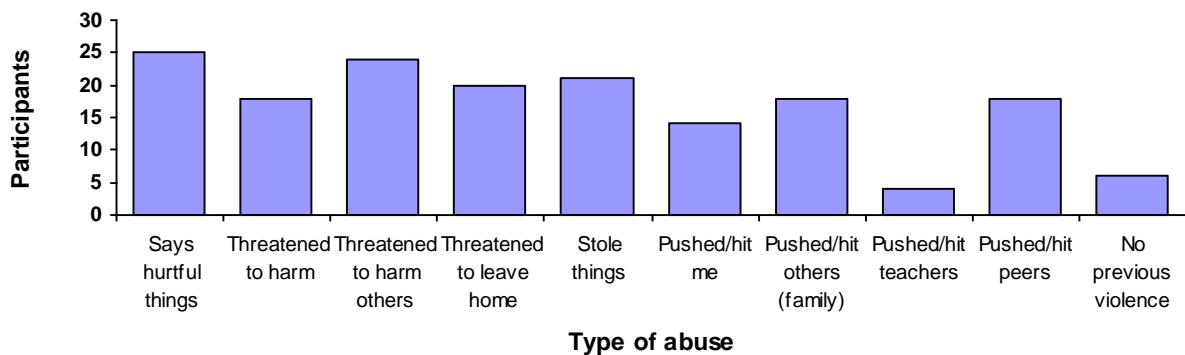
*Figure 6.4.* **Number of participants reporting abuse occurring before the first episode of DPV.**

**6.3.3.3 Does your child/teenager behave abusively in other ways before the DPV starts?**

Participants were asked to consider episodes of DPV and to report on abusive behaviours immediately preceding their child damaging property. Only one participant reported no other forms of aggression occurring immediately before the act of DPV. The majority of participants reported DPV closely following acts of verbal abuse (*n*=28) and threats of physical harm (*n*=24). Less commonly DPV occurred subsequent to actual physical harm (*n*=18) (Figure 6.5). Twenty-five of the 30 participants reported two or more forms of pre-DPV violence. This finding was consistent with interviewees' descriptions of episodes of aggression commonly involving multiple forms of abuse.
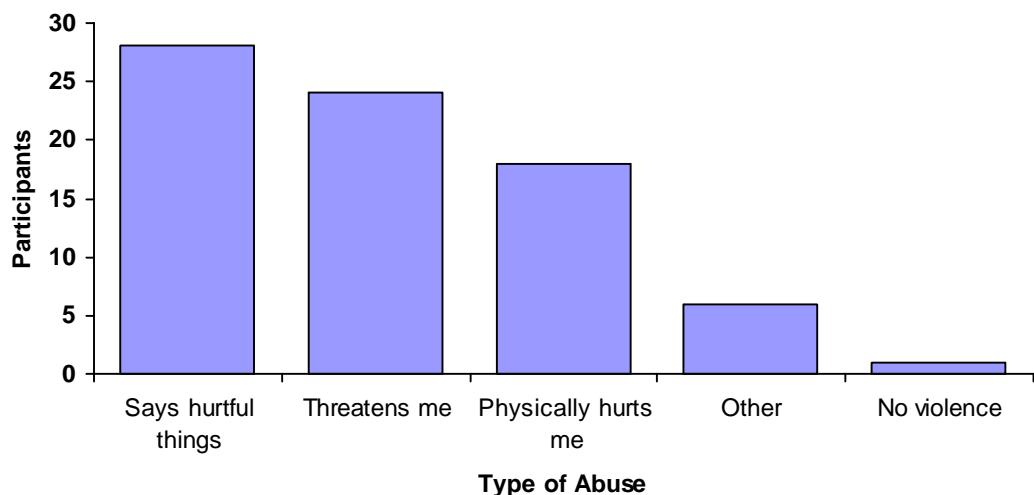
*Figure 6.5.* **Number of participants reporting acts of abuse occurring before the DPV starts.**

**6.3.3.4 Does your child's/teenager's DPV lead to other forms of parent abuse?**

For all but one of the participants, DPV occurred in the context of other violence. Twenty-nine participants described DPV occurring before two or more other forms of parent abuse, most commonly verbal abuse ($n$=28) and threats directed at them ($n$=26), and others ($n$=25).

Twenty-one participants reported that DPV sometimes or often occurred before acts of physical violence directed at them, while 25 reported their child physically harming others sometimes or often after acts of DPV. Sixteen participants reported that their child sometimes physically harmed themselves following episodes of DPV.

DPV was not described by participants as a distinct step on an escalating trajectory of violence, but rather a common part of a typical pattern of aggression involving a range of abusive behaviours. This finding is consistent with themes that emerged in the interview phase of the study. Interview participants also commonly described DPV occurring in the

midst of other forms of escalating verbal and physical aggression, and their responses

provided examples of verbal abuse and threatening behaviour. Interviewees commonly

described verbal abuse as insults about one's appearance or parenting abilities.  Threats

were not just related to physical assaults, but also took the form of threatening to leave

home, threatening to take ones life, and threatening to hurt other children in the home or in

one case, the family pet. Several interview participants explained that sometimes an act of

DPV would mark the end of an aggressive episode because the threat of DPV had caused

the parent to retreat, bringing the conflict to an end. Other times, DPV appeared to be a

young person's expression of anger and tension, that once released was then followed by a

cooling off period and the return to non-aggressive interactions.


**6.3.3.5 How do you compare DPV to other forms of parent abuse?**

Questionnaire participants were asked to indicate how distressing they found DPV using a

distress rating scale from 1 (least distressing) to 10 (most distressing), before then

comparing DPV to other forms of parent abuse.  As summarised in Figure 6.6,

participants' DPV distress ratings ranged from 1 ($n$=1) to 10 ($n$=3) with a mean rating of

7.
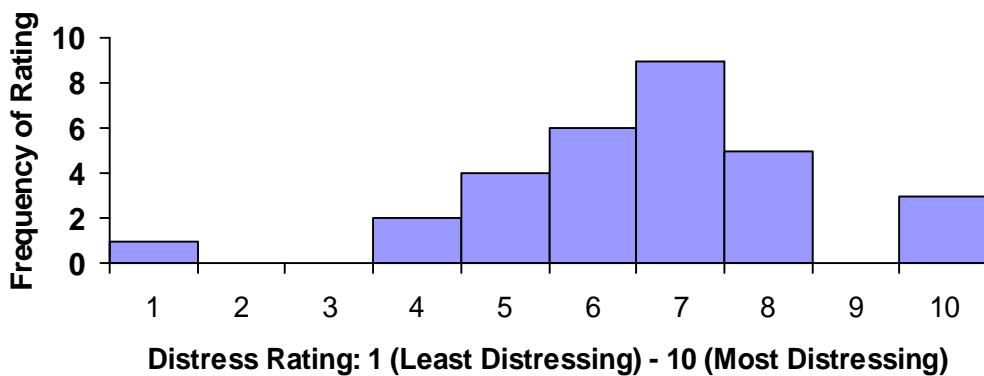
*Figure 6.6.* **Participants' ratings of distress related to DPV.**

DPV was commonly rated as less distressing than verbal abuse (*n*=20), threats of harm to the parent (*n*=18), and threats of harm to others (*n*=24). Participants rated DPV as more or equally distressing than threats to leave home (*n*=23), stealing (*n*=21), and being pushed (*n*=21). Of those participants who reported being hit by their child (*n*=22), 11 rated being hit as more distressing than DPV, while 8 described both acts as equally distressing, and 7 rated DPV as more distressing. Participants were also invited to identify other experiences of parent abuse and provide distress ratings. All of the additional examples provided, including the child "threatening to call the police or tell CYF", "writing hurtful things on the walls", "saying hurtful things to others about me", and "harming my pet" were rated as more distressing than DPV. In the qualitative interviews, participants explained that it can be difficult to estimate the impact of DPV compared to other forms of parent abuse because they frequently co-occur and because distress is associated with all forms of parent abuse, generally accumulating over time.

**6.3.4 What causes DPV?**

Participants were invited to identify their perceptions of factors they felt had contributed to, or caused, their child's DPV, and to endorse as many items as applicable. All but one participant reported multiple reasons for their child's DPV.  Most commonly participants identified DPV occurring sometimes, often or always in response to receiving a command (*n*=29), being denied something (*n*=29), stress occurring at home (*n*=27), academic stress (*n*=25), and being bullied (*n*=22).  Exposure to other forms of family violence was an item endorsed by 14 participants as a cause of their child's DPV. Other factors identified as contributing to DPV included exposure to television violence (*n*=20), violent computer games (*n*=12), and violent music (*n*=11).  Just over half of the participants (*n*=17) rated their children's use of alcohol and/or drugs as influential in the development of DPV (Figure 6.7).
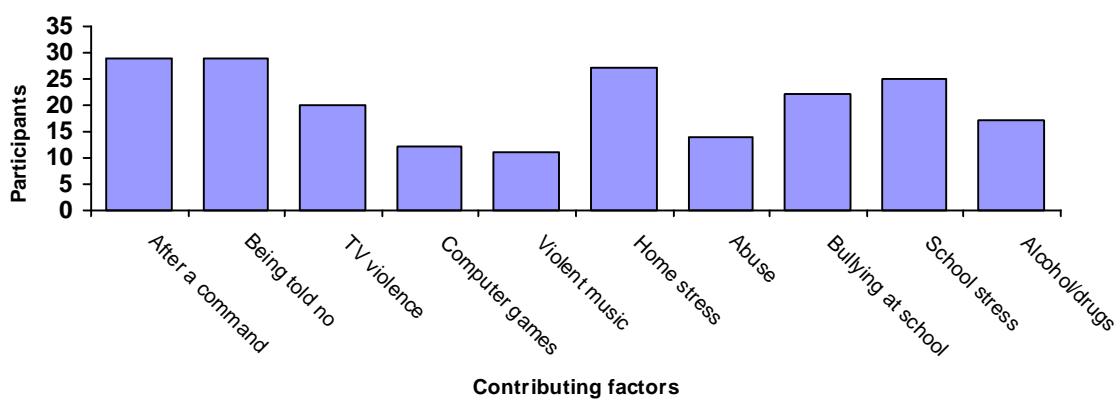


*Figure 6.7*. **The number of participants reporting factors that they perceived had contributed to DPV.**

Participants were invited to rate the strength of their belief from 1 (strongly disagree) to 5 (strongly agree) about the role that various factors had played in their children's DPV. Most commonly, participants agreed or strongly agreed with the statements that their child's friends behaving in the same way, puberty, and chronic behavioural problems had played a role. Half of the participants rated the role of modelled violence by family members as strongly influential in the development of DPV, whereas the other half either disagreed or strongly disagreed with this premise. Similarly, half of the participants strongly agreed that their child having chronic violence problems had been an important factor in the development of DPV, while the other half disagreed. With regards to the statements about overly lenient parenting and inadequate discipline, around one-third of the sample either agreed or strongly agreed, one-third disagreed or strongly disagreed, while one-third was unsure. Participant uncertainty was most common with respect to beliefs about the role of mental illness in the development of DPV, with almost half of participants reporting being unsure. Interview participants were similarly invited to reflect on the question "why is my child behaving in this way?" They provided a range of other factors influencing the development of their children's DPV including parental separation, mother/father absence, and the undermining of parental control and authority by political and social systems. Qualitative interview participants' meaning-making about the causes of DPV will be explored in detail in the next chapter.

### 6.3.5 Parents' reactions to DPV

Participants were asked to describe their reactions to DPV by endorsing any number of applicable items from a list of 10. Given that the mean number of reaction items endorsed was six, it would appear that participants react in a variety of ways to DPV, perhaps reflecting a pattern of trying "anything and everything" over a period of time to overcome

this problem.  Participants reported either sometimes or often punishing the DPV ($n$=27), or actively ignoring the violence ($n$=23). Interestingly, sometimes or often doing nothing was a response identified by 25 of the 30 participants, all of whom also identified other response items. Twenty-six participants reported telling family members about the violence.

Reporting the DPV to the police or Child, Youth and Family were actions that were less common, with 12 participants indicating that they had involved the police, while only 9 had reported the DPV to Child, Youth and Family.  When asked about seeking services to help with the violence, participants reported sometimes or often attending parenting classes ($n$=11), seeking counselling with their child together ($n$=12), and arranging individual counselling for their child ($n$=23). Participants were not asked to identify whether they had completed the parenting course or other support activity, and therefore, this finding could represent the number of participants that enrolled in, but did not complete a programme of education or support.

Interview participants were also asked to describe their reactions to episodes of DPV, with their responses confirming the earlier prediction that parents would try a number of strategies to prevent further episodes. Furthermore, their comments often revealed their reasons for reacting in various ways. For example, both doing nothing and actively ignoring the violence frequently served the purpose of preventing physical harm to themselves and their other children.  Qualitative interview data relating to parent responses to DPV is explored in greater detail in chapter nine.

Previous literature on parent abuse has identified that parents are reluctant to talk about their child's violence (Bailey, 2002; Bobic, 2002; Haw, 2010; Paterson et al., 2002). In the present study quantitative questionnaire participants were asked to rate their worries about reporting the violence on a scale ranging from 1 (never true) to 5 (always true).  Ratings of 4 and 5 (indicating a higher level of concern) were most commonly provided in response to the items relating to fearing that others will think I am a bad parent ($n$=22), feeling embarrassed and ashamed ($n$=19), being afraid the DPV will get worse ($n$=17), and being afraid the child will harm me ($n$=17).  On the other hand, participants most frequently provided ratings of 1 or 2 (suggesting less concern) on items pertaining to worrying about their children getting in trouble with the law, or being taken from their care (Figure 6.8). The latter two findings are ambiguous, however, as participant responses may indicate that they were less concerned about police or child protection services being a possible outcome, or rather, they would have felt little concern should their child have gotten into trouble with the law or be taken from their care.
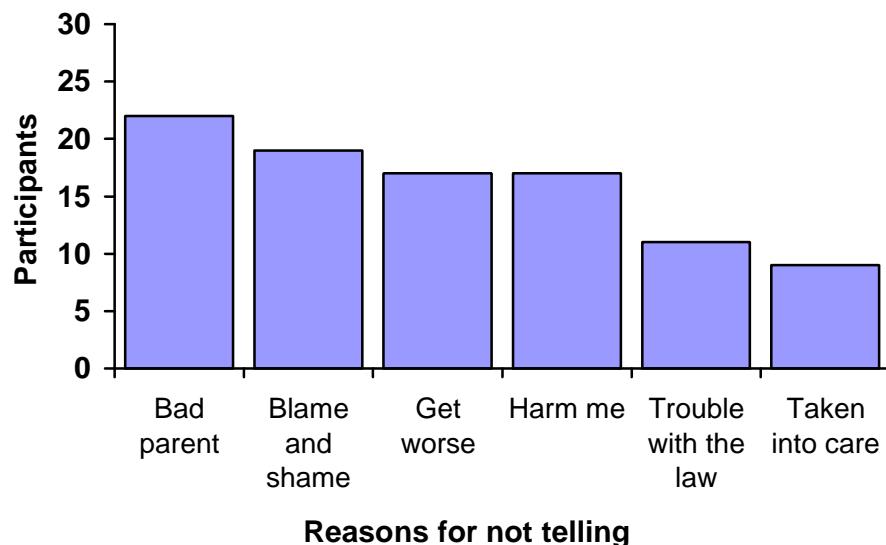


Figure 6.8. Reasons for not telling: Number of participants providing ratings of 4 or 5

Interview participants commonly described a reluctance to speak about their experiences of DPV for reasons similar to those identified above. Additionally, they spoke of feeling worried that they would not be believed or their experiences would be either minimised or ignored by others. This is an interesting finding that emerged from the interviews and one that identified a gap in the quantitative questionnaire, as participants were not offered this as an outcome item for explaining why they would not talk about the DPV. Interview participants' experiences and concerns are described in greater detail in the following chapters dedicated to qualitative analysis.

### 6.3.6 Help seeking

Questionnaire participants were invited to describe the types of support they had received in relation to the DPV (Figure 6.9), their level of satisfaction with this support, and the kinds of support they still required. Only one participant reported not requiring support. All others identified seeking two or more sources of help and support with respect to the problem of DPV. Other family members were most commonly identified as helpers or supporters ($n=29$), followed closely by partner/spouse ($n=28$), friends ($n=28$), counselling ($n=26$), and school staff ($n=23$). Less commonly reported sources of help and support were workmates ($n=14$), Child, Youth and Family ($n=14$), police ($n=14$), parenting classes ($n=10$), respite care ($n=9$), and the Court ($n=8$).
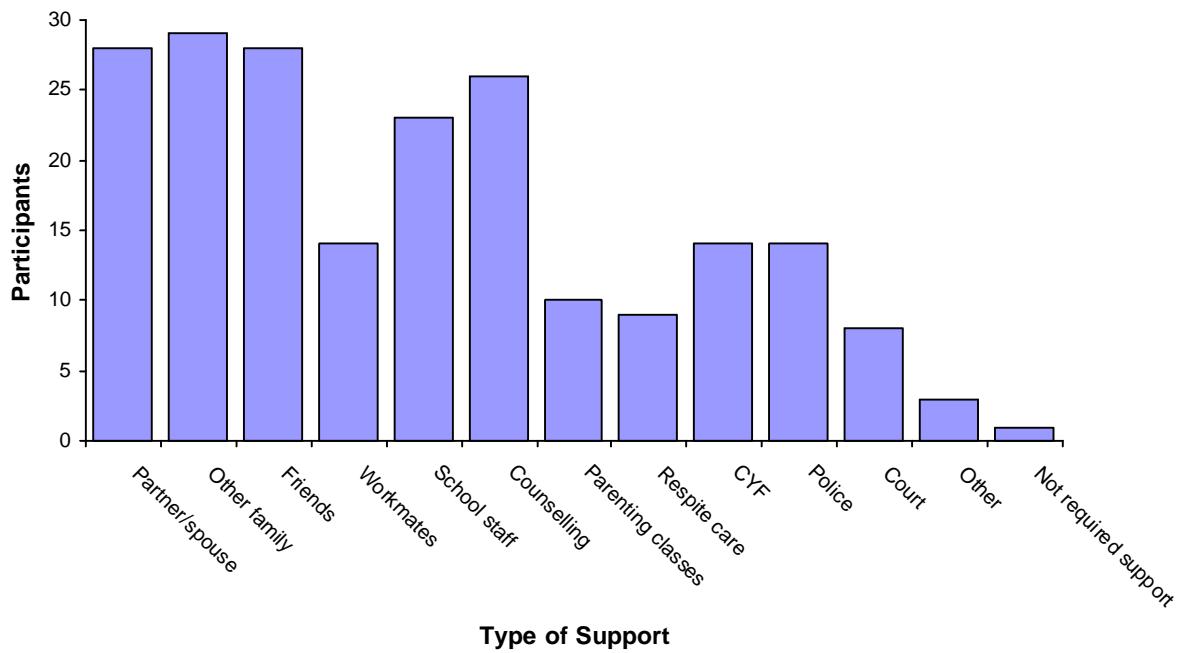
*Figure 6.9*. **Sources of help and support received.**

Information about help seeking gathered during the in-depth interviews revealed a lack of confidence in either the preparedness or capacity of services such as Child, Youth and Family and the police to provide effective interventions. Participants related that the professionals involved frequently lacked knowledge and understanding of the problem of DPV and other forms of parent abuse.

Help and support were not always described by participants as satisfactory when asked to rate their level of satisfaction on a scale ranging from 1 (very satisfied) to 5 (completely unsatisfied). Notably, a majority of participants described feeling unsatisfied with the support they had received from their partner or spouse. Most participants provided higher ratings of satisfaction with regards to the support they had received from other family members, friends, and workmates. Support received from school staff, counsellors,

parenting courses, respite care, and the police were generally rated as satisfactory. Conversely, ratings of satisfaction with Child, Youth and Family intervention ranged from 3 to 5 with half of the sample (*n*=7) providing a rating of 5 (completely unsatisfied). Similarly, of the eight participants who identified the Court as a source of help and support, half indicated dissatisfaction with this service.

Interview participants also commonly described feeling dissatisfied with the various forms of support they had received. Eight of the ten participants who were parenting alone spoke of feeling their estranged partners had offered little, if any, support with respect to the problem of DPV. A sense of isolation with the problem was a commonly reported experience even when parents lived with other adults, had access to a range of family and social supports, and when social services were involved with their children. More satisfying experiences of support were associated with people taking practical steps to help, such as offering respite care, and persons/agencies addressing the issue in a non-judgemental manner, giving due respect to the sorts of issues influencing the DPV (for example, a child's past experiences of trauma or loss), while holding aggressive young people suitably accountable for their actions.

Whereas DPV was described as no longer being a problem by one-third of the questionnaire participants (*n*=10), all but two of the total sample (*N*=30) reported still requiring ongoing help and support. This, when considered in relation to qualitative interview data, suggests that the absence of DPV does not always equate to a reduction in perceived need for support required to overcome the affects of past violence, to intervene with associated forms of conflict and aggression, or prevent the reoccurrence of DPV.

Commonly, quantitative questionnaire participants reported requiring ongoing help and support from their partner/spouse (*n=25*), other family members (*n=25*), and friends (*n=25*). School staff and counselling were endorsed with the next highest frequency (*n=16*), followed by respite care (*n=10*), and workmates (*n=6*). Less commonly endorsed sources of help and support still required were the police (*n=3*), Child, Youth and Family (*n=2*), the Court (*n=1*), and parenting classes (*n=1*) (Figure 6.10). Twenty-two participants endorsed four or more of the eight items. Three participants identified other forms of required help and support including "alcohol and drug counselling" for their child, "a support group" for parents, and one stated she needed further help and support but was "unsure" what this might be.
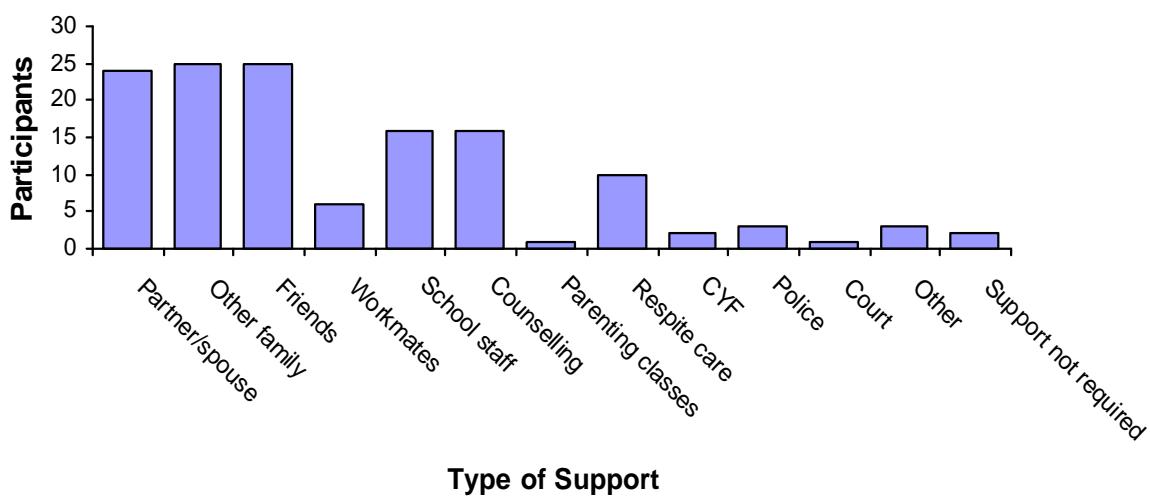


*Figure 6.10.* **Types of help and support participants still required.**

Interview participants provided explanations for why parents or caregivers might feel unwilling to seek the support of particular agencies. For example, several interviewees spoke about attending parenting classes but finding them to be an unhelpful experience. Others had unsuccessfully tried to enlist the help of Child, Youth and Family or the police only to be told there was nothing the service could do for them. The interview data relating to participants' attempts to seek help and the outcomes of those are described in greater detail in chapter nine.

## 6.4 Conclusion

DPV takes various forms and impacts not just on parents, but on others residing within the home. This type of parent abuse is closely related to other abusive behaviours, often occurring during episodes of conflict as part of a broader pattern of violence. DPV may be perceived as less distressing than verbal, emotional, or physical abuse, however, it is difficult to place DPV on a hierarchy of distress given that it frequently co-occurs with other forms of parent abuse. Participants perceived various factors as influencing the aetiology of DPV including children's reactions to parental requests and rule setting, parenting styles, family pressures including parental separation, academic demands, social stress, exposure to violence, and substance abuse. Responses to DPV included ignoring the behaviour, imposing punishments, or eliciting assistance from family members and less commonly, support agencies.

Most participants in the present study reported that they required ongoing help and support. Unfortunately help seeking was influenced by fear that disclosure of the problem might lead to an escalation in violence. Parents and caregivers also felt ashamed or worried they would be unfavourably judged. Furthermore, help seeking was commonly an

unsatisfactory experience, resulting in recipients feeling disappointed, frustrated, and isolated.

The questionnaire findings helped to define DPV, and identified issues (pertaining to both the causes and outcomes of DPV) that required further exploration during the interviews. Similarly, the interview data illuminated the quantitative questionnaire data, offering explanations for parent/caregiver beliefs and reactions to DPV. On the whole, both sources of data were comparable and complementary. The following chapters will now provide a more comprehensive analysis of the qualitative data gathered during in-depth interviews.

# Chapter Seven: Making sense of DPV—Participants' Perspectives

## 7.1 Introduction

In chapter five I described how I first applied grounded theory and then later interpretative phenomenological analysis, using a process of coding, classifying, amalgamating, and interpreting data in order to produce a set of sub-ordinate themes that were then arranged into super-ordinate themes. *Making sense of DPV—participants' perspectives* is the first of the three super-ordinate themes to emerge from the interview data. In this chapter I describe the findings and show the analysis that led me to identify the importance of this theme.

Earlier, several popular theoretical explanations for parent abuse were discussed, demonstrating that while scholarly theories provide possible explanations for why children and young people abuse their parents, they are broad in nature and most are yet to be scientifically investigated (Kennair & Mellor, 2007). Furthermore, they tend to emphasise the role of individual factors or family dysfunction in the genesis of parent abuse, paying little attention to social, political, and cultural influences. There are few reports (in the case of DPV, no reports) of how those affected by parent abuse make sense of their experiences, and how their explanations compare to academic and practice theories.

Consequently, exploring the meanings participants gave to their experiences of DPV was considered a central objective of the present study. In chapter three, I discussed meaning-

making and explained why meaning-making became an increasingly influential interpretative framework in my analysis of the findings.  This is best demonstrated by exploring the super-ordinate theme *Making sense of DPV—participants' perspectives.*

This theme relates to the meanings participants formed about the causes of their children's DPV. Transcript extracts have been included to demonstrate how this theme emerged from participants' responses. They reveal both how participants have attempted to understand the causes of their children's violence, and the complex nature of this problem. The extracts illustrate that personal meanings and beliefs (like academic theories), can be difficult to generate, and that existing theories and understandings do not always fit with lived experience. Transcripts demonstrate personal meaning-making that was largely focused on individual and family explanations, and commonly led to self blame.

This chapter begins with a discussion of participant meaning-making, before considering the ways in which personal meaning-making happens (the search for meaning). Considered throughout is how meaning-making reflects social discourse and both supports and challenges existing parent abuse theories.

## 7.2 Participants' Meaning-Making

All interviewees were invited to express their personal theories about how and why DPV had become a problem in their home. Participants described engaging in personal reflection about DPV characterised by recurrent "Why me?", or "Where did I go wrong?" type questions. Grace's remarks in the following extract reflected a common struggle—the need to understand the genesis of her children's violence toward her:

Grace: That's why I find it hard to understand where all these things came from, when they were brought up primarily with me and not exposed to any of that. That's the hardest thing to understand. Where did the violence come from?

Some participants considered DPV a functional behaviour, aimed at obtaining new items of property:

Brenda: Well she did damage one, pulled it to pieces, only because she wanted another one.

Linda: He came down Bluff Hill using his pedal as his brake and he broke it, because he thought he'd get a new bike.

Jan: If she tired of something, say the TV wasn't big enough, and then it would get broken, so she needed a new one.

Sue believed that her son's infrequent acts of DPV were an adaptive means of stress release. She did not interpret his actions as threatening or a personal affront:

Sue: I let him finish kicking or banging or whatever. I let him know that I am still in the house and that I haven't got frightened and run away because I am not, I know he's not going to hurt me. That's not what it's about.

Sue was unique in this regard though. The majority of participants described reflecting on their experiences and concluded that their children's DPV had been motivated by a desire to cause them emotional harm. The participants' distress was related to the perception that this type of violence is intentional, selective, and very personal.

Brenda described how her daughter targeted her photographs, intentionally destroying them. She regarded this behaviour as a deliberate endeavour to take away something she treasured:

> Brenda: It's mainly things like photos, because she knows I treasure photos, and I haven't got many of the kids. So she finds every one she can and rips them up.

Jan also described damage to photographs. She explained how she was astounded by this premeditated and methodical act designed to cause her emotional pain:

> Jan: Or what really freaked me out was coming home and seeing her sitting at the kitchen table methodically cutting up pictures. It was like there was preparation and thought. She was just sitting there cutting them up with the scissors, and she knew which ones were special to me—which ones I couldn't replace.

Grace also spoke about how even her most precious possession was not spared her children's destructive and abusive behaviour. This is despite all of them being aware that they were not to touch her piano:

> Grace: Even my piano, I had some bad words written on my piano. My piano is sacred, my kids have always known, don't touch my piano.

