

ANALYSING CHILD TO PARENT VIOLENCE (CPV)

María Silvia López Alonso

Universidad Católica de Valencia San Vicente Mártir
UCV
siloyal@mail.ucv.es

Fecha de Recepción: 27 Junio 2019

Fecha de Admisión: 25 Septiembre 2019

ABSTRACT

Violence has never been easy to define because of the common psychological and subjective connotations associated to it. In this sense, defining child to parent violence (CPV) presents many difficulties because it is bidirectional, it involves parents and minors, in a situation in which the bully is the minor and the victim is the parent or guardian. This study aims to provide an overview of CPV, obtaining the most accurate definition, listing profiles and variables, highlighting the importance of family intervention, and suggesting guidelines for early action and prevention.

Keywords: violence; family style; child-parent abuse; attachment

On 5th May 5, Cruz Morcillo¹, a journalist for the Spanish newspaper ABC, published a shocking article with the title 'More and more minors are sending their mother to hospital.' "Gloria Francisca, 53, was killed two weeks ago. Her body appeared in the garage of her house in Palma de Mallorca in a chest, wrapped in plastic. Her 16-year-old son, who lived with her, had disappeared. On Tuesday, he and his girlfriend of 17 were arrested by the Police in Belgium." The conclusions of the 2017 State Prosecutor's Report speak about the difficulty in finding indicators to provide an early short-term solution to this social problem, which is described as a common evil, a consequence of the lack of educational guidelines and parent-children roles in the family.

Morcillo interviews the most experienced police officer in Spain, who has worked with juvenile delinquents since 1990. He explains that child to parent violence is the crime that spiked most in recent times, and that in 2008, the proportion of abusive children was 2-3% compared to 15% in 2018. He also states that, unlike years ago, when crimes were a consequence of drug addiction, alcohol abuse, unstructured families and the lack of a father figure, now the cases come from any social level, "they are boys and girls who have everything, because they have not had limits set." It is the mother who suffers the violence, and when reported to the police, it is because control of the situation has been totally lost. Children are easier to rehabilitate at an early age. On the other hand,

ANALYSING CHILD TO PARENT VIOLENCE (CPV)

the cost is high because mothers arrive at the emergency hospital, the abusers being around 11 years old. The policeman completed his statement by saying that the solution at this age is to remove the aggressor from the usual environment and take him to a drop-in centre.

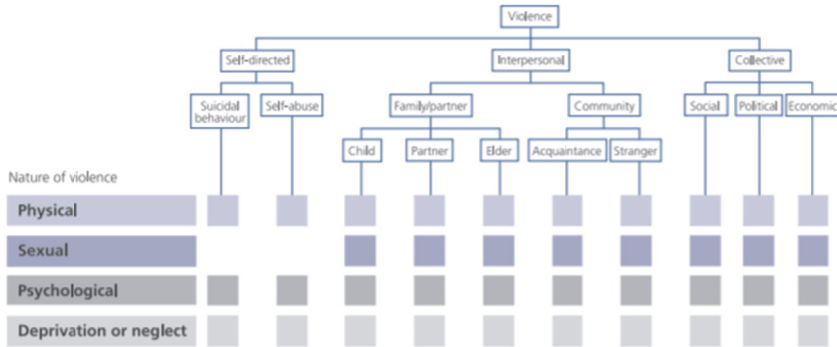
The article also includes the intervention of Judge Vázquez Taín, who states that the majority of victims do not file a report, in fact, it is the neighbours who warn of the abusive situation suffered by the mother. The judge added that these teenagers don't become abusers overnight, they begin to disobey when they are children. It starts with them questioning and arguing everything and, if no limits are set, the next step is the insults and violent behaviour. Household goods are smashed, followed by the pushing around and physical abuse that can lead to hospitalisation.

Experts say that this type of cases have not yet reached its peak because only one in every six cases are known. This means the prognosis is completely discouraging, and the probability of death behind closed doors is high (Morcillo, 2019).

Definition of violence

Violence is a familiar word for society, not without its difficulties for definition, precisely because of its ubiquity, its complexity and its variants. As can be seen in Figure 1, the WHO (2002) states that there are three types of violence with subtypes: "self-directed violence, interpersonal violence and collective violence" (WHO, 2002, p. 6).

Figure 1. Typology of violence (WHO, 2002, p. 7).



