Silence and Violence: Representations of Child to Parent Abuse in New South Wales and Japanese Education Policy

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Statement of Originality

This work has not previously been submitted for a degree or diploma in any university. To the best of my knowledge and belief, the thesis contains no material previously published or written by another person except where due reference is made in the thesis itself.

(Signed)_____ Date: 07/01/2020

Summary

Child to Parent Abuse (CPA) has been identified as a growing problem within New South Wales (NSW). However, this concern has yet to be reflected in policy or institutional responses. Research into CPA has been heavily contested and subject to competing interpretations which may have contributed to government and institutional inaction.

This thesis aims to understand how CPA is represented within educational policy and the implications of these representations for children and families who experience CPA. As a response to the lack of explicit policy regarding CPA, the thesis develops an alternative policy framework for CPA. The thesis focuses on educational policy because, although CPA is rarely represented as an 'educational problem' there is evidence that CPA is related to problems experienced at, or because of, school. The education system may, therefore, be a site for effective intervention in responding to situations of CPA.

This thesis applies the *What's the Problem Represented to be?* (WPR) poststructural policy analysis approach, developed by Carol Bacchi, and comparatively explores representations of CPA in NSW and Japanese educational policy.

The research was conducted in four stages. Stage one examined the representation of CPA within academic research. Six different representations of the 'problem' of CPA are identified through this analysis: 'family violence', 'child welfare', 'criminal justice' 'medical', 'educational' and finally 'child wellbeing'.

Stage two identifies the representations of CPA in NSW educational policies. It finds that CPA is represented through its absence in educational policy, and that this

representation constitutes CPA as either a 'responsibility' or 'disability' problem. Stage three compares these findings with representation of CPA in Japanese educational policy. Three key problem constructions are identified that characterise Japanese policy representations of CPA: the hyper-visibility and invisibility of CPA, constructing CPA as "a product of love" and erasing the individual in CPA.

Drawing upon the analysis of the NSW and Japanese approaches the thesis culminates in developing principles that could be used to develop a for a new policy framework for CPA that recognises both its complex relationship with other issues, and the ways in which it is unique. Four principles are developed to inform future CPA policy - that CPA policy must be visible, non-judgemental, integrated, and strengths-based and family-centred.

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Chapter One: Introduction

In a briefing paper prepared to provide incoming members of the 57th NSW Parliament with "an authoritative overview of […] issues affecting NSW in 2019" the NSW Parliamentary Research Service (NSWPRS) identified the increasing rate of adolescent family violence (AFV) as the first of ten key issues facing the state (2019:2). The report notes that adolescent-perpetrated family violence differs from family violence committed by adult offenders as:

> the most common scenario involving a young male offender and his mother [and] when parents are the victim, there is a tension in their dual role as both victim and carer of the offender […] more tailored approaches to prevention and response may be required" (NSWPRS 2019:114).

However, despite recognising AFV as a problem requiring a considered response the report does not mention adolescent-specific domestic violence policy nor do the linked resources contain information pertaining to either parent-directed or adolescent-perpetrated family violence (NSWPRS 2019:114).

This omission might be explained as a simple, if glaring, oversight if it were not representative of the treatment of Child to Parent Abuse[1] (CPA) and AFV within NSW and Australian policy. CPA, which can be defined as: *any* acts of parent-directed physical aggression and/or *severe* or *repeated* acts of verbal, financial and/or emotional abuse, was identified as a 'problem' in need of a policy solution as early as 1995 in the NSW Legislative Council's *Report into Youth Violence in NSW* (1995:102–14). However, although these concerns have been echoed by subsequent inquiries representing

[1] This definition of CPA draws on Simmons, McEwan and Purcell's (2019) exploration of Australian social norms regarding CPA.

diverse policy areas, they rarely result in concrete recommendations. It is rarer still for recommendations to be accepted and translated into government action (DSS 2016:33–34; Goward 2013; SCSI 2012:25). The failure of CPA to gain purchase as a 'policy problem' may be explained by the lack of consensus about what type of problem CPA is. CPA research has been heavily contested and subject to competing discursive interpretations. The unsettled nature of CPA research has been reflected in a confused and largely non-existent policy response. As CPA does not clearly belong to any one policy area it has been almost entirely overlooked by all institutional actors (Condry and Miles 2012; Elliott et al. 2017; Fitz-Gibbon, Elliott, and Maher 2018:45–50; Holt 2009; Hunter and Nixon 2012; Hunter, Nixon, and Parr 2010).

This thesis explores the way that research and policy represent the 'problem' of CPA and the implications of these representations for the treatment of families who experience CPA. Using WPR methods it will focus on educational policy because, although CPA is rarely represented as an 'educational problem' there is evidence that links CPA to a wide variety of 'problems' experienced at, or because of school which will be discussed in later chapters of this thesis.

In recent years there has been a dramatic increase in the number of families approaching police or social services for assistance with a child engaging in CPA, however there are few services available (Freeman 2018; Howard and Abbott 2013; Moulds et al. 2016:12, 2018; State of Victoria 2016:149–57). Despite overwhelming consensus that effective responses to CPA require a coordinated and family-centred approach, organisational funding restrictions and the fragmented nature of Australia's

community services sector makes it difficult to deliver appropriate support (Broadhead and Francis 2015:6–19; Fitz-Gibbon et al. 2018:45–51; Reid and Ervin 2015).

To address these issues, experts proposed working within the education system to provide support to families experiencing CPA (Fitz-Gibbon et al. 2018:42–44; Haw 2013:70–86). While the relationship between CPA and the education system is not well-understood, evidence indicates that many children who commit CPA also experience academic, social or behavioural problems at school (Biehal 2012:255; Borovoy 2008:553–54; Del Moral et al. 2019; Fitz-Gibbon et al. 2018:38–40; Howard and Abbott 2013:31--32; Jaureguizar, Ibabe, and Straus 2013). Australian research has found that parents who experience CPA frequently approach their child's school for assistance (Edenborough 2007:272–77; Haw 2013:10; Stewart, Burns, and Leonard 2007:188). Although there are reports of individual institutions providing valuable support, the overall response has been haphazard, causing some families additional harm (Fitz-Gibbon et al. 2018:38–42; Haw 2013:65–86; Howard and Abbott 2013:36; Stewart et al. 2007:188).

There is little research on CPA within NSW. The most significant studies are now more than a decade old[2]. Within the body of relevant literature only Haw (2013) has specifically focused on the educational system, but did not engage in policy analysis. This thesis builds knowledge in this area by applying the *What's the Problem Represented to be?* (WPR) (Bacchi 2009) method of poststructural policy analysis to a

[2] See (Edenborough et al. 2008; Jackson 2003; Stewart, Burns, and Leonard 2007)

comparative exploration of representations of CPA in NSW and Japanese educational policy.

This thesis aims firstly to understand how CPA is represented within educational policy. Secondly, to understand the implications of these representations for children and families who experience CPA. Finally, to develop an alternative policy framework for CPA. This thesis does not aim to determine who, or what is responsible for *causing* CPA and does not intend to contribute towards parent or child-blaming discourses. Rather, it is trying to point the complex relational contexts in which CPA occurs, and highlight the need for policy which recognises the needs and strengths, of each individual and family affected by CPA.

The specific questions addressed in this thesis are:

1. **How has the 'problem' of CPA been represented within academic research?**
2. **How does NSW educational policy represent the 'problem' of CPA?**
    a. What do policies say (or fail to say) about how schools should respond to CPA? What potential responses are outlined in policy?
    b. What subject positions are produced within educational policy and made available to children and parents who experience CPA?
3. **How does the representation of CPA in NSW educational policy compare to the representation of CPA in Japan?**
4. **From this analysis what alternative policy principles can be identified?**

Chapter two introduces the WPR approach which provides the analytical and methodological framework for this research. It begins with an overview of the WPR

approach and justifies its suitability for analysing a phenomenon such as CPA and consequently the specific problems addressed by this thesis.

Chapter three addresses the first research question and draws on WPR methods to review how academic research has represented the 'problem' of CPA. Academic debates about how CPA should be measured and defined are analysed to demonstrate how these theoretical disputes affect what is known or is possible to know about the prevalence of CPA. From analysis of CPA research six different representations of the 'problem' of CPA are identified, beginning with four which have shaped CPA research drawing on 'family violence', 'child welfare', 'criminal justice' and 'medical' traditions. It then introduces two more possible problem representations of CPA as an 'educational' or 'child wellbeing' problem, which provide valuable tools for addressing the problems identified in this thesis. These six constructs provide the frames for the policy analysis undertaken in subsequent chapters. Finally, it will demonstrate that disagreement about what type of problem CPA is has shaped, and at times, impeded, research and policy. This establishes one of the central arguments of this thesis, that there is a need to develop research and policy frames which are unique to CPA.

Chapter four applies the WPR approach to NSW educational policy, drawing on the analytical frames identified in chapter three. Within Australia the funding and administration of government primary and secondary schools is the responsibility of state governments with federal involvement predominantly limited to supplementary funding and the management of the national curriculum standards. There is, therefore, significant policy variation between individual states. NSW was selected as it is the most populous of Australia's six states and consequently the educational system with the

largest number of students. Over 30% of Australian school children attend NSW schools (ACARA 2018). Furthermore, although chapter three will discuss the difficulty of accurately estimating the prevalence of CPA, the available evidence suggests that the rate of CPA in NSW may be the highest of any Australian state (Moulds et al. 2018). It follows that NSW educational policy will affect a large percentage of Australian families who experience CPA. However, NSW has lagged behind most other Australian states in CPA research and policy. There is no policy position on CPA in NSW. Through an exploration of the representation and treatment of CPA within existing educational policy this thesis hopes to contribute towards the development of an effective policy response.

The chapter examines *The Wellbeing Framework for Schools* and the *Disability Strategy.* These policies were selected as they potentially have the most relevance to the treatment of families who experience CPA within the educational system. It examines how these policies represent, often through an absence of explicit representation, CPA. Two key themes are identified: 'responsibility' and 'complex' disability. Through this analysis four subject positions are identified: the 'disabled' (or 'disordered') child, the 'delinquent' child, the 'responsible', and the 'irresponsible' parent. The practical implications of these representations are demonstrated using illustrative case studies provided by the *Nationally Consistent Collection of Data on School Students with Disability* (NCCD). This chapter demonstrates the limitations and possibilities of existing NSW educational policy and the need to make CPA visible.

Chapter five contrasts the construction of CPA in NSW with a comparative analysis of its representation in Japan. Japan is selected because in contrast to NSW, educational policy

has explicitly addressed CPA. Additionally, Japan was found to be one of the only nations to have produced a substantial body of academic research relevant to the relationship between CPA and educational systems. As there has been little exchange between Japanese and English-language research (Kumagai 1997:117) this provides an ideal starting point for a cross-cultural examination of CPA. Chapter five demonstrates that Japanese policy offers a distinctly different representation of CPA as a predominantly socially produced 'problem' that is considered secondary to other 'youth' and 'educational problems'. It provides an overview of educational policy responses to these problems and highlights areas of contrast with NSW policy. It discusses three key areas that distinguish Japanese representations from the NSW policy discussed in the previous chapter: the hyper-visibility and invisibility of CPA, constructing CPA as "a product of love" and erasing the individual in CPA. This chapter concludes with a discussion of the strengths and limitations of Japanese policy in comparison with NSW.

A culmination of analysis in the previous chapters is undertaken in chapter six. A set of principles that should inform educational policy responses to CPA are developed these being that CPA policy must be visible, non-judgemental, integrated, strengths-based and family-centred.

Chapter seven, the conclusion, outlines the implications of this thesis including the significance of the findings for developing policy responses to CPA in NSW and more broadly.

Chapter Two: Methodology and Methods

Methodology

This thesis was conducted using the "What's the Problem Represented to Be?" (WPR) policy analysis approach developed by Bacchi (2009). WPR provides a guide to poststructural policy analysis grounded in the work of Michel Foucault and specifically the concept of 'discourse' as a productive, rather than simply repressive form of power. WPR suggests the 'problems' that policies seek to address are not pre-existing 'truths' but are brought into being through the process of defining who or what needs to change (Bacchi and Goodwin 2016:16–17). This viewpoint does not deny that "troubling conditions" which form the basis of "policy problems" exist but states that when targeted by policy, these phenomena are created as problems of a particular type, and that this process shapes the way that problems are experienced "in the real" (Bacchi 2012a). By "working backwards" from policy solutions it is possible to discern how a problem is thought about and imagine how it might be otherwise (Bacchi and Goodwin 2016:6).

The WPR approach offers particular value for this thesis due to the contested nature of CPA research that will be discussed in detail in the following chapter. Although family violence discourses are becoming increasingly prominent in other Australian states, CPA does not have a clear framework for problematisation in NSW. This provides an opportunity to explore the implications of different constructions and consider alternatives. While WPR has not previously been applied to CPA, other studies have demonstrated the usefulness of a social constructionist approach (Baker 2012; Haw

2013; Hunter et al. 2010). WPR and other post-structuralist methods have also been used in analysis of related topics such as representations of intimate partner violence in LGBTQ communities which, like CPA challenge traditional narratives of family violence as a form of patriarchal power and control (Cannon and Buttell 2016) as well as Australian domestic violence and educational policy (Murray and Powell 2009; Powell and Graham 2017; Powell and Murray 2008).

The WPR approach: The analytical framework for this thesis

Bacchi provides six interrelated questions which together form a comprehensive methodological and analytical framework for analysing the discursive construction of policy problems. These six questions will now be briefly explained.

1. **What's the 'problem' represented to be in a specific policy or policy proposal?** Question one is a "clarification exercise" that provides a starting point for analysis by asking the researcher to establish the representation of the problem that is implicit within a policy solution.

2. **What presuppositions or assumptions underpin this representation of the 'problem'?** Question two is grounded in Foucault's notion of "critique" and considers the "conceptual logics" that underpin a problem representation and allow it to "make sense".

3. **How has this representation of the 'problem' come about?** Question three involves a form of Foucauldian genealogy that asks how the conditions identified

in policy came about and highlights that they are not inevitable but formed through relations of power.

4. **What is left unproblematic in this problem representation? Where are the silences? Can the 'problem' be thought about differently?** Question four offers the researcher the opportunity to be "inventive" and consider alternative ways of thinking about a "problem". Comparative analysis is recommended for this stage of research to assist in the identification of "specific combination of practices and relations that give a problem a particular shape in a particular time and place" (Bacchi 2012b).

5. **What effects are produced by this representation of the 'problem'?** Question five asks the researcher to consider the implications of the problem representations that they have identified and consider three interconnected types of effects:
    - Discursive effects: The limits a problem representation imposes on what is possible to be thought or said.
    - Subjectification effects: The way that different representations contribute towards producing categories of subjects. These categories are often created through dividing practices in which one group of subjects is defined in opposition to another, often stigmatised group which is implicitly represented as responsible *for* the 'problem' that policy seeks to solve. For example 'workers' *versus* 'the unemployed' or 'citizens' *versus* 'illegal immigrants'. The categories of subjects, or *subject positions*, that

are produced through public policy have a powerful affect on how individuals understand themselves and their relationship with other individuals.

- Lived effects: Are the material effects that a given problem representation has on an individual's experiences.

This question is crucial as it counters critics who suggest poststructural analysis is "hopelessly relative" by allowing the researcher to identify problem representations that the researcher decides are harmful to particular groups and people and promote those which do the least harm. This question was central to every stage of analysis in this research and forms the basis of the recommendations presented in chapter six.

6. **How/where has this representation of the 'problem' been produced, disseminated and defended? How has it been (or could it be) questioned, disrupted and replaced?** Question six "opens up space to reflect on forms of resistance" that challenge the harmful effects in dominant representations.

In line with the view that "the production of "knowledge", through research, is … a form of political practice" (Bacchi and Goodwin 2016:2) these questions are accompanied by an undertaking to apply these same questions to the researcher's own proposals for change. This undertaking was applied when forming the principles outlined in chapter six.

Applying the WPR approach in this thesis

Bacchi stresses that WPR is "not a formula but a tool" and depending on the nature of the research, it may not necessary to apply all the questions in the approach (Bacchi 2014b). In this thesis analysis focused on questions one, two, four and five however all elements were considered. Each question formed a stage of the research and built on the previous stage.

Stage one: What is the 'problem' of CPA represented to be in Academic Research?

Stage one addressed the first research question by applying the WPR methods to identify how CPA is represented as a 'problem' within academic literature. This allowed different problem representations of CPA to be identified and provided a set of tools for the policy analysis in subsequent stages. The following sections will explain the processes used for data collection and analysis during stage one.

