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EDITORIAL



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Ending violence in childhood: a global imperative

A. K. Shiva Kumar^a, Vivien Stern^b, Ramya Subrahmanian^a, Lorraine Sherr^c, Patrick Burton^d, Nancy Guerra^e, Robert Muggah^f, Maureen Samms-Vaughan^g, Charlotte Watts^h and Soumya Kapoor Mehta^a

^aKnow Violence in Childhood, New Delhi, India; ^bKnow Violence in Childhood, London, UK; ^cResearch Department of Infection and Population Health, University College London, London, UK; ^dCentre for Justice and Crime Prevention, Cape Town, South Africa; ^eDepartment of Psychology and Social Behavior, University of California at Irvine, Irvine, CA, USA; ^fIgarape Institute, Rio de Janeiro, Brazil; ^gDepartment of Child and Adolescent Health, University of West Indies, Kingston, Jamaica; ^hDepartment of Global Health and Development, Faculty of Public Health and Policy, London School of Hygiene and Tropical Medicine, London, UK

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Introduction

The time has come to end violence in childhood. The best and only way we can build peaceful societies is by preventing victimization of children and perpetration of violence by children. This can and must be done – with the aspiration to achieve this within a single generation. Collective action and concerted efforts succeeded in ending great evils such as the slave trade and apartheid. Violence in childhood is also a great evil affecting at least 1.6 billion child victims every year (Hillis, Mercy, Amobi, & Kress, 2016). It has long-lasting consequences through childhood, into adulthood, inter-generationally and for society. It is universal – in every country of the world – and its most common forms are usually perpetrated by people with whom children interact every day in their homes, schools and communities.

Violence victimisation is an adverse childhood experience, defined as potentially traumatic events that can have negative lasting impacts on health and wellbeing (Felitti et al., 1998). As per the United Nations Convention on the Rights of the Child (CRC), the definition of violence victimisation spans *neglect* – failure of responsible caregivers to provide needed food, clothing, shelter, medical care, supervision that guards child safety and well-being; *abuse* – actions, or threatened actions that cause, or have the potential to cause significant harm to a child, including emotional, physical and sexual actions; and extends to *exploitation* – the use of a child for profit, power, status, sexual gratification or other purpose. Children are also exposed to *harm* because of traditional practices that are sanctioned by cultures (e.g. female genital mutilation (FGM) or early marriage). These forms of violence are also termed as *child maltreatment* in the public health domain (World Health Organisation, 2006). Ending victimization of children not only protects the human rights

CONTACT Ramya Subrahmanian 🖾 rsubrahmanian@knowviolenceinchildhood.org

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of the child but reduces the likelihood that they will grow up and continue the cycle of violence against others.

According to UNICEF (2014), children's experience of violence includes:

- *Homicide* In 2012 alone, homicide took the lives of about 95,000 children and adolescents under the age of 20 – almost one in five of all homicide victims that year.
- *Physical punishment* Around six in ten children between the ages of two and 14 worldwide are regularly subjected to physical punishment by their caregivers.
- *Bullying* More than one in three students between the ages of 13 and 15 worldwide regularly experience bullying (cyberbullying not included).
- *Forced sex* Around 120 million girls under the age of 20 (about one in ten) have been subjected to forced sexual intercourse or other sexual acts at some point in their lives. Boys are also at risk, although a global estimate is unavailable.
- *Intimate partner violence (IPV)* One in three adolescent girls aged 15–19 worldwide have been the victims of any emotional, physical or sexual violence committed by their husbands or partners at some point in their lives (UNICEF, 2014). Globally, 20% of adolescent girls are either married or in a union. Early marriage puts young girls at risk of IPV and in a vulnerable position as they are cut off from their families and support networks. Adolescent girls in informal unions are also vulnerable to IPV (UNICEF, 2014).
- *Witnessing domestic violence and co-occurrence with IPV* Country level studies establish that children are affected by the violence they witness between parents (Iles-Caven, Ellis, & Golding, 2017; Indermaur, 2001; Kyu & Kanai, 2005). Children also have an increased risk of directly experiencing violence if their mothers are victims of domestic violence.

In addition, children experience grave violations in contexts of conflict and war: either drafted to support armed forces or groups or forced to leave home without adult care. They are exposed to forms of modern slavery including economic and sexual exploitation and trafficking. Newer risks in the form of exposure to online forms of bullying and exploitation can negatively impact their safety and development if not addressed through adequate safeguards.

The scale and range of violence holds up a disturbing mirror to society. However, while episodic reporting may trigger a momentary sense of outrage and sadness it rarely leads to sustained comprehensive action. Indeed, too much focus on numbers means the scale and enormity of the issue can seem overwhelming. Numbers need to be supplemented by effective descriptions or narratives in order to get a proper understanding of the human condition – and what to do about it.

About Know Violence in Childhood

This special issue is one of the outputs of the *Know Violence in Childhood*: A *Global Learning Initiative*. The Initiative was established as a collective response by individuals from multilateral institutions, non-governmental organisations and funding agencies concerned about the global impact of violence in childhood and the lack of investment in effective violence prevention strategies. The importance of credible global evidence was seen as central to increasing advocacy and investment in effective strategies to end violence in childhood. A central message of the initiative is that violence is preventable. Strategies for prevention can help build better lives for boys and girls – optimising their well-being and their development to adulthood. Both established systems of child protection as well as innovative field-based programmes across countries have generated insights and lessons about the strategies that can yield effective results to end violence. These innovations and strategies address both the structural roots as well as the individual behaviours that give rise to aggression and violence. Countries can also learn from each other, adapting effective strategies to their contexts and realities.

