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Prifysgol Abertawe

An Evaluation of the Parallel Lives Programme

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1. Background of The Parallel Lives Programme

The Parallel Lives programme was created by Media Academy Cymru (MAC), a not-for-profit organisation working with vulnerable young people aged 8-25 years old across South Wales. MAC primarily work in three key areas; criminal justice; education and training; and arts activities for young people. The organisation works predominantly with young people on the periphery of or currently involved with the criminal justice system. MAC also deliver out-of-court disposals for youth offending services in South Wales (Timpson et al., 2020). As an organisation, MAC's mission statement is:

Working restoratively through media and creative approaches, delivering localised solutions that engage and empower individuals with the skills and self-esteem to succeed and make a positive contribution to Welsh society

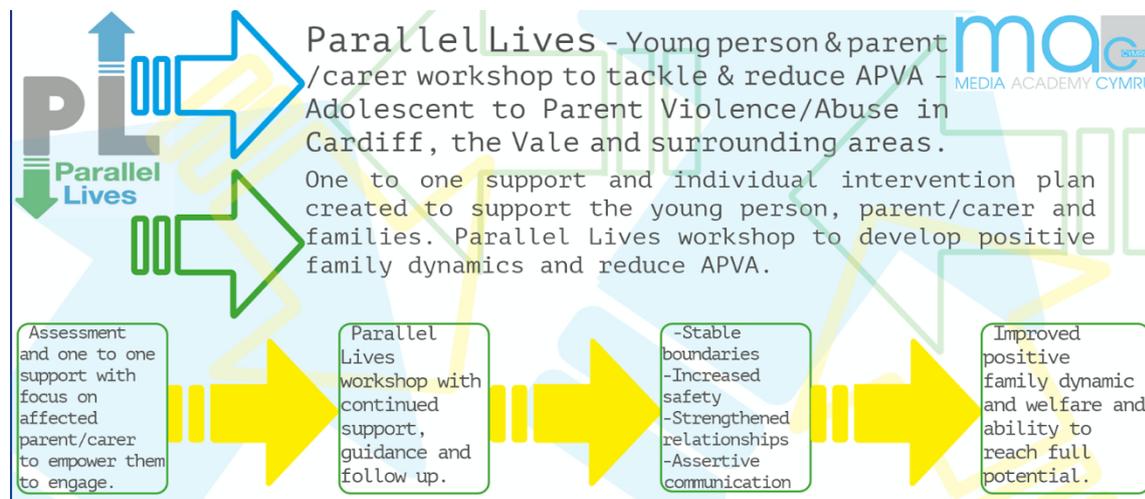
(Media Academy Cymru, 2021a).

The Triage team developed the Parallel Lives programme to fill a gap in the provision for adolescent-to-parent violence¹ (APV) in South Wales. There is no universally agreed definition of APV. It can present in several forms, including physical violence, verbal aggression, stealing or emotional blackmail and can also affect different family members, often including siblings and extended family. Funding for the development and implementation of the programme was provided by the Esmée Fairbairn Foundation (MAC, 2015). Since 2019, the development of Parallel Lives has been funded by the Violence Prevention Unit for Wales. Parallel Lives is a 7-week intervention programme for families where children/young people² are violent and/or abusive in the home. Parallel Lives aims to provide holistic one-to-one support to children and parents to reduce APV. The programme utilises people-centred and strength-based approaches to support families (MAC, 2021b). The Parallel Lives programme's objective is to create positive family dynamics to reduce APV by focusing on improving communication and empathy within the family (MAC, 2021b). Figure 1 provides an overview of key components of the Parallel Lives programme.

¹ Adolescent-to-parent violence (APV) is also frequently referred to as adolescent family violence, adolescent violence in the home, child-to-parent violence/abuse, and parent abuse. This report uses APV as it is the most commonly used term in the UK.

² The term children and young people are used interchangeably throughout the report. In accordance with the UNCRC (1989) the terms child(ren)/young people refer to a person aged 18 and under.

Figure 1. An Overview of the Parallel Lives Programme



Dr Gemma Morgan (Senior Lecturer in Criminology, Swansea University) and Mr Joseph Janes (Lecturer in Criminology, Swansea University) undertook the process evaluation of the Parallel Lives programme. Gemma and Joe have extensive experience in working with the third sector and statutory agencies towards the development and implementation of new knowledge and evidence-based practices. The evaluation took place between May 2021 and November 2022 and complied with Covid regulations of the time. The evaluation focused on the design and delivery of the programme from the perspective of programme staff and the families who had completed Parallel Lives.

2. Contextualising APV and the need for non-punitive interventions

APV has historically been hidden; only in the last decade it has begun to receive more attention from academics, practitioners and policymakers (Bonnick, 2019; Condry & Miles, 2014; Condry and Miles, 2022; Holt, 2011; Home Office, 2015; Miles & Condry, 2015; SafeLives, 2017; Fitz-Gibbon, Douglas and Maher, 2021; Condry and Miles, 2022). Additionally, there is no universally agreed definition of APV. APV falls under the cross-governmental definition of domestic violence, the criminal offence of coercive control, and is included in the definition of domestic violence in the 2021 Domestic Abuse Act. Condry and Miles (2022:14) define APV as ‘physical assaults, threats of violence and criminal damage from an adolescent aged 13 to 19 years

towards a parent/step-parent'. However, APV can also affect the wider family. The Domestic Abuse Act 2021 also defines abuse in the context of physical or sexual abuse; violent or threatening behaviour, controlling or coercive behaviour, economic abuse; psychological, emotional or other abused perpetrated by those aged 16 and above. Although APV is legally defined as Domestic Violence and Abuse, APV carries a distinct set of complexities that require a different response to domestic violence and abuse involving intimate partners (Condry and Miles, 2014; 2022; Miles and Condry, 2015).