Data Collection

The discursive fragmentation of CPA research which will be discussed throughout this thesis is reflected in the lack of an established term that is used to refer to CPA. This makes it difficult to identify relevant research especially as CPA is not a distinct category in most major sociological databases. An examination of articles cited in two recent reviews (Moulds et al. 2016; Simmons et al. 2018) was used to identify the most frequently used terms which were then formed the basis of searches in the databases Proquest and Web of Science. These terms are included in appendix one. Database

searches were supplemented by extensive cross-checking of references and citations for the most relevant research and reference to the list of research included in the *Holes In The Wall* blog[3] (Bonnick 2019b).

Criteria for inclusion of an article for analysis was that:

- The article addressed CPA
- The article was relevant to school-aged children.

A total of 159 articles were examined during this stage published between 1974 and 2019.

Data Analysis

Preliminary analysis identified four distinct problem representations that have been influential in shaping CPA research: 'family violence', 'child welfare', 'criminal justice' and 'medical'. Each article was classified according to their own stated, or implicit representation of CPA within these discursive traditions. If multiple representations were identified texts were included in each relevant category. For example, research that investigated the use of the criminal justice system to respond to juvenile family violence offenders was categorised in both 'family violence' and 'criminal justice'.

This was followed by a close reading of the texts within each discursive category. The six WPR questions outlined in the previous section were applied during this analysis

[3] Holes in the Wall is a comprehensive online resource that provides CPA-related material and research useful for students, parents and professionals.

with the focus on identifying the key themes and presuppositions (question two) and strengths and limitations (questions four and five) of each.

Through this analysis process an additional two problem representations were identified within the research: CPA as an 'educational', and as a 'child wellbeing' problem. These alternative representations were examined using the same analytical approach. The insights gained during this stage of research, which will be outlined in chapter three, provided six conceptual frames that guided the next stage of research.

Stage two: What is the 'Problem' of CPA represented to be in NSW educational policy?

This stage of research addressed the second research question by applying WPR methods to an analysis of NSW educational policy drawing on the conceptual frames established in stage one.

Data Collection:

The initial search for policy documents began with reviewing the policy documents included on the NSW Department of Education (DoE) *Policy Library* (DoE 2019f) which contains all current operational policies in the NSW DoE. This established that there was no NSW educational policy that directly addresses CPA. This was confirmed by website searches for relevant terms including "Family Violence", "Parent Abuse" "Adolescent Family Violence" and "Child to Parent Abuse".

In WPR the selection of policy documents is an interpretive act that will, by its nature, reflect the interests, concerns and objectives of the researcher (Bacchi 2009:20). In line with this principle the policy library was then reviewed again. Policies were evaluated for their potential contribution to the research aims based on criteria that was developed in reference to findings of the first stage of research. These criteria are:

- Policy relevance to a "CPA-related" educational problem:
    - Peer or teacher-directed violence or aggression
    - Bullying (perpetration or victimisation)
    - Medical or mental health conditions associated with CPA
    - "chronic" non-attendance or truancy
- Use of one or more of the six conceptual frames discussed in chapter two:
    - Family Violence
    - Child Welfare
    - Criminal Justice
    - Medical
    - Child Wellbeing

On the basis of applying these criteria two policy documents were identified as most relevant to CPA[4]:

[4] These two documents will be outlined in detail in chapter four.

- *The Wellbeing Framework for Schools* – which addressed CPA-related educational problems and 'child welfare', 'criminal justice' and 'child wellbeing' discourses.
- *The Disability Strategy* – which addressed CPA-related educational problems and a 'medical' discourse

These two documents provided the primary corpus for this stage of analysis. In WPR, initial policy selection is understood as a starting point and it is often "necessary to examine related texts […] to build up a fuller picture of a particular problem representation" (Bacchi 2009:20). The documents were supplemented by other materials which were assessed as relevant for inclusion using the previously outlined criteria. A full list of these documents is included in appendix two but the broad categories were:

- Procedural documents and guidelines
- Material published for distribution to parents or students
- Other related policy documents
- Government reports and inquiries
- Material on the NSW Department of Education and NCCD website

The NCCD website includes case studies to guide schools in the application of federal disability policy. Two of these case studies were identified as valuable for illustrating practical implications of policy and have been reproduced in full in chapter four.

Data Analysis

Preliminary analysis focused on identifying policy representations of either CPA or educational problems that had been established as 'CPA-related' during the first research stage. These 'CPA-related' problems were:

- Peer or teacher-directed violence or aggression
- Bullying (perpetration or victimisation)
- Medical or mental health conditions associated with CPA (specifically developmental, 'mental health', 'conduct' or 'behavioural' disorders).
- "chronic" non-attendance or truancy

Problem representations were grouped into themes which were then categorised according to the frames established in the previous stage. For example, a policy representation emphasising the need to ensure children "take responsibility" was categorised as "child responsibility" and then "criminal justice". For each theme specific examples of text from the policy were grouped under the theme as evidence. A memo was created for each document and used to record initial thoughts and impressions as well as text from policy documents. References to other policy or related material were noted and these documents were then examined to determine if they should be included in the corpus.

Subsequent analysis aimed to identify both implicit and explicit constructs evident in the policy through application of the WPR questions. Analysis focused on identifying dividing practices and binary categories (question two) and effects for families who experience CPA (question five). WPR questions can be applied sequentially or integrated as an integrated approach was used all questions were considered (Bacchi 2014a). The results of this stage will be discussed in chapter four.

Stage Three: What is the 'Problem' of CPA represented to be in Japanese educational policy?

This stage built on the findings of the previous two stages and addressed the third research question by exploring the representation of CPA in Japanese educational policy and academic research. The WPR question that this stage is attending to is "can this problem be thought about differently?".

Data Selection

Comparative analysis is recommended for research that applies the WPR approach as it prompts the researcher to consider the assumptions that are reflected in their analysis. Japan was selected to contrast with NSW as Japanese educational policy has explicitly addressed CPA. Furthermore, Japanese policy offers a distinctly different representation of CPA as a predominantly social, rather than individual 'problem'.

The Japanese Ministry of Education, Culture, Sports, Science and Technology (MEXT) provides English translations of policy documents which include acts of legislation, statistical data and the annual 'White Paper' reports. This material was examined and suitability for inclusion established using the criteria from the previous stage with additional criteria because CPA is represented in connection with other social issues. These criteria are:

- Policy contains explicit mention of CPA
- Policy related to one or more CPA-Related 'youth' or 'educational' problems:

- Peer or teacher-directed violence or aggression
- Bullying (perpetration or victimisation)
- Medical or mental health conditions associated with CPA
- chronic" non-attendance, school refusal or truancy
- Social withdrawal (*hikikomori*)
- General references to 'delinquency' or 'youth violence'

These formed the primary corpus listed in appendix two. As analysis was restricted to material that has been translated into English it was heavily supplemented with academic research. The search terms used to identify relevant Japanese research are also included in appendix one.

Data analysis

Preliminary analysis focused on identifying policy representations of either CPA or any of the 'CPA-related' behaviours previously outlined. Problem representations were grouped into themes. In addition to the frames established in the previous stage of research three new categories were developed:

- educational pressure
- social/economic change
- School environment

Each document was also labelled by year of publication and divided into categories for each decade. A memo was created for each document and theme. This was used to record initial thoughts and impressions as well as specific examples of policy text.

Subsequent analysis aimed to identify both implicit and explicit constructs evident in the policy and areas of contrast with NSW. The application of the WPR questions focused on questions two, four and five which identify the underlying constructs and implications of problem representations. This was followed by comparing between each decade group to assist in identifying changes over time (Question three).

Stage Four: How can CPA be represented differently?

Stage four was only possible on the basis of the analysis undertaken in stages one, two and three. Stage one allowed the identification of possible discursive constructions of CPA and highlighted specific areas where CPA intersects with the educational system. Stage two allowed the identification of policy constructions and absences which have implications for the treatment of CPA. Stage three provided analysis of an alternative representation of CPA linked to educational policy in which it is both implicitly and explicitly addressed. This allowed identification of explicit and implicit representations of CPA and absences of policy in NSW and Japan. By examining both the absences and presences within the policy representations, analysis then focused on what harmful effects are a consequence of these absences and explicit representations. An alternative set of principles for policy were then developed to respond to this identification of harms. A set of four policy principles are presented in chapter six.

Conclusion to Chapter Two

This chapter has outlined the benefits the WPR approach has for the analysis of CPA policy and the specific aims and research questions of this thesis. WPR provides a framework for systemic analysis and evaluation of competing policy representations

and guides the development of less harmful alternatives. This chapter has outlined how the relevant questions of the WPR approach have been applied in this thesis and the specific process used in each stage of research. These stages are the methodological and analytical processes which form the basis of this thesis.

Chapter Three: The Discursive Framing of CPA Research

This chapter explores the current state of CPA research and highlights the way that knowledge and beliefs about CPA are created within competing academic and professional discourses. It discusses four discursive representations which have shaped CPA research. The chapter will then examine literature linking CPA to the school environment and educational outcomes. It will demonstrate that, while CPA is rarely represented as an 'educational problem', existing evidence supports locating CPA within an educational discourse. The final section of this chapter will move from the discursive to a discussion of the material impacts of CPA on the 'offending' child. It will be shown that CPA can be constructed as a 'child wellbeing' problem and will show how this differs from existing representations. It will conclude by discussing the key features of these six constructs and the strengths and limitations of each. This will demonstrate that each of these discourses offers a unique and valuable perspective; however, each is limited by their own disciplinary presuppositions and therefore a CPA-specific approach is needed.

Defining and measuring CPA

CPA research is characterised by considerable variation in how studies define and measure abuse (Simmons et al. 2018:31–33). This inconsistency, which is compounded by the lack of a common term or method of referring to CPA, limits researchers' ability to generalise across studies and identify and build on previous research[5] (Holt

[5] For a comprehensive discussion of the way definitions and methodological choices have shaped CPA research please refer to Holt (2012b, 2013:558–603) and Holt and Shon (2018)

2013:151; Wilcox and Pooley 2015:83). Within Australia, CPA is commonly referred to as either *Adolescent Violence in the Home* (AVITH) or *Adolescent Family Violence* (AFV). These terms refer to any form of adolescent-perpetuated family or domestic abuse (Elliott et al. 2017; Fitz-Gibbon et al. 2018; Reid and Ervin 2015; State of Victoria 2016). This thesis will refer to CPA, instead of common Australian terms, to acknowledge that the parent-child relationship has unique social and legal significance which distinguishes CPA from other forms of child-perpetrated family abuse (Nowakowski-Sims 2019). While the above terms represent CPA as a 'problem of adolescence', which is culturally constructed as a time when rebellion and familial conflict are normative behaviours, CPA is not an adolescent-specific phenomenon but may arise in early childhood and continue throughout the life course (Holt and Shon 2018). However, AFV is used when research or policy does not distinguish between CPA and other forms of adolescent-perpetrated family abuse.

Globally, CPA is believed to be severely underreported which, combined with methodological inconsistencies,[6] makes its prevalence difficult to discern. There are dramatic variations in estimates of the rate of CPA with reports that physical CPA may occur in between 5-21% of households with adolescent children while estimates for verbal, financial, and emotional abuse range between 33-95% (Simmons et al. 2018:32). Australian estimates have primarily been drawn from the criminal justice system and are largely restricted to criminal acts of physical or financial abuse. One recent study found approximately 7% of family violence incidents recorded by NSW police between 2009 and 2013 were committed against a parent by a child aged between 10-17

[6] For example, while some studies limit themselves to physical violence or criminal behaviour (Armstrong et al. 2018: 4; Laurent and Derry 1999: 21–22; McCloskey and Lichter 2003: 397–398), others extend to single incidents of verbal disrespect (Beckmann et al. 2017; Ibabe and Bentler 2016; Pagani et al. 2003)

(Moulds et al. 2018:6–7). Furthermore, the rate of juvenile AFV offending has increased substantially from 154.5 per 100,000 in 2008 to 195.7 per 100,000 in 2017 (Freeman 2018:2). However these figures may capture only a fraction of the CPA that occurs due to parental reluctance to expose their child to the criminal justice system (Fitz-Gibbon et al. 2018:10; Howard and Abbott 2013).

This demonstrates how positioning CPA within a criminal justice discourse is reflected in institutional responses and the way it is defined. This has direct implications for what is, or can be, known about CPA. The representation of CPA as a 'criminal justice' problem is only one possible way of understanding CPA. The remainder of this chapter will demonstrate that others have had equally powerful effects. The next section will explore four discourses which have shaped CPA research, including the criminal justice representation. It will then suggest two alternative representations within the existing research which have not yet been established as a coherent discourse. These six constructs will provide the frames for analysis in subsequent chapters which apply WPR methods to representations of CPA in educational policy.

What is the 'Problem' of CPA Represented to be?

CPA research is a field "in its infancy" which rests at the juncture of family violence, criminal justice, and child protection, yet to develop an academic or professional discourse of its own (Holt 2012b:289). CPA is represented as a 'domestic violence' problem, 'criminal justice problem', 'child welfare problem' and 'medical problem' with each representation producing a different view of who should be involved and which interventions and supports should be offered in response (Galvani 2017; Holt 2012a,

2012b, 2016; Holt and Retford 2013; Holt and Shon 2018; Hunter et al. 2010; Nixon 2012; Wilcox 2012).

The following sections examine how these discursive traditions[7] represent the 'problem' of CPA. They show that each shape research and suggest different policy and institutional responses. The sections demonstrate how each of these constructions offers unique insights and benefits but are incomplete. Therefore, a more cohesive approach is vital.

CPA as a family violence problem

When CPA is located within a family violence discourse, it is represented as one manifestation of a broader pattern of "gender-based violence" produced by the structures and social norms of patriarchal societies (Cottrell and Monk 2004; Fitz-Gibbon et al. 2018; Holt 2016; Wilcox 2012). Researchers who take a family violence approach consider CPA a problem of "male violence against women", as an overwhelming majority of victims are female, and son-mother abuse is the largest category of offences (Condry and Miles 2014:264; Fitz-Gibbon et al. 2018:11–12; Tew and Nixon 2010:284). Furthermore, like Intimate Partner Violence (IPV) and other forms of familial abuse, CPA occurs within an ongoing pattern of behaviour involving any combination of physical, verbal, emotional, psychological or financial abuse[8] and

[7] These representations have been separated to highlight the unique features and implications of each however there is significant overlap between each of these constructs and policy and academic representations can, and frequently do contain elements or two or more of these representations.
[8] Sexual abuse is rarely explored in CPA research and often not included in CPA-specific surveys or statistical instruments (Simmons, McEwan, Purcell, et al. 2019). However, examples of parent-directed sexual violence have been reported as well as sexually degrading comments or behaviours which Holt (2013) suggests may be considered on the spectrum of sexual abuse (Broadhead and Francis 2015; Wilcox and Pooley 2015).

frequently has profound, long-term ramifications for victims' physical, mental, and financial health (Broadhead and Francis 2015:16; Eckstein 2004:16; Holt 2016:492).

These harms may be compounded by gendered parenting practices which are exacerbated by victim-blaming and mother-blaming cultural attitudes. Together these practices and attitudes combine to leave female parents both more vulnerable to experiencing CPA, and more likely to be harmed by social and institutional processes that hold them responsible for their own victimisation (Clarke et al. 2017:1528; Condry and Miles 2012; Eckstein 2004; Fitz-Gibbon et al. 2018; Holt 2013:1719–46, 2016; Hunter et al. 2010; Tew and Nixon 2010; Wilcox et al. 2015).

Family violence discourses often represent CPA as one component in an intergenerational 'cycle of violence'. Research within this discourse frequently links childhood victimization and exposure to parental IPV with the likelihood a child will engage in CPA (Armstrong et al. 2018; Beckmann et al. 2017; Biehal 2012; Boxer, Gullan, and Mahoney 2009; Brezina 1999; Browne and Hamilton 1998; Contreras and Cano 2016; Cornell and Gelles 1982; Edenborough 2007; Evans and Warren-Sohlberg 1988; Ibabe 2014; Izaguirre and Calvete 2017; Kennedy et al. 2010; Peek, Fischer, and Kidwell 1985). This is supported by evidence that CPA often coincides with inter-sibling violence and abuse (Correll, Walker, and Edwards 2017; Fitz-Gibbon et al. 2018; Laurent and Derry 1999) and is related to a higher risk of perpetration and victimisation of IPV (Izaguirre and Calvete 2017; Laporte et al. 2011).

