

# Violence against children

A review of evidence relevant  
to Africa on prevalence,  
impacts and prevention

July 2018  
Summary



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nature

*"There have been more than 180 original reports showing an association between childhood maltreatment and alterations in*

*brain structure, function, connectivity or network architecture"* -

Nature Reviews Neuroscience

**Nature, 2016**

*"We have established that the costs of violence against children are*

*substantial... **preventing violence***

***against children is... an economic***

***imperative"** - The Social and Economic*

*Burden of Violence Against Children in*

*South Africa, 2016*



**African Union**

*"By 2020, States should have prohibited corporal punishment in schools, embarked on campaigns for the abolition of harmful practices and implemented*

*legislation prohibiting all forms of violence against children... partners should have initiated national dialogue to discuss eradicating corporal punishment from the private setting of the home"* - Africa's Agenda for Children 2040 (composite quote)

**African Union, 2017**

*"Children who have had chronic and intense fearful experiences often lose the capacity to*

*differentiate between threat and safety. This impairs their ability to learn and interact with others"* - National Scientific Council on the Developing Child

**Harvard University, 2010**



**Center on the Developing Child  
HARVARD UNIVERSITY**

*"Imagine you woke up to headlines revealing a new disease, that up to 1 billion children were exposed and that - over the course of their lifetime - these children were at greater risk of mental illnesses, chronic diseases such as heart disease and cancer, infectious diseases like HIV, and social problems such as crime and drug abuse. The truth is we do have such a "disease". It is violence against children. We already have sufficient evidence to allow us to stop the violence. Violence against children is preventable"* - INSPIRE report (composite quote)

**UNICEF, WHO, World Bank and others, 2016**



*"If we don't work together to end these crimes we risk undermining our work to entrench good governance and development... in Africa and around the world. Men must not be bystanders in efforts to end violence against women and children... action... will deliver tangible results"*

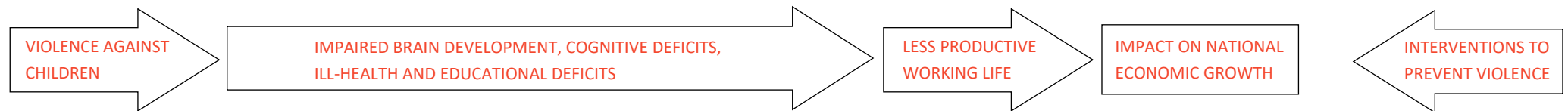
**Paul Kagame, President of Rwanda, 2015**



# Summary

**Violence in childhood is associated with long-term mental, physical and economic deficits, but can be prevented.**

Interpersonal violence against children at home, at school and in the community is an economic issue for Africa as well as a moral one. The evidence points to a chain of permanent impacts, with violence being associated with brain impairments, lower cognitive ability, increased mental and physical illness, lower educational attainment, a less productive working life and lower national economic growth. A range of interventions can prevent violence and so are important human capital investments.



**Prevalence.** In sub-Saharan Africa around **two thirds of children suffer physical violence, a third of girls suffer sexual violence, a quarter of children suffer emotional violence and half of children witness domestic violence.** One in five instances of physical violence causes injury. Most violence is from parents, partners, teachers and neighbours.

**Impact on the brain.** Violence against children is associated with the **impaired development of brain areas for learning, memory, language, motivation, vision, awareness, problem-solving, abstract thinking, emotional control and empathy.** Such damage across multiple brain systems is likely to have a profound impact on a person's cognitive, emotional and social capacities.

**Impact on mind and body.** Violence is associated with mental impacts both in childhood and later life such as **a fall in intelligence of 8-10 IQ points, impaired learning, aggression in social situations, anxiety, depression and psychosis.** It is also associated with **risky behaviors such as substance misuse,** leading to physical health impacts such as cancer, heart disease and abortion.

**Impact on education.** Research in high-income countries finds that child maltreatment is associated with **lower school grades, worse behavior, more absences and drop-outs and more need for special education.** Maltreated children **complete one less year of school** on average, are twice as likely to repeat a year and have impaired intellectual and language abilities.

**Impact on productivity.** Research in high-income countries finds that childhood maltreatment is associated with **income in adulthood being reduced by a third and the risk of unemployment and poverty being doubled.** Research in low and middle-income countries on the related issue of violence between partners finds similar impacts on income.

**Impact on the economy.** Violence against children is calculated in middle-income countries to **reduce GDP by 3-4%.** The calculations omit many areas of cost such as health and education, and use lower figures for violence than seen in most of Africa. Violence between parents imposes further costs due to poorer parenting and the effects of children witnessing violence.

**Prevention.** Programs have achieved big falls in violence in four key contexts: home, school, the community and children's own empowerment. **Sexual violence was reduced by 62% by a local program in Kenya, physical violence by parents was reduced by over 50% by local programs in South Africa and Liberia, and violence by teachers was reduced by 42% by a local program in Uganda. Child maltreatment was reduced by 80% by a local program in the US.** Leadership is coming from the African Union, multilateral bodies and governments.

# Introduction

**This review aims to support national policy development and preventative action.**

**This paper summarizes a review of evidence relevant to violence against children in Africa. It examines the scale of this violence, the impacts it is likely to have and the interventions that can prevent it. The paper focuses on interpersonal violence that occurs during children’s day-to-day lives at home, at school and in the community.**

This paper has reviewed evidence from over 240 sources relating to violence against children in sub-Saharan Africa. It addresses three sets of questions:

- What is the **prevalence** of violence against children in African countries?
- What **impacts** does violence have - on brain development, cognitive ability, mental and physical health, education, productivity and economic growth?
- What interventions can be effective in **preventing** violence against children?

