

# **Child and Adolescent to Parent Violence and Abuse (CAPVA) Handbook**

**Respect**



# Introduction

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Child and Adolescent to Parent Violence and Abuse (CAPVA) is an issue affecting some families across County Durham. In June 2021, County Durham and Darlington Police and Crime Commissioners Office were successful in a home office bid to develop the CAPVA offer across County Durham and Darlington. We are delighted to be working alongside Respect, a pioneering and leading domestic abuse organisation working to develop safe, effective work with perpetrators, male victims and young people who use violence, to develop our response to CAPVA here in County Durham.

Services across County Durham are excited and committed to the rollout of Respect Young Peoples Programme, which will, ensure that multi agency staff can provide an effective response to families who are experiencing CAPVA. The RYPP uses a family centred approach, working with Parents and carers and child/young parent collaboratively to improve relationships and as a result, behaviour. This guidance is intended to enhance practitioners understanding of CAPVA and support practice interventions as well as raising awareness of the local processes and support available.



# What is CAPVA?

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Child Adolescent to Parent Violence and Abuse is also referred to as CAPVA. There is no legal definition of adolescent to parent violence and abuse, however, it is increasingly recognised as a form of domestic abuse and, depending on the age of the child, it may fall under the government's official definition of domestic violence and abuse.

## **In 2021, Durham adopted a local definition as follows -**

*A Child or young person aged between 8 and 18, that is displaying behaviours which could cause harm, this includes abusive or violent behaviour towards people close to them, particularly their parents or carers. This abuse may be physical, verbal, financial, coercive or emotional and may include behaviours such as hitting, making threats, scaring them into doing or not doing things, or causing damage in the home.*

**The definition of Domestic Abuse in the UK**, introduced by the Domestic Abuse Act 2021 is – Behaviour of a person (A) towards another person (B) is domestic abuse if - A and B are personally connected to each other and the behaviour is abusive. Behaviour is 'abusive' if it consists of any of the following –

- **Physical or sexual abuse**
- **Violent/threatening behaviour**
- **Controlling or coercive behaviour**
- **Economic abuse**
- **Psychological, emotional or other abuse**

It does not matter if the behaviour consists of a single incident or a course of conduct and applies to any person's aged 16 or above.

Whilst this definition applies to those aged 16 years or above, CAPVA can equally involve children aged under 16 years and the advice within this document reflects this.

It is important to recognise that CAPVA is likely to involve a pattern of behaviour. This can include physical violence from a child towards a parent and can include a number of different types of abusive behaviours, including damage to property, emotional abuse, and economic/financial abuse. Violence and abuse can occur together or separately. Abusive behaviours can encompass, but are not limited to –

- **Humiliating language and threats**
- **Belittling parent/carer**
- **Damaging property/belongings**
- **Stealing from a parent**
- **Heightened sexualised behaviours**
- **Coercive control**

# What is CAPVA?

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Patterns of coercion and control are often seen in cases of CAPVA, but some families might experience episodes of explosive physical violence from their adolescent with fewer controlling, abusive behaviours. We must remain mindful, that every family is different and what presents in terms of CAPVA for one family, will often be very different for another.

## **The definition of Coercive Control, Women's Aid is –**

Coercive control is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim. This controlling behaviour is designed to make a person dependent by isolating them from support, exploiting them, depriving them of independence and regulating their everyday behaviour.


<https://www.womensaid.org.uk/information-support/what-is-domestic-abuse/coercive-control/>

Although practitioners may be required to respond to a single incident of CAPVA, it is **important to gain an understanding of the pattern of behaviour behind an incident and the history of the relationship between the young person and the parent.** This pattern of behaviour creates an environment where a parent lives in fear of their child and often curtails their own behaviour in order to avoid conflict, contain or minimise violence and/or abuse.

## **Prevalence of Child Adolescent to Parent Violence and Abuse**

CAPVA is an emerging issue across County Durham. However, data recording systems require development work to ensure that as a system we can capture the prevalence of CAPVA that is reported through services.

# National data from Respect highlights




**8%** of  
**80,000**  
to Family Lives helpline  
concern Physical CAPVA

In over  
**2/3**  
of Police DV  
incidents, the suspect is  
**UNDER 18**



CAPVA  
makes up  
**9%**  
of recorded violence  
incidents in the UK



Parricide is  
on the increase  
**(21 in 2013)**



Figures from 19 Police  
forces between 2015  
and 2018 indicated an  
**increase in Adolescent to  
parent violence and abuse**  
year on year.

# Key Principles of CAPVA

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- **Child Adolescent to Parent Violence and Abuse can be a safeguarding issue and practitioners must always adhere to their own safeguarding procedures if it is felt that a child, young person, or adult is at risk of harm.**
- **Assumptions should not be made that the parent is responsible for their child's behaviour (i.e. due to their parenting style).**
- **It is important that the young person takes responsibility for their behaviour.**
- **Unnecessary criminalisation of the young person should be avoided, though it may be necessary for the police to be involved to maintain safety.**
- **Parents report feelings of isolation, guilt and shame surrounding their child's violence or abuse towards them, and fear that their parenting skills may be questioned and that they will be blamed or disbelieved by those to whom they disclose the violence and/or abuse.**
- **Parents may be reluctant to disclose or request support for fear of the response from agencies - concern their child may get into trouble, get a criminal record, they will be deemed a 'poor' parent or that their children will be removed from their care.**
- **There is no single explanation for CAPVA - every family is different.**
- **CAPVA can affect all areas of society.**
- **Safety planning is a key principal component of any response to CAPVA.**
- **Opportunities for both parents and children to talk about their experiences should be created.**
- **CAPVA is a whole family issue and can impact upon all family members - the safety of others including siblings should also be a key component of intervention.**
- **Providing the right support to families which enables the restoration of healthy, respectful family relationships should be the ultimate goal of CAPVA intervention.**

# Reporting/Disclosing CAPVA

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It is important to recognise that incidents of CAPVA reported to the police are likely to represent only a small percentage of actual incidents and actual levels are likely to be much higher. All forms of domestic violence and abuse are under-reported and parents are, understandably, particularly reluctant to disclose or report violence or abuse from their child. This is especially true when the child has an additional need. Research by RESPECT indicates that GP's are a common first port-of-call for parents looking for help, it is important therefore that GP's are given up-to-date local information about options for responding to CAPVA. In County Durham, GPs will all be offered Ask & Act, basic awareness training to support them in the identification and response to CAPVA cases.

If a parent/carer discloses CAPVA to any professionals, the response must always be one of empathy, understanding and support. Professional should remain non-judgemental and reassurance/support should be offered.

To support practitioners to identify CAPVA, a screening tool has been developed. This tool should be used to explore the family situation and to allow for level of risk to be determined.

