

## An Information Sheet to Support the Implementation of the Victorian Family Violence Multi-Agency Risk Assessment and Management Framework (MARAM) and Information Sharing Schemes

### Adolescent Violence in the Home (AVITH) and the Child Information Sharing Scheme (CISS) and Family Violence Information Sharing Scheme (FVISS) and MARAM

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The Child Information Sharing Scheme (CISS), Family Violence Information Sharing Scheme (FVISS) and the Multi Agency Risk Assessment and Management (MARAM) framework aim to create a significant cultural shift in information sharing practice to improve family violence risk assessment and management practice and for the purpose of promoting the wellbeing and/or safety of a child or group of children. All three schemes identify child and family services and other prescribed or Framework organisations from allied service sectors as having a responsibility for the wellbeing of children and young people.

In the context of the assessment and management of family violence risk, these schemes identify that all prescribed service providers work with children as victim survivors of family violence in their own right and identify and respond to their wellbeing and safety needs. For service providers who have traditionally worked only with adult clients, these three schemes require practitioners to consider child wellbeing and safety if their client is a parent or carer of children or young people. This is particularly complex when working with adolescent violence in the home (AVITH).

This information sheet aims to support practitioner responses to adolescents who use violence in the home (called AVITH in this document) by describing the context in which it might occur, and important elements and good practice when working with families and young people.

*Trauma is the result of events outside a person's control which are unexpected; for which the person was unprepared; and which they were unable to do anything to stop. It is not the event that determines if trauma will occur, rather the individual's experience of it and the meaning they make of it. This can also be shaped by an individual's developmental age and stage, their cultural or personal beliefs and/or the support available to them.<sup>1</sup>*

*Adolescence for the purposes of this document is a stage of development often operationalised to mean 10-18 years of age based on the age of criminal responsibility in Victoria. However, different programs working with young people may stipulate different eligibility criteria. The Children, Youth and Families Act 2005 defines childhood (including adolescence) as the period from 0 to 17 years. The World Health Organisation defines adolescents as individuals aged 10-19 years.*

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<sup>1</sup> Ministerial Guidelines Family Violence Information Sharing Scheme  
[https://w.www.vic.gov.au/system/user\\_files/Documents/fv/Ministerial\\_Guidelines\\_-\\_Family\\_Violence\\_Information\\_Sharing\\_Scheme\\_-\\_October\\_2018.pdf](https://w.www.vic.gov.au/system/user_files/Documents/fv/Ministerial_Guidelines_-_Family_Violence_Information_Sharing_Scheme_-_October_2018.pdf) p.79

Question:	Practice Considerations
1. What is AVITH?	<p>Adolescent violence in the home (AVITH) is a distinct form of family violence and requires a different response to adult perpetrated family violence.<sup>2</sup></p> <p>AVITH behaviours might include physical assault, property damage, financial, emotional and psychological abuse and sexual abuse of siblings. According to police statistics, the majority of victim survivors are female, many being single mothers and two thirds of young people who use family violence are male.<sup>3</sup> Siblings are frequently also victim survivors.<sup>4</sup> However, incidents that come to the attention of police are often reported as a last resort and under-represent patterns of escalating behaviour. There are several contexts in which AVITH may occur where:</p> <ul style="list-style-type: none"> <li>• the adolescent is a victim survivor of family violence and/or child abuse</li> <li>• their family has experienced intergenerational trauma and/or disadvantage resulting in compromised/poor parenting practices</li> <li>• the adolescent uses gendered violence due to learned behaviours</li> <li>• the adolescent has a disability or developmental delay.</li> </ul>
2. What are the important elements of AVITH?	<p>AVITH is highly complex, with several important elements to consider:</p> <ul style="list-style-type: none"> <li>• Adolescence is a key developmental stage, and for this reason, adolescents using family violence require a different response from adult perpetrators. Adolescents experience significant physical, cognitive, sexual, emotional and social development. Many biological and psychosocial changes occur in a relatively short period of time, meaning that adolescents are physically capable of engaging in problematic behaviours before they can fully comprehend the meaning or consequence of their behaviour.</li> <li>• Some adolescents with significant developmental delay or disability might be violent and aggressive because they have difficulty managing strong feelings and emotions. Their violence might not be a means to gain control but expressive and reactionary.</li> <li>• In cases where an adolescent has experienced or is experiencing family violence and/or child abuse, MARAM requires that children and young people be recognised as victim survivors in their own right and that their wellbeing and safety are prioritised.</li> <li>• There might be several victim survivors. Other children in the family home might have experienced violence from a sibling or adult perpetrator. A parent or carer in the home might also have experienced or be experiencing family violence. It is therefore important to apply a trauma-informed and developmentally appropriate practice approach when responding to AVITH.</li> </ul>

<sup>2</sup> Ministerial Guidelines Family Violence Information Sharing Scheme  
[https://w.www.vic.gov.au/system/user\\_files/Documents/fv/Ministerial\\_Guidelines\\_-\\_Family\\_Violence\\_Information\\_Sharing\\_Scheme\\_-\\_October\\_2018.pdf](https://w.www.vic.gov.au/system/user_files/Documents/fv/Ministerial_Guidelines_-_Family_Violence_Information_Sharing_Scheme_-_October_2018.pdf) p.79

<sup>3</sup> Data Snapshot Police Reported Adolescent Family Violence in Victoria  
[https://www.crimestatistics.vic.gov.au/sites/default/files/embridge\\_cache/emshare/original/public/2020/02/b2/552da23ec/Crime%20Statistics%20Agency%20-%20Data%20Snapshot%201%20-%20Adolescent%20Family%20Violence.pdf](https://www.crimestatistics.vic.gov.au/sites/default/files/embridge_cache/emshare/original/public/2020/02/b2/552da23ec/Crime%20Statistics%20Agency%20-%20Data%20Snapshot%201%20-%20Adolescent%20Family%20Violence.pdf)

<sup>4</sup> Fitz-Gibbon, K., Elliott, K & Maher, J, 2018, Investigating Adolescent Family Violence in Victoria: Understanding Experiences and Practitioner Perspectives, Monash Gender & Family Violence Program, Monash University, Melbourne

Question:	Practice Considerations
	<p>Looking at the young person as part of a family unit, rather than an individual with a problem. The young person is often part of a family network with intricate relationships and communication patterns.</p>
<p>3. What are the important aspects to consider when working with an adolescent?</p>	<p>Working with families where a young person is using family violence requires consideration of ways of keeping family members safe while supporting the young person to understand the impact of their behaviour and their developmental, behavioural, psychological and emotional needs. A young person's age, developmental stage, trauma experience, disability (if relevant), therapeutic needs, learning needs, family, community and cultural context, strengths and protective factors all need to be considered in responding to AVITH.</p> <p>Services provided to child victim survivors should:</p> <ul style="list-style-type: none"> <li>• acknowledge their unique experiences, vulnerabilities and needs, including the effects of trauma and cumulative harm arising from family violence and other forms of violence and abuse, while also working with adolescents to encourage them to take responsibility for their violence</li> <li>• provide assistance for adolescents and family members to access services that support health and development. For example, an adolescent using family violence may require support to engage with youth mental health services to address depression, anxiety or other mental health issues. This may not be sufficient to address the adolescent's experience of family violence and so often, for adolescents, family violence therapeutic and crisis responses may be needed concurrently</li> <li>• support involvement in activities that enable an adolescent's personal, social and cultural development and connection to their culture and community</li> <li>• support a young person to participate in education and to access educational opportunities</li> <li>• strengthen safe relationships with a developmental and therapeutic focus</li> <li>• provide therapeutic support that encourages development of communication skills and strengthens safe relationships among family members, as well as peer groups.</li> </ul>
<p>4. What are good approaches when working with adolescent?</p>	<p><i>Engagement:</i> When working with adolescents there can be additional challenges to gaining their trust and respect, therefore it is important to consider different ways of engaging a young person such as outreach or using technology.</p> <p><i>A therapeutic and developmentally informed approach</i> enables identification of individual risk factors such as previous exposure to family violence, trauma, mental health and disability.</p> <p><i>A whole of family approach</i> is based on family-sensitive practice and considers the views and needs of all family members, even those who cannot be engaged.</p> <p><i>Strengths-based approaches</i> support an adolescent to achieve core competencies and developmental milestones.</p> <p><i>Relational approaches</i> promote safe and respectful family relationships.</p>

Question:	Practice Considerations
	<p><i>A collaborative approach:</i> Working together with multidisciplinary care team meetings means developing and coordinating consistent care and risk management plans responding to the needs and wellbeing of each family member. It means proactively engaging with universal services specialising in working with adolescents, such as schools, to seek information about the young person and family's needs. It also means identifying co-occurring risk or wellbeing concerns, supporting monitoring of risk and wellbeing, and sharing with the care team.</p>

Remember:

- A strengthened knowledge of local services that hold relevant information about adolescents and families is valuable when responding to the needs of adolescents who use violence in the home, to seek information about the adolescent and their family's needs and to support coordinated risk assessment and management for adolescent family violence
- Before sharing or making a request for information, seek the views and wishes of adolescents if age- and stage- appropriate.

For more information about the Information Sharing Reforms and MARAM, and collaborative training go to: [www.vic.gov.au/information-sharing-schemes-and-the-maram-framework](http://www.vic.gov.au/information-sharing-schemes-and-the-maram-framework)