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Coogan, D (2016) Listening to the Voices of Practitioners who encounter Child to Parent Violence and Abuse: Some findings from an action research project with practitioners in Ireland *Irish Social Worker Journal*, Winter, 2016: 41-48

Abstract

Contemporary debates about violence within the family are usually limited to the dynamics and prevention of adult-initiated violence. This largely ignores other kinds of challenges that social workers and other practitioners working with children and families in the voluntary and statutory sectors in Ireland are increasingly facing in their day to day practice (Coogan & Holt, 2015). This article takes as its starting point one of these additional challenges known as child to parent violence and abuse (CPVA), a relatively recently identified form of violence within the family in Ireland. This problem occurs when a child under the age of 18 years uses tactics of abuse and/ or violence to coerce, control or dominate parents or those occupying a parental role, such as grand-parents or foster carers, for example. The article also describes an action research project that emerged from the practice dilemmas when working with families living with CPVA. The action research project was completed in 2015 in which seventy-five practitioners from social work and other disciplines in Ireland were invited to become involved in research based on a two day training programme on Non-Violent Resistance for CPVA. This research project demonstrates one way in which practitioners in statutory and voluntary agencies can work together with researchers to addresses some key questions relating to emerging forms of violence in the family.

Keywords

Child to parent violence and abuse (CPVA), Non Violent Resistance, action research, training for practitioners, challenges in engagement and intervention

Conceptualising child to parent violence and abuse (CPVA)

CPVA is an abuse of power through which a child or adolescent under the age of 18 years attempts to coerce, control or dominate parents or those occupying a parental role, such as grand-parents or foster carers (Tew & Nixon, 2010; Lauster et al, 2014; Coogan & Lauster, 2014; Wilcox et al, 2015). There is not one specific behaviour related to CPVA but there are usually patterns of controlling, dominating and intimidating behaviour that reverse the usual parent/child power relationships within families (Wilcox, 2012; Wilcox et al, 2015; Selwyn & Meakings, 2015). It can involve a child or adolescent using acts of physical, psychological or financial abuse towards parents and can sometimes include threats of self-harm that are intended to control or manipulate parents.

Tuning into the experiences of those directly affected by such behaviours, social workers and other practitioners can adopt a self-defining approach to naming CPVA; in other words, CPVA takes place where parents feel controlled, intimidated or threatened by a child or adolescent's behaviour towards them and where they feel they must adapt their own behaviour because of threats or use of abuse or violence (Patterson, 2002; Wilcox, 2012; Coogan & Holt, 2015). This sense of fear which makes parents or carers unable to take a position of authority as a parent within the family enables us to make a clear distinction between what might usually be expected when children or adolescents challenge parental authority and the problem of child to parent violence and abuse (Coogan, 2011).

CPVA - A growing concern in Ireland and elsewhere

Research into child to parent violence is still in its early stages of development; there is a no agreed definition of the problem (e.g. mother abuse or parent abuse or child to violence?) and there are differences in types and sources of research data, for example, small scale studies, qualitative interviews of small groups (Holt & Retford, 2012; Miles & Condry, 2015; Selwyn

& Meakings, 2015). There are no empirical studies of the prevalence of CPVA in Ireland, though the problem has been recently explored (Coogan, 2011, 2012; McMahon, 2013; O'Rourke, 2013; Coogan & Lauster, 2014; Lauster et al 2014; Coogan & Lauster, 2015). Effective responses to child to CPVA are hindered by the invisibility of CPVA in family and the absence of violence official guidance and policy in Ireland and throughout the EU (Coogan, 2011; Condry & Miles, 2013, Coogan & Lauster, 2015; Wilcox et al, 2015). Considering the absence of reliable data about the frequency of CPVA incidents, where they happen and who is involved when they take place, and the ways in which social work and other practitioners respond effectively to this problem, it is not surprising that it is difficult for us to arrive at a comprehensive understanding of the problem.