There are situations where a criminal justice response may be appropriate in the interests of safety, and the parents/carers may support the removal of their child or even ask for it. It is worth noting that appropriate housing is not always available. In instances when this occurs, it is important that agencies ensure that adequate safeguarding and safety plans are put in place. Adolescents may also choose not to disclose due to guilt or fear of the social care and criminal justice system. Young people may not understand the impact of their actions and be concerned about the consequences so they may not seek help, allowing the situation to escalate to crisis.





# Explanation of CAPVA

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There is no single explanation for CAPVA, some families experiencing CAPVA may have a history of domestic violence and abuse. In other cases the violence and abuse is contextualised with other behavioural problems such as substance abuse, mental health problems, learning difficulties, or self-harm. In some cases there are no apparent explanations for the violence or abuse and some parents find it difficult to understand why one child is aggressive towards them when their other children do not display such behaviour. CAPVA effect's all levels of society. Some parents reporting this form of violence and abuse to the police are not in full-time employment and some are struggling with financial and housing problems; others are in professional jobs earning high incomes. It may be the case that adolescent to parent violence or abuse is more likely to be identified in families who are already in contact with support services or the criminal justice system; and/or that such families find it more acceptable to report the problem and ask for help.





# Child/Adolescent to Parent Violence and Abuse Risk Screening Tool

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This tool will help you to identify known risks in Child/Adolescent to Parent Violence and Abuse (CAPVA) cases and will inform specific considerations in relation to young people and their relationships to support your professional judgment. It also help you to identify suitable cases to be reviewed at MARAC (Multi-Agency Risk Assessment Conference) and inform referrals into Early Help, Children's Social Care and/or Social Care Direct for specialist child/adult support where necessary.

In the risk screening tool outlined below, there are a number of direct yes/no/unknown questions, plus an opportunity to record background information or specific comments. Efforts should be made to ensure that information is captured for each question and reflected in any onward referrals to contextualise any identified risks.

The information source for each piece of information should be recorded and if there are multiple sources this should be noted.

The tool should be completed with parent/carer to gain the level of risk posed to them. The tool can also be used again to review risk if and when required.

The tool should be used with the parent in a trauma informed way that facilitates conversation and builds on relational practice. In each section there are a number of questions that practitioners should consider within the context of their assessment.

These questions can inform onward referrals and should be as detailed as possible. If there are a number of unknown answers, this will impact on the validity of the process and efforts should be made to seek full information from a range of sources as required.



# Parent/Carer - Child Relationships

## Tell me what worries you about your relationship with your child.

Explain reason for completion of checklist – consider the use of a worry statement

The term parent-child relationship refers to the unique and enduring bond between a parent/caregiver and the young person/ child.

To understand the parent-child relationship, we must look at the ways that parents and children interact with one another physically, emotionally, and socially. Children's physical and emotional status, social and cognitive development, family dynamics discussed in Child-parent Relationship and Potential Problems should also be considered.

### Questions to consider:

- 1 How do they make you feel about yourself as a parent/person, what happened to make you feel that way?
- 2 Has there ever been a time they ever hurt you physically or with words or other actions?
- 3 Has there ever been a time you have been scared of them?
- 4 Have you any worries about SEN/ mental health issues?
- 5 Do you have any worries about drugs and alcohol use?
- 6 Has there ever been a time when they have witnessed aggression and/or violence from someone in their lives?
- 7 Have you any worries about their friendships?
- 8 Have you ever worried about money because of the way your child behaves towards you?
- 9 Who has been affected by what happened and how?
- 10 When was the first time that the behaviour you're worried about happened?
- 11 What happens when the behaviour is at its worst and when was the last time it happened?
- 12 Can you identify any triggers?

Often, despite a parent's best efforts, problems in the parent/child relationship arise, these problems may start when a child is young or present as the child gets older and enters different stages of development. The extent of a child's behaviour and continuous difficulties is a strong contributor to parenting and child stress, Consider age, circumstances, events or triggers.

It is important to know from the parent's perspective, what they feel has been the worst incident and also to understand the length of time this has been a concern. By understanding this in the context of developmental stages and the impact on the child, parent, and anyone else, we can help to safety plan to reduce this. We can also make sure that the right support is offered and provided.

**Within this section - consider the use of the harm matrix to support your assessment**

# Answers for Page 10

# Parent/Carer - Child Relationships

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Please tick the appropriate box that reflects the risk

1

**Can you think of/give an example of a time you felt afraid of your child?**

Victims of domestic abuse often monitor their own safety and their fear level can be a guide to escalating risk. If an incident or pattern of behaviour occurs that particularly increases their fear it can be an indicator that dynamics have shifted or risks have increased.

**It can be useful to record which are the most frightening behaviours and why as a guide to safety planning.**

Yes

No

Not known

2

**Is the violent, abusive, aggressive behaviour that you are concerned about and that is causing you harm, happening more often?**

Any use of weapons or general objects as weapons demonstrate an increase in severity and a higher threat of and intention to harm.

Yes

No

Not known

3

**Is the violent, abusive, aggressive behaviour that you are concerned about and that is causing you harm, getting worse?**

Escalation in frequency or severity of violence and abuse can indicate an escalation in risk. It may be useful to identify what the worst incident has been in terms of seriousness.

Yes

No

Not known

**PLEASE NOTE:** We know that for some parents this will be an incredibly sensitive topic and instinct to protect their children may lead to minimising or denying behaviours. Some of the following questions may have been answered within the previous discussions you will have had and a gentle paraphrase/ reminder of them should be used when needed. Parents should be reminded that we know that this can be a hard thing for them to do and that we are not here to judge but to offer support for both them and their child.

# Parent/Carer - Child Relationships

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Please tick the appropriate box that reflects the risk

4

**Does your child try to control things that you do, or display jealous behaviour towards you? For example, have you ever changed plans due to being worried about how your child would react?**

Domestically abusive behaviour demonstrates being in coercive control of another individual. Higher levels of control equate to higher risk factors.

**Yes**

**No**

**Not known**

5

**Has your child ever physically hurt you?**

**This may include some things that might be difficult to talk about but helps us to understand how best to support you and your child, and may include your child trying to strangle you, choke you, suffocate you or drown you?**

Any such attempts should be taken very seriously as previous strangulation can be an indicator of future homicide. It may be useful to ask additional questions to assess the seriousness of this risk such as:

When did they attempt to strangle/choke/suffocate/drown them? What did they do? Did the young person they use implements (e.g. shoe laces) or use their hands? How often do they do this? Did the parent/carer lose consciousness?

**Yes**

**No**

**Not known**

# Parent/Carer - Child Relationships

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Please tick the appropriate box that reflects the risk

6

**Has your child ever spoken to you in a way or acted in a way that made you feel uncomfortable for example used sexual words/acts around you, called you something that was of a sexual nature that made you feel uncomfortable or worried, it may also include showing you pornography or sexual photos?**

This may appear a difficult question to ask a parent/carer. However, it is crucial that you ask as it is very important to understand the risk of sexual abuse that a parent can face.

