VIOLENCE PREVENTION

IN SCHOOLS & OTHER SETTINGS

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GLOBAL STATUS REPORT ON PREVENTING VIOLENCE AGAINST CHILDREN 2020

MAGNITUDE > **CONSEQUENCES**

1 out of **2** children or **1 billion children** suffer some form of violence each year

Nearly 3 in **4** children or **300 million children** aged 2–4 years regularly suffer physical punishment and/or psychological violence at the hands of parents & caregivers

1 in **4** children aged under 5 years live with a mother who is a victim of intimate partner violence

1 in **3** students aged 11–15 years suffered bullying in the past month:

Boys 35%
Girls 30%

1 in **3** students aged 13–15 years were in a physical fight in the past year:

Boys 45%
Girls 25%

120 million girls and young women under 20 years of age have suffered some form of forced sexual contact

40 150 deaths per year in children 0–17 years of age:

Boys 28 160
Girls 11 990

Children aged 11–15 years who **are bullied at school are:**

13% less likely to graduate from school

Adults who experienced 4 or more Adverse Childhood Experiences (including physical, sexual & emotional abuse) **are:**

7X more likely to be involved in interpersonal violence as a victim or perpetrator

30X more likely to attempt suicide

Adults who were physically & sexually abused as children are:

Men more likely to perpetrate physical & sexual intimate partner violence **14X**

Women more likely to suffer physical & sexual intimate partner violence **16X**

Economic costs per year of the lifetime consequences of violence against children:

USA, child maltreatment only: **US$ 228 billion**

South Africa, all forms of violence against children: **US$ 13.5 billion** [4.3% of GDP]

World Health Organization

unicef for every child

UNESCO

OFFICE OF THE SPECIAL REPRESENTATIVE OF THE SECRETARY-GENERAL ON VIOLENCE AGAINST CHILDREN

End Violence Against Children

http://www.who.int/global-status-report-on-violence-against-children-2020

GLOBAL STATUS REPORT ON PREVENTING VIOLENCE AGAINST CHILDREN 2020

1 out of **2** children or **1 billion children** suffer some form of violence each year

The technical package **INSPIRE:** **SEVEN STRATEGIES FOR ENDING VIOLENCE AGAINST CHILDREN** identifies what works to prevent & respond to violence against children

VIOLENCE REDUCTIONS OF 20–50% have been achieved by well-designed INSPIRE programmes

The COVID-19 outbreak has exacerbated the need to implement the INSPIRE strategies widely

KEY RECOMMENDATIONS

Promote good governance & coordination, through a clearly mandated & appropriately resourced lead agency

Prioritize data collection & national action plans

Ensure adequate funding, particularly in low-income settings

Strengthen legislative frameworks, ensuring universal legal protections for children, laws that meet best practice & adequate enforcement