This suggests that violence is an imprecise fact as well as a complex one, that does not allow for an exact scientific definition, since it is also subject to subjective assessment. That is, the classification of behaviours being appropriate or not, or if they entail damages, is mediated by each culture and exposed to a continuous review parallel to the evolution of social norms and values (WHO, 2002, p. 5). That said, violence in general is defined by the WHO as,

The intentional use of physical force or power threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation (WHO, 2002, p. 5).

This is considered an appropriate definition because it integrates "interpersonal violence, suicidal behaviour and armed conflict." It goes beyond physical action because it includes provocations, threats, injuries and death. And it takes into account the numerous and disastrous consequences that do not manifest physically because they affect the moral integrity of the victim, such as psychological damage, and all those acts that deprive the individual, the family or the community of their development and well-being (WHO, 2002, p. 5).

Regarding family violence, the topic of this study, article 173.2 of the Spanish Criminal Code declares that this constitutes the mistreatment exercised between members of the same family unit, having one or more links between aggressor and victim, such as civil, biological, cohabitation, or dependence of emotional, economic or guardian nature. Cottrell & Monk (2004) define CPV as a set of repeated behaviours of physical aggression (blows, shoves, throwing objects), verbal (repeated insults, threats) or non-verbal (threatening gestures, breaking appreciated objects) aimed at parents or adults that take their place” (Bringas & Rodríguez, 2007; Cottrell & Monk, 2004; Navarro, 2017, p. 3; RAÍCES, org). Navarro explains that in CPV the roles are reversed, the aggressor (responsible for the minor) is the victim, and the victim, younger than 18 years old (children, adolescents and youth of normal appearance with an average age between 10 and 15) and who depends on the victim, is the aggressor (Garrido, 2008; Peligero, 2016). Just as with the rest of violent aggressions, CPV also seeks power and control in the family home (usually reduced to this environment), although the objectives pursued are different. Navarro states that CPV is also psychological aggression (disobedience, threats, insults or blackmail) and the removal of money or family belongings of high material or emotional value (Bringas & Rodríguez, 2007; Cottrell & Monk, 2004; Garrido, 2008; RAÍCES, org.). Actions that parents find tremendously difficult to accept. Pereira et al., state that psychological violence in adolescents aged 13-18 years has a prevalence of 93.8% compared to 8.9% of physical violence (Pereira et al., 2017). Aroca-Montolío et al., state that the most frequent type of CPV suffered by parents is 57% physical, 22% verbal aggression, 17% using a weapon (knife or firearm), and 5% objects and items thrown or destroyed (Aroca-Montolío et al., 2014).

To delimit the scope and severity of CPV, it is necessary to know articles 154-5 of the Spanish Civil Code that contain the obligations and responsibilities of parents and children. Article 154 says: “Parents can reasonably correct their children”; and article 155: “Children must obey their parents while they are under their authority and always respect them.” Given which, it is obvious that ignoring these laws in a violent way must constitute a serious offence. Martínez et al., (2015) state that CPV violence is considered as a subgroup within family violence, in which violent behaviours such as verbal, non-verbal threats and physical attacks originate from children to parents. Within this violent behaviour, we must consider subtypes of violence such as abuse; abuse towards parents whether physical, psychological or economical loss, with the objective of empowerment of the aggressor to have control over the parents within the family home (Martínez, et al, 2015). CPV is also called Emperor Syndrome (Garrido, 2008), Small Dictator (Aroca-Montolío et al., 2014; Pereira et al., 2017) or Peter Pan Syndrome (Naranjo, 2016, p. 8).

There is unanimity in the sources consulted when considering the difficulty generated to define the CPV accurately (Naranjo, 2016). In the study of a population of 880 adolescents between 13 and 19 years old, Calvete, Orue & González-Cabrera (2017) pose two dilemmas. On the one hand, the controversy to establish the limits between when the violent act is the result of the emotional instability of adolescence and when it is a violent act as such. And on the other hand, the difficulty in measuring the consistency of this kind of violence, since the statements of parents and children usually don't coincide. The authors suggest a double parent-child version for an adequate analysis. Table 1 shows these differences.

ANALYSING CHILD TO PARENT VIOLENCE (CPV)

Table 1. Standardized factorial loads of the four subscales of the Child to Parent Violence Questionnaire (Calvete et al., 2017). Translated by the Author.

