Parenting Over Violence

Understanding and Empowering Mothers Affected by Adolescent Violence in the Home

Ashleigh Haw

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“Being a sole parent is the most difficult job in the world and the least acknowledged”.

Sarah (Pseudonym) - Mother of abusive teenage son

“People are way too quick to attribute abuse solely to one factor of an abuser’s personal circumstances such as their use of drugs, experience of trauma, or mental illness. People will often do this without looking at the whole picture”.

Professional in the family violence field

“I tried so many things and just felt so helpless and hopeless”.

Susan (Pseudonym) - Mother of abusive teenage daughter

“No one can prepare you for an adolescent”.

Sarah (Pseudonym) - Mother of abusive teenage son

“It flattens you”.

Susan (Pseudonym) - Mother of abusive teenage daughter

“There is a cycle of abuse occurring between adolescents and their parents that should not be ignored”.

Professional in the community services sector

“It is very difficult to deal with abuse that cannot be seen”.

Melanie (Pseudonym) - Mother of abusive teenage daughter
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1.0 Executive Summary

1.1 Overview of the ‘Parenting Over Violence’ Project

In 2009, the Patricia Giles Centre was one of four recipients of the 2008 Women’s Community Award. These awards are administered annually by the Department for Communities (Women’s Interests) and allocate funding to service providers in the non-government sector wishing to take part in research and/or the development of programs that seek to benefit women in Western Australia (WA). Many local services in WA have come forward over the past 18 months and communicated that adolescent violence towards parents (particularly mothers) has been raised as a serious issue affecting families in WA. In fact, data from a domestic violence counselling and accommodation service in Perth’s northern suburbs revealed that over a six-month period in 2009, 31 clients of the service disclosed violence from a son or daughter. Due to a lack of available research, awareness and practice surrounding the issue, the current project utilised the funding received from the Department for Communities to explore adolescent violence towards parents in WA from the perspectives of both service providers with experience dealing with the issue and mothers directly affected by it. The project commenced in June 2009 and was completed in June 2010.

1.2 Objectives

The objectives of the “Parenting Over Violence” project were as follows:

- To explore adolescent violence towards parents in WA from the perspectives of individuals with professional and personal experience with the issue.
- To provide WA mothers and service providers with a ‘voice’ concerning the issue of adolescent violence towards mothers.
- To provide WA with some documentation of the issue of adolescent violence towards mothers.
- To raise awareness throughout the state and encourage the recognition of adolescent violence towards parents as a social problem that warrants attention and intervention.
- To show other parents affected by the issue that they are not alone in their experience and that work is being done to ensure that their plight is recognised.
- To provide a starting point for WA’s acknowledgement and understanding of the issue and to provide a rationale for the establishment of future research and practice that addresses adolescent violence towards parents in the state.
- To encourage the implementation of resources and/or programs in WA that specifically address the issue of adolescent violence towards parents.
1.3 Research Design

The “Parenting Over Violence” project adopted a qualitative research design consisting of semi-structured interviews with 27 participants from two distinct groups: service providers who have encountered adolescent violence towards parents in a professional capacity (n = 20); and mothers who have directly experienced abuse from an adolescent son or daughter (n = 7). The reason that only mothers were interviewed for this research (as opposed to both mothers and fathers) is that the criterion for the Women’s Community Award grant that funded the research was that the project be both about, and beneficial to, women in Western Australia. However, prior literature described in the report contains information concerning both mothers and fathers who have experienced this form of abuse, as it is recognised that men can also be victims of adolescent violence towards parents. The ‘Research Methodology’ section of the final report describes the procedure followed in order to carry out the research in further detail.

1.4 Key Findings

A total of 29 adolescent perpetrators of abuse against their mothers were described during interviews with both service providers and mothers. Of all cases described, 76% of the abusive adolescents were male and the remaining 24% were female. The majority of adolescents described fell between the ages of 13 and 21 years, with 18 being the most commonly reported age. The most commonly reported age of onset of adolescents’ abuse was 12 years and the most common age reported with regard to when abusive behaviours hit their peak was 15 years. Physical abuse, verbal abuse, emotional/psychological abuse, financial abuse, property damage, and control/intimidation were all disclosed by mothers and service providers as common forms of abuse perpetrated by the adolescents described. Female perpetrators were described as engaging in emotional/psychological abuse more frequently than males, whereas physical abuse, verbal abuse, financial abuse, property damage, and control/intimidation were said to be more commonly perpetrated by males than females. Some adolescents were described as being abusive towards other parents or guardians and family members such as grandparents and siblings. There were some incidents described where adolescents were abusive towards pets.

It was common for the adolescents described to have experienced problems at school and to have engaged in other problem behaviours such as truancy, defiance, promiscuity, substance use (66% of the adolescents described had engaged in substance use), stealing, self-harming, vandalism, general risk-taking, and poor academic performance. Furthermore, some adolescents described had been diagnosed with mental health conditions and/or other forms of a disability. The influence of peers and other family members (notably fathers and siblings) on adolescents’ attitudes and behaviours was
commented on frequently during interviews. Where the family structures of adolescents were described, a significant majority (81%) of adolescents only had one full-time biological parent (their mother). A high proportion of the adolescents described had fathers who were no longer in the picture at all or had very little involvement with their children. In addition, an overwhelming majority of mothers victimised by their children had also experienced domestic violence (DV) perpetrated by an intimate-partner, as this was disclosed in 48% of cases. In comparison, only 7% of all cases described involved mothers who had not experienced DV in the past, and in the remaining 45% of cases, past DV was not commented on.

With regard to factors relating to the parenting received by adolescent perpetrators, no obvious patterns were uncovered. Some service providers described victimised mothers as too permissive in their parenting styles and approximately half of the mothers interviewed believed that they were ‘too easy-going’ with their children and found it difficult to discipline them or set effective boundaries. However, the other extreme was also noted as a problem as parents described as ‘too strict’ with their children were often encountered by service providers as being victimised as well. Many victimised mothers described or interviewed were sole-parents and therefore bore the responsibility of parenting their children alone. Inconsistencies between the parenting styles of mothers and fathers were commonly reported in instances where both parents had involvement with their adolescents. A common theme identified was that fathers often portrayed the “good cop” when parenting their children whereas mothers found themselves portrayed as the “bad cop”. Most of the mothers interviewed and described stated that they received little to no support from their adolescent’s father with regard to dealing with the abuse situation.

Some common themes emerged with regard to the effects of the abuse on the victimised mothers. The most common of these themes was that of shame and guilt on the part of the mothers. Many felt ashamed of their situation and felt uncomfortable disclosing it to other people. It was also common for mothers to blame themselves for the abuse. It became evident that victimised mothers frequently felt isolated and that many experienced anxiety and depression as a result of the abuse. Additionally, there were evident similarities between the reported experiences of adolescent violence towards mothers and intimate-partner abuse. For instance, many participants referred to the “Cycle of Violence” when describing the plight of victimised mothers and it was common for the mothers interviewed to report feelings of “walking on eggshells” and “tip-toeing” around adolescent perpetrators. In some cases, the abuse became so severe that mothers had to have their abusive children removed from the home.

In response to the abuse they experienced, some of the mothers described and interviewed sought help from formal agencies such as the police, although this was viewed
by most mothers as a ‘last resort’. The most extreme course of action taken by a few of the mothers interviewed and described was taking out Violence Restraining Orders (VROs) against their children. All of the mothers interviewed had experienced multiple barriers to obtaining help and the majority stated that there are major gaps in the ability of agencies to provide assistance. Many mothers felt that their situation was not taken seriously when they sought help, with some stating that they had lost faith in the ability of services to assist them. Parent-blaming was identified as an issue that commonly occurred (particularly when mothers sought help for the abuse) and several of the mothers and service providers interviewed stated that blaming victims further exacerbates the problem. The ‘Results and Discussion’ section of the final report describes all of the information and trends generated by the interviews in further detail.

1.5 Recommendations

Several recommendations concerning strategies for addressing the issue of adolescent violence towards parents were provided during the interviews with mothers and service providers. Firstly, all participants recommended early intervention for children who have either commenced abusive behaviours or have been identified as ‘at risk’ of doing so. Furthermore, the development of resources for parents, adolescents and the general community was strongly encouraged. For instance, all participants except for one recommended the establishment of a group program for victimised mothers and more than half emphasised the importance of having groups for adolescent perpetrators. In fact, several participants recommended joint or concurrent groups for both victims and perpetrators.

The need for awareness-raising and education for the general community concerning the issue of adolescent violence towards parents (and family violence in general) was also suggested frequently as a way to address the issue. Some participants also highlighted the need for increased professional development efforts and education surrounding family violence issues for professionals who may encounter adolescent violence towards parents. The ability for people to understand adolescent violence was an issue that was raised by several participants and it was a common view that adolescent violence towards parents should be recognised as a form of family violence. The ‘Recommendations’ component of the ‘Results and Discussion’ section in the final report provides a more comprehensive description of participants’ recommendations.
2.0 Introduction

Twenty years ago, violence occurring within the family was considered rare. There were few options of support available for victims and perpetrators as it was common for such abuse to be regarded as private (Kennair & Mellor, 2007). Fortunately, in recent times, family violence has increasingly received more attention and intervention, and less acceptance and tolerance (Kennair & Mellor, 2007). However, there is still much work to be done as many facets of family violence remain trivialised, misunderstood or hidden altogether. One of these is adolescent violence towards parents. When exploring the issue of adolescent violence towards parents, it is important to identify adolescent violence towards parents as a form of family violence rather than as a form of delinquency (Jackson, 2003). Doing so allows the issue of adolescent violence towards parents to be taken more seriously. It may also allow for a broadening of one’s understanding of family violence (Gallagher, 2008).

However, before examining adolescent violence towards parents in any depth, one must grasp the definition of adolescence and understand its nature. Bobic (2004) defined adolescence as a developmental stage during which young people are yet to be considered adults but are not longer children. According to Bobic (2004), this period takes place between the ages of 12 and 24 years. Pagani, Tremblay, Nagin, Zoccolillo, Vitaro, and McDuff (2004) described the period of adolescence as one that is characterised by a need for independence from parents and sensation seeking with peers. Therefore, the obvious social, physical, and personality related changes associated with adolescence make it a unique developmental period during which problematic behaviours (such as truancy, substance use, promiscuity, risk-taking behaviours, defiant behaviour, learning problems, bullying, and aggression) may be commonly reported by parents. The relationship between a parent and their child changes significantly as that child reaches, and progresses through, adolescence (Robinson, Power & Allan, 2010). In some cases, these changes are represented by problem behaviours and parents are often the targets of such behaviours. An area that does not receive a great deal of attention in scientific literature and professional practice concerning adolescent behaviour towards parents is that of family violence. Rather, family violence is more commonly applied to the behaviours of intimate partners.

Sheehan’s (1997) definition of family violence contends that such violence exists when there is a power imbalance between two or more people in a domestic or family relationship as a result of one or more of the following types of behaviours: physical abuse; verbal abuse; emotional/psychological abuse; sexual abuse; spiritual abuse; and financial abuse. According to Bobic (2002), power and control are the key ingredients of all forms of family violence. Therefore, when adolescents abuse their parents, they are said to use
power as a means of control and they may exert this power and control through various forms of abuse (Bobic, 2002). Paterson, Luntz, Perlesz and Cotton (2002) provided a broad Australian definition that is applicable to all forms of family violence, including adolescent abuse of parents. They asserted that the behaviour of one family member can be considered abusive the behaviour results in other family members feeling intimidated, threatened, or controlled (Paterson, et al, 2002).

Agnew and Huguley (1989) described the abuse of a parent by a child as “the ultimate challenge to that parent’s authority” (p 699). Defining adolescent violence towards parents is difficult because it is not always clear when behaviours are acceptable (and typical of adolescents) and when they become abusive (Stewart, Wilkes, Jackson & Mannix, 2006). According to Stewart, et al (2006), this uncertainty contributes to the silence that often surrounds adolescent violence towards parents. Gallagher (2008) agreed: “There are no clear empirical definitions of abuse and no clear cut-off point where a growing child becomes ‘abusive’ rather than merely aggressive” (p 43). When trying to understand the nature of adolescent violence towards parents, it is imperative that one does not equate abusive behaviour with the following behaviours: an occasional temper tantrum; play fighting; a toddler/young child lashing out at a parent; young people defending themselves against physical or sexual abuse (Gallagher, 2008). Labelling these behaviours as violent could result in an over-estimation of the extent of adolescent violence towards parents and would likely result in normal child-parent conflict being erroneously considered abusive.

The complexities associated with adolescent violence towards parents are varied. For instance, a significant dilemma faced by many mothers affected by adolescent violence is the belief (both within themselves and society) that they have responsibilities as parents to continue caring for their children regardless of the circumstances (Anglicare Victoria & Precision Foundation, 2001). This often results in victimised parents’ displaying a reluctance to disclose their experiences because they believe that doing so is not socially accepted. In addition, as with other forms of family violence, entire families can be impacted by adolescent violence. For example, it has been recognised that adolescents who are violent towards their parents often abuse their siblings as well (Howard & Rottem, 2008). It is also important to consider the potential problems that adolescents who are violent towards parents may experience later in life that are linked to their violent behaviour. Gallagher (2004a) emphasised that adolescent violence towards parents may be the beginning of a long-term cycle of violence perpetration. In other words, violence engaged in during adolescence may be the early stages of violence perpetrated during adulthood. This may mean that early intervention, if successful, with adolescents who have been abusive towards a family member has the potential to prevent other forms of interpersonal violence occurring in the future.
Although the problem of adolescent violence towards parents is not a new phenomenon, it has only been recognised recently in the public sphere (Bobic, 2004). As a consequence, the causes and effects of adolescent violence towards parents have received limited attention (Kethineni, 2004; Bobic, 2004).

With very little research and low public recognition of adolescent violence towards parents, most practitioners struggle to obtain information regarding the most effective ways of dealing with this form of abuse (Bobic, 2004, p 8). The issue of adolescent violence towards parents is frequently discussed at interagency meetings and events involving community and social service agencies that work with families (Cottrell, 2001). During such meetings, the issue is often described as widespread (Cottrell, 2001). Thus, there is anecdotal evidence to suggest that adolescent violence towards parents is a problem. However, there is no official reporting of its Australian prevalence and a lack of available international statistics even though the available literature describes it as a ‘serious social problem’ (Brezina, 1999). Therefore, it appears that adolescent violence towards parents is more hidden than other forms of family violence (Howard & Rottem, 2008). This may be in part due to the fact that such a form of abuse is seen to violate social norms and as a result, society encounters difficulty when faced with the issue. Thus, society is reluctant to accept the existence and frequency of adolescent violence towards parents (Gelles, 2000). Straus, et al (1980) proposed that adolescent violence towards parents is a neglected area of research and public attention largely due to the misconception that all children love and respect their parents. A failure to understand adolescent violence towards parents and conceptualise it as a form of family violence may also account for the lack of attention previously paid to the issue (Stewart, Jackson, Mannix, Wilkes, & Lines, 2005). Bobic (2004) suggested that a lack of clarity concerning what is acceptable adolescent behaviour and what constitutes abuse may also account for the lack of community awareness and available information that focuses on this issue.

There are important implications to be gained from raising awareness in both the professional and public sphere concerning the issue of adolescent violence towards parents. For example, according to international data, males are most likely to murder a parent between the ages of 18 and 21 years, and females are most likely to murder a parent between the ages of 14 and 17 years (Walsh, Krienert, & Crowder, 2008). Therefore, adolescence is the most common time period for child-perpetrated homicide against parents. With this in mind, it is important to consider abuse of parents by adolescent children as potentially life-threatening and in need of widespread attention and intervention. In addition to placing victimised parents at risk of homicide, it has been argued that adolescent violence is a hidden factor in family breakdown and youth homelessness (Sheehan, 1997). Regardless of the outcome of such abuse, being part of a family affected by adolescent
violence can be highly detrimental to the physical and psychological wellbeing of all family members (Cottrell & Monk, 2004). Without intervention, families affected by adolescent violence may feel increasingly helpless (Pagelow, 1989). Therefore, shedding some light on the issue of adolescent violence towards parents is highly warranted.

There are seven key principles, as identified by Anglicare Victoria & Precision Foundation (2001), that should be used as guidance when attempting to understand the issue of adolescent violence towards parents and when working with this complex issue. These principles have guided the ‘Parenting Over Violence’ project and are as follows: violence is a choice; it is never acceptable to use violence; anger and temper are not the same constructs as violence and abuse (and should not be regarded as such); families experiencing violence will usually want to end the violence without ending the relationship; families can assist a violent young person to take responsibility for their actions; and mothers are not responsible for adolescent violence, but they have an integral role in resolving the problem.
3.0 Literature Review

Although the issue of adolescent violence towards parents is beginning to elicit more attention, the issue remains a largely neglected area of research and practice (Crichton-Hill, Evans & Meadows, 2004; Kethineni, 2004). Furthermore, explanations are limited that address causal factors, key trends, and effective ways to assist parents affected by adolescent violence (Bobic, 2004). Without a clear recognition of the nature and extent of adolescent violence towards parents, it is difficult for both professionals and the community to recognise the problem and offer support to affected families (Stewart, Wilkes, Jackson & Mannix, 2006). Researchers only started to focus on family violence perpetrated by adolescents in the late 1970s (Pelletier & Coutu, 1992), and the available literature on the topic remains scarce. The following section of this report describes key findings, trends and perspectives identified in the existing Australian and international literature on the topic of adolescent violence towards parents. It is important to emphasise that the range of situations and circumstances with which adolescent violence towards parents occurs is so diverse that one can not assume that any one explanation or theory will adequately explain it (Gallagher, 2004a). For this reason, the following review of the relevant literature contains many different perspectives and findings that do not always fall in line with one another. Nonetheless, the following review describes some interesting and worthwhile information to assist one to understand the various issues associated with adolescent violence towards parents.

3.1 Types of Abuse in Adolescent-to-Parent Relationships

For both parents and their children, adolescence is a challenging period, and behaviours that are considered ‘normal’ can be difficult to differentiate from those that are ‘abusive’ (Bobic, 2002). It is important to define abuse for the purpose of this project and make note of the various methods with which adolescent violence towards parents can manifest itself. Descriptions of various forms of abuse in the literature concerning adolescent violence towards parents have included definitions of physical abuse, verbal abuse, emotional abuse, and financial abuse.

3.1.1 Physical Abuse

Straus and Gelles (1990) defined physical abuse as comprising of intentional acts committed by one person against another resulting in any form of physical harm. Such acts may include hitting (including slapping and punching), kicking, shoving, pushing, biting, wounding or choking another person (Eckstein, 2004). Making threats of physical violence is also an example of physical abuse.
3.1.2 **Verbal Abuse**

Verbal abuse from an adolescent towards a parent may include the following acts: accusations; rejection (such as refusal to talk/engage); attacks on one’s character such as their personality, appearance or intellect; name calling and derogatory remarks; and swearing (Eckstein, 2004; Infante, 1995).

Adolescent-to-parent verbal abuse is a destructive form of communication that focuses an implicit attack on the self-concept of the parent instead of the issue under discussion (Eckstein, 2004, p 3).

3.1.3 **Emotional Abuse**

Emotional abuse occurring in adolescent-parent relationships may include: unpredictable expressions of anger or hostility; controlling and manipulative behaviours (e.g. blaming the parent for one’s own actions); placing the parent in lose-lose situations in order to get one’s way; threats of self-harm or harm to other people/property; making threats of other self-destructive behaviours (e.g. leaving school, stealing, drug use, sexual promiscuity, pregnancy, running away); withdrawal or disengagement from the parent; and socially isolating the parent (Spitzberg, 1997). In circumstances of adolescent violence towards parents, emotionally abusive tactics can serve to inhibit the abused parent’s ability to function in the parenting role and can detrimentally impact on their self-esteem (Price, 1996).

3.1.4 **Financial Abuse**

In a situation involving adolescent violence towards a parent, acts of financial abuse may include: stealing from the parent; selling the parent’s possessions or threatening/demanding the selling of such items; destroying property; deliberately incurring debts that the parent must cover; demanding money or purchases from parents; or using threats/coercion to obtain money/possessions (Cottrell, 2001).

3.1.5 **Trends Relating to the Types of Adolescent Abuse Experienced**

Prior research has identified a number of notable trends with regard to the types of abuse experienced by parents at the hands of their adolescent children (Eckstein, 2004; Paulson, Coombs, & Landsverk, 1990). In a study concerned with parental explanations of various types of adolescent violence, Eckstein (2004) conducted research involving qualitative interviews with 20 parents (seven men and thirteen women) with an abusive adolescent child aged between 10 and 17 years. The parents in this study had experienced varied levels of physical, verbal, and emotional forms of abuse (Eckstein, 2004). It was common for the parents interviewed to have experienced incidents during which verbal and physical abuse or verbal and emotional abuse occurred concurrently (Eckstein, 2004). It was described by several parents that during violent incidents with their children, the abuse
would often escalate from verbal to physical or from verbal to emotional. It was common for the parents in Eckstein’s (2004) research to be subjected to verbal abuse only during the first incident, but in most cases, the abuse escalated over time to include physical or emotional forms in addition to verbal abuse. For all participants, emotional distress was experienced as a result of all types of abuse experienced (Eckstein, 2004). The parents in this research generally considered verbal abuse from adolescents as the least harmful form of violence, physical abuse as the second most harmful, and emotional abuse as the most harmful and damaging (Eckstein, 2004). The parents interviewed who had experienced emotional abuse continued to live with its effects long after the abusive incident occurred. In the experiences described, abusive incidents became a defining characteristic of the family dynamics and a frequent form of conflict resolution (Eckstein, 2004).

Eckstein’s (2004) results emphasise the importance of exploring non-physical forms of abuse when conducting research or working with families regarding this issue. However, some research has narrowed its focus to only differentiate abusive adolescents from their non-abusive counterparts on the basis of physical abuse. For example, Paulson, et al (1990), interviewed 445 youths and classified them as either hitters (they had, on at least one occasion, physically assaulted one of their parents) or non-hitters (they had never physically assaulted either parent). Situations where adolescents had inflicted non-physical forms of abuse against their parents such as emotional, psychological, or financial abuse were not regarded as violent, which means that results can only be interpreted in relation to physical violence. If one were to consider Eckstein’s (2004) finding that emotional abuse is regarded by victimised parents as more harmful than verbal and physical abuse, one may conclude that Paulson, et al’s (1990) results are likely to have underestimated the true extent of the abuse experienced. Therefore, classifying adolescents who are emotionally abusive without being physically violent as ‘non-violent’, even though other research suggests that emotional abuse is more damaging to victims, is highly problematic. There was also no information collected about the frequency or severity of the abuse, thus an adolescent who had hit a parent once without causing injury could be equated with one who had hit a parent several times resulting in the need for medical attention, even though both circumstances contrast significantly (Paulson, et al, 1990).

With regard to the types of abuse most commonly experienced by parents at the hands of their adolescent children, the results of research have been mixed. Evans and Warren-Sohlberg’s (1988) research revealed that the majority (56%) of incidents studied involved physical assaults. However, the most common form of abuse described in Stewart, et al’s (2006) research with mothers of violent adolescents was emotional abuse, for example, giving the mother the silent treatment or withdrawing altogether (59, 64.8%), closely followed by verbal abuse such as name calling and swearing (53, 58.2%) and aggressively
demanding that the mother does as they say (41, 45.1%). Putting the mother down was another common form of abuse as it occurred in 34.1% of cases, and demeaning parenting skills occurred in 33% of cases (Stewart, et al, 2006). Physical abuse such as pushing, shoving and grabbing accounted for 36.3% of cases, and bullying behaviours such as standing over the mother occurred in 34.1% cases. Mothers in this research also described their adolescents purposely causing damage to the home or to the mother’s property, and stealing money or personal belongings (30.8% of cases) (Stewart, et al, 2006).

3.2 Prevalence

As previously noted, there are no Australian and very few overseas statistics on the prevalence of adolescent violence towards parents (Bobic, 2002). However, many researchers have attempted to uncover prevalence rates within specific samples, thus some statistical information that can shed light on the nature and extent of the problem is available. In research by Stewart, et al (2006), questionnaires were completed by 129 mothers of children aged between 10 and 24 years in Sydney, Australia. The majority of these mothers (70.5%) had experienced some form of violence from an adolescent son or daughter (Stewart, et al, 2006). In their interviews with 60 Australian mothers, Stewart, Burns and Leonard (2007) found that 36.7% of their sample described experiencing some type of abuse perpetrated by an adolescent child. Although these findings may provide some level of understanding of how frequently adolescent violence is affecting Australian families, without a sufficient amount of reliable figures, it is not possible to ascertain with certainty if adolescent violence towards parents is on the rise (Gallagher, 2008). Rather, it may be that adolescent violence is a problem that has been occurring for a long time, but is only beginning to gain attention and recognition in Australia.

The international data pertaining to the prevalence of adolescent violence towards parents varies considerably. U.S data estimates that adolescent violence towards parents occurs in 7-18% of two-parent families and approximately 29% of one-parent families (Downey, 1997). For example, Figueira-McDonough (1985) conducted a survey in a U.S school and found that 9% of children in the tenth grade (typically 15 year-olds) had physically abused a parent. However, other U.S research has unveiled a higher proportion of adolescents inflicting abuse against a parent. For instance, the majority (61%) of a sample of 445 adolescents in Paulson, et al’s (1990) study admitted to physically abusing one or both of their parents. In Canada, it is estimated that 1 in 10 parents experience abuse at the hands of their children (however, this statistic is not specific to children in the adolescent age range) (DeKeseredy, 1993). In Pagani, et al’s (2007) research carried out in Canada, 64% of adolescents studied had been verbally aggressive and 13.8% had been physically aggressive towards their mother over a six-month period.
Japanese data suggests that 4% of families are affected by adolescent violence towards parents and the French literature suggests a figure of 0.6% (Laurent & Derry, 1999). It is important to note that these figures have been obtained using different methods and are therefore difficult to compare and not necessarily consistent with regard to what types of behaviours have constituted abuse for the purposes of the data collection. In UK research, Browne and Hamilton (1998) gathered information on the childhood experiences of 469 university students. They found that 14.5% of participants self-reported that they had been violent towards at least one of their parents during adolescence and a further 3.8% admitted to inflicting severe forms of abuse against a parent (Browne & Hamilton, 1998).

With regard to the most serious form of violence that can be inflicted against a parent by an adolescent (i.e. parental homicide or ‘parricide’), Australian statistics indicate that approximately 9% of all family homicides involve the murder of a parent by their child and nationally, there is an average of 12 parricides per year (Mouzos & Rushforth, 2003). The true prevalence of adolescent violence towards parents is difficult to ascertain and there is potential for a considerably large ‘dark figure’ (i.e. a number of unrecorded and/or unreported cases that if known, would change a given prevalence statistic). Brezina (1999) suggested that adolescent violence towards parents actually occurs more frequently than other forms of family violence, however, it is the least likely form of family violence to be reported, which means that recorded rates in existing data may be well below the actual figure (Brezina, 1999).

3.3 Causal Factors

Some researchers have focused on exploring the personality factors of abused parents and their adolescent children in order to explain adolescent violence towards parents (e.g. Heide, 1995; Hemphill, 1996; Price, 1996). In contrast, other researchers have focused more on external influences of behaviour by suggesting that factors such as deviant behaviours, peer groups, difficulties at school, and drug and/or alcohol use are more logical predictors of violence in adolescents (e.g. Herrenkohl, Huang, Kosterman, Hawkins, Catalano & Smith, 2001; Ellickson & McGuigan, 2000).

In Stewart, et al’s (2007) research, according to victimised mothers’ perspectives, the most common explanations for adolescent violence were: family dysfunction; the young person’s personality; the young person’s psychological functioning; social and cultural influences; and gender and power imbalances. However, researchers who have explored the origins and motivations related to adolescent violence towards parents have typically come to the consensus that such a form of abuse does not lend itself to any one cause:
There is no single and definitive explanation for adolescent violence towards parents. Rather, a range of multifaceted and interconnected dynamics is said to be the contributor to this behaviour (Crichton-Hill, et al, 2004).

This view was supported by Gallagher (2004b), who asserted that there are always multiple determinants of behaviour and that attempting to explain behaviour as a product of any one cause is unfeasible. Rather, there are a range of factors that have been identified in the relevant literature that may contribute to adolescent violence towards parents. Some of the factors include: adolescents’ preferred mechanisms for responding to anger and frustration; young peoples’ senses of entitlement and responsibility within the family; applications of parental discipline and the setting of boundaries; the effects of drugs and alcohol; mental health factors; young peoples’ experiences of trauma (notably their exposure to violence in the family in the past); and the impact of family breakdown such as separation or divorce. These factors along with how they may relate to adolescent violence towards parents are outlined in the following subsections.

3.3.1 Anger & Frustration

It is widely understood that when some people feel angry, they respond with aggression. This is true of all age groups, including adolescents. In Stewart, et al’s (2006) research, the most common trigger for an adolescent’s abuse towards their mother (as described by the mothers surveyed) was an argument or disagreement between the mother and the adolescent, as this accounted for 65.9% of the cases described. This was closely followed by the adolescent’s anger, which mothers described as being the primary cause of the abuse in 61.5% of cases. It is not uncommon for people to make such an assumption (that violence is a direct result of anger). However, it is important to understand that anger can not account solely for any form of abuse and it certainly does not excuse violence.

Violence, in all of its forms, is frequently viewed as an expressive response to anger and/or frustration, often resulting from some form of disagreement. As a result, there is an overwhelming tendency for people to believe that a person who abuses another is simply “letting off steam” or reacting to some form of provocation. In addition to supporting victim blaming attitudes, such a viewpoint suggests that violence is a natural and logical response to feelings of anger and frustration, a view that conceptualises abuse as expressive instead of instrumental (Gallagher, 2004b). When violence is seen as ‘instrumental’, it is regarded as a choice utilised to gain control over another person and not merely as an uncontrolled response to an unfavourable situation (Gallagher, 2004b). It is important to note that because this paper emphasises that violence is an inexcusable choice that can be controlled
and that individuals who perpetrate abuse are responsible for their actions, the ‘instrumental’ conceptualisation of violence is preferred over the ‘expressive’ perspective. Gallagher (2004b) argued that anger should be understood as an emotion rather than a cause of behaviour as it is possible to feel angry without becoming violent. In other words, anger is an emotion and violence is a choice. However, the abusive actions of young people are often seen as expressive rather than instrumental (Gallagher, 2004b). Thus, the level of responsibility attributed to their violent behaviour diminishes and their actions are attributed solely to their feelings of anger and the stimulus that elicited the anger (Gallagher, 2004b).

