An investigation of the Australian experience of adolescent violence
towards parents and the potential links with youth justice

by

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“Sometimes the future changes quickly and completely and we’re left with only the choice of what to do next. We can choose to be afraid of it, to stand there trembling, not moving, assuming the worst that can happen or we can step forward into the unknown and assume it will be brilliant.” – Cristina Yang
Contributions to this thesis via publication

This is a thesis by publication; the following publications, articles submitted and conference papers have stemmed from undertaking the research:

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Impact factor: 0.66


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Papers included in this thesis are presented in the format in which they were submitted for publication and therefore reflect the requisite sections, style and language for publication in the respective journals. Due to prioritising producing these publications in their entirety, there may be some repetition of material, particularly in introduction sections, this has attempted to be minimised by not repeating information in other chapters, however at times has been unavoidable.

Presentations arising out of this thesis:

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**Invited talks**


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Abstract

Research, policy and practice interest in family violence has grown significantly over the last twenty years. Community and research understanding regarding one form of family violence however, Adolescent Violence towards Parents (AVTP), is still developing and consequently, it remains minimally understood and poorly responded to. In Australia, there have been very few studies that have explored the prevalence and characteristics of AVTP. Globally, understanding AVTP within the context of general youth offending has been minimally considered. The overall aim of this thesis was to help understanding AVTP by exploring the prevalence and characteristics of AVTP within Australia and to determine if there is a relationship between AVTP and other juvenile offending. By investigating and understanding AVTP within the context of other offending behaviours, informed recommendations to develop policing and justice policy and practice can be made.

The first part of the thesis provided the context for the empirical work that follows; beginning with a broad literature review of the prevalence of, and characteristics associated with AVTP, as well as determining important contextual factors such as parental guilt and legal responses, in order to gain a thorough understanding of what is currently known and unknown about AVTP. What followed were two Rapid Evidence Assessment reviews to systematically gather evidence and critically appraise existing research thereby producing a thorough and robust synthesis of the evidence to inform policy or practice. The first review considered characteristics of AVTP offenders, victims and incidents, using an ecological model. The second review summarised international studies and estimated prevalence rates of AVTP across community, clinical and forensic settings. It also discussed factors, such as how the measures used, as well as the way in which AVTP is conceptualised, can influence
these prevalence rates. The second part of the thesis then used police data, collected over a 5-year period from four Australian States, to understand more about the characteristics of perpetrators, victims and incidents of AVTP reported to police within Australia. The third, and final part of the thesis were two studies which utilised South Australian Police data collected over a five-year period, to investigate the occurrence of AVTP within a broader context of youth offending, to see if AVTP offenders tend to specialise in AVTP offending, or if their behaviour is part of a broader pattern of offences. The final study built upon findings from the previous by identifying trajectories of AVTP offenders and comparing them with young people who committed other violence offences against others (e.g. not parents).

Findings from this thesis identified that AVTP is a relatively common phenomenon, impacting approximately one in ten families, with higher rates seen in clinical and custodial settings. AVTP offenders and their families are complex, often characterised by comorbid mental health concerns, histories of family violence and trauma, and drug and alcohol complexities. The ‘typical’ AVTP offender was male, and the ‘typical’ victim was female, most commonly mothers. In regards of cases reported to Australian Police, depending on the State jurisdiction, between 1-7% of family violence cases were classified as AVTP. The majority of AVTP offenders had previously been reported to police for other violent offences; it rarely occurs as an isolated offence. However, AVTP offenders were found to be a unique group of offenders, with differing characteristics and trajectories than young people who were violent towards non-family members. AVTP can be framed within Moffitt’s Developmental Taxonomy in the sense that AVTP trajectories appear to be in the majority, adolescent limited, however there is significant within group variation.

Findings of this thesis point to the complex and multifaceted nature of AVTP, in particular the often-comorbid factors of drug and alcohol use, trauma and other
youth offending. It is clear that a collaborative and integrated response from community supports, justice and child protection is needed to assist in balancing safety with the desire to repair and maintain the child and parent relationship. Intervening effectively and having strong policy around response to AVTP could assist in reducing the occurrence of violence both towards parents, and more generally in the community, as well as improve family relationships and potentially prevent further intimate relationship violence in the future.
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Chapter 1: Introduction

Families are often portrayed as safe places, of love, care and protection; however, when violence occurs within the home, enacted by family members, it challenges this image, replacing it with fear, shame and harm. While family relationships are essentially socially constructed, the meaning we ascribe to these relationships is shaped by our historical, cultural, psychological, legal and political contexts, and how we behave and experience violence within these relationships has important implications (Holt, 2013). Adolescent Violence towards Parents (AVTP) is a form of family violence where an adolescent perpetrates physical, emotional/psychological, social, sexual and/or financial violence against a parent or legal guardian. AVTP was first discussed by Harbin and Madden in 1979, and since then associated literature has emerged from various fields, including family studies, anthropology, sociology, psychology, counselling and more recently criminology (Miles & Condry, 2015).

The negative impacts of AVTP are pervasive and often intergenerational. For some families, AVTP follows a series of other experiences of family violence. AVTP has biopsychosocial, financial and community impacts (Baker & Jaffe, 2003; Sheenhan, 1997) which can be felt by the young person and their family, regardless of ethnicity, gender identity, or socioeconomic class. Unique to AVTP is the additional impact for parents regarding parental blame, and associated shame and embarrassment, leading many parents to isolate themselves and withdraw from friendships and family (Bobic, 2004). Given the pervasive and extensive impacts for young people, and their current and future relationships and the people who are targets of these forms of violence, improving our understanding of AVTP is critical. Findings from this thesis will make an important and unique contribution to the
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international family violence and youth offending literatures. It is also anticipated that the findings from this research will be able to inform youth justice policy as well as the development of targeted prevention and intervention programs.

AVTP continues to remain a stigmatised topic, and one that is only just beginning to emerge within policy (Miles & Condry, 2016). Studies exploring AVTP have varied in their definitions, methodologies and investigative parameters; quantitative research conducted has predominately used criminal justice data (e.g. Synder & McCurley, 2008; Walsh & Kreinert, 2007) or self-report (e.g. Ulman & Straus, 2003; Pagani et al., 2004) and qualitative studies have focused more on the impact and causes of AVTP (e.g., Cottrell & Monk, 2004). According to Condry and Miles (2014) AVTP has “… remained largely invisible in policing, youth justice and domestic violence policy despite being widely recognized by practitioners” (pg. 257).

AVTP is indicated to be relatively common, with some studies estimating that up to 29% of all parents experience this type of violence every year, whilst others suggest that the true rate is approximately 10% (Bobic, 2004; Cottrell & Monk, 2004; Edwards, 2013; Routt & Anderson, 2011; Strauss et al., 1980; Walsh & Krienert, 2007). Despite its relative frequency, it is the least likely form of family violence to be reported (Barnett, 2011; Charles, 1986; Walsh & Krienert, 2007) with parents commonly citing high levels of shame and blame as barriers to reporting this form of violence (Edwards, 2013). Whist in some countries and jurisdictions there has been an increase in awareness of family violence, and to a lesser extent adolescent perpetrated family violence (State of Victoria, 2016), AVTP remains poorly understood both clinically, and academically (Holt, 2016; Walsh & Krienert,
The Australian experience of Adolescent Violence Towards Parents (2007). This limits the work and responses of intervention services and the judiciary which in turn has negative impacts on families in which an adolescent is being violent towards a parent.

Family, domestic and sexual violence in Australia is considered to be a major health and welfare issue that disproportionately impacts women and children (ABS, 2018). Each form of family violence, e.g. child abuse, intimate partner violence, and elder abuse, has had its own distinct social history regarding policy and practice development (Holt, 2013). While the Commonwealth Government of Australia is responsible for the over-arching government programs designed to reduce family violence nationally, it is the State and Territory Governments that have the law enforcement responsibilities in relation to policing and prosecuting instances of family violence (ABS, 2018). The Personal Safety Survey (PSS), administered across Australia by the Australian Bureau of Statistics every four years provides comprehensive quantitative data regarding all forms of interpersonal violence (ABS, 2012). The most recent PSS was conducted from November 2016 to June 2017 in all States and Territories and across urban, rural and remote areas of Australia. The survey included a sample of over 21,000 people aged 18 years and over about the nature and extent of their experience of violence since they were 15 years of age. The PSS found that 17% of women and 6% of men had experienced violence by a partner (current or previous) (ABS, 2016). The proportion of women who reported as having experienced partner violence in the previous 12 months has remained relatively stable over the last decade. The proportion of men who reported that they had experienced partner violence in the previous 12 months increased between 2005 and 2016. AVTP is intrinsically linked with other forms of family violence, for example, it has been linked to witnessing and experiencing child maltreatment (e.g., Brezina,
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1999; Kennedy et al., 2010; Ullman & Straus, 2003), perpetrating sibling abuse (Laurent & Derry, 1999), and dating and intimate partner violence (Mitchell, 2006; Laporte et al., 2009). While there are a number of parallels between AVTP and other forms of family violence, the distinct nature and needs of both the child-parent relationship and AVTP requires a sensitive, nuanced response and research methodology that is developmentally appropriate (Miles & Condry, 2015). It is also important to recognise that the majority of people who experience family violence do not go on to perpetrate it, and the majority of young people who perpetrate AVTP have not experienced family violence (Holt, 2013). Given the complexities around family dynamics and the challenges with power relations, AVTP poses a complex problem for justice and other service systems (Daly & Nancarrow, 2010).

In this Introduction, I note the very limited research around AVTP in Australia, whilst giving an overview of international AVTP literature. The youth justice sector and service responses in Australia are described and two case studies of AVTP are outlined to illustrate some of the complexities inherent in families where AVTP has occurred. The rationale and aims for this thesis will then be detailed which leads in to an outline of the thesis as a whole. The final part of this Introductory Chapter is a literature review which outlines some of the characteristics of AVTP, its impact, the various challenges that AVTP presents, and the gaps for further research.

There has been a lack of Australian driven research in the area of AVTP, meaning our understandings are predominately based on international research. Its generalisability and applicability to the Australian context is limited in the sense that Australia presents its own unique population, with diverse cultures, family dynamics,
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legislation and characteristics that international studies cannot comprehensively account for. Australia has a population of approximately 25 million people dispersed across approximately seven million square kilometres. The majority of Australians live in urban centres, with small regional and remote communities scattered across vast distances. Australia is incredibly ethnically diverse, with an increasing variety in terms of country of birth, languages spoken, whether people are of Aboriginal or Torres Strait Islander descent, and religious affiliation (or secular beliefs). The 2016 Census shows that 67% of Australians were born in Australia, and 49% of Australians had either been born overseas or had one or both parents born overseas. There is a need for larger scale Australian research to be conducted therefore regarding prevalence and characteristics of AVTP to help determine the impact of our context on these factors, and to see if findings are consistent with or in contrast to what is known internationally.

The justice system, in particular police, are often the first point of contact for families who are experiencing AVTP; their response provides the foundation for how parents perceive community reactions (Miles & Condry, 2016). AVTP is sometimes understood as a form of young offending, and as such is often managed by the youth justice system. It is therefore the case that internationally and within the Australian context, the prevalence of, and characteristics associated with AVTP are derived from data collected when reports are made to police. Internationally, many countries have recently developed or revised their youth justice policies and practices regarding how to respond to AVTP. This seems to be, at least in part, in response to the introduction of international agreements and guidelines by the United Nations (UN) (e.g., the Standard Minimum Rules for the Administration of Juvenile Justice 1985 (also known as the Beijing Rules), Guidelines for the Prevention of Juvenile
Delinquency 1990 (also known as the Riyadh Guidelines) and Rules for the Protection of Juveniles Deprived of their Liberty 1990 (also known as the Havana Rules). However, outside of the broad frameworks of these international agreements, the philosophies, systems, and processes for dealing with young people involved in criminal behaviour vary substantially between countries, making direct comparisons difficult (Australian Institute of Health and Welfare (AIHW), 2017). Further, the United States of America (USA) has not ratified the Convention on the Rights of the Child, meaning their youth justice policies and practices are not bound by the above principles (AIHW, 2017). International information on the number of young people involved in youth justice systems is limited and it is therefore difficult to make comparisons between countries (AIHW, 2017). While almost all countries have separate criminal justice systems for young people and adults, variations between international jurisdictions include differences in age of criminal responsibility and criminal majority (when they are processed as adults in the justice system), whether a justice and/or welfare model is employed and differences in the types of outcomes and sentences available for young offenders (AIHW, 2017). As a result, the rates of young people in detention generally reflect the principles and operation of their respective youth justice systems operating in different countries (AIHW, 2017).

As in many countries, young offending is a significant issue in Australia. According to the AIHW (2018a), in Australia, about one in 500 young people \( (n=5359) \) aged 10-17 during 2016-2017, were under youth justice supervision. Of these, the majority were supervised in the community \( (n=4473, 83\%) \), with only 17% \( (n=913) \) in detention (AIHW, 2018a). The detention rate is much for young Indigenous people, who are massively higher (26 times) overrepresented across the
Australian justice system (AIHW, 2017). Overall, Australian juvenile justice rates are higher than in England and Wales, but lower than in Canada and the USA. In Australia, 74% of the young people who leave detention return to some form of youth justice supervision within 12 months.

Within Australia, each state and territory has its own legislation, policies, and practices in regard to young offending and managing young offenders. However, what is common are the general processes by which young people are charged and sentenced, and what information is available to the courts in regard to types of legal orders; for example, there are separate courts, policies and procedures for young offenders and adult offenders (AIHW, 2018a). Across Australia young people are able to be charged with a criminal offence if they are aged 10 and over. In all states and territories except Victoria, the upper age limit for the youth system is 17 (at the time of the offence). In Victoria the Children, Youth and Families Act 2005 distinguishes between a child and a young offender, with a child being someone aged 10 to 17 at the time of the offence and aged under 19 when court proceedings begin. According to the Sentencing Act 1991, a young offender is someone aged under 21 at the time of sentencing. This “dual track system” allows adult courts to sentence young offenders (aged under 21 years) to serve custodial sentences in youth detention (instead of adult prison), as a way to try and prevent vulnerable young people from entering the adult prison system at an early age.

It is unclear if AVTP is best understood within existing youth justice understandings of behaviour, or whether AVTP is significantly different from other youth offending. Condry and Miles (2014) articulated that AVTP has been largely absent from criminological discussions and youth justice and police policy, perhaps
due to the complexities of boundaries and blame in cases of AVTP. They further articulate that AVTP cannot be easily understood or responded to by existing policy and legal frameworks, particularly within youth justice, as well as the challenges in understanding parental responsibility. Traditionally criminology perspectives construct the risk of adolescents offending in the public, not private (e.g., within the home) context (Condry & Miles, 2014). Understanding offending behaviour has important consequences, primarily around predicting future offending behaviour, and informing points of intervention and policy direction (Sampson & Laub, 2003; Smallbone & Cale, 2015). Few studies however, have explored whether AVTP is a function of general anti-sociality, and is part of a pattern of violent or deviant behaviour, as opposed to it being isolated, targeted violence only against parents (Agnew & Huguley 1989; Calvete, et al., 2014; Kennedy et al., 2010; McCloskey & Lichter, 2003; Pagani, et al., 2003, 2004, 2009; Simmons et al., 2018). There is a tension therefore in managing AVTP from a justice perspective between the reluctance of criminalising the young person’s behaviour, while also needing to recognize the victims of the violence (Condry & Miles, 2014). The entry point into the youth justice system for a young person who has committed AVTP is usually via police investigation for allegedly committing a crime, which may be AVTP, or may be another offence. The investigation may then lead to court actions or non-court actions (such as cautions, conferencing, counselling, or infringement notices) (AIHW, 2018a). If court action is taken, the courts have various powers including: to dismiss charges, redirect the young person from further involvement in the system (for example, via diversion programs such as drug or alcohol programs or family conferencing), or transfer them to specialist courts or programs or the court may hand down various orders, either supervised or unsupervised. The broad range of ways AVTP can be managed by the justice system suggests that there are differences
in perceived offence thresholds, and possible points of intervention for AVTP offenders. Understanding what these thresholds are, and the impact of different subsequent justice responses has important implications for targeting intervention.

Comparing commonalities and differences between young people who commit AVTP with those engaged in other offending outside of the family is important for a number of reasons. AVTP as an offending behaviour is a grossly under-reported and under-researched phenomenon. Particularly at the more severe end, where it is reported to police, the risk factors for, and characteristics of AVTP are generally poorly understood. Understanding the risk factors and characteristics of AVTP and whether or not it occurs within a broader pattern of youth offending is crucial in determining whether AVTP requires a tailored and potentially multi-systemic approach to intervention and management.

In addition to articulating the lack of research regarding prevalence and characteristics of AVTP, it is noted that there has been limited research exploring the application of potential theoretical frameworks from the family violence or young offending fields to AVTP to determine whether they offer useful conceptualisations from which to understand AVTP (Holt, 2016; Kauy et al., 2017). Having a translatable theoretical framework drives the development and implementation of evidence-based systemic, family and individual responses to, and interventions for AVTP. In an attempt to address this gap in the literature, the current research examines the relevance of Ecological Theory and Moffitt’s Developmental Taxonomy to determine if these are useful frameworks for understanding AVTP, and for guiding best practice.
Case studies

To gain a more rich and in-depth understanding of AVTP, it can be useful to understand it within a context of some typical cases of families where AVTP has occurred. Cases of AVTP are multifaceted, complex and often occur with a context of family and young person comorbidity of alcohol and drug use, mental health and trauma. Such families have contact with multiple systems including health, welfare, police and justice services. To illustrate this complexity, the following two case studies provide examples of cases of families impacted by AVTP. Cases have been sourced from an amalgamation of real youth justice clinical cases from South Australia that were presented at conferences during this candidature (Moulds, 2017; Moulds, 2018). Cases have been strongly de-identified.

**Case study 1: Monica**

Monica is a 16-year-old female, who is the third child in a six-child family. Her youngest brother has an intellectual disability. Monica’s father suffered a stroke 1 year ago, and has experienced marked changes in his cognitive functioning. Monica’s mother is now the sole income earner for the family. This change in circumstance led the family to have to relocate from a large country property to a smaller house in a metropolitan area to access more employment and assistance services. Monica has to share her room with two of her siblings. Monica struggles with anxiety and depression and has at times experienced suicidal thoughts. Monica and her mother often fight, especially when Monica’s mother asks her to do something. These fights at times lead to threats and actual violence, where Monica throws items at her mother and pushes her. After she engages in this behaviour, Monica’s mother kicks her out of the house, and Monica often sleeps on the streets and engages in drug use to cope. Monica’s mother feels that Monica cannot be controlled, that she cannot control her emotions, and she feels frustrated that Monica is not helping in the house more. Monica feels that her mother has no time for her. She is frustrated that she doesn’t get to spend any time with her mother, and that when she does speak to her, it’s always about a request for her to do something, as opposed to spending quality time together. Monica and her mother both feel completely out of control. Monica responds to this by using violence to try and gain control. Her mother uses her power over the house to remove Monica, which makes Monica feel more vulnerable and rejected, which perpetuates her violent behaviour.
Thesis Aims

The overarching aim of this thesis is to explore the Australian experience of AVTP, and whether AVTP has links with other youth offending behaviour. This thesis therefore focused on the current evidence around AVTP and some of the correlations and pathways of violence to help inform the development of appropriate and effective responses. It hoped to build upon and extend this knowledge so as to inform service resources, as without this knowledge, it is premature and potentially inappropriate to commit specific resources (Smallbone, Rayment-McHugh & Smith, 2013). At the launch of the Action Plan of the Global Campaign for Violence Prevention (GCVP) (September 2011) it was agreed that when designing intervention for violence prevention, there is a need to first define the problem through the systemic collection of information, with a focus on magnitude, scope,
characteristics and consequences of violence. Therefore, this thesis took the initial approach of exploring the magnitude, scope and characteristics globally, through thorough literature reviews, and secondarily by understanding if the Australian context mirrors this global knowledge. This gives us the contextual knowledge and understanding of the problem of AVTP within the Australian context. The second step identified by GCVP is to establish why violence occurs, using research to determine the causes and correlators of violence, and what factors increase or decrease the risk of violence to help inform intervention. This step has motivated the two final studies of this thesis, by considering the correlation of other violence and offending with AVTP, to inform interventions and to determine if AVTP can be conceptualised similarly to other offending behaviour. AVTP can be understood from a number of fields, for example with the fields of child protection, or domestic violence; this thesis frames the problem within the youth justice domain. The approach taken in this thesis to understanding AVTP within the context of youth justice more broadly, especially within the Australian context, is an original and important aspect of AVTP that has previously not been explored in depth. Research has established that young people, who are violent towards their parents more likely to associate with negative peer groups and engage in other forms of delinquency, (Agnew and Huguley 1989; Calvete, et al, 2014; Kennedy et al, 2010; McCloskey and Lichter, 2003; Pagani et al, 2003, 2004, 2009). Little research however has explored AVTP within youth justice populations. Despite this lack of understanding, often AVTP comes to the attention of authorities, which may be reflective of increased surveillance (by authorities), or perhaps due to AVTP being perpetrated as part of a broader, more underlying pattern of offending behaviour (Boxall, Payne, & Rosevear, 2015; Moulds et al, 2018). Given the potential involvement of the youth justice system with AVTP, youth justice has the unique opportunity to intervene with
young people when they are under the care of youth justice, either in the community or in custody, to change their behaviour within their family relationships. This thesis aims to provide evidence to support forensically focused interventions within a youth justice context, that focus on the principals of criminogenic rehabilitation.

Specifically, this thesis aims to address the following questions: What is known about the characteristics and prevalence of AVTP?, What is the Australian experience of AVTP in regard to characteristics and prevalence?, Does the Australian experience of AVTP mirror what is internationally known about AVTP?, To what extent does AVTP occur within a pattern of other offending behaviour?, and are AVTP offenders and young people who are violent towards others distinct groups of young offenders?

**Thesis Outline**

This thesis is organised according to the following chapters. The current chapter contains a published literature review regarding what is known and not known about AVTP. This review also includes a brief overview of some of the challenges in researching and working with AVTP, predominately around parental blame, the justice system response and underreporting. Chapter two builds upon this by providing a theoretical background of the area, exploring definitions, a brief history and possible theoretical explanations of AVTP. Chapter three contains two rapid evidence assessment papers arising from this thesis. The first paper explores characteristics of AVTP using an ecological framework to understand characteristics of incidents, perpetrators and victims. The aim of the second rapid evidence assessment was to synthesize the evidence regarding factors that have an impact on the reported prevalence of AVTP, to explore differences in reported prevalence estimates.
Chapter four outlines the Alcohol/Drug-Involved Family Violence in Australia (ADIVA) data, which includes Australian wide police data related to incidents of family violence over a 5-year period. A published paper arising from this data uses police data from Queensland, New South Wales, Victoria and Western Australia to examine the Australian experience of reported AVTP, including prevalence rates and characteristics.

Chapter five describes and interrogates The South Australian Office of Crime Statistics & Research (OCSAR) data regarding AVTP and other offending. This chapter is central to this thesis due to it providing insight into AVTP within the broader youth justice context, an area which has previously been under researched. This chapter begins with a contextual overview of some of the methodological considerations and terms used in the chapter, provides a context of young offending in South Australia, and includes two papers. The first paper explores AVTP offences and whether there has been any other offending perpetrated by the young people who perpetrated the AVTP. The second paper explores whether AVTP offenders differ in regard to their characteristics and offending trajectories compared to adolescent offenders who commit violence against others. This paper discusses whether Moffitt’s Developmental Taxonomy as an explanatory framework to examine these aspects of AVTP.

The final chapter (chapter six) provides a general discussion of the key findings and contributions of this thesis to the broader literature, as well as potential theoretical and practical implications that arise from the research outcomes. It also
summarises some of the limitations of the research as well as potential future directions.

**Literature review**

This chapter includes the first published paper contributing to this thesis, a critical literature review of what is known and unknown regarding AVTP, with a focus on characteristics, prevalence, barriers to research and reporting and the role of parental blame. This chapter aims to establish a background around the first research question; what are the characteristics and prevalence of AVTP? This literature review was used to justify the need for further research in the area, in particular, what questions need to be answered in order to find the best evidence for practice development. This paper was published in the Australian and New Zealand Journal of Family Therapy in 2016.
**Publication:** Adolescent Violence towards Parents – The known and unknowns. Australian and New Zealand Journal of Family Therapy, 37(4), 547-557.

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<tr>
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<td>School of Psychology, Faculty of Health, Deakin University</td>
<td>An investigation of the Australian experience of Adolescent violence towards parents and the potential links with youth justice</td>
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The Australian experience of Adolescent Violence Towards Parents

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Abstract

Adolescent violence towards parents is one of the most poorly understood forms of family violence despite it being relatively common. This paper presents an overview of current knowledge about adolescent violence towards parents for practitioners who work with families, considering issues around definition, prevalence, impacts and the key characteristics of perpetrators. It is concluded that both clinical and justice responses are, at present, not well informed by basic knowledge of the circumstances in which adolescent violence towards parents occurs, and there is a need to work systematically with families to balance safety and welfare needs.

Key words: Adolescents, Adolescent Violence towards Parents, Family Violence, Parents, Violence.

Key Points for Practitioners

1. Approximately 1 in 10 family violence incidents in Australia are perpetrated by an adolescent
2. Most victims are women, typically mothers, and adolescent violence towards parents is typically perpetrated by males
3. Criminal action is taken in only a minority of incidents
4. Parental blame is a significant barrier to any coherent understanding of the problem and to families who seek help
5. Systematic intervention that balances welfare and safety is required
Introduction

The very idea of violence within the family challenges idealised views of how family life should be. Instead of the family representing a safe harbour and a place of love and care, it becomes characterised by threats, harm, and shame. When violence is perpetrated by adolescents towards a parent, the power dynamics that typically exist within families are quickly reversed and traditional parent-child relationships no longer apply. However, although this type of behaviour is thought to be relatively commonplace, adolescent violence towards parents (AVTP) is the least likely form of family violence to be reported and the least well understood (Barnett, 2011; Charles, 1986; Holt, 2016; Walsh & Krienert, 2007). Gallagher (2004) has suggested that this may be a result of the generally less serious nature of injuries, the lesser impact the violence often has on the relationship, and the tendency for the violence to be temporary (i.e., the child grows up or leaves home). This is further complicated by many family violence situations which feature the victim accommodating, minimising and at times forgiving the perpetrator in the broader context of the love that they have for them. The aim of this paper then is to provide an overview of the current understanding of the occurrence and characteristics of AVTP, in order to promote awareness of the issues that need to be considered by both practitioners and policy makers. It is important, however, to start by considering the challenges associated with defining AVTP.

The Difficulty with Definitions

The way in which AVTP is defined has significant implications for how information is collected, extracted, analysed, and interpreted, as well as for how it may be applied to prevention and treatment efforts and as policy development. There are, however, many inconsistencies in the research literature in how AVTP is defined, with differences arising even in relation to the terminology used around
adolescents. For example, adolescents who are violent towards parents are often referred to as ‘offenders’ or ‘perpetrators’, terminology that acknowledges that they are the elicitors of the violence and that their use of violence can lead to a criminal conviction (see Howard & Abbott, 2013). Consistent with this approach, parents are referred to as ‘victims’ or as being ‘victimised’ as a consequence of their reported experiences of injury, embarrassment, and helplessness. And yet there is evidence that the majority of young people who perpetrate violence towards parents have witnessed domestic violence themselves, and many have been a victim of physical abuse (Routt & Anderson, 2011). Thus, whilst they are offenders in one sense, they are often victims in another. The idea that victimisation can be a shared experience, and cyclical in nature, has profound implications for how AVTP is recognised and responded to.

AVTP has been referred to in a myriad of ways in the research literature including parent abuse, adolescent family violence, youth violence towards parents, youth violence in the home, teen violence towards mothers, child to parent violence, adolescent violence towards parents, parents abused by children, adolescent violence in the home, battered parents and many more, with each description conferring a slightly different meaning. A number of definitions of the behaviour are available; however, AVTP is not specifically defined in many of the published studies. The three definitions provided in Table 1.1 are inclusive in so far as each refers to the inappropriate use of power and control rather than only focussing on the physical action. The challenge here is operationalising what terms such as power and control actually mean, particularly in the context of the existing power dynamics between children and parents. In addition, Haw (2010) has suggested that the behaviour needs to be ongoing to be considered to be AVTP, although the other definitions (e.g., Barnett, 2011; Cottrell, 2001) refer to any act of violence.
Adolescent Violence towards Parents: What We Know

AVTP was relatively unheard of until Harbin and Madden (1979) were credited with identifying what was termed ‘Battered Parents Syndrome’ – considered at the time to be a ‘new’ form of family violence (Walsh & Krienert, 2007). It has since been viewed as secondary to other forms of family violence (Routt & Anderson, 2011; Walsh & Krienert, 2009), despite suggestions that it has no socio-economic bounds or biases (it occurs in all kinds of families), and often has profound effects on parents and other family relationships (Howard & Abbott, 2013).

One of the most significant barriers to understanding AVTP is the underlying idea that parents are responsible for their adolescent’s behaviour, even when it is to their own detriment (Barnett, 2011; Bobic, 2004). This often stems from the violence being regarded as their fault and parents are blamed by the community, by the adolescent, and by themselves, seeing the behaviour as a reflection of an inadequacy in parenting (Gallagher, 2008; Walsh & Krienert, 2007). This can lead some parents to minimise the abuse and make excuses; only seeking support when a crisis arises (State of Victoria, 2016). The response, or lack of response, by the justice system can also leave parents feeling responsible, and give the message that there are no serious consequences for this type of violence (Routt & Anderson, 2011). It has also been suggested that parental fear can also lead to unhealthy patterns of relating where the parent accommodates unreasonable demands of the adolescent (e.g., not telling anyone; not seeking assistance). Fear of what the adolescent may do if they do disclose may also perpetuate the violence; (Holt, 2016).
### Table 1.1: Main definitions of AVTP

<table>
<thead>
<tr>
<th>Definitions</th>
<th>Type of Behaviour</th>
<th>Key agent</th>
<th>Victim</th>
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<tbody>
<tr>
<td>Cottrell (2001):</td>
<td>Physical</td>
<td>To gain power and control over a parent</td>
<td>Parent</td>
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<tr>
<td>…any act of a child that is intended to cause physical, psychological or financial damage to gain power and control over a parent (pg. 3).</td>
<td>Psychological</td>
<td>Threatening and controlling acts</td>
<td>Parent</td>
</tr>
<tr>
<td>Barnett (2011):</td>
<td>An act that inflicts injury</td>
<td>To threaten and control</td>
<td>Parent</td>
</tr>
<tr>
<td>…any act perpetrated by a child/adolescent that inflicts and controlling acts injury on a parent and/or threatening and controlling acts aimed at a parent (p. 262).</td>
<td>Financial</td>
<td>“infliction”</td>
<td>Parent</td>
</tr>
<tr>
<td>Haw (2013)</td>
<td>Deliberate and ongoing “infliction”</td>
<td>To exert power and control</td>
<td>Parent</td>
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<tr>
<td>… Adolescent violence towards parents (AVTP) refers to the deliberate and ongoing infliction of abuse from an</td>
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adolescent child towards a parent or guardian, with the intention of exerting power and control. (p. 8)

Prevalence - the size of problem

There is huge variance in basic data relating to prevalence, key characteristics, and the nature of AVTP in Australian families. This reflects confusion and inconsistencies in definition and terminology, as well as a range of issues related to measurement and under-reporting. Whilst the accuracy of self-report data is limited by an unwillingness to disclose and the tendency to hide or minimise the problem, criminal justice data only encapsulates ‘extreme’ or ‘ongoing’ cases. As a result, relatively little is known about the true prevalence of AVTP (Holt, 2016). International estimates nonetheless suggest that as many as 1 in 10 parents will experience this form of violence (Bobic, 2004; Cottrell & Monk, 2004; Edwards, 2013; Routt & Anderson, 2011 Strauss et al., 1980; Walsh & Krienert, 2007). One of the largest international prevalence studies to date, conducted by Snyder and McCurley (2008), involved an analysis of the 2004 US National Incident-Based reporting data (from 29 states) for offenders aged 7 years and over. They reported that one in every 12 ‘intimate violence offenders’ were under the age of 18, and one in four (24%) young people had committed assaults offending against a family member (50% parents, 25% siblings).

There are currently no Australia-wide prevalence data that are publically available, although some analysis has been conducted in Victoria and Western...
The Australian experience of Adolescent Violence Towards Parents

Australia. Data collected as part of the 2016 Victorian Royal Commission into Family Violence, for example, showed that approximately one in 10 family violence incidents that were reported to the police were perpetrated by an adolescent (State of Victoria, 2016). Between 2009 and 2014 the number of incidents of family violence where the person using the violence was 19 or under grew from 4,516 to 7,397. Previous studies in this jurisdiction have also reported that Victorian police are attending more of this type of incident, with 4,438 incidents of AVTP reported between 2012 and 2013 (Howard & Abbott, 2013) compared to 2,344 in the previous year (Human Services State Government of Victoria, 2014). These data also reveal that criminal action was taken in only 16 per cent of all cases (Human Services State Government of Victoria, 2014). In Western Australia between 2009 and 2014, 1,416 cases of reported assaults within the home were recorded as perpetrated by adolescents (Hopkins, 2014). These datasets generally show that in most cases of AVTP, the victims are women (mothers) and the perpetrators are young men (sons) (State of Victoria, 2016). This contrasts with the findings of the Snyder and McCurley (2008) study which suggested that females were more likely to perpetrate AVTP.

Even less is known about prevalence of AVTP within Indigenous communities, although it has been well-established that Indigenous males are over-represented in the juvenile justice system (Wundersitz, 2010). For example, in 2010-2011, 5% of young Australians were Indigenous, whilst on an average day 39% (n=2,820) of young Australians under juvenile justice supervision were indigenous (AIHW, 2012). In 2010-2011 Indigenous adolescents were also 4–6 times as likely to be charged by the police and 8–11 times as likely to be proven guilty (AIHW, 2012) than non-indigenous young people. In 2007, Indigenous males accounted for 76 per cent of the 3,796 Indigenous persons who were apprehended for a violent offence
The Australian experience of Adolescent Violence Towards Parents (Wundersitz, 2010). Indigenous young people were 10 times more likely than non-Indigenous youths to be charged with common assault (AIHW, 2012). There has, however, been no research on the occurrence of AVTP within Indigenous communities.

The lack of reliable, substantive and culturally inclusive prevalence data means that the realities of AVTP remain unknown, and contribute to inconsistent service responses. There is a need for accurate estimates of the true size of the problem if efforts to educate about the challenge of AVTP, as well as to encourage people to report and to seek help and support, are to be successful.

**Perpetrator and victim characteristics**

Given the lack of reliable prevalence data, it is perhaps unsurprising that relatively little is known about the characteristics of perpetrators, even in terms of basic descriptors such as gender. As noted above, some studies identify a gender imbalance, with some suggesting more males perpetrate ATVP than girls (e.g., Ibabe, Arnoso & Elgorriaga, 2014; Nock & Kazdin, 2002; Routt & Anderson, 2011; Sheehan, 1997, Walsh & Krienert, 2007) and others more females than males (e.g., Day & Bazemore, 2011). Many studies have found no differences in gender (e.g., Pagani, 2004). Ulman and Straus (2003) have also suggested that there are marked variations in the age at which violence commences, although they argue that this is simply a reflection of the varying definitions and methodologies used. Nonetheless, Walsh and Krienert (2009) have reported that perpetrators are typically between 14 and 17 years old.

The extent to which cycles of victimisation, for example child maltreatment or exposure to domestic violence, lead to later perpetration has been fiercely debated. This is despite evidence that exposure to family violence is a well-established risk
factor for contact with the justice system (Baker & Jaffe, 2003). With regard to AVTP, Routt and Anderson (2011) report that approximately 53% of perpetrators of AVTP will have witnessed family violence, with 38% being victims of physical abuse. They propose that adolescents who have experienced violence at home learn to see violence as a legitimate means to resolve conflict. However, this is not inevitable, with some studies highlighting how different family violence experiences impact on AVTP (e.g., Bobic, 2004). Others, such as Edwards (2010), have concluded that AVTP is more likely to be correlated with the experience of child abuse (rather than witnessing family violence), although there does appear to be a cumulative effect. The pathway here may be that children learn that violence and being hostile in relationships is normal, and then this is activated, or tested during adolescence, as a way to manage problems (Earls, Cairns, & Mercy, 1993).

A number of other individual factors have been identified as potentially related to AVTP. These include deficits in emotional control and coping skills, impulse control, external locus of control, social skills and self-esteem, although evidence to establish the strength of these associations is lacking (Routt & Anderson, 2011). Others have also identified factors such as mental illness (schizophrenia, post-traumatic stress disorder), alcohol and drug use, and exposure to a peer who uses violence at home as relevant, with one study suggesting approximately 39 per cent of AVTP perpetrators have a diagnosable psychological disorder (Routt & Anderson, 2011). Kennair and Mellor (2007) also noted that low frustration tolerance, and generally oppositional and aggressive behaviour are higher in adolescents who perpetrate AVTP. Their review concluded that children who were chronically aggressive to teachers, coming down from drug use, and involved with antisocial peers, were more likely to perpetrate AVTP, although they argued that there was no relationship between AVTP and conduct disorder symptoms, non-aggressive
antisocial behaviours, or psychological functioning, which appears counter intuitive. Finally, Contreras and Cano (2014) reported the findings of a study with a sample of 90 Spanish young offenders (30 of whom had committed an AVTP offence). They concluded that perpetrators of AVTP were more likely to come from single parent homes, have poor communication and a lack of warmth within their relationship.

The challenge when considering the characteristics of victims is to avoid, or minimise, parent-blaming. Studies in this area have consistently concluded that the victims are predominately mothers (with estimates as high as 80%), with the typical age of victims of being 41-50 years of age (Kethineni, 2004; Nock & Kazdin, 2002; Routt & Anderson, 2011; Walsh & Krienert, 2009). Some studies have argued that fathers are victimised, particularly from sons, in approximately one in three cases (Walsh & Krienert, 2009). Single parent and step-parent households appear to have the highest incidence of AVTP, perhaps due to a change in the structure or source of power and control (Routt & Anderson, 2011). For example, AVTP has been estimated to occur in 18 per cent in two parent families, and 29 per cent in single parent families (Walsh & Krienert, 2009). It is acknowledged that this may not just reflect family structure, and the challenges in parenting without support, but also the context of single parent families often resulting from family violence relationships.

According to Taft (2016), AVTP occurs more often when other forms of family violence are present in the home, such as witnessing partner violence and child abuse (Ulman & Straus, 2011). The victims, usually mothers, have often (53% of cases) experienced intimate violence from previous partners (and sometimes even left the partner), before experiencing abuse from the adolescent (Routt & Anderson, 2011). Parents are also thought to be more likely to be victimised if they have a permissive parenting style, are middle to higher socioeconomic status, and have high family stress levels (Kennair & Mellor, 2007).
What is known about the impact of AVTP

The negative impacts of AVTP include those that occur at the biopsychosocial, financial, and community levels and can be felt by both the young person and the parent. For parents, beyond the evident physical harms, there are a number of negative social, psychological and emotional impacts, including poor physical and mental health, economic hardship (through property damage or theft of property), and at the most extreme end, eviction from property (State of Victoria, 2016). Due to parent blame and shame, AVTP parents may isolate themselves and withdraw from friendships and family (Bobic, 2004). Friends or family may lack understanding, referring to it as ‘rebellion’ or ‘just a phase’ - an invalidating response for parents (Stewart, Wilkes, Jackson & Mannix, 2006). Indeed, the stigma attached to AVTP is a huge obstacle in obtaining effective help, leaving parents feeling powerless, overwhelmed or frustrated, and at a loss as to how to change or improve the situation (Edgette, 2002).

For the adolescent, there are a number of potentially negative effects on their broader social and community functioning. These include impacts on schooling (Pagani et al., 2004; Sheenhan, 1997), mental health (particularly depression), criminal behaviour, and increased suicide attempts (see Baker & Jaffe, 2003, Paulson et al., 1990; Sheenhan, 1997). Generally, however, the impacts of AVTP on the adolescent perpetrator have been rarely studied, with knowledge of this area based on data that is over 15 years old.

The Justice Response

For all incidents of intimate violence and child abuse, the priority of the court system is the victim as well as maintaining the parent-child relationship - as long as safety can be ensured (Routt & Anderson, 2011). However, within AVTP, the
perpetrator is a child and the victim is an adult, complicating the criminal justice response, particularly around issues relating to placement and legal responsibility, predominantly when alternative placements and service options are limited (Routt & Anderson, 2011; State of Victoria, 2016). The challenge for the courts is to balance the needs of the young person with the safety of the victim, in a context in which appropriate and specialised services are not widely available (Howard & Abbott, 2013). Additional considerations are that many parents do not want their child to have a criminal record or to become involved with the criminal justice system (Routt & Anderson, 2011). For families that are impacted by AVTP, the ideal outcome in most cases is reconciliation. In the recent Royal Commission into Family Violence (State of Victoria, 2016) for example, evidence was submitted that many parents saw the police as a ‘last resort’. Howard and Abbott (2013) also reported that many parents (80%) waited for years before they contacted the police; mainly due to shame, stigma and guilt, the feeling that they should be able to manage the problem themselves, and not wanting the child to have a permanent record or be permanently removed.

