

Investigating Adolescent Family Violence in Victoria: Understanding Experiences & Practitioner Perspectives



EXECUTIVE SUMMARY

This project, Investigating adolescent family violence in Victoria, draws on the insights of 120 people who have experienced adolescent family violence and 45 Victorian experts, service providers, general practitioners and health service providers to provide new insights into the nature and impact of adolescent family violence, the adequacy of current criminal justice, service and therapeutic responses, and the needs for future practice and policy reform. While primarily Victorian focused, the findings are relevant to all Australian jurisdictions and comparative countries.

This Executive Summary is extracted from: Fitz-Gibbon, K., Elliott, K. and Maher, J. (2018) *Investigating Adolescent Family Violence in Victoria: Understanding Experiences and Practitioner Perspectives*. Monash Gender and Family Violence Research Program. Faculty of Arts. Monash University.

Adolescent family violence describes violence perpetrated by young people against family members, including parents, siblings, carers and other members of the family. Adolescents who use violence in the home engage in a range of different strategies to control, coerce and threaten family members that create harm. Our participants had experienced a combination of physical violence, property damage, verbal abuse, coercive and controlling behaviours, and financial abuse. In some cases, physical violence was used to achieve broader goals, such as to change the household rules, to avoid household tasks, to frighten and achieve control over members of the household, or to extract money from a parent. Verbal abuse and coercive behaviours were used in many incidents to establish power and control over a parent and/or sibling. For many affected parents the early stages of victimisation were fraught with concerns over what distinguishes 'normal' adolescent tantrums from behaviours that constitute abuse. While for some incidents of abuse were isolated and occurred infrequently, for other parents the violence became part of their everyday lives.

The findings of this project support previous research that concludes that adolescent males more commonly use violence in the home than their adolescent female counterparts, and mothers are more likely to be victimised than male adults within the home. This is not to overlook the experiences that

were shared through our survey of males who had experienced adolescent family violence as victims and parents who had been victimised by their adolescent daughter but rather to highlight the importance of gendered understandings in this area. A number of service providers who participated in this research noted that the types of violence committed were influenced by gender, with girls more commonly using verbal violence and property damage as mechanisms for control, while male adolescents were more commonly reported using physical violence.

This research found that adolescent family violence has long term health and wellbeing implications for those affected. Our report documents a range of impacts, including negative educational outcomes for the adolescent as well as affected siblings, affected parental work patterns, relationship breakdown including parental separation and family estrangement, health impacts for families that live in fear, social isolation, as well as the economic, physical and emotional impacts associated with experiencing violence. As one mother described to us, 'it impacts on every aspect of your life. I sleep with my handbag under my pillow'. In many cases for the 120 persons who responded to our survey, these impacts were not alleviated through any help-seeking behaviour in either therapeutic, service or criminal justice contexts.



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“Being hit with lumps of wood. Heavy objects thrown in the face e.g. metal trophies. Punching, kicking, spitting. Verbal abuse, belittling. Damage to car e.g. glove box door removed. Swear words written on ceiling. Holes in the wall. Pulling hair and hitting while driving.”
Phillipa, mother



The detailed reflections of the 120 people experiencing family violence who participated in this research reveal the barriers that women experience when seeking help for adolescent family violence particularly as they work to maintain their care relationship with their child, experiences of shame and fear of stigma, and a reluctance to engage police as primary responders.

To date, in Victoria specifically and Australia more broadly, there are few tailored responses and programs to address adolescent family violence. This Report reiterates the finding by the Victorian Royal Commission into Family Violence that we need specialised service responses and programs for this unique form of family violence. Criminal justice system responses are typically viewed as inadequate and inappropriate given the acknowledged risks associated with criminalisation, the lack of specialised police training for responding to adolescents who use family violence and the unwillingness of parents victimised to support an intervention order being taken out against their child. For those families that did report contacting the police it was often framed as a ‘last resort’ decision, one made only when safety risks presented to other children in the home reached a critical level. Acknowledgement of the police as not the first port of call, but rather the very last, reaffirms the urgent need in Victoria for early intervention and support services for parents experiencing adolescent family violence.