### 3.3.2 Entitlement vs. Responsibility

Through his research and experience working with young people and their families affected by adolescent violence in the home, Gallagher (2004) identified two distinct circumstances with which such abuse commonly occurs: abuse of a sole-parent mother who has previously experienced abuse at the hands of the adolescent’s father; and abuse of parents by adolescents who have come to view their parents as ‘servants’. The literature discussed in this section will explore the latter. Sheehan (1997) suggested that the abuse of a parent by their adolescent son or daughter may be a reflection of the young person’s preferred mechanism for asserting their will as the young person’s means to an end in such circumstances is often the use of physical, emotional and/or psychological abuse. Similarly, Jenkins (1990) proposed that, like some other forms of violence within the family, adolescent violence towards parents may be the result of the abusive person’s belief that their entitlement outweighs their responsibility. This view was supported by Gallagher (2004a) who observed, through research and practice, that young perpetrators of adolescent violence towards parents have often received limited or ineffective boundaries or discipline. Like Jenkins (1990), Gallagher (2004a) used the term ‘over-entitled’ to describe such children. When Gallagher (2004a) describes situations of adolescent violence towards mothers perpetrated by ‘over-entitled’ children, the circumstances are often that well-meaning parents have tried too hard to please their children, resulting in the children having high expectations. Gallagher (2004a) proposes that when a child’s wishes are not met to a standard that meets such expectations, they may employ abusive tactics in order to obtain the desired outcome.

The notion of over-entitlement could help explain the power imbalances that exist in many families where adolescent violence towards parents takes place. It contrasts with views regarding family violence that suggest that violent individuals (particularly young people) suffer from low self-esteem and become violent as a response to particular stressors in their environment (Gallagher, 2008). The idea that some adolescents are abusive towards parents due to an inflated sense of entitlement instead suggests that such individuals have
high self-esteem and are abusive as a result of “threatened egotism” (Bancroft, 2002). In the context of children’s perceived entitlement, Barcai, Rosenthal & Jerusalem (1974) argued that inadequate family controls are often defining factors in the relationship between an abusive child and their victimised parent. According to Barcai, et al (1974) some parents frequently give in to their children’s demands resulting in situations where the children are not used to being denied or delayed gratification. It is reasonable to suggest that such a dynamic between a parent and child may be a key factor in that child’s perceptions about their entitlement. Such beliefs may place them at greater risk for becoming violent towards a parent when their perceived entitlement is threatened in some way by the parent exercising authority.

3.3.3 Discipline & Boundaries

Some researchers have suggested that adolescents become violent when they feel powerless to influence parental attitudes, have their needs met, or resolve conflict (Finkelhor, 1983). Other literature has discussed adolescent violence as a possible consequence of ineffective parental discipline or guidance (Jackson & Foshee, 1998; Charles, 1986; Kratcoski, 1985). Charles (1986) proposed that when parental guidance is ineffective, adolescents may turn to abusive tactics in order to have their needs met because of a lack of clarity regarding their role as the child and their parent’s role as the guardian. According to Edgette (2002), a constant goal of parenting is to raise children who are independent and confident. However in trying to achieve this, Edgette (2002) proposed that many parents allow their children too much freedom which is not balanced with accountability, resulting in teenagers failing to take responsibility and developing unrealistic expectations of their parents. In a two-parent family experiencing adolescent violence, a discrepancy in parenting styles between a mother and a father may be a significant factor. It is possible that one parent may overcompensate for the irresponsibility of another by becoming over-responsible in their approach to dealing with a child’s behaviour (Gallagher, 2004a). This kind of overcompensation is likely to create increased conflict between the child and their parent (particularly the parent who is perceived as the ‘bad cop’).

In research by Paulson, et al (1990), parents of adolescents who were physically abusive towards them were generally more permissive with regard to discipline than the parents of non-violent adolescents. In addition, Cottrell (2001) suggested that a relationship between a parent and child that places the child on par with the parent may result in a lack of boundaries and as a consequence, the child is likely to become accustomed to getting his/her own way. Therefore, such a child is unlikely to possess the emotional readiness required to deal with situations where they receive an unfavourable outcome, for example, when they ask a parent for money and are told “no”. Walsh and Krienert (2009) proposed
that a parent’s inability or unwillingness to impose effective discipline with their children may result in an undermining of informal family controls and lack of clarity as to what constitutes acceptable behaviour (Walsh & Krienert, 2009). Downey (1997) suggested that when parents are unable to fulfil their role as effective guardians for their children, their children may be forced to take on this role themselves and such a burden can result in violent behaviour. Furthermore, Harbin and Madden (1979) suggested that the parents of adolescents who are violent towards them often have trouble identifying the authority hierarchy in the family, and in some cases, these parents often believe that their adolescent is in charge of the family.

In research that sought to ascertain whether there is any link between problems with parenting and adolescent misconduct (problem behaviours in general), Huh, Tristan, Wade and Stice (2006) explored the relationship between parenting and the behaviours of a sample of 496 adolescent girls. They found that problem behaviour from female adolescents had an adverse effect on parenting (Huh, et al, 2006). However, they did not find a relationship between parenting deficits and problem behaviour. Thus, rather than parenting influencing adolescent behaviour, adolescent behaviour was found to affect parenting (Huh, et al, 2006). It is possible, therefore, that one who attempts to assess a situation involving an adolescent who is violent towards a parent may erroneously conclude that the said parent is ‘contributing to the problem’ due to their parenting style, when in fact, it is the adolescent’s behaviour that has resulted in that particular parenting style taking place.

Cottrell (2001) argued that narrowing the focus to parenting styles in the home when attempting to explain adolescent violence towards parents fails to account for the fact that some children who experience problems outside of the home (e.g. bullying at school) become violent in the home in response to their victimisation. Focusing solely on the actions and influences of parents in circumstances involving adolescent violence also has the potential to place too much responsibility on parents, and thus contributes to parent-blaming attitudes. This is a serious problem as many people adopt the falsified assumption that parents are the only influence on their children’s behaviour (Gallagher, 2004a). Thus, it is often expected that if a child is exhibiting problem behaviours, it must be the fault of their parent(s). It is not surprising therefore, to find that parents who have experienced violence from an adolescent child often carry an excessive burden of guilt (Gallagher, 2004a).

### 3.3.4 Drugs & Alcohol

Pelletier and Coutu (1992) noted that many parents report that the abusive behaviour of their adolescent children increases in severity when the child is under the influence of drugs or alcohol. In Pagani, et al’s (2004) research, adolescents’ regular consumption of drugs and/or alcohol increased the probability that they would engage in verbal aggression.
towards their mothers by 60%. Interestingly, no such relationship was uncovered between physical aggression and substance use. In fact, it was the substance abuse of parents rather than adolescents in this study that was associated with an increase in the probability that adolescents would engage in physical violence towards mothers (Pagani, et al, 2004). Pagani, et al (2004) suggested the following potential explanations for this finding: parents who engage in excessive substance use may be inconsistent in their setting of boundaries with their children and their applications of discipline, which may place them at greater risk of experiencing violence from their child than non-substance abusing parents; or such parents might be more prone to handing down harsher levels of discipline to their children such as physical punishment, which may evoke retaliatory aggression from their children.

In Sheehan’s (1997) research, 48% of adolescents who were violent towards a parent used drugs (most commonly marijuana) and/or alcohol on a regular basis. A significant number of parents in Sheehan’s (1997) research reported that abuse from their adolescent was most likely to occur when the young person wanted money from them. In most cases, this money was demanded by the young person for the purpose of purchasing drugs or alcohol (Sheehan, 1997). In their research involving an analysis of recorded police data of adolescent violence towards parents, Evans and Warren-Sohlberg (1988) noted that adolescent substance use was cited in the reports as a direct cause of the abusive incidents in 19% of cases. However, it is problematic to make such causal inferences. According to Bobic (2002), although the influence of drugs and alcohol is often considered a factor in adolescent violence towards parents, such a factor can not stand alone to adequately account for the onset of adolescent violence. Mak and Kinsella (1996) argued that although adolescents’ substance use does not directly cause violent behaviour, it may increase its severity. It is reasonable to suggest that in Evans and Warren-Sohlberg’s (1988) research, alcohol and drug use was apparent in 19% of cases reviewed and may have been a factor in these abusive incidents, but it can not be determined as a sole cause of the violence. It is advised that the results of research findings that suggest a causal link between substance use and adolescent violence towards parents be interpreted with caution.

3.3.5 Mental Health

It is common for violent adolescents to be described as being affected by mental health disabilities such as Conduct Disorder, Oppositional Defiant Disorder, Attention Deficit Hyperactivity Disorder (ADHD), Asperger’s Syndrome, or learning disabilities (Gallagher, 2008; Gallagher, 2004b; Cottrell, 2001). However, attempting to explain adolescent violence towards parents as a product of a disorder is problematic (Price, 1996) as the potential for families, services, and the community to justify such abuse on the grounds of mental disability is high (Hemphill, 1996). For example, Stewart, et al (2007) found that when
mothers believed their abusive child to be mentally ill, they were more likely than other mothers to be supportive, protective, and tolerant of the abuse they were experiencing. It was common for these mothers to make comments such as “it’s not him, it’s the illness” (Stewart, et al, 2007). When violent behaviour is understood in the context of a disorder, there is often a failure to take into the account the experience of the victim and the choices they have (Gallagher, 2008). Thus, abusive behaviour should be looked upon as a choice and there is no single disorder that can adequately explain adolescent violence towards parents. Where a mental disorder or disability is a feature of an abusive adolescent’s life, such a condition can not stand alone to explain why the adolescent is abusive. Rather, mental health is just one of many factors in adolescent violence situations.

3.3.6 Histories of Family Violence

Some of the existing literature suggests a connection between being a victim or witness of abuse in the family (particularly during early childhood) and becoming a perpetrator of violence toward a parent (Stewart, et al, 2006; Gallagher, 2004a; Gallagher, 2004b; McCloskey & Lichter, 2003; Bancroft & Silverman, 2002; Gelinas, 2001; Cottrell, 2001; McGee, 2000; Levendosky & Graham-Bermann, 2000; Carlson, 1999; O’Keefe, 1996; Evans & Warren-Sohlberg, 1988); Livingston, 1986; Kratcoski, 1985; Cornell & Gelles, 1982). For instance, according to Gallagher (2004a), one of the most common situations involving adolescent violence towards a parent involves a young person (usually male) behaving violently towards a single mother following a domestic violence situation whereby the mother has been victimised by the child’s father. This was observed by McGee (2000) and Levendosky and Graham-Bermann (2000), who found that many boys they studied who had been exposed to intimate-partner violence, later became aggressive towards their mothers themselves. Langhinrichsen-Rohling and Neidig (1995) reported a gender difference (with regard to witnessing violence in the family and then becoming violent) in that girls who are exposed to abuse between their parents are less likely than boys to become violent towards their parents themselves.

In Evans and Warren-Sohlberg’s (1988) research, 52% of families affected by adolescent violence towards a parent had also experienced intimate-partner violence. Furthermore, in 25.5% of the situations described by mothers in Stewart, et al’s (2006) study, the abusive adolescents had witnessed violence within the family prior to becoming violent themselves. Similarly, Sheehan (1997) found that 45% of the abusive adolescents in her clinical sample had directly experienced family and domestic violence and a further 27% had witnessed (but not experienced) family and domestic violence. Twelve percent of Sheehan’s (1997) sample had experienced some form of sexual abuse, and a further 10% had experienced both family violence and sexual abuse. Overall, 82% of Sheehan’s (1997)
sample of violent adolescents had experienced some form of abuse in their family history. In more recent research, Ulman and Straus (2003) found that mothers who had experienced violence from intimate partners were more likely to experience violence from a child than mothers with no histories of domestic violence. In Gallagher’s (2004a) clinical sample of 77 abusive adolescents, 46 (60%) had lived in a family where intimate partner violence occurred. Of these 46 children, 34 (74%) were parented solely by mothers (Gallagher, 2004a). This means that three-quarters of mothers in the sample who had experienced domestic violence as well as adolescent violence were sole-parents, which may suggest that for parents who have experienced domestic violence, being a sole-parent increases their risk of experiencing violence from an adolescent son or daughter, or that perhaps for sole-parents, being a victim of domestic violence increases the risk of adolescent-to-parent abuse. Either way, Gallagher’s (2004a) finding indicates an interaction between being a victim of domestic violence, being a sole-parent mother, and experiencing violence from an adolescent child.

American research by Barkin, Kreiter and DuRant (2001) uncovered a significant relationship between past exposure to violence and expressing intentions to engage in violent acts in the future. Similarly, O'Keefe (1996) and McNeal and Amato (1998) suggested that young people who are exposed to the use of aggression as a mechanism for resolving conflict are likely to adopt the use of aggression themselves. This repeating of abusive behaviours is commonly referred to as the ‘intergenerational transmission of violence’ (Bobic, 2002), a perspective that proposes that aggression and violence are concepts that are learned via the modelling of others (Tomison, 1996). Under this framework, it is suggested that violence within the family can encourage young people to accept violence as a means to an end (Mitchell & Finkelhor, 2001). In some families, abusive behaviours may become frequent modes of communication as a result of intergenerational patterns of abuse that have resulted in violence within the family being accepted as normal (Tomison, 1996). For example, a young man who has seen violence perpetrated against his mother by his father may learn that his mother is an appropriate victim (Brown, 1997). The results of Stewart et al.’s (2007) research indicated that in situations where family dysfunction was described as a contributing factor to an adolescent’s abusive behaviour, the adolescent was often described by his/her mother as ‘taking after’ a violent father. Another potential explanation for the intergenerational transmission of violence in the family is that the trauma one experiences when they witness or experience family violence as a child often has social and psychological consequences that impact on a person’s functioning and behaviour during adolescence and adulthood (Gallagher, 2004a). For instance, according to Mathias, Mertin and Murray (1995), children who experience or
are exposed to domestic violence are at increased risk of externalising behavioural problems such as aggression, hyperactivity, and defiance.

In some cases, following exposure to family violence, a young person may lose respect for the parent who has been abused (Gallagher, 2004a). Whilst it is unfair and unfortunate for children to lose respect for a victimised parent, it may explain the considerable amount of research and clinical data in support of the notion that mothers experiencing adolescent violence have often been victimised by a partner previously. It is important to note how being a victim of domestic violence can impact on a person’s parenting. The emotions, attitudes and behaviour of mothers who have experienced abuse from a partner are all likely to be affected by such abuse (Gallagher, 2008). For example, mothers previously abused by a partner may find it harder to protect themselves against aggression from their children, or they may struggle with limit-setting, resulting in children who are given less boundaries and clear guidance relating to acceptable and unacceptable behaviour (Lieberman & Van Horn, 2005). In the words of Lieberman and Van Horn (2005), “this maternal helplessness has the effect of confirming the child’s perception that ‘aggression works’, reinforcing aggressive action toward the mother” (p 71). It is also possible that when women lack confidence in their parenting ability following a history of domestic violence, children are likely to take note and may identify with the parent they perceive as having the most power (Fish, McKenzie & MacDonald, 2009). This parent is often the father, which may in part explain why mothers who have experienced violence from intimate partners often fall victim to similar abuse at the hands of their children. These concepts are consistent with the perspectives of Boxer, et al (2009), who suggested that children whose parents behave aggressively tend to behave aggressively themselves, and Doumas, Margolin and John (1994), who emphasised the high probability of patterns of abuse being repeated over generations.

However, Bobic (2002) argued that to apply causal explanations for adolescent violence towards parents based on histories of violence within the family is to accept a simple explanation for a complex problem, which is misleading and fails to account for other factors that might contribute to the issue. Furthermore, Gallagher (2004b) argued that the assumption that a violent adolescent must be a victim of abuse themselves is illogical and fails to account for the actions of abusive adolescents who have never experienced or been exposed to abuse in the past. Laing (2001) articulated a similar viewpoint: “While living with violence as a child is one risk of later perpetrating violence, it is very far from inevitable that one leads to the other” (p. 6). It has also been argued that placing too much emphasis on the family histories of adolescents who are violent towards parents can further exacerbate the problem of parent self-blaming and under reporting of the issue (Bobic, 2004). Focusing solely on families with histories of abuse as a causal explanation for adolescent violence in
the home may contribute to wider beliefs that such abuse does not occur in ‘normal’ families, adding to the isolation and feelings of shame experienced by victimised parents (Bobic, 2004). Another recognised danger of viewing adolescents’ violent behaviour as a direct result of their own prior victimisation is that the young person may feel justified in their actions and believe that their past victimisation excuses their violence (Gallagher, 2004b). They may also adopt the belief that (in the case of an adolescent repeating the violent behaviours of his/her father or other family member) they are incapable of leading non-violent lives because they are socially or genetically predisposed to violence and will never be able to change (Gallagher, 2004b).

3.3.7 Family Breakdown

Some authors have suggested that stress resulting from the breakdown of the family, such as parental separation or divorce, can contribute to adolescent violence towards parents (e.g. Bancroft & Silverman, 2002). Bancroft and Silverman (2002) described a common situation leading to adolescent violence towards parents as one where a mother has separated from an abusive partner and her child or children assume the violent ex-partner’s role following separation. Another important factor to consider involves shared parenting following a mother’s separation from a father in cases where there is a history of domestic violence (Gallagher, 2008). The influence of a domestically violent father on a child’s attitude and behaviour should not be overlooked when a situation of adolescent violence toward the mother arises (Gallagher, 2008). Bancroft and Silverman (2002) stated that when perpetrators of intimate partner violence have continued access to children after separating from the mother, there is a risk of the mother’s parenting and her relationship with the child being continuously undermined. It is possible that following parental divorce or separation, teenagers may resent the parent they live with (in most cases, the mother) for disrupting their lives. In their research, Agnew and Huguley (1989) found that the abuse of a parent by an adolescent child was more prevalent in families where the adolescent’s parents were separated or divorced, however this finding was not statistically significant. There is also some research to suggest perpetrators (usually female) of adolescent violence towards parents often come from more disturbed homes such as those involving separated or bereaved parents or families affected by abuse (Davies and Windle, 1997; Robbins, 1966).

3.4 Adolescent Characteristics

3.4.1 Gender Factors

It has been widely established that adolescent violence towards parents is perpetrated by both males and females (Boxer, Gullan & Mulhoney, 2009; Walsh & Kreinert, 2007; Kethineni, 2004; Pagani, et al, 2004; Gallagher 2004a & 2004b; Cottrell, 2003;
Paterson, et al, 2002; Cottrell, 2001; Cottrell & Finlayson, 1996; Paulson, et al, 1990; Agnew & Huguley, 1989; Pagelow, 1989; Cornell & Gelles, 1982). However, it is important to note that empirical evidence pertaining to the sex of adolescents who are violent towards their parents has been inconsistent. Some researchers have reported equal levels violence towards parents from boys and girls (Paulson et al, 1990; Cottrell, 2001; Paterson, et al, 2002). However, some have reported that girls are more likely than boys to abuse a parent (Walsh & Kreinert, 2007; Paulson, et al, 1990; Agnew & Huguley, 1989). For example, Agnew and Huguley (1989) found a 9.7% rate of females inflicting abuse against a parent compared with 8.8% for males, and Paulson, et al (1990) reported that 15% of the females in their study were abusive towards parents compared to 12% of the males. In Walsh and Kreinert’s (2007) research, females were found to be significantly more likely than males to abuse their mothers.

In contrast, other research has reported that males are the usual perpetrators of adolescent violence towards parents (Stewart, et al, 2007; Stewart, et al, 2006; Gallagher, 2004a & 2004b; Evans & Warren-Sohlberg, 1988; Cornell & Gelles, 1982). For example, Evans and Warren-Sohlberg (1988) found that violence towards parents from sons accounted for 65.7% of the cases reviewed. In the majority of these cases, the abuse was perpetrated against the mother (49.3% of all cases studied compared to 16.4%). A similar finding was uncovered by Stewart, et al (2006) who found that 70.3% of the abusive adolescents described in their study were male. This figure is consistent with later research by Stewart, et al (2007), who found that 72.7% of the perpetrators described in interviews with 22 victimised mothers were male. In his clinical sample of 77 children in 73 families affected by adolescent violence, Gallagher (2004a) found that boys outnumbered girls considerably with 86% of the sample consisting of males.

Gallagher (2004a) pointed out an evident trend that the more serious an act of abuse, the greater the gender difference with regards to the frequency of perpetration. For instance, when verbal abuse is measured, males and females are said to be equally as likely to be perpetrators whereas when it comes to serious physical abuse, the gender disparity increases with males being the most likely perpetrators. According to Gallagher (2004a), this gender disparity is at its greatest when murder (i.e. parricide) is examined, with males comprising the majority of perpetrators. This is consistent with other literature surrounding parricide, which has suggested that sons are the most frequent perpetrators of homicide against their parents (Heide & Petee, 2007; Hart & Helms, 2003; Marleau, Millaud, & Auclair, 2003; Hillbrand, et al, 1999; Heide, 1993; Heide, 1992).

In U.S research involving 83 adolescents who were charged with violence against their parents, Kethineni (2004) found that 62.7% of the abusive adolescents in their sample were male and 37.3% were female. Furthermore, Cornell and Gelles (1982) interviewed 608
families with adolescent children residing at home and found that 11% of the male adolescents in their sample were abusive towards parents compared with 7% of the females. Researchers have suggested that when boys are exposed to domestic violence, they are more likely than girls to become abusive towards family members themselves (e.g. Cottrell, 2001). This may be a result of boys having a stronger inclination than girls to identify with violent fathers (Cottrell, 2001). Bobic (2002) emphasised that socially conditioned expectations of males to be tough and show no emotional vulnerability are largely responsible for high rates of aggression in young males.

In research conducted by Boxer, et al (2009), 57.4% of the sons and 49.1% of the daughters in 232 two-parent families were classified as physically aggressive towards their parents over a one-year period (Boxer, et al, 2009). There was no significant difference between boys and girls relating to their likelihood of behaving aggressively towards their mothers, however boys were significantly more likely than girls to engage in physically aggressive behaviours towards their fathers (Boxer, et al, 2009). Given the large body of literature indicating that adolescent violence towards parents occurs in sole-parent as well as two-parent families, omitting information from sole-parent families is a limitation of Boxer et al’s (2009) research as the research design is likely to mean that a significant number of situations where an adolescent has been violent towards a sole-parent mother or father have been excluded. Therefore, these results can only be interpreted in terms of how they apply to two-parent households.

As noted, there is some empirical evidence to suggest that girls and boys are equally likely to be responsible for abuse against their parents (Paulson et al, 1990; Cottrell, 2001; Paterson, et al, 2002; Pagani, et al, 2004). However, despite the similar gender representation in the frequency of abuse, differences have been reported with regard to the types of violence perpetrated by the two sexes (Brezina, 1999; Evans & Warren-Sohlberg, 1988; Cornell & Gelles, 1982). Some authors have suggested that boys are more likely than girls to use physical aggression as a form of abuse (e.g. Brezina, 1999; Evans & Warren-Sohlberg, 1988; Cornell & Gelles, 1982), whereas girls are more likely to use emotional and verbal abuse (e.g. Evans & Warren-Sohlberg, 1988). Some studies have supported the notion that violence from adolescent males towards parents is usually more serious and more likely to result in physical or psychological harm than violence from females (e.g. Brezina, 1999; Cornell & Gelles, 1982). For example, Brezina (1999) suggested that incidents of adolescent violence towards parents are more likely to involve the use of a weapon when perpetrated by sons as opposed to daughters. Similarly, Cornell and Gelles (1982) found that in their sample of 608 families, sons were more likely to use severe forms of aggression than daughters (3.4% compared to 2.8% respectively). Therefore, research suggests that when physical abuse is studied alone in relation to adolescent violence
towards parents, there are generally higher rates of perpetration for boys than girls, with sons committing physical acts of violence against their mothers representing the most common form of abuse (Evans & Warren-Sohlberg, 1988; Paterson, et al, 2002). However, if emotional, financial, and psychological forms of abuse are included, daughters have been shown to be no less violent than sons (Paulson, et al, 1990). However, it is worth noting that Kethineni (2004) found that males and females in their study committed similar levels of physical violence with regard to the violence severity, even though the males committed such violence more frequently than the females.

One potential reason for those research findings that suggest that male adolescents are more likely to engage in physical aggression towards their parents than females is that boys may be more likely than girls to believe that asserting control and dominance over females is acceptable (Kennair & Mellor, 2007; Howard 1995). According to Gallagher (2008), cultural stereotypes often paint a picture of males being superior to females. For some boys, such stereotypes can lead to conflict when a female (usually a mother) attempts to set boundaries or impose discipline (Gallagher, 2008). It has been argued that such a belief in adolescent males is often the product of growing up in a home environment where they have been exposed to similar attitudes (often expressed by a father or other significant male in the family) and/or violence against women (e.g. the abuse of the mother by the father) (Gallagher, 2004a: Howard, 1995). Thus, they are said to be modelling such behaviours and attitudes. A possible explanation for this modelling in males is that they are more likely to identify with an abusive father or male sibling than their female counterparts (Bandura, 1973).

Another reason that boys may be more likely to be abusive towards mothers than girls is that boys may be more affected by parental separation because these situations typically involve separation of the male child from their same-sex parent (Gallagher, 2008). It is also possible that empirical results suggesting that male adolescents are more physically violent towards parents than females result from the simple fact that the size and strength of males in comparison to females make them more capable of inflicting physical harm to others than females (Howard & Rottem, 2008). However, keeping this in mind, there appear to be gender differences with regard to how abusive behaviour is understood (Boverman & Boverman, 1970), and as a result, there may be an overrepresentation of boys as perpetrators of adolescent violence in research and clinical data. This is because boys may be more likely to be referred to professional help for abusive behaviour as such behaviour is often seen as more threatening and serious when perpetrated by boys in comparison to girls (Gallagher, 2008). On the other hand, when abuse is perpetrated by females, it is less likely to be normalised and is instead more likely to be viewed as pathological when compared with the same behaviour in boys (Maccoby, 1998). Therefore, it
is common for people to have less tolerance for violence perpetrated by adolescent girls and more expectations of violence from adolescent boys, leading to violence by boys being more readily accepted than violence by girls. Therefore, it is important to consider these factors before drawing conclusions about what gender is more likely to engage in violent behaviour towards their parents.

3.4.2 Age Factors

With regard to the age during which an individual is most likely to be violent towards a parent, Harbin and Madden (1979) found that the most common age range of individuals who were violent towards their parents was between 13 and 24 years. However, this research did not specifically attempt to uncover the age at which an adolescent is most likely to be abusive towards a parent. Rather, the research examined violence towards parents in general. Therefore, it can be concluded by Harbin and Madden’s (1979) research that the most common situation involving the abuse of a parent in their study was that of adolescent violence towards parents. With regard to the age of onset of violent behaviours specifically perpetrated by adolescents, Paulson, et al (1990) found that adolescents between the ages of 9 and 11 were less likely to physically assault their parents than adolescents aged between 12 and 14 and those between 15 and 17, with their physical violence towards being measured at frequencies of 7%, 17% and 16% respectively.

In more recent research, Eckstein (2004) found that the parents in their research began to experience verbal aggression from their adolescent children when they were between the ages of 11 and 13. In the majority of cases, this verbal abuse progressed to physical and emotional abuse when the adolescent reached the ages of 13 to 16 years (Eckstein, 2004). This is consistent with Sheehan’s (1997) research, as the majority (50%) of the violent adolescents in the sample were aged between 11 and 14 years, followed by 32% who were aged between 15 and 17 years. In fact, 15 years appears to be the most common age group for adolescents becoming violent towards a parent as Kethineni’s (2004) research uncovered that the ages of the abusive adolescents in their sample ranged between 11 and 18 years, and the mean age group was 15.2 years. Similarly, the mean age of the abusive adolescents in a study conducted by Evans and Warren-Sohlberg (1988) was 15.7 years and Adams and Doherty (1994) found that adolescents aged between 15 and 17 years were the most common perpetrators of abuse towards parents in their research. Furthermore, it was reported by McElhaney and Effley (1999) that adolescents between the ages of 15 and 16 years were at the greatest risk of becoming violent towards a parent, and the most commonly reported age of onset of adolescents’ abusive behaviours in Stewart, et al’s (2006) research was 13-15 years (42.9% of cases) followed by 16-18 years (18.7% of cases). The age of the adolescents’ in question when the behaviour was described as being
“at its worst” was evenly distributed across the age ranges of 13-15 years (33% of cases) and 16-18 years (31.9% of cases) (Stewart, et al, 2006). It would appear, as these results suggest, that adolescent violence towards parents varies with regard to the age on onset and the ‘peak’ age. However, 15 appears to be the most common age that such behaviour has been reported in the existing literature.

3.5 **The Victimised Parent**

3.5.1 **Mothers as the Most Common Targets**

Most of the literature on violence towards parents perpetrated by young people has reported that mothers are more likely than fathers to experience this form of abuse (e.g. Walsh & Kreinert, 2007; Kethineni, 2004; Gallagher 2004a & 2004b; Pagani, Larocque, Vitaro, & Tremblay, 2003; Eckstein, 2002; Bobic, 2002; Nock & Kazdin, 2002; Kozu, 1999; Paulson, et al, 1990; Agnew & Huguley, 1989; Evans & Warren-Sohlberg, 1988; Honjo, 1988; Wells, 1987; Cornell & Gelles, 1982; Kumagai, 1981; Harbin & Madden, 1979; Warren, 1978). For example, in Evans and Warren-Sohlberg’s (1988) research, 82.2% of cases studied involved abuse perpetrated against a mother compared to 17.8% of cases in which the father was victimised. Paulson, et al (1990) found that the majority (47.5%) of their sample of adolescents who had physically assaulted their parents were abusive only to their mother, whereas 31.1% were violent only towards their father and in 21.3% of cases, the abuse was directed at both parents. In their clinical sample of 606 cases, Nock and Kazdin (2002) found an 88% rate of parent-directed aggression towards biological mothers, followed by adoptive mothers (5.4%), other types of guardians (4.1%), and biological fathers (2.7%). Walsh and Kreinert (2007) found that mothers were victims in 70% of the cases they examined, and biological mothers were the most frequently targeted. In Gallagher’s (2004a) clinical sample of abusive adolescents, 99% victimised their mothers (84% were abusive solely towards mothers and 15% were abusive towards both parents). This means that only 1% of the sample were abusive solely towards fathers. In total, 16% of the adolescents in Gallagher’s sample were abusive towards fathers, although as noted, most of these were violent towards both parents. These results provide support for the notion that mothers are more likely to experience violence from an adolescent child than fathers.

The reason for the above results could be that it is common for children to be parented solely or primarily by women who are in turn, more accessible and thus more likely to be abused (Kennair & Mellor, 2007). For instance, in Kethineni’s (2004) research, the majority of adolescents studied who had been violent towards a parent lived with their mother and mothers were the usual targets of the abuse, accounting for 81% of cases examined. In single-parent homes, mothers are typically the primary caregivers, which
Walsh and Kreinert (2009) argued is a factor that places them at increased risk of being victimised by a violent child. It has also been proposed that due to a perception of father’s being physically powerful, young people may be less likely to become abusive towards fathers because they recognise that they are less likely to gain control over a father than a mother (Kennair & Mellor, 2007; Cottrell, 2005). Cottrell (2005) argued that fathers may be more readily viewed by their children as strong and intimidating, thus decreasing their risk of being victimised. It is also reasonable to suggest that in circumstances where there is a history of family violence (whereby the mother has been victimised), the mother may be looked upon by her children as a deserving victim, or her prior victimisation may impact on her ability to be assertive with her children during periods of conflict. When the impact of a mother’s experience of family violence becomes a defining part of her daily routine, she is at risk of her children losing respect for her and possibly blaming her for the family’s issues (Jaffe, Wolfe & Wilson, 1990).

