

Summarising the evidence

ADOLESCENT VIOLENCE IN THE HOME

Research summary



Australian Government
Australian Institute of
Family Studies



Adolescent violence in the home (AVITH)

This research summary draws on an evidence review undertaken by Elena Campbell (Centre for Innovative Justice, RMIT) and Liz Wall (Australian Institute of Family Studies) in 2022 as part of the Summarising the evidence project. The summary was developed by Respect Victoria in consultation with the evidence review authors.

Visit the [Summarising the evidence project page](#) for the accompanying context brief, as well as information about the scope and aims of the project.

Respect Victoria gratefully acknowledges the work of the Australian Institute of Family Studies and all authors in conducting this work.

Domain	Summary of research
Definition	<p>A consistent definition of adolescent violence in the home (AVITH) is yet to be established in Australia. One definition developed is ‘repeated [behaviour] of physical, psychological (verbal or nonverbal) or economic violence, directed toward the parents, siblings or the people who occupy their place.’¹ This particular definition excludes: one-off aggressions 1) that occur in a state of diminished consciousness which disappear upon recovery (intoxications, withdrawal syndromes, delirious states or hallucinations); 2) caused by (transient or stable) psychological disorders (autism or other neurodivergence or severe mental deficiency); and 3) parricide without a history of previous aggression. It should be noted that:</p> <ul style="list-style-type: none"> • Other definitions of AVITH do not require a repeated pattern of behaviour² • There is variation in the age range captured by the differing definitions of AVITH. This can range from pre-adolescent children to early adulthood³ • The exclusion of AVITH where disability/psychological disorders are indicated presents complexity for understanding both the nature of AVITH and its prevalence. While disability or neurodiversity is associated with a significant proportion of young people identified by legal and clinical settings as using AVITH, nuance is required in applying this exclusion, otherwise this population may not be visible in policy and practice responses.
Behaviours	<p>AVITH includes physical, psychological, emotional and economic violence and verbal abuse.</p>
Prevalence	<p>The varying definitions of AVITH make assessing the prevalence, nature and dynamics a challenge.⁴ Whilst prevalence data arising from studies is outlined below, in understanding AVITH prevalence data, it is important to note that:</p> <ul style="list-style-type: none"> • Most AVITH-specific studies are qualitative small-scale studies which often utilise focus groups and in-depth interviews with adults.⁵⁻⁸ Whilst these studies provide important insights into the nature and prevalence of AVITH, it is not always possible to generalise these insights beyond the specific cohort sample. • The small number of broader/self-reported surveys of adolescents⁹⁻¹¹ provide data which can be used in more generic ways to estimate population wide prevalence trends. As a result of varying definitions of AVITH, however, there are significant variations in prevalence estimates between different studies depending, in part, on the definition of AVITH used in each study. • Most of what is known about the extent of AVITH is based on administrative data. Variations in how jurisdictions define AVITH and the types of services/systems from which the data is drawn (e.g. legal, clinical or community based) influence the rates of AVITH found.¹² • AVITH is described in a range of studies as one of the most significantly underreported forms of family violence.^{2,13} This not only impacts our ability to assess prevalence rates, but also contributes to a lack of community

acknowledgement and understanding of the issue. This, as well as 'parental guilt, denial, self-blame, stigma and shame, and minimisation of the abuse' can lead AVITH to be viewed as 'typical' adolescent behaviour.¹³ Despite the effect of underreporting, some international studies indicate that AVITH is a growing phenomenon.¹⁴

One Australian survey of 5000 young people found that 20% of participants self-reported ever using violence against a family member.¹⁵ This includes frequent (at least monthly) and episodic (less than monthly) incidents of AVITH.

Another Australian study found that, of a sample of 435 university students aged 18 to 25, 1 in 7 reported that they had abused their parents in the past 12 months.¹⁶

Internationally, community studies indicate a prevalence rate of between 5 and 21% for physical AVITH and between 33 to 93% for psychological, verbal and emotional AVITH.¹⁷⁻²⁰ The large variance between these prevalence figures reflects the differences in samples and definitions of AVITH.²¹

Profile of victim survivors and young people who use violence

Gender

The literature suggests that AVITH is gendered, but not as gendered as intimate partner violence (primarily men's perpetration against women), with about two thirds to three quarters of those using adolescent violence at home being male.^{22,23}

However, an Australian prevalence study presents a contradictory picture, finding that 23% of those assigned female at birth reported using violence in the home compared to 14% of those assigned male at birth.²⁴ However, it is worth noting that young women may be more likely to self-report use of any kind of violence and that young men may under-report or minimize, as suggested in the context of wider evidence regarding adolescent dating violence.²⁵

Available data on gender differences in the use of AVITH is predominately gender binary (focused on cis-gender young people), resulting in a paucity of data on trans and gender diverse adolescents.