Due to APV falling within Government definitions of domestic violence, this presents issues as it categorises children over the age of 16 as perpetrators of domestic violence and therefore labels them as 'abusers'. Punitive and stigmatising approaches to preventing APV are not effective, and this approach is at odds with rights-based approaches underpinned by 'children first, offender second (CFOS)' principles that resonate throughout Wales and within MAC (Holt, 2011, Case & Haines, 2015; Drakeford, 2009). Further issues arise when responding to APV as there are difficulties in striking a balance between supporting and safeguarding parents as victims of sometimes severe abuse/violence and recognising the need to safeguard children and their vulnerabilities (Condry & Miles, 2022). Research has highlighted parents feel their parental rights are being subsumed by the children's rights discourse (Sanders, 2020). It has been suggested that this is exacerbated by government policy framing the parent-child relationship in adversarial terms (Holt, 2011). This has often left parents reluctant to disclose or report violence from their children, fearing their parenting skills may be questioned or they will be disbelieved (Sanders, 2020). Research has demonstrated that rather than receiving a responsive service, parents felt that professionals framed the difficulties as poor parenting (Selwyn and Meakings, 2016). This has contributed to parents being depicted as 'deserving victims', attracting less sympathy and support in comparison to others who experience family abuse (Holt, 2011). Due to APV being a significantly under-researched form of violence, there have been limited policy and practice responses to support young people and parents holistically and responsively (Condry and Miles, 2020; 2022; Simmons et al., 2018).

Reflecting on research from Condry & Miles (2014; 2022), there is a need for responses/support for APV to understand the complexities of family history, dimensions of blame and culpability, shame, and guilt, as well as an understanding of how violence is enacted through particular adolescent-specific dynamics of power and control. Conflict resolution and families working together to rebuild relationships are integral to this process. Therapeutic approaches in the context of family violence have identified the central role those primary caregivers play in supporting children and young people in their journey to stop their violent/abusive behaviour (Fairchild & Sheridan, 2018; Condry and Miles, 2022). Indeed, it has been recognised that punitive

criminal justice responses are ineffective in addressing APV and have often failed to support families (Goodmark, 2018). An emerging body of work highlights the complexity faced by families who experience this type of family violence (see Campbell et al., 2020; Douglas & Walsh, 2018). These complexities include higher rates of disability, mental health and substance abuse issues, and pre-existing exposure to family violence (Fitz-Gibbon, Douglas & Maher, 2021; Kennair & Mellor, 2007). As such, responses need to be tailored to the needs of the family in a therapeutic/supportive environment. The family (in its various forms) should be an effective response to prevent APV. Both the parent's and the child's voices and experiences must be heard (Condry and Miles, 2022).

Children who use violence against their parents in the home have been largely absent from research and policy discussions within the UK – children's voices must be also heard. Within the Welsh context, this is particularly important as there is a commitment to deliver justice and support in compliance with the UNCRC (1989). Article 12 of the UNCRC is of particular in terms of ensuring the right of every child to freely express her or his views, in all matters affecting her or him, and the subsequent right for those views to be given due weight, according to the child's age and maturity (UNCRC, 1989). Viewing and responding to the young person as a child and not a perpetrator/offender is crucial in providing appropriate and responsive therapeutic support to prevent future violence. Research suggests that many young people who use violence in the home may also have experienced family violence and/or witnessed intimate partner violence (Howard, 2015; Simmons et al., 2018). These adverse experiences, along with the developmental age of the child, may mean that they do not have the capacity to understand their behaviour, and they are likely to rely on their parent(s) for support. As such, criminal justice responses that emphasise perpetrator responsibility and accountability in a way that stigmatises young people as violent offenders are less likely to be effective (Douglas & Walsh, 2018; Miles & Condry, 2016; Thomas et al., 2019). There is a consensus that specialist responses are needed, with a particular focus on maintaining and improving the relationships between the child and their parent(s) (Douglas & Walsh, 2018; Miles & Condry, 2016; Thomas et al., 2019; Haw, 2010). Punitive interventions delivered by the criminal justice system or interventions that seek to replicate responses to intimate partner violence are seen as less effective (Douglas & Walsh, 2018; Miles & Condry, 2016; Thomas et al., 2019). However, there has been limited attention paid to appropriate responses/support for APV in the UK. Responsive interventions that consider the age, development stage of the child, the type of violence, and how the violence is responded to are essential. Conflict resolution and families working together to rebuild relationships are also integral to preventing APV (Fairchild & Sheridan, 2018; Condry and Miles, 2022).

Considering the extant literature, the Parallel Lives programme can fill a gap in current provisions to support families experiencing APV. The evaluation provides valuable

insight into how a programme that focuses on improving family relationships by emphasising communication, empathy, collaborative working, and strengths-based approaches can help to reduce APV. Findings can be used to inform wider practice and policy developments to address APV and share good practices.