Launched in November 2014 after nearly two years of international consultations and preparatory work, the Initiative's learning effort has been organised as follows:

- Three learning groups Under the leadership of eminent academic experts based in
 institutions in Brazil, Jamaica, South Africa, the United Kingdom and the United States,
 the learning groups specifically addressed interpersonal violence in homes, schools
 and communities. The groups comprised experts from multiple disciplines including
 psychology, crime prevention, epidemiology, paediatrics and security and development
 from around the world. Additional papers were commissioned to cover related topics
 that cut across or were outside of the frameworks of these groups.
- *Commissioned papers* The learning groups commissioned 41 papers (see Table 1) from 100 authors from universities and institutions around the world. These in turn drew on over 3000 articles, books and reviews, including 192 systematic reviews of evidence.
- *Regional outreach* A series of meetings has been held in Central Asia, East Asia and the Pacific, Latin America and South Asia bringing together researchers, practitioners and policy makers addressing different issues of violence salient to these regions.

The work of the Initiative is focused on providing a narrative that can

- (i) unify and strengthen this diverse field by putting prevention of violence in childhood in a context that will resonate with a broad range of actors;
- (ii) Provide a convincing and unifying ethical framework which essentially enshrines a human development vision of social policy;
- (iii) Offer a range of arguments, derived from research as to why violence in childhood must be tackled; and
- (iv) Propose guidance on the actions that can be taken to prevent violence in childhood.

This special issue contains a selection of 15 papers that have contributed to the Initiative's evidence base. In this editorial, we refer both to the synthesis of evidence from the full range of commissioned work as well as the specific papers included in this volume.

Unpacking violence in childhood

A significant transition is underway in our collective understanding of what transpires in childhood and the consequences for human development. Interpersonal violence is fast emerging as the missing piece in child well-being policies, with children's safety and protection increasingly being understood to be the centrepiece of achievement of their full potential. The consequences of exposure to 'toxic stress' at a young age are beginning to be well understood (Shonkoff et al., 2012).

Table 1. Know Violence in Childhood Commissioned Papers.

	Author, year, title
1.	Abt (2017) Towards a Comprehensive Framework for Community Violence Reduction*
2.	Bacchus et al. (2017) Exploring Opportunities for Coordinated Responses to Intimate Partner Violence and Child Maltreatment in Low and Middle Income Countries: A Scoping Review*
3.	Brodie and Pearce (2017) Violence and Alternative Care: A Rapid Review of the Evidence*
4.	Brown, de Graaff, Annan, and Betancourt (2017) Breaking Cycles of Violence: Common Elements of Interventions for Children, Adolescents and Youth Affected by War
5.	Bulger and Burton (2017) Online Violence in Schools: Cyberbullying and Other Adverse Online Experiences*
6.	Burton (2017) The Role of ICT and Social Media in Preventing Violence in Schools and Institutions
7.	Carbonari and Alys (2017) Learning from Latin America: Policy Trends of Crime Decline in 10 Cities Across the Region
8.	Cid (2017) Interventions using Regular Activities to Engage High-risk School-age Youth: A Review of After-school Programmes in Latin America and the Caribbean
9.	Clarke et al. (2017) Patterns and Predictors of Violence against Children in Uganda: A Latent Class Analysis
10.	Coore-Desai et al. (2017) The Prevention of Violence in Childhood through Early Childhood Parenting Programmes: A Global Review
11.	Deanne and Fox (2017) The Role of the Health Sector in Violence Prevention and Management
12.	Devries et al. (2017) Who Perpetrates Violence against Children? A Global Systematic Analysis of Age and Sex-spe- cific Data
13.	Ellsberg et al. (2017) Violence against Adolescent Girls: Falling through the Cracks?
14.	Embleton (2017) Twice Victims of Violence: The Plight of Street-connected Children and Youth
15.	Esquivel and Kaufmann (2017) Gender Dimensions of Violent Urban Contexts: Bridging the Gaps in Theory and Policy
16.	Gershoff (2017) School Corporal Punishment in Global Perspective: Prevalence, Outcomes and Efforts at Interven- tion*
17.	Guerra et al. (2017) Community Readiness for Youth Violence Prevention: The Youth Violence Prevention Readiness and Needs Scale (YVP-RNS)
18.	Iles-Caven et al. (2017) Polyvictimisation in the UK: Some Findings from the ALSPAC Study
19.	Kidwai (2017) School-based Violence in South Asia: State of the Evidence Report
20.	Le et al. (2017) Prevalence and Determinants of Bullying Victimisation and Perpetration among Adolescents in Vietnam*
21.	Leoschut and Kafaar (2017) The Frequency and Predictors of Polyvictimisation and the Role of Schools in its Prevention*
22.	Lester et al. (2017) Systematic Review on the State of Knowledge on Violence within Schools: A Systematic Review of Reviews*
23.	Lilleston et al. (2017) Social Norms and Violence in Childhood*
24.	Maternowska (2017) The Politics of the Age-gender Divide in Responding to Sexual, Physical and Emotional Violence
25.	McTavish et al. (2017) Mandatory Reporting: An Evidence-based Overview and Meta-synthesis of Qualitative Studies
26.	Meinck and Cluver (2017) Disclosure of Physical, Emotional and Sexual Child Abuse, Help-seeking and Access to Abuse Response Services in Three South African Provinces*
27.	Menesini and Salmivalli (2017) Bullying in Schools: The State of Knowledge and Effective Interventions*
28.	Muggah (2017) Measuring Fragility in Cities
29.	Naker (2017) Operational Culture at Schools: An Overarching Entry Point for Preventing Violence against Children at School
30.	Peterman, Neijhoft, Cook, and Palermo (2017) Understanding the Linkages between Social Protection and Child- hood Violence: A Review of the Evidence
31.	Ranford and Slutkin (2017) Seeing and Treating Violence as a Health Issue
32. 33.	Ravi and Ahluwalia (2017) What Explains Childhood Violence? Micro Correlates from VACS Surveys* Rubenstein and Stark (2017) The Impact of Humanitarian Emergencies on the Prevalence of Violence against
34.	Children: An Evidence-based Ecological Framework* Samms-Vaughan & Lambert (2017) The Impact of Polyvictimisation on Children in LMIC: The Case of Jamaica*
34. 35.	Samms-Vaughan (2017) Violence and Early Childhood Development: What Do We Know?
36.	Schmidt (2017) Institutional Violence against Children: How to Cope with the Inevitable and the Unconquerable
37.	Sherr et al. (2017) Child Violence Experiences in Institutionalised/Orphanage Care*
38.	Stöckl, Dekel, Morris, Watts, and Abrahams (2017) Child Homicide Perpetrators Worldwide: A Systematic Review
39.	Vergara (2017) Children Trapped in Fragile Cities: Communities, Organised Crime and the Rule of Law
40.	Villaveces (2017) Access to Means such as Alcohol, Drugs and Firearms and Built Environment Characteristics: Impli cations for Cities with High Rates of Violence
41.	Williams and Davies (2017) Early Childhood Teachers and Children's Curricula and Violence Prevention and Man- agement