Use evidence to enhance the effectiveness of prevention & service programming

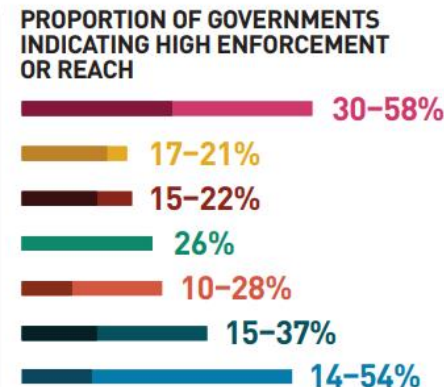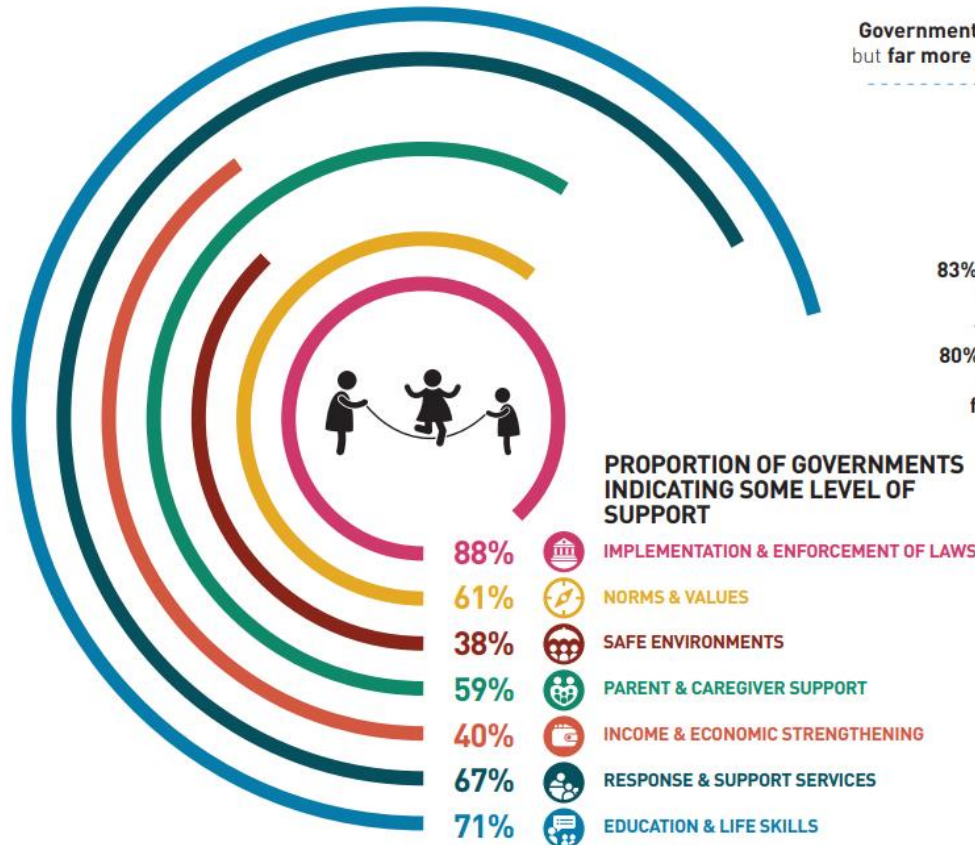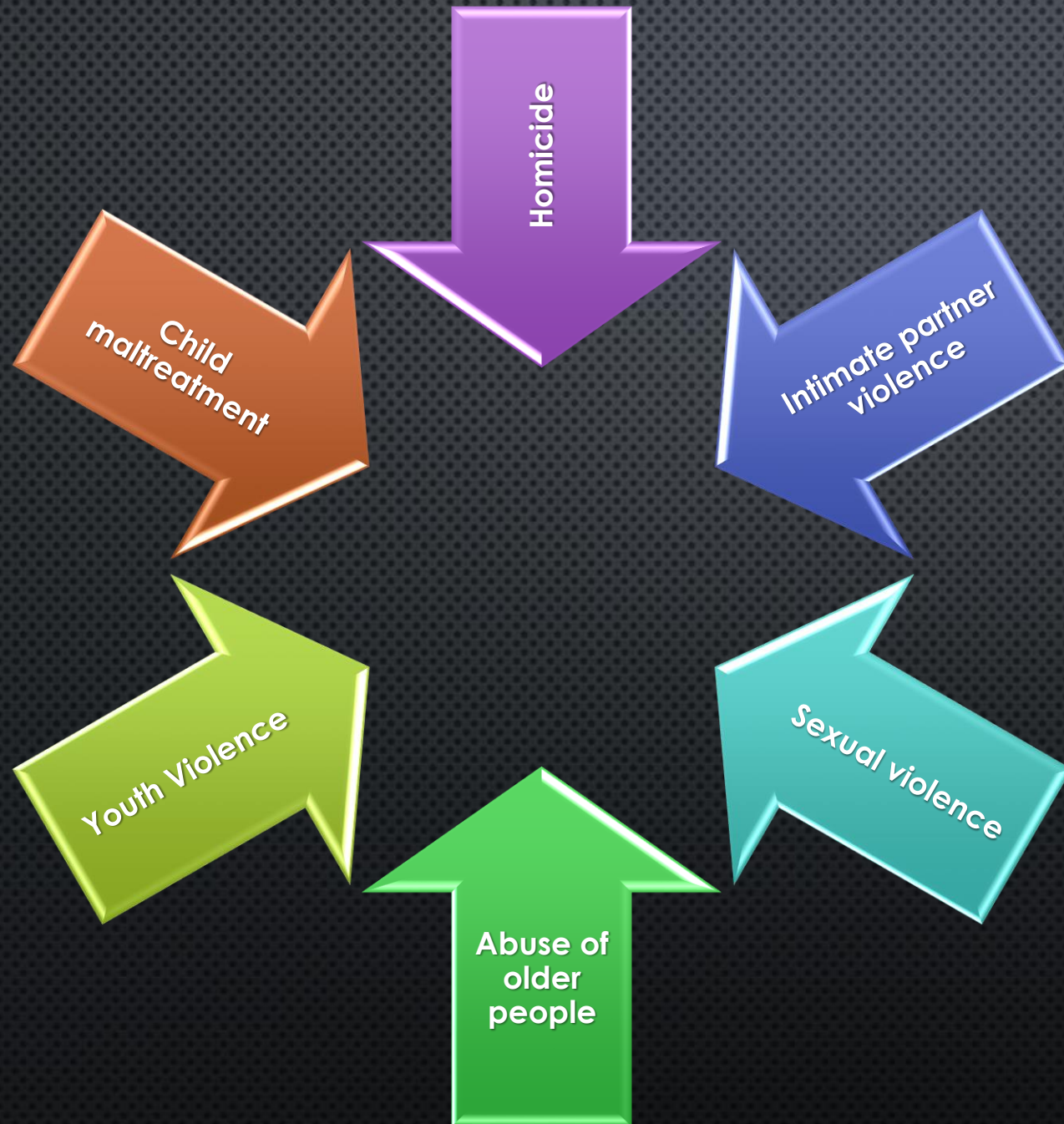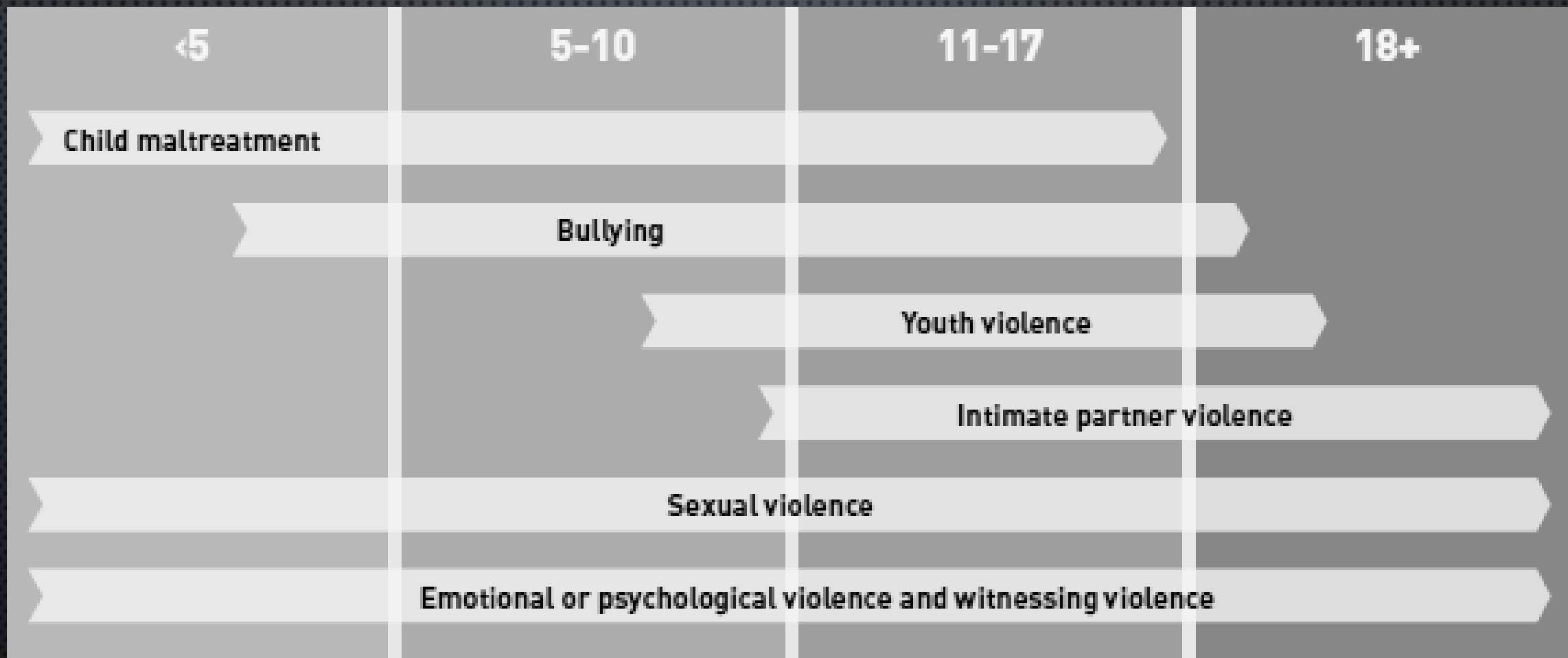## KEY FINDINGS OF THE GLOBAL STATUS REPORT FROM 155 COUNTRIES

Government support for INSPIRE approaches exists in many countries, but **far more is needed** to ensure programmes reach all who need them.

INSPIRE approaches with a **clearly defined lead agency** were most often considered to have a **high level of reach.**

Few approaches considered to have high reach are implemented in low-income countries.

83% of countries have nationally representative survey data, but **only 21% use these to set prevention baselines & targets.**

80% of countries have a national action plan to prevent violence against children, but **only one fifth has plans that are fully funded.** Few plans had clear goals, sector leads or costings.

PROPORTION OF GOVERNMENTS INDICATING SOME LEVEL OF SUPPORT

		PROPORTION OF GOVERNMENTS INDICATING HIGH ENFORCEMENT OR REACH
88%	IMPLEMENTATION & ENFORCEMENT OF LAWS	30–58%
61%	NORMS & VALUES	17–21%
38%	SAFE ENVIRONMENTS	15–22%
59%	PARENT & CAREGIVER SUPPORT	26%
40%	INCOME & ECONOMIC STRENGTHENING	10–28%
67%	RESPONSE & SUPPORT SERVICES	15–37%
71%	EDUCATION & LIFE SKILLS	14–54%

World Health Organization

unicef for every child

OFFICE OF THE SPECIAL REPRESENTATIVE OF THE SECRETARY-GENERAL ON VIOLENCE AGAINST CHILDREN

End Violence Against Children

http://www.who.int/global-status-report-on-violence-against-children-2020

VIOLENCE as public health problem

Homicide

Child maltreatment

Intimate partner violence

Youth Violence

Abuse of older people

Sexual violence

Types of violence against children

<5	5-10	11-17	18+
Child maltreatment			
	Bullying		
		Youth violence	
		Intimate partner violence	
Sexual violence			
Emotional or psychological violence and witnessing violence			