3. Aims of the Evaluation

The key aims of the evaluation were to examine:

1. The implementation and delivery of the programme to highlight areas of good practice and potential areas for improvement
2. MAC's practitioners' experience in delivering the programme to identify key strengths and potential areas for improvement
3. Young people's experience of participating in the programme to identify key strengths and potential areas for improvement
4. Parent's experience of participating in the programme to identify key strengths and potential areas for improvement
5. The organisational ethos of MAC in the context of delivering child-appropriate interventions coherent with 'Children First, Offender Second' principles
6. The impact of Covid on the delivery of the programme and how this can be used to inform service delivery

4. Methodology

To understand how the programme has been delivered by practitioners and received by parents and young people, several methods were utilised to gain in-depth and holistic insight. The evaluation took place from May 2021 to November 2022, and data collection complied with Covid regulations of the time. Feedback on the programme was collected from 42 people. A total of 24 people participated in the process evaluation (6 members of staff, 9 parents & 9 young people). Additionally, feedback collected by MAC from 18 people (10 parents and 8 young people) was also used.

Semi-structured Interviews

Semi-structured interviews were used for their ability to gain rich qualitative data. MAC practitioners who were involved in the development and delivery of the programme were interviewed (n=6). The evaluation took place during a global pandemic. As such, the interviews were conducted via Zoom in line with Government regulations at the time. The parents who had completed the parallel lives programme were also interviewed (n=7). The interviews were conducted in person due to the easing of Covid restrictions. The face-to-face element helped the evaluators to build rapport and trust to elicit open responses. Online interviews may have hindered the evaluators' ability to build rapport and pick up on social cues that have helped to elicit information. Interviews were also conducted with 2 young people.

Questionnaires

An online questionnaire was sent to parents who completed the programme. The questionnaire comprised open and closed questions that focused on the parents' experience of the programme and how it had impacted them and their relationship with their child and wider family. 1 parent responded to the survey. An online questionnaire was also sent to the young people who completed the programme. A total of 5 young people responded. The questionnaire also focused on the young people's experience of the programme and how it had impacted them and their relationship with their parent(s) and wider family.

Observations

The evaluators also observed sessions of the Parallel Lives programmes online and in person. The observations provided insight into how the programme was delivered and how staff interacted with the parents and young people to create safe spaces for the families.

File Reviews

The following documents were reviewed to gather additional data about the programme and service delivery:

- All Parallel Lives capitals
- Feedback forms from parents
- Feedback forms from young people
- Quarterly reports/case notes/summaries of the family's experience

The evaluation also reviewed feedback documented by MAC from 10 parents and 8 young people. A relatively small number of parents and young people participated in the evaluation, and therefore, the results cannot be generalised. However, they provide valuable insight into the Parallel Lives programme.

Ethical Considerations

The evaluation was approved by Swansea University's Research Ethics Sub-Committee for the Department of Criminology, Sociology and Social Policy. The evaluation was conducted in accordance with the British Society of Criminology Code of Ethics (2015) and Swansea University's Research Ethics and Governance; it abided by the highest ethical standards. Informed consent was gained from all participants, and participation was voluntary. All participants were informed of their right to withdraw from the evaluation at any point, without penalty - none of the participants withdrew.

5. Findings

The following section of the report details the findings from the data collected. It focuses on highlighting areas of good practice and areas for improvement. It presents the programme staff's, parents' and children's experience of the programme and draws out key themes related to programme design and programme delivery. The programme staff's, parents' and children's views are quoted verbatim throughout the results to illustrate important strengths of the programme and areas for development.

5.1. Programme Design

There is a clear need for the Parallel Lives programme as it fills a gap in provisions for families experiencing APV. In 2022 MAC participated in a TV programme for BBC Wales which focused on the Parallel Lives programme and APV. Since the programme aired, MAC and the Violence Prevention Unit had 76% rise in applications for the Parallel Lives programme from across England and Wales. As previously highlighted, there have been limited responses to support families to prevent APV and improve family relationships. The requests to participate in the programme indicate a lack of awareness about this area of work and further highlight how widespread APV is, along with the need to support families to resolve violence in the family. Parallel Lives provides a holistic approach to support both young people and parents to foster positive family dynamics and communication. The Parallel Lives programme would be a valuable resource for other services that work with families experiencing APV.

Coherently Designed Programme

The design of Parallel Lives was informed by an extensive literature review of evidence-based practices for understanding and responding to violent behaviour and APV. The evaluation revealed that Parallel Lives is well-designed and underpinned by effective evidence-based practices. A key strength of Parallel Lives pertains to it being underpinned by cognitive-behavioural approaches. Several studies reveal that cognitive-behavioural approaches are the most effective mode of intervention to change behaviour and problematic behaviours (Adler et al., 2016; Lipsey, 2009; Bonta and Andrews, 2017; Redondo et al., 1999, Koehler et al., 2013). The Parallel Lives programme focuses on increasing young people's emotional literacy, communication skills, empathy and ability to identify and manage anger to develop coping skills and problem-solving techniques to avoid APV. These represent effective practices that are linked with reductions in problematic behaviour (Gendreau et al., 2010; Bonta and Andrews, 2017; Dowden and Andrews, 2004). The programme also focuses on providing parents with effective strategies to prevent APV that focus on improving communication, relationships, and dynamics within the family, as well as parenting techniques. Parallel Lives has also been designed to consider the individual characteristics and needs of young people. The Parallel Lives programme draws on the Adverse Childhood Experiences (ACEs) research and recognises the vulnerabilities of young people (see Bellis et al., 2015). Parallel Lives is designed to

recognise and respond to barriers to engagement to ensure that the programme is accessible to most young people. Parallel Lives' key focus is on improving the communication and relationships between young people and their parents, which is a crucial factor in reducing and preventing APV (Douglas & Walsh, 2018; Miles & Condry, 2016; Thomas et al., 2019; Haw, 2010).