Yet the experiences of social workers and other practitioners working with children and families in Ireland and elsewhere suggest that the abusive and violent behaviour of children and adolescents towards their parents is an increasing concern (Biehal, 2012; McMahon, 2013; O'Rourke, 2013; Lauster et al, 2014; Coogan & Lauster, 2014; Wilcox et al, 2015). Parentline, a national telephone support service for parents in Ireland, reports that increasing numbers of parents are contacting about being the target of their child's controlling behaviour and physical aggression in their homes (O'Reilly, 2014; 2016). Although individual practitioners and teams are responding innovatively to CPVA (Biehal, 2012; Lauster et al, 2014; Coogan & Lauster, 2014; Wilcox et al, 2015), there is no specific statutory service in Ireland taking responsibility for co-ordinating or providing interventions or research nationally in response to this problem.

Research Design – An Action Research Project

Describing action research as research carried out by or in collaboration with practitioners or community members, Herr and Anderson (2015: 4) say that action research is best carried out

in cooperation with those who have a stake or an interest in the problem that is the focus of the research. Such cooperation starts with insiders (or, for example, practitioners in an agency) with a need they identified within their environment. These insiders then seek outsiders, someone from outside their agency with relevant skills or resources. The research problem (CPVA) was a priority issue for the practitioners who took part in the research described in this article, leading them to request training to assist them in responding to CPVA. Additionally, the research project and intervention (training programme) was developed as a response to and in collaboration with the managers and senior practitioners in the agencies, who requested the assistance of this researcher in their efforts to respond to child to parent violence using the Non Violent Resistance model.

The position of the researcher

In this specific research, the researcher/trainer was not a complete outsider. The type of research conducted during this study is also known as insider research. Humphrey (2013: 572) describes insider research as research carried out by people who are already members of the community or organisation under investigation by virtue of employment, education, social networks or political engagements. This researcher occupied a complex and interested position in relation to the research; he was a social worker and psychotherapist carrying out research involving social workers and other practitioners who were responding to a training programme that was developed and led by him as the focus of the research,. These issues are discussed in more detail elsewhere (Coogan, 2016), however, as a way of highlighting the insider position of the author (who was also the researcher in this study), the author will use the first person for the remainder of this article.

Contextualising the Action Research Project – A Case Example

Entitled 'Child to Parent Violence – An Exploration of Non-Violent Resistance' (Coogan, 2016), the action research study discussed in this article emerged as a result of practice-based dilemmas and the relative silence in social work and policy literature about CPVA. My initial encounters with dilemmas for parents and practitioners are described in more detail elsewhere (Coogan, 2012, 2014). The dynamics of what I later learned to describe as CPVA first came to my attention while I was working as a mental health social worker on a multi-disciplinary community based Child and Adolescent Mental Health Service (CAMHS) in Dublin. An anonymised case example of 'Brendan' illustrates the kinds of experiences in practice that prepared the ground for the development of this action research project.

Between 2007 and 2008, 'Brendan's' parents and the parents of some other children attending the CAMHS team, of which I was a part, began to describe living in fear of assault from or under the effective control of their children. During the initial appointment with me, Brendan stormed out of the therapy session, shouting he would never return. Brendan's mother "Grainne" burst into tears, saying she did not know what to do and was afraid to follow him in case he physically assaulted her again. His father "Luke" got up to leave the room saying he would try to calm Brendan down.

Parents disempowered by their son's behaviour and threats of self-harm

'Brendan' was ten years old, the oldest of three children and from a comfortable family background that had no prior contact with social work children's services or mental health services. He had been referred to CAMHS due to his aggressive behaviour towards adults at home and at school and because of his threats of self-harm. Brendan's out of control behaviour was a concern for his parents who felt disempowered when confronted by their son's violence. It was also of concern to his teacher who had worries about the safety of

Brendan and other children at school. Brendan was also physically aggressive towards other children with apparently very little or no provocation. In addition, he had sometimes stated that he wished he was dead.

At first Brendan's parents did not describe their experiences of CPVA. However, during direct questions by me about whether different family members felt safe at home, his parents described Brendan's use of violence at home. His aggressive behaviour towards his parents included biting, kicking, hitting and shouting and screaming.