In many cases, interactions between mothers and their children are regarded as being of a closer and more personal nature than those between children and fathers. Maternal authority may be compromised by this disparity in closeness, resulting in mothers becoming more likely targets of abuse from their children (Youniss & Smoller, 1985). Interestingly, although an overwhelming majority of research points to mothers being the most frequent targets of adolescent violence, the literature and statistics pertaining to parricide suggest that fathers are more likely to be murdered by adolescents than mothers. However, a large number of parricides committed by adolescents are said to be the result of self-defence or retaliation (Gallagher, 2008).

3.5.2 Coping Strategies of Victimised Parents

Stewart, et al (2007) uncovered a wide range of coping mechanisms employed by the mothers of abusive adolescents. These included: seeking formal and/or informal support; working with their partner (often the young person’s father) to try to end the abusive cycle; avoidance; confronting or disciplining the adolescent; employing negotiation tactics; and emotionally withdrawing from the adolescent (Stewart, et al, 2007). According to Stewart, et al (2007), mothers in two-parent families who had support from the other parent, and single mothers who were able to take action in response to their adolescent’s behaviour without interference from their estranged partners reported the most favourable outcomes. Many of the women in Stewart, et al’s (2007) study described a lack of support from their partner. In some cases, partners were absent from the abusive adolescent’s life, and many mothers described partners as being disengaged or not supportive of their efforts to resolve the violent situation (Stewart, et al, 2007). Some mothers reported that their partners (and former partners) blamed the adolescent’s violence on the mother (Stewart, et al, 2007).
Furthermore, some of the mothers described their partners or ex-partners as role-models of negative behaviours and attitudes, most often towards sons (Stewart, et al, 2007). These findings suggest that in situations where a mother is on the receiving end of adolescent violence, the degree of support offered by the non-victimised parent or guardian is an important factor, regardless of whether the family remains intact.

According to Gallagher (2004a), where parental responses to adolescent violence are concerned, there is currently no such thing as a 'normal' and socially sanctioned response. Parents are often given conflicting advice when they seek strategies to help alleviate the problem (Gallagher, 2004a) as what is deemed appropriate by some people sits in contrast with the beliefs and values of others, and a response that works for one person’s situation may not work for another. In Gallagher’s view, a common mistake that many parents make is trying to fit the punishment to the crime. It is unnecessary and unrealistic to apply a logical consequence for someone’s behaviour that reflects the seriousness of the injustice, especially when the behaviour in question is abusive (Gallagher, 2004a).

### 3.6 Family Structure & Socio-Economic Status (SES)

Anecdotal evidence suggests that adolescent violence towards parents occurs predominantly within single-parent families (Bobic, 2002). However, without official statistics about the prevalence of such violence and with very few primary studies, it is difficult to support or reject this notion (Bobic, 2002). However, there has been some empirical evidence to the contrary. For example, in their study of police reports of complaints concerning adolescent violence towards parents, Evans and Warren-Sohlberg (1988) found that 54 percent of incidents occurred in two-parent families compared to 46 percent that were headed by sole-parent mothers. In Laurent and Derry’s (1999) research, 64% of cases involving adolescent violence occurred in two-parent families compared to only 36% involving sole-parent families. Nonetheless, it is noteworthy that Paulson, et al (1990) found that the adolescents in their study who had been physically violent towards a parent were less likely than their non-violent counterparts to describe their parents' relationship favourably. Sheehan (1997) found an even distribution of violent adolescents in sole-parent (41.5%) and two-parent families (41.5%), suggesting no relationship between family structure and adolescent violence in the cases examined.

With regard to the socio-economic status of families affected by violence within the family, historically, it was believed that such abuse was confined to the lower class (Gallagher, 2008). Such a belief fuels the misconception that individuals of lower SES were more likely than those of the middle-upper classes to experience any kind of family violence. However, according to Gallagher (2004a), parents who are victimised by their children (particularly those in two-parent families) are often well educated and of middle-class SES.
This view has been supported by Paulson, et al's (1990) research, as the majority (72%) of adolescents who were physically abusive towards their parents came from families of middle to upper-class SES. Peek, Fisher and Kidwell (1985) found no relationship between SES and adolescent violence towards parents. Similarly, Agnew and Huguley (1989) found very little relationship between SES and adolescent violence. However, it was reported by Agnew and Huguley (1989) that families where parents' occupations placed them in the middle to upper class category were, to a small extent, more likely to experience adolescent violence. It is important not to generalise the trends and findings reported in this section across all instances of adolescent violence towards parents as labelling particular types of families as the most likely to experience adolescent violence is highly problematic because it suggests particular ‘typologies’ of victims and their families. Attributing violence to particular types of families may contribute to the reluctance of victimised parents to disclose or report their experiences of abuse due to the feelings of shame and guilt experienced as a result of not having a ‘perfect family’ (Bobic, 2002).

3.7 Barriers to Seeking Help

3.7.1 The Secret Nature of Abuse

It is common for parents affected by adolescent violence to keep their experiences of abuse to themselves and they will often go to great lengths to keep the abuse hidden or deny its seriousness (Charles, 1986; Harbin & Madden, 1979). Sheehan (1997) stated “parents may often be reluctant to talk about violence from an adolescent within the family until it has reached unbearable levels” (p 81). Although adolescent violence towards parents is estimated to be more prevalent than other forms of family violence such as intimate partner abuse and child abuse, it is the least likely form of abuse to be reported to formal agencies (Charles, 1986). For instance, more than half (66%) of the mothers surveyed in Stewart, et al’s (2006) research had not talked to anyone about their experience of abuse and of the 44% who did disclose, only a very small number confided in formal services as the majority spoke only to family members and close friends.

According to Eckstein (2004), parents who disclose their experiences of adolescent violence often minimise the abuse severity and do not wish to obtain outside help for their situation. When the issues of shame, fear, and the secret nature of abuse within the family are considered, it should come as no surprise that many parents are unwilling or unsure of how to seek help for adolescent violence (Howard & Rottem, 2008; Stewart, et al, 2001). However, such responses from parents may cause adolescents to perceive their abusive behaviours as acceptable and tolerated, leading to recurring abuse and parents’ adoption of
a normative sense of helplessness (Sheehan, 1997; Price, 1996; Gehring, Wentzel, Feldman, & Munson, 1990).

Researchers have often reported shame and guilt as key reasons for parents’ reluctance to seek help when they are experiencing adolescent violence (Bobic, 2004; Eckstein, 2004; Cornell & Gelles, 1982). According to Cornell and Gelles (1982), parents often avoid communicating with others about their experiences of adolescent violence because they have blamed themselves for the abuse. For example, in Stewart, et al’s (2007) research, some of the women interviewed believed that they had contributed to their adolescent children’s abusive behaviour because as parents they saw themselves as uninformed or ‘too weak’. Cornell and Gelles (1982) also pointed out that victimised parents are frequently blamed by others for their experiences of abuse. This may result from a common tendency to view children as products of the parenting they have received (Gallagher, 2004b). Therefore, it is not surprising that when parents are abused by an adolescent they are often assigned sole responsibility for the abuse, which only serves to further compound their experience. In addition, some researchers have suggested that when adolescent violence occurs, mothers are more likely to be blamed than fathers, which can lead them to question their parenting ability (Howard & Rottem, 2008).

### 3.7.2 The Parent-Child Relationship

According to Crichton-Hill, et al (2004), the issue of the under-reporting of adolescent violence towards parents is likely to be influenced by the nature of the relationship between abused parents and their abusive children. Help-seeking for mothers experiencing adolescent violence is further exacerbated by the fact that women are often encouraged to separate from violent partners (which is difficult enough in itself), but their role as mothers inhibits their ability/willingness to separate from a violent child (Stewart, et al, 2006).

### 3.7.3 Limited Resources & Understanding in Services

Monk’s (1997) research involving interviews with victimised mothers, violent adolescents, and service providers revealed that a lack of available services, interventions and support was a key factor that reinforced the abuse of parents by their adolescent children. In more recent literature, Stewart, et al (2005) asserted that effective assistance to victims of adolescent violence in the home is most likely hampered by a lack of knowledge across service providers coupled with low levels of public awareness of adolescent violence towards parents as a family violence issue. For example, two mothers in Stewart, et al’s (2007) study asked school and health professionals for help with their situation and received a dismissive response as it was suggested to them that the abuse they had endured was nothing more than normal teenage behaviour. Stewart, et al (2005) suggested that providing
adequate support to those affected by this form of abuse is dependent on practitioners’ ability to apply knowledge of family violence issues to adolescent violence situations. Thus, for support to be appropriate, it is important that service providers understand the dynamics of adolescent violence towards parents.

In addition to service provider knowledge being an important issue that is likely to impact on the effectiveness of interventions for parent victims of adolescent violence, the ability of service providers to take action when abuse is disclosed has also been identified as an issue. Parents often report that when they seek help, they are sent from one agency to another while professionals attempt to ascertain the cause of the abuse and find a possible solution (Bobic, 2002). Bobic (2002) argued that most agencies are simply not well-equipped to address the issue of adolescent violence towards parents which means that there is a serious lack of information available to parents to help them deal with such a situation. As a consequence, many victimised parents are simply not aware of the most appropriate agencies that can assist them and in turn, their needs when seeking help are not met (Bobic, 2002). It has also been suggested that some parents may actually fear certain types of agencies regardless of the effectiveness of help that these agencies can provide. For example, Eckstein (2004) found that parents in their research did not feel that they could approach the legal system for assistance with their situation. It is possible that parents fear being blamed by particular agencies, especially those such as legal, police and child protection agencies, due to popular (yet often mistaken) beliefs that involving these agencies will result in the parents being punished for their child’s behaviour.

Assisting parents to deal with the issue of adolescent violence in the home without appearing to blame the parents for the abusive situation represents a significant challenge for service providers. Weingarten (1994) argued that mothers tend to be placed into one of two categories: ‘good’ mothers and ‘bad’ mothers. According to Weingarten (1994), ‘good’ mothers are seen as those who have the ability to prevent the development of problems (such as adolescent abuse of parents) and mothers who cannot prevent such problems or resolve them are regarded as ‘bad’ mothers. Viewing mothers as ‘good’ or ‘bad’ does not provide mothers with autonomy and may restrict their sense of self leading to disempowerment (Weingarten, 1994). In Weingarten’s (1994) view, such a loss of self-concept can exacerbate the problem of adolescent violence in the home as mothers are at risk of becoming less confident and therefore less able to implement effective strategies and clearly define areas of responsibility for themselves and their children.

3.7.4 Societal Attitudes

The isolation experienced by parents affected by adolescent violence is frequently reinforced by the lack of awareness and understanding in society about the issue (Bobic,
2002). One such belief that is often communicated is the notion that it is not possible for a child to abuse a parent. Violence against a parent perpetrated by an adolescent is a concept that many people find difficult to understand as family and domestic violence is typically seen as abuse of the less powerful by the more powerful (Downey, 1997; Finkelhor, 1983). Children are typically viewed as being less powerful than their parents, therefore when abuse is occurring between an adolescent and a parent there is a tendency to assume that the parent must be the perpetrator. This is because adolescent violence towards parents is violence committed by someone supposedly less powerful towards someone expected to be more powerful (Downey, 1997). Therefore, the continued failure of society to understand that it is possible for a parent to be victimised by their child is not surprising. People simply do not expect younger people (who are expected to have less power) to be abusive towards older ones, let alone their own parents. There is also a tendency for such abuse to be minimised and trivialised by society. According to Edgette (2002) “Society historically has tended to indulge the concept of adolescence by romanticising misadventures and improprieties as ‘stuff teenagers do”. As Edgette (2002) pointed out, people often assume that problematic teenage behaviour is ‘typical teenage behaviour’ and thus there is a failure to regard behaviour such as abuse as a serious injustice that warrants attention and intervention. Furthermore, as Edgette (2002) articulated, such a belief is also largely responsible for abusive adolescents adopting inflated senses of entitlement and deflated senses of responsibility. Another problematic attitude concerning adolescent violence towards parents is that such abuse brings shame upon the family and should thus be kept hidden from those outside of the family unit. Beliefs, values, and attitudes about the family that support the notion that all conflict occurring within the family should remain private also serve to inhibit one’s ability to seek help when a family member is abusive towards them:

    Historically, the sanctity of the family, with its culturally and politically maintained privacy and autonomy, has allowed the perpetration of many abuses to its members (Charles, 1986, p 343).

    Societal attitudes related to the ‘mothering role’ are also important to consider. The wellbeing of children has been traditionally regarded as primarily the responsibility of women, and this has resulted in mothers being faced with high expectations with regard to the parenting standards they are required to adhere to (Fish, et al, 2009). According to Fish, et al (2009), this has contributed to the ideal of a ‘good’ mother, one that is seen as nurturing, self-sacrificing, and always placing her children’s needs ahead of her own. A common consequence of such expectations about mothering in situations involving any form of family violence is that responsibility is often removed from the individual perpetrating the abuse and instead, attention is focused on the mother (Fish, et al, 2009). For instance, mothers tend to be blamed if children are harmed as a result of abuse, or if they are
exposed to abuse, regardless of who is directly responsible (Fish, et al, 2009). Furthermore, when a child has psychological or behavioural problems, his/her mother is generally held accountable (Fish, et al, 2009).

Mothering is socially and culturally constructed (Silva, 1996). Although women are the ones who carry and give birth to children, men are equally as capable of caring and providing for them. However, caring for children continues to be regarded as primarily the responsibility of the mother (Fish, et al, 2009). The question remains as to why the ‘fathering role’ is not subjected to the same level of scrutiny as the ‘mothering role’ when the issue of family and domestic violence is raised in relation to its impact on children (Fish, et al, 2009). When any form of family violence occurs in families with children, women are commonly held responsible for addressing the violence and protecting the children from it, therefore they are blamed when the abuse continues (Humphreys, 2007). According to Lapierre (2007), such mother-blaming is often responsible for mothers adopting feelings of guilt and subsequently blaming themselves for their own victimisation. Women who are affected by any form of family violence require the most support during this time. However, negative perceptions of women’s mothering can be most influential during these times and will only serve to hinder their ability to attain help and support when they need it the most (Fish, et al, 2009). Furthermore, when a mother is blamed for any problem that affects her child (for example, intimate partner abuse or adolescent violence), it is not surprising that young people’s views of their mother are also affected. As a result, the implicit message they receive is that their mother is to blame for her own victimisation and that further abuse against her is justified due to her own failure to put an end to the problem (Fish, et al, 2009).

3.8 The Effects of Adolescent Violence towards Parents

Families can be affected by adolescent violence in the home in a variety of ways (Bobic, 2004). Like other forms of family violence such as intimate partner abuse, adolescent violence towards parents may cause family members to distance themselves from one another and from friends and peers (Bobic, 2004; Miccuci, 1995). Adolescent violence can also result in family relationships becoming focused almost entirely on the violence resulting in channels of communication between family members becoming restricted (Miccuci, 1995). Furthermore, like other forms of family violence, the abuse of parents by adolescents is an issue that frequently remains unspoken outside of the family. Such abuse is generally described as a ‘phase’ or ‘typical teenage rebellion’ (Stewart, et al, 2006). It is not the case that victimised mothers accept or condone such abuse. Rather, it takes time to recognise such behaviours as abusive and subsequently find ways to deal with them (Stewart, et al, 2006).
3.8.1 The Parents’ Functioning

When parents are victimised by their children, it is common for them to lose self-esteem and confidence (Gallagher, 2004a). As a result, they may become socially isolated and in many cases, experience feelings of shame (a key reason why they frequently keep the abuse to themselves). It is important to assess the impact that adolescent violence has on parents’ perceptions of their parenting (Eckstein, 2004). A woman’s parenting can be impacted significantly as a result of her experience of any form of family violence. This includes her perception of herself as a mother and her relationship with her children (Fish, et al, 2009). While some of the existing literature has suggested that particular parenting behaviours may account for adolescent violence (e.g. Paulson, et al, 1990; Robinson, Davidson & Drebot, 2004), other research has focused on how adolescent violence may account for particular parenting behaviours (e.g. Eckstein, 2004). In some cases, an abusive situation can escalate to a point where parents become silenced by the threat of the adolescent’s pending violence (Edgette, 2002). This can happen as a result of parents beginning to doubt themselves, losing the energy to deal with the problem, becoming overwhelmed or frustrated, or being unsure of what to do or say next to aid the situation (Edgette, 2002).

In Eckstein’s (2004) study of 20 parents affected by adolescent violence, many of the parents interviewed described situations where they found themselves feeling powerless as parents as a result of the abuse they had endured. These parents experienced a gradual decline in the effectiveness of their parenting strategies (e.g. forms of discipline such as setting consequences for unfavourable behaviour) (Eckstein, 2004). It was common for parents to express feelings of powerlessness in relation to effectively resolving conflict between them and their adolescent in a manner that reduced or prevented further abuse (Eckstein, 2004). It is unclear from the results of Eckstein’s research as to whether the perceived powerlessness and lack of parental confidence resulted from parents’ victimisation at the hands of their adolescents or whether these parenting problems existed before the abuse took place and actually contributed to the abuse onset by making the parents ‘easy targets’.

It is common for parents who experience abuse at the hands of an adolescent child to report feelings of ‘walking on eggshells’ and describe instances where they ‘tip-toe around their children’ (Gallagher, 2004a). In Edgette’s (2002) view, such a reaction to abuse is ineffective at managing the situation as teenagers who engage in such behaviour often do so out of hope that the parent will ‘back off’. Therefore, ‘tip-toeing’ around an abusive adolescent allows them to receive positive reinforcement of the abusive behaviour that led to such a response that is ultimately favourable to the adolescent (Edgette, 2002). In other words, if an adolescent behaves abusively in order to get a parent to leave them alone and if
in turn, that is exactly what the parent does, the adolescent is likely to learn that behaving abusively will result in them getting exactly what they want without being held accountable. As Edgette (2002) asserted “repeatedly accommodating an adolescent’s sullen mood or negative attitude allows him or her to avoid feeling accountable for how his/her behaviour affects other people”.

3.8.2 The Adolescents’ Functioning

Some research has suggested a relationship between aggression at school (e.g. towards peers) and adolescent violence in the home (Pagani, et al, 2004). Pagani, et al (2004) found that of the adolescents in their sample, those described by their teachers as aggressive in the school environment between the period of kindergarten and mid-adolescence, were nine times more likely to engage in verbal aggression and four times more likely to engage in physical aggression towards their mothers during adolescence. It is not clear from these results as to whether adolescent violence in the home was a predictor of aggression at school or if aggression at school was a predictor of adolescent violence in the home. However, the issue of adolescents’ problems at school has been frequently noted in the literature on the abuse of parents by adolescent children. For example, in Sheehan’s (1997) sample of abusive adolescents, 41% were enrolled in school but were not attending classes compared with 35% who were regularly attending school. Of the remaining adolescents, 12% had left school but were unemployed and 12% had left school and were employed either full-time or part-time (Sheehan, 1997). Sheehan (1997) reported that 23% of the sample experienced problems at school.

In Paulson, et al’s (1990) research, it was noted that the adolescents classified as ‘hitters’ were more likely than those who had never hit a parent to become bored at school, commit truancy, or fail to complete homework. Furthermore, 34% of the ‘hitter’ group regarded their education as unimportant compared to 19% of those classified as ‘non-hitters’, and 12% of the ‘hitters’ reported that they would consider dropping out of school in contrast with 3% of the ‘non-hitters’ (Paulson, et al, 1990). The adolescents who had never been physically abusive towards their parents were generally happier than those who had, and the ‘hitters’ were twice as likely as the ‘non-hitters’ to report feelings of depression (Paulson, et al, 1990). In Sheehan’s (1997) study, 38% of adolescents who had been abusive towards a parent had run away from home on at least one occasion, 25% had criminal charges, 25% reported self-harming behaviours and perhaps most disturbingly, 32% had either attempted suicide or talked about committing suicide. Paulson, et al (1990) also found a potential relationship between adolescent violence towards parents and low self-esteem as a lower proportion of the ‘hitters’ in their sample reported that they liked themselves (52%) compared with the ‘non-hitters’ (78%). This may imply that the factors
responsible for an adolescent becoming abusive towards a parent may also contribute to low-esteem. It is unclear whether low self-esteem is a potential cause of adolescent violence or if adolescent violence results in low self-esteem. Future research efforts could benefit from exploring the link between adolescent violence and self-esteem in more detail.

3.8.3 The Functioning of the Affected Family

Individual family members may also find themselves faced with strained interpersonal relationships as a result of adolescent violence in the home (Kennair & Mellor, 2007). This is because fear of exposure of the family’s secret may cause them to distance themselves from other people and instead focus all or most of their attention on the abuse situation (Bobic, 2004). A key reason that many families will go to lengths to protect ‘the family secret’ when abuse is an issue is the feeling of shame associated with the situation and the fear of blame from outsiders (Bobic, 2004). Sheehan (1997) argued that the concept of blame can interfere with a family’s ability to deal with the problem of adolescent violence when it occurs. According to Sheehan (1997), when the problem is attributed solely to one family member, that person may be expected by other family members to take all of the responsibility for change. If the problem of adolescent violence can be seen as one that both affects and involves all family members in various ways, the family may be placed in a better position to work together to resolve the problem (Sheehan, 1997).

3.9 Australian Qualitative Research

3.9.1 Howard & Rottem (2008)

In a recent Australian study that inspired the current research, Howard and Rottem (2008) conducted qualitative interviews with ten women in Victoria who had experienced abuse from an adolescent son. The key purpose of this research was to document women’s experiences in order to gain insight into the impact of adolescent violence against mothers (Howard & Rottem, 2008). The adolescent sons discussed in this study were aged between 13 and 19 with an average age of 15.5 years (Howard & Rottem, 2008). The mean age of the women was 46. Most of the women reported that their sons had become abusive towards them by the time they were 12 years old. Most women felt that they had lost control of their sons by the time they reached the age of 15 (Howard & Rottem, 2008).

It was reported that most of the sons blamed their mothers for their abusive behaviours (Howard & Rottem, 2008). These abusive behaviours included psychological abuse, emotional abuse, verbal abuse, physical abuse, and financial abuse, with the most common forms of abuse involving damage to property and verbal abuse (Howard & Rottem, 2008). The emotional impact of the violence was profound in all ten cases as the women’s mental, emotional, financial, and physical wellbeing were affected (Howard & Rottem, 2008).
Most of the women had become socially isolated and spoke of how their sons' violence prevented them from having a social life. The destruction of their property as a result of the abuse, and the impact of the violence on their ability to work, compromised all of the women’s financial situations, and some women reported that the psychological impact of the violence was so severe that they were unable to work (Howard & Rottem, 2008). Many women stated that the abuse became so serious that they asked their sons to leave home (Howard & Rottem, 2008).

In terms of victim characteristics, the women came from a range of professional backgrounds (Howard & Rottem, 2008). All women in the study had been subjected to some form of abuse from the father of their abusive son and they reported that their sons had been exposed to their father’s abuse towards them (Howard & Rottem, 2008), suggesting a possible link between adolescents’ witnessing of abuse between their parents and their subsequent abusive behaviours (Howard & Rottem, 2008). Many of the women stated that their son’s abuse reminded them of their father’s behaviour. In fact, the majority of the women interviewed believed their sons’ violence reflected learned behaviours as a result of witnessing their father’s abuse in the past (Howard & Rottem, 2008). Furthermore, all women were sole-parent mothers (Howard & Rottem, 2008). Some of the sons described had little or no contact with their father (Howard & Rottem, 2008).

There was a tendency for the women in Howard and Rottem’s (2008) research to minimise their son’s abuse and describe the acts of abuse as expressions of affection. It was also evident that most of the women interviewed struggled with conflicting emotions about how they felt about their sons as a result of the violence (Howard & Rottem, 2008). There were concerns expressed about future acts of violence with many women stating that they felt powerless to protect their other children from the effects of the abuse. In addition, a significant concern expressed by the women in this study was that their sons would grow up to be violent towards women (Howard & Rottem, 2008). All of the women spoke about their sons’ disrespectful attitudes towards females and expressed grave concerns for their sons’ futures (Howard & Rottem, 2008).

With regard to the women’s help-seeking efforts, most reported seeking support from a range of services, some of which were identified as helpful. However, many services did not meet the needs of the women interviewed, with many women noting that some services did not respond to the seriousness of the abuse (Howard & Rottem, 2008). Furthermore, as a result of being a sole-parent, many women felt as though they had no one to ‘back them up’ when they sought assistance. For example, some women stated that their family blamed them for the violence and therefore inadvertently supported the violent sons’ behaviours (Howard & Rottem, 2008).
With regard to the characteristics of the sons described in Howard and Rottem’s (2008) research, most experienced developmental, behavioural, and learning difficulties from a young age, and many experienced anxiety, depression, suicidal ideation, self-harming, learning problems, and difficulty forming relationships. For instance, many of the sons had been bullied in social settings, some had threatened or attempted to harm themselves, some had experimented with fire, and some were diagnosed with ADD, ADHD or Asperger’s Syndrome (Howard & Rottem, 2008). Thirty percent of the women interviewed reported that their sons regularly consumed alcohol and used drugs. On the whole, most of the women felt that their sons were not adequately assisted to overcome their behavioural, social, psychological, and intellectual difficulties (Howard & Rottem, 2008).

The results reported by Howard and Rottem (2008) provide some interesting insight into the issue of adolescent violence towards mothers in Australia, particularly given the recency of the research. However, due to the small and specific nature of the sample, it is important to refrain from generalising the results of this research to all families who are affected by this issue. Nonetheless, this study has shed some light on the issue of adolescent violence towards mothers by revealing some clear trends and factors that were prevalent across the experiences of the ten women interviewed.

3.9.2 Jackson (2003)

Jackson (2003) conducted qualitative interviews with six mothers who had experienced violence from an adolescent son in Sydney, New South Wales. Two of the mothers were sole-parents and the remaining six were still married to the father of their children (Jackson, 2003). There was a history of domestic violence (that the violent son was exposed to) described by one of the participants (Jackson, 2003). All of the sons described were aged between 14 and 16 years when the violence became threatening, and the mothers felt that the physical size of their sons meant that they were unable to effectively deal with the violence (Jackson, 2003). Two of the participants reported that their sons were also abusive to other family members and that this abuse varied from pushing and shoving to striking and punching. All participants agreed that the discipline of their children became increasingly difficult as their children aged. In fact, in two cases, the mothers had to relinquish the care of their sons to other family members out of fear that the abuse would continue to escalate (Jackson, 2003).

All participants made causal links between their sons’ drug use and their violent behaviour (Jackson, 2003). Some of the mothers blamed themselves by suggesting that the violence they had endured was the result of their failure as mothers, and they felt that as adults, the onus was on them to put an end to the abuse. Jackson (2003) also noted that the shame and stigma experienced by these mothers made it very difficult for them to seek help
either formally or informally. This was further complicated by the limited understanding of this issue in society and the lack of useful information available to the public (Jackson, 2003).

Initially, all participants had kept their experiences of abuse hidden. They expressed that their feelings of shame, embarrassment, and distress had prevented them from disclosing the abuse (Jackson, 2003). Two of the women eventually sought assistance from extended family members, but none of the women accessed professional help. All of the women felt that they could have benefited from support from a professional service, but they all stated that they did not know how to go about obtaining help (Jackson, 2003). None of the mothers considered it an option to sever the relationship with their sons. Jackson (2003) concluded that widespread recognition of the fact that adolescent violence towards parents exists is essential. Furthermore, it was argued that there is an urgent need for supportive intervention for families affected by adolescent violence and that such intervention should be available to victimised parents, the adolescents themselves, and other family members (Jackson, 2003).

### 3.9.3 Anglicare Victoria & Precision Foundation (2001)

In 2001, Anglicare Victoria, in partnership with the Precision Foundation, interviewed six women who had taken part in a group program entitled “Breaking the Cycle: Making Changes” as a result of experiencing violence from an adolescent son or daughter. These women told their stories in the form of narratives that depicted their experiences and their perspectives surrounding the issue of adolescent violence towards parents (Anglicare Victoria & Precision Foundation, 2001). The six mothers interviewed came from a range of cultural, socio-economic, and family backgrounds (Anglicare Victoria & Precision Foundation, 2001). Two of the mothers spoke of abuse from a 15-year-old son, one described abuse from an 18-year-old son, one described abuse from a 13-year-old daughter, one talked about abuse from a 19-year-old daughter, and one mother described abuse that she had experienced from two daughters aged 15 and 16 years (Anglicare Victoria & Precision Foundation, 2001).

One mother emphasised the difficulty of being a parent in any circumstances, let alone when there is abuse in the family (Anglicare Victoria & Precision Foundation, 2001). She stated that learning how to be a mother happens the hard way and there is no job in the world more difficult. With regard to how the abuse affected participants’ parenting, one mother stated that she was too afraid to discipline her violent son out of fear of how he may retaliate (Anglicare Victoria & Precision Foundation, 2001). She said that when she did set limits or apply consequences, his violent behaviour increased in severity. One mother spoke of her son’s behaviour as reminiscent of his father’s abuse of her in the past (Anglicare
Victoria & Precision Foundation, 2001). The father in this case was described as having a hot temper that was often repeated by the abusive son. Another mother described experiences of fear and anxiety when she knew her abusive son would be home and she viewed herself as an easy target for his abuse (Anglicare Victoria & Precision Foundation, 2001). The same mother said that her son’s abusive behaviour towards her was occurring on a daily basis at one stage and she felt that she had no time to help herself cope with the abuse along with the other demands of her everyday life (Anglicare Victoria & Precision Foundation, 2001).

With regard to sibling violence, one mother stated that her son was often physically abusive towards his two sisters as he would pinch or push them on a regular basis (Anglicare Victoria & Precision Foundation, 2001). One mother talked about growing up in an abusive household with which her father was violent. The same mother stated that her father was not supportive of her situation with her abusive daughter and he often suggested that she deserved to have an abusive child (Anglicare Victoria & Precision Foundation, 2001). A different mother stated that at one stage she had blamed herself for the abuse she was experiencing because of her personality and parenting ability. Another mother said that before she received any support, she had viewed abuse from a son or daughter as something that mothers simply had to “put up with” (Anglicare Victoria & Precision Foundation, 2001). This woman also said that when parents blame themselves for the abuse they are experiencing, it is very difficult to seek assistance.