Routt and Anderson (2011) have argued that the response, or lack of response from the justice system often leads parents to feel that they are responsible for their child’s behaviour. This often gives the adolescent the message that s/he is not responsible, and that there are no serious consequences for their behaviour (Williams, Tuffin, & Niland, 2016). There has been little research, particularly quantitative, on the impact and outcomes of various justice responses, creating a challenge for the design and implementation of more appropriate responses. Intervention Orders have, in some cases, been utilised, with some suggesting that whilst these represent an important step in reducing AVTP, they cannot be successful without attitude and behaviour change (Gallagher 2004). However, others suggest
that Intervention Orders are counterproductive (Clarke & Gwynne, 2011; Robinson 2010). In Howard and Abbott’s (2013) study both parents and adolescents nonetheless believed that police (and, at times, Intervention Orders) did reduce AVTP, although they had a negative impact on the relationships.

What Don't We Know

Walsh and Krienert (2009) have identified several limitations of the current literature on AVTP. Firstly, they note that there is limited research in this area, and the majority of data is over 10 years old. The more recent research tends to utilise small sample sizes, be based on clinical samples and case studies, and often relies on survey data or qualitative, exploratory methods. Variation in definitions, age ranges and interpretation also creates inconsistencies, making it difficult to draw any overarching conclusions. As Williams, Tuffin and Niland (2016) conclude, research in AVTP has been largely explorative in nature and under-theorized with ambiguous findings.

Ulman and Straus (2000) have discussed the lack of consensus that exists about risk factors and how this confuses practitioner responses. The majority of research in this area has also been conducted in the United States or Europe (e.g., Bobic, 2004; Condy & Miles, 2012; Holt, 2012; Howard & Abbott, 2013; Routt & Anderson, 2011; Walsh & Krienert, 2009; Wilcox, 2012), with most Australian research only having been conducted in one state (Victoria).

Intervention

A Cochrane Review of educational and school based interventions for preventing adolescent family violence (including AVTP) concluded that there is currently no evidence that interventions reduce episodes of violence or improve the attitudes, behaviours and skills that are associated with violence, finding only
evidence for a small increase in knowledge (Fellmeth et al., 2013). Whilst no single intervention has been found to be effective, a number of observations have been made about the features of an effective intervention program. For example, Martsolf, Colbert and Draucker (2012) argue that mentoring and motivational interviewing are likely to be key components of success. Reyes et al., (2015) also discuss the mediating role of normative beliefs about violence and poor anger management as key treatment targets. A systematic review by Cox et al., (2016) also identifies the importance of enhancing protective factors at the individual and family level to ensure the success of any intervention, with Moore et al., (2015) also proposing that services are appropriately triaged after screening for AVTP. The 2016 Victorian Royal Commission nonetheless determined that targeted counselling and family therapy are likely to be the most effective means of addressing AVTP (State of Victoria, 2016). A cost benefit analysis conducted by the Washington State Institute of Public Policy (2016) also determined that family interventions have the most benefits, and the least costs, in reducing juvenile offending more generally, suggesting that family-level interventions are likely to offer the most efficient approach to sustained change.

Discussion

There is no single factor or predictor of AVTP; rather it might be best considered as a ‘perfect storm’ of different factors. Causal explanations of AVTP consistently highlight the complexity of inter-related determinants, with current research presenting an inconsistent picture of the key factors that influence the occurrence of AVTP. Trying to determine a central ‘cause’ does not seem possible, and any attempt to do so is likely to either under-estimate the complexity or over-estimate the influence of any single factor (Gallagher, 2004). Perhaps the most appropriate model to understand AVTP is, therefore, a nested ecological model,
which considers the impact of individual, family and community factors on the occurrence and experience of the behaviour (e.g., Cottrell & Monk, 2004).

One of the greatest barriers to research and working with those who are impacted by AVTP is the inconsistency in definition, and the consequential lack of clear evidence around prevalence and family characteristics. This perpetuates the isolation of parents when AVTP occurs and limits recognition and intervention by practitioners. Helping parents to identify and name their experience is a first step in supporting families who experience AVTP. There is an obvious need for more research and work with Aboriginal and Torres Strait Islander communities (and other culturally and linguistically diverse communities) to help understand cultural differences and experiences of AVTP, and to ensure that services are sensitive when working with families, around cultural and family accepted norms.

In conclusion, AVTP is a prevalent and damaging phenomenon that has lasting impacts on family relationships. The clinical and justice responses are, at present, not well informed by basic knowledge of the prevalence and circumstances in which AVTP occurs. Broader issues remain, however, about how to best balance the priorities of safety and welfare. It is likely that effective intervention in this area will need to adopt a systemic approach; therapeutically working with families, and welfare and justice sectors to reduce the occurrence of violence towards parents.
Chapter 2: Context and theoretical Background

In the 1960s and 1970s awareness and public attention about family violence increased markedly, perhaps as a result of a shift in what was considered to be socially acceptable in the privacy of the home environment. In the 1960s the child welfare and reform movement meant children who were physically and sexually abused far more considered in government policy, with drastic changes introduced to social services agencies, legislation and medical practice. In the 1970s the strength of the women’s liberation movement reconceptualised intimate partner violence as being away from, and outside of an accepted norm, and a wave of social service initiatives and services were introduced. In contrast, AVTP remained relatively unheard of until Harbin and Madden (1979) were credited for identifying what was termed “Battered Parents Syndrome” – a ‘new’ form of family violence (Walsh & Krienert, 2007). Since this time, research and awareness has been slowly increasing, however there has yet to be a well-established theoretical framework within which to conceptualise AVTP. The current chapter will therefore provide an articulation of definitions of key terms and then a brief overview of the major theoretical frameworks which could be adapted within the field of AVTP.

Definitions

Terminology is critically important as each term can frame how we recognise and understand problems (Holt, 2013). There are many inconsistencies in the research literature concerning what constitutes family violence, including AVTP (see Moulds et al., 2016). In fact, there is no single nationally or internationally agreed definition of 'family violence' or 'intimate partner violence', with different definitions utilised in different contexts and jurisdictions, as well in legislation (ABS, 2013). Generally speaking, intimate partner violence (IPV) is seen to occur between two
people who have, or have had, an intimate relationship (e.g., a de facto relationship, married). It is usually from one partner to another, and generally male to female violence within heterosexual relationships. The broader term family violence refers to violence that occurs within the wider family, and includes other family members. It is a term considered to be more culturally sensitive as it embraces concepts of family used in Aboriginal and Torres Strait Islander communities (Taft, 2016). Rathus (2013) has described some of the challenges that arise when applying these definitions. For example, some legal definitions of intimate partner violence require proof of coercion and control (creating fear) for family violence to be considered to have occurred. The picture is even more complex in relation to AVTP, with varying definitions producing markedly different estimates of prevalence and making it difficult to draw any conclusions about either the nature or scope of the issue (Moulds et al., 2016). The definition and language chosen to define AVTP clearly has significant implications for how research and information is collected, extracted, analysed, and interpreted; as well as for how findings are applied to the development of prevention and rehabilitation efforts. This is further complicated by how many of the concepts used in definitions of AVTP, such as family, violence and adolescence, being themselves inconsistently defined, often debated, and at times seen as loaded terms.

**Family**

Families can be understood informally in a very idiosyncratic nature, based on lived experience. They can refer to who people live with, feel safe with, love, spend time with, trust, and/or share blood with. From a research perspective, definitions of family are often viewed as being much more categorical. According to the Australian Bureau of Statistics (ABS; 2013), for statistical purposes a family is:
A group of two or more people that are related by blood, marriage (registered or de facto), adoption, step or fostering, who usually live together in the same household

This definition is inclusive, in the sense that it tries to accommodate those idiosyncratic differences in how people classify their families. For example, it allows the inclusion of newlyweds without children, gender and sexual orientation diverse families, couples who are married with children, single parents and siblings who live together (with one being in a ‘parenting role’). The only caveat here is that at least one person in the family has to be over 15. In terms of exclusions, divorced or separated parents who live away from their children and who live alone are not considered to be family, even if they have a parent-child relationship and/or some custody access (e.g., on weekends). Similarly, adult children who live away from their parents are also not classified as family. Therefore, even if a person is considered to be part of a family, he or she is not included for statistical purposes if they do not live in the same household as other family members.

There is less ambiguity around the definition of a ‘parent’, with the common definition of a parent being:

a person who is a father or mother, a person who has a child

or

a person who brings up and cares for another - Merriam-Webster Dictionary (2016) These are generally agreed to be respectful of the noun connotations (‘someone’s parent’) and verb connotations (‘to parent’). This definition is sensitive to non-biological parenting relationships as well as being relevant to children in foster care where the focus is on the ‘parenting’ rather than the genetic relationship.
Due to the inclusive nature of definitions of both family and parent, this thesis will utilise both of the above definitions. This allows for families, no matter what the formation, to be considered eligible for analysis, as long as there is a parent and a child. A parent will include anyone who is a mother/father to an adolescent or anyone who ‘parents’ an adolescent, including adoptive and foster parents.

**Violence**

Defining violence is challenging, as it is a culturally and contextually bound, complex, multi-determined and poorly understood phenomenon. Violence is often strongly associated with anger and aggression which can confuse understanding further. The emotion anger is healthy, universally experienced and internal. It does not always lead to aggression, violence or any externalisation (Howells, Daffern & Day, 2007). Similarly, whilst aggression and hostility can result from anger and lead to violence, this isn’t always the case; aggression does not always lead to violence (although all acts of violence are considered aggressive). Further, not all violence is driven by either anger or aggression, violence can be instrumental and employed as a form of exerting control over another. Some researchers have distinguished aggression from violence based on outcome. For example, if the outcome is physical injury, then the behaviour is considered to be violent, whereas if the outcome does not result in injury it is considered to be aggressive (Gallagher, 2008). The distinction between aggression and abuse can therefore vary depending on who, what, where, why and how an individual acts. The intention behind the violent act, how it is interpreted by the victim and the harm inflicted are also important to the classification of an act as being violent. Pagani (2015) noted that the causes of violence are often complex, interconnected, inherently linked to context and the interplay of emotions, cognitions and behaviours specific to each case. This is in
addition to the cultural and societal views about that which is considered acceptable behaviour and that which is considered unacceptable.

The family violence field has tended to be more inclusive of emotional, psychological, financial, and social violence than other areas which focus primarily on understandings of violence as only physical. Despite these distinctions we know that family violence is grossly underreported, with estimates that only 50% of intimate violence is reported (Birdsey & Snowball, 2013). As previously noted, within Australia each state defines, classifies and responds to violence differently, according to their determined legislation. This means that within an Australian context there are complexities in comparing statistics as acts which are included or considered to be “violent”, differ between jurisdictions.

The understanding of violence used in the current thesis is dependent on the data used in studies, and the legislative understanding of violence within the part of Australia from which the data originates. For each study, the understanding of violence within each context is explained in order to contextualise the findings of each study.

**Adolescence**

Adolescence has been defined as a time of vulnerability and adjustment, characterised by changes in physical, psychological and social development between childhood and adulthood (Ernst et al., 2006; Steinberg 2005). It is agreed that adolescence is generally the period between childhood and adulthood, however the commencement and length of this appears to vary culturally, individually and over time, and there is no universally accepted standard (ABS, 2013; Degner, 2006). The challenge here is that adolescence is often based on developmental level rather than
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chronological age. There is no consensus therefore on what is a very diverse period. Whilst it can be referred to as ‘young adulthood’, ‘teenage years’, or a variety of other names, adolescence is consistently recognised as a time of transition, growth and growing independence. For example, many western cultures tend to mark the beginning of adulthood with the end of puberty, but many non-western cultures mark the beginning of adulthood with rites of passage (for example, Lore in Aboriginal communities) which mark the end of an individual’s childhood and his or her acceptance into adult society (Degner, 2006).

The diversity in how adolescence or youth is defined reflects the conflicts across biopsychosocial, political and social considerations in defining this stage of development, as well as cultural and family understandings. For research purposes, however, an age bracket cut-off is needed and justified, as having an agreed definition of adolescence allows the collection of reliable statistics and creates the ability to compare data internationally (Baltag, 2016; Curtis, 2015).

Chronological definitions of adolescence and an adolescent vary vastly throughout the literature. The World Health Organisation (2016) defines adolescence as between 10-19 years of age, based on the onset of physiologically normal puberty and ending when an adult identity and behaviour are accepted (as marked by changes like finishing secondary education, legally marrying, getting a job; Baltag, 2016). However, in Australia the timing of these milestones does not always fall within the 10-19 age bracket, with records suggesting that since the 1970s, young people reach these milestones increasingly later in life (ABS, 2015).
Some definitions distinguish between childhood and adolescence, for example the United Nations General Assembly defines ‘youth’ as a person who falls between 15 and 24 years of age (inclusive) (United Nations, 1985). In a similar vein, the Australian Bureau of Statistics distinguishes children from youth; a person aged 0 to 14 years is considered a child and whereas a person aged 15 to 24 years is considered a youth. However, this is not consistently applied across all ABS outputs and analyses (ABS, 2007).

Legally in Australia children are not held criminally responsible for their actions until they are ten years of age (White, 2007). This relates to the assumption of DOLI INCAPAX; that a child is ‘incapable of crime’ under legislation or common law, meaning they can be excused or considered ‘incapable of committing crime’ on the grounds that they have not reached an ‘age of discretion’. For a child between 10 and 14 years of age to be convicted, the prosecution must establish that when committing the offence, the child had criminal intent (mens rea) and knew that the act was seriously wrong. In contrast, after 14 years of age, the challenge is for the defence to establish that the child was not competent and did not have the knowledge to know that the behaviour was wrong (Bradley, 2003). Across Australia, the age in which a child is legally considered to be an adult (the age of majority) and is dealt with in the adult criminal justice system, is after 17 years of age. Once a person reaches the age of majority the law assumes that he or she assumes control and responsibility over themselves, their actions and decisions (the Law Reform Commission, 1977). Therefore, the period between 10-17 years is considered to be ‘youth’ and a period of transition from childhood to adulthood. The focus of this research is on AVTP within the Australian context with a focus on those incidents which are reported to police. For the purposes of this thesis, adolescence is
determined to be between 10-17 years of age, when young people are legally considered to be “youth” in terms of their offending behaviour.

Theoretical Background

Theories provide us with different conceptual frameworks to help understand problems, and in turn, help develop effective solutions for problems. To date AVTP has been explored theoretically minimally, and as such, interventions and practice haven’t been well informed by theoretical models of understanding. Our understanding inevitably leads to discussions from an institutional perspective regarding whose responsibility the response to AVTP is, with suggestions that it is a youth justice, child protection, domestic violence or health issue, when the reality is that it concerns all these areas (Holt, 2016). Explanations of why adolescents are violent towards parents should include structural and cultural factors, the idealisation of family, family norms and social tolerance of violence as well as individual factors (Barnett, Miller-Perrin & Perrin, 2011). Due to AVTP being an under researched and developed phenomenon, there is no conclusive evidence based theoretical framework within which to understand AVTP. However, theories from the related areas of intimate partner violence, trauma and young offending may provide useful bases from which to develop a more tailored theory of AVTP. Therefore, the following provides an overview of the theoretical background for both intimate partner violence and violent offending broadly, with comment regarding the potential applicability of these theories within the area of AVTP.

Theories of Intimate Partner Violence

In the late 1960s and early 1970s second wave feminism achieved recognition of intimate partner violence as being a serious social problem that had instrumental significant impacts for women and families. The recognition of
intimate partner violence was rooted in the ideology that this violence was the product of gender inequality in social relationships. At the time, this was a drastic contrast to the existing medical model which pathologized individuals as the cause. Since then there has been a number of theoretical explanations for intimate violence derived from different academic perspectives, including psychology and social work.

Theoretical perspectives tend to either take an individualistic or family/systemic view, with individualistic approaches viewing the ‘problem’ and point of change as being within the person, compared to family or systemic viewpoints which view the problem as a pattern of interactions within a system. At present, the consensus is that family violence has multiple causes at multiple levels (Lawson, 2015). As mentioned previously, while AVTP has a number of parallels with other forms of family violence, there are unique and important differences. For example, AVTP involves a transgression of conventional notions of power relations, with the young person not necessarily having more economic, political or physical power over the victim, beginning the question of what kind of power is being abused by the young person (Holt, 2013). The struggle with trying to apply these theories to AVTP is that violence in the home within these families may be recursive; adolescents in question may be both victims and perpetrators of violence (Holt, 2016). AVTP tends to occur in a context of family disharmony, violence and dysfunctional relationships and with violence being mutually shaped and reinforced – promoting a linear cause and effect relationship is therefore difficult (Holt, 2016). With these considerations, it has been suggested that conventional theories of family violence cannot be easily applied to AVTP, due to the complexities of these cases and as AVTP challenges notions of power and control (Condry & Miles, 2016).
**Family and systemic theories**

Family and systemic theories consider the roles of political and social structures and systems, family and cultural factors and the role of relationships on the perpetration of violence within relationships.

**Feminist perspectives**

Given the role of feminism in building acknowledgement and awareness of intimate violence as a problem, feminist theory has been a dominant theoretical model. Feminist theory focuses on the role of patriarchal systems and how they shape and foster patriarchal family structures, which position men as more powerful than women. In its purest form feminist theory posits that almost all family violence is due to the social patriarchal values that hold men as more powerful than women, leading men to believe they are superior and are entitled to use whatever means, including violence, to promote and maintain this status (Lawson, 2015). Violence is therefore a social process based on entitlement and control.

In support of this model, research has found higher rates of family violence in relationships where men hold patriarchal beliefs, approve of violent attitudes towards women, where there is male control and dominance, and where there is social inequality (Bowker, Arbibell & McFerron, 1988; Kantor & Straus, 1989; Straus, 1994; Stith & Farely, 1993). Lawson (2015) outlined a number of exceptions to this theory; it fails to account for family violence in gay and lesbian relationships, unprovoked female perpetrated abuse and many men who do have patriarchal traditional views and values who do not engage in violence towards their partners. This suggests that while important, patriarchal values are not the only predicator of family violence and that relationship and psychological factors are important.
individual predictors (Archer; 2000; Dutton & Nicholas, 2005; Cohen & Johnson, 2006).

AVTP has been conceptualised within feminist theory, as over two thirds of victims are women. Some of the mechanisms around this include the role and expectations of being a mother which can often lead to women spending more time than fathers on household duties and childcare roles. This often leads them to be the disciplinarian day to day at a developmental period when a young person is potentially becoming more autonomous as well as self and friend focussed (Ulman & Strauss, 2011). Understanding AVTP from a feminist perspective is in line with Holt’s (2013) definition of AVTP being a pattern of behaviour (Holt, 2016). A mother’s role, and the perception of this can lead children to feel entitled regarding what their mother ‘should do’ or ‘give them’, or to feel the need to challenge this role as disciplinarian, particularly if this has been role modelled to them (if they have witnessed their father being controlling and/or violent to their mother). Feminist theories explain the higher level of son to mother violence as well as offering a possible explanation of daughter to parent violence. It suggests that this kind of violence may be modelled in regard to treatment of women, but also that the core relationship between mother and child can be eroded by a male parent. A qualitative review by Cottrell and Monk (2004) found that AVTP was motivated by the role modelling of masculine stereotypes that promote power and control by both boys and girls, with boys wanting to fit this masculine stereotype and girls often taking a paradoxical response wanting to build distance from feminine roles. Furthermore, the review found that boys are taught that it is acceptable to control and dominate women, and females therefore can view their mothers as weak and powerless and use abuse to distance themselves from this stereotyped view of women. What feminist
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Theories cannot offer is why some young people are violent without role modelling of negative stereotypes or attitudes towards women, or cases when AVTP is perpetrated by a female offender against a male victim. Feminist theories provide us an embedded cultural and social explanation, however do not account for all of the individual differences.

*Family and System Theories*

Family systems theories consider each individual within the context of their family, and sees individual family member behaviour, relationships and interactions as having ripple effects on the entire family system. This means that family violence is both the product of, and driver for poor or strained interpersonal relationships (McBride, 2003). For example, factors such as close proximity, power imbalances, privacy and financial factors make families vulnerable to and contribute to the maintenance of family violence (Lawson, 2015). The role of intimacy is central to this theory with the demand for, or rejection of intimacy often triggering behaviours and actual or perceived abandonment, which can result in violence (Lawson, 2015). This theory is criticised by feminist theories, which perceive this as potentially ‘victim blaming’ by family theories seeing violence as a systemic problem, as opposed to the responsibility being on the family member who perpetrates it (Barnett et al., 2011; Hammer, 2003).

Notwithstanding this, family and systems theories incorporates’ the complex relationships between family members, and the potential impact of factors such as parenting styles, and family stressors, as central in understanding AVTP. These theories are in line with definitions of AVTP including any, or all acts of violence, regardless of intent or impact (Holt, 2016). The challenge with this model is that it can be vulnerable to blaming parents and reducing the responsibility attributed and
taken by the young person. Family and systems theories can be adapted to account for AVTP, however they do not provide clear specific risk factors for this phenomenon and rather provides an overarching lens through which to view family systems and dynamics and their potential role in the violence and helps to understand mutual violence within families.

**Social Theories**

Social theories consider how aggressive behaviour, such as intimate violence, are learned and transferred amongst family members. Some social theories include Control Theory, Resource Theory, Exosystem Factor Theory, and Social Isolation Theory.

According to Control Theory, intimate violence is motivated by an individual need to gain or maintain control or power within their relationships using the threat or use of violence to obtain compliance within relationships (Goode, 1971). This is a commonly referred to theory related to AVTP as it focuses on control and power as the main drivers for AVTP, and explores the importance of strong relationships as being a preventative factor (Hyde-Nolan & Juliao, 2012).

Resource Theory hypothesises that a relationship exists between wealth and violence, suggesting that violence can be a currency of last resource if wealth is not available (Hyde-Nolan & Juliao, 2012). This is an interesting factor in regard to AVTP as children are typically dependent on parents for resources such as money and transport, making the desire to ‘control’ resources a complex issue. No study or research has considered the relationship between wealth and AVTP to explore this link, however, more broadly, no relationship between socioeconomic status and AVTP has been found. Similarly, Exosystem Factor Theory emphasises the importance of resources and their mediating effect on being able to manage life
stressors, suggesting that violence is a stress response when the person lacks resources to manage the stress in any other way (Malley-Morrison & Hines, 2004). Research suggests that while stress can play an important role in predicting intimate violence, it is not in of its self a predictive variable, as not everyone who experiences stress commits intimate violence and not everyone who commits intimate violence has had a recent major life stressor (Malley-Morrison & Hines, 2004). Social Isolation Theory attempts to link stressors/life events and intimate violence, suggesting that child abuse and neglect isolate caregivers and children from social support systems, leading to an inflicted isolation from a community (Garbarino, 1977). The role of stress and lack of coping styles has been hypothesised as a risk factor with AVTP, with Cottrell (2011) arguing that AVTP may be enabled by social isolation, however, like many other possible links and models, has not been extensively researched.

Social theories offer many useful potential pathways for understanding AVTP, including the importance of factors such as power and control, the role of resources, particularly money, and the role of life stressors. These factors seem to be important elements of AVTP perpetration, however alone these theories leave some gaps in our understanding.

**Individualist theories**

While systemic and family theories can provide insight into the influence that factors such as culture, society and families may have on a systematic level of family violence they cannot provide insight into the differences individually. Individualist theories help us to understand why individual people may be violent. While this doesn’t justify the behaviour, it does provide insight for treatment models.
Learning Theories

Learning theory utilizes three principles of learning: social learning (modelling), emotional learning (classical conditioning), modification of behaviour (Operant conditioning). Social Learning Theory postulates that people learn behaviour from observing and imitating people around them, meaning that aggression is likely to be learnt through a role model (e.g., family member) being aggressive in this way (Bandura, 1977; Bandura, 1989; Malley-Morrison & Hines, 2004;). This model has particular utility in attempting to explain what has been termed the ‘intergenerational transmission of violence’ by suggesting that children who grow up with violence imitate those behaviours in future relationships. Research has supported this, with young adults who observe and experience intimate partner violence more likely to perpetrate or re-experience intimate violence as an adult, with this association being particularly strong for boys (Carvo & Carpenter, 2000; Hyde-Nolan & Juliao, 2012;). For cases of AVTP this would suggests that children who are exposed to violence have had the use of violence modelled to them which is later used against their parent(s) (Ulman & Straus, 2000). Ehrensaft et al., (2003) in a 20-year longitudinal study found that both the victim and perpetrator behaviour gets modelled, meaning children can observe and model the violence and the outcome of violence teaching them not only how to be abusive, but they also become familiar with learnt powerlessness (Barnett et al., 2011). Social Learning Theory is based on the assumption that this can be ‘unlearned’ and replaced with alternative behaviour (Lawson, 2015). This theory has been applied in Indigenous communities, with Hazelhurst (1994) noting that aggression was learned from colonial, male dominated and paternalistic practices that have now been transferred to Aboriginal society.
The main challenge to Social Learning Theory is that it is not always predictive, or modelled. Not all people who experience childhood maltreatment including witnessing family violence go on to be interpersonally violent, with Kaufman and Ziegler (1987) finding that only 30% of people who have experienced trauma go on to be interpersonally violent. Taken in isolation, Social Learning theory does not explain why the intergeneration transmission of family violence is not universal, that is, why many young people who have witnessed family violence don’t go on to become violent.

Classical Conditioning, or Emotional Learning, perceives family violence to be a trauma response and learnt association (Barnett et al., 2011). Children learn to associate violence with other events or stimuli, for example as a child they may witness or experience violence only when a parent has been drinking, and they subsequently associate violence with alcohol, or perhaps with a certain time of the week/day when it most often occurs. For AVTP an emotional learning pathway as both a victim and perpetrator can potentially occur, making specific their associations more difficult to identify and change. This appears to be a factor for both victims and perpetrators of AVTP, with reports that children can follow in similar patterns to the violence they may have witnessed (Howard & Abbott, 2013). In a similar line, Operant Condition theories focus on the impact of the consequence of the behaviour, for example if the perpetrator learns that violence (the action) leads to the victim being compliant (consequence), then the action is reinforced and it achieves the desired aim (Barnett et al., 2011). According to this theory, family violence continues because there are no significant adverse consequences as the perpetrator often is not arrested, or faced with charges or experiences any obvious nor immediate negative shifts within the relationship (Barnett et al., 2011).
AVTP, we know that offenders often do not receive negative consequences; in fact, this behaviour is usually reinforced with their demands (e.g., for money, power etc.) being granted which both stems from and builds entitlement. Often parents have difficulty in calling the police and taking legal action due to their sense of self-blame and their relationship with their child, as well as fear of what these consequences will be for their young person (e.g., a criminal record) (Howard & Abbott, 2013). There is certainly evidence of a link between observing violence, in particular family violence, and later perpetration of AVTP (e.g., Brezina, 1999; Cottrell & Monk, 2004). However, Holt (2013) argues that it may be the learning of values and attitudes around violence that are just as relevant as the reproduction of violent behaviour. In summary, it appears that whilst learning theory appears to have strengths that aid in understanding AVTP, particularly the increase or decrease in behaviour, it is perhaps not inclusive enough of the intricacies and complexities of the behaviour, particularly when a clear learning pattern is not evident.

*Individual/intrapersonal differences*

Intrapersonal differences theories focus on individual differences, for example biological differences, psychopathology and personality traits. In general, there is evidence supporting the importance of individual differences in the perpetrators of family violence, however, in most cases these differences are not complete explanations in themselves. Psychopathology theories consider the potential role of mental disorders in perpetrators or victims, with the idea that psychopathology may distort their view of the world and/or can act as a disinhibitor for their behaviour (Barnett et al., 2011). This notion in its purest form supports the debunked decontextualized idea of ‘victim blaming’ by looking for pathology in the victim as an explanation for violence. For AVTP, these theories would place the cause of the problem within the young person, caused by psychopathology within the
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young person (Holt, 2013). A number of studies investigating perpetrators of AVTP have been informed by this approach, including ADHD (e.g., Ghanizadeh & Jafari, 2010), substance use (e.g., Kethenini, 2004; Ibabe & Jaureguizar, 2010; Pagani et al., 2004, 2009), mental health pathology (e.g. Laurent & Derry, 1999; Routt & Anderson, 2011), behavioural challenges (e.g., Nock & Kazdin, 2002) and personality traits (e.g., Dixon & Browne, 2003). Other studies have been informed by interpersonal theories and individual differences by exploring potential profiles of young people who might be at risk of perpetrating AVTP. For example, Elliot et al., (2011), focused on ‘mattering’ being a key risk factor for AVTP and Ibabe and Jaureguizar (2010) focused on the role of ‘personal autonomy’. Holt (2013) identified that the challenge in the application of these theories is methodological, with these psychological processes often identified via static and de-contextualised measures, with a lack of appreciation of context.

There have been a number of suggested biological explanations for family violence. The theory of Behaviour Genetics suggests that genetic factors (in addition to social learning), for example aggression and antisocial behaviour, can explain similarities amongst families in regard to violence (Hines, 2002). However, this theory heavily ignores the environmental influences, for example life stressors, which may influence if, when and how violence is exerted, suggesting that this theory is limited in its application. While head injuries, low serotonin levels and high levels of testosterone have all been associated with interpersonal violence, we know that not all people with these biological conditions are interpersonally violent; and not all interpersonally violent people have these biological conditions (Lawson, 2015). The potential biological basis, including genetics, and hormonal levels has not been studied with an AVTP population. There is potential for these biological and
psychological elements to in part be potential casual factors in the origins of AVTP, however this remains unknown at this stage, with research still developing.

*Psychodynamic theories*

Psychodynamic theories consider individual internal psychological processes that provide us with templates that “allow” us to be abusive or accept abusive behaviour. Many of these theories stemmed from the ideas of Sigmund Freud who, despite not theorising crime and offending himself, understood violent behaviour as the product of “unconscious forces” and believed they were grounded in early childhood experiences (Bartol, 2002). Psychodynamic theories suggest that early relationships provide us with a template for future relationships, in particularly around attachment, connection and sense of security. According to these theories, we seek to reinforce and recreate our early mental representations, or working models of relationships. From an AVTP perspective, this theory would assume that AVTP is the result of early relationships featuring disordered control, abuse, violence and unmet needs, and therefore, people seek to recreate these relationships with their parents during their adolescence. These working models build representations of how the child weighs their worth based on their experiences of their relationships e.g., I am worthy of love (Bowlby, 1973). When people have avoidant, ambivalent or disorganised/disorientated attachments where relationships are less safe, the person may develop an enduring distorted view of themselves and relationships with others, meaning that they can depreciate their value and place more weight on other’s perceptions, power and importance (Hyde –Nolan & Juliano, 2012). Evidence shows links between early attachment, violence and family violence, with problematic attachment predicting later violence (George & Main, 1979; Main & George, 1985). Moreover, studies have found that children who have experienced abuse, neglect or
who have poor attachment can have limited emotional attachment to their parents, and are more likely to be assaultive youth (Cottrell & Monk, 2004; Gershoff, 2002).

Attachment theories have been explored to an extent with AVTP, for example Agnew and Huguley (1989) explored the impact of closeness and acceptance within the child-parent relationship and Paulson et al., (1989) assessed whether young people feel emotionally rewarded within their interactions, however the potential links have been underdeveloped (Holt, 2013). Psychodynamic theories provide us with insight into the mechanisms - that is the why, of AVTP, in particular why family relationships may be eroded or dysfunctional and lead to violence. However, many children who have witnessed or been victim to family violence go on to exhibit other behaviour (in some cases dysfunctional) outside of family violence, and not all perpetrators of AVTP have poor attachment, meaning that it is more complex than a simple cause and effect relationship.

*Cognitive behavioural theories (CBT)*

CBT theories focus on the transmission of violence amongst family members and the factors that influence why this can occur for some family members and not for others – that is, the role of individual differences. Three predominate theories include Learned Helplessness, Battered Women’s Syndrome and Intergenerational Transmission of Violence Theory.

Learned Helplessness was originally conceptualized by Seligman and his colleagues (Miller & Seligman, 1975) to describe the inability of dogs to escape a punitive environment, even when given the opportunity. This was later applied to understand depression in humans (Abramson, Seligman, & Teasdale, 1978). In 1977, Walker applied the theory of learned helplessness to intimate violence, arguing that
women become entrapped in being ‘victims’, and as their attempts to escape, avoid or change the situation fail, they become psychologically paralysed from leaving the relationship and become increasingly passive (Walker, 1977).

The challenge in applying learned helplessness theory to AVTP is that the options available are more limited, as the option of having their child removed or asking them to leave is often a daunting one and one that many parents cannot countenance. Parents are limited in what services and support they can access and what help they can actually receive which will be of assistance. In some way therefore, parents are ‘helpless’ to a degree, as system responses often encourage families to ‘stay together’, meaning they sometimes cannot change the situation. The biggest critique of Learned Helplessness in this context is that it blames the parent and labels them as “helpless” and vulnerable without considering the social climate and context.

Walker took his adaption of learned helplessness to formulate ‘Battered Women’s Syndrome’ (BWS) as a way to describe and explain the effects of living with abuse and violence, incorporating the victim (e.g., learned helplessness) and the perpetrator (e.g., cycle of violence) behaviour and then the potential trauma response experienced (e.g., post-traumatic stress disorder (PTSD) (Walker, 1984). However, this model was criticised due to the fact that it ignores the idiosyncratic aspects of both the motivators for perpetrating violence, and for victims leaving violent environments (Bell, Goodman, Dutton, 2007; Dutton et al., 2005). BWS is also vulnerable to stigma - pathologising the victim as having a mental illness, and ignoring other potential reasons for remaining in the relationship, for example the very real threat of further violence and lack of economic resources or support.
The Australian experience of Adolescent Violence Towards Parents (Anderson et al., 2003; Fleury, Sullivan, & Bybee, 2000). When it was originally formulated AVTP was called “Battered Parents Syndrome” (Harbin & Madden, 1979) to pay ode to this theoretical model. Wienblatt and Omer (2008) did discuss ‘parental helplessness’ in regard to severe behavioural problems in children however what is unclear is whether it is a response or a cause of behaviours such as AVTP (Holt, 2013). Further, it removes the important role of context, and factors such as how parents interact with their other children and potentially their own experiences of polyvictimisation within relationships (Holt, 2013). Some treatment programs have attempted to apply this model to AVTP, particularly the three-stage model (see Adolescent Family Violence Program Service Model, Human Services, 2014) however, these models are still being researched and it has not yet been empirically established that these models adequately explain and represent parents’ experiences.

The Cycle of Violence Theory, now known as Intergenerational Transmission of Violence Theory, describes the offender’s behaviour in three stages: tension building, acute battering, and contrite loving (the honeymoon phase) (Walker, 1979; Wallace & Roberson, 2011). Once again, there is a lack of empirical evidence supporting this cycle and it has been subject to widespread critique. Walker (1984) found only 50-60% of women interviewed had experiences of intimate violence consistent with the cycle. Other problems include that the model: does not reflect the reality experienced by many women, is too broad a generalisation, is too focused on only physical violence, and it seems to implicate that the victim accept a measure of responsibility for monitoring/avoiding that behaviour (Greenwood, 2004).

**Ecological Systems Theory**

Pioneered by Urie Bronfenbrenner (1979), ecological systems theory attempts to combine multilayered understanding, including social, cultural,
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individual and systematic factors, to explain complex societal events. That is, that human development is shaped by the environment in which an individual is embedded. Bronfenbrenner outlined five different levels or systems within the person’s ecology including the microsystem, mesosystem, exosystem, macrosystem and chronosystem, with the interconnections between these systems explain behaviour. Risk is therefore understood within the direct and indirect interactions that occur between individual characteristics of the child (e.g., personality factors), the social context (e.g., relationships with family), and the broader context (e.g., relationships between parents and parental characteristics) and in the exosystem (e.g., the community they lived in). This theory has been applied in the area of child protection and maltreatment (e.g., Belsky, 1993) and young offending (e.g., Hawkins & Catalano, 1993). Wundersitz (2010) has applied an ecological approach to try and account for family violence within Aboriginal communities. Three areas have been identified as directly or indirectly influencing Indigenous violence, these are historical events, characteristics of the individual, family and community, and the circumstances that precipitate the violent act, for example jealousy, ‘payback’ or drug or alcohol use.

Cottrell and Monk (2004) explored a nested ecological model of AVTP using semi-structured focus groups and interviews with parents, adolescents and services regarding their experience of AVTP. They found that the nested ecological model was useful in understanding AVTP, for example they note the interaction of various levels of influence, such as family stress, are likely to influence drug and alcohol use and mental health. More research into the potential use of the ecological model of AVTP is needed to help explore whether this model is a good fit for AVTP, and thus a good basis for intervention. However, the Cottrell and Monk (2004) exploration
was qualitative, and based on interviews at various time points prior to the papers publication in 2004, meaning more robust investigation is needed to consolidate their findings.

**Adolescent Offending Theories**

Offending is a complex and contested concept, with a range of factors believed to be “causal”, including social and economic disadvantage, abuse and neglect histories, and psychological characteristics e.g., mental illness and alcohol and drug use (Gotsis, 2014). For young people, other factors considered include difficult home environments, poor educational achievement and engagement, antisocial attitudes and personality, cognitive impairment, antisocial peer group and lack of pro-social leisure and recreational activities (Gotsis, 2014). Delinquent and criminal behaviour typically starts in late childhood and early adolescence, peaking in middle to late adolescence, with the majority of this behaviour declining by their early twenties (Casey, 2011). The majority of young people who engage in criminal behaviour during their adolescence do not go on to offend in their adult years (Casey, 2011).

**Developmental Life Course Theories**

The development and life course (DLC) perspectives have a major focus on risk factors and aims to demonstrate and explain the within-individual changes in offending that transpire over the course of the life span (Farrington, 2005). DLC theories propose that human development is determined by interconnections between different levels of an individual’s ecology and that these influences can change throughout the life course (Casey, 2011). Some of the most prominent theories in this area include Moffitt’s (1993) developmental taxonomy of antisocial behaviour and Sampson and Laub’s (1993) age-graded informal social control theory. These
theories focus on within-individual variation, as opposed to between individual variations; meaning offending is understood via environmental factors as well as underlying constructs (Farrington, 2007). The major advantage of DLC perspectives is that they offer explanations which describe the transitions and trajectories of youth offending and its relationship with adult offending (Thornberry, 1997). Desistance, according to DLC perspectives, is dependent upon an increase in prosocial life events (e.g., marriage, stable employment) and a change in opportunities, rewards and relationships, in other words, when adult goals and life events are achieved (Casey, 2011). This model suggests that AVTP as an offending behaviour is a result of disconnection from community and a lack of connectivity (in relationships) and life experiences. This theoretical model provides targets for treatment (building prosocial connections, opportunities, rewards and relationships), prevention and creates a sense of hope that with the right circumstances the violence would stop. There is no known research that attempts to directly apply DLC to AVTP (Holt, 2016; Kauy, 2017), however DLC theories have been applied to a myriad of young offending, including violent and sexual offending.

**Sampson and Lau’s Age-Grade Theory of Informal social control and cumulative disadvantage**

Sampson and Laub Age-Grade Theory of Informal social control and cumulative disadvantage proposes that when an individual’s links to society, such as family or school, are broken or weak, an individual is more vulnerable to becoming ‘deviant’, and to engage in crime (Sampson & Laub, 1993). In other words, the more ‘social capital’ (or connection) an individual has the more protected they are against antisocial behaviour, as the behaviour has a higher perceived ‘cost’ (Casey, 2011). Sampson and Laub refer to individuals with ‘cumulative disadvantage’, where they are low in social capital, and may have engaged in offending; for these individuals,
prosocial adult social bonds can change these pathways (Casey, 2011). This theory emphasises the importance of ‘quality over quantity’, noting that it is the quality of relationships, employment and stability that is important (Casey, 2011). Similarly, Catalano and Hawkins Social Development Model (Catalano & Kosterman, 1996) views socialisation as key to predicting offending and ultimately considers that the strength of social attachments including within family, peers and the broader community ultimately determines antisocial behaviours. Similar to other models of offending, this model has not been explored within AVTP, in particular in relation to social connection, however peer relationships and attachment with family have been seen to be risk factors (Calvete, et al., 2015).