Item	Adolescent statement		Parental statement	
	Against the mother	Against the father	Against the mother	Against the father
Psychological violence				
Shouting at father/mother when angry	.69	.67	.74	.75
Threatening to hit without actually doing it	.63	.58	.74	.75
Insulting or swearing	.82	.84	.85	.83
Blackmailing to get what they want	.65	.66	.62	.64
Taking money without permission	.41	.42	.44	.49
Doing something just to annoy	.69	.69	.77	.74
Disobeying the parent in a matter important to him/her	.60	.54	.71	.69
Physical violence				
Pushing or hitting during a fight	.81	.75	.72	.68
Hitting with something that could cause trauma	.42	.51	-	-
Kicking or punching	.46	.40	.54	.57

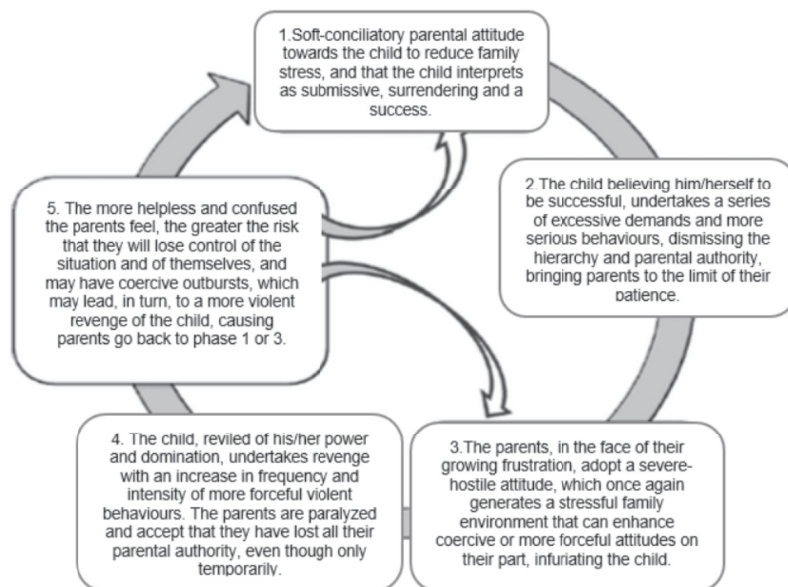
Pereira et al., suggest the following parameters to define CPV: 1) the periodicity of the attacks must be systematic; 2) the recipient of the attacks must be the parent or, if not, the for the main guardian of the minor; 3) violence must be, specifically psychological, physical and/or economical; 4) isolated aggressions are excluded, those caused by transient or stable psychological disorders, autism, severe mental deficiency, parricide or homicides without histories of prior violence; 5) CPV refers to both men and women; 6) age is not an exclusionary criterion since there may be cases in which the aggressor is 50 years old and is exercising CPV on his/her parents; 7) cases of CPV that do not demonstrate intentionality are excluded; 8) also excluded are cases in which aggressor and victim live under the same roof; 9) it is not relevant to specify whether the violence is reactive or instrumental (Pereira et al., 2017). This complex analysis of approximation to a precise definition of CPV offers the following result:

“Repeated behaviours of physical, psychological (verbal or non-verbal) or economic violence, aimed at parents and those taking their place. Punctual aggressions are excluded, those that occur in a state of diminished consciousness that disappear after recovery (intoxications, withdrawal syndromes, delusional states or hallucinations), those caused by psychological alterations (transient or stable) (autism or severe mental deficiency) and parricide without a history of previous aggressions” (Pereira et al., 2017).

The literature reviewed coincides in suggesting that the mother is the victim chosen by the children (Aroca-Montolío et al., 2014; Bringas & Rodríguez, 2007; Ulman & Straus, 2003). The data obtained on the prevalence of violence to ascendants do not yield conclusive figures because there are very different percentages (Aroca-Montolío et al., 2014). CPV correlates positively with negligent, permissive, overprotective family education styles, lacking authority, with lone parents. But not with authoritarian styles. Therefore, CPV could be linked to lax educational styles, lacking clear norms and authority (García & Cerezo, 2017; Naranjo, 2016.; RAÍCES, org.; Suárez, et al., 2019). This permissiveness is generally due to the lack of parental agreement and parents putting the relationship before the education of the children. Thus, when trying to be demanding, to apply norms or punishments, the inability of the aggressor to manage frustration generates a state of impotence that results in aggressive behaviours that escalate (Bringas & Rodríguez, 2007; García & Cerezo, 2017; Garrido, 2008; Peligero, 2016; RAÍCES, org.) from verbal offense to terror (Fig. 2). Parents feel helpless dealing with these borderline situations where the anger of the aggressor disables any type of truce or conciliation. This is a circular action-reaction situation where the best option is for the victim to surrender. At this point, the victim (the parents) acquires a soft attitude of submission

so that cohabitation in the family home is possible (Aroca-Montolío et al., 2014). This submission that means the highest humiliation of the parents only reinforces the tyranny of the aggressor.