When help-seeking was explored, it was common for the mothers interviewed to express frustration and describe instances where they faced numerous barriers (Anglicare Victoria & Precision Foundation, 2001). One mother said that every time she approached a service for help, the service providers told her that they needed to work with the adolescent. In this woman’s circumstances, this was not possible as her daughter did not wish to engage with the services (Anglicare Victoria & Precision Foundation, 2001). Another mother that was interviewed faced the same problem. This mother said that counselling was ineffective as her abusive daughter did not want to go to sessions and many service providers did not adequately understand the problem (Anglicare Victoria & Precision Foundation, 2001). This mother commented that the ignorant attitudes of many services that she approached for help resulted in both her and her partner experiencing further anguish (Anglicare Victoria & Precision Foundation, 2001). Another mother approached a counsellor at her son’s school to discuss his behavioural problems and received an unhelpful response that reinforced the notion of her keeping such information to herself (Anglicare Victoria & Precision Foundation, 2001).

In addition to facing problems as a result of services being ill-equipped to deal with the problem, it was also common for the mothers in this research to feel apprehensive about
discussing their circumstances with other people. One mother commented that it was very difficult to disclose her experience of abuse because she felt that she would be “dobbing” on her son if she talked to someone (Anglicare Victoria & Precision Foundation, 2001). Another mother believed that obtaining legal protection or having an abusive child removed from the home was not a viable option for her due to her belief that it is important for a mother to preserve the relationship she has with her children. She emphasised that a woman can divorce a partner, but never a child unless the circumstances are those of extreme danger (Anglicare Victoria & Precision Foundation, 2001). Another woman highlighted the dilemma faced by many mothers about whether it is appropriate to involve the police in situations involving adolescent violence: “Who wants to dob their kids into the police?” (Anglicare Victoria & Precision Foundation, 2001, p. 23). One woman did not feel that the police could provide her with any assistance because her violent daughter was too young.

Some of the mothers interviewed commented on the secret nature of adolescent violence towards parents. For example, one mother noted that the problem is not discussed by society (Anglicare Victoria & Precision Foundation, 2001). One mother commented: “It’s not easy to talk about this because you feel like you are breaking a family secret” (Anglicare Victoria & Precision Foundation, 2001, p. 30). Another mother emphasised the importance of the problem being recognised and talked about as it is very difficult to obtain help if people do not understand the problem and know how to address it. This mother asserted that adolescent violence towards parents is not an issue that can be resolved in standard parenting programs.

One mother commented that attending the ‘Breaking the Cycle’ group program aided her understanding of her experience of abuse and helped her to regain the self-confidence she felt she had lost (Anglicare Victoria & Precision Foundation, 2001). Five of the mothers expressed that the group was helpful in their situations because it exposed them to other mothers in similar situations and these other mothers made them feel comfortable and believed. One mother commented: “I hadn’t thought it was all that common. It was good to know that we weren’t the only ones” (Anglicare Victoria & Precision Foundation, 2001, p. 38). Another woman stated that she developed a feeling of strength as a result of participating in the ‘Breaking the Cycle’ program and another said that she obtained a sense of power from the group (Anglicare Victoria & Precision Foundation, 2001).

3.10 Recommendations in the Literature

A significant proportion of the literature surrounding the issue of adolescent violence towards parents has emphasised the importance of awareness raising (e.g. Bobic, 2004; Bobic, 2002; Bobic & Robinson, 2002). Many researchers have highlighted that raising awareness of the issue throughout society may help to eradicate misconceptions about
adolescent violence and stereotypes about affected families and could reduce the levels of
guilt and shame experienced by parents who find themselves victimised by their children
(Bobic, 2004). Howard and Rottem (2008) emphasised that awareness raising efforts must
focus on publicising supports available to all family members faced with the issue. Bobic and
Robinson (2002) stated that educating the wider community about issues surrounding
adolescent violence towards parents promotes help-seeking for affected parents as well as
an understanding that they are not alone in their experience. With regard to awareness
raising and education, Howard and Rottem (2008) argued that adolescent violence towards
mothers must be recognised widely as a form of family violence that seriously impacts on
the safety, health, and wellbeing of all family members (Howard & Rottem, 2008).

Early intervention with young people, and the parents of young people who are
showing signs of being ‘at risk’ for violent behaviour, has also been a strong focus of the
recommendations in empirical work. It has been pointed out that commencing interventions
with abusive or ‘at-risk’ young people during adolescence may be too late (Gallagher, 2004).
For instance, some researchers have commented that children whose physically aggressive
behaviour extends beyond the early childhood period may be at increased risk for engaging
in aggressive and anti-social behaviour during adolescence and adulthood (Moffitt, 2006;
Patterson, Capaldi & Bank, 1991). Therefore, early intervention with young children who are
showing aggressive tendencies or other behaviour problems that may precede violence and
abuse is essential.

It was emphasised that specialised support needs to be accessible for women and
their children experiencing adolescent violence in the home (Howard & Rottem, 2008). For
example, Gallagher (2004a) proposed that an important first step when working with parents
affected by adolescent violence is to help them become aware of their rights:

Talking to parents about their children’s ‘abusive’ behaviour can be very
helpful to them if it encourages them to take an assertive stance and to
consider their own rights. It may also draw parallels between the child’s
behaviour and the behaviour of abusive partners and ex-partners
(Gallagher, 2004a, p6).

However, the recommendations in the literature with regard to where agencies should focus
their resources have varied considerably. Sheehan (1997) suggested that working with
adolescents and their parents together is the most appropriate way to assist families
affected by this form of abuse. In Sheehan’s view, this method allow parents to acknowledge
and discuss their experiences of abuse at the same time as their adolescent children are
given the chance to take responsibility for their behaviour in a manner that provides support,
assistance, and understanding to both parties. However, Micucci (1995) argued that such an
approach is only appropriate in circumstances where the violent behaviour has ceased as it
may be unsafe to address an adolescent’s abusive behaviour in their presence (and in the presence of their victimised parent) if they have not overcome their abusive tendencies. Such an approach also requires the young person’s cooperation and commitment to changing their behaviours in order to be successful – a requirement that is often not met prior to intervention as victimised parents are far more likely than abusive adolescents to actively commit to any form of intervention that addresses the young person’s behaviour.

It has also been recommended that any responses to adolescent violence towards parents be conducted in a manner that minimises the shame experienced by all concerned parties and the blame attributed to perpetrators. For instance, Miccuci (1995) argued when families or professionals label the violent adolescent as the problem and thus assign all of the responsibility to the young person, they restrict their ability to identify other factors that contribute to the situation in question. In contrast, when all of the responsibility rests with the victimised parent, the violent young person is not being held accountable for their behaviour and their abuse is likely to be reinforced (Gallagher, 2004). Downey (1997) recommended that working with adolescents on their anger issues is important. However, Downey (1997) emphasised the importance of such work being undertaken in the context of power, gender, and relationships as many programs with an anger management focus work from the assumption that people can not control their anger and that such a loss of control is what results in violent behaviour, which is not the case when one considers the dynamics of family violence.

As a form of intervention, narrative therapy with victimised parents was strongly advocated for in the literature. According to Sheehan (1997), allowing parents to express themselves via the use of stories allows them to both reflect on and depict their experiences of abuse in their own words, resulting in a feeling of empowerment and sense of control. Sheehan (1997) argued that such an approach is highly beneficial to any program designed to assist parents affected by adolescent violence. It was also recommended that professional development and training be available to support services to better equip them to assess and respond to adolescent violence towards parents (Howard & Rottem, 2008).
4.0 Existing Programs & Initiatives in Australia

Group programs for parents affected by violence from their adolescent children serve to provide parents with the opportunity to share experiences with others in similar situations and feel accepted and supported. They also allow parents to be exposed to new ideas and concepts relating to parenting an adolescent who is violent, and to learn new strategies that may help reduce the violent behaviour and/or strengthen the relationship between the parent and their adolescent (Paterson, et al, 2002).

4.1 Western Australian Programs

There are currently no group programs or services that specifically address the issue of adolescent violence towards parents in WA. However, the following group programs have been identified in WA. Some of these are for adolescents and children and some are for parents of adolescents and teenagers. These programs are not violence specific in their focus, however many of them are aimed at resolving parent-teen conflict in a number of areas.

Groups for Adolescents

On Target (Communicare)

‘On Target’ is a group program for young people aged between 10 and 17 years who are experiencing difficulties with school, familial issues, interpersonal issues, peer relationships and/or emotional regulation.

Groups for Parents of Adolescents

Parent-Teen Connection (Relationships Australia)

‘Parent-Teen Connection’ is a group program for parents that aims to assist them with the everyday complexities associated with living with teenagers.

Communicating with Your Teenager (Centrecare)

‘Communicating with Your Teenager’ is a workshop for parents and caregivers of teenagers.

Building Better Parent-Child Relations (City of Stirling Family Services)

‘Building Better Parent-Child Relations’ is a group program for parents of teenagers who want to learn how to effectively resolve conflict with their children.
Engaging Adolescents (Kinway)
‘Engaging Adolescents’ is a group program for parents of adolescents.

Parent Well-Being (City of Stirling Family Services)
‘Parent Well-Being’ is a group program for parents of teenagers.

Strategies to Set Appropriate Behavioural Boundaries (City of Stirling)
‘Strategies to Set Appropriate Behavioural Boundaries’ is a group program for parents of teenagers.

Teen Positive Parenting Program (Kinway)
‘Teen Positive Parenting Program’ is a group program for families with children aged between 12 and 16 years.

Understand Your Adolescent (Kinway)
‘Understand Your Adolescent’ is a group program for parents, guardians and carers of adolescents.

When Parents and Young People Want to Get Along Better (Centrecare)
‘When Parents and Young People Want to Get Along Better’ is a group program for parents of children aged between 12 and 21 years.

Your Adolescent Daughter (CLAN WA)
‘Your Adolescent Daughter’ is a group for parents of adolescent girls.

Groups for Sole-Parent Mothers of Adolescents
Parenting Teens for Mothers Parenting Alone (University of Western Australia, Murdoch University)
‘Parenting Teens for Mothers Parenting Alone’ is a group for single, divorced and separated mothers with teenagers aged 12 to 15 years.

Relationships after Divorce or Separation (Murdoch University)
‘Relationships after Divorce or Separation’ is a group program for single, divorced and separated mothers with teenagers aged between 12 and 14 years.
**Programs Concerning Adolescent Drug/Alcohol Issues**

**Adolescent Program (Holyoake)**

Holyoake’s ‘Adolescent Program’ provides individual counselling sessions and assessment for young people aged 12 to 18 years experiencing problems with alcohol and/or other drugs.

**Parent Services (Holyoake)**

‘Parent Services’ is a group program for parents concerned about their child’s alcohol or other drug use.

**Parent Empowerment Group (Community Drug Service Team, Holyoake)**

The ‘Parent Empowerment Group’ is a program for the parents of substance users.

**Parent Support Group (Community Drug Service Team)**

The ‘Parent Support Group’ is a program for parents of children who use alcohol and/or drugs.

### 4.2 Programs in other Australian States & Territories

The following group programs are specific to adolescent violence towards parents. The majority of these are situated in Victoria. It is important to note that all the Victorian groups follow a similar format and incorporate elements of the 'Breaking the Cycle' model as described below.

**4.2.1 Breaking the Cycle: Making Changes (Anglicare - Victoria)**

‘Breaking the Cycle’ is a group program implemented by Anglicare (Box Hill, Victoria), which was developed in 1997. The aim of the program is to support parents, grandparents, step-parents or other carers of a young person who is violent towards them. The program has an educational and therapeutic approach that aims to affirm and build on the strengths of parents, and a key focus of the group is to repair the relationship between the victimised parent and the young person. ‘Breaking the Cycle’ consists of eight weekly sessions and is run twice a year. The key objectives of the program are: to end the abuse; to help parents to hold their adolescent accountable for their behaviour; to enhance parents’ conflict management skills and provide them with new parenting strategies; to encourage parents to establish and maintain healthy relationships with their adolescents; and to allow participants to interact with one another, share information and learn from each other.
4.2.2 Who’s in Charge? (Monash Youth & Family Services/ Cardinia-Casey Community Health Service - Victoria)

‘Who’s in Charge’ is an educational and therapeutic program developed by psychologist Eddie Gallagher. The target group of ‘Who’s in Charge’ is parents of adolescents who are behaving abusively towards them or are exhibiting other problem behaviours that their parents are having difficulty controlling. During participation in the program, parents take part in group exercises, discussion and education. These tasks are designed to assist parents to implement attitude and behaviour change. The main goal of the program is to empower parents, reduce the stress and guilt they are experiencing and provide them with new ideas strategies for addressing the abusive situation.

4.2.3 Teenage Aggression, Responding Assertively - T.A.R.A (Berry Street - Victoria)

The Mediation and Family Therapy Service (MATTERS) is a program of Berry Street, an independent incorporated organisation that provides a range of services for children and families across four regions in Victoria, Australia. The ‘MATTERS’ program is funded to address issues surrounding parent and adolescent conflict (Sheehan, 1997). One component of the ‘MATTERS’ program, is a group for parents entitled ‘Teenage Aggression, Responding Assertively (T.A.R.A)’. ‘T.A.R.A’ specifically targets parent victims of adolescent abuse and its focus is on the violence of the adolescent in the context of family relationships. During their participation in the ‘T.A.R.A’ program, parents are given the opportunity to reflect on their experiences, offer and receive peer support, and learn and implement new strategies for responding to challenging adolescent behaviours.

4.2.4 Who’s the Boss? (Inner South Community Health Service - Victoria)

‘Who’s the Boss’ is a group program developed and implemented by the Inner South Community Health Service. The program utilises the same principles and guidelines as the other Victorian groups mentioned above as its key aim is to provide parents who are victimised by an adolescent child with a safe and comfortable forum to discuss their experiences, explore new strategies for handling their situation, and learn from (and provide support to) other parents experiencing similar issues. The ‘Who’s the Boss’ group program is facilitated by both an experienced family violence worker and a professional in the parenting field. This is to ensure that both the family violence aspects of adolescent violence towards parents and the parenting issues that arise can be adequately addressed in the groups.

4.2.5 Out of Bounds (Peninsula Community Health Service - Victoria)

‘Out of Bounds’ is a program that was developed out of partnership between Peninsula Community Health Service and Anglicare. The program has adopted a similar
model to that of the ‘Who’s in Charge?’, ‘Who’s the Boss?’ and ‘Breaking the Cycle’ groups previously outlined. Like the other Victorian groups, ‘Out of Bounds’ is targeted at parents who have experienced abuse from an adolescent child and is largely focused around peer support, strategy and goal setting, parental confidence building exercises, and education.

4.2.6 “Tough Love” Parent Support Groups (Victoria, New South Wales, South Australia, Queensland)

‘Tough Love’ support groups take place in various locations across Victoria, New South Wales, South Australia and Queensland. These programs offer crisis intervention for families experiencing problem behaviour from an adolescent child. Parents experiencing problems with an adolescent child meet weekly to provide one another with practical and emotional peer support. “Tough Love” support groups also provide strategies for developing potential solutions to parent’s problems. Parents and facilitators provide non-judgemental support in order to assist one another to put changes into place that seek to reduce the problematic adolescent behaviour in question.
5.0 Research Methodology

5.1 Participants

A total of seven mothers and twenty service providers across Western Australia (both metropolitan and remote) took part in this project, resulting in a total of twenty seven participants. Participants were recruited through the distribution of flyers to agencies across the state who provide services to women and their families in the areas of parenting, health and mental health, crisis intervention (including family violence services), legal and financial, and social work/welfare. Any individual who had experienced adolescent violence towards parents on a personal or professional level (or both) and who wished to contribute their experiences, expertise and recommendations to the project was encouraged to take part. As previously noted, the period with which adolescence takes place (as identified in the literature) is between the ages of 12 and 24 years (Bobic, 2004). The “Parenting Over Violence” project adopted Bobic’s (2004) definition of adolescence and included data describing the behaviour of adolescents that fall within the age range of 12 to 24 years.

5.2 Procedure

The “Parenting Over Violence” project was promoted throughout WA via e-mail and flyers. Initially, these were distributed to the following types of services: family violence/crisis intervention, drug and alcohol services, family services, parenting services, women’s services, youth services, health services, legal services, child protection services, and the WA police. However, there were a number of stories published in various WA newspapers that promoted the project and encouraged participation. Individuals interested in taking part were encouraged to make contact directly with the project officer who then provided the potential participant with more information. After informed consent was received, an appropriate meeting time and venue for the project officer and the participant was arranged.

Participants took part in semi-structured interviews, during which they reflected on their experience as either mothers of adolescents who were abusive towards them or service providers who have worked with families affected by adolescent violence towards mothers. Interviewees were asked a series of open ended questions about their experience and their recommendations (see Appendices A and B for their interview questions). Interviews were recorded via audio recordings and note-taking. These were then transcribed verbatim and analysed. To ensure anonymity and to protect the privacy and safety of all participants, transcriptions of all interviews and other interview data was destroyed at the conclusion of this project. No identifying information about participants has been included in this publication. Where specific cases are referred to (for example, see Appendix C – Family Structures of the Mothers Interviewed) real names have been replaced with pseudonyms.
### 6.0 Results & Discussion Part 1: Trends & Issues

#### 6.1 Tables & Figures: Overall Trends

In total, there were 29 adolescents described by both service providers and mothers interviewed for this research. As Table 1 and Table 2 illustrate, there was a diverse range of circumstances associated with each of the adolescents described. Please see the following tables and subsequent figures for more details about the circumstances of the adolescents described.

**Table 1: Details of All Abusive Adolescents Described by Mothers & Service Providers Interviewed (n = 29)**

<table>
<thead>
<tr>
<th>Relationship to Mother</th>
<th>Age (Current)</th>
<th>Sibling Information (Age &amp; Relationship)</th>
<th>Violence to Other Parent</th>
<th>Sibling Abuse</th>
<th>Age of Abuse Onset</th>
<th>Age of Abuse Peak (Has it ended?)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Daughter</td>
<td>30 ^a</td>
<td>Brother (27)</td>
<td>Unknown</td>
<td>No</td>
<td>13</td>
<td>27 - Yes</td>
</tr>
<tr>
<td>2 Daughter</td>
<td>16</td>
<td>Brother (29), Sister (14)</td>
<td>No</td>
<td>Unknown</td>
<td>14</td>
<td>15 - No</td>
</tr>
<tr>
<td>3 Son</td>
<td>18</td>
<td>Brother (6), Brother (2)</td>
<td>Yes</td>
<td>Yes</td>
<td>14</td>
<td>18 - No</td>
</tr>
<tr>
<td>4 Daughter</td>
<td>13</td>
<td>Brother (16), Brother (8)</td>
<td>Yes</td>
<td>Yes</td>
<td>12</td>
<td>13 - No</td>
</tr>
<tr>
<td>5 Daughter</td>
<td>19</td>
<td>Sister (21)</td>
<td>Yes</td>
<td>Yes</td>
<td>13</td>
<td>15 - Yes</td>
</tr>
<tr>
<td>6 Son</td>
<td>22</td>
<td>Brother (25), Brother (18), Sister (21), Step-brother (35)^a, Step-sister (33)</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>18 - Yes</td>
</tr>
<tr>
<td>7 Son</td>
<td>19</td>
<td>Brother (17), Brother (15)</td>
<td>Unknown</td>
<td>Yes</td>
<td>12</td>
<td>Unknown</td>
</tr>
<tr>
<td>8 Daughter</td>
<td>18</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>9 Daughter</td>
<td>11</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>11 - Yes</td>
</tr>
<tr>
<td>10 Son</td>
<td>14</td>
<td>Unknown</td>
<td>Yes</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>11 Son</td>
<td>14</td>
<td>Sister (10)</td>
<td>Yes</td>
<td>No</td>
<td>13</td>
<td>14 - Yes</td>
</tr>
<tr>
<td>12 Son</td>
<td>15</td>
<td>6 siblings (other info unknown)</td>
<td>No</td>
<td>No</td>
<td>14</td>
<td>15 - No</td>
</tr>
<tr>
<td>13 Son</td>
<td>18</td>
<td>Brother (25), Brother (22), Sister (21), Step-brother (35)^a, Step-sister (33)</td>
<td>Unknown</td>
<td>Unknown</td>
<td>18</td>
<td>18 - No</td>
</tr>
<tr>
<td>14 Son</td>
<td>16</td>
<td>Has biological and step-siblings (other info unknown)</td>
<td>Yes</td>
<td>Yes</td>
<td>Unknown</td>
<td>Unknown - No</td>
</tr>
<tr>
<td>15 Son</td>
<td>15</td>
<td>Four siblings (genders unknown) – Ages: 1, 2, 5 &amp; 13.</td>
<td>Unknown</td>
<td>Yes</td>
<td>5</td>
<td>14 - Unknown</td>
</tr>
<tr>
<td>16 Son</td>
<td>40 ^*</td>
<td>Sister (age unknown)</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>17 Son #</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>12</td>
<td>Unknown - Yes</td>
</tr>
<tr>
<td>18 Son</td>
<td>21</td>
<td>Sibling (8) – Sex unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>19 Foster Daughter</td>
<td>29 ^*</td>
<td>Two foster brothers (ages unknown)</td>
<td>No</td>
<td>No</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>20 Son</td>
<td>21</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td></td>
<td>Relationship to Mother/Age</td>
<td>Parents’ Relationship Status</td>
<td>Biological Father’s Involvement w/ Child (Current)</td>
<td>FDV History or Other Trauma</td>
<td>Substance Use (Known)</td>
<td>Mental Health Or Disability (Diagnosed)</td>
</tr>
<tr>
<td>---</td>
<td>---------------------------</td>
<td>-----------------------------</td>
<td>-----------------------------------------------</td>
<td>-----------------------------</td>
<td>-----------------------</td>
<td>----------------------------------------</td>
</tr>
<tr>
<td>21</td>
<td>Son</td>
<td>13</td>
<td>Brother (15), Brother (17)</td>
<td>Unknown</td>
<td>Yes</td>
<td>12</td>
</tr>
<tr>
<td>22</td>
<td>Son</td>
<td>15</td>
<td>Brother (13), Brother (17)</td>
<td>Unknown</td>
<td>Yes</td>
<td>12</td>
</tr>
<tr>
<td>23</td>
<td>Son</td>
<td>17</td>
<td>Brother (13), Brother (15)</td>
<td>Unknown</td>
<td>Yes</td>
<td>12</td>
</tr>
<tr>
<td>24</td>
<td>Son</td>
<td>17</td>
<td>Brother (17)</td>
<td>No</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>25</td>
<td>Son</td>
<td>17</td>
<td>Brother (died aged 17-9 years prior)</td>
<td>No</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>26</td>
<td>Son</td>
<td>18</td>
<td>Brother (16), Other siblings (details not provided)</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>27</td>
<td>Son</td>
<td>19</td>
<td>Sister (20)</td>
<td>Unknown</td>
<td>Yes</td>
<td>Unknown</td>
</tr>
<tr>
<td>28</td>
<td>Son</td>
<td>40</td>
<td>Half-sister (22), Step-brother (43)</td>
<td>No</td>
<td>No</td>
<td>14</td>
</tr>
<tr>
<td>29</td>
<td>Son</td>
<td>25</td>
<td>Brother (22), Brother (18), Sister (21), Step-brother (35), Step-sister (33)</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
</tbody>
</table>

**LEGEND:**
- * Past abuse towards mother (during adolescence)
- ^ Deceased at the time of interview
- # Incarcerated at the time of interview

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**Table 2** — Table of All Abusive Adolescents Described by Mothers & Service Providers Interviewed (Continued)
<p>| | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
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<tr>
<td>9</td>
<td>Daughter (11)</td>
<td>Separated</td>
<td>Some Contact</td>
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<td>Unknown</td>
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<td>10</td>
<td>Son (14)</td>
<td>Divorced</td>
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</tr>
<tr>
<td>11</td>
<td>Son (14)</td>
<td>Married</td>
<td>Shared Parenting</td>
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<td>No</td>
<td>No</td>
</tr>
<tr>
<td>12</td>
<td>Son (15)</td>
<td>Married</td>
<td>Shared parenting but father works away</td>
<td>Unknown</td>
<td>Yes</td>
<td>Unknown</td>
</tr>
<tr>
<td>13</td>
<td>Son (18)</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>14</td>
<td>Son (16)</td>
<td>Unknown</td>
<td>None</td>
<td>Unknown</td>
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<td>Unknown</td>
</tr>
<tr>
<td>15</td>
<td>Son (15)</td>
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<td>Very Little</td>
<td>Witnessed DV against mother</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>16</td>
<td>Son (40)</td>
<td>Married</td>
<td>Shared Parenting</td>
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<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>17</td>
<td>Son (N/A)</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Witnessed DV against mother</td>
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<td>Unknown</td>
</tr>
<tr>
<td>18</td>
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<td>Unknown</td>
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<td>Unknown</td>
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<td>Unknown</td>
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<tr>
<td>19</td>
<td>Foster Daughter (29)</td>
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<tr>
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<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>21</td>
<td>Son (13)</td>
<td>Mother Widowed</td>
<td>None - Deceased</td>
<td>Loss of father; Witnessed family violence against mother</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>22</td>
<td>Son (15)</td>
<td>Mother Widowed</td>
<td>None - Deceased</td>
<td>Loss of father; Witnessed family violence against mother</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>23</td>
<td>Son (17)</td>
<td>Mother Widowed</td>
<td>None - Deceased</td>
<td>Loss of father; Witnessed family violence against mother</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>24</td>
<td>Son (17^)</td>
<td>Separated</td>
<td>Unknown</td>
<td>Witnessed DV against mother</td>
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<td>Unknown</td>
</tr>
<tr>
<td>25</td>
<td>Son (17)</td>
<td>Separated</td>
<td>Unknown</td>
<td>Witnessed DV against mother</td>
<td>Yes</td>
<td>Unknown</td>
</tr>
<tr>
<td>26</td>
<td>Son (18)</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>27</td>
<td>Son (19)</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>28</td>
<td>Son (40)</td>
<td>Divorced &amp; Father Deceased (recently)</td>
<td>Very Little</td>
<td>Emotional abuse of mother by father (unsure if witnessed/known by child)</td>
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<td>29</td>
<td>Son (25^ #)</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

**LEGEND:**

* Past abuse towards mother (during adolescence)  
^ Deceased at the time of interview  
# Incarcerated at the time of interview
As Figure 1 illustrates, the majority of adolescents described by mothers and service providers as being abusive towards them were male accounting for 22 (76 %) out of the 29 adolescents described. The remaining 7 adolescents described (24 %) were female.
When the ages of abusive adolescents described were analysed, some interesting results were yielded. It was expected that there would be a common age group reported by participants when asked about the adolescents’ current age (at the time of interview). However, no particular age group was prevalent as the ages of the adolescents described were somewhat evenly distributed across the ages 13 to 21 (see Figure 2). The largest number of adolescents (n = 4) were 18 years old at the time of the interviews. However the number of adolescents in this age group was not significantly higher than those aged 15, 17 and 19 years (n = 3) with a difference of only 4% (see Figure 2). It is important to note that in the cases where the behaviour of abusive adolescents aged over 24 were discussed, these individuals were described because they were abusive towards their mothers in the past during their adolescence. Therefore the above figures do not describe the ages during which adolescent violence began, peaked in severity, or ceased – they were merely collected as demographic information.
As Figure 3 indicates, where age of onset was disclosed by participants, the majority of adolescents described were 12 years old when their violence began (21%, n = 6). This was closely followed by 14 years (14%, n = 4), and 13 years (10%, n = 3). Therefore, it can be concluded from these results that the age range of 12-14 years was the most commonly reported with regard to the onset of abusive behaviour perpetrated by adolescents towards their mothers as 13 participants (45%) fell within this age group compared with only 7% who fell into other age ranges. The remaining 48% of adolescents’ ages of abuse onset were not disclosed.
The most commonly reported age of adolescents when their abusive behaviours towards their mothers peaked was 15 years (n = 4) which accounted for 14% of the total adolescents described during interviews (see Figure 4). This was closely followed by 18 years, which was the peak age described in three cases (10%).
Thirteen of the 29 abusive adolescents described by participants (45%) were abusive towards mothers who were either separated (10%, n = 3), divorced (21%, n = 6), or widowed (14%, n = 4) from the adolescents' biological fathers. Only three of the adolescents described (10%) came from families where both of their biological parents were still married. The relationship status of the parents of the remaining 45% (n = 13) of adolescents described was either unknown or undisclosed by participants. However, as Figure 5 illustrates, where parental relationship status was disclosed (n = 16 cases), a significant majority (81%) of adolescents who were abusive towards their mothers had only one full-time biological parent.
Of the 29 adolescents described during interviews, 66% of them (n = 19) were identified as having engaged in drug and/or alcohol use. In five cases (17%) the substance use behaviour of adolescents was not disclosed, and in the remaining 17% of cases (n = 5), the adolescents described had not engaged in any substance use (see Figure 6).
As illustrated by Figure 7, the majority of adolescents described had no diagnosed mental health condition or disability (n = 11, 39%) or their mental health/disability was not commented on (n = 11, 39%). In six cases (22%) the adolescents described had been diagnosed with a mental illness or were living with some form of disability.
Figure 8 – Adolescent Perpetrators by Biological Fathers’ Parental Involvement

Figure 8 depicts the level of involvement of adolescents’ biological fathers. In 55% of cases described during interviews, fathers’ parental involvement was disclosed (n = 16). Of these cases, the majority of adolescents (35%, n = 10) had fathers who had passed away (n = 4, 15%), had ‘very little involvement’ with them (n = 3, 10%), or had ‘no involvement’ (n = 3, 10%). Adolescents only had fathers with shared parenting where the father still lives with the adolescent and their mother in 10% of cases (n = 3). In one case the adolescent’s father had shared parenting but worked away for a significant proportion of the time and in the remaining 2 cases (7%) the adolescents’ parents were no longer together but the father had ‘some involvement’ with the adolescent.
As Figure 9 shows, adolescent perpetrators described during interviews came from families with a history of family and domestic violence (FDV) in 48% of cases ($n = 14$). In 7% of cases ($n = 2$), the adolescents described had no history of FDV in their families. In the remaining 45% of cases ($n = 13$) information about adolescents' histories of FDV was not commented on. It is important to highlight that of the 16 cases where FDV history was disclosed, 87.5% of the adolescents described ($n = 14$) had come from families where FDV had occurred compared with only 12.5% who had no reported history of FDV in their family.
Of the adolescents described during interviews, 35% (n = 10) had been abusive towards one or more of their siblings in addition to being violent towards their mothers. Adolescent’s sibling abuse was not known or disclosed in 48% (n = 14) of cases, and no abuse to siblings was reported in 17% (n = 5) of cases. For the 52% of cases (n = 15) with which sibling abuse was commented on, the majority of adolescents described (66%) had been abusive towards one or more of their siblings on at least one occasion (see Figure 10).
As depicted in Figure 11, in the majority of cases involving adolescents who were abusive towards their mothers (58%, n = 17), it was unknown if they were abusive towards both of their parents or if their abuse was directly solely at their mothers. The remaining adolescents described were equally as likely to have been abusive towards both parents (n = 6, 21%) or abusive only towards their mother (n = 6, 21%).
6.2 Results from Interviews with Mothers

Types of Abuse Experienced & Adolescents’ Gender

Of the seven mothers interviewed for this project, four (57%) described abuse from an adolescent daughter and the remaining three (43%) described abuse from adolescent sons (however, one of these mothers had three sons who were abusive towards her). There were various forms of abuse perpetrated by the adolescents described by the mothers interviewed. Physical abuse, emotional abuse, verbal abuse, financial abuse, destruction of property, and controlling and manipulative behaviours were all reported. It was common for the mothers to disclose that the abuse they experienced began as emotional or verbal in nature and then escalated over time to include physical abuse. Physical abuse at the hands of their adolescents was experienced by six of the seven mothers interviewed (86%). Half of these cases (n = 3) involved female perpetrators and the other half involved males. One mother stated that although her daughter was not often physically violent, she occasionally pushed her mother and held her down. This mother reported that her daughter would sometimes get on top of her to physically restrain her. It was emphasised by this mother that these behaviours happened when her daughter did not get her way and that a common scenario involved her daughter demanding money for drugs and then becoming physically abusive when these demands were not met. Two other mothers described incidents where they were slapped, pushed, kicked or punched by their adolescent daughters.