Gayle feared not just for her own safety, but also for the safety of her dog. She believed her daughter might harm the animal as a way of hurting her:

> Gayle: And she knew to get a reaction from me would be to either, yeah, have control over my dog. Or my fears were of her actually getting someone to take my dog.

Baumeister (1991) postulated that when meaning does not exist or is lost, people experience a "meaning vacuum", and so begins a "pervasive search for meaning" (p. 242). "Why me?" questions following trauma or suffering are an indication that a meaning vacuum exists and needs to be filled. As I noted in chapter three, meaning-making does not always promote subjective wellbeing or happiness (Park, 2010; Singer, 2004). Indeed, as in the case of parent abuse, meaning-making seems a common endeavour, despite often being a very complex and distressing one. As the following sections will demonstrate, in their search for explanations for the violence, participants had come to various painful realisations.

### 7.2.1 Individual and family explanations

Some of the participants described how they saw clear links between DPV and various life events impacting on their children. Experiences such as parental separation, father absence, exposure to adult violence and abuse, mental health issues including Asperger's syndrome, posttraumatic stress disorder, and drug-induced psychosis were some of the factors considered by participants as central ingredients in the aetiology of their children's DPV.

Grace explained how two of her three abusive sons had been diagnosed with developmental disorders. She gave her understanding of how their respective conditions had affected their behaviour:

> Grace: The oldest one has Asperger's syndrome, so there is a real reason for his behaviour. His frustration… and he couldn't express his feelings. I have some compassion for that. He is the one who is mortified after doing it and will come and say sorry Mum. The second youngest was probably the worst for the

vandalism. Then the youngest one, he has a developmental disorder. They knew something was not quite right, but they couldn't really identify it. So he had issues as well. He had a lack of ability to express emotions, and it took a long time before he could express anger. He had some issues as well, and clearly that influenced his behaviour. Of the three boys he was least likely to be a vandal, he is more likely to threaten or run away.

Kate made a connection between her experiences of parent abuse and her son Ben's drug-taking. In the following extract she talked about learning that Ben was using drugs and how drug use had affected him:

Kate: He was really violent but I didn't realise at that stage that he was already on the drugs, a lot. I didn't realise that from probably 12, he's had a lot of drugs. And it's actually… when I started to write down when he was stoned and when he comes off them, it's actually when he comes off them that he's violent and nasty.

Ten of the 14 participants were separated or divorced from their child's other parent. Parental separation was a common theme, described by nine participants as a factor in their children's abusive behaviour. Paul talked about Brad's anger being "mostly" due to his mother's absence:

Paul: I think mostly it was about his mother leaving him… So yeah, pretty big thing for a kid to deal with. I think he was angry with her… and so I wore it. When I think about it, his stuff, like his anger and that got better when he started seeing his mum more.

Commonly, female participants (Gayle, Kate, Sue, Maria, Grace, Jan, Rose, and Linda) identified the absence of their children's fathers as a contributing factor in the DPV. Three of the participants (Jan, Maria, and Linda) spoke of their children's violence being partly

due to witnessing aggressive behaviour by their fathers. Gayle's daughter was the victim of sexual and emotional abuse by her father, while Kate's son had been physically abused by his.

A majority of participants identified a reduction in family stability as the result of parental separation and divorce, and the subsequent loss of father/mother contact as salient factors in their children's violence. Several participants also spoke of modelled aggression as a contributing issue. However, nine participants did not identify adult-modelled violence as a factor in their child's DPV. This finding supports earlier research demonstrating that abusive children and young people may come from non-violent families (Eckstein, 2004a; Gallagher, 2004; Ibabe et al., 2009; Price, 1996), further highlighting how theories of causation need to extend beyond parenting explanations and other family factors.

Bobic (2004) cautioned that we should not ignore pervasive social factors affecting children and young people, such as the influence of peers, the media, and culture, when we endeavour to make sense of parent abuse. Indeed, almost all of the participants identified multiple factors influencing their children's home-based violence. For example, when Helena reflected on the roots of Jemma's aggression she surmised that "peer pressure", and "stress" due to peer issues and parental separation had played "a part":

> Helena: I think with Jemma there's never been one thing that sets her off. It's always an accumulation of several things and it could be major, it could be minor but generally reflecting back, why she did some of those things, partly peer pressure. Stress. And it can be stress because of friends, peer pressure, and there was a lot of stuff going on with the family at that time. All of that plays a part.

Helena's identification of a number of environmental stressors calls to mind theories, such as nested ecological theory, that recognise the multifaceted and complex nature of family violence, and prompts the question—does participant meaning-making reflect that same degree of complexity? Analysis revealed that initially a participant's search for an explanation for the DPV was motivated by the desire to uncover a singular cause, such as a mental health disorder or other innate problem within the child, or an external factor in the form of a significant life event, such as parental separation. Invariably, however, participants were faced with inconsistencies in their theorising that generated confusion and concern. Even those factors with the most strongly perceived links to DPV generally only offered a partial explanation for the violence. For example, Max's daughter had been diagnosed with Asperger's syndrome. He explained that only some of her behaviours could be put down in some way to this disorder. Generally, however, this diagnosis did not completely explain her behaviour:

> Max: There's the Asperger's side of it and then there's the behaviour side of it. But the Asperger's doesn't help the behaviour side of it. Perhaps she's not able to reason as well as perhaps an ordinary person? Maybe she's got a short fuse and it doesn't help, but to me it still doesn't excuse that behaviour.

For some parents, the presence of a mental health or developmental condition might make a child's abusive behaviour more understandable. In Max's case, it appeared to add to his confusion about the aetiology of Emma's behaviour in the family home. Lillian, however, took some comfort from being able to "blame" her son's abuse of her on his psychiatric condition, although she too wondered if the illness "really caused" the aggression:

> Lillian: I have to admit at least I have got something to blame it on. Whether or not that really caused it, because who knows, because I have to admit, I don't.

Earlier in her interview Grace explained the role she felt her ex-husband had played in her children's violence, specifically his absence from their lives. While Grace had come to make strong connections between the influence of paternal genetics and father-absence, and her children's mistreatment of her, in the following extract, her confusion about the genesis of the violence can be seen to have continued:

> Grace: So I put it down to a series of things, but it's hard to understand because, they have got part of me in there as well. Sure they have got their father's genes but how does that balance out, with the way they have been brought up and the fact that they have had a peaceful, calm, loving environment? So it is hard. You can intellectualise all that, but it still doesn't make it any better or any more right when you say that to people. It still doesn't answer why they have done all they have done.

The preceding extracts reveal that meaning-making in response to parent abuse, can be a complex endeavour. In this study, participants considered individual and family factors (for example, parental separation, father absence, and mental health problems) that Bronfenbrenner (1979) and other ecological theorists would have identified as belonging within the microsystem. As previously discussed, most of the research on parent abuse has examined microsystemic issues such as the quality of family environments and parent-child relationships, and found support for the role these factors play in the development of this problem. However, as will be shown, some of the participants described personal meaning-making that moved from focussing solely on microsystemic issues, to considering a range of other influential factors that require further investigation.

**7.2.2 Psychological and interpersonal issues**

Several participants identified issues contributing to the development of their children's DPV, but described them as being largely inaccessible and unmanageable. This was because their children would not talk about issues and experiences that seemed to have influenced their abusive behaviour. The concept of deeper issues, which emerged in the first interview with Gayle, then re-appeared in subsequent interviews, speaks to DPV and other acts of parent abuse stemming from significant psychological and interpersonal issues. Many of the participants described their children grappling with complex issues and problems, and their frustration that even they, let alone others who might see and judge the behaviour, cannot fully understand them. Deeper issues were a source of worry for these participants who felt that abusive interactions reflected their children's distress. Gayle reported how she thought DPV is inaccurately put down to "behaviour and what's going on in the home", failing to appreciate the deeper nature of the aetiology of this phenomenon:

> Gayle: You know, it's always put down to behaviour and what's going on in the home. But it's always something deeper under that.

Helena's transcript shows a continuing narrative about the role that deeper issues seem to play in DPV, and her reflections were typical of the concerns of several other participants. She introduced the theme of deeper issues by speaking of the link between her daughter Jemma's "fears and frustrations" and property violence:

> Helena: It's not about locking her up and throwing away the key, it's about what brought her to that stage that she had no other options… she had to take her fears and frustrations out on me or in my case, my property.

Helena had encouraged Jemma to express these things at home, but then the intensity of expression increased and she was left wondering about her advice and management of these issues:

> Helena: I don't know what the mentality is about it all, but in my situation, generally I raised them so that they let out their frustrations at home. If they had problems at school they could come home where it was safe and they could vent at home, rather than venting at school because that creates a whole new issue. But I wonder how successful that was. It's not just about them being able to vent at home but it's me being able to manage that as well, and I don't know whether that was something that I managed very well.

Deeper issues made it more difficult to respond to DPV. Helena felt she could not understand these issues and therefore could not help. Further, she felt unable to apply meaningful consequences to prevent future misconduct. Her relationship with Jemma had "disintegrated" and she was left feeling "really inadequate" and "despondent" in her parenting:

> Helena: After that, you just … the trust is gone and it's deeper than a trust, it's the bond, it's that relationship, it's the communication without speaking thing that we had, that just disintegrated. And I felt responsible to try and pull it back on track, and I felt quite inadequate as well as a parent … to have these things happen and to not actually, and to know that there's something deeper going on but to not know how to handle that, how to deal with it. So you're trying to think of techniques to be able to say hey come on, you've got to be responsible for your actions and these are the consequences. But when the consequences don't work then what are you left with. So I felt really inadequate and quite umm … quite heartbroken I guess because we were really close and stuff like this happens and for her to not be able to talk to me and for her to have to do this to get my attention and then for me not to know how to handle that, umm, you come away feeling really despondent.

In the final part of Helena's narrative about deeper issues she offered a recent example of conflict with Jemma, precipitated by what she described as a "core issue". The following extract offered a description of how issues persisted over time, were never really resolved, and re-emerged during times of conflict. Again, the theme of parenting inadequacy was present in Helena's remarks:

> Helena: … it's been physical as well. About six weeks ago we had a set-to. She umm … we ended up; ah … it started out as a verbal confrontation and escalated from there. The end result was we were both a bit battered and bruised and she ended up phoning her Dad and he came and picked her up. The core issue never got dealt with.

Helena's experience was similar to that of several other participants. In order to make sense of the violence, they attempted to better understand the deeper issues impacting on their children. This was a difficult, at times futile endeavour. In the extract below, Gayle described a sense of powerlessness and inadequacy because her daughter expected her to help, yet she was unable to do so:

> Gayle: So you know, she used to throw at me—you're my mother, you should do this. You're meant to hear this or you should help me. But the stuff that she wanted help with I couldn't. No one else could because it was about herself. No one else could even tap in.

When a child was violent, parents looked to a range of issues that may be precipitating this behaviour. Frequently the search uncovered personal and social issues that were largely outside of their control or management. For many of the participants, linking DPV to

deeper issues had led them to experience confusion, frustration, and a sense of parental inadequacy.

### 7.2.3 Power and control

The concepts of power and control are inextricably linked to family violence literature and theory. Bobic (2002) purported that parent abuse, like all forms of family violence, is driven by the desire for power and control. Others have argued that there are significant differences between power and control factors present in adult-perpetrated family violence when compared to parent abuse (for example, Browne & Hamilton, 1998; Gelles, 1997; Kurst-Swanger & Petcosky, 2003).

The loss of power and control over one's child was another frequent theme in the present study, and one that linked with society's ideas about parental responsibility. That is, the distress associated with losing control was compounded by knowing that society expected parents to be in control of their children, and failure to achieve this was considered irresponsible parenting.

Feeling powerless in the face of abusive behaviour was a common experience, and for some, a further source of shame. Ann was one of several participants who spoke about power and control issues. In the following extract she described a transition from being in control to losing the power in her relationship with Tony. In her experience this happened "quickly" and left her at the mercy of her son's moods and emotions. Ann remarked that this "sounds silly" because she recognised that society regards parents as more powerful than children, and therefore, parents are expected to remain "in charge":

Ann: I think it's more about what he had, or how he could have the power. And he did, he was more powerful. And I know that sounds silly because he was a kid and I was the adult. I know it's all about who's the adult and parents being in charge. But honestly it can happen so quickly. You can be in charge or be able to control things one minute and then …, you know, everything is a battle.

Brenda described being resigned to the idea that power and control has been lost to her daughter. Ava had out-smarted her in this regard and now held all the power:

Brenda: I think she realises there is nothing we can do now. She's heard the cops can't do anything, can't take her away. She sort of learnt that she can do what she wants.

In Helena's experience, control had been eroded over time, assisted by Jemma's increasing expectations and the influence of her peers. For Helena, losing control was connected with uncertainty about how to parent her now 18-year-old child:

Helena: Yeah but now I don't know how to parent her. Because she's 18, and gosh even when she was 15 I really struggled to parent her, because when they're 15 they think that they know it all and are entitled to leniencies that I never had, or that their friends have more than anything. Because their parents let their friends do this, this, and this. You don't feel like you have any control.

For other participants, losing control was less about their own actions and more about social influences. This was a particularly strong theme in Grace's transcript. In the following extract she remarked on how her "hands were tied" and this placed her in an impossible position. Society expected her to be in control of her children, yet she felt both powerless and unsupported:

Grace: I am not the boss of my kid anymore. Until parents get some more authority back. My kids knew by the age of 12 that I couldn't do a thing to stop them and therefore they could do anything they wanted and my hands were tied. Yet if I don't make them do it I am in trouble, if I can't make them do it I am in trouble, whatever way I look at it I am in trouble. I can't force them to do it, but somehow if I can't make them do it, then the law comes back at me because I am at fault …. The trouble is there is nothing to back me up. If I can't make them behave then I am in the wrong.

Max made a connection between the education and political systems and his perception that young people have too few restraints on their behaviour and too much power. He felt that his "tools" to parent had been taken away by "liberal" government systems that had eroded his parental control:

Max: Now it's just getting sillier and more liberal. It's one thing after another. I think schools are out of control. Nonsense. So I blame all this crap … well that's why I don't have any hesitation getting on the phone and calling mental health and this person and that person and saying you people do something about it, you people get money from the government and the government's created all this. I don't know if I am like Emma where I am blaming everyone else instead of looking at myself, but all my tools have been taken away. The tools that my parents had have all been taken away.

Similarly, Jan felt that "society has empowered children" at the expense of parental rights. She regarded this to be a "scary" outcome:

Jan: It's like society has empowered children, which is good to an extent, but now they are so empowered that they have, they have been given extra rights and so forth, there's no stopping them. That's scary because that's the next generation that don't learn the consequences of their actions.

The loss of power and control over one's child was a concern shared by almost every participant. Power and control were not consciously relinquished to their children but rather this shift in relational structure crept up on them, before taking hold. Most of the participants saw their power and control being eroded by social and political attitudes and systems that undermine parental rights. Losing control of one's child was associated with various negative emotional experiences including shame, embarrassment, and particularly self blame.

### 7.2.4 Self and societal blame

Cognitions pertaining to self blame were a very common finding. Kate described thinking about how she had "brought up" her son to be a bully, and the emotional impact of this. She made a strong connection between Ben's aggression and his physical abuse at the hands of his father, yet still took responsibility for his abuse of her and others:

> Kate: See my husband was a bully, so to think I brought up my own son, who's turned out to be a bully, is pretty shattering.

Meanings arise from specific circumstances and in our exchanges with others (Bruner, 1990). Interpersonal meaning-making refers to the manner by which talking with others can influence meaning-making (Park, 2010). Messages can be powerful in terms of meaning-making on the basis of their source. For example, many of the parents in the study described receiving information and advice regarding the cause of their child's aggression from family members and friends. This information in some cases contributed to their sense of shame and confusion:

Ann: You have your softies who think you're being too hard on him. We had that. When Tony was 16 we stopped him from going on a cricket trip to the North Island. That was because his behaviour had been so bad. He'd even pushed me around. He'd been pushing and shoving his younger sister and then a couple of times pushing me into the wall too. So Paul said, "That's it". And we pulled him out of the tournament. And my brother-in-law thought that was too harsh. But then other times we'd be hearing that we were being too soft on him. Paul's other brother thought we should have taken everything off him and that we weren't being strict enough. So you are confused.

Helena: Well a lot of what's happened with the property damage, I've tried to hide. Mainly because, I felt inadequate, umm and embarrassed by what had happened but also knowing that it's not just about that incident, that something's triggered that incident. And the general reaction from everybody else is punishment. Like, putting in their set of consequences that don't necessarily align to mine.

When Jan asked a close friend, "Where did I go wrong?" she was told that she had "spoilt" her children. The friend offered a more positive remark regarding how Jan was "always there", although this may have only prompted Jan to think about how she later needed to go out to work, and her guilt surrounding this:

Jan: And I said to her, "Where did I go wrong? And she's like, "You spoilt them". She said, "Those kids never went without". But she also said, "You were always there". I didn't work, I was a stay-at-home mum. Then I had to be a working mum because I was studying and I felt really bad about that.

How parents made meaning of their children's DPV could be influenced by popular social and political discourse, and other messages about aggressive children and the role of parents. Maria, Gayle, Jan, and Grace all described experiencing messages of blame.

Maria talked about the way "people" made assumptions that aggressive children have been raised by aggressive parents in violent homes:

> Maria: As we discussed, people perceive that if you have a child that is aggressive then you are an aggressive parent, you provide a home that is aggressive.

Gayle, Jan, and Grace described receiving similar messages through their involvement with social agencies:

> Gayle: That I must have done something to contribute to her behaviour, because that was what I was being fed back by a lot of the agencies that we'd tapped into.

> Jan: Yeah, well I felt it was my fault. It was me that was in the wrong. With my kids the way they were, it was me, I was the parent, and I was the mother. It's always the mother's fault (laughing). So, and that's a real society-type thing. In the end even Family Courts blame the parents.

In Grace's case, the agency was Child, Youth and Family (CYF). She described a "mindset" that children are always innocent victims of faulty parenting:

> Grace: Yeah, for me personally what I can't stand, I had to deal with CYF a lot, and I'd go in there and I would see these posters on the wall and the message is that parents are at fault. And you're walking in there with your child who is abusing you and breaking into your house, and taking your car and kicking holes in your wall and you feel violated. And you are often dealing with people who have a mindset about that it couldn't possibly be the children.

Participants made the above statements within the opening minutes of their respective interviews, prompted by being asked about their reasons for participating in the study.

They shared the desire to alter society's views about the nature and causes of parent abuse. Almost all of the participants spoke of wanting others to better understand their plight and to cease making unfair judgements about their parenting.

Later in her interview Grace referred to parents as society's "scapegoats" for the problems of youth substance abuse and truancy, even when most parents do not actively encourage these behaviours. Grace then remarked on her own situation and how despite her best efforts at parenting, her children did not comply with her requests:

> Grace: I think society doesn't value parents. Parents are the scapegoats for everything. You read it in the paper. I don't know how many things I have read in the paper talking about parents. There has been heaps of it lately. How many parents do you see who are genuinely giving their kids dope or access to booze, or not letting them go to school? How many are actually like that? Most people love their kids and I mean I remember the times I lectured my kids about things, they still wouldn't listen to me.

Social constructs influence parents' perceptions of their role in the development of their children's aggression. It seems that on one level, the mothers interviewed (more so than the two fathers and the one foster parent in the study) were able to say that they had given their child a good life and that they had been a good parent, but yet they were never really able to shake off the sense that they were to blame. Held beliefs and social/institutional messages that parents are ultimately responsible for their children's behaviour were pervasive. Ann compared her child-rearing practices to dominant social expectations about parenting. While she could not consider herself a "perfect" parent, she recognised there was no such thing, and she was satisfied that she had done her best to provide her son with

a "nice home" and a "good life", free from adult-perpetrated violence. Still, she wondered why Tony was violent:

> Ann: I think one of the biggest things for me was feeling like I had done something wrong. I mean no parent is perfect but I thought I had done a good job with the kids. We have a nice home and you know the kids have nice things. We don't drink or smoke. The kids haven't grown up with seeing Paul and I battling like some kids see. So you know I just can't really understand why things happened with Tony the way they did then.

In the absence of other seemingly viable explanations for the DPV and in the face of dominant social and agency messages, self blame developed. As Grace posed, "Where else can the blame go?":

> Grace: And this is the thing that I have found really hard. People think well if they do that they must have learnt it from me. Well they didn't learn it from me. I am a very passive person, very much against violence. My kids cried one time because I raised my voice and said shut-up. Do you get the picture? I don't swear at them, I really try hard not to yell at them. It's not my style and never has been, so you find it very hard to accept blame, at the same time you know that you have raised them, so where else can the blame go? That's the hardest thing, is that the finger gets pointed all the time at you as the parent.

Meaning-making is influenced by dominant social messages and popular theories, for example the intergenerational transmission of violence theory, which are disseminated and strengthened through the media, social agencies, and other sources. Many of these messages are based on notions about who is to blame when problems exist, and reflect a general reliance on microsystemic factors. For the majority of participants, these messages

and their own confusion about the source of the DPV led them to wondering about their role in the development of this problem.

Self blame appeared to be a common meaning made even in the absence of obvious contributing factors or indeed when strong links between life-events (for example, child abuse and parental separation) were perceived. With respect to the latter, self blame emerged from beliefs about failing to protect ones child from the emotional impact of negative life events, even when one was not the doer of harm, so to speak. Such was the case with Sue, who seemed very certain that John's intermittent DPV was the result of his distress at his father's decision to leave the marriage three years earlier. Previously in the interview Sue described the emotional impact this had had on John, and how this life event was pivotal in the emergence of the DPV. In the following extract Sue talked about enduring "huge guilt" associated with not being able to provide a "stable family" for her children:

> Sue: There's still this huge guilt that I haven't provided a stable family for them. Because that's what children should expect. That's what you should all strive for when you have children. That you raise them until the end together. That's my core belief really.

## 7.3 The Search for Meaning

Just as analysis of transcripts revealed commonalities in participant meaning-making outcomes, a close look at the ways in which meaning-making happens also revealed shared aspects of this process. As previously discussed, time, language, and sociocultural factors have consistently been shown to influence meaning-making in response to a range of life events.

The influence of sociocultural messages has been described above. I also considered the manner in which time and language had particular relevance for participant meaning-making in the present study.

### 7.3.1 Meaning-making is a process across time

In chapter three a popular model of meaning-making was described, introducing the commonly accepted notion that meaning-making is a uniquely individual process that occurs over time in a recursive manner (Skaggs & Barron, 2006). As the research progressed and data relating to meaning-making processes emerged, I became increasingly interested, not only in the meanings made by participants, but also their meaning-making journeys. Analysis of interview transcripts revealed commonalities in meaning-making processes. Most notably, I found that meaning-making oscillated between periods of confusion and clarity, and often continued long after the abuse had ended.

In Ann's case, Tony's abuse ceased three years earlier, yet she still wondered why it happened to them. The meaning-making had continued with time, even though Ann had resisted dwelling on the abuse. It seemed her need to make sense of the abuse was a more powerful force than her desire to "move on".

> Ann: I don't want to dwell on things. I think you have to move on, but I do still wonder about why it happened and maybe what it was about my husband and I.

For Grace too, the wondering continued. Her meaning-making was very active and scholarly as she researched theories such as "nature versus nurture" in her continuing search for answers:

> Grace: I guess I am an expert on my family. I am not an expert on the whole. I am not a psychologist, but I have read quite a lot, because I am trying to understand why. And I do understand some of the principles of nature versus nurture.

DPV was not easily understood, with given meanings changing over time. As shown by extracts from the interviews, meaning-making was contextual and the way in which meanings were constructed depended on a range of factors including temporal proximity to the violence. Distance from the abuse seemed to enable a level of reflection that might not be possible or indeed safe in the face of continuing threats of DPV. Time was one of a range of factors that influenced participants' pursuit of meaning.

### 7.3.2 Meaning-making and the role of narratives and language

Participants' narratives revealed that the meaning-making journey often began with a cognitive shift from viewing their children's behaviour as normal to recognising the abusive and damaging nature of the problem. For some of the participants, this realisation had occurred several years ago, while for others it was learning of the present study that had prompted this awareness. Giving the experienced phenomenon a name, and therefore language to talk about it, had represented the moment of realisation for several of the participants.

For Jan, hearing of the study had prompted an "ah ha" moment, in which she moved from viewing her daughter's DPV as part of teenage behaviour, to being a form of abuse:

Jan: You know how you get the light bulb go off in your head, the ah-ha thing? That's what was happening and I didn't even know.

Helena described a similar reaction to hearing about the study and thinking about the term parent abuse. She had previously thought of Jemma's aggression as a product of inevitable "bad days":

Helena: I'd like some attention on that, because I've never really looked at my situation as it being a child abusing me. I've just accepted the fact that they have bad days. You know, like adults have bad days. I've never labelled it.

Kate offered a narrative that described her journey from "denial" to "action" over a four-week period, prompted by hearing the term parent abuse for the first time, learning of the present study, and being encouraged by a friend to participate. Having her friend identify Ben's violence as parent abuse was confronting for Kate. She described being "physically shocked" by this realisation

### 7.3.3 Meaning-making is complex

For a number of participants, meaning-making was complicated by confusion associated with the changeability of their abusive young people. Two participants used the metaphor of Jekyll and Hyde to describe the very different sides to their children. Kate was one of them. Earlier in her interview she had spoken of Ben's capacity for serious violence, while in the extract below she described him as "the most charming young man" with "big brown eyes and the cutest smile":

Kate: Yeah. Because he's got the biggest brown eyes and the cutest smile (laughing). If you met him you'd think he was the most charming young man. But this other side is just like … whoa. Like Jekyll and Hyde.

The use of the Jekyll and Hyde metaphor is interesting. Generally this image is used to describe someone who can change from one thing to another—a person with a tendency for disturbing and unpredictable violence, yet an equal capacity for goodness. More than half of the participants spoke about the different sides to their children. The following are examples of extracts during which participants helped the researcher to develop a broader understanding of the child they were describing:

Gayle: She does have lovely moments.

Sue: No, he's nothing but polite and kind. We've got animals and he's good to the animals.

Paul: He was a pretty rough kid. There was nothing wrong with him. He was just quite rough. But a good kid most of the time. They didn't have any trouble with him at school, or anything like that.

Ann explained that others perceived her son in a very positive light. The fact that Tony's aggression was limited to home, made it more difficult for Ann to understand the aggression he directed at her. The following was her response when asked if Tony behaved aggressively in other settings:

Ann: No, not at all. And I think that makes it harder to understand in lots of ways. I mean, how can he be this kid around others and then treat me like he was doing? I thought sometimes that even if I did try and get some help, I don't think people would believe me.

It seemed that, for the majority of participants, it was important that others (including the researcher) knew of the goodness in their children. Seeing one's child in a positive light is important but confusing when there is a stark contrast between the violent child at home and the non-violent child in other social domains. Adult perpetrators of family violence commonly reserve their abusive and aggressive behaviour for home life, never revealing this side of themselves to non-family members. So too, it would seem that in some cases parent abuse is the behaviour of otherwise non-violent, prosocial youth. This type of situational violence can have the profound impact of leaving the victim feeling responsible for the abuse.

While parent abuse is an expression of youth violence, this phenomenon is only partially explained by existing youth violence theories. No single theory adequately explains why some youth, who for the most part adhere to social rules and norms, behave violently toward their parents. Paterson (1999) found that acts of parent abuse are in many, an exception to otherwise non-aggressive interaction styles. Nine of the 14 participants in the present study could attest to this.

In general, analysis found that participants appeared to be looking for ways to develop a positive narrative about their relationships with their children. Several had seemingly achieved this. A smaller group, however, did not invite the researcher to see a non-aggressive side to their children. Time free from the violence appeared to have enabled some participants to begin to reflect positively on their children's nature.

## 7.4 Conclusion

Parent abuse is a topic that is loaded with personal meaning, and we can learn a great deal about this problem by directly exploring parents' construction of meaning and the factors that influence this. The present study shows that participants commonly engaged in meaning-making processes in an attempt to answer the question, "Why is my child behaving in this way?"

Just as existing family violence and youth violence theories do not readily account for parent abuse, participants' early meaning-making or personal theories were also often incomplete and inadequate. Participants commonly expressed the bold contrasts in their children's behaviour, in some cases using the metaphor of Jekyll and Hyde to express this. But like the story of Dr Jekyll and Mr Hyde (Stevenson, 1886), DPV seldom reflected a true personality or behavioural dichotomy. When simple binary explanations such as my child is innately bad or disordered did not suffice, participants, like ecological theorists, began to consider various levels of influence, and used more than one type of meaning-making (for example, psychological, social, and cultural explanations).

DPV and other acts of parent abuse presented participants with a type of meaning crisis, challenging their global meanings about parenting—global meanings such as that parents are responsible for their children's affective and behavioural responses or that parents are more powerful than their children. Developing situational meanings or explanations for DPV such as that their child was suffering or their child was disordered, may have partially assisted participants to understand the significance or impact of the violence, but did not necessarily achieve the task of reconciling situational meanings and global meanings.

Some participants had engaged in meaning-making for some time, while for others, the recognition that their child's behaviour was not "normal" was newly acquired, and their meaning-making journey had just begun. The cognitive shift required to accept that one's child was behaving abusively could be a difficult and distressing one to make. The construction of meaning was influenced by a range of variables, pulling meaning-making in various directions (for example, self blame, blaming others, blaming society in general).