**Scope.** The scope of the paper is interpersonal violence - violence that children experience in their day-to-day lives and which is not connected to an organized conflict or cause. The focus regarding interventions is on prevention, not on responding to violence after it has happened. This version of the paper is a summary - please request the detailed and fully-referenced version from Big Win Philanthropy. Neither this summary nor the full version are exhaustive reviews of all relevant studies, nor do they cover all of the many dimensions of the issue (for example, the deeper causes of violence in terms of factors such as history and culture are beyond the scope of this paper).

**Relevance.** Most of the evidence presented here is applicable to Africa - the prevalence data is from Africa, the economic evidence is from low or middle-income countries including countries in Africa, and the evidence on brain development, cognition and health is concerned with processes applicable to all human beings. However, the evidence on education and employment comes mainly from high-income countries, and care is needed in applying this to Africa due to cultural and economic differences.

**Definitions.** Interpersonal violence against children involves several different categories of experience:

- **Physical violence** - often defined as being punched, kicked, slapped, whipped, pushed, choked, burned, beaten with an object or attacked/threatened with a weapon.
- **Sexual violence** - often defined as unwanted sexual touching, attempted sex, physically forced sex or sex obtained by threats, harassment or deceit.
- **Emotional violence** - often defined as a child being threatened with abandonment, humiliated in public or told damaging things such as that they should be dead.
- **Witnessing violence** - often defined as a child seeing one of their parents being violent towards the other parent or another family member.
- **Maltreatment** - a category used in some research that includes not only violence (usually all of the above forms of violence) but also neglect by caregivers.

**Authorship.** This report has been produced by Big Win Philanthropy and was prepared by Big Win staff Kevin Steele and Paige Sholar with input from Nalini Tarakeshwar and Patricia Ndgewa. Background information about the organization is given in Appendix 1.

**Acknowledgements.** External reviewers included Alex Butchart, World Health Organization; Claudia Cappa, UNICEF; Don Cipriani, Ignite Philanthropy; Lucie Cluver, University of Oxford; Brigitte De Lay, Oak Foundation; Nata Duvvury, University of Ireland; Xiangming Fang, Georgia State University; Maureen Greenwood-Basken, Wellspring; Mary Healy, Human Dignity Foundation; James Mercy, US Centers for Disease Control; and Théophane Nikyèma. Big Win would like to thank all these reviewers for being so generous with their time and expertise, and also to thank the many other people in a wide range of organizations who have been similarly generous in offering information and guidance during the research process.

## **Prevalence** of violence against children

# The prevalence of violence in Africa

Survey data in sub-Saharan Africa shows high levels of interpersonal violence against children.<sup>1</sup>

When examining the consequences of violence against children, the first question is its scale and nature - what proportion of children experience violence, who perpetrates it and how society regards it. High-quality survey data covering six countries in Western, Eastern and Southern Africa shows a high prevalence of physical, sexual and emotional violence and of children witnessing violence.

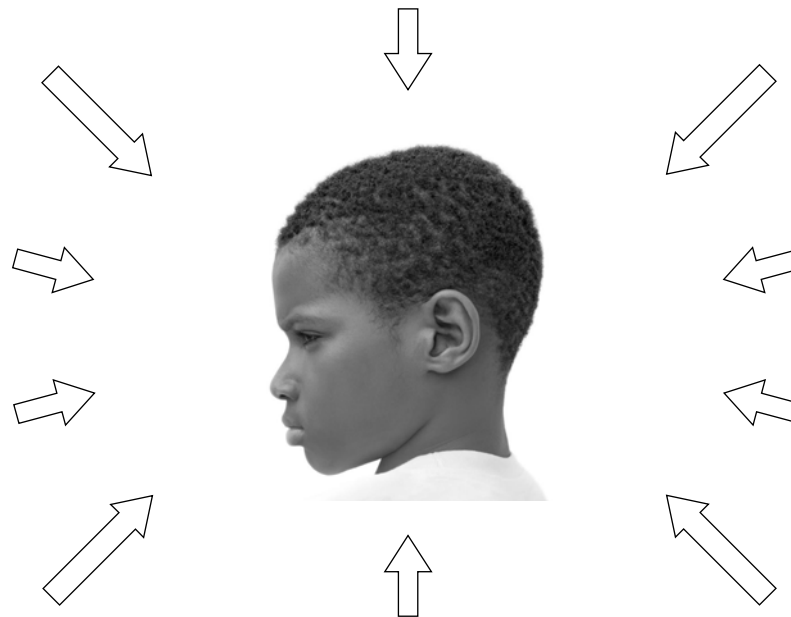
Around two thirds of children have suffered **physical violence** such as punching, kicking or beating - based on surveys in six African countries which showed a median prevalence of 65%. The violence is most often from parents and teachers.

Around a third of girls have suffered **sexual violence** such as unwanted touching or rape - based on surveys in six African countries which showed a median prevalence of 30%. This is most often from partners and neighbours. The median for sexual violence against boys is 13%.

Around a quarter of children have suffered **emotional violence** such as being threatened with abandonment or deliberately humiliated in public - based on surveys in six African countries which showed a median prevalence of 27%.

Children seen as “different” (e.g. because of **disability, sexuality or albinism**) are more at risk.

Around half of children surveyed in Africa have **witnessed violence** in the home by a parent against siblings or the other parent.



**Violence is often severe.** Two country surveys in Africa found that of children who suffer physical violence, around one in five receive injuries, ranging from bruises to broken bones.

**Violence is frequent** - two country surveys in Africa found that of children who had suffered physical violence during the past year (a median of 49%) a median of 89% were abused on multiple occasions. Four country surveys found that of those who had suffered sexual violence during the past year (a median of 11%) a median of 64% were abused on multiple occasions.