YOUTH VIOLENCE & ITS CONSEQUENCES

Youth violence refers to violence that occurs among individuals aged 10–29 years who are unrelated and who may or may not know each other. It generally takes place outside of the home. It includes a range of acts from bullying, both offline and online, and physical fighting, to more severe sexual and physical assault, to homicide.
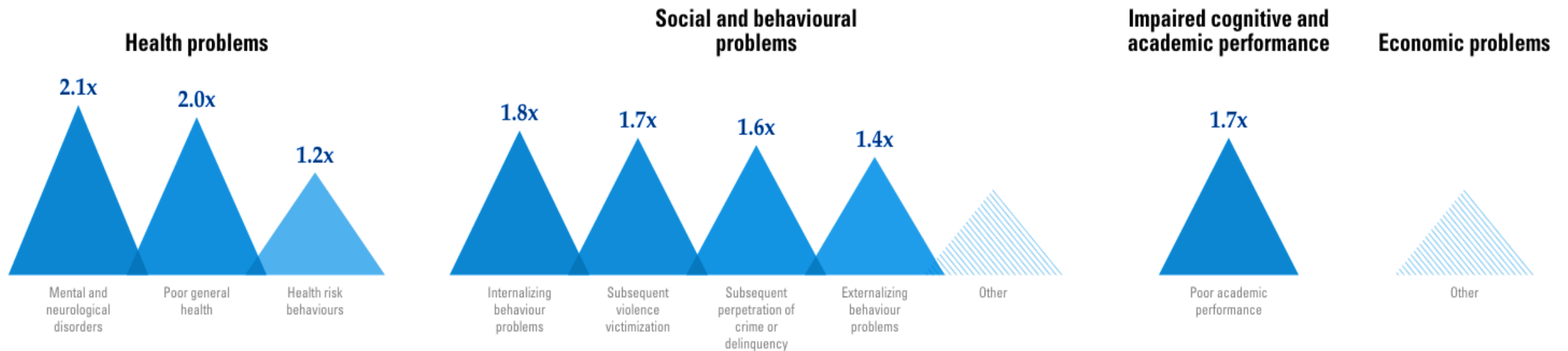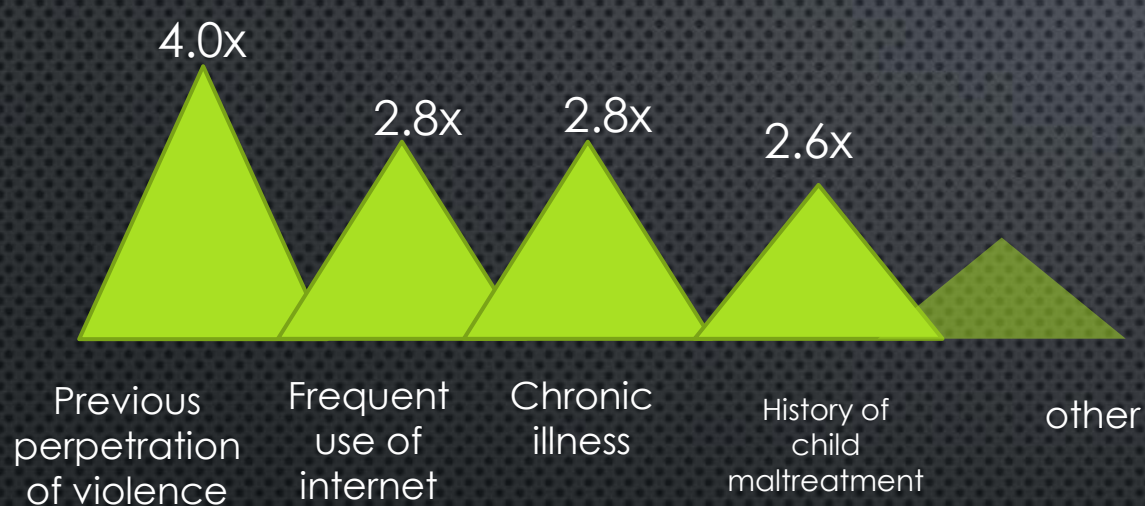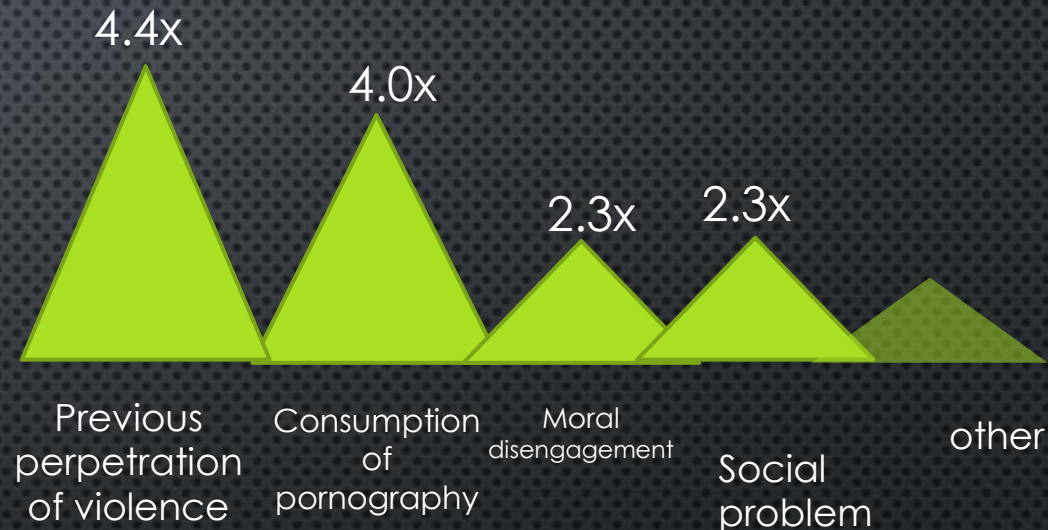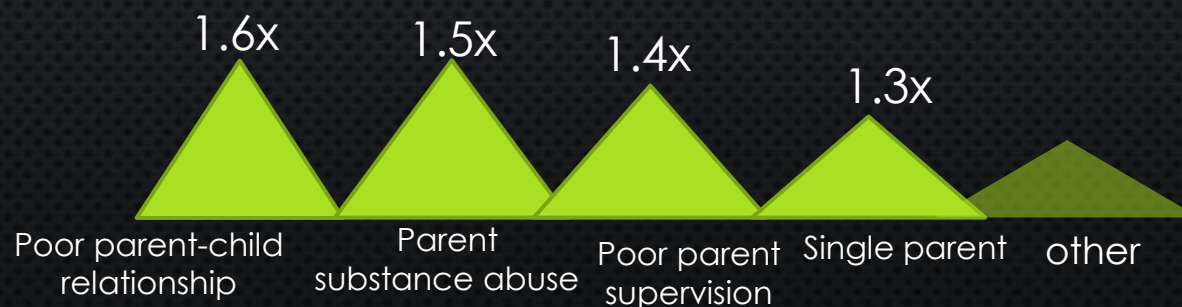
YOUTH VIOLENCE PREVENTION STRATEGIES AND ITS EFFECTIVENESS (FROM 8419 STUDIES)

Interventions	Range of Effectiveness	Sample size	No. of studies
School-based life/social skills programmes	-0.19 – 0.68	4 204	8
School-based bullying prevention	**-2.26 – 6.36**	**1 727 654**	**607**
Institutional prevention programmes	**-0.51 – 4.10**	**7 899**	**37**
After-school activities	0.02 – 0.14	2 052	4
Educational intervention	**0.42 - 0.42**	**69**	**1**
Parenting programmes	**0.07 – 1.50**	**2 858**	**4**
Peer mediation programmes	0.25 – 0.40	1 896	2
Reducing alcohol use and access	0.25 – 0.25	626	1
Bystander intervention programme	0.10 -0.16	8 264	2
Psychological/mental health interventions	0.40 – 0.40	111	1
Poverty de-concentration	**0.83 – 0.83**	**261**	**1**
Multicomponent programmes	-0.37 – 0.41	6 142	7

YOUTH VIOLENCE RESPONSE STRATEGIES

Interventions	Range of Effectiveness	Sample size	No. of studies
Sexual offender treatment programmes (only WHO African and the Americas regions)	-1.25 – 2.10	596	15
Therapeutic approaches for youth violence perpetrators (only WHO European and the Americas regions)	-0.33 – 2.60	11 517	55
Intimate partner violence perpetrator programmes (only WHO America region)	0.07 – 1.53	698	4
Multicomponent programmes	0.54 – 0.56	231	3
(only WHO America region)			

WHO's approach to prevent violence

WHO's violence prevention work is based on the following approaches and principles:

- SOCIAL ECOLOGICAL MODEL
- PUBLIC HEALTH APPROACH
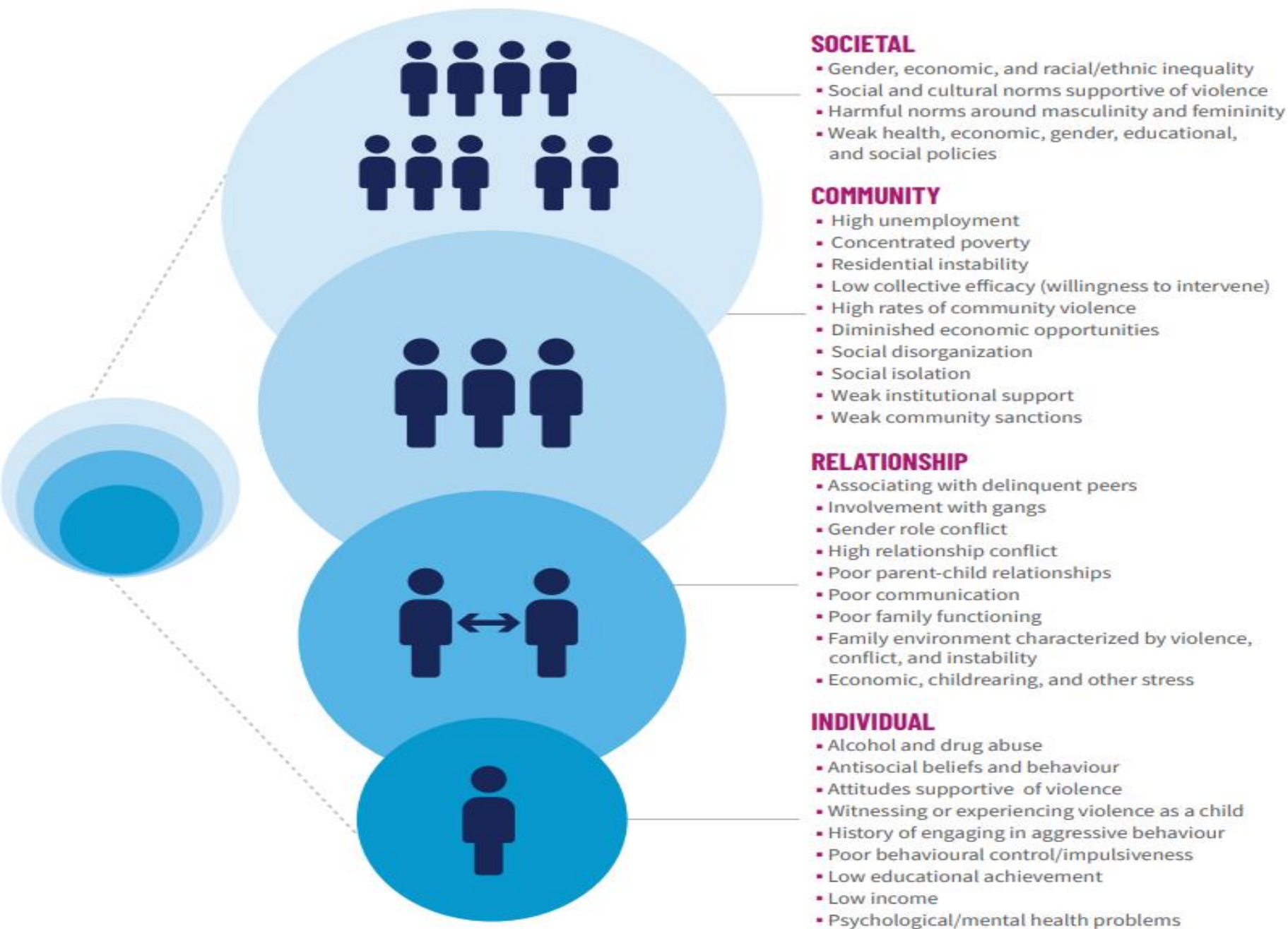- EVIDENCE-BASED PRACTICE
- HUMAN RIGHTS
- LIFE COURSE APPROACH
- MULTISECTORAL APPROACH

Social ecological model for understanding and preventing violence

World Health Organization
REGIONAL OFFICE FOR South-East Asia

SOCIETAL
- Gender, economic, and racial/ethnic inequality
- Social and cultural norms supportive of violence
- Harmful norms around masculinity and femininity
- Weak health, economic, gender, educational, and social policies

COMMUNITY
- High unemployment
- Concentrated poverty
- Residential instability
- Low collective efficacy (willingness to intervene)
- High rates of community violence
- Diminished economic opportunities
- Social disorganization
- Social isolation
- Weak institutional support
- Weak community sanctions

RELATIONSHIP
- Associating with delinquent peers
- Involvement with gangs
- Gender role conflict
- High relationship conflict
- Poor parent-child relationships
- Poor communication
- Poor family functioning
- Family environment characterized by violence, conflict, and instability
- Economic, childrearing, and other stress

INDIVIDUAL
- Alcohol and drug abuse
- Antisocial beliefs and behaviour
- Attitudes supportive of violence
- Witnessing or experiencing violence as a child
- History of engaging in aggressive behaviour
- Poor behavioural control/impulsiveness
- Low educational achievement
- Low income
- Psychological/mental health problems

Social ecological model

EVIDENCE-BASED PRACTICE

Violence prevention and response strategies and interventions must be based on scientific evidence, taking cultural considerations into account.

HUMAN RIGHTS

Violence prevention and response strategies and interventions must be compliant with relevant conventions, including the Convention on the Rights of the Child and the Convention on the Elimination of Discrimination against Women and other international and regional human rights instruments.

LIFE COURSE APPROACH

Policies, plans and interventions for preventing and responding to violence need to take account of health and social needs at all stages of the life course, including infancy, childhood, adolescence, adulthood and older age.

MULTISECTORAL APPROACH

A comprehensive and coordinated response for preventing and responding to violence requires partnership and collective action with multiple public sectors such as health, education, employment, justice, housing, social development and other relevant sectors, as well as civil society organizations, faith-based organizations, academia and the private sector, as appropriate to the country situation.

