

An 18-month-old child was brought to the hospital with a scald on his face. The nursing staff noted that it looked a few days old and questioned the mother carefully. A thorough examination of the child revealed other injuries, including bruises on his back and abdomen. He was also found to be failing to thrive. A skeletal X-ray revealed a number of healing rib fractures. The child was placed in foster care where his growth and development showed excellent catch-up.

Case study
First Meeting on Strategies for
Child Protection
Report on WHO meeting
Padua, Italy

DOMESTIC (OR FAMILY) ABUSE: THE PROBLEM

No child should have to suffer violence in his or her home. A child's first line of protection should be the family. As the World Summit Plan of Action states - For the full and harmonious development of their personality, children should grow up in a family environment, in an atmosphere of happiness, love and understanding. Accordingly, all institutions of society should respect and support the efforts of parents and other caregivers to nurture and care for children in a family environment. Despite their key role in nurturing, supporting and protecting children, families all too often fail to offer this ideal environment.

The World Health Organization (WHO) breaks domestic abuse down into four primary forms:

1. Physical abuse: "That which results in actual or potential physical harm from an interaction or lack of interaction, which is reasonably within the control of a parent or person in a position of responsibility, power, or trust. There may be single or repeated incidents."

2. Sexual abuse: "The involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared, or that violates the laws or social taboos of society. Child sexual abuse is evidenced by an activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person."

This may include, but is not limited to:

- The inducement or coercion of a child to engage in any unlawful sexual activity.
- The exploitative use of a child in prostitution or other unlawful sexual practices.
- The exploitative use of children in pornographic performances and materials.

There is no such thing as a typical sex abuser. The majority, however, are men and relatives or close family friends. They often present kind, concerned and caring attitudes toward children so as to build close relationships with them. This allows them to abuse the child, sometimes for years. They may even have convinced themselves that they are not harming the child. Sex abusers put children under great pressure to keep the abuse a secret. They may use the child's natural fear, embarrassment or guilt as well as threats of punishment. According to National Society for the Prevention of Cruelty to Children (*Protecting Children From Sexual Abuse*), they may:

- Make the child believe that he or she wanted the abuse to happen.
- Threaten or use violence toward the child or someone close to him or her.
- Tell the child its family will get broken up.
- Force children to abuse other children and use older children to exert peer pressure so younger ones will be silent.
- Tell the child that no one will believe him.

3. Neglect: "The inattention or omission on the part of the caregiver to provide for the development of the child in all spheres: health, education, emotional development, nutrition, shelter and safe living conditions, in the context of resources reasonably available to the family or caretakers and causes, or inattention that has a high probability

of causing harm to the child's health or physical, mental, spiritual, moral or social development. This includes the failure to properly supervise and protect children from harm as much as is feasible."

4. Emotional abuse: "Failure to provide a developmentally appropriate, supportive environment, including the availability of a primary attachment figure, so that the child can develop a stable and full range of emotional and social competencies commensurate with her or his personal potential, and in the context of the society in which the child dwells. There may also be acts toward the child that cause or have a high probability of causing harm to the child's health or physical, mental, spiritual, moral or social development. These acts must be reasonably within the control of the parent or person in a relationship of responsibility, trust or power. Acts include restriction of movement, patterns of belittling, denigrating, scapegoating, threatening, scaring, discriminating, ridiculing, or other non-physical forms of hostile or rejecting treatment."

Domestic abuse is prevalent and can cause physical injury as well as emotional scars. Some alarming statistics from around the globe:

- One estimate by Children 1st is that 150,000 children in the United Kingdom are harmed annually by severe physical assaults and approximately 100,000 have a potentially harmful sexual experience.
- A research project in Ukraine shows one in every 56 teens (both genders) has been sexually abused. One in every three girls had experienced sexual demands, one in five had been the object of unwanted petting and one in 10 had been raped. One in seven boys had been sexually abused.
- WHO surveys report that 600,000 children are abused every year in the European Union and estimates that although data is less available in many Central and Eastern European countries and in Central Asian republics, child abuse is also likely to be a significant problem there.
- Results from a UNICEF survey state that around 29% of respondents in Asian countries reported that people hit each other in the home, ranging from Singapore (14%), China (17%) and Mongolia (19%) to PNG (75%). Beating as punishment was reported by 23% and occurred most frequently among boys, younger children and those in rural areas.
- Another UNICEF survey in Europe stated that 60% (representing some 56 million children), reported violent or aggressive behavior in their families. Hitting (16%) is more common in lower income families and is proportionately highest in Central Europe.