**Moffitt Developmental Taxonomy**

Moffitt’s Developmental Taxonomy describes two categories of young offender’s dependent on stability of antisocial behaviour. These categories are adolescent limited and life course persistent (Moffitt 1990). The majority of offenders are adolescent limited offenders and while they may commit serious offences they do not engage in antisocial behaviour prior to or after adolescence, and their offending is typically more rebellious than violent (Moffitt, 1995). This means that overall, they are law-abiding citizens and their offending is driven by social mimicry and the desire to be independent and mature. When the adolescent is able to gain independence and matures naturally, by pro social means, the offending usually ceases (Moffitt, 1995). In contrast, approximately 5% of offenders are life course persistent offenders, who display antisocial behaviours from an early age and have problematic behaviour from early childhood through adulthood (Casey, 2011). Life course persistent offending is associated with neuropsychological deficits, particularly with low verbal intelligence and difficulties with executive functioning,
which leads to antisocial behaviours and problematic behaviour often being used as an alternative way to communicate. (Moffitt, Lynam & Silva, 1994).

Moffitt’s theory has been highly influential and has resulted in a large body of scholarship that is supportive of the theory (see Moffitt, 2008). It has been applied to a different offending types (e.g., violent, sexual), gang membership and other adolescent behaviour. For example, Reckdenwald, Ford & Murray (2016) applied Moffitt’s developmental theory to binge drinking, and found support for this application and that it was a good fit for understanding binge drinking. Little is known about how many AVTP perpetrators go on to be violent as adults towards family, either children or intimate partnerships, meaning it is unknown if Moffitt’s developmental taxonomy can be applied to this form of offending as we do not know the longevity of this kind of offending. However, there is great possible utility in applying this theory to AVTP, as it would allow for targeted planning for interventions. DLC theories are dynamic rather than static, and consider the development of the antisocial behaviour, risk and protective factors and the effects of life events on the course of development (Casey, 2011). From a rehabilitative perspective, they allow the possibility of explaining within-individual variations in offending, as opposed to between individual variation, which is more relevant to causes, prevention, and treatment (Casey, 2011). Farrington (2007) noted that the frequency of offending at any age depends not only on the strength of the underlying constructs but also on environmental factors, meaning theories such as Moffitt’s allow for ecological factors to be considered and managed. Having a greater understanding of the risks for a young person becoming a life course persistent offender, and therefore at risk of perpetrating family violence as an adult, would help inform policy and practice in both intervention and prevention. No known research
considers whether AVTP offenders differ significantly or follow a similar trajectory to other youth offenders. We know that adolescent dating violence predicts both victimisation and perpetration of adult partner violence (Spriggs, Halpern & Martin, 2009), little is known about the links between AVTP and future family violence though, although, it is hypothesised that a similar pattern is seen.

**Theories of AVTP**

There have been very few studies which have theorised specifically about AVTP, with the majority that have being based on qualitative data or reviews of literature. Kuay et al., (2017) in a review article proposed a trait based model of AVTP based on callous and unemotional traits, identifying “generalist” AVTP offenders who perpetrate aggression towards parents and others, and “specialist” AVTP offenders who solely perpetrate aggression towards parents. Their model focused on callous and unemotional traits, and how these influences offending behaviour. They determined that young people who are low on callous and unemotional traits more likely to be “specialist” AVTP offenders. Kuay et al., (2018) suggested that these differences were due to differences in parenting styles, reactive and proactive aggression and the social goals between these two groups. While this review had strong evidence, this model is purely theoretical, and has not been empirically explored, and is in its infancy. For example, there hasn’t been conclusive research reporting whether callous and unemotional traits are more likely in AVTP offenders, and whether the level of these traits can differentiate specialist and generalist AVTP offenders.
Summary

There are a number of possible theoretical models that could be applied to understand AVTP and to understand the mechanisms involved in AVTP; however there has been a lack of research to determine the best fit of model or potentially a new model of understanding. AVTP seems to have multiple pathways and situational contexts that need a nuanced understanding of their intricacies and distinctive features (Miles & Condry, 2015). Due to the complexities of AVTP, challenges in definitions and the factors that may contribute to AVTP occurring it is difficult to identify a single model to conceptualise its occurrence, with the intricacies seemingly a crucial part of its development, course and cessation. Holt (2013) has importantly argued that there is a need to go beyond identifying factors related to AVTP, and instead focus on how each factor contributes and relates to AVTP. How we understand and explain AVTP is crucial in providing the theoretical framework for development of policies and interventions, however it is also crucial for how people respond to AVTP (Holt, 2013).
Chapter 3: Systematic Reviews of the Literature

This chapter includes the two systematic reviews of AVTP. Due to research in AVTP being at times inconsistent, inconclusive and exploratory, these reviews aimed to synthesise and summarise the international and national literature around characteristics and prevalence of AVTP. These reviews aim to address the thesis aim of understanding 1. What is known about the characteristics and prevalence of AVTP?. In the first review, characteristics of AVTP offenders, victims and incidents are examined using the ecological model. This paper was published in the Journal of Aggression, Conflict and Peace Research in 2017. The second review, submitted, but not accepted for publication in the Journal of Family Issues, focuses on exploring the prevalence of AVTP, and the factors that can influence prevalence, such as measures and methods of measurement used, and the sample population.

Both of these articles are reliant on the available data within the field of AVTP. AVTP is the most under-researched form of family violence (Holt, 2012). As a result, the research methodology is diverse, and the findings have been somewhat inconsistent (Holt, 2012). This data tends to be sparse, and vulnerable to many of the challenges within research of AVTP, primarily under reporting, and differing definitions and methodologies associated with real world data collection. The challenges of differing kinds of data collection, e.g. self report, official report, need to be considered when understanding these findings. For example, self report can be vulnerable to social desirability, differing family perspectives and factors such as shame (Gallagher, 2004). On the other hand, official reports tend to be socially constructed, and reflective of a social climate, and historically in the field of family violence are often vulnerable to underreporting (Maguire, 2012). Most studies regarding AVTP are small scale, often qualitative, which while rich data, limits the ability for generalization (Condry & Miles, 2014; Elliott, McGowan, Benier, Maher,
& Fitz-Gibbon, 2017). Holt (2012) has argued that there is a need for multidisciplinary research methods to provide ‘coherent and contextual’ results, that give justice to the complexities of AVTP. The following REA should be understood with these methodological challenges, and their inherent limitations kept in mind.

**Impact Factor:** 0.66

**AUTHORSHIP STATEMENT**

1. **Details of publication and executive author**

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<th>Publication details</th>
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<td>Characteristics of adolescent violence towards parents – a rapid evidence assessment</td>
<td>Published July 2017, <em>in</em> <em>Journal of Aggression</em>, 9(3), DOI: 10.1108/JACPR-11-2016-0260</td>
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<th>School/Institute/Division if based at Deakin; Organisation and address if non-Deakin</th>
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</tr>
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<tbody>
<tr>
<td>Lauren Grace Moulds</td>
<td>School of Psychology, Faculty of Health, Deakin University</td>
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2. **Inclusion of publication in a thesis**

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<th>Is it intended to include this publication in a higher degree by research (HDR) thesis?</th>
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<th>If Yes, please complete Section 3 If No, go straight to Section 4.</th>
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3. **HDR thesis author’s declaration**

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<th>Name of HDR thesis author if different from above. (If the same, write “as above”)</th>
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<tr>
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<td>School of Psychology, Faculty of Health, Deakin University</td>
<td>An investigation of the Australian experience of Adolescent violence towards parents and the potential links with youth justice</td>
</tr>
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</table>

If there are multiple authors, give a full description of HDR thesis author’s contribution to the publication (for example, how much did you contribute to the conception of the project, the design of methodology or experimental protocol, data collection, analysis, drafting the manuscript, revising it critically for important intellectual content, etc.)

Conceptualisation of the project, conducted the rapid evidence assessment, tabulated and interpreted the findings, completed the overview, and drafted the manuscript
The Australian experience of Adolescent Violence Towards Parents

I declare that the above is an accurate description of my contribution to this paper, and the contributions of other authors are as described below.

<table>
<thead>
<tr>
<th>Name and affiliation of author</th>
<th>Contribution(s) (for example, conception of the project, design of methodology or experimental protocol, data collection, analysis, drafting the manuscript, revising it critically for important intellectual content, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professor Andrew Day, then Deakin University, now, James Cook University</td>
<td>Assistance with design of methodology, provided critical feedback on manuscript</td>
</tr>
</tbody>
</table>

4. Description of all author contributions
5. Author Declarations
I agree to be named as one of the authors of this work, and confirm:
vi. that I have met the authorship criteria set out in the Deakin University Research Conduct Policy,
vii. that there are no other authors according to these criteria,
viii. that the description in Section 4 of my contribution(s) to this publication is accurate,
ix. that the data on which these findings are based are stored as set out in Section 7 below.

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<td></td>
<td>21/08/2018</td>
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Signature Redacted by Library

6. Other contributor declarations

I agree to be named as a non-author contributor to this work.

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* If an author or contributor is unavailable or otherwise unable to sign the statement of authorship, the Head of Academic Unit may sign on their behalf, noting the reason for their unavailability, provided there is no evidence to suggest that the person would object to being named as author

7. Data storage

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<th>Storage Location</th>
<th>Date lodged</th>
<th>Name of custodian if other than the executive author</th>
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<tbody>
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<td>Locked computer</td>
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</tr>
</tbody>
</table>
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If the publication is to be included as part of an HDR thesis, a copy of this form must be included in the thesis with the publication.

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Structured Abstract:

**Purpose** – Adolescent violence towards parents (AVTP) has damaging impacts on family relationships, however, little is known about the characteristics of the families in which it occurs. This study aimed to synthesize current knowledge of AVTP characteristics to help to inform the development of more effective community responses.

**Design/methodology/approach** – The paper opted for a Rapid Evidence Assessment taking an ecological approach to organizing current knowledge about the characteristics of both victims and perpetrators of AVTP. It synthesized 20 empirical studies identified from a systemic review of published literature.

**Findings** – The assessment concludes that adolescents who perpetrate AVTP typically experience high levels of comorbid mental health concerns, drug and alcohol use, anger difficulties and trauma. The victims (parents) are characterised as having strained relationships with other family members and trauma profiles.

**Practical implications** – Policy and practice responses should be tailored to systemically address needs in the identified areas. This review further illustrates the limitations of current knowledge, highlighting inconsistencies in both definitions and findings, particularly related to key characteristics.

**Originality/value** – This paper is the first of its kind to systemically search this literature and only include the most rigorously designed studies. It adds value to the developing field of AVTP, by providing the scaffolding of the characteristics of families who have been impacted.

*Key words:* Adolescents, Adolescent Violence towards Parents, Family Violence, Parents, Violence, Rapid Evidence Assessment.

**Article classification:** Literature review
**Author Biographies and acknowledgements:** Lauren Moulds is a current Ph.D. candidate at Deakin University. She is currently employed as a Senior Psychologist on the Family Violence Project, within Youth Justice, Department of Communities and Social Inclusion, South Australia. The views in this paper are those of the authors and do not necessarily represent those of the agency. Andrew Day is a Professor at James Cook University.
Introduction

Adolescent violence towards parents (AVTP) is a relatively neglected subtype of family violence which challenges common perceptions of family. Relatively little is known about its characteristics and prevalence (Walsh & Krienert, 2007), probably as a result of ongoing confusion and inconsistencies in definition and terminology, as well as a range of associated issues related to measurement, and that AVTP is likely to be grossly under-reported. It has been suggested, for example, that the lack of consensus that exists about AVTP perpetuates the isolation of parents when AVTP occurs and confuses practitioner responses (Ulman & Straus, 2000). Moreover, clinical and justice responses are, at present, not well informed by basic knowledge of the characteristics of AVTP (Moulds et al., 2016). Accordingly, the aim of this study is to synthesize current knowledge in a way that can help to inform the development of more effective community responses to this issue.

To the best of our knowledge there have only been two previous reviews of this topic. Kennair and Mellor’s (2007) review concluded that research findings in this area are equivocal, although characteristics such as gender, age, attachment to parents, race/ethnicity, socioeconomic status, family stress and parenting style, have all been investigated. They added that this creates a situation in which current treatment approaches lack empirical support. Hong, et al., (2011) concluded being older, Caucasian, having experienced child maltreatment and male were all strong characteristics of AVTP perpetrators, while being female, and having experienced domestic violence was a characteristic of victims. They reported inconsistent evidence around whether socio-economic status and parenting styles were associated with AVTP and a lack of clear evidence about peer and media influence and family structure. Both of these studies, however, were reviews not based on systematic searches of the literature; they included studies of varying methodological rigor and
did not provide conclusions that were based on the strength of the evidence of the studies reviewed. Hong et al., (2011) identified a need for more empirical investigation and studies that utilize larger sample sizes to enhance our understanding of AVTP and enable more informed, and potentially effective, treatment.

This study aims to provide a systematic analysis of current knowledge, applying an ecological systems theory approach to consolidating the evidence base. Ecological systems theory, pioneered by Bronfenbrenner (1979), is a particularly appropriate framework for this purpose as it highlights the social context in which violence occurs; how a person is influenced by their broader environment. This includes factors within micro- (e.g., parenting styles, family violence), meso- (e.g., peer influence), exo- (e.g., family stress, lack of social support), and macro- (e.g., gender inequality) systems. The theory has been previously used to conceptualize child maltreatment (e.g., Belsky, 1993; Malvaso, Delfabbro & Day, 2016) and young offending (e.g., Hawkins & Catalno, 1993) research, although has only applied to AVTP in small scale qualitative research (Cotrell & Monk, 2004).

More specifically, this study aims to document current knowledge about the characteristics of victims and perpetrators, given that the current literature appears to offer contradictory evidence and the recent nature of the research in this area (Moulds et al., 2016). This review thus aims to build on the previous reviews by Hong et al., (2011) and Kennair and Mellor (2007) by providing a systematic review of empirical studies in this area, taking into account the need for methodological rigor if firm conclusions are to be drawn. It aims to review the international literature, albeit with an understanding that this creates difficulties when comparing studies as a result of differences in legislation, as well as local reporting practices and cultural influences. In summary, this study aims to address two key questions:
What do we know about the characteristics of perpetrators of AVTP; and what do we know about the characteristics of victims of AVTP?

**Method**

Searches were conducted using the Preferred Reporting Items for Systematic reviews and Meta-Analyses guidelines (PRISMA; Moher, Schulz, Altman & Group, 2001). These focused-on peer-reviewed studies that reported English language quantitative data regarding characteristics of AVTP; qualitative analyses, case studies and unpublished dissertations were thus excluded. Key words included variations of terms to refer to age/developmental stage (e.g., Juvenile or Adolescent or Child or Young People), terms to refer to aggression (e.g., Aggression or Violence or Conflict or Abuse or Parricide or Family Violence or Perpetrate) and those relating to the victim (e.g., Parent or Mother or Father or Stepparent or grandparent). The databases searched were PsycInfo, MedLine, Embase, SOCI Index, CINAHL Complete, Informit and Scopus, with searches limited to articles published in the last 20 years (i.e., between 1996 and 2016). All searches were conducted between the 29th and 31st of May 2016.

The reference lists of all relevant articles were then searched via Scopus to identify additional relevant studies. Scopus is the largest abstract and citation database of research literature and quality web sources; it allows the researchers to identify what other studies have cited particular studies and to utilise the reference list of searched studies to identify additional sources. Next, the identified studies were screened with regard to the eligibility criteria. Excluded studies were non-English, non-empirical, and concerned with adolescent violence towards carers (violence toward carers is considered a similar, but distinctive, phenomenon with additional complexities and determinants). Studies concerning parricide were subsequently excluded in response to the significant differences that became evident
between this literature and AVTP. A flow diagram of the search results is displayed in Figure 3.1. The initial search yielded 6,406 hits, with 482 records identified through other sources. After screening titles and abstracts, 171 papers were considered potentially relevant and full-text articles were then accessed. Of these, 129 were subsequently excluded due to not meeting the exclusion criteria, leaving 42 papers that met the study criteria.
Figure 3.1: flow diagram of search result

Records identified through database searching
(n = 6406)

Additional records identified through other sources
(n = 482)

Records after duplicates removed
(n = 4912)

Records excluded
(n = 4741)
Not in English (n = 22)
Not in date range (1996-2016) (n = 49)
Not related to topic (no key terms in title) (n = 4581)
No abstract available (n = 89)

Records screened
(n = 4912)

Full-text articles assessed for eligibility
(n = 171)

Full-text articles excluded, with reasons
(some more than 1 reason)
(n = 129)
Did not measure Adolescent Violence Towards Parents (n = 75)
Qualitative (n = 33)
Non empirical/overview (n = 1)
Book Chapters/not peer reviewed (n = 2)
Not in English (n = 6)
Did not consider characteristics of Adolescent violence towards parents (n = 8)
Parricide (n = 10)

Studies included in qualitative synthesis
(n = 42)
A Rapid Evidence Assessment (REA) methodology was used to synthesize the evidence, and to assess the weight of evidence that exists in relation to the identification of characteristics of ATVP. REAs provide a balanced assessment by using systematic review methods to search and gather evidence and critically appraise existing research thereby producing a thorough and robust synthesis of the evidence to inform policy or practice and to answer questions about what is known (The National Foundation for Educational Research in England and Wales, 2016). The REA approach was chosen to streamline the typical systematic review process, while retaining the rigor of search and selection processes.

**Methodological quality**

The most widely used scale for reviewing the methodological quality of criminal justice research is the Maryland Scientific Scale (MSS) (Farrington, Gottfredson, Sherman & Welsh, 2002). While this scale is more typically used to assess the quality of treatment outcome studies, it was adapted for use in this review as a way of differentiating between the different types of evidence reported in relevant literature. This is based on an understanding that experimental research designs provide greater validity than non-experimental research designs, and that the conclusions of any review of the literature should be related to the strength of evidence that exists to support them. In this review, a study received a rating of “0” when it only reported descriptive data, through to a rating of “5” for an experimental design (see Table 3.1).
The Australian experience of Adolescent Violence Towards Parents

*Table 3.1: Description of Maryland Scale rating and adaption*

<table>
<thead>
<tr>
<th>Rating</th>
<th>Type of study Adaption</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td><strong>Descriptive Study</strong> – descriptive statistics (e.g., percentages, rates etc.) of factors and AVTP</td>
</tr>
<tr>
<td>1</td>
<td><strong>Correlational Study</strong> – between a measure of AVTP and a variable(s)</td>
</tr>
<tr>
<td>2</td>
<td><strong>Pre/post comparison with no equivalent comparator</strong> – Longitudinal study with different time measures of AVTP</td>
</tr>
<tr>
<td>3</td>
<td><strong>Group comparison or case-control design</strong> – comparison between two or more comparative groups</td>
</tr>
<tr>
<td>4</td>
<td><strong>Quasi experimental design with statistical or other controls</strong> – comparison between multiple equivalent groups, one with and one without treatment. Statistically controlling for confounding differences</td>
</tr>
<tr>
<td>5</td>
<td><strong>Randomized control design</strong></td>
</tr>
</tbody>
</table>

Nine of the identified studies were rated as level 3, with 11 classified as level 2 studies, 13 as level 1 studies and 9 studies with a score of 0. Studies with a score of 0 or 1 (22 studies) were excluded from further analysis due to correlational or descriptive studies being limited in their capacity to draw meaningful, empirical conclusions regarding characteristics of AVTP. The remaining twenty studies were examined in the REA. *Table 3.2* provides an overview of the key features of these studies.
<table>
<thead>
<tr>
<th>Author</th>
<th>Year</th>
<th>Sample</th>
<th>Sample Size</th>
<th>Measure used of AVTP</th>
<th>Maryland Score</th>
<th>Country</th>
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</thead>
<tbody>
<tr>
<td>Sheehan</td>
<td>1997</td>
<td>Clients from treatment program (MATTERS). MF, 11-25 years of age</td>
<td>60</td>
<td>Clinical Interview</td>
<td>0</td>
<td>Australia</td>
</tr>
<tr>
<td>Laurent and Derry</td>
<td>1999</td>
<td>Inpatients hospitalized in our child and adolescent psychiatry department. MF, Age: 10-14, M=14</td>
<td>645</td>
<td>Hospital Records</td>
<td>0</td>
<td>France</td>
</tr>
<tr>
<td>Gallagher</td>
<td>2004</td>
<td>Clinical sample. MF, males outweighed females (86% Males). No age range.</td>
<td>77</td>
<td>Clinical interview</td>
<td>0</td>
<td>Australia</td>
</tr>
<tr>
<td>Kethineni</td>
<td>2004</td>
<td>Adjudicated juveniles charged with domestic battery or AVTP. MF. Age =11-18.</td>
<td>83</td>
<td>Police records</td>
<td>0</td>
<td>USA</td>
</tr>
<tr>
<td>Kethineni et al.</td>
<td>2004</td>
<td>Treatment program clients placed in the program from 1999 through 2002. MF. Age=8-18, M=13.6</td>
<td>100</td>
<td>clinical interview</td>
<td>0</td>
<td>USA</td>
</tr>
<tr>
<td>Edenborough et al.</td>
<td>2008</td>
<td>Recruited from rural NSW. Mothers report. MF. No age range.</td>
<td>185</td>
<td>Child-to-Mother Violence Scale</td>
<td>0</td>
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</tr>
<tr>
<td>Routt and Anderson</td>
<td>2011</td>
<td>Data collected and compiled in a yearly report by the Juvenile Prosecutor’s office (sample =339) and Step-Up staff’s interviews with youth and parents (Sample =268). MF. No age range given.</td>
<td>339 and 268</td>
<td>Prosecutor files and interview</td>
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<tr>
<td>Condry and Miles</td>
<td>2014</td>
<td>AVTP or criminal damage in the home reported to police April 2009-March 2010. MF. Age =13-19.</td>
<td>1892</td>
<td>Police Records</td>
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<tr>
<td>Purcell et al.</td>
<td>2014</td>
<td>Intervention Order (IO) applications over 3 years. MF. Age =10-18</td>
<td>438</td>
<td>Court records</td>
<td>0</td>
<td>Australia</td>
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<tr>
<td>Browne, and Hamilton</td>
<td>1998</td>
<td>University Students; Males and Females (MF) Females outnumbered males more than 2:1; 344 of the 469 respondents were under 20 years of age</td>
<td>469</td>
<td>The Conflict Tactics Scale (CTS)</td>
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<td>UK</td>
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<tr>
<td>Author(s)</td>
<td>Year</td>
<td>Description</td>
<td>Methodology/Study Type</td>
<td>Country</td>
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<tr>
<td>Walsh and Krienert</td>
<td>2007</td>
<td>2002 National Incident-Based Reporting System (NIBRS). MF. Age = up to 21 years. Most offenders between 14–17 (60%) years old</td>
<td>NIBRS</td>
<td>USA</td>
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<tr>
<td>Ghanizadeh and Jafari</td>
<td>2010</td>
<td>Children with ADHD and parents referred to outpatient clinic. MF. Age range= 5-14 (males), 6-14 (females). [74]</td>
<td>Abused Parent Questionnaire (APQ)</td>
<td>Iran</td>
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<tr>
<td>Ibabe, and Jaureguizar</td>
<td>2010</td>
<td>Files from the office of the Public Prosecutor for Juveniles.MF (85% males). Age: 12-18 years old.</td>
<td>Public Prosecution files</td>
<td>Spain</td>
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<tr>
<td>Ibabe, et al. (a)</td>
<td>2013</td>
<td>School children. MF. Age =12-18, M=15. [485]</td>
<td>Intra-family Violence Scale Violent Behavior toward Authority Figures Scale Case files</td>
<td>Spain</td>
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<tr>
<td>Ibabe, et al. (b)</td>
<td>2013</td>
<td>School children. MF. Age = 12-16, M=14.7. [687]</td>
<td></td>
<td>Spain</td>
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<tr>
<td>Nowakowski and Mattern</td>
<td>2014</td>
<td>Juvenile violent offenders referred to Family Violence Intervention Program. MF. Age =10-19, M=15.7. [212]</td>
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<td>USA</td>
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<tr>
<td>Lyons et al.</td>
<td>2015</td>
<td>University Students. MF (75.8% females). Vast majority (92.3 %) aged 18–24 years. [365]</td>
<td>CTS</td>
<td>Canada</td>
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<tr>
<td>Ibabe, and Bentler</td>
<td>2016</td>
<td>School children. MF. Age=12-18, M=14.76 [585]</td>
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<td>Brezina</td>
<td>1999</td>
<td>First and second waves of the Youth in Transition (YIT) Survey. Male school children, modal age 15’ [2,213]</td>
<td>Study designed questions</td>
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<tr>
<td>Study Title</td>
<td>Year</td>
<td>Study Design</td>
<td>Participants</td>
<td>Sample Characteristics</td>
<td>Data Source</td>
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<tr>
<td>Pagani et al.</td>
<td>2003</td>
<td>Study was within the context of a larger longitudinal study of 6397 kindergarten children. MF. Assessed at age 15/16.</td>
<td>778 Mongolia</td>
<td>2 Canada</td>
<td>Aggression-Toward-Mothers.</td>
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<tr>
<td>Pagani et al.</td>
<td>2009</td>
<td>See Pagani &amp; Tremblay (2003)</td>
<td>774 Father/younger brother</td>
<td>2 Canada</td>
<td>Aggression Towards Fathers</td>
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<tr>
<td>Calvete, et al.</td>
<td>2013</td>
<td>School children. MF, Age= 13 - 17</td>
<td>1,371 Community longitudinal study sample. MF. Age = 6 and 12 years of age at the first interview (M = 9.2 years) and average 14.7 years old at Time 2 and 16.4 years old at Time 3.</td>
<td>2 Spain</td>
<td>CTS</td>
<td></td>
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<tr>
<td>Margolin, and Baucom</td>
<td>2014</td>
<td>Community sample. Age =9-10.</td>
<td>93 Adolescents’ Parent-Directed Aggression CPAQ</td>
<td>2 USA</td>
<td>Adolescents’ Parent-Directed Aggression CPAQ</td>
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<td>Bartle-Haring, et al.</td>
<td>2015</td>
<td>Homeless shelter youth and families. MF. Age =12-17, M=15.4</td>
<td>179 CTS</td>
<td>2 USA</td>
<td>CTS</td>
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<tr>
<td>Calvete, et al. (a)</td>
<td>2015</td>
<td>School children. MF. Age =13-17, M =15.22</td>
<td>981 CPAQ</td>
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<td>CPAQ</td>
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<td>Calvete, et al. (b)</td>
<td>2015</td>
<td>School children and their parents. MF. Age =12-17, M=14.17</td>
<td>1100 CPAQ</td>
<td>2 Spain</td>
<td>CPAQ</td>
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<tr>
<td>Nock and Kazdin</td>
<td>2002</td>
<td>Clinical Sample- Youths referred for outpatient therapy. MF, Age: 2-14, M=8.3</td>
<td>606 Parent-Directed Aggression Inventory.</td>
<td>3 USA</td>
<td>Parent-Directed Aggression Inventory.</td>
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<tr>
<td>Gebo</td>
<td>2007</td>
<td>Compared Juvenile court records for all juvenile detainees between 2000–2001. MF. M=15</td>
<td>132 Court records</td>
<td>3 USA</td>
<td>Court records</td>
<td></td>
</tr>
<tr>
<td>Kennedy, et al.</td>
<td>2010</td>
<td>Individuals who were referred to the Juvenile Court Assessment Center (JCAC).</td>
<td>223 File records</td>
<td>3 USA</td>
<td>File records</td>
<td></td>
</tr>
</tbody>
</table>
The Australian experience of Adolescent Violence Towards Parents

<table>
<thead>
<tr>
<th>Study</th>
<th>Year</th>
<th>Methodology</th>
<th>Sample Description</th>
<th>Results</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contreras and Cano (b)</td>
<td>2014</td>
<td>Compared Offending and non-offending adolescents. MF (males outweigh females 2:1). Age: M=16.3</td>
<td>90 Criminal records</td>
<td></td>
<td>Spain</td>
</tr>
<tr>
<td>Contreras and Cano (a)</td>
<td>2014</td>
<td>Legal files from 2001 to 2010, 568 males and 86 females, M =15.87</td>
<td>654 Judicial files</td>
<td></td>
<td>Spain</td>
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<tr>
<td>Ibabe, et al.</td>
<td>2014</td>
<td>Compared Young offenders and school children. MF. Age =14-18, M=16.46</td>
<td>231 Intra-family violence questionnaire</td>
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</tr>
<tr>
<td>Contreras and Cano</td>
<td>2015</td>
<td>See Contreras and Cano (2014) (a)</td>
<td>90 Criminal records</td>
<td></td>
<td>Spain</td>
</tr>
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<td>Contreras and Cano</td>
<td>2016</td>
<td>Compared Offending and non-offending adolescents. MF (Males outnumbered females 2:1). Age M= 16.3</td>
<td>60 Criminal records</td>
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<td>Spain</td>
</tr>
<tr>
<td>Kuay, et al.</td>
<td>2016</td>
<td>Audit of case notes of young people who had been referred child and adolescent mental health service between 2012 and 2013. MF (98% males). Age = 11-17, M=15.18</td>
<td>50 File records</td>
<td></td>
<td>UK</td>
</tr>
</tbody>
</table>
Results

Key characteristics of the studies

Of the 20 identified studies, most were conducted in the United States \((n=7)\) or in Spain \((n=9)\), with two studies conducted in Canada and one in the UK. Sample sizes ranged from 50 (Kuay et al., 2016) to 2,213 (Brezina, 1999) and most (75%) of the studies had been published in the last 6 years. A number of studies explored a large number of variables as potential characteristics associated with AVTP; therefore, this review only considers the major characteristics identified \((Table 3.3)\). I note that Pagani et al., (2003, 2004, 2009) all reference the one data set, albeit conduct different analyses. Similarly, Contreras and Cano (2014(a), 2015) again use the same data, with different analyses.
The Australian experience of Adolescent Violence Towards Parents

Table 3.3: Characteristics of the offenders and victims of AVTP (N= not identified as characteristic, Y= identified as a characteristic).

<table>
<thead>
<tr>
<th>Author</th>
<th>Gender</th>
<th>Age</th>
<th>Race</th>
<th>Drug and alcohol Use</th>
<th>Violence in the home</th>
<th>Mental</th>
<th>Learning or academic difficulties</th>
<th>Anger</th>
<th>History of offending</th>
<th>Parent gender</th>
<th>Parent age</th>
<th>Parenting style and family relationship</th>
<th>Family structure</th>
<th>Parent substance disorder</th>
<th>SES</th>
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<tbody>
<tr>
<td>Brezina, (1999).</td>
<td>N</td>
<td>Y</td>
<td>N</td>
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<td>Calvete, et al. (2013).</td>
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<td>Calvete, et al. (2014).</td>
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<td>Calvete, et al. (2015)(a)</td>
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<td>Calvete, et al. (2015) (b)</td>
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<td>Contreras &amp; Cano (2014).</td>
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<td>Contreras, &amp; Cano (2016)(b).</td>
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<td>Gebo, (2007).</td>
<td>N</td>
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<td>Ibabe, et al. (2014).</td>
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<td>Kennedy et al. (2010).</td>
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<td>McCloskey &amp; Lichter (2003).</td>
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The findings of the studies were then grouped according to the different levels of the ecological model, starting with individual level factors through to the wider socio-demographic characteristics of both perpetrators and victims.

**Sociodemographic factors**

**Gender, age and race**

Fourteen of the studies described the gender of perpetrators of AVTP. Four studies (Calvete et al., 2015; Ibabe et al., 2014; Kuay et al., 2016; Nock & Kazdin, 2002) identified gender as a key characteristic, finding that males were more likely to perpetrate AVTP. Ten other studies, however, concluded that AVTP was a non-gendered phenomenon. Regarding the gender of the victim, two studies reported that being a female was characteristic of a victim of AVTP (McCloskey and Lichter, 2003 suggested approximately 70% of victims were female, and Contreras & Cano, 2014 found a female to be the victim in 90% of cases, either alone, with a male, or with other family members). In contrast, Kuay et al., (2016) found both parents were equally victimized.

No studies identified age as a key characteristic of AVTP perpetration, with Nock and Kazdin (2002) concluding that age was not be a significant factor. Only two studies considered the role of parent age, with Calvete et al., (2013) suggesting that the majority of victims (typically mothers) were aged in their forties and Brezina (1999) identifying no relationship with age. Three studies considered the role of race, with all of these finding that Caucasian young people were more likely to perpetrate AVTP than Hispanic or African American young people (Bartle-Haring et al., 2015; Gebo, 2007; Kennedy et al., 2010). It is noted that these findings are specific to the United States of America.
**Drugs and alcohol**

Six studies explored whether drug and alcohol use was a characteristic of AVTP perpetrators. Contreras and Cano (2015), for example, found higher levels of alcohol use (93.3%), marijuana use (93.3%) and cocaine use (13.3%) in AVTP offenders. Calvete et al., (2015) found that substance use was a predictor of AVTP, mainly in boys, and Pagani et al., (2004) determined that the risk of AVTP increased by 60% when young people engaged in frequent substance use. In contrast, two studies did not support drug and alcohol as a characteristic of AVTP perpetration. Bartle-Haring et al. (2015) found alcohol and drug use did not predict AVTP and Ibabe et al., (2014) concluded that substance use was a factor for general offending and not more (or less) likely in AVTP offenders compared to other offenders.

**Anger, aggression and hostility**

Five studies determined that anger, aggression or hostility is characteristic of AVTP perpetration. Contreras and Cano (2016) determined a gender difference here, with anger the strongest predictor for AVTP in girls, and hostile attribution the strongest predictor in boys. McCloskey and Lichter (2003) determined that AVTP was part of greater pattern of interpersonal hostility, and Calvete, et al., (2014) and McCloskey and Lichter (2003) both reported that higher rates of general aggressiveness and interpersonal hostility were associated with AVTP. According to Pagani et al., (2003) aggression was an early predictor of AVTP, with aggressive behavior at age six predicting later AVTP.
Mental Illness

Eight studies identified mental illness as a characteristic of young people who perpetrate AVTP. The significance of this varied significantly, however. For example, some studies reported that only 6% of AVTP offenders had a mental illness (e.g., Nowakowski & Mattern, 2014), whereas others estimated rates of 39% to 48% of AVTP offenders (e.g., Gebo, 2007). Kennedy et al., (2010) found a significant proportion of AVTP offenders (20%) had been hospitalized for psychiatric concerns, 29% had been prescribed medication for psychiatric or psychological reasons and 10.9% had attempted suicide. Ghanizadeh and Jafari (2010) found that at least 50% of young people with ADHD had been violent towards a parent and Contreras and Cano (2015) determined it was the most common clinical diagnoses for AVTP offenders. Two level 2 studies (Bartle-Haring, 2015; McCloskey & Litcher, 2003) concluded that depression and change in depression levels was not a characteristic of AVTP offenders.

Other offending

Two studies explored whether other offending was a characteristic of AVTP offenders. Gebo (2007) found 56% of AVTP offenders had other offending charges, and Kennedy et al., (2010) found that an offending history was similar between general offenders and AVTP offenders in terms of the number of previous offences, but different in relation to the kind of charges (with AVTP offenders having significantly more violent offences, and significantly fewer property offences).

Microsystem

Child maltreatment and family violence

Eight studies found that history of child maltreatment and family violence was a key characteristic of perpetrators of AVTP, with estimates that between 50 and
75% of young people who perpetrated AVTP had witnessed or experienced violence in the home (Contreas & Cano, 2014; Kennedy et al., 2010). Calvete et al., (2015) also concluded that being victimized by their parents, witnessing domestic violence or seeing sibling violence increased the likelihood of AVTP, however this effect was stronger with boys. Three studies found that reciprocal violence within the parent-child relationship was characteristic of AVTP (Brezina et al., 2015; Kennedy et al., 2010; Margolin & Baucom, 2014), with Brezina et al., reporting that although parental physical aggression was likely to lead to AVTP, AVTP was unlikely to deter aggression from parents. Only one study (Bartle-Haring et al., 2015) found no evidence of reciprocity of physical violence.

**School behavior and learning difficulties**

Three studies found that schooling difficulty was a characteristic of young people who perpetrated AVTP. Gebo (2007) reported, for example, that 59% of AVTP offenders had a learning disability. Ibabe et al., (2014) also found significantly higher levels of school maladjustment, classroom disruptive behaviors and learning difficulties in AVTP offenders. Kennedy et al., (2010), however, found no significant differences between intelligence, academic performance and academic achievement in AVTP offenders, and non-offenders.

**Parenting style and family relationships**

Seven studies explored whether parenting style and family relationships was characteristic of families who were victims of AVTP, although conflicting results were reported. For example, one of the studies identified a permissive parenting style (Contreras & Cano, 2014a) whereas another found an aggressive power-assertive style (Pagani & Tremblay, 2004) was characteristic of parents who experience AVTP. Another study identified no role for parenting style (Contreras & Cano,
Five studies reported that negative family relationships were characteristic of families who had experienced AVTP; Pagani et al., (2003), Kennedy et al., (2010) and Nock and Kazdin (2002) all determined that positive family relationships (cohesion, low conflict, and organization) predicted pro-social behaviors and minimized AVTP. Pagani and Tremblay (2004) and Pagani et al., (2009) also concluded that the less involved parents were and the less supervision they gave adolescents, the higher the rate of AVTP (with this impact more significant for mothers than fathers). Contreras and Cano (2014b) also determined that AVTP offenders report poor communication with their mothers and perceived more criticism and rejection from their fathers. Finally, Calvete et al.,’s (2015) study reported that parental warmth, particularly in girls, increases connection; however, that it also increases narcissism in boys, which predicted AVTP in boys. They found that disconnection and rejection from parents predicted AVTP both in boys and in girls.

Family structure

Seven studies explored whether family structure was a characteristic of families who experience AVTP. Four of these concluded that single parent households, particularly when the mother is the parent, are the most vulnerable (Contreras & Cano, 2014; Gebo, 2007; Pagani et al., 2003). In contrast, Brezina (1999) and Pagani and Tremblay (2004) found no pattern in regard to family structure and AVTP. Nock and Kazdin (2002) and Kennedy et al., (2010) determined AVTP to be more common in two parent families. Contreras and Cano (2014b) found that AVTP offenders are most likely to be first born.
Mesosystem

Parental drug use

Two studies explored whether parent drug use was characteristic of victims of AVTP. Pagani and Tremblay (2004) determined approximately one in four families who had experienced AVTP had a parent who had a substance abuse problem or problematic drug use. They determined that that risk of AVTP increased substantially (70%) when there was problematic substance use by parents. However, problematic substance use by parents was not identified as a significant characteristic for violence towards fathers in the Pagani et al., (2009) study.

Exosystem

Very few studies considered whether there were exosystem characteristics of AVTP. Two explored socioeconomic status (SES), however, they reported conflicting findings. Brezina (1999) found that higher SES decreased the likelihood of AVTP, whereas Contreras and Cano (2014) found that higher SES families were significantly more likely to experience AVTP.

Discussion

This review of the published literature sought to investigate the characteristics of both AVTP perpetrators and victims, examining evidence from twenty studies using an ecological perspective. This is the first of its kind to systemically search this literature and only the most rigorously designed studies were included; although the initial search strategy yielded a large number of studies \((n=171)\) for full text review, one in five of these were qualitative and a further 22 were classified as correlational or descriptive (level 0 or 1). This means that almost a third of all published research in this area is explorative or small scale, which limits the capacity to produce conclusions that can be generalized (Williams, Tuffin, &
Niland, 2016). Interestingly eleven of the twenty included studies were authored by Calvete et al., Conteras and Cano et al., and Pagani et al., sometimes using the same sample. In addition, most of the research in this area, to date, has been conducted either in the USA or in Spain, meaning that the majority of participant data is bound within the legislative and reporting powers of these countries and thus vulnerable to cultural norms and biases. Nonetheless the selected studies clearly show that while there is evidence to support the identification of some key characteristics, there is inconsistent evidence about other important characteristics (such as gender).

In terms of the common characteristics of AVTP perpetrators, there appears to be some fairly robust evidence to suggest that perpetrators have high levels of hostility and anger, mental illness, drug and alcohol use and other offending. It appears that being Caucasian may be a characteristic, however this finding is limited to research conducted in the United States of America, and therefore not reflect a clear pattern in regards to race or ethnicity. Their victims typically report poor family relationships and having previously experienced violence in the home. This suggests that AVTP offenders and their families are a highly complex group, with high rates of comorbidity (mental health, trauma and drug and alcohol related).

The evidence remains divided regarding whether AVTP is a gendered phenomenon. This offers support for Calvete et al., (2015) conclusion that more evidence is needed to determine if sex differences exist, and how this varies across age, race, SES and other factors. Some studies have suggested that age is a significant characteristic of AVTP (Ulman & Straus, 2003; Walsh & Krienert, 2009), however, this review did not support this. The challenge here is that some research reports age of onset, whereas others record the age of the report (which tends to reflect either a long-standing pattern of AVTP or a peak in severity). Although
previous correlational, descriptive and qualitative studies have concluded that the
victims are predominately mothers (with estimates as high as 80%), with the typical
age of victims of being 41-50 years of age (Kethineni, 2004; Nock & Kazdin, 2002;
Routt & Anderson, 2011; Walsh & Krienert, 2009), this study does not support this
conclusion.