INSPIRE:
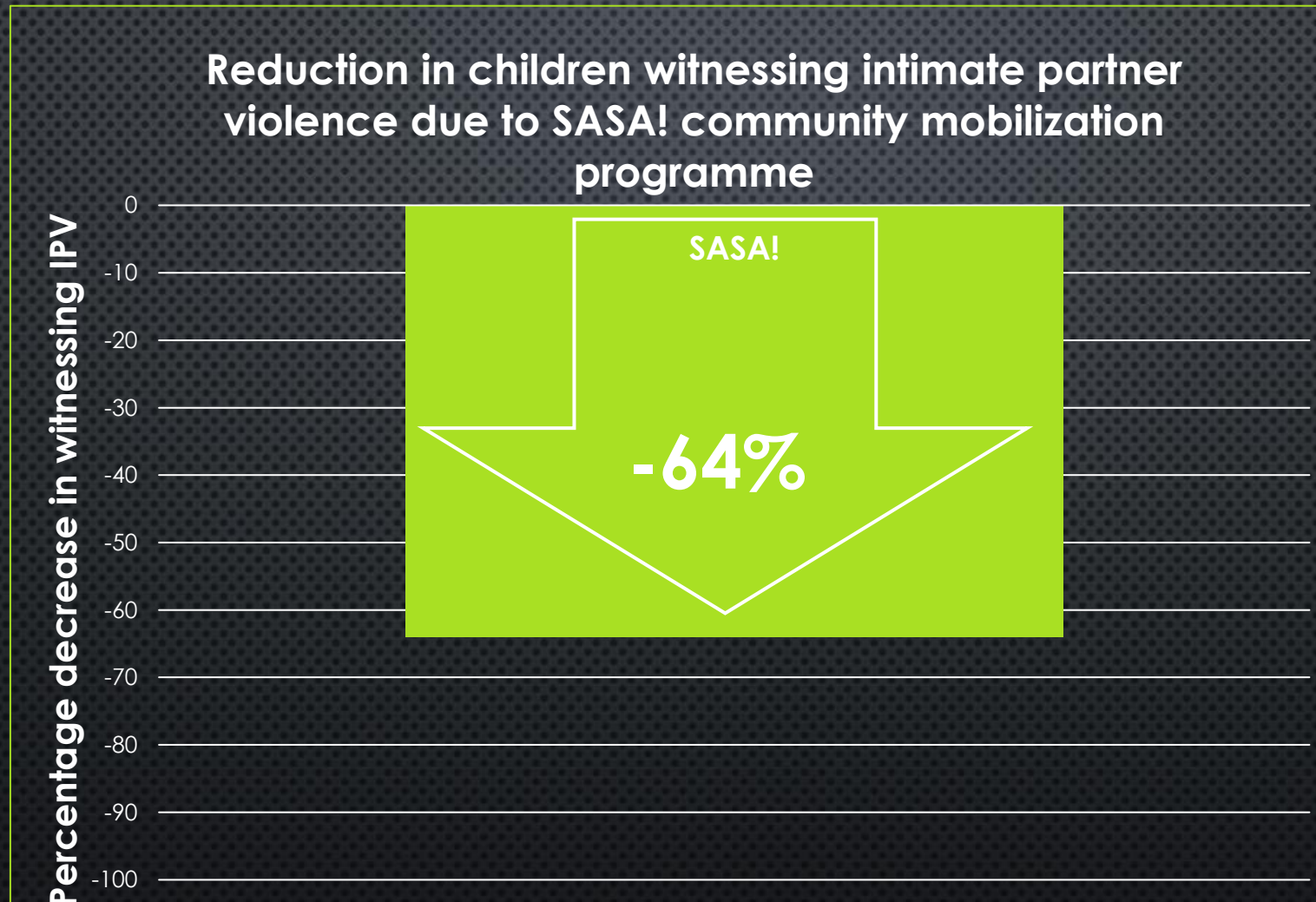## Seven strategies for ending violence against children

THE INSPIRE TECHNICAL PACKAGE

Strategy	Approach	Sectors	Cross-cutting activities
Implementation and enforcement of laws	• Laws banning violent punishment of children by parents, teachers or other caregivers • Laws criminalizing sexual abuse and exploitation of children • Laws that prevent alcohol misuse • Laws limiting youth access to firearms and other weapons	Justice	Multisectoral actions and coordination
Norms and values	• Changing adherence to restrictive and harmful gender and social norms • Community mobilization programmes • Bystander interventions	Health, Education, Social Welfare	
Safe environments	• Reducing violence by addressing "hotspots" • Interrupting the spread of violence • Improving the built environment	Interior, Planning	
Parent and caregiver support	• Delivered through home visits • Delivered in groups in community settings • Delivered through comprehensive programmes	Social Welfare, Health	
Income and economic strengthening	• Cash transfers • Group saving and loans combined with gender equity training • Microfinance combined with gender norm training	Finance, Labour	
Response and support services	• Counselling and therapeutic approaches • Screening combined with interventions • Treatment programmes for juvenile offenders in the criminal justice system • Foster care interventions involving social welfare services	Health, Justice, Social Welfare	Monitoring and evaluation
Education and life skills	• Increase enrolment in pre-school, primary and secondary schools • Establish a safe and enabling school environment • Improve children's knowledge about sexual abuse and how to protect themselves against it • Life and social skills training • Adolescent intimate partner violence prevention programmes	Education	

INSPIRE:
seven strategies for ending violence against children

- IMPLEMENTATION AND ENFORCEMENT OF LAWS
- NORMS AND VALUES
- SAFE ENVIRONMENTS
- PARENT AND CAREGIVER SUPPORT
- INCOME AND ECONOMIC STRENGTHENING
- RESPONSE SERVICES
- EDUCATION AND LIFE SKILLS

# INSPIRE EVIDENCE: NORMS AND VALUES

Reduction in children witnessing intimate partner violence due to SASA! community mobilization programme

SASA!

-64%

Percentage decrease in witnessing IPV

0
-10
-20
-30
-40
-50
-60
-70
-80
-90
-100

Kyegombe N, Abramsky T, Devries K, et al.(2015). What is the potential for interventions designed to prevent violence against women to reduce children's exposure to violence? Findings from the SASA! Study, Kampala, Uganda. Child Abuse & Neglect, Volume: 50, Page(s): 128-140]
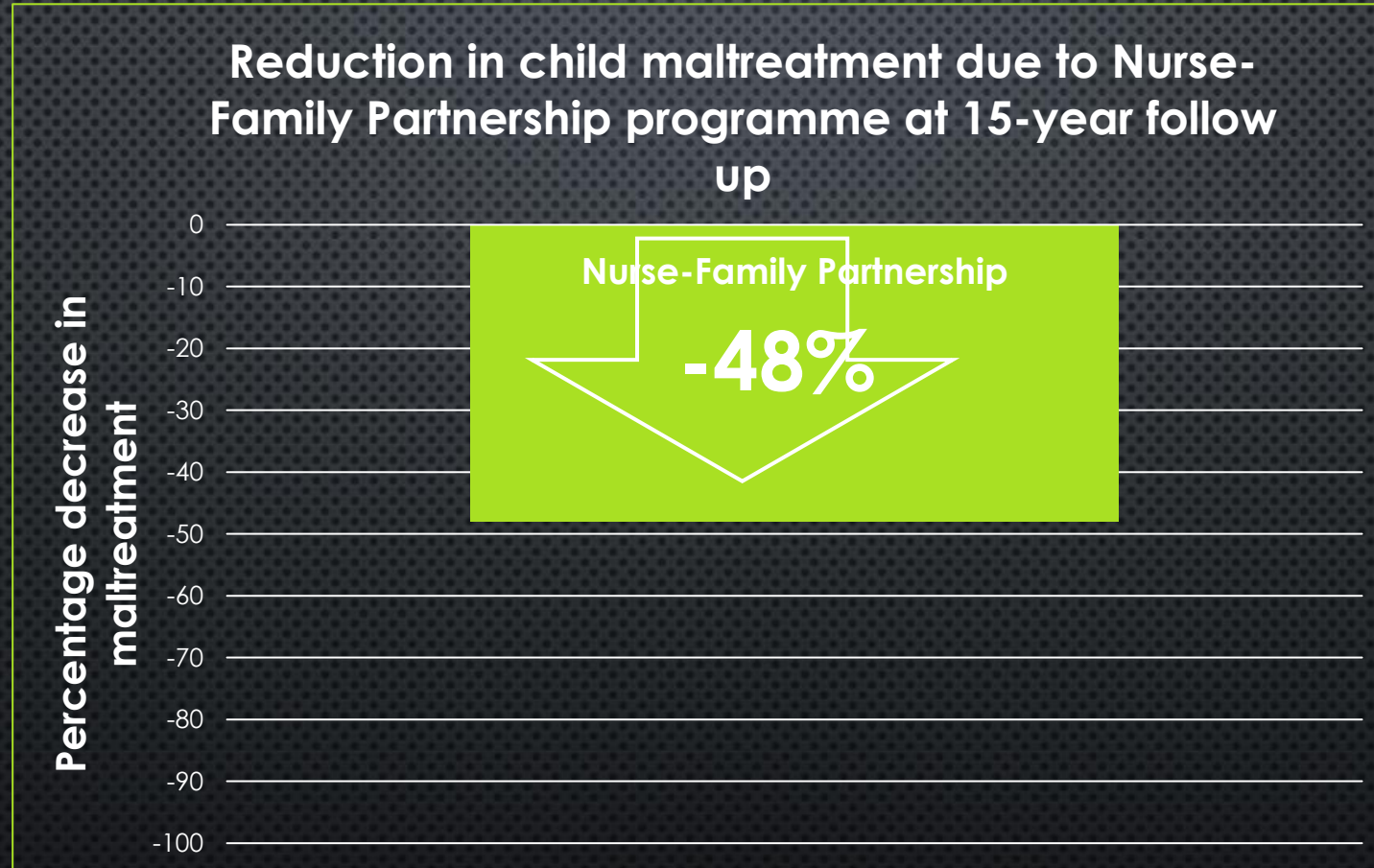
INSPIRE EVIDENCE: SAFE ENVIRONMENTS