Meaning-making seemed to inevitably track a course of self blame. Parents assumed responsibility for their children's aggression in the absence of apparently more feasible explanations. Participants, influenced by privileged social beliefs that position parents as ultimately responsible for their children's behaviour, felt they must be at fault because they had failed to either comfort their children (and resolve deeper issues), or control them.

Meanings made about DPV and other forms of parent abuse do not exist in isolation from other aspects of parents' lives. As demonstrated in the following chapters on the impact of DPV and participant responses to this problem, meanings may be persistent and invasive, influencing how parents feel about themselves, and how they relate to others.

# Chapter Eight: Damage Done—The Various Impacts of DPV

## *8.1 Introduction*

*Damage done—the various impacts of DPV* was the second of the three super-ordinate themes to emerge from the interview data.  This chapter explores commonalities and differences in the ways that the experience of DPV had impacted on participants. The consequences of DPV were described by participants in emotional, physical, relational, and financial terms. Interviewees spoke of the impact on themselves, on their other children, on their marriages, and on family life in general. Mostly, participants spoke about the impact of DPV on their relationships with their abusive children.

The idea that DPV and other forms of parent abuse can be traumatic is a salient sub-theme in this chapter. The concept of trauma was introduced during the very first interview and appeared in the narratives of most participants. As previously mentioned, traumas that are perpetrated by a loved one often have the most enduring negative impacts (Allen, 2001). When participants spoke about their experiences, frequently involving revictimisation over a period of time, they described reactions that have been commonly reported as post-trauma symptoms in the literature, including emotional numbing, avoidance, hypervigilance and threat appraisals, intense fear, and a range of other distressing emotions.

Repetitive and cumulative experiences of interpersonal violence and abuse, earlier defined as chronic traumatisation, can lead to complex trauma reactions and serious mental health

conditions such as posttraumatic stress disorder. This chapter provides a description of the impact of DPV and other forms of parent abuse on participants, revealing that chronic traumatisation and complex trauma are constructs relevant to this study. It is important, however, to acknowledge that in many instances participants moved beyond describing property violence, referring to experiences of threatened or actual physical assault. Indeed many of their trauma-type symptoms were closely associated with the threat to bodily safety. It would seem that acts of intentional property destruction can be indicative that further violence (of a direct physical nature) is both possible and pending. DPV can send the threatening message, "If I can do this to your things, imagine what I could do to you". This is a sentiment that was also expressed by participants in Edenborough et al.'s (2008) study of mothers' experiences of violence at the hands of their children.

Following on from chapter seven, meaning-making continues to be an important theoretical and interpretative framework. Indeed trauma and meaning-making are closely related in the present study. Beyond issues of trauma, meaning-making relates to a range of impacts of DPV. As will be demonstrated, various meanings made, such as self blame, had a notable impact on participants' lives.

## *8.2 Describing the Impact*

Participants were invited to tell a personal story to describe the impact of living with an abusive child. The following question, posed during Kate's interview, is a typical example of such an invitation:

> Latesha: Can you think about a particular event we could talk about that would be a good description of what you have been dealing with?

In response, Kate spoke about her son launching a violent attack against his sister and the high level of family stress and conflict that followed this event. Like Kate, most of the participants offered narratives about the most serious episode of violence. Ann described her worst and last experience of Tony's violence toward her, as follows:

> Ann: Definitely that one, because it was, I think the worst. He was in a real rage and for the first time I felt really afraid for my safety. So yes that one. And I think it was the last time we had something like that. So it stands out for that reason too.

Analysis of individual transcripts revealed that participants used strong words and metaphors to offer the researcher a rich understanding of both the context and intensity of their experiences. Certain words and meanings were shared by participants. For example, in the passage above, Ann used the word "rage" to describe the state Tony would enter. Microanalysis of all the interview transcripts found that rage was a word used by six participants to explain extreme anger reactions. Further, "rage" seemed to be a way of explaining that the child had lost control of his/her emotions and actions. An extract from Maria's interview demonstrates this point:

> Maria: … he got this malicious look, this determined, wild angry look and his whole face and you know he's not in control. It's rage. And you know he's got himself there.

Gayle began by explaining why she agreed to participate in the study. Later in the interview she explained that the incident she referred to here was a serious physical assault by her daughter:

Gayle: Just reading about what was delivered with the first email about parent abuse and ahh, just with what I have recently just gone through. Which wasn't my worst fear, but it was the fear before actual death.

As Gayle's narrative unfolded, she further explained where her intense fear came from. Gayle's fear is readily understood in the context of her past experiences of abuse and her daughter's "rage":

Gayle: I kept saying to the cops, like she would go into a rage, her pupils would dilate, because I believed that she had the rage to kill me. She tried to stab me where the police were involved and it was the first time she was removed from home, they kept her overnight and sent her home, because it's about me "communicating with her". She was looking through family photos and this triggered something off and an argument happened between her and her sister, so I split them up and she just wanted me gone. I hid behind a door and she had that much force she put the knife three times, straight through the door.

For Gayle, death was a very real possibility. She saw her child as capable of killing someone, killing a beloved pet, or taking her own life:

Gayle: She could kill someone, she could kill my dog, or she could kill herself.

When invited to share experiences of DPV, participants offered various examples of this form of parent abuse. Their narratives revealed the many ways they had been affected, particularly when the DPV had occurred repeatedly. To follow is a detailed description of the ways DPV had, and in some cases continued to, impact on this group of parents/caregivers.

## 8.3 Impacts Accumulate and Persist

While particular episodes may have been recalled and shared because of the meanings participants assigned to them, the severity of the violence, or the significance of the damage, events did not stand in isolation, but accumulated over time to heighten the emotional impact of the abuse. Ann's explanation reflected a sentiment that was echoed by others:

> Ann: Look really there were lots of times, it's quite hard to separate out any one in particular. They were all upsetting. I think they all had an effect on me in some way. I don't think you ever get used to it, just because it's happened a few times.

Gayle eloquently used a "string of beads" metaphor to describe the weighty significance of this repetitive problem of DPV in her life:

> Gayle: Each one has been huge and I believe that each time something happened, the past one would kind of lump into that, so each time another one. It was almost like it was a string of beads that was around my neck or something. But each time it would get heavier and heavier and heavier.

In the passage below, Max spoke of the "relentless" nature of his daughter's abuse, which was sometimes triggered by his mere presence:

> Max: It's every day and it's relentless, just every day. Every single day, she's f... you this, and f... you that, for no reason. I might just come home from work and not say anything and oh f... he's home and what's he doing home?

Helena also described the accumulating impact of the violence. She and Jemma had been unable to resolve their differences, and so Helena awaited the next episode of conflict and aggression:

> Helena: Because I haven't been able to get any resolution for myself, for Jemma, and for our relationship, it's accumulated. So although we've had our physical altercation I am still waiting for the next one, when is that one going to be, and what is that one going to be about, and how do I cope with that.

The impacts of DPV might persist even when the participant had developed a much improved relationship with his/her child. Grace described how the hurt endured over time. She explained that it was now part of who she was. Grace's experiences of DPV had had a profound and enduring impact on the way she now responded to others—with caution. Grace, herself, like many of the possessions her sons destroyed with their violence, could not be "fixed". This outcome can be considered in relation to the cognitive/worldview models earlier described in chapter three. Experiences of parent abuse and subsequent meaning-making had changed Grace's worldview. Where once she might have possessed global beliefs that enabled her to view the world as a safe and predictable place, now people (even her own children) could not be trusted:

> Grace: There will always be a part of me that hurts because I don't think you can go through all of that, and get over it. Well you move on, but it's always there, it's residual, it's part of your family, of who you are. There will always be a part of me that is a bit untrusting and I have to live with that because that's what I have gone through and I don't know if that can be fixed. That's one of the outcomes; it makes me cautious, guarded. I temper my decisions with a bit of caution. Having been through what I have with the kids and knowing what they are capable of, I have to be cautious.

All forms of family violence are destructive with the potential to cause long-term physical and emotional injuries (Williams, 2006). Studies of family violence have often focused on specific types of violent behaviours and resulting outcomes. Compared to physical and emotional abuse, DPV has seldom been studied as a separate form of abuse. Yet, DPV is both significant and unique because the physical outcome of property damage can leave tangible reminders for many years after the violence:

> Sue: After that you patch up the door but there's always this reminder, this rough patch under the paint.

> Grace: We moved out of our old house because it had so many things the kids had damaged, I couldn't bear living there.

Sometimes participants could not immediately afford the cost of mending holes in walls, replacing smashed windows, and repairing other forms of damage (for example, the obscenities etched into Grace's treasured piano), and so visual reminders of the DPV prolonged the emotional and financial impact of the abuse. Similarly, the impact of DPV might endure, not because the damage remained visible, but because a precious personal item had been lost forever from the home, no longer available to be admired, touched, or shared with others.

## 8.3.1 Comparing DPV to other forms of abuse

As shown in chapter six, in this study DPV rarely occurred in isolation, but rather was commonly part of a broader range of abusive or violent acts. In order to explore the impact of experiencing multiple forms of parent abuse, interview participants were asked if it was

possible to assign a type of impact-hierarchy to differing forms of parent abuse, and if so, where DPV would fit?

Gayle could not distinguish between the impacts of various forms of violence. All episodes of abuse had been traumatic. She explained how acts of DPV and verbal abuse had the impact of triggering fear about what violence was still to come:

> Gayle: So whenever I have been in a situation like the recent past to where she might have got verbally aggressive or she put a hole in the wall or something, I would feel exactly the same as if she just got in my face any old. It would… umm yeah it's a trauma.

> Latesha: It's not the action, it's the impact?

> Gayle: It's the impact of the past and the, you know, the fear of the future, and what could unfold.

Jan described how she found the "psychological" abuse the "hardest" in her relationship with her daughter, Karen. When talking about the impact of differing forms of parent abuse, Jan began speaking about her experiences of abuse by ex-partners, perhaps as a means of explaining that she was capable of making such a distinction:

> Jan: I wouldn't put physical abuse at the top and I've copped physical abuse from ex-partners. The bruises heal. But yeah with Karen I think it's the psychological that's more damaging than the physical.

Jan, like all of the participants, described the impact of the DPV in emotional terms. In the next section the psychological impacts of DPV that were described by the participants are considered in greater detail.

## 8.4 Psychological Impacts

Both the quantitative questionnaire and the semi-structured interview schedule included items designed to elicit participants' accounts of psychological distress triggered by experiences of DPV. As previously mentioned, questionnaire respondents were invited to provide distress ratings when comparing the impacts of various forms of parent abuse. Similarly, interview participants were encouraged to describe how they felt before, during, and after episodes of DPV, with interview data providing a much richer source of information than responses to quantitative questionnaire items.

### 8.4.1 Fear

Threat appraisals and anticipatory fear were common findings. Indeed, fear was a theme present in 11 of the 14 transcripts. The three participants who did not speak of being afraid were notable, but for different reasons.  In chapter seven I described how Sue was unlike the other participants in that she did not perceive her son's DPV as either concerning or threatening, but rather a healthy expression of pent up negative emotions. Interestingly, neither of the two male participants expressed a sense of fear, perhaps confident that they were stronger and could protect themselves from physical harm.  Bodily harm was a reality for six of the participants, who described being physically assaulted by their children. Fortunately the resulting physical injuries were relatively minor. Five others described being in situations where they felt physical assault was imminent.  In the extract below, Ann recalled feeling afraid that Tony might strike her, something she had previously anticipated happening:

Ann: It was scary and upsetting at the time. But I had been I guess anticipating that that might happen. I could see that there were times when he was just in a rage, really furious. So I think you half expect that you will get hit.

Eight other participants also described this anticipatory fear, sometimes precipitated by visual cues, and their hypervigilance to these indicators. For example, Lillian explained how she could detect changes in Mike's demeanour:

Lillian: You can see when he's changing into someone who's controlling, manipulating, and aggressive. Because it's like he gets two inches taller. When he stands up, it's like he's grown. It's his stance. It's hard to explain, but you can see it.

Similarly, Maria described several of Joel's "body language" indicators of impending violence, such as "crowding" and "chanting". Later in the interview, she explained why she took these indicators of violence very seriously:

Maria: Because he is so intense you cannot just say oh it's a threat, because of how intense he is, you cannot guarantee that he will not do what he says he will.

Grace also talked of an uncertainty about how far her three sons might take their violence. The extract below is part of a longer narrative taken from her interview describing how she discovered one of her children had badly damaged the flat she was paying for him to live in. Grace was aware that her son used alcohol and drugs and that both could heighten the risk of violence. The uncertainty and the unpredictability were what made the situation "horrific":

Grace: I knew they were doing drugs and drinking. So you can't trust someone in that state. You don't know how they are going to act, and that was horrific.

Most participants explained that their emotional distress was related to the fact that not all violence could be anticipated or prevented, despite their best efforts. As Maria commented, "you can have your triggers and your steps up, but then it can just go".

For several participants, DPV often indicated escalating violence. Gayle explained that DPV triggered fears about what could follow the DPV:

Gayle: Because to me even though it's like property damage it's deeper than that. It triggers off all sorts of fears of what happens after the property damage. To me the property damage is just the beginning of what can escalate.

Fear is an understandable reaction to the threat of property damage and physical harm, and often facilitates self-preservation. For the participants, fear was not just for one's own safety but often extended to a deep concern for the young person's development and wellbeing. Almost all interviewees expressed feeling worried about their children's limited capacity to effectively manage their anger:

Gayle: It would always reaffirm my worst fears that the next time it's going to be me, or next time she's going to kill herself. It's just going to get that unmanageable. That she's just going to want it to stop. That's my worst fear as a parent.

Ann: I worried that he would just get worse. You can't keep a job if you've got anger problems. Would we have a son that would treat his wife like that?

As the participant extracts show, fear was a very real and common response to their children's anger and aggression. However, children's anger was not the only anger experience for these parents, most of whom described their own anger reactions to the DPV.

### 8.4.2 Anger

Anger was an emotion expressed in relation to the DPV by all but one (Sue) of the participants. Sometimes anger was expressed as a driving force behind turning points and change. Anger can prompt change, but for several participants, this first required a shift in the meaning they assigned to the behaviour. In an earlier extract Kate described a "realisation" that Ben's DPV was, in fact, a form of family violence. This realisation prompted anger and her anger then led to "action".

In Ann's case, growing anger about her son's behaviour led to a turning point. Ann and her husband decided that Tony's DPV had become intolerable and he would need to leave their home if he continued to behave in an aggressive manner:

> Ann: I was really angry. I think I felt like I am not taking any more of this. And I told him too. When he'd calmed down and I had had time to think, and talk with Paul, we went into his room together. I still remember it very clearly, and we said, "Tony you will need to go. We are not having this anymore".

Anger, while a common reaction for participants, did not always promote action and change. Sometimes anger was present, but was associated with feeling stuck, frustrated, and desperate.

### 8.4.3 Sadness, hopelessness, and desperation

Themes of sadness, hopelessness, and desperation were particularly common in the narratives of the five participants who continued to experience DPV. Below Max described feeling that he could no longer live with the abuse:

> Max: . . . I said, "Look, I've had a guts full of this and I am just about to go and hang myself and if I had the guts I would, because I can't live with this anymore".

Several participants expressed despondency about their relationships with their children. Brenda, for example, used the word "worse" throughout her interview. Her ideas about continuing difficulties and her sense of hopelessness were best captured in the short passage below:

> Brenda: I just keep wondering, how long is this going to last for? I actually think things are going to get worse. She's just going to get worse. So I think, well, what's the point?

Sue's experience suggested that fear and anger are not inevitable impacts of DPV. She was unique in the meanings she made about her son's DPV. She did not fear DPV or feel angry in the event of property destruction. Rather, she welcomed DPV, seeing it as a necessary release of tension and distress. She did, however, feel sadness that her child had been "driven" to DPV:

> Sue: It was quite impressive because it was a strong chair. It wasn't a crappy chair. It was so broken I could put it straight in the fire. I didn't even need to chop it. Yeah, and that's all. It's over real quick but just sort of hearing the splintering and

knowing that for a person like that, who is so mild most of the time, it's very sad
that he's driven to that.

Sue was atypical of the participants, not just in the finding that she was neither frightened
nor angered by the DPV, but also because she was the only participant who did not report
co-occurring forms of parent abuse. Her son John broke things but had never been verbally
or emotionally abusive, and had never threatened to physically harm her. So Sue's
meaning-making was based on an experience of DPV that was significantly different to
that of the other participants.

### 8.4.4 Self blame and guilt

I have previously discussed self blame as a common meaning made (chapter seven). Self
blame was frequently a precursor to feeling guilty about the child's violence. Guilt could
also follow actions and responses to DPV that could feel unnatural, prompting parenting
dissonance. Lillian explained that at times she "hated" her son because of his behaviour,
leading to "massive guilt" and second-guessing her parenting:

> Lillian: Like I said, there were times when I hated him, and then you would feel
> massive guilt. You go through emotions of hate, and anger, because they can get
> you so worked up. Then of course after that comes the guilt. The guilt of maybe I
> was too harsh.

Grace also described how guilt was unavoidable. She explained how she was required to
limit what she gave to, and did for, her three abusive sons and described her resulting
reaction as "a bucket load of guilt":

Grace: I think at the end of it all you walk around with a bucket load of guilt. You just feel no matter what you do, it's wrong. You can't win. You get to the point where everything seems wrong and you are just longing to be able to do something that seems right… so I had guilt if I did and guilt if I didn't.

Similarly, Kate spoke of feeling "sick and guilty" about her responses to her son's aggression. In the passage below she described how she felt after reacting to Ben's violence by hitting him—a "desperate" and uncharacteristic response:

Kate: I was desperate. I was just banging my head. And I felt sick and guilty (tearful). It felt like crap. It wasn't my way to beat my kids, to even hit them. To get a wooden spoon and hit him, I counted, five times.

Furthermore, the responses of eight participants revealed that caring for a child who had behaved abusively toward them, had impacted on the quality of their relationships with other family members, particularly other children, inducing feelings of parenting inadequacy and guilt. Participants commonly described a sense of failing to protect these other children from a range of abusive behaviours, some of which presented extreme risk to physical safety and serious emotional harm. In Linda's case, she had several foster children in her care, including Damien (the child she is describing in the present study). She explained how Damien would deliberately harm the other children, causing them to fear him:

Linda: He was a bully with other children in the home, but because the kids were scared of him, they wouldn't tell me until after he'd gone.

Kate felt concerned about the impact of her younger children observing Ben's abusive behaviour toward her. She predicted an end to Ben's violence but suspected her other

children's "yelling and screaming" came from boundaries being "so broken" as to render her parenting ineffectual:

> Kate: They'll be yelling and screaming at me. Because the boundaries have been so broken by what Ben's been doing. You just don't know, whether it is you or them. They're just reciprocating what he's been doing.

In Ann's case, her son Tony was also emotionally abusive toward her daughter, Beth. Ann did not need to wonder about the impact of Tony's aggressive behaviour, because Beth had been explicit about the negative effects, and about her anger toward her parents for not preventing this abuse. The painful aftermath of Tony's behaviour endured for Beth, just as Ann's guilt for letting her down persisted with time:

> Ann: But I don't know if she will ever really get over it. She's still pretty angry about it. And angry at me and Paul too. If we have an upset, that's one of the first things she will say—about how she had such a rough time. And you know, I can't dispute that. In fact, it's hard to face, but I think in many ways we let her down and I do feel sick about that. I do.

### 8.4.5 Loneliness and isolation

Several participants described feeling alone with the problem. Indeed many of them received little or no support from ex-partners, family members, or friends. Three of the 14 participants (Max, Brenda, and Ann) were in marital relationships, and interestingly they too described periods of isolation with this problem, indicating that a sense of loneliness can be an outcome even when a parent shares their home with a spouse. Max spoke of how he and his wife had significant differences in their parenting styles, contributing to Max's frustration and despair.

Brenda stated that when her husband attempted to intervene and discipline her daughter this just made things worse, because her daughter would blame her for his reactions ("I end up getting it worse the next day"), so she concealed much of the abuse from him. Ann also spoke of feeling "alone" despite her husband's availability and support:

> Ann: That's lonely. That's hard. Even having Paul, I felt he didn't have the same— it wasn't affecting him the same, so it was just me.

Loneliness and isolation appeared to be related to the previously mentioned shame surrounding the DPV. Participants described keeping their experiences of DPV and other forms of parent abuse from others because they were concerned that disclosure would lead to negative judgements. This finding calls to mind the work of Goffman (1963) on stigma, (described in chapter three), specifically the issue of discreditable stigma and the relevance of this to the problem of DPV. Shame and stigma, in relation to disclosure and help seeking will be further explored in chapter nine.

## *8.5 Loss*

All interviews evoked narratives of loss, albeit of a varying nature. The concept of loss as it related to participants in this study, applied not only to financial outcomes, but also to negative changes in a participant's identity and sense of self, and in their relationships with their abusive children. As previously discussed in chapter three, humans may see their possessions as an extension of themselves (Belk, 1988). Furthermore, the things we own and value can provide an important source of identity (Sayre, 1994). Therefore, DPV

involving meaningful or symbolic items can generate intense feelings of loss and grief and alter a parents' sense of self.

### 8.5.1 Financial losses

DPV frequently resulted in financial losses given the need to repair or replace damaged property. The financial impact of DPV was a very real concern for several of the participants including Brenda, who described the financial pressure Ava's demands and violence had placed on the family. Her financial situation was so difficult, that she might need to sell her home.

Grace had estimated the financial impact of her three sons' disregard for her property and their own to be "close to $20,000". She regretted the fact that her money had been spent in this way:

> Grace: It could have been put to good use instead of replacing things that have been trashed or lost, or bartered, or sold.

Interestingly, some of the participants had never tallied the financial cost of their children's DPV until prompted by the study to do so. In the following passage, Ann made a distinction between things that can be fixed or replaced and those sentimental possessions that are irreplaceable:

> Ann: You ask in the questionnaire about how much the damage has cost me, and I really had to think about that. Actually it was really only then that I thought about the financial cost of it all. And it's not the obvious things like having to replace something. It's like the costs of having to have something fixed. Our pantry door, he put a hole in that with his foot, so that's a lot of money having joinery replaced.

Or then there's the things you just can't replace. He broke a wee cup and saucer that had been a gift from my mum. I can't replace that.

## 8.5.2 Loss of self and identity

Although participants described significant financial losses, this was not the central focus for most. More commonly loss was described as changes in emotional wellbeing and relationships. Several participants described how their experiences of DPV had resulted in a loss of ideals, identity, and other things that were important to them. Gayle explained how Penny's abuse changed her world, resulting in a deep sense of loss:

> Gayle: Yeah my dreams, my hopes, everything just went. Nothing inspiring, you know, there was no, yeah there was pretty much no joy. Work, home, work, home and any sick days would be because of something that Penny had done.

The loss of self and a change of identity were significant outcomes for Grace also. In her case, however, she actively abandoned her old identity in favour of a new one that would enable her to move on from her past experiences. In the narrative below Grace explained why she opted to change her name and how this enabled her to "let go":

> Grace: I literally changed my name. Mostly I did it because of CYF. I felt my name had been tainted forever, and who I was. I felt the only way I could move forward and start to forgive and let go was to change my name and make that a point in my life where I have done something so big, where I can go, I overcame that, I let go, I didn't let them dictate who I can be.

Holt (2009) wrote about the impact of parent abuse on parenting confidence and style, suggesting that parent abuse eroded parenting confidence. The narratives of participants in

the present study supported the premise that parent abuse could result in the loss of self-belief and certainty. Several participants expressed that they thought they were doing the right things or that they were trying hard to be good and reasonable parents. Jan explained that she had engaged in various actions like listening to loud music with her daughter, or overlooking her daughter's untidy bedroom to facilitate closeness and avoid confrontation. Yet confrontation was sometimes unavoidable when a child's behaviour required a firm parenting response. Rose explained that she was perceived as the "big bad wolf" by her daughter because she would not tolerate misbehaviour. DPV and other abusive behaviour could prompt various disciplinary actions, some of which were uncharacteristic or extreme. A previously mentioned example was of Kate physically punishing her son following an episode of sibling violence, something she had never intended to do, and an act that prompted much shame and guilt.


### 8.5.3 Parent-child relationship costs

As discussed in the previous chapter, socio-cultural factors influence the meanings people assign to parenthood and their expectations about the nature of parent-child relationships. However, parent abuse is a reality that is far removed from the ideal of enjoying a happy and loving relationship with a respectful child. In the present study, participants explained that DPV impacted on parent-child relationships, eroding closeness and trust.

Just as possessions can be damaged beyond repair, so too can relationships. Bonds and hearts can be "broken", images and ideals can be "shattered". In the excerpt below, Helena replied to a question about the impact of DPV by describing the influence of DPV and other forms of parent abuse on her relationship with her daughter. Their relationship had been deeply affected by incidents of property damage. For Helena it was the continuation

of this behaviour over time that had led to a disintegration of trust and the breaking of a special bond:

> Helena: Well the first time probably, it's you know, well you've made a mistake. The second, the third, and the fourth, and you know, each one after that, you just … the trust is gone. And it's deeper than a trust, it's the bond, it's that relationship, it's the communication without speaking thing that we had, that just disintegrated.

Abusive interactions and resulting relationship problems could eventually lead to the loss of contact. Four participants (Jan, Rose, Helena, and Linda) reported being estranged from their children as a result of parent abuse and other related factors.

## 8.6 Conclusion

To summarise, the impacts of DPV were often numerous, pervasive, and persistent. Experiencing violence at the hands of one's child was traumatic. Indeed, the impacts described are comparable to the complex trauma responses of victims of other forms of family violence. While DPV commonly had a financial impact, parents appeared to be more affected by the emotional cost of the violence. Fear, anger, sadness, and despair were common reactions to DPV. Loss was another common finding, with participants describing not only the loss of things, but also of aspects of themselves and their relationships with others, particularly their abusive child. In the wake of DPV some relationships may survive and thrive, while others may be irreparably damaged, sometimes lost.

Participants were not only concerned about the impact of the DPV on themselves. Most spoke about the impact of DPV on all family members, particularly their other children.

Improving awareness of the impacts of parent abuse across various groups may inform

practitioners and better guide intervention approaches to prevent negative outcomes.

Participant narratives revealed how personal meaning-making influenced the impact DPV

had had on their lives. For example, negative meanings made, in particular guilt and self

blame had undermined participants' understanding of themselves and of their parenting.

Conversely, meaning-making could promote change, in some cases leading to an

improved level of subjective wellbeing and closer relationships between parents and their

children. In the following chapter I explore participants' responses to DPV with meaning-

making again continuing as a central theme.

# Chapter Nine: Keeping Safe and Sane

## 9.1 Introduction

*Keeping safe and sane* was the last of the three super-ordinate themes to emerge from the interview data providing a focus for analytic commentary (Reid et al., 2005) in this thesis. Participants described a range of coping responses to DPV that were categorised under the six thematic headings of preventing conflict; safety and protection; psychological and behavioural strategies; help seeking (all of which are coping responses); turning points; and letting go/moving on. The way in which participants' responses were influenced by the meanings they gave to the DPV, and the subsequent impact of the violence on their lives and on the lives of other family members will be discussed in this chapter. Additionally, consideration will be given to how responses, in particular help seeking, influenced meaning-making.

## 9.2 Participants' Coping Responses

### 9.2.1 Preventing conflict

Eckstein (2004) studied 20 parents experiencing parent abuse and found that the prevention of escalation of abuse often took precedence over the preservation of their parental authority. Given the common experiences of fear in the present study it was not surprising that most participants referred to strategies they had developed in order to prevent episodes of violence. "Picking your battles" in order to avoid conflict and other war-like descriptions such as "surrender" and "surviving" were used by several of the participants when describing responses to DPV. This reflected a theme, that one party or

side won, while the other lost, and that parents were prepared to concede in order to prevent an escalation of violence. In the extract below, Lillian described being in a "no win situation".  When her son, Mike was in a "bad mood", no matter how she responded, he always won:

> Lillian: When I'd come home from work, Mike would be in a bad mood because he felt crap that day, and you'd try to have a  normal conversation, but you can just see, and hear it in his voice, that he's grumpy. So you just put up with that. You tolerate more. You let it slide. Sometimes you tolerate way more than you should, or way longer than you would anyone else, because I have learnt with Mike, it is a no win situation on my part. Whether I try to talk to him or not talk to him, he always wins, so to speak.

Brenda described the futility of trying to explain to Ava that she could not financially afford to meet her demands for new things. Instead, she gave up to avoid being subjected to further violence:

> Brenda: I think over time I have sort of, in the end I give up because it will be another bashing or, yeah.

Giving in to a child's demands or choosing not to persist with a request might prevent violence, but often came at a price—commonly, further erosion of parental control over the violent child and at times, their other children. As discussed earlier, Kate felt that her younger children were now misbehaving because "boundaries" had been broken by Ben, diminishing the other children's respect for her authority. Furthermore, other children could resent the power and freedom of choice that their violent sibling might have within the home.

**9.2.2 Safety and protection**

As previously demonstrated, DPV may be one form of abuse in a range of violent acts. Almost all of the participants described their children threatening them with serious physical and emotional harm, necessitating the need for safety and escape plans.

> Brenda: So I am trying to get my keys and just making sure that I have got what I need to escape. I have planned that if I have to escape then I will just take my puzzle book or something and go and park up somewhere and go and do that.