Witnessing or being victim of violence within the home emerged as a strong
classified characteristic of families who experience AVTP. Brezina (1999) has hypothesized
that this behavior is perhaps a necessary and inevitable response by adolescents to
survive in settings of violence. Calvete et al., (2014) found this to be particularly the
case when the violence is perceived to result in a positive outcome (e.g., it solves a
problem). However, most studies (e.g., Boxer et al., 2009; Browne-Hamilton, 1988;
Contreas & Cano, 2014; Fawzi et al., 2013; Kennedy et al., 2010) found that
approximately 50% of AVTP perpetrators had been a witness or victim to violence in
the home, suggesting that child maltreatment and violence in the home is only part of
the story.

Whether or not a young person has a history of other offending is an
important consideration, as it shapes how the health and justice systems could or
should respond. More research of this topic is clearly required, particularly around
sentencing (Gebo, 2007). It has nonetheless been suggested that AVTP offenders
may be more violent than other non-AVTP offenders outside of the home, and that
AVTP therefore might be just part of a pattern of antisocial behaviour expressions
(Kennedy, 2010). Contreras and Cano (2016) connected this to broader aggression
and anti-sociality, finding that AVTP offenders lacked the emotional regulation to
express emotions in a socially appropriate way, leading to aggression as a way to
manage anger. Similarly, McCloskey and Lichter (2003) determined that this anger led to aggression towards not only parents, but also peers. It seems that when an adolescent learns that aggression can be used to manage anger, this may be rewarded by control over their emotions and also over their parents (see Calvete et al., 2014; 2015).

Similarly, this review identifies mental health as a characteristic that can increase the severity of AVTP (e.g., Kuay et al., 2016). Livingstone (1986) also found that substance abuse is related to family violence more broadly. There have been a number of hypothesized mechanisms regarding the association between substance use and AVTP, including when substance use disinhibits decision making and increases impulsivity, as well as the extent to which it is a common focus for disagreement between parents and children (Calvete et al., 2013). It may also be that parental substance use influences the consistency of parenting style, or that substance use may lead to harsher discipline by parents, leading to retaliatory aggression by the young person (Pagani & Tremblay, 2004).

AVTP occurs within the family, and often within the family home, therefore analysis of family variables is critical for prevention and intervention. It seems that adolescents who perpetrate AVTP have different family profiles from non-offenders (Contreas & Cano, 2014; Ibabe & Jaureguizar, 2010; Ibabe et al., 2009; Kennedy et al., 2010). This is particularly important in light of Contreas and Cano’s (2014) finding that almost a quarter of AVTP offenders have siblings who have also perpetrated AVTP. There is evidence that AVTP families are characterized by single parent homes (often with the mother as the primary caregiver), permissive or extreme parenting styles, and families where there have been conflictive, violent
relationships between family members (Calvet et al., 2015; Lyons et al., 2015; Ibabe & Bentler, 2016; Ibabe et al., 2013; Pagani et al., 2003).

In summary, the use of an ecological framework enables the classification and identification of characteristics that occur at multiple levels of the individual and the family’s social ecology that may be useful in the development of prevention and rehabilitation services. Consistent with ecological theory, the results of this study indicate that individual, family and broader community factors all interact with one another, rendering single variable explanations incomplete - with violence being mutually shaped and reinforced within the family system (Holt, 2016). At the same time, this review is limited by a lack of studies that have utilized multivariate analyses and does not distil the knowledge available from what is a significant body of qualitative research. The high level of variability that exists between studies, and inconsistencies in the range of variables considered (and how these are measured) also hinders the ability to arrive at firm conclusions. Nonetheless, it is important that contemporary practice and policy responses are based upon a good understanding of current knowledge. Condry and Miles (2014) have described AVTP as being fundamentally absent from policing, youth justice and domestic violence policy and under-researched and neglected in criminological discussions of family or youth violence.

From a research perspective, there is a need for more diverse worldwide research in regards to AVTP, with the majority of the research being from USA or Spain. There is a clear lack of consideration of AVTP within different racial and culturally and linguistically diverse communities and a lack of consideration of Aboriginal and Torrens Strait Islander communities. Future research should explore
The Australian experience of Adolescent Violence Towards Parents

the role of race and ethnicity to determine if this is a significant characteristic, and to explore the potential explanations or mechanisms that underlie this link. There is a lack of research which considers meso and exo system factors, suggesting that there is a need to develop a greater understanding of the impacts of the broader community, and social political factors that impact on AVTP occurring in families to determine from a societal and community perspective what can and should be done to reduce AVTP. From a practice perspective, it is clear that the needs of AVTP offenders and their families are complex and any intervention needs to address a range of different factors at the individual and systemic levels. At present, there are simply no evidence based interventions for changing AVTP (Fellmeth et al., 2013; Moulds et al., 2016).
**Publication:** Factors that influence prevalence of Adolescent Violence towards Parents: A Rapid Evidence Assessment.

**AUTHORSHIP STATEMENT**

1. **Details of publication and executive author**

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<th>Publication details</th>
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<td>Factors that influence prevalence of Adolescent Violence towards Parents: A Rapid Evidence Assessment</td>
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</tr>
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<tr>
<th>Name of executive author</th>
<th>School/Institute/Division if based at Deakin; Organisation and address if non-Deakin</th>
<th>Email or phone</th>
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<tr>
<td>Lauren Grace Moulds</td>
<td>School of Psychology Faculty of Health, Deakin University</td>
<td><a href="mailto:lgmoulds@deakin.edu.au">lgmoulds@deakin.edu.au</a></td>
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3. **HDR thesis author’s declaration**

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<td>An investigation of the Australian experience of Adolescent violence towards parents and the potential links with youth justice</td>
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</tbody>
</table>

If there are multiple authors, give a full description of HDR thesis author’s contribution to the publication (for example, how much did you contribute to the conception of the project, the design of methodology or experimental protocol, data collection, analysis, drafting the manuscript, revising it critically for important intellectual content, etc.)

Conceptualisation of the project, conducted the rapid evidence assessment, tabulated and interpreted the findings, completed the overview, and drafted the manuscript

*I declare that the above is an accurate description of my contribution to this paper, and the contributions of other authors are as described below.*

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4. **Description of all author contributions**

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<th>Contribution(s) (for example, conception of the project, design of methodology or experimental protocol, data collection, analysis, drafting the manuscript, revising it)</th>
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<td>Name</td>
<td>Contribution</td>
</tr>
<tr>
<td>-------------------------------------------</td>
<td>------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Professor Andrew Day, then Deakin University, now, James Cook University</td>
<td>Assistance with conceptualisation of manuscript, provided critical feedback on manuscript</td>
</tr>
<tr>
<td>Dr Helen Mildred, Deakin University</td>
<td>provided critical feedback on manuscript</td>
</tr>
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</table>
5. Author Declarations

I agree to be named as one of the authors of this work, and confirm:

xi. that I have met the authorship criteria set out in the Deakin University Research Conduct Policy,

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<th>Signature*</th>
<th>Date</th>
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<td></td>
<td>21/08/2018</td>
</tr>
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<td>Dr Helen Mildred</td>
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<td>21/8/18</td>
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6. Other contributor declarations

I agree to be named as a non-author contributor to this work.

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<th>Name and affiliation of contributor</th>
<th>Contribution</th>
<th>Signature* and date</th>
</tr>
</thead>
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* If an author or contributor is unavailable or otherwise unable to sign the statement of authorship, the Head of Academic Unit may sign on their behalf, noting the reason for their unavailability, provided there is no evidence to suggest that the person would object to being named as author.

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Abstract

Adolescent Violence towards Parents (AVTP) is a unique form of family violence which challenges family roles and relationships, defying the parent-child relationship. AVTP is a common phenomenon, but one which is poorly reported and recognised, clinically and in the community. There is a need for clear prevalence rates to help conceptualise an estimate of the size of the problem, and to begin to educate and normalise AVTP within the community. The current study conducts a Rapid Evidence Assessment on 26 international peer reviewed papers regarding prevalence of AVTP and the factors that influence this. The review determined that the estimated prevalence of AVTP is likely to vary quite markedly as a function of characteristics of the study design, particularly in clinical and forensic populations. It concluded that approximately one in 10 families in the community experience AVTP, with this figure rising to one in four in clinical or forensic settings.

Introduction

Adolescent Violence towards Parents (AVTP), defined by Cottrell (2001) as “…any act of a child that is intended to cause physical, psychological or financial damage to gain power and control over a parent” (p. 3), is a form of family violence that challenges the traditional roles and power dynamics that organise traditional family relationships. Thought to be relatively common, AVTP is increasingly identified as a key concern for those in the health, welfare, family violence, and juvenile justice sectors. At the same time AVTP remains poorly reported and recognised, both in service settings and in the wider community (Barnett et al, 2011; Walsh & Krienert, 2007; Moulds et al., 2016) with the family violence sector focusing largely on responding to child abuse and intimate partner violence. It has been suggested that low reporting may in part, be due to the perception that AVTP
leads to injuries that are less serious and the impacts on relationships are only temporary (Gallagher, 2004).

Moulds and Day (2017), in a recent review of the published international literature, concluded that AVTP offenders and their families can be characterised as a highly complex group which experiences high rates of trauma and comorbid mental health concerns and drug and alcohol problems. In particularly they identified previous trauma and maltreatment (for both offenders and victims) as important antecedents to AVTP, suggesting that many adolescent offenders are also victims – producing a shared, cyclonic aspect to victimisation. Moulds and Day however also noted differences in the published literature around the gender of perpetrators and that prevalence estimates vary markedly across studies. This, they suggested, may result from inconsistent definitions (with no single nationally or internationally agreed approach and some studies avoiding defining the phenomenon at all). They argued that the language used to define AVTP is likely to have significant implications for how research is conducted, the resulting findings about prevalence, and how these findings influence approaches to intervention (see also Coogan, 2014; Holt, 2012).

It is well known that the large majority of incidents of violence are not reported (Rose, Ziersch, & Migliore, 2014). In particular, parental blame has been identified as a significant barrier to parents reporting AVTP (as they often feel responsible for their child’s behaviour, even when it’s to their own detriment; see Barnett et al., 2011; Gallagher, 2008; Walsh & Krienert, 2007). This lack of acknowledgement can mean that parents minimise the abuse, and make excuses; only seeking support at crisis point (State of Victoria, 2016). The response or lack of response, from the justice system may further complicate matters, as it has been
suggested that this can serve to encourage the adolescent to believe that he or she is not responsible and that there will be no serious consequences (Routt & Anderson, 2011). In essence, the fact that the perpetrator is a child and the victim an adult is thought to complicate the response, particularly around the suitable justice system response, appropriate placement and who is responsible (Barnett et al., 2011). As a consequence, statistics on AVTP are generally thought to significantly underestimate the societal experience (Barnett et al., 2011). Prevalence data however, are important to the development of appropriate service responses. This study aims to systematically review current knowledge about the likely prevalence of AVTP and those factors that influence reported prevalence rates. More specifically, it aims to address two key questions: What is known about the prevalence of AVTP? and what are the factors that influence prevalence estimates?

Method

Rapid Evidence Assessments (REA) use systematic review methods to gather evidence and critically appraise existing research thereby producing a thorough and robust synthesis of the evidence to inform policy or practice (The National Foundation for Educational Research in England and Wales, 2016). The REA approach was chosen to streamline the typical systematic review process, while retaining the rigor of search and selection processes, to answer questions about what is known in relation to the prevalence of ATVP.

Searches were conducted using the Preferred Reporting Items for Systematic reviews and Meta-Analyses guidelines (PRISMA; Moher, Shcitz, Altman & Group, 2001). They focused on identifying peer-reviewed studies that reported English language quantitative data regarding prevalence; qualitative analyses, case studies and unpublished dissertations were thus excluded. Key words included variations of
terms to refer to age/developmental stage (e.g., Juvenile or Adolescent or Child or Young People), terms to refer to aggression (e.g., Aggression or Violence or Conflict or Abuse or Parricide or Family Violence or Perpetrate) and those relating to the victim (e.g., Parent or Mother or Father or Stepparent). The databases searched were PsycInfo, MedLine, Embase, SOCI Index, CINAHL Complete, Informit and Scopus, with searches limited to articles published in the last 20 years (i.e., between 1996 and 2016). All of the searches were conducted between the 29th and 31st of May 2016.

The reference lists of all relevant articles were then searched via Scopus to identify additional relevant studies. Scopus is the largest abstract and citation database of research literature and quality web sources; it allows the researchers to identify what other studies have cited particular studies and to utilise the reference list of searched studies to identify additional sources. Next, the identified studies were screened with regard to the eligibility criteria. Excluded studies were non-English, non-empirical, and concerned with adolescent violence towards carers, siblings and other family members (violence toward other family members is considered a similar, but distinctive, phenomenon with additional complexities and determinants). Studies concerning parricide were subsequently excluded in response to the significant differences that became evident between this literature and AVTP. Studies which did not report a prevalence rate of AVTP, or which considered severity, or frequency of AVTP within a group of known AVTP offenders were excluded. A flow diagram of the search results is displayed in Figure 3.2. The initial search yielded 6,406 hits, with 482 records identified through other sources. After screening titles and abstracts, 171 papers were considered potentially relevant and full-text articles were then accessed. Of these, 145 were subsequently excluded due to not meeting the inclusion criteria, leaving 23 papers that met the study criteria.
The Australian experience of Adolescent Violence Towards Parents

Figure 3.2: Flow diagram of search result
Results

Of the 23 studies selected for inclusion in the REA, over half (n=17) were completed in the last 10 years, suggesting that research interest in AVTP is growing. See Table 3.4 for an outline of all of the studies that met the inclusion criteria and Table 3.5 for a summary of reported prevalence data. The key characteristics of these studies are then discussed.

**Table 3.4: Prevalence Study Features**

<table>
<thead>
<tr>
<th>Author</th>
<th>Year</th>
<th>Sample</th>
<th>Sample Size</th>
<th>Measure used of AVTP</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boxer, et al.</td>
<td>2009</td>
<td>Families at a non-profit, private community mental health agency.</td>
<td>232</td>
<td>The Conflict Tactics Scale (CTS) and Parent–Child CTS Study designed questions</td>
<td>USA</td>
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<td>Brezina</td>
<td>1999</td>
<td>First and second waves of the Youth in Transition (YIT) Survey.</td>
<td>2,213</td>
<td></td>
<td>USA</td>
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<td>Browne &amp; Hamilton</td>
<td>1998</td>
<td>University Students</td>
<td>469</td>
<td>CTS</td>
<td>UK</td>
</tr>
<tr>
<td>Calvete, et al.</td>
<td>2013</td>
<td>School children.</td>
<td>1,371</td>
<td>CTS</td>
<td>Spain</td>
</tr>
<tr>
<td>Calvete, et al.</td>
<td>2014</td>
<td>School children.</td>
<td>1,506</td>
<td>Child-to-Parent Aggression Questionnaire (CPAQ) CPAQ</td>
<td>Spain</td>
</tr>
<tr>
<td>Calvete, et al.</td>
<td>2015</td>
<td>School children.</td>
<td>981</td>
<td></td>
<td>Spain</td>
</tr>
<tr>
<td>Contreras &amp; Cano</td>
<td>2014</td>
<td>Legal files from 2001 to 2010</td>
<td>654</td>
<td>Number of offences of AVTP Child-to-Mother Violence Scale Youth Risk Behavior Survey</td>
<td>Spain</td>
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<tr>
<td>Edenborough et al.</td>
<td>2008</td>
<td>Recruited from rural NSW. Mothers report.</td>
<td>1,024</td>
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<td>Australia</td>
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<td>Elliott et al.</td>
<td>2011</td>
<td>2000 Youth at Risk Survey.</td>
<td>1,762</td>
<td></td>
<td>USA</td>
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<td>Fawzi et al.</td>
<td>2013</td>
<td>Psychiatric outpatient’s presenting with First episode psychosis.</td>
<td>150</td>
<td></td>
<td>Egypt</td>
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<td>Gebo</td>
<td>2007</td>
<td>Juvenile court records</td>
<td>132</td>
<td></td>
<td>USA</td>
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<tr>
<td>Study</td>
<td>Year</td>
<td>Participants</td>
<td>N</td>
<td>Measure</td>
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<tr>
<td>Ghanizadeh &amp; Jafari</td>
<td>2010</td>
<td>Children with ADHD and parents referred to outpatient clinic.</td>
<td>74</td>
<td>Abused Parent Questionnaire (APQ)</td>
<td>Iran</td>
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<td>Ibabe &amp; Bentler</td>
<td>2016</td>
<td>School children.</td>
<td>585</td>
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<td>Spain</td>
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<tr>
<td>Ibabe, et al.</td>
<td>2013</td>
<td>School children.</td>
<td>687</td>
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<td>Jaureguizar, et al.`</td>
<td>2013</td>
<td>Spanish students</td>
<td>687</td>
<td>Spain</td>
<td></td>
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<td>Kang &amp; Lynch</td>
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<td>Incidents of family physical abuse that involved victims 18 years or older.</td>
<td>3,662</td>
<td>Number of offences of AVTP</td>
<td>USA</td>
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<tr>
<td>Kennedy, et al.</td>
<td>2010</td>
<td>Individuals who were referred to the Juvenile Court Assessment Center (JCAC).</td>
<td>223</td>
<td>USA</td>
<td></td>
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<tr>
<td>Kuay, et al.</td>
<td>2016</td>
<td>Audit of case notes of young people who had been referred child and adolescent mental health service between 2012 and 2013.</td>
<td>57</td>
<td>Number of offences of AVTP</td>
<td>UK</td>
</tr>
<tr>
<td>Laurent &amp; Derry</td>
<td>1999</td>
<td>Inpatients hospitalized in our child and adolescent psychiatry department. MF, Age: 10-14, M=14</td>
<td>645</td>
<td>France</td>
<td></td>
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<td>McCloskey &amp; Lichter</td>
<td>2003</td>
<td>Community longitudinal study sample. MF. Age = 6 and 12 years of age at the first interview (M = 9.2 years) and were on average 14.7 years old at Time 2 and 16.4 years old at Time 3. Clinical Sample-Youths referred for outpatient therapy. MF, Age: 2-14, M=8.3</td>
<td>363</td>
<td>USA</td>
<td></td>
</tr>
<tr>
<td>Nock &amp; Kazdin</td>
<td>2002</td>
<td></td>
<td>606</td>
<td>USA</td>
<td></td>
</tr>
</tbody>
</table>

AVTP: Adolescent Violence Towards Parents
Pagani et al. 2003  Study was within the context of a larger longitudinal study of 6397 kindergarten children. MF. Assessed at age 15/16. See Pagani & Tremblay (2003)  778  Number of offences of AVTP Towards Mothers.  

## Table 3.5: Reported Prevalence of AVTP

<table>
<thead>
<tr>
<th>Study</th>
<th>Operationalisation of AVTP</th>
<th>Gender</th>
<th>Age range</th>
<th>Population</th>
<th>Sample Size</th>
<th>% AVTP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boxer, et al. (2009).</td>
<td>Adolescents’ Physical Aggression Toward Parents</td>
<td>Males and Females (MF)</td>
<td>11-18</td>
<td>Clinical</td>
<td>232</td>
<td>7.4% boys 49.1% girls</td>
</tr>
<tr>
<td>Brezina (1999).</td>
<td>Child to Parent violence</td>
<td>Males</td>
<td>Mode Age: 15</td>
<td>Community</td>
<td>2,213 (time 1(T1)), 1886 (time 2(T2))</td>
<td>11% T1 and 7% T2</td>
</tr>
<tr>
<td>Browne &amp; Hamilton (1998).</td>
<td>Violence Towards Parents</td>
<td>MF</td>
<td>75% under &lt;20 years of age</td>
<td>Community</td>
<td>469</td>
<td>14.5% (3.8% severely violent)</td>
</tr>
<tr>
<td>Calvete, et al. (2014).</td>
<td>Aggression enacted by children against their parents</td>
<td>MF</td>
<td>13-17</td>
<td>Community</td>
<td>1,272</td>
<td>1.3 and 7.9 % at T1 and T2 for girls and 9.8 and 8.9 % at T1 and T2 for boys</td>
</tr>
<tr>
<td>Calvete, et al. (2013).</td>
<td>Child-to-parent violence, Cottrell (2001) definition</td>
<td>MF</td>
<td>13-17</td>
<td>Community</td>
<td>1,072</td>
<td>4.6% (T1) 4.9% (T2)</td>
</tr>
<tr>
<td>Calvete, et al. (2015)</td>
<td>Child-to-parent violence, Cottrell (2001) definition</td>
<td>MF</td>
<td>14-17</td>
<td>Community</td>
<td>1,100</td>
<td>7.3%, 8.5%, 7.8% (adolescent reports), and 11.2%, 13.8%, 12.1% (parent reports) at T1, T2, and T3.</td>
</tr>
<tr>
<td>Contreras &amp; Cano (2014).</td>
<td>Adolescents Who Assault Their Parents; Cottrell (2001) definition</td>
<td>MF</td>
<td>Mean: 15.87</td>
<td>Community</td>
<td>654</td>
<td>7.34%</td>
</tr>
<tr>
<td>Elliott, et al. (2011).</td>
<td>Adolescent Violence Within the Family</td>
<td>MF</td>
<td>11-18</td>
<td>Community</td>
<td>1762</td>
<td>11.4%</td>
</tr>
<tr>
<td>Fawzi, et al. (2013).</td>
<td>Parent Abuse by Adolescents</td>
<td>MF</td>
<td>13-19</td>
<td>Clinical</td>
<td>150</td>
<td>40.10%</td>
</tr>
<tr>
<td>Gebo, (2007).</td>
<td>Child to parent violence</td>
<td>MF</td>
<td>Mean:</td>
<td>Forensic</td>
<td>132</td>
<td>54.54%</td>
</tr>
<tr>
<td>Study</td>
<td>Type of Violence</td>
<td>Age Range</td>
<td>Setting</td>
<td>Sample Size</td>
<td>Gender Distribution</td>
<td></td>
</tr>
<tr>
<td>-------------------------------</td>
<td>----------------------------------------------------------------------------------</td>
<td>-----------</td>
<td>---------------</td>
<td>-------------</td>
<td>---------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Ghanizadeh &amp; Jafari (2010)</td>
<td>Abuse of parents by their children</td>
<td>5-14</td>
<td>Clinical</td>
<td>74</td>
<td>Boys 31.7-50.8%, Girls 9.1-45.5%</td>
<td></td>
</tr>
<tr>
<td>Ibabe, et al. (2013)</td>
<td>Adolescent Violence against Authority</td>
<td>12-16</td>
<td>Community</td>
<td>687</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>Kang &amp; Lynch (2014)</td>
<td>Child to parent violence</td>
<td>&lt;12 – 30</td>
<td>Community</td>
<td>3,662</td>
<td>8%</td>
<td></td>
</tr>
<tr>
<td>Kennedy, et al. (2010)</td>
<td>Child to Parent Violence</td>
<td>10-18</td>
<td>Forensic</td>
<td>223</td>
<td>44.84%</td>
<td></td>
</tr>
<tr>
<td>Laurent &amp; Derry (1999)</td>
<td>Violence perpetrated by children against their parents</td>
<td>10-14</td>
<td>Clinical</td>
<td>645</td>
<td>3.41%</td>
<td></td>
</tr>
<tr>
<td>McCloskey &amp; Lichter (2003)</td>
<td>Adolescent Aggression Across Different Relationships</td>
<td>6-12</td>
<td>Community</td>
<td>363</td>
<td>12.6% from violent homes, 13.6% non-violent homes</td>
<td></td>
</tr>
<tr>
<td>Pagani, et al. (2003)</td>
<td>Aggression toward mothers</td>
<td>Tested at 15</td>
<td>Community</td>
<td>778</td>
<td>13.5% (Boys) /13.7% (girls)</td>
<td></td>
</tr>
<tr>
<td>Pagani, et al. (2009)</td>
<td>Aggression towards fathers</td>
<td>Tested at 15</td>
<td>Community</td>
<td>774</td>
<td>12.3% boys, 9.5% Girls</td>
<td></td>
</tr>
</tbody>
</table>
Sample Size

The sample size of selected studies ranged from \( n=57 \) to \( n=3662 \), with a mean of 835.7 participants. The smallest sample reported the highest prevalence, with 83.72\% of the forensic sample and 64.29\% of the clinical sample reporting AVTP (Kuay et al., 2016). The largest study, reported by Kang and Lynch (2014), investigated incidents of family physical abuse and the number of recorded offences, and concluded that 8\% of all cases involving adolescent family violence were AVTP (although this sample did include perpetrators between 12 to 30 years of age). The general pattern suggested that sample size and prevalence were negatively correlated; when sample size of studies increased, the reported prevalence of AVTP decreased (Figure 3.3). This seems to reflect the importance of gaining a representative sample of the general population, with studies involving small specific samples producing less generalisable findings. The main exception to this correlational trend across the studies is that of Edenborough et al., (2008) which reported that 50.9\% of 1,024 mothers in New South Wales, Australia reported experiencing AVTP.
Fifteen (65.22%) of the studies were conducted in the general community (e.g., schools), with the remaining eight being from clinical or forensic settings, all of which tended to be small samples. Studies involving community samples reported an average prevalence of 12.26%, with moderate variation between studies (range 4.6%–50.9%; SD = 12.26). Clinical and forensic studies on the other hand, reported an average prevalence of 41.83%, although significant variation existed between studies (range 3.41%–83.72%; SD = 24.15). This nonetheless suggests that AVTP is more prevalent in clinical and forensic populations.

Country

The majority (n=15) of the studies were conducted in either the United States of America (USA; n=8) or Spain (n=8), with only two published studies of AVTP conducted in Canada and the United Kingdom (UK), and one in each of Australia, Egypt, France, and Iran. Table 3.6 outlines the average reported prevalence by
country. It shows that those studies that were conducted in France and Egypt reported a lower prevalence of AVTP, whilst the one Australian study reported a considerably higher prevalence.

**Table 3.6: Country patterns of prevalence**

<table>
<thead>
<tr>
<th>Country</th>
<th>Average Percentage</th>
<th>Community/Clinical/Forensic</th>
<th>Number of studies</th>
</tr>
</thead>
<tbody>
<tr>
<td>USA</td>
<td>21.06%</td>
<td>4 studies Community, 4 Clinical/Forensic</td>
<td>8</td>
</tr>
<tr>
<td>Spain</td>
<td>8.5%</td>
<td>All Community</td>
<td>7</td>
</tr>
<tr>
<td>France</td>
<td>3.41%</td>
<td>Clinical/Forensic</td>
<td>1</td>
</tr>
<tr>
<td>Canada</td>
<td>12.25%</td>
<td>Community</td>
<td>2</td>
</tr>
<tr>
<td>Iran</td>
<td>34.27%</td>
<td>Clinical/Forensic</td>
<td>1</td>
</tr>
<tr>
<td>Egypt</td>
<td>40.10%</td>
<td>Clinical/Forensic</td>
<td>1</td>
</tr>
<tr>
<td>Australia</td>
<td>50.90%</td>
<td>Community</td>
<td>1</td>
</tr>
<tr>
<td>UK</td>
<td>54.17%</td>
<td>1 Community, 1 Clinical</td>
<td>2</td>
</tr>
</tbody>
</table>

**Gender and Age**

Similar prevalence patterns were evident in studies which recruited only males (e.g., Brezina, 1999), or both males and females (e.g., Jaureguizer et al., 2010). However, while Brezina’s study did have a substantial sample size, it was only one study, so it is difficult to provide a strong or conclusive comparison regarding gender. With regard to age, two studies reported data from samples with under 10 year olds (children rather than adolescents), with an average prevalence rate in this group of 12.8%. Four studies included people over the age of 18 (adults), with no notable, stable difference in prevalence between studies that included ‘older’ young people. The majority of studies involved samples aged between 10 and 18 years.
The Australian experience of Adolescent Violence Towards Parents

Measures of AVTP

Four studies (17.39%) utilised the Conflict Tactics Scale (CTS) and Parent–Child CTS developed by Straus and Colleges (1979). Studies that used the CTS had an average prevalence of 11.87%. Two studies were based on specifically designed questions; two utilised the Abused Parents Questionnaire (APQ, Ghanizadeh and Jafari, 2010), and two the Child to Parent Aggression Questionnaire (CPAQ; Calvete et al., 2014; 2015). The APQ studies produced an average prevalence of 36.35%, although these were both with clinical/forensic samples. The CPAQ studies reported an average prevalence of 8.78%. Studies that used official records of AVTP incidents reported an average prevalence rate of 28.62%. This suggests that official records produce higher estimates of AVTP than self-report; however, note that the highest prevalence rates used self/official report of AVTP in a forensic/clinical setting.

Operationalisation of AVTP

Seven of the studies (30.43%) utilised Cottrell’s (2001) definition of child to parent violence (AVTP). All but one of these utilised data from community populations. The average prevalence for these studies was 11.16%, a figure that is in line with average prevalence estimates in this review. All of the other studies used a variety of definitions and titles for AVTP (e.g., adolescent to parent violence, violence towards parents, parent abuse by adolescents, and aggression perpetrated by adolescents). Interestingly, Fawzi (2013) only classified an assault, whether physical or verbal, as AVTP if there was evidence that the act was: (1) deliberate; (2) aimed at causing physical, psychological, or financial harm to the parent; and (3) used as a form of control or gaining power over a parent or creating fear in a parent. With this classification, they found of 150 patients (82 male; 68 female) with first episode psychosis, 61 patients (40.7%) perpetrated abuse against their parents in a two-month period.
Discussion

This review of published AVTP studies sought to document the known prevalence of AVTP and understand those factors that influence prevalence rates. The body of available literature on this topic is relatively small, and the majority of the studies identified were conducted in two countries (the USA and Spain). Consequently, the data reported here largely reflects the legislative structures of these countries, including what is classified as assault, with reporting being vulnerable to cultural norms and biases. What emerged from this review are some observations that the estimated prevalence of AVTP is likely to vary quite markedly as a function of characteristics of the study design. For example, it appears that studies which recruit only small specific samples may overestimate the prevalence of AVTP or perhaps have a focused sample e.g. forensic or clinical populations which do not represent the broader community prevalence. Only 7 of the 23 studies included in this review had a large sample size (n> 1000) and, as sample size increased, reported prevalence decreased. Simply put, small samples, particularly those involving clinical and forensic populations, result in high levels of variability, increasing uncertainty about the reported estimates of AVTP in the general population. The majority of those studies which recruited large samples reported a prevalence rate of just below 10%.

The prevalence rates reported by studies conducted in clinical and forensic settings are substantially higher. This was expected, in light of research by Kennedy et al., (2010) who determined that 20% of AVTP offenders had been hospitalised for psychiatric concerns, and 10.9% had previously attempted suicide. Similarly, others have suggested that almost a third of AVTP offenders have a clinical diagnosis, most commonly ADHD (Ghanizadeh & Jafari, 2010; Contreras & Cano, 2015). Similarly, in forensic samples, AVTP may be part of a broader range of deviant, violent
The Australian experience of Adolescent Violence Towards Parents

behaviour. Gebo (2007), for example reported that approximately half of AVTP offenders had other charges. Kennedy et al., (2010), however, noted that whilst general offenders and AVTP offenders were similar in terms of the overall number of offences committed, they were different in regard to the kind of charges; with AVTP offenders having significantly more violent offences. Higher rates in clinical and forensic settings are perhaps unsurprising, as within these settings parents may be asked questions regarding a young person’s behaviour at home, and therefore invite reflection or sharing from the parent regarding the occurrence of violence. Clinical and forensic services are likely to help parents to name their experiences of the young person’s behaviour as violent. Moreover, within a clinical or forensic setting parent reports may be more commonly used, or more commonly prioritised. Often, parent and child reports regarding violence at home are incongruent. For example, Pagani et al., (2003) report that 40% of mothers and their children disagreed about AVTP, including its severity and occurrence. Within community based samples self-report, in particular adolescent reports may be more commonly used. Self-report can be vulnerable to perceptual and recall biases, and impression management (in particular social desirability) (Gallagher, 2004). Community samples are also likely to be more vulnerable to factors such as parental blame and shame, as well as social and cultural differences in what behaviours are considered to be AVTP.

Age, or whether only one, or both genders were included in the sample, made no significant difference to estimates of prevalence. This is in line with previous research which concludes that whilst a significant majority of victims are female, AVTP can be perpetrated by young people of either gender. Indeed in this specific area of offending it is posited that the age and gender of perpetrator is not a key
The Australian experience of Adolescent Violence Towards Parents

characteristic of AVTP (McCloskey & Lichter, 2003; Kennedy et al., 2010; Calvete et al., 2013; Bartle-Haring et al., 2015; Moulds & Day, 2017). There will more investigation of perpetrator characteristics within the papers outlined in Chapter 5.

Finally, it would appear that how AVTP is measured does not have a significant impact on reported prevalence. This is surprising as self-reports of violence are sometimes regarded as unreliable as they may simply reflect disagreement between family members, response bias, mood state, cultural and attributional biases, recall biases and social desirability (Gallagher, 2008). It is, therefore, noteworthy that prevalence estimates based on official records reported higher prevalence rates than self-report. However, there also seems to be a threshold issue in that given the barriers to reporting AVTP (e.g. parental shame), only high levels of AVTP would be reported (State of Victoria, 2016), meaning that for true prevalence studies people need to be asked rather than using data based on reports (e.g. police reports).

In summary, it appears that the sample size, and whether the sample is clinical or forensic, or community based are the two most influential factors determining the reported prevalence of AVTP. From this review, the definitions, measures, country, and age and gender of the offender are not factors that drastically alter prevalence estimates. Overall, it seems reasonable to conclude that approximately one in 10 families in the community experience AVTP, with this figure rising to one in four in clinical or forensic settings. This needs to be understood within the context of the data collection. For studies involving clinical or forensic populations, data is likely collected as part of assessment/intervention, and community studies are more likely driven by research objectives. Research participants are usually aware of the audience and wanting to produce socially acceptable or desirable responses (Gallagher, 2004). Often parents feel ashamed to admit that AVTP is impacting their
family, and therefore survey responses can reflect underestimates due to a common social-desirability response set (Gallagher, 2004).

This study is limited by a number of methodological factors. The various samples recruited, for example, make clear comparisons difficult. The high level of variability that exists between studies and inconsistencies in the range of variables considered (and how these are measured) also hinders the ability to aggregate findings across studies.

Having a broad understanding of the factors influencing prevalence of AVTP and an understanding of estimates of prevalence of AVTP helps to guide future research into establishing a more global understanding of the nature of the issue. Future research should consider if there are differences in the behaviour or nature of AVTP in forensic/clinical settings as opposed to community settings to lead to tailored and sophisticated responses to AVTP in each setting. It would appear important that prevalence rates obtained from clinical and forensic population are not generalised to the wider community, and vice versa, with some indication that mental health problems, offending and AVTP are linked. Large representative population based studies, using valid measures of AVTP, are needed to identify accurate prevalence rates of AVTP. AVTP appear to occur most frequently occurs in the context of clinical complexity. Whilst systemic, tailored intervention is needed in both the community and in clinical and forensic settings, from a legal, social and educational perspective, there is only limited data to guide the development of effective responses.
Chapter 4: ADIVA and AVTP

This chapter will describe the Alcohol/Drug-Involved Family Violence in Australia (ADIVA) project (Miller et al., 2016), which provided data for one of the studies of this thesis that was undertaken in order to address the aims of this thesis; in particular the questions: What is the Australian experience of AVTP in regard to characteristics and prevalence? and Does the Australian experience of AVTP mirror what is internationally known about AVTP? The second part of this chapter is a publication arising out of the ADIVA project data.

Background

The ADIVA project was funded for two years in 2014 by the National Drug Law Enforcement Research Fund (NDLERF). The project was particularly concerned with the role of alcohol and other drugs in family violence incidents to gain a better understanding of the potential link, and to help inform preventative and intervention efforts. The project aimed to provide an overview of family violence in Australia, with a focus on alcohol and other drug related violence. The project incorporates’ two sources of data: an Australia-wide ‘personal safety’ survey, focussing on alcohol and drug use; and retrospective offending studies of police gathered offence data over a five-year period (2009-2015), - the second of which was utilised for this thesis. Police data collected varied between states and territories, with data collected including a range of victim, perpetrator and incident characteristics of family violence offences. The police data collected was the standard recorded data by police in that jurisdiction who attended family violence incidents. It was therefore influenced by that State or Territory’s Police policies and procedures regarding data collection at the time of the study and vulnerable to individual error and judgement.
The original ADIVA data set included data from Australian Capital Territory (ACT), Northern Territory (NT), South Australia, Queensland and Victoria, New South Wales, Western Australia and Tasmania. Originally police data was collated with the key research questions; What are the major trends in family violence in relation to incidents attended by police, and what are the common factors across States and Territories?; What are the key predictors of repeat incidents attended by police? And what role do alcohol and other drugs play in breaches of family violence orders?.

The ADIVA project (Miller et al., 2016) found a strong link between alcohol and family violence, with heavy binge drinkers nearly more likely to be reported by their partners as having been violent towards them, and these alcohol related incidences of violence were more likely to be severe and involve physical violence. The study also found that while illicit drug use was not common, when illicit drugs were used, they were almost three times more likely to report recent violence, compared to non-users. The report highlighted high levels of coercive controlling behaviour and that this was closely linked to alcohol consumption. The ADIVA project findings suggest that young people are more likely to experience family violence (both as perpetrators and victims) and are at increased risk of alcohol fuelled violence.

**ADIVA and AVTP**

In 2016, the ADIVA team (Miller et al., 2016) were approached regarding accessing the police data set used in the ADIVA Project. This was requested as while the ADIVA project included data regarding adolescent perpetrators of family
violence, this was not the project’s primary focus or focus of analyses. The main aim of the analyses was to help develop a baseline understanding of key demographics of AVTP offenders using a large scale Australian data set. It was hoped that this would provide police and services with greater confidence and understanding to assist with appropriate, effective responding.

The NDLERF Board approved permission to access the data. Subsequently, state and territory police were approached for permission. Victoria, Queensland, Western Australia and the New South Wales Police granted permission to be included in the AVTP related analyses however South Australia, Northern Territory, Tasmania and ACT Police refused access for varying reasons (e.g. reporting small data set). It is important to note that data was requested, and subsequently utilised post data collection, meaning data collection could not be modified to suit the research questions of the study.

State Overviews

The ADIVA report demonstrates the complexities of defining violence with many different types of behaviour falling under the umbrella terms of family or domestic violence. Importantly, each state and territory has different protocols regarding what information is recorded, how that information is classified and how different offences are classified; meaning states cannot be compared directly. It is not possible within the scope of this thesis to outline each state’s protocol and policies regarding recording and responding to family and domestic violence, as well as all police protocols around attending incidents, risk assessments, recording of incident data etc. This is largely because the majority of this information is not publically accessible. In addition, these protocols do not account for necessary police flexibility
and informed decision making. However, the below is a brief overview of the four states included in the study and some of the context around family and domestic violence within these states.

**New South Wales**

For the ADIVA study, data was obtained from the New South Wales (NSW) Police database for the period 1 January 2009 to 31 December 2013. In 2010, a new NSW state government began a comprehensive review of domestic violence in NSW with a view to reducing domestic and family violence by reforming the state-wide response, leading to a number of government reviews and inquiries. Many of these reforms were implemented between 2013-2014. The NSW Police is currently bound by the Domestic and Family Violence Policy (published 17 August 2012). There is no information available regarding what policy was in place prior to August 2012. This policy is heavily influenced by the *Crimes (Domestic and Personal Violence) Act 2007* and defines family violence as:

> Domestic violence offence means a personal violence offence committed by a person against another person with whom the person who commits the offence has or has had a domestic relationship.

(Section 11, Crimes (Domestic and Personal Violence) Act 2007).

In regard to youth perpetrated family violence, young offenders involved in domestic and family violence may be dealt with under *the Young Offenders Act 1997* depending on the seriousness of the offence, the degree of violence and the harm caused to any victim. These considerations must be balanced against the NSW Police Force proactive stance on domestic violence and community expectations.
Queensland

Family violence data used in the ADIVA study were obtained from Queensland (QLD) police for the period 1 January 2010 to 1 December 2015. Currently the QLD police operate under the Domestic and Family Violence Protection Act, 2012 (DFVPA 2012), where domestic violence is defined as:

*Domestic violence is behaviour by a person towards another person in a relevant relationship that is physically or sexually abusive emotionally or psychologically abusive, economically abusive, threatening, coercive in any way controls or dominates the second person and causes that person to fear for their safety or wellbeing or that of someone else. (reference)*

There are no further detailed policies or procedures publically available regarding QLD Policing of family or domestic violence. In QLD young offenders involved in domestic and family violence may be dealt with under *Youth Justice Act 1992 (QLD).*

Western Australia

Data for the study were obtained from Western Australia (WA) Police for the period 1 January 2010 to 31 December 2014. In 2004, the Government of Western Australia issued its first strategic plan to tackle Domestic Violence, entitled "Family and Domestic Violence State Plan 2004- 2008". This plan formed the basis for domestic violence strategy. The WA legislation relating to family and domestic violence includes *Restraining Orders Act 1997* covering laws regarding restraining orders which can protect victims and the *Family Law* providing an overarching framework for practice in this area. Western Australia Police define family and domestic violence as:
Family and domestic violence is behaviour which results in physical, sexual and/or psychological damage, forced social isolation, economic deprivation, or behaviour which causes the victim(s) to live in fear.