Figure 2. Representation of the phases of the children-parent violence cycle (Aroca-Montolío et al., 2014).
Translated by the Author.



The Amigó Foundation report describes CPV using these words:

“The child to parent violence encompasses the set of repeated behaviours of physical, psychological (verbal or non-verbal) or economic violence, directed from children to their parents, or to those adults taking their place. Punctual aggressions and those that occur in a state of decreased consciousness that disappear after recovering (poisoning, withdrawal syndromes, delusional or hallucinatory states) are excluded. Violence by autistic persons or those with serious mental disease and parricide without a history of previous aggressions is also excluded (AMIGÓ, 2017, p. 4).

AMIGÓ states that every year in Spain more than 4000 CPV files are opened to young people, a figure that increases every year and only shows a very small part of a hard but invisible reality. Parents and family members do not dare to communicate the horror of their homes and even less to denounce their children. Nevertheless, between 2013 and 2015, 4898 complaints from parents to children were filed. A figure that is estimated to show only 10% to 15% of the total. Figures 2 and 3 show the total number of files open against minors (Fig. 3) and the increase in the number of files opened for CPV (Fig. 4) respectively. Table 3 shows the number of files in Spain by communities.

ANALYSING CHILD TO PARENT VIOLENCE (CPV)

Figure 3. Total number of files open against minors

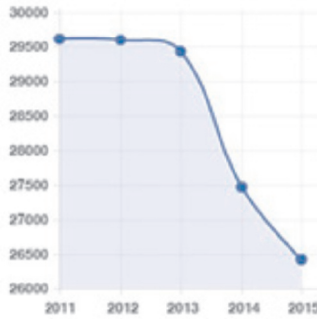
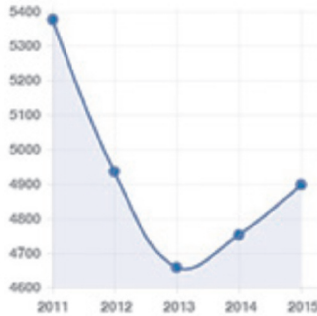


Figure 4. Number of files opened for CPV (AMIGÓ, 2017, p. 5).



PROFILES AND VARIABLES

Navarro explains that, although there is no clear profile of families suffering from CPV, some psychologists who deal with this type of cases declare that except in cases of some type of addiction, behavioural disorder, or mental pathology the CPV pattern indicates a lack of educational guidelines, an inadequate education due to permissive family styles and/or family conflicts favouring the inability of parents to enforce and maintain their authority as well as allowing them to be humiliated repeatedly by the abusive child. The fact that the number of such attacks has increased confirms this. In this sense, the first step to rebuild the child-parent relationship is that both assume their share of guilt and look in the same direction, which is none other than recovering and respecting the role that each one should play at home, according to articles 154 and 155 of the Civil Code. And that it is easier to achieve control when the child is 8 years old than when they've turned 15 (Navarro, 2017, p. 15).

Fundación Amigó provides estimates on the CPV variables.

Aggressors: children. From a very large sample of population, **gender** shows an equal distribution although clinical and judicial studies mark a higher prevalence of males. When it comes to **age**, the range being very wide, most experts agree that the highest prevalence is between 13 and 17 years. Regarding the **type of violence**, the researchers argue that the violence from girls tend to be psychological compared to that of the boys that tends to be physical force. As for the **schooling** of