Lillian was encouraged by members of her support group (for mothers of children with mental illness) to develop an escape plan. As it turned out, this was sound advice:

> Lillian: They all said to me, "Just make sure you have got a clear path to get out of the house if you need to. Don't let him come in between you and the door so that if you need to just get up and leave", because I have needed to about three times over the past two years.

In Max's case, he left the house and spent time in his garage as a way of escaping the conflict. Kate and Maria also described leaving their homes, taking their other children with them in order to prevent violence. Maria's other children knew to leave the house and run to their aunt's home to get help when Joel became violent.

Protecting other children and family pets was expressed as a priority for most of the participants. Interestingly, taking steps to protect property was less commonly discussed. Max, however, described having a lockable cupboard to store his own things so that his daughter could not destroy them. Jan described taking steps to protect her precious photographs having experienced Karen intentionally destroying others:

Jan: Yeah. I started packing a lot of things up. I put what photos I had away. I knew better than to leave a photo album out.

### 9.2.3 Behavioural and psychological coping strategies

Participants were asked to describe how they responded both behaviourally and emotionally to their children's violence. Behavioural strategies included the safety and protection actions previously mentioned, along with other methods for reducing stress. For example, in Grace's case, it involved moving house. In the extract presented below, Gayle described "finally" taking her mobile phone off the silent setting. She had been avoiding the sound of her phone ringing because she feared that she would receive bad news about Penny:

Gayle: I finally put my personal cell phone back on noise. It had been on silent for four years because I didn't want that phone call, or CYF ringing, or the police ringing.

Various participants described simply carrying on with the daily requirements of life, while being careful to prevent conflict occurring. Their comments suggested an ability to suspend their emotions by moving to a state of numbness as a means of dealing with abusive situations:

Lillian: There's a part of me that is numb. Whether that's good or bad, I don't know. Numb, when I think about my son. Or, the whole whatever we have been through, yeah numb. I think that's my way of dealing with it.

Grace: One of the things I had to do for my own sanity was I had to become neutral, unemotional. At the end of that season I felt like a numb blob, like a nobody. But the only way I could cope with the abuse was to be in neutral gear.

Later in the interview Grace reflected on the "cost" of this numbing strategy. The process of "re-learning" how to show emotion involved a nine month period of counselling:

Grace: Unfortunately over a period of years that became my way of coping. Then I had to learn, to relearn how to show emotion. I ended up in counselling for about nine months learning how to show emotion, because I got so used to being clinical and flat levelled. People would describe me as calm. Very level. But it's not good, not all the time.

Latesha: But it was necessary?

Grace: It was necessary. There is a cost. I had to learn to, because it got to the point that the kids could do anything or say anything and I wouldn't react and that's not healthy. If something is going on and you are being violated, you have a right to be angry. If someone is stealing money from you, you have a right to be angry. I had to learn.

Like clinicians, researchers have tended to categorise coping mechanisms as either adaptive or maladaptive. Frequently emotional numbing has been reported in the coping literature and categorised as a maladaptive strategy (Thompson et al., 2010). We see from Grace's experience, numbing can become maladaptive over time and contribute to the loss of self. However, the finding that participants often suspended their emotions is interesting as it suggests that emotional numbing may be a necessary coping strategy at various points. This finding calls to mind the earlier discussed dual process model by Stroebe and Schut (1999) that describes a pattern of oscillation between confronting and avoiding the

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emotional impacts of loss. Participants described moving between confronting the abuse and associated impacts and avoidance in order to survive and continue functioning with respect to life's roles and responsibilities.

### 9.2.4 Help seeking

Help seeking as a form of coping was introduced in chapter three. Throughout the study help seeking behaviour has been explored by including several related items in both the quantitative questionnaire and the semi-structured interview format. The findings from the quantitative questionnaire revealed that all but one respondent indicated a need for support. Parents were, however, generally reluctant to disclose the problem of DPV to others and most reported feeling dissatisfied by the support they had received. The in-depth interviews provided an opportunity to elucidate these findings. Therefore, all interview participants were asked about seeking help with their child's aggression.

Collectively, participants' comments revealed that help seeking took various forms with wide ranging outcomes. For example, Rose explained that she received good support and advice from the mental health team with which she was still involved. Jan recalled receiving practical assistance from Karen's school principal. Kate explained that she developed a good relationship with a local police officer who provided helpful advice and information:

> Kate: I said, "Can you really do that?" and he said, "Of course I can. There's no excuse necessary. If there's domestic violence I can pick him up and remove him". And so it was just knowing that I had that right—that I could have him removed.

Lillian described her involvement with a support group for mothers of children with mental illness. Talking with others who had experienced parent abuse had helped shape the meaning she gave to her experiences:

> Lillian: But what's helped me is the support group, because the other mums have had the same. We all remind each other, it's not us.

While there might be benefits to disclosing the DPV, there were also risks. Indeed, the majority of participants described perceived and actual risks associated with help seeking, and their subsequent reluctance to tell or involve others. Several participants spoke about hiding the DPV, a response that Goffman (1963) would define as information management, in order to preserve an image of a good child or a happy family. Ann, Grace, and Sue all spoke of not wanting their parents to know about the DPV because they did not want these people to worry about them or think differently about their child:

> Ann: And no I didn't feel I could pick up the phone and talk about it with others because they didn't need it either.

> Grace: I have had the emotional support of my mum. My dad died a few years ago. On the other hand I can't really confide in her a lot because she is so far away and I don't want to stress her. She's older, so while I had that and I knew I could, I didn't want to worry her.

> Sue: You know, small town and people knowing each other, you don't want to cause other people distress.

Three of the 14 participants (Ann, Sue, and Paul) explained that they had not actively

sought help, preferring to manage the problem on their own. Sometimes, however, the

DPV could not be concealed and others became aware of the problem:

> Ann: He kicked a hole in the hallway, in the wall and it was while Paul was away.
> So it just stayed like that. And so when my Dad came round, I had to say how it
> happened. Or I'd be racing around the house shutting the windows so the
> neighbours couldn't hear him yelling or banging and crashing in his room.

Telling others generally resulted in judgement and advice. Sometimes this was frustrating

and confusing or caused embarrassment and guilt:

> Ann: You do feel embarrassed though. And you know that sometimes people are
> judging you. Or maybe not judging you badly but they have opinions about what
> you should be doing or how you should react to it.

> Grace: The main risk is the perception that people have of you. And their
> judgments and after going through abuse you already feel vulnerable, you already
> feel bad about yourself because you feel it's your fault.

Congruent with the findings from the quantitative questionnaire, interviewees also

described how help seeking did not guarantee help would be forthcoming. Brenda, Gayle,

Maria, Grace, Jan, and Max described being very active in their help seeking efforts, only

to be disappointed, frustrated, or angered by the responses they received:

> Max: You just go round and round in circles.

Most spoke about seeking help and support for their child rather than for themselves.

Gayle, Brenda, Kate, Max, Maria, Sue, and Helena all wanted their children to have

personal therapy in order to overcome the emotional difficulties that seemed to trigger the DPV:

> Sue: I think he needs some ability to recognise distress in himself and to do something about that before it overwhelms him and makes him do damaging things.

This help was sometimes unavailable or failed to meet participants' expectations. For example, Gayle was disappointed by her daughter's therapist because he failed to deliver what she believed he had promised and would not include Gayle in the therapy process. Max also spoke of feeling angered and frustrated by his daughter's therapist, and the type of advice given to him. Several participants explained that despite their best efforts, they had been unable to access the necessary kinds of support and counselling either for themselves or for their child:

> Grace: There is nothing there. The most support I got was from my lawyer. It cost me a lot of money in the end.

Most of the participants described feeling disappointed in the various agencies and services they expected would help them, most commonly the police, Child, Youth and Family, and the child's school.  In some cases, involving agencies of this kind presented a number of risks. Gayle's complaint to the police of abuse by her daughter resulted in criminal charges being laid, her daughter being found guilty of assault, and the subsequent publication of the Court details (including their names) in the local newspaper. Helena found that involving the police after an incident of DPV only made matters worse. When the police failed to take action, her daughter interpreted this as a licence to continue misbehaving:

Helena: When she got taken upstairs to this guy's office, and it was just, pretty much, instead of taking the lead from me, he talked to Jemma and she told him her version of events which wasn't the actual version of events. He just said, "Oh well it's not going to happen again though aye?" I thought (laughing) oh that's exactly what she wanted to hear and not what I wanted to hear, because it escalated. She then realised that she could get away with it and I guess she also realised that there really wasn't a heck of a lot I could do about it. You know. That I'd run out of consequences and that was kind of like my last hope and so what do you do after that?

Fugate, Landis, Riordan, Naureckas, and Engel (2005) studied barriers to domestic violence help seeking by women in abusive relationships. They found that involving the police was related to personally-determined thresholds that varied among the women. Similarly, involving the police was not something that all participants in the present study felt comfortable doing:

Ann: Oh I'd threaten it. But no, I never did. I think it probably never got to that point. The girls once said that I should have phoned the police. Well we have a good friend who is a police officer and they thought I should have phoned him. But I think, he wouldn't want to get involved. And then also I didn't want to go down that track and have others knowing.

Others felt they had no option, given the serious nature of the violence. Nine of the 14 participants reported that the police had been involved on at least one occasion.

Women victims of family violence may not seek help because they perceive the violence as being not serious enough to warrant intervention (Fugate et al., 2005). Several of the interviewees spoke of a similar uncertainty about involving the police. Brenda explained

that she had required police intervention on several occasions but now felt reluctant to involve them because she was uncertain if they would respond:

> Brenda: They said to me one time I called them that there had to be blood on the walls before they would remove her from the house.

Dissatisfaction with other services was also expressed. Gayle, Brenda, Jan, Grace, and Maria all expressed dissatisfaction with Child, Youth and Family:

> Gayle: I rang CYF. You know, oh my God listen, and held the phone, and this guy told me, that when it gets to the point that I want to hit my girls, ring back. There was no one, nobody.

> Brenda: Well we are meant to be helped by CYF but they are just no help. They don't return your phone calls. I think they don't know what to do.

> Grace: When I came back CYF wanted to talk to me to try and resolve it and I refused to talk to them, absolutely refused. They started to try and help, a little bit too late. They are not interested until everything is unbearable.

Participants' comments indicated that help seeking could be associated with personal perceptions of severity and entitlement to help. Similarly, access to help and support could be related to service thresholds for intervention.

### 9.2.5 Talking and help seeking

Previously the important roles of narratives and language in meaning-making were described. Talking about experiences, particularly those that have been distressing can produce a range of outcomes. I was mindful of past research on parent abuse that found

that parents often felt too embarrassed or ashamed to speak about the abuse. I was also aware that the interviews were not simply enquiring about meaning-making, but in the very fact of asking about this, might have precipitated or facilitated a meaning-making process, and thereby influenced outcomes. Others have considered the impact of researching sensitive topics, and found that while this process can precipitate strong, at times distressing emotional responses, having an opportunity to tell one's story in a safe and sympathetic environment can be beneficial for the participant (Ellsberg & Heise, 2002; Hlavka et al., 2007). Coyle and Wright (1996) proposed that participants can derive "therapeutic benefit from being interviewed" (p. 434).

All participants were asked to describe their experiences of talking about the problem, including their experiences prior to the study, and during the research. In the extract below, Grace explained her reluctance to talk about her experiences and the risks she associated with doing so. She explained her belief that parent abuse was a subject that people were not ready to talk about:

> Grace: Well I have been saying for a long time, and I have other friends that have the same situation with their children and nobody wants to talk about the abuse of adults by their children. It's not correct. It's like going back 30 years when you didn't talk about your husband beating you up. It's just not okay, you can't go anywhere without being judged. There must be something wrong with you as a person because your children are like this. It's about time that it came to light and I think that most of us don't talk about it because of the stigma that is attached. And the stigma that is attached for me is through agencies like CYF and the way you get labelled as dysfunctional, aloof, and cold. So you don't want to put yourself through anymore than you have already got. Maybe 20 years down the track people may identify it as abuse and understand what we are going through, but not

now. There is no awareness of what's going on, and yet lots of people are going through it.

Grace's comments relate to the earlier mentioned impact of social and cultural messages on participants' meaning-making, specifically, the influence of pervasive messages about responsibility and blame that contribute to "stigma". Her recollection of being considered in the most negative of ways, "dysfunctional, aloof, and cold", calls to mind the previously discussed phenomenon of mother-blaming (Singh, 2004; Weaver & Coleman, 2005). Consideration of participants' reports revealed mother-blaming to be a construct relevant to the problem of DPV, and showed how this may be perpetuated by individuals and agencies.

Gayle explained that talking about the problem took courage because there was a risk that doing so might be re-traumatising. Ann explained that she thought she would not be believed if she spoke about her son's violence:

> Ann: I thought sometimes that even if I did try and get some help, I don't think people would believe me (laughing). I remember that early on my own father, I don't think he really believed that things were as bad as they were. I mean he didn't want to think about his grandson behaving like that.

Interestingly, while most participants spoke of the risks of disclosing the violence to others, all of them identified benefits associated with talking to me, the researcher, about their experiences. This was irrespective of a range of factors that might be expected to influence this finding, such as the presence or absence of DPV at the time of the interview or the severity of the abuse. Several participants (Gayle, Kate, Jan, Ann, Helena, Grace,

and Maria) described the experience as cathartic. The following comments were made in response to being asked how it felt to share their stories about DPV:

> Ann: It has been fine. Good really. I think quite good to get some of it off my chest.

> Kate: Good thank you. It's actually been quite (letting out a sigh) … a lot of letting go. A lot of letting go.

> Helena: It's been really healing actually Latesha.

> Jan: It's actually quite healing.

Max, however, shared early on in his interview that talking about the problem was generally unsatisfying. His words reflected his deep sense of frustration with his daughter's behaviour and the lack of assistance he had received:

> Max: It seems to the wife and I that there are plenty of ears to listen to us, like you're doing here, although you're here for another purpose, but it's the same sort of thing. Listen, take notes, touchy feely, blah, blah, blah, and then nothing happens.

So while for some, talking might be "healing", for others it might be frustrating or disheartening. From the participants' reflections it would appear that for people still confronted by the problem, talking may be unhelpful unless it is followed by a useful action.

All of the participants explained that, despite the potential risks of disclosure that they had identified, and their previous difficult experiences of help seeking, they wanted to take

part in the study in order to increase awareness of the problem of DPV and parent abuse in general. Involvement in the study was motivated by the goal of reducing the stigma they had experienced, in the hope that others affected by parent abuse would, and could, more easily access help and support.

## 9.3 Turning Points in Responding

"But on that occasion I think it was as close as he'd come and it was like a turning point for me. I didn't say anything to him, but I walked away thinking, that's it. No more" (Ann)

Researchers and practitioners interested in human problems, such as family violence, have often emphasised the importance of turning points. Turning points are synonymous with a decision to react differently, and are frequently prompted by "emotionally compelling life events" (King, Cathers, Brown, & MacKinnon, 2003, p. 31). Of those participants who spoke of DPV and other forms of parent abuse as issues that were in the past, all described what will be broadly classed as turning points. In this study turning points are defined as moments or events that led participants to a decision to respond differently to their child's violence.

King et al. (2003) reported that turning points are often precipitated by fear and anger. Participants most commonly described their turning points occurring in response to episodes of serious violence, both real and threatened, and by their angry reactions to these episodes. Turning points reflected the crossing of invisible lines that marked the divide between tolerable and intolerable levels of violence, thresholds that varied from participant to participant. For Gayle, her turning point followed a serious assault by her daughter and the subsequent judicial process. In Linda's case, the turning point came when

she learnt that her foster child had been developing a bomb. He was removed from her care soon after. Kate's turning point came when others began to comment on the serious nature of her son's aggression, prompting her to take action against his drug use in her home. Ann's comments in the passage below were characteristic of the process that precipitated a significant change in responding to the abuse and involved the realisation that things had "got so out of hand"; increasing concern for own or other children's wellbeing; and the decision to take new action in the event of future violence:

> Ann: I'd had enough of it. He had been really hurtful that day. I'd missed going to a friend's place because he'd refused to get ready on time that morning. He'd been just awful to his sister about her weight. So I'd had her in tears. Then he was arguing with me about backing the car out of the garage, because he wanted to do that and I wouldn't let him. So then he had me sort of pinned between the cars, and as I said, sort of up in my face with his fist (demonstrating fist up) like this. And I had Beth screaming at him. She was terrified. So, yes, that was probably it, the straw that broke the camel's back for me. I just thought, this has got so out of hand. So I got Beth in the car and we left. I just left him there on the doorstep. I hadn't done that before. It didn't matter how awful he'd been, he'd still get what he wanted or be dropped off where he needed to go. But that day I thought, no. No way.

### 9.4 Letting Go and Moving On

Related to the idea of turning points, were the themes of letting go and moving on. The majority of participants for whom DPV was no longer a problem described the importance of letting go and moving on. Gayle described her letting go or surrendering process and how hard it had been to get to this point. Letting go was not something that was easily achieved:

Gayle: That is so hard and I think that's the space I have come to over the last three months to surrender it. I've had to let her go one hundred percent. I still love her and she knows that. There's nothing more I can do. It's a very hard point to get to as a parent. It's huge. It is huge.

Letting go might involve the relinquishing of control and influence over a child's life. In Helena's case, she reached a point where she felt unable to help Jemma resolve internal conflicts contributing to her abusive behaviour. Helena described her experiences of letting go as both liberating and scary:

Helena: You know, you're an adult, you're a parent and kids look to you for answers and you need to have the answers. You need to know everything. But I am quite happy to say to Jemma now that I don't know it all. I don't have all the answers. I'm going to have to go to somebody else to find the answers for you. And that's kind of been liberating but really scary at the same time.

Moving on might require the letting go of negative emotions associated with a child's abuse. Kate described letting go of self blame:

Kate: A lot of letting go. A huge realisation and now it's about letting go because if you keep blaming yourself you think oh what have I done, what have I done.

In Grace's case, as described in the extract below, she needed to let go of negative emotions associated with her experiences of social agencies:

Grace: And you are often dealing with people who have a mindset about that it couldn't possibly be the children. But I think I am past that now that I have been able to accept that they can't understand if they haven't gone through it, or if you

don't have first hand experience, otherwise how can they understand? So I have got to the point where I have been able to let some of that go, I hope.

For Lynda, Rose, and Jan, letting go and moving on meant having no contact with their children. By contrast, for five of the participants (Ann, Grace, Paul, Kate, and Gayle) letting go and moving on enabled the development of closer relationships. Turning points, letting go, and moving on are constructs that appeared to be strongly influenced by a number of variables, most obviously, the age of the abusive child. Participants describing this process were parents of children aged 15 years or older, suggesting that letting go and moving on was more likely when the child was capable of, or indeed seeking, a level of independence or separation from his/her parent. Participants who did not describe reaching a turning point, letting go, or moving on, were those parenting younger or more dependent children (for example, children with mental health disorders). These constructs also seemed to be partially dependent on restoring meaning following the disruption that DPV had brought to the participant's world.

According to cognitive/worldview models, meanings need to be reconstructed following trauma. This requires cognitive processing that either integrates the traumatic experience with pre-existing global meanings or worldviews, or results in the adaptation of worldviews to assimilate the trauma (Edmondson, 2009). Several participants spoke about an increasing acceptance that many things are outside of parental control—challenging their worldview that parents can and should control all aspects of their children's behaviour. This led them to the realisation that continuing with self-blame was a misplaced and fruitless activity.

For a smaller group (four participants), self-blame was less of an issue, as they focussed more on societal factors (for example, media, friends, teachers, and the education system as a whole), being responsible for their children's behaviours.  This finding suggested there may be some aspects of global meaning that buffer against self blame and other negative emotional impacts of DPV. Additionally, there may be styles of meaning-making that promote better emotional and relational outcomes. The positive outcome of a closer relationship with one's child, as experienced by five participants, seemed to have been significantly influenced by meaning-making. Global meanings about parenting, such as, that parents should remain committed to their children regardless of their children's behaviour, persisted throughout the hard times, albeit with some adaptation. Meaning-making leading to stress related growth and coping are two concepts that have received increasing attention in the trauma literature (Park & Ai, 2006), although researchers are yet to investigate this issue in relation to DPV and other forms of parent abuse.

It might seem reasonable to expect that a participant's journey from experiencing DPV to being free from this abuse would have been positively associated with help seeking. Particularly so, given the availability of various New Zealand social services (as discussed in chapter four), that are funded to respond to cases of family and youth violence. Surprisingly, however, experiences of help seeking were not found to be strongly related to turning points or letting go and moving on. This is likely related to the finding that help seeking could be a dissatisfying experience. Indeed, when combined, quantitative questionnaire data and interview reports revealed that help from agencies and institutions such as Child, Youth and Family, the New Zealand Police, the education system, and counselling services could range from being unavailable or withheld, to being unhelpful, offensive (that is, judgmental and critical of parents), or intrusive (for example, Gayle's

experience of having her child charged with assault and later having the details of her abuse disclosed in the local newspaper). Therefore, help seeking and help receiving were not generally identified as relevant factors in reaching a turning point, letting go, or moving on. All three processes were more commonly the outcomes of a personal and solitary endeavour. For example, this was the case for both Ann and Paul—neither of whom had sought help with the DPV, but yet both spoke of reaching a turning point, prompting an end to the DPV, and the beginning of closer relationships with their sons. Further research is required to investigate if help seeking outcomes of a more positive nature could facilitate turning points or letting go and moving on.

## 9.5 Conclusion

Participants' responses reflected a shared pattern of responding that began with the introduction of strategies to prevent conflict within the home. When faced with aggressive behaviour, participants found ways, such as the implementation of escape plans, to protect themselves, their property, and others. Behavioural and psychological strategies were developed as a means of coping with the pervasive threat of further abuse while continuing to meet the demands of family life.

Help seeking was another response to DPV, although it was often unplanned, not desired, or indeed not beneficial. Most participants described their reluctance to disclose the abuse, fearing that they would expose themselves and their children to the negative judgments of others. Preserving an image of a good child and a happy family outweighed the potential benefits of support and advice. In most cases, however, the DPV could not remain hidden. For some, the involvement of the police and other agencies was inevitable given the severity of the violence. Unfortunately in most cases the level of support offered fell short

of participants' expectations, and had the detrimental result of increasing frustration, anger, confusion, and embarrassment. Being unfairly judged and receiving unhelpful advice was an experience common to almost all of the participants at some point in time.

Not all help seeking was described as dissatisfying. Several participants reported that they had received good advice and support from various sources. Positive help seeking outcomes were associated with receiving helpful information, having access to respite care or other forms of practical support, and talking with others who had faced similar experiences.

For a number of the participants, DPV was no longer a problem and so they could reflect on why and how this form of parent abuse had come to an end. They all spoke about something happening (turning points) that prompted them to change their approach to the violence. Generally this was marked by a child's behaviour moving from a tolerable to an intolerable level of aggression. For example, in Ann's case it was when Tony threatened to hit her. Gayle's turning point came after Penny physically assaulted her. Linda's foster child had been very abusive, but crossed a line when he began endangering lives by constructing an explosive device.

Letting go and moving on were two concepts associated with turning points and change. Participants who were no longer facing the problem of DPV talked about change occurring only after they had made a conscious decision to respond differently to their children. Letting go required a cognitive shift or rather a change in meaning relating to the violence. In some cases, letting go and moving on enabled participants to develop better relationships with their children. Finding words and language to express experiences and

impacts is an important step toward the creation of personal narratives (Williams, 2006). Participants for whom abuse was no longer a problem had developed narratives that seemed to enabled them to forge a meaningful pathway that integrated their past experiences and enabled them to move on.

All interviews concluded with the participant being asked to describe how it felt to speak about the abuse. None of the participants described feeling distressed by the interview process. Rather, almost all stated that the interview had been a positive and helpful experience, while several described their participation as a cathartic event. Participants' accounts revealed that simply talking about the DPV with people who were both prepared to listen, and who were receptive to the idea that parents and caregivers can be abused by their children, could support an important initial step toward a turning point, and advancing on a journey of letting go and moving on. This finding has implications for the way in which services invite and respond to parent and caregiver requests for support, and will be considered further in the following discussion chapter.

# Chapter Ten: Discussion

## *10.1 Introduction*

This is an investigation into a specific type of violence, that being DPV. During the early

stages of the research, I wondered about the wisdom of narrowing my research focus.

However, as the study progressed, any reservations I had about focusing my study on DPV

were replaced by an increasing motivation to know more about this phenomenon, along

with a growing conviction that DPV is a serious subtype of parent abuse, and one that is

worthy of attention, yet has largely been ignored.

My chosen research design involved a method of investigation that afforded the chance to

develop my qualitative research knowledge and skills. As I was unfamiliar with qualitative

methods of research, I found myself embarking on a very steep learning curve, while

enjoying the familiarity and comfort of quantitative data.  More importantly, the decision

to include a questionnaire and an interview phase proved to be both suitable and

rewarding. As described in chapter six, the questionnaire data revealed the types of

property commonly damaged during episodes of aggression and the random, selective, or

functional nature of the damage.  Additionally, the narratives gathered during the in-depth

interviews were rich with detail about parents' experiences of DPV, providing a depth to

this study that was only made possible by employing a qualitative method.

In chapter five I explained that the early phases of the research were influenced by

grounded theory, however, as the study progressed I became increasingly interested in

interpretative phenomenological analysis, particularly because of the emphasis this methodology places on meaning-making. I found interpretative phenomenological analysis to be a research methodology that is consistent with my clinical values, as it encourages collaboration between participant and researcher with the aim of identifying and interpreting experiences, thus making sense of a phenomenon together. This collaboration mirrors a central principle of my clinical practice.

Additionally, I was interested in the way interpretative phenomenological analysis requires the researcher to provide an interpretation of the data in a manner that is transparent in the analysis. As discussed in chapter five, this methodology requires that the researcher's experiences and theoretical assumptions are acknowledged and used in the analysis (Cronin-Davis et al., 2009). Therefore, it is important that I acknowledged, rather than denied or ignored, that my interpretations have been shaped in a significant way by my position as a clinical psychologist, by my work with families, and by my knowledge of related theory.

I found interpretative phenomenological analysis to be particularly well suited to addressing the central study questions—how do participants make sense of the DPV, how are they affected, and how do they respond? Larkin et al.(2011) proposed that this methodology "aims to understand how people make sense of events, relationships, and processes in the context of their particular lifeworlds" (p. 13). In this case, interpretative phenomenological analysis was employed to explore each participant's unique lived experience of DPV.

The following discussion begins with a recap of explanations for parent abuse that emerged from the literature. These explanations were earlier presented in chapter three. In the same chapter I demonstrated the gaps that popular theories leave in our understanding of this complex problem, the way in which participant meaning-making emerged from the analysis, and how this concept offers a useful framework for interpretation of the findings. In this final chapter, salient findings related to trauma, grief, and loss are considered using a meaning-making perspective to account for the similarities and differences in participants' experiences. Similarly, participants' reactions to DPV are summarised and discussed. Here again, meaning-making provides an interesting and valuable interpretative framework. The three super-ordinate themes relating to participants' perspectives, impacts, and responses are then discussed collectively by applying an ecological meaning-making framework that evolved and developed through the analysis.

Next I discuss the theoretical outcomes of my study. An original intention of the research was to theorise on the existence of DPV within a parent-child relationship. No earlier studies have done so, and only a small number of studies have explored participants' own interpretations of the existence of other forms of parent abuse. The completion of analysis for the purpose of this thesis now enables a reflection of the ways in which an ecological model can be merged with meaning-making frameworks, and with grief and loss models, to illuminate connections between personal theories of causation, impacts, and responses to DPV.

The remainder of this discussion focuses on possible implications of the main findings of research, particularly implications for policy and practice. Lastly, I consider several limitations of the present study before making recommendations for further research.

## 10.2 Explaining the Problem

In interpretative phenomenological analysis research interpretations are related back to the literature–in this case, existing theories about interpersonal violence, its causes, and outcomes. In earlier chapters I demonstrated that while parent abuse is a type of violence, this phenomenon is only partially explained by existing youth and family violence theories. Youth violence findings have generally been based on clinical or judicial studies of delinquent youth with well established patterns of serious violent behaviour. However, it is likely that milder forms of violence are not being captured, and we are missing youth violence that occurs within the home.  Paterson (1999) found that acts of parent abuse are in many, an exception to otherwise non-aggressive interaction styles. This finding fits with the reports of 10 of the 14 interview participants in this study who described their children's violence being limited to the family home. Furthermore, findings from the present study show that young people who abuse their parents are a heterogeneous group with not all appearing to fit the presentation of a "typical violent youth". With emerging evidence that young people who behave abusively toward their parents may not present with characteristics commonly found in youth violence studies, comes the idea that parent abuse requires a more comprehensive exploration, incorporating alternative constructs.

Existing family violence theories also have limitations with respect to explaining DPV. To illustrate this point I refer to the issue of power and control, as it has been a common theme in family violence research and writing, and one that is particularly relevant to the present study given that the loss of power and control was an experience described by all of the interviewees. Unsurprisingly, themes of power and control have been present in earlier parent abuse research. After all, parent abuse directly challenges established

wisdom that parents are innately more powerful than their children, and therefore, should be able to control their children's behaviour.

Gelles (1997) described parent abuse stemming from a confused power structure, leading to frustration and aggression in children. Laurent and Derry (1999) considered various family situations which precipitate parent abuse and found that insufficient parental control and authority was related to parent abuse. They suggested that when children are required to assume self autonomy in the absence of parent-imposed rules and boundaries, increasing levels of violence can be seen in the search for behavioural and emotional guidance and limits. These and other similar findings have contributed to popular assumptions about the role of inadequate or faulty parenting in the aetiology of parent abuse.