International studies suggest that gender disparity in the use of AVITH may also be skewed by perceptions and social norms. For example, parents may be more inclined to call police in instances where young men are using AVITH, given the perceived risk of physical harm.²⁶ Conversely, some studies have noted that social norms create more punitive views of the use of physical violence by young women, whereas young men may be considered to be behaving within gendered norms when using physical force or intimidating behaviour.¹²

Other studies have found differences in the forms of violence used by young people of different genders. The evidence suggests that, while both males and females may use violent or abusive behaviour of some kind, young men are likely

to use physical forms of AVITH whilst young women are likely to use emotional and verbal forms of AVITH.^{21,27-29}

Limitations of justice system data may result in the over-representation of marginalised communities that experience systemic discrimination and over-policing, so data from broader sources is required.

Significant evidence points to the ways in which perpetrators of adult intimate partner violence deliberately undermine relationships between mothers and children including post separation.^{30,31} Examples of this involve systems abuse through the family law and child protection processes; using children directly as a vehicle for inflicting further abuse by ‘coaching’ them in abuse tactics; or otherwise using shared parental responsibility and an ongoing presence in the children’s lives to undermine the mother-child bond or their child’s access to services.^{12,32} Coupled with the reality that mothers are the most likely to be providing care and interacting with the adolescent on a daily basis, it is not surprising, then, that multiple studies indicate that mothers who are sole parents are the biggest cohort to experience AVITH.^{2,33,34} Where adolescents use coercive and controlling behaviours it may be a result of finding ways to feel in control of their environment in the context of wider distress or feelings of powerlessness. Research also strongly indicates that it is often the result of mirroring abuse they have witnessed by male adult caregivers against female adult caregivers.^{12,35} This behaviour in adolescents may be an indication of current or previous abuse directed at their mothers, with direct and indirect harm experienced by adolescents.^{36,37} In turn this points to a connection between prior intimate partner violence perpetrated by fathers, parental separation and the use of AVITH – and therefore a need for appropriate support for multiple family members.³²

Family context

Although there is a focus in the literature on child to parent violence, some studies indicate that violence used against siblings is the most common form of intrafamilial abuse.³⁸ However, it is acknowledged that grandparents,³⁹ kinship carers,⁴⁰ and adoptive parents,⁴¹ can also be victims of AVITH.

Age

Despite the scarcity of evidence, there are some indications that most young people who perpetrate violence are in the 14-17 years age range^{11,42,43} and the average age of parents who experience AVITH is between 41 and 50 years of age. The increasingly young age of children being identified in legal systems as using AVITH has also been recognised in the literature.¹²

Disability

The prevalence of disability as a co-occurring factor in young people identified by legal and service systems as using AVITH has been highlighted across the evidence base.^{1,2,44} An important conceptual review, however, recently identified a profound lack of literature concerning the direct nexus between disability and use