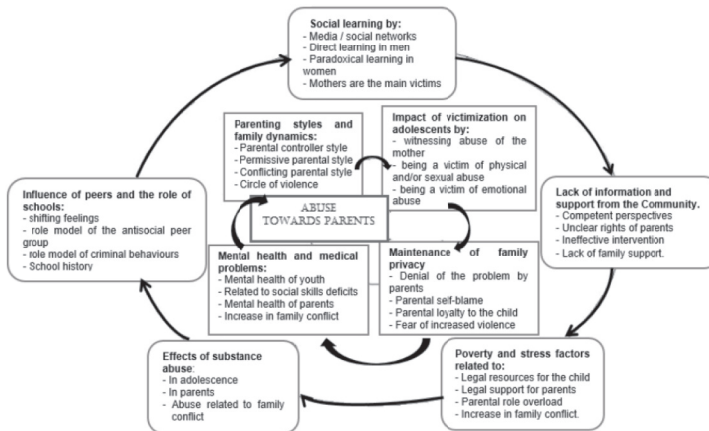
the aggressors many experts agree on an irregular or low performance, but higher than that of other offenders; they suffered aggressions from the family, school or social environment numerous times. In reference to the consumption of **psychoactive substances and addictions**, there is a consensus among professionals who verify the high correlation between CPV and the consumption of psychoactive substances. In such a way that the higher the consumption, the more CPV is exercised. However, it should be clarified that consumption is not a cause of abuse by itself, but an aggravating factor. CPV is a behavioural problem in most cases, generally learned, but on many occasions, it is associated with disorders such as emotional and/or psychiatric dysfunctions. The main associated **disorders** described are the following: mood disorder, anxiety disorder, attention deficit hyperactivity disorder, and negative-defiant disorder. And in relation to the **peer group**, several experts state that CPV aggressors relate to friends with risky or antisocial behaviours.

Regarding the psychological characteristics:

“Some authors point out that children may have cognitive distortions (perception of reality in an absolute way; belief that the world is a hostile place, aggressive solutions to problems, things must be exactly as they wish, justification of violence, beliefs of greatness, suspicion, need for approval, need for control and perfectionism, low tolerance for frustration and tendency to impulsivity, low empathy and exposure to violence” (AMIGÓ, 2017, p. 14-15).

Victims: parents. Although both the father and the mother may be victims of CPV, most of the studies show the prevalence of mothers, due to the mindset of a stereotyped gender role that puts the paternal authority before the maternal authority. Also, because mothers spend more time with their children, their aggressors, and they tend to yield more to their requests. **Age** ranges from 40-45 years. Regarding **the type of family**, there seems to be no consensus among researchers, some defend the prevalence of lone-parent families against those who defend being an only or adopted child. Regarding **parenting guidelines**, researchers agree that they are inadequate, lacking strong and consistent standards; they indicate a lack of communication and family styles of overprotection, authoritarianism or negligent-absent. In reference to the **socio-economic level**, although CPV exists in all social levels, there is an agreement that the middle or upper-middle class prevails over the others. Regarding **emotional and/or psychiatric problems**, the number of parents with antisocial behaviours, addictions and anxious and/or depressive symptoms is gradually increasing (AMIGÓ, 2017, p. 15-16). Figure 4 shows the circles of influence in CPV (Aroca-Montolio et al., 2014).

Figure 5. Circles of CPV influence (Aroca-Montolio et al., 2014). Translated by the Author.



ANALYSING CHILD TO PARENT VIOLENCE (CPV)

IMPORTANCE OF FAMILY INTERVENTION

The AMIGÓ foundation suggests that the intervention in CPV should always include the main family or person in charge of the person being treated, unless the competent authority forces to avoid contact. Their social environment such as school, work or community should also be included. CPV is a “complex and multifactorial” problem, holistically speaking since a case of CPV generally affects the habitual environment of the abuser. In essence, it is about knowing the reason that leads to the aggressions, what is happening, how it feels, reconstructing the stage with the help of the child and its surroundings and recognizing mistakes and successes. Address it in the first person from all points of view and to recover the emotional bond. In this sense, family intervention is key to the success of the intervention as well as the involvement of relatives or those that participate as specialized actors with a specific profile. The intervention is very complex because the environment surrounding the child is complex, so AMIGÓ works with multidisciplinary teams integrated by psychologists, psychotherapists, educators and social workers essentially.

In this regard, AMIGÓ has developed the “Living Together Project” which offers assistance to families for free. They mainly work along two lines of action, 1. Prevention and guidance that develops guidelines and actions to deal with children-parent and intra-family conflicts. 2. Socio-educational and therapeutic intervention that is carried out with families, children, and adolescents who are living in situations of intergenerational conflict (AMIGÓ, 2017, p. 10-11).