It was disclosed by one mother that at one stage, her son’s anger was “out of control” and that he began to exhibit extremely threatening behaviours towards her. Another woman described an incident where her son deliberately poisoned her coffee. This same mother also stated that on one occasion, her son turned on the gas in the house and removed all the knobs. These incidents caused this mother to become fearful that he was capable of ending her life, “I thought he was going to kill me”. Another one of the mothers interviewed spoke of instances where she received severe bruising and scars to her hands and arms as a result of her son’s physical violence. She stated that on one occasion, he dug his nails into her arm while she was driving with her two other children in the car. She said that when she tried to restrain him, he spat in her face, and when she managed the stop the car, he kicked through her front windscreen. This mother said that her six-year-old son became so frightened during this incident that he exited the car and tried to cross a busy road. She also described instances where her abusive son threw objects at her face and cut her eye. The same mother disclosed that her son once kicked her in the stomach while she was pregnant and that he has also threatened her with a knife.

Like physical abuse, emotional and verbal abuse was experienced by six of the seven mothers interviewed (86%). In fact, one mother said that emotional abuse was the most frequent form of abuse that her daughter inflicted against her. Four of these six
mothers (67%) experienced emotional abuse from daughters and the remaining two (33%) experienced emotional abuse from sons. According to one mother, her daughter’s emotional abuse towards her has usually involved deliberately withdrawing and giving her the “cold shoulder”. Another mother described similar experiences and stated that her daughter would often withdraw on purpose in order to upset or confuse her mother. It was also common for these mothers to note that their children engaged in swearing and derogatory comments towards them. For example, one mother said that her daughter frequently called her names such as “f**king bitch”. Another interviewee said that when she did not meet her son’s demands, he would call her “shit for brains”. According to this mother, her son became angry easily and expressed this anger predominantly through verbal abuse towards her.

Another form of abuse described by the mothers interviewed involved exerting control and displaying manipulative or intimidating behaviours, which was described by five mothers (71%). Three (60%) of these mothers experienced this form of abuse from daughters and the remaining two (40%) experiencing control and manipulation from sons. One mother stated that her daughter frequently employs control tactics and intimidation. Another mother described her daughter as “very intelligent and manipulative” and this mother spoke of her daughter’s behaviour as follows: “She knows my weaknesses and she constantly zeros in on them. I feel like she sometimes uses her intelligence to her advantage and my own detriment because she does things that she knows will hurt me and it seems like hurting me is her only motivation sometimes”. One mother who experienced abuse from three sons said that her sons have used a lot of control tactics in order to get money from her. For example, this mother said that one of her sons often lies behind the wheels of her car, preventing her from driving anywhere. According to this mother, this usually occurs when he is demanding money for drugs and she does not comply. Another mother spoke of her son’s use of control in their relationship: “He used a lot of standover techniques with me and he could be very intimidating”.

Financial abuse was described by four of the seven mothers interviewed (57%). Three of these mothers (75%) experienced such abuse from daughters and one mother (25%) experienced financial abuse from three sons. One mother who reported financial abuse stated that her daughter would regularly steal money and medication from her. In one incident this mother described, she put a lock on her bedroom door in an attempt to prevent her daughter from stealing from her and her daughter responded to this by breaking the bedroom windows in order to gain access. Another mother disclosed similar behaviours and stated that her daughter used to steal money from her purse on a regular basis and pawn her possessions (such as jewellery). This mother believed that her daughter did these things for “drug money”. Another mother commented that she does not have the money to give to her son when he demands it, but he fails to understand this and behaves abusively towards
her until she finds a way to give him the money. For instance, she said that he forces her to pawn prized possessions and furniture so that she can give him money. This mother emphasised that she is fearful of what he is capable of doing to her if she does not comply with such demands.

Like financial abuse, the destruction of property was described by four of the seven mothers interviewed (57%). One mother spoke of her son destroying a lap top and two others stated that their daughters often throw breakable items such as plates. Another mother recounted an incident where her daughter cut the internet cable so that no one else could use it. The same mother said that her daughter has control over what she damages and she never damages expensive things. In this mother’s view, “she thinks about it before she does it and knows exactly what she’s doing at the time”. One mother spoke of her daughter attacking the back door to the house with an axe and then deliberately destroying some fruit trees that she knew her mother loved. This mother emphasised that her daughter was well aware of how upset she would be that these trees had been destroyed. Another mother reported that her sons have damaged her house to the point where she no longer sees the point in buying nice things or replacing damaged items such as furniture. The same mother spoke of instances where one of her sons damaged her car and smashed dinner plates.

Adolescents’ Ages During Abuse Onset, Abuse Peak & Abuse Cessation

Of the seven mothers interviewed, three stated that their adolescent’s started behaving abusively towards them at the age of thirteen (43%). Another three (43%) reported that the abuse began when their adolescents were fourteen years of age, and one parent (14%) said that their adolescent’s abuse of them began at the age of twelve. It was common for the mothers to state that their adolescents’ abusive behaviours appeared to coincide with their transition from primary school to high school. The majority of the mothers interviewed identified the beginning of high school as a high-risk time period for the onset of adolescents’ violent behaviours towards family members. With regard to when adolescents’ abusive behaviours reached their peak (i.e. when their abuse was at its worst), three (43%) of the mothers interviewed reported that the peak age was fourteen. The remaining four mothers all reported different peak ages: 15 years, 16 years, 18 years and 27 years (14% for each). For three of the mothers (43%), the abuse from their adolescent children has stopped occurring. However, only one of these three mothers still has a relationship with the adolescent in question as one of the adolescents passed away in 2009 (and her mother stated that her abuse continued until this time), and the other mother has been estranged from her son for several years. The remaining four mothers (57%) reported that their experiences of adolescent violence remain a serious problem. However, one of these
mothers reported that her daughter’s abuse towards her has decreased in both severity and frequency.

Adolescents’ Abuse of Other Family Members/Pets

Some of the mothers interviewed reported that their abusive adolescents have also been violent towards other family members. For instance, one of the mothers stated that her daughter was once physically abusive towards her grandmother, whom she also used to steal money and possessions from. According to another mother, her son’s abuse is non-discriminate as he is abusive towards other family members and peers. This mother recalled incidents where her son was physically abusive towards his two siblings and his grandmother. Sibling abuse was also commented on by some of the mothers interviewed. One stated that her daughter is occasionally abusive towards her younger sister and another said that her daughter once physically attacked her older brother. According to this mother, her daughter has also started to behave abusively towards her father. Another mother reported that her daughter has been emotionally abusive towards her sister and stepfather. Abuse towards animals was also commented on as one mother said that her daughter often ‘rough-handles’ the family pets and displays aggressive tendencies towards them.

Adolescents’ Substance Use

Three of the mothers interviewed (43%) stated that their abusive adolescents engaged in some form of substance use. The remaining four (57%) were unsure of whether or not their adolescent child had engaged in substance use. Three of these mothers suggested that substance use was likely in their child’s case, however they did not know for sure as their children had not disclosed any substance use to them nor had they seen it first-hand. One of the mothers who reported adolescent substance use attributed her son’s abusive behaviours to his use of drugs and alcohol as she strongly believed that when her son is not using drugs, he is not abusive towards her at all. Another mother reported that her abusive daughter began taking dex-amphetamines at the age of twelve and started smoking marijuana during her first year of high school. According to this mother, her daughter’s drug use escalated when she was fourteen years of age, and at the age of 15, she was regularly using amphetamines. This mother described her daughter’s overall drug use as “excessive”.

Another mother used the term “excessive” to describe her daughter’s degree of substance use. According to this mother, her daughter started experimenting with drugs at the age of eleven and continued using them until her death at the age of 29 (approximately 18 years of substance abuse in total). This mother recounted that throughout high school her daughter engaged in hairspray, glue and petrol-sniffing with her peers and smoked marijuana regularly. According to this mother, there was one occasion where her daughter
almost drowned in the ocean whilst intoxicated. This mother also reported that her daughter was a frequent user of hard drugs such as crystal methamphetamines (ICE), speed, and cocaine and it was reported that she used ICE regularly during the last three years of her life. This mother said that her daughter’s abusive tendencies were more serious if she was under the influence of drugs or alcohol. In fact, this mother believed that all of her daughter’s abusive incidents were drug or alcohol-induced.

**Adolescents’ Problems at School**

It was common for the mothers interviewed to comment on adolescents experiencing problems at school in addition to their abusive behaviours at home. Of the seven mothers interviewed, four (57%) reported that their abusive adolescents were either experiencing problems at school or were not attending school at all. For example, one mother said that her son has regularly found himself in trouble at school for lashing out against teachers and other students. This mother claimed that her son had been doing well at school before the onset of his abusive behaviours towards her. Another mother reported that her son was expelled from school for truancy six weeks before he was set to graduate and that the school’s headmaster blamed his truanting on his mother. Another mother reported that her daughter regularly engaged in truancy during her first year of high school. This mother also said that her daughter has experienced problems at school she was in grade six (10-11 years of age). The same mother stated that her daughter did not complete grade nine. Another mother reported that her daughter has an IQ that places her in the ‘gifted’ range, but she is failing at school. The same mother also stated that her daughter has experienced a number of problems in the past at school involving her peer group and that she has had to move schools because of these problems, which has been a difficult adjustment for her. Another mother reported that her daughter has stopped attending school altogether.

**Adolescents’ Suicidal/Self-Harming Tendencies**

Two of the seven mothers interviewed (28%) spoke of their adolescents contemplating, attempting, or threatening suicide. Both of these adolescents were female. One of these mothers stated that her daughter made several attempts at suicide, the first of which occurred at the age of 17. According to this mother, these attempts increased in frequency and severity in the final two years of her daughter’s life (between the ages of 28 and 30). Another mother reported that her daughter engaged in self-harming behaviours. The same mother disclosed that while her daughter was staying at a youth hostel, she threatened to harm herself and another teenage resident.
Other Adolescent Problem-Behaviours Reported

All of the mothers interviewed described other risky behaviours that their children engaged in during adolescence in addition to the problem behaviours described in the preceding paragraphs. The most commonly mentioned behaviours were stealing, running away/staying out, and underage “partying”. One mother reported that her daughter did not seem to care who she stole from and another spoke of an incident where her daughter was caught shoplifting with friends. One mother described incidents where her son stole credit cards and documents from letterboxes such as bank-related documents. The same mother also stated that her son drove without a license on more than one occasion and that his father permitted this. In addition, this mother reported that her son rode his bike around the city alone at all hours of the day and night and that on one occasion, she found him unconscious on the front lawn after he failed to return home. This mother said that an ambulance had to be called but no one was able to ascertain why her son had been unconscious as he did not appear to be under the influence of any substances nor had he been known to use in the past. Another mother reported that at the age of thirteen, her daughter would regularly sneak out of the house late at night and spend time with groups of young males during which she would engage in smoking and drinking. This mother also disclosed that her daughter obtained a fake ID, which she would regularly use to get into nightclubs in the company of older people. This mother reported that on one of these occasions, her daughter was escorted home by the police.

Adolescents’ Peer & Sibling Relationships

It was common for the mothers interviewed to comment on their abusive adolescents’ relationships with their peers and/or siblings. One mother disclosed that her daughter has been responsible for bullying her peers and is afraid of attending school for this reason. This mother said that when her daughter does attend school, she is violent and aggressive towards peers and is frequently getting into trouble as a result. Another mother mentioned that her daughter experienced problems with her peer group and she described one incident involving a group of young males from her daughter’s school that her daughter did not get along with. It was reported that on this occasion, the group of boys came to her house, blew up the letterbox and threw bricks at the windows. The same mother also said her daughter’s peer group appeared to ‘use’ her for things such as shoplifting and that they did not truly respect her or care about her wellbeing. The influence of other siblings on abusive adolescents’ behaviour was also commented on. For example, one mother mentioned that her daughter’s older sister has displayed similar problem behaviours (such as truancy and problems at school) but has not behaved abusively towards any family members. However,
this mother suggested that it is possible that the younger daughter modelled some of the behaviours of the older one.

**Mental Health/Disability Factors**

Mental health or disability-related issues were identified as an issue for the adolescent children of four of the seven mothers interviewed (57%). For instance, one of the mothers experienced abuse from a son who has autism and is currently living in a home for children with special needs. This mother attributed her son’s violence to his autism and his hormones. She described her son as someone who is not intentionally violent. Rather, in her view, violence is his response to certain situations and to frustration that he does not know to cope with. Another mother stated that her daughter was diagnosed with Attention-Deficit Hyperactivity Disorder (ADHD), but does not take medication for it. Another mother also reported that her daughter was diagnosed with Attention Deficit Disorder (ADD) as a younger child. Two parents mentioned that their abusive adolescents may have a depressive illness, but in these cases no formal diagnoses had been made.

It is worth noting that two out of the seven mothers interviewed (28 %) stated that their abusive adolescent had been diagnosed with Borderline Personality Disorder (BPD). In both cases, the adolescents were female. Given the small number of mothers interviewed for this study and the fact that BPD is diagnosed in 2-3% of the population (Barlow & Durand, 2005), the proportion of mothers interviewed who reported such a diagnosis cannot be ignored. One mother reported that her daughter was diagnosed with BPD at the age of 19. The same daughter was also diagnosed at an earlier age with Bipolar Disorder and Major Depression. This mother claimed that the Borderline diagnosis made it more difficult for her to obtain help for her daughter’s behaviour as many professionals show a great deal of reluctance to work with a Borderline patient. The other mother whose daughter was diagnosed with BPD stated that her daughter’s impulsive, reckless and self-damaging behaviours (such as drug use, promiscuous sex, and abusive tendencies) were symptomatic of her diagnosis. According to this mother, her daughter “seemed to feel like the world was against her”. This mother reported that her daughter frequently expected bad things to happen and she felt a large degree of abandonment. Furthermore, this mother disclosed that following the death of her daughter’s former boyfriend in an accident (whom she had lived with for six years), upon her return to live with her mother, her behaviour was severely erratic, impulsive, and promiscuous. It is worth noting that in addition to these two mothers making disclosures of a BPD diagnosis, three service providers mentioned BPD as a disorder that commonly impacts on the behaviour of adolescents (particularly females).

Borderline Personality Disorder is an Axis II, Cluster B personality disorder as defined by the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR)
Although BPD occurs across all cultural groups, it is more commonly diagnosed in females than in males (Bradley, Conklin & Westen, 2005) and is more prevalent in families with some history of the disorder (Barlow & Durand, 2005). According to the American Psychiatric Association (2000), BPD is often characterised by the following features: erratic and impulsive behaviours (these are often self-damaging and may include risk-taking such as substance use, promiscuous sex, binge eating, dangerous driving, or excessive spending); anxiety and/or paranoia associated with relationships (between family, friends, role-models, intimates); unstable mood which can alter dramatically (e.g. going from experiencing feelings of anger to experiencing deep depression in a short time); a tendency to blame others for one’s own shortcomings; chronic feelings of emptiness; suicidal tendencies or thoughts of suicide; unstable and turbulent relationships; excessive fears or expectations of abandonment (often unfounded); and extreme difficulties controlling emotions. People with BPD are said to express feelings of anger that are disproportionate to the situation evoking said anger. In other words, it is common for them to ‘blow things out of proportion’ (Barlow & Durand, 2005). Borderline Personality Disorder is often diagnosed in people who are already suffering from a mood disorder such as major depression or bipolar disorder (Barlow & Durand, 2005; Bradley, et al, 2005; Lewinsohn, Rohde, Seeley & Klein, 1997). BPD affected individuals are also said to be more prone to verbal and physical fights, especially with peers and family members (Barlow & Durand, 2005). Therefore, it is not surprising that BPD may be linked to adolescent violence towards parents.

Another issue that is often related to BPD is the issue of trauma, as it has been established that individuals with BPD have often experienced some kind of trauma in the past. For instance, many people with BPD report histories of abuse such as sexual assault, child abuse, or family violence (Golier, Yehuda, Bierer, Mitropoulou, New, Schmeidler, Silverman & Siever, 2003; American Psychiatric Association, 2000). In fact, BPD is viewed by some professionals as a possible variant of Post Traumatic Stress Disorder (PTSD) due to similarities in behaviour patterns observed across both conditions (Barlow & Durand, 2005), and people with BPD have been found to be more likely to suffer from PTSD than those without it (Golier, et al, 2003). There is some empirical support for the notion that individuals with BPD often have histories of trauma involving some form of abuse. In Golier, et al’s (2003) research, people with BPD had experienced significantly higher rates of physical abuse during childhood and adolescence when compared with people without BPD. It is difficult to ascertain whether exposure to trauma can increase a person’s risk of developing BPD, or if having BPD increases one’s risk of experiencing trauma. However, when combined with the fact that many adolescents who are violent towards a parent have also experienced or been exposed to family violence (or other forms of family dysfunction),
the idea that histories of trauma may be linked to BPD is not surprising, particularly in light of the disclosures made in the current research involving the BPD diagnosis of two adolescents who were abusive towards their mothers. Alarmingly, up to 67% of individuals diagnosed with BPD have at least one substance use disorder (Barlow & Durand, 2005). In both cases of the current research where BPD had been diagnosed, substance use was also an issue reported by the mothers as contributing to their adolescents’ abusive behaviour. Future attention to the issue of adolescent violence towards parents and its possible relationship to Borderline Personality Disorder may be beneficial to researchers and practitioners who are looking to shed more light on the risk factors for people engaging in such violence in adolescence.

**Family Structures**

While the family structures of the mothers interviewed varied considerably (see Appendix A), the most notable commonality across all cases was the absence of abusive adolescents’ biological fathers. Of the seven mothers interviewed, five were separated from their violent adolescent’s fathers (71%). In one case, the mother was widowed from the father of both of her children. In the remaining case, no information was provided about the abusive adolescents’ father. One mother was the sole-parent to her abusive son for ten years. She stated: “Being a sole-parent is the most difficult job in the world and the least acknowledged”. This mother pointed out that she bore the sole responsibility of making decisions in relation to her son during his childhood and adolescence and she commented, “I was so busy caring for him on my own that I became totally isolated and disengaged”. However, not all of the women interviewed were sole-parent mothers (see Appendix A). In three cases, the mothers had re-partnered, and all of these mothers had children or step-children with their new partner. Therefore, four (57 %) of the women were single mothers. In all cases involving children that resulted from re-partnering after separation from the abusive adolescent’s father, the stepchildren/children from the current relationship were not violent towards their mothers. Thus, only the adolescents in these families with absent biological fathers were described as violent towards their mothers.

One mother claimed that her daughter appeared to resent her for separating with her father. She said that “girls have a need to have their father around”. Another woman made a similar disclosure and commented that her daughter showed resentment towards her for divorcing her father as this separation had a major impact on her daughter’s functioning: “her life turned upside down when I separated from her father”. The same mother also stated that whilst her son was invited by the father to live with him following the divorce, her daughter was not. She said that as a result of this, her daughter felt rejected by both her father and her brother, and betrayal by her mother. One mother was widowed when both of her children
were young and this mother re-partnered, but the relationship only lasted six years. This mother believed that both of these events had a significant impact on her adolescent daughter. Another mother re-partnered approximately three months after separating from her children’s father and her subsequent relationship lasted seven years. This mother reported that both her son and daughter did not like her new partner as he was abusive towards her and this abuse was witnessed by the children.

Adolescents’ Relationships with their Fathers

It was common for the mothers interviewed to describe complex relationships between their abusive adolescent children and their children’s biological fathers. For example, one mother who has shared custody of her violent daughter with the daughter’s father said that when her daughter returns to her care after spending time with her father, she is a “nightmare” and “not the daughter I know”. Referring to her daughter’s behaviour and attitude after spending time with her father, this mother said “I know it sounds bad but I don’t like her”. However, this mother noted that after her daughter has spent some time with her over a few days, her behaviour improves and becomes less abusive. However, it was disclosed that when the daughter returns to the care of her father, she always says “I don’t want to go back with mum”. This mother described her daughter’s father as unsupportive of her approach to parenting, and she said that his attitude towards her (the mother) further exacerbates the problems she has with her daughter as these attitudes “are starting to rub off on her”. The same mother also reported that her daughter’s father has had substance abuse issues for many years and suffers from Bipolar Disorder. She believed that these issues further compound the situation with their daughter due to the daughter’s constant exposure to the effects of his substance abuse and mental illness. Another mother described her adolescent’s father as one who has been “in and out of the picture for many years”. This mother said that her son’s father has not seen him or been in contact with him in the past five years. According to this mother, the absence of her son’s father in his life has been confusing for him, and he has often asked when he would see his father again. Interestingly, this mother noted that the father’s discontinuation in his son’s life happened around the same time that her son’s abusive behaviour towards her commenced.

Level of Support Received from the Non-Abused Parent

It was common for the mothers interviewed to speak unfavourably of the support and commitment they received from their adolescents’ fathers in relation to the abuse situation. One mother commented that her violent daughter’s father is not supportive of the daughter’s needs. This mother disclosed that on one occasion, her son called her during the night from his father’s house in tears because the water wasn’t working, he had not eaten, everyone
was asleep, and he was frightened. It was suggested by another mother that her abusive daughter’s father is only supportive as a parent and involved in his daughter’s life when she is well-behaved. The same mother reported that her daughter’s father has made derogatory remarks towards her (the daughter) in the past by calling her names such as “dickhead”. According to another mother interviewed, her son’s step-father is unsupportive about the adolescent violence situation. This mother said that the effects of the adolescent violence have caused several problems between herself and her current husband and she reported that he often puts her down because of the situation with her son and sometimes suggests that she deserves or causes the abuse. Another mother stated that she received very little support from her son’s father with regard to financially providing for him. In addition, this mother described her son’s father as a “really cold person” and she said that he was emotionally uninvolved with his son. This mother likened her experience between herself, her ex-husband and her son to that of a ‘tug of war’. She disclosed that when her son was almost 15, he was given the option to stay with his father on a permanent basis, which he chose to do. However, it was reported that he returned to his mother on the same day that he left because his father rejected his request to live with him. As a result of this incident, this mother believed that her son experienced issues of abandonment concerning his father.

One mother stated that her son picked up on his father’s negative attitude towards her and began adopting similar views of his mother, which were ultimately expressed through abuse. She said that his overall attitude towards her deteriorated over time as he spent more time with his father. Furthermore this mother said that the father threatened to destroy her relationship with her son. Another mother reported that her daughter’s father used to tell her that there was nothing wrong with her and that the mother was the problem. In this mother’s view, this only reinforced the notion that the daughter’s abuse towards her mother could be justified. This mother said that the father’s attitude and influence may account for why her daughter did not want to engage in any self-help such as counselling, as it is likely that she believed that there was nothing wrong with how she was behaving. This mother partially attributed her daughter’s problematic behaviour to the major discrepancy between her and her ex-husband’s approach to parenting. She stated that she has often had to be the “bad cop” as the father does not enforce rules and apply consequences. Another mother reported a similar dynamic as she stated that her children regard their father as the “cool” parent as he always gives them what they ask for and will often undermine their mother’s authority. One mother described her daughter’s father as ‘absent’ even when he is physically spending time with his children. According to this mother, her children’s father allows them to do whatever they please and for this reason, her daughter prefers spending time with him rather than with her mother. Additionally, this mother disclosed that her children’s father sometimes makes derogatory remarks about her to the children. She also
reported that he does not seem to care if the daughter fails to go to school, skips classes, or stays out overnight, and there was one occasion when he was not aware that school was currently taking place and that his daughter was supposed to attend.

**Victimised Mothers’ Approaches to Parenting**

Some of the mothers interviewed said that they experienced difficulty with employing effective parenting strategies with their abusive adolescents. For instance, one mother asserted that she was never as strict with her children as her own mother was. However, this mother suggested that her parenting style was too ‘relaxed’ on some occasions, and she reported that attempts to be more strict only resulted in further conflict between her and her daughter. Another mother said that she has always given her children everything they have wanted. This mother described herself as “too easy going” and stated that she is aware that she has extended the boundaries with her children to a degree that has made it difficult for her to effectively impose discipline. Another mother said that she tried ‘soft’ parenting and ‘harsh’ parenting and that neither approach was effective in her situation. This mother reported that when rules were brought in and boundaries were set for her daughter, her daughter would withdraw completely. Another mother disclosed that she has a tendency to reward her daughter’s good behaviour and ignore her bad behaviour. This mother stated that she believes she should not have withdrawn from her daughter when she behaved badly as this probably made the situation worse. This mother argued that consequences are important for all children and that parents who say ‘yes’ to everything their children ask for and do not set and maintain firm boundaries can cause their children to feel less bonded with. In this mother’s view, “giving your children everything they want and failing to apply consequences when they behave badly is a lazy and absent approach”. One example that this mother provided of such an approach was “buying your child things to make them happy rather than spending time with them”.

**Histories of Abuse/Trauma in Adolescent's Backgrounds (Including Family & Domestic Violence)**

It is worth noting that the mothers interviewed for this project often made references to their abusive adolescents' histories of trauma such as family violence or sexual abuse. It was common for histories of family violence to be commented on. For example, of the seven mothers interviewed, six (86%) had experienced some form intimate-partner abuse in the past. The other mother did not disclose whether or not she had experienced abuse from a partner in the past. Of the six mothers who had experienced abuse from a partner, three (50%) had experienced such abuse from their adolescents' biological fathers and the remaining three had experienced abuse from other partners that were not their adolescents'
biological fathers. For example, in two cases, the mothers stated that their abusive
daughter’s biological father was never violent towards them or any other family members,
but their daughters witnessed abusive behaviour towards their mothers perpetrated by
subsequent male partners. One mother reported that her current husband is becoming
emotionally abusive towards her and that her abusive adolescent is afraid of him as a result.

For the mothers who had experienced abuse from their adolescent’s biological
fathers, it was common for them to disclose emotional and psychological abuse as the most
frequent form experienced. For instance, one mother reported that her son’s father was
emotionally abusive towards her during their marriage and after it ended. This mother did not
comment on whether her son was aware of this abuse. Similar circumstances were
described by another mother, who disclosed that her daughter’s biological father was
emotionally abusive towards her during and after their marriage, but this abuse was not
witnessed by her children and she believed that her children were not aware that it was
occurring. She also commented that experiencing abuse at the hands of her daughter made
her feel as though she was “reliving the nightmare I had experienced with her father”, but
she stated that the situation with her daughter was more complex as “you cannot divorce
your children”. Another mother stated that she was subjected to psychological abuse from
her former husband and that her children were exposed to it growing up. This mother
believed that her daughter has learned manipulative behaviours from her father as he
displayed emotionally abusive and controlling behaviours that were witnessed by the
children over many years. Although family violence was the most commonly reported form of
trauma in the histories of the adolescents described, there were other experiences
commented on that were said to have serious and long-term effects on the adolescents
affected by them. One of the mothers (14%) disclosed that her daughter was sexually
assaulted at the age of 21. This mother stated that her daughter was severely impacted
emotionally by this event. The same mother also reported that her daughter’s former
boyfriend died in an accident, which caused her to experience a great deal of grief.

The Impact & Effects of Adolescent Violence on Victimised Mothers

The impact of adolescent violence towards victimised mothers and the effects of this
form of abuse on mothers’ emotional well-being is one of the most important issues to draw
attention to. The abuse experiences described during interviews had varied effects on the
victimised mothers. In the words of one mother, “No one can prepare you for an adolescent”.
Another mother reported becoming ‘run down’ as a result of trying to work full-time, care for
two young children, and constantly have to try to control her abusive son’s behaviour and try
to obtain help. This mother stated that she has lost a lot of energy as a result of the abuse
and she feels like she has no time for her self, including the time and energy required to
obtain help such as counselling. According to this mother, all of her energy has gone into helping her abusive son become established in a safe living environment outside of the family home so that her two younger sons can live free from abuse. This mother also reported that she has suffered from anxiety as a result of her son’s abuse and she has been prescribed anti-depressants in order to cope with the situation. Another mother described her situation as “emotionally exhausting”. For the majority of the mothers interviewed, their experience of adolescent violence caused them to feel sad and dejected. In fact, one mother reported that at one stage, she became so despondent that she contemplated suicide. When the same mother was asked to comment on the overall impact of being a victim of adolescent violence, she said “it flattens you”.

Two mothers commented that their son’s abusive behaviours were unpredictable and they always felt like they were “walking on eggshells”. Another mother likened the situation with her daughter to that of “walking on eggshells” as she said that she could never predict what would happen next, which caused her to live in fear. A similar experience was disclosed by another mother who likened her abuse victimisation to “hanging off the edge of a cliff”. Another mother suggested that her daughter’s behaviour followed a cycle very similar to that of a domestic violence cycle (see Appendix D for more information about the “Cycle of Violence” theory). Another mother made reference to the “Cycle of Violence” by commenting that she was constantly worried that something terrible would happen with her son as his abuse was continuous and there was a cyclic pattern to it, which took place on a daily basis. One mother reported that she is so afraid of her son that she purposely leaves for work two hours early every morning (before her son has awoken) in order to avoid any form of confrontation with him. She asserted that because her son sleeps in her front lounge room, she cannot avoid him unless he is asleep, and she is so afraid of him that she believes avoiding him is the only way she can remain safe. Another mother said that she has lost friendships as a result of her daughter’s behaviour. It was common for the mothers interviewed to express feelings of isolation because of the abuse they have endured. For example, one mother said that she felt “very alone” during her experience of abuse and that she lived in terror and anxiety for years. The same mother also stated that after living with abuse for a number of years, she began to view such behaviour as the norm: “You can’t see a way out of it and you learn to live with it”.