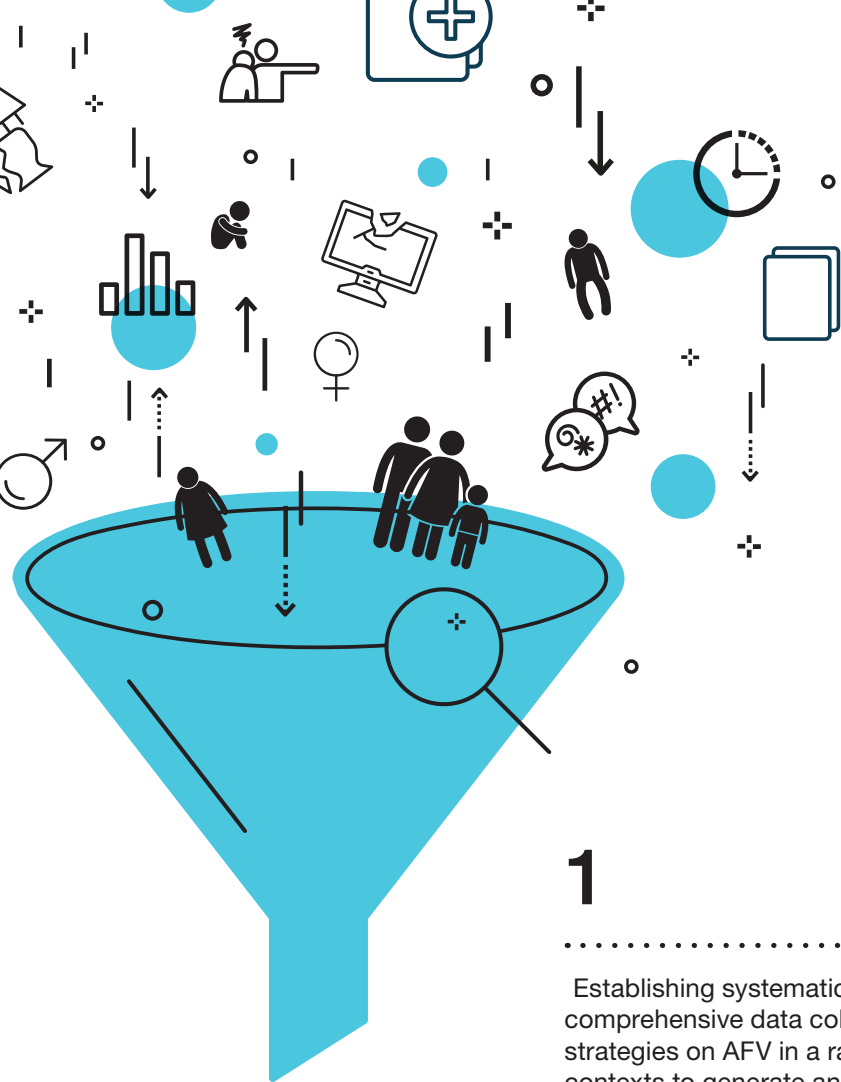
The complex needs of adolescents who use violence in the home and those caring for them require specialist service responses outside of the criminal justice system. At present, there are few Australian programs that specifically address adolescent family violence. The dearth of targeted resources and specialist responses for adolescent family violence means that many parents are left on their own to manage and maintain their families’ safety and security. There are no clear avenues for accessing effective support or responses, particularly in cases where the child using violence is under 12 years of age. This research identifies the critical role that schools and other education institutions can play in operating as an interface between families and services, and providing support for families experiencing adolescent family violence.



“I am often faced with the decision of trying to maintain my safety, that of the other children in the home and that of the adolescent perpetrator himself. I am also often torn between trying to address the behaviour so that the boundaries are not further extended but also trying not to escalate matters. Being a victim of adolescent family violence is difficult to explain, difficult to talk about and difficult to deal with. It is an isolating, emotionally damaging experience that leaves you numb, hollow and negatively fraught at all times.”

Tiffany, mother





1

Establishing systematic and comprehensive data collection strategies on AFV in a range of service contexts to generate an evidence base which can support the development of new programs, and risk sensitive service responses.

RECOMMENDATIONS



2

The development of integrated service responses for vulnerable children and young people, including a coordinated response to adolescent family violence in Victoria between various sites, programs and services, including schools.



3

Sector-specific training be provided to professionals who are likely first responders in cases of adolescent family violence, including police, primary and secondary school teachers.



4

Consideration be given to developing interim and short term respite for families experiencing adolescent family violence, including care options for adolescents who use family violence beyond child protection or residential care.



5

Future research explores the different ways in which gender impacts assessments of criminality and how parents experience adolescent family violence to support the development of effective and targeted responses that address different gendered patterns and prevalence.