Representing CPA as a form of family violence can be beneficial for victims, allowing them to reduce self-blame by understanding their experiences within a broader social context (Clarke et al. 2017). It also grants access to a vast network of organisations that

can provide advocacy and support (Murphy-Edwards and van Heugten 2018:631–32; Wilcox 2012:282–83). The inclusion of CPA in the influential Victorian *Royal Commission into Family Violence* (State of Victoria 2016) informed subsequent research and government actions (Elliott et al. 2017:1; Mikakos 2018) and contributed to the increasing prominence of family violence CPA discourse in Australia. However, family violence policy is a "gendering practice" (Bacchi 2017) which may have significant limitations regarding CPA. Critics have argued that family violence discourses presuppose a powerful (male) perpetrator and a powerless (female) victim that does not reflect the complex power relationships and potential for dual victimhood and reciprocal abuse between parents and children who engage in CPA (Condry and Miles 2012; Holt 2016; Tew and Nixon 2010).

While there is strong evidence that CPA is a gendered behaviour, it is less clear that it is gendered in the same way[9],or extent as IPV. There is some evidence that female children are more likely to engage in acts of psychological or other non-physical forms of abuse (Baeza and Fiscella 2018:11; Beckmann et al. 2017:13; Ibabe and Bentler 2016:263) and that male children are disproportionately responsible for serious violent offences (Condry and Miles 2014:264; Edenborough 2007:193; State of Victoria 2016:149). This suggests gender norms may influence the type of CPA behaviours that occur and may call for a more nuanced way of thinking about gender and CPA. The

[9] Research into the relationship between gender and CPA perpetration has been contradictory. Many researchers have been unable to find a significant difference in the gender of CPA offenders (Agnew and Huguley 1989:706; Biehal 2012:255; Cornell and Gelles 1982:10; Ghanizadeh and Jafari 2010:78; Jaureguizar, Ibabe, and Straus 2013:461–62; Pagani et al. 2003:258, 2009:177). Conversely, other studies have reported gender differences in CPA perpetrators but are divided between those that find male (Armstrong et al. 2018:5; Charles 1986:345; Condry and Miles 2014:264; Correll, Walker, and Edwards 2017:246; Freeman 2018:2; Kawai 1981:371; Walsh and Krienert 2007:567), and those that find female children are more likely to commit acts of CPA (E. Calvete et al. 2013:1079; Esther Calvete, Orue, and Gámez-Guadix 2013:761; Snyder and McCurleye 2008:1).

social construction of feminine victimhood and masculine violence in representations such as Australia's *National Plan to Reduce Violence against Women and their Children* (COAG 2011) may discourage male victims from reporting offences, particularly when committed by a daughter, and increases the likelihood a male child will be reported to, or charged by, police reproducing the gendered construction of CPA (Condry and Miles 2014; Kawai 1981). It also suggests that physical violence is the 'most serious' and/or harmful form of CPA. This is inconsistent with parental accounts and will be discussed in the next section.

Parents of children who engage in CPA have a dual role as both 'victim' and advocate for their 'abuser' causing their needs and their child's to become inextricably intertwined. This complicates the use of legal and institutional responses to family violence which are designed to prioritise victim safety and make the 'perpetrator' take responsibility for their 'crime' (Holt 2016). While in both cases the cessation of abuse is the primary aim of any intervention, in IPV this is frequently achieved through physical separation of victim and perpetrator, while parents experiencing CPA balance their needs as a victim with their desire, and legal duty to protect their child (Brule and Eckstein 2016; Clarke et al. 2017; Holt 2016). Australian domestic violence policy relies on the use of the criminal justice system to ensure victim safety and perpetrator accountability creating a significant barrier to help-seeking behaviour for parents who are reluctant to take actions that would subject their children to criminalisation as a perpetrator of domestic violence (Elliott et al. 2017:11–12; Howard and Abbott 2013:80; Thomas, Fitz-Gibbon, and Maher 2019). Furthermore, interventions modelled on programs for adult offenders of IPV have been critiqued for placing an inordinate emphasis on gender and

the assumed motivation of "power and control" while dismissing the significance of childhood trauma.

Representing CPA as *caused by* and *a cause of* forms of familial abuse is problematic because most victims of childhood abuse do not go on to abuse others, while CPA occurs in families with no history of abuse (Baker 2012; Nolas, Sanders-McDonagh, and Neville 2018). Cycle of violence theories have been criticised for disempowering victimised male children and producing them as potentially "violent men" (Baker 2012). Furthermore, in a "mother-blaming" culture (Caplan and Hall-McCorquodale 1985; Jackson and Mannix 2004) representing CPA as something that is done *to* mothers who have experienced IPV may have a perverse effect of entrenching the belief that it is a behaviour caused *by* mothers' failure to protect their children (Baker 2012). While Wilcox argues that dismissing the relationship between exposure to violence and CPA perpetration may be harmful as it reduces the opportunity to offer preventative interventions to children who have experienced family violence (Wilcox 2012:280–81), there is evidence that research and professionals are limited by the presumptions that CPA is *always* explained by childhood exposure to violence (Gabriel et al. 2018; Holt and Shon 2018; Nixon 2012).

Policy that locates CPA within a cycle of violence model and constructs the child as a 'victim' of violence can erase the experiences and needs of parents living with CPA by representing interventions as IPV prevention. While family violence policies frequently stress that perpetrator interventions should not take precedence over victims need for support (Government of NSW 2013:11) this is not evident in discussions of CPA or AFV

where the focus is overwhelmingly on providing support and intervention services to the violence-using child (SCSI 2012:89).

This section has demonstrated that the representation of CPA as a 'family violence problem' is supported by two core propositions – that CPA is a gendered behaviour primarily done to women by me, and that CPA is like, and closely linked to, other forms of familial abuse. This representation offers significant benefits that include social validation and institutional support for victims of CPA. However, it may not adequately account for the complex relations of power and emotion that characterise CPA. It may also place an inordinate emphasis on gender and constructs children as 'perpetrators of abuse'. The next section will turn to child welfare discourses and demonstrate that while they often overlap, they also have important differences.

CPA as a child welfare problem.

There are many similarities between representations of CPA as a child welfare and family violence problem which reflects the position of child abuse within the wider family violence discourse. Both models rely on a binary division of victim and perpetrator and are underpinned by a hierarchical view of family relations in which power and authority (and hence the capacity for abuse) is understood to flow unidirectionally from male to female and from parent to child (Brule and Eckstein 2016:199–200; Holt 2013:417–468). This is challenged by CPA in which a parent's legal and moral authority is complicated by a reciprocal responsibility to provide care and protection while physical superiority, if it exists, is balanced by legal and social prohibitions on the use of force against a child.

The perceived physical, social, and legal inferiority of children prevents them from being easily understood as potential abusers in a child protection model established to protect *vulnerable* children from *powerful* adults. Consequently, it is common for research and policy grounded in a child welfare discourse to represent CPA as a primarily defensive reaction to childhood victimisation or neglect. Victim and perpetrator are dichotomous positions. The assumption of child victimhood renders the possibility of parent victimhood incomprehensible and so, as the existence of a victim presupposes a perpetrator, the parent is frequently represented in this role.

The previous section noted that family violence discourses often represent CPA within a 'cycle of violence' model as both a product, and predictor of other forms of family abuse. This representation is also a feature of child welfare discourses. Even when the parent is not represented as 'abusive', child welfare discourses often attribute CPA to a deficiency in parenting or family relationships drawing on psychological discourses which suggest parental (particularly maternal) actions and "attachment" are the most critical factor in determining child outcomes (Holt 2012a, 2013:1217–1336). This has resulted in a body of research that seeks to establish parental and familial "risk factors" for CPA such as weak family relationships or "attachment" (Agnew and Huguley 1989; Contreras and Cano 2014; Ibabe and Bentler 2016; Nock and Kazdin 2002), both overly-harsh and overly-permissive parenting (Calvete et al. 2014; Contreras and Cano 2016; Cottrell and Monk 2004; Ibabe and Bentler 2016), and poor maternal mental health (Fawzi, Fawzi, and Fouad 2013).

Critics of the preoccupation with parental deficit in child welfare discourse, have pointed to the difficulty in quantifying concepts such as "parenting style" or "maternal

warmth" and the limitations of what can be concluded from this decontextualized data (Holt 2013). The vast majority of such studies used cross-sectional or retrospective methods that make it difficult to determine if and how they are implicated in *causing* CPA (Holt 2012b). Many factors suggested to cause CPA such as inconsistent parenting, or family conflict, are just as satisfactorily explained as an adaptation to the experience of living with CPA (Holt 2012a:102; Williams, Tuffin, and Niland 2017:602).

The assumption that CPA is a parenting or child welfare problem shapes both the likelihood and potential outcomes of help-seeking behaviour. Practitioners who view CPA through a parental deficit discourse will often reframe a child's actions as a sign of abuse (or parental inadequacy) or dismiss them as "teenage rebellion" without considering other factors that could be contributing towards this behaviour (Biehal 2012; Condry and Miles 2012; Holt and Retford 2013; Hunter et al. 2010; Selwyn and Meakings 2016). When CPA support is incorporated into a child welfare framework, many families will simply not qualify for assistance because the primary function is to protect children from adults and may not consider CPA to pose a risk to the child (Fitz-Gibbon et al. 2018:45–50; Holt and Retford 2013; Howard and Abbott 2013:39).

Some families are deterred from seeking assistance by the fear they will be judged responsible for their child's behaviour and consequently reported to child protection authorities and this may be particularly potent in some marginalised groups (Coogan 2014; Douglas and Walsh 2018; Fitz-Gibbon et al. 2018:25–38; Holt 2012a:97). In some cases, children were aware of this fear and used the threat, or reality, of police or child protection processes against their parent (Fitz-Gibbon et al. 2018:54; Howard and Abbott 2013:45; Selwyn and Meakings 2016:1233–34).

When parents are deemed to be simply lacking 'parenting skills', rather than being negligent or abusive, proposed 'solutions' consist of parenting programs or individual therapy to acquire skills believed to be lacking (Holt 2013:1941–1970; Nixon 2012; Williams et al. 2017:60–603). However, the benefits of such a generalised approach has been called into question as they often presuppose a level of parental power and authority that is inverted in families experiencing CPA (Condry and Miles 2012:245; Eckstein 2004; Holt 2012a; Tew and Nixon 2010). Furthermore, representing CPA as a problem caused by parental deficit is potentially harmful because it mirrors the same strategies and language often used by the child to represent the 'failed' or 'abusive' parent as responsible for their own victimisation (Howard and Rottem 2008:52; Wilcox and Pooley 2015:90). This may empower children to continue their behaviour while further depleting parental resources by contributing to self-blame and despair, and may cause parents to disengage from interventions so as not to accept this "spoiled identity" (Brule and Eckstein 2016; Holt 2010). There is concern interventions grounded in this approach may be worse than ineffective, they may trigger a significant increase in abusive behaviour (Nixon 2012:236–37; Williams et al. 2017:601–3).

There are significant benefits to the way child welfare approaches prioritise the needs of children who engage in CPA. The recognition that CPA may be a product of childhood trauma can ensure that children who have experienced abuse receive support and, if necessary, protection. Furthermore, the reluctance to brand children as a 'perpetrator' of a crime is both developmentally appropriate and often reflects the wishes of CPA 'victims'. However, it can also be interpreted as a dismissal of the impacts of their actions on parents and family members. This may allow behaviours to continue to the

detriment of all family members, including, as we will see, the 'abusive' child. The tendency towards parent-blame can also lead to further victimisation.

CPA as a criminal justice problem

When CPA is treated as a criminal justice problem it produces the child who engages in CPA as a criminalised subject while victims may be stigmatised as 'failed' parents (Brule and Eckstein 2016; Holt 2009; Thomas et al. 2019). Research within the criminal justice discourse, often relies on police or court-recorded data. This produces definitions of CPA that are limited to 'criminal' acts (such as physical violence) and measured in single incidents rather than a pattern of behaviour (Holt 2012b; Holt and Shon 2018:917). Research in this tradition often focuses on exploring the relationship between CPA and other forms of socially unacceptable, 'deviant' behaviour (Becker 1988; Calvete, Orue, and Gámez-Guadix 2015; Jaureguizar et al. 2013). As we have seen, there is evidence male children are overrepresented in acts of "serious" physical aggression. Representing CPA like any other crime may function as a gendering practice that produces CPA as a problem of 'male criminality' and/or violence. This representation suggests that acts of physical violence and 'criminal behaviour' are both 'typical' and the 'most serious' forms of parental abuse and that CPA and other 'crimes' stem from a similar cause and are harmful in similar ways. However, the parent-child relationship is legally and emotionally unlike any other 'victim' and 'perpetrator'. Emotional harms are consistently highlighted in victim accounts of CPA (Eckstein 2004:275; Holt 2011b).

Just as domestic violence discourses can result in CPA being subsumed within an "IPV prevention" framework, criminalised discourses obscure the unique features of CPA and the needs and desires of its victims in the name of crime prevention. While some studies

have found official sanctions may act as a deterrent (Agnew and Huguley 1989), parental reluctance to report breaches and subject their child to criminalisation may empower the young person to continue their behaviour (Fitz-Gibbon et al. 2018; Howard and Abbott 2013; Miles and Condry 2015:1085–86; Thomas et al. 2019).

However, there are advantages to constructing CPA through a criminal justice discourse. Representing CPA as something that requires formal intervention or assistance provides a counter to the way that child welfare discourses disregard the impacts of CPA and highlights the importance of ensuring the safety of parents and siblings. Involvement from the Australian criminal justice system is most likely to result in a significant improvement when children are not subject to criminal charges and families are linked to community supports (Fitz-Gibbon et al. 2018; Howard 2014; Howard and Abbott 2013). Suggesting, perhaps, that criminal justice interventions are effective when CPA is not represented within a traditional criminal justice discourse but considered an indication of a need for family support and early intervention drawing on alternative approaches such as restorative justice.

CPA as a medical problem.

While the above representations locate the 'problem' of CPA within relationships and social interactions, medicalised discourses suggest that CPA is produced by a disease or abnormality within the child. This discursive construction is linked to a body of research that explores the relationship between CPA and medical-psychological 'conditions' or 'disorders'. Research conducted in this tradition has reported that children who engage in CPA are more likely than peers to have been diagnosed, or

treated for a psychiatric disorder, conduct[10] and mood disorders the most common conditions (Biehal 2012; Esther Calvete, Orue, and Gámez-Guadix 2013; Contreras and Cano 2015; Correll et al. 2017; Fitz-Gibbon et al. 2018; Freeman 2018; Ghanizadeh and Jafari 2010; Ibabe, Arnoso, and Elgorriaga 2014b; Kennedy et al. 2010; Nock and Kazdin 2002; Purcell, Baksheev, and Mullen 2014; Routt and Anderson 2011; Sporer and Radatz 2017). CPA has also been correlated with developmental and intellectual disabilities such as Autism Spectrum Disorder and Attention Deficit Hyperactive Disorder (ADHD) (Biehal 2012; Borovoy 2008; Contreras and Cano 2015; Fitz-Gibbon et al. 2018; Freeman 2018:7; Ibabe et al. 2014b; Nock and Kazdin 2002; Purcell et al. 2014; Routt and Anderson 2011; Sporer and Radatz 2017).

Medicalised explanations reframe CPA behaviours from acts of 'abuse' to a 'symptom' of a condition outside of the child and their parent's control (Brule and Eckstein 2016; Holt 2013; Holt and Shon 2018). Externalising the source of a child's CPA behaviour reduces both internal and external stigma for the parent-victim (Brule and Eckstein 2016; Clarke et al. 2017; Williams et al. 2017) and viewing CPA as a medical issue may provide greater access to treatment and support (Bonnick 2019a:177; Coogan 2017:55; Holt 2013:1077–87). Unlike the representations discussed above medicalised approaches recognise parent and child needs as complementary. However, representing CPA as a medical or 'mental health' problem presupposes that CPA, and family violence in general, is a pathological or abnormal behaviour. However, violence within families is not atypical and the evidence of its cross-cultural and historic prevalence suggests that neither, specifically, is CPA (Holt 2013:1149). Representing CPA as a pathological or 'disordered' behaviour reduces the opportunity to identify the social and institutional

[10] Including Oppositional Defiant Disorder (ODD).

factors that contribute to and enable these behaviours. Furthermore, any reduction in stigma that is provided by a medicalised understanding of CPA may be balanced against the potentially harmful effects of constructing children who engage in CPA as 'damaged' and 'uncontrollable' subjects.