Intervention Method: the Non Violent Resistance model and the hope for change

A key question that confronts parents and practitioners responding to CPVA is how to think and talk about the problem in a way that can offer real hope of change. This is especially true where the child or young person denies there is a problem or refuses to engage in any meaningful way with the practitioner. An intriguing way to think about and respond to CPVA is suggested by the Non Violence Resistance model (Omer, 2004; 2011). A detailed discussion of Non Violent Resistance implemented in practice lies outside the remit of this article. But a comprehensive description of the Non Violent Resistance programme in practice is provided by Omer (2004; 2011), Weinblatt and Omer (2008), Lauster et al (2014) and Coogan (2014; 2016). Briefly, Haim Omer and his colleagues in Tel Aviv, Israel have adopted the principles and strategies of non-violence from socio-political struggles for civil rights in their work with families, where children and young people use violent and selfdestructive behaviour at home (Omer et al, 2008). The Non Violent Resistance model moves the focus away from the abusive or violent behaviour of the child or young person, which disempower parents and move them towards the arenas in which parents can effectively take action – the ways in which they respond to the child's behaviour. This model emphasises principles that support parents' commitment to non-violent and non-humiliating action, parental presence, social support and determined resistance to the child/young person's

violent and/ or abusive behaviour. Adopting the Non-Violent Resistance model, the practitioner can assist parents to adapt their behaviours and to:

Develop the skills of non-violent resistance and de-escalation,

Practice effective parental presence,

Recruit a support network from within their own extended family/ community and Make a family announcement defining a new approach within the family in responding to violence and/ or abuse (Omer et al, 2008; Omer, 2011; Coogan & Lauster, 2014; Lauster et al, 2014; Coogan & Holt, 2015).

Prior to meeting with 'Brendan' and his parents, I had become familiar with the Non-Violent Resistance approach during work with another family, had discussed it with team members and it seemed to have been helpful for that family. When I outlined the Non Violent Resistance approach to Brendan's parents, they were intrigued and were interested in seeing whether it could be useful in addressing the challenges they were experiencing with Brendan's behaviour in the home.

Does the Non Violent Resistance model work?

There is a small but developing pool of research exploring intervention with CPVA and Non Violent Resistance. Weinblatt and Omer (2008) describe a randomised controlled trial of the approach, which demonstrated encouraging results when using Non Violent Resistance in work with parents of children and young people with violent and abusive behaviours at home. Gieniusz (2014) reviews 3 studies exploring the impact of Non Violent Resistance in the UK and Germany and reports that the Non Violent Resistance approach improves parental wellbeing, decreases parental helplessness and leads to positive improvements in the child's behaviour. She also states that these positive results occur over the relatively short period of intervention (10-15 sessions) of the Non Violent Resistance programme.

Similarly, there were positive results from the implementation at home of the Non Violent Resistance model by Brendan's parents. Over an intervention period of eight sessions involving parents only, Brendan's parents and I discussed and reviewed successes and setbacks in their implementation of Non-Violent Resistance at home. At the end of this period, Grainne and Luke reported that Brendan no longer declared a wish to be dead, no longer used violence at home or at school and that his place at school was no longer at threat of withdrawal. Nevertheless, I do not mean to give the impression that because of its apparent success in the case of Brendan that the Non Violent Resistance model is the only approach that is effective when it comes to resolving the problems associated with CPVA. Despite the absence of empirical studies about the effectiveness of other interventions, there are other approaches to CPVA; Gallagher (2004; 2008), the Break4Change model detailed by Wilcox and Pooley (2015), the Power2Change model outlined by Cronin et al (2014) and the different interventions described by various practitioners in Holt (2016).