In this study, all participants spoke about power and control in relation to the issue of parental responsibility, with most sharing the perception that society holds them accountable for being unable to control their children. Although, contrary to what scholarly theory and popular media may have us believe, in each case, power and control was not consciously relinquished to a child by an inadequate, indifferent, or uncaring parent. Rather, control was eroded over time despite the participants' best efforts to maintain or reclaim it.

Participants' accounts revealed that the relationship between DPV and power and control is a multifaceted one, influenced by a range of contextual factors. Relying on simple explanations disguises the significant role that social, cultural, and political systems play in the undermining of parental authority. This example is particularly valuable in

demonstrating the importance of exploring participants' experiences of DPV and eliciting their explanations for the violence when theorising about the aetiology of this problem.

## 10.3 Participants' Explanations

Introducing an interpretative phenomenological analysis framework, and the resulting emerging findings, prompted me to think beyond academic theories of causation. I began exploring meaning-making, trauma, grief and loss theories (introduced in chapter three), and their applicability to the problem of DPV.

Understanding the lived experience of participants and the meanings they give to DPV was a central aim of the present study. Participants were invited to share their ideas about why DPV had developed, prompting conscious meaning-making. I was interested in how participants made meaning of their experiences and how this meaning-making influenced their everyday lives. Participants collectively described the complexity of meaning-making processes and outcomes demonstrating that even when they might consider factors external to the family such as peers, media, and academic stress, social messages about aggressive children and the role of parents remained particularly influential.

I came to learn that self-reflection is influenced by a range of factors, and that meaning-making evolves and changes over time.  Indeed, participants in the present study were at different stages of meaning-making. Some had only just begun to think of the DPV as violence and abuse (prompted by the study), while others had engaged in meaning-making for some time, and described a range of meanings made and varying levels of personal adjustment. I also discovered that  participants typically initially looked for simple, binary explanations such as my child is mentally unwell or my parenting is inadequate, only to

find that they were not applicable, available, or sufficient. Their personal theorising or rather meaning-making led to the exploration and acknowledgement of the role that peers, the media, academic stress, and other factors play in this problem. For example, the perceived erosion of parental authority and control by institutions including schools, the police, and the justice system was a frustration expressed by most of the interviewees. Participants, the people who know this problem best, offered important and useful insights as they unravelled the complex processes at play between them and their children and various social, cultural, and political factors influencing the violence.

## 10.4 Impacts

The present study further enhances our knowledge of DPV by revealing the significant impact of this type of abuse through a trauma and loss framework. From the outset of this study I expected to hear accounts of DPV and other forms of parent abuse that were of a significant and serious nature. Indeed both the questionnaire and the semi-structured interview schedule were designed, in part, to explore the various impacts of DPV. That said, throughout the interviewing phase of the study I was continually moved, often shocked, by the accounts of participants, several of whom spoke of extreme abuse at the hands of their children. Having listened to numerous examples of violence I realised that I would not be overstating the impact of DPV, and other co-occurring forms of parent abuse, by describing it as a type of personal trauma and thus capable of producing serious and complex trauma reactions. The word "traumatic" was used by several of the participants in the study and led me to reflect on my clinical experience and knowledge about trauma reactions and the role of meaning-making.

As discussed in chapter three, traumas that are inflicted by our loved ones challenge our perceptions of security and self worth, and often have the most enduring negative impacts (Allen, 2001). In some cases, family violence may lead to serious emotional health problems, such as posttraumatic stress disorder. Certainly, participants' narratives revealed a range of post-trauma symptoms of varying duration and intensity related to the DPV, including emotional numbing, avoidance, hyper vigilance, fear, and uncertainty which intensified with repeat exposure to the abuse. Demonstrated in chapter eight, is that while comparable in many respects to the traumatic impact of other forms of family violence, parent abuse has unique impacts associated with the nature of parent-child relationships. Participants described confusion and dissonance as they grappled with a sense of responsibility to love and protect their children—children they sometimes experienced as intimidating and dangerous and yet vulnerable—and their need to protect themselves. The findings also revealed that DPV can produce outcomes that are unique to this form of parent abuse and should not be underestimated or minimised. Notably, DPV often delivers an ominous message—that I am capable of greater levels of violence, and physical assault is imminent should you fail to meet my demands.

I also expected to hear participants' accounts of loss and losing things. After all, the study looked at damage to personal property. However, I was surprised by the variety and depth of loss experiences. Indeed, narratives of loss, both actual and perceived, were present in all the interviews. The most obvious impact of DPV is the financial cost of property theft and damage, yet this was often not the most significant of concerns. The findings revealed that we should not attempt to determine the seriousness of the problem based on the financial cost of the damage. DPV can evoke feelings of loss and grief when the

possessions that are damaged have a symbolic and sentimental value (for example, Grace's piano), regardless of their financial or functional worth.

It appears that the biggest costs of DPV are perhaps the emotional sequelae and the relational impact of the violence. Participant reports revealed that some losses may be readily apparent, such as financial losses, while others may be subtle and private, for example, the loss of identity and ideals about parenting and family life.

The most salient of the participants' concerns was the loss of parent-child closeness related to the DPV, revealing that the impacts of DPV are not simply physical and measurable, but also symbolic and intangible. Like objects, relationships can be damaged, broken, and shattered.

The salience of loss themes prompted consideration of related theory. I discovered that traditional theories of grief and loss generally focus on grief as a result of death and dying. This is despite increasing acceptance that grief can be a product of various losses with a wide range of factors contributing to the loss experience (Dallos & Vetere, 2009). In the case of DPV, parents can experience a multiplicity of physical and psychosocial losses that are unexpected and counter-normative, and thus contextually different to losses that are a normal and expected part of human life.

In chapter three I discussed experiences of grief that do not readily fit with social and cultural constructs of loss, often referred to as disenfranchised grief (Doka, 1989, 2002). When a loss is not recognised or considered to be important, such as when a relationship changes in a significant and meaningful way as the result of interpersonal violence,

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disenfranchised grief may ensue.  This point has particular relevance to the present study, and may explain why in the case of DPV, loss and grief can go unnoticed, particularly when the problem remains hidden. Analysis revealed that most of the participants had not acknowledged their loss or had intentionally withheld their loss experiences (due to stigma, embarrassment, self blame or fear of being blamed), bearing the burden alone. As explained in chapter three, this is a phenomenon known as self-disenfranchising grief (Kauffman, 1989).

Goldsworthy (2005) critiqued traditional grief and loss theories and found many of them to be prescriptive and linear in nature. She proposed advancing current theories in a manner that acknowledges the uniqueness of grief and considers the task of grieving as not simply recovering and moving on, but rather one of integrating personal meanings of the loss into our lives. I adopted an ecological meaning–making lens in order to explore participants' unique and shared experiences of, and reactions to, loss. Specifically, I explored the various levels of influence on how participants made sense of the DPV and how this meaning-making might in turn influence the impact of the violence. It became clear that DPV-related loss experiences and responses were influenced by a unique set of personal, social, and environmental factors surrounding the loss, and the meanings that each had assigned to their experiences of DPV and other forms of parent abuse. For example, for several of the participants, their sense of loss was compounded by feeling alone with the problem. For others, loss reactions were strongly influenced by the manner in which DPV deviated from their expectations about parenthood and family life, threatening their sense of self as a parent and causing unwanted change and disruption in their lives. Meaning-making theory accounts for this variability by explaining how a loss is shaped by internal working models (or global beliefs) about parent-child relationships,

and the extent to which these models and beliefs have been challenged by the presence of DPV. Beyond this, meaning-making theory also provides a useful framework for exploring and understanding both similarities and differences in the way parents and caregivers may respond to DPV.

Next I will demonstrate the way in which participants' stories of responding commonly reflected a meaning-making journey. Such a journey might begin at a point at which the participant came to recognise the DPV to be beyond "normal" child behaviour, and to begin to think, some times speak, of the DPV as being abusive. This recognition came at different times, although in almost every case, was preceded by many earlier acts of parent abuse.

## *10.5 Participants' Responses to DPV*

Chapter nine offered an account of participants' responses to DPV, revealing common immediate reactions to episodes of property violence, including ignoring the behaviour, escaping the home, or confronting the child. Typically, parents initially attempted to parent through the DPV, however, in cases of escalating violence and damage, this became unsafe. The prevention of an escalation of abuse commonly took precedence over the preservation of parental authority, triggering a vicious cycle, and perpetuating a sense of losing control. Backing down, withdrawing commands and restrictions, sometimes even fleeing the violence, became necessary actions to prevent harm to themselves and their other children. DPV could trigger responses in parents that were uncharacteristic and unnatural to them, prompting parenting dissonance and further distress. Behavioural and psychological strategies such as ignoring the behaviour, escaping from the violence, or

becoming emotionally numb, were adopted as a means of coping with the pervasive threat of further abuse while continuing on with the numerous tasks of parenting and daily life.

It is not uncommon to hear about persons who are experiencing high levels of stress and loss seemingly continuing on with life despite this adversity. Indeed we are likely to encounter many people who are privately experiencing emotional hardship, and in the case of family violence—great risk to their physical and emotional wellbeing, and be unaware of their struggles. Humans have the capacity to oscillate between dealing with emotional challenges and suspending their grief and distress to deal with practical issues—a phenomenon that is described by Stroebe and Schut (1999) in their dual process model of coping following bereavement (introduced in chapter three). Findings from the present study indicate that the dual process model provides a useful framework for understanding the adaptive challenges faced by parents experiencing DPV and explaining how affected parents might attempt to fulfil their numerous tasks related to parenting and other life roles. Participants described oscillating between confronting the abuse (and the associated impacts) and engaging in avoidance behaviours in order to survive and continue functioning. Although originally developed to describe the manner with which individuals respond to the death of a loved one, the dual process model of coping following bereavement (Stroebe & Schut, 1999) seems to be applicable to other loss experiences and trauma, including parent abuse.

A consideration of participants' reactions to DPV prompts a return to the central constructs of meaning-making and loss. As previously shown, loss to some degree, was an outcome for all 14 participants. For most, this sense of loss had endured, regardless of

whether the abuse was a past or present problem. This finding calls to mind

Goldsworthy's (2005) observation that "loss leaves us forever transformed" (p. 175).

Solomon (2004) wrote that the key to surviving personal trauma is creating new meaning.

In the current research, participants who described better levels of personal and relational

adjustment and recovery were those who had managed to create new meanings about their

role in their child's life and about themselves in general. In particular, they had

incorporated a range of factors in their meaning-making. These participants had moved

beyond seeing themselves or their parenting as being primarily responsible for the abuse,

to considering the influence of various life experiences, peers, and social, educational, and

political systems on their children's abusive behaviour.

Time free of the abuse seemed to enable more active meaning-making, although did not

guarantee positive meaning outcomes. I was to learn that meaning-making can induce

feelings of self blame, guilt, and loss that require time and attention before affected

parents can move on to an improved level of subjective wellbeing and, in some cases,

closer relationships with their children.

Personal adjustment after trauma and loss has been shown to be influenced by a range of

factors. In the case of DPV, negative loss reactions may be exacerbated by an absence of

both personal and social acknowledgment of the significance of the loss. The effect of

disenfranchising grief can exacerbate the recovery process. Ambivalence that may exist

when the loss relates to abusive relationships or situations, as in the case of parent abuse,

can further complicate grief (Rando, 1984). When persons are unable to legitimately speak

of the loss they may find they cannot access support, or their shame may interfere with their desire to do so.

### 10.5.1 Turning points in responding

Including participants for whom DPV was a past problem in the study with those currently affected allowed a useful comparison. Of particular interest were participants' explanations about when and why the DPV ceased. Those for whom DPV was a past problem talked about turning points, or rather the moments or events that led them to a decision to respond differently to their child's violence. Turning points were generally precipitated by an act of violence that crossed an invisible threshold, thus moving to an intolerable level of aggression and prompting a realisation of the seriousness of the violence, and participants' increasing concern for safety (theirs and others).

Whereas I was initially interested in the similarities in participants' reports and reactions to DPV, I began to notice and consider important differences that existed and discovered that turning points came at different times. Some followed a single threat of bodily harm, whereas for others serious physical harm had occurred on numerous occasions before the parent was able to say enough is enough, and take action to prevent any further episodes.

Others had not yet reached that point, and I wondered how bad it would get before they might take action that would bring the violence to an end. Here again I was interested in participant meaning-making, because it seemed that turning points came only after a parent came to see the DPV as abusive and harmful to them and others living in the home. This finding reveals the importance of having language to speak of all forms of family violence. It also highlights the need to encourage meaning-making that strengthens

parents' resolve to overcome the violence, rather than endorsing themes of culpability, guilt, and blame that undermine them. Additionally, turning points were influenced by factors beyond the participants and their relationships with their children. Applying an ecological model to turning point experiences revealed that there are layers of influence including family, friends, agencies, and the media. Furthermore, the relationship between these influential factors can be a complex, sometimes surprising one. For example, as shown in chapter nine, the introduction of a helping agency such as Child, Youth and Family or the police does not always result in acceleration toward a turning-point and the prevention of further DPV, and can in fact hinder this progress.

Turning points precipitate action. All participants who described reaching a turning point also spoke about the importance of letting go and moving on, in order to prevent a return to abusive patterns of interaction with their children. For a small number of participants this had meant the loss of their relationship with their child. For most, however, reaching a turning point and finding some way to let go and move on had resulted in closer bonds with their children and no further DPV. This need to take action partly explains why participants with younger and more dependent children (due to age and developmental/mental health concerns), did not describe reaching this stage. Turning points are not just related to the serious nature of the violence, but also the nature and stage of the parent-child relationship. That is not to say that parents of even young or highly dependent older children cannot be supported to draw their "line in the sand" so to speak. Indeed, the finding that turning points can facilitate positive change in parents and parent-child relationships has important implications for intervention. Assisting a parent to reach a turning point earlier rather than later might trigger a process that enables improved interactions, potentially salvaging relationships that might otherwise be lost.

## 10.6 DPV Explanations, Impacts, and Parent Responses—An Ecological Meaning-Making Framework

A central objective of interpretative phenomenological analysis is to make a contribution to knowledge "through interrogating or illuminating existing research" (Smith, 2004, p. 43). Accordingly, one aim of the present study was to identify and integrate academic, social, and personal explanations to advance theory. As discussed, existing theories of parent abuse reflect traditional youth violence or family violence explanatory models, which may not always be applicable to the problem of parent abuse. The incompleteness of theories has been revealed in a number of ways by the findings of the present study. Positioning parent abuse within the youth violence domain ignores the finding that some young people who abuse their parents are otherwise non-violent, pro-social individuals, and thus not typical of the antisocial young people investigated in youth violence studies. Similarly, there appears to be an uncritical acceptance that if young people are violent toward their parents they have been exposed to adult forms of family violence. However, this theory does not account for the finding that some children who abuse their parents have not experienced child abuse or witnessed intimate partner violence.

Parent abuse research to date has not provided a commonly accepted theory of parent abuse. Within the corpus of parent abuse literature there has been an over-reliance on studies that have emphasised the role of individual and family factors—describing DPV and other forms of parent abuse as a product of an emotional or behavioural disturbance in the violent child, ineffective parenting, or more general family dysfunction, Theoretical frameworks based on the principles of social learning, or individual and family

dysfunction, have been privileged in existing literature while social, political, and cultural factors have only occasionally been considered, and seldom in a thorough manner. This has likely reflected both a preoccupation with finding individual and family-based explanations for human problems, and the many challenges associated with conducting studies to examine multi-factor, interactionist models.

Several central theoretical frameworks have been described in this thesis. Chapter three began with an explanation as to how each of these theories emerged from the analysis and why they were later selected for inclusion. Early on, data analysis indicated the importance of considering ecological models that attempt to demonstrate the complex interplay between individual, family, social, cultural, and political factors when studying DPV. Similarly, Cottrell and Monk (2004) adopted nested ecological theory (Belsky, 1980) as a structure for considering common themes in their qualitative study of parent abuse and found the theory was effective in merging psychological, sociological, feminist, and cultural factors in order to better understand their participants' experiences.

Nested ecological theory has application to the findings of the present study by offering a useful framework for thinking about participant meaning-making. For example, when simple explanations did not suffice to explain the violence, participants considered various interacting factors, all of which can be described using a nested ecological model. As discussed in chapter seven, participants' explanations for their children's DPV contained ontogenic factors including "deeper issues" and mental health problems, nested among microsystemic factors such as communication styles and patterns of parent-child interaction; exosystemic factors like, for example, the influence of parent workplaces and

support networks; and macrosystemic factors, such as media, and other influences that condone and legitimise the use of violence against parents.

Whereas Belsky's nested ecological theory does not include the mesosystem, defined by Bronfenbrenner (1979) as the interrelationships among two or more settings, this additional level of interaction was described as relevant to the problem of DPV by several participants. Mesosystemic factors that emerged from the interviews included participants' relationships with their children's educational environments, their children's peer group, and the parents of their children's friends, with participants commonly feeling disempowered by the nature of these relationships.

Although interactionist models like nested ecological theory have limitations, they can be useful in considering the various layers of influence on both the impacts of DPV, specifically grief and loss, and participants' reactions, particularly turning points and help seeking behaviours. A meaning-making framework offers an overarching conceptualization of explanations, impacts, and responses, capturing important aspects of each. How a participant made sense of the DPV influenced how they were impacted and in turn reacted to the violence. Participants' accounts revealed how individual and family factors combined with social, cultural, and political factors, creating in most, a sense of self blame and shame. Negative evaluations about oneself, often strengthened by pervasive social and political messages of parent blame, in turn influence reactions to DPV. DPV and other forms of parent abuse understandably evoke experiences of loss and grief and yet much of these will exist without acknowledgement or expression.

There appears to be little attention afforded to the plight of parents in situations such as the participants experienced. The absence of awareness and acceptance results in a lack of acceptable ways to speak about this type of family violence. I am reminded of the reactions of various people and agencies to my request to advertise the study. In chapter five I explained that data gathering proved to be more difficult than I had anticipated. Several persons and organisations declined to advertise my study, seemingly uncomfortable with the topic. A number of flyers were returned with no explanation, while several groups expressed concern that my research might promote abusive treatment of children. I came to realise that many people may perceive that children who are abusive toward their parents must have been mistreated by them and that therefore a study of this type could inadvertently condone abusive parenting. Although these attitudes and reactions complicated the study process, they offered a unique insight into what it is like to want to talk about a problem that remains unpalatable to most. I was motivated to think about reactions to parent abuse and the source of people's attitudes, including my own. I combined these experiences with the narratives of interviewees to conclude that society reacts to DPV and other forms of parent abuse with negative judgments and assumptions about affected parents.

Participants' accounts revealed how their experiences of grief and loss have been influenced by these reactions. This is a finding that is consistent with the theories of disenfranchised grief. Furthermore, participants revealed that their experiences of parent abuse left them disenfranchised in various ways. Parents of abusive children may not only lose their things, but they lose their voices, and their perception of power and credibility, both within and outside of the home, impacting on their identity as a parent across contexts. In a sense, they are disqualified from contributing their views and experiences.

Therefore many of them may remain quiet, their power and control eroded not only by the violence, but also by the reactions of others, and by social and political messages of blame and inadequacy.

This begs the question, how were some of the participants able to get to a turning point, sometimes involving a disclosure of the violence? Here too, meaning-making played a role: Self reflection enabled some participants to make a cognitive and affective shift, often from a place of denial to one of acceptance that DPV is a form of abuse, and then on to intolerance of continuing violence and some form of action. In this study, turning points commonly reflected a reclaiming of power and control. The dual process model (Stroebe & Schut, 1999), when applied to this phenomenon, explains this process, accounting for the periods of oscillation between avoiding and confronting the issue that commonly precede reaching a point at which a person is able to state, "I've had enough".

### 10.6.1 An ecological meaning-making theory of DPV

As introduced in the previous section, an ecological meaning-making framework illuminates connections between  social and cultural influences on meaning-making and other personal responses to experiences of parent abuse. In this section I develop this framework into a theory specific to the problem of DPV.

The present study advances existing knowledge of DPV and other forms of parent abuse by first critiquing popular traditional theories, before comparing them to the personal theories of the participants directly affected by this problem and in doing so, revealing important shortcomings in popular notions about the aetiology of parent abuse. In keeping with interpretative phenomenological analysis, I went in pursuit of the meanings

participants had attached to their experiences of DPV, with an intention of exploring the various factors that had influenced these meanings.

Personal meaning-making emerges from the analysis of participant interviews as a central influence on a multi-directional relationship between explanations for the violence, impacts, and reactions. That is, the way a parent explained the DPV was closely associated with the way he or she reacted to this problem.

DPV can produce varying degrees of trauma, loss, and grief. Meaning-making theory accounts for this variability by explaining how a person's traumatic responses and loss reactions are shaped by his/her internal working models (or global beliefs) about parent-child relationships, and, in the current context, the extent to which these models and beliefs have been challenged by the presence of DPV. Furthermore, the construction of meaning is influenced by a range of ecological factors, pulling meaning-making in various directions.

A combined ecological/meaning-making theory of interactions between personal meanings, impacts, and responses enhances our understanding of DPV. We can also theorise that letting go and moving on are two concepts associated with turning points and change. Letting go requires a cognitive shift or rather a change in personal meaning related to the violence.

In chapter one the objectives of the present study were identified and these included the development of a theory of DPV that would contribute to improved methods of responding to this problem. This emerging theory of change relating to meaning-making

has important practice implications by illuminating how, for some parents, letting go and moving on may enable them to experience less personal distress and to develop better relationships with their children. As will be discussed in the following sections, adopting an ecological meaning-making theoretical framework has additional implications for both practice and further research.

## *10.7 Implications*

Throughout this thesis there is a developing recognition of the layers of interaction between people, systems, and policy that influence DPV impacts, reactions, and outcomes—leading to the development of the aforementioned ecological meaning-making theory of DPV. It is now important to consider the implications of adopting such a theory to explain key findings.

First and foremost is the finding that DPV happens in some families, and when it does, it has the potential to cause significant financial and emotional harm. The impact of DPV can be compounded by several important factors, including a lack of language to speak about the problem, a reluctance to disclose the problem to others, and self blame stemming from pervasive social messages that parent abuse is caused by faulty parenting. As such, DPV is a social problem that is commonly endured alone, because talking about the problem can expose a reality of family life that deviates from a preferred image. Findings from the present study fit with earlier reports that have shown that parents are too ashamed and afraid to disclose their experiences of parent abuse, although with the addition of my research experience, go further and reveal that parent concerns may be accurate.

**10.7.1 Social policy and service development implications**

As discussed in chapter four, despite various government agencies having a focus on supporting and protecting New Zealand children and families, none appear to be concerned with the issue of parent abuse. Interestingly, even those policy makers and service providers that have been centrally involved in recent national family violence campaigns, such as the "It's not OK" initiative, have neglected this form of family-based violence. Unfortunately, in spite of the New Zealand governments' efforts to increase awareness and encourage action against all forms of family violence, parent abuse appears to remain an unpalatable topic, unspoken about, and hence largely ignored. Accordingly, existing policies, and the services they inform, fail to adequately consider the needs of families affected by parent abuse. One solution to this limitation could involve extending the polices and practice guidelines of existing agencies, such as Child, Youth and Family, in order to offer improved screening, intervention and prevention strategies. An alternative response would be to design new services with the specific intention of supporting affected parents, and preventing and intervening in cases of DPV and other forms of parent abuse.

**10.7.2 Increasing public awareness of DPV**

A central intention of the study was to increase awareness and understanding of DPV. On a local level the study achieved this goal. Recruitment efforts involved the posting of flyers introducing the term "parent abuse" in numerous locations around the lower South Island. Further, the study was advertised in three local publications and one national newsletter, and I received several invitations to speak to interested groups, affording opportunities to increase awareness of DPV as a form of parent abuse. Additionally, I worked collaboratively with a family violence focus group to develop a parent abuse

pamphlet which was disseminated widely throughout the group's province. On a number of occasions I encountered indifferent or negative reactions to the study, however, in general my descriptions of the phenomenon were largely well received, and had the effect of generating increased awareness of the problem and understanding of the impact of DPV and other forms of parent abuse on both parents and their young people.

Building public awareness of the existence of parent abuse and the plight of affected parents may reduce the stigma and shame parents feel. This will require that parent abuse receives greater media coverage, and becomes a central consideration of family violence campaigns.

Increasing public awareness of parent abuse needs to occur in a fashion that challenges commonly held perceptions that parent abuse only happens to parents who are, for some reason, blameworthy, such as parents who are abusive to their children or who have neglected to manage their children's behaviour. Steps taken to increase awareness of DPV and all other forms of parent abuse need to broaden society's perspectives about the many and complex causes of parent abuse and the wide range of  families who may be affected.

### 10.7.3 Implications for supporting families affected by DPV

The findings of the present study have important implications for supporting parents experiencing DPV and other forms of parent abuse. Help seeking is not always a positive experience. Indeed participants in this study spoke about their varied experiences of help seeking, with most reporting unsatisfactory outcomes. Their descriptions revealed that help seeking can be a risky undertaking with adverse outcomes.

A significant majority of questionnaire respondents reported concern that others would consider them to be a bad parent. Similarly, most respondents also reported associated embarrassment and shame, and a fear that disclosure would provoke retaliation by their young person. Interviewees illuminated these findings with stories of help seeking that had resulted in critical judgments about their parenting and about their children. Several spoke of help providers actually making the problem worse. The findings reveal that even when a parent is prepared to take the risks associated with help seeking, help may not be forth coming. It would seem that, just as society favours family-based explanations for DPV, there is an implicit assumption that the responsibility to "fix" the problem lies with the family.

Furthermore, help providers may underestimate the serious nature of the violence or ignore parent concerns. Most participants wondered about what services were available to support them. Lack of knowledge about availability of services may point to an actual unavailability of resources, or misconceptions about who is eligible for these services. This brings to mind Brenda's reluctance to involve the police because she was uncertain if they would respond, and had been told that there needed to be "blood on the walls" before police action would be taken.

Not all reports of help seeking revealed disappointment, and this too has important implications for service providers. Several participants described satisfying help seeking experiences that involved being affirmed by others and receiving helpful and practical advice about how to react to the violence. Satisfying help seeking outcomes included learning that DPV was a form of family violence and therefore police intervention was appropriate, and receiving practical personal safety advice.

Participants' remarks about engaging in the present study revealed that simply having a chance to confidentially speak about their experiences was cathartic. Individuals and agencies that provide an opportunity for private disclosure and personal meaning-making may provide a very beneficial service for parents experiencing DPV by reducing parental isolation, and possibly the involvement of more intensive, and less desired interventions.

Throughout the present study, participants' meaning-making has been a central theme, and has enabled the identification and exploration of factors that contribute to DPV. Potential helpers might work with parents to define and understand the DPV. Fostering meaning-making may support a parent to move from a place of denial to one of recognition that their child's behaviour is abusive, precipitating a journey toward a turning point that will mark an end to the abuse, and the beginning of a healing process for the parent and their child.

This will require a preparedness to ask about the presence of parent abuse in a parent-child relationship. Increasing awareness will likely lead to better screening for parent abuse within health and social support services. Those who do enquire about DPV and other forms of parent abuse will need to have an understanding of the serious impacts of DPV and a recognition and respect for individual coping responses to this problem. For example, not judging a parent's active ignoring of the abusive behaviour as being idle parenting, when it may well be an important strategy for preventing further violence and keeping themselves and others safe. Additionally, recognising that parents may struggle with the dichotomy of being both the victim and the protector of their child, therefore,

experiencing a confusing blend of love and fear that may make it very difficult to take action, such as contacting the police.

Encouraging and exploring meaning-making will also require recognition of, and respect for, social, political, and cultural factors that influence a parent's motivation to disclose experiences of DPV. For example, working with parents from marginalised groups necessitates an awareness of issues, such as stigma, shame or a mistrust of social agencies that may create resistance to sharing stories about family life.

## *10.8 Future Research*

It seems that the issue of parent abuse has largely been ignored by both youth violence and family violence researchers. Previous efforts to explore this problem have tended to involve research encapsulated within either one of these basically separate research domains, and subsequently, existing explanations for parent abuse reflect traditional youth violence or family violence explanatory models, which may not always be applicable to the problem of parent abuse.

This study has achieved the aim of bringing the problem of DPV as a distinct form of parent abuse out into the open, however, the findings raise a number of issues that require further investigation. Establishing the prevalence of this problem in New Zealand families seems an important next step that will require a large scale quantitative study. This could take the form of a national household victimisation survey that includes questions pertaining to DPV and other forms of parent abuse. This type of data is necessary when developing and funding methods of prevention, screening, and intervention, because while

parent abuse remains hidden, there are unlikely to be significant efforts made to support the families affected by this problem.

Galvin (2004) considered the "family of the future", and suggested that better prevention and intervention efforts will be required to support families experiencing problems (p. 675). She argued the need for more research to consider multiple influences on family interaction. The current study reveals the importance of adopting an ecological framework when considering the causes, impacts, and reactions to DPV, and points to the need for interventions that not only target individual and family issues but also wider community, social, political, and cultural influences that prevent or influence children's violence toward parents. Edenborough et al. (2008) identified a requirement for tailored interventions to meet the needs of affected parents. Interventions that fail to recognise that parent abuse is a complex problem will likely produce limited benefits. Therefore, future research needs to extend our understanding of contextual factors on parent-child interactions and could do so by exploring parental experiences and engaging young people in order to capture their perspectives on this problem.