Well-designed and detailed manuals accompany the Parallel Lives programme. The manual outlines the theory/approaches underpinning Parallel Lives and the curriculum for each session, with clear steps for delivery. Each session has its own theme, which focuses on developing the parents' and young peoples' human capital (e.g. communication, problem solving and empathy). The manual essentially helps to ensure that the programme is delivered with integrity (Gendreau et al., 2004). Additionally, Parallel Lives is flexible in terms of its delivery. The aim is for the families to engage with the entire programme, but the structure also allows for each session to be delivered individually. The programme can be delivered to small groups of families or to individual families. The delivery of the Parallel Lives programme in a group setting can help to provide mutual support for the parents and young people and help to increase engagement by learning together.

Programme Duration

There were mixed responses regarding the length of the programme. Some parents and children felt that the current length of the programme was enough. However, other parents and young people stated that they would like more sessions. This is a testament to the programme providing valuable support to families. For example, one young person commented:

I would have liked more time here (Male, aged 12).

Depending on the complexity of APV, additional sessions would be useful for some families. Although this would be resource-dependent. Families welcomed the idea of having informal drop-ins or some follow-up sessions.

Adaptions to Accommodate Neurodiversity & Developmental Age

One area for further development to consider is whether aspects of the programme and/or delivery need to be adapted for young people who are neurodiverse and/or to reflect their developmental stage. One practitioner noted:

Perhaps the programme needs adapting to different people's kind of abilities and needs...I think when we looked at all the young people who were involved in Parallel Lives, there was quite a high percentage of young people who were diagnosed or going through a diagnosis of ASD or ADHD as well, so it's quite a lot (Practitioner 1).

Another practitioner commented:

Maybe we should have a different manual for younger children, it is important you know because some children will have additional learning needs and you know you do need to adapt practises so they can understand it they can find it more accessible for them to be able to engage, otherwise they're just not going to know what you're talking about (Practitioner 2).

It was excellent to see that during the course of the evaluation, this work had been undertaken by staff and the programme has been adapted to meet the needs of a range of your people. This further demonstrates MAC's adaptability and commitment to delivering support that is accessible to young people. Staff would welcome some additional training on how to effectively work with young people who are neurodiverse:

I think we would all benefit from having some ASD training (Practitioner 3)

Whilst staff demonstrated excellent relationship skills to engage with a range of young people and parents, additional training on how to support young people who are neurodiverse may help to develop staff's efficacy and confidence further.

5.2 Programme Delivery

The following section outlines key strengths of the delivery of the Parallel Lives programme, as well as areas for development. It focuses on organisation station, staff, management, and quality assurance factors.

Impact of COVID and adaptability

MAC should be commended for its commitment and ability to adapt and support families during the pandemic. Whilst there are no existing figures on the prevalence of APV during the pandemic, other forms of domestic violence/abuse have increased considerably. The Office for National Statistics (ONS) reports that in mid-May 2020, there was a 12% increase in the number of domestic abuse cases referred to victim support. Between April and June 2020, there was a 65% increase in calls to the National Domestic Abuse Helpline, when compared to the first three months of that year. Between April and June 2020, there was an 8.1% increase in abuse from current partners, and a 17.1% increase from family members (Ivandic et al., 2021). The pandemic has heightened people's vulnerability to violence in the home, and during a challenging time, MAC was able to provide valuable support to parents and young people. MAC quickly adapted the programme for online/remote delivery to ensure

there were provisions for families who needed the support. Since a TV programme aired on MAC's PL programme, they have had a significant rise in applications for the programme from across England and Wales. This further highlights the lack of awareness and understanding of the prevalence of APV, and more importantly the need for the PL programme. At a time when other support services were closed on limited, this was undoubtedly invaluable. MAC was responsive to the family's needs and preferences and was able to deliver support via Zoom or telephone. As one practitioner commented:

We've been quite innovative in delivering the stuff and changing the programme online. Yeah, we've tried, and I think we are being flexible to support families (Practitioner, 4).

Online delivery was not without its challenges. All practitioners stated that their preference was to deliver Parallel Lives in person as opposed to online. All practitioners recognised the importance of developing positive working relationships with the families and felt that in-person sessions helped to facilitate this more:

Conversations are easier face to face, and you can pick up more on body language and tone and the parents are more expressive face to face, and they will share more. Yeah, I think you do miss a bit from video calls, but you know, even though we are losing a bit from the video calls, it is still better than nothing (Practitioner, 5).

Another practitioner stated:

The main challenge of delivering the programme during COVID it's very difficult online because some families are like, 'yeah, put me on zoom lovely', and they are used to using it for work, and some people want you to call them instead, and it's really hard then coz interactive work you know, should be face to face and you're doing it over the phone you know it's really difficult (Practitioner, 2).

The face-to-face element of the programme is crucial to fostering relationships and open dialogue. However, post-pandemic MAC should use their professional judgement to decide when some sessions could be delivered online. For some families, regular in-person sessions may be difficult to attend. The online/remote delivery ensures that families are still able to access support. For example, one parent commented:

I have definitely found the Zoom sessions useful. My son currently doesn't attend school, and I wouldn't be able to attend sessions in person (Mother of a male aged 12).

Other families who were able to participate in the programme in person valued the face-to-face support and viewed online sessions being a potential barrier to engagement/participation. For example, one parent stated:

I really struggle with online stuff, so I don't think I would have been able to engage. I don't think I would have participated as I have (Mother of a male aged 14)

Another parent stated:

I think if it was like online stuff, it would have been harder to engage with. I wouldn't have wanted to; I wouldn't have enjoyed that; you miss the intimacy of the setting (Mother of male aged 14).