**Yes**

**No**

**Not known**

7

**Has your child ever used weapons or objects to hurt you?**

Any use of weapons or general objects as weapons demonstrate an increase in severity and a higher threat of and intention to harm.

**Yes**

**No**

**Not known**

8

**Has your child ever threatened to kill you or someone else and even though it must be hard to admit it, you actually believed they would do it, at the time?**

It is possible that some parent/carers may minimise their experience of threats to kill, therefore it is important to explore the context in which they were made i.e. during times of violence? In front of others? When weapons were involved? It is also important to assess whether the parent/carer is genuinely frightened by the threats.

**Yes**

**No**

**Not known**

# Parent/Carer - Child Relationships

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Please tick the appropriate box that reflects the risk

9

**Has your child ever mistreated an animal or family pet?**

**What happened? What led to this behaviour? How did the child/young person mistreat the animal? What happened afterwards?**

Mistreatment or cruelty to animals or pets can be an indicator of reduced empathy levels and a willingness to be involved with violent or aggressive behaviours.

**Yes**

**No**

**Not known**

10

**Is there anyone else in the family at risk of violence or abuse? Who is at risk? How are they at risk?**

Gauging the scope of those being victimised and any change or increase in this scope can indicate a shift in power dynamics. It is important to identify others at risk and the ways in which they are being harmed or potential for harm. Extra detail required especially if there are concerns in relation to the safety of any other child or adult within the family.

**Yes**

**No**

**Not known**





# Parent/Carer - Child Relationships

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Please tick the appropriate box that reflects the risk

11

**Do you know if your child uses these types of behaviours outside the house or towards others like at school or with their friends? Can you tell us some more about this?**

People causing harm of familial abuse or intimate partner do not tend to discriminate in terms of who they are abusive towards. The information revealed by this question will point you to which other support agencies need to be involved with the additional people at risk. For example, this may include children and young people's services or the police.

**It is important to identify the following:** Who the other victims are. If they are children what are their ages, how and when were they harmed? Current whereabouts of the other individuals who have been harmed.

**Yes**

**No**

**Not known**

12

**Has your child been involved with the Police in any way?**

Previous police call outs, interventions or charges can indicate prior escalation of severity and increased levels of victim fear and helplessness. Investigation of the nature of earlier Police involvement may be useful.

**Yes**

**No**

**Not known**

# Parent/Carer - Child Relationships

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Please tick the appropriate box that reflects the risk

13

**Has your child had problems in the past year with drugs (prescription or other), alcohol or mental health leading to difficulties in daily functioning?**

**If yes, please specify which and give relevant details if known.**

A parent/carers may be acutely aware of how alcohol or drugs affect the person who harms them and may also blame the abuse on the addiction of that person. The parent who has been harmed may be reluctant for the police or any agency knowing about the abuse for fear they would find out about the involvement with/use of drugs by the person who harms them. They may fear incrimination themselves or repercussions.

**Drugs**

**Alcohol**

**Mental health**

14

**Does your child have any problems with addictive behaviours e.g., on-line gaming, viewing pornography, social media? What are the details of these?**

Addictive behaviours can be triggers to conflict at home and abusive episodes as the addiction or desire to undertake certain activities can outweigh other family or relationship considerations.

**Yes**

**No**

**Not known**

# Parent/Carer - Child Relationships

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Please tick the appropriate box that reflects the risk

15

**Has your child ever demanded money from you or tried to financially control you?**

Provides a guide to the range of abusive behaviour and whether the scope of these has increased. A combination of behaviours can increase the level of fear or intimidation. Finances will need to be considered by all practitioners when considering safety options.

**Yes**

**No**

**Not known**

16

**Does your child have any mental health issues, is depressed, suicidal or isolated or have a specific mental health diagnosis?**

Mental health issues need to be carefully assessed not only in relation to effective engagement, but also as potential triggers for conflict or abusive episodes.

**Yes**

**No**

**Not known**

17

**Does the child have any issues relating to identity?**

**Yes**

**No**

**Not known**

# Parent/Carer - Child Relationships

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Please tick the appropriate box that reflects the risk

18

**Does your child engage with school e.g. do they attend regularly?**

Failure to engage with school or periods spent outside school can increase association with negative peer groups and risk taking behaviours, which may exacerbate conflict at home or increase the risk of abusive behaviour. Disengagement with education can be a risk factor for anti-social or criminal behaviour.

**Yes**

**No**

**Not known**

19

**Does your child associate with a difficult friendship/peer groups?**

Association with negative peers or gang membership can influence criminality, risk taking behaviours and substance abuse. These groups may be reinforcing of abusive and violent behaviours. Loyalty to peer groups can conflict with or be destructive of family relationships.

**Yes**

**No**

**Not known**

20

**Has your child experienced personal trauma?**

**If yes please specify which and give relevant details if known.**

Children can experience both short and long term cognitive, behavioural and emotional effects as a result of bereavement, domestic abuse or being separated from their family. Each child will respond differently to trauma and some may be resilient and not exhibit any negative effects, however it is important to explore this further.

**Death/bereavement**

**Sexual or physical harm**

**Been in care**

**Other**

# Parent/Carer - Child Relationships

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Please tick the appropriate box that reflects the risk

21

## Has your child ever experienced or witnessed abuse between adults?

Growing up with domestic abuse can be a risk factor for individual aggressive and abusive behaviours as well as a possible indicator of emotional, psychological or physical harm or that a young person may be subject to post traumatic stress disorder. Any on-going exposure, access or contact to an abusive parent may indicate that the young person is still at risk of harm or under threat.

**Yes**

**No**

**Not known**

22

## Is your child currently being exposed (seeing, hearing, experiencing) to adult to adult domestic abuse?

Any ongoing exposure to adult domestic abuse is a risk for young people's psychological, emotional and physical well-being and may require a referral for parents into adult domestic abuse services or a child protection referral. Children may also feel angry, guilty, insecure, alone, frightened, powerless or confused. They may have ambivalent feelings towards both the abuser and the non-abusing parent.

**Yes**

**No**

**Not known**

23

## Is your child under any threat of violence or abuse from anyone at the moment? Provide details of who from and the nature of the abuse?

Any potential harm that a young person may be exposed to can be a trigger for abusive behaviours.

**Yes**

**No**

**Not known**

If answering yes to Question 23 to 26 - Safeguarding Adults Referral must be considered alongside manager. Safeguarding adult's duty applies where an adult with needs for care and support is at risk of or experiencing abuse or neglect, regardless of whether or not they have any care and support services.

# Parent/Carer - Child Relationships

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Please tick the appropriate box that reflects the risk

24

**Do you see yourself as vulnerable in any way, or have you any special requirements in accessing support?**

Additional needs can increase individuals' vulnerability and ability to protect themselves. Consider physical or learning difficulties that may impact on keeping safe and accessing appropriate support. Document and explore additional needs as part of your narrative and any referrals.