Another common theme that emerged during the interviews with mothers was that of shame, self-blame, and guilt. Four of the mothers (57%) said that they blame themselves (or used to blame themselves) for their adolescents’ abusive behaviour towards them. Furthermore, five of the seven mothers interviewed (71%) expressed feelings of shame and guilt as a result of their situation. One mother stated “I felt enormously ashamed and tried to hide my son’s abuse from outsiders”. Another mother emphasised that there is a
considerably large stigma associated with being the mother of an abusive child. This mother said that she still carries concerns that other people will not be able to understand her situation if she discloses it to them. This mother reported blaming herself for the abuse on a regular basis and she stated that she continues to feel a lot of shame as a result of her experience. Another mother believed that she was partially to blame for her adolescent’s abusive behaviour because her daughter had been exposed to domestic violence perpetrated against the mother by a male intimate-partner. This mother said that she knows that abuse is neither acceptable nor justifiable, but she strongly suggested that if her daughter had not been exposed to her domestic violence situation or that if her entire parenting style had been different, the abuse from her daughter may not have occurred or may have been easier to deal with. Another made a similar disclosure: “I blame myself for some aspects of the situation because my children had to see a very complex situation unfold between their father and I”. This mother suggested that her separation from her children’s father, and the further conflicts that ensued, contributed to her daughter’s hostile and abusive behaviour towards her. She also believed that she was responsible for placing her children in a situation where they felt they needed to side with one parent over the other. Another mother articulated her feelings of guilt about her situation by simply stating “I could have handled it better”. However, this mother also said “the mistakes I made with my children were mistakes out of love”.

**The Help-Seeking Efforts of Victimised Mothers**

A range of help-seeking behaviours were reported by the mothers interviewed. These varied from approaching formal agencies for assistance (e.g. calling the police), to distancing themselves from the adolescent (e.g. by sending them to live with other people). For example, one mother stated that following her daughter’s first physically abusive incident, she was sent to live with her grandmother and as a result, her daughter felt rejected and “played up” while she was staying there. In reference to having to have her daughter removed from the home, this mother said “it is a horrible thing for a parent to have to do”. Several mothers mentioned involving formal services in the situation, which included: the courts; the police; counselling and psychological services; school psychologists and teachers; and health and mental health services. One of the seven mothers interviewed reported taking a Violence Restraining Order (VRO) out on her daughter. She said that this was the hardest thing she ever had to do, but she felt that her safety was being jeopardised and she needed to take drastic action. Three of the mothers (43%) made the comment “I tried everything” when asked how they attempted to obtain help for their situation.
Barriers Experienced by Mothers when Seeking Help

When seeking help for their situation involving adolescent violence towards them, one notable barrier described by some of the mothers interviewed involved the willingness of the adolescents to take part in interventions that could help them change their behaviour. For example, one mother said that her daughter would not accept responsibility for her behaviour as she was always perceived as the “victim” and would behave as such. This mother also reported that her daughter would not participate in counselling for her problems. This mother also reported that in her efforts to obtain help, referrals were made to a child and adolescent service but her daughter refused to engage, which meant that the agency could not provide any assistance. A similar barrier was encountered by another mother who reported that a lot of the services she approached for help told her that they could only help her if her son would engage with them. This mother said this was not possible as her son was unwilling to view his own behaviour as problematic and would therefore not engage with any agencies that offered their services.

When asked about the ability of service providers to assist with their situations of adolescent violence, many mothers said that they found many responses unhelpful and dismissive. One mother argued that service providers have a lack of insight into the issue and do not seem to grasp what victimised mothers are going through. She stated “professionals need to see, hear, and feel the abuse in order to truly understand it”. This mother said that she made hundreds of phone calls about her son’s behaviour and that she felt like she needed someone to observe his behaviour in order to assist her and this was not possible as the abuse always occurred in private. Another mother commented “it is very difficult to deal with abuse that cannot be seen”. In this mother’s view, when others cannot see or understand the abuse that someone is experiencing, they are unable to support them in a way that meets their needs. This mother said that she explored multiple avenues of help for her situation. “I tried so many things and just felt so helpless and hopeless”. Another mother believed that the complexity of her situation was simply not understood or acknowledged by anyone she approached for help. This mother said that she “hit brick walls” no matter what she tried and she reported that she was not seen as a “typical” type of abuse victim because she was assertive about her situation. This mother stated “it seemed that people didn’t want to help me because I didn’t fit the criteria of a ‘victim’. I wasn’t crying and acting all helpless. I was clear about what I wanted and this made people think that I wasn’t worthy of their help.” This mother also stated that if specific help had been available to her in her situation, there may be have been more options for her and her family at an earlier stage (before her son’s abuse escalated to the point where he had to be removed from the family home). In this mother’s view “some people just didn’t understand”.


One mother stated that the police have not been helpful in her situation as “there is no consequence for the abusive child when their mother seeks help from the police”. This mother reported that in one instance, she called the police as a result of her daughter’s violent behaviour and when the officer attended the house, he said to the daughter “your mother is a nag isn’t she?” Another service provider reported that she once called the police when her son was damaging the house and making threats to harm her. This mother said that the police response was inappropriate, derogatory to the mother and as a result, she no longer trusts the police or believes that they can help her. According to this mother, the officer said (with reference to her large size in comparison to her son) “why don’t you just sit on him?” This comment was made in front of the violent son and in her view, such a suggestion undermined and trivialised her experience. Additionally, this comment appeared to condone the use of physical force as a means of controlling her son. According to this mother, this ineffective police response reinforced to her son that he can get away with abusive behaviours, and it stripped her of her authority over him. This mother said that she has lost faith in the police and that she would not want to approach them for help in the future. This mother also stated that she does not have faith in the ability of the courts to assist her and she would not consider getting a Violence Restraining Order (VRO), as she believed that this would not prevent future abuse from her children.

One mother commented that she simply did not know where she could go to obtain adequate help for her situation. She said there was a lot less available to her at the time of her daughter’s abuse (during the 1990s when her daughter was a teenager and the abuse began) in comparison to what is presently available to help people living with abuse. This mother also felt that resources and information available to parents affected by this form of abuse was lacking when she was experiencing it. She also felt that people simply did not know how to help her or who to refer her to. Another mother emphasised that there is not a great deal of community support available for adolescent violence issues and that school psychologists are not helpful in such situations. This mother reported that she approached school psychologists about her situation on more than one occasion and was met with unsympathetic responses. A similar complaint was made by another mother who said she approached a social worker from her daughter’s school for help and was told that what she was experiencing was “normal teen-parent conflict”. She said that this social worker was not helpful at all and did not appreciate the seriousness of the situation. Another mother described a school counsellor as having a “very parent-blaming attitude”. This mother also said that she sought counselling for both her daughter and herself and did not find this helpful as she felt that the counsellors did not understand the situation adequately enough to assist in any meaningful way. This mother also argued that counselling and psychological services can be far too expensive for single parents. Another mother reported that for a one-
year period, her son regularly saw a child psychologist to help him with his ‘problem behaviours’. However, this help ceased when the psychologist’s funding was cut and she was not able to see him anymore. This mother reported that the psychologist was not replaced and no alternative options were provided for her and her son to receive ongoing support. This mother was disappointed because she found the services of this psychologist useful.

One mother reported trying to obtain help by calling parenting lines, but she said that their advice was too vague and the message she received was to “cross my fingers and hope for the best.” Another mother talked about various residential homes that her daughter stayed in when her abuse became too severe for her to remain in the family home. She said that there was only one youth accommodation agency that would give teenagers a second chance if they “messed up”. She described many incidents with which her daughter was forced to leave other homes on account of her abusive and self-destructive behaviour, but she said that one hostel was truly committed and allowed her daughter to stay there for two years (even though she frequently left and then returned). She said that there was an occasion where a different hostel actually sent her daughter back to the family home without consulting her. Another mother argued that when services try to offer help for all family violence situations, there is too much focus on ‘crisis management’ and not enough on ‘early intervention’. Thus, issues such as adolescent violence towards mothers are not dealt with until after they are well entrenched, making it far more difficult to effectively address such issues than if there had been some intervention during earlier stages. Another mother reported that she would often call services for assistance and be faced with major delays. For instance, she sometimes waited approximately two weeks to receive any help after requesting it. One mother reported that she completely lost faith in the ability of services to help in her situation and she became disillusioned.

Mothers’ Current Feelings & Concerns Relating to their Situation

When mothers were asked about how they currently feel about the situation with their abusive adolescents, responses varied considerably. One mother stated that she feels that the worst of her daughter’s abuse is over and that she is optimistic that her daughter will grow out of abusive behaviour completely. This mother asserted “my daughter has a very good heart and does not condone violence in others or believe that abuse is acceptable”. Another mother was optimistic and said that her daughter is currently making a lot of progress with regard to improving her behaviour. She expressed that she hopes her daughter has “turned over a new leaf”. The same mother also reported that she still provides a lot of support for her daughter and continues to have a loving relationship with her.
However, not all of the responses with regard to mother’s current feelings about their situation were positive. One mother reported that her youngest son is becoming abusive towards her and is “acting just like his brothers did”. This mother expressed grave fears that she will endure a similar cycle with him as she did with his older siblings. The same mother said she feels as though she has completely lost control of her children. Another mother stated that she no longer has a relationship with her son at all. She said she has attempted to make contact with him to make amends but he has declined this request. According to another mother, looking after her abusive son caused her too much stress. This mother said that her son was too exhausting to live with and that his abuse has “reached the point of no return”. This mother does not believe that her son will ever be able to live in the family home again without being violent. However, this mother reported that she no longer keeps her son’s abuse a secret as she says she has “had enough” and wants the message to be clear to others that adolescent violence towards parents is a serious problem.

6.3 Results from Interviews with Service Providers

Prevalence & Gender Factors

The majority of service providers interviewed stated that they have encountered adolescent violence towards parents approximately half a dozen times. However, approximately one-quarter of the professionals interviewed said that they came across cases of adolescent violence towards parents on a regular basis with some reporting that they encounter the issue at least once a fortnight. Only two service providers of the 20 interviewed (10%) disclosed that they have only encountered the issue once or twice. Furthermore, one service provider said that based on her experience with the issue, adolescent violence towards mothers is highly prevalent in Indigenous families.

Approximately three-quarters of the service providers interviewed stated that they have seen more adolescent violence towards parents from boys than from girls. Many attributed this to boys presenting as more of a physical threat to women than girls. A few service providers also suggested that there is a tendency for physical violence from girls to be viewed as less acceptable than physical violence from boys. For example, one service provider stated that the “Aussie man” image is to be strong and tough and that many boys are therefore more likely to express their emotions and frustrations with aggression and less likely to want to ‘discuss’ how they are feeling in order to resolve an issue. Hence, according to this service provider, boys may be more physically abusive but not necessarily more emotionally abusive than girls. Another service provider proposed that whether boys are more violent than girls is dependent on how adolescent violence towards parents is defined. This interviewee suggested that boys may be more likely to perpetrate physical violence whereas girls may be more inclined to perpetrate acts of emotional abuse. Another service
provider agreed and said that from their experience, girls tend to be more manipulative than boys and are more likely to engage in emotional abuse and mind games with their mothers. This participant also stated that girls are more likely than boys to be “damaging with their words”. This service provider suggested that boys tend to be more physically violent and physically destructive than girls, which means that they are more likely to commit physical assaults against a parent and/or destroy property.

**Age Factors**

When asked to comment on the ages of adolescents encountered in situations involving the abuse of parents, service providers’ responses varied considerably. One service provider suggested that the age of onset of an adolescent’s abusive behaviour towards a parent is dependent on factors such as their sex, ethnicity, or developmental level reached. For instance, this service provider commented that they have seen children as young as ten years old become abusive towards a parent, yet they have also seen children become abusive around the ages of 12 to 14 years. This service provider also commented that changes in development and maturity levels often coincide with the onset of abusive behaviour from adolescents. Another service provider stated that a common peak age of abusive adolescents is 15. According to this participant, this is the age when boys’ testosterone peaks. However, this service provider reported that they once encountered a case where a two-year-old boy referred to his mother as the ‘C’ word on a regular basis. Another service provider stated that children often show the first signs of abusive tendencies towards parents during the age range of 8 to 9 years. This service provider suggested that when this is the case, without intervention, abusive tendencies are likely to escalate to full-blown abusive behaviour as the child reaches puberty.

A number of service provider participants suggested that the age range of 12 to 14 years is a common time period for the onset of adolescent violence towards mothers. With regard to adolescents’ peak ages of abusive behaviours, the majority of service providers reported that 14 to 16 years is the most common age range. One of these participants believed that the early years of high school is a potential ‘danger period’ for at-risk adolescents, including those who have already started expressing themselves with violence. Another service provider proposed that between the ages of 14 and 17 years, power and control issues are most likely to arise between a child and their mother.

**Types of Abuse Encountered**

The majority of service providers interviewed claimed that verbal abuse towards mothers (such as yelling, swearing and name-calling) and damage to property were the most common forms of abuse they encountered. One service provider reported that they
have frequently encountered cases involving verbal abuse, controlling behaviours, physical abuse, and damaging property when they have been faced with the issue of adolescent violence towards mothers. Another service provider commented that both physical and emotional forms of abuse have usually been occurring in the situations encountered by their organisation. More than half of the service providers interviewed reported that physical abuse has been the most common form of adolescent-perpetrated abuse disclosed to them by a victimised parent. For example, one service provider stated that in most cases they have encountered, the adolescent perpetrators have punched or slapped their mothers. In one case described by one of the service providers interviewed, an adolescent daughter pinned her mother down on a bed and stabbed her. This service provider said that on another occasion, the same daughter came into her mother's bedroom, locked herself in, and strangled her mother. According to this service provider, the police were called as a result of this incident, and when they arrived, the daughter’s demeanour and attitude changed so much that the mother was not believed. This service provider believed that this change in behaviour indicated that the daughter could control her violence and was very manipulative. Another service provider described a case involving extreme physical abuse against a mother by three adolescent boys. This professional described incidents where these boys punched their mother in the face, stomped on her legs and arms, threw furniture at her, pushed her through windows, and broke a mirror over her head.

When verbal and emotional abuse was commented on, it was common for professionals to report that adolescents often engage in verbal threats to harm their mothers. Swearing at mothers and calling them derogatory names were also commonly reported by the service providers interviewed. For example, one reported that one mother was subjected to her boys calling her names such as “useless c***” and that they often say “it should have been you that died” (in reference to their father who passed away). A different service provider described a case where an adolescent daughter engaged in emotionally abusive treatment of her mother, predominantly in the form of withdrawing and refusing to talk to her, which the mother described as “emotionally cutting her off”. The same daughter was also said to use threats and standover tactics with her mother. Another service provider suggested that manipulation is a common form of abuse disclosed by victimised mothers and that this can manifest itself in unusual ways. For example, this service provider assisted a family who was experiencing problems with a seventeen year old diabetic girl who often purposely refused to take her insulin as she knew that this would upset her mother. In this case, the girl had been known to use this as leverage when she was trying to have her demands met. In addition, one service provider commented “young people can be just as good at manipulation and control as adults”.
One of the service providers interviewed spoke of a specific case involving a mother victimised by two sons where there was a clear escalation from non-physical forms of abuse to extreme physical violence. For example, this participant stated that the abuse would begin with the two boys yelling at their mother for not giving them what they wanted. This would progress to swearing and name calling and when this failed to get them what they wanted, they would begin damaging doors, walls and other property in the house. The damage to property would often be followed by physical abuse such as punching their mother and picking her up and throwing her. In another case described by the same service provider involving three boys who were violent towards their mother, it was stated that there was very little warning before their violence would occur as they did not seem to progress from less serious forms of abuse to more severe forms. This meant that their abuse was highly unpredictable, and this interviewee pointed out that this mother lived in fear every day as her only warning of her sons’ impending abuse was when they asked her for something that she could not provide (as her simply saying “no” to them results in severe verbal and physical abuse).

Some service providers stated that in the cases of adolescent violence towards mothers that they have been faced with, financial abuse has been common. According to one service provider, when financial abuse occurs, the attitude from the adolescent towards the mother is often “you owe me”. Another service provider commented on a specific case involving an adolescent boy who, from a young age (early teens), would manipulate and threaten his mother in order to get money from her for drugs. In addition to financial abuse, a number of service providers commented on adolescents engaging in damage to property. One of these service providers said that this form of abuse often takes the form of punching walls and breaking windows. Another service provider described a specific case where an adolescent girl regularly damaged walls and vandalised her mother’s house. Another interviewee talked about a case where an adolescent boy was told by his mother that he was not allowed to use the computer and he responded by sabotaging the computer so that nobody else could use. Another service provider described incidents where an adolescent boy wrote verbally abusive and degrading messages on his mother’s walls.

Family Structures

With regard to the family structures of the cases encountered by the service providers interviewed, it was widely reported that adolescent violence affects both sole-parent families and two-parent families. One service provider commented that there does not seem to be any ‘typical’ family structure in situations involving adolescent violence towards mothers. In this service provider’s experience, there have been many inconsistencies with regard to factors such as: whether the child’s parents are still together,
other siblings in the family, parents’ re-partnering after separation, and the existence of extended family members. However, another service provider stated that in their experience, victimised mothers have usually been separated from their abusive adolescents’ fathers. Another service provider gave a rough estimate that approximately 75% of mothers experiencing adolescent violence (that they have assisted) have been single mothers. Another participant suggested that not having a father-figure is a significant factor in adolescent-perpetrated violence situations, especially those involving males.

Some service providers also mentioned situations they have encountered where the parents of the abusive adolescent are still together but the father works away. One of these agencies stated that in one case they encountered, a significant proportion of the abuse towards the mother took place during the periods when the father was absent for work. In a case described by another service provider, the adolescent’s father worked away and was therefore not as involved in the parenting as the mother. Another service provider spoke of a case involving two boys who were abusive towards their mother whose father passed away in a car accident when the boys were young. In this service provider’s view, the violence perpetrated by these boys appeared to be largely a product of their father’s death as there was a subsequent drop in their lifestyle after his death (the mother struggled to provide for them financially during this time) and the mother’s grief during this time impacted on her parenting ability.

**Socio-Economic Status (SES) of Affected Families**

There were mixed descriptions provided by the service providers interviewed with regard to the socio-economic standing (SES) of families affected by adolescent violence towards mothers. One service provider stated that adolescent violence towards mothers has usually been reported to their agency by families of low SES. In an example provided by a different professional interview, two boys who were abusive towards their mother were disappointed that they did not have a lot of things that their peers have and that they did not have a lot of opportunities presented to them in comparison with the majority of other children in their neighbourhood and school. This service provider said that this particular family was living in poverty. However, approximately half of the service providers interviewed reported that adolescent violence towards parents has been reported to their services predominately by middle to upper class families. Based on these mixed findings, there appear to be no notable patterns with regard to families’ SES in situations involving adolescent violence towards mothers.
Adolescents’ Abuse of Other Family Members, Pets, Dating-Partners, & Community Members

It was commonly reported during the service provider interviews that adolescents who perpetrated abuse against their parents have often engaged in abuse towards other people. For instance, it was common for service providers to report that adolescents who have been abusive towards their parents are often abusive towards their siblings as well. According to one service provider, this is usually perpetrated by older siblings against younger ones. For example, one interviewee stated that they encountered a case where an adolescent male was abusive towards his two younger brothers. Another service provider described a situation where an abusive adolescent’s younger sibling used to stand up for the mother when the older one was abusive and that this sometimes resulted in the two adolescents fighting with each other. In another case described by a different participant, a 20-year-old daughter once defended her mother when her 19-year-old son was abusing her and as a result, the daughter was hit by her brother with a baseball bat. Another service provider spoke of a case encountered where an adolescent boy who had been abusive towards his mother was also violent towards his mother’s new partner, his stepsiblings and his biological siblings. In another case described by the same service provider, an adolescent boy had made threats to kill his mother’s romantic partner.

Abuse towards pets was mentioned by two service providers who stated that they have seen some cases of adolescent violence towards parents where the adolescents have refused to care for their pets or deliberately handled the pets roughly. Adolescents’ dating relationships were also commented on by some of the service providers interviewed and in one example provided, an adolescent male was described as being abusive towards his current girlfriend. The service provider who discussed this case said that this boy’s family members held grave concerns that he will kill his girlfriend as she has been subjected to a continuing cycle of domestic violence. The same service provider described another case where three boys who have been abusive towards their mother are now indiscriminately violent towards anyone that gets in their way (e.g. anyone who looks at them in a way that they do not appreciate).

Adolescents’ Substance Use

More than half of the service providers interviewed identified substance use as a major factor in situations involving adolescent violence towards parents. More specifically, these service providers reported that in many cases they have encountered, the children responsible for the abuse have had substance abuse issues. One service provider said that in the cases she has encountered that have involved adolescent substance use, the abusive behaviours of the adolescents towards their mothers have been more severe than the cases
that did not involve adolescent substance use. The same service provider believed that in some cases, abuse towards parents may be less serious (or may not occur at all) without the use of drugs by the adolescent perpetrator. However, one service provider emphasised that while drug and alcohol use may be a factor in adolescent violence towards parents, substance use does not directly result in abuse and she stated that “assuming that drug use leads to violence (or that violence leads to drug use) is a mistake than people constantly make when they try to “figure these kids out”. Another service provider agreed and stated that substance use is a “currency not a cause”. In this professional’s view, substance use may cause violence to escalate, but cannot account for it alone.

When service providers described cases of adolescent violence towards parents involving adolescent substance use, the following substances have been mentioned: alcohol, cannabis, cocaine, heroin, crystal methamphetamines (ICE), speed, and ecstasy. Alcohol and cannabis were the most common substances described by service providers as being used by adolescents who were abusive towards their mothers. In one case example provided, an adolescent girl used cannabis regularly and as a result, she began to show signs of drug-induced psychosis. In another example, a violent adolescent boy was described as a frequent user of alcohol and marijuana. Another service provider spoke of two cases where three boys who were abusive towards their mothers were users of heroin. Another service provider spoke of an adolescent who was addicted to ICE, and this professional stated that his mother was concerned that his drug use was increasing. Furthermore, this service provider noted that this boy’s ICE use made his violence less predictable and his mother “never knew when he’d snap”.

Other Adolescent Problem-Behaviours Reported

One service provider noted that adolescent violence towards mothers is usually disclosed in addition to other problems that the mother is seeking assistance for, for example, problem behaviours that the child is exhibiting at school such as bullying, or disobedience. Another service provider mentioned bullying as an issue faced by many adolescents who engage in abuse towards parents: “There is often real or perceived bullying taking place in the young person’s school environment”. Another service provider stated that their agency frequently receives referrals about adolescents who are abusive towards parents where the adolescents are also having problems at school. This agency stated that in almost all of the cases they have encountered, the abusive adolescents have experienced problems at school and many have had to change schools more than once. Many cases that this agency dealt with where problems at school were an issue involved adolescents being violent at school towards peers. The same service provider also commented that
adolescents encountered by their service have often run away from home and some have shown suicidal and/or self-harming tendencies in addition to their abusive behaviours.

**Mental Health Factors**

Some of the service providers interviewed reported that in many cases they have encountered, the violent adolescents have had a mental health issue. More specifically, Depression, Oppositional Defiance Disorder (ODD), Conduct Disorder, Attention-Deficit Hyperactivity Disorder (ADHD), Obsessive Compulsive Disorder (OCD), Borderline Personality Disorder (BPD), Schizophrenia, Asperger’s Syndrome, general learning disabilities, and drug-induced psychosis were all conditions that were mentioned by the service providers interviewed. The most commonly mentioned mental illnesses identified by the service providers as being experienced by adolescents who have been violent towards their parents were ADHD, Conduct Disorder and OCD. In many cases, service providers stated that the victimised mothers reported that the abuse from their adolescents was more severe and frequent when they were not taking their medication or when they were experiencing an ‘episode’ related to their mental disability.

**Histories of Abuse/Trauma in Affected Families**

It was common for the professionals interviewed for this project to mention the existence of histories of trauma in families affected by adolescent violence towards parents. The majority of service providers stated that there is often a history of family violence in situations of adolescent violence towards mothers, and some reported that histories of sexual abuse against either the adolescent or their mother have been disclosed. One service provider commented that in approximately 50% of cases encountered, there has been a history of domestic violence between the abusive adolescent’s parents. However, another service provider estimated this figure to be higher and suggested that there is domestic violence in the family’s history in approximately 75% of cases. One of the service providers who reported a high rate of co-morbidity of domestic violence victimisation and abuse of mothers by adolescent children suggested that these cases have often involved violent sons demonstrating behaviours that ‘mirror’ the violent behaviours of their fathers. Another service provider suggested that it is common for male adolescents to take on the role of the adult male in the house following parental separation, which is highly problematic if the father whose role they are replacing was abusive towards the mother. However, it was noted by some interviewees that past family violence victimisation of mothers affected by adolescent abuse has not always been perpetrated by intimate-partners. For example, one service provider described a mother who experienced and witnessed family violence perpetrated by her father while she was growing up. This service provider stated that the
woman’s father used to hold a loaded gun to her mother’s head every night and make threats and that these kinds of behaviours took place repeatedly over several years. In another case described during the service provider interviews, three boys who were abusive towards their mother were also exposed to their mother being physically and verbally abused by her partner’s brothers.

Parenting-Related Issues Encountered

Some of the service providers interviewed attributed adolescent violence towards parents to a lack of effective boundary setting by the adolescents’ parents. For instance, one stated that mothers are often too afraid to set boundaries and they become too lenient. In another service provider’s view, patterns of abuse begin when children want something and their mothers do not say “no” effectively. As a result, this service provider proposed that these children become frustrated and more demanding, which is likely to lead to a larger and more drawn-out argument that may result in abuse perpetrated by the adolescent against the mother. This interviewee also asserted that by setting no boundaries or consequences, parents play a very large role in adolescent problem behaviours, including abuse. This service provider also described situations where parents have overcompensated for their own troubled upbringings and expressed the attitude: “I won’t be the same kind of parent that mine was”. According to this service provider, this approach usually results in parents becoming too permissive and believing that it is unhealthy to set boundaries and apply discipline, which can cause a child to be “over-entitled” due to being “used to getting what they want too frequently”.

While some service providers believed that parents who do not apply firm enough boundaries with their children are at risk for experiencing adolescent violence, there were others who suggested that adolescent violence towards parents can also be experienced when parents are “too strict” with their children. For example, one service provider believed that permissive parenting and overly punitive parenting are both key factors in adolescent violence towards parents. It was suggested that if both styles existed on a spectrum with ‘too permissive’ at one end and ‘too punitive’ at the other, the occurrence of adolescent violence towards parents would be high at both ends. This theory suggests that there is an optimal parenting approach (with regard to discipline and boundaries) that exists in between styles that are too permissive and too punitive in nature. This service provider stated that almost all parents that have been assisted by their agency experiencing adolescent violence have fallen into either the ‘too permissive’ or ‘too punitive’ category, and they commented on a tendency for parents to go from one extreme to the other (i.e. they have been too lenient with their child in the past and their child has been abusive, so they adopt the opposite parenting style and become too harsh with their children, which fails to alleviate their
problems). Another service provider described a similar spectrum involving the level of love and entitlement that children can have: at one end of the spectrum, children are over-loved and at the other end, they are under-loved. According to this service provider, under-loved children have less control of their feelings and less understanding of their emotions, whereas over-loved children have too much invested in their feelings (and attribute far too much importance to their own feelings) and as a result, the latter were said to be more selfish and more indulgent than children in the under-loved category. This service provider proposed that it is healthy for children to sit in the middle of the spectrum (i.e. they receive an optimal level of love and entitlement and are not over-entitled or neglected) because the over-loved and under-loved types are both at risk for becoming abusive.

Another parenting factor that was noted by one of the service providers was that mothers often feel guilty if they take time out for themselves as they feel that they are defined by their ‘mother’ status. This means that they are often overloaded with responsibilities and become accustomed to putting themselves last. In this service provider’s view, “society places unrealistically high expectations on mothers”, and it was suggested that these issues may play a role in the occurrence of adolescent violence towards mothers. Another service provider reported that in their experience, mothers are unable to effectively parent a child when they have experienced family violence, for example, intimate-partner abuse from the child’s father. According to this service provider, experiencing any form of abuse is likely to inhibit a mother’s ability to set boundaries with a child and remain calm in difficult situations. This participant also stated that it is common for mothers to “shut down” as parents following experiences of domestic violence, which can impact on their children regardless of their age.

Some of the service providers interviewed suggested that discrepancies with regard to how mothers and fathers parent their children may also represent a significant factor in the issue. It was recognised by one of these participants that mothers’ and fathers’ attitudes towards adolescent violence do not always fall in line with one another as it is common for one parent to appraise the situation differently to the other. This service provider commented that “getting parents on the same page” about issues such as adolescent violence is a significant challenge. Another professional commented that it is common for parents to have been brought up differently from one another and therefore exhibit conflicting parenting strategies and values. It was reported by another service provider that “good cop, bad cop” parenting appears to be common in families experiencing abuse from an adolescent child.

**The Impact & Effects of Adolescent Violence on Victimised Mothers**

The effects of adolescent violence towards mothers on victimised mothers as described by the service providers interviewed were varied. Firstly, it was noted by the
majority of service providers that mothers who are victimised by an adolescent child often experience feelings of powerlessness. One commented that many mothers affected by this issue demonstrate a ‘victim’ mentality as they become more and more disempowered. Another service provider commented that these mothers often experience diminished self-esteem as a result of the abuse. Furthermore, two service providers reported that mothers’ informal support networks such as social relationships often fall through as a result of adolescent violence towards mothers. Another service provider stated that she has seen people become homeless because of this issue and because of the failure of services and the community to understand it and effectively respond. Another effect of adolescent violence towards parents that was commonly described by service providers was mothers’ continuously expressing fears that their abusive son or daughter’s behaviour will escalate. In addition, several professionals interviewed stated that a feeling of “walking on eggshells” is commonly expressed by mothers experiencing adolescent violence. For example, three service providers from one agency all described cases where mothers felt as though their relationships with their abusive children were characterised by a constant feeling of “walking on eggshells”. It was also noted that such a feeling did not go unnoticed by their abusive children who appeared to feel empowered as a result of having such an impact on their mothers.

Another notable theme with regard to the impact of this issue on victimised mothers was the tendency for mothers to minimise or justify their children’s abuse on account of blaming themselves for it. For example, one participant noted that there is tendency for victimised mothers to view themselves as failures as parents. The same service provider stated: “There is a major degree of shame and stigma attached to this problem. People are often ashamed of the abuse due to a lack of awareness about it in the community and their own fear of being alone doesn’t help”. Another service provider reported that in her experiences, mothers have often expressed a belief that they have failed as parents and that the abuse is their fault (especially if their child was exposed to family violence in the past). This service provider also stated that many mothers blame themselves for not meeting the needs of their children (e.g. by not having enough money) and often believe that their shortcomings as parents have caused the abuse. This service provider recounted a case where the victimised mother repeatedly blamed herself for the abuse as she believed that when she was grieving the death of her sons’ father, she did not do enough for them to help them deal with their own grief. This interviewee said that this mother continuously expressed that she felt as though she failed her children as a mother in the aftermath of their father’s death. Another mother described by a different service provider expressed considerable guilt, shame and sadness as a result of her experience of adolescent violence. This mother reportedly communicated frequent feelings of disappointment about the breakdown of her
relationship with her daughter (particularly that her daughter did not seem to want to change her behaviour or try to “work things out” with her). This mother felt that their bond as mother and daughter had been broken and that her daughter did not seem to place much importance on keeping that bond.