There is value in both the online and in-person delivery of the programme. As noted, taking the programme online/remotely during the pandemic was invaluable to families. Post-pandemic in-person sessions are the preferred mode of delivery for the families and staff as it enables the staff/families to engage more effectively. If feasible, MAC could consider loaning families suitable equipment to reduce barriers to participation online. Additionally, some support/help for families to improve their digital literacy skills would also help to improve people's confidence and ability to engage and participate in an online space.

Group Delivery of the Programme

The Parallel Lives programme was originally intended to be delivered as a group programme with up to 6 families. However, the Covid pandemic prevented this. The programme was observed online and in-person and with individual families as well as smaller groups of families. The programme worked well, being delivered individually and in groups. The group element provided extremely valuable peer support for the parents:

It has been so nice to be with other people who have the same issues; I felt so alone before all this. The setting is nice; it is very calm and laid back. (Father of female aged 13)

Another parent stated:

We felt so isolated and alone, like, are we, bad parents, knowing other people are having these same issues has been so reassuring. Yeah, I like the setting; it's chilled. (Mother of male aged 12)

Additionally, reflections from observations between staff and families showed a sense of relief in receiving help and support, optimism in changing behaviour, as well as a

sense of pride and progress when families were nearing the end of their journey. Many families reflected on how far they had come, the friendships they had created and their companionship with the other family involved:

We have built a great friendship for life here, our families and our children, we went to the cinema all together recently, and it was lovely; I hope we stay in touch. I see a future now with my son; there have been times when I have locked myself in a bathroom and did not know how I would ever get through this.... honestly is just nice to talk together, the kids are very different with their behaviours and triggers things like that, but we can give each other strategies and sometimes it just helps get it off your chest and yeah getting a little bit of help (Mother of male aged 12).

The environment of the programme was friendly, akin to a coffee room chat, with no hierarchy, and more facilitation of discussion, which did not require much prompting because the parents had established a relationship and were now considered friends; they remarked about often talking informally outside of sessions. Interestingly, because one family had made more progress than the other but was offering help and support/advice and reassuring the other family they had felt the same, they were welcoming of advice, that a support network had been established outside of the project. Peer support was also beneficial for the young people:

Yes, I actually look forward to coming here, and we have become good friends too (Male aged 12).

The flexibility of the programme allows it to be completed in a group setting and on an individual basis. This is important as some families may not be comfortable in the presence of others, and/or depending on the complexity of APV in the family as well as other individual factors, it may make it more appropriate for the programme to be delivered on a one-to-one basis. For some families, Covid prevented group delivery, and practitioners also reflected on how it would have benefited some parents:

Realistically I think she [parent] would be better in a group where she could find that it's not just her that has these issues as well (Practitioner 1).

MAC staff also have the professional discretion to make decisions about whether the programme is delivered to an individual family or in a group setting to ensure it is appropriate to the situation of the family. One key recommendation is to limit the group sessions to 2-3 families. Anything above this would make it difficult for the practitioner to manage the group dynamic, and it would limit the family's ability and time to discuss important issues in detail. Additionally, smaller groups will enable the practitioners to develop rapport with the families more easily to facilitate discussion to improve the family dynamic. The parents also identified that larger groups may prove problematic:

I think two families is probably the perfect number, really, isn't it, I would feel under more pressure with any more people listening to you and knowing intimate details about your life (Mother of a male aged 14).

Another parent stated:

I think two families are more than enough; any more makes it more pressured and could create factions (Mother of male aged 12).

Environment and CFOS Ethos of Delivery

The MAC practitioners should be commended for the safe and supportive environment they have created for parents and young people. The programme was delivered within a CFOS ethos that resonates throughout MAC as an organisation and its practitioners (see WG/YJB, 2014; Haines and Case, 2015). Additionally, MAC had created an environment that empowers parents. The programme facilitators had established an excellent rapport with the parents where difficult and emotive issues around violence were discussed in a non-judgemental and supportive manner. The practitioners treated families with respect and dignity. The ethos of delivery focused on creating a friendly, holistic environment where deep, interpersonal discussions could be had without judgement or any stigma. The environment was very relaxed and open when observing the first interaction between parents and the programme facilitator. Although this was the first time both parents were meeting, as well as the researcher was present, there was no hierarchy, everyone was welcoming, and people chatted about their day; it was a relaxed environment. All of the parents commented on the relaxed and non-judgemental environment that had been created:

The setting is nice; it is very calm and laid back (Mother of a male aged 12)

The environment created for the young people was also very relaxed. The young people were able to play games whilst participating in the programme, which helped to put them at ease. Additionally, a central focus point of the sessions is focusing on people's strengths. For example, one activity centred around what their superpowers are (what they like about themselves). The environment enabled the young people to reflect on their actions and reasons for being involved in this project, with a focus on learning to change within a safe space. The young people commented on the relaxed and supportive environment:

I like doing things here and talking as you get to play with things at the same time; it is not as serious as a classroom. I can get up and go as I please, which is good for me and my head (Male aged 14).

The comment from the young people highlights how relaxed the setting of the programme is, and it provides the families with a safe space to work through the issues they are facing. These key themes around relationships, strength-based approaches and de-stigmatisation are discussed in more detail in the following sections.

Creating Safe and Non-Judgemental Spaces

The Parallel Lives' programme and MAC's staff's emphasis on building positive relationships have created a safe and non-judgmental space for families to discuss their issues and identify solution-focused ways to address these. Again, the programme staff and management should be commended for creating a warm and supportive environment for the young people and parents. Practitioners were very aware of the stigma associated with AVP, and they have created an environment that de-stigmatises this form of violence to allow families to work within a strengths-based approach to find tangible ways to prevent AVP. As one practitioner noted:

There's a lot of like guilt and shame attached to it [APV], and also, they [parents] don't feel like they can talk about it. So 'I must be the only parent whose kid kicks off and breaks my window'. I think it is a lot for them to say okay, so this is a thing, and those steps that we can do and also give them strategy (Practitioner 4).