Reduction in violence-related injuries following implementation of Cardiff approach to hotspot intervention

Hospital admissions **-42%**

Police-recorded woundings **-32%**

Percentage decrease in violence-related injuries
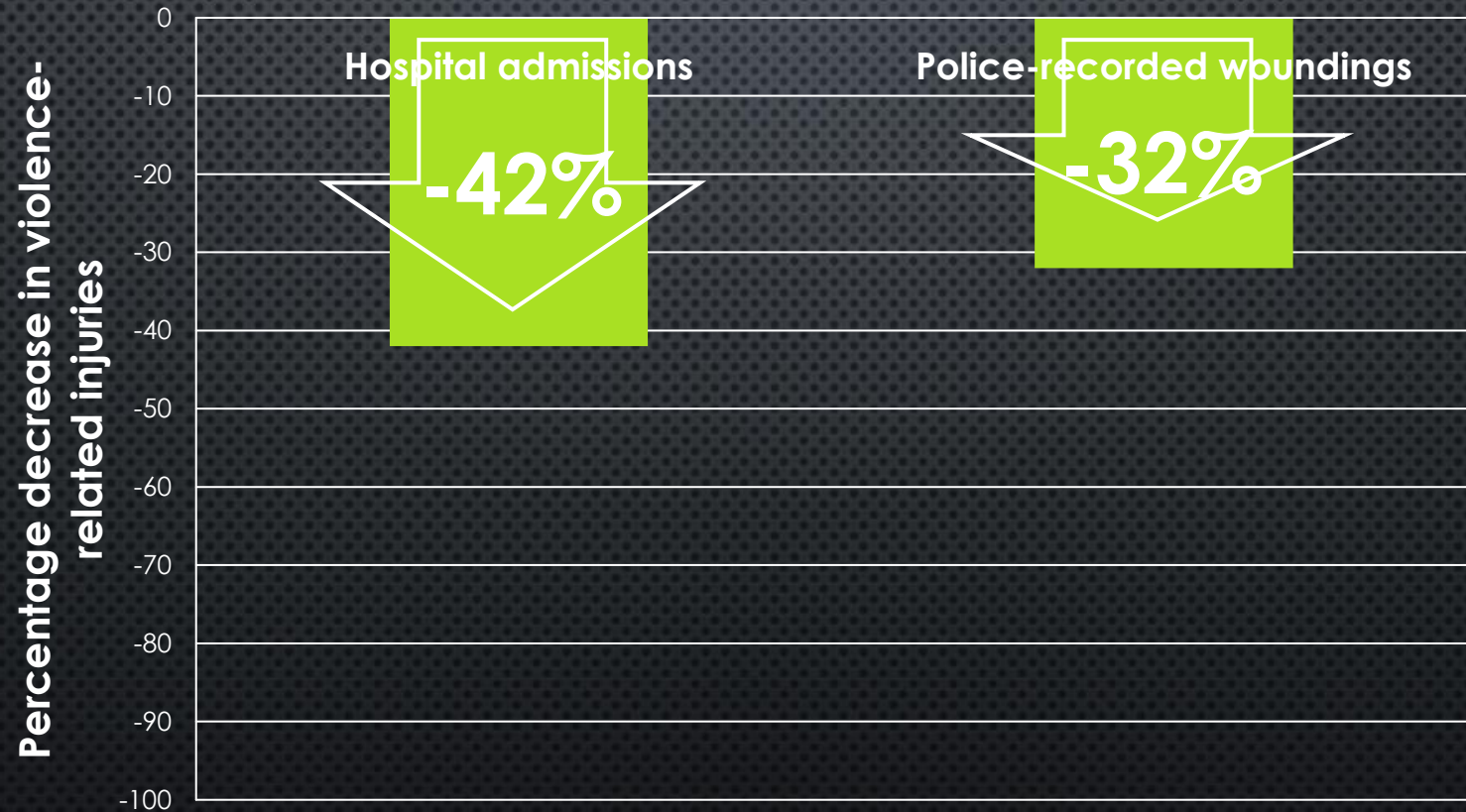
Source: Florence C, Shepherd J, Brennan I, Simon T. Effectiveness of anonymised information sharing and use in health service, police, and local government partnership for preventing violence related injury: experimental study and time series analysis. British Medical Jounral, 2011; 342: d3313
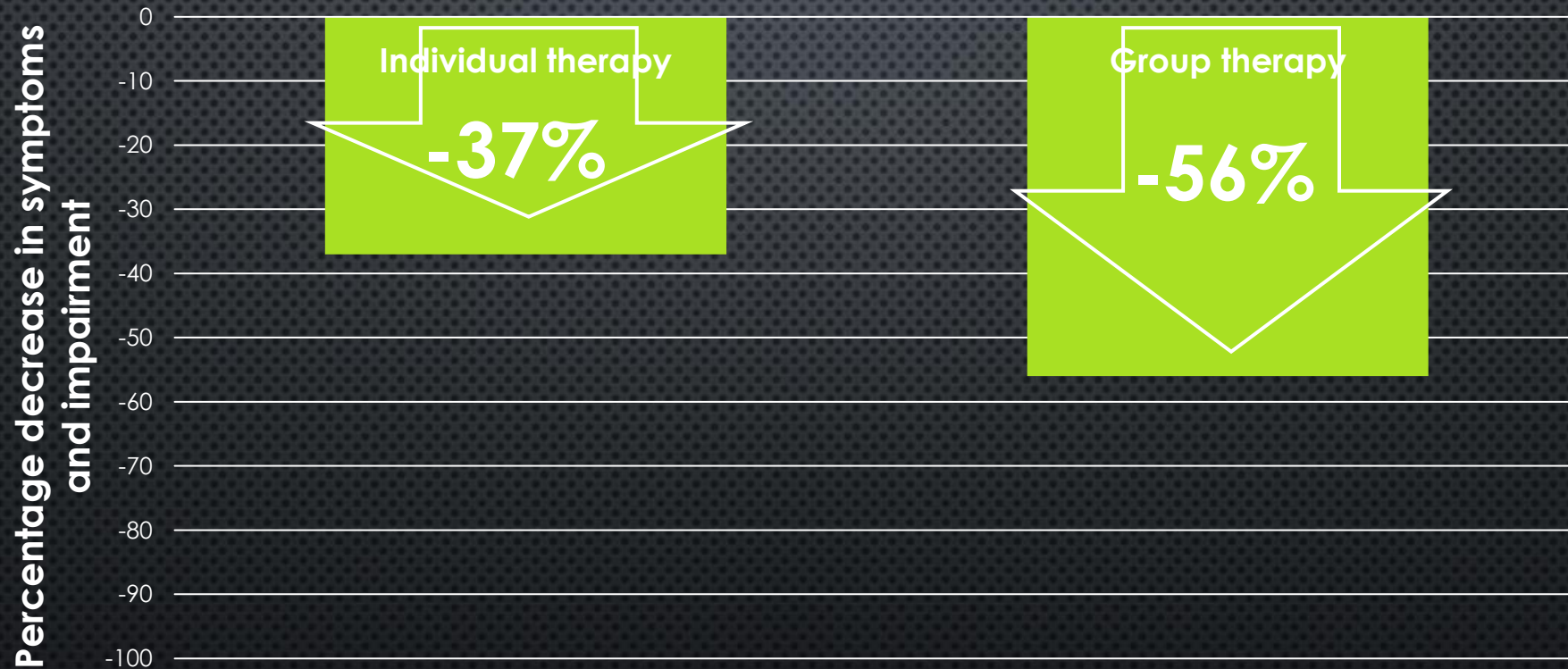
INSPIRE evidence: parental and caregiver support

Reduction in child maltreatment due to Nurse-Family Partnership programme at 15-year follow up