As explained in chapter four, New Zealand is a culturally diverse country. Consequently, New Zealand research involving participants of different ethnic and cultural backgrounds needs to consider the influence of cultural factors. Māori participants were included in the present study, and so cultural influences were considered during the design, recruitment, data gathering, and analysis processes. No significant differences were found between Māori and non-Māori responses when analysing both the questionnaire and the interview data. However, on reflection, the study could have gone further to explore cultural

influences both on meaning-making and reactions to DPV, in particular, help seeking behaviour.

## *10.9 Conclusion*

Increasing awareness of the prevalence and impacts of family violence has generated a surge of research, government strategy, and agency-level intervention. Unfortunately, both youth and family violence literature fall short of providing a balanced and comprehensive coverage of youth violence as it exists within families. Subsequently, parent abuse continues to go largely unrecognised. Furthermore, previous efforts to explore this phenomenon have tended to rely on theories of causation that overemphasise individual disorders, inadequate parenting, and family dysfunction.

The present study builds on existing knowledge by employing a method of enquiry and analysis designed to explore how parents and caregivers make sense of their lived experiences of DPV. Adopting a meaning-making framework and exploring participants' explanations provides an important addition to the extant literature by revealing shortcomings in popular theories about how, and why, DPV and other forms of parent abuse develop. The findings illuminate the complex interplay between individual, family, social, cultural, and political factors in the development of child and youth perpetrated DPV. The findings also shed light on the impact of DPV and on parents' and caregivers' responses to this type of interpersonal violence. Participant reports showed that DPV is a traumatic stressor producing a range of negative emotions. Notably, DPV causes loss. However, as demonstrated, loss related to DPV may be different to human reactions to other forms of loss, such as bereavement, and may therefore be only partially accommodated within existing theories of grief and loss.

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In the current study, losses associated with DPV were considered using an ecological meaning-making lens. By adopting an ecological perspective it becomes clear that the experiences of participants and their subsequent reactions can be better understood by taking into consideration the unique set of personal, social, and environmental factors that surround their loss and the meanings they have assigned to their experiences of DPV. Furthermore, the findings reveal how meaning-making, impacts, and responses are linked and how these links are bidirectional and influenced by time and environment.

Parents, like other groups affected by family violence, require understanding and support in order to make sense of the problem and overcome self blame, shame, and other impacts of DPV. In the present study help seeking was one response that was closely investigated. Participant reports revealed that help seeking was often not planned, desired, or indeed beneficial. Unfortunately help seeking could increase frustration, anger, confusion, and embarrassment. The findings demonstrate that when parents seek out assistance, services need to reply with policies and practices that adequately respond to the complex problem of parent abuse.

Finally, it is evident that there is much more to be learned about DPV, and that discovery will require methods of exploration that recognise the complex nature of parent abuse. Future research that pursues the perspectives of both parents and children is necessary, along with efforts to establish the prevalence of DPV and other forms of parent abuse in New Zealand families, with the intention of increasing awareness and providing strategies for effective screening and intervention.

# References

Agnew, R. (1992). Foundation for general strain theory of crime and delinquency. *Criminology, 30*, 47-87. doi: 10.1111/j.1745-9125. 1992.tb01093.x

Agnew, R., & Huguley, S. (1989). Adolescent violence toward parents. *Journal of Marriage and the Family, 51*, 699-711. Retrieved from http://au.wiley.com/WileyCDA/WileyTitle/productCd-JOMF.html

Aldwin, C. M., & Yancura, L.A. (2004). Coping and health: A comparison of the stress and trauma literature. In P. P. Schnurr & B. L. Green (Eds.), *Trauma and health: Physical health consequences of exposure to extreme stress.* (pp. 99-125). Washington, DC: American Psychological Association Press.

Allen, J. G. (2001). *Traumatic relationships and serious mental disorders.* New York: Wiley.

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders. Fourth Edition Text Revision*. Washington, DC: Author.

Ashley, C., & Nixon, P. (Ed.). (2007). *Family group conferences: Where next? Policies and practices for the future.* London: Family Rights Group.

Bailey, S. (2002). Violent children: A framework for assessment. *Advances in Psychiatric Treatment, 8*, 97-106. doi: 10.1192/apt.8.2.97

Bandura, A. (1973). *Aggression: A social learning analysis*. Englewood Cliffs, NJ: Prentice-Hall.

Baumeister, R. F. (1991). *Meanings of life*. New York: The Guilford Press.

BBC News. (2004). Move to tackle anti-parent abuse. Retrieved from http://news.bbc.co.uk/go/pr/fr/-/2/ hi/uk_news/3467803.stm.

Becroft, A. (2006). Restorative justice in the youth court: A square peg in a round hole? *Restorative Justice Online*. Retrieved from http://www.restorative justice.org/editions/ 2006/may06/becroft.

Belk, R. W. (1988). Possessions and the extended self. *Journal of Consumer Research, 15*, 139-168. doi: 10.1086/209154

Belsky, J. (1980). Child maltreatment: An ecological integration. *American Psychologist, 35*, 320-335. doi/10.1037/0003-066X.35.4.320

Biering, P. (2007). Adapting the concept of explanatory models of illness to the study of youth violence. *Journal of Interpersonal Violence*, 22, 791-810. doi: 10.1177/0886260507301225

Bobic, N. (2002). Adolescent violence towards parents: Myths and realities. Retrieved from http://www.rosemount.cathcomm.org/rosemount /research/parentabuse.pdf.

Bobic, N. (2004). Adolescent violence towards parents. *Australian Domestic and Family Violence Clearinghouse Topic Paper.* Retrieved from http://www.austdvclearinghouse.unsw.edu.au/topics.htm

Bonanno, G. A., Wortman, C.B., & Nesse, R.M. (2004). Prospective patterns of resilience and maladjustment during widowhood. *Psychology and Aging, 19,* 260-271. doi/10.1037/0882-7974.19.2.260

Bonnar, M. (1999). Impacts on Mothers. In M. Bradford (Ed.), *Adolescent violence towards parents: Notes from the seminar held on 4th June 1999 at Way Hall.* Adelaide: Department of Human Services.

Boswell, G. (Ed.). (2002). *Violent children and adolescents. Asking the questions why.* London: Whurr Publishers.

Boxer, P., Gullan, R., & Mahoney, A. (2009). Adolescents' physical aggression toward

parents in a clinic-referred sample. *Journal of Clinical Child & Adolescent*

*Psychology*, 38, 106-116. doi: 10.1080/15374410802575396

Bradshaw, C. P., Glaser, B.A., Calhoun, G.B., & Bates, J.M. (2006). Beliefs and practices

of the parents of violent and oppositional adolescents: An ecological perspective.

*The Journal of Primary Prevention, 27*, 245-263. doi:10.1007/510935.006.0030.3

Brezina, T. (1999). Teenage violence toward parents as an adaptation to family strain.

Evidence from a national survey of male adolescents. *Youth and Society, 30*, 416-

444. doi: 10.1177/0044118X99030004002

Brocki, J. M., & Wearden, A. J. (2006). A critical evaluation of the use of interpretative

phenomenological analysis (IPA) in health psychology. *Psychology and Health*,

21, 87-108. doi: 10.1080/14768320500230185

Broidy, L. M., Nagin, D.S., Tremblay, R.E., Bates, J.E., Brame, B., Dodge, K.A.,... &

Pettit, G.S. (2003). Developmental trajectories of childhood disruptive behaviors

and adolescent delinquency: A six-site, cross-national study. *Developmental*

*Psychology, 39*, 222-245. doi: 10.1037/0012-1649.39.2.222

Bronfenbrenner, U. (1979). *The ecology of human development*. Cambridge, MA: Harvard

University Press.

Browne, K. D., & Herbert, M. (1997). *Preventing family violence*. Chichester: Wiley.

Browne, K. D., & Hamilton, C. (1998). Physical violence between young adults and their

parents: Associated with a history of child maltreatment. *Journal of Family*

*Violence 13*, 59-79. doi: 10.1007/s10578-007-0061-x

Bruner, J. (1990). *Acts of meaning*. Cambridge, MA: Harvard University Press.

Bryman, A. (2007). Barriers to integrating quantitative and qualitative research. *Journal of*

*Mixed Methods Research*, 1, 8-22. doi:10.1177/14687941060 58877

Buel, S. M. (2002). Why juvenile courts should address family violence: Promising

practices to improve intervention outcomes. *Juvenile and Family Court Journal,*

*53*, 1-16. doi: 10.1111/j.1755-6988.2002.tb 00058.x

Caplan, P. J., & Hall-McCorquodale, I. (1985). Mother-blaming in major clinical journals.

*American Journal of Orthopsychiatry, 55*, 345-353. doi: 10.1111/j.1939-

0025.1985.tb03449.x

Caplan, P. J. (1998). Mother-blaming. In M. Ladd-Taylor & L. Umansky (Eds.), *Bad*

*mothers: The politics of blame in twentieth-century America.* New York: New

York University Press.

Care of Children Act (2004). Retrieved from http://www.legislation.govt.nz/act/

public/2004/0090/latest/DLM317233.html

Cavadino, P., & Allen, R. (2000). Children who kill: Trends, reasons and procedures. In

G. Boswell (Ed.), *Violent children and adolescents. Asking the questions why.* (pp.

1-18). London: Whurr Publishers.

Charles, A. V. (1986). Physically abused parents. *Journal of Family Violence, 4*, 343-355.

doi: 10.1007/BF00978277

Charmaz, K. (2004). Grounded theory. In S. N. Hesse-Biber & P. Leavy (Eds.),

*Approaches to qualitative research. A reader on theory and practice* (pp. 496-

521). Oxford: Oxford University Press.

Charmaz, K. (2006). *Constructing grounded theory.  A practical guide through qualitative*

*analysis.* London: Sage Publications.

Chong, J. (2007). *Youth justice statistics in New Zealand: 1992 to 2006*. Wellington:

Ministry of Justice. Retrieved from http://www.justice.govt.

nz/publications/global-publications/y/youth-justice-statistics-in-new-zealand-1992-

to-2006-august-2007/publication/

Cochran, D., Brown, M. E., Adams, S., & Doherty, D. (1994). *Young adolescent batterers. A profile of restraining order defendants in Massachusetts*. Boston: Massachusetts Trial Court, Office of the Commissioner of Probation.

Collins, K. T., Onwuegbuzie, A.J., & Jiao, Q.G. (2007). A mixed methods investigation of mixed methods sampling designs in social and health science research. *Journal of Mixed Methods Research, 1*, 267-294. doi:10.1177/1558689807299526

Connolly, M. (2007). Youth justice social work. *Social Work Now, 36*, 18-27. Retrieved from http://www.cyf.govt.nz/documents/about-us/publications/social-work-now/social-work-now-36-may07.pdf

Cornell, C. P., & Gelles, R.J. (1982). Adolescent to parent violence. *Urban and Social Change Review, 15*, 8-14. Retrieved from http://www.researchgate. net/journal/0042-0832_The_Urban_social_change_review

Cottrell, B. (2001). *Parent abuse: The abuse of parents by their teenage children.* Ottawa: Family Violence Prevention Unit Health Canada. Retrieved from http://www.phac-aspc.gc.ca

Cottrell, B. (2005). *When teens abuse their parents*. Halifax, Nova Scotia: Fernwood Publishing.

Cottrell. B., & Monk, P. (2004). Adolescent-to-parent abuse.  A qualitative overview of common themes. *Journal of Family Issues*, 25, 1072-1095. doi: 10.11770192513X03261330

Coyle, A., & Wright, C. (1996). Using the counselling interview to collect research data on sensitive topics. *Journal of Health Psychology, 1*, 431-440. doi: 10.1177/135910539600100402

Crawford, R., & Kennedy, P. (2008). *Improving interventions to prevent violent offending by young people in New Zealand.* Wellington: Ministry of Justice. Retrieved from

http://www.justice.govt.nz/publications/global-publications/i/improving-

interventions-to-reduce-violent-offending-by-young-people-in-new-

zealand/publication

Creswell, J. W., Fetters, M.D., & Ivankova, N.V. (2004). Designing a mixed methods

study in primary care. *Annals of Family Medicine*, 2, 7-12. doi: 10.1370/afm.104

Cribb, J. (2009). Focus on families: New Zealand families of yesterday, today and

tomorrow. *Social Policy Journal of New Zealand, 35*, 4-16. Retrieved from

http://www.msd.govt.nz/about-msd-and-our-work/publications-resources/journals-

and-magazines/social-policy-journal/spj35/35-focus-on-families.html

Crichton-Hill, Y., Evans, N., & Meadows, L. (2006). Research focus: Adolescent violence

towards parents. *Te Awatea Review, 4*, 21-22. Retrieved from

http://www.vrc.canterbury.ac.nz/docs/Te_Awatea_Dec06.pdf

Crofford, L. J. (2007). Violence, stress, and somatic syndromes. *Trauma, Violence and

Abuse*, 8, 299-313. doi: 10.1177/1524838007303196

Cronin-Davis, J., Butler, A., & Mayers, C.A. (2009). Occupational therapy and

interpretative phenomenological analysis: Comparable research companions?

*British Journal of Occupational Therapy, 72*, 332-338. Retrieved from

http://www.cot.co.uk/british-journal-bjot/british-journal-occupational-therapy

Dallos, R., & Vetere, A. (2009). *Systematic therapy and attachment narratives:

Applications in a range of clinical settings*. London: Routledge.

Davidson, C., & Tolich, M. (Ed.). (1999). *Social science research in New Zealand. Many

paths to understanding*. Auckland: Pearson Education New Zealand.

Davis, C. G., Wortman, C.B., Lehman, D.R., & Silver, R.C. (2000). Searching for

meaning in loss: Are clinical assumptions correct? *Death Studies*, 24, 497-540.

Retrieved from http://search.proquest.com.ezproxy.canterbury. ac.nz
/docview/231410449?accountid=14499.

Denny, S. J., Grant, S., Utter, J., Robinson, E.M., Fleming, T.M., Milfont, T.L.,...&
Watson, P. (2011). Health and well-being of young people who attend secondary
school in Aotearoa, New Zealand: What has changed from 2001 to 2007? *Journal
of Paediatrics and Child Health, 47*, 191-197. doi: 10.1111/j.1440-
1754.2010.01945.x

Denscombe, M. (2008). Communities of practice: A research paradigm for the mixed
methods approach. *Journal of Mixed Methods Research, 2*, 270-283. doi:
10.1177/1558689808316807

Denzin, N. K., & Lincoln, Y.S. (2003). *Strategies for qualitative inquiry.* Thousand Oaks,
CA: Sage Publications, Inc.

Department of Health and Human Services. (2001). Youth violence: a report of the
Surgeon General.  Retrieved from http://www.surgeongeneral.
gov/library/youthviolence/report.html

Doka, K. (Ed.). (1989). *Disenfranchised grief.* Lexington, MA: Lexington.

Doka, K. (Ed.). (2002). *Disenfranchised grief: New directions, challenges and strategies
for practice.* Champaign, IL: Research Press.

Doolan, M. (2007). Working towards an effective mandate for family group conferences.
In C. Ashley, & Nixon, P. (Ed.), *Family group conferences - where next?* London:
Family Rights Group.

du Bois, R. H. (1998). Battered parents: Psychiatric syndrome or social phenomenon? In
A. Z. Schwartzberg (Ed.), *The adolescent in turmoil* (pp. 124-134). Westport, CT:
Praeger.

Durie, E.T. (2005) The rule of law, biculturalism and multiculturalism. *Waikato Law Review. Taumauri, 13,* 39-45. Retrieved from http://www .Waikato. ac.nz/__data/assets/pdf_file/0006/26592/Waikato_Law_Review_Vol_13_2005.pdf

Dwyer, M., & Fletcher, M. (2008). *A fair go for all children: Actions to address child poverty in New Zealand: A report for the Children's Commissioner and Barnardos.* Wellington, New Zealand: Children's Commissioner: Barnardos. Retrieved from http://www.occ.org.nz/utilities /site_search?queries_general_ query=barnardos

Dyson, R. (2007). Innovative family decision making. *Social Work Now, 36*, 4-7. Retrieved from http://www.cyf.govt.nz/documents/about-us/publications/social-work-now/social-work-now-36-may07.pdf

Eckstein N.J. (2002). Adolescent-to-parent abuse: A communicative analysis of conflict processes present in the verbal, physical or emotional abuse of parents. ETD collection for University of Nebraska, Lincoln. Retrieved from http://digitalcommons.unl.edu/dissertations/AAI3045512

Eckstein, N. J. (2004). Emergent issues in families experiencing adolescent-to-parent abuse. *Western Journal of Communication*, 68, 365-388. Retrieved from http://search.proquest.com.ezproxy.canterbury .ac.nz/docview/2026 89859?accountid=14499

Eckstein, N. J. (2007). Adolescent-to-parent abuse: Exploring the communicative patterns leading to verbal, physical, and emotional abuse. In B. H. Spitzberg & W. R. Cupach (Eds.), *The dark side of interpersonal communication* (2nd ed., pp. 363-388). London: Lawrence Erlbaum Associates, Publishers.

Edenborough, M., Jackson, D., Mannix, J., & Wilkes, L. (2008). Living in the red zone: The experience of child-to-mother violence. *Child and Family Social Work*, *13*, 464-473. doi:10.1111/j.1365.2206.2008.00576.x

Edmondson, D. (2009). From shattered assumptions to weakened worldviews: Evidence

    of anxiety buffer disruption in individuals with trauma symptoms., from

    Dissertations Collection for University of Connecticut. Paper AAI3361004

    http://digitalcommons.uconn.edu/dissertations/ AAI3361004

Ellickson, P. L., McGuigan, K.A. (2000). Early predictors of adolescent violence.

    *American Journal of Public Health, 90*, 566-572. doi: 10.2105/AJPH. 90.4.566

Ellsberg, M., & Heise, L. (2002). Bearing witness: Ethics in domestic violence research.

    *The Lancet*, 359, 1599-1604. doi:10.1016/S0140-6736(02) 08521-5

Evans, E., & Warren-Sohlberg, L. (1988). A pattern analysis of adolescent abusive

    behaviour toward parents. *Journal of Adolescent Research, 3*, 201-216. Retrieved

    from http://www.deepdyve.com/lp/sage/a-pattern-analysis-of-adolescent-abusive-

    behavior-toward-parents-VNozcAx0Ho

Families Commission. (2009). *Annual report of the Families Commission for the year*

    *ended 30th June 2009*. Retrieved from http://www.nzfamilies.org.nz

    /sites/default/files/downloads/annual-report-2009.pdf.

Families Commission. (2011). 2010 Family violence statistics – good news but a long way

    to go.  Retrieved from www.familiescommission.govt.nz/news-events/family-

    violence/2010-family-violence-statistics-%E2%80%93-good-news-but-a-long-

    way-to-go

Farrington, D. P. (1998). Predictors, causes, and correlates of male youth violence. *Crime*

    *and Justice, 24*, 421-475. doi: 10.1086/449284

Farrington, D. P. (2000). Adolescent violence: Findings and implications from the

    Cambridge Study. In G. Boswell (Ed.), *Violent children and adolescents. Asking*

    *the questions why.* (pp. 19-35). London Whurr.

Fergusson, D., Poulton, R., Horwood, J., Milne, B., & Swain-Campbell, N. (2004). *Comorbidity and coincidence in the Christchurch and Dunedin longitudinal studies. A report for the New Zealand Ministry of Social Development, Ministry of Education and the Treasury.* Wellington: Ministry of Social Development

Ferraro, R., Escalas, J.E., & Bettman, J.R. (2011). Our possessions, our selves: domains of self-worth and the possession-self link. *Journal of Consumer Psychology*, *21*, 169-177. doi:10.1016/j.jcps.2010.08.007

Fields, S. A., & McNamara, J.R. (2003). The prevention of child and adolescent violence. A review. *Aggression and Violent Behavior, 8*, 61-91. doi: 10.1016/S1359-1789(01)00054-4

Finkelhor, D. (1988). *Stopping family violence: Research priorities for the coming decade.* Newbury Park, CA: Sage Publications.

Folkman, S., & Lazarus, R.S. (1980). An analysis of coping in a middle-aged community sample. *Journal of Health and Social Behavior, 21*, 219-239. Retrieved from http://www.jstor.org/stable/2136617

Frankl, V. (1978). *The unheard cry for meaning.* New York: Simon & Schuster.

Frankl, V. (1984). *Man's search for meaning* (3rd ed.). Boston: Beacon Press Books.

Fugate, M., Landis, L., Riordan, K., Naureckas, S., & Engel, B. (2005). Barriers to domestic violence help seeking: Implications for interventions. *Violence Against Women, 11*, 290-310. doi: 10.1177/1077801204271959

Gallagher, E. (2008). *Children's violence to parents: A critical literature review.* Unpublished Master of Social Work, Monash University.

Gallagher, E. (2007). Comparing child to parent violence (CPV) with intimate partner violence (IPV). Retrieved from http://www.eddiegallagher.id.au/.

Gallagher, E. (2004a). Parents victimized by their children. *Australian and New Zealand Journal of Family Therapy, 25*, 1-12. Retrieved from

http://search.informit.com.au/documentSummary;dn=425453300542635

Gallagher, E. (2004b). Youth who victimise their parents. *Australian and New Zealand Journal of Family Therapy, 25*, 94-105. Retrieved from

http://search.informit.com.au/documentSummary;dn=425248337858795

Galvin, K. (2004). The family of the future: What do we face? In A. L. Vangelisti (Ed.), *Handbook of family communication* (pp. 675-698). Mahwah, NJ: Lawrence Enbaum Associates, Publishers.

Garey, A. I., & Arendell, T. (1999). Children, work, and family: Some thoughts on "mother blame". Centre for Working Families, University of California.

Gebo, E. (2007). A family affair: The juvenile court and family violence cases. *Journal of Family Violence*, 22, 501-509. doi: 10.1007/s10896-0079075-1

Gelles, R. J. (1997). *Intimate violence in families.* (3rd ed.). Thousand Oaks, CA: Sage Publications.

Gillies, J., & Neimeyer, R.A. (2006). Loss, grief, and the search for significance: Toward a model of meaning reconstruction in bereavement. *Journal of Constructivist Psychology, 19*, 31-65. doi: 10.1080/10720530500311182

Glaser, B. G., & Strauss, A.L. (1967). *The discovery of grounded theory: strategies for qualitative research.* Chicago: Aldine Publishing Company.

Glaser, B. G. (1998). *Doing grounded theory: Issues and discussions*. Mill Valley, CA: Sociology Press.

Glaser, B. G. (2000). *The discovery of grounded theory*. Mill Valley, CA: Sociology Press.

Goldsworthy, K. K. (2005). Grief and loss theory in social work practice: All changes
involve loss, just as all losses require change. *Australian Social Work, 58*, 167-178.
doi:10.1111/j.1447-0748.2005.00201.x

Goffman, E. (1963). *Stigma: Notes on the management of spoiled identity*. Englewood
Cliffs, NJ: Prentice-Hall.

Greene, J. C., Caracelli, V.J., & Graham, W.F. (1989). Toward a conceptual framework
for mixed-method evaluation designs. *Educational Evaluation and Policy Analysis,
11*, 255-274. Retrieved from http://www.jstor.org/ stable/1163620

Grossman, F. K., Sorsoli, L., & Kia-Keating, M. (2006). A gale force wind: Meaning
making by male survivors of childhood sexual abuse. *American Journal of
Orthopsychiatry, 76*, 434-443. doi:10.1037/0002-9432.76.4.434

Harbin, K. M. & Maddin, D.J. (1979). Battered parents: A new syndrome. *American
Journal of Psychiatry, 136*, 1288-1291. Retrieved from
http://ajp.psychiatryonline.org

Haw, A. (2010). Parenting over violence. Understanding and empowering mothers
affected by adolescent violence in the home. Retrieved from
http://saferfamilies.org.au/Parenting%20Over%Violence%20Final%20Report.pdf

Hayward. J. 'Biculturalism - Continuing debates', Te Ara - the Encyclopaedia of New
Zealand, updated 18-Apr-12. Retrieved from http://www.TeAra.
govt.nz/en/biculturalism/3

Hesse-Biber, S. N. (2010). *Mixed methods research: Merging theory with practice*. New
York: Guilford Press.

Hesse-Biber, S. N., & Leavy, P. (Eds.). (2004). *Approaches to qualitative research. A
reader on theory and practice*. Oxford: Oxford University Press.

Heyman, R. E., & Smith Slep, A.M. (2002). Do child abuse and interparental violence

lead to adulthood family violence? *Journal of Marriage and Family, 64*, 864-870.

Retrieved from http://www.jstor.org/stable/3599988

Hines, D. A., & Malley-Morrison, K. (2005). *Family violence in the United States.*

*Defining, understanding and combating abuse*. London: Sage publications.

Hlavka, H. R., Kruttschnitt, C., & Carbone-Lopez, K.C. (2008). Revictimizing the

victims? Interviewing women about interpersonal violence. *Journal of*

*Interpersonal Violence*, *22*, 894-920. doi: 10.1177/0886260507301332

Hodgson, D. (1999). Tutorial group presentation. In M. Bradford (Ed.), *Adolescent*

*violence towards parents: Notes from the seminar held on 4 June 1999 at Way*

*Hall.* Adelaide: Department of Human Services.

Holt, A. (2009). Parent abuse: Some reflections on the adequacy of a youth justice

response. *Internet Journal of Criminology*, 2010. Retrieved from

www.internetjournalofcriminology.com.

Holt, A. (2011). The terrorist in my home: Teenagers' violence towards parents -

constructions of parent experiences in public online message boards. *Child &*

*Family Social Work*, *16,* 454-463 doi:10.1111/j.1365-2206.2011. 00760.x

Holt, A. (2012). *Adolescent-to-parent abuse. Current understandings in research, policy*

*and practice*. Bristol: Policy Press.

Howard, J., & Rottem, N. (2008). *It all starts at home. Male adolescent violence to*

*mothers.* (A Research Report). Melbourne: Inner South Community Health Service

Inc and Monash University.

Howard, J. (2011). Adolescent violence in the home – The missing link in family violence

prevention and response. Retrieved from http://www.adfvc. unsw.edu.au

Howes, H., Benton, D., & Edwards, S. (2005). Women's experiences of brain injury: An

    interpretative phenomenological analysis. *Psychology and Health*, *20,* 129-142.

    doi: 10.1080/0887044042000272903

Hunt, D., & Smith, J.A. (2004). The personal experience of carers of stroke survivors: An

    interpretative phenomenological analysis. *Disability and Rehabilitation*, *26,* 1000-

    1011. doi: 10.1080/09638280410001702423

Hunter, C., Nixon, J., & Parr, S. (2010). Mother abuse: A matter of youth justice, child

    welfare or domestic violence? *Journal of Law and Society, 37*, 264-284.

    doi: 10.1111/j.1467-6478.2010.00504.x

Ibabe, I., Jaureguizar, J., & Diaz, O. (2009). Adolescent violence against parents. Is it a

    consequence of gender inequality? *The European Journal of Psychology Applied*

    *to Legal Context, 1*, 3-24. Retrieved from http://www.usc.es/sepjf

Jackson, D. (2003). Broadening constructions of family violence.  Mothers' perspectives

    of aggression from their children. *Child and Family Social Work, 8*, 321-329.

    doi: 10.1046/j.1365-2206.2003.00298.x

Jackson, S. E., & Morris, K. (1999). Family group conferences: User empowerment or

    family self-reliance? A development from Lupton. *British Journal of Social Work,*

    *29*, 621-630. Retrieved from http://bjsw.oxfordjournals.org

Jang, E. E., McDougall, D.E., Pollon, D., Herbert, M., & Russell, P. (2008). Integrative

    mixed methods data analytic strategies in research on school success in challenging

    circumstances. *Journal of Mixed Methods Research, 2*, 221-247. doi:

    10.1177/1558689808315323

Jenkins, A. (1999). Therapeutic perspective. In M. Bradford (Ed.), *Adolescent violence*

    *toward parents: Notes from the seminar held on 4th June 1999 at Way Hall.*

    Adelaide: Department of Human Services.

Johnson, R. B., Onwuegbuzie, A.J., & Turner, L.A. (2007). Toward a definition of mixed

    methods research. *Journal of Mixed Methods Research, 1*, 112-133. doi:

    10.1177/1558689806298224

Johnson, R. B., & Onwuegbuzie, A. J. (2004). Mixed methods research: A research

    paradigm whose time has come. *Educational Researcher, 33*, 14-26. Retrieved

    from http://www.jstor.org/stable/3700093

Kauffman, J. (2002). Intrapsychic dimensions of disenfranchised grief. In K. Doka (Ed.),

    *Disenfranchised grief. Recognizing hidden sorrow.* New York: Lexington.

Kaysen, D., Resick, P.A., & Wise, D. (2003). Living in danger. The impact of chronic

    traumatization and the traumatic context on posttraumatic stress disorder. *Trauma,*

    *Violence and Abuse*, 4, 247-264. doi: 10.1177/152483 8003004003004

Kazdin, A. E. (1998). *Parent Abuse Inventory*. New Haven, CT: Yale Child Conduct

    Clinic.