Another practitioner noted the importance of creating safe and non-judgemental spaces to enable people to discuss their issues to move forward:

We try to create a safe space where people can kind of offload, discuss and work on trying to make things better in the family (Practitioner 3).

Parents commented on how the programme and staff enabled them to talk about their emotions without judgement and how this had helped to improve the family relationship and communication. For example, one parent stated:

Talking about raw emotions with people who do not judge you, they do not gasp, they don't laugh or tut, they feel what you feel, and they want to help; it's a safe environment, I struggle to talk about my feelings, and this has helped me open up (Father of 12-year-old male).

Additionally, another parent stated:

At first, I didn't want to attend the workshop because I was worried about being judged. On the first session, we were made to feel comfortable and really started to enjoy attending the sessions. It was good to meet another family. We've learnt different strategies and ways of thinking to manage the behaviour at home, and it's a little bit better. We started the course feeling like there was no hope, but now we feel confident and can see the light at the end (Father of a 16-year-old Male).

Another parent commented how beneficial it was to be with others in similar situations and to be supported by the MAC staff:

Sitting here, just being with people who care and don't judge you (Mother of a male aged 14).

All the parents commented on feeling relaxed and supported by MAC staff:

We like the atmosphere here; we felt welcome straight away; we were both scared about this process and what we would come up against, but it has been so refreshing and laid back; the setting works, and we are so glad it wasn't in a police station or something (Mother of male aged 12).

The quote above also highlights the importance of ensuring that APV support takes place in holistic settings as opposed to those perceived as being punitive such as a police station. A key strength is that the Parallel Lives programme is delivered in a therapeutic setting by practitioners who emphasise support and not punishment.

Relationship Focused Delivery

An integral aspect of creating safe spaces for the parents and young people are the programme facilitators' ability to engage with the families and build positive working relationships. Additionally, central to the Parallel Lives programme is the development of positive relationships in the family and the programme facilitators model excellent behaviours to encourage this. In summary, the Parallel Lives facilitators displayed excellent relationships. Several studies reveal that the practitioner/service user relationship is integral to enhancing engagement, and motivation and reducing re-offending (see Bonta and Andrews, 2017; Burnett and McNeill, 2005; Creaney, 2014; Dowden and Andrews, 2004; Haines and Case, 2015; Johns et al., 2017; McNeill, 2006a; McNeill and Batchelor, 2002; McNeill et al., 2012; Raynor et al., 2014; Trotter, 2013a; 2013b; 2015; Williams et al., 2018). Relationship skills pertain to practitioners to be 'warm, genuine, humorous, enthusiastic, self-confident, empathic, respectful, flexible, committed to helping the client, engaging, mature, or intelligent' (Dowden and Andrews, 2004: 208). The use of relationship skills also requires communication to be 'directive, solution-focused, structured, non-blaming, or contingency-based (Dowden

and Andrews, 2004: 208-209). Overall, the staff displayed a wide range of these skills and were effective in their engagement with the parents and young people and regularly praised, encouraged and supported them.

All of the practitioners discussed the importance of developing collaborative and supportive relationships with young people and parents. When discussing the challenges of engaging young people, one practitioner emphasised the importance of building relationships within a CFOS ethos. For example, one practitioner stated:

We've built up a good relationship [with a young person] where she does want to work with me, and she does want to come in because I think there is that safe space made and non-judgement around her (seen as a child, not a problem). Because I think you know for that young female, she is used to social workers you know asking her directly why is she hitting mum.... Whereas our space is really safe and non-judgmental, and it goes at her pace, as well treating as a child and not as a subject and not as the perpetrator, you know, understanding that there's something going on for her, you know no child I haven't met a young person yet to wants to be in this situation and wants to be abusive towards their parent (Practitioner 5).

When supporting families experiencing APV, it is important not to label or target the young person who is violent or abusive and separate the behaviour from the person. MAC very much took this approach and delivered the programme within a CFOS ethos. The emphasis on CFOS approaches to engage with young people whilst also empowering parents should be commended. Both the parents and young people praised the staff for how they were treated. For example:

[MAC staff treated me] With friendliness, respect and kindness (Mother of a 12-year-old male).

Another parent commented:

The staff are amazing (Mother of female aged 16).

Additionally, another mother stated:

Amazing all of the staff have been so kind and thoughtful and actually listen not just read from a book but fully interact. You've all [staff] been amazing, Thank you!! (Mother of a male aged 9).

The focus on relationship building is a key strength of the programme. Research that has examined APV concurs that specialist responses are needed, with a particular focus on maintaining and improving the relationships between the parent(s) and their child(ren) (Douglas & Walsh, 2018; Miles & Condry, 2016; Thomas et al., 2019; Haw, 2010).

Continuity of Support

One area of consideration is continuity of support. Some families reported that they had different facilitators throughout the programme and would have preferred to have had the same person for the duration. One parent stated:

[It would have been beneficial to] Stick with just one support worker; we had a few different ones throughout the process. All were brill, but just that one face would have been better (Father of male aged 13).

Additionally, another parent communicated:

I would have preferred just one person, so we were always on the same page and didn't have to go over anything again; the staff are amazing, but just having one person from the start would be more comfortable. I think that is true for my son, too; he has autism and doesn't really understand the changes; it takes him a long time to warm up to a person, so we need that continuity (Father of male aged 14).