**Yes**

**No**

**Not known**

25

**Are you feeling low or finding your emotions hard to cope with? Do you have suicidal thoughts or have you ever self-harmed?**

The impact of violence and abuse can have mental health implications for victims and may require a referral to appropriate services or victim support services. Mental Health can be a barrier to accessing support or assistance and further links to isolation.

**Yes**

**No**

**Not known**

26

**Do you feel isolated from your family, friends or support networks due to your situation?**

Any family isolation can increase risk as channels of support and protection are reduced. Isolation can increase the impact of emotional abuse, encourage self-blame or minimisation or the risk of mental health issues and/or substance misuse.

**Yes**

**No**

**Not known**

# Parent/Carer - Child Relationships

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Please tick the appropriate box that reflects the risk

27

**Have you ever used drugs and/or alcohol to manage difficult situations or feelings? What is the nature of your use?**

Any mental health or substance misuse issues for victims can increase their vulnerability, ability to protect themselves, their parenting style and is also a barrier to accessing support.

**Yes**

**No**

**Not known**

28

**Have you ever felt able to share your concerns with the Police or anyone else, such as a family member or professional because of your child's behaviour?**

29

**What was the impact of their involvement?**



# Parent/Carer - Child Relationships

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30

Tell me what's working well within your relationship?

31

Tell me about a time when you were able to calm a situation, what did you do and who helped you?

32

Tell me about a time when you enjoyed spending time with your child, what did you do and how did you feel?

# Parent/Carer - Child Relationships

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33

If there was one thing about your relationship with your child that could be different what would that be?

34

What would your child say it would be?

35

What do you think professionals could do to support change?

# Parent/Carer - Child Relationships

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## **If there are any additional sources of information from others, please indicate**

significantly raise the level of risk and may in itself prompt a course of action or referral to other services e.g. gang membership, sexual assault etc.

The risk screening tool and associated detail should be used to inform case management, safety planning, family agreements, programme delivery and multi- agency working and should be at the centre of any case review, external intervention or referral to other services.

It is important to note the source of the risk information, as some sources may be more reliable than others and some information may be able to be collaborated giving extra weight or perspective. It is generally a feature of domestic abuse that the seriousness and severity of incidents will be minimised and denied by both victims and perpetrators which should be taken into account when making any assessment of risk.

In cases of CAPVA parents can self-blame, internalise responsibility, be defensive,

be reluctant to criminalise their child and unwilling to share information because of possible consequences for the young person. Equally young people may minimise the seriousness of incidents, be in denial of consequences and be unwilling to take ownership and responsibility for behaviours. The potential for these effects should be taken into account in any effective risk or case management procedures.

## **Total number of ticks:**

**Yes**

**No**

**Not known**

## **Professional Completion - Scoring Information**

The risk screening tool is scored by totalling the number of yes/no answers, with the higher the number of yes answers indicating a higher level of risk. In establishing risk professional judgement and skill is required as sometimes a single risk factor can

# Analysis of professional judgement on risk level

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Please use the space to the right to include an analysis of the situation and your professional judgement in relation to the level of risk posed and vulnerabilities to the parent below: Based on the number of yes answers coupled with your professional judgement please circle the level of risk posed.

**Please state what outcome would you like for the Parent and young person victim**

e.g. - In depth safety plan/healthy relationship intervention/legal advice/support to police/court/housing advice/support)

**Actions to be taken - Pathway document to inform decision**

Action to be taken

By whom

By when

# Helping parents to understand the risk levels in their families

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It is important that this is handled in a sensitive manner. Revealing to any person that they are at high risk of serious harm or homicide may well be frightening and overwhelming. It is important that you state what your concerns are exactly by using the answers the parent/carer has given you and by explaining your professional reasoning/judgement. It is important that you explain what the next steps are to be, eg risk management/police reporting; safety plans; referrals to children's safeguarding teams and the MARAC. In every case that is referred to a MARAC, a referral to children's social care should also be made.

In cases of Honor Based Violence (HBV), the person who has been harmed will need reassurance that there are systems in place to ensure that additional family members will not be contacted or informed. Such contact could clearly put the person who has been harmed at much greater risk.

**Identifying your client is not currently high risk and that, as a IDVA/CPVA or another trained practitioner, you may need to refer them to a different agency or provide a different service as a result, may be unwelcome. This has to be managed carefully to ensure that the client doesn't feel like their situation is being minimised or so they don't feel embarrassed for reaching out for help consent to share will be required unless safeguarding risk to self or others is identified.**

Parent/Carer Consent to referral and the sharing of information

Name

Signed

Date

**To be completed by Practitioner Manager.**

I have reviewed the screening tool and agree with actions listed.

I confirm that safeguarding procedures have been adhered to and where any safeguarding concerns raised, appropriate referrals made.