Kennair, N., & Mellor, D. (2007). Parent abuse: A review. *Child Psychiatry Human*

    *Development*, *38*, 203-219. doi: 10.10007/s10578-007-0061-x

Kethineni, S. (2004). Youth-on-parent violence in a central Illinois county. *Youth Violence*

    *and Juvenile Justice*, *2,* 374-379. doi: 10.1177/154120400 4267785

Kidd, J., & Finlayson, M. (2006). Navigating uncharted water: Research ethics and

    emotional engagement in human inquiry. *Journal of Psychiatric and Mental*

    *Health Nursing, 13*, 423–428. doi: 10.1111/j.1365-2850.2006. 00999.x

King, G. A., Cathers, T., Brown, E.G., & MacKinnon, E. (2003). Turning points:

    Emotionally compelling life experiences. In G. A. King, E. G. Brown & L. K.

    Smith (Eds.), *Resilience. Learning from people with disabilities and the turning*

    *points in their lives.* (pp. 31-88). Westport, CT: Praeger Publishers.

Kirsh, S. J. (2012). *Children, adolescents, and media violence. A critical look at the research.* Thousand Oaks, California: Sage Publications.

Kratcoski, P. C. (1985). Youth violence directed toward significant others. *Journal of Adolescence, 8*, 145-157. Retrieved from http://www.journals. elsevier.com/journal-of-adolescence

Krauss, S. E. (2005). Research paradigms and meaning making: A primer. *The Qualitative Report, 10*, 758-770. http://www.nova.edu/ssss/QR/QR10-40/Krauss.pdf

Kurst-Swanger, K., & Petcosky, J.L. (2003). *Violence in the home. Multidisciplinary perspectives.* Oxford: Oxford University Press.

Lalor, J. G., Begley, C.M., & Devane, D. (2006). Exploring painful experiences: Impact of emotional narratives on members of a qualitative research team. *Journal of Advanced Nursing, 56*, 607-616. doi: 10.1111/j.1365-2648.2006.04039.x

Larkin, M., Eatough, V., & Osborn, M. (2011). Interpretative phenomenological analysis and embodied, active, situated cognition. *Theory and Psychology, 21*, 318-337. doi: 10.1177/0959354310377544

LaRossa, R., & Reitzes, D.C. (1993). Symbolic interactionism and family studies. In P. Boss, W. Doherty, R. LaRossa, W. Schumm, & S. Steinmetz (Eds.), *Sourcebook of family theories and methods: A contextual approach* (pp. 135-162). New York: Plenum.

Laurent, A., & Derry, A. (1999). Violence of French adolescents toward their parents. *Journal of Adolescent Health, 25*, 21-26. Retrieved from www.jahonline.org

Lefever, R. (2011). Absent fathers are being blamed for crime and addiction. The sentiment is saintly. The science is shoddy. Retrieved from http://www.dailymail.co.uk/debate/article-2057151/absent-fathers-blamed-crime-addiction

Lempert, L. B. (1997). The line in the sand: Definitional dialogues in abusive
relationships. In A. L. Strauss & J. M. Corbin (Eds.), *Grounded theory in practice*
(pp. 147-170). Thousand Oaks, CA: Sage Publications, Inc.

Lepore, S. J., & Kernan, W.D. (2009). Searching for and making meaning after breast
cancer: Prevalence, patterns, and negative affect. *Social Science and Medicine, 68*,
1076-1182. doi:10.1016/j.socscimed.2008.12.038

Liang, B., Goodman, L., Tummala-Narra, P., & Weintraub, S. (2005). A theoretical
framework for understanding help-seeking processes among survivors of intimate
partner violence. *American Journal of Community Psychology*, 36, 71-84. doi:
10.1007/s10464-005-6233-6

Livingston, L. R. (1986). Children's violence to single mothers. *Journal of Sociology and
Social Welfare, 13*, 920-933. Retrieved from http://www.ncjrs.gov/App/
Publications/abstract.aspx?ID=108783

Llewellyn, G., Sullivan G., & Minichiello. V. (1999). Sampling in qualitative research. In
V. Minichiello, G. Sullivan, K. Greenwood & R. Axford (Eds.), *Handbook for
research methods in health sciences.* (pp. 174-199). Sydney: Pearson Education
Australia.

Lupton, C., & Nixon, P. (1999). *Empowering practice? A critical appraisal of the family
group conference approach*. Bristol: The Policy Press.

Lynch, N. (2008). Youth justice in New Zealand: A children's rights perspective. *Youth
Justice, 18*, 215-228. doi: 10.1177/1473225408096461

Maddin, D. J., & Harbin, H.T. (1983). Family structures of assaultive adolescents. *Journal
of Marital and Family Therapy, 9*, 311-316. doi: 10.1111/j.1752-
0606.1983.tb01516.x

Madey, D. L. (1982). Some benefits of integrating qualitative and quantitative methods in

    program evaluation, with illustrations. *Educational Evaluation and Policy Analysis*

    *4*, 223-236. Retrieved from http://www.jstor.org/ stable/1164015

Mahadevan, J. (2011). Riots blamed on absent fathers and poor school discipline. *Children*

    *and Young People Now*. Retrieved from http://www.cypnow. co.uk/

    Education/article/ 1084793/riots-blamed-absent-fathers-poor-school-discipline

Martin, J., Langley, J., & Millichamp, J. (2006). Domestic violence as witnessed by New

    Zealand children. *Journal of the New Zealand Medical Association*, 119. Retrieved

    from http://journal.nzma.org.nz/journal/119-1228/1818/

Maxwell, G., & Morris, A. (1993). *Families, victims and culture: Youth justice in New*

    *Zealand*. Wellington: Department of Social Welfare and Institute of Criminology.

Maxwell, G., Robertson, J., Kingi, V., & Cunningham, C. (2004). *Achieving effective*

    *outcomes in youth justice.* Wellington: Ministry of Social Development.

McCloskey, L. A., & Lichter, E.L. (2003). The contribution of marital violence to

    adolescent aggression across different relationships. *Journal of Interpersonal*

    *Violence, 18*, 390-412. doi: 10.1177/0886260503251179

McLaren, F. (2010). Attitudes, values and beliefs about violence within families: 2008

    survey findings. Retrieved from http://www.msd.govt.nz/ documents/about-msd-

    and-our-work/publications-resources/research /campaign-action-violence-

    research/attitudes-values-and-beliefs-about-violence-within-families.pdf

Melnick, M. J., & Jackson, S.J. (2002). Globalization American-style and reference idol

    selection: The importance of athlete celebrity others among New Zealand youth.

    *International Review for the Sociology of Sport, 37*, 429-448. doi:

    10.1177/1012690202037004027

Micucci, J. A. (1995). Adolescents who assault their parents: A family systems approach to treatment. *Psychotherapy, 32*, 154-161. doi:10.1037/0033-3204.32.1.154

Ministry of Health. (2007). Family violence intervention guidelines. Elder abuse and neglect. Retrieved from http://www.moh.govt.nz

Ministry of Social Development. (2002). *Te Rito: New Zealand family violence prevention strategy.* Wellington: Author.

Ministry of Social Development. (2004). *New Zealand families today: a briefing for the Families Commission* (Report). Wellington: Ministry of Social Development.

Ministry of Social Development. (2007). Inter-agency plan for conduct disorder/severe antisocial behaviour: 2007-2012. Retrieved from http://www.msd.govt.nz/about-msd-and-our-work/work-programmes/policy-development/anti-social-behaviour/index.html

Ministry of Social Development. (2010). The social report. Retrieved from http://socialreport.msd.govt.nz/

Moeller, T. G. (2001). *Youth aggression and violence*. Retrieved from http://www.netlibrary.com.

Morse, J. M. (2003). Principles of mixed methods and multimethod research design. In A. Tashakkori & C. Teddlie (Eds.), *Handbook of mixed methods in social and behavioral research.* (pp. 189-208). Thousand Oaks, CA: Sage Publications.

Neimeyer, R. A., Prigerson, H.G., & Davies, B. (2002). Mourning and meaning. *American Behavioral Scientist, 46*, 235-251. Retrieved from http://search.proquest.com.ezproxy.canterbury.ac.nz/docview/214763208?accountid=14499

New Zealand Family Violence Clearinghouse. (2006). An agenda for family violence

    research. Retrieved from http://www.nzfvc.org.nz/Publication

    Details.aspx?publication=13395.

Nixon, P., Burford, G., Quinn, A., Edelbaum, J. (2005). *A survey of international*

    *practices, policy & research on Family Group Conferencing and related practices*.

    Retrieved from http://www.frg.org.uk/pdfs/Family% 20Group%

    20practices%20report.pdf.

Nock, M. K., & Kazdin, A.E. (2002). Parent-directed physical aggression by clinic-

    referred youths. *Journal of Clinical Child Psychology, 31*, 193-205. Retrieved

    from http://www.ncbi.nlm.nih.gov/pubmed/12056103

Olson, H. (1995). Quantitative "versus" qualitative research: The wrong question.

    Retrieved from http://www.ualberta.ca/dept/slis/cais/olson.htm.

Pagani, L., Larocoque, D., Vitaro, F., & Tremblay, R.E. (2003). Verbal and physical abuse

    toward mothers: The role of family configuration, environment, and coping

    strategies. *Journal of Youth and Adolescence, 32*, 215-222. doi:

    10.1023/A:1022599504726

Pagani, L. S., Tremblay, R.E., Nagin, D., Zoccolillo, M., Vitaro, F., & McDuff, P. (2004).

    Risk factor models for adolescent verbal and physical aggression toward mothers.

    *International Journal of Behavioral Development*, 28, 528-537. doi:

    10.1080/01650250444000243

Park, C. L. (2005). Religion as a meaning-making framework in coping with life stress.

    *Journal of Social Issues, 61*, 707-729. doi: 10.1111/j.1540-4560. 2005.00428.x

Park, C. L., & Ai, A.L. (2006). Meaning making and growth: New directions for research

    on survivors of trauma. *Journal of Loss & Trauma, 11*, 389-407. doi:

    10.1080/15325020600685295

Park, C. L. (2008). Testing the meaning making model of coping with loss. *Journal of Social and Clinical Psychology, 27*, 970-994. doi:10.1521/jscp. 2008.27.0.970

Park, C. L. (2010). Making sense of the meaning literature: An integrative review of meaning making and its effects on adjustment to stressful life events. *Psychological Bulletin, 136*, 257-301. doi: 10.1037/a0018301

Park, C. L., Mills, M.A., & Edmondson, D. (2010). PTSD as meaning violation: Testing a cognitive worldview perspective. *Psychological Trauma Theory, Research, Practice, and Policy, 4*, 66-73. doi: 10.1037/a00.18792

Paterson, R. (1999). Group work experience. In M. Bradford (Ed.), *Adolescent violence toward parents: Notes from the seminar held on 4th June 1999 at Way Hall*. Adelaide: Department of Human Services.

Paterson, R., Luntz H., Perlesz, A., & Cotton, S. (2002). Adolescent violence towards parents: Maintaining family connections when the going gets tough. *Australian and New Zealand Journal of Family Therapy, 23*, 90-100. Retrieved from http://search.informit.com.au/documentSummary

Patterson, G. R. (1982). *A social learning approach: Coercive family process* (Vol. 3). Eugene, OR: Castalia.

Paulson, M. J., Coombs, R.H., & Landsverk, J. (1990). Youth who physically assault their parents. *Journal of Family Violence, 5*, 121-133. doi: 10.1007/BF00978515

Pawson, M. (2010). *Youth and the law: A comprehensive guide to the law relating to young people from birth to adulthood*. Wellington: Educational Resources.

Pears, K. C., & Capaldi, D.M. (2001). Intergenerational transmission of abuse: A two-generational prospective study of an at-risk sample. *Child Abuse and Neglect., 25*, 1439-1461. doi: 10.1016/SO145-2134(01)00286-1

Peek, C. W., Fischer, J.L., & Kidwell, J.S. (1985). Teenage violence toward parents. A

    neglected dimension of family violence. *Journal of Marriage and the Family, 47*,

    1051-1058. Retrieved from http://www.jstor.org/ stable/352350

Point Research Ltd. (2010). An innovative approach to changing social attitudes around

    family violence in New Zealand: Key ideas, insights and lessons learnt. The

    campaign for action on family violence. Retrieved from

    http://www.msd.govt.nz/documents/about-msd-and-our-work/publications-

    resources/research/campaign-action-violence-research/an-innovative-approach-to-

    changing-social-attitudes.pdf

Polkinghorne, D. E. (1988). *Narrative knowing and human sciences*. New York: State

    University of New York Press.

Ricochet Entertainment. (2005). *Supernanny* (Television series). Brighton: Ricochet

    Entertainment.

Price, J. (1996). *Power and compassion: Working with difficult adolescents and abused*

    *parents.* New York: Guilford Press.

Pringle, J., Drummond, J., McLafferty, E., & Hendry, C. (2011). Interpretative

    phenomenological analysis: A discussion and critique. *Nurse researcher, 18*, 20-

    24. Retrieved from http://www.ovid.com/site/catalog /Journal/ 573.jsp

QSR International. (2008). *NVIVO 8. Getting started.* Retrieved from

    www.qsrinternational.com.

Rando, T. A. (1984). *Grief, dying, and death: Clinical interventions for caregivers.*

    Champaign, IL: Research Press.

Reichardt, C. S., & Rallis, S.F. (1994). Qualitative and quantitative inquiries are not

    incompatible: A call for a new partnership. In C. S. Reichardt & S. F. Rallis (Eds.),

*The qualitative-quantitative debate: New perspectives* (pp. 85-92). San Francisco: Jossey Bass.

Reid, K., Flowers, P., & Larkin, M. (2005). Exploring lived experience. *Psychologist, 18*, 20-23. Retrieved from http://search.proquest.com. ezproxy. canterbury.ac.nz/docview/211749955?accountid=14499

Robinson, C. A., Wright, L.M., & Watson, W.L. (1994). A nontraditional approach to family violence. *Archives of Psychiatric Nursing, 8*, 30-37. doi: 10.1016/0883-9417(94)90018-3

Robinson, P. W., Davidson, L.J., & Drebot, M.E. (2004). Parent abuse on the rise: A historical review. *American Association of Behavioral Social Science Online Journal.* Retrieved from http://aabss.org/journal2004/ AABSS_58-67.pdf.

Rodham, K., McCabe, C., & Blake, D. (2009). Seeking support: An interpretative phenomenological analysis of an internet message board for people with complex regional pain syndrome. *Psychology and Health, 24*, 619-634. doi: 10.1080/08870440802563245

Routt, G., & Anderson, L. (2011). Adolescent violence towards parents. *Journal of Aggression, Maltreatment and Trauma*, 20, 1-19. doi: 10.1080/1092 6771.537595

Rubin, H. J., & Rubin, I.S. (2004). *Qualitative interviewing: The art of hearing data.* (2nd ed.). Thousand Oaks, CA: Sage Publications.

Rybski, N. C. (1999). An evaluation of a family group therapy program for domestically violent adolescents. *Dissertation Abstracts International Section A: Humanities and Social Sciences, 59*, 3227.

Satter, B. (1999). "Bad" mothers: The politics of blame in twentieth-century America. *Journal of Social History, 33*, 501-503. Retrieved from

http://search.proquest.com.ezproxy.canterbury.ac.nz/docview/198935113?accounti
d=14499

Saunders, B. E. (2003). Understanding children exposed to violence: Toward an integration of overlapping fields. *Journal of Interpersonal Violence, 18*, 356-376. doi: 10.1177/0886260502250840

Sayre, S. (1994). Possessions and identity in crisis: Meaning and change for victims of the Oakland firestorm. In C. T. Allen & D. R. John (Eds.), *Advances in consumer research: Volume 21.* (pp. 109-114). Provo, UT: Association for Consumer Research.

Schoder, M. F., & Conrad, F.G. (1997). Does conversational interviewing reduce survey measurement error? *The Public Opinion Quarterly, 61*, 576-602. Retrieved from http://www.jstor.org/stable/2749568

Shannon, L., Logan, T.K., Cole, J., & Medley, K. (2006). Help-seeking and coping strategies for intimate partner violence in rural and urban women. *Violence and Victims, 21*, 167-181. Retrieved from http://search.proquest. com.ezproxy.canterbury.ac.nz/docview/208527593?accountid=14499

Shaw, R. L. (2004). Making sense of violence: A study of narrative meaning. *Qualitative Research in Psychology, 1*, 131-151. doi: 10.1191/14780 88704qp009oa

Sheehan, M. (1997). Adolescent violence - strategies, outcomes and dilemmas in working with young people and their families. *Australian and New Zealand Journal of Family Therapy, 18*, 80-91. Retrieved from http://search.informit.com.au/ documentSummary

Singer, J. A. (2004). Narrative identity and meaning making across the adult lifespan: An introduction. *Journal of Personality, 72*, 437-459. doi: 10.1111/j.0022-3506.2004.00268.x

Singh, I. (2004). Doing their jobs: Mothering with Ritalin in a culture of mother-blame. *Social Science and Medicine, 59*, 1193-1205. doi: 10.1016/j.socs crimed.2004.01.011

Skaggs, B. G., & Barron, C.R. (2006). Searching for meaning in negative events: Concept analysis. *Journal of Advanced Nursing, 53*, 559-570. doi: 10.1111/j.1365-2648.2006.03761.x

Smith, J. A. (1996). Beyond the divide between cognition and discourse: Using interpretative phenomenological analysis in health psychology. *Psychology and Health, 11*, 261-271. doi: 10.1080/08870449608400256

Smith, J. A., & Osborn, M. (2008). Interpretative phenomenological analysis. In J. A. Smith (Ed.), *Qualitative psychology: A practical guide to research methods.* (2nd ed., pp. 53-80). London: Sage Publications Ltd.

Smith, J. A. (2004). Reflecting on the development of interpretative phenomenological analysis and its contribution to qualitative research in psychology. *Qualitative Research in Psychology, 1*, 39-54. doi**:** 10.1191/ 1478088704qp004oa

Smith, J. A., Flowers, P., & Larkin, M. (2009). *Interpretative phenomenological analysis: Theory, method and research*. Los Angeles: Sage.

Smith, J. A., & Osborn, M. (2007). Pain as an assault on the self: An interpretative phenomenological analysis of the psychological impact of chronic benign low back pain. *Psychology & Health*, 22, 517-534. doi: 10.1080/14768320600941756

Solomon, J. L. (2004). Modes of thought and meaning making: The aftermath of trauma. *Journal of Humanistic Psychology, 44*, 299-319. doi: 10.1177 /0022167804266096

Sprague, J., & Zimmerman, M. (2004). Overcoming Dualisms. A feminist agenda for sociological methodology. In S. N. Hesse-Biber & P. Leavy (Eds.), *Approaches to*

*qualitative research. A reader on theory and practice.* (pp. 39-61). Oxford: Oxford University Press.

Stanley, T. W. (2005). *Making decisions: Social work processes and the construction of risk(s) in child protection work.* Unpublished doctoral dissertation. University of Canterbury, Christchurch, New Zealand. Retrieved from http://ir.canterbury.ac.nz/bitstream/10092/902/1/ thesis_fulltext.pdf

Starks, H., & Brown Trinidad, S. (2007). Choose your method: A comparison of phenomenology, discourse analysis, and grounded theory. *Qualitative Health Research*, 17, 1372-1380. doi: 10.1177/1049732307307031

Statistics New Zealand. (2011). *Demographic trends: 2010.* Wellington: Statistics New Zealand.

Stevenson, R. L. (1886). *Strange case of Dr Jekyll and Mr Hyde 1850-1894*. Retrieved from http://ipac.canterbury.ac.nz/ipac20/ipac.jsp?index =BIB& term=998478

Stewart, M., Burns, A., & Leonard, R. (2007). Dark side of the mothering role: Abuse of mothers by adolescent and adult children. *Sex Roles*, 56, 183-191. doi: 10.10007/s11199-066-9148-2

Strasburg, P. A. (1978). *Violent delinquents.* New York: Monarch Books.

Straus, M. A. (1979). Measuring intrafamily conflict and violence: The Conflict Tactic (CT) Scale. *Journal of Marriage and Family, 41*, 75-88. Retrieved from http://www.jstor.org/stable/351733

Straus, M. A., Gelles, R.J., & Steinmetz, S.K. (1980). *Behind closed doors: Violence in the American family.* New York: Doubleday/Anchor.

Straus, M. A., & Gelles, R.J. (Ed.). (1990). *Physical violence in American families*. New Brunswick, NJ: Transaction Publishers.

Straus, M. A., Gelles, R.J., & Steinmetz, S.K. (2006). *Behind closed doors: Violence in the American family.* New Brunswick, NJ: Transaction Books.

Strauss, A., & Corbin, J. (1990). *Basics of qualitative research: Grounded theory procedures and techniques.* Newbury Park, CA: Sage Publications.

Stroebe, M., & Schut, H. (1999). The dual process model of coping with bereavement: Rationale and description. *Death Studies, 23*, 197-224. Retrieved from http://search.proquest.com.ezproxy.canterbury.ac.nz/ docview/231408801?accountid=14499

Tew, J., & Nixon, J. (2010). Parent abuse: Opening up a discussion of a complex instance of family power relations. *Social Policy and Society, 9,* 579-589. doi: 10.1017/S1474746410000291

Thompson, N. (Ed.). (2002). *Loss and grief: A guide for human services practitioners.* Houndmills: Palgrave.

Thompson, R. J., Mata, J., Jaeggi, S.M., Buschkuehl, M., Jonides, J., & Gotlib, I.H. (2010). Maladaptive coping, and depressive symptoms: Variations across age and depressive state. *Behaviour Research and Therapy, 48*, 459-466. doi: 10.1016/j.brat2010.01.007

Tolich, M. (Ed.). (2001). *Research Ethics in Aotearoa NZ.* Auckland: Pearson Education New Zealand.

Ulman, A., & Straus, M.A. (2003). Violence by children against mothers in relation to violence between parents and corporal punishment by parents. *Journal of Comparative Family Studies, 34*, 41-60. Retrieved from http://search.proquest.com.ezproxy.canterbury.ac.nz/docview/232580658?accounti d=14499

UNICEF. (2003). UNICEF: A league table of child maltreatment deaths in rich nations.

    Innocenti report card No. 5. Florence: UNICEF Innocenti Research Centre.

United Nations Convention on the Rights of Children (UNCROC) (1989). Retrieved from

    http://www.msd.govt.nz/documents/what-we-can-do/children-and-young-

    people/uncroc-general-fact-sheet-final.doc

Victims Support Agency. (2008). *The Victorian Family Violence Database (Volume 3):*

    *Seven-year report*. Retrieved from http://www.justice.vic.

    gov.au/wps/wcm/connect/DOJ+Internet/Home/Crime/Research+and+Statistics/JU

    STICE+-+Victorian+Family+Violence+Database+-+Seven+Year+Report+-+PDF.

Wacker, R. P., Roberto, K.A., & Piper, L.E. (2002). *Community resources for older*

    *adults. Programs and services in an era of change.* (2nd ed.). Thousand Oaks, CA:

    Sage Publications, Inc.

Waldrop, A. E., & Resick, P.A. (2004). Coping among adult female victims of domestic

    violence. *Journal of Family Violence, 2004*, 291-302. doi:

    10.1023/B:JOFV.0000042079.91846.68

Walker, L. E. (2009). *The battered women syndrome* (3rd ed.). New York: Springer

    Publishing Company.

Walsh, J. A., & Krienert, J.L. (2007). Child-parent violence: An empirical analysis of

    offender, victim, and event characteristics in a national sample of reported

    incidents. *Journal of Family Violence*, *22*, 563-574. doi: 10.1007/s10896-007-

    9108-9

Walsh, J. A., & Krienert, J.L. (2009). A decade of child-initiated family violence:

    Comparative analysis of child-parent violence and parricide examining offender,

    victim, and event characteristics in a national sample of reported incidents, 1995-

2005. *Journal of Interpersonal Violence*, *24,* 1450-1477. doi:

10.1177/0886260508323661

Weaver, S. E., & Coleman, M. (2005). A mothering but not a mother role: A grounded

theory study of the nonresidential stepmother role. *Journal of Social and Personal*

*Relationships*, 477-497. doi: 10.1177/02654075050 54519

Webster-Stratton, C., & Herbert, M. (1994). *Troubled families - problem children.*

*Working with parents: A collaborative process.* Chichester: John Wiley & Sons.

Whitehead, D. (2007). Common qualitative methods. In Z. Schneider, D. Whitehead, D.

Elliot, G. Lobiondo-Wood & J. Haber (Eds.), *Nursing and midwifery research:*

*Methods and appraisals for evidence-based practice* (3rd ed., pp. 105-121).

Marrickville, NSW: Elsevier.

Whitehead, D., & Annells, M. (2007). Sampling and collecting data in qualitative

research. In Z. Schneider, D. Whitehead, D. Elliot, G. Lobiondo-Wood & J. Haber

(Eds.), *Nursing and midwifery research: Methods and appraisals for evidence-*

*based practice* (3rd ed., pp. 122-137). Marrickville, NSW Elsevier.

Whitehead, D., & Elliot, D. (2007). Mixed-methods research. In Z. Schneider, D.

Whitehead, D Elliot, G. Lobiondo-Wood & J. Haber (Eds.), *Nursing and*

*midwifery research: Methods and appraisals for evidence-based practice* (3rd ed.,

pp. 240-267). Marrickville, NSW: Elsevier.

Williams, W. (2006). Complex trauma: Approaches to theory and treatment [Electronic

Version]. *Journal of Loss & Trauma*, 11, 321-335. doi:

10.1080/15325020600663078

Wilson, J. (1996). Physical abuse of parents by adolescent children. In D. M. Busby (Ed.),

*The impact of violence on the family: Treatment approaches for therapists and*

*other professionals.* (pp. 101-123). Massachusetts: Allyn & Bacon.

World Health Organisation. (2001). Putting women first: Ethical and safety

recommendations for research on domestic violence against women (2nd ed).

Retrieved from http://www.who.int/gender/violence/en/women firsteng.pdf.

Wyn, J. & Harris, A. (2004). Youth research in Australia and New Zealand. *Research on*

*Youth and Youth Culture*, 12, 271-289. doi: 10.1177/110330 8804044509

Yanos, P. T., & Ziedonis, D.M. (2006). The patient-oriented clinician-researcher:

Advantages and challenges of being a double agent. *Psychiatric Services, 57*, 249-

253. doi: 10.1176/appi.ps.57.2.249

Zimring, F. E. (1998). *American youth violence*. Oxford: Oxford University Press, Inc.

Zucker, M., Spinazzola, J., Blaustein, M. & van der Kolk, B. (2006). Dissociative

symptomology in posttraumatic stress disorder and disorders of extreme stress.

*Journal of Trauma and Dissociation, 7*, 19-31. doi: 10.1 300/J229 v07n01_03

# Appendix A: Information Sheet

Latesha Murphy-Edwards

School of Social Work and Human Services

Email: ljm133@student.canterbury.ac.nz
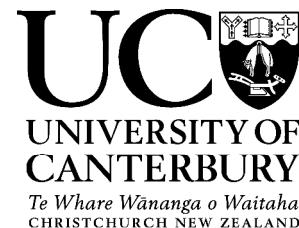
## Not Just Another Hole in the Wall.

An investigation into child and youth perpetrated domestic property violence.

Doctoral research project of Latesha Murphy-Edwards, MA, PGDipClinPsych, MNZPsS

**Information Sheet for Parents**

Tena Koutou, Talofa Lava, Kia Orana, Fakaalofa Lahi Atu, Malo e Lelei, Bula Vinaka, Taloha Ni, Hello.

My name is Latesha Murphy-Edwards. I am a PhD student at the University of Canterbury and also work part-time as a clinical psychologist at the Child, Adolescent and Family Service, Southland Hospital. I am undertaking a study about a type of family violence known as parent abuse. Parent abuse is the term used to describe children and adolescents behaving abusively toward their parents. Abusive behaviour can include name calling, making threats, hitting with fists and using weapons to cause physical harm. It can also take the form of intentional damage to parental property, known as domestic property violence (DPV). This is the type of parent abuse I wish to study.

**Purpose of the study**

Parent abuse is thought to be more common than people realise. It is a serious issue that is generally not discussed. This study will be exploring parents' experiences of child and adolescent DPV, and their ideas about why the abuse occurs and continues. I would also

like to learn more about how parents react to the abuse. I am interested in whether or not parents seek help.

My study aims to increase awareness of this form of family violence and provide insights into the lives of parents living with abusive children and adolescents. The study also aims to identify effective ways of preventing and responding to DPV and other forms of parent abuse.

**Participation**

I am inviting parents who have experienced their children and adolescents (ages 5-18 years) intentionally damaging their property, to participate in this study. Participation is entirely voluntary (your choice). You do not have to take part in this study. In addition, if you change your mind about taking part (at any stage) you may withdraw from the study. Your involvement will be confidential. Any names or other identifying details will be changed to protect your privacy.

If you choose to take part in the interview phase of the study you are welcome to invite a friend, family, or whānau support person to be with you.

**What will happen if I choose to take part?**

The study has two parts. You may choose to participate in one or both phases of the study:

**Part A**

The first step is to complete a questionnaire about the ways your child behaves abusively toward you, your ideas about why the abusive behaviour occurs and how you respond to the abuse. It will take between 10-20 minutes to complete. At the bottom of the questionnaire you will see an invitation to proceed to the second stage of the study – the interview stage. If you wish to proceed to the interview stage, you will need to complete the Informed Consent form enclosed, and return it with your questionnaire. Approximately 50-70 participants will complete the questionnaire.