Around **four in ten adults approve of violent physical punishment** as being necessary to bring up children properly - the median approval rate for 18 African countries is 39%.

**Children from wealthier families are at as much risk** of physical and sexual violence as children from poorer families. Data from 18 African countries shows no systematic effect of socio-economic status on the prevalence of violence.

**Africa has high levels of violence.** In the 2017 Violence in Childhood index, 32 of the 40 most violent countries were in sub-Saharan Africa.

## **Effects** of violence against children



# The effects of violence on brain development

Over 180 studies during the last decade show that childhood abuse is associated with multiple brain impairments.<sup>2</sup>

The human brain provides the fundamental bedrock for personal fulfilment and economic productivity - the cognitive, emotional and social capacities that enable a person to solve problems, form collaborative relationships and be motivated to act. A large body of evidence shows that the psychological trauma and stress of experiencing or witnessing violence in childhood is associated with impaired development in many brain areas that will affect these capacities, both in childhood and later adult life. This brain damage is not caused directly by injury, but happens over a period of months or years through abnormal brain development.

Abuse is associated with damage to nerve connections from the anterior cingulate cortex, a brain area that supports responses to social situations and awareness of other people's points of view.

Abuse is associated with damage to the corpus callosum, the structure that supports problem-solving by linking the two halves of the brain.

Emotional abuse is associated with damage to brain areas involved in self-awareness, such as the posterior cingulate cortex.

Verbal emotional abuse is associated with damage to a bundle of nerve connections, the arcuate fasciculus, involved in language comprehension.

Physical abuse is associated with damage to brain areas that support abstract thinking, such as the dorsolateral prefrontal cortex.

Physical abuse is associated with damage to a brain area for emotional control, the orbitofrontal cortex.

The vulnerable ages for different brain areas range from 3 to 17, so violence causes damage throughout childhood.

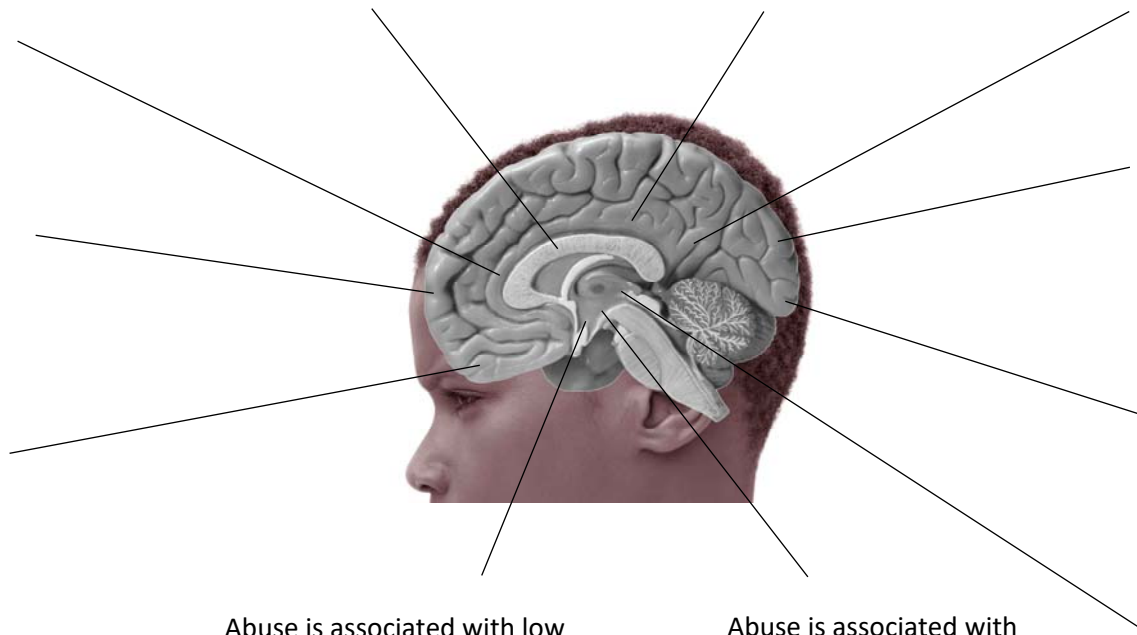
Abuse is associated with low levels of activity in the ventral striatum brain circuits which generate motivation for tasks.

Abuse is associated with overactivity in the brain area for triggering fear, the amygdala.

Sexual abuse is associated with damage to brain areas involved in facial recognition, such as the middle occipital gyri.

Witnessing abuse is associated with damage to brain areas for visual learning, including the visual cortex.

Abuse is associated with damage to the hippocampus, a brain area that supports memory formation.



# The mental effects of violence

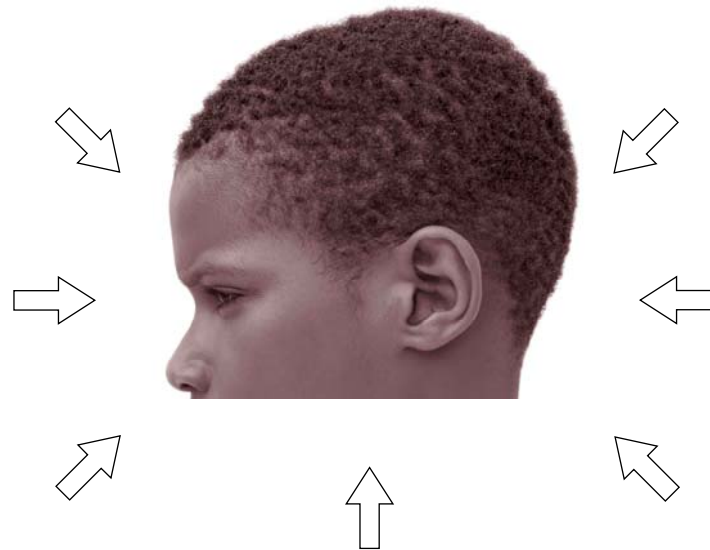
**Violence in childhood is associated with devastating impacts on mental health, intelligence and ability to learn.**<sup>3</sup>

A great deal of evidence built up over many decades shows that children who have been abused are more at risk of a wide range of problems involving their mental health, cognitive capacity, social abilities and behavior, both in childhood and in later adult life. It seems likely that these problems are due to the brain impairments caused by their abuse.