**Similarities Between Adolescent Violence Towards Mothers & Intimate-Partner Abuse**

Unsurprisingly, several of the service providers interviewed suggested similarities between the dynamics of adolescent violence towards mothers and those of intimate-partner abuse. For instance, one interviewee stated that the nature of many adolescent violence cases they have encountered have closely resembled that described in the “Cycle of Violence” model (see Appendix D). This model has been designed to apply to domestic violence situations and is usually applied in cases involving intimate-partner abuse. However, the model can be applied to other forms of family violence as there are many forms of abuse that can contain elements of the cycle. See Appendix D for a more comprehensive explanation of the “Cycle of Violence”. Four other service providers mentioned the “Cycle of Violence” and related it to adolescent violence towards parents. In the words of one of these participants: “There is a cycle of abuse occurring between adolescents and their parents that should not be ignored”. Another service provider related the behaviours of abusive adolescents to “power and control” categories of family violence. One example of such behaviours was ‘emotional blackmail’.

One service provider commented that mothers affected by adolescent violence who have also experienced violence from an intimate-partner will often confide that they feel as though they are reliving their prior experiences of abuse. According to another professional interviewed, the notion of male and female roles seems to be a significant factor in situations of adolescent violence towards parents. For instance, many cases that were encountered by this service provider involved male adolescents who demonstrated traditional attitudes about females (e.g. that they should be passive and obey male orders) and males (e.g. that they need to assert their masculinity, particularly in the home environment). Furthermore, one service provider commented that in some cases encountered, there appears to be some level of cultural acceptance of male violence in the home. In these instances, such abuse was seen as a way of life that mothers were expected to endure.

**Adolescent Violence Towards Mothers & ‘Stockholm Syndrome’**

One service provider noted that in some instances encountered involving mothers victimised by their adolescent children, the mothers exhibited behaviours symptomatic of Stockholm Syndrome. Stockholm Syndrome refers to a psychiatric condition that is experienced by an individual in response to a situation of trauma such as a kidnapping,
hostage situation, or abuse (Graham, Rawlings & Rimini, 1988). It derives its name from a bank robbery that took place in Stockholm, Sweden in 1973 during which the hostages began to identify with their hostage-takers (Kuleshnyk, 1984). The condition is characterised by the development of positive feelings on the part of the victimised individual towards their captor or abuser (Wallace, 2007). It is proposed that the syndrome results from the power imbalances that occur during hostage-taking, kidnapping, and abusive relationships. In research by Graham, et al (1988), the relationship between Stockholm Syndrome and the experience of women affected by family violence was examined by comparing the situation of women in abusive relationships to that of hostages and kidnap victims. Both situations had commonalities such as the incidence of violence, domination behaviours, seclusion of the victims, and intimidation (Graham, et al, 1988). Furthermore, several women who had experienced family violence expressed continuing feelings of love and care for their abusers, which indicated that many women in family violence situations appear to display symptoms of Stockholm Syndrome (Graham, et al, 1988). Given these findings, it appears reasonable to suggest that Stockholm Syndrome may be experienced by mothers who fall victim to abuse at the hands of their adolescent children. Perhaps the relationship between Stockholm Syndrome and adolescent violence towards parents could benefit from some further exploration.

The Help-Seeking Efforts of Victimised Mothers

When service providers were asked to comment on the help-seeking efforts of victimised mothers, several themes emerged. One service provider stated that the ways in which parents respond to adolescent violence towards them may be a significant factor in the severity and long-term outcomes associated with the issue. It was noted by two service providers that mothers tend to put up with a lot of abuse from a child before seeking help, which means that by the time they access services, the abuse has become well entrenched and has escalated over time. One service provider reported that many mothers do not seek help for adolescent violence out of loyalty to their child as they feel that they would be betraying their adolescent by talking to someone about their behaviour. Another probable explanation provided by several service providers as to why many victimised mothers do not seek help for their situation at an early stage (or at all) concerns the high levels of shame and guilt experienced by these mothers. In one service provider’s view, “there is a tremendous amount of shame and guilt felt by these mothers. They always seem very embarrassed about their situation when they talk about it”. Another service provider reported that their agency commonly receives calls from women saying that adolescent violence has been experienced by a friend or other family member. According to this interviewee, these mothers have later disclosed that the abuse was in fact happening to them and that they
were embarrassed to admit it initially. Another professional interviewed asserted that when such abuse occurs in Indigenous families, the abuse is likely to be kept private for cultural reasons. In one example provided by this service provider, a victimised mother had never sought help for her partner or her son’s abuse towards her because she was used to being abused and saw it as a “normal way of life” for her.

When service providers commented on the types of help-seeking that victimised mothers often employ, various behaviours were described. These included: calling the police; sending the adolescent to live with other family members; taking out a Violence Restraining Order (VRO); approaching a counselling, family violence, or parenting service for help; discussing the issue with staff at the child’s school; and confiding in informal support networks (e.g. friends and family members). A common and drastic measure taken by some of the mothers described during the service provider interviews was obtaining a VRO, which legally separated them from their abusive adolescent. There were four cases described by service providers where a mother took out a VRO against their child. In all of these cases, it was stated that the mothers viewed this as a last resort and felt sad and guilty that they had resorted to obtaining VROs. One service provider said “having to have a restraining order against her son was seen as a major dilemma by this mother as she loved him and wanted to remain close with him. She just wanted the violence to stop. However, all of these service providers also stated that these mothers felt that there were no other options (aside from a VRO) that could ensure their safety.

Barriers Experienced by Mothers when Seeking Help

When service provider participants were asked during interviews to comment on the barriers experienced by victimised mothers when they sought help for adolescent violence, several issues were commented on. First of all, all service providers interviewed stated that there is a major gap in the resources and services available to assist mothers affected by this form of abuse. This gap was suggested in relation to both the availability of useful services and resources for victims to utilise and the capacity of existing services and resources to be of assistance. In one service provider’s view, “this issue is extremely challenging for professionals as there are currently no initiatives in place that directly address it. This is the biggest problem I have experienced when I’ve tried to help these families – that there is nothing to refer people to”. Another service provider spoke of a mother who had sought help from approximately five agencies before approaching this individual. This mother did not describe any of these agencies as helpful and she appeared to have lost faith in the ability of services to help her. Another service provider asserted that “people are afraid to acknowledge the issue of abuse towards parents from young people and society can’t seem to accept that it is a problem for so many people”. According to this
service provider, this has resulted in people failing to understand adolescent violence towards parents, which is a key contributor to why there are so few resources available to help affected families. In the words of another professional interviewed: “When someone continuously knocks on doors for help and gets nowhere, they will become discouraged from asking for help in the future”.

Another common barrier reported by a number of the service providers interviewed, involved ineffective agency responses to victims of adolescent violence towards parents. For example, it was reported by four service providers that mothers that have been assisted by their organisation have reported that the police have not been responsive to them when they asked for help. In one service provider’s view, when mothers have been subjected to abuse from a son or daughter, but have not been physically harmed, the police are generally reluctant to intervene, despite the victim’s fear and the risk posed by the perpetrator. Another service provider said that the police often provide limited assistance and simply tell mothers to “get a restraining order”, which is not a realistic or desired option for most mothers given the nature of the parent-child relationship. Another interviewee commented that police tend to view adolescent violence towards mothers as “typical teenage behaviour”. However, this service provider emphasised that police with an understanding of family violence (such as those who work specifically in family violence-related positions) have generally been very helpful towards the clients their service has assisted. Other services, such as legal and mental health services, were also described by service providers as providing insufficient assistance to victimised mothers. One service provider disclosed a case involving a mother who tried to get help from a mental health service for her son’s abusive behaviour and described this service’s response as “unhelpful and uninterested in her situation”. This service provider reported that this mother felt that the mental health service dismissed her and made her feel even more disempowered. Another service provider commented on a woman’s experience in the courts: “She tried to get a Violence Restraining Order more than once but the magistrate told her ‘that’s your daughter’ and dismissed her applications solely because of the mother-daughter relationship. No meaningful consideration was given to the seriousness of this mother’s situation”. According to this service provider, this experience caused this mother to feel extremely dejected.

Another barrier noted by one service provider was the willingness and ability of victimised mothers to commit to strategies that may be able to aid the situation. This interviewee suggested that some parents can be their own worst enemy as they will want help but will not be accepting of the options provided to them. This service provider believed that some parents want all of the work to be done with their kids, but will not be willing to work on their parenting approaches in response to the abuse. According to one participant, when counselling has been provided to victimised mothers and/or other concerned family
members who have accessed their agency, the sessions have typically ended prematurely (for instance, in many cases the mother and adolescent have only attended one or two sessions before withdrawing). This service provider identified this lack of commitment from one or more parties as a major barrier to obtaining help. This professional reported that a common scenario appears to be that mothers will want assistance and request that someone work with the child to try to resolve the situation, however the young person will not engage in the intervention being offered. Another service provider emphasised that for some parents, it is more difficult to access services than others understand. For example, approaching a service and committing oneself to utilising the service can be exceedingly difficult for individuals experiencing mental illnesses such as depression, anxiety or Post-Traumatic Stress Disorder (PTSD), and the experience of a mental illness such as these is not uncommon for abuse victims.
7.0 Results & Discussion Part 2: Participants’ Recommendations

7.1 Mothers’ Recommendations

Understanding & Defining the Issue

With regard to defining adolescent violence towards parents and understanding the nature of it, it was widely held by the mothers interviewed that the issue needs to be regarded more seriously. For example, one mother stated: “When someone is going through what I went through, their situation should be seen as the emergency that it is”. Another mother made reference to the assumption that adolescent violence towards mothers is ‘normal teenager-parent conflict’ by arguing that “not all kids do it”. This mother emphasised the importance of paying more attention to the issue when it is disclosed and not assuming that such abuse is “typical of teenage children” or “just a phase”. Another mother noted that there are similarities between experiences of adolescent violence towards mothers and other forms of family violence (notably intimate-partner abuse). In response to this, this mother stressed the importance of understanding that, like other forms of family violence, adolescent violence towards mothers is cyclic in nature (refer to Appendix D for more information about the “Cycle of Violence” model as it applies in family violence situations).

One mother strongly believed that adolescent violence towards parents should be understood as a complex form of family violence. In her view, conceptualising adolescent violence solely as a ‘parenting issue’ trivialises such abuse and places responsibility for it with those victimised whilst removing responsibility from perpetrators. Another mother pointed out that the issue needs to be recognised as one that affects entire families. This mother recommended the provision of ongoing support to parents and their adolescents rather than assuming that this form of abuse is only a problem for the victim or perpetrator alone (and thus only providing support to one or the other). Another mother agreed that when attention is paid to the issue of adolescent violence towards mothers, the focus should not be entirely on the parent or adolescent. Rather, this service provider stated that the key focus should be on the behaviours that are causing the problem.

The Importance of Early Intervention

All of the mothers interviewed highlighted the need for early intervention with children at risk of perpetrating abuse in order to prevent adolescent violence towards parents from emerging. For example, one mother recommended early intervention in all circumstances where there are known issues with regard to a family’s functioning (with respect to the parenting of a child) such as separation, divorce, or domestic abuse. This view was supported by another mother who advocated for early intervention involving “children with parents who have separated, children who are starting to use abusive methods of conflict...
resolution, and children who have experienced some form of grief or major disruption in their lives”. Three of the mothers who recommended early intervention suggested that such intervention should take place in schools. According to one mother, “there needs to be more implemented in schools to address the kinds of issues that I faced with my daughter”. This mother suggested that all school-aged children be educated about the following issues: abuse; separation; relationships; grief; health and mental health; drugs and alcohol; and healthy versus unhealthy disagreements between partners, family members and friends. Another mother agreed with this approach and stated that “early intervention is crucial. This should occur during primary school for all children and should serve to teach them about conflict resolution and respectful relationships”. Another mother suggested that schools need to be equipped to support and respond to children with complex circumstances, as school occupies the majority of a child’s time and energy and therefore, there is high potential for positive progress to be made with children during school hours.

**Practitioners’ Knowledge, Experience & Qualifications**

Some of the mothers interviewed commented on the capacity of individual service providers to assist mothers affected by adolescent violence. For example, one recommended professional training around family violence and adolescent behavioural issues for front-line agencies who are likely to respond to victimised mothers. She also recommended that when service providers attend professional development training, they should receive some kind of benefit or reward as an incentive to take part (e.g. the issuing of professional development points) that is recognised by the institution that they are employed by. Another participant recommended the delivery of specialist training for the police around issues relating to adolescent violence towards parents. This mother also suggested that a specialised response team within the police be implemented that can respond to violence in the home involving young people. It was pointed out by this mother that the understanding of the issue within the police service and the willingness of police to intervene in situations of adolescent violence towards parents are both in need of improvement. In addition, two mothers commented on the ability of counsellors to provide assistance to victimised mothers. One stated that counsellors in the relevant fields (i.e. the parenting and family violence sectors) require a more advanced level of education about the complexity of adolescent violence towards parents. Another mother believed that counsellors who are brought in to deal with adolescent violence towards parents should have experience working with clients affected by family violence issues. Furthermore, this mother believed that such counsellors must also understand trauma, and have experience working with abuse perpetrators as well as victims.
The Development of Resources/Programs for Adolescent Perpetrators

Some of the mothers interviewed highlighted the importance of providing specialised programs for young perpetrators of violence against their parents. For example, one mother recommended a similar approach to that of “Breathing Space”, which is a WA-based program for men who have perpetrated domestic violence. This mother recommended a facility for young people who have been violent in the home that allows them to ‘cool off’, receive counselling, gain exposure to other young people in similar circumstances, and to allow the parent and the adolescent to receive some “much needed time-out”. Another mother emphasised that rather than punitive responses, adolescents who perpetrate abuse against a parent require ongoing support and education concerning their behaviour. This mother stated that children responsible for abuse against their parents do not believe in themselves and therefore require encouragement and assistance with self-esteem issues.

The Development of Resources/Programs for Victimised Parents

All of the mothers interviewed shared the viewpoint that programs and services for parents affected by abuse from an adolescent child are essential. More specifically, all mothers believed that group programs for victimised parents would have been useful in their situation had such programs been available. In addition, all of these mothers strongly recommended the implementation of group programs in the near future to help other mothers affected by this issue. One reason provided for why such groups were considered important for victimised mothers was that the responsibility for addressing a child’s behaviour lies with the child’s parents, therefore interventions need to focus primarily on assisting parents in order to make progress regarding the abuse situation. Another reason suggested by the mothers interviewed as to why they recommend a group program for mothers was that it was seen as beneficial for parents affected by adolescent violence to be exposed to other parents experiencing similar situations. According to one mother, this would allow said parents to see that they are not alone in their experience: “The positive effect that peer support can have should not be underestimated”. Another mother stated that many parents could benefit from such a program as they may, at the very least, want to talk about what they are going through with other people who understand. Another mother shared this sentiment: “When someone needs help for an issue such as this one, they need to be able to talk to someone about it and no one is better for this than someone who understands the situation intimately”. Another mother said that a group program would have been very helpful in her situation as “even if such a program cannot fix the situation, it may empower the parent which is priceless”.

With regard to the design and implementation of support groups for parents, the majority of mothers interviewed believed that groups should aspire to assist mothers to
regain their confidence as parents. Furthermore, it was recommended by one mother that the provision of parenting education and support during programs is important, and that this should include practical information about options such as legal measures. Another mother agreed and stated that such a program should not simply tell mothers how to parent, but should provide them with options, strategies, support, and other people’s stories. The same mother also proposed that parents should be rewarded in programs for making modifications to their parenting that result in modifications to their child’s behaviour. According to this mother, “this would reinforce these changes and provide parents with more encouragement and support”.

Another recommendation provided as to how support groups for mothers should be constructed was that such groups should work towards allowing parents to understand that they are not an ‘abnormal’ or ‘bad’ family if they experience abuse at the hands of an adolescent. This mother believed that the shame and embarrassment that victimised mothers feel as a result of the abuse they have endured is a critical issue to address. Additionally, a specific type of group that combines its focus on family violence issues and parenting issues and strategies was strongly recommended by four of the seven mothers as these mothers stated that adolescent violence towards parents is both a parenting and family violence issue (not just one or the other). Another mother suggested that when adolescent violence towards mothers involves sole-parent mothers, they may feel more comfortable in single-sex support groups. However, this mother also stated that it may be beneficial for there to be diversity within the groups with regard to people’s circumstances, in which case, mixed groups with participation from parents from a range of backgrounds and circumstances were recommended.

Along with group programs, participants recommended specialist counselling, advice, support, and outreach from professionals who understand and have extensive experience with family violence issues. It was also emphasised by two of the mothers that any services developed to assist victimised parents need to be made available across the state and be well-known to the general public. One mother in particular noted that resources for mothers experiencing these issues are extremely limited and that this lack of available information requires urgent reform. She recommended the development of resources that specifically address adolescent violence towards parents, as existing resources may indirectly address the issue or contain some information that can help, but “they do not define the issue and tackle it head on”.

**Education, Awareness-Raising & Resources for the Public**

One mother highlighted the fact that parents who are victimised by adolescent children are continually feeling like they are alone in their experience as “the public does not
have a strong enough grasp on the issue”. This mother also stated that members of the public need to receive messages that all individuals have the right to safe and healthy family relationships, and she believed that awareness-raising and education about the issue in the community is essential for achieving this objective. Another mother argued that public attitudes that support or condone adolescent violence towards parents and attitudes that are judgmental of parents require more attention in research in practice. It was suggested that such attitudes could be targeted via education campaigns, awareness-raising initiatives, or new resources that educate the community about the true nature of adolescent violence towards parents.

With regard to specific measures that could be put in place in order to raise awareness about the issue of adolescent violence towards parents and try to eradicate problematic misconceptions about the issue, some of the mothers interviewed commented on the need for wide-spread and readily available information. For example, one mother argued that there should be a brochure available to the community, which can be obtained from all relevant services in WA (including health-related services). This mother proposed that this brochure should contain information and the answers to ‘frequently asked questions’ about the issue including information about services that can provide assistance to affected families. The same mother also recommended providing resources and information to schools about family violence issues to educate and support young people.

Other Recommendations

There were a number of other recommendations concerning effective responses to the issue of adolescent violence towards parents made by the mothers who participated in this project. Firstly, one mother pointed out the need for interagency collaboration regarding the issue. This mother argued that no single agency is going to be able to provide the answer and that organisations need to work together to address the problem in order for responses to be effective. Another mother pointed out a practical consideration and said that services and programs aimed at helping families affected by adolescent violence towards parents should not cost anything. It was recognised by this mother that cost can be a significant barrier to help-seeking for people affected by any form of family violence. Another mother made a recommendation concerning the relationship between adolescents and their school teachers by suggesting that teachers require more disciplinary power as many school-aged children have a sense of entitlement that outweighs their sense of responsibility. This mother argued that by providing teachers with more power, young people displaying problematic behaviours at home would be less likely to have these behaviours reinforced in the school environment.
Another interesting recommendation made during one mother’s interview was that compulsory co-parenting (regardless of marital status) should be ordered during time periods where a difficult issue is affecting a child (such as adolescent violence). This mother said that “when adolescent violence is an issue, the entire family unit needs to come together to work collectively towards bringing the child back on track”. This mother believed that this goal could only be met via the participation of the entire family in programs rather than only the victimised parent bearing the responsibility. According to this mother, “you need both parents’ involvement in the process”. This mother also recommended a male-mentoring system being put in place for male adolescents who do not have relationships with their fathers or access to father-figures. The need for more male teachers was also pointed out by this participant. Furthermore, some of the mothers interviewed believed that an important approach to dealing with the issue of adolescent violence towards mothers involves emphasis being placed on the relationship between the parent and the child as in most cases, the parent experiencing the abuse will not want this relationship to be severed. Some of the mothers interviewed argued that the goal of any intervention designed to address this issue should be to repair the relationship rather than merely provide options that would result in the separation of the parent and child. Another interesting recommendation made by one of the mothers was that a ‘neighbourhood watch’ be set in place for all family violence-related issues. If such an approach were implemented, neighbours suspecting or witnessing family violence could anonymously intervene by calling a specific help-line that can respond to the issue at any time during the day or night. This mother strongly emphasised that support and assistance from the community is essential in all family violence situations.

7.2 Service Providers’ Recommendations

Understanding & Defining the Issue

As was the case with the majority of the mothers interviewed, it was noted by many service providers that understanding and defining adolescent violence towards parents is critical to the success of any efforts to reduce the problem and assist affected families. One professional stated that there needs to be a framework in place to explain adolescent violence towards parents that provides a clear definition that is well understood by the community and by the service providers concerned with the issue. Another interviewee stated “what we define as violence defines who the perpetrators are”. It was also argued by this service provider that people need to start recognising adolescent violence towards parents as a form of family violence. This view was shared by the majority of participants during the service provider interviews. However, it was emphasised that while adolescent
violence towards parents should be considered a form of family violence, it must be recognised as a ‘unique’ form because responses and interventions that are effective in intimate-partner violence situations may not work in circumstances involving adolescent violence towards parents. One particular interviewee stated “it is hard enough to leave an abusive relationship let alone your own child”. Therefore, it was argued that people need to understand the difference between the relationship between an abusive parent and their child and that of two partners living in an abusive relationship as people cannot be expected to be able or willing to separate from their child or report them to authorities.

Only one of the service providers interviewed believed that adolescent violence towards parents is a parenting issue rather than a family violence issue and that the responsibility for changing the abusive behaviour of the adolescent lies solely with the parent. While many service providers agreed that adolescent violence towards parents is an issue requiring attention in the parenting sphere, the majority strongly believed that adolescent violence is a form of family violence and should therefore be considered both a parenting and family violence issue. In fact, one of these service providers suggested that there needs to be an academically robust theoretical framework around the general issue of family violence that incorporates all forms (including adolescent violence towards parents) and does not predominantly focus on intimate-partner violence. This service provider argued that many existing family violence theories do not fit with other forms such as adolescent violence, which means that they are not applicable to the situations described in this research. It was also argued by this service provider that there is a lack of focus on the issue of power and control when young people’s violence within the family is considered. It was argued that power and control is a major component of adolescent violence towards parents and should therefore be acknowledged when the issue is conceptualised.

**Understanding & Responding to Adolescent Perpetrators**

It was pointed out by some service providers that in order to effectively understand the problem of adolescent violence towards parents, one must first understand the adolescent perpetrators themselves and the issues that are impacting negatively on their lives. For instance, one participant noted that it is necessary to understand adolescents’ needs in order to be proactive, for example, many want to obtain a sense of “freedom”. Another professional commented on young people having appropriate role-models in their lives that they can relate to and who understand them: “Young boys require a male role-model, especially during the adolescent years”. In addition, one of the service providers interviewed believed that it is important to explore self-esteem issues that may be a factor for children perpetrating abuse. Furthermore, two service providers mentioned children’s resilience levels as an important consideration in situations involving adolescent violence
towards parents. For example, one interviewee stressed the importance of exploring resilience levels when trying to understand why young people behave abusively, particularly in children from families where there is a history of abuse or some kind of family dysfunction. It was argued that resilience levels will differ from child to child and that these need more attention in efforts to assist families experiencing abuse from young people. Another service provider highlighted the need to understand that children are impacted by events in different ways as it was stated that “five children in one family may have five different resilience levels”. This participant argued that some children can be placed at higher risk for perpetration of violence than others and that for those with “troubled pasts”, this “risk-level” may be largely attributable to their coping mechanisms.

The Importance of Early Intervention

All service providers interviewed advocated for early intervention for young people experiencing the types of problems that have been identified as affecting adolescents who behave abusively towards family members. According to one service provider, “early intervention is critical for any child or adolescent who may be at risk of becoming abusive”. A common reason provided as to why early intervention was considered so important was that the focus of any efforts to address the issue of adolescent violence towards parents should be on prevention rather than intervention. As one service provider articulated, “when any kind of problematic issue comes up with a young person, intervention is critical, but this must happen at the earliest possible opportunity.” For example, it was recommended by one participant that positive parenting strategies be implemented while children are at an early age, which requires the availability of services and programs that can assist the parents of young children, regardless of whether or not those children are at risk of becoming violent. It was argued by this service provider that it is easier to impose rewards and consequences when children are young in order to facilitate behaviour change and that mothers have more control when their children are young.

Furthermore, it was proposed by one service provider that interventions that address children’s behavioural issues need to begin before children reach the age of seven. This participant stated that people often underestimate the lasting and significant effects of family conflicts (such as witnessing violence and parental separation) on young people. It was argued that there is a tendency for people to assume that some children are simply too young to be impacted by negative experiences, but it appears likely that issues such as adolescent violence towards parents are often a product of how children cope with such experiences. For example, in one service provider’s view, when a child has witnessed family and domestic violence, without intervention or education about non-violent behaviours and respectful relationships, the cycle of violence is likely to continue. Another service provider
commented that early intervention with children exposed to family violence may help prevent them from repeating the abusive behaviours they have been exposed to.

With regard to the types of early intervention recommended, one service provider believed that education about respectful relationships would be useful. It was argued that such education should seek to help young people understand family violence issues and focus on teaching them about non-violent conflict-resolution in relationships as well as general family and social skills. Another service provider agreed: "Peer mentoring and modelling, and more focus on respectful relationships may be part of the solution". Peer mentoring for young people was seen as a potentially valuable component of early intervention efforts as teenagers often learn from other teenagers and may relate to them more readily than their parents. It was recommended by another interviewee that programs for children of an educational nature about relationships and conflict resolution should take place in schools and be a compulsory component of a young person's education. More specifically, health-related education in schools (from kindergarten to year 12), which includes compulsory sessions that focus on respectful relationships, healthy vs. unhealthy conflict resolution, bullying, and family violence issues (including male attitudes towards women), was recommended by one participant. Most of the service providers who advocated for such education to take place in schools strongly believed that such programs should be implemented in early childhood as well as adolescence.

**Practitioners' Knowledge, Experience & Qualifications**

Some of the service providers interviewed emphasised that professionals working for agencies who may provide services to individuals affected by adolescent violence towards parents need to be highly-educated about the issue and suitably qualified to address it. For instance, one service provider stated that it is important that people who counsel either victimised parents or their abusive adolescents be experienced in trauma counselling and understand family violence issues extensively. This service provider also believed that group programs and counselling services need to be based on trauma models and that these should not be delivered by ‘generalist’ counsellors with limited experience with the complexities of family violence. Another participant highlighted the need for increased education and professional development programs taking place in relevant agencies. The need for increased education was also recommended by another service provider who strongly advocated for more curriculum focus on family violence issues in all forms of secondary education that prepare people to work in services where they may encounter family violence such as social work, education, law and justice, policing, psychology, nursing, medicine, and counselling. It was suggested that all of these areas of education
require more focus on family violence issues in order to produce suitably qualified individuals who can effectively work with people who may be experiencing these issues.

**The Availability of Appropriate Information & Resources in Agencies**

Some service providers commented on the ability of agencies to provide individuals with the appropriate information and advice when seeking help for adolescent violence towards parents. One interviewee stated that information should be available across a range of services about appropriate agencies to refer parents to when they disclose adolescent violence. It was suggested that many agencies approached for help simply will not have the answer that victimised parents are looking for, therefore being able to effectively refer parents to another agency is important in order to avoid parents leaving ‘empty-handed’. Another participant agreed, and stated that services must be educated about other services in order for effective referrals to be made and to avoid victimised mothers giving up with their help-seeking efforts after making several attempts and not finding useful information. However, one service provider stated that professionals need to find ways to minimise the amount of referrals that take place with any given case. That is, they need to be better equipped to deal with a range of issues and know the best courses of action for obtaining assistance when issues such as adolescent violence arise. This interviewee argued that it is unlikely that someone affected by an issue such as adolescent violence will not be experiencing additional issues that they require assistance with. Therefore, they are likely to require help from multiple sources, which has the potential to become overwhelming and practically difficult (especially if each agency assigns homework tasks and constant meeting times that make day to day demands harder to balance). It can also be confusing for parents if they receive conflicting information from the different agencies they are affiliated with.

**The Development of Resources/Programs for Adolescent Perpetrators**

It was argued that support for young people perpetrating abuse towards a parent is essential. For example, one service provider suggested the availability of male mentors who can provide adolescent boys with a positive role-model. This was recommended in light of the service provider’s observation that “young males relate best to other males”. A similar approach was recommended by another participant who stated that peer-support programs for young people displaying abusive behaviours in the home should be implemented so that they are exposed to others with similar experiences and circumstances, as young people may be better equipped to learn behavioural change in a group environment surrounded by people they can relate to rather than by themselves. Another service provider recommended providing young people with some “head space” in response to their abusive behaviour towards mothers. It was argued that if there was a service that could provide an environment
where an abusive adolescent could receive some “head space” in the form of some reflective time away from the family environment, this may benefit the entire affected family. Another service provider recommended men’s groups focusing on attitudinal and behavioural change for young males aged between 12 and 24 years.

With regard to how responses to young perpetrators of abuse against parents should be carried out, there were many different views expressed. For example, it was suggested by one interviewee that abuse-related interventions for children need to be less broad and focus on issues specific to them in order to be more effective. Another service provider emphasised that responses to adolescents who are violent towards a parent should not be too punitive. This participant argued that responses in the criminal justice system are often too punitive to be effective and that legal measures for dealing with adolescents who have committed abuse against a family member require review. The same participant believed that young people should not receive the same treatment as adults for perpetrating family violence and there need to be alternative options to Violence Restraining Orders (VROs) as these are considered far too drastic by most mothers as VROs require the separation of the parent and child, which is not a viable option for most individuals. However, one service provider disagreed that legal responses to abusive adolescents are ‘too punitive’ and stated that young people are constantly “let off the hook” by services, the justice system, families, and the community for their violent behaviour because of their age. This interviewee saw this as a major problem and argued that “young perpetrators of abuse do not learn that their behaviour has consequences if their abuse is not treated as the serious injustice that it is”.

With regard to the content and development of programs for abusive adolescents, it was recommended by one interviewee that there should be less focus on ‘changing abusive behaviours’ and more emphasis placed on what adolescents gain from abusive behaviours, such as power and control. This service provider proposed that the aim of programs and services provided to adolescent perpetrators should be to allow the adolescent to understand what their abusive behaviour achieves for them and what other ways the same result can be achieved without violence. In addition, it was a common belief held by many of the professionals interviewed that the way teenagers are treated in intervention efforts must be developmentally appropriate and account for their personal circumstances. For example, one service provider highlighted that programs for young people need to be age-specific because the experience of a family experiencing violence from a 12-year-old boy, for example, is likely to differ substantially from that of a family experiencing abuse from an 18-year-old girl. Another service provider made a similar point: “Support groups that address issues concerning adolescent abuse towards a parent need to be specific in terms of age groups as the situation for a younger adolescent, such as a 12-year-old, would likely be very different to that of an older adolescent aged around 18 years.” It was strongly argued that
what works for some age groups (with regard to intervention and strategies) will not work for others.