Critics of this medicalised construction of CPA have argued that many of these conditions are constructs which describe (rather than explain) CPA behaviours and the majority of children with these conditions do not engage in violent or abusive behaviour (Bonnick 2019a:24; Gallagher 2004). Representing violent or aggressive behaviour as an inevitable consequence of a child's 'condition' may be particularly damaging. Representing the violence using young person as inherently and perhaps irredeemably flawed may contribute towards a higher risk of CPA. Cottrell and Monk interviewed children who engaged in CPA and found that although many were deeply ashamed of their behaviour this rarely produced any long-term change. Instead, they argued these feelings lead to worse behaviour as negative feelings were redirected against their parents and expressed as "shame-based rage" (Cottrell and Monk 2004:1085–93). Subsequent studies confirmed high rates of negative self-perceptions and tendency towards self-blame in children who engage in CPA (Biehal 2012:254; Ibabe, Arnoso, and Elgorriaga 2014a; Wilcox and Pooley 2015:91–92; Williams et al. 2017:601).

These discursive representations shape research and institutional responses to CPA. We now turn to the first of two alternative ways of conceptualising the 'problem' of CPA. which were suggested by this analysis and provide useful tools for considering how CPA is understood within educational systems.

CPA as an 'educational problem'

References to the educational system occur frequently in CPA research undertaken in all discursive traditions. Although these references do not form a coherent discourse their frequent occurrences are noteworthy because they all represent CPA in association with either educational maladjustment or problems that are experienced within the school environment. Consequently, this body of research implicitly or explicitly suggests that CPA is also 'educational problem'.

Cottrell and Monk (2004) interviewed children who engage in CPA and noted they often experienced academic or behavioural problems at school. Their analysis suggested that some children who experience early difficulties at school internalise negative labels ascribed to them and respond with more frequent or escalating inappropriate behaviours which may, in turn, lead to family conflicts and an increased risk of CPA (2004:1088–89).

Although very few studies have focused specifically on the topic of CPA within educational systems there is a growing body of evidence that supports an association. For example, children who engage in CPA are more likely to have been suspended from school (Armstrong et al. 2018; Biehal 2012; Correll et al. 2017; Nowakowski and Mattern 2014). Cornell and Gelles found families who have a child that had been excluded from school were more likely to experience CPA (1982). Academic disengagement, truancy, and school refusal are also associated with CPA (Biehal 2012; Borovoy 2008; Correll et al. 2017; Fitz-Gibbon et al. 2018; Fukuda and Hozumi 1987; Howard and Abbott 2013; Ibabe 2016; Nowakowski and Mattern 2014).

Kennedy et al. (2010) compared a sample of children who had been convicted of violent crimes against a parent with juvenile offenders of other offences. They found that children who engage in CPA are more likely to be placed in school classes to address emotional and behavioural problems in comparison to non-CPA offenders who were more likely to be placed in a class to address learning problems. It is unclear if this reflects a difference between the two groups, or in how their behaviours are perceived because, as the previous section noted, children who engage in CPA are disproportionately likely to be diagnosed with intellectual and learning disorders while other studies have linked CPA to low academic performance (Armstrong et al. 2018; Nowakowski and Mattern 2014). Furthermore, CPA has been linked to aggressive or bullying behaviour towards peers (Castañeda-de la Paz, del Moral-Arroyo, and Suárez-Relinque 2017; Fitz-Gibbon et al. 2018; Howard and Abbott 2013; Ibabe et al. 2014a; Kethineni 2004; Nowakowski and Mattern 2014; Ohbuchi and Kondo 2015). As well as to negative attitudes, or abusive behaviour directed towards teachers and other school authority figures (Biehal 2012; Del Moral et al. 2019; Howard and Abbott 2013; Ibabe, Jaureguizar, and Bentler 2013:6; Jaureguizar et al. 2013:462).

Qualitative evidence indicates problems at school often precede the emergence or escalation of CPA (Fitz-Gibbon et al. 2018:38–40; Howard and Abbott 2013:30–35; Stewart et al. 2007:187–88; Wilcox and Pooley 2015:8) and peer-directed aggression in early primary school predicts verbal and physical CPA towards mothers (Pagani et al. 2003) and fathers (Pagani et al. 2009) at age 15. CPA has also been linked to bullying victimisation suggesting some children may engage in CPA in response to trauma experienced at school (Borovoy 2008; Correll et al. 2017; Family Lives 2011; Fitz-Gibbon et al. 2018; Yamamiya 2003).

Knowledge of responses to CPA within the NSW educational system is limited to a single study that interviewed employees of private-sector schools for youth with behavioural problems (Haw 2013). All six participants in Haw's research had experience responding to CPA with most agreeing that the educational system had a vital role delivering family support (2013:59–62). However, some workers held damaging parent-blaming attitudes (Haw 2013:55–58). Participants felt that there was a lack of specialised resources, policy guidance, and training to guide their responses to CPA (2013:69–86). Haw recommended the development of policy and training resources to assist educators when working with children and families who experience CPA (2013:94).

Australian researchers suggest that schools have an important role to play in responding to CPA. They argue that as school enrolment is near-universal in Australia, educational workers are well-placed to notice early signs of family disturbance and exercise considerable influence over student's lives (Fitz-Gibbon et al. 2018:38–40). Additionally, the strong relationships formed between educational institutions, students, their families, and the wider community, may allow them to assist parents coordinate services across a fragmented service sector (Fitz-Gibbon et al. 2018:41–47). A positive classroom environment is negatively associated with both CPA and anti-social behaviour, although not as strongly as the family environment (Ibabe et al. 2013). Del Moral et al found positive attitude towards authority was highest in older teens with high CPA and suggested that this group might be open to and benefit from school-based interventions and support (Del Moral et al. 2019). These studies indicate that with the right policy framework, education-based interventions could profoundly and positively affect families experiencing CPA in NSW.

CPA as a child wellbeing problem

We have seen that family violence discourses emphasise the harms caused by CPA. They also often represent CPA through a "cycle of violence" discourse as product of other forms of familial abuse. This view is shared by child protection discourses which frequently represent CPA as a sign that a child *has been* harmed and may be shared by medical discourses that highlight the psychological effects of trauma. However, there is another overlapping body of research that highlights the consequences of CPA for the 'abusive' child. While this cannot be considered a coherent discourse as it is fragmented and implicit in many of the others, it is important because this child-centred view is often overlooked by representations of CPA as a sign of future criminality or past abuse. CPA differs from other forms of family violence as the 'perpetrator' is also a child in need of protection. Children who engage in CPA are often physically, legally, and developmentally vulnerable and, as previously discussed, many have experienced abuse or childhood trauma. It is crucial to acknowledge that not only CPA victims, but also the child may suffer severe and life-long harm as a result of their actions. While child welfare discourses present CPA as a sign of parental inadequacy or past abuse, they frame the need to intervene as dependant on a child's risk of harm. This view suggests that CPA itself a source of harm that requires intervention to protect the child from the consequences of their actions.

Evidence of these harms is found in research conducted in many discourses. Children who engage in CPA are more likely than children who do not to have a diagnosed mental illness (Armstrong et al. 2018; Biehal 2012; Correll et al. 2017; Fawzi et al. 2013; Kennedy et al. 2010; Kethineni 2004; Laurent and Derry 1999); to engage in

intropunitive[11] thoughts and behaviour (Biehal 2012; Castañeda-de la Paz et al. 2017; Ibabe et al. 2014a, 2014b; Wilcox and Pooley 2015; Williams et al. 2017); use alcohol or illegal substances (Armstrong et al. 2018; Contreras and Cano 2015; Ibabe et al. 2014b; Kethineni 2004; Pagani et al. 2009); and to report suicidal ideation and self-harm (Armstrong et al. 2018; Beckmann et al. 2017; Biehal 2012; Kennedy et al. 2010; Kethineni 2004).

While the available data does not allow us to determine the extent to which mental illness contributes to, or is worsened by, CPA it is likely that this relationship is to some degree bi-directional. That is to say that some children who have a mental illness may find that CPA damages their self-esteem and relationships with peers and family members which, in turn, contributes to further deterioration of their pre-existing condition (Biehal 2012; Brule 2012; Castañeda-de la Paz et al. 2017; Del Moral et al. 2019; Kennedy et al. 2010; Wilcox et al. 2015).

The harmful consequences of CPA may extend beyond adolescence and continue throughout the offending child's life. Children who engage in CPA are at increased risk of a disrupted education (Armstrong et al. 2018; Biehal 2012; Cornell and Gelles 1982; Fitz-Gibbon et al. 2018; Howard and Abbott 2013; Wilcox et al. 2015) and justice system involvement as both a juvenile and an adult (Armstrong et al. 2018; Douglas and Walsh 2018; Evans and Warren-Sohlberg 1988; Fitz-Gibbon et al. 2018; Howard and Abbott 2013). Furthermore, the damage that CPA inflicts on family relationships can be so severe that permanent estrangement or even homelessness may result (Douglas and

[11] Encompassing negative self-esteem, self-hate and self-punishment

Walsh 2018; Edenborough et al. 2008; Howard and Abbott 2013; Laurent and Derry 1999; Miles and Condry 2016; Sheehan 1997).

Conclusion to Chapter Three

This chapter has introduced four competing problem representations which have structured CPA research and two which emerge from these discursive frames. We have seen that each of these constructions differs in how they represent and hence, respond to CPA. Although CPA lacks a coherent disciplinary field, we can identify key approaches within the social scientific research.

The key features of each representation are presented in table one which shows that while each offers an important perspective, they are each limited in their own way.

Table one: Representations of CPA

	Problem	Solutions	Benefits	Limitations
Family Violence	Male violence against women	Use of the justice system or interventions focused on "perpetrator responsibility" Preventative programs addressing gendered attitudes and behaviours	Victim support Institutional Resources	Parent-Child relationship different to other forms of family violence May over-emphasise gender ahead of other factors
Child Welfare	Parental failure or abuse	Disciplining or educating parents Provision of support to the child	Support for child Recognises possibility of trauma or abuse	Lack of support for parents May minimise or enable CPA
Criminal Justice	Criminal behaviour and indication of future criminality	Interventions delivered through criminal justice system to ensure "perpetrator responsibility"	Recognises need for intervention Prioritises safety of parents and siblings	Criminalisation May be a barrier to help-seeking
Medical	Medical or psychological disorder	Medical or psychological treatment Accommodations for "uncontrollable" behaviour	Stigma reduction Increased avenues for child and family support Recognises parent/child interests are complementary.	Labelling Implies lack of agency
Education	CPA is linked to educational maladjustment OR experiences at school	Suggestions that schools may assist in identifying and supporting children who engage in CPA	Relationships with students, parents and community	Not a coherent discourse Limited Policy and research
Child Wellbeing	CPA is a source of harm for child	Interventions necessary but not linked to any specific measures	Child-centred Recognises need to intervene regardless of "cause".	Not a coherent discourse although sometimes implicit in research conducted within family violence, child welfare or medical discourses

Examining table 1, of the four established discourses family violence and criminal justice discourses emphasise the seriousness of CPA and provide access to institutional resources and important avenues of victim support. However, each overlook the vastly

different relationships of power and emotion that distinguish CPA from other forms of familial abuse or crime. These can result in constructing the child as 'perpetrator' and subjecting them to harmful effects of criminalisation. Child welfare discourses centre on child needs and the possibility of trauma. However, in doing so they overlook the needs of and impact upon parent-victims. Medical discourses provide relief from stigma and recognises the complimentary needs of parent and child. However, they may cause harm due to stigmatic labelling. Representing CPA as an 'educational' problem provides new avenues of support and perhaps even prevention, however, is not a coherent discourse and is applicable only to families where CPA is paired with 'educational' problems. Finally, viewing CPA as a 'child wellbeing' issue offers the benefits of a child-centred approach that justifies intervention regardless of the cause. However, it is not a distinct body of research but implicit within research conducted within the other traditions and may therefore share the specific limitations of each.

Although each of these constructs are inadequate for capturing the full complexity of CPA, together they provide a set of tools for analysis of how CPA is represented in policy. The next chapter will apply these constructs to an analysis of NSW educational policy.

Chapter Four: CPA in NSW Educational Policy

This chapter explores the ways in which NSW educational policy represents the 'problem' of CPA and the implications of this (non)representation for the subjectivity and lived experiences of children who engage in CPA and their family members. In the absence of any CPA-specific educational policy WPR methods were used to analyse *The Wellbeing Framework for Schools* (the Wellbeing Framework) (DoE&C 2015b) and the NSW Department of Education (DoE) *Disability Strategy* (DoE 2019b). Through analysis of these policies this chapter will demonstrate that although CPA does not exist as a 'problem' within the policies of the NSW educational system, educational policy is nevertheless influential in producing the type of problem CPA is, or is not, seen to be.

The invisibility of CPA within educational policy has a passive effect that ensures CPA is rarely considered a possibility when responding to behaviours that may suggest a family is "at risk" which limits the ways that school behaviours can be understood and closes off possibilities for intervention. However, this non-representation was also found to have an expressive power that represents the type of problem CPA is through its absence in policy (Bacchi 2014a:31:50). Both of these processes were found to produce lived effects or "a material impact on how people live their lives" (Bacchi 2014b). These effects, which will be outlined throughout this chapter, include subjectification effects on both children and their parents, the privileging of a medicalised discourse when determining access to support, and the reproduction of conditions that may produce or magnify the harms caused by CPA.

This chapter begins by applying discursive frameworks identified in chapter three to an analysis of the representation of CPA, and CPA-related 'educational problems' within

The Wellbeing Framework and *Disability Strategy.* Each of these policies will be addressed in turn, with analysis presented in two stages: a discursive analysis to isolate the problem representations and key themes of each policy framework, followed by applying these themes to an analysis of how each policy constructs CPA. It will show that these policies locate the cause of these 'educational problems' within the individual, drawing on constitutive themes of (ir)responsibility (in *The Wellbeing Framework*) and complexity and violence (in the *Disability Strategy*). This contributes towards the reproduction of representations of CPA as a 'child welfare problem', a 'criminal justice problem', and a 'medical problem' and makes four subject positions available to children and parents who experience CPA: The disabled (or disordered) child, the delinquent child, the responsible, and the irresponsible parent. This analysis will be followed by an exploration of the subjectification effects of these constructs on children who engage in CPA, and their parents. Finally, the implications of these policy constructions will be highlighted using illustrative case studies drawn from the NCCD.

The Wellbeing Framework for Schools

The *Wellbeing Framework for Schools* was launched in 2015 as part of a "student wellbeing" package[12] that proposed to replace deficit-based "student welfare" policies (DoE 2017a:3) with a "whole child" and "whole school" approach. The *Wellbeing Framework* is divided into three core themes: connect, succeed, and thrive, which are underpinned by an "enabling school environment" (DoE 2017a:14) to ensure 'student wellbeing', defined as:

[12] This package also included a new *Behaviour Code for Students* and funding for student support services through *Supported Students, Successful Students* (CESE 2015:11)

> The quality of a person's life […] considered in relation to how we feel and function across several areas, including our cognitive, emotional, social, physical and spiritual (DoE 2017d)

The *Wellbeing Framework* opens with a commitment that:

> Public schools will be teaching and learning environments that enable the development of healthy, happy, successful and productive individuals. (DoE&C 2015b:2).

This commitment is built upon the belief that educational institutions have a responsibility to promote the wellbeing of the "whole child" rather than focus on academic outcomes alone (DoE 2017a:5). The *Wellbeing Framework* contains an implicit representation of the "entrepreneurial" and "responsibilized" subject the education system aims to produce (Bacchi and Goodwin 2016:73). For example:

> When individuals are empowered to *have control* over lived experiences, they *build their own resilience* and in turn contribute positively to collective wellbeing and an inclusive community … Children and young people in public education in NSW will experience a sense of connection, inclusion, respect for individuality and difference, resilience, empowerment, capacity to contribute to their school and wider community, and confidence to *positively shape their own futures*. (DoE&C 2015b:9 emphasis added)

In representing the 'responsible' student as one who has "control over" and "builds their own" wellbeing, the struggles of individual students are represented as a problem of (insufficient) responsibility. This suggests that students must "take responsibility" for their circumstances and behaviour, rather than emphasising environmental or social factors.

This creates a point of tension between the "support" and "discipline" components of the *Wellbeing Framework*[13] producing competing representations of 'problematic school behaviours' as either a 'wellbeing problem' that indicates a need for support, or a 'responsibility problem' requiring a disciplinary response. For example, the *Supported Students, Successful Students* package proposes two seemingly contradictory methods to "improve student behaviour" (DoE 2016). The first, offers funding for schools to implement positive behavioural strategies. In doing so it represents 'problematic student behaviour' within a child welfare discourse (DoE 2016, 2017c). The second suggestion in contrast refers schools to the *Behaviour Code for Students* which:

> empowers principals to take decisive action where student behaviour disrupts the learning of others or threatens safety and wellbeing. (DoE 2016).