Abuse is associated with all major categories of mental ill-health later in life. An international panel of 17 experts reviewing 190 studies concluded that violence in childhood is associated with **mood disorders, behaviour disorders, anxiety, substance misuse, schizophrenia, psychosis and depression.**

A meta-analysis of 118 studies concluded that the **damaging effects on children of witnessing violence between their parents are just as bad as the effects of experiencing violence themselves.** Witnessing was associated with reduced self-esteem and social skills and increased depression, anxiety and aggression.

Abused children tend to interpret neutral facial expressions as angry. This means they can become **anxious or aggressive in normal social situations** where there is not actually any threat, and so have **trouble forming good relationships.**



Multiple studies, including two with controls that tracked children into adulthood, have found that abuse is associated with a **reduction in intelligence of 8-10 IQ points** and deficits in memory and reading (mainstream scientific opinion is that the abuse causes the deficits, although a minority disagrees).

Abuse is associated with a **disrupted ability to concentrate and learn**, caused by a hypervigilant preparedness for danger. Chronic fear can impair the ability to differentiate between threat and safety, so affected children perceive threat even in familiar places such as school.

Abused children are **more likely to be domestic violence abusers and victims** when they grow up. A single type of childhood abuse (physical, sexual or witnessing violence) is associated with a doubling in the risk of a man abusing his partner or a woman being abused by hers.

Abused children generate the stress hormone cortisol, which makes the brain **focus on learning about danger rather than other kinds of experience.** Cortisol enhances the formation of memories about fearful events or places while reducing the formation of non-fearful memories.

# The effects of violence on physical health

Violence in childhood is associated with major long-term impacts on physical health.<sup>4</sup>

The impact of childhood abuse on physical health include the long-term consequences of injuries, risky behaviors (caused by mental distress) that lead to physical health problems, the long-term physiological effects of stress and the impact of second-generation effects.



**The consequences of injury.** Violence can directly cause physical injuries such as dislocations, fractures, wounds, internal damage, head trauma and burns. In the long term these can cause health problems such as **chronic pain, disability, reproductive health problems and vulnerability to infection and disease.**



**Risky behaviour.** Abuse in childhood is associated with later unhealthy behavior such as drug-taking, smoking and unsafe sex. A US study found that people who had over three adverse childhood events (with most of the categories of adverse event involving violence) were **seven times more likely to be alcoholics** and **twice as likely to get cancer, heart disease or strokes.** A study in Europe found that young adults who had suffered more than three adverse events in childhood were **six times more likely to use drugs** and **49 times more likely to attempt suicide.** A global review of 31 studies found childhood abuse to be associated with a **doubling in the risk of abortion** in adulthood - a substantial public health issue given that 25% of pregnancies end in abortion and half of these happen in unsafe conditions. A 2017 meta-analysis of 37 studies confirmed these conclusions with similar results.



**Response to chronic stress.** The physiological response to abuse (such as release of the stress hormone cortisol) might cause long-term health problems. For example, abused children are twice as likely to have high levels of inflammation marker chemicals associated with a **greater risk of heart disease** later in life .



**Second-generation effects.** The children of women who were abused in childhood are more at risk of physical ill-health. This is probably because the capacity of their mothers to care for them is impaired by mental ill-health. A study in Nicaragua found that the children of women who had been both physically and sexually abused in childhood were **six times more likely to die before the age of five.**



**Other adult illnesses associated with childhood abuse.**

A review of the health consequences of child

abuse examined over 140 studies and concluded that abuse was strongly linked to **arthritis, asthma, high blood pressure, liver problems, ulcers, hepatitis, migraines, gynaecological pain, irritable bowel syndrome, fibromyalgia and chronic fatigue syndrome.** While the medical pathways that connect these conditions to abuse in childhood are not well understood, they may well involve risky behaviors and bodily responses to stress.

# The effects of violence on education

## Maltreatment in childhood is associated with lower educational attainment.<sup>5</sup>

Children who have been maltreated (a definition that combines abuse and neglect) perform less well at school in terms of grades, behavior, absences, years of school completed, repeated years and the need for special education. They also have impaired intellectual and language development. It seems likely that these effects are caused by the impacts of maltreatment on cognitive, emotional and social capacities and on mental and physical health.

### Conclusions of education research

Most research on child abuse and education combines abuse with neglect by caregivers into a category called maltreatment. Many studies have associated maltreatment with:

- Lower **average grades** across all subjects.
- More **repeating** of school years.
- More school **absences**.
- Higher **drop-out** rates.
- More school **disciplinary** problems.
- More referrals to **special education**.
- **Fewer years** of education completed.

Corporal punishment at school has also been found to reduce educational performance.

However, the scale of the above impacts is often unclear. Many studies give a complex picture or have methodological limitations. Also, almost all are from the Global North, which complicates their applicability to Africa.

A review of three decades of research found that child maltreatment was associated with **impaired intellectual development** in 49 out of 65 relevant studies, with **impaired language development** in 36 out of 42 studies and with **impaired academic achievement** in 31 out of 34 studies.

A study of over 4,000 maltreated children in the US found that they were **twice as likely to enter special education**, even when a range of other socioeconomic factors were controlled for. This involved large proportions - 25% of those who had been physically abused and 20% of those who had been sexually abused entered special education.