	<p>of violence at home by young people and queried the deficit-based approach to approaches to disability in this context.⁴⁵ Links between AVITH and developmental issues, such as impulsiveness, have also been identified.⁴⁶ People with disability – particularly women and children – are also disproportionately affected by interpersonal violence⁴⁷ and are over-represented in youth and other justice systems.⁴⁸</p> <p>Broadly speaking, there is a lack of knowledge and understanding within service provision contexts about impacts of neurodiversity, particular disabilities and developmental disorders. This can result in parents – particularly mothers who are more likely to be caring for children – experiencing inappropriate, ineffective and potentially harmful service system responses regarding their children’s behaviour. Such responses can exacerbate distress experienced by children and parents and potentially contribute to violence occurring, rather than support families through appropriate interventions.</p>
<p>Researchers’ indication of drivers and reinforcing factors associated with violence</p>	<p>While the literature does not use the language of ‘drivers’ and ‘reinforcing factors’ (and refers instead to ‘risk factors’ and ‘reinforcing factors’), the evidence points to a constellation of key factors that appear to be associated with AVITH. Prior experience of adult perpetrated violence¹ both indirectly and directly, is arguably the most significant factor associated with a young person’s use of AVITH.^{12,27,28,32,49-53} This suggests that, by preventing adult perpetrated violence, some AVITH may also be prevented. Further, by responding effectively to adult perpetrated harm and supporting women and children to recover, the trajectory into AVITH may be stemmed and additional prevention efforts realised. Finally, by providing appropriate support for families experiencing issues of diverse or additional needs, prevention efforts can be additionally bolstered.</p> <p>Other factors associated with AVITH include:</p> <ul style="list-style-type: none"> • Adverse childhood experiences impacting on the young person. • In the complex and nuanced context of use of violence in home by young people with disability, a lack of service support for them and their families, as well as a lack of integrated systems response. • The young person’s substance misuse, social exclusion, bullying and mental health issues, issues which themselves may be associated with experiences of trauma. • Poor quality family relationships, including as a result of familial trauma, such as migration trauma and grief. <p>These factors can all be compounded by:</p> <ul style="list-style-type: none"> • School disengagement (conversely positive school engagement is protective)

^a Throughout this summary, the term ‘adult perpetrated harm’ recognises children as victims in their own right in the context of men’s intimate partner violence against women.

- shame and stigma around AVITH that reduces help seeking behaviour by families and young people
- lack of access to supports
- negative service or system level involvement in family life.

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Further reading

All resources from Summarising the evidence can be found on the [project page](#).

Research summaries

- Adolescent violence in the home (E Campbell & L Wall)
- Child maltreatment: a snapshot summary (D Higgins & G Hunt)
- Intimate partner violence perpetrated against women by men (Respect Victoria)
- Intimate partner violence perpetrated by women against men (M Salter & D Woodlock)
- Online violence and harassment perpetrated against women (B Harris)
- Non partner sexual violence (A Quadara)
- Sexual harassment occurring in the world of work (S Charlesworth & C Deen)
- Violence perpetrated against older people by another family member or carer (E Stevens, R Kaspiw & R Carson)

Context briefs

- Summarising the evidence: Exploring what we know about drivers of violence against women, family violence and other forms of gendered violence - Project overview
- Summarising the evidence: Adolescent violence in the home
- Summarising the evidence: Child maltreatment
- Summarising the evidence: Elder abuse
- Summarising the evidence: Online harassment and abuse against women
- Summarising the evidence: Women's intimate partner violence against men
- Summarising the evidence: Work-related sexual harassment

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Acknowledgement of Country

Respect Victoria acknowledges Aboriginal peoples throughout Victoria as the First Peoples and Traditional Owners and Custodians of the lands and waterways on which we rely. We proudly acknowledge the Aboriginal communities throughout Victoria and their ongoing strength in practising the world's oldest living culture.

We acknowledge the significant and ongoing impacts of colonisation and commit to working alongside Aboriginal communities to effect change. We recognise the ongoing leadership role of Aboriginal communities in addressing and preventing family violence and violence against women, and will continue to work in collaboration with First Peoples to eliminate these forms of violence from all communities.

Victim survivor acknowledgement

Respect Victoria acknowledges the significant impact of family violence and violence against women on individuals, families and communities, and the strength and resilience of the children, young people and adults who have, and are still, experiencing this violence. We pay our respects to those who did not survive, and to their loved ones.



Respect Victoria is the state's dedicated organisation for the prevention of family violence and violence against women. Our vision is a Victorian community where all people are safe, equal and respected, and live free from family violence and violence against women.

To achieve our vision, we lead and support evidence-informed primary prevention and act as a catalyst for transformational social change. Primary prevention aims to stop violence from occurring in the first place, by changing the culture that drives it. We drive coordination and effectiveness of the prevention system. We build and promote primary prevention knowledge and evidence. We keep prevention on the public and policy agenda. We guide prevention wherever Victorians live, work, learn and play. We raise awareness that violence against women is preventable and influence community conversations to fuel social change.

We are an independent voice, with functions, powers and duties enshrined in legislation.