This represents 'problematic student behaviour' within a criminal justice discourse requiring individuals be disciplined and made responsible for their actions. This 'responsibility' may be allocated to the child themselves, or to the adult determined to hold responsibility *for* them (usually a parent). This creates a "nested" representation (Bacchi 2009:21) as 'problematic school behaviours' are identified as a 'responsibility problem' and then divided between parent and child.

The irresponsible/responsible dichotomy is central to the discursive construction of CPA as a 'criminal justice' or 'child welfare' problem. The next section will demonstrate that the framing of 'problematic' school behaviour as a 'responsibility' problem, when

[13] In a report released on 24 October 2019 the DoE stated "to make sure we can better support a range of student behaviours we're developing a Behaviour Strategy, which will incorporate a discipline policy review and suspension procedure update. Professional learning for teachers and support resources for schools will also be developed. It is anticipated that the development of the Strategy will be finalised by the end of March 2020, and the Strategy will then be phased in over the following 6-18 months. (DoE 2019g:13–14)

combined with the invisibility of CPA in educational policy, contributes towards the reproduction of these representations of CPA. This produces the irresponsible (or delinquent) child and the irresponsible (or neglectful) parent as categories of subject.

Representing CPA within the *Wellbeing Framework*

CPA is not represented as a 'problem' within the *Wellbeing Framework.* In the context of the *Wellbeing Framework's* commitment to the "whole child" the consequence of this policy (non)representation is to suggest that CPA is not a 'student wellbeing' or 'educational problem' at all and thus not the responsibility of the educational system. One effect of this policy non-representation is demonstrated in Haw's (2013) research with employees of NSW behavioural schools. Haw's participants noted that the lack of policy guidance left them unsure about what assistance they could, or should, provide to families experiencing CPA (2013:68–70). This was contrasted with policy and training related to partner-violence or child abuse that left them confident they would know how to respond when aware of those situations (2013:68–67). Consequently some of Haw's participants expressed a reluctance to intervene in cases of CPA as they felt that their involvement in 'family' or 'personal' issues may adversely affect a child's education (2013:61). This is an important finding because, as the previous chapter discussed, family violence discourses are increasingly influential in Australian research and institutional responses to CPA. However, while the view that family violence is a community, rather than 'private' problem has gained widespread acceptance within Australian society (ANROWS 2018) CPA is still commonly regarded as a 'family problem' (Blakemore et al. 2018:59–60; Broadhead and Francis 2015:8). This

demonstrates the way that educational policy represents CPA as a 'private' problem by excluding it from policy relating to other forms of abusive behaviour at home.

The omission of CPA from educational policy suggests that it is neither an 'educational', a 'wellbeing', nor a 'family violence' problem which would warrant a response from the educational system. However, as chapter three has shown there is substantial research that supports representing CPA as both a 'wellbeing' and an 'educational' problem. The representation of home and school as discrete environments, implies that schools have no responsibility to intervene in 'family' problems. This is contradicted by the conceptual logic of the *Wellbeing Framework* itself.

In fact, the *Wellbeing Framework's* commitment to "enabling school environments" has resulted in measures that allow, or even require, schools to provide substantial assistance to families expanding school authority into the private sphere (DoE&C 2015:6). Several initiatives, such as *The Student Wellbeing Support Program* (DoE 2019) and the development of *Networked Specialist Centres* (DoE 2017) offer the type of actions that have been recommended for schools to assist families who experience CPA (Fitz-Gibbon, Elliott, and Maher 2018:42–44; Haw 2013:98). The existence of these programs within the *Wellbeing Framework* is discursive resource that justifies school involvement in CPA.

From the analysis we can see that *The Wellbeing Framework* has a productive effect that creates competing representations of 'educational problems' as either a 'responsibility' or a 'wellbeing' issue. This construction replicates common discursive representations of CPA as either a 'criminal justice' or 'child welfare' problem. The effects of these constructions will be discussed throughout this chapter. Although CPA is represented

through its absence in educational policy, as a 'family' rather than an 'educational' problem, *The Wellbeing Framework* can also provide a discursive asset that allows school-based assistance for CPA to be intelligible within NSW educational policy, this will be discussed in chapter six. We will now turn to the *Disability Strategy* which offers an alternative representation of 'problematic behaviour' within a medicalised discourse.

The Disability Strategy

In February 2019 the DoE released a new *Disability Strategy* to provide "a plan for an education system that does better by children and young people with disability" (DoE 2019c). Given the importance of medicalised discourses in representations of CPA as discussed in chapter three, analysis of disability policy is crucial to understanding the treatment and experiences of children who engage in CPA within the educational system.

The *Disability Strategy* states:

> From rising demand to increasingly complex student needs, these factors have contributed to … a gap between the promise of inclusive education and the 'lived reality' that some children and their families experience in NSW schools. (DoE 2019c)

This statement identifies a 'problem', the failure to meet expectations of "disability inclusion", which is attributed to the difficulty in accommodating the support needs of increasing numbers of disabled students. The problematisation of the "complex" and "vulnerable" disabled student is the primary problem representation within the

Disability Strategy and functions as a "dividing practice" which produces the 'disabled student' as a category of "governable subject" (Bacchi and Goodwin 2016:23). For example:

> We want to make sure we are supporting our most vulnerable students and our most complex learners (DoE 2019g:4)

The 'disabled student' is represented as an inherently vulnerable subject whose 'complex' needs cannot be accommodated by a one-size-fits-all model. This is particularly the case for students with "complex" disabilities such as "autism and mental health needs[14]" that are represented as "challenges standing between us and a more inclusive education system" (DoE 2019b:12). Chapter two discussed the way that medicalised discourses construct CPA as a symptom of these "complex" conditions which makes their representation within the Disability Strategy relevant to CPA.

These students are divided from students with "traditional"[15] disabilities within the policy by their complexity and need for expertise to manage their "challenging" behaviours (DoE 2019b:18). Over half of the *Disability Strategy's* "immediate priorities" reference these "highly complex" behaviours, suggesting that these behaviours (and students) are a core component of the 'disability inclusion problem' (DoE 2019b:21–30, 2019e). The precise nature of these behaviours is not elaborated within the *Disability Strategy*. However material on the DoE website and submissions to the *Inquiry into the Education of Students with a Disability or Special Needs in NSW* which informed the

[14] The Disability Strategy contains four specific mentions of the increasing rate and/or greater complexity of autism and three for mental health (DoE 2019b:16-18:29). In contrast the only other category of disability mentioned within the Disability Strategy is Intellectual Disability in a passage where it is used to highlight the increasing number of students with autism and mental health disorders.
[15] physical, sensory and intellectual disabilities.

development of the *Disability Strategy,* link these conditions to violent or abusive behaviour (DoE&C n.d.; Government of NSW 2017:46):

> We had a student with profound autism [who] assaulted numerous staff (biting, hitting) (Erskine Park High School 2017)

> Since the 2010 report there has been increasing prevalence and complexities in the nature of mental health and the incidents of physical threats, assaults, verbal threats and abuse towards both staff and students. (NSW Secondary Principals' Council 2017)

The conflation of disability and violence within the policy has powerful subjectification effects. The "disabled child", and particularly the child with "complex" disability is represented as both a vulnerable and therefore with rights for support and protection; and also a "challenging" and potentially violent subject whose "behaviour or support needs … may create risks to staff, the student themselves and/or other students" (Government of NSW 2017:46).

This representation of violent behaviour within the school environment as a 'complex disability' problem is reminiscent of how medicalised discourses represent CPA behaviours at home. In both instances the 'problem' of violent or difficult behaviour is attributed to a condition understood as inseparable from the child and (at least partially) beyond their ability to control (Bonnick 2019a:24; Holt 2013). This represents the behaviours as 'unfixable' and hence the "care and management" of disabled children must involve mitigating the harmful effects of these behaviours through the provision of "reasonable" accommodations (DoE 2019h). Consequently, the solutions proposed are common, providing teachers and parents with "expertise" and resources required to "manage" these behaviours (DoE 2019b:21–30).

Representing CPA within the Disability Strategy

There is no reference to CPA within the *Disability Strategy* and parents are not included among groups represented as "at risk" by the "complex" disabled child's assumed potential for violence (DoE&C n.d.; Government of NSW 2017:46). This is a significant absence because, as discussed in previous chapters, the same conditions and behaviours addressed within the *Disability Strategy* are often represented within medicalised discourses as "risk factors" for CPA. Consequently, the failure to recognise CPA within disability policy may reduce the opportunity for families 'at risk' of CPA to be identified and supported within the education system and also prevent consideration of how disability policy may contribute towards (re)producing conditions that cause CPA to occur.

Furthermore, the *Disability Strategy's* representation of the child with "complex" disabilities mirrors the way that medicalised discourses represent children who engage in CPA, and may have harmful effects on how these children see themselves, and how they are perceived and treated by others (Caslin 2019). This may cause additional harm if, as has been suggested, shame and negative self-perceptions increase the risk of a child engaging in CPA (Cottrell and Monk 2004).

The next section will explore the subjectification effects of these policy representations and show educational policy constructs children who engage in CPA and their parents as responsible/irresponsible subjects. It discusses the implications of these constructions for the individuals to which they are applied and for the way in which resources are allocated between and within schools.

Who is the Problem Represented to Be in NSW educational policy?

This section explores the subject positions made available within *The Wellbeing Framework* and *Disability Strategy* using the constructs of responsibility and complex disability as frames for analysis. It begins by discussing how education policy creates children who engage in 'problem' behaviours as 'disabled', 'disordered' or 'delinquent' subjects before turning to the representation of the 'responsible' and 'irresponsible' parent. It will show that these constructions are crucial in determining the treatment of families who experience CPA within the NSW educational system.

Disabled and Disordered Children

The *Disability Strategy* emphasises the need to increase support to manage the "complex behaviours" of disabled students. Representing the need for support, as a 'disability problem' is problematic because not all children with "complex behavioural needs" are considered "disabled" in NSW educational policy (DoE&T 2003; NCCD 2019d). Children who lack a "confirmed disability" may still be determined to possess "additional needs" and receive support on that basis. However, they lack access to the same level of funding and assistance as students with "disability" status (DoE&C 2012:5; NSW Ombudsman 2017:ix).

The significance of this for children who engage in CPA is evident in the arbitrary division between "emotional disorders" - considered a disability, and "behavioural disorders" which are not. Van Bergen et al. trace this "conceptual separation" to the establishment of "behaviour schools" in the late 1990's which provide a means of

containing students who engage in “unacceptable behaviour”. These are considered “wellbeing” rather than “disability” accommodations which creates two competing problem representations for students’ “challenging” school behaviour. The first, “emotional disturbance” represents problematic school behaviours within a medicalised discourse that justifies “reasonable” accommodations and support. The second, “behavioural disorder” represents these same behaviours within a criminal justice discourse creating a subject category of ‘disordered’ children who receive vastly different treatment compared to children with “confirmed disability” who engage in similar or even identical behaviours (Van Bergen et al. 2015). The lack of any clear diagnostic distinction between these two classifications is highlighted by the fact that:

> the two diagnostic categories that are recognised under the Department’s [behavioural disorder] classification (Oppositional Defiance Disorder and Conduct Disorder) are indeed defined in the DSM, whereas emotional disturbance is not (Van Bergen et al. 2015).

This is highly relevant to the treatment of children who engage in CPA, as the abovementioned disorders are among the most common conditions to be associated with CPA. Although the *Disability Strategy* increased resources to these ‘disordered’ students the policy distinction remains, as does the implications for how these two groups are treated.

Although departmental policy stresses that a formal diagnosis of disability is not required for a child to access disability assistance, professional treatment is important for determining if a child should be considered disabled or “merely” disordered (DoE&T

2003)[16]. The latter group may receive "low level" assistance from funding allocated at the Principal's discretion (DoE 2019d). However access to more intensive support is restricted to students who meet a threshold of "moderate to severe" disability based on specific diagnostic conditions (DoE&T 2003).

The privileging of professional assessment and treatment creates an incentive for parents and schools to pursue diagnosis for a child who needs more than "low level" assistance. This is important because, as chapter two has shown, schools are often the first place that parents experiencing CPA approach for assistance, and children who engage in CPA are more likely to require academic or behavioural support. By restricting support to children who meet a certain threshold of 'disorder' this increases the likelihood that children who engage in CPA will be labelled which may contribute towards the continuation or escalation of CPA. Furthermore, restricting intensive supports to children whose behaviour can be understood within a medicalised model creates a new category of 'problem' subject comprised of children who cannot meet these criteria, including those 'disordered' students who require more than "low level" support. The next section will explore how the *Wellbeing Framework* represents these children within a criminal justice discourse as 'irresponsible' or 'delinquent' subjects.

The Delinquent Child

The *Wellbeing Framework* offers an alternative construction of "complex" student behaviour as a problem of individual responsibility. Drawing on child welfare and criminal justice discourses this problem is divided to create the 'irresponsible parent' or

[16] In a report released on the 24th of October 2019 the DoE announced that they are "testing a more modern approach to the use of disability criteria to capture student need based on functional assessment rather than just a diagnosis" (DoE 2019g:19)

the 'irresponsible child'. This section will demonstrate that policy constructions of the 'irresponsible' child represent children who engage in 'problem' school behaviours as criminalised subjects, mirroring the representation of the child 'perpetrator' in criminal justice discourses of CPA.

Wellbeing policy states that there is a "link between bullying others at school and later violent, antisocial and/or criminal behaviour" (CESE 2015:3–4). The use of research that represents 'problem behaviours' as a predictor of future criminality or deviant behaviour has been critiqued for criminalising a lack of wellbeing, and representing the disengaged or troubled student as a 'future criminal' subject mirroring the same discursive construction of CPA discussed in chapter three (Stephen 2011:64).

When 'problem behaviours' (either CPA at home or CPA-related behaviour at school) are viewed as a 'criminal' problem, proposed solutions generally take the form of discipline until a student takes responsibility for modifying their behaviour, in NSW often through a period of suspension from school (Holt 2011a; Kayama et al. 2015:26; Stephen 2011). Policy stresses that suspension should not be regarded as a punishment but rather:

> allows time for the student to reflect on their behaviour, to acknowledge and accept responsibility for the behaviours […] and to accept responsibility for changing their behaviour. (DoE&C 2011:3)

Here insufficient responsibility is the 'problem' that suspension is intended to solve.

When students will not (or cannot) "take responsibility" for their behaviour both the *Wellbeing Framework* and *Disability Strategy* offer "special" education in behaviour

schools as a form of "support" (DoE 2019a). The existence of these behaviour schools allows mainstream schools to "preserve time and resources for others by removing their more challenging students" (Van Bergen et al. 2015). Recent research investigating the use of behaviour schools in NSW has suggested that they may contribute towards the victimisation of 'challenging' students (Graham, Van Bergan, and Sweller 2016:43).

It is likely that students who engage in CPA are overrepresented in behaviour schools. Every behavioural school employee interviewed by Haw (2013:58) reported encountering students who engage in CPA, some suggesting it was "common". However, these employees received no training on CPA. This suggests many students who engage in CPA are not being identified as needing assistance. The possibility that the education system is directly contributing to the victimisation of these students is particularly significant given the evidence that victimisation at school may contribute towards CPA.

This section has demonstrated that the representation of "student wellbeing" as a 'responsibility problem' constructs children who engage in 'problem' school behaviours as potentially criminal subjects to be "managed". The use of segregated educational settings has been shown to have harmful subjectification effects which may ultimately contribute towards escalating CPA.

The 'Responsible' Parent

One of the advantages provided by medicalised representations of CPA is that, by framing a child's problem" behaviour as a 'symptom' of their 'condition', it relieves parents of the stigma of causing their child's behaviour. This representation divides parents of disabled children from the parents of non-disabled children who engage in

similar behaviours and allows them to be understood as 'responsible' parent-advocates who need and are deserving of institutional support, unlike the "irresponsible parents" who are responsible *for* their child's behaviour (Broomhead 2013; Knight 2013).

This division is also evident in educational policy. *The Disability Strategy* states that "the families of children with disability are often faced with incredible pressures" and must therefore be supported by the education system (DoE 2019b:27). *The Wellbeing Framework*, in contrast, emphasises parental responsibility to support and "actively participate in the school" (DoE&C 2015b:6). The implication that the 'right to support' is contingent on parental blamelessness may reinforce the already strong incentive for parents to use a disability framework to explain both CPA and 'problem' behaviours at school. This provides access to a higher level of support for their child, and also functions to 'prove' the parent blameless and hence that they are *also* worthy of support.