A study of over 300 maltreated children in the US found they were **twice as likely to repeat a year** compared to matched controls, across all primary school years.

A longitudinal study of 650 maltreated children in the US found they completed on average **one year less of education** than matched controls.

A study of about 1,800 maltreated children in the US found that this accounted for **30% of school drop-outs**.

A study of 400 maltreated children in the US found those who had been physically abused were **six times more likely to be suspended** than other children, even when a range of socioeconomic factors were controlled for.

# The effects of violence on employment

**Abuse is associated with a one-third reduction in income and a higher likelihood of unemployment.**<sup>6</sup>

The available evidence suggests that all the various consequences of abuse (cognitive, emotional and social impairments, mental and physical health problems and educational deficits) all culminate in an individual being substantially less productive as a working adult - earning less, in less skilled occupations and at greater risk of unemployment. There is direct evidence for this from studies in the US, and indirect evidence in a number of low and middle-income countries including in Africa.

Childhood maltreatment (abuse or neglect) is associated with **a one-third reduction in adult income.**

A 36-year study in the US tracked nearly 700 people who as children had suffered physical abuse, sexual abuse or neglect and compared them to matched controls. When they reached their thirties, those who had been maltreated were earning on average \$19,000 a year compared to \$28,000 for the controls (a third lower). They were less likely to be employed (65% versus 82% of the controls) or to be in a skilled job (39% versus 59%).



Abuse in childhood is associated with around a **doubling in the risk of later unemployment and poverty.** A US study of over 5,000 people found that adults who had been maltreated as children were around twice as likely to be unemployed or below the national poverty level, even when factors such as income and employment were controlled for. Physical abuse led to a 2.4 times greater risk of unemployment and a 1.6 times risk of poverty. Sexual abuse resulted in a 1.2 times risk of unemployment and a 1.8 times risk of poverty. People who had suffered both types of abuse were almost three times more at risk.

In the absence of studies in low and middle-income countries about the impact of childhood violence on later adult income, studies of domestic violence against women offer an alternative and related source of data. It is reasonable to expect that children would be at least as vulnerable as adults to the effects of violence, and therefore that they would suffer a similar or greater impact on future income to that found as a consequence of violence in adulthood. Such violence is associated with **a long-term reduction in income of about a third.** The lifetime fall in earnings of women who have ever experienced violence from a partner is strikingly consistent between countries around the world: 29% in Tanzania (43% in the case of severe violence), 34% in Chile, 35% in Vietnam and 46% in Nicaragua. These results are also consistent with the fall in income of a third as a result of childhood violence found by the US study described above. However, unlike the US study they did not involve matched controls, so a causal relationship between violence and reduced income is not certain.

# Why violence has such a big economic impact

**Violence in childhood has costs that multiply from the individual level to impact on national economies.**<sup>7</sup>

Interpersonal violence is such a destructive act that it imposes multiple costs at the individual, family, community and national levels. These costs occur both in the immediate aftermath of the violence and in the long term. Long-term impacts include not only actual costs but also the loss of benefits because victims have a reduced capacity to contribute to society. Indeed, **the biggest economic impact is probably reduced productivity of working adults who were abused in childhood.**

The economic impact of violence against children is made up of a wide range of costs and lost benefits. These are borne by individuals and their families, local communities, government and the national economy. Some of the main ones are listed below:

## Short-term costs

- Healthcare for injuries and their consequences.
- Lost household work due to incapacity.
- Police and justice services.
- Welfare services such as child protection, social work and income support.
- Lost earnings due to absence from work.
- Repair or replacement of damaged property.

## Long-term costs

- **Lost productivity due to reduced cognitive, emotional and social capacities.**
- **Lost productivity due to reduced educational attainment.**
- **Lost productivity due to mental illness.**
- **Lost productivity due to physical disability.**
- **Lost productivity due to chronic physical illness.**
- **Lost productivity due to illness appearing later in life, such as heart disease.**
- Premature death, including lost years of work and the psychosocial impact on surviving family members.
- Remedial education to overcome academic deficits.
- Health and social care for chronic or late-manifesting conditions.
- Increased criminality by adults who were abused in childhood.

## Second-generation costs

- Higher prevalence of perpetrating and suffering adult domestic violence amongst people who were abused in childhood.
- Impaired parenting by people who were abused in childhood, leading to problems for their own children.

## Hidden costs

- The disruption to daily life in a society where people fear for their safety because of a high general level of violence.
- Reduced inward investment and tourism because of international awareness of the high level of violence in a country.

# The effects of violence on economic growth

The one study in an African country on the cost of violence against children found this to be at least 4% of GDP.<sup>8</sup>

Studies in middle-income countries put the economic impact of violence against children at around 3-4% of GDP. These studies omitted major areas of cost such as chronic disease and educational impairments, and were based on national prevalence rates for violence much lower than those seen in most African countries.



## Impact of children suffering violence themselves

Several studies have calculated the economic impact of violence against children in terms of the percentage of national income (GDP) that is lost because of this. For example:

- A South African study involving three universities and the Treasury concluded that **violence against children costs at least 4% of GDP in South Africa**. It said that action on the issue was an “economic imperative”.
- A UNICEF study in South-East Asia found in lower middle-income nations such as Indonesia and Vietnam **child maltreatment costs over 3% of GDP**.

**These calculations are underestimates** because the studies omitted important areas of cost (due to resource and data constraints). For example, the South Africa study did not include healthcare, educational impacts, reproductive health problems, chronic disease or criminality, nor the costs of children witnessing violence, nor second-generation effects.

**The costs in other African countries may be higher.** The median prevalence rates for violence found in six other African countries are around double the rates used in the South Africa study. If the same methodology was applied to those countries, the calculated impact on GDP would be expected to be higher.