Name

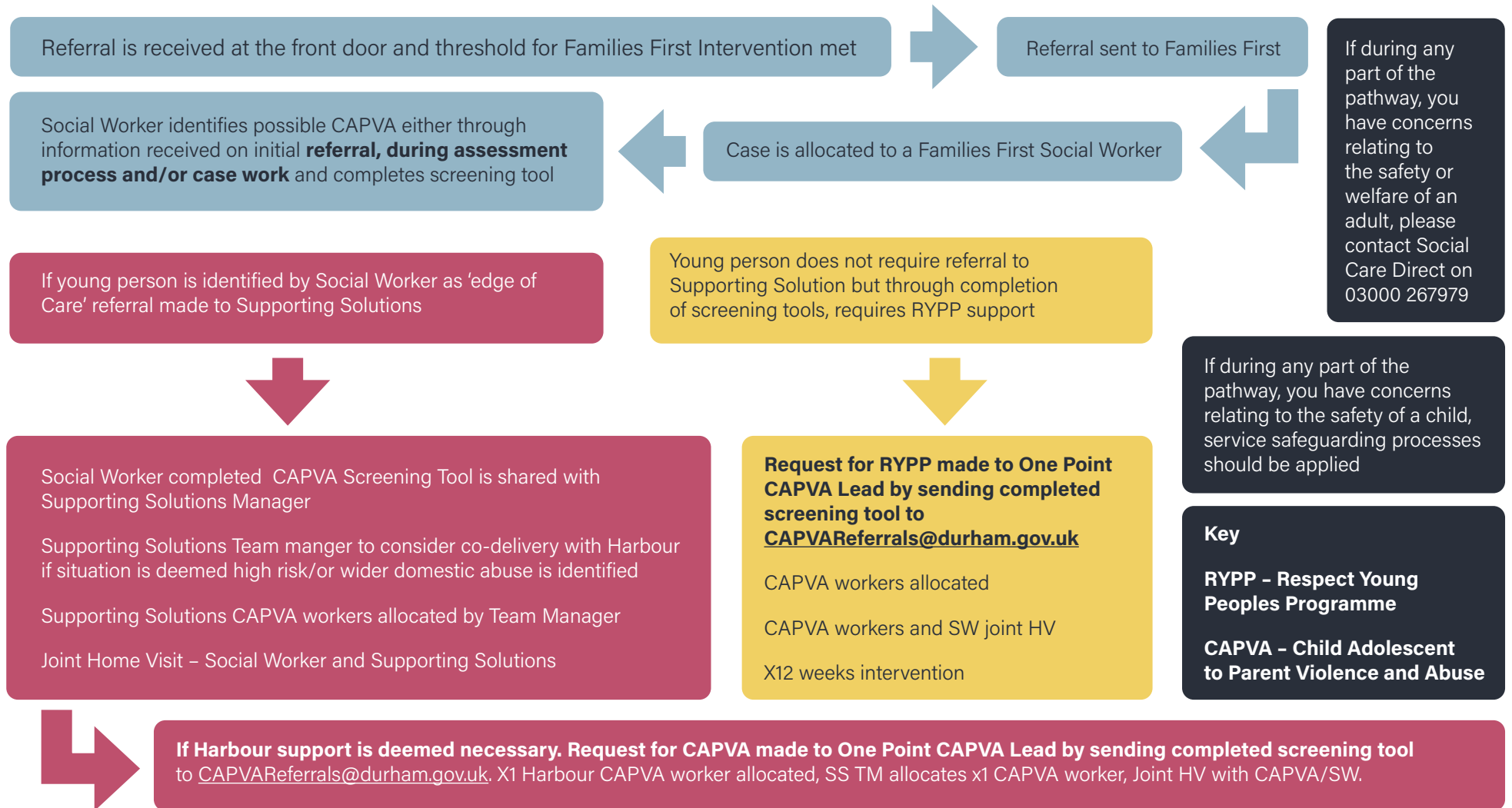
Job role

Signed

Date

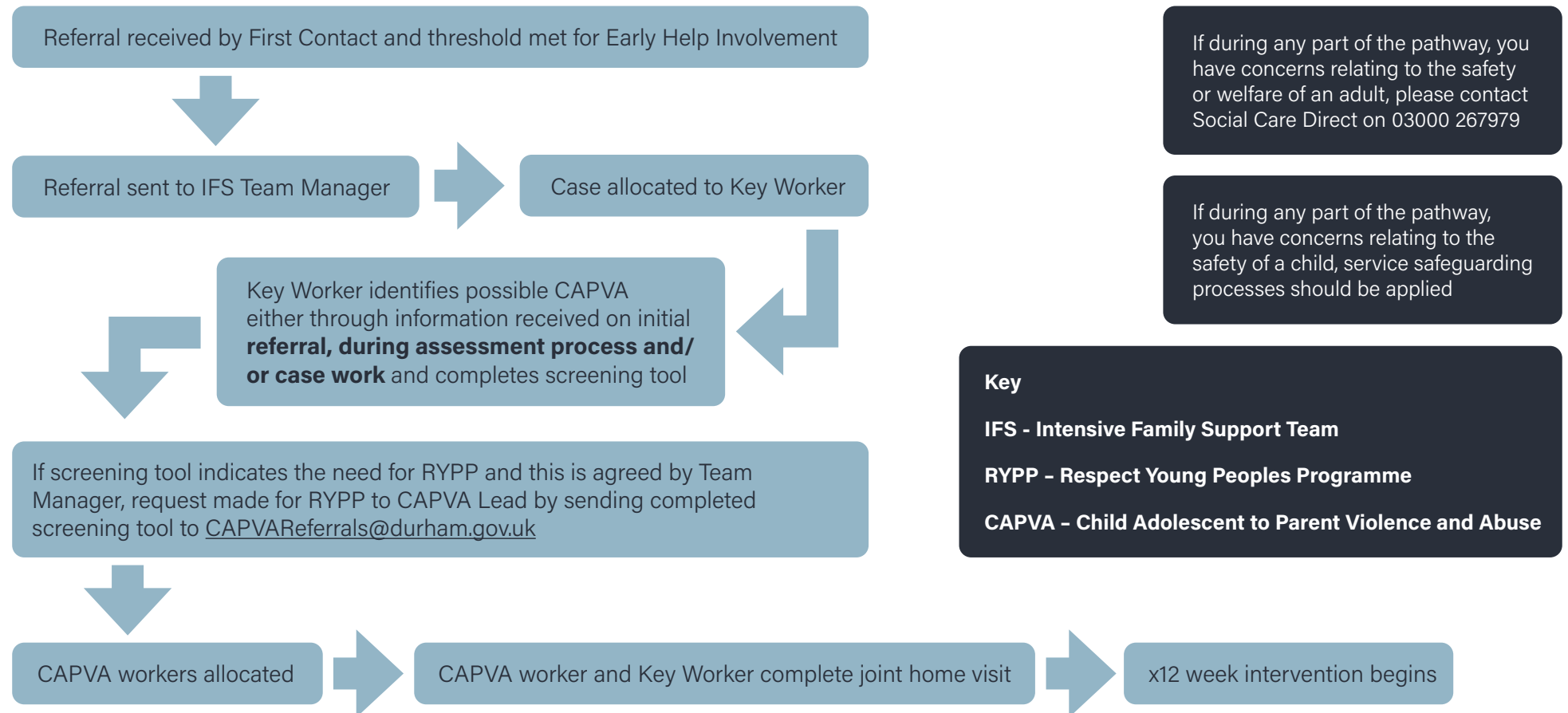
# Our Pathways for CAPVA support in County Durham