Requests for training - the beginnings of the action research project

As we adopted the Non Violence Resistance model in our work with parents attending our CAMHS team, we were intrigued by the positive responses of parents to the Non Violent Resistance approach as a non-blaming, systemic and relatively short-term intervention. Encouraged by this, I presented a paper on CPVA and Non Violent Resistance at the annual conference in Dublin of the Irish Association of Social Workers in 2008. The ideas presented seemed to strike a chord with social workers attending the conference. Afterwards, individual practitioners and managers in statutory or voluntary agencies such as Children and Family Social Work Services in the Health Service Executive (now Tusla, the Child and Family Agency) and a non-statutory community based Family Support Service asked me to develop a training programme to assist them in responding to CPVA.

As a practitioner with little awareness about the possibilities of integrating research and practice development, I could not respond positively at that time to such requests. However, on taking up a position as a social work educator at the National University of Ireland Galway (NUI Galway) in late 2009, I was encouraged to integrate research and practice by developing a CPVA training course. Since I was asked to develop a training programme for practitioners, I also wanted to engage in an exploration of the research participants' perceptions of the problem of CPVA and of the Non-Violent Resistance model at the beginning, end and follow-up periods of the Non-Violent Resistance training programme which was designed for practitioners. In the study I adopted a mixed methods approach to undertaking the research. I used qualitative interviews and quantitative questionnaires to investigate components of practitioners' perceived self-efficacy, which was developed as part of the research project.

The practitioners who took part in the research - the research population

Ultimately, I hoped the research could develop the ways in which we think and respond to CPVA by developing an understanding of interventions for CPVA grounded on the opinions and experiences of the practitioners in Ireland who took part in the study. The research population was recruited from qualified practitioners from a range of disciplines such as social work, psychology, family support and social care with varying levels of experience and based in either statutory or voluntary contexts, who had requested training in Non Violent Resistance. Working closely with senior managers and lead practitioners in each of the 3 areas in which the training was to take place, I designed the Non Violent Resistance for Practitioners training programme, drawing from the work of Omer (2004); Weinblatt & Omer, (2008) and others. Prior to the beginning of the training and the gathering of data, I obtained research approval from the Research Ethics Committee at NUI Galway.

Research Design

The two research components of this mixed methods study that employed constructivist grounded theory methods of research (involving qualitative interviews and the quantitative questionnaires at three different points in time during the research as outlined above) aimed to answer three key questions. These were:

- 1. How do child and family practitioners engage with, assess and intervene with child to parent violence?
- 2. What is the response of child and family practitioners to the adapted Non Violent Resistance Programme?
- 3. What, if any, is the effect of the 2 day training programme on Non Violent Resistance on practitioner self-efficacy in relation to child to parent violence?

Action Research Methodology

In total, 75 practitioners took part in the 2 day training programme on Non Violent Resistance for Practitioners. I facilitated the training at 3 different locations in Dublin and the west of Ireland. Self-Efficacy Questionnaires were completed by 63 of the 75 practitioners at the start of Day 1 and end of Day 2 of the training. Participants were also requested to complete a third questionnaire 3 to 4 months following their participation in the training. All those who had attended the training were also invited to volunteer to take part in research interviews. Nineteen practitioners from three different agency contexts (2 different voluntary settings and 1 statutory setting) in Ireland were interviewed; the typed transcripts of the interviews were analysed according to the principles and practices of grounded theory (Corbin & Strauss 2008). Anonymised demographic information about the interview participants is represented in the table in the appendix to this article. Among the 19 practitioners who took part in the research interviews, 13 were female and 6 were male. 12 of the interviewees were employed

as family workers on 4 different teams in a voluntary child and family support agency in Dublin; a further 3 individuals in this group of interviewees were managers on different teams within that service, who also worked with parents and children as part of their management duties. A further 3 of the interviewees worked as social workers in the then Health Service Executive's statutory child and family agency (which includes the child protection and welfare service, now known as Tusla) in the West of Ireland. In addition, 1 of the interviewees was a practitioner with a child and adolescent mental health team in the West of Ireland.

Research findings derived from qualitative interviews

Having described the development of the research, I would like to focus on some of the findings from the interviews carried out as part of this action research project. There are other ways to carry out action research studies involving social workers (see for example, the one described by Fern, 2012) but I would like to offer this as one example of implementing action research involving social workers and other practitioners in Ireland.