**The cost of violence against children in South Africa is at least 4% of GDP**



## Impact of children living in violent homes

The economic impact of violence against children is not limited to the violence they directly suffer themselves. It also involves the economic impacts that result from children living in homes where parents are violent to each other.



**Witnessing violence.** A large volume of evidence has found that for children, **witnessing violence between their parents is as damaging as experiencing it**. Such witnessing is associated with brain impairments and with mental impacts such as anxiety, depression, aggression and reduced social skills. These are likely to have an economic impact comparable to that of violence which children suffer directly.

**Impaired parenting.** Violence between parents has consequences such as parental incapacity, mental ill-health and loss of income that compromise their ability to care for their children. These effects are associated with higher levels of child illness, undernutrition and mortality - which all generate additional economic impact.

**Possible cost.** There are no figures for the economic impact of the effects on children of interparental violence, but an indication of its possible scale comes from the economic impact of domestic violence against women. Research in countries such as Vietnam, Chile, Bangladesh and Nicaragua indicates that this is around **3-4% of GDP**.

## **Prevention** of violence against children



# Interventions to prevent violence

Programs have halved violence in four key areas, sometimes in months and usually within four years.<sup>9</sup>

A great deal of evidence, from Africa as well as high-income countries, shows that violence against children can be prevented by programs to change attitudes and behaviors in four key contexts. The first context is the capacity of children to affect what happens to them. The other contexts are the environments where children spend their lives - home, school and the community. Programs in Africa have reduced violence by 36-62% after interventions lasting from two months to four years.

## HOME

Interventions for the home support parents and caregivers to use child-rearing skills such as non-violent discipline.

A US program called the Nurse Family Partnership that supports first-time teen mothers for two years resulted in an **80% reduction in child maltreatment** over a 15 year period compared to controls.

A Liberia program called Parents Make the Difference resulted in a **56% reduction in violent parenting practices** such as whipping, after 10 two-hour workshops.

A program in South Africa, Parenting for Lifelong Health, resulted in a **53% fall in physical abuse** of teenaged children by parents, after 12 two-hour workshops.

The Triple P program was given to one in eight families with young children in a US community. After two years, compared to controls **maltreatment was 22% lower in all such families in the population.**

## SCHOOL

Interventions for schools build commitment from administrators, teachers and students to create a non-violent institutional culture.

The Good Schools Toolkit **cut physical violence by teachers against students by 42%** in 18 months compared to controls, in schools in Uganda.

## CHILDREN THEMSELVES

Interventions to empower children train them how to avoid being a victim of violence and how to be an "active bystander" to stop violence against others.

A program called No Means No resulted in a **62% reduction in sexual assaults** against girls in Kenyan slums after six two-hour workshops training the girls in self-defense skills, at a cost of only \$1.75 per student trained.



The US program Green Dot **reduced sexual harassment of school-children by 47%** after four years by training the students who were most influential with their peers to step in and stop violence.

## COMMUNITY

Interventions in the community shift social norms by mobilizing local leaders, organizations and networks. They have previously focused mainly on violence against women but are now being adapted for violence against children.

The SASA! program in Uganda brought about a **52% reduction in intimate partner violence** and a 46% reduction in women's acceptance of it over four years, using volunteer activists to run workshops on power relations and gaining support from influential people ranging from landlords to marriage brokers.

The Green Dot program **cut sexual violence by 25%** in four years in a US college and contributed to a one-third drop in intimate partner and sexual violence in US communities, by training local influencers to spread the anti-violence message.

In India, Program H ran workshops for young men which brought about a **54% reduction** in the proportion of them who believed that women sometimes deserve to be beaten.

# What helps interventions to work well

**Good program design and enabling factors help violence prevention interventions to be successful.**<sup>10</sup>

The success of interventions to change attitudes and behaviour is influenced by the way programs are designed - for example the techniques they teach, the way they are staffed and how they are promoted. Success can also be facilitated by enabling factors such as laws against violence and following up at-risk populations.

## Characteristics of successful violence prevention programs

The most successful intervention programs often have certain characteristics in common:

- **The use of role-playing** - which allows trainers to model desirable behaviors and participants to practice their new skills.
- **The teaching of positive discipline** - training parents and teachers in techniques for disciplining children in non-violent ways.
- **Credible front-line workers** - recruiting trainers and activists who are embedded in the community they will be serving and respected within it.
- **Well-supported front-line workers** - investing in the training and supervision of front-line workers, whether paid or voluntary.
- **Cost-effective staffing** - encouragingly, a meta-analysis of 156 studies of parenting programs found no difference in outcomes between those which used expensive fully-qualified professionals such as nurses as front-line staff and those which used less costly paraprofessionals such as community health workers.
- **Catalyzing** - mobilizing a community's own resources to create a movement for change.
- **Aspirational messages** - promoting programs in terms of positive aspirations such as happier families and high-achieving children, avoiding judgmental or punitive messages that make the recipients feel they are bad or inadequate.
- **Local adaptation** - integrating local issues and using language that has local resonance.
- **Discussions of gender relations** - engaging participants with issues of how gender affects societies, and encouraging them to reflect on how this happens in their own lives.

## Enabling factors

Four enabling factors can help to facilitate violence prevention:

- **Changes in the law**, if enforced and combined with cultural shifts. In Germany, after violence against children at home became illegal, the proportion of adolescents beaten with a stick fell in 10 years from 41% to 5%. Laws regulating alcohol are also associated with falls in violence.
- **Clinical enquiry**. In the US, follow-up by health workers identifying signs of possible abuse reduced it by 30-50% in the at-risk populations.
- **Safer physical environments** such as from street lighting.
- The **economic empowerment** of women.