A new reporting system was implemented in Western Australia in August 2013, allowing details such as alcohol consumption, AOD history, any financial issues, any mental health issues etc. to be recorded via their new system. Prior to August 2013, such information could only be captured in free text. Young offenders are managed under the Young Offenders Act 1994 (YOA).

Victoria

The ADIVA project requested data on family violence incidents attended by Victorian (VIC) police between 1 January 2009 and 31 December 2013. VIC Police responses and investigations of domestic and family violence are governed by the Code of Practice for the Investigation of Family Violence, which was launched in August 2004. Legislatively, they are bound by the Family Violence Protection Act 2008 (FVPA). The Act and the code of practice determine family violence is:

Family violence is any behaviour that in any way controls or dominates a family member and causes them to feel fear for their own, or other family member’s safety or well-being. It can include physical, sexual, psychological, emotional or economic abuse and any behaviour that causes a child to hear, witness, or otherwise be exposed to the effects of that behaviour. – FVPA

In regard to young offenders, the principal legislation for Victoria is The Children, Youth and Families Act 2005 (CYFA) for the youth justice service together with the
constitution for the Children's Court of Victoria, as a specialist court dealing with matters relating to children.

Data

The ADIVA Police Data was originally cleaned by the ADIVA team during initial data analyses. Raw offence-based data was converted to incident-based data whereby information specific to each incident (e.g. repeat victims, recidivist offenders) was aggregated into each incident record. Thus, each incident may contain a number of separate offences (e.g. assault, property damage) and multiple victims and/or perpetrators. For the following study, data was then recoded to allow for analyses on AVTP to be conducted.
**Publication**: Adolescent violence towards parents – prevalence and characteristics using Australian Police Data.

**Journal Impact**: 0.78

The following publication *Adolescent violence towards parents – prevalence and characteristics using Australian Police Data* outlines the rationale, method, and results of these analyses.

**AUTHORSHIP STATEMENT**

1. **Details of publication and executive author**

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<th>Publication details</th>
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<td>Published in Australian and New Zealand Journal of Criminology, June 2018, DOI: 10.1177/0004865818781206</td>
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<tr>
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<th>School/Institute/Division if based at Deakin; Organisation and address if non-Deakin</th>
<th>Email or phone</th>
</tr>
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<tbody>
<tr>
<td>Lauren Grace Moulds</td>
<td>School of Psychology Faculty of Health, Deakin University</td>
<td><a href="mailto:lgmoulds@deakin.edu.au">lgmoulds@deakin.edu.au</a></td>
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2. **Inclusion of publication in a thesis**

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3. **HDR thesis author's declaration**

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<th>Name of HDR thesis author if different from above. (If the same, write “as above”)</th>
<th>School/Institute/Division if based at Deakin</th>
<th>Thesis title</th>
</tr>
</thead>
<tbody>
<tr>
<td>As above</td>
<td>School of Psychology, Faculty of Health, Deakin University</td>
<td>An investigation of the Australian experience of Adolescent violence towards parents and the potential links with youth justice</td>
</tr>
</tbody>
</table>

   If there are multiple authors, give a full description of HDR thesis author’s contribution to the publication (for example, how much did you contribute to the conception of the project, the design of methodology or experimental protocol, data collection, analysis, drafting the manuscript, revising it critically for important intellectual content, etc.)

   Designed and conceptualised the study, conducted analyses, tabulated and interpreted findings, and drafted the manuscript
I declare that the above is an accurate description of my contribution to this paper, and the contributions of other authors are as described below.

**4. Description of all author contributions**

<table>
<thead>
<tr>
<th>Name and affiliation of author</th>
<th>Contribution(s) (for example, conception of the project, design of methodology or experimental protocol, data collection, analysis, drafting the manuscript, revising it critically for important intellectual content, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professor Andrew Day, then Deakin University, now, James Cook University</td>
<td>Assistance with conceptualisation of analyses, provided critical feedback on manuscript</td>
</tr>
<tr>
<td>Dr Richelle Mayshak, Deakin University</td>
<td>Involvement in initial ADIVA project (source of data), assistance with data analyses, and provided critical feedback on manuscript</td>
</tr>
<tr>
<td>Dr Helen Mildred, Deakin University</td>
<td>provided critical feedback on manuscript</td>
</tr>
<tr>
<td>Professor Peter Miller</td>
<td>Lead in initial ADIVA project (source of data), and provided critical feedback on manuscript</td>
</tr>
</tbody>
</table>
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I agree to be named as one of the authors of this work, and confirm:

xvi. that I have met the authorship criteria set out in the Deakin University Research Conduct Policy,

xvii. that there are no other authors according to these criteria,

xviii. that the description in Section 4 of my contribution(s) to this publication is accurate,

xix. that the data on which these findings are based are stored as set out in Section 7 below.

If this work is to form part of an HDR thesis as described in Sections 2 and 3, I further
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<table>
<thead>
<tr>
<th>Name of author</th>
<th>Signature*</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professor Andrew Day</td>
<td></td>
<td>21/08/2018</td>
</tr>
<tr>
<td>Dr Richelle Mayshak</td>
<td></td>
<td>21/08/2018</td>
</tr>
<tr>
<td>Dr Helen Mildred</td>
<td></td>
<td>21/08/2018</td>
</tr>
<tr>
<td>Professor Peter Miller</td>
<td></td>
<td>21/08/2018</td>
</tr>
</tbody>
</table>

6. Other contributor declarations
I agree to be named as a non-author contributor to this work.

<table>
<thead>
<tr>
<th>Name and affiliation of contributor</th>
<th>Contribution</th>
<th>Signature* and date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* If an author or contributor is unavailable or otherwise unable to sign the statement of authorship, the Head of Academic Unit may sign on their behalf, noting the reason...
for their unavailability, provided there is no evidence to suggest that the person would object to being named as author

7. Data storage

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<table>
<thead>
<tr>
<th>Data format</th>
<th>Storage Location</th>
<th>Date lodged</th>
<th>Name of custodian if other than the executive author</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADIVA Data</td>
<td>Deakin University</td>
<td></td>
<td>Professor Peter Miller</td>
</tr>
</tbody>
</table>

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Abstract

Adolescent violence toward parents is a unique form of family violence which for many, including police personnel, challenges traditional views of parent–child relationship, and raises questions about victimization. There has been minimal research in Australia to date in this area, and knowledge about both prevalence rates and the characteristics of offenders and victims remains limited. This exploratory study utilized police data from four Australian States to document prevalence rates of reported offenses to police, and the characteristics of adolescent violence toward parents in Australia. Between 1% and 7% of family violence reported to the police is adolescent violence toward parents. The “typical” perpetrator is a 15- to 17-year-old Caucasian young man who is generally violent toward his mother. Findings are limited by the differing police practice and policy variations between States, including the use of police discretion, leaving several questions open for further investigation. In conclusion, there is a need for change in policy and practice with regards how best to assess and respond to adolescent violence toward parents.

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Keywords

Adolescents, family, family violence, parents, police, violence

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Introduction

For the past 30 years, police policy and practice in relation to family violence have developed significantly, with an array of measures now commonly implemented to improve the safety of women and children (Miles & Condry, 2016). Adolescent Violence Toward Parents (AVTP) is most commonly defined by Cottrell (2001) as “...any act of a child that is intended to cause physical, psychological or financial damage to gain power and control over a parent” (p. 3). It challenges our commonly held ideals around power dynamics between parents and children, and this relationship being one of safety and care. AVTP is a specific form of family violence which often creates a dilemma for criminal justice professionals; as the youth court often aims to find a balance between a justice and welfare response (Holt, 2016). This is complicated by multifaceted elements of victimization, with often experiences of being victim of family violence, common for both the victim and the perpetrator (Moulds & Day, 2017; Routt & Anderson, 2011). The Australian Institute of Health and Welfare (2018) reported numbers as high as two-thirds of mothers who experienced violence said a child had seen or heard the violence. With the legal system beginning to recognize that AVTP is an emerging issue, the challenge for police is translating this awareness into appropriate practice. This should be based on a clear understanding of the nature of the issue, both in terms of prevalence and the characteristics of those involved. This study aims to provide an overview of the prevalence of reported incidents of AVTP and the characteristics of the perpetrators, victims and the incidents themselves, using Australian police data.

In Australia, there is no federal-level agreement regarding family violence policy or policing practices, with various definitions and practices utilized in different contexts, jurisdictions, and legislations (Australian Bureau of Statistics
The Australian experience of Adolescent Violence Towards Parents (ABS), 2013). This is the same for AVTP, where there is a lack of consensus regarding definition, and no specific police policy or guidelines in place to guide responses. As such police officers are often left to depend on child protection, family violence, and youth justice frameworks, despite AVTP having applicability in all of these areas (Hunter et al., 2010).

Across Australia, family violence broadly constitutes a significant proportion of police work, and has been identified as one of the biggest challenges facing the justice system (State of Victoria, 2016). Police data are the most commonly used source of information for descriptions of family and domestic violence trends in Australia (Alcohol/Drug-Involved Family Violence in Australia [ADIVA], 2016). However, it is restricted to reported cases, and therefore often the cases represent a distinct type of AVTP; perhaps cases which are particularly dangerous, high risk, or when this behaviour has been longstanding (Holt, 2012; Miles & Condry, 2016). Police data are ultimately limited by police process and procedure, with a level of discretion and responsibility in the hands of the police (Holt, 2012; Miles & Condry, 2016). When police attend, this represents an important moment for the parent to experience how someone will respond to their plea for help; therefore, police responses need to be empowering, supportive, and recognize the victimization of the parent (Miles & Condry, 2016). For police, violence within families is often not reported, court proceedings can be heavily dependent on victim testimony, and there are challenges around the most appropriate ways to respond (Miles & Condry, 2016). One study, conducted in New South Wales, determined that less than half of all people who had been a victim of family violence reported the incident to police (Grech & Burgess, 2011). Boivin and Leclerc (2016) further note that even when incidents are reported to the police, only a very small number result in prosecution
and conviction, describing what they term the “funnel” function of family violence. When police do attend a family violence incident they are typically balancing discretionary versus mandated practice to try and achieve protection for victim(s) and prevent further violence (Diemer et al., 2017). According to the Australian Institute of Health and Welfare (2018) report on Family, Domestic and Sexual Violence in Australia, there is a need for further work to guide a consistent national approach to reporting family and domestic violence incidents, as there is no consistent method for identifying incidents across States and Territories in Australia.

In 2016, a State government instituted a Royal Commission into Family Violence, which also considered adolescent violence in the home. Data were collected from the Victorian Police between July 2009 and June 2014 which showed that approximately 1 in 10 family violence incidents reported to the police were perpetrated by an adolescent. The Commission heard evidence that parents often viewed calling the police as a “last resort,” wanting assistance to address their child’s behaviour and not a criminal justice response. The Commission noted that police officers could be limited by the options available to them. The Commission concluded that a lack of community acknowledgement and understanding, parental guilt, denial, self-blame, and minimization of abuse (e.g., defending the adolescent’s violence on the basis of “typical adolescent behaviour”) suggests that the prevalence of AVTP is significantly under-reported.

Miles and Condry (2016) in their analysis of 100 AVTP cases where police had responded found that a lack of official recognition and formal policy meant that police discretion often influenced how incidents were responded to and recorded. They noted that while the police are the first contact for many AVTP victims, they
are often only utilized at crisis point. In these circumstances, police are expected to balance the rights of the victim and respond in a way which takes their victimization seriously, as well as trying to not criminalize the perpetrator by exploring available diversionary measures for the young person (Miles & Condry, 2016; Routt & Anderson, 2011; State of Victoria, 2016). They also noted some unique challenges associated with policing AVTP, including those that arise as a result of: the perpetrator being under 18 (raising issues about the use of intervention orders when s/he is still classified as a minor and dependent on the parent/victim); parent resistance (to making statements) and shame; the lack of appropriate accommodation and service options; and finding a response that was acceptable to all family members. They concluded that police at all ranks face significant challenges in relation to how to effectively respond, and that these are exacerbated by a lack of policy guidance in the area.

It is also important to consider the perspectives of perpetrators and victims. Howard and Abbott (2013) interviewed 11 adolescents who had had police and/or court contact because of AVTP along with 15 parents. They found that many parents (80%) waited for years before they contacted the police, mainly due to shame, stigma and guilt, feeling that they should be able to manage the problem themselves, and not wanting the child to have a permanent record or to be permanently removed. It is unsurprising that statistics on AVTP are generally thought to significantly under-estimate the societal experience (Barnett et al., 2011).

Current research on the prevalence of AVTP relies on, and is restricted by, reported cases, which are also thought to represent only the most severe cases (Miles & Condry, 2016). A recent literature review (Moulds et al., 2016) found that while
there is significant variance in relevance rates, approximately one in ten families is impacted by AVTP. The majority of the studies were, however, conducted in the USA and Spain (e.g., Brezina, 1999; Calvete, Orue, & Gamez-Guadix, 2013; Contreras & Cano, 2014; Ibabe & Jaureguizar, 2010; Routt & Anderson, 2011), and these estimates may largely reflect the legislative structures of these countries and have limited applicability to the Australian experience. The estimated prevalence of AVTP was also likely to vary quite markedly as a function of characteristics of the study design, for example sample size, and whether the sample was clinical or forensic, or community based.

There are also currently no Australia-wide prevalence data, although some analysis was conducted in Victoria as part of the Victorian Royal Commission into Family Violence (see above). The only other publically available data comes from Western Australia, where the Police Business Intelligence Office has provided statistics from 2009 to 2014 on the prevalence of physical and sexual violence. These show that 1416 cases of reported assaults (out of 2013) within the home were recorded as having been perpetrated by adolescents (10–17 years of age) (Hopkins, 2014). The lack of substantive prevalence studies means that the prevalence of AVTP across Australia remains largely unknown, even in terms of official statistics.

There is also limited knowledge about the characteristics of those involved in AVTP (Walsh & Krienert, 2009; Williams, Tuffin, & Niland, 2016). While studies are consistent in finding that it is women who are most likely to be a victim, with rates as high as 70–90% (Contreras & Cano, 2014; McCloskey & Lichter, 2003), gender prevalence estimates vary markedly between studies (e.g., Bartle-Haring et al., 2015; Calvete et al., 2013; Kennedy et al., 2010; McCloskey & Lichter, 2003).
The review conducted by Moulds and Day (2017) nonetheless concluded that AVTP offenders and their families could be characterized as a high needs group which commonly experiences difficulties with drugs and alcohol, high rates of trauma, and comorbid mental health concerns. The trauma and maltreatment profiles for both victims and perpetrators of AVTP create a shared, cyclonical aspect to victimization, which complicates judgments of culpability (Miles & Condry, 2016; Moulds & Day, 2017). Having a clear conceptualization of the prevalence and nature of AVTP within Australia will assist police in their efforts to prevent and intervene in AVTP and start to challenge some of the barriers that exist in encouraging parents to report and seek support when AVTP occurs. The current study aims to provide an indication of the prevalence of AVTP in Australia based on police data, and patterns with regards to victim, perpetrator, and contextual characteristics. More specifically, this exploratory study will investigate: how many police reports in Australia are made in regard to AVTP? What do we know about characteristics of perpetrators of AVTP? How do factors such as gender and race impact on AVTP perpetration? What do we know about characteristics of victims of AVTP? and What do we know about incidents of AVTP?

Method

This study is an investigation of data collected in an Australian National Drug Law Enforcement Research Fund (NDLERF) funded project (the ADIVA) which collated police data from every State and Territory over a five-year period. Permission to access the ADIVA data set was granted from Queensland (QLD), Western Australia (WA), the Australian Capital Territory (ACT), Victoria (VIC), and New South Wales (NSW). The ACT data could not, however, be utilized in analysis due to the data obtained not including perpetrator information (e.g., age),
meaning that adolescent offenses could not be identified. All data were de-identified. There are no consistent methods of identifying family and domestic violence incidents across States and Territories within Australia and therefore State and Territory police data cannot be compared and analysed collectively and need to be considered separately, which is a recognized limitation of the study, however the study provides the unique opportunity to explore prevalence of AVTP across different jurisdictions.

Data relating to AVTP were identified based on a number of filters (see results for a description of methods for each state). Where possible, an incident where the victim was a grandparent or sibling was excluded by filtering for victim relationship (child/parent) and age (e.g., maximum age of victim 60, minimum age of victim 24), this was due to the focus of this research being on AVTP, rather than adolescent perpetrated family violence more broadly.

The data were analysed using quantitative methods, predominately descriptive statistics to create an overarching profile of the nature of AVTP in Australia. Bivariate (chi-square) statistics were conducted to explore group differences on key categorical variables of interest: age, race, and gender.

Results

Results are presented individually by each participating jurisdiction, due to Commonwealth and State and Territory governments implementing policy interventions which vary in the degree to which there is cross-agency collaboration and the way in which data is collected (e.g. what is classified as family violence). Each jurisdiction collects data differently, defines family violence/AVTP differently,
and uses incomparable systems to manage data. Moreover, for each State and Territory, what information is collected is often at the discretion of the officers, which can have an impact on a number of variables, such as time, perception of what information is valuable, and what information is made available when responding to an offence. Therefore, State and Territory police data cannot be compared and analysed collectively and need to be considered separately.

**New South Wales**

*Prevalence*

New South Wales had an approximate population of just over 7 million in 2011, and has a land size of 2,529,875km² with a population density of 9.52 (persons per km²) (ABS, 2017). Data for the study were obtained from the NSW Police database for the period 1 January 2009 to 31 December 2013. It was divided into person and incident data. Cases of AVTP were identified by selected cases of family violence, cases were the relationship was child (of victim), and were the age of offender was 10-17 years of age. Across the reporting period there were 119,833 family and domestic violence incidents, with a total of 10,634 young people who committed family violence (person data) and 8,312 incidents of AVTP, meaning 8.87% of family violence incidents were committed by an adolescent and 6.94% of family violence incidents were AVTP (or 78% of family violence incidents committed by an adolescent). To consider AVTP within this population, family violence data was sorted based on the variable “Relationship offender to victim” (child) and for the offender to be between 10-17 years of age. Between 2009 and 2013 incidents of AVTP rose from 1,338 incidents in 2009 to 1,894 in 2013, this represents a 42% increase.

*Characteristics*
The Australian experience of Adolescent Violence Towards Parents

Demographic data identified that most cases of AVTP reported to police were perpetrated by males (64%) who were between 14-17 years of age (68%), with just over a third of perpetrators being recidivist offenders. Police reports suggest that in half of cases children were present, and the majority of incidents were not drug or alcohol related. There was no clear pattern in relation to what days AVTP occurred during the week; however, 40% of incidents occurred after 6pm. For a summary of demographic data, see Table 4.1.

Table 4.1: Demographics NSW

<table>
<thead>
<tr>
<th>Incident variables</th>
<th>Frequency</th>
<th>Per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol and drug related</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not alcohol related</td>
<td>6003</td>
<td>72%</td>
</tr>
<tr>
<td>Alcohol related</td>
<td>2309</td>
<td>28%</td>
</tr>
<tr>
<td>Offender intoxicated</td>
<td>1736</td>
<td>20%</td>
</tr>
<tr>
<td>Not Drug related</td>
<td>8148</td>
<td>98%</td>
</tr>
<tr>
<td>Child Present</td>
<td>4322</td>
<td>52%</td>
</tr>
<tr>
<td>Recidivist offender</td>
<td>3163</td>
<td>38%</td>
</tr>
<tr>
<td>Repeat victim</td>
<td>2723</td>
<td>32%</td>
</tr>
</tbody>
</table>

Incident data: Adolescent perpetrated family violence (n=10,634)

<table>
<thead>
<tr>
<th>Age of perpetrator</th>
<th>Frequency</th>
<th>Per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>10-14</td>
<td>3396</td>
<td>32%</td>
</tr>
<tr>
<td>14-17</td>
<td>7238</td>
<td>68%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sex</th>
<th>Frequency</th>
<th>Per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>6771</td>
<td>64%</td>
</tr>
<tr>
<td>Female</td>
<td>3862</td>
<td>36%</td>
</tr>
</tbody>
</table>
A chi-square test of independence was performed to examine the association between age and gender. The relation between these variables was significant, $\chi^2(14) = 153.83$, $\rho<0.001$. Male rates of AVTP tended to steadily increase, female rates seem to plateau at age 15 (figure 4.1). A chi-square test of independence was performed to examine the relation between gender and whether the perpetrator was involved in another incident. The relation between these variables was significant, $\chi^2(2) = 25.63$, $\rho<0.001$. Female perpetrators were slightly less likely to be involved in more than one incident.

![Age differences based on gender](image)

**Figure 4.1 – NSW age differences based on gender.**

2 per. Mov. Avg refers to the moving average.
**Victoria**

*Prevalence*

Victoria (VIC) had an approximate population of just over 5.5 million in 2011, and has a land size of 227,416km$^2$ with a population density of 26.11 (persons per km$^2$) (ABS, 2017). This section presents trends for offenders within family violence incidents attended by VIC police between 1 January 2009 and 31 December 2013. Data was sorted for AVTP based on perpetrator age (10-17 years old), victim age (>18) and relationship (child/parent). In total, there were 235,847 incidents of family violence between 1 Jan 2009 and 31 December 2013. Of these, 11,243 (4.77%) of these were incidents of AVTP. Incidents of AVTP rose from 1696 in 2009, to 2903 in 2013, representing a 71.17% increase.

*Characteristics*

Demographic data identified that most cases of AVTP reported to police were perpetrated by males (65%) who were Caucasian (67%) and between 15-17 years of age (65%). In terms of victim characteristics, Victorian police reports suggested that 80% were female, with 50.5% being between 40-49 years of age. With regard to characteristics of the incidents, for 26% of cases, it was their first reported incident of AVTP; Intervention Orders in the majority of cases not present (83%); 40% occurred between 6pm and midnight. The future risk was considered unlikely in almost half (42%) of cases, with less than 1% remanded in custody based on the incident. Of the reported cases, drugs and alcohol were reported to be involved in less than 10% of cases. For a summary of demographic data, see Table 4.2.
Table 4.2: Demographics Victoria

<table>
<thead>
<tr>
<th>Demographic variable</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of incidents</td>
<td>11243</td>
<td></td>
</tr>
<tr>
<td>Occurred between 6pm and midnight</td>
<td>4513</td>
<td>40%</td>
</tr>
<tr>
<td>Sex</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>7254</td>
<td>65%</td>
</tr>
<tr>
<td>Female</td>
<td>3977</td>
<td>35%</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10-14</td>
<td>3908</td>
<td>35%</td>
</tr>
<tr>
<td>15-17</td>
<td>7335</td>
<td>65%</td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caucasian</td>
<td>7529</td>
<td>67%</td>
</tr>
<tr>
<td>Aboriginal</td>
<td>223</td>
<td>2%</td>
</tr>
<tr>
<td>Asian</td>
<td>337</td>
<td>3%</td>
</tr>
<tr>
<td>Unknown</td>
<td>3148</td>
<td>28%</td>
</tr>
<tr>
<td>Victims</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>8991</td>
<td>80%</td>
</tr>
<tr>
<td>Male</td>
<td>2207</td>
<td>20%</td>
</tr>
<tr>
<td>40-49 years of age</td>
<td>1663</td>
<td>50.5%</td>
</tr>
<tr>
<td>First recorded incident of AVTP</td>
<td>2945*</td>
<td>26%</td>
</tr>
<tr>
<td>Experienced AVTP for more than 2 years</td>
<td>1057</td>
<td>9%</td>
</tr>
<tr>
<td>Future risk</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unlikely</td>
<td>4741</td>
<td>42%</td>
</tr>
<tr>
<td>Likely</td>
<td>3768</td>
<td>34%</td>
</tr>
<tr>
<td>Unrecorded</td>
<td>2734</td>
<td>24%</td>
</tr>
<tr>
<td>Intervention order (IO)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IO present</td>
<td>1901</td>
<td>17%</td>
</tr>
<tr>
<td>IO not present</td>
<td>9342</td>
<td>83%</td>
</tr>
<tr>
<td>Alcohol</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Possible</td>
<td>1064</td>
<td>9.5%</td>
</tr>
<tr>
<td>Definite</td>
<td>558</td>
<td>5%</td>
</tr>
<tr>
<td>Drugs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Possible</td>
<td>871</td>
<td>8%</td>
</tr>
<tr>
<td>Definite</td>
<td>149</td>
<td>1%</td>
</tr>
<tr>
<td>Other charges pending</td>
<td>1212</td>
<td>11%</td>
</tr>
<tr>
<td>Remanded in custody</td>
<td>62</td>
<td>&lt;1%</td>
</tr>
</tbody>
</table>

* Statistics on incident history and length was only collected/valid for 10.5% of families (n=1175).

A number of chi-square tests of independence were conducted to further explore characteristics. Females were significantly more likely to perpetrate AVTP
against female victims than male victims, $\chi^2 (1) = 94.68, p < .001$. More young Aboriginal women perpetrate AVTP than young Aboriginal men, and, more young Caucasian men perpetrate AVTP than young Caucasian women, $\chi^2 (4) = 15.28, \rho = 0.004$. Female offenders were slightly younger (10-14 years of age) than their male counterparts, however in both cases over 60% were over 15, $\chi^2 (1) = 56.36, \rho < .001$. When reported AVTP was perpetrated by a female they were classified as higher risk of reoffending than reported incidents of AVTP that was perpetrated by males, $\chi^2 (2) = 20.95, \rho < .001$. Male perpetrators were slightly more likely to be placed on an intervention order (than female perpetrators), $\chi^2 (1) = 87.88, \rho < .001$. Of the young people who were placed on intervention orders, 11.7% were identified as likely risk to reoffend compared to 65.4% who were identified as unlikely (22.9% unknown risk level), suggesting that intervention orders were not based on future likely risk, $\chi^2 (2) = 619.77, \rho < .001$. There was a tendency for Caucasian offenders to be more likely classified as unlikely risk of future AVTP offending and Asian offenders to be more likely classified as likely risk for future AVTP offending, $\chi^2 (8) = 141.7, \rho < .001$. Asian AVTP offenders were more likely to be placed on an intervention order than Aboriginal or Caucasian AVTP offenders, $\chi^2 (4) = 17.69, \rho < .001$.

Queensland

Prevalence

Queensland (QLD) had an approximate population of just over 4.5 million in 2011, and has a land size of 1,730,647km$^2$ with a population density of 2.76 (persons per km$^2$) (ABS, 2017). This section presents trends for offenders within family violence incidents attended by QLD police between 1 January 2010 and 31 December 2015. Data was split between person and incident data. AVTP cases were
identified by selecting only family violence cases, cases where the relationship was child and the offender was aged between 10-17 years of age. Data was sorted for AVTP based on perpetrator age (10-17 years old), and relationship (child). In total, there were 330,701 incidents of family violence between 2010 and 2015. There was no available data related to characteristics of the victim, for example gender, or age. There was no data relating to race. Incident data suggested that 2.9% \((n=9693)\) of these cases were AVTP. Between 2010 and 2015, there was a 53.8% increase in reported incidents of AVTP. There was no clear real change in prevalence in regard to month, day of week or time in which AVTP occurred.

**Characteristics**

Demographic data identified that most cases of AVTP reported to police were perpetrated by males (67%) and between 15-17 years of age (96%). In regard to characteristics of the incidents, at least half of perpetrators were repeat offenders, with 62% of victims being repeat victims. Of the reported cases, drugs and alcohol were reported to be involved in between 2-14% of cases. For a summary of demographic data, see Table 4.3 for QLD demographics. A chi-square test of independence was performed to examine the relation between perpetrator age, perpetrator sex and whether drugs and/or alcohol were involved. The relation between these variables was not significant.
Table 4.3: QLD Demographics

<table>
<thead>
<tr>
<th>Demographic variable</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>327</td>
<td>67%</td>
</tr>
<tr>
<td>Female</td>
<td>168</td>
<td>33%</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10-14</td>
<td>21</td>
<td>4%</td>
</tr>
<tr>
<td>15-17</td>
<td>495</td>
<td>96%</td>
</tr>
<tr>
<td>Repeat offender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Person data</td>
<td>256</td>
<td>50%</td>
</tr>
<tr>
<td>Incident data</td>
<td>698*</td>
<td>68%*</td>
</tr>
<tr>
<td>Affected by alcohol</td>
<td>68</td>
<td>14%</td>
</tr>
<tr>
<td>Affected by drugs</td>
<td>1.6</td>
<td>2%</td>
</tr>
<tr>
<td>Repeat victim*</td>
<td>627</td>
<td>62%</td>
</tr>
</tbody>
</table>

* Incident data

**Western Australia**

**Prevalence**

Western Australia (WA) had an approximate population of just over 2 million in 2011, and has a land size of 2,529,875km² with a population density of 1.02 (persons per km²) (ABS, 2017). This section presents trends for offenders within DV/FV incidents attended by WA police between 1 January 2009 and 31 December 2014. Data were sorted for AVTP based on perpetrator age (10-17 years old), and victim age (24-60 years of age). This was not ideal, as it did not guarantee relationship; however, this variable was unavailable. Therefore, results should be interpreted with caution. In total, there were 140,638 incidents of family violence between 2009 and 2014. Of these, 1,110 (0.79%) were suspected incidents of AVTP. Incidents went from 204 in 2009, down to 130 in 2014. There was no clear pattern in relation to month in which AVTP occurred.

**Characteristics**

Demographic data identified that most cases of AVTP reported to police were perpetrated by males (68%) who were non-indigenous (87%). The victim of reported cases was most often female (72%) and between 35-49 (62%). The mean age for a suspected AVTP offender was 15 years old (SD=1.56) with the mean age for
suspected victim of AVTP 41 years old (SD= 64.8). In regard to characteristics of the incidents, at least half (51%) of perpetrators were repeat offenders, with 54% of victims being repeat victims. Of the reported cases, police noted drugs and alcohol to be involved in between 4-17% of cases. Offenders were most often arrested for assault (84%). Only a small percentage of offences (18%) were in breach of an intervention order. The majority of incidents occurred in metropolitan regions (69%), and in 40% of cases the perpetrator was arrested, with 42% of cases leading to a formal caution. For a summary of demographic data, see Table 4.4.

**Table 4.4: WA Demographics**

<table>
<thead>
<tr>
<th>Demographic variable</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Repeat offender</td>
<td>560</td>
<td>51%</td>
</tr>
<tr>
<td>Repeat Victim</td>
<td>600</td>
<td>54%</td>
</tr>
<tr>
<td>Arrested for assault</td>
<td>944</td>
<td>85%</td>
</tr>
<tr>
<td>Arrested for threatening behaviour</td>
<td>159</td>
<td>15%</td>
</tr>
<tr>
<td>Breach of intervention order</td>
<td>204</td>
<td>18%</td>
</tr>
<tr>
<td>Sex of Offender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>759</td>
<td>68%</td>
</tr>
<tr>
<td>Female</td>
<td>342</td>
<td>31%</td>
</tr>
<tr>
<td>Offender stated Aboriginal Torres Strait Islander Status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Indigenous</td>
<td>966</td>
<td>87%</td>
</tr>
<tr>
<td>Aboriginal</td>
<td>144</td>
<td>13%</td>
</tr>
<tr>
<td>Metropolitan</td>
<td>767</td>
<td>69%</td>
</tr>
<tr>
<td>Regional</td>
<td>313</td>
<td>28%</td>
</tr>
<tr>
<td>Unknown</td>
<td>30</td>
<td>3%</td>
</tr>
<tr>
<td>Victim aged between 35-49</td>
<td>693</td>
<td>62%</td>
</tr>
<tr>
<td>Victim female</td>
<td>800</td>
<td>72%</td>
</tr>
<tr>
<td>Alcohol related</td>
<td>190</td>
<td>17%</td>
</tr>
<tr>
<td>Drug related</td>
<td>41</td>
<td>4%</td>
</tr>
<tr>
<td>Young person arrested</td>
<td>446</td>
<td>40%</td>
</tr>
<tr>
<td>Young person Cautioned</td>
<td>464</td>
<td>42%</td>
</tr>
</tbody>
</table>

A chi-square test of independence was performed to examine the relation between perpetrator sex and whether they were identified a repeat offender. The relation between these variables was significant $\chi^2 (2) =7.4$, $p<.021$. Males were
more likely to be repeat offenders than female perpetrators. A chi-square test of independence was performed to examine the relation between perpetrator race and whether they were identified a repeat offender. The relation between these variables was significant $\chi^2 (1) =13.43$, $p<.001$. Slightly more Aboriginal and Torres Strait Islander (Indigenous Australian) (ATSI) young people were identified as repeat offenders than non ATSI young people. A chi-square test of independence was performed to examine the relation between perpetrator sex and victim sex. The relation between these variables was significant $\chi^2 (4) =15.32$, $p<.013$. Female perpetrators of AVTP were slightly more likely to offend against women than male perpetrators of AVTP. A chi-square test of independence was performed to examine the relation between perpetrator sex and perpetrator race. The relation between these variables was not significant $\chi^2 (2) =2.637$, $p>.05$. A chi-square test of independence was performed to examine the relation between ATSI status and outcome (e.g. arrested or cautioned) $\chi^2 (7) =108.01$, $p<.05$. ATSI young people were more likely to be arrested with non ATSI young people more likely to be cautioned. A chi-square test of independence was performed to examine the relation between perpetrator gender and outcome (e.g. arrested or cautioned). The relationship between these variables was not significant $\chi^2 (14) =26.165$, $p<.05$.

**Discussion**

The aims of this study were to describe the prevalence of AVTP as reported to police within the Australian community, and to map the profiles of AVTP perpetrators, victims, and incidents. These data can be triangulated with that from other studies which have explored AVTP (e.g., Brezina, 1999; Calvete et al., 2013; Calvete, Orue, & Gamez-Guadix, 2015; Ibabe et al., 2013; Jaureguizar et al., 2013;
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Kang & Lynch, 2014; Pagani et al., 2009), to determine if characteristics and prevalence reported internationally of AVTP was mirrored in an Australian context.

**How many police reports are made in regard to AVTP?**

States varied substantially in the reported prevalence of AVTP. For example, in NSW, approximately 7% of cases of family violence were identifiable as AVTP; however, in WA it was only 0.79% of cases. This variation may be an indication that perpetration of AVTP differs across jurisdictions; however, it may reflect the influence of differing police policies, understandings, and classifications. Overall, it is acknowledged that police data are likely to under-estimate the true rate, given the shame, parental blame, and lack of community acknowledgment of AVTP (Correll, Walker, & Edwards, 2017). As such these figures should be regarded as conservative and are well below a prevalence rate of approximately 10% reported in other parts of the world (Brezina, 1999; Calvete et al., 2013, 2015; Ibabe et al., 2013; Jaureguizar et al., 2013; Kang & Lynch, 2014; Pagani et al., 2009). Gallagher’s (2008) study, however, suggests that a figure of 3–4% is likely to be an accurate representation of true rates of AVTP, with other rates likely to be an overestimation of true figures due to difficulties with self-report measures and the lack of clarity and consistency in definitions of factors such as violence. The WA data identified that 85% of cases attended by the police were assaults, highlighting the “crisis” nature of police calls in relation to AVTP, with only 15% being threats of violence. The analyses suggest that AVTP is a form of violence that is impacting on Australian families, and the variation warrants an increase in attention regarding police policy and classification. This is particularly important, given a reported increase in rates of 42% increase in NSW, a 53.8% increase in QLD and a 71.17% increase in Victoria over the five-year period. However, The Victorian Royal Commission (2016) reported an increase in family violence incidents, and commented that it was not clear whether the
prevalence was increasing, or rather that it reflects greater acknowledgment and reporting of family violence. This suggests that this number may reflect a change in parents’ experience of AVTP and a genuine increase in occurrence, or rather, it may be a reflection of a change in confidence and willingness to report AVTP.

**What do we know about perpetrators of AVTP?**

Within all obtained data sets, there was a clear pattern of males being more likely to perpetrate AVTP than females, with approximately 60% of offenders being male. This finding is consistent with some of the research internationally in the area of AVTP (Calvete et al., 2015; Ibabe et al., 2014; Kuay et al., 2016; Miles & Condry, 2014; Nock & Kazdin, 2002). Both NSW and Victoria showed that females were more likely to be perpetrators of AVTP at a younger age than their male counterparts, with it seeming a problematic behaviour that they “age out of,” a phenomenon that is not mirrored by male AVTP offenders. Within juvenile justice broadly, studies have found that male offending behaviour persists longer than female offending behaviour (Moretti, Odgers, & Jackson, 2004; Webb, 2017). NSW and WA data both showed that females were also less likely to be repeat offenders, suggesting more of a once off behavioural incident, as opposed to a pattern of AVTP. The gendered nature of AVTP perpetration has been debated, with the literature often divided in its understanding (see Moulds & Day, 2017). Correll et al., (2017) suggest that studies that consider AVTP perpetrators within the juvenile justice system highlight males being the likely perpetrators; however, in community studies the gender pattern is not as clear. Further research is needed to explore some of the nuances of these gender differences, in particular differences in trajectories, and whether females are more likely to have only one-off offences. Miles and Condry (2011) found that in cases of AVTP females were more likely than males to inflict minor injury and be reported for assault, whereas males were more likely to be
reported for property damage. They hypothesized that this could be reflective of true gender differences, or may be that there are different thresholds for males and females, and parents may feel more threatened by sons, or that it is more socially acceptable to report male AVTP.

In terms of age, all States identified that at least two thirds of incidents of AVTP were committed by 14–17 year olds across all data sets. Male rates of AVTP tend to steadily increase according to NSW and Victorian data; whereas female rates seem to plateau at age 15, perhaps indicating that female offenders mature out of the behaviour as they age, or perhaps that intervention from police (e.g., cautioning) is more effective with young women to deter further offending. However, QLD data highlighted no relationship between age and gender. This suggests that this may be an issue for later adolescence, however, this needs to be interpreted within the consideration for the difference between age of onset, as opposed to age of the behaviour being reported (which tends to reflect either a long-standing pattern of AVTP or a peak in severity) (Moulds & Day, 2017).

In regard to cultural differences, all States suggested that Caucasian, or individuals who do not identify as ATSI, were more likely to perpetrate AVTP. Previous research in the USA has also found a cultural difference, with Caucasian young people more likely to perpetrate AVTP than Hispanic or African American young people (Bartle-Haring et al., 2015; Gebo, 2007; Kennedy et al., 2010). What is unclear is what this cultural difference reflects, for example whether this reflects a cultural difference in reporting family violence, or that it is a true cultural difference in family functioning and violence levels.
What do we know about victims of AVTP?

All four states recorded minimal information in regard to victim characteristics. The most commonly recorded information related to victim gender. The data supported the already established understanding that women are more likely to be the victim of AVTP, with Victoria reporting 80% of cases and WA reporting 72% of cases of AVTP being targeted at women (Contreras & Cano, 2014; McCloskey & Lichter, 2003; Miles & Condry, 2016). While this may reflect a gender difference in seeking police assistance, it seems to suggest that regardless of the gender of the perpetrator of AVTP, this is a gendered phenomenon, with women consistently being victimized at levels similar to other forms of family violence. Similarly, in line with Calvete et al., (2013), the Australian data suggest that women in their forties are most likely to be victimized. Interestingly, Victorian and WA data found that female offenders were slightly more likely to offend against female victims; this is in line with Walsh and Krienert (2009) who concluded that sons were more likely than daughters to be violent toward a parent; however, females were even more likely to be violent towards their mothers. They added however, that mothers are more likely to report abusive sons over daughters and this may have influenced conclusions regarding the role of gender in both perpetration and victimization (Walsh & Krienert, 2009).

What do we know about incidents of AVTP?

In terms of incident characteristics, States varied dramatically in regard to what data were available. For example, WA was the only State to provide whether incidents occurred within metropolitan or regional areas. The police data found that 70% of cases occurred in metropolitan areas, which may be a reflection of population rates, or possibly suggesting that it is less likely to be impacting on rural families or perhaps suggesting lower levels of acknowledgment and higher levels of tolerance.
and/or shame within rural communities. While this has not been explored within the field of AVTP, women living in regional, rural, and remote areas experiencing family violence, report fear of stigma, shame, and community views as barriers to seeking help, with a lack of privacy of services inhibiting women’s willingness to engage with local services (Campo & Tayton, 2015).

For all States, alcohol or drugs were not identified by police as being related to the violence in the large majority of cases. This was in line with some research in the area (e.g., Bartle-Haring et al., 2015), however in contrast to many studies which report an association between substance use and AVTP (Calvete et al., 2013, 2015; Contreras & Cano, 2014; Pagani & Tremblay, 2004). This lack of association may be more reflective of police not recording or identifying alcohol or drug use in AVTP cases due to safety being the priority, or may be a reflective of the age of offenders.