## Families First and Supporting Solutions Pathway



# Our Pathways for CAPVA support in County Durham

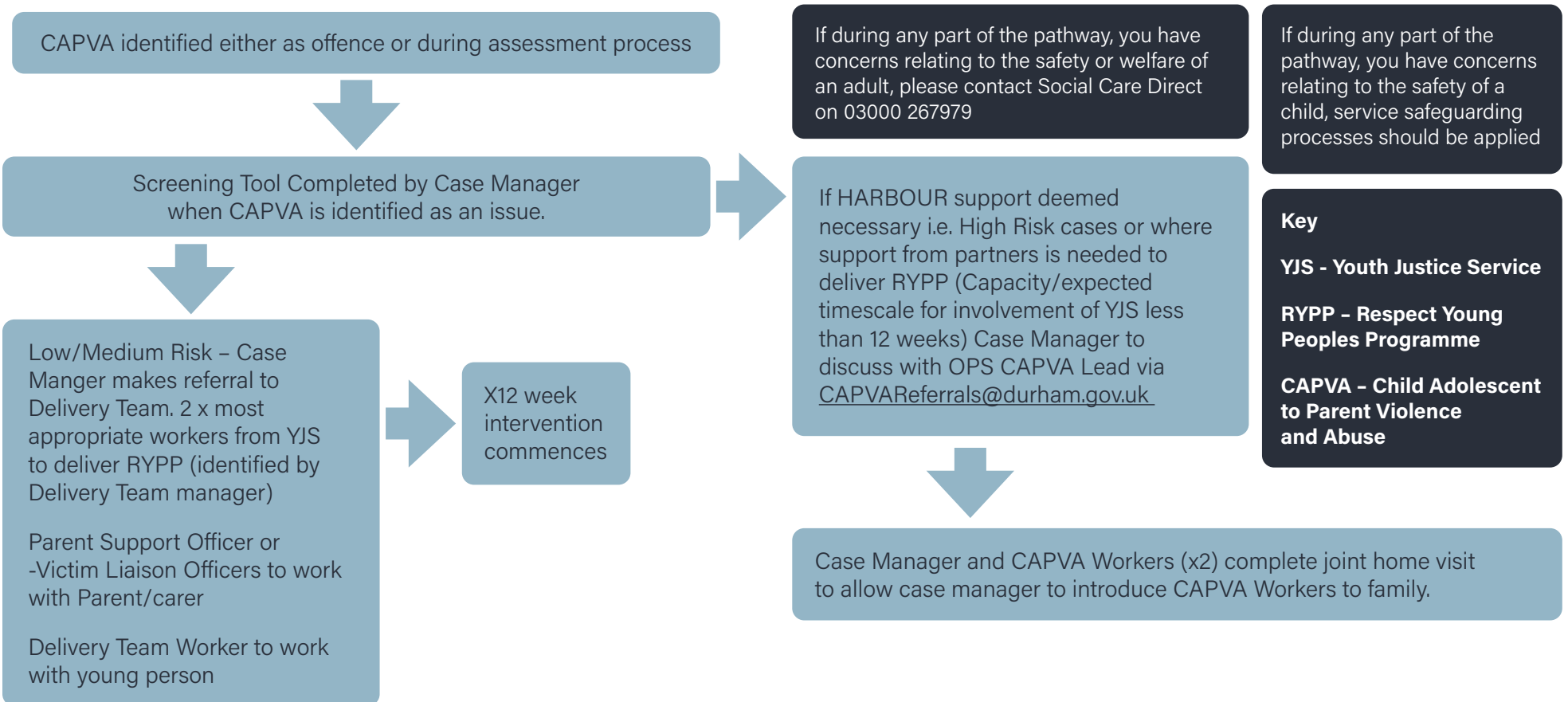
## One Point Service Pathway





# Our Pathways for CAPVA support in County Durham

## Youth Justice Service Pathway



# Safeguarding Children

It is important that a child using abusive behaviour towards a parent, guardian or carer receives an appropriate safeguarding response as well as the victim. Services should follow their own safeguarding procedures in terms of establishing level of need and service response.

It is important that the child takes responsibility for their behaviour. While the use of out of court disposals in the context of domestic abuse need to be approached with caution, in the context of cases of CAPVA, out of court disposals or a wrap-around safeguarding response should be considered alongside any criminal justice response as most parents wish to build and maintain their parent-child relationship and do not want their child to be criminalised.

This means that typical domestic abuse responses holding perpetrators to account may not always be appropriate. Practitioners highlight the need for tailored responses to CAPVA rather than relying upon generic parenting programmes and also identify the need to move away from the emphasis on parental responsibility and blame.

Children may need support from a wide range of local agencies. Where a child could benefit from coordinated support from more than one agency (e.g. education, health, social care, and police) there should be an assessment completed and multi agency response initiated through TAF process. These early assessments (such as those used in early help) should identify what help the child requires to prevent their needs and behaviour escalating to a point where intervention would be needed via a statutory assessment under the Children Act 1989. Consideration must always be given to the risks posed to the parent and their support needs, as part of a whole family approach.

The safeguarding of all children and adults within the property should also be considered throughout.

## Adopted Children

Many adoptive families are known to encounter issues because of the child's previous experience of trauma. A recent study found that

**violence and abuse was an issue in as many as**

**30%**

**of adoptive families, and that in 3% of adoptive families this was serious enough to lead to adoption breakdown.**



# Safeguarding Adults

Where CAPVA involves a victim who meets the Care Act (2014) safeguarding adults definition i.e.

## A person who:

- A** Has needs for care and support (whether or not the authority is meeting any of those needs);
- B** Is experiencing, or at risk of, abuse or neglect; and
- C** As a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.

Adult Safeguarding procedures should be followed. This will allow multi agency information to be gathered, a shared risk assessment to be collated and a safety plan agreed for the family.

However, not all parents will meet this threshold and so there should always be a process of safety planning put in place for the parent regardless of adult social care involvement.

It should be a core element of working in partnership with victims and other agencies, taking into account the outcomes of risk assessment and risk management. Safety planning involves more than assessing potential future risk; it can help create psychological safety, space to recover and freedom from fear. Other members of the household's responses to questions about what they do when there is violence or abuse should be considered in safety planning. Risk assessments can assist safety planning and should aim to:

- **Help to understand the parent's fear and experiences as well as the fears of the child;**
- **Use and build on existing positive coping strategies;**
- **Provide a safe physical space to recover;**
- **Link to the relevant assessment framework being used by the agency and provide a holistic approach to safety and well-being;**

- **Be part of a continuous process and ensure that safety planning links into the overall plan for the victim and is not completed as an isolated process;**
- **Ensure safety plans are tailored to the individual. A 'one size fits all' approach is ineffective and potentially dangerous.**



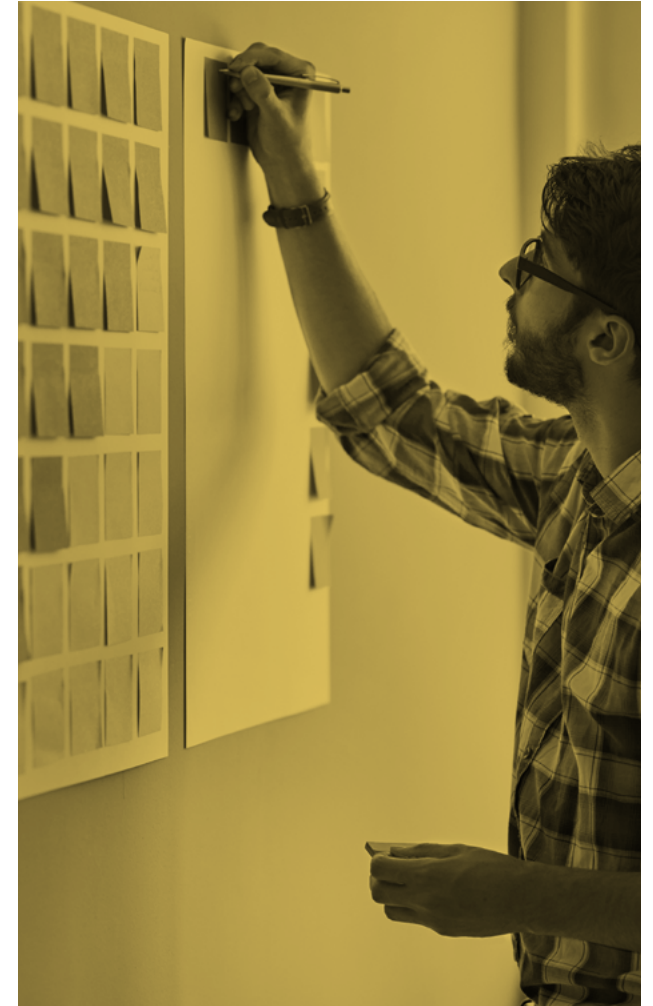
# Safety Planning

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Safety planning is a practical process that practitioners can use with anyone affected by domestic abuse and that includes those affected by CAPVA. It is vital that safety planning is completed alongside the parent (the adult victim) and any other family members at risk of harm. It should be a core element of working in partnership with victims and other agencies, taking into account the outcomes of risk assessment and risk management. Safety planning involves more than assessing potential future risk; it can help create psychological safety, space to recover and freedom from fear. Other members of the household's responses to questions about what they do when there is violence or abuse should be considered in safety planning.