Girls in Kenya learning self-defense via role-play in the No Means No program.

# Leadership on the violence agenda

**Leadership is coming from the African Union, multilaterals and African governments.**<sup>11</sup>

A global movement of research, activism and development aims to prevent violence against children. The list below gives some of the more prominent institutions involved from Africa or active in the region. However, this has yet to translate into substantial resource allocation - for example only 0.6% of official development assistance is focused on ending violence against children.

**The African Union** is leading on the issue of violence with its new Agenda for Children 2040 (see picture) officially **adopted in August 2017 under the African Union's new leadership**. It says that by 2020, member states should have:

*“prohibited corporal punishment as a form of discipline or punishment in schools... embarked on public... campaigns for the abolition of harmful practices... strengthened collaboration with traditional and faith leaders... implemented legislation prohibiting all forms of violence against children... put in place quality programmes... to prevent and respond to violence against children... and... transform attitudes”.*

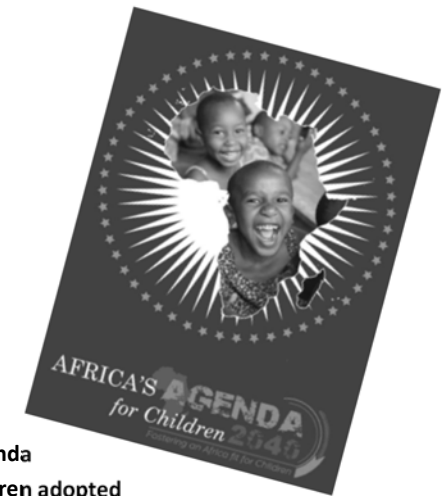
It also says that by 2020, partner organizations should have *“initiated and engaged in national dialogue to discuss the feasibility of... eradicating corporal punishment from the private setting of the home”* and that *“traditional and religious leaders... should have played a decisive role in the protection of children from violence”.*

**The Global Partnership to End Violence Against Children** launched in 2016 together with its anti-violence strategy INSPIRE is co-chaired by the head of UNICEF and the Minister for Health of Tanzania. The board includes the head of WHO and government ministers from countries such as Indonesia, Mexico, Canada and the UK. The initiative is also backed by USAID, PEPFAR, Together for Girls and the World Bank.

**UNICEF** is the multilateral agency for which the violence against children agenda is central. The **World Health Organisation** has also produced important reports on interpersonal violence.

**The African Child Policy Forum**, chaired by Graça Machel, has produced a number of research reports on violence against children.

**The Special Representative of the Secretary General** on Violence Against Children reports on the issue annually to the United Nations General Assembly.



The Agenda for Children adopted by the African Union in 2017 makes violence a priority for action by member states.

**African governments** have shown leadership on the issue in recent years. **Tanzania** co-founded the Global Partnership to End Violence Against Children and is one of its Pathfinder countries, as is **Uganda**. The **President of Rwanda**, Paul Kagame and the **President of Malawi**, Peter Mutharika are champions of the UN's "He for She" anti-violence campaign and **Zambia** backs the UN's "High Time" campaign. The **President of Nigeria**, Muhammadu Buhari launched a campaign on the issue.

All of the above countries, plus **Botswana, Kenya, Swaziland and Zimbabwe** have done surveys on the prevalence of childhood violence, partnering for this with the US Centers for Disease Control.

**Traditional leaders** in countries such as Malawi and Uganda have spoken out on the issue.

# Appendix 1: other factors in violence prevention

**Data and cultural issues pose challenges. Intervention priorities are informed by global recommendations.**<sup>12</sup>

The design and implementation of intervention programs need to take account of the fact that while the headline results of the best programs are encouraging, detailed results are often nuanced. Cultural sensitivities about violence pose challenges to prevention efforts. The globally-recommended anti-violence strategy INSPIRE informs the key intervention areas and enabling factors identified in this paper.

## Interpretation of data

The success of some programs in reducing violence against children is inspiring and encouraging. However, the full picture is more complicated and sometimes less clear than might be apparent from the headline results from the best programs:

- Sometimes an array of indicators will have been measured and only some will have involved substantial changes.
- Sometimes there will have been secondary effects as well as the main results.
- Sometimes there will have been wider social changes taking place that affect both controls and intervention groups in beneficial or adverse ways over the period covered by a study.
- Sometimes results will have been based on small sample sizes.
- Sometimes a program will generate good results on some of the occasions that it is implemented but not always.
- Sometimes maltreatment will be used as a measure of impact, thereby combining violence with the issue of neglect.

**Future efforts to prevent violence will therefore have to be based on evidence which is a mixed in its reliability.** Some studies are robust but others are promising rather than conclusive.

## Cultural hurdles

The issue of violence against children is culturally sensitive and often difficult to address:

- In some cultural contexts, violent punishment of children in the home is seen as necessary discipline for bringing them up properly, and at school as an essential part of maintaining order in the classroom.
- Sexual violence can be seen as a shameful stigma for the victim and their family and so regarded as something not to be acknowledged.
- Cultural contexts influence the threshold of severity regarded as violence and the extent to which emotional abuse is regarded as being a form of violence.

## International recommendations

The key intervention areas and enabling factors described previously are drawn from the anti-violence strategy INSPIRE, backed by UNICEF, WHO, the World Bank and others. It sets out seven areas, the first letters of which form the acronym INSPIRE:

- Implementation and enforcement of laws.
- Norms and Values.
- Safe Environments.
- Parent and caregiver support.
- Income and economic strengthening.
- Response and support services.
- Education and life skills.

The intervention areas in this paper of “children”, “home”, “school” and “community” are drawn respectively from the INSPIRE headings “life skills”, “parent and caregiver support”, “education” and “norms and values”. The enabling factors are from the INSPIRE headings for laws, safe environments, economic strengthening and support services.