Emerging themes 1: challenges in engagement and intervention

Talking about the problem of CPVA, practitioners who took part in the study understand it as a complex issue, presenting them with challenges in areas of engagement, assessment and intervention. These challenges include the embarrassment, shame and stigma felt by parents experiencing child to parent violence and the potential for minimisation due to embarrassment, shame or lack of recognition of the problem by parents. For example, Ellen, a practitioner with a voluntary child and family agency, identifies the embarrassment, minimisation and self-blame that can prevent parents from talking about child to parent violence:

Quite often, it (CPVA) isn't something that would be identified at referral. It would be something a parent might disclose to you later on, because they are too embarrassed.But again, it's difficult, like parents, again in my experience the parents would tend to minimise it really and they would take a period of time before they will actually really – maybe verbal abuse wouldn't even be considered an issue like. And you know, they'll minimise it 'well it wasn't that bad' or 'I shouldn't have done this or I shouldn't have, I aggravated the situation. If, you know I just left it'(parenthesis added for clarity)

Practitioners who took part in the research also identified other complicating factors that may be present in some of the families where CPVA takes place such as problems at school, the threat of homelessness or mental health difficulties, or problems with alcohol or drug misuse. Describing one of the young people with whom she works, Ciara, a practitioner with the statutory child and family agency Tusla, provides another insight into the array of factors that she and other interviewees regard as sometimes correlating with CPVA and other types of behaviours that may be used by a young person at home:

He's a nice lad, hasn't been attending school, doesn't really mix well with his peers, his mother would have mental health issues. He's so angry with his mother that there was an aggressive incident last week where he held a knife up against her.

Although some interviewees refer to potential links between experiences of domestic violence and/or abuse and a child using CPVA, no practitioner in the study referred to the child using violence or abuse towards parents as an 'abuser' or 'perpetrator' or to the parents as 'victims' of child to parent violence and abuse. No one expressed a belief that the problem is related to issues of power and control, however, interviewees situate CPVA within family and relationship problems.

Reflecting on their work with parents living with CPVA, interviewees (from both voluntary and statutory settings) understand their role as including naming child to parent violence and abuse as a problem and as supporting parents by listening to them and providing them with useful responsive skills, some of which they attribute to their participation in the 2 day training in Non Violent Resistance.

Emerging themes 2: changes starting with parents

Echoing responses in Biehal (2012), interviewees in this research reflect on the bi-directional nature of behaviour of children and parents; parents are regarded as being able to influence the behaviour of their children while also being affected by the behaviour of their children. Some interviewees explicitly refer to the need for parents to change their own behaviour, as some parents are regarded as 'triggering' the abusive and violent behaviour of their child. I was struck by the very nuanced understanding of CPVA expressed by practitioners who were interviewed as part of this research - there is never any suggestion that parents are to blame for the violent and abusive behaviour of their son or daughter towards them.

Emerging themes 3: positive responses of practitioners to the training

Practitioners involved in the research responded positively to the training they received in Non Violent Resistance. Many interviewees refer to the positive elements of the Non Violent Resistance model as being its structured, brief, solution focused and strengths-based approach to the problem. Some practitioners state that in advance of the training in Non-Violent Resistance they were uncertain about how best to respond or were unable to respond to the problem of child to parent violence. Echoing such experiences, Adam, a manager with a voluntary child and family support agency, refers to a family that had attended the agency before he and other practitioners there had taken part in the Non Violent Resistance training:

...So it was a case where these parents needed support and we couldn't give it to them. We had nothing to give them because the child wouldn't come in so that couldn't work....So we had nothing so I think when I got the training and when I heard all about NVR, I just got it into my head. It was like another ...tool that we can actually work with parent.

Many practitioners who were interviewed as part of the research said that the training in Non Violent Resistance provided them with a structured and positive response to the problem of child to parent violence, building on their previously existing knowledge and skill-set.