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# Preparing a Safety Plan

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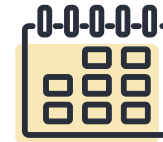
Safety planning is a practical process that Here are a few suggestions and questions you could ask when supporting the development of a safety plan with family -



**Think about where you could go and who could support you if an emergency arose.**



**Try to keep some money aside so that you can use a taxi, train or bus if needed.**



**Keep notes or a diary with dates and brief details about the violence. These may be needed in the future if you take protective or legal action.**



**Always carry a list of numbers you would need to call e.g. police, family members, support services.**



**Keep a spare set of house and car keys in a safe place.**



**It is important to inform yourself about your legal rights and rights of your child so that you are clear about the full range of options available to you, even if you choose not to take legal action.**



**Ensure you have access to a phone or mobile.**



**Ensure other children can use a phone and know emergency numbers.**

# Advice for parents experiencing CAPVA

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If you are experiencing violence or abuse from your child/young person, it may be hard to admit that there is a problem, but if your child/young person is being abusive or violent towards you, then this is unacceptable.

**You deserve to feel safe in your own home and family life.**



## Look after yourself

This is vital to cope with the anger and aggression from your child /young person.

You probably feel exhausted, demoralised and are likely to be making huge efforts to get a tiny amount of control.

## This is not your fault

No parent can avoid making mistakes, life itself is an imperfect process full of disappointments, and difficulties and children need to be able to cope with these.

## Choose your battles

You can't tackle everything at once, put some issues on the back-burner to be dealt with later.

## Try not to take it personally

If your child is struggling, it's often because of a range of issues that may have been beyond your control. Once you are aware of them, you can give the support and help to address their fears and worries.

## Separate the behaviour from your teen

You can still love your teen but not like their behaviour. Use language that separates the behaviour from your teen - Use 'I statements' that really do make a difference: for example "I feel hurt when I'm called names because I don't feel loved and respected". Repeating this, and being consistent in using it, works.

**Avoid using language that blames and is negative.**

# Advice for Parents experiencing CAPVA

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## Ignoring the behaviour won't make it go away

If it is not addressed, the violence or abuse could increase and become a life-long pattern; help them break the pattern.

## Keep yourself safe

Keeping yourself and others around you safe from harm is so important. If you can spot the signs that your child/young person's behaviour is escalating and could become violent, take steps to protect and keep yourself and others within your household safe.

A safety plan will support you in doing this. If you feel you or any member of your household is in danger and/or at risk of harm, call the police - 999.

## Calling the police

You may feel reluctant to call in the police as you may not want your child to get into serious trouble or for other reasons. The police have been working with many families on adolescent to parent violence and abuse and understand the impact. If you are in fear for your safety or you are feeling threatened it is ok to call the police to help diffuse the situation and for you to feel safe.

## Communication aids

Can be helpful if the young person has a disability that impacts on their communication.

## Redress the balance

Often the only attention you will be giving your child/young person is in response to negative behaviour. If you feel able to, find moments where you can show your appreciation when they are doing well.

## Be aware of your own responses and reactions to conflict

You might be inflaming the situation without meaning to, for example, by shouting or responding back with aggression. Keep yourself calm. Leave the room for a while if you need to.



# Advice for Parents experiencing CAPVA

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## Acknowledge their feelings

“I know you’re really angry”, recognises the fact without criticism. “What would help you now”, offers support but does not have to be agreed to, as does, “I’ll see what I can do and we’ll talk about it later”. A gentle look, a kind touch can convey this without hostility and before trying to talk about what is wrong.

“  
**I know you’re  
really angry**  
”

## Don’t fight fire with fire

Never use violence with your child/ young person. If you are hitting your teenager in response, then you are giving them the message that it is OK to use violence to solve disagreements.

## Try to find the root of the anger

School pressures, bullying, friendships, mental health, family breakdown, illness can all be trigger factors that add to a child’s stress levels. They are not excuses but may be reasons for it.

Talking through the pressures, listening to your teen attentively, without judging, interrupting or directing them can help them to offload their feelings and release the pressure constructively.

Help them develop self-strategies – Helping your teen to understand the triggers and what to do when they are angry is crucial to help them overcome this. When things are calm, have a chat and find out what they think would work for them. It may be a case of trial and error but it is good to help them manage their emotions and find a different outlet for their angry feelings. They might want to use calming down strategies for their anger or an alternative option is meditation to help them quieten down their mind.

**Let them know that you are there for them.**

## Give them space

Recognise that your child/young person is taking anger out on you and may not know how else to deal with difficult feelings. Once they have calmed down, you may be able to talk to them about what has happened and suggest they let you find them some help. This is especially important for young people with autism, sensory overload and disruption to routine can be a trigger.

## Get support for yourself

Know what support you need, speak to friends and relatives to get the best fit that you can.

## Seek support from school

Is the aggressive behaviour displayed there too? The pastoral team may be able to support with strategies used in school which will also give a clear consistent message to the young person.