**The Development of Resources and/or Programs for Victimised Parents**

When responding to the issue of adolescent violence towards parents, a belief shared by many of the service providers interviewed was that it is most appropriate and feasible to start by working with the parents when attempting to address the issue. One service provider stated that support for victimised mothers is essential as “they need to be able to see that they are not alone and that a lot of other parents know how they feel”. Another service provider stated that their agency has encountered many cases where mothers have felt completely isolated and have often questioned their parenting ability. For this reason, this service provider strongly recommended that measures be put in place to empower the mothers of abusive children and provide them with more encouragement with the aim of improving their confidence as parents.

All service providers interviewed except for one recommended the development of specific programs (notably support groups) for victimised mothers. As one service provider commented, “groups for mothers affected by adolescent violence would be very useful. The mothers could then see that they shouldn’t be ashamed of their situation, that there is help available, and they are not alone”. Most participants recommended that such groups be therapeutic and educational in nature and provide parents with a safe environment to come together, share experiences, explore strategies, and offer support and encouragement to one another. One noted: “The shame and stigma experienced by parent victims can be combated by providing them with exposure to other people who have been through the same situation. Advice, support and strategies can be shared and explored if parents were to come together”. One key reason provided as to why group programs specifically addressing adolescent violence towards mothers should be established was simply that existing group programs in WA that are relevant are likely to fall short as these focus on either family violence issues (without specific focus on parent-adolescent relationships) or parenting (without a consideration of family violence issues). For example, one service provider argued that generic parenting programs are not the best options for dealing with an issue as complex as adolescent violence towards parents. This service provider stated that “parenting groups are good, but there needs to be a great deal of focus on unhealthy relationships and abuse within the family”. This service provider recommended that groups for victimised parents require a specific focus on family violence.

Some service providers recommended an additional type of group program for mothers affected by adolescent violence: a program for mothers who have experienced domestic violence. More specifically, it was suggested by one participant that “the mothers
of children who have been exposed to domestic violence (and are now either at risk for engaging in violent behaviour or have started to do so) is a great idea for a group”. A number of service providers made similar recommendations with some stating that it would be highly beneficial to have such a group available. The reason that such a program was suggested was that many service providers recalled encountering many cases involving mothers who had been victimised by both adolescent children and intimate partners (or other family members) and that these experiences were relevant to their current situations involving their children, and thus should be addressed in group programs in some depth. One service provider made a point of recommending two distinct types of groups: one for mothers of adolescents who are abusive towards them where there is a history of domestic violence (a group for women only); and one for parents of abusive adolescents where there is no history of domestic violence (a group for both mothers and fathers to come together). It was suggested by a couple of service providers that parents from both of these circumstances could take part in the same program as it was highlighted that some diversity would be useful for the purposes of showing victimised parents that adolescent violence towards parents can happen to anyone. However it was recognised that domestic violence issues would still need to be addressed in these groups and that some victimised mothers may not feel comfortable talking about such issues in a group with men present or may not wish for families without histories of domestic violence to hear about their experiences. It was also argued that women are likely to be more comfortable with other women when discussing sensitive issues such as family violence and that separate groups for mothers and fathers that take place concurrently could be a more appropriate avenue to explore.

It was strongly recommended by the majority of service providers that group programs should focus on empowering the parents to take action in response to their situation of adolescent violence by helping them explore new strategies for gaining respect from their children. It was suggested by one of the service providers that all groups should aim to increase parents’ confidence and self-esteem. The same participant proposed that during these groups, mothers should be given the chance to work collectively from each other’s experiences when brainstorming strategies. Another service provider pointed out the need for groups to have an educative focus as victimised parents “will want answers about what they can do to change their situation for the better”. Furthermore, it was suggested that group sessions with parents should spend some time focusing on strategies for responding to a violent adolescent in unemotional and calm ways.

There was only one participant who was not a strong supporter of groups for victimised parents. This participant believed that groups will work for some people but not for others because in this particular professional’s experience, parents have tended to be reluctant to change their own behaviour, and it was believed that many will be unlikely to
take part in groups that focus on parenting issues (and groups about adolescent violence towards parents will need to have such a focus). This service provider stated that a significant proportion of the parents assisted by their service have not wanted to hear about suggestions for changing their child’s abusive behaviour. Rather, it was suggested that these parents usually want “quick-fix solutions” and do not want to be told how to parent. This service provider felt that parents with this kind of mentality are unlikely to gain anything positive from group programs. This participant went on to suggest that if there were to be support groups for parents implemented, they should not be ‘insight’ groups, which are merely reflective in nature and focus on the victimisation without strategies being discussed. Rather, it was recommended that if groups were established, they should focus on parenting skills and the parent-child relationship rather than simply reflecting on the violence. Another service provider agreed and stated that “groups need to be solution-based and not just reflective in nature”.

In addition to the development of group programs specifically focusing on the issue of adolescent violence towards parents, a number of other recommendations were made during the service provider interviews with regard to proving services for victimised parents. For instance, one service provider recommended that a non-government service be established that can provide advice, support, referrals and resources to mothers affected by problems with an adolescent child (including abuse) and that this could perhaps form a component of an already existing service that assists families. It was highlighted that such a service should not be a legal service or child-protection service as the general public tend to have preconceived notions about these types of services and many fear them. For this reason, it was proposed that a non-government organisation (such as a not-for-profit domestic violence agency for example) would be ideal for establishing such a service to mothers. Another service provider suggested that the development of a helpline or tip sheet for parents affected by adolescent violence towards parents is also warranted. It was argued that providing information to affected families in a simplistic form (including information about where they can go for help) is “better than nothing” and at the very least may serve to “inform them of their rights and show some recognition of what they are going through”.

The Development of Concurrent/Joint Programs for BOTH Adolescents & Parents

A number of service providers recognised that a great deal of education and support is required for both mothers and adolescents when addressing the issue of adolescent violence towards parents. With this in mind, there were some service providers who recommended concurrent programs for adolescent perpetrators of abuse and their victimised mothers, that is, two co-occurring groups (one for adolescent perpetrators and one for victimised mothers) that have been designed and implemented by the same agency.
(or partnership of agencies) in a manner that allows the parent and adolescent to work together to address the problem. It was suggested by one of these participants that individual and group work with both the victimised parent and the abusive adolescent is important as parents are unlikely to be able to effectively manage the situation without some commitment from the young person as well.

**Cultural & Practical Considerations about Programs**

With regard to how programs addressing the issue of adolescent violence towards mothers should be implemented, two participants believed that separate programs for Indigenous people should be established. This service provider argued that due to cultural differences, there may be some reluctance from Indigenous people to become involved with certain programs when they represent a minority, particularly in a group-work situation. Another service provider advocated for culture-specific groups to be developed as it was suggested that with this approach, cultural issues can be addressed that are likely to be overlooked in groups without such a focus. It was also argued that participants in group-programs would likely feel more comfortable if they were surrounded by members of their own ethnic group who also share their experience with adolescent violence towards parents.

Another recommendation with regard to the design and implementation of group programs was that groups for both parents and adolescents be peer-led and peer-directed. It was suggested by some service providers that individuals taking part in a group program would benefit from being assisted and encouraged by people who have shared their experience in some way. In one example provided, it was suggested that a group program for parent victims of adolescent violence be facilitated (or at least co-facilitated) by a parent who has experienced abuse from an adolescent themselves. Additionally, some practical considerations involving the running of group programs were noted by the service providers interviewed. For example, one professional listed the following practical issues that need to be considered when designing a group program: the availability of crèche services for the mothers of young children; the affordability of programs (it was suggested that groups should be free of charge to accommodate for low-income families requiring assistance); the locations of groups (it was argued that there should be programs established in various locations across the state); the duration of group programs and sessions (it was recommended that these should not take too much time away from the parents or adolescents attending the groups); and the types of tasks that group facilitators expect participants to complete (it was argued that these must be realistically achievable in the set time-frames as there is potential for participants to become overwhelmed by some tasks).
**Focus on the Parent-Adolescent Relationship**

It was common for the service providers interviewed to comment on the importance of the relationship between victimised parents and adolescent perpetrators of abuse. It was a popular opinion amongst service providers that, unlike cases involving other forms of family violence such as intimate-partner abuse (where victims are often seeking assistance to “get out of the situation”), most mothers who have been victimised by a child will not want to sever the relationship with their abuser. Rather, according to one service provider, parents seeking help for adolescent violence are usually aspiring to keep the peace in their family environment, to try to change their children’s behaviours, and to produce a child who is non-violent and who they can be proud of (e.g. one who has a job and/or decent education, does not use drugs, and treats others respectfully). Therefore, it was recommended by several service providers that in all intervention efforts, the key focus should be on reconnecting the mother and child. One in particular emphasised that restoring the relationship between the victimised parent and the abusive adolescent and allowing them to find ways to relate to one another should be the ultimate goal of any programs that work with affected families. In addition, another service provider argued that parents affected by this form of violence and their adolescent children require ongoing and consistent support, whether this is provided formally or informally.

In order to work towards repairing the relationship between adolescent violence perpetrators and their victimised mothers, one service provider suggested that group work should focus more on parenting techniques and advice rather than on the effects of the violence. The reason given for this was that parents will most likely want to be proactive and be provided with possible solutions to the problem that will result in improvements where communication with their children is concerned. Another service provider proposed that engaging adolescent perpetrators in family therapy may be an effective way to respond to the issue in a manner that focuses on family relationships rather than any one individual. It was argued that adolescent violence towards mothers is a family issue and therefore the responsibility for resolving it should rest with the entire family rather than the victim or perpetrator alone. According to this participant, working with whole families is important as families should have an active role in the resolution of the problem.

**Education & Awareness-Raising**

Education and awareness-raising for the wider-community about the issue of adolescent violence towards parents was strongly advocated for during the service provider interviews. One participant pointed out that there is a lack of service provider and community-level understanding of the issue of violence towards parents perpetrated by adolescent children. More than half of service provider participants stated that more
information about the issue should be made available to the public in order for the issue to gain more recognition. It was argued that the availability of such information may allow society to become more aware of the issue and more effective at responding in situations where such abuse is occurring. As one service provider commented: “Community awareness-raising about the issue is very important. Society needs to understand that abuse of parents by adolescent children warrants serious attention”. It was argued by another service provider that more awareness-raising about the issue may serve to combat societal misconceptions about it including attitudes that are unhelpful to victimised parents. This participant also believed that awareness-raising could show parents affected by such abuse that what they are experiencing is serious, that it is recognised as a form of family violence, and that there are other people experiencing the same issues (i.e. they are not alone).

It was also argued by several service provider participants that more work is required that addresses attitudes that support or excuse violence towards family members and that this can only be achieved through education. As an example of how such community education could be implemented, one service provider recommended a television campaign that depicts both unhealthy and healthy relationships between family members and emphasises the importance of mutual respect in all relationships. With regard to how society understands the issue, one service provider emphasised that people often fail to see that violence is a choice and not a direct result of any one factor. It was argued that education of this fact is necessary. This participant stated: “People are way too quick to attribute abuse solely to one factor of an abuser’s personal circumstances such as their use of drugs, experience of trauma, or mental illness. People will often do this without looking at the whole picture”. According to another professional interviewed, progress has been made with regard to reducing falsified beliefs about family violence issues in general, however, it was argued that the same goal must be worked towards where adolescent violence towards parents is concerned.

**Other Recommendations**

The service providers interviewed made a number of additional recommendations to those documented in the preceding sections. For instance, one service provider highlighted the need for increased focus on sibling violence in research and practice into adolescent violence towards parents as the two issues often co-exist. Another professional emphasised that attempts to resolve the issue of adolescent violence towards parents should start by addressing the issue of drugs. This participant believed that there should be zero-tolerance policies in place for drug users regardless of their age. However, it was noted by this service provider that such an approach would require a review of current drug and alcohol legislation, particularly as it applies to young people.
In addition, one service provider suggested that in two-parent families, the non-abused parent or guardian should be involved in the solution to the adolescent violence problem. It was strongly argued that the responsibility should not rest solely with victimised mothers. It was also suggested that in one-parent families, if the non-abused biological parent still has any role in the violent adolescent’s life, they should also be involved in the solution to the problem as parents should show a united front when facing this issue. However, one service provider made comments about the potential further risk to adolescents’ behaviour and wellbeing when the non-abused parent has continued involvement with them if there is a history of family violence. This participant stated that a link needs to be made between adolescent violence towards mothers and Family Court decisions that allow fathers who have perpetrated domestic violence to have contact with children. In this service provider’s experience, domestic violence has commonly occurred in the histories of families affected by adolescent violence towards mothers and it was suggested that further involvement of the domestic violence perpetrator in the abusive adolescent’s life will often further exacerbate the problem.

With regard to agency responses to adolescent violence towards mothers, a number of service providers pointed out the need for interagency collaboration. For example, one interviewee recommended collaboration between a family violence service and a parenting service for the implementation of programs or resources for victimised parents and their families. Another service provider argued that no single agency or individual is going to be able to provide the answer to the problem of adolescent violence towards parents as collaboration and coordination between all responsible organisations is essential. It was also highlighted that family violence issues in general are predominantly addressed in the professional sphere by women. One participant recommended the encouragement of training men to deliver family violence-related services as women should not take sole ownership of the problem, especially given that they are the most frequent victims. This service provider stated that the frequent involvement of mostly women to family violence issues is “ownership of their own problem”. More specifically, this participant suggested that more men should be used in promotional efforts (such as campaigns) to reduce violence against women (including adolescent violence). It was also recommended that men with a history of perpetrating abuse against women who have since “changed their ways” could make great ambassadors for anti-violence campaigns and may be more likely to have a compelling influence over other men (including young males) because men are more likely to relate to one another.
8.0 Research Limitations

The “Parenting Over Violence” project is not without its methodological limitations. First of all, the results relied on self-report data, which somewhat limits the reliability of the information provided. With qualitative research involving participants’ self-reporting of information, there is potential for self-report biases (Cook & Campbell, 1979). Cook and Campbell (1979) pointed out that participants in research relying on self-reports have a tendency to report what they believe the research is expecting to find, or they may avoid disclosing information that does not fall in line with their own beliefs, values or opinions. Another concern about self-reports in research is concerned with participants’ ability to accurately recall information. Cognitive psychologists have warned that the human memory is not always reliable, which means that the accuracy of self-reported data is often questionable (Schacter, 1999). It is possible that participants in this research did not report entirely accurate information, and it is highly likely that some information that may have significantly to the results was not provided during interviews. However, the potential shortcomings of self-report data cannot be avoided in research of this nature that requires participants to reflect on their experiences and offer their point of view.

Another evident limitation of this research is that because the majority of participants were service providers (20 out of 27), the majority of specific cases discussed in interviews (22 out of 29) came from indirect sources. That is, the majority of participants who provided information about specific cases involving adolescent violence towards mothers were secondary sources of that information. As a result, most of the cases discussed by service providers had missing details pertaining to adolescents’ behaviours, backgrounds, and other key factors. This means that the information that was contributed by mothers for this project typically contained more information about these factors and more details about specific incidents, including the impact of these incidents. It is important to note this limitation when interpreting the results, particular those concerned with the trends as they apply to the total number of adolescents described in the research. For example, if one were to refer to Table 1 in the ‘Results’ section, it would become evident that a lot of factors included on the table were marked as ‘unknown’. This is because not all service providers were able to provide details on all aspects of the cases they encountered. In most cases, such information was unknown to the service provider and in some cases such information was unable to be disclosed. Typically, different service providers have different focuses when it comes to responding to situations where adolescent violence may be disclosed (for instance some have a specific duty to focus on child protection issues whereas others may be predominantly a legal service that have been approached to provide advice about a specific issue affecting the family). There is no uniform method of obtaining information about cases
across services, and information sharing for the purposes of research will differ from agency to agency. Thus, it is not surprising that there are obvious discrepancies in the degree of detail that service providers were able to contribute to the research and unfortunately, such a limitation was not avoidable.

Another limitation is that all participants in this research were female, which means that no male perspectives could be explored and reported. As the project is about mothers affected by adolescent violence, all participants who had directly experienced abuse were required to be female, however, all service providers who contributed to the project were also female even though the project intended to include representation from service providers from both sexes. One potential explanation is that the fields of work with which service providers are most likely to encounter adolescent violence towards parents (such as community agencies, the social work/counselling sector, domestic violence agencies, parenting and child protection agencies, etc) are staffed predominantly by female workers. It may also be the case that mothers affected by adolescent violence are more inclined to disclose their situation to a female worker and therefore more female service providers had information to contribute to the project than their male counterparts.

Furthermore, the small sample size of this research (27 participants in total) means that the results cannot be generalised to the entire population. The trends and issues uncovered by this research should be interpreted and understood as they apply to the specific sample studied. The project was never intended to be a prevalence study or a study of the most pressing trends associated with the issue. Rather, this research project provides an introductory look at the issue of adolescent violence towards parents from the perspective of a small sample of Western Australian mothers and professionals who have experience dealing with the issue. It is both recommended and desired that future research will expand on the “Parenting Over Violence” project and perhaps do so with considerations of this project’s limitations. For example, longitudinal research, research with larger sample sizes, research with both male and female perspectives included, and research exploring the links between adolescent violence towards parents and some of the other factors noted in this report are just some of the approaches that future empirical attention to this topic could benefit from exploring.
9.0 Conclusion

The results generated by the “Parenting Over Violence” project have implications for future research and practice concerned with the issue of adolescent violence towards mothers. Some of the trends and perspectives uncovered were unexpected but nonetheless can provide a sound indication of where future attention is required. The most important finding requiring attention is that nearly all participants pointed out a serious lack of available information that can assist families experiencing such abuse. The availability of information and the introduction of resources for affected families is an achievable goal requiring commitment from individuals and services that are in a position to implement changes.

“Parenting Over Violence” is not simply a collection of information about trends which was intended to inform. Rather it is action-based and is the first of its kind for Western Australia, which means that until this project, very little information was available about the issue of adolescent violence towards WA mothers. The project recognised that common themes and potential solutions to the issues plaguing victimised mothers are worth discovering and most importantly, should be voiced by the individuals directly exposed to or impacted by the issue.

One notable implication of the project concerns one of the findings regarding mental health issues experienced by adolescent perpetrators. In light of the finding that two of the seven mothers interviewed experienced abuse from a teenage daughter who was diagnosed with Borderline Personality Disorder (BPD), it is highly recommended that future research efforts focus on possible links between BPD in adolescents (particularly females) and abusive behaviours towards mothers. This finding was not anticipated, nor did BPD receive much attention in prior literature surrounding adolescent violence towards parents. Therefore, it is worth exploring any possible relationship between BPD and this form of abuse in more detail. It is recommended that any further exploration of this nature should place particular emphasis on the diagnosis of the disorder in individuals who have experienced childhood traumas such as exposure to family violence as these individuals could be identified as ‘at risk’ of perpetrating abuse in the future.

In addition to further attention being paid to the relationship between BPD and adolescent violence towards parents, it is important to highlight the overwhelmingly frequent references made to the need for early intervention. Given that almost all participants highlighted the need for early intervention with children deemed ‘at risk’ of perpetrating abuse against family members, the results of this project have emphasised the need for further recognition and understanding of what constitutes an ‘at risk’ child. The most appropriate forms of early intervention for young people identified as ‘at risk’ and the mechanisms for the implementation of these also require further exploration in order to work towards implementing an approach to early intervention that is successful.
Along with the frequent recommendations of early intervention generated by this research, the large amount of support for the implementation of group programs for victimised parents and abusive adolescents is difficult to ignore. Twenty-six out of the twenty-seven participants interviewed recommended group programs for parents and at least half of participants also recommended groups for adolescents. The fact that group programs specifically addressing adolescent violence towards parents already exist in other parts of Australia (notably Victoria) and assist victimised parents from various backgrounds and circumstances, it is reasonable to suggest that WA could benefit substantially by implementing similar programs. “Parenting Over Violence” has aspired to be the first step in the process of establishing some resources and/or interventions that can offer parents, adolescents, and their affected families options for resolving the issue of adolescent violence towards parents. The project’s key aim was to participate in the empowering of mothers impacted by adolescent violence and provide them with a ‘voice’. At the very least it is envisaged that this project will provide the incentive for more work in this area to be undertaken and that mothers experiencing this form of abuse will no longer feel silenced and alone.
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11.0 References


12.0 Appendices

12.1 Appendix A: Interview Questions (Service Providers)

INTERVIEW QUESTIONS ABOUT SPECIFIC CASES ENCOUNTERED:

1. What types of abuse did the woman disclose (e.g. physical, verbal, emotional, financial, intimidation/control)? Can you provide any details about these?

2. What kind of assistance was the woman requesting (if any) when she disclosed her experience of adolescent violence? Was she specifically seeking help for the adolescent violence or for a different issue? What did she want you to do to help her?

3. What was the age of the adolescent (if unknown provide an estimate) when the violence was occurring? When it began? When it peaked? When it ended (if applicable)?

4. What was the family structure when the woman disclosed the abuse?

5. Was there a history of domestic violence in this case (that you know of)?

6. Comment on any parenting or discipline related issues that were evident.

7. Had the adolescent also been violent towards other family members? Provide details.

8. Did the adolescent experience any substance abuse or mental health issues? If yes, what were these and can you comment on how these may or may not have impacted on the adolescent’s behaviour?

9. What type of help had the woman previously sought (if any) for this situation? Had she tried anything in the past? Had it worked? Was she reluctant to seek help for this situation?

10. How did the woman express her feelings about what had happened? Did she think it was her fault? Was she concerned about her child’s future?

11. What kinds of issues or barriers (if any) did both yourself and this woman face with regard to receiving adequate help and support?

INFORMATION COLLECTED ABOUT GENERAL TRENDS:

* Have the service provider comment on general trends they have encountered when faced with the issue of adolescent violence towards mothers.

Ask them to comment on the following list of issues and potential factors:

1. Prevalence of adolescent violence towards parents
2. Types of abuse encountered (note gender factors)
3. Severity of abuse encountered (note gender factors)
4. Adolescents’ gender
5. Adolescents’ age (abuse onset)
6. Adolescents’ age (abuse peak)
7. Adolescents’ age (abuse cessation)
8. Histories of domestic violence (all family members concerned)
9. Significant life events/traumas experienced by abusive adolescents
10. Family structures/parent’s relationship status
11. Parenting factors & discipline
12. The role of adolescents’ fathers in their lives
13. Adolescent abuse of other family members and/or pets
14 Health & mental health issues (all family members concerned)
15 Substance abuse issues (all family members concerned)
16 Adolescents’ issues with peers & other close personal relationships
17 Adolescents’ issues in the school environment
18 Other adolescent problem behaviours (e.g. stealing, vandalism, bullying, promiscuity)
19 Male adolescents’ attitudes towards women in general
20 The types of help-seeking efforts displayed by mothers & other affected family members
21 Interventions with parents and/or adolescents that have/have not been successful
22 Barriers to help-seeking for families affected by adolescent violence
23 Victimised mothers’ attitudes towards their situations
24 Service providers’ general theories/opinions about the issue

INTERVIEW QUESTIONS ABOUT RECOMMENDATIONS:

1 What would you like to see implemented that assists women who have experienced adolescent violence?
   * Be clear that this program/intervention/service does not necessarily have to already be in existence

2 Would you recommend a group program specifically for women who have experienced violence from their adolescent son or daughter? Why/why not?

3 Explain how you’d like to see such a program operate (e.g. who would be the target group, what would the key focus be, what kind of service/individual would facilitate, etc).
12.2 Appendix B: Interview Questions (Mothers)

BEFORE THE INTERVIEW:

Reassure the woman that her identity will not be published in the written report and that any documentation/recordings of what she said in her interview will be discarded at the completion of the research.

Reassure the woman that she may stop the interview at any time, does not have to answer questions she feels uncomfortable with, and can discontinue her participation in the research at any stage if she chooses to do so.

INTERVIEW QUESTIONS:

1. What is your relationship to the adolescent who is being/has been violent? (e.g. mother, grandmother, other carer)

2. How many children do you have/care for in total?

3. Can you tell me a little bit about the child who is/has been abusive towards you? 
   * Ascertain the adolescent’s age, sex, and note any additional characteristics provided

4. When did his/her abusive behaviours begin? 
   * Ascertain the adolescent’s age (real or estimated) when they FIRST behaved abusively towards their mother

5. When did his/her abusive behaviours peak? 
   * Note any possible explanations provided for why the abuse escalated at this time

6. Has the abuse stopped? If so, how long ago and how old was the adolescent? 
   * Note any possible explanations provided for why the abuse stopped

7. What types of abuse have you experienced from your son/daughter? (e.g. physical, verbal, emotional, financial, intimidation/control)

8. Can you provide any details about incidents? 
   * Allow the mother to recount her experience of violence and tell her story of what has happened

9. What is your relationship to the child’s father? Are you a sole-parent? Can you describe the family structure? (e.g. separated from the child’s father, single mother, three children in the family, etc).

10. Have you experienced domestic violence (explain all types of DV to the woman) in the past? If yes, have any of your children witnessed or experienced this? Do you think this experience has had anything to do with the adolescent’s violent behaviour? If yes, explain.

11. Has the adolescent also been violent towards other family members (e.g. siblings)?

12. Does the adolescent have any substance use or mental health issues? If yes, describe these. 
   * Note any links made (real or perceived) between these factors and the adolescent’s abusive behaviour

13. Why do you think he/she is violent towards you?

14. How do you feel about the situation with your son/daughter now? What concerns do you have at the moment?
15 Have you previously sought help (either from family/friends or from formal services) for your situation? If so, what did you do? Do you feel that this helped? How do you feel now about seeking help for this situation (e.g. discouraged, hopeful, etc)?

16 What kinds of issues have you faced with regard to receiving adequate help and support?

17 What would you like to see implemented that assists women who have experienced adolescent violence?

18 What sort of group program/intervention/service would have been helpful in your situation? * Be clear that this program/intervention/service does not necessarily have to already be in existence

19 What would you recommend that could help other women who have experienced violence from their adolescent son or daughter or young person in their care?

4 Would you recommend a group program specifically for women who have experienced violence from an adolescent son or daughter? Why/why not?

5 Explain how you’d like to see such a program operate (e.g. who would be the target group, what would the key focus be, what kind of service/individual would facilitate, etc).
12.3 Appendix C: Family Structures of the Mothers Interviewed (n = 7)

* Note: The ages provided for the children in these charts pertain to their age at the time of their mother’s interview. More details are provided below each chart.

1) “Jodie”

Jodie is a sole-parent mother of three children: one son aged 29 years; and two daughters aged 16 and 14 years. Jodie’s 16-year-old daughter is abusive towards her. The father of Jodie’s three children passed away when the two daughters were very young. Jodie re-partnered 12 years ago, but that relationship ended 6 years ago.
2) “Melanie”

Melanie has divorced from her children’s biological father and has since re-partnered. The children live with her most of the time, but spend some time living with their father.
Jane did not discuss her relationship with her children’s biological father. Both her current marital status and the level of involvement of the children’s father in their lives are unknown.
4) “Susan”

Susan divorced her children's biological father and has since re-partnered. The father of her two daughters does not have much contact with them.
5) “Annie”

Annie has one 18-year-old son from a previous marriage and two sons with her current partner. The father of the eldest son (the abusive one) has not seen him in five years. Annie’s current husband resides with Annie and their two sons. Annie’s eldest son has autism and resides in a group home.
6) “Melissa”

* Melissa’s daughter passed away three weeks prior to Melissa’s interview.

Melissa has one son and had daughter who passed away in 2009. The father of the two children had very little contact with the daughter after he separated with Melissa.
7) “Sarah”

Sarah has one son whom she is currently estranged from. He was violent towards her when he was an adolescent. His father (Sarah’s former husband) has re-partnered and has a daughter with his new partner. He is also step-father to his new partner’s son from a previous relationship. Sarah’s violent son therefore has one half-sister and one step-brother.
12.4 Appendix D – The ‘Cycle of Violence’ Model (Walker, 1979)

The cycle of violence theory was developed in the 1970s by feminist Dr. Lenore Walker. The model proposes a cyclic pattern to the nature of abusive relationships (Walker, 1979). The diagram depicted above illustrates six phases that take place in abusive relationships as proposed by Walker’s theory.

According to Walker (1979) the cycle of violence begins with a ‘build-up phase’ which is characterised by behaviour on the part of the perpetrator that results in feelings of tension between the two partners and the first signs of fear on the part of the victim. During this phase, the victim may alter their behaviour in order to avoid an abusive incident from their partner and they often experience a feeling of ‘walking on eggshells’ (Walker, 1979). The next phase in the cycle of violence model is the ‘stand-over phase’ which occurs when the tension between the two partners increases, further intimidation and control is exerted by the perpetrator towards the victim and the victim’s fear of impending danger becomes stronger (Walker, 1979). According to Walker’s theory, the ‘standover phase’ is followed by the act of abuse itself which occurs during the ‘explosion’ phase. The abuse that takes place during this phase may be physical, psychological, emotional, verbal, sexual, spiritual, or financial in...
nature (Walker, 1979). In the cycle of violence, the act of abuse in a violent relationship is
often followed by the ‘remorse phase’. Walker (1979) proposed that during the ‘remorse
phase’, the perpetrator shows signs of sadness and regret as a result of their behaviour
(whether such remorse is genuine or merely an attempt to lead the victim to believe that they
are ‘sorry’).

Walker (1979) proposed that the ‘remorse phase’ is followed by the ‘pursuit/buyback phase’,
which is characterised by the perpetrator making apologies and/or excuses for their
behaviour, showing increased affection towards the victim and/or making promises of
behavioural change. The perpetrator may shower the victim with excessive affection during
this time, and some do so in the form of gifts. It is common for perpetrators to bargain with
victims during this phase in order to prevent them from leaving the relationship and/or
reporting the abuse (Walker, 1979). Sometimes the ‘pursuit/buyback phase’ is characterised
by threats of harm to the victim (or to the perpetrator themselves) as a bargaining
mechanism rather than apologies or promises (Walker, 1979).

The final phase in Walker’s cycle of violence theory is the ‘honeymoon phase’. During the
‘honeymoon phase’, the relationship appears calm and peaceful, and due to the increased
affection and decreased tension evident during this phase, it is common for victims to
believe that the abuse will not happen again (Walker, 1979). It is important to point out that
in abusive relationships, the phases of the cycle will not necessarily occur in the order
outlined by Walker’s theory and some phases may not occur at all. There is also no set time
frame for the phases of the cycle as some stages may take place for much longer periods of
time than others. For example, it is common for an abusive incident (such as a physical
attack) to be much shorter in duration than the period of tension-building that preceded it. It
is important to view the cycle as merely a guide for understanding the patterns of abusive
relationships, and recognise that circumstances will be different from relationship to
relationship. There is no ‘typical’ abusive relationship.