COMMUNITY VIOLENCE: THE PROBLEM

Community violence refers to exposure, as a witness or through actual experience, to acts of interpersonal violence perpetrated by individuals who are not intimately related to the victim. *(About Our Kids)*

Results of a UNICEF survey in Europe and Central Asia stated that twice as many children feel unsafe in urban areas (21%) than rural areas (11%). Girls (19%) are more likely to feel unsafe than boys (15%). And 20% of children have a friend or family member who has been the victim of violence. Children who feel unsafe walking

"I worry about my kids being molested, my house being burglarized, my oldest boy being shot," said one U.S. inner city mother. "There's fighting, shooting or cutting someone up outside the house all the time," said another mother. Their children have the same fears: "If someone is shooting, you might get the bullet even if it wasn't meant for you. I'm afraid of being mistaken for someone else and shot at. I'll be a victim just by being there."

About Our Kids

around in their neighborhoods say it is because they have seen fighting, threatening, or suspicious-looking persons loitering (50%); have witnessed violence such as fights, acts of aggression, quarrels or street crime (40%); or because of neighborhood problems such as poor street lighting, heavy traffic and dangerous dogs (20%).

In fact, some studies cited by Future of the Children even draw parallels between children growing up in inner-city neighborhoods and those living in war zones. The statistics are quite alarming. Homicide is the fourth-leading cause of death for children ages 1 through 4, third for youth ages 5 through 14, and second for persons ages 15 through 24.

In addition, about 4 million adolescents have been victims of serious physical assault, and 9 million have witnessed serious violence during their lifetimes. In Miami, Florida, more than 90 percent of high school students have witnessed community violence and 44 percent have been a victim of a violent crime. In Richmond, Virginia, 88 percent of children in one neighborhood had heard gunfire near home and 25 percent had seen someone killed.

A UNICEF survey in the Western Pacific region stated that about 1,000 children reported having been the victim of either robbery or assault (10% for each). The highest incidence of robbery is in Mongolia (39%), Philippines and Cambodia (27%), commonly reported in urban areas. Reported assault is very high in Cambodia (56%), experienced predominantly by boys.

“Children deprived of a family environment have the right to special protection, assistance and alternative care.”

We The Children

DEVELOPMENTAL IMPACT OF DOMESTIC ABUSE & COMMUNITY VIOLENCE

The spectrum of abuses faced by children in the family or community ranges from ill treatment in institutions to violence in the family, from child trafficking to child bonded labor. The vulnerability of children to such abuses often depends on other aspects of their identity, such as gender, ethnicity or economic status. This is a powerful reminder of the indivisibility of human rights. The denial of one set of rights leads to the abuse of others.

Research has demonstrated repeatedly that the impact of domestic and community violence on child development is devastating. Some key findings:

Even infants and toddlers are gravely affected. Studies show that infants and toddlers who witness either violence in the community or in the home show excessive irritability, immature behavior, sleep disturbances, emotional distress, fear of being alone and regression in toileting and language. Exposure also interferes with the normal tendency toddlers have to explore their environment. Some studies even have noticed symptoms in toddlers that may indicate post-traumatic stress disorder. (*Future of the Children*)

Witnessing violence has a detrimental effect on a child’s perspective on the world.

Research has shown that children who witness community violence are likely to develop a view of the world as hostile and dangerous. Those who are exposed to multiple forms of violence are more at risk of developing psychological difficulties than those exposed to only one violent event.

Children who are victims of domestic violence are more likely to become delinquent.

A comparison of delinquent and non-delinquent youth in the United States found that the biggest difference between the two groups was that the delinquent youth had a history of exposure to family violence. A Ukrainian study showed that more than half of rapists

came from families where cruel and tough education took place, and that about one-quarter of all rapes were committed by someone who himself had been raped.