The *Disability Strategy* acknowledges that the ability of the education system to provide parental support is limited because:

> Information can be difficult to find, and some parents are unsure of where to start or where to seek advice. Often the local school will have the answers, but not every parent feels comfortable or confident approaching a school (DoE 2019b:28)

However, it does not speculate on, or attempt to address the reasons for this discomfort, including how parent-blaming discourses are reflected in the decision to locate parental support within "disability" policy. The proposal for improving parental support online (DoE 2019b:28) has the potential to provide families who are experiencing CPA with information and links to external resources. However, by representing this as "disability

support" it suggests that this assistance is limited to 'responsible parents' of children whose behaviour can be attributed to a 'medical problem'. This may have a devastating impact on families who are experiencing CPA, which is frequently framed through parent-blaming discourses (Brule and Eckstein 2016; Clarke et al. 2017; Holt 2009, 2012a). Australian research reports parents experiencing blame and lack of support from educational professionals after seeking assistance with a child's CPA behaviour (Anglicare Victoria 2001:9; Edenborough 2007:320; Fitz-Gibbon et al. 2018:40–41; Haw 2010:85, 2013; Stewart et al. 2007:188). Furthermore, many of the 'conditions' that are commonly associated with CPA in medicalised discourses are not considered "disabilities" within NSW educational policy. The following section will discuss the policy representation of parents of these 'disordered' or 'delinquent' children.

Irresponsible Parents

In the previous section we saw that the *Disability Strategy* draws upon a medicalised discourse to represent "complex" and violent behaviours as a 'disability problem' producing parents as 'responsible' and 'blameless' subjects. *The Wellbeing Framework*, in contrast represents aggressive or "challenging" behaviour as a 'responsibility' problem and establishes either the 'delinquent child' or 'irresponsible parent' as subjects who must be induced to "take responsibility" *for* this behaviour.

When the 'problem' of a child's behaviour is understood to be insufficient *parental* responsibility, it follows that the parent's behaviour must change. Although NSW policy states that "suspension is not intended as a punishment" for the excluded student, it suggests:

> [suspension] is most effective when it highlights the parents' responsibility for taking an active role, in partnership with the school, to modify the inappropriate behaviour of their child (DoE&C 2011:3).

During the suspension period parents are responsible for the "supervision, care and wellbeing" of their child, and ensuring compliance with their study program (DoE&C 2011:8–12). The economic, psychological and physical harms that lengthy or repeated school exclusion can cause have been identified as one area where educational policy may magnify, or even provide a new avenue for, parental abuse (Bonnick 2019a:74; Fitz-Gibbon et al. 2018:41; Howard and Rottem 2008:55).

Although suspension policy requires consideration of the risk of harm to the child there is no assessment of the potential harms that may be experienced by the child's parents or other family members (DoE&C n.d.). The invisibility of CPA within educational policy has a productive power that establishes CPA as a 'responsibility problem' and renders the possibility of parental victimhood inconceivable. A parent who, as a result of CPA, *cannot* control their child's behaviour is represented within disciplinary policy as a parent who *will not* take responsibility for their child's behaviour at school. The harmful effects caused by a suspension can be justified as necessary to modify the parent's behaviour.

As previous sections have shown there is a tension between the *Wellbeing Framework's* individual responsibility discourse and holistic view of "whole child support". In much of the material intended for distribution to parents, references to support were vaguely worded (DoE&C 2016). Furthermore, these references were dominated by parental responsibility discourse. For example, the brochure *Compulsory School Attendance Information for parents* opens with a paragraph titled "what are my legal

responsibilities?". The second and final page devotes a single paragraph to the question "My child won't go to school. What should I do?", followed by four paragraphs discussing legal consequences faced by parents for their child's continued non-attendance (DoE&C 2015a).

Absence from school is represented primarily as a matter of parental irresponsibility with solutions centred around discipling the parents. In contrast, documents for educators and other professionals specify types of assistance schools can provide such as "access to transport, accommodation and respite care and support for other family members" (DoE&C n.d.). Excluding this in material provided to parents positions the schools as the 'experts' in charge of determining when, and what type of support should be offered.

Chapter three demonstrated truancy and school refusal are 'educational problems' associated with CPA. Representing a child's truancy within a child welfare discourse presupposes that parents can, and are choosing not to, ensure their child's attendance. The imposition of legal sanctions represents 'poor parenting' within a criminalised discourse (Holt 2009). In the United Kingdom similar "parental responsibility" laws were found to exacerbate the harmful effects of CPA (Condry and Miles 2012:243–44; Holt 2009; Holt and Retford 2013). Although there is no direct evidence that this has occurred in NSW the absence of recent research means that it must be considered a concern.

We have seen that educational policies divide students and parents into 'responsible' and 'irresponsible' subjects and determines which individuals are considered worthy of assistance and which are not. These constructions have implications for many students

in NSW schools and are particularly relevant to students whose 'problematic school behaviour' occurs alongside CPA. This is because of the way that CPA discourses construct parents as irresponsible and children as criminal, unless behaviours can be explained within a medicalised discourse. The next section will highlight the way that these constructions shape the treatment of children who engage in CPA using examples provided by the NCCD.

Examples of differential treatment

The *Wellbeing Framework* represents 'problematic student behaviour' as a problem of (ir)responsibility. The *Disability Strategy*, in contrast, locates these same behaviours within a medicalised discourse. This section will apply these insights to two case studies provided by the *Nationally Consistent Collection of Data on School Students with Disability* (NCCD)[17], to demonstrate the implications of these discursive constructions and, specifically how they determine responses to CPA.

The NCCD website provides a variety of case studies to assist schools determine if supports provided to students reach the threshold of "disability accommodations" and qualify the school to receive additional funding. Many of these examples were found to represent aggressive behaviour, particularly when depicting students with autism or mental health conditions (NCCD 2019a). The examples of "Poppy" and "Aaron" provide a clear demonstration of the way that medical and child welfare discourses produce a child's behaviour as either a 'disability' or 'responsibility' problem and how these

[17] The NCCD is not, strictly speaking, NSW policy but is relevant to NSW disability policy as it determines the federal government funding that schools receive for students with a disability. Furthermore, the NSW government has agreed to investigate the possibility of using it to calculate its own disability funding as it is broader and more inclusive than the existing NSW criteria (DoE 2019g; NSW LC 2017:74; Stokes 2018:1).

frames determine the treatment that these children receive. They also highlight the way that the invisibility of CPA within educational policy limits the opportunity to identify and support families who experience CPA. They are reproduced here in full:

> Poppy is a 12-year-old girl who attends a regional city high school and has been living with the same foster family for an extended period of time (out-of-home care). Poppy has siblings who attend the same school but do not live with her. She has been diagnosed with anxiety and reactive attachment disorder as a result of neglect and trauma in her infant years.
>
> Poppy has difficulty interacting with adults and peers. Her anxiety and history of trauma make it difficult for her to regulate her emotions and focus on learning.
>
> Poppy lacks the basic skills necessary to manage her behaviour and she has outbursts for no apparent reason, often several times a day. Her emotions can vary from clingy and irritable to socially disengaged. When Poppy is highly anxious, she can become so emotionally stressed in class that she becomes physically unwell and is unable to attend.
>
> Generally, Poppy's achievement levels are average, although her teachers differentiate her work activities when she shows signs of disengagement or anxiety. Poppy has learnt to withdraw herself to an agreed space when she feels the need, and staff will assist and recommend options for her. Transition times between classes can bring on anxiety, so Poppy is supported by an allocated teacher or education assistant to ensure she reaches the next class.
>
> Poppy's case worker and the school counsellor have developed a support plan, and work closely with a specially trained education assistant. They meet daily to provide Poppy with the support she needs to maintain focus and regulate her emotions. A psychologist also visits weekly. This team monitors Poppy's daily activity and, in consultation with her, have developed a personalised learning plan to accommodate her learning needs.
>
> Poppy's teachers differentiate worksheets and assessment tasks and allow flexibility in timing of assessments and exams.
>
> Her teachers and education assistants have participated in guidance-run workshops in order to learn skills to encourage resilience, improved social skills, anger management and peer interaction.
>
> Most activities are arranged so that Poppy is part of a group of five girls (rather than boys).
>
> Poppy accesses an occupational therapist and psychologist outside school hours. These specialists work closely with the counsellor and child safety officer to improve Poppy's sense of belonging and re-engagement in school activities. They continually link back to Poppy's school support team. (NCCD 2019c)

Poppy's history and current behaviour described in the case study above includes multiple indicators that she may also be at risk of engaging in CPA. Chapter three discussed the link between CPA and childhood trauma. This relationship may be particularly pronounced in children who have a history of out-of-home care (Selwyn and Meakings 2016). Furthermore, both attachment and anxiety disorders are commonly connected to CPA. Finally, CPA has been linked to several of Poppy's specific "problem behaviours" such as social and academic difficulties and aggressive "outbursts" at school.

As Poppy meets the threshold for inclusion within the NCCD she receives extensive and well-integrated support from educational and allied professionals. However, the possibility that her family may require support for CPA is not raised.

Poppy's story contains many similarities with that of "Aaron":

> Aaron is a Year 10 student at a district high school. His belongings are never organised and he often asks to leave the class to look for personal items. Aaron will often become defiant and raise his voice when told he can't do something. He has a small group of friends, who tend to encourage this behaviour. In the playground Aaron is often involved in bullying. He is verbally abusive towards other groups of students, provoking arguments, although they rarely escalate to any physical confrontations. Aaron will regularly return to class highly agitated and verbally defiant of teachers' instructions to calm down. He can often be heard muttering swear words under his breath within adult hearing.
>
> Aaron has a very difficult home life and based on the limited information currently available, the school believes a lot of these behaviours can be attributed to Aaron's parents' reactive parenting style based on physical discipline. Aaron's parents have not reported any previous mental health or medical issues that may explain his current behaviour.
>
> To assist Aaron to manage his behaviour the school, in conjunction with the school psychologist, has developed a documented plan targeting a range of behaviours. Aaron's parents were not able to attend the meeting but have been sent a copy of Aaron's documented plan and invited to give feedback.
>
> To assist Aaron in managing his behaviour, the school:
>
> - has implemented 'Stop, Think, Go' strategies
> - reinforces observed positive interactions with Aaron
> - has assigned seating arrangements to reduce triggers.
>
> All teachers have been updated and advised on Aaron's behaviour goals and current strategies for the classroom and playground. Consequences and incident reporting are undertaken as per the usual school Behaviour Management Policy. A review meeting will be held in three months time unless there is a need for an earlier review. (NCCD 2019b)

Aaron is described as engaging in aggressive and bullying behaviour at school which, as chapter three has shown, may be associated with CPA. The description of Aaron's "difficult" home life suggests that, like Poppy, he may have a higher risk of CPA. Although Aaron's behaviours indicate that he may meet the criteria for ODD and ADHD, he has not received a formal diagnosis or treatment that would allow his behaviour to be explained as a 'medical issue' and qualify for disability support.

These examples highlight the importance of professional treatment and diagnosis in determining whether children who engage in 'problem behaviours' at school, which may indicate a risk of CPA, are considered to have a 'medical problem' or a 'responsibility' problem that requires "behaviour management". They also demonstrate how the construction of the 'responsible parent' in medicalised discourses, in opposition to the 'irresponsible' parent in child welfare discourse, shapes interpretations of a child's behaviour. Although both children's school behaviours are attributed to parental mistreatment, the degree to which their current caregivers are considered 'to blame' influences the responses to their behaviour. Poppy, who is now living with 'responsible' foster parents, is determined to meet the criteria for disability support on the basis of her prior trauma, while the perceived irresponsibility of Aaron's parents prevents consideration that his behaviour may be produced by similar, and ongoing, trauma (NCCD 2019b, 2019c). In neither example was the possibility of CPA raised despite both children displaying multiple risk factors.

This represents 'poor parenting' as incompatible with disability and suggests mental health problems are innate and unrelated to social or environmental factors. This is made explicit in the NCCD guidelines requiring "continued and high level behaviour incidents" that "cannot be attributed to external factors, such as … socioeconomic or non-disability related causes" (NCCD 2019d). As previous chapters of this thesis have shown, there is strong evidence that childhood adversity and trauma may provide one pathway into CPA. Restricting disability support to situations where behaviour cannot be explained by environmental or social factors could exclude many children who engage in CPA. This limits opportunities for intervention and may entrench behaviours.

These case studies demonstrate the implications that different constructions of CPA have for how resources are allocated, and who receives treatment or support. It also indicates a direct consequence of the policy invisibility of CPA. Although both Poppy and Aaron have multiple indicators that they may be at risk of CPA this is not alluded to at any point. Consequently, neither Poppy, Aaron or their respective families would receive support if it was required.

Conclusion to Chapter Four

This chapter has highlighted the ways that educational policy reproduces harmful representations of CPA promoting individual over socio-environmental explanations. The representation of 'educational problems' associated with CPA as either a 'responsibility' or 'complex disability' problem contributes towards the reproduction of child welfare, criminal justice and medical discourses of CPA. These discourses have consequences for how resources were allocated, and which children and parents were deemed "worthy" of support. Furthermore, the invisibility of CPA within educational policy has a discursive effect which limits whether CPA is considered a possibility when a child's behaviour indicated that they may be "at risk".

However, educational policy is a discursive asset that opens possibilities for school-based CPA interventions and support. The *Wellbeing Framework* provides both a conceptual justification and precedent for collaborative interventions while the *Disability Strategy's* provisions for parental support potentially provides practical assistance to families experiencing CPA. However, before discussing the possibilities further a comparative analysis of educational policy in Japan which offers an alternative to individualised constructions of CPA is discussed.

Chapter Five: Representations of CPA in Japan

This chapter applies WPR methods to representations of CPA within Japanese educational policy. Cross-cultural analysis is useful to the WPR approach as it helps the researcher identify alternatives that may be overlooked (Bacchi 2009:14). There has been little cross-cultural research that explores the social construction of CPA (Holt and Shon 2018:923–28; Simmons et al. 2018:38–42). Japan is a useful starting point for such an investigation. Although CPA emerged as topic of academic research at approximately the same time as other nations, there has been little exchange between Japanese and English-language research (Kumagai 1997:117). This has resulted in significant differences in how Japanese academic and social discourses represent CPA and its relationship to other 'social problems'. This analysis will show that unlike the discursive representations of CPA discussed in previous chapters Japanese research and policy are been dominated by the view that CPA is a symptom of a problem within society. We shall see that this has produced a different policy response to CPA with 'solutions' emphasising systemic, rather than individual, change.

Awareness of CPA as a 'social problem' in Japan predates other forms of domestic abuse[18] and hence child welfare and family violence discourses have had less influence on how CPA is understood (Arai 2013:23–24; Bui and Farrington 2019b:74; Fujieda and Dvorak 1989:60; Weingourt et al. 2001:103–4). CPA in Japan was initially represented as one manifestation of a larger 'problem' of 'delinquent' youth which were extended to

[18] Until relatively recently the Japanese term for violence within the family *kateinai bōryoku* was understood to refer exclusively to violence directed towards a parent from a child (Arai 2013:24; Fujieda and Dvorak 1989; Honjo and Wakabayashi 1988; Miyagawa 2003:129)

a perceived crisis of bullying and violence in Japanese schools (Becker 1988; Borovoy 2008:553–54; Ohbuchi and Kondo 2015:158; Tubbs 1994:507–8).

Toivonen and Imoto contend that while the specific behaviours and categories that constitute Japanese 'youth problems' evolved so that "the negative meanings that were formerly ascribed to a well-known category … may be displaced onto other youth types in Japan's rich youth problem pedigree" (2013:80). As the representation of Japanese 'youth problems' has changed, the perception that they are responsible for CPA is one "negative meaning" that has endured. CPA became associated with school refusal, and eventually *hikikomori* (social withdrawal) and other post-adolescent 'problem behaviours' [19] (Kawanishi 2004; Ohbuchi and Kondo 2015:152; Okamura 2016; Ono and Pumariega 2008:307; Rosenthal and Zimmerman 2012:83–84; Yamamiya 2003:40–43).

These 'youth problems' has been represented uniquely Japanese problem, with underlying presuppositions that social changes are responsible for a loss of traditional values and propensity for violence among the youth (Becker 1988:425–26; Roberts and Lafree 2004:202; Takeshi 2013:121–25; Tubbs 1994:507–8). Furthermore, each has been represented as an 'educational problems' reflecting that "In Japan in recent years, reporting of any serious juvenile delinquency is almost always associated with school education. It is now common to assume that the school environment acts as a causal factor in student misbehaviour" (Ishida and Miwa 2012:165).