GUIDELINES FOR EARLY ACTION

AMIGÓ states that people are born completely defenceless to face conflicts of the CPV type and that the behaviours or reactions that we maintain are those that allow us to get out of a situation and/or provide us with success. On the one hand, the temperament we are born with, most of the time favours violent behaviours to be maintained and to persist over time, if there is no serious intervention. And, on the other hand, parents do not have specific studies to face the upbringing of their children, instead, they are full of good intentions that, when it comes to problems of living together, can be disastrous. Making use of an educational style that favours dialogue, unconditional acceptance, mutual respect, obedience to the elderly, savings, interest in studying, assuming the specific roles for each one, etc., will undoubtedly favour an ideal climate of dialogue to face and overcome any family conflict. AMIGÓ points out three educational references that should not be lacking in a family, affection, discipline and communication (AMIGÓ, 2017, p. 18-19).

CPV PREVENTION

The WHO (2002) states that violence is a heterogeneous problem of biological, psychological, social and environmental roots for which there is no easy or single solution. So, it must be approached from different levels and sectors of society. They point out that effective interventions are those that have a scientific basis and are implemented from childhood for the long term, because in the short term, the results are not satisfactory. In this sense the WHO shows some of the programmes that are being developed worldwide to tackle violence (WHO, 2002, p. 41).

Strategies at the individual level. They mainly focus on promoting healthy attitudes and behaviours in children and young people throughout their main maturational development. And modifying those behaviours that are at risk of becoming violent or already are.

Relational Strategies This is about incorporating relationship skills in abusers and victims so that these skills can be developed in their usual environment, because in many cases, they are the source of unwanted attributions that negatively influence abusers and/or victims when facing and overcoming the CPV situation. They include, among others, public education programs, modification of

the physical environment, promotion of school activities such as sports, music, art, social awareness, etc.

RESULTS

The sources consulted state that CPV is a holistic problem (Peligero, 2016), difficult to explain due to its complexity, since its sequence is long and bidirectional (Naranjo, 2016) and difficult to measure since victims hide their reality either because of guilt or shame (García & Cerezo, 2017), or they dare not recognize that they have lost control of their child (Suárez-Relinque et al., 2019). And that of the violence is psychological abuse (Bringas & Rodríguez, 2007; Garrido, 2008). The most serious aspect of CPV is that a minor can kill his own mother because she seized his/her mobile phone or that there are parents who live as if emotionally kidnapped because of the child's threats.

DISCUSSION

To prevent CPV, all the sources consulted agree that the key is to generate attachment in the family home, an adequate combination of authority and trust and knowing how to say "no" at the right time to children. With special attention to lone-parent families and only children, or those treated as such. But these guidelines do not cover the numerous cases of CPV that originate from negligent parents unable to assume the role of parents. What kind of prevention can be valid for all cases of CPV without any exception?

CONCLUSION

To deal with the CPV prevention, we propose that schools educate in emotion management. Life, everything created, and man itself are sources of endless knowledge and admiration. It is necessary for children to learn about these values when they are at school age. Friendship, interpersonal relationships, assuming responsibilities, having goals and pursuing them, building a life project. Assuming a commitment for their studies, the desire to learn to better oneself, to exchange knowledge with other people and cultures. To acquire healthy lifestyle habits. To be dynamic, creative, and to resist laziness. All of which will allow the child to value his/her sexuality as a personal responsibility that comes with consequences. The ideal basis for the time when the child forms a family or assumes the role of guardian, and he/she is able to provide safe attachment and a parental style built on communication and respect.

BIBLIOGRAPHIC REFERENCES

- Aroca-Montolío, C., Lorenzo-Moledo, M., & Miró-Pérez, C. (2014). La violencia filio-parental: Un análisis de sus claves. *Anales De Psicología*, *30*(1), 157-170. doi:10.6018/analesps.30.1.149521
- Bringas, C., & Rodríguez, F. J. (2007). Reseña de "los hijos tiranos. el síndrome del emperador" de Vicente Garrido Genovés. *Psicothema*, *19*(3), 529-531.
- Calvete, E., Orue, I., & González-Cabrera, J. (2017). Violencia filio parental: Comparando lo que informan los adolescentes y sus progenitores. *Revista De Psicología Clínica Con Niños Y Adolescentes*, *4*(1)
- Cottrell, B., & Monk, P. (2004). Adolescent to parent abuse: A qualitative overview of common themes. *Journal of Family Issues*, *25*(8), 1072-1095. doi:https://doi.org/10.1177/0192513X03261330
- Fundación Amigó. (2017). In Fundación Amigó (Ed.), *Violencia filio-parental. una realidad invisible*. Retrieved from fundacionamigo.org/realidadinvisible
- García, R., & Cerezo, A. I. (2017). La respuesta del sistema de justicia juvenil al fenómeno de la violencia filio-parental en la provincia de Málaga entre los años 2011 al 2014. *Boletín*