Sexual abuse of children places them at greater risk of later sexual problems. A study in New Zealand indicated that adults who were abused by someone close to them as children also tended to be more insecure about relationships and were more likely to be divorced. A clear pattern of studies also links a history of child sexual abuse with higher rates in adult life of depressive symptoms, anxiety symptoms, substance abuse disorders, eating disorders, unwanted pregnancy, promiscuity and post-traumatic stress disorders. (*U.S. National Clearinghouse on Child Abuse and Neglect*)

Abuse and violence produce aggressive children and eventually aggressive adults. Children learn what they see. Those who grow up in violent homes often see aggression as the only way to solve disputes. They also learn that the person who loves you the most hits you the most. (*National Network for Child Care*) Growing up in a violent home can increase the odds that the child will suffer and/or commit violence as adults. Boys who witness domestic violence are more likely to batter their female partners as adults than are boys raised in nonviolent homes. Adolescents exposed to violence, especially chronic community violence, tend to be highly aggressive and act out and show high levels of anxiety, behavioral problems, school problems, truancy and revenge seeking. In some cases, these teens show symptoms of post-traumatic stress disorder similar to those of soldiers returning from war. (*Future of the Children*)

Victims of domestic and community violence are more likely to suffer from mental illness and substance abuse. Child abuse is widely regarded as a cause of mental health problems and lessened ability to function successfully in adulthood. In school-age children, studies show a link between exposure to violence and depression. Research also shows that children exposed to violence tend to have trouble concentrating and sleeping and may be slow to learn how to master their environment. Studies of children ages 6 to 10 in Washington, D.C., and ages 9 to 12 in New Orleans, LA, showed a strong link between witnessing violence and nightmares, fear of leaving the home, and a numbing of affect. Other studies show that as children age, those who have been abused are more likely to have academic problems in schools, commit crimes, experience emotional problems and abuse alcohol or drugs. (*Future of the Children*) Finally, children who witness abuse in their homes may suffer from anxiety, guilt, language problems, developmental delays, hearing and speech problems, withdrawal and stress-related physical ailments, such as headaches, ulcers and rashes.

DOMESTIC ABUSE AND COMMUNITY VIOLENCE: STRATEGIES FOR SUCCESSFUL INTERVENTIONS

Many now are recognizing that a supportive and confiding relationship with parents and parental figures, especially mothers, may modify the individual's experience after the abuse and can lessen its long-term effects, as may academic, social or athletic successes at school.

Research strongly suggests that domestic abuse and community violence have an intergenerational cycle; those who witnessed or were victims as children are more likely to perpetrate it as adults. As a result, prevention and early intervention are essential, and a wide range of programs have been implemented at the level of the individual child, the parents or and the full community. Some programs focus on children who already have been traumatized or victimized by violence, others on high-risk youths and others on all children. The goals of any program should be to help

"A child's first line of protection should be the family."

We The Children

children learn social ways to deal with their frustrations, improve their self-esteem, and negotiate conflicts nonviolently.

Some research, pilot programs and models are described below so that the successful strategies may be more widely replicated:

A National (Australian) Audit of Child Abuse Prevention Activity: This audit reported that many programs aimed at preventing family violence were adopting a system reform approach, focusing on improving communications between agencies. Findings from some other studies, however, did indicate that poor inter-agency communication results to some children still being left in homes that were unsafe. The Australian Institute for Family Studies strongly recommends better education for workers, with an emphasis on cross service sector communication.

The Institute also is urging a change of focus in interventions where the man abuses the wife, the children or both. In some of these interventions, support systems have failed to ensure the mother and children's safety. The Institute suggests several approaches that might help change this, including a hierarchy of priorities:

1. Safety and protection of the children;
2. Empowerment and safety of women; and
3. Responsibility and accountability of the violent adult.

The Institute further suggests those child protective agencies, rather than the mother, apply for intervention orders to remove the violent adult from the home. Such a method would make retaliation against the mother less likely. In addition to removing the batterer, child protective services should provide adequate support and protection to the woman and children afterward.