It is important to emphasise that despite the staff changes, all of the parents commented on how supportive all the staff were, which is again a testament to the relationship skills of the programme facilitators and the holistic environment that MAC has created. The staff changes can be attributed mainly to staff turnover during the evaluation, which has affected MAC's ability to provide continuity in programme facilitation. Once the staff recruitment stabilises, it would be beneficial to ensure that families have the same member of staff delivering Parallel Lives for the duration of the programme.

Improving relationships, communication & behaviour in the context of strength-based approaches

A key strength of the Parallel Lives programme is that it is solution-focused and aims to improve the relationships between young people and their parents. Practitioners emphasised the importance of utilising strength-based approaches to repair and/or improve the relationships in the family. To illustrate this, one practitioner stated:

From my perspective and a MAC perspective in terms of parallel lives, we work with both the parents and the young person, but in terms of the other aspects of my role, it is very much based on the thoughts, wishes and feelings of the young person and supporting them to find their strengths and to look at what changes they want to make (Practitioner 6).

Another practitioner stated:

We focus on strengths. It's in our MAC DNA - everything that we do is focused on young people's strengths (Practitioner 4).

The strengths-based approach is emphasised further by the following quote:

We are focused on the family's strengths, not on the weaknesses (Practitioner 5).

There is increasing recognition of the importance of positive and strengths-based approaches that focus on developing the skills, capabilities and quality of life of people to support change (Ward and Stewart, 2003; Ward and Fortune, 2013; Ward, 2010; Ward and Maruna, 2007; Ward et al., 2012). It was also pleasing to see that the young people also identified how the programme and staff focus on their strengths. For example:

[Parallel Lives has helped me to] learn to deal with anger and about my strengths (Male, aged 16)

The strengths-based approaches used by MAC have enabled parents to feel more confident in their approach to parenting and APV. All of the parents discussed several benefits of the Parallel Lives programme. For example:

[Parallel Lives has] given [me] new techniques and drastically increased my confidence. [It] Has also given reassurance that techniques I was already using are good practices. Feeling reassured, gaining new techniques and reiterating techniques already being used... Having a consistent point of reference and being listened to and validated... Being complimented and feeling stronger as a result...The course has been incredibly helpful, and [staff member] was a genuinely lovely person. I feel more able to help my son and my family, and I feel supported (Mother of a 12-year-old male).

Improving Family Relationships

All of the parents stated that Parallel Lives had helped them to develop strategies to reduce APV and improve communication with their children. For example:

[Parallel Lives has] Improved de-escalation techniques (Male aged 15).

Additionally, another parent highlighted how the programme had helped to de-escalate situations in the home:

We talk more now about his behaviour, and I think it's because I don't take things personally and don't explode like I used to (Mother of a male aged 13). All of the parents stated that their relationships had improved as a result of the Parallel Lives programme. Some comments from the parents include:

[Because of Parallel Lives, there is] Less conflict at home, and our listening and communication have improved (Mother of male aged 15).

Another parent noted how the programme had helped to improve their child's behaviour and the family relationship:

He is like a totally different person. He's talking to us and spending time with us (Father of a male aged 15).

Additionally, one parent commented:

It's helped me learn to identify triggers and how to help support my son and has improved our relationship...I have used the skills I have learnt through the programme across the board with my other two children. And it has improved our relationships too (Mother of a male aged 9).

From the parents' perspective, there have been significant benefits from their participation in the programme, which has helped to improve their relationship with the child and reduce violence/abuse in the home.

The young people also identified several ways the programme benefited them. All of the young people stated that Parallel Lives had improved their relationships with their parents. For example:

[Parallel Lives helped to] control my anger and helped with my relationship with my parents and family (Male aged 11).

Another young person stated:

[Because of Parallel Lives] My mum is listening to me more. She used to always just talk at me and have a go at me without listening to my side of things. It's so much better now (Female aged 14).

Additionally, another young person stated how Parallel Lives had improved their home life and relationship with their mother:

Things are better at home; Mum is not on me so much. She's been coming to watch me play football, and I've been trying to be nice to her (Male aged 13).

It is evident from the evaluation that Parallel Lives provides parents and young people with a safe and non-judgmental space to discuss issues within their family to identify practical ways to resolve these. The emphasis on developing/improving relationships, empathy, and communication in the family is a key strength of the programme, which has a range of significant benefits for the parents, young people and family unit. As one practitioner commented:

[Parallel Lives gives families] a better understanding of their situation and their emotions, a better understanding of looking for coping strategies, a better understanding of themselves and their parent and an opportunity to step back and see their parent as a person and not necessarily as the enemy (Practitioner, 6).

Reducing Anger

All of the young people stated that Parallel Lives had helped them with anger issues associated with violent behaviour towards their parent(s). For example:

I was angry all the time, but now I feel better; I don't get so angry (Female aged 12).

Another young person stated:

[Parallel Lives] Has helped me by controlling my emotions and anger as well as our [family] problems (Male aged 16)

Young people commented on how the programme enabled them to identify triggers to their behaviour and techniques to prevent them from becoming angry/violent. One young person stated:

[Parallel Lives] it has allowed me to visualise things better and know when I am going to get angry and made me think about what happens if I do hit someone, the results of my actions (Male aged 14).

Another young person also stated:

I know when I am getting angry, and I try to deal with it better now... it has helped me think more and try to have a better relationship with my mum (Male aged 14).