# RESPECT Young Peoples Programme (RYPP) Intervention

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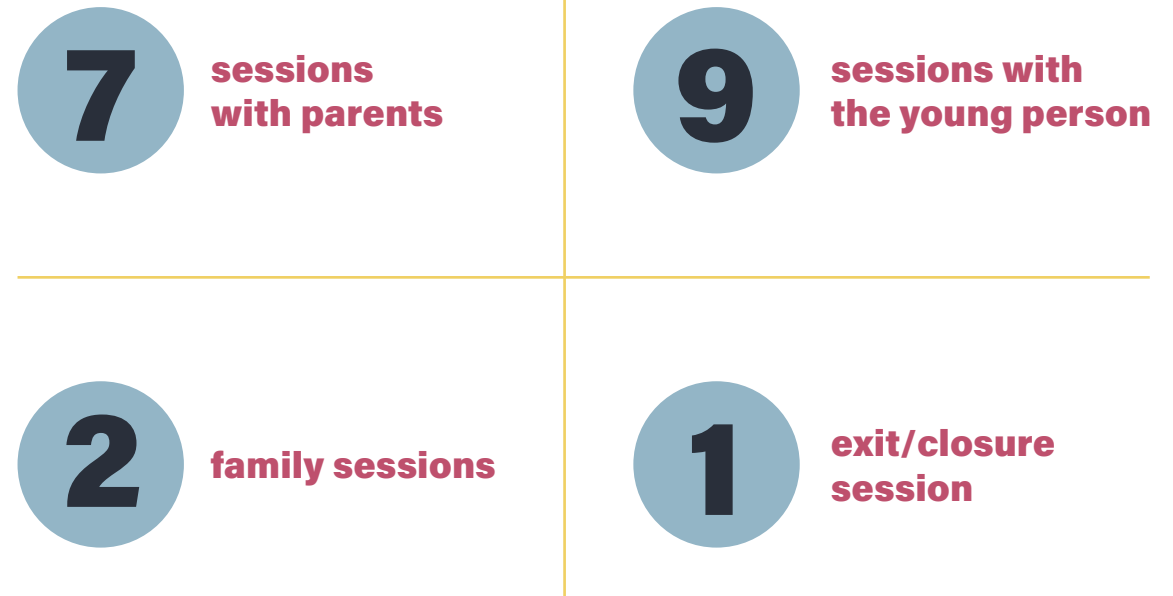
The RYPP is a programme for families where children or young people aged between 10 and 16 are abusive or violent towards the people close to them, particularly their parents or carers.

The programme avoids blame and works together with both the parents/carers and the young person seeing them all as part of the solution. The programme is designed to enable families to identify negative behaviour patterns and work towards positive outcomes.

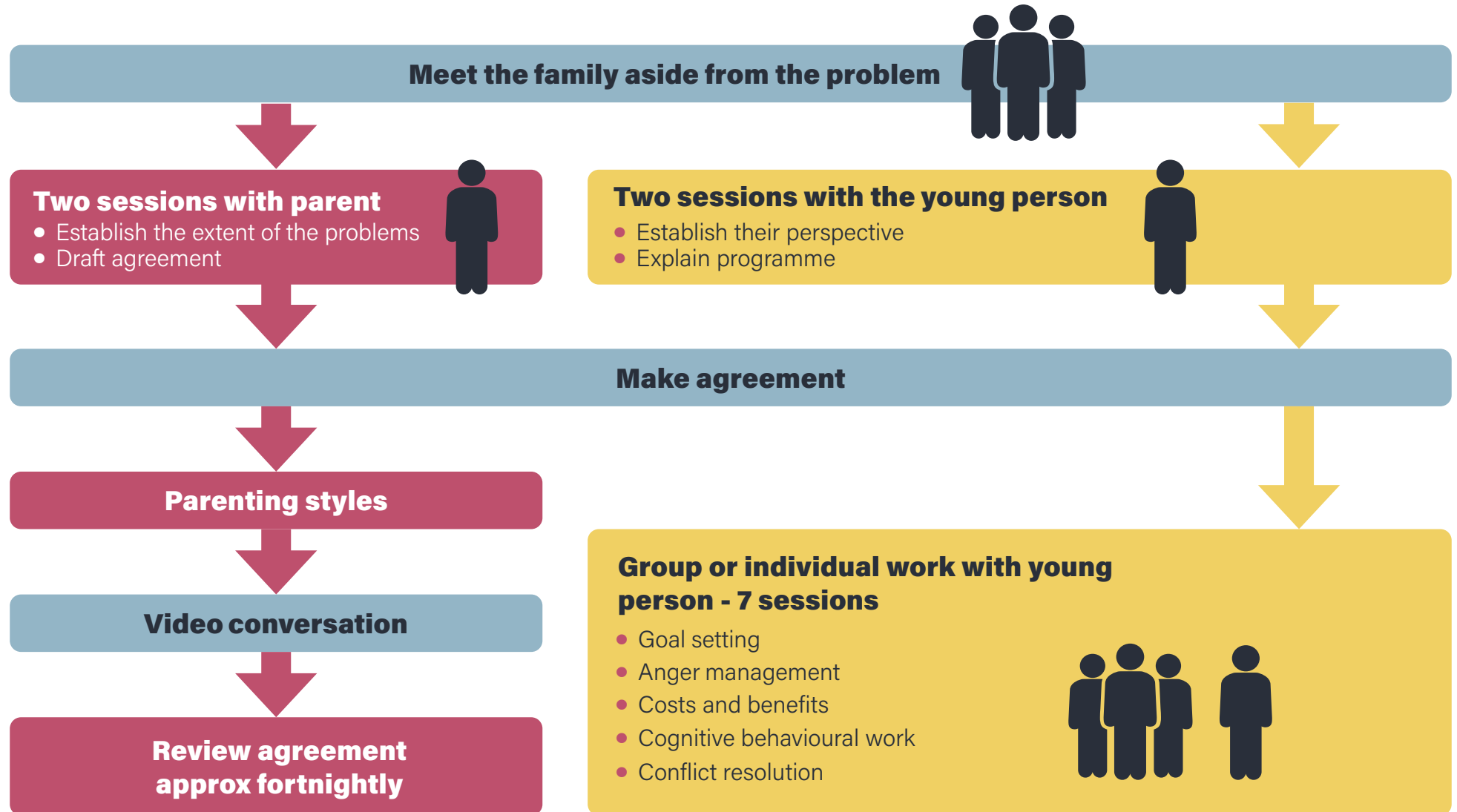
The RYPP practitioners provide support, insight and simple solutions to help to improve family relationships via weekly structured sessions and can take around 3 months to complete.

Sessions are varied and use a range of tools and techniques. Some sessions are with the whole family, some with the parent and some with the young person. The programme reaches its full potential if both the young person and parent(s)/Carer(s) are willing to engage.

**18 sessions delivered over 12 weeks, based on approximately-**



# RESPECT Young Peoples Programme (RYPP) Intervention



# Outcome Measures

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The **CPAQ** to measure 'Child to Parent Aggression'

(CYP online questionnaire)

The **SDQ** to measure general child/ adolescent wellbeing

(Parent online questionnaire)

The **RYPP outcomes and delivery tool** – designed to reflect the Programme's **Theory of Change**

(Parent online questionnaire).

As part of the training, staff will receive a handbook with all information within, in regards to evidencing outcomes.



# Support

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If you are worried for the immediate safeguarding of an individual - **999**

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Childrens Safeguarding  
First Contact - **03000 267 979**

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**Report a concern about a child**  
- Durham County Council

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Social Care Direct - **03000 267 979**

Domestic Abuse -  
**Durham County Council**

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Reporting abuse -  
**Durham Safeguarding Adults**

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Domestic abuse, how to get help -  
**GOV.UK**

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**RYPP | Respect**

HARBOUR

- **03000 202 525**
  - **info@myharbour.org.uk**
  - Live chat on the **Harbour Support website**
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**Holes in the Wall**  
- Documenting Parent Abuse

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**Child to parent abuse**  
- Parental Education Growth Support

Respect