In regard to future risk, Victorian data suggested that 34% of young people were identified as likely to commit AVTP again. This is in contrast to intervention orders, with only 17% having an intervention order in place, with analyses indicating that intervention orders were not associated with future likely risk. Less than 1% of AVTP offenders were remanded in custody. When AVTP was perpetrated by a female they were classified as higher risk than male counterparts, however, males were more likely to be subject to an intervention order. This is an area which would benefit from further investigation, as perhaps the mechanism here, in particular as Miles and Condry (2011) hypothesized, as to whether this is due to males being perceived as a greater threat long term, however females are identified by the police having a once off, incident of AVTP. In addition, while Caucasian offenders were more likely classified as unlikely risk of future AVTP offending, Asian offenders
were more likely classified as likely risk for future AVTP offending and placed on an intervention order. In WA, 40% of AVTP perpetrators were arrested and 42% were cautioned. Analysis of WA data found that ATSI young people were more likely to be arrested, and non ATSI young people more likely to be cautioned, however this may be explained by ATSI young people being more likely to be repeat offenders than non ATSI young people.

**Strengths and limitations**

The current study is a useful descriptive study which begins to explore the prevalence of AVTP in a number of Australian jurisdictions. It also highlights how different legislations, policy, and reporting rules are likely to influence findings. While this study’s volume of cases, and breath of the data are strengths, this study, however it is vulnerable to limitations. Only a proportion of AVTP cases are reported to the police and, arguably, these are often representative of severe cases (Barnett et al., 2011). Therefore, the data reported do not represent all AVTP incidents that occurred within each of the States during the study period.

Significant consideration needs to be given to how robust and reliable the data analysed in this study is. Within the data set there were substantial missing data both across and within jurisdictions due to a number of potential reasons, for example whether fields were mandatory, whether alcohol/drug level was tested or recorded, whether information regarding cultural identity was gained and whether factors such as risk were recorded. Attending police officers make a judgment on what key incident details to record based on a risk assessment of the situation and the purpose or likely outcome (e.g., if this matter is likely to proceed to court) (Miller et al., 2015). This limits the generalizability and strength of these conclusions. This balance between compulsion and discretion is a significant challenge for police, with some suggesting that guided discretion is best suited to achieve collaborative,
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problem-solving approaches that partner best with communities (Diemer et al., 2017). While Police data are the most commonly used source of information, the data are primarily collected for operational purposes by police dealing with complex situations, which by its nature has some limitations. While police data are statistically robust in regard to its quantity, it is restricted to reported cases. Therefore, the cases of AVTP in which police attend are likely to be a distinct group of AVTP offenders, and those that represent the most severe cases of AVTP, or perhaps those with the most complex family dynamics (Holt, 2012; Miles & Condry, 2016).

Filters used to analyse data were based on assumption, e.g. age, and therefore vulnerable to excluding or including cases which are not indicative of AVTP. There is a lack of consistency and differences around what is recorded and collected by each state. For example, some data are broken down by age range 0 to 17 years, whereas other data are broken down by age range 10 to 14 years and 15 to 19 years. In some cases, the age of the perpetrator and/or victim, and the relationship between the perpetrator and victim was not recorded, and therefore they were excluded from the analysis. Each state collected different data related to incidents of data, which meant that different analyses or variables could be explored.

When police attend incidents, they can be highly volatile situations that have operational constraints which can impact on what is practically possible in regards to what information is recorded. Police data are ultimately limited by police process and procedure, with data reflecting what police and justice systems more broadly deem will believe their victimization, and assist them in gaining assistance, and their sense of blame (Miles & Condry, 2016; Routt & Anderson, 2011). The challenge of balancing the safety of the parent, while providing an intervention that is in the best interests of the child is not easily solvable. There is a need for a more sophisticated,
standardized and consistent police response to AVTP, including well-developed policy, training, and a framework to inform practice.

This study was the first known of its kind to incorporate multiple Australian state data in relation to AVTP. This study concludes that AVTP reported to, and by, police has represented between 1% and 7% of cases of family violence within Australia, and is typically perpetrated by 15- to 17-year-old Caucasian young men towards mothers. Police did not identify incidents as being alcohol or drug related, as the perpetrators first incident, and unlikely to result in an arrest, custody, or an intervention order. This study supports the need for more research and development in policy and practice in regard to best response in regard to AVTP. The challenge remains that AVTP does not fit neatly into the fields of youth justice, child protection or domestic violence, with each area needing to take some responsibility for its management (Hunter & Piper, 2012).

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Chapter 5: AVTP and Other Offending

This chapter examines how AVTP relates to other young offending, addressing the overarching aim of this thesis: To what extent does AVTP occur within a pattern of other offending behaviour? The chapter begins with background information concerning how offences are classified within Australia, which has implications for how offences were classified in these studies. It then provides a contextual overview of Youth Justice in South Australia; the state where the data were obtained from. It goes on to discuss where and how the data was obtained and the steps in this process. Finally, two studies are then presented which interrogate the above aims in depth. Broadly, the first study examines whether there are different typologies of AVTP offenders within the overall grouping of young people who have been reported for this activity. The second study compares young people who engage in AVTP, with other young offenders who have been reported for committing other forms of violent crime, on a range of offending-identified factors.

Background and context

Each state and territory around Australia has various legislative practices and policies which are implemented by police, courts and other justice systems. These differences have impacts for how offences are defined, responded to and sentenced. However, the Australian and New Zealand Standard Offence Classification (ANZSOC) provide an overarching framework to overcome these difficulties and allow for statistical analysis of crime. South Australia, just like other states and territories is bound by its own legislation around young offending.
The Australian and New Zealand Standard Offence Classification (ANZSOC)

The Australian and New Zealand Standard Offence Classification (ANZSOC) (3rd edition), was developed primarily for the production and analysis of crime and justice statistics in Australia and New Zealand. ANZSOC defines an offence as a criminal act or omission by a person(s) and/or organisation(s) for which a penalty could be imposed by the Australian or the New Zealand legal systems. ANZSOC aims to provide a uniform statistical framework for classifying criminal behaviour, to allow for the production and analysis of crime and justice statistics. The ANZSOC is used by research agencies (e.g. ABS), Australian and New Zealand police, criminal courts, corrective services agencies and justice agencies. It serves two key purposes; firstly, providing a standardised statistical framework for organising criminal offences and secondly overcoming differences in legal offence definitions across states and territories minimising confusion and differences between legislations, to allow for categories to be uniform across jurisdictions.

When ANZSOC was developed six criteria were used; violence, acquisition (e.g. to obtain property), the nature of the victim (e.g. people, community or property), ancillary offences (e.g. whether the offence only exists as an extension of, or in relation to, another offence), seriousness (e.g. whether a weapon was used) and intent (e.g. negligent or intent to commit an act). The divisions of the classification are not ranked by seriousness; this can be done via the National Offence Index (NOI), a separate statistical tool that allows selected ANZSOC groups to be ranked in order of seriousness. The ANZSOC is a classification with three levels: divisions (the broadest level), subdivisions (the intermediate level) and groups (the finest level). The divisional level provides a broad overall picture of offence types, whereas the subdivision and group levels provide increasingly detailed dissections and more
specifics, for example a division level would be illicit drug offences, the subdivision import or export illicit drugs and the group import illicit drugs. Family and domestic violence is difficult to represent using the ANZSOC, as a wide range of offending behaviours may be related to family or domestic violence, such as property damage, cruelty to animals, assault and/or sexual assault, and therefore span across a number of divisions. Table 5.1 outlines the 16 divisions within the ANZSOC.

Table 5.1: Divisions of ANZSOC

<table>
<thead>
<tr>
<th>Division Number</th>
<th>Division Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Homicide and related offences</td>
</tr>
<tr>
<td>02</td>
<td>Acts intended to cause injury</td>
</tr>
<tr>
<td>03</td>
<td>Sexual assault and related offences</td>
</tr>
<tr>
<td>04</td>
<td>Dangerous or negligent acts endangering persons</td>
</tr>
<tr>
<td>05</td>
<td>Abduction, harassment and other offences against the person</td>
</tr>
<tr>
<td>06</td>
<td>Robbery, extortion and related offences</td>
</tr>
<tr>
<td>07</td>
<td>Unlawful entry with intent/burglary, break and enter</td>
</tr>
<tr>
<td>08</td>
<td>Theft and related offences</td>
</tr>
<tr>
<td>09</td>
<td>Fraud, deception and related offences</td>
</tr>
<tr>
<td>10</td>
<td>Illicit drug offences</td>
</tr>
<tr>
<td>11</td>
<td>Prohibited and regulated weapons and explosives offences</td>
</tr>
<tr>
<td>12</td>
<td>Property damage and environmental pollution</td>
</tr>
<tr>
<td>13</td>
<td>Public order offences</td>
</tr>
<tr>
<td>14</td>
<td>Traffic and vehicle regulatory offences</td>
</tr>
<tr>
<td>15</td>
<td>Offences against government procedures, government security and</td>
</tr>
<tr>
<td></td>
<td>government operations</td>
</tr>
<tr>
<td>16</td>
<td>Miscellaneous offences</td>
</tr>
</tbody>
</table>
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**National Offence Index**

The National Offence Index (NOI (2009) (cat.no. 1234.0.55.001), is a complementary tool to the ANZSOC, which focuses on the seriousness of an offence. This assists in enabling the representation of a person by a single offence. For example, where someone has two or more charges against them that are in two different categories, the NOI allows the most serious offence to represent that person.

The NOI is based on the Offence Seriousness Index developed by the Crime Research Centre (CRC) in Western Australia, and was developed based on research into public perceptions of offence seriousness, combined with legislated sentences of offences.

**Youth Justice in South Australia**

In South Australia, Youth Justice is part of the Department of Human Services (DHS), and is responsible for supervising community and custodial orders given to young people aged 10-18 years of age that have been issued by the South Australian Courts. The youth justice system in South Australia is regulated by two companion pieces of legislation: *Young Offenders Act 1993 (SA)* and *Youth Justice Administration Act 2016 (SA)*.

The *Young Offenders Act 1993 (SA)* aims to ensure young people who offend obtain the rehabilitation necessary for their development into responsible and useful members of the community and the proper realisation of their potential. The *Youth Justice Administration Act 2016 (SA)* regulates the administration and oversight of youth training centres and supervision of young offenders, prioritising safety, humanity and security. It includes considerations for programs, guidelines and the promotion of rehabilitation of youth while responding to victims of crime and community safety. Part of this act is the Aboriginal and Torres Strait Islander Youth Justice Principle, a principle which acknowledges the diversity and particular needs.
and circumstances of Aboriginal and Torres Strait islander communities. Young people under the guardianship of the Minister are also bound by the Children's Protection Act 1993.

According to the AIHW, in South Australia on an average day in 2016–17, 325 young people aged 10 and over were under youth justice supervision. Of those under supervision, the majority (82%) were supervised in the community, with the remainder in detention. Indigenous young people were 26 times as likely to be under supervision as non-Indigenous young people, with 54% of young people under supervision Aboriginal or Torres Strait Islander. The number of young people under supervision in South Australia over the last five years has been falling by 23% (from 2011/2012-2016/2017).

The South Australian Office of Crime Statistics & Research (OCSAR)

The South Australian Office of Crime Statistics & Research (OCSAR), established in 1978, was responsible for research into, and the monitoring of crime trends and the criminal justice system within South Australia. OCSAR had the following three key objectives; to provide statistical information on crime and criminal justice; to conduct research into crime and criminal justice issues, including evaluations of the impact of legislative change and the introduction of new criminal justice practices; and to disseminate information on crime and criminal justice in order to increase the general level of understanding and to inform public debate and policy development. In September 2018, OCSAR was closed, and its core functions were shifted to the South Australian Justice Policy and Analytics group in the Attorney-General’s Department.
**OCSAR and AVTP**

An ethics application was made to the South Australian Police (SAPOL) directly for access to data related to AVTP and other youth justice offences on 5 May 2016. On 22 August 2016, this request was denied, due to lack of resources. When the Research and Survey Coordination Committee (RSCC) at SAPOL was contacted to discuss this application, they suggested that OCSAR could be an appropriate alternative for access to this data.

For the first of the studies, OCSAR was approached to provide data on AVTP to establish prevalence rates for the South Australian population based on official statistics, and to explore the relationship between AVTP and other types of young offending to ascertain if AVTP is part of a more general offending pattern. A data retrieval request was made for all cases of AVTP that occurred between 2008-2012, and that other data associated with these cases be extracted in relation to prior and post other offending (e.g. if they had any other offending prior to their AVTP charge, and any other offending post their AVTP charge). This period was chosen due to it representing a significant time frame (e.g. five years) and gave the capacity for data to be obtained longitudinally. Data of further offences was able to be given until 2016, meaning there was capacity for up to 8 years of longitudinal data regarding a young person’s offending history. Once this sample had been established, for the second study, it was requested that an equal sized random sample of adolescent violence towards other offenders over the same period was established, to allow between group comparisons. The following list of information was requested: demographics offender and victim (including age, gender, Aboriginal and Torres Strait Islander status); all offences charged (ANZSOC), age of offending; major
charge; summary of total number of offences and apprehension outcome (e.g. family
conference, court, withdrawn)

Data extraction work was completed by Mr Benjamin Kernich and Jayne
Marshall (both employees of OCSAR). Data was spilt into two data sets: Juvenile
offenders who committed a violent offence towards a parent / step-parent, and
Juvenile offenders who committed a violent offence towards another person who is
not a parent / step-parent.

Data was made available in September 2017, in a de-identifiable excel spread
sheet to enable analyses. Two data bases were provided. The first database
comprised AVTP offenders, who could be analysed in relation to their other
offending behaviour. These analyses formed the first paper (*Adolescent violence
towards parents – a case of specialisation?*). The second data base was of
Adolescents who had been violent towards others (AVTO). Using these two data
bases together allowed the comparisons that formed the final paper of this thesis
(*Adolescent Violence Towards parents - a different trajectory from other young
violent offenders?*).
**Publication: Adolescent violence towards parents – a case of specialisation?**

**AUTHORSHIP STATEMENT**

1. **Details of publication and executive author**

<table>
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<th>Publication details</th>
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<td>Adolescent Violence Towards Parents – a case of specialisation?</td>
<td>Submitted for publication to Psychiatry, Psychology and Law 5 June 2018 – currently under review</td>
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<th>Name of executive author</th>
<th>School/Institute/Division if based at Deakin; Organisation and address if non-Deakin</th>
<th>Email or phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lauren Grace Moulds</td>
<td>School of Psychology Faculty of Health, Deakin University</td>
<td><a href="mailto:lgmoulds@deakin.edu.au">lgmoulds@deakin.edu.au</a></td>
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2. **Inclusion of publication in a thesis**

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<th>Is it intended to include this publication in a higher degree by research (HDR) thesis?</th>
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<th>If Yes, please complete Section 3 If No, go straight to Section 4.</th>
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3. **HDR thesis author’s declaration**

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<tr>
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<td>School of Psychology, Faculty of Health, Deakin University</td>
<td>An investigation of the Australian experience of Adolescent violence towards parents and the potential links with youth justice</td>
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</table>

If there are multiple authors, give a full description of HDR thesis author’s contribution to the publication (for example, how much did you contribute to the conception of the project, the design of methodology or experimental protocol, data collection, analysis, drafting the manuscript, revising it critically for important intellectual content, etc.)

Conceptualisation of the project, completed the narrative overview and drafted the manuscript

*I declare that the above is an accurate description of my contribution to this paper, and the contributions of other authors are as described below.*

<table>
<thead>
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</thead>
</table>

4. **Description of all author contributions**

<table>
<thead>
<tr>
<th>Name and affiliation of author</th>
<th>Contribution(s) (for example, conception of the project, design of methodology or experimental protocol, data collection, analysis, drafting the manuscript, revising it</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Contribution</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Dr Richelle Mayshak</td>
<td>Assistance with data, analyses and provided critical feedback on manuscript</td>
</tr>
<tr>
<td>Professor Andrew Day, then Deakin University, now, James Cook University</td>
<td>Assistance with conceptualisation of manuscript, provided critical feedback on manuscript</td>
</tr>
<tr>
<td>Dr Helen Mildred, Deakin University</td>
<td>Provided critical feedback on manuscript</td>
</tr>
<tr>
<td>Professor Peter Miller, Deakin University</td>
<td>Provided critical feedback on manuscript</td>
</tr>
</tbody>
</table>
5. Author Declarations
I agree to be named as one of the authors of this work, and confirm:
xxi. that I have met the authorship criteria set out in the Deakin University Research Conduct Policy,
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xxiii. that the description in Section 4 of my contribution(s) to this publication is accurate,
xxiv. that the data on which these findings are based are stored as set out in Section 7 below.

If this work is to form part of an HDR thesis as described in Sections 2 and 3, I further
xxv. consent to the incorporation of the publication into the candidate’s HDR thesis submitted to Deakin University and, if the higher degree is awarded, the subsequent publication of the thesis by the university (subject to relevant Copyright provisions).

<table>
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<th>Signature*</th>
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<td>Dr Richelle Mayshak</td>
<td></td>
<td>21/08/2018</td>
</tr>
<tr>
<td>Professor Andrew Day</td>
<td></td>
<td>21/08/2018</td>
</tr>
<tr>
<td>Dr Helen Mildred</td>
<td></td>
<td>21/8/18</td>
</tr>
<tr>
<td>Professor Peter Miller</td>
<td></td>
<td>21/8/2018</td>
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</table>

6. Other contributor declarations
I agree to be named as a non-author contributor to this work.

<table>
<thead>
<tr>
<th>Name and affiliation of contributor</th>
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<th>Signature* and date</th>
</tr>
</thead>
</table>

* If an author or contributor is unavailable or otherwise unable to sign the statement of authorship, the Head of Academic Unit may sign on their behalf, noting the reason for their unavailability, provided there is no evidence to suggest that the person would object to being named as author.
7. Data storage

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</table>

This form must be retained by the executive author, within the school or institute in which they are based.

If the publication is to be included as part of an HDR thesis, a copy of this form must be included in the thesis with the publication.
Adolescent Violence Towards Parents – a case of specialisation?

Abstract

Adolescent violence towards parents (AVTP) is a form of family violence which tests family relationships and the role of parents, and can have lasting impacts on all members of families. The current study aimed to explore typologies of AVTP offenders based on their criminal justice system involvement, as well as explore differences between groups of AVTP based on their offending. Data was collated by the South Australian Office of Crime, Statistics and Research in 2017 and included young people who had been apprehended by the South Australian Police between 2008 and 2012 for violence against a parent or step parent. There were a total of 305 young people included in the study, ranging in age from 10 to 17 years of age. The study found that there were three different groups of AVTP offenders; AVTP offenders, AVTP non-violent offenders who have committed other non-violent crimes, and AVTP violent offender, who have committed other violent crimes outside of their AVTP offence. Findings suggested that an AVTP offence is isolation is a rarity, and most AVTP offenders commit other non-violent or violent offending. The study concluded that AVTP may be a function of general anti-sociality, and occur within the context of a pattern of violent or deviant behaviour, as opposed to a specialist, targeted, isolated incidence of violence.

Key Words: Adolescent Violence, Family Violence, Youth Offending, juvenile offending, parent child relationships, violence, Australian Data, anti-sociality, offending trajectories
Disclosure statement: No financial interest or benefit that has arisen from the direct applications of this research.

Acknowledgment: The Authors would like to acknowledge the assistance and contributions of the South Australian Office of Crime, Statistics and Research (OCSAR) and the South Australian Police.
Introduction

Family violence is a pervasive and damaging problem that can affect people regardless of age, gender, or background (Law Council of Australia, 2017). Adolescent violence towards parents (AVTP) is a distinct form of family violence which tests family relationships and the role of parents, and can have lasting impacts on all members of families. According to the Australian Bureau of Statistics (ABS) (2016), between 2014 and 2015 just over a fifth (21%) of the total offender population were between 10-19 (young offenders), representing 14% of the Australian population. With one fifth of offenders being under the age of 19, understanding the relationship between offending and AVTP has important implications for justice responses such as those from the courts, and for police responses, as well as for intervention, and prevention. Explicit consideration of AVTP offending, and the factors which contribute to, and maintain this form of violence, is likely to enhance intervention approaches. In particular, understanding AVTP within broader offending patterns, and the impacts of this could inform the development of personalised and matched interventions. The purpose of the current study therefore is to explore in what ways various groups of AVTP offenders differ, and then further to examine what factors relate to whether AVTP is a single event, or behaviour situated amongst a broader pattern of antisocial behaviour.

Moulds et al. (2017) recently reported prevalence rates of AVTP in Australia utilising police data from four States. The study determined that, within Australia, according to police reports, approximately 1-7% of families are impacted by AVTP, with the ‘typical’ perpetrator being a 15-17-year-old Caucasian young man who is generally violent towards his mother. Moulds and Day (2017) subsequently concluded that AVTP offenders and their families have a high level of needs, and
members commonly experience difficulties with drugs and alcohol, high rates of trauma, and comorbid mental health concerns. It has also been suggested that individuals who perpetrate AVTP are more likely to associate with negative peer groups and engage in other forms of delinquency (Agnew and Huguley 1989; Kennedy et al., 2010), raising questions about the extent to which AVTP occurs as part of a broader pattern of antisocial behaviour.

Intervention approaches for family violence offenders have often been predicated on the assumption that this group of offenders exclusively commit family violence and do not commit other offences. In other words, they “specialise” and therefore there is a unique need for specialised intervention (Coghlan & Millsteed, 2017). Specialisation in offending refers to when an offender has a tendency to repeat the same specific offence or offence type (Paternoster and Colleagues, 1998), and there is a reasonably large body of evidence to suggest that some offenders become “specialist” in violent offending (e.g. Brennan & Colleagues, 1989; Lynam, Piquero & Moffit, 2004; Cale et al., 2016). Piquero (2000) however, found little evidence of specialisation in violent offending, and so there is some uncertainty about the extent to which AVTP occurs in isolation from other types of offending.

Moffit and colleagues (2000) reported that family violence was statistically significantly associated with other types of offending in a sample of New Zealand men and women. Also, Piquero and colleagues (2006) and Richards and colleagues (2013) have reported that specialisation in family violence is rare. This research, all undertaken with adult perpetrators, has led to an ongoing interest in the identification of specific types of offender. This dates back to Holtzworth-Munroe and Stuart’s (1994) proposal that three subtypes of family violence offenders can be distinguished - “family only batterers”, “dysphoric/borderline batterers” (mostly violent in the home, however some non-family violence and other offending) and “generally
violent/antisocial batterers” (who have extensive and diverse offending patterns). Babcock, Miller and Siard (2003) later reported that half of their sample of female family violence perpetrators in Houston, Texas were “generally violent” (against family and non-family) and the other half were “partner only” violent. Vendura and Davis (2005), found that approximately half of a sample of family violence perpetrators had committed at least one serious non-violent offence, and about one quarter had a violent offence (non-familial) in their criminal history. Boxall, Payne, and Rosevear (2015) conducted a study with a Tasmanian sample over a six-year period and found a clear association between the frequency of family violence incidents and a history of other offending, with almost two out of five family violence perpetrators (39%) having a prior police record. They concluded that there is some evidence of a ‘generally antisocial/violent’ group of family violence perpetrators, with over a quarter of the sample (29%) having been reported to the police for both family violence offences and other offences over the six-year period. Similarly, Coghlan & Millsteed (2017) conducted a study on Victorian family violence perpetrators (n=38,107) between 1 October 2011 and 30 September 2016 to explore specialisation within family violence perpetrators. They found 40% were “generalist perpetrators”, while 60% were specialist offenders who recorded only family violence incidents. Further they found that females were less likely to be generalists than males, and perpetrators who were younger at the time of their first family violence offence were more likely to be generalist offenders, supporting the idea that offending diversification seems to be a function of offending frequency (Farrington, 2986; Piquero, 2000, Piquero & Buka, 2000). This literature suggests that for many, family violence may be part of a broader pattern of offending, although little is known about adolescent perpetrators of AVTP.
It is well known that young people commit a disproportionate amount of crime, representing a significant proportion of the total offending population (Richards, 2011). Offending peaks during adolescence, however it appears that most young people “grow out” of offending, with this relationship between age and crime an accepted opinion within criminology broadly (Richards, 2011; Fagan & Western, 2005). Young offenders differ from adult offenders in regard to types of offences, with young people more frequently being apprehended for offences against property, rather than offences against person (Richards, 2011). It has also been established that young offender populations have a number of groups, each with different patterns of offending and risk factors (Marshall, 2006; Moffit, 1993; Fergusson et al., 2000).

In relation to AVTP Gebo (2007) conducted a study with a small group (n=132) of detained young people, comparing those who had offended against family and those who had not. Just over half of AVTP offenders (56%) had other offending charges. Kennedy et al., (2010) subsequently explored differences between 223 young offenders, 100 AVTP, utilising measures of emotional symptomology, adjustment, behaviour and personality, as well as demographic data, arrest findings, mental health issues, relationship findings, intellectual abilities, and school performance. They determined that those in the AVTP group were more likely to associate with negative peers, have made suicide attempts or be hospitalised or medicated for psychiatric concerns, and have poor relationships with their parents. The groups did not differ however on scores of emotional wellbeing. Offending history was reported to be similar between the groups in terms of the number of previous offences, but different in relation to the kind of charges, with AVTP offenders having significantly more violent offences and significantly fewer property offences. Finally, Contreras and Cano (2014) from their analysis of judicial files in Spain concluded that families who had experienced AVTP were: smaller in size, had
conflictual family relationships, were led by the mother, who had what they referred to as a permissive parenting style.

Understanding different typologies of family violence offenders has important implications for the development and implementation of programs and policies (Coghlan & Millsteed, 2017). Gaining a full understanding of the population of young people who commit AVTP and their unique criminogenic risks and needs, is essential in order to design and implement intervention that is targeted and responsive. The current study aims to explore typologies of AVTP offenders based on their criminal justice system involvement, as well as explore between group differences. Specifically, this study aims to examine:

1. Differences in groups of AVTP perpetrators, in particular exploring heterogeneity in group characteristics e.g. gender, indigenous status and age
2. How prior offences influence AVTP offending, and subsequent how AVTP impacts subsequent offending (e.g. whether they go on to have violent, non-violent offending or no other offending)
3. The impact of actions taken (e.g. court/withdrawn/family conference) when a AVTP offence occurs on groups of AVTP offenders

Method

Data

Following ethical approval from a university ethics committee, data were collated by the South Australian Office of Crime, Statistics and Research (OCSAR) in 2017. Participants were young people who had been apprehended by the South Australian Police between 2008 and 2012 for violence against a parent or step parent.
Some records were removed from the data set by OCSAR due to data inconsistencies (e.g. birth dates). All data were de-identified.

Participants

The final sample included 305 adolescents who had committed AVTP. The sample included 109 females and 192 males, with 4 adolescents’ gender not recorded. The majority of participants were Non-Aboriginal or Torres Strait Islander (263), 31 young people were recorded to be Aboriginal or Torres Strait Islander, and 11 young people recorded no indigenous status. The base age rate varied from 10-17 years of age, with the mean 15 years of age (SD=1.45). Offences recorded, based on OCSAR for AVTP, included aggravated robbery (0.3%), common assault (63.9%), deprivation of liberty/false imprisonment (0.3%), non-aggravated robbery (0.3%), and serious assault not resulting in injury (27.5%), serious assault resulting in injury (27.5%) and threatening behaviour (3.3%). Of the sample only 45 (14.75%) had only one recorded offence which was the AVTP incident.

Definitions

AVTP was identified based on the age of the perpetrator (between 10-18), the relationship of the victim (parent), and the offence. Offences recorded, based on OCSAR for AVTP, included aggravated robbery, common assault, and deprivation of liberty/false imprisonment, non-aggravated robbery, and serious assault not resulting in injury, serious assault resulting in injury and threatening behaviour. For the purpose of this data set, parent or step parent was determined as recorded as a parent/guardian, parents-partner/defector, parents opposite sex partner, parents same sex partner or step parent. SA police data included caregiver under the parent/guardian relationship, and therefore, for some records, the victim may be a carer and not a parent or step parent. In regard to relationship, relationships recorded
by the police refers to the relationship of the offender to the victim, however, for some records, when OCSAR was collating the data, this was reversed. To ensure that all appropriate relationships were included, both combinations were assessed (e.g. son/daughter/step child or parent/step parent/parents partner). A filter was then applied to all victims in the data set, to ensure that at the time, all victims in the data set were aged 18 or over and all individuals apprehended were younger than the victim.

Data preparation

For the purpose of this data set, OCSAR coded pre-and post-offences were classified using the Australian and New Zealand Standard Offence Classification (ANZSOC). ANZSOC has been developed for use within Australia and in New Zealand for the production and analysis of crime and justice statistics. The ANZSOC is a classification with three levels: Divisions (the broadest level), Subdivisions (the intermediate level) and Groups (the finest level). For the purpose of this study, a violent offence was determined as being within the following divisions; homicide and related offences, acts intended to cause injury, sexual assault and related offences, dangerous or negligent acts endangering persons, abduction, harassment and other offences against person, robbery, extortion and related offences.

For each young person, OCSAR recorded a “base” offence. For all the sample (whether they had prior offences or not) this was their first apprehended incident of AVTP. Further, for each young person, their most serious offence was recorded, which was identified by the offence recorded on the police apprehension report with the lowest National Offence Index ranking. The National Offence Index is a tool which provides an ordinal ranking of the offence categories in the Australian Standard Offence Classification (ASOC) according to perceived seriousness in order
to determine a principal offence for an offender with multiple offences. Pre-offences were determined to be any offence recorded against an individual on a police apprehension report that had occurred before the date of the base offence, and similarly post offences, as any offence recorded against the individual on a police apprehension report that occurred after the date of the base offence.

The final sample of 305 cases was divided into two main groups according to their offending records, with AVTP their “base” offence. The first group, termed “family” were adolescents who had only committed a sole AVTP offence, and they had no other recorded offences prior to, or post this offence. This “family” group comprised 45 (14.75%) young people. The second group, called “other”, were young people who had committed other offences prior to, or post the “base” AVTP offence. The “other” group comprised 260 adolescents. The “other” group was subsequently broken down into two sub groups based on whether their other offending was violent or non-violent in nature according to ANZOC classification. It is important to note the post offences could include other cases of AVTP, with the “other” group representing young people with more than one offence (AVTP or other). See Table 5.2 for a breakdown of classification of groups:

<table>
<thead>
<tr>
<th>Group</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family</td>
<td>45</td>
<td>14.5%</td>
</tr>
<tr>
<td>Other</td>
<td>260</td>
<td>85.25%</td>
</tr>
<tr>
<td>Other - Non-violent</td>
<td>65</td>
<td>25%</td>
</tr>
<tr>
<td>Other - Violent</td>
<td>195</td>
<td>75%</td>
</tr>
</tbody>
</table>

Table 5.2: Number of offenders in each group
Data Analysis

Data were first analysed via descriptive analyses including frequency and percentage of all the variables. To explore statistically significant differences between groups, one-way analysis of variance (ANOVA) were used.

Results

Descriptive statistics

The majority of AVTP offenders in any category, were male \( (n=192) \) and non-Aboriginal or Torres Strait Islander \( (n=263) \). Regardless of characteristics such as age, gender or indigenous status, most AVTP offenders had been involved in other types of violent offending. In regard to age, across the whole sample the mean age of the most serious pre-AVTP offence was 14.02 \( (SD=1.61) \). The mean age of the adolescent when they committed the AVTP offence, was 15.03 \( (SD=1.45) \), with the mean age of the most serious post offence being 17.66 \( (SD=17.66) \). See Table 5.3 for a summary of demographics of the data.

Table 5.3: Demographics of offenders in groups

<table>
<thead>
<tr>
<th>Groups</th>
<th>Family</th>
<th>Other Non-violent offending</th>
<th>Other Violent offending</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>26 (23.85%)</td>
<td>29 (26.6%)</td>
<td>54 (49.54%)</td>
</tr>
<tr>
<td>Male</td>
<td>19 (9.89%)</td>
<td>36 (18.75%)</td>
<td>137 (71.35%)</td>
</tr>
<tr>
<td>Not Reported Aboriginal and Torres Strait Islander</td>
<td>2 (6.45%)</td>
<td>6 (19.35%)</td>
<td>23 (74.19%)</td>
</tr>
<tr>
<td>Non-Aboriginal/Torrens Strait Islander</td>
<td>39 (14.82%)</td>
<td>56 (21.29%)</td>
<td>168 (63.87%)</td>
</tr>
</tbody>
</table>

For family AVTP offenders (no other offences), the mean age for the AVTP to be recorded by the police was 14.75 years of age, with the minimum being 11 years of age and the maximum being 17. For Non-violent AVTP offenders, the mean age for AVTP to be reported to the police was 14.89 years, with a minimum of 12
years of age, and a maximum of 17 years of age. Finally, for violent AVTP offenders, the mean age for the AVTP to be reported to police was 15.03, with a minimum age of 10, and a maximum age of 17 for offenders. In regard to patterns of offending for the two groups who had other offences, across the age range for the non-violent group offending in general seemed to peak at age 15, and then slowly decline, with a brief peak in the early 20s (see Figure 5.1). For the violent AVTP offending group, there is a more gradual incline and decline in offending, with a peak at 16 (see Figure 5.2).

Figure 5.1 – Non-Violent AVTP offending group pattern of offending
The Australian experience of Adolescent Violence Towards Parents

Figure 5.2 – Violent AVTP offending group pattern of offending

Inferential statistics

Heterogeneity of AVTP groups

A one-way ANOVA was conducted to compare the effect of indigenous status on offending groups (family, non-violent, and violent). An analysis of variance showed that the effect of indigenous status on offending groups was not significant, $F(2,291)=0.95, p=0.39$.

A one-way ANOVA was conducted to compare the ages of offenders across offending groups (family, non-violent, and violent). An analysis of variance showed that age of offender was not significantly different between offending groups, $F(2,302)=0.37, p=0.69$. This suggests that the age when the AVTP offending occurred, did not differ between groups.

A one-way ANOVA was conducted to compare the effect of gender on whether an AVTP offender was in the AVTP specific, or other offending group. An analysis of variance showed a statistically significant difference in gender between the final offending groups, $F(2, 302)=9.69, p=0.000, r^2=0.25$. Males were
significantly more likely to be part of the violent offending group. However, females and males were both most likely to be part of the violent offending group. See table 5.4 for post hoc analyses.

Table 5.4: Post Hoc Analyses (Tukey HSD) for gender differences between offending groups (family, non-violent and violent)

<table>
<thead>
<tr>
<th>Group</th>
<th>Mean difference</th>
<th>Std. Error</th>
<th>Significance</th>
<th>95% Confidence Interval</th>
<th>Confidence Lower Bound</th>
<th>Confidence Upper bound</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>Non-violent</td>
<td>-.13</td>
<td>0.09</td>
<td>0.35</td>
<td>-.36</td>
<td>0.09</td>
</tr>
<tr>
<td></td>
<td>Violent</td>
<td>-.32</td>
<td>0.08</td>
<td>0.00*</td>
<td>-.51</td>
<td>-.13</td>
</tr>
<tr>
<td>Male</td>
<td>Family</td>
<td>.13</td>
<td>0.09</td>
<td>0.35</td>
<td>-.09</td>
<td>.36</td>
</tr>
<tr>
<td></td>
<td>Violent</td>
<td>-.19</td>
<td>0.07</td>
<td>0.02</td>
<td>-.35</td>
<td>-.02</td>
</tr>
<tr>
<td>Gender not recorded</td>
<td>Family</td>
<td>.32</td>
<td>0.08</td>
<td>0.00*</td>
<td>.13</td>
<td>.51</td>
</tr>
<tr>
<td></td>
<td>Non-violent</td>
<td>.19</td>
<td>0.07</td>
<td>0.019</td>
<td>0.02</td>
<td>0.35</td>
</tr>
</tbody>
</table>

Prior and post offences

For the two groups of offenders with pre/post offending history, violent offenders had larger numbers of pre-and post-offences, in particular post AVTP offences. See Table 5.5 for a summary of pre/post offending. A one-way ANOVA
was conducted to compare the effect of the pre AVTP offending (violent or non-violent) on final offending group.

A one-way ANOVA was conducted to compare the effect of the number of pre-offences on offending group. An analysis of variance showed a statistically significant difference in the number of prior offences (prior to the AVTP charge) between the final offending groups, \( F (2, 302) = 9.46, p=0.00, r^2 = 0.24 \). Meaning, there was a small effect size suggesting that the number of prior offending was significantly different between groups. Post-hoc comparisons using the Tukey HSD test indicated that the mean score for the nonviolent group (\( M=2.11, SD = 4.52 \)) was significantly different from violent offending group (\( M = 6.93, SD = 13.78 \)), in other words, those in the violent offending group had significantly more prior offences than the non-violent AVTP group.

Table 5.5 – Number of prior and post offences

<table>
<thead>
<tr>
<th></th>
<th>Pre-offences</th>
<th>Post offences</th>
<th>Total number of offences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Violent Offenders</td>
<td>469</td>
<td>373</td>
<td>842</td>
</tr>
<tr>
<td>Violent Offenders</td>
<td>1019</td>
<td>3662</td>
<td>4681</td>
</tr>
</tbody>
</table>

A one-way ANOVA was conducted to compare the effect of offending group on number of post offences. An analysis of variance showed a statistically significant difference in the number of post offences between the final offending groups, \( F (2, 302)=30.7, p=0.00, r^2 = 0.29 \). Meaning, there was a small effect size suggesting if someone was part of the violent offending group, as well as higher severity of chargers, they were likely to have higher number of charges. Post-hoc comparisons using the Tukey HSD test indicated that the mean score for the nonviolent group (\( M \))
The Australian experience of Adolescent Violence Towards Parents

$M = 5.74, \ SD = 6.52$) was significantly different from violent offending group ($M = 18.78, \ SD = 20.74$).

**Response/action**

An aim of the study was to explore the differences in justice response to the AVTP offence would impact on group membership e.g. whether in violent/non-violent or only AVTP offending. Analyses suggested that for the majority of cases of AVTP the action taken was either court or family conference (79.3%). *Table 5.6* summarises the breakdown of action taken. A one-way ANOVA was conducted to compare the effect of action of the AVTP offence on offending group (e.g. family, non-violent, and violent). An analysis of variance showed that the effect of action of the AVTP on offending group was not significant, $F(2, 302)=2.976, \ p=0.52$.

**Table 5.6 – Action taken on cases of AVTP**

<table>
<thead>
<tr>
<th>Groups</th>
<th>Family</th>
<th>Non-violent</th>
<th>Violent</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Court</td>
<td>10</td>
<td>20</td>
<td>93</td>
<td>40.3%</td>
</tr>
<tr>
<td>Family Conference</td>
<td>24</td>
<td>34</td>
<td>61</td>
<td>39%</td>
</tr>
<tr>
<td>Formal Caution</td>
<td>6</td>
<td>8</td>
<td>28</td>
<td>13.8%</td>
</tr>
<tr>
<td>Unknown</td>
<td>1</td>
<td>1</td>
<td>8</td>
<td>3.3%</td>
</tr>
<tr>
<td>Withdrawn</td>
<td>4</td>
<td>2</td>
<td>5</td>
<td>3.6%</td>
</tr>
</tbody>
</table>

**Discussion**

The current study aimed to explore typologies of AVTP, and explore the differences within these groups of AVTP offenders, to better direct and tailor response strategies. Specifically, it aimed to understand the heterogeneous, and homogenous attributes of AVTP offenders, to explore gender differences, and what factors influence whether an offender goes on to offend more broadly. The findings of this study broadly determined three different groups of AVTP offenders; AVTP
offenders, AVTP non-violent offenders who have committed other non-violent crimes, and AVTP violent offender, who have committed other violent crimes outside of their AVTP offence. The membership of these groups however suggests that an AVTP offence is isolation is a rarity, and most AVTP offenders commit other non-violent or violent offending. This finding in part builds on the large body of evidence (e.g. Boxall, Payne, and Rosevear, 2015; Brennan & Colleagues, 1989) of adult family violence offenders; it seems “specialising” or only committing AVTP does exist. However, the current research suggests that this is exceptional, with the majority of AVTP offenders being more generally antisocial (e.g. they have other offending), which is in line with Moffit and Colleagues (2000), Piquero and Colleagues (2006) and Richards and colleagues (2013) who also found that family violence was statistically significantly associated with other types of offending and specialisation in family violence were rare.