**Part B**

Around 30 participants, who have completed the questionnaire and provided consent to be interviewed, will be contacted and invited to participate in an interview. Interviews will

last between one and two hours and I will be asking about experiences you have had of your child or adolescent intentionally damaging your property, your thoughts about why this behaviour occurs, and how you have reacted to it.

If you wish to participate in the second phase of the study, interviews will take place at a location of your choosing and at a time that is safe and convenient for you. You will be asked a series of questions and a tape recorder will be used during the interview. If you decide to take part in an interview, and you experience any distress during the interview, or become tired, we can stop for a rest or we can end the interview. You may choose not to answer specific questions or to withdrawal your participation from the study.

I will also ask if you will be available for a follow-up meeting to discuss anything that you feel may have been left out and for you to check the information from the interview and make changes if you wish.

Remember, you have the right to withdraw from the study. If you participate in an interview, you will be invited to view a transcript of your interview data. You may wish to make changes or to withdraw some or all of your information from the study. Your data will either be returned to you (if you request this) or destroyed. Questionnaire data can be withdrawn until it is entered into the analysis phase of the study.

Your decision to withdraw from the study will in no way affect your access to health or support services.

I will provide information about local support services and help you to access these services, should you require this.

**What happens to the information collected for the study?**
The information from the taped interviews will be typed up by a person employed to do so, before the tape is then erased. This person will also keep all information confidential, and will be required to sign a confidentiality contract. Please note that your name will not be used on the tape and your identity will be protected. Each tape will be assigned a number and the identity of the numbers will be stored in a separate secure location so that individual tapes can not be identified except by the researcher. Completed questionnaires

and interview transcriptions (with no identifying information) will remain confidential and be kept in a locked filing cabinet and on a password protected computer disk for a period of 10 years.

The findings of the research will be recorded in a PhD thesis and submitted for publication. The PhD thesis will be available to the public via the University of Canterbury database. The results may also be shared, for example, in journal articles or conferences. Some interview excerpts may be included in the final report, however, all real names and any identifying information will be removed before the results of the study are reported to protect the identity of participants. All participants may contact me to access details of any publications; however, there will be some delay between the time of the interviews and the publication of the results.

I am ethically bound to report issues of risk and safety pertaining to vulnerable persons. If, during the course of our interview, I learn about abusive behaviour endangering the physical or emotional safety of children or other vulnerable persons in your home, I am required to notify the appropriate agencies.

**How can I find out more?**

If you wish to discuss any of the information I have provided please contact me on 03 2145753.  If I am not in at the time you call, please leave your first name, your telephone number and a convenient time for me to return your call.  Alternatively, email me – ljm133@student.canterbury.ac.nz

**Questions, Concerns or Complaints**

If you have any concerns about your rights as a participant in this study, you may wish to contact an independent health and disability advocate. This is a free service provided under the Health and Disability Commissioner Act:

Telephone (NZ wide) 0800 555 050

Free Fax (NZ wide)    0800 2787 7678 (0800 2 SUPPORT)

Email (NZ wide)        advocacy@hdc.org.nz

Or alternatively you may contact the senior supervisor of the project:

Dr Kate van Heugten

Head of School of Social Work and Human Services.

University of Canterbury

Telephone 03 364 2513

Email: kate.vanheugten@canterbury.ac.nz

**This study has been reviewed and approved by the University of Canterbury's Human Ethics Committee and the Health and Disability Multi-region Ethics Committee**

# Appendix B: Participant Consent Form

**UC**
**UNIVERSITY OF CANTERBURY**
*Te Whare Wānanga o Waitaha*
CHRISTCHURCH NEW ZEALAND

**Latesha Murphy-Edwards**
**School of Social Work and Human Services**
**Email: ljm133@student.canterbury.ac.nz**
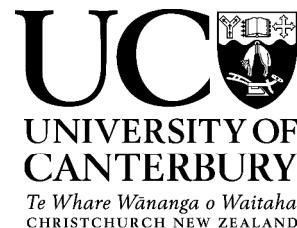
## Not Just Another Hole in the Wall.

An investigation into child and youth perpetrated domestic property violence.

**Participant Consent Form: Interviews**

Request for Interpreter

| English | I wish to have an interpreter. | Yes | No |
|---------|-------------------------------|-----|-----|
| Māori | E hiahia ana ahau ki tetahi kaiwhakamāori/kaiwhaka pākehā korero. | Ae | Kao |
| Cook Island | Ka inangaro au i tetai tangata uri reo. | Ae | Kare |
| Fijian | Au gadreva me dua e vakadewa vosa vei au | Io | Sega |
| Niuean | Fia manako au ke fakaaoga e taha tagata fakahokohoko kupu. | E | Nakai |
| Samoan | Ou te mana'o ia i ai se fa'amatala upu. | Ioe | Leai |

| Tokelaun | Ko au e fofou ki he tino ke fakaliliu te gagana Peletania ki na gagana o na motu o te Pahefika | Ioe | Leai |
|---|---|---|---|
| Tongan | Oku ou fiema'u ha fakatonulea. | Io | Ikai |
| | Other languages to be added following consultation with relevant communities. | | |

I have read and I understand the information sheet for volunteers taking part in the study about children and adolescents intentionally damaging their parent's property.

I have had the opportunity to discuss this study further and I am satisfied with the information I have been given.

I have had the opportunity to use whānau support or a friend to help me ask questions and understand the study.

I understand that taking part in this study is voluntary (my choice) and that I may withdraw from the study and will not be disadvantaged as a result of my decision. My decision to withdraw from the study will in no way affect my access to health or social services.

I can request a withdrawal of questionnaire data until it is entered into the analysis phase of the study. I will be given an opportunity to view my interview transcript and to make changes or to withdraw all data from the study. Should I choose to withdraw from the study any information I have provided will be returned to me or destroyed. I understand that by declining the invitation to review my interview data I am consenting to the information being included in the study.

I understand that my interview will be audio-taped.

I understand that my participation in this study is confidential and that no material which could identify me will be used in any reports on this study.

I am aware that the findings of the research will be recorded in a PhD thesis which will become a public document available via the University of Canterbury database. I am also aware that the results may be shared, for example, in journal articles or at conferences and that I may contact the researcher at any stage if I wish to receive details of any publication of the results and conclusions of this research when it is finished. I am aware however that there will be a delay between the time of the interview and the outcomes of the study.

I know that I may contact Latesha Murphy-Edwards if I have any concerns or wish to be assisted with access or referral to support services at any time.

I wish to receive a copy of the study results                      YES/NO

I have had time to consider whether to take part in the interview phase of the study and on the basis of the above information, I agree to take part as a participant in the project.

Name: (Please print)   _____

Signature:                 _____

Date:                         _____

Please state how you would like me to contact you (e.g. telephone/email)

_____

If you would like me to telephone you - are you happy for me to leave a message on your answer phone if you are not available when I phone?

YES/NO

**Researcher Details:**

Latesha Murphy-Edwards

PO Box 7026

Invercargill

Phone: 03 214 5753

ljm133@student.canterbury.ac.nz

**This study has been reviewed and approved by the University of Canterbury's Human Ethics Committee and the Health and Disability Multi-region Ethics Committee**

# Appendix C: Questionnaire

## Not Just Another Hole in the Wall.

## An investigation into child and youth perpetrated domestic property violence.

When a parent's property is intentionally (on purpose) damaged by a child or teenager (5-18 years) in their care, we call this kind of violence 'Domestic Property Violence' or DPV.

This questionnaire is part of a research project examining parent and caregiver experiences of DPV. All responses to this questionnaire will be treated as confidential.

Participation is completely voluntary.

In this questionnaire you will be asked questions that relate to your experiences of DPV – what you have experienced, how often you experienced this and how these experiences have impacted on you and others. You will also be asked about your reactions to DPV and the types of support you have received and/or require.

You may have more than one child who behaves aggressively toward you. Please select one child for the purpose of this questionnaire.

You are welcome to contact Latesha Murphy-Edwards (refer to the Information Sheet) if you wish to receive additional copies of the questionnaire.

# A.                                    <u>Background Information</u>

1.    Are you:                                    [  ] Male     [  ] Female

2.    Please state your age:              _____ years.

3.    Please tick the ethnic group/s with which you identify:

       [  ]    New Zealand European/ Pākehā    [  ]    Chinese

       [  ]    New Zealand Māori    [  ]    Japanese

       [  ]    Samoan    [  ]    Korean

       [  ]    Fijian    [  ]    Australian

       [  ]    Tongan    [  ]    Indian

       [  ]    Cook Island    [  ]    Other _____
                                                    Please specify

4.    The child/teenager you are describing is:    [  ]    Male    [  ] Female

5.    His/her age is              _____ years.

6.    Your relationship to the child is    [  ]    Parent

                                    [  ]    Step parent

                                    [  ]    Grandparent

                                    [  ]    Foster parent

                                    [  ]    Other _____
                                                               Please specify

7.    How many other adults live in your home?    0    1    2    3    4    5    more

8.    How many other children live in your home?    0    1    2    3    4    5    more

9.    How old was the child when they first began to damage your property? _____ years.

10.   Please select which item applies:

[  ]    Child/teenager has damaged my property in the past, but does not do this anymore.

       DPV last happened _____ months ago.

[  ]    Child/teenager still damages my property

# B.        DPV: What is it and how often does it occur?

**1. What property gets damaged by your child/teenager, and how often?** Please read

each item and tick Never, Daily, Weekly, or Monthly.

| He/she has intentionally (on purpose): | **Never** | **Daily** | **Weekly** | **Monthly** |
|---|---|---|---|---|
| Smashed windows | [ ] | [ ] | [ ] | [ ] |
| Punched holes in walls/doors | [ ] | [ ] | [ ] | [ ] |
| Kicked holes in walls/doors | [ ] | [ ] | [ ] | [ ] |
| Damaged furniture | [ ] | [ ] | [ ] | [ ] |
| Damaged appliances | [ ] | [ ] | [ ] | [ ] |
| Damaged ornaments | [ ] | [ ] | [ ] | [ ] |
| Damaged family heirlooms | [ ] | [ ] | [ ] | [ ] |
| Damaged photographs | [ ] | [ ] | [ ] | [ ] |
| Damaged vehicles | [ ] | [ ] | [ ] | [ ] |
| Other: (Describe) _____ | | [ ] | [ ] | [ ] |
| Other: (Describe) _____ | | [ ] | [ ] | [ ] |
| Other: (Describe) _____ | | [ ] | [ ] | [ ] |

**2. Has your child/teenager intentionally damaged property belonging to other people

living in your home?** Please indicate whether the following people experience DPV by

your child/teenager by ticking Never, Daily, Weekly, or Monthly.

| | **Never** | **Daily** | **Weekly** | **Monthly** |
|---|---|---|---|---|
| My spouse/partner | [ ] | [ ] | [ ] | [ ] |
| My other children | [ ] | [ ] | [ ] | [ ] |

| | | | | |
|---|---|---|---|---|
| His/her Grandparents | [ ] | [ ] | [ ] | [ ] |
| Other: (Describe) _____ | | [ ] | [ ] | [ ] |
| Other: (Describe) _____ | | [ ] | [ ] | [ ] |
| Other: (Describe) _____ | | [ ] | [ ] | [ ] |

**3. Does your child/teenager intentionally damage his/her own property?** Please indicate by ticking Never, Daily, Weekly or Monthly.

| | **Never** | **Daily** | **Weekly** | **Monthly** |
|---|---|---|---|---|
| Child/teenager damages his/her own property | [ ] | [ ] | [ ] | [ ] |

**4. Please estimate the cost of your child's/teenager's DPV**: $_____

**5. Please describe the most valuable or special thing he/she has intentionally damaged:**

_____

_____

_____

# C.        Is DPV related to other forms of parent abuse?

1. In what other ways does the child/teenager act aggressively toward you? Please read each item and then tick Never, Daily, Weekly, or Monthly.

| He/she: | Never | Daily | Weekly | Monthly |
|---|---|---|---|---|
| Says hurtful things to me | [ ] | [ ] | [ ] | [ ] |
| Says he/she will harm me | [ ] | [ ] | [ ] | [ ] |

| | | | | |
|---|---|---|---|---|
| Physically threatens me | [ ] | [ ] | [ ] | [ ] |
| Threatens to harm himself/herself | [ ] | [ ] | [ ] | [ ] |
| Threatens to leave home | [ ] | [ ] | [ ] | [ ] |
| Steals from me | [ ] | [ ] | [ ] | [ ] |
| Pushes me | [ ] | [ ] | [ ] | [ ] |
| Hits me | [ ] | [ ] | [ ] | [ ] |
| Other: (Describe) _____ | [ ] | [ ] | [ ] | |
| Other: (Describe) _____ | [ ] | [ ] | [ ] | |
| Other: (Describe) _____ | [ ] | [ ] | [ ] | |
| Other: (Describe) _____ | [ ] | [ ] | [ ] | |

**2. Before the DPV <u>first began</u>, had your child/teenager been violent in other ways?**

Please read each item and then tick Never, Daily, Weekly, or Monthly.

| He/she | Never | Daily | Weekly | Monthly |
|---|---|---|---|---|
| Said hurtful things to me | [ ] | [ ] | [ ] | [ ] |
| Threatened to harm me | [ ] | [ ] | [ ] | [ ] |
| Threatened to harm others | [ ] | [ ] | [ ] | [ ] |
| Threatened to leave home | [ ] | [ ] | [ ] | [ ] |
| Stole things from me | [ ] | [ ] | [ ] | [ ] |
| Pushed/hit me | [ ] | [ ] | [ ] | [ ] |
| Pushed/hit other family members | [ ] | [ ] | [ ] | [ ] |
| Pushed/hit teachers | [ ] | [ ] | [ ] | [ ] |
| Pushed/hit other children/teenagers | [ ] | [ ] | [ ] | [ ] |
| Other: (Describe) _____ | | [ ] | [ ] | [ ] |

Other: (Describe) _____     [  ]          [  ]          [  ]

Other: (Describe) _____     [  ]          [  ]          [  ]

Other: (Describe) _____     [  ]          [  ]          [  ]


**3. Sometimes episodes of parent abuse can take different forms.  A child/teenager**

**may become angry; begin yelling and then hitting out at others or damaging**

**property.  Does your child/teenager behave aggressively in other ways <u>before</u> the**

**DPV starts?** Please read each item and then tick Never, Sometimes, Often, or Always.


| <u>Before</u> the DPV starts: | Never | Sometimes | Often | Always |
|---|---|---|---|---|
| He/she says hurtful things | [  ] | [  ] | [  ] | [  ] |
| He/she threatens me | [  ] | [  ] | [  ] | [  ] |
| He/she physically hurts me | [  ] | [  ] | [  ] | [  ] |
| Other: (Describe) _____ <br> _____ | | [  ] | [  ] | [  ] |
| Other: (Describe) _____ <br> _____ | | [  ] | [  ] | [  ] |
| Other: (Describe) _____ <br> _____ | | [  ] | [  ] | [  ] |
| Other: (Describe) _____ <br> _____ | | [  ] | [  ] | [  ] |


**4. Sometimes episodes of DPV can lead to other forms of parent abuse, such as**

**emotional abuse (i.e. saying hurtful things or threatening to harm you) or physical**

**violence. Does your child's/teenager's DPV lead to other forms of aggression?**

Please read each item and then tick Never, Sometimes, Often, or Always.


| DPV leads to my child/teenager: | Never | Sometimes | Often | Always |
|---|---|---|---|---|
| Saying hurtful things to me | [ ] | [ ] | [ ] | [ ] |
| Saying hurtful things to others | [ ] | [ ] | [ ] | [ ] |
| Threatening me | [ ] | [ ] | [ ] | [ ] |
| Threatening others | [ ] | [ ] | [ ] | [ ] |
| Physically hurting me | [ ] | [ ] | [ ] | [ ] |
| Physically hurting others | [ ] | [ ] | [ ] | [ ] |
| Physically hurting himself/herself | [ ] | [ ] | [ ] | [ ] |


**5. How do you compare DPV to other forms of parent abuse?**


**Please indicate (using the scale below) how distressing you find each form of parent abuse. Circle NA if you have not experienced this form of abuse.**


**Least 1—2—3—4—5—6—7—8—9—10 Most**
**Distressing                                    Distressing**


**I rate my child/teenager**: (You may use the same rating for more than one form of parent abuse).


Damaging my property    **Least 1—2—3—4—5—6—7—8—9—10 Most   NA**
                         **Distressing                                    Distressing**


Saying hurtful things to me  **Least 1—2—3—4—5—6—7—8—9—10 Most   NA**
                             **Distressing                                    Distressing**

Threatening to harm me        **Least 1—2—3—4—5—6—7—8—9—10 Most   NA**
                              **Distressing                  Distressing**


Threatening to harm others **Least 1—2—3—4—5—6—7—8—9—10 Most   NA**
                              **Distressing                  Distressing**


Threatening to leave home  **Least 1—2—3—4—5—6—7—8—9—10 Most   NA**
                              **Distressing                  Distressing**


Stealing from me              **Least 1—2—3—4—5—6—7—8—9—10 Most   NA**
                              **Distressing                  Distressing**


Pushing me                    **Least 1—2—3—4—5—6—7—8—9—10 Most   NA**
                              **Distressing                  Distressing**


 Hitting me                   **Least 1—2—3—4—5—6—7—8—9—10 Most   NA**
                              **Distressing                  Distressing**


Other: _____

                              **Least 1—2—3—4—5—6—7—8—9—10 Most  NA**
                              **Distressing                  Distressing**


Other: _____

                              **Least 1—2—3—4—5—6—7—8—9—10 Most  NA**
                              **Distressing                  Distressing**

# D.                                            What causes DPV?

1. The next question explores reasons for your child's/teenager's DPV.

Please read each item and then tick Never, Sometimes, Often, or Always.

| His/her DPV is related to: | Never | Sometimes | Often | Always |
|---|---|---|---|---|
| Being told to do something (Like tidy his/her bedroom or go to bed) | [ ] | [ ] | [ ] | [ ] |
| Being told "no" when he/she wants things (Like money or permission to go out) | [ ] | [ ] | [ ] | [ ] |
| Watching violence on T.V | [ ] | [ ] | [ ] | [ ] |
| Playing violent computer games | [ ] | [ ] | [ ] | [ ] |
| Listening to violent music | [ ] | [ ] | [ ] | [ ] |
| Feeling stressed-out about family problems | [ ] | [ ] | [ ] | [ ] |
| Being abused by family members | [ ] | [ ] | [ ] | [ ] |
| Being bullied at school | [ ] | [ ] | [ ] | [ ] |
| Feeling stressed-out about school work | [ ] | [ ] | [ ] | [ ] |
| Using alcohol and/or drugs | [ ] | [ ] | [ ] | [ ] |
| Other: (Describe) _____ _____ | | [ ] | [ ] | [ ] |
| Other: (Describe) _____ _____ | | [ ] | [ ] | [ ] |
| Other: (Describe) _____ _____ | | [ ] | [ ] | [ ] |

**2. Please read the following items and rate <u>your belief</u> about the role that each of the following has played in your child's/teenager's DPV.**

His/her friends behave in the same way and are a bad influence.

| Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |

He/she has seen other people in the family behaving violently.

| Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |

I have been too lenient as a parent.

| Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |

He/she has not had enough discipline.

| Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |

Puberty has made him/her more aggressive.

| Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |

He/she has always had a problem with managing his/her behaviour.

| Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |

He/she has always had a problem with violence.

| Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |

His/her DPV is due to a mental health problem.

| Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |

# E.                                    How do parents react to DPV?

1. Please describe your reactions to your child's/teenager's DPV. Read each item and then tick Never, Sometimes, Often, or Always.

|                                                      | Never | Sometimes | Often | Always |
|------------------------------------------------------|-------|-----------|-------|--------|
| I ignore it                                          | [ ]   | [ ]       | [ ]   | [ ]    |
| I do nothing because I feel there is nothing I can do | [ ]   | [ ]       | [ ]   | [ ]    |
| I punish him/her.                                    | [ ]   | [ ]       | [ ]   | [ ]    |
| I tell other family members about the violence       | [ ]   | [ ]       | [ ]   | [ ]    |
| I report the violence to Child, Youth and Family (CYF) | [ ]   | [ ]       | [ ]   | [ ]    |
| I report the violence to the police                  | [ ]   | [ ]       | [ ]   | [ ]    |
| I report the violence to other persons/ services. Describe: _____ _____ | [ ]   | [ ]       | [ ]   | [ ]    |
| I attend parenting classes                           | [ ]   | [ ]       | [ ]   | [ ]    |
| I attend counseling with my child/teenager           | [ ]   | [ ]       | [ ]   | [ ]    |
| I arrange counseling for my child/teenager to attend on his/her own | [ ]   | [ ]       | [ ]   | [ ]    |
| Other: (Describe) _____                |       | [ ]       | [ ]   | [ ]    |

_____

Other: (Describe) _____          [  ]          [  ]          [  ]

_____

Other: (Describe) _____          [  ]          [  ]          [  ]

_____


2.  Parents often do not talk about their experiences of DPV because they are worried about what might happen if they do.


What kind of things do you worry may happen if you discuss this problem with others? Please use the scale below to rate each of the following statements.


**Never  1—2—3—4—5  Always**
**True                              True**


I am afraid that the DPV will get worse          **Never** 1—**2**—**3**—**4**—5 **Always**

  if I tell anyone or try to get help                  **True**                          **True**


I worry that my child will harm me                **Never** 1—**2**—**3**—**4**—5 **Always**

  if I tell anyone or try to get help                  **True**                          **True**


I am too embarrassed or ashamed to              **Never** 1—**2**—**3**—**4**—5 **Always**

  talk about my child's violence                    **True**                          **True**


I worry that if others know about the            **Never** 1—**2**—**3**—**4**—5 **Always**

  DPV they will think I am a bad parent        **True**                          **True**

I am afraid that my child will get into     **Never**   1—**2**—**3**—**4**—5 **Always**

   trouble with the law if I report the violence **True**              **True**

I fear that my child may be taken from     **Never**   1—**2**—**3**—**4**—5 **Always**

   my care if I report the DPV            **True**                **True**

Other: (Describe) _____   **Never**   1—**2**—**3**—**4**—5 **Always**

                                  **True**                **True**

_____

_____

Other: (Describe) _____   **Never**   1—**2**—**3**—**4**—5 **Always**

                                  **True**                **True**

_____

_____

## F.       <u>Help and support for parents experiencing DPV</u>

**The following questions ask you to describe the types of support you have received with regards to your child's/teenager's DPV, how satisfied you have been with this support, and the kinds of support you still require.**

**1. What kind of help and support have you received? Please select all items that fit with your experience and indicate (using the satisfaction scale) how satisfied you have been with the support you have received from:**

[  ]     My partner/spouse              1        2        3        4        5
                                        Very                       Completely
                                        Satisfied                  Unsatisfied


[  ]     Other family members           1        2        3        4        5
                                        Very                       Completely
                                        Satisfied                  Unsatisfied


[  ]     Friends                        1        2        3        4        5
                                        Very                       Completely
                                        Satisfied                  Unsatisfied


[  ]     Workmates                      1        2        3        4        5
                                        Very                       Completely
                                        Satisfied                  Unsatisfied


[  ]     School staff                   1        2        3        4        5
                                        Very                       Completely
                                        Satisfied                  Unsatisfied


[  ]     Counselling                    1        2        3        4        5
                                        Very                       Completely
                                        Satisfied                  Unsatisfied


[  ]     Parenting classes              1        2        3        4        5
                                        Very                       Completely
                                        Satisfied                  Unsatisfied


[  ]     Respite care for my child/teenager   1    2    3    4    5
                                        Very                       Completely
                                        Satisfied                  Unsatisfied

[  ]    Child, Youth and Family              1        2        3        4        5

                                            Very                    Completely

                                            Satisfied               Unsatisfied


[  ]    Police involvement                  1        2        3        4        5

                                            Very                    Completely

                                            Satisfied               Unsatisfied


[  ]    Court involvement                   1        2        3        4        5

                                            Very                    Completely

                                            Satisfied               Unsatisfied


[  ]    Other: (Describe) _____     1        2        3        4        5

                                            Very                    Completely

        _____  Satisfied               Unsatisfied


        _____


[  ]    Other: (Describe) _____      1        2        3        4        5

                                            Very                    Completely

        _____  Satisfied               Unsatisfied


        _____


[  ]    Other: (Describe) _____     1        2        3        4        5

                                            Very                    Completely

        _____  Satisfied               Unsatisfied


        _____


[  ]    I have **not** required help or support

**2. What kind of help and support do you still require?** (Select as many items as

required)

[　]　　Support from my partner/spouse

[　]　　Family support

[　]　　Support from friends

[　]　　Support from workmates

[　]　　Support from school staff

[　]　　Counselling

[　]　　Parenting classes

[　]　　Respite care

[　]　　Child, Youth and Family

[　]　　Police involvement

[　]　　Court involvement

[　]　　Other: (Describe) _____

_____

[　]　　Other: (Describe) _____

_____

[　]　　I do **<u>not</u>** require any other help or support

In order to learn more about DPV the researcher is inviting you to take part in a face-to-face interview about your experiences of DPV (see Information Sheet attached).

If you wish to participate in an interview and you are not currently involved in legal proceedings associated with your child/young persons violence, please complete the attached Informed Consent form and return in the enclosed free-post envelope.

Thank you for taking time to complete this questionnaire

# Appendix D: Semi-structured In-depth Interview Format

## Not Just Another Hole in the Wall.

An investigation into child and youth perpetrated domestic property violence.

**Phase 1: Introduction to the study**

Purpose: To orient the person to the study and the interview process

Discuss information contained in the Information Sheet and Informed Consent forms.

Discuss interview process

Confirm that participant is still giving informed consent.

What prompted him/her to participate?

**Phase 2: Context and nature of the problem**

Purpose: To understand the person's unique experience of DPV – Nature and extent of the problem

What happens/what forms does DPV take?

How often?

Whom?  Why?

When did it start?

**Phase 3: The DPV experience**

Purpose: Putting earlier information into context by inviting the retelling of a personal story of DPV.

Please share with me an experience of your child/teenager intentionally damaging your things or your home.

What happened?

Where and when?

Why?

How did you feel?

What were you concerned about?

Other types of abuse co-occurring?

Who else was present and how did they react?

What happened afterwards?

What did you notice about your child afterwards?

How did you feel about your child afterwards?

Significance of this event

Difficulty vs. ease of identifying/isolating an event

**Phase 4: Making sense of DPV**

Purpose: To understand the person's beliefs about what has caused and what has maintained this problem.

Thinking back, what do you think led up to this event?

What was going on for your child at the time?

What do you feel caused this episode of violence?

What other things might cause your child/teenager to damage your property at other times?

Is this typical of what precedes episodes of violence?

Perceived causative role in the violence vs. identification of other triggers

Predictability/anticipation of violence

DPV – precedes or follows on from other abusive acts

**Phase 5: Reactions to DPV**

Purpose: To learn of, and understand, reactions (behavioural/emotional) to DPV

What do you do when your child/teenager is intentionally damaging your things/your home?

Reactions

Avoidance

Safety behaviours

History of efforts to prevent DPV/intervene

Sense of efficacy

Desire to do something different

Emotional response to own reactions


**Phase 6: The role of others**

Purpose: To understand who else is involved and how this happens.


How are other family members involved in, or affected by your child/teenagers DPV?

Perceived impact of DPV on others

Sense of shame/responsibility/fear etc

Perceived support from others

Isolation – coping on ones own


How do others react to your child/teenagers DPV?

Avoidance

Sense of isolation

Secrecy

Support

What works/helps vs. what doesn't?

How does the child/teenager react? What do they do afterwards?


**Phase 7: DPV and the link with other forms of parent abuse**

Purpose: To explore perceptions of how DPV is related to other forms of parent abuse
including verbal, emotional and physical abuse.

How is DPV linked to other acts of aggression?

How is DPV different to other forms of aggression?

Is DPV seen as a distinct form of parent abuse?

DPV – antecedent to other forms of parent abuse

Person's perceived hierarchy of abusive behaviour


**Phase 8:  The impact of DPV**

Purpose: To understand the impact of DPV on the respondent and his/her family.

Tell me about the ways you have been affected by your child/teenagers DPV.

Tell me about the ways others have been affected by your child/teenagers DPV.

Ability to consider impact of DPV on self/others

Associated thoughts, feelings, behaviours

Impact on relationship with child/teenager

Impact on relationships with other family members

Impact on social life


**Phase 9: Support experiences and support needs**

Purpose: To investigate past efforts to gain support, perceived efficacy of these efforts, and requirements for additional support.


Please share any experiences of support or help you have had with this problem.

Reactions to idea of help-seeking behaviour

Perceived support vs. perceived isolation

Feeling supported vs. feeling let down

Nature of support

What helps vs. what doesn't?


What [other] supports would you like/do you need?

Comfort vs. discomfort with identifying support needs

Hope vs. hopelessness


What gets in the way of you getting this support/help?

Factors that influence disclosure

Factors that influence direct help-seeking


**Phase 10: Concluding the interview**

Purpose: To make certain that the interview concludes with the person feeling comfortable with the process and not distressed by the things he/she has shared with the interviewer. Encourage a sense of hope and the idea that his/her participation has been valuable (link in with responses given during Phase 1 – reason for participation). Provide necessary information regarding available supports.

Check out experiences of distress due to the interview process

Series of questions to reduce any distress and bring interview to a close

Hopes for the research?

Recommendations or advice for others?

Enquire about need for support – provide necessary information regarding available suitable services.

Thank person for their participation