[19] Consequently, much of the Japanese literature regarding CPA uses broader definition than is common in western research, including any violence from a child directed towards a parent aged under 65. While this makes direct comparison with western literature on CPA difficult it does align with suggestions that research into CPA would benefit from taking a more contextual life-cycle approach (Holt and Shon 2018; Okamura 2016; Simmons et al. 2018:42).

The role of the educational system in producing 'youth problems' means that CPA is represented as an 'educational problem' which produces the school as a site of intervention (Kawai 1981:370; Kawanishi 2004:29; Kozu 1999; Okamura 2016:106).. We have seen that in NSW the binary division between home and school supports a view that schools should have neither responsibility for, nor authority over, the home environment. This has contributed towards an absence of schools in policy discussions of CPA. In contrast the use of the educational system to regulate behaviour at home is established practice in Japan (Ishida and Miwa 2012:170; OECD 2018:53; Tajan 2015:60–61; Yamamiya 2003; Yoshikawa et al. 2019:86).

This chapter provides an overview of how changing views about CPA and 'youth problems' are reflected in Japanese educational policy. It primarily focuses on school refusal, arguably the most enduring Japanese 'youth problem' and the most consistently represented as the cause of CPA (Bui and Farrington 2019a:152; Kawai 1981; Lock 1986:101–2). Three key areas of difference between NSW and Japan are highlighted. These are: the visibility and hypervisibility of CPA, The 'over-responsible parent' and the erasure of the individual. The conclusion compares the problem representation of CPA in NSW and Japan, illustrating the respective strengths and weaknesses of each.

Representations of CPA in Japanese educational policy

Representations of CPA and 'youth problems' in Japanese educational policy have shifted significantly since CPA emerged as a 'social problem' in the 1970s. These shifts demonstrate not only how Japan has approached CPA but also other policy problems. Therefore, it is worth providing the narrative of these shifts, specifically of school refusal which has been intimately linked with CPA. This shift has been from

representing CPA as an individual and pathological 'problem', to a problem embedded in the structures of Japanese society.

Early representations of CPA in Japanese research suggested that CPA was preceded or caused by a child's sudden refusal to go to school (Kawai 1981; Kumagai 1981). This resulted in these behaviours becoming viewed as synonymous with each other which was often reflected in educational policy.

School refusal first began to attract attention in Japan during the 1960's and was initially regarded as a pathological problem that was restricted to a small group of students who required treatment by medical professionals (Bui and Farrington 2019a:150; Furlong 2008:311; Lock 1986; Shimizu 2011:168; Tajan 2015:59). Consequently policy 'solutions' proposed "treatment at special institutions, such as medical institutions and educational counseling bodies" for school non-attendance and the institutionalisation of children who engage in CPA (Horiguchi 2018:121; Kumagai 1981:346; Lock 1986; Yoneyama 2012:199). These early policy representations resemble the way that medical and criminal justice discourses combine in NSW educational policy to locate 'problem' behaviour within 'disordered' or 'delinquent' students who are segregated into "behaviour schools".

In the early 1980's a number of high-profile cases of extreme violence from middle class "non-delinquent" youth, triggered a change in how school refusal and CPA were understood (Kumagai 1981). The representation of 'youth problems' began to change from an individual pathology to one of larger problem of youth distress (Kumagai 1981:339–40, 1983:175; Shimizu 2011:169). The "high pressure" Japanese education

system and the "unreasonable" expectations of the *Kyouiku Mama*[20] (educational-minded mother) were commonly identified as the cause of this suffering (Kawai 1981; Kumagai 1981). As 'youth problems' were re-problematised from individual to social, CPA was recreated as simply one possible outcome of a socially produced harm.

Educational policy reflected this new understanding of the problem with the most common representation being that school refusal and violent behaviour is a response to unreasonable parental or social expectations (Becker 1988:426; Kawai 1981; Kumagai 1981:341).

> Their violence was an excessive response to severe threats imposed by other family members [that is] unique to societies of academic meritocracy, in which a school career determines one's entire life. Japan is one such society, and […] conflicts between parents and children about education seem to be a major cause of serious violence by juveniles within the family in Japan (Ohbuchi and Kondo 2015)

Representing CPA as a primarily defensive response suggests that, although parents are the targets, children are the 'victims' (Bui and Farrington 2019b:75; Kozu 1999). This resembles the construction of the 'victimised child' in child welfare discourses, and represents 'society' rather than 'parents' as the 'perpetrator'.

The shift in problematisation was followed by calls to reform the institutional forces perceived as responsible for educational and other pressures (Cave 2001:176; Horiguchi 2018). Since 1990, the official position of MEXT is that school refusal is a

[20] Considered the normative model of Japanese middle-class motherhood.

socially produced problem which can happen to "any family and any child[21]" (Yoneyama 2000:75).

> In the past the causes of refusal to attend school were sought in the character of the individuals concerned. To find a solution, however, it is necessary to develop a new perception of this problem and to recognize that any child may refuse to attend school. Solution of the problem must be approached from various perspectives. Are the children concerned being treated appropriately, and are autonomy and independence being fostered through guidance activities by the entire school? Are efforts being made to build human relations in appropriate community environments? Is educational counseling being provided from children's perspective? Are schools making efforts to open themselves to parents and communities? (MEXT 1994:II.3.2)

This stands in stark contrast to the individual and family-centric view less than a decade earlier and mirrors the belief that CPA "could happen to anyone someday, to any family at all of a sudden without the slightest warning" (Kumagai 1981:345). The focus on the ways that schools are implicated in causing this behaviour is a key point of difference with NSW policy.

This representation produced policy measures that sought to reduce this pressure, including the endorsement of alternative education options within the public system, and the introduction of school counsellors to address school refusal, bullying, and CPA (Ando et al. 2007:766; Bui and Farrington 2019a:151; Horiguchi 2018:125; Toivonen and Imoto 2013:76; Yagi 2008:143).

[21] This new representation was accompanied by a change in language from tōkōkyohi (school refusal) to the more neutral Futōkō (school nonattendance) (Okamura 2016:112; Shimizu 2011:179; Tajan 2015:59)

> The striking feature of problem behavior of late has been raising the number of cases where children seem to have acted on the spur of the moment after stresses and dissatisfaction had built up within them to uncontrollable levels.
>
> For prevention, early detection and early solutions to such problem behavior, it is crucially important to look into what is going on in the minds of children. For that purpose, school counselors and "advisors in the classrooms for easing children's minds" are being placed so as to improve the setup of counseling at schools.(MEXT 2001:2:2.2)

The introduction and expansion of the school counsellor program cemented the view that CPA and other 'youth problems' are best treated through the educational system (Bui and Farrington 2019a:151; Ono and Pumariega 2008:308; Tajan 2015:58–59; Toivonen and Imoto 2013:76). Offering psychological treatment as the solution to youth violence does not indicate this was viewed within a medicalised discourse as in NSW, but instead involved indigenous traditions emphasising "moral responsibility and cultural values in Japanese society" (Yamamiya 2003:35) to "facilitate integration into one's own social role" (Borovoy 2008:559). This suggests the 'problem' to be solved is a failure of social integration.

During the late 1990's *hikikomori* began to become represented as a "cause" of CPA (Larimer 2000; Ohbuchi and Kondo 2015; Rees 2002). This was accompanied by a greater emphasis social and systemic explanations of the problem (Berman and Rizzo 2018; Horiguchi 2018; Toivonen and Imoto 2013:74; Yoneyama 2000). School refusal and *hikikomori* were represented as "a process in which students who burn out in the extremely demanding and alienating school system try to empower themselves in their search for subjectivity" (Yoneyama 2000) representing CPA as either a symptom of this "burn out" or an act of resistance against these expectations (Allison 2000).

This period also saw a strengthening of a competing problem representation, attributing these behaviours to the decline of Japanese values and "selfish individualism" of Japanese youth. This retained a focus on the failure of the twin institutions of socialisation; the family and school (Aspinall 2016:135–36; Kawanishi 2004; Miyagawa 2003; Nishizawa 2004; Shimizu 2011:180; Yamamiya 2003). Children's alienation from family, community, and the natural world, were frequently cited in policy discussions of problem behaviour.

> The entire social environment, surrounding of children has been rapidly changing along with the falling rate of birth and the progress of urbanization. [...] Under these circumstances, violence, bullying, and non-attendance at school of children still remain a great concern for the future. (MEXT 2002:3.1.1)

Educational reforms addressed both of these 'problems' by implementing a more "relaxed" approach to education that emphasised moral education and traditional 'Japanese' values (Cave 2001:179; Horiguchi 2018:127; MEXT 2000:1:1:1.4; Yoshikawa et al. 2019:83).

These representations often made use of parental responsibility discourses that attributed child behaviour to parental failure to install normative values. However, unlike NSW policy representations of the 'irresponsible parent' Japanese policy emphasised that responsibility for this failure belonged to the entire community. Consequently, solutions to youth violence (including CPA) extended beyond the individual family unit. Illustrative of this is the position outlined in the 2005 White Paper.

> As a backdrop to repeated aberrant offenses being committed by juveniles, and various other issues including bullying and non-attendance at school in recent years, it has been

> pointed out that there has been a "downturn in educational functions" of communities and families [this is] not merely a problem for individual parents. As indicated above, given the significant changes in the community and society surrounding parents and children, the environment that supported learning and nurturing for children and parents alike in the community and society as a whole has been disintegrating. In addition, it must also be noted that other factors exist, such as the increasing tendency to prioritize jobs and work, and an employment environment that makes it difficult to relieve mental pressure and time constraints for child rearing.
>
> Accordingly, not only is it necessary to provide opportunities for individual parents to learn and consult about child rearing, it is also necessary to create a better environment and the momentum toward support by society as a whole, including communities and private-sector companies. (MEXT 2005:2)

This section has shown the representation of CPA as a secondary manifestation of a larger 'youth problem', reflected within educational policy. As CPA has been represented as a problem of youth the cause has been attributed to society rather than the individual or family. This has, in turn resulted in the educational system becoming understood as a cause of these problems, and hence educational policy an integral part of any solution. Consequently, changes in education policy, and attitudes towards young people, have produced shifts in approaches to CPA. The following section considers the implication of these policies in representing the problem of CPA: constructing CPA as both invisible and hyper-visible, constructing CPA as a "product of love" and erasing the individual within CPA.

The invisibility and hyper-visibility of CPA

In contrast to the invisibility of CPA within NSW policy the construction of CPA as a subset of other 'youth problems' has resulted in CPA being simultaneously hyper-visible and invisible in Japanese policy. Although CPA is frequently discussed in academic

research as an 'educational policy problem' it is rarely identified in isolation. Instead representations of CPA as a secondary symptom of other 'youth problems' is rarely contested within Japanese research. Consequently, CPA is rarely represented as a problem that exists independently of other behaviours[22].

Representing CPA as a 'problem' that only exists in the context of other behaviours has a discursive effect that erases children who engage in CPA but not, other 'problematic' behaviour from consideration. This determines who is supported, and how that support is delivered. The failure to conceptualise CPA outside of these behaviours means that children who do not experience educational problems are unlikely to be identified as in need of support.

Representing CPA as synonymous with other 'youth problems' also has a subjectification effect that produces children who engage in CPA as delinquents or victims, depending on how these 'primary' problems are perceived (Berman and Rizzo 2018:8). Non-Japanese research has traditionally represented CPA and parricide as distinct phenomena (Holt and Shon 2018:916–17). This is not the case in Japan where cases of parental murder are often used to link CPA with other 'youth problems' (Nesser 2009; Rees 2002; Watts 2002; Yoshihama 2002:390). This represents children who engage in 'problem' behaviours, such as school refusal or *hikikomori,* as a category of violent and potentially murderous subjects whether they engage in CPA or not[23].

[22] While there is evidence that these behaviours are associated with CPA, there is less support for the claim that this relationship is stronger in Japan than other nations. In fact, the available data is consistent with research conducted in other nations. For Japanese statistics please see (Okamura 2016).
[23] The evidence strongly suggests that most Japanese children and young adults who display socially withdrawn behaviour are not violent. For example, Hattori found 29% of hikikomori patients in their study had engaged in physical CPA and 49% reported property damage (Hattori 2006). More recently

The over-responsible parent: CPA as "a product of Love"

Traditionally Japanese psychological discourses have explained CPA and other 'youth problems' by drawing on a psychoanalytic tradition that directs attention to the perceived unique importance of the mother-child bond (Bui and Farrington 2019a:151–52; Kumagai 1981:345–46; Tanaka-Ghosh 1983:8–9). This representation of CPA suggests that the rise of the nuclear family, combined with paternal absence has caused the Japanese family to become "child-centred" and "wife-dominant" (Gjerde and Shimizu 1995:283; Kawai 1981:372; Kawanishi 2004:27–29; Kozu 1999:50; Kumagai 1981:342–43; Okamura 2016:106).

This is represented as a particular problem for Japanese mothers who are expected to sacrifice themselves for their children. This is suggested to result in them placing unreasonable demands on their children, who then act violently to defend themselves from this pressure (Kawanishi 2004:27–28; Kumagai 1983:173). This creates the 'overly-responsible' (education-minded) mother and 'absent father' as categories of subjects represented as responsible for, rather than victims of, their child's abuse. Unlike the child welfare discourses discussed in chapter three, the ultimate cause of this problem is still located in society.

This may soften the psychological harm associated with parental experiences of CPA. In chapter three we saw that it is common for non-Japanese research to represent CPA as a product of poor parental (maternal) attachment. In contrast, the most common

Funakoshi and Miyamoto found family violence in only one (1.8%) of the hikikomori patients in their study (2015:213) while Li and Wong reported that CPA was instigated by 18% of socially withdrawn youth (Li and Wong 2015:604).

psychological explanations for CPA in Japan is an overly enmeshed mother-child relationship (Gjerde and Shimizu 1995:283; Kawanishi 2004:28–29; Kozu 1999:50; Kumagai 1981:341–44; Okamura 2016:106). This understanding of CPA, particularly when linked to *hikikomori* and school refusal, can be described as a child choosing to draw closer into, rather than reject, their family (Furlong 2008:314). Combined with the representation of the 'educational-minded' mother, this implies that CPA is a problem of 'overly-responsible' parents. This view is expressed in Tamaki's influential work on *hikikomori* which states "violent outbursts in the household… are a product of love" (2013:105–6). This representation provides Japanese parents with some protection from the self-blame and despair that characterises parental responses to CPA in other nations and allow them to maintain a narrative of hope and recovery even in the face of a child's acts of violence against them (De Luca 2017:3–4; Rubinstein 2016).

Erasing the Individual

The belief that CPA is a socially produced problem has brought attention to factors often overlooked in research from other nations, particularly educational and social pressures. However, this may have a discursive effect that obscures individual factors that contribute to CPA. The most glaring, and potentially harmful absence is the relative silence on the topic of childhood abuse and trauma in Japanese CPA research.

While it is possible to argue that child abuse has been, at times over-emphasised in CPA research (Holt and Shon 2018) it is rarely mentioned in Japanese research[24], and is

[24] There is some evidence that this may be changing due to increasing recognition of child abuse as a 'social problem' in Japan. Some recent articles discuss the possible contribution of child victimisation and exposure to violence, although this is still typically presented as less likely than alternative explanations (Hattori 2006:183–84; Ohbuchi and Kondo 2015:156; Okamura 2016:114–46).

sometimes explicitly ruled out (Tamaki 2013:140). As there is little reason to believe that childhood abuse is never a factor in Japan[25] its absence in representations of CPA may cause it to be overlooked and limit opportunities for interventions ensuring child safety.

The failure to consider individual factors is also evident in relative absence of medical discourses. While the harmful effects of representing child violence as a 'disability problem' has been discussed, replacing this discourse with a view that youth violence is entirely socially produced may be equally damaging. Borovoy writes that psychiatric or developmental issues are rarely considered as a cause of CPA or school avoidance (2008:554). She suggests the preference for mainstreaming and a reluctance to label children as different results in many children missing out on necessary treatment and support (Borovoy 2008:560).

While NSW students who meet the threshold required by disability criteria gain access to resources, in contrast, in Japan there is a belief that:

> children's problems, no matter how disruptive or demanding, should be ''manageable'' within the home, given enough time, patience and endurance. In this context, ''coping'' expands to include a range of social care that is beyond what is commonly associated with the home in many industrial societies. (Borovoy 2008:569)

The lack of specialised and comprehensive support for disabled students in Japan has been presented as an explanation for the comparatively high rates of school refusal among this group (Berman and Rizzo 2018:5–6; Borovoy 2008:553–54; Horiguchi

[25] The 2018 White Paper on Children and Young People reported that "The number of cases of counseling regarding child abuse provided at child guidance centers in FY 2016 increased by a factor of about 10.5 compared to that in FY 1999, when the Child Abuse Prevention Act was yet to come into force" (Government of Japan 2018:44)

2018:128; Okamura 2016:109; Yoshikawa et al. 2019:84). If it is true that school refusal and *hikikomori* can cause CPA this could be seen as one example of how educational policy may be implicated in causing CPA and closing options for intervention.