Analyses from the current study suggested that most AVTP offenders, regardless of gender or indigenous group, have, or go on to offend violently. It supports previous findings (e.g. Moulds & Day, 2017) that most AVTP offenders are male and non-Aboriginal or Torres Strait Islander. In this way, the study suggests that AVTP will be heterogeneous in group characteristics with no significant differences between groups in relation to indigenous status or age, although I note that only small number of variables could be considered. However, males were more likely to be in the AVTP non-violent offending or AVTP violent offending groups than females were, which was in support of adult research into family violence specializations, which found that females were less likely to be generalists than males (Farrington, 1986; Piquero, 2000, Piquero & Buka, 2000). Conversely, the study determined that for both females and males, the most common group was the violent offending group. While these results suggest that gender plays at least some
role in the understanding of group membership, it also suggests that other individual characteristics, such as indigenous status and age, are not related to AVTP offending patterns and membership.

The study established that the volume of prior violent offending was significant in relation to future violent offending occurring. The volume of prior violent offending was significant in relation to future violent offending occurring, meaning both a difference in severity and frequency played a role in understanding group membership. This was in line with Piquero’s (2000) research suggesting that violent offending was a function of increasing offence frequency. The current study seemed to suggest that prior offending was a strong indicator of post AVTP offending, with many individuals who had non-violent pre-offending less likely to have violent post offending, and similarly, many young people who had previous violent offences prior to their AVTP offence, having violent offences post their AVTP offence.

The current study explored in more depth trajectories of offending for these groups and found that the age of offending for AVTP offenders broadly mirrored Moffit’s Developmental Taxonomy, which describes two categories of young offenders’ dependent on stability of antisocial behaviour; adolescent limited and life course persistent (Moffit 1990). For example, the analyses determined that for specialist AVTP offenders (no other offences), the mean age for the AVTP to be recorded by the police was 14.75 years of age. This could be that this event is early in what emerges to be a young person’s violent offending trajectory; for the non-violent group, offending in general seemed to peak at age 15 and then slowly decline, with a brief peak in the early 20s; for the violent AVTP offending group, there is a more gradual incline and decline in offending, with a peak at 16. These patterns were similar to work by Livingstone et al., (2008) who studied a cohort of young offenders
in Queensland in 1983 or 1984. Early peaking–moderate offenders showed an early onset of offending, with a peak around the age of 14 years, followed by a decline, while late onset–moderate offenders had a gradual increase until the age of 16 years. These similarities in AVTP offender patterns to general youth offending patterns may suggest that AVTP offenders have more in common with than difference from other youth offenders and follow a similar pattern of offending.

Finally, the study explored whether justice responses to the AVTP offence would differ between groups e.g. whether in violent/non-violent or only AVTP offending. While analyses suggested that for the majority of cases of AVTP the action taken was either court, or family conference, analyses suggested that the action taken did not have a significant impact on offending group.

Broadly, this research supports work by Gebo (2007) who found that just over half (56%) of AVTP offenders had other offending charges, however, this study identified a much smaller proportion of AVTP offenders. This study provides some supporting evidence for Kennedy et al., (2010), in the sense that the majority of AVTP offenders had violent offences, and significantly fewer non-violent offences, suggesting that AVTP is more likely part of a violent antisocial trajectory, rather than a non-violent offending trajectory.

There are a number of limitations of this study. Firstly, data were obtained from those reported incidents where police intervened. Therefore, the socially constructed nature of crime and police recording needs to be considered, in particular: how/if AVTP is criminally viewed, a parent’s willingness to report, and police’s potential behaviour in these circumstances (Maquire, 2012) – that is, it is possible that AVTP is considered to be considerably less serious that AVTO by authorities as it occurs within the context of a familial relationship.
Given the hidden nature of AVTP, it is suspected that many cases still remain in the private sphere, and that the cases in this study represent only a small number of cases. Due to what information is recorded when police attend, a number of variables could not be incorporated, for example the severity of the AVTP. The most significant limitation is that after the index case of AVTP, it is unknown how many of the following incidents of violent offending occurred within the home. Therefore, some of the later violent offences within the “violent offences” group may have been further AVTP or adolescent family violence more broadly. This suggests that perhaps the “AVTP only” group is an underestimation of young people who “specialise” in AVTP, and rather just reflective of young people who only commit one instance of AVTP. Future research would benefit from being able to further break down the ‘other’ violent group to better understand whether AVTP offenders who commit other violent offences, do so solely against parents, or whether this violence diversifies to other victims. The current study is also limited in its relatively small sample size of AVTP offenders, which may limit generalisability of the findings. Finally, the study was constrained by a lack of recorded individual characteristic based variables, for example child protection history, family dynamics, time in custody, which limited our capacity to understand more refined and nuanced elements of individual difference.

Despite these limitations, the strength in the study is its capacity to look at on-going offending patterns and trajectories of young people who commit AVTP as their only offence or as part of a broader offending trajectory. As noted in the introductory chapters, there any many personal and societal factors which dissuade families from making police notifications about their young person’s violence. In light of this it is likely that a reported incident follows an increase in adolescent aggression towards their parent(s) over time, and possibly is preceded by a number
of unreported AVTP incidents. It may be therefore that in general, the recording of an incident of AVTP by police is a marker for either the commencement of a young person’s violent trajectory (whether AVTP only or violence more broadly), or that it is an indicator of both a cross sectional and longitudinal broader pattern of current violent offending. In either case it would seem important that authorities view a reported incident of AVTP to be a significant flag to the juvenile justice system to implement a firm early intervention/prevention response in an attempt to avert an individual from following an increasingly violent offending trajectory. Overall then this study is important as it allows the understanding of the differences and similarities between these offending groups which could lead to better tailored and responsive treatment approaches that are matched to the specific risk factors and characteristics that contribute to the young people’s offending (Low and Day, 2015).

While the study aimed to explore typologies of AVTP offenders and explore the differences within these groups, it found that while “only AVTP offenders” exist, this is a very small group of young offenders who commit AVTP and the majority of AVTP offenders are ‘generally antisocial/violent’ young offenders. Further research should consider if there are differences between violent young offenders generally and AVTP offenders, to consider if there are unique treatment needs, or if AVTP offenders are strongly similar to violent young offenders. The study suggests that AVTP may be understood within Moffitt Developmental Taxonomy; however, this is an area that would benefit from further analyses. Finally, future research should consider more individual and family based characteristics to understand typologies, for example experiences of trauma and family dynamics, to help add a more sophisticated and tailored approach to understanding typologies within AVTP. The current study suggests that gender and prior offending (frequency and severity) are the most significant factors in understanding group membership (e.g. AVTP only,
violent or non-violent offending) and that age, indigenous status and the action taken to the offence are not significant in membership outcome in regard to further offending for AVTP offenders. It highlights that perhaps AVTP is a function of general anti-sociality, and occurs within the context of a pattern of violent or deviant behaviour, as opposed to a specialist, targeted, isolated incidence of violence.
Publication: Adolescent Violence Towards parents - a different trajectory from other young violent offenders?

Preamble to Study Five:

The final two studies of this thesis were designed to gain an understanding of AVTP within the broader context of young offending, positioning AVTP as an offending behaviour. Study four focused on examining within group differences of AVTP offenders to gain a better understanding of the young people who commit AVTP and whether these young people then go to and further offend, violently or non-violently. The study identified three groups of young people who commit AVTP; those who only commit an AVTP offence, those who commit AVTP and commit other non-violent offending and those who perpetrate AVTP and commit other violent offending. Finding demonstrated that the smallest group comprised young people who only commit AVTP and have no other offending history, and further that AVTP generally occurs within the context of other violent offending behaviour. This therefore posits the question as to whether young people who commit AVTP are different from young people who commit other forms of violence, and if so what are the appropriate justice, health and other interventions. The following study was therefore designed to compare the AVTP group with a group of young people who had been arrested for committing violence against others (not parents). With this study, the focus was on examining differences between one group, AVTP offenders (including all three groups identified above) and a separate group of offenders who engaged in adolescent violence towards others, though not parents (AVTO) offenders.
### AUTHORSHIP STATEMENT

#### 1. Details of publication and executive author

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<td>Submitted for publication to <em>Journal of Family Violence</em></td>
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<th>Name of executive author</th>
<th>School/Institute/Division if based at Deakin; Organisation and address if non-Deakin</th>
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#### 3. HDR thesis author’s declaration

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<td>School of Psychology, Faculty of Health, Deakin University</td>
<td>An investigation of the Australian experience of Adolescent violence</td>
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The Australian experience of Adolescent Violence Towards Parents

If there are multiple authors, give a full description of HDR thesis author’s contribution to the publication (for example, how much did you contribute to the conception of the project, the design of methodology or experimental protocol, data collection, analysis, drafting the manuscript, revising it critically for important intellectual content, etc.)

Conceptualisation of the project, completed the narrative overview and drafted the manuscript

I declare that the above is an accurate description of my contribution to this paper, and the contributions of other authors are as described below.

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<tr>
<th>Name and affiliation of author</th>
<th>Contribution(s) (for example, conception of the project, design of methodology or experimental protocol, data collection, analysis, drafting the manuscript, revising it critically for important intellectual content, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Richelle Mayshak</td>
<td>Assistance with data, analyses and provided critical feedback on manuscript</td>
</tr>
<tr>
<td>Dr Helen Mildred, Deakin</td>
<td>Provided critical feedback on manuscript</td>
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4. Description of all author contributions

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</tr>
<tr>
<td>Dr Helen Mildred, Deakin</td>
<td>Provided critical feedback on manuscript</td>
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| Provided critical feedback on manuscript |
| Professor Andrew Day, then Deakin University, now, James Cook University | provided critical feedback on manuscript |
| Professor Peter Miller, Deakin University | |

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I agree to be named as one of the authors of this work, and confirm:

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xxvii. that there are no other authors according to these criteria,

xxviii. that the description in Section 4 of my contribution(s) to this publication is accurate,

xxix. that the data on which these findings are based are stored as set out in Section 7 below.

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<td>Dr Richelle Mayshak</td>
<td></td>
<td>21/08/2018</td>
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<td>Professor Andrew Day</td>
<td></td>
<td>21/08/2018</td>
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<td>Dr Helen Mildred</td>
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<td>21/8/18</td>
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I agree to be named as a non-author contributor to this work.

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<th>Name and affiliation of contributor</th>
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Adolescent Violence Towards parents - a different trajectory from other young violent offenders?

Abstract

A significant proportion of crimes committed by young people are violent in nature. Adolescent Violence towards Parents (AVTP) represents a type of youth violence which can have lasting and pervasive impacts for families. Understanding how AVTP is similar or different from adolescent violence towards other people (AVTO) has implications for intervention, policy and practice, and helps inform the need to tailor these responses. The current study aimed to compare groups of adolescents who commit AVTP and AVTO, and examine how they differ in regard to offending trajectories. The study used data collected in South Australia over a five-year period of cases of AVTP and AVTO reported to the police. Between group differences were explored, as were offending trajectories using a linear mixed-effects model. Results determined that groups were significantly different in offender characteristics, the number of offences and the responses from the justice system. Trajectory analyses found groups not differ based on age, with variation only regarding the number of offences between groups. Perpetrators of AVTP present as a unique group that warrants tailored, individualised intervention. Both the AVTO and AVTP groups appear to fit within Moffitt’s Developmental Taxonomy, offending appears to be adolescent limited for the majority of offenders.

Key Words: Adolescence, Young Offending, Trajectories, Moffitt Developmental Taxonomy, Adolescent Family Violence, Violent Offending
Introduction

Young people commit a disproportionate amount of crime within the community (Richards, 2011). In Australia, just over one fifth of the total offending population is between 10-19 years of age (Australian Bureau of Statistics (ABS), 2017). Some studies have suggested that as many as 50% of young people who have involvement in the youth justice system progress to the adult criminal jurisdiction (Lynch, Buckman & Krenske, 2003). Of crimes committed by young people, approximately 16% are offences against person and are violent in nature (ABS, 2017). Adolescent Violence towards Parents (AVTP) represents a form of violent offending where the victims of the violence are parents, and the traditional parent-child dynamic is challenged.

A recent study using police data from South Australia looked at whether AVTP occurs as an isolated offence or whether it was part of a broader pattern of offending (Moulds et al., 2019). Results suggested that AVTP may be a function of general anti-sociality, and concluded that it is most likely part of a pattern of non-violent or often violent offending as opposed to isolated, targeted violence only against parents; however, what remains unclear is the pattern or propensity for repeated offending. The study found that the most common offences to co-occur with AVTP were violent offences, highlighting a need to explore between group differences between AVTP and other young people who commit violent offences. The purpose of the current study was to investigate whether AVTP offenders and AVTO offenders differ in regard to demographics and offending trajectories. It is anticipated that the findings of this work will have implications for policy and practice regarding how AVTP and AVTO should and could be responded to, and intervened with. More specifically, it aims to determine if those who commit AVTP
are largely similar to AVTO offenders, and therefore are likely to have the same treatment needs and general violence prevention programs can be utilised, or if specialised, whether tailored programs regarding AVTP are more appropriate.

*Adolescent Violence towards Parents*

Recently, there has been an increase in awareness of family violence and to a lesser extent, adolescent perpetrated family violence (State of Victoria, 2016). AVTP is a form of adolescent family violence where a 10 to 18-year-old harms their parents though physical, psychological, emotional, social or financial abuse (Moulds et al., 2016). Moulds and colleagues (2017) determined that within Australia approximately 1-7% of all reported family violence incidents reported to the police are AVTP. The occurrence rises to approximately 10% of families within global community based studies (Moulds et al., 2016). AVTP offenders are typically male, between 15-17 years of age, Caucasian and have clinical complexity with mental health concerns, drug and alcohol use, trauma histories and difficulties with schooling (Moulds et al., 2017; Moulds & Day, 2017). Simmons and colleagues (2018) found that AVTP peaks in mid adolescence (approximately 15 years of age) and then declines with age, a pattern which is particularly noticeable with female AVTP offenders. Research has also indicated that individuals who are violent towards their parents are more likely to associate with negative peer groups and engage in other forms of delinquency, suggesting that it is part of a broader pattern of antisocial behaviour and aggression, similar to adolescent violence generally (Agnew & Huguley 1989; Calvete, et al., 2014; Kennedy et al., 2010; McCloskey & Lichter, 2003; Moulds et al., 2018; Pagani et al., 2003, 2004, 2009; Simmons et al., 2018).
Youth Violence

Violence is a dominant global social, criminal justice and public health problem. It is profoundly damaging and has pervasive social and economic impacts that require nuanced policy and intervention responses (Davies & Pearson, 1999; Malvaso et al., 2018). Polaschek and Day (2018) has suggested that the more violent offenders are the more likely they are entrenched in a criminal lifestyle involving other offending, such as driving or property offences. Offences often occur simultaneously (e.g. a robbery and trespass), and there is a commonality of both violent and non-violent offences forming part of a person’s offending history. Given this overlap, Polaschek and Day (2018) argues that offences in an individual’s history should be considered as a whole, rather than specialised or unique events. Therefore, some have concluded that there is more likely difference within groups of violent offenders, (for example in relation to situational factors), rather than between groups of violent and non-violent offenders (Polaschek & Day, 2018). Some researchers suggest that some offenders do “specialise” in violent offending (e.g., Besemer, 2012; Osgood & Schrek, 2007; Thomas, 2013), whereas, other research has found youth offending is versatile in nature, with little evidence of specialisation in violent offending (Brame, Mulvey, Piquero, & Schubert, 2014; Farrington, Synder, & Finnegan, 1988; Piquero, 2000). Research and intervention into adult family violence broadly and traditionally assume that family violence is a specialised behaviour, and therefore needs to be targeted in a specialised intervention e.g. men’s behaviour change programs (Moffitt et al., 2000; Coghlan & Millsteed, 2017).
AVTP and violent offending

AVTP is an emerging area of research focus and as such, does not yet have an extensive literature base. Some of the key findings investigating AVTP include that it has been linked to broader offending by some researchers (Kethineni, 2004; Kennedy et al., 2010). A recent study by Moulds et al., (2018) examined South Australian police charges to test whether there are ‘typologies’ of AVTP offenders. The study determined that there are three groups of AVTP offenders; solely AVTP offenders (who have no other offending), AVTP non-violent offenders who have committed other non-violent crimes, and AVTP violent offenders, who have committed other violent crimes outside of their AVTP offence. Importantly the study concluded that AVTP occurring within isolation, without any other offending, was rare. Most AVTP offenders commit other non-violent or violent offences. Further it found that most AVTP offenders, regardless of gender or Aboriginal status, have prior to, or post their AVTP offence been charged with other violent offences, and that this is the most common outcome for AVTP offenders. In line with this, it found that a difference in both the severity and frequency of prior offending was related to whether they were likely to offend violently in the future. This finding regarding offending trajectories was similar to Piquero (2000) who found that violent offending was a function of increasing offence frequency. Another article by Kennedy and colleagues (2010) compared a group of 100 AVTP offenders and 123 non AVTP offenders on: demographics; offending history; mental illness; relationships; intellectual functioning; and schooling. Their study determined that AVTP offenders differed from other offenders in that they were more likely to have an antisocial peer group, have psychiatric concerns, and have difficulties within their family relationships. They found that AVTP offenders were more likely to commit violent offences compared to non-AVTP offenders, who were more likely to be charged
with property offences. These authors however, found no differences between the
two groups in terms of emotional and personal adjustment, other behavioural factors,
or in the number of offences or charges incurred. Ibabe, Jauréguizar & Diaz (2009)
found that AVTP young people have a differential personal and family profile
compared to other young offenders, with AVTP offenders typically experiencing
more violence and difficulties with substance use. They also found AVTP offenders
were more typically from single-parent families, than other young offenders and
were more likely to have been exposed or victim to family violence – reinforcing the
importance of the role of trauma.

Overall then, it is possible that young people reported for AVTP may differ
from other young offenders in their demographics, such as age and gender, and
moreover, it may be that the response of the justice system differs for AVTP
offenders in comparison to other violent offenders. Understanding how AVTP and
other young violent offenders differ in regard to demographics and other factors has
important implications for determining and assessing risk as well as planning and
implementing intervention.

**Offender Trajectories**

Since the 1980s there has been an increase in interest in individual patterns
of offending or criminal trajectories (Marshall, 2006). Trajectories are patterns and
sequences of offending over age or time that can be used to explain the progression
of crime across the life course (Nagin & Tremblay, 2005). Understanding offending
trajectories has important implications, primarily around predicting future offending
behaviour and informing points of intervention and policy direction (Sampson &
Laub, 2003; Smallbone & Cale, 2015). The Age Crime Curve is the assumption that
criminal behaviour starts in late childhood or early adolescence, increases during
adolescence, peaks in late adolescence or early adulthood, and then declines (Fagan & Western 2005; Sutherland, 2016). While early theorists (e.g. Hirschi & Gottfredson, 1983; Farrington, 1986) hypothesise that the curve is invariable and universal across individuals or groups of individuals, there is now significant evidence to suggest distinct groups of offenders can be identified based on different patterns of offending (Moffitt, 1993; Piquero, 2008). In prior trajectory studies, a number of unique offending trajectories have been determined. These include varying numbers of types and patterns of behaviours, with almost always at least one life course persistent trajectory and one adolescent limited trajectory, with the majority of studies assuming that the aetiology for each group is different (Fergusson, Horwood, Nagin, 2000; Jennings & Reingle, 2012; Piquero & Brame, 2008).

*Developmental Life-course Perspectives of Crime*

Criminal behaviour and desistance from offending is best understood with consideration of individual differences, individual life events and criminal propensity. Developmental Life-course Perspectives of Crime (DLC) aim to explain and model the evolution of crime within the context of how life conditions and other risk factors can influence the onset, trajectory, and desistance of offending (Livingston, Stewart, Allard & Ogilive, 2008). From a DLC perspective, the age of onset is more of a process than an event, or discrete incident (Smallbone & Cale, 2015).

One of the most well-known DLC theories is Moffitt’s Developmental Taxonomy (1990). Moffitt’s Developmental Taxonomy describes two categories of young offenders’ dependent on stability of antisocial behaviour: adolescent limited, and life course persistent. The majority of offenders are adolescent limited offenders,
who typically do not engage in antisocial behaviour prior to or after adolescence, and their offending is typically driven by social mimicry and the desire to be independent and mature. When the adolescent is able to gain independence and matures naturally, by pro-social means, the offending usually ceases, and therefore is limited to a period within adolescence (Moffitt, 1995). In contrast, life course persistent offenders, who make up approximately 5% of offenders, display antisocial behaviours from an early age and have problematic behaviour from early childhood through adulthood (Casey, 2011). At the individual level, life course persistent offending is associated with neuropsychological deficits, particularly with verbal intelligence and difficulties with executive functioning and other contextual factors which supports the maintenance of criminal behaviour (Moffitt, Lynam & Silva, 1994). Moffitt’s theory is well supported by the literature and has influenced research and the development of alternative taxonomies (Caspi & Moffitt, 1995; Moffitt, 2007; Moffitt et al., 2002; Odgers et al., 2008; Piquero, Farrington, Nagin & Moffitt, 2010; Polaschek & Day, 2018).

A number of other theorists have developed or built upon Moffitt’s theory and suggested varying numbers of trajectories. For example, Fergusson et al, (2000) identified five offending trajectories: non-offenders; moderate risk offenders; adolescent onset offenders; chronic offenders, with adolescent onset; and chronic offenders. Also, Marshall (2006) found six groups of young offenders termed; very low desister; very low persister; moderate late; moderate early; high; and very high. There has been limited research to explore whether DLC theories can be applied to AVTP however, and whether they offer a useful framework to understand this behaviour (Holt, 2016; Kauy et al., 2017). This research would have important implications for understanding if AVTP is strongly linked to perpetration of adult family violence or adult offending more broadly, and would help to provide a
trajectory to begin work on understanding the key points for intervention to try and reduce the behaviour and its impacts.

Offending trajectories and AVTP

Little work has been conducted to consider if Moffitt’s Developmental Taxonomy is a good fit for AVTP, or more broadly, to establish the trajectory of AVTP offending. Research has suggested that young people who perpetrate AVTP are different from other young offenders (e.g. Brezina, 1999; Kennedy et al., 2010; Walsh & Krienert, 2007), with Ibabe and Jaureguizar (2010) finding that AVTP offenders constitute a unique group of offenders with a particular psychosocial profile. They are also likely to have different experiences of the justice system, for example, Gebo (2007) found that young people sentenced for family violence cases were dealt with more leniently than young people being sentenced for other offences. Research into AVTP and other offending or AVTP offending trajectories has only recently been emerging. It is important to note in this analysis that AVTP offenders who come through the criminal justice system represent a distinct group, often those who are already involved in the system and therefore may already have problematic family relationships (Holt, 2012). While studies outlined above argue that AVTP reported to the police is likely one part of a broader pattern of offences, it is unclear if these patterns or trajectories of offences are similar to or different from other young offenders. Moulds et al., (2018) have suggested that most commonly AVTP reported to the police occurs within the context of other young violent offending, understanding how young people who are violent towards parents and young people who are violent towards others differ in their offending trajectories is important. Moreover, understanding whether these trajectories are similar to young offenders who are violent more broadly, where typically violent offending is a function of increasing offence frequency (Piquero, 2000). Having more nuanced information
concerning these two groups may yield findings which can be used to develop appropriate systemic interventions for these groups of young people.

*The current study*

The current exploratory study aims to establish more conclusively on which factors (if any) AVTP and Adolescent Violence towards Others (AVTO) groups of offenders differ in terms of their characteristics, and their offending trajectories. It utilises data from the South Australian Police, gained from the South Australian Office of Crime Statistics & Research (OCSAR) which included data collected over a five-year period on violent offences that occurred against parents and against others (not parents). Gaining an understanding of the trajectories of AVTP and AVTO offenders and how these groups are similar and different is essential in order to determine whether targeted intervention is needed. The current study contributes to, and expands upon, the current knowledge base on AVTP in a number of important ways. It aims to be the first study which develops trajectories of AVTP between the ages of 10-26, providing a broad overview of how these behaviours change over adolescence, as well as determine if Moffitt’s Developmental Taxonomy is an appropriate and useful model to use in order to understand AVTP over time, which in turn, could help inform policy and practice.

The study aims therefore to determine if there are differences between AVTO and AVTP offenders on general demographics features such as gender, age and Aboriginal status, as well as prior and post offences. Secondly, it aimed to examine whether AVTP and AVTO offenders have similar or different trajectories of offending, and if these trajectories can be understood within the framework of Moffitt’s Developmental Taxonomy. The rationale for investigating these aims is to broadly consider if these groups and their associated offending trajectories are
different. This in turn could inform policy makers and practitioners as to whether tailored treatment is needed to change trajectories for AVTP offenders, or if they are strongly similar to AVTO offenders and therefore intervention can be informed by the larger body of research into adolescent violence and altering this criminal trajectory.

Whilst it is acknowledged that this study is exploratory, based upon the literature described above, it was hypothesised that (1) AVTO and AVTP offenders will differ on basic demographics (e.g. gender, age, age of first offence, Aboriginal status and number of offences), (2) There will be no differences in trajectories between AVTP and AVTO in regards to age, (3) AVTO and AVTP trajectories will differ in frequency of offending, with the AVTO group having a significantly higher number of offences.

**Method**

**Data**

Following ethical approval, data were collated by the South Australian Office of Crime, Statistics and Research (OCSAR) in 2017. Two groups of participants were collected. The first group was young people who had been apprehended by the South Australian Police (SAPOL) between 2008 and 2012 for violence against a parent or step parent, this group was called Adolescent Violence towards Parents (AVTP). The second set was young people who had been apprehended between 2008 and 2012 for a violent offence against a person other than a parent or step parent, this group was called Adolescent Violence towards Others (AVTO). All participants were aged between 10 and 17 years of age at the time of their ‘base’ offence. Some
records were removed from the data set by OCSAR due to data inconsistencies (e.g. birth dates). All data were de-identified.

Participants

The study included a total sample of 1480 adolescents. The final sample of AVTP offenders included 305 adolescents who had committed AVTP. This group included any young person who had committed AVTP, and any other offences (including violence against others). Only a small number in the AVTP had committed solely an AVTP offence \((n=45, 14.75\%)\), with the majority of adolescents in this group having committed AVTP within broader pattern of offending \((n=260, 82.25\%)\), the majority other violent offending \((n=195, 75\%)\) (Moulds et al, 2019).

The sample included 109 females (35.74%) and 192 males (62.95%), with four genders not recorded (1.31%). The majority of participants were non-Aboriginal \((n=263)\), 31 young people were recorded to be Aboriginal (for 11 young people no Aboriginal status was recorded). The base age rate varied from 10-17 years of age, with the mean being 15 years of age \((SD=1.45)\). Offences recorded based on OCSAR for AVTP included: aggravated robbery (0.3%), common assault (63.9%), deprivation of liberty/false imprisonment (0.3%), non-aggravated robbery (0.3%), serious assault not resulting in injury (27.5%), serious assault resulting in injury (27.5%) and threatening behaviour (3.3%).

For the AVTO group, the final sample included 1775 adolescents who had committed AVTO. Individuals in this group had not committed AVTP (that was known/reported to police). The sample included 501 females (28.23%) and 1249 males (70.36%), with 4 adolescents’ genders not recorded (1.41%). The majority of participants were non-Aboriginal \((n=1255, 70.7\%)\), 447 young people were recorded to be Aboriginal, and 73 (25.18%) young people had no Aboriginal status recorded.
The base age rate varied from 10-17 years of age, with the mean 15.54 years of age. The most commonly recorded offences, based on ANZOC descriptions for AVTO, were aggravated robbery (10.59%), common assault (24.9%), serious assault not resulting in injury (41.52%), and serious assault resulting in injury (16%).

Data coding

For the purpose of this data set, pre-and post-offences were classified by OCSAR using the Australian and New Zealand Standard Offence Classification (ANZSOC). ANZSOC has been developed for use within Australia and in New Zealand for the production and analysis of crime and justice statistics. The ANZSOC is a classification with three levels: Divisions (the broadest level), Subdivisions (the intermediate level) and Groups (the finest level). For the purpose of this study, a violent offence was determined as being within the following divisions: homicide and related offences; acts intended to cause injury; sexual assault and related offences; dangerous or negligent acts endangering persons; abduction; harassment and other offences against person; robbery; and extortion and related offences.

For the AVTP group, AVTP was identified based on the age of the perpetrator (being between 10-17 years of age), the relationship of the victim (parent), and the offence. As noted above, offences recorded based on OCSAR for AVTP included: aggravated robbery, common assault, deprivation of liberty/false imprisonment, non-aggravated robbery, serious assault not resulting in injury, serious assault resulting in injury and threatening behaviour. For the purpose of this data set, parent or step parent was recorded as a parent/guardian, parent’s-partner/defacto, parent’s opposite sex partner, parent’s same sex partner, or step parent. SAPOL data included caregiver under the parent/guardian relationship and therefore for some records the victim may be a carer and not a parent or step parent. In regard to relationship, those recorded by the police refer to the relationship of the offender to
the victim; however, this was reversed for some records when OCSAR was collating the data. To ensure that all appropriate relationships were included, both combinations were assessed (e.g. son/daughter/step child or parent/step parent/parents partner). A filter was then applied to all victims in the data set to ensure that at the time, all victims in the data set were aged 18 or over and all individuals apprehended were younger than the victim.

For the AVTO group, AVTO was identified based on offences which included: abduction and kidnapping, aggravated robbery, aggravated sexual assault, attempted murder, common assault, dangerous or negligent operation (driving) of a vehicle, deprivation of liberty/false imprisonment, driving causing death, manslaughter, murder, non-aggravated sexual assault, non-assaultive sexual offence, other dangerous or negligent acts endangering persons, serious assault not resulting in injury, serious assault resulting in injury, stalking, and threatening behaviour. Cases of AVTP where the relationship as outlined above suggested that the victim was a parent were excluded from the AVTO group, ensuring that all included cases of AVTO referred to violence against a person other than a parent or step parent. The number of offences at differing age points was collected for both AVTP and AVTO groups and ranged across ages from age 10 to age 26 years. While the emphasis is on young offending, the analyses extended into the mid 20s to allow a longer period for analysis in order to explore offending trajectories over time. There was no missing data in the outcomes, as any lack of data simply indicated that the participant had not committed an offence (or been charged with one) during these years.
Data preparation

For each young person, OCSAR recorded a “base” offence, this was the offence which qualified the individual to be included within the AVTP or AVTO group (depending on the victim of the offence). If the individual was apprehended for more than one violent offence during the base period (2008 -2012) the most serious offence was counted. For the AVTP group (whether they had prior offences or not) this was their first apprehended incident of AVTP. For the AVTO group, their “base” offence was the offence that qualified them to be part of this group (e.g. their first violent offence against someone) . Further, for each young person in either group, their most serious offence prior and post their base offence was recorded, which were identified by the offence recorded on the Police Apprehension Report with the National Offence Index ranking. The National Offence Index is a tool which provides an ordinal ranking of the offence categories in the Australian Standard Offence Classification according to perceived seriousness, in order to determine a principal offence for an offender with multiple offences. Pre-offences were determined to be any offence recorded against an individual on a police apprehension report that had occurred before the date of the base offence, and similarly post offences, as any offence recorded against the individual on a police apprehension report that occurred after the date of the base offence. For each individual the total number of offences at each age was recorded.

Data Analysis

Analyses were purposefully hypothesis driven. Both data sets were first examined via descriptive analyses including frequency and percentage of all the variables. To explore whether AVTO and AVTP offenders differ on basic demographics, one-way ANOVAs were conducted; Bivariate (chi-square) statistics were conducted to explore group differences on key categorical variables of interest
(e.g. race and gender). Trajectories for AVTO and AVTP were conducted using linear mixed-effects modelling to explore number of offences for both groups. Using maximum likelihood estimation, linear-mixed effect models incorporate all available data to estimate parameters in the model. This approach involves the estimation of both fixed and random effects. Linear mixed modelling can handle missing data and correlated observations in repeated-measures data and estimate fixed and random effects in one model (Gueorguieva & Krystal, 2004; Yoo, 2010). Linear mixed-effects models retain all observations from participants, resulting in less unexplained variance and more statistical power. It also manages unbalanced and missing data better than more conventional statistical methods, and gives more weight to participants with more data (Baayen, Davidson, & Bates, 2008; Barr, Levy, Scheepers, & Tily, 2013; Gelman & Hill, 2006). Statistical analyses were performed using SPSS version 25 (IBM Inc., Armonk, NY, USA).

Results

Descriptive statistics

The final group consisted of 2080 young people; 84.1% \((n=1775)\) had been arrested for AVTO, with 14.4% \((n=305)\) arrested for AVTP. Of the final group, the majority were male \((68.3% \,(n=1441))\) with a minority \((28.9% \,(n=610))\) female. The majority were non-Aboriginal (Aboriginal \(n=478\, (22.6%)\), non-Aboriginal \(n=1518\, (71.9%)\), not reported \(n=84\, (4%)\)). Over three quarters \((77.3%, \,n=1634)\) had 10 or less prior offences to their AVTP offence or most serious base offence, with 32.2% \((n=680)\) having no prior offending. The mean age of the adolescent when they committed their base offence, AVTP or AVTO, was 15.47 \((SD=1.59)\). For a summary of the two groups demographics, see Table 5.7.
Table 5.7: Group Demographics

<table>
<thead>
<tr>
<th>Gender</th>
<th>Male</th>
<th>Female</th>
<th>Aboriginal</th>
<th>Non-Aboriginal</th>
<th>Not reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>AVTP</td>
<td>192</td>
<td>109</td>
<td>31</td>
<td>263</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>(62.95%)</td>
<td>(35.74%)</td>
<td>(10.16%)</td>
<td>(86.23%)</td>
<td>(3.61%)</td>
</tr>
<tr>
<td>AVTO</td>
<td>1249</td>
<td>501</td>
<td>478</td>
<td>1255</td>
<td>73</td>
</tr>
<tr>
<td></td>
<td>(70.37%)</td>
<td>(28.23%)</td>
<td>(26.93%)</td>
<td>(70.70%)</td>
<td>(4.11%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Action to base offence</th>
<th>Court</th>
<th>Family conference</th>
<th>Formal caution</th>
<th>Unknown</th>
<th>Withdrawn</th>
</tr>
</thead>
<tbody>
<tr>
<td>AVTP</td>
<td>123</td>
<td>119</td>
<td>42</td>
<td>10</td>
<td>11(3.61%)</td>
</tr>
<tr>
<td></td>
<td>(40.33%)</td>
<td>(39.02%)</td>
<td>(13.77%)</td>
<td>(3.28%)</td>
<td></td>
</tr>
<tr>
<td>AVTO</td>
<td>1110</td>
<td>367</td>
<td>81</td>
<td>30</td>
<td>30 (1.69%)</td>
</tr>
<tr>
<td></td>
<td>(62.54%)</td>
<td>(20.68%)</td>
<td>(10.54%)</td>
<td>(4.56%)</td>
<td></td>
</tr>
</tbody>
</table>

Hypothesis 1: AVTO and AVTP offenders will differ on basic demographics (e.g. gender, age of base offence, Aboriginal status and number of offences)

A chi-square test was performed to compare the effect of gender on offending group (AVTP and AVTO). The test found a relationship between gender and offending group, $\chi^2 (2) = 7.09$, $p = .03$, $\phi = .06$, $p = .02$. There was a small effect of significantly more males in the AVTO group (70.37%) than the AVTP group (62.95%).

A chi-square test was performed to compare the effect of Aboriginal status on offending group (AVTP and AVTO). The test found a relationship between Aboriginal status and offending group, $\chi^2 (2) = 34.31$, $p = .00$, $\phi = .128$, $p = .00$. This effect size was small; however, there were significantly less Aboriginal young people in the AVTP group.

A chi-square test was performed to compare the actions taken to their base offence (e.g. court, family conference) across offending groups (AVTP and AVTO). An analysis showed that action taken to their base offence was significantly different between offending groups, $\chi^2 (4) = 67.429$, $p = .00$, $\phi = .180$, $p = .00$. This suggests that the action taken post their base offence did differ between groups. The AVTO group were significantly more likely to have their base offence dealt with by the
courts, with the AVTP group significantly more likely to have their matter dealt with via family conference.

A one-way ANOVA was conducted to compare the base age of initial offence across offending groups (AVTP and AVTO). Analysis showed that the base age of the AVTP group \( (M = 15.03, SD = 1.45) \) was significantly lower than that of the AVTO group \( (M = 15.54, SD = 1.60) \), \( F (1, 2078) = 27.13, p < .001, \eta^2 = 0.01 \).

A one-way ANOVA was conducted to compare the number of prior offences (to their base offence) across offending groups (AVTP and AVTO). Analysis showed that the number of prior offences of the AVTP group \( (M = 4.88, SD = 11.55) \) was significantly lower than that of the AVTO group \( (M = 7.50, SD = 13.70) \), \( F (1, 2078) = 9.97, p = .02, \eta^2 = 0.00 \).

A one-way ANOVA was conducted to compare the number of post offences (to their base offence) across offending groups (AVTP and AVTO). Analysis showed that the number of post-offences of the AVTP group \( (M = 13.23, SD = 18.47) \) was significantly lower than that of the AVTO group \( (M = 15.96, SD = 21.49) \), \( F (1, 2078) = 4.37, p = .04, \eta^2 = 0.00 \).

**Hypothesis 2:** There will be no differences in trajectories between AVTP and AVTO in regard to age.

A mixed effects regression model was conducted to determine offending trajectories for AVTO and AVTO offenders, and to explore differences in these trajectories. There was no difference in age (time) in terms of offences \( (p=0.15) \) between AVTP and AVTO. This suggests that trajectories of offending across age do not differ by group, see *Figure 5.3* for average number of offences by age and by offender group. For the AVTO group, the number of offences seems to peak at age 16 to age 17, and then steadily decline post this point until 26 years of age. For the
AVTP group, the peak seems to be at 16, and then quickly decline from this point to age 26.

\[ \text{Figure 5.3: Trajectories by age and by offender group} \]

\textit{Hypothesis 3: AVTO and AVTP trajectories will differ in frequency of offending, with the AVTO group having a significantly higher number of offences.}

Analyses identified that there were differences in regard to number of offences between the AVTP and AVTO groups \((p=0.00)\). The residual variance was significant \((z=132.96, p=0.000)\), suggesting significant variance between individuals around the individual regression lines. The AVTO group had a significantly higher number of offences across the time period. See \textit{table 5.8} for estimates of fixed effects and estimates of covariance parameters.
Table 5.8: Estimates of fixed effects and Estimates of Covariance Parameters

**Estimates of fixed effects**

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Estimate</th>
<th>Standard Error</th>
<th>df</th>
<th>$t$</th>
<th>Sig.</th>
<th>95% Confidence Interval</th>
<th>Lower bound</th>
<th>Upper bound</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept</td>
<td>2.30</td>
<td>0.05</td>
<td>4160.99</td>
<td>50.02</td>
<td>0.00*</td>
<td>2.21</td>
<td>2.39</td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>-0.07</td>
<td>0.02</td>
<td>0.97</td>
<td>-4.51</td>
<td>0.15</td>
<td>-0.30</td>
<td>0.15</td>
<td></td>
</tr>
<tr>
<td>Group 1 (AVTP)</td>
<td>-0.60</td>
<td>0.11</td>
<td>84.43</td>
<td>-5.21</td>
<td>0.00*</td>
<td>-0.83</td>
<td>-0.37</td>
<td></td>
</tr>
<tr>
<td>Group 2 (AVTO)</td>
<td>0b</td>
<td>0</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

**Estimates of covariance of parameters**

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Estimate</th>
<th>Standard Error</th>
<th>Wald</th>
<th>Significance</th>
<th>95% Confidence Interval</th>
<th>Lower bound</th>
<th>Upper bound</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residual</td>
<td>14.76</td>
<td>0.11</td>
<td>132.96</td>
<td>0.00*</td>
<td>14.54</td>
<td>14.97</td>
<td></td>
</tr>
<tr>
<td>Between-person variance</td>
<td>0.00</td>
<td>0.00</td>
<td>0.62</td>
<td>0.54</td>
<td>0.00</td>
<td>0.01</td>
<td></td>
</tr>
</tbody>
</table>

a. Dependant variable: number of offences
b. This parameter is set to zero because it is redundant
* - $p<0.00$

**Discussion**

**Summary of findings**

The current study aimed to explore whether AVTP and AVTO groups of offenders differ in characteristics and offence trajectories, with the hope of contributing to the evidence informing whether targeted intervention is needed. Broadly, it aimed to consider if tailored treatment is needed to change trajectories for these offenders, and/or whether AVTP offenders are strongly similar to violent young offenders where addressing violence is the central component to altering a criminal trajectory.
As predicted, AVTO and AVTP offenders did differ on basic demographics. AVTO offenders were significantly more likely to be male, identify as Aboriginal, and be slightly older when their offence occurred, in comparison to AVTP offenders, however these differences were small in size. Perhaps the higher prevalence of males and Aboriginal young people in this circumstance is reflective of the higher prevalence of males and Aboriginal young people in the youth criminal justice system and the overrepresentation of males and Aboriginal young people who are adjudicated, or perhaps is reflective of the demographics of the sample (Kauy et al., 2017). AVTO offenders were also significantly more likely to have a greater number of both prior and post offences; however again, this difference was minimal. AVTO offenders were very significantly more likely to have their base offence dealt with by the courts and AVTP offenders were more likely to have their matter dealt with via family conference. This finding is consistent with that of Gebo (2007) who noted that AVTP offenders were dealt with more leniently than other offenders. This area would benefit from more research to explore the mechanism of this difference, especially in order to identify whether actions such as family court are preventative of longer term offending patterns.