Percentage decrease in maltreatment

0
-10
-20
-30
-40
-50
-60
-70
-80
-90
-100

Nurse-Family Partnership

-48%

Source: Olds D, Henderson CR Jr, Cole R, Eckenrode J, Kitzman H, Luckey D, Pettitt L, Sidora K, Morris P, Powers J. Long-term effects of nurse home visitation on children's criminal and antisocial behaviour: 15-year follow-up of a randomized controlled trial. JAMA. 1998 Oct 14;280(14):1238-44.
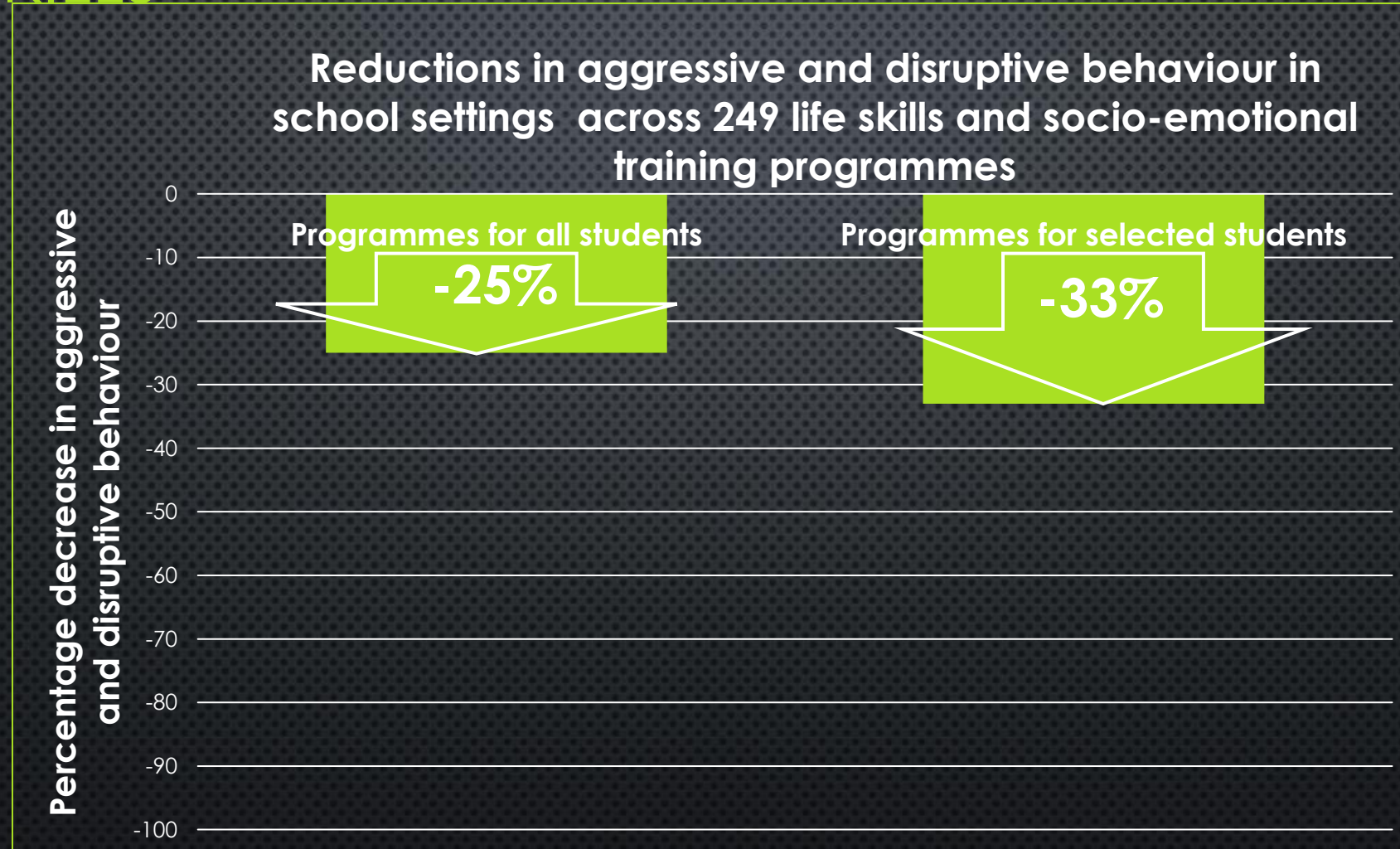
INSPIRE: RESPONSE SERVICES

Reductions in trauma symptoms and functional impairment across 11 trauma-informed cognitive behavioural therapy trials

Individual therapy
-37%

Group therapy
-56%

Percentage decrease in symptoms and impairment

0
-10
-20
-30
-40
-50
-60
-70
-80
-90
-100

INSPIRE EVIDENCE: EDUCATION AND LIFE SKILLS

Reductions in aggressive and disruptive behaviour in school settings across 249 life skills and socio-emotional training programmes

Percentage decrease in aggressive and disruptive behaviour

Programmes for all students	Programmes for selected students
-25%	**-33%**

0
-10
-20
-30
-40
-50
-60
-70
-80
-90
-100

Source: Wilson SJ, Lipsey MW. School-Based Interventions for Aggressive and Disruptive Behavior: Update of a Meta-Analysis.
American Journal of Preventive Medicine, Volume 33, Issue 2, Supplement, August 2007, Pages S130–S143

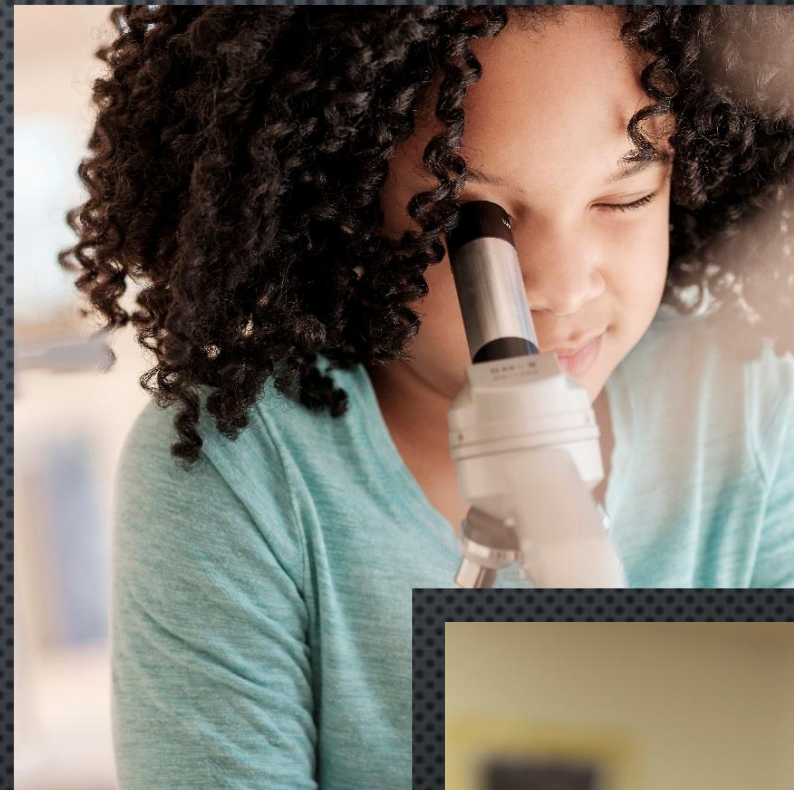# School-based intervention (Health-promoting schools)

Governance mechanism & system (responsive)

Multisectoral & multi-stakeholders engagement

Evidence generation, monitoring, and adaption

KIVA, FINLAND : SCHOOL-BASED PROGRAMME TO PREVENT AND RESPOND TO BULLYING

- aims to prevent the occurrence of bullying and intervene in individual bullying cases in grades 1–3, 4–6, and 7–9 (i.e. for children aged 7–9 years, 10–12 years, and 13–15 years respectively)