As highlighted, the Parallel lives programme has benefitted young people in several ways. Based on their experience of the Parallel Lives programme, all of the young people and parents stated that they would recommend it to others.

Monitoring and Quality Assurance of the Programme

MAC should be commended for maintaining excellent quality assurance practices and support for staff during the Covid pandemic. The programme facilitators were effectively supported by MAC's Criminal Justice Services Manager and Director. There appeared to be good lines of communication between management and front-line practitioners and good levels of organisational harmony. Practitioners are also provided valuable clinical supervision and counselling support if required. Practitioners regularly met to debrief and discuss how the session went and if any issues arose. Providing clinical supervision to staff and management being involved in front-line service delivery helps to ensure that the programme is delivered with integrity and increases the self-efficacy of staff (Gendreau et al., 2004; McGuire, 2004; Taxman and Belenko, 2011; Trotter, 2017). MAC also collects feedback from the parents and young people to ascertain whether they are satisfied with the quality of services they received. The feedback is also used to inform service delivery. This is one key way in which MAC effectively monitors the effectiveness of the Parallel Lives programme and adapts practice accordingly.

During the evaluation, there had been some staff turnover. With staff changes, it would be a good time to provide refreshment training to all facilitators to ensure that the programme is and will continue to be delivered as it is intended to be. For the integrity of the Parallel Lives programme to be maintained, it is important that the quality assurance mechanism previously discussed remain in place (e.g. clinical supervision, evaluation practices, ongoing training). When selecting new staff to deliver the programme, they must be chosen based on their ability to effectively employ relationship skills (e.g. warm, genuine, humorous, enthusiastic, self-confident, empathic, respectful, flexible, committed to helping the service user, engaging, mature, or intelligent, being an excellent role player, directive, solution-focused, structured, non-blaming, or contingency-based) and structuring skills (e.g. effective use of authority, problem-solving, cognitive restructuring, pro-social modelling) (see

generally, Dowden and Andrews, 2004; Raynor et al., 2014; Ugwudike and Morgan, 2017). Staff who possess these skills are more likely to effectively engage with young people and help to change their behaviours (Bonta and Andrews, 2017; Raynor et al., 2014; Ugwudike and Morgan, 2017; 2018). To ensure that evidence-based practice skills are embedded in practice, practitioners could have the opportunity to conduct self-evaluations and, where possible, peer evaluations. These evaluations should involve comparing practice skills with the skills that have been shown by a large body of research to help produce positive outcomes for children and young people. MAC could use the skills checklist contained in the Youth Justice Evaluation Inventory (YJEI) (Ugwudike et al., 2018) or the Jersey Supervision Checklist (Raynor et al., 2013) to assess new staff and conduct peer evaluations, which can help to maintain and enhance professional development, reflective practice, and quality assurance (Ugwudike et al., 2018).

6. Conclusion: Key strengths of the Parallel Lives Programme & Recommendations for Development

The Parallel Lives programme is a valuable resource which has the potential to support a significant number of families to reduce and prevent APV. However, the longevity of the programme is dependent on funding. Given the current climate, funding is often difficult to obtain for organisations working within this sector. We would encourage potential funders to fund the programme to ensure this resource is widely available to families across Wales. The evaluation revealed that there are several strengths in the design and implementation of the Parallel Lives programme. In summary, the key strengths of the design of Parallel Lives include:

- A well-designed programme and manual informed by evidence-based practices.
- A programme that is informed by strengths-based approaches and solution-focused strategies to prevent APV.
- An emphasis on building the empathy of parents and young people and providing effective strategies to prevent APV.
- An emphasis on improving/repairing the relationship and communication between the parents and young people.
- The adaptability of the programme for online and in-person delivery.

Other key strengths related to the delivery/implementation of the programme include:

- The programme is delivered within a CFOS ethos.

- Skilled staff who effectively employ relationship skills to engage and support the parents and children.
- Peer support for parents and children. The group sessions enable the parents and children to share their experiences and act as a support network for one another in a safe and supportive environment.
- The staff's ability to create a safe and non-judgmental space for families to find pragmatic solutions to issues/violence in the home.
- Effective quality assurance mechanisms such as clinical supervision and service user feedback.
- Organisational harmony, including effective staff/management communication.

Key recommendations from the evaluation include:

- Exploring how the programme can be expanded across other parts of Wales. Currently, the programme is available in a small area of South Wales. Given the benefits of the programme reported by the families, expanding the programme's reach would provide valuable support for families across Wales and England.
- Limiting the group sessions to a maximum of 3 families. This will ensure that the parents and young people feel more comfortable discussing their issues/experiences and provide a safe space for each other to find solutions to improve their relationships and reduce violence in the home.
- Ensuring continuity of support for the families – it would be beneficial if the families had the same member of staff for the duration of the programme.
- Providing refresher training to all staff on how to deliver the programme to ensure that the programme continues to be delivered as intended.

In summary, the evaluation revealed that the Parallel Lives programme had provided significant benefits to parents and young people. As noted, there are numerous aspects of the design and delivery of the programme that has been commended and highlighted as good practice. Ultimately, the Parallel Lives programme and MAC staff have provided families with an opportunity to find solutions to prevent APV in a way that empowers both the child and parent(s). MAC has created a safe and non-judgmental space for families to identify issues and work collaboratively to resolve these via strengths-based approaches. The staff should be commended on their commitment and ability to provide tailored and people-centred support to the families they work with. A key strength of the programme and MAC's approach is an emphasis on relationship and communication building. Parallel Lives is a shining example of good practice by taking a holistic approach to supporting families to prevent APV and improve family relationships.

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