With one exception, all of the interview participants who had encountered child to parent violence in the interval between the training and the interviews had used the Non Violent Resistance approach in their work with families. The practitioner who had not used the approach stated that in her view, intervening with families in which there is violence is not part of her role in the voluntary child and family agency where she works, however, she did state that she would refer such families to a specialist service within the agency.

Emerging themes 4: parents' responses to practitioners using Non Violent Resistance

Some interviewees described their experiences of using Non Violent Resistance in practice in the interval between participation in the training and the research interviews. For example, Cian, a practitioner with Tusla describes the positive reactions of some parents to his suggestion that the time-limited Non Violent Resistance intervention approach might be useful:

...parents generally are really open to (it), saying 'we'll try for, for four sessions and, and we shall see some evidence you know, or see some change at the end of that'. I think that's a really useful idea because most people think of counselling as going on for years and years and going around in circles and you know and not being too practical. And most families would like to see something that, that gives results I guess.

However, I would also like to point out that the Non Violent Resistance approach was not seen by participants as relevant to every family living with CPVA. As indicated by those interviewed as part of this research, the children and adults with whom practitioners work may also be living with multiple adversities such as addiction or mental health difficulties, homelessness, poverty, unemployment or school attendance problems all of which may make it even more difficult to sustain hope and to realise change. The Non Violent Resistance model is not designed to specifically address these kinds of issues. But difficulties such as these do not mean that the Non Violent Resistance model may not be used: Non Violent Resistance can be offered to parents in addition to specific services, interventions and/ or advocacy designed to meet a range of different needs (Omer, 2004; 2011; Coogan & Lauster, 2014).

As noted earlier, Non Violent Resistance is not the only response to the problems of child to parent violence. However, with its focus on ending violence within the family, on patterns of escalation (and de-escalation) and on authoritative parental presence legitimised by the Support Network, it is an intervention that responds to the immediate safety and protection needs of parents and of other family members. Adopted by practitioners in the range of contexts included in this research, the model also seems to empower parents to develop the necessary skills and confidence to effectively reduce and end the abusive and violent behaviour of a child within the home.

Some of limitations of this action research project

As we reflect on the findings described in this article, it can be helpful to take account of the limitations that apply to the research. A significant limitation of this research, for example, is the modest size of the research samples involved in qualitative data collection and analysis. Nineteen practitioners were interviewed as part of this research and they were recruited from

among a pool of practitioners who had already received training in Non Violent Resistance.

Additionally, participants in this research were not recruited through a random sampling procedure and a randomised controlled trial design was not adopted during the research these features could be regarded as having a negative impact on the generalisability of the findings.

However, apart from representing the perceptions of those who took part in the research, the findings identified and reported in this article do not claim to speak to the perceptions of practitioners working with children and families elsewhere in Ireland. However, in line with the principles of grounded theory and action research methods, the experiences and perceptions of the participants described in this article should 'fit' with or be recognisable to any reader familiar with contexts similar to those of the participants. While the limited nature of this action research project means that the findings cannot be generalised to a wider population of practitioners, it does however present credible and convincing accounts of the ways in which practitioners in a variety of settings in Ireland understand and respond to child to parent violence.

Conclusion

The results of the qualitative element of this small scale constructivist mixed methods study indicate that practitioners, from a range of disciplines working in a range of services in 3 different geographical regions in Ireland, encounter CPVA in their work with families. This research also provides an insight into the non-blaming and systemic approaches to assessment and intervention adopted by the practitioners interviewed as part of this research. They do not regard CPVA as a problem related to individual pathology in the child or parents; nor do they regard its resolution as solely the individual responsibilities of parents. It is also apparent that these practitioners identify and provide support and skills to parents in responding to child to

parent violence and abuse. It is also important to note that the participants in this research regard the availability of support for them (in the form of training, peer support and management/ institutional endorsement for intervening with CPVA) determines whether or not they can support parents in responding to CPVA.