The findings supported both hypotheses related to AVTP and AVTO trajectories; the trajectories were almost identical, with the only difference that AVTO offenders tended to offend more than AVTP offenders. Modelling of offending trajectories for AVTO and AVTO offenders found no difference in age (time) in terms of offences between AVTP and AVTO, broadly suggesting that based on age the trajectories of offending across age do not differ by group. Significant differences were seen in regard to peaks in offending in regard to number of offences. This was in support of previous findings that violent offending is related to increasing offence frequency and a greater risk of entrenchment in offending.
behaviour (Piquero, 2000; Polaschek & Day, 2018). For both AVTP and AVTO groups, they appeared to peak in regard to number of offences at approximately 16 - 17 years of age. These peaks were slightly later than previous studies, which suggested that AVTP peaks at approximately 15 years of age, and then declines (Simmons et al., 2018). Analyses broadly identified significant between group differences, confirming the earlier finding that there are significant differences between AVTP and AVTO offenders, and furthermore, significant individual differences within each of these groups.

In reflecting on Moffitt’s (1993) theory, it seems that for the majority of AVTP and AVTO offenders their offending began in early adolescence, peaked around 14-17 years of age, and appeared to decline in later adolescence – in other words, it seems adolescent limited. This finding was similar to work by Livingstone et al., (2008) who found early peaking–moderate offenders showed an early onset of offending, with a peak around the age of 14 years followed by a decline, while late onset–moderate offenders had a gradual increase until the age of 16 years. This finding is also consistent with other research that concludes that AVTP peaks in mid adolescence and then declines with age (Simmons et al., 2018). However, Piquero (2008) further identified a late-onset chronic group, whose offending begins during adolescence and continues into adulthood. For the AVTO group in particular, exploring the potential for a late-onset chronic group would be worthy of further exploration. Other DLC theorists have suggested more groups of young offenders, for example Marshall (2006) found six distinct groups of young offenders, including very low desister, very low persister, moderate late, moderate early, high and very high. Livingston and colleagues (2009) reported three primary young offender trajectories – early peaking-moderate offenders, late onset-moderate offenders and chronic offenders. It may be the case that AVTP and AVTO is better conceptualised
within these frameworks for a more nuanced understanding of their trajectories and patterns. Finally, Salvatore, Tanigucgu and Welsh (2012) argued for a new group of offender, the “prolonged adolescent” with low level offences between 18 and 25 as the offender failed to successfully transition to adult social roles. Given that offending was still reducing until age 26, with particular marked reductions from age 18-20, this may be an important consideration for both groups. This is in line with the work of Piquero et al., (2007) which suggests that the early 20s is a key time where desistance processes appear to be in operation.

The results of the current study could be interpreted as providing tentative support for the applicability of DLC theories, with heterogeneity both within groups and between groups, which can be accounted for to an extent by the dual taxonomy of adolescents as adolescent-limited and life course persistent. For example, evidence from the present study indicated that the composition of the groups differed significantly according to gender and Aboriginal status. While this does not directly indicate that different etiological processes operate across the different offending groups, it may suggest that certain individuals experience greater levels of risk or may be more susceptible to developmental processes leading to offending behaviour.

The findings of the current study are also in support of Ibabe and Jaureguizar’s (2010) conclusion that AVTP offenders represent a unique group of offenders. However, it also confirmed that similar to AVTO and other criminal behaviour, it typically starts in late childhood and early adolescence, peaking in middle to late adolescence, with the majority of this behaviour declining by their early twenties (Casey, 2011).

The current study, contributes to the existing body of knowledge that states that AVTP is part of a broader pattern of antisocial behaviour and aggression, similar to adolescent violence generally (Agnew & Huguley 1989; Calvete, et al., 2014;
Kennedy et al., 2010; McCloskey & Lichter, 2003; Moulds et al., 2018; Pagani et al., 2003, 2004, 2009; Simmons et al., 2018). While it is acknowledged that AVTP offenders who come through the criminal justice system represent a distinct group, often of those who are already involved in the system (Holt, 2012), it is a distinct group that requires appropriate justice responses and interventions (Condry & Miles, 2016). AVTP offenders appear to be largely adolescent and limited in their offending trajectory, therefore youth justice responses, in particular early intervention, could be important for intervening at a time when they are most vulnerable and have the highest chance for reducing their risk of reoffending. The study suggests that those who commit AVTP do need a tailored, targeted intervention approach due to the distinct differences from AVTO offenders in order to adequately address the criminogenic risk factors, needs and responsivity factors.

Limitations and further research

Despite the important findings of the present study, the research should be interpreted in light of its limitations. The study used official records (police data) to measure offending. Therefore, the data used likely only represents a certain subgroup of offenders (e.g. what comes to the attention of police) and may represent more serious cases, and under represent typical families who may be impacted (Brown, 1984; Widom, 1989). This caution may be more relevant for AVTP offences, with the current data representative of a certain subgroup of AVTP offenders who do come into contact with the police (Holt, 2012). Police data are also vulnerable to limitations in practice, for example what information is recorded when police attend is discretionary. This can lead to significant missing data; however mixed-effects models are robust in relation to missing data (Baayen, 2008). These results need to be understood with an understanding of the socially constructed nature of crime and
how it is perceived by attending officers and then recorded, and the well-recognized challenges associated with this (Brownstein, 2000, Xu, 2018). It is important to consider from a sociological perspective how police may view and determine AVTP, and indeed violence at the time of data collection, as well as the public’s willingness to report this behaviour (Xu, 2018). For this study in particular adolescence, violence and AVTP are all socially constructed terms imbued with differing views, values and opinions, not just from police, but from individuals and individual families. The differences found between the two groups, AVTO and AVTP, could just be a reflection of the socially constructed nature of crime, and of police practices at the time of data collection and therefore should be interpreted with caution and with an appreciation for the context in which they were recorded.

The study is limited in its relatively small sample size of AVTP offenders, which may limit generalisability of the findings, and further research is needed using larger groups of AVTP offenders to consolidate these findings.

The study did not examine other commonly used factors that could influence differences in trajectories of AVTP and AVTO offenders, and the unique factors of both of these offending typologies or combinations of these aspects may produce different trajectories (such as alcohol use, trauma histories and mental health). It also did not have access to broader individual characteristic based variables, such as child protection history, family dynamics, and time in custody, which limited the capacity to understand more refined and nuanced elements of individual difference. These areas of within group differences in particular would benefit from further research which would help to establish intervention needs and important variables for between and within group variation.

The current study could not fully take into account attrition of the sample through death or population mobility, for example if they moved jurisdictions.
Similarly, the current study did not control for factors that could have limited their capacity to engage in criminal behaviour, for example if offenders have periods of incarceration, which is important in calculating unbiased estimates of individual rates of offending (Piquero et al., 2001). However, in Australia, most (84%) of young people supervised by youth justice were in the community, with the remainder in detention (AIHW, 2017). Further studies are required to develop tools more capable of prospectively (rather than retrospectively) identifying chronic offenders, and tools to help identify propensity of further offending.

Conclusion

Despite these limitations, the strength of the current study is in understanding how AVTP and AVTO groups differ, and the importance of understanding these nuances. Family violence systems are fragmented and multifaceted with intersections with criminal justice, victims of crime, child protection and in this case, youth justice (Law Council of Australia, 2017). Youth justice balances welfare and justice responses, which are crucial when responding to AVTP (Condry & Miles 2016). The current study utilised longitudinal data over a 17-year period to understand trajectories of AVTP and AVTO offenders, and to explore the heterogeneity of these two groups. This study was the first known of its kind to compare large groups of AVTP and AVTO offenders using Australian data considering such an extensive time period. Its findings inform the understanding of differences and similarities of these offending groups to help improve the development of tailored and responsive treatment approaches (Low & Day, 2015). Taken in conjunction with the findings of Moulds and colleagues (2018), AVTP that is reported to the police is unlikely to be an isolated offence, and rather likely to be part of a broader pattern of offending. This seems similar to AVTO offending, and in support of Piquero (2000) who
concluded that violent offending was a function of increasing offence frequency. The findings suggest that there are significant between group and within group differences between groups. Overall however, this study has highlighted that young people who perpetrate AVTP are different from other young offenders (e.g. Brezina, 1999; Kennedy et al., 2010; Walsh & Krienert, 2007). They have less significant gender differences, are younger, are less likely to identify as Aboriginal, and have a shorter period and smaller number of offences that are often responded to differently by the justice system.

The findings of the current study drew attention to the crucial importance of the early years of life and the need to target crime prevention initiatives. AVTP that comes to the attention of the justice system has distinct typologies; it rarely occurs in isolation (Moulds et al., 2018); its trajectory appears to be predominately adolescent limited, and AVTP offenders differ significantly from AVTO offenders in regard to their demographic characteristics, however their trajectories are not significantly different. This highlights the need for tailored, unique AVTP programs, and that AVTP cannot be considered within a broader framework or understanding of adolescent violence. Intervention and policy that can intervene at key points of vulnerability (e.g. as behaviour is increasing between 12 and 14 years of age) has the potential to impact the young person’s involvement in other offending behaviour.
Chapter 6: Implications and Conclusions

Summary of Findings

This thesis focused on Adolescent Violence towards Parents (AVTP), an area of family violence which has significant impacts for families but is only just beginning to be recognised, researched and understood. Research into AVTP to date has been sporadic, inconsistent and has used a diverse range of methodological approaches, each with its own limitations (Holt, 2012). This thesis had two broad aims; firstly, to investigate the Australian experience of AVTP and to establish an understanding of the characteristics and prevalence of AVTP within the Australian context. Secondly, to determine if AVTP has links with other youth offending behaviour and if AVTP has differences or similarities to other violent behaviour perpetrated by young people. This thesis provided important and original work and findings, regarding the Australian experience of AVTP, particularly within the youth justice context. The research provides a justification for an increased focus on effectively identifying and responding to AVTP within the criminal justice system, from the police response through to youth justice intervention. Specifically, this research aimed to answer the following questions: What is known about the characteristics and prevalence of AVTP?; What is the Australian experience of AVTP in regard to characteristics and prevalence?; Does the Australian experience of AVTP mirror what is internationally known about AVTP?; To what extent does AVTP occur within a pattern of other offending behaviour?; Are AVTP offenders and young people who are violent towards others distinct groups of young offenders?.
What is known about the characteristics and prevalence of AVTP?

Having an evidence-based understanding of the prevalence and characteristics of AVTP is essential in guiding future research. Study one, the REA on incident characteristics, found that violence was mutually shaped and reinforced within the system - individual, family and broader community factors all interact with one another, rendering single variable explanations incomplete. AVTP perpetrators are a clinically complex cohort, with high levels of hostility and anger, mental illness, drug and alcohol use and other offending behaviour. This complexity is also seen in families who are impacted by AVTP, with historical experiences of family violence and high rates of comorbidity (mental health, trauma and drug and alcohol related). There was evidence that trauma, in particular past experiences of family violence, were characteristic of up to 50% of families who experience AVTP. More research is needed into the potential risk and resilience pathways regarding witnessing or experiencing family violence, and later experiences of AVTP. By taking an ecological approach, the gaps in understanding regarding the impact and influence of broader community, and social political factors, and the potential for societal and community responses to AVTP was evident.

The second REA (study two), focused on documenting known prevalence of AVTP and understanding the factors that influence prevalence rates. Sample size was found to have a high impact on prevalence rates, and seemed to result in high levels of variability and increasing uncertainty. This study highlighted the need for greater research and the development of tools to accurately gather prevalence rates and other information regarding AVTP occurring to allow for more consistent, reliable and valid methods of data collection in this area.
What is the Australian experience of AVTP in regard to characteristics and prevalence?; Does the Australian experience of AVTP mirror what is internationally known about AVTP?

The third study aimed to describe the prevalence of AVTP as reported to police within the Australian community, and to map the profiles of AVTP perpetrators, victims, and incidents using data from the ADIVA project. It was hoped that this study using Australian data would triangulate findings from international studies which have explored AVTP (e.g., Brezina, 1999; Calvete et al., 2013; Calvete, Orue, & Gamez-Guadix, 2015; Ibabe et al., 2013; Jaureguizar et al., 2013; Kang & Lynch, 2014; Pagani et al., 2009) to determine if characteristics and prevalence of AVTP reported internationally, were mirrored in an Australian context. Overall, the findings of this study were conservative and well below the reported 10% prevalence rate reported within the international literature (Brezina, 1999; Calvete et al., 2013, 2015; Ibabe et al., 2013; Jaureguizar et al., 2013; Kang & Lynch, 2014; Pagani et al., 2009). However, it is of note that many of the international prevalence studies were not based solely on AVTP cases reported to the police, (as was the case in this study), but included self-reported and other reported cases of AVTP. The study findings were in line with Gallagher’s (2008) study, who determined a rate of 3–4% is more likely to be an accurate representation of true rates of AVTP in Australia. While the study found that reported rates of AVTP to the police were increasing, it was concluded that where police do intervene in cases of AVTP, they are attending at points of crises. The ADIVA study found characteristics to be generally consistent with international research into AVTP regarding both victim and perpetrator characteristics. Importantly, the study supported the established understanding that women are more likely to be the victim of AVTP (Contreras & Cano, 2014; McCloskey & Lichter, 2003; Miles & Condry, 2016). The
gendered nature of victimisation of AVTP is an important factor in understanding this form of violence within the broader field of family violence, and has some important implications for intervention to address potential attitudes and beliefs that ignore, condone or facilitate violence against women.

To what extent does AVTP occur within a pattern of other offending behaviour?

The fourth study found that there were three different groups of AVTP offenders; AVTP offenders, AVTP non-violent offenders who have committed other non-violent crimes and AVTP violent offenders who have committed other violent crimes outside of their AVTP offence. It was concluded that most young people who are violent towards their parents who come to the attention of the police, have also committed other non-violent or violent offences. The finding that AVTP rarely occurred within isolation from a justice perspective was corroborated by international research regarding AVTP (e.g. Boxall, Payne, & Rosevear, 2015; Brennan et al., 1989) and family violence research broadly, which is also significantly associated with other types of offending (Moffitt et al., 2000; Piquero et al., 2006; Richards et al.; 2013). This finding was in line with Kennedy et al., (2010), who hypothesised that AVTP therefore may be just part of a pattern of antisocial behaviour expressions. The youth justice system is in a position to pay attention to the behaviour of the youth, while also considering the specific status of the parent-child relationship (Condry & Miles, 2016). The study emphasises the question as to whether families involved in the youth justice system are more likely to report AVTP, or whether AVTP is more likely to be detected in families involved and in regular contact with police and other support agencies (Condry & Miles, 2014).
Are AVTP offenders and young people who are violent towards others distinct groups of young offenders?

The fifth study concluded that AVTO and AVTP were different groups of offenders, with differences regarding demographics. For example, AVTO offenders were more likely to be male, identify as Aboriginal, and be older when their offence occurred and more likely to have a higher number offences. The AVTO and AVTP groups were also found to have different experiences of the justice system, with AVTO offenders more likely to have their base offence dealt with by the courts and AVTP offenders were more likely to have their matter dealt with via family conference. This could in part be a reflection of societal attitudes to family violence more generally which pervade families and authorities alike. That can mean that a family can minimise AVTP until it reaches quite dangerous proportions. Further, police attending are busy and can therefore defer to the notion that AVTP is purely an escalation of adolescent/parent conflict and thus respond to, and report it in ways that imply and endorse the idea that a less serious crime has been committed than if it were AVTO.

Interestingly despite being demographically different, AVTP and AVTO trajectories were found to be almost undistinguishable although AVTO offenders did have a significantly higher number of offences. Modelling of offending trajectories broadly found that based on age, trajectories of offending did not differ by group. However, the study also identified significant individual variation from the exploration of trajectories, suggesting presence of important within group differences, as well as between group differences. The peak in offending behaviour, for both AVTO and AVTP offenders, was approximately 17 years of age. The majority of AVTP and AVTO offenders in the study had adolescent limited patterns.
of offending, in support of Moffitt’s Developmental Taxonomy, with offending rates declining rapidly post 18 years of age.

With the findings of these studies interpreted together it can be understood that AVTP offenders represent a unique group, with distinct typologies and a trajectory that appears to be predominantly adolescent limited. The findings of these studies highlighted the importance of the early years of life and the need to target crime prevention initiatives that can intervene at key points of vulnerability (e.g. as behaviour is increasing between 12 and 14 years of age).

**Implications and future directions**

The evidence presented in this thesis has demonstrated that AVTP is a complex issue that is often linked to other forms of offending. This thesis provides an original and worthy contribution to the understanding of AVTP, in particular in relation to youth justice. Condry and Miles (2014) described AVTP as being fundamentally absent from policing, youth justice and domestic violence policy. This has no doubt been in part due to the ambiguity and mystery that surrounds the issue (Holt, 2013). The research of this thesis hoped to contribute to an evidence base to best inform policy and practice in this area, and emphasise the relevance of AVTP within these fields. Perhaps a reason for the lack of progression within the field of AVTP is the unresolved issue of responsibility (Holt, 2013). AVTP is *everyone’s* issue; health, legal, economic, education, developmental and human rights, all have a role to play, with a collaborative approach needed to address it reasonably (Holt, 2013).

This thesis took an Ecological Systems Theory approach (Bronfenbrenner, 1979). It aimed to take a multisystemic and multilayered approach to understanding AVTP, in particular the social, cultural, individual and systemic factors associated
with it. Primarily, it tried to gain a better understanding of factors such as justice responses, and how other individual behaviour (e.g. offending) may impact on the perpetration and experience of AVTP. Given the huge variability seen between states, and between states’ policing policies, it’s clear from at the very least a research perspective, that social factors such as police response in part shape how AVTP is responded to and understood within the community, and secondarily how adolescents may subsequently behave. For example, if the AVTP does result in police action, this may work in some cases to reduce the chance of further incidents, whereas a lack of response may inadvertently reinforce the behaviour as something that is not problematic.

Similarly, the studies of this thesis that explored AVTP and other offending behaviour suggests that AVTP needs to be understood within the context of the individual’s other behaviours, as well as their peer group, cultural factors and their other broader risk factors. Similar to Cottrell and Monk (2004), it appears that the nested ecological model is a useful base for understanding AVTP, and the complex interaction of risk factors that need to be explored for each individual and their family. It seems this is likely a good basis to best assess individual risk and need factors and tailor appropriate multisystemic responses.

One of the biggest challenges for the youth justice system is managing the competing demands of welfare and justice, with a diversionary and restorative focus (Condry & Miles, 2016). This needs to be done with consideration for the families’ shared histories and the need for family inclusive support (Condry & Miles, 2016). AVTP is complex; however, one of the most remediable constraints is the fragmentation of the response system. Police have a challenging task responding to AVTP, balancing the competing needs of the perpetrator as a vulnerable young
person, and the needs, safety and wishes of the victim (Miles & Condry, 2016). Study two and three highlighted that prevalence rates, particularly those based on official statistics such as police data, often reflect the legislative structures, policies and procedures of the states and countries in which they are collected, for example how assault is defined. They are therefore reflective of the context and climate in which they are collected, for example cultural norms (and biases), community views and approachability of services. Within Australia, the ADIVA study demonstrated the substantial variation between states in reported prevalence of AVTP, seemingly due to the influence of differing police policies, understandings and classifications, as opposed to a genuine variation in perpetration of AVTP across jurisdictions. Appreciating the important role of context and the political and social climate is essential in framing and understanding the occurrence of AVTP. Miles & Condry (2016) discussed the importance of the police response in shaping how victims perceive help available, whether they report further incidents and whether they receive help; parents generally want to develop and maintain a non-violent relationship with their child, and they want police assistance in achieving this. They conclude that ideally, parents need to have confidence that they are listened to, that safety measures are put in place and that the relationship is held as paramount when they report incidents to the police; however, in reality this is often compounded by practical issues and challenges around alternative housing, particularly when trying to ensure safety. Improving collaboration between the police, child protection and youth justice systems would help to ensure a more integrated response to AVTP. The findings suggest a broader need to train and educate agencies dealing with families potentially impacted by AVTP regarding the warning signs, vulnerabilities and impacts of AVTP. Workers within these agencies are not immune from the community tendency to minimise and under report AVTP. This occurs for a raft of
complex reasons including parental shame and fear of repercussions for the young person, and busy police workloads but like other forms of family violence can imply that there is no consequence for such behaviours and therefore perhaps, no way of stopping them. There is a need for an evidence based consistent policy to assist police in collecting data related to AVTP, as well as clear stepped care protocols as to how to effectively manage cases of AVTP. These steps could include lighter responses such as a police warning, or community health presented evidence based parent training programs, or to diversionary programs for young people, through to other community or even custodial juvenile justice responses. Having an escalating range of response options for police attending matters of AVTP would assist them and the families to them to be clear about which behaviours lead to which pathways. This is important in validating and reinforcing family members when they do seek police assistance, and more importantly, in reinforcing to the young person that their behaviour is an offence, harmful and will be taken seriously by police and the broader justice system.

While this thesis is focused on the involvement of the criminal justice system in AVTP, it is recognised that the majority of families impacted by AVTP will not have involvement with the criminal justice system, and a holistic, family focused response is better equipped to manage the occurrence of AVTP (Miles & Condry, 2015). Study four and five illustrated that the way in which police respond to AVTP is often discretionary given a lack of policy and procedure (Miles & Condry, 2016). While early intervention aimed at preventing the AVTP needs to be prioritised, particularly when family violence has occurred, this thesis demonstrates the need to also invest resources at the other end of the continuum, that is, if AVTP offenders enter the youth justice system. As a collective, this research has found a strong link
between AVTP reported to the police and other offending behaviour. This suggests that the juvenile justice system has the opportunity and responsibility to consider AVTP within the context of other offending behaviour, and the risk of AVTP occurring should shape how and when intervention is needed. Although not all young people served by the justice system perpetrate AVTP, this thesis suggests that they may be vulnerable to this in the future. Therefore, the screening of AVTP should be incorporated into youth justice assessments to help flag this as a needed area of intervention.

Given AVTP can be a major stressor for families and have significant impacts for all family members, intervening with AVTP may assist the family in better managing other offending behaviours and help support youth justice interventions in other areas (e.g. accommodation). Other research supports this link, with recent findings suggesting that young people who have perpetrated AVTP will continue and potentially escalate the behaviours; there is therefore a need for interventions to break this cycle (Armstrong et al., 2018). Due to the complexities of the adolescents and families who experience AVTP (for example mental health, other offending, drug and alcohol use), one on one and family intervention is often more appropriate than group programs as it can prioritise the exploration of each individual family member’s unique experiences and be tailored to their history and trauma (Holt, 2012; Moulds, Malvaso, Francis & Hackett, 2019). Incorporating family in any intervention is crucial to ensure that family dynamics are understood, and victims, as well as perpetrators feel empowered to change behaviour (Moulds et al, 2019). Given the under researched potential that AVTP could lead to further perpetration of family violence, intervention should be prioritised for families to reduce present, as well as future harm.
Any interventions involving this population are likely to face two key challenges. The first is the need to develop and provide services that focus not only on dynamic criminogenic risk factors (e.g., anger, parenting relationships) but are also trauma informed to allow for a focus on historical risk factors (e.g., maltreatment, family conflict). Incorporating experiences of victimisation, such as using Finkelhor and Kendall-Tackett’s (1997) theory of developmental victimology, would allow their experiences of victimisation to be integrated in treatments. The second challenge, and one more broadly for youth justice, is the role of accountability. Griffin, Germain, and Wilkerson (2012), described the challenge for the legal system in responding to young people who pose a threat to the community but who are also victims themselves. This again supports the tenet of taking a trauma informed approach to intervening with AVTP offenders. Any intervention needs to be designed with an understanding of the criminogenic needs of the young people who perpetrate AVTP, and to understand this as it relates to potential other offending behaviour. Given this area’s infancy in regard to effective, evidence based intervention, intervention approaches should be piloted with long term follow up to help establish an evidence base within Australia regarding what is effective (and not effective) for helping families and young people.

One way of understanding the findings of this thesis is to understand AVTP as, in the main, a criminal justice issue where there is a victim and an offender and a reactionary process. This “criminalisation” of AVTP has both positive and negative consequences in that it labels the young person and the behaviour, however can also provide a pathway for response (Holt, 2013). It makes the impact of AVTP personal and isolated, as opposed to a more systemic, embedded cultural issue for society. An alternative is to conceptualise AVTP within the public health model, allowing the
broadening of the scope of enquiry from single acts (e.g. offence) to the broader impact of the act on the community incorporating societal perspectives that can be preventative, as opposed to just reactive (Smallbone et al., 2013).

By definition, public health approaches aim to provide the maximum benefit for the largest number of people. Preventive health actions are often categorised in three levels: primary, secondary and tertiary prevention. Primary prevention targets whole populations to prevent problems occurring in the first place, secondary prevention targets at risk individuals, groups and trying to slow or prevent transitions into AVTP and finally tertiary prevention targets individuals who are engaging in AVTP to prevent repeat or worsening behaviour. The public health model broadens the emphasis into preventing the violence occurring at multiple levels, as opposed to just interventions with the offender. Criminal justice responses are traditionally tertiary interventions, intervening when a problem exists; however, when the behaviour has the highest social and personal costs (Smallbone et al., 2013).

Smallbone et al., (2013) developed a conceptual framework around adolescent sexually abusive behaviour for service development that targets individuals, as well as victims, situations in which the behaviour occurs, and communities that are affected. The model was developed to incorporate the public health model, as well as the crime prevention model to identify specific prevention targets or methods. This model incorporates four key targets – offenders (or potential offenders), victims (or potential victims), situations or specific settings in which sexual behaviour is likely to occur or has occurred and communities, all considered across three prevention levels (primary, secondary and tertiary). Their model emphases that effective service delivery should not be limited to individual change and intervention but also about working with the broader context in which the behaviour is occurring.
Smallbone et al.,’s model combining prevention levels and targets may be a useful way to begin to conceptualise and develop policies, interventions and understandings of AVTP. This thesis has provided evidence around the characteristics of perpetrators, victims, situations, and to some extent the community, via study one from a secondary prevention perspective. There are still significant gaps regarding community factors associated with AVTP, which warrant more research. The final three studies of this thesis, which incorporated Australian data, provide insight into possible areas of tertiary prevention for offenders and victims, for example it provides insight into potential need for secondary and tertiary prevention within juvenile justice. Further research should focus on primary prevention and have an emphasis on potential situational and community driven secondary and tertiary prevention options. A further focus needs to be on the role of trauma, understanding AVTP within the broader context of family violence previously occurring, the propensity for it to occur in the future, and how this can be prevented at primary, secondary and tertiary levels. Any policy regarding AVTP needs to be trauma informed and have this at the forefront of any intervention development or changes in how AVTP is responded to. Table 6.1 provides an outline of the contributions of this thesis from a public health prevention and targets framework, and the gaps that can inform further research of the contributions (adapted from Smallbone et al., 2013).
Table 6.1 – Contributions of this thesis findings from a public health prevention and targets framework applied to AVTP

<table>
<thead>
<tr>
<th>Targets</th>
<th>Primary prevention</th>
<th>Secondary prevention</th>
<th>Tertiary prevention</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Offenders</strong></td>
<td>Area of future research</td>
<td>Males, early adolescence (prior to 14 years of age), families impacted by trauma, experiencing problematic behaviour (e.g. at school, offending, drug and alcohol use), and clinical complexity or vulnerability (e.g. mental illness)</td>
<td>Males, mid adolescence (12-17 years of age), families impacted by trauma, mental illness, offending behaviour, drug and alcohol issues</td>
</tr>
<tr>
<td><strong>Victims</strong></td>
<td>Area of future research</td>
<td>Females (mothers), families impacted by trauma, difficulties with parenting mental illness, drug and alcohol issues (by parent or young person)</td>
<td>Females (mothers), families impacted by trauma, mental illness, drug and alcohol issues</td>
</tr>
</tbody>
</table>
At this stage, most intervention occurring with families impacted by AVTP is not well informed by theoretical models or established evidence surrounding what is known about AVTP. It tends to be individual clinician led and eclectic in therapeutic modalities adopted. It is hoped that the findings of this thesis will assist in informing program development and implementation. For example, within the Global Campaign for Violence Prevention (GCVP) (2011) four steps for program implementation were identified, two of these steps were achieved through the work presented in this thesis; namely and firstly, defining the problem through the systemic collection of information regarding magnitude, scope, characteristics and consequences of violence and secondly, establishing why this violence occurs using research to determine the cause and correlation of the violence were achieved within this thesis. This thesis did not aim to address the final two steps of finding out what
works to prevent violence through: interventions and implementing effective interventions and evaluating the impact of these interventions. Future research regarding these two steps is needed in order to utilise what is known about the problem and some of the causation factors to inform and develop intervention.

**Limitations**

While this research has strength in its breadth and the consistency of findings across studies, there are significant limitations. The limitations of each individual study have been discussed within the papers presented in the previous chapters. Therefore, to minimise repetition, this section will focus broadly on the limitations of the thesis and the potential areas for future research.

One of the unequivocal limitations of this Ph.D. is its heavy reliance on police data for the empirical studies. Measuring and conceptualising any offending using police statistics is widely recognised and documented as problematic (Brownstein, 2000). From a social constructivism perspective, the meaning and measurement of crime is constructed, and is a reflection of the social, political, and cultural contexts of the government agencies where official crime statistics are constructed worldwide (Xu, 2018). They can also reflect the allocation of resources, and priorities of the police and broader government at any given time (Xu, 2018). Firstly, how crime is defined and counted and how this can change over time (Xu, 2018). Which is particularly pertinent in this thesis related to how violence broadly is viewed, as well as family violence and AVTP. Some determine that crime itself doesn’t exist, however what does exist are social rules regarding what is appropriate behaviour and whether or not these behaviours are regarded as crimes or deviant depends on factors such as culture and the power structure (Christie, 2004). Therefore, what is considered “criminal” can change at different times, and in different social environments, with family violence a key example of such a shift in what is considered socially
acceptable. These social rules also impact on measurement of crime, for example, whether a crime is recorded and how it is recorded depends on the social climate at the time of the offence (Xu, 2018). The second factor according to Xu (2018) is whether or not people are willing to report criminal behaviour. This can be influenced by factors already discussed in this thesis, such as parental blame and shame, fear, the trust in the police, the tolerance of certain behaviour, the perceived seriousness of offences, the fear of retaliation (Maguire, 2012). Many of these factors are culturally and socially bound, adding to the complexities of understanding people’s willingness and ability to report. Finally, Xu (2018) determined that crime statistics are socially constructed due to the recording practices by the police. In summary, Maquire (2012) concludes that all police data needs to be understood with the consideration of what is considered a crime, police behaviour and reporting practices and the reporting practices of the public. For this thesis, this is particularly relevant given its heavy reliance on police data. It needs to be therefore understood within the context of AVTP, and family violence broadly, still facing significant social stigma, and subsequent low reporting, police policy around family violence being in a developing and transient state and police behaviours and measuring and monitoring of family violence and youth offending, particularly AVTP in its infancy. Therefore, the findings of this thesis need to be carefully interpreted within the social and cultural climate in which the data was collected, and with an appreciation for how family violence, and AVTP broadly, is currently understood by individuals, families, police and other authorities.

Given the limitations of the use of police data, significant consideration needs to be given to how robust and reliable the data analysed in this thesis is. Reportedly, only one in five incidents of violence against women and one in 20 incidents of violence against men are reported to the police (Rose, Ziersch, & Migliore, 2014).
One report noted that in only 16% of AVTP cases was criminal action taken, with no further involvement with the criminal justice system for the majority of young people who commit in AVTP (Human Services State Government of Victoria, 2014). Only a proportion of AVTP cases are reported to the police and, arguably, these are often representative of severe cases (Barnett et al., 2011). This means many cases still remain in the private sphere, and that the cases identified in this research represented only a small number, and particular snapshot of cases. Given the lack of more in-depth research and the stigma around AVTP, it is not possible to clearly gauge the extent of underreporting (Condry & Miles, 2014). Underreporting is thought to be driven predominately by a parent’s unwillingness to disclose that there is a problem. However, it is unaided by the complex nature of the perpetrator being a child and the victim being an adult, particularly when considering options around placement and question regarding responsibility, where the default tendency is to blame parents (Barnett, 2011). Moreover, many parents do not want their child to have a criminal record or become involved with the criminal justice system, meaning they avoid responding in this way for their child’s benefit (Correll, Walker, & Edwards, 2017; Routt & Anderson, 2011). These factors mean that AVTP is likely to be grossly underreported and police data of these incidents reflects only the most extreme, ongoing cases, when police intervention was considered a “last resort” by parents. It should also be noted that these cases are likely to be representative of a pattern of behaviour, with parents unlikely to be contacting the police over the initial or sole case of AVTP (Condry & Miles, 2014). Work should be done to help the relationship between families and police to help facilitate an increased willingness, and more open safe communication to occur for when incidents occur. There needs to be greater transparency for families regarding expectations for when police do respond to AVTP and the likely outcomes (e.g., arrest, warning etc.). While there is a
concern that parents will rely on police to “parent” adolescents who are potentially just testing parental boundaries, this needs to be balanced with a need for AVTP to be responded to in a way that protects families.

Police data is also heavily influence by the legal, social and political context in which AVTP and policing in general occurs. More research is needed into the wider political, legal and cultural context in which not only AVTP occurs, but within which it is policed. When police attend incidents, they can be highly volatile and emotionally charged situations that have operational constraints which can impact on what is practically possible in regard to what information is recorded. The social nature of police work, and the inherent role of individual decision making within this context cannot be understated. There is a need for a more sophisticated, standardised and consistent police response to AVTP, including well-developed policy, training and a framework to inform practice and importantly, research to ensure this is evidence based. Police attending incidents determine what details need to be recorded (Miller et al., 2015). This limits the generalisability, objectivity and strength of conclusions, as data is based on what is deemed operationally important and relevant by attending police officers.

Despite these limitations, it cannot be avoided that AVTP is at times a police matter; police are called out to respond to incidents of AVTP, and often make decisions related to how these situations are responded to (Miles & Condry, 2016). There are some strengths of using official records, such as police data; it provides a way to obtain relatively objective insight into the number, type and timing of AVTP and other offending and provides large samples which allow robust quantitative conclusions to be drawn about the prevalence and characteristics of AVTP (Miles & Condry, 2016, Condry & Miles, 2014). Also, an alternative to official records, self-report, is also limited as it can be subjective and unreliable and may simply reflect
disagreement between family members, response bias, mood state, cultural and attributional biases, recall biases and social desirability (Gallagher, 2008). Self-report can also put additional pressure on already vulnerable families to discuss incidents of family violence; leading to ethical dilemmas regarding the value of research over the potential harm to families. Therefore, using police data provides an avenue for accurate estimation of AVTP, whilst respecting the vulnerability of families and the young people involved.

AVTP is inevitably shaped by cultural context, including power dynamics within families, and how and whether it is identified as a problem (Holt, 2013). While the current research did collect and incorporate data regarding Aboriginal status in all studies, this thesis did not focus on the cultural elements, influences or experiences of AVTP. This was deliberate in the sense that the focus of the research was on characteristics, prevalence and relationship to other offending behaviour, however it was a limitation given the important role of culture, and the significant issue of over representation of Aboriginal young people within the Australian youth justice system. Understanding the occurrence of violence or any offending in Aboriginal communities needs to be conducted with the recognition of the considerable heterogeneity that exists within Aboriginal communities which consist of more than 600 different cultures and tribal groups (Day et al., 2011). As such, the ways in which family violence is understood, displayed and therefore what will assist in these circumstances will vary considerably across groups and contexts (Day et al., 2011). Future research would benefit from taking a cultural focus within the area of AVTP that adequately considers cultural differences and can explore the drivers of these differences. Until this research is conducted, some of the conclusions in this thesis regarding cultural findings remain underdeveloped. For example, many of the studies in this thesis identified being Caucasian as a common characteristic of
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perpetrators of AVTP, however it is unknown if this cultural difference in AVTP reflects true differences in rates of incidents in AVTP or rather if this reflects other cultural differences, such as relationships with police/authority, shame, willingness to report etc.

This thesis is heavily weighted on quantitative methods, and quantitative international evidence. This provides a breadth and weight to the findings, however lacks insight into the process; the lived experiences and stories of families who experience an adolescent who is violent towards a parent. Qualitative approaches allow the understanding of experience and process with data collection involving a small number of individuals, as richness of data is required, rather than a broad range of responses as would be the case in quantitative research. This thesis is limited by the lack of qualitative research, and future research should explore the lived experience of families who have experienced a justice system response (e.g., intervention order, charges laid) in relation to AVTP to gain a better understanding of what led families to taking or delaying a justice response, their perception of the barriers and experiences of this response and potential improvements.

This thesis focused primarily on gaining an understanding of the prevalence, characteristics and offending profiles of young people who perpetrated violence towards parents, and their families. By taking this focus, other potential factors and areas of research were unable to be conducted. For example, this thesis made assumptions around particular family formations, and hasn’t necessarily been inclusive of all different cultural understandings and formations of families that can play a “parental role”, for example aunts and uncles. Similarly, it hasn’t had the scope to consider adolescent violence against carers (for example within residential care facilities). This research has also not focused on parricide, which is an important and significant (if rare) offence related to AVTP. This was done with an
understanding of the unique differences of parricide and a chosen focus on AVTP, as opposed to parricide, however, this research is limited by a lack of consideration of this broader context (Holt & Shon, 2018). Similarly, the scope of this work did not allow for a specific focus directly on potential avenues for intervention or practical implications regarding changes in practice. These are again areas that would benefit from further research.

**Conclusion**

Overall, the results of this thesis demonstrate that adolescent violence towards parents impacts approximately 10% of families, and makes up between 1 to 7% of all instances of family violence reported to the police. It is important that it is recognised as a problem faced by families; however, that it is taken in perspective and not inflated to cause a panic or over reaction towards young people and their relationships with parents (Condry & Miles, 2014). AVTP is most often perpetrated by 14-17-year-old males, and women (mothers) are the most likely victims. Both victims and perpetrators are likely had a myriad of clinical complexities, such as a history of trauma, mental health concerns and drug and alcohol use. AVTP is firmly entrenched in the criminal justice system and requires a sensitive and nuanced response (Condry & Miles, 2014). This thesis has provided a good indication of the “who” and “what” of AVTP (particularly those young people who are criminalised for their AVTP), however the scope of the combined works prevented the exploration of the “how” and “why”.

This thesis has provided the original and worthy contribution that acts of AVTP reported to the police occur within patterns of other predominately adolescent limited offending patterns. This is an important finding, as little work in the area has explored AVTP offenders’ patterns in offending and potential offending trajectories. Police often hold the balance of power when they respond to AVTP, balancing the
complexities of the problem and needs of the young person and the risk to the victim, the parent (Miles & Condry, 2016) This highlights the role of juvenile justice in recognising and responding to AVTP as early as possible. The thesis supports tailored and specific interventions for AVTP, as this group is significantly different from other adolescent violent offenders. Broader theoretical perspectives, such as Moffitt’s developmental taxonomy and ecological theories that can encapsulate all of these complex associations are needed to help further our understanding AVTP. It is evident that given the heterogeneity of AVTP families, and the need to take an ecological approach, interventions need to focus on individual -, family-, peer-, social and community-level factors, focusing not only on problems, but on strengths (Smallbone & Rayment-McHugh, 2013).

The findings in the current research clear point to the need to view a family’s report of AVTP as unlikely to have been the first event, and more importantly is a significant opportunity to interrupt or derail what is usually a broader offending trajectory. There is therefore the need to develop a policy which incorporates a cross sectorial approach (health, welfare, and juvenile justice) to the prevention and early intervention of AVTP. Police responses need to articulate a wide range of specialist potential gateways into the various health and other services and the justice system, including police, courts and youth justice services. Such over riding policy would assist in the development of guidelines and standard practice for identifying, responding to and intervening with families impacted by AVTP. While the relationship between AVTP and other offending prompts a coherent and specialised response from the justice system, the justice system cannot be the first or only port of call for families experiencing AVTP (Miles & Condry, 2015). By shifting from a solely criminal justice and reactive model, to a public health and thereby prevention model, we can aim to prevent AVTP and the impact and consequences of it. Further
we can better direct funding and resources to a range of universal and targeted interventions and we thus can improve awareness of, and reframe the debate around AVTP within families. This would also have follow on benefits for linking various policy frameworks, services, and programs together more efficiently. Families are beautifully relational, personal and complex, and therefore require understanding and responses that are inherently different from adolescent violence perpetrated between strangers (Condry & Miles, 2014). AVTP has been largely neglected in the discourse to date around young offending and family violence, however given its prevalence, relationship to other offending and impact on families, an increase in focus is needed and warranted.
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