Conclusion to Chapter Five

This chapter has illustrated how historic and cultural differences have produced differences the representation of CPA. In contrast to representations that locate the 'problem' of CPA within the individual, prominent in NSW, Japanese discourses favour a representation of the problem, that treats CPA as a reflection of a deeper problem within Japanese society, specifically Japanese youth. These problems are frequently represented as 'educational problems' and the educational system considered both their cause and as a site of intervention. In contrast to the invisibility of CPA in NSW educational policy, CPA is hyper-visible in Japan. However, this visibility is limited to the intersection with other 'problems', CPA remaining largely invisible as a problem in its own.

The representation of CPA as produced by society may have benefits for the way families manage living with CPA. It has also resulted in the educational system having a much larger role in delivering child and family support than is currently the case in NSW. However, the emphasis on social and environmental factors is paired with an erasure of the 'individual'. In contrast to NSW factors such as childhood abuse or medical explanations are given far less consideration in Japan. This means these factors may be overlooked, and children will not receive appropriate treatment or interventions.

The previous two chapters have applied the WPR approach to identify the problem representation of CPA in Japan and NSW. Through this process we have identified that each provides some benefits, but each overlook crucial components of CPA. There is a need for a more integrated view that combines aspects of NSW and Japan. The next chapter will offer suggestions for what such a policy approach should involve.

Chapter Six: Principles for a CPA policy framework

The WPR approach is built upon the premise that policy representations power that extends beyond simply determining 'responses' but produce the problem and subject they assume. Chapters three to five have analysed and identified different representations of CPA, demonstrating that these representations are all limited in some way and need to be understood together to develop an appropriate policy response, that draws upon their strengths and counters their limitations.

Bacchi describes the WPR approach as having "an explicitly normative agenda" in that "it presumes that some problem representations benefit the members of some groups more than others, it also takes the side of those who are harmed" (Bacchi 2014b). This, requires the researcher to "consider not what you want to "know" but what you want to "do"" (Bacchi 2014a). While it is crucial to identify, and challenge the harmful effect of policy representations, the ultimate aim is to promote problem representations that do the least harm (Bacchi 2014b). For this reason lived effects *must* be included in any analysis (Bacchi 2014b).

This chapter outlines principles for an alternative approach to CPA that recognises its complex relationship with other issues and its unique properties. This requires questioning a core presupposition of CPA research spanning the discursive representations discussed throughout this thesis - that CPA is a 'problem' that can be 'known' and 'solved' rather than an act that may have myriad interpretations or functions.

This chapter outlines four policy principles which could form the basis for more concrete policy guidelines and practice. These principles were developed from the analysis presented in previous chapters and require, first that CPA must be made **visible** in policy; that this policy must be **non-judgemental**, **integrated** and **strengths-based**. The remainder of this chapter discusses each of these elements with reference to the analysis presented in previous chapters.

Principle One: CPA must be visible in educational policy

Principle One: Policies are constructed that explicitly name CPA and address the factors that distinguish CPA from other related phenomena and therefore require a tailored response.

Chapter four demonstrated that the invisibility of CPA in educational policy hinders the ability to identify and respond to CPA. This policy silence created a negative representation that defines CPA as neither a 'wellbeing' nor 'educational' problem. Consequently, children who engage in CPA may receive little support, unless they meet the threshold for a medicalised model of 'disability'. The behaviour of children who cannot meet these criteria is framed through child welfare or criminal justice discourses, understood as either a child or parent 'responsibility' problem. Chapter five showed that CPA is simultaneously hyper-visible and invisible in Japanese educational policy, as it is subsumed in related 'youth' and 'educational' problems. This produces the educational system as a site of intervention for CPA and has implications for which families are identified as in need of support, and the types of solutions offered.

CPA must be made visible in educational policy. It is crucial policy recognises the unique complexity of CPA. Making CPA visible ensures that CPA is considered when children display behaviours indicating they are 'at risk' of engaging in CPA and allow families in need of support to be identified and assisted. It also ensures that actions are taken to safeguard the wellbeing of all family members when responding to these behaviours, for example, when imposing suspension.

This approach allows both CPA and 'problem' school behaviours to be reconceptualised as a communication of distress. These factors causing this distress may include, but are not limited to:

- Family violence (past or ongoing).
- Problems within the school environment such as peer or adult-perpetuated victimisation or inadequate academic or social support.
- Underlying medical issues or "disorders" particularly developmental, 'mental health' or 'behavioural' disorders.
- Adverse Childhood Experiences or trauma.

Each of these factors requires their own considered response. Investigating and treating these underlying factors necessitates the second principle: that policy representations, and responses to CPA, are non-judgemental.

Principle Two: CPA policy must be non-judgemental

Principle Two: CPA policy must be non-judgemental and avoid both explicit and implicit attributions of blame to any party. Evaluation of who, or what, is 'responsible' for a behaviour must have no bearing on access to resources for support or intervention.

Chapter three examined the way that CPA has been constructed within CPA research and found that medicalised discourses can provide relief from the stigma of 'blame'. The analysis presented in chapter four found that NSW educational policy constructed violent or "complex" behaviours as either a 'disability' or 'responsibility' problem. Children who meet the threshold for 'disability' were able to access resources for individual and family support, while the remainder, or their parents, could be subject to disciplinary measures to ensure they 'take responsibility' for modifying their behaviour. Both constructions have potentially harmful subjectification effects and prevent consideration of social or environmental factors that may contribute to CPA. As chapter five illustrated the Japanese construction of CPA as a social problem identified a social and institutional responsibility for these behaviours resulting in policy responses that address environmental or systemic factors. However, this representation may cause 'individual' factors such as child abuse or medical 'disorders' to remain unidentified and unaddressed.

NSW educational policy offers an alternative representation of 'problem behaviour' as a 'communication' of a student's distress and need for support. This representation, which was identified in both wellbeing and disability policy disrupts the representation of 'challenging behaviour' as an entirely individual 'problem' by calling attention to the

factors that may be underlying this behaviour. Crucially, this consideration extends beyond the individual and includes social and environmental factors, including the educational system itself.

Applying this construction to children who engage in CPA allows 'abusive' behaviour to be understood as potentially involving myriad 'issues', rather than a problem that can be solved in isolation. This eliminates the assumption of blame that can serve as a barrier for collaboration.

It is recommended that this form the basis of any future CPA policy and paired with the decoupling of 'support' and 'disability' policy. This brings us to the next principle - CPA policy must be integrated at both the level of policy and intervention.

Principle Three: CPA policy must be Integrated

Principle Three: CPA policy must be grounded in a principle of integration. Responses to CPA must be integrated and collaborative across government and professional sectors. The development of CPA-specific policy is essential, but CPA must also be integrated into all relevant policy areas.

The fragmentation of CPA research discussed in chapter three has been reflected in a confused, and frequently non-existent policy response. Each construction of the 'problem' of CPA produces a different view of not just what, but who, should be involved in interventions. CPA has not, in Australia, been understood as an 'educational' problem and chapter four found that CPA is not addressed in NSW educational policy. In chapter

five we saw that the representation of CPA as an 'educational' and 'social' problem has caused CPA responses to be integrated within the educational system in Japan. However, this analysis highlighted the danger of overlooking individual factors.

The need for CPA interventions to be holistic and collaborative both within family and across professional sectors is emphasised in CPA research. As chapter four shows there is provision for this within existing NSW educational policy. However, the policy invisibility of CPA means that families who experience CPA are unlikely to be identified as requiring this type of support.

Future policy must focus on ensuring schools have resources to deliver this support to students for whom it is required and ensure these measures are linked to CPA-specific policy. Schools must be able to organise and initiate collaboration with relevant professionals to provide the integrated response required by this complex problem. It is also essential that as well as the creation of a CPA policy that CPA is also considered when developing other relevant policies, specifically student disability and disciplinary policies.

Principle Four: CPA Policy must be Strengths-Based and Family-Centred

Principle Four: CPA Policy must be Strengths-based and Family-centred. It must emphasise the strengths of each family member and their collective power to create change. Consideration of the safety and wellbeing of all family members (including siblings) must be central to CPA policy.

The discursive representations of CPA discussed in chapter three are 'deficit-based' in that they attribute CPA to a weakness or disorder that must be corrected, or in some medical discourses, accommodated. Furthermore, all except medical discourses, represent the needs of children who engage in CPA and their parents as, to some degree, in opposition to each other. These features were also evident in the NSW educational policies discussed in chapter four. In chapter five we saw that while Japanese representations of CPA frequently identify a social cause, they may still imply some degree of individual, or familial deficit.

Representing the child who engages in CPA as deficient is problematic because, as discussed in chapter three, shame and stigma contribute towards the continuation or escalation of CPA. Conversely, locating the 'problem' of CPA in parents may be equally damaging. Parent-blaming attitudes are a barrier to help-seeking and may limit the ability to identify other factors contributing to the behaviour. Furthermore, parents may disengage from interventions if their needs are not acknowledged, or if their participation implicitly depends on accepting the 'spoiled identity' of a failed parent. The Japanese representation of CPA as a "product of love" and of 'over-responsible'

parenting, although problematic in its own way, may assist in reimagining this relationship.

It is vital that CPA policy be strengths-based and family-centred at the individual, family, and institutional level. Policy must focus not on what is 'wrong' with the individual but on emphasising their agency to affect change. CPA damages family relationships, and therefore may require interventions focused on relationship restoration but the family should be considered a source of strength. It is vital that policy recognises that the interests of each family member are not inherently in conflict. Consideration of the safety and wellbeing of all family members must be embedded into policy to ensure that policy does not inadvertently contribute family conflict or magnify harms caused by CPA.

Tying the threads together

CPA takes place in complex relationships of power and emotion. The relationships that are frequently identified as the cause of CPA can be reimagined as an asset with the power to create change. Moving away from responsibility discourses will result in a reduction in stigma and shame and create room to identify factors contributing to CPA. This is central to emerging approaches to treating CPA which attempt to view CPA without "seeing the problem 'in' the child or blaming parents" (Coogan 2017:170). By stepping away from preconceived ideas about the cause of CPA, all parties are empowered to learn from each other and use this renewed power to find a solution (Bonnick 2019a:158). If this approach is adopted for school-based behaviours and paired with efforts to make CPA 'visible' within educational policy, it will increase the

likelihood that; families will disclose CPA; that CPA will be identified; and appropriate interventions provided.

Chapter Seven: Conclusion

This thesis had three goals: to understand how CPA is represented within educational policy, to understand the implication of these representations for children and families who experience CPA, and finally to develop an alternative policy framework for CPA. Chapter three explored the ways that CPA has been represented within academic research and demonstrated both the strengths and limitations of different discursive constructions of CPA. It introduced two new ways of thinking about CPA which are implicit in the findings of research conducted within other discursive traditions, highlighting the need for a new approach.

Chapter four explored representations of CPA in NSW educational policy. It found that CPA is not directly represented within either *The Wellbeing Framework* or the *Disability Strategy.* This policy silence has a productive effect that contributes to the type of problem CPA is understood to be. Furthermore, behaviour which may indicate a child is at risk of CPA is represented as either a 'responsibility' or 'disability' problem. These problem representations may cause children who engage in CPA to be represented as 'disabled', 'disordered' or 'delinquent' subjects with either 'irresponsible' or 'responsible' parents. This has implications for which children and families receive assistance and the types of interventions and supports offered. There has been no previous Australian analysis of the way that educational policy affects responses and treatment of CPA. These findings demonstrate the need for CPA to be made 'visible' in policy and for policy to be non-judgemental and specific to CPA.

Chapter five compared NSW policy representations to the representation of CPA in Japanese educational policy. It was shown that Japanese educational policy represents

CPA as a secondary manifestation of other 'youth' or 'educational' problems that can be traced to a failure of Japanese society, resulting in very different policy responses. It highlighted three key areas of difference to the way CPA is constructed in NSW: the hypervisibility and invisibility of CPA, the representation of CPA as a "product of love" and 'over-responsible' parenting, and the 'erasure of the individual'. This demonstrated the benefits that cross-cultural analysis offers to CPA research, particularly in challenging established views of the 'type' of problem CPA is.

Together, chapters four and five address the first research aim and demonstrate that the representation (or non-representation) of CPA in educational policy has a profound effect on the way that CPA is treated. By comparing the very different approaches in NSW and Japan the thesis has argued for a different set of policy principles, which offer a 'less harmful' policy approach to CPA. These principles were outlined in chapter six. Table two demonstrates how each of these principles balances the NSW and Japanese approaches and suggests an alternative that combines the benefits, while mitigating the harmful effects of each.

Table Two: Representations of CPA – NSW, Japan and an alternative approach

	NSW	Japan	A CPA-specific approach
CPA within educational policy	CPA is invisible in educational policy.	CPA is mentioned in educational policy, but it is usually subsumed into other issues.	Policy explicitly mentions CPA. CPA is integrated into policy for other, potentially related policies
Representation of the 'problem' of CPA.	Educational policy focused on disciplining 'irresponsible' children or parents. Higher levels of support restricted to those who meet the threshold for 'disability'.	CPA and 'youth problems' may be attributed to the overly-responsible parent or overly-close family relationships.	CPA considered a behaviour that may indicate many problems. Interventions focus on identifying and resolving these issues. Support is not restricted based on who, or what, is considered 'responsible' for CPA.
Types of support	There is provision in educational policy for collaborative and multi-agency support, but invisibility of CPA may cause it to be overlooked.	CPA support is integrated into the educational system but 'individual' factors such as disability or abuse may be overlooked and unsupported.	Supports are collaborative between individuals and across sectors.
The family.	Responding to child behaviour focuses on individual or family deficit. The interests of child and family presented in opposition.	While 'youth problems' linked to deficit in society the individual is also presented as deficient. Support linked to parental sacrifice and may overlook needs of other family members.	Policy recognises the needs and contributions of all family members. Interventions focus on building individual and family strengths.

In summary, this table illustrates how CPA problem representations in NSW and Japan provide a resource for an alternative policy framework that moves beyond the limitations of each.

There has been little research conducted with children who engage in CPA and much of what exists has been adult directed. Despite attempting to consider the child's perspective this thesis has reflected the adult-centric nature of CPA research. There is a need for more research that includes children who engage, or have previously engaged,

in CPA as co-producers of knowledge to understand their needs and perspectives on this phenomenon and their experiences within the educational system.

As policies included in this analysis were limited to secondary education it has also contributed to the adolescent-centric bias of existing literature. There is evidence that CPA that emerges in early childhood may differ from that which begins during adolescence. Therefore, extending this investigation to policy representations of CPA in primary school policy may be beneficial.

It would also be beneficial for research that specifically addresses how the experiences of children with a 'disability' within the educational system may be implicated in the higher prevalence of CPA among this group. There is evidence that this group of children are more likely to experience victimisation in NSW schools as evident in the ongoing *Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability*[26]. As victimisation at school has been suggested as one possible cause of CPA this research must be conducted to inform future disability policy.

This thesis has shown that educational policy has a powerful effect on the lives of individuals who experience CPA. These effects are often harmful, however there is potential for it to be otherwise. CPA is not addressed within NSW educational policy and this is highly problematic. However, the absence of an explicit policy provides an opportunity to develop policy that is specific to CPA, rather than reproducing the limitations of existing approaches. The principles outlined in this thesis provide a guide for such an approach.

[26] See https://disability.royalcommission.gov.au

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Appendix One: List of terms used in database searches

Adolescent Family Violence

Adolescent to Parent Abuse

Adolescent to Parent Violence

Adolescent Violence in the Home

Adolescent Violence to/towards/against Parents

Child to Father Abuse

Child to Father Violence

Child to Mother Abuse

Child to Mother Violence

Child-Parent Abuse

Child-Parent Violence

Child to Parent Abuse

Child to Parent Violence

Parent Abuse

Additional terms used for Stage Three

Delinquency AND Parents OR Family OR Mother OR Father OR Filial

Filial Violence

Futōkō

Hikikomori AND Violence OR Abuse OR Aggression

kateinai bōryoku

Family Violence

Juvenile Violence AND Parents OR Family OR Mother OR Father

School non-attendance

School refusal

tōkōkyohi

Youth Crime AND Parents OR Family OR Mother OR Father

Youth Violence AND Parents OR Family OR Mother OR Father

Appendix Two: Policy Corpus

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