Practitioners in this research describe the ways in which they implemented the training on Non Violent Resistance in their practice, with an emphasis on support and on listening to parents and children. For example, they speak about identifying with parents' sources of support from a group made up of individuals and agencies outside the immediate family, such as members of their extended family and community.

The research described in this article illustrates one way in which practitioners and researchers can work together to integrate research and practice and represents a significant contribution to progressing our ways of thinking about and responding to the problems of CPVA. This article contributes to developing knowledge and practice in the area of CPVA; as far as I am aware, this article is the first of its kind in the English language to describe the use of constructivist grounded theory and action research in exploring the perceptions of practitioners in child and family services concerning the problem of CPVA; it is also the first grounded theory study in English to investigate the perceptions of practitioners about the Non Violent Resistance Programme for Practitioners designed as a specific training intervention in a response to the problem,. As such, this research can help to deepen our understanding of the problem of child to parent violence and has the potential to contribute to the evolution of practice, policy and research responses in this area. The findings described in this article also provide theoretical support for the kind of social work and family support practices that orient intervention away from parent-blaming 'muscular' responses to the complexities of responding to conflict and adversity in family life (Featherstone et al 2014) by refocusing on

the need for the time, training and supervision that supports practitioners to build relationships with and between colleagues, clients and communities.

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Appendix 1: Qualitative Interviews Research Participants – Demographic Information

Role (Gender)	Agency Context	Location	Interviewee Pseudonym
Family Worker (F)	Voluntary Service	Dublin Team 1	'Ellen'
Manager (M)	Voluntary Service	Dublin Team 1	'Sean'
Family Worker (F)	Voluntary Service	Dublin Team 1	'Ella'
Family Worker (M)	Voluntary Service	Dublin Team 2	'Adam'
Family Worker (F)	Voluntary Service	Dublin Team 2	'Samantha'
Family Worker (F)	Voluntary Service	Dublin Team 2	'Carrie'
Manager (M)	Voluntary Service	Dublin Team 3	'Luke'
Family Worker (F)	Voluntary Service	Dublin Team 3	'Susan'
Family Worker (F)	Voluntary Service	Dublin Team 3	'Niamh'
Family Worker (M)	Voluntary Service	Dublin Team 4	'Adam'
Family Worker (F)	Voluntary Service	Dublin Team 4	'Maeve'
Family Worker (F)	Voluntary Service	Dublin Team 4	'Ruth'
Family Worker (F)	Voluntary Service	Dublin Team 4	'Patricia'
Manager (M)	Voluntary Service	Dublin Team 4	'Patrick'
Family Support (F)	Voluntary Service	West of Ireland	'Emma'
Clinical Psychology (F)	HSE/ Statutory Service	West of Ireland	'Aoife'
Social Worker (F)	HSE/ Statutory Service	West of Ireland	'Kate'
Social Worker (F)	HSE/ Statutory Service	West of Ireland	'Ciara'
Social Worker (M)	HSE/ Statutory Service	West of Ireland	'Cian'

Author details: Declan Coogan, PhD, is a lecturer in Social Work in the School of Political Science and Sociology at the National University of Ireland (NUI), Galway and a Research Fellow with the UNESCO Child and Family Research Centre at NUI Galway. He is a registered social worker and psychotherapist with practice experience in community child and adolescent mental health and child protection and welfare services. Declan is a member of the Irish Association of Social Workers (IASW) and is committed to developing and supporting close links between social work practitioners and researchers. Declan was the NUI Galway/ Ireland Lead for the successfully concluded EU funded FP7/ DAPHNE Responding to Child to Parent Violence Project (JUST/2012/DAP/AG/3086). This innovative project involved academics, researchers and practitioners in 5 countries working together to develop awareness of child to parent violence and to develop and research 2 intervention programmes for child to parent violence throughout 2013-15. The research and reports developed during this project are available at www.cpvireland.ie and www.cpv.eu. In 2016 he was awarded a PhD in NUI Galway for his research on child to parent violence and abuse and Non Violent Resistance as a training programme for practitioners.

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