ANALYSING CHILD TO PARENT VIOLENCE (CPV)

- Criminológico*, 173(6) Retrieved from <http://www.boletincriminologico.uma.es/boletines/173.pdf>
- Garrido, V. (2008). In Jornadas sobre violencia intrafamiliar 28-29 febrero. Universidad de Valencia (Ed.), *El síndrome del emperador y sus desafíos en el ámbito científico y profesional* (Universidad de Valencia ed.). Valencia.
- Martínez, L. M., Estévez, E., Jiménez, T. I., & Velilla, C. (2015). Violencia filio-parental: Principales características, factores de riesgo y claves para la intervención. [CHILD-PARENT VIOLENCE: MAIN CHARACTERISTICS, RISK FACTORS AND KEYS TO INTERVENTION] *Papeles Del Psicólogo*, 36(3), 216-223. doi:UMI U607585
- Naranjo, E. (2016.). In CRIMINA. Centro para el estudio y prevención de la Violencia (Ed.), *CRIMIPEDIA: Violencia intrafamiliar* CRIMINA. Centro para el estudio y prevención de la violencia. 2016. Naranjo, E. *Universitas Miguel Hernández*. Retrieved from http://crimina.es/crimipedia/wp-content/uploads/2016/06/Crimipedia_Violencia-dom%C3%A9stica_Eloy-Naranjo.pdf
- Navarro, J. (2017). *Criando cuervos. la violencia filio-parental y el efecto werther* (Escuela Vasco Navarra de Terapia Familiar). Retrieved from <https://www.avntf-evntf.com/wp-content/uploads/2016/06/Navarro-J-Trab-3online16.pdf>
- OMS. Organización Mundial de la Salud. (2002). In OMS. Organización Mundial de la Salud (Ed.), *Informe mundial sobre la violencia y la salud. resumen*. Washington, DC. USA: Retrieved from https://www.who.int/violence_injury_prevention/violence/world_report/en/summary_es.pdf
- Peligero, A. M. (2016). La violencia filio-parental en el contexto de la violencia familiar. *IPSE-Ds. Intervención Psicoeducativa En La Desadaptación Social*, 9, 69-84.
- Pereira, R., Loinaz, I., del Hoyo-Bilbao, J., Arrospide J., Bertino, L., & Gutiérrez. M. M. (2017). Propuesta de definición de violencia filio-parental: Consenso de la Sociedad Española para el Estudio de la Violencia Filio-Parental (SEVIFIP). [Proposal for a definition of filio-parental violence: consensus of the Spanish Society for the Study of Filio-Parental Violence (SEVIFIP)] *Papeles De Psicología*, 38(3), 216-223. doi:10.23923/pap.psicol2017.2839
- RAÍCES, O. *Guía sobre violencia filio-parental*. Barcelona: Retrieved from <http://asociacion-raices.org/docs/guiaavpraices.pdf>
- Suárez-Relinque, C., Del Moral, G., León-Moreno, C., & Callejas, J. E. (2019). Child to parent violence: Which parenting style is more protective? A study with spanish adolescents. *International Journal of Environmental Research and Public Health*, 16(8), 1320. doi:org/10.3390/ijerph16081320
- Ulman, A., & Straus, M.A. (2003). Violence by children against mothers in relation to violence between parents and corporal punishment by parents. *Journal of Comparative Family Studies*, 34(1), 41-60.
- WHO. World Health Organization. (2002). In Krug, E. G., et al. (Ed.), *World report on violence and health*. Switzerland: Retrieved from https://www.who.int/violence_injury_prevention/violence/world_report/en/

¹ Cruz Morcillo @cruzmorcillo Madrid. 26/05/2019 11:15h
https://www.abc.es/espana/abci-cada-mas-menores-mandan-madre-hospital-201905260224_noticia.html