# Appendix 2: about Big Win Philanthropy

Big Win Philanthropy supports visionary leaders in Africa to deliver transformational economic growth by investing in children and young people.

## Our approach

We see children and young people as an asset for creating economic growth and stability - too often they are seen as a problem or a burden. Led by the priorities of our African partners, we focus on three areas of human capital investment: brain development, education and employment.

### Proper brain development

enables a child to become a fully functioning person, but is impaired by undernutrition, lack of stimulation and violence.



### High-quality education

relevant to economic productivity is crucial for a child's own quality of life and contribution to national growth.



### Youth employment

can make Africa's population (set to quadruple by 2100) an economic powerhouse rather than a source of poverty and instability.



## Our offer

We support leaders to more effectively define and deliver the "big win" goals they regard as most important. This can include support for:

- Strategy and planning.
- Monitoring of execution and evaluation of impact.
- Strategic program delivery.
- Leverage of knowledge and innovation.
- Facilitation of inter-sectoral collaboration.
- Positioning of programs to secure funding.
- Strategic communications.

## About us

Big Win Philanthropy was founded in 2015 and is based in the US and the UK. Key themes for our work include:

- Identifying opportunities with the potential to be national or global game-changers.
- Using data to inform priorities, refine programs and assess results.
- Giving focus and prestige to implementation as well as to policy.

Our experienced staff team is led by our CEO Muhammad Ali Pate, formerly Minister of State for Health in Nigeria.

Please go to [www.bigwin.org](http://www.bigwin.org) for more information. [Please get in touch with us at info@bigwin.org](mailto:info@bigwin.org) to explore the opportunities for partnership.

## What our partners say

*"I am very pleased that my foundation (FDC) and the Government of Mozambique are working in partnership with Big Win Philanthropy. Big Win is supporting the government to achieve our vision and goals for human development, and to realize a demographic dividend".*

**Graça Machel, Founder, Foundation for Community Development**



*"I had a very positive experience of partnership with Big Win Philanthropy when I was Ethiopia's Minister for Health. The Big Win team regarded themselves as working for me, supporting the Ministry to achieve the very ambitious targets in its... Transformation Plan."*

**Dr Kesetebirhan Admasu, former Minister of Health, Ethiopia**



*"The greatest contributor to economic growth is not physical infrastructure, but brainpower: what I refer to as "grey matter infrastructure"... I am very pleased with the strategic partnership of the African Development Bank with Big Win Philanthropy to help secure nutrition and drive grey matter infrastructure for Africa."*

**Akinwumi Adesina, President of the African Development Bank**



## Board

- Jamie Cooper - founding Chair and President. Formerly co-founder, CEO and Chair of the Children's Investment Fund Foundation.
- Suprotik Basu - Partner and Founder, Blue like an Orange Sustainable Capital.
- Malik Dechambenoit - GM for EA & CC for Africa, Rio Tinto.
- Luísa Dias Diogo - formerly Prime Minister of Mozambique.
- Mark Dybul - formerly Executive Director of the Global Fund.
- Bill Haney - CEO of Credit Benchmark.
- Nikos Makris - Chief Investment Officer of Macrosynergy Partners.
- Dzingai Mutumbuka - Formerly Minister for Education of Zimbabwe.

# Sources

The notes below give an indication of the nature of the sources for each section of this summary paper. **Please see the full version of the paper for detailed references.**

1. In the section “The prevalence of violence in Africa” the figures are medians calculated from surveys in Kenya, Malawi, Nigeria, Tanzania, Swaziland and Zimbabwe (thus offering data from Western, Eastern and Southern Africa). The survey reports, published by the national governments of those countries between 2007 and 2014, were undertaken in partnership with the US Centers for Disease Control (CDC). The figures for injury, multiple occurrences of physical violence and witnessing are drawn from the Malawi and Nigeria reports only (which were the only countries of the six to publish data on these issues). The figure for approval of violence is a median of country data compiled by UNICEF. Other sources of prevalence data are the African Child Policy Forum, Harvard Medical School, USAID’s Demographic and Health Surveys and UNICEF’s Multiple Indicator Cluster Surveys, which all confirm a similar picture to that of the CDC studies. The results regarding socio-economic status are from an analysis of Demographic and Health Survey (DHS) data from six African countries (Yahaya et al 2012), a 2014 UNICEF analysis (in its report Hidden in Plain Sight) of data from the DHS, the Multiple Indicator Cluster Surveys (MICS) and national data, and an unpublished 2017 reanalysis by Big Win of the UNICEF dataset. The material about children seen as “different” is from the 2017 Ending Violence in Childhood Global Report and reports on disability from the African Child Policy Forum in 2011 and 2014. The comparison of Africa to other regions is from the 2017 Ending Violence in Childhood Global Report. All these sources are listed in section 1 of the full version of this paper, together with additional material and additional sources on these topics.
2. The section “The effects of violence on brain development” is based on about 20 journal papers including both primary studies and reviews, for example a review of neurological evidence published by the journal Nature in Nature Reviews Neuroscience (Teicher et al 2016). These sources are all listed in section 2 of the full version of this paper.
3. The section “The mental effects of violence” is based on about 30 journal papers, for example a review by a panel of experts of 190 studies on the associations between violence and mental health (Moffitt et al 2013), a meta-analysis of 118 studies on witnessing violence (Kitzmann et al 2013) and a 2010 review from the US National Scientific Council on the Developing Child. These sources are all listed in section 2 of the full version of this paper.
4. The section “The effects of violence on physical health” is based on about 15 journal papers and international reports, such as publications in the Lancet and the Bulletin of the World Health Organisation