The Child Witness to Violence Project at Boston Medical Center: This program for young children adapted from models for treating PTSD. It encourages children to discuss the traumatic events they have experienced, identify feelings and learn to manage symptoms. The program also involves teachers and other caregivers in the treatment process at both assessment and intervention phases. The positive treatment outcomes generated have resulted in the funding of replication programs in Massachusetts.

The Child Trauma Research Project at San Francisco General Hospital: This program employs a psychodynamic approach in treating preschooler-mother pairs affected by domestic violence. It provides a forum to help the pair deal with the effects of the violence while strengthening their ability to function as a healthy unit. Early results of an evaluation of the program indicate that mother-child relationships improved, individual child functioning improved and children's symptoms decreased.

Partnerships Against Domestic Violence: Endorsed by the Australian Heads of Government in 1997, this strategy supports piloting new approaches to violence prevention, enhancing existing projects, sharing knowledge across service sectors, and developing and replicating best practice initiatives. It identified six priority areas including:

- Working with children and young people to break the cycle of violence between generations;
- Working with adults to break patterns of violence; working with victims and violent men;

“No child ever started a war. Yet every time a war breaks out, children, as the most vulnerable members of society, suffer the worst. They are forced to live in fear and to give up their education. Some lose their lives; some lose family members. All lose their innocence.”

Global Movement for Children

- Working with the community to educate against violence;
- Gaining protection for women and children through law enforcement;
- Providing information and best practices; and
- Helping people in remote or rural areas.

The United Nations states within its report, *We The Children: Meeting the Promises of the World Summit for Children*, that important measures are now being taken worldwide to counter different kinds of domestic and community abuse, such as awareness programmes for children, telephone hotlines and shelters for children who are fleeing abuse; legal reform, including heavier penalties for those responsible; obligatory reporting of abuse by professionals; restrictions on the employment of convicted offenders; new procedures to protect child victims from the ordeal of giving testimony directly in criminal investigations and trials; and sensitization of police and prosecutors. All comprehensive programmes include a component designed to provide victims with psychosocial and, if necessary, medical assistance. Many governments cooperate closely with NGO's in this area.

WAR AND REFUGEES—THE PROBLEM

“In 1995, I was abducted and taken captive by the Lord’s Resistance Army rebels led by Joseph Kony. The rebels took us to Sudan, and on our way I saw many children, who could not walk because their feet were swollen, killed by the rebels. They gave us one boy who was a government soldier to kill and we did kill him. The rebels abducted 30 of us from my village. During training and fighting we had no food to eat or water to drink. We went for days without food. Once in a while we ate boiled sorghum with weed leaves as the sauce. Once, I was forced to drink my own urine and I gave some to my friend who was dying of thirst”.

War

Armed conflicts around the world are shattering the lives of children. Throughout the world, children are all too often forced into military service, displaced from their homes, subjected to rape and other violence, witnessed violence against others, and/or forced into refugee camps. War inflicts severe psychological wounds that can scar children for life. Some children may suffer with post-traumatic stress disorder, a psychological wound that interrupts the development process. For children under three years old, severe trauma scars emotionally, but also can permanently change the brain chemistry.

The international community has long recognized that children have no place in wars, yet they are still major victims. As a result of war and armed conflicts between 1985 and 1995, more than 2 million children were slaughtered, 6 million were seriously injured or permanently disabled, and 12 million were left homeless, according to a UNICEF report on the State of the World’s Children. The trauma experienced by children can include:

- (1) physical injury or death of themselves or a loved one,
- (2) rape, or other forms of torture, and
- (3) horrific experiences as a child soldier.

“Two soldiers ... threw me in a tub which had no water in it. I got up and ran to my mother at the gate. I held my mum and asked her not to allow them to take me. They snatched me away again. I was put against the wall and one of the soldiers kicked me with his knee in my stomach. I screamed. Then they took me behind their compound. There was a coconut tree. They tied my legs with rope and pulled me upside down. While hanging, I was beaten with netted wire about six times. Then they let me down and tied my hands. I was beaten with sticks from the tulip tree.”

Testimony of Rajah
11-year-old Tamil boy
1997 to Amnesty International