Key Elements	* in each school, a team of three school staff members address each case • **Small group discussions with the victims and with the bullies & follow up meetings** • **Classroom teacher meet with prosocial and high-status classmates encouraging them to support the victimized child** • **Preventive sessions: 20 hours of student lessons given by classroom teachers during a school year to a) raise awareness, b) increase empathy, c) promote children's strategies of supporting the victim.** • **An anti-bullying computer game.**
Training requirements	• A certified two days of face-to-face training and the creation of networks of school teams • To become a certified Kiva trainer, a person attends a four-day training for trainers organized in Finland. http://www.kivaprogram.net/certified-kiva-trainers

Areas of implementation

	CORE ACTIONS (SCHOOL LEVEL)	EXPANDED ACTIONS (DISTRICT OR NATIONAL LEVEL)
SECTION 1 Getting started: Develop leadership, school policies and coordination methods	• Set up a school-based coordinating team to address violence. • Strengthen knowledge and skills of the coordinating team. • Develop a school policy that condemns violence and is enforced fairly for everyone. • Develop an action plan.	• Make violence prevention an essential part of the day-to-day work of the school, and work towards building a school culture that does not tolerate violence.
SECTION 2 Collect data on violence and monitor changes over time	• Use data from existing surveys to increase understanding about where, when, how and by whom violence happens. • Establish a record-keeping system of incidents of violence and the school's responses to these. • Make sure that data is kept confidential within the school.	• Include questions that measure violence in existing school surveys and an Education Management Information System (EMIS). • Carry out surveys to assess the extent of violence, where and when it takes place, the characteristics of those involved and perceptions of violence.

SCHOOL-BASED VIOLENCE PREVENTION

A practical handbook

World Health Organization

SECTION 3

Prevent violence through curriculum-based activities

- Test evidence-based violence prevention strategies on a small scale e.g. in one grade or class. Strategies that have proven to be effective include:
  - Develop children's life skills
  - Teach children about safe behaviour and protecting themselves from abuse
  - Challenge and transform social, cultural and gender norms that justify violence and promote equal relationships
  - Address key risk factors for violence (alcohol, drugs, low academic achievement)

- If the evaluation finds that the tested violence prevention strategies were effective in reducing violence, take steps to scale it up:
  - Scale-up the effective strategies to other classes/grades within the school
  - Share your model with other schools
  - Showcase your model and propose with the Ministry of Education integrating it as part of the curriculum

SECTION 4

Work with teachers on values and beliefs and train them in positive discipline and classroom management

- Train teachers in positive discipline and classroom management.
- Create mutual support mechanisms for teachers.
- Strengthen managerial support for teachers.
- Address and transform teachers' harmful beliefs and social, cultural and gender norms.

- Integrate training in positive discipline and classroom management and social, cultural and gender norms in pre-service training for teachers.

World Health Organization
REGIONAL OFFICE FOR **South-East Asia**

|	CORE ACTIONS (SCHOOL LEVEL)	EXPANDED ACTIONS (DISTRICT OR NATIONAL LEVEL)
SECTION 5 **Respond to violence when it happens**	• Train teachers and school staff in recognizing violence and asking children in a responsible way about violence. • Train teachers in managing situations where children tell them they have experienced violence. • Deal with violent incidents immediately, using methods learned in teachers' training, for example positive discipline and classroom management (Section 5). • If referral mechanisms do not exist at school level, make sure to be informed of service providers available • Train parents in recognizing and asking appropriately about violence and supporting children exposed to violence (see also Section 8).	• Strengthen safe and child-friendly reporting methods. • Develop and strengthen appropriate referral methods for victims of violence who need additional support. • Monitor the effectiveness of reporting and referral methods.
SECTION 6 **Review and adapt school buildings and grounds**	• Involve students and staff in identifying hotspots for violence (including the way to and from school) and find practical solutions in these areas. • Review the appearance and features of school buildings and grounds and identify areas that could be improved. • Make sure schools have clean, separate toilets for boys and girls.	• Ensure that the annual budget includes a budget line for improving physical infrastructure of schools with the aim to enhance safety of children.
SECTION 7 **Involve parents in violence prevention activities**	• Keep parents involved and informed about violence prevention activities and school policies on violent behaviour. • Distribute messages on how parents can support their child's learning. • Invite parents to sit on prevention coordinating committees. • Create awareness among parents on how to recognize and ask appropriately about violence.	• Expand to parenting programmes and work with parents to improve key parenting skills and encourage non-violent strategies for dealing with challenging behaviour.

violence.

SECTION 8
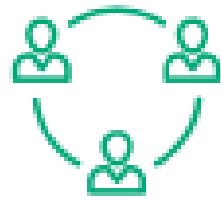
Involve the community in violence prevention activities

- Take part in multisectoral coordinating bodies such as community violence prevention committees.
- Involve community members in school-based coordinating committees and developing school policies and codes of conduct.

- Develop partnerships with community organizations, agencies or services that support violence prevention activities, including after-school clubs.
- Open the school as a place where joint community activities can take place.

SECTION 9

Evaluate violence prevention activities and use the evidence to strengthen your approaches

- Decide on a set of outcome indicators, using existing indicator frameworks where possible, that can help you to understand whether your actions to prevent violence have been successful, and include these measures in evaluation activities.

- Work with academic institutions or other partners to establish whether violence prevention activities work.
- Include outcome indicators on the effectiveness of violence prevention measures into broader monitoring and evaluation systems that collect data on violence and the response to violence in schools, for example into surveys that are conducted regularly.

WHO guidelines on parenting interventions to prevent maltreatment and enhance parent–child relationships with children aged 0–17 years

World Health Organization
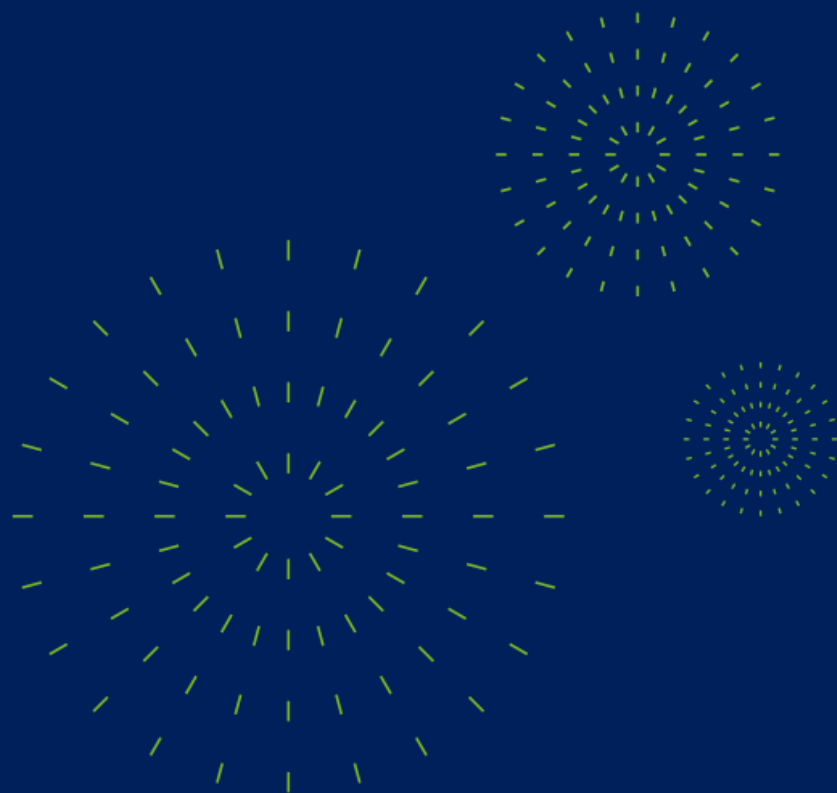
Regional consultation on parent support for early childhood development and adolescent health in South-East Asia

12–13 October 2022

Meeting report

World Health Organization
REGIONAL OFFICE FOR South-East Asia

- Global status report on violence against children 2020 (who.int)

- Video on VAC 2022

THANK
YOU

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