^{*}Denotes the selection of commissioned papers appearing in this issue. All other papers are to be made available on the Know Violence in Childhood website: http://www.knowviolenceinchildhood.org/. Versions of some of these are also under submission for broader publication.

The need for an integrated approach to understanding violence is based on increasing recognition that interpersonal violence spills from one setting to another – say from the home to the school, or the school to the community - resulting in what is commonly known as 'poly-victimization' (Leoschut & Kafaar, 2017). Children who witness violence as means to resolve conflicts at home, are more likely to use it in schools and other settings. Similarly, being abused within the home or at school increases children's risk to being victims of violence within the community. Thus, girls who are victims of sexual abuse in the school are also likely to face such abuse in the streets. The rapid uptake of internet use and mobile telephony has added another, virtual, environment in which violence occurs, and emerging evidence points to the overlap between both victimization and perpetration of violence between the online and offline (Bulger & Burton, 2017). While globally the evidence base does not yet allow us to identify the overlap in the experience of the different forms of violence, Clarke et al. (2017) find overlapping experiences of physical, emotional and sexual violence from a study in Uganda, and suggest that about 1 in 4 children experience multiple forms of violence. Studies from South Africa and Jamaica (Leoschut & Kafaar, 2017; Samms-Vaughan & Lambert, 2017) point to the inter-connected nature of types of victimisation and the aggregation of negative effects that can severely impair child development.

Unpacking the age and gender dimensions of violence (Learning Group 1)

Children's experiences of violence vary by age. The exposure to violence in early childhood – both direct (such as child sexual abuse) and indirect (such as growing up in a violent house-hold) – can have longer term impacts on the child, including a later risk of using and/or experiencing violence in adulthood. These associations point to the value of intervening early in violence prevention. This later violence is not inevitable, however. Children's resilience is important, and needs to better understood and nurtured.

The experience of violence can set in as early as pregnancy, with children born of victims facing a higher risk of disability and problems in the child's nervous system and brain. Domestic violence against pregnant women by their partners, spouses and other members of the family is the most prescient risk for the unborn child.

In their systematic review Devries et al. (2017) find that globally, emotional violence from caregivers is the most common form of violence experienced by children across age groups.

Available data for 2–4 year olds across 58 countries show that children within this age group who experienced any violent discipline in the surveyed month ranged from almost 90% in countries such as Algeria, Morocco, Swaziland, Yemen, Cameroon, The Central African Republic and Tunisia to 45% as the minimum level in Panama and Mongolia. Ravi and Ahluwalia (2017) review data for 10,000 children from four countries in Africa that have implemented Violence against Children surveys which corroborate early exposure to violence, often as early as age six.

The age at which children enter late childhood and adolescence varies between societies. As children begin to become more independent and interact with peer groups, they become more susceptible to interpersonal violence. Generally, children in the age groups 10–18 become vulnerable to all forms of violence but the most prevalent form of violence is physical violence for boys and girls by a member of their peer group. Along with physical attacks, this age group sees an increase in fighting between children and sometimes with violent means such as a firearm (UNICEF, 2014).

As children grow older, they are at greater risk of sexual violence, but to a much larger extent for girls. Boys are under-represented in data collection on sexual violence, but available data suggests that they are less vulnerable to sexual violence than girls (Devries et al., 2017), though there is evidence from South Africa, Switzerland and China that this is changing (Optimus Study, 2012, 2013, 2016). As Ellsberg et al. (2017) establish, girls aged 15–18 become vulnerable to physical violence by an intimate partner or spouse and sexual violence in the home. Seventy percentage of girls name their current or former partners or husband as the perpetrator of physical violence against them (UNICEF, 2014).

Gender-based violence (GBV) is a manifestation of patriarchal systems of organising society whereby girls and boys are socialised into differentiated gender roles that place them within unequal structures of power. For certain forms of violence girls are worse off; these include domestic violence, sexual violence, feticide and early marriage. Cultural manifestations of GBV can be seen in society with respect to specific forms of childhood violence such as honour killings, acid attacks, dowry and FGM.

Boys, on the other hand, are at higher risk of experiencing physical violence from their peers, as well as corporal punishment. The normalisation of violence against boys renders invisible the threats they face. For instance, two countries legally permit corporal punishment in schools for boys alone (Gershoff, 2017). Boys entering adolescence are vulnerable to peer group pressure to join gangs and engage in criminal activity. Adolescent boys between 15 and 19 years witness a dramatic increase in their risk of dying by homicide compared to boys aged 10–14 and regional differences are pronounced with adolescents in Latin America and the Caribbean accounting for 4% of all global homicides likely in part due to activities of organised criminal groups, street gangs and access to firearms (UNICEF, 2014).

The widespread abuse children experience is not matched by adequate disclosure and response services. Meinck and Cluver (2017) find that a small proportion of affected children are able to report violence. From a study in South Africa, they find that disclosure when it takes place, is usually to family, teachers and other members of the community, and not to formal services. Where formal services exist, they may not be able to respond in a timely and appropriate way. The lack of adequate and effective response is a further deterrent to reporting, justice and support.

Recognising the synergies between violence experienced by children and women within the home

Violence experienced by children has direct connections with violence against women. Women and girls have shared risk factors. Guedes, Bott, Garcia-Moreno, and Colombini (2016) highlight that children are more likely to be physically abused in homes in which women are victims of IPV, with estimates of the co-occurrence of the two ranging from 18 to 67%. They also find that girls exposed to violence, either as victims or witnesses, are at greater risk of experiencing physical or sexual violence in adulthood and that men abused or neglected as children are significantly more likely to report perpetrating physical or sexual violence against women. The clustering of these two types of violence within families, in part reflects shared risk factors, such as social norms supporting the unequal status of women and children, a tolerance of male dominance and violence as a means to resolve conflict, heavy alcohol use, notions of privacy and stigma, and weak legal sanctions against violence. Maternowska (2017) analyse the historical evolution of the fields of violence against women and violence against children, and argue that they have developed in parallel, resulting in fundamental differences in approaches which inhibit realisation of the potential for accelerating progress towards ending both. For example, there is uncertainty whether children's witnessing of IPV should be reported as part of a mandatory reporting system. As McTavish et al. (2017) highlight, while mandatory reporting can result in positive experiences and outcomes, many negative experiences are also documented, such as harmed therapeutic relationships and child death following removal from their family of origin. Despite such tensions, the synergies between programmes that can end violence against women and children within the home are strong, and many programmes that aim to address one group can have collateral positive impacts on the other, especially where they are designed to take advantage of the common ground.

Violence in schools (Learning Group 2)

School violence can severely hamper a child's ability to learn and adversely affect their development. The negative outcomes associated with school violence can extend well after an actual experience of violence at school (Lester et al., 2017). School children around the world are subject to different forms of violence, at the hands of teachers and authority figures. School teachers often use a variety of methods to inflict punishment for a very diverse, and often innocuous range of student behaviours (Gershoff, 2017). These methods of punishment cause emotional humiliation, physical injury and in rare cases, even death. Evidence further shows that rather than resulting in benefits such as increased learning, corporal punishment negatively impacts intellectual learning. As Gershoff (2017) notes 'if an adult were to be hit with an object such as children are [in schools], it would be considered assault'.

The case for a 'whole school approach' to address all forms of interpersonal violence has never been stronger (Naker, 2017). Violence is facilitated by bystanders, not just the individual perpetrator(s). Menesini and Salmivalli (2017) show how members of a classroom contribute to the dynamics of a violent act, say bullying. They find that the likelihood that vulnerable children become targets of bullying is exacerbated in classrooms characterised by high levels of reinforcing the bully and low levels of defending the victim. Teachers' beliefs and attitudes towards violence are strong determinants of violence in their classrooms. Teachers are powerful culture creators within schools and classrooms, and have a disproportionate influence over what constitutes 'normal' or appropriate behaviour. Teachers' beliefs, as far as they result in inaction, may thus increase the prevalence and frequency of bullying behaviour in the classroom (Menesini & Salmivalli, 2017).

Social and cultural contexts matter too. Just as girls are often more likely to be the victims of sexual assault, Gershoff (2017) documents how in the USA racially black children are more likely to the victims of corporal punishment in schools. The various forms of violence that different children experience is not a coincidence, but rather a result of identity stereotypes that make normal and acceptable certain types of violence against certain types of people. Interventions should be cognizant of, and draw attention to the cultural stereotypes (e.g. race, gender, sexual orientation) that often underpin assumptions relating to the normalisation of violence. This suggests that schools must address inequities in the external environment and address them through fostering greater inclusiveness.

Violence in communities (Learning Group 3)

Most people in the world today live in urban and peri-urban agglomerations with significant variations in resource availability. And while a thin bandwidth of city residents lives in relative prosperity, the vast majority of urban living will be in poorer, informal and fast-growing settlements of the Global South. As more people migrate to cities, their capacity to govern and deliver services, including security, is pushed to the breaking point. The most fragile of these communities can concentrate risks of violence against children. By contrast, more healthy, nurturing and resilient neighbourhoods are essential to preventing and reducing violence over the medium- to long-term. Interventions focused narrowly on at-risk children, on parents or schools cannot be sustained without a wider engagement with the communities where children and families live. They are necessary, but insufficient.

Although gang violence and homicides are largely an urban phenomenon, violence by and against children is by no means inevitable in urban settings. Presenting an overall macro picture of how violence against children has panned out across so-called 'high burden' cities, Muggah (2017) shows that a number of cities worldwide have managed to bring down violence and crime dramatically in relatively short time periods, although he emphasises that this does not happen overnight. Guerra, Shadowen, Reyes, and Serrano-Berthet (2017) reiterate that it is possible to change conditions to make violence less adaptive, but this emphasis on prevention is not universally shared; it needs to be aggressively socialized.

Culture and context matter. Not all communities are equally susceptible to the risks of violence against children. Indeed, as Vergara (2017) suggests, the highest rates of violence in childhood tend to be concentrated in the poorest neighbourhoods, where social cohesion tends to be in lower supply, and alcohol, drugs and firearms are easily accessible. The specific dynamics of violence must be carefully documented before prevention efforts are rolled out.

The gendered dimension of violence must also be understood and addressed. Esquivel and Kaufmann (2017) find that although boys and men are more likely to be involved in lethal violence than girls and women, the highest violence rates against women are observed in settings with the highest violence rates by men.

Other settings of violence

There are many other dimensions of violence that fall outside of the everyday settings where children experience violence, but which are less well studied. For instance, children placed in formal institutions of care, are vulnerable to multiple forms of violence, which are hidden from view. While violence is not inevitable in institutions (Brodie & Pearce, 2017; Sherr, Roberts, & Gandhi, 2017) – the paucity of data monitoring this formally is lamentable and systematic review evidence suggests clear patterns of elevated abuse experience in Institutional care. In some cases, institutions and alternative care environments are sets up to provide an alternative safe space for children who are exposed to a wide range of forms of violence ranging from neglect to abuse and maltreatment (Brodie & Pearce, 2017). Yet reviews show that there are elevated levels of violence experience within institutions as well as negative cognitive effects associated with institutionalisation, especially for younger children, and those who spend long periods in institutions (Sherr et al., 2017). Such cognitive delay can be seen as a form of neglect – especially when it is redressed upon placement outside of the institution. Given the startling finding that the majority of institutionalised children have at least one parent usually alive, the root causes of institutionalisation need to be better understood and addressed.

Similarly, little is known about children in humanitarian emergencies, and the pathways of impact between larger scale social and political breakdown, and violence in the community and home. Rubinstein and Stark (2017) make a strong plea for attention to better research and evidence to ensure that children's rights are protected in contexts of civil and political emergencies. Embleton (2017) points to the neglect of research on street-connected youth for whom violence victimisation is both a driver of leaving home as well as a feature of their street experiences.

Prevention strategies

Violence is often thought of as a series of events categorised according to severity or type. It is tempting therefore to invest in solving the problem sequentially, such as beginning with issuing prohibitions on corporal punishment or investing in anti-bullying campaigns. But violence emerges from a culture or an ecosystem that either nourishes children's wellbeing, or undermines it. Thus it is important to view different forms of violence in an integrated way, identifying those that need to be addressed through universal programmes, and those that are best targeted in high risk communities or at highly vulnerable groups in the population.

Violence is generally misrepresented as a problem only between individuals. This has led to fragmented approaches, which in turn have tended to:

Individualize the problem: There is often a tendency to treat an act of violence such as a rape as a stray occurrence committed by an 'abnormal individual'. This could lead us to ignore serious underlying social factors that condition such unacceptable human behaviours.

Stigmatize the survivor: This is a way of wishing away the problem as the stigma attached to the experience of violence discourages children from reporting incidents of violence, placing emphasis on the individual, yet again, rather than on the social and structural drivers of the violence. Stigma can also be attached to the parents or families of survivors. For example, there is a tendency to blame parents for not being able to bring up their children properly – the idea of 'good' and 'bad' parents – without fully understanding the context and circumstances under which parents find themselves helpless to prevent aggressive or violent behaviour.

Criminalize the response: while laws against violence must be strictly implemented, the challenges particularly arise when young children are themselves perpetrators of violence, especially serious violence. Responses tend to be punitive, wrongly encouraging authorities to punish or arrest children, or place them in reform homes and similar institutions in the hope that such acts will deter these children as well as others from misbehaving.

Medicalize the response to the perpetrator: While this might be necessary in some cases, treating deviant or aggressive behaviour as a mental disorder that can be treated medically and clinically might mean looking at only the tip of the iceberg, ignoring the deeper societal factors that give rise to violent behaviour.

Commercialize the solution: There is the danger of profit-making commercial enterprises beginning to market training modules and other packages for 'teaching' parents, children and caregivers how best to deal with issues of violence – without recognising that such

band-aid solutions do little to address serious underlying factors and guidance on effective interventions should be freely available.

The limitations of punishment

Punitive measures may mean little when the perpetrator is within the circle of care-givers that a child is required to implicitly trust. When the perpetrator of violence against a child is a parent or close relative or friend; or when the perpetrator is a mother battling post-natal depression or experiencing violence herself within an intimate relationship, punitive measures alone are unlikely to be effective in stopping violence.

Towards enabling and effective prevention strategies

Papers in this volume recommend a range of strategies that have been proven to positively impact violence. These reflect some of the lessons generated within the Initiative, which will be documented at length in the Initiative's flagship report (Know Violence, in press).

Start with the home

Coore-Desai, Reece, and Pellington (2017) review the existing evidence on the efficacy of parenting programmes to address violence within the home and find that parenting programmes have the potential to both prevent and reduce the risk of child maltreatment. The importance of parenting programmes as an entry-point to address vulnerabilities and risks within home environments is well-emphasised in global studies. However, there is lack of good evidence from LMICs where the risk of child maltreatment is greatest. Bacchus et al. (2017) argue that there are opportunities for greater synergies between IPV and child maltreatment programmes, which include parenting programmes. Their review identifies six programmes that reported outcomes for both IPV and child maltreatment in low-and middle-income countries. However, the evidence at this stage does not allow us to determine which programme components are responsible for producing the promising outcomes in relation to IPV and child maltreatment. In order to ensure the effectiveness of interventions that may impact on multiple forms of violence, further research is strongly recommended.

Children are less likely to be separated from their families and placed in alternative care (where they can face an increased risk of abuse, abandonment and neglect) when there are coordinated and multi-sectoral responses that ensure children are being raised in protective, stable and healthy families. Programs and strategies to strengthen and support families to prevent unnecessary family separation are being rolled out globally with the aim of protecting children from all forms of risk, including the need to enter into an alternative care arrangement. And, if children are in need of alternative care, the imperative is to ensure that the care they receive is appropriate to their particular needs, and focused on reintegrating them safely into a protective, nurturing environment within their own families of family-based alternative setting.

Overall, for violence prevention to take place at scale, investment in changing social norms that enable the assertion of power over women and children, as well as those that endorse violence as a socially acceptable behaviour, is a necessary strategy. Lilleston, Goldmann, Verma, and McCleary-Sills (2017) provide an overview of the ways in which social norms

change can be brought about. Opportunities for linking ending violence against women with child victimization should be explored and used to maximise results and accelerate the end to violence.

Reform within schools

Given that the operational culture of a school has a significant impact on the normalisation (or disruption) of violent behaviours and practices, a key strategy is to reform the operational culture of schools. The Good Schools Toolkit implemented in Uganda has demonstrated significant positive results in addressing the dynamics of violence, at multiple levels, across multiple stakeholder groups including staff and students, parents and administrators, with the potential to succeed at scale (Naker, 2017). Whole school approaches can help disrupt a culture wherein violent acts are seen as normal by both children and adults. However, and as Lester et al. (2017) find in their systematic review on school violence interventions, for specific forms of violence such as peer aggression, implementing discrete interventions may be more suitable. There are many positive examples of discrete interventions that can address peer aggression, especially working with the perpetrators. Lessons from anti bullying programmes are reviewed by Menesini and Salmivalli (2017). Le et al. (2017) draw attention to the need to link anti-bullying programmes to mental health promotion, and to focus on peer social relationships more broadly, including with the engagement of family members, as relevant. Sherr et al. (2017) show that effective changes in institutions can alleviate violence either by structural and code of conduct interventions or policy changes that avert such placements or expedite onward movement to family type environments.

Build resilient communities

There are many strategies which are proving to explain how cities and urban communities are reducing violence, particularly in Latin America, Central America and the Caribbean, where high levels of homicide and gang violence are concentrated:

- (a) The rule of law must be strengthened to prevent violence. In separate papers, Muggah (2017) and Vergara (2017) emphasise that a major factor in violence in urban settings is the inability of governments at all levels to respond appropriately, creating mistrust, opportunities for youth gangs and organised crime, and vigilante justice.
- (b) A national prevention agenda with local institutionalization. In their papers, Carbonari and Willman (2017) and Muggah (2017) show that while a national agenda sets the stage, effective policies and programs must be implemented locally. The most successful violence prevention efforts are those that benefit from a continuum of strategy across actors and agencies and locally coordinated efforts. To complement this, sustained, committed and coordinated municipal leadership is key.
- (c) Comprehensive approaches work best. Abt (2017) suggests that the most successful interventions are those that combine multiple levels of prevention, suppression, and rehabilitation focused on the specific dynamics of risk within settings and develop an integrated set of services for places where violence is most likely to occur, for people most involved in violence, and for behaviours most associated with violence.

- 12 👄 A. K. SHIVA KUMAR ET AL.
 - (d) Community-based interventions to engage at-risk youth in skill building, vocational training, music, and art during the day and after school show results. Cid (2017) shows how such everyday activities hold significant promise for preventing violence in childhood.

For change to take place, governments should invest in strategies that show promising results. According to Villaveces (2017), interventions that emphasise deterrence (say from alcohol) and targeted community development in high-risk areas with high-risk individuals can show positive returns. But in a separate paper assessing communities' 'readiness' to implement prevention programs, Guerra et al. (2017) emphasise how such interventions can be successful only if backed by adequate resources and implemented with fidelity. Finally, the appropriate sequencing of interventions is critical to their success. Attention is required to the process of design, implementation and monitoring and evaluation. For example, in urban environments with diffused and disorganised crime, focused deterrence, cognitive behavioural therapy, and environmental design measures may be most appropriate. Meanwhile, where the urban environment is associated with organised crime, community building, citizen participation and routine criminal investigation and persecution may be more useful.

Recording, measuring and researching violence in childhood

Collecting information on violence in childhood is not easy. To begin with, very small children may simply not have the capacity to report an incident of violence or abuse. Many may not be able to talk, and even when they can talk, they may not speak up in front of adults. Violence against children tends to go unrecorded – for three main reasons.

- *Fear* Many children are very scared to report violence. They are afraid that if they complain, they themselves may be blamed or punished. Many children are just too scared to report or are fearful of the consequences especially when the complaint is against an adult or a person in a position of authority. Parents too prefer to remain silent particularly if the offender happens to be a family member (as in the case of incest) or an important official (a police officer) as the harassment that could follow might make the situation even more traumatic for the child and the family.
- *Stigma* Many families are afraid of the 'loss of face' or humiliation that the child is likely to experience particularly in societies that do not offer the necessary protection to children. Girls in particular can find sexual violence difficult to talk about in contexts where they are likely to encounter shame and blame for their 'behaviour'. As a result, official statistics on violence in the home tend to be grossly under-reported.
- *Societal acceptance* Many societies consider violence as normal and inevitable. They do not regard certain acts as being violent or abusive causing harm to the child. Corporal punishment, bullying, sexual harassment and violent forms of disciplining may be perceived as being normal, especially when such acts do not result in visible physical injury.
- Inadequate institutional procedures for reporting or recording violence against children The problem of under-reporting is compounded by weaknesses in formal systems for gathering and reporting information on incidents of violence in many countries. Many institutions such as jails and detention centres, schools, or even institutions of

alternate care may not maintain or be even required to maintain records of violence. There may be no officials or persons of authority with whom a child can register a complaint. Even when there are, lack of trust in the designated officials may discourage children and families from reporting cases of violence. Many schools, for instance, may not have trusted mechanisms in place for a child to confidentially and safely report any incident of abuse.

• *Inadequate death registration systems* – In the case of fatal deaths due to violence against children, only if death registration is universal and post-mortem and other systems of investigation and reporting are in place can statistics be termed reliable. However, this is often not the case in many countries. Sexual abuse and extreme forms of bullying, for instance, could drive a child to commit suicide, but the real reasons behind suicide are seldom recorded. Similarly, it is difficult to find out the proportion of homicide deaths among children that could be attributed to violence.

Data on prevalence of violence does not cover all forms of violence. Information is rarely disaggregated by characteristics of perpetrator and victim, such as class, race, ethnicity and religion. While some surveys undertake a gendered analysis, specialised data is often missing on socioeconomic categories of boys or girls who are exploited, or become perpetrators of violence. This includes data on children with disabilities, and intersex and transgender children, amongst others.

The efficacy of data is often questioned because there is no globally accepted definition of violence. And reporting based on recall by a young person is influenced by both perceptions and ambiguity. For instance, the notions of 'good' touch vs. 'bad' touch may vary across societies and might be equally difficult for children to discern objectively.

In addition to completeness and efficacy of information, we need to be cautious about generalising and drawing conclusions using the available data. We need to be careful about drawing conclusions that have a universal applicability. Many risk factors may be similar in different western societies; but evidence is thin for the rest of the world. As has been pointed out, more than 95 per cent of all program evaluations relate to about 12% of the global population (Eisner & Nivette, 2012).

A line in the sand

The Know Violence initiative has set out to draw a line in the sand, marking a moment in global development and research where strides in both knowledge and action culminate in a do-able agenda. Such an agenda must resonate in the corridors of homes, schools communities and governments. Overall the work of the Initiative has highlighted both the wealth of knowledge that is available as well as some of the challenges that need to be addressed by the research and funding communities. These challenges include significant geographical gaps in the knowledge base. Several challenges stem from the lack of use of standardised definitions and methodologies, as well as limitations linked to evaluation research in particular. The most pressing challenge, however, is to move from knowledge to action.

Much work remains ahead, but the series of papers commissioned in the Know Violence initiative indicate that there is very encouraging evidence that can initiate action and investment by governments and the donor community for violence prevention.

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References

- Abt, T. (2017). Towards a framework for preventing community violence among youth. *Psychology, Health & Medicine, 22*(1), 266–285.
- Bacchus, L. J., Colombini, M., Urbina, M. C., Howarth, E., Gardner, F., Annan, J., ... Watts, C. (2017). Exploring opportunities for coordinated responses to intimate partner violence and child maltreatment in low and middle income countries: a scoping review. *Psychology, Health & Medicine*, 22(1), 135–165.
- Brodie, I., & Pearce, J. (2017). Violence and alternative care: a rapid review of the evidence. *Psychology, Health & Medicine, 22*(1), 254–265.
- Brown, L. F., de Graaff, A. M., Annan, J., & Betancourt, T. S. (2017). Breaking cycles of violence: Common elements of interventions for children, adolescents and youth affected by war. Manuscript in preparation.
- Bulger, M., & Burton, P. (2017). Online violence in schools: Cyberbullying and other adverse online experiences. Manuscript in preparation.
- Burton, P. (2017). The role of ICT and social media in preventing violence in schools and institutions. Manuscript in preparation.
- Carbonari, F., & Willman, A. (2017). Learning from Latin America: Policy trends of crime decline in 10 cities across the region. Manuscript in preparation.
- Cid, A. (2017). Interventions using regular activities to engage high-risk school-age Youth: A review of after-school programmes in Latin America and the Caribbean. Manuscript in preparation.
- Clarke, K., Patalay, P., Allen, E., Knight, L., Naker, D., & Devries, K. (2017). Patterns and predictors of violence against children in Uganda: A latent class analysis. Manuscript in preparation.
- Coore-Desai, C., Reece, J. A., & Pellington, S. S. (2017). The prevention of violence in childhood through parenting programmes: a global review. *Psychology, Health & Medicine, 22*(1), 166–186.
- Deanne, A., & Fox, K. (2017). The role of the health sector in violence prevention and management. Manuscript in preparation.
- Devries, K., Knight, L., Petzold, M., Gannett, K. R., Maxwell, L., Williams, A., ... Abrahams, N. (2017). Who perpetrates violence against children? A global systematic analysis of age and sex-specific data. Manuscript in preparation.
- Eisner, M., & Nivette, A. (2012). How to reduce the global homicide rate to 2 per 100,000 by 2060. In Rolf Loeber & Brandon C. Welsh (Eds.), *The future of criminology* (pp. 219–226). New York, NY: Oxford University Press.

- Ellsberg, M., Vyas, A., Madrid, B., Quintanilla, M., Zelaya, J., & Stöckl, H. (2017). Violence against adolescent girls: Falling through the cracks? Manuscript in preparation.
- Embleton, L. (2017). Twice victims of violence: The plight of street-connected children and youth. Manuscript in preparation.
- Esquivel, V., & Kaufmann, A. (2017). Gender dimensions of violent urban contexts: Bridging the gaps in theory and policy. Manuscript in preparation.
- Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., & Koss, M. P. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. *American Journal of Preventive Medicine*, 14, 245–258.
- Gershoff, E. (2017). School corporal punishment in global perspective: prevalence, outcomes, and efforts at intervention. *Psychology, Health & Medicine, 22*(1), 224–239.
- Guedes, A., Bott, S., Garcia-Moreno, C., & Colombini, M. (2016, June). Bridging the gaps: A global review of intersections of violence against women and violence against children. *Global health action*, *9*. Retrieved 2017, January 31 from http://www.globalhealthaction.net/index.php/gha/article/view/31516.
- Guerra, N., Shadowen, N., Reyes, G., & Serrano-Berthet, R. (2017). Community readiness for youth violence prevention: The youth violence prevention readiness and needs scale (YVP-RNS). Manuscript in preparation.
- Hillis, S., Mercy, J., Amobi, A., & Kress, H. (2016). Global prevalence of past-year violence against children: A systematic review and minimum estimates. *Pediatrics*, *137*(3), 1–13.
- Iles-Caven, Y., Ellis, G., & Golding, J. (2017). Polyvictimisation in the UK: Some findings from the ALSPAC study. Manuscript in preparation.
- Indermaur, D. (2001). Young Australians and domestic violence, 195. Canberra: Australian Institute of Criminology.
- Kidwai, H. (2017). School-based violence in South Asia: State of the evidence report. Manuscript in preparation.
- Know Violence. (in press). Flagship report. Retrieved from www.knowviolenceinchildhood.org
- Kyu, N., & Kanai, A. (2005). Prevalence, antecedent causes and consequences of domestic violence in Myanmar. *Asian Journal of Social Psychology*, *8*, 244–271.
- Le, H. T. H., Campbell, M. A., Gatton, M. L., Nguyen, H. T., & Dunne, M. P. (2017). Temporal patterns and predictors of bullying roles among adolescents in Vietnam: a school-based cohort study. *Psychology, Health & Medicine, 22*(1), 107–121.
- Leoschut, L., & Kafaar, K. Z. (2017). The frequency and predictors of poly-victimisation of South African children and the role of schools in its prevention. *Psychology Health & Medicine*, 22(1), 81–93.
- Lester, S., Lawrence, C., & Ward, C. L. (2017). What do we know about preventing school violence? A systematic review of systematic reviews. *Psychology, Health & Medicine*, 22(1), 187–223.
- Lilleston, P., Goldmann, L., Verma, R. K., & McCleary-Sills, J. (2017). Understanding Social Norms and Violence in Childhood: theoretical Underpinnings and Strategies for Intervention. *Psychology, Health & Medicine, 22*(1), 122–134.
- Maternowska, C. (2017). The politics of the age-gender divide in responding to sexual, physical and emotional violence. Manuscript in preparation.
- McTavish, J., Kimber, M., Devries, K., Colombini, M., MacGregor, J., Knight, L., ... MacMillan, H. (2017). Mandatory reporting: An evidence-based overview and meta-synthesis of qualitative studies. Manuscript in preparation.
- Meinck, F., & Cluver, L. (2017). Disclosure of physical, emotional and sexual child abuse, help-seeking and access to abuse response services in three South African Provinces. *Psychology, Health & Medicine*, 22(1), 94–106.
- Menesini, E., & Salmivalli, C. (2017). Bullying in schools: the state of knowledge and effective interventions. *Psychology, Health & Medicine, 22*(1), 240–253.
- Muggah, R. (2017). Measuring fragility in cities. Manuscript in preparation.
- Naker, D. (2017). Operational culture at schools: An overarching entry point for preventing violence against children at school. Manuscript in preparation.

- Optimus Study. (2012). Sexual assault on children and adolescents in Switzerland: Forms, extent and circumstances. Zurich: UBS Optimus Foundation.
- Optimus Study. (2013). Sexual victimization of children and adolescents in China: Final report of the UBS Optimus Foundation. Zurich: UBS Optimus Foundation.
- Optimus Study. (2016). Sexual victimization of children in South Africa: Final Report of the Optimus Foundation Study. Zurich: UBS Optimus Foundation.
- Peterman, A., Neijhoft, A., Cook, S., & Palermo, T. M. (2017). Understanding the linkages between social protection and childhood violence: A review of the evidence. Manuscript in preparation.
- Ranford, C., & Slutkin, G. (2017). Seeing and treating violence as a health issue. Manuscript in preparation.
- Ravi, S., & Ahluwalia, R. (2017). What explains childhood violence? Micro correlates from VACS surveys. *Psychology, Health & Medicine, 22*(1), 17–30.
- Rubenstein, B. L., & Stark, L. (2017). The impact of humanitarian emergencies on the prevalence of violence against children: an evidence-based ecological framework. *Psychology, Health & Medicine, 22*(1), 58–66.
- Samms-Vaughan, M. (2017). Violence and early childhood development: What do we know? Manuscript in preparation.
- Schmidt, V. (2017). *Institutional violence against children: How to cope with the inevitable and the unconquerable.* Manuscript in preparation.
- Sherr, L., Roberts, K. J., & Gandhi, N. (2017). Child violence experiences in institutionalised/ orphanage care. *Psychology, Health & Medicine, 22*(1), 31–57.
- Shonkoff, J. P., Garner, A. S., Siegel, B. S., Dobbins, M. I., Earls, M. F., McGuinn, L., ... Wood, D. L. (2012). The lifelong effects of early childhood adversity and toxic stress. *Pediatrics*, 129, e232–e246.
- Stöckl, H., Dekel, B., Morris, A., Watts, C., & Abrahams, N. (2017). Child homicide perpetrators worldwide: A systematic review. Manuscript in preparation.
- UNICEF. (2014). *Hidden in plain sight A statistical analysis of violence against children*. Retrieved from http://files.unicef.org/publications/files/Hidden_in_plain_sight_statistical_analysis_EN_3_ Sept_2014.pdf
- Vergara, G. J. (2017). Children trapped in fragile cities: Communities, organised crime and the rule of law. Manuscript in preparation.
- Villaveces, A. (2017). Access to means such as alcohol, drugs and firearms, and built environment characteristics: Implications for cities with high rates of violence. Manuscript in preparation.
- Williams, S., & Davies, R. (2017). Early childhood teachers and children's curricula and violence prevention and management. Manuscript in preparation.
- World Health Organisation. (2006). *Preventing child maltreatment: A guide to taking action and generating evidence*. Geneva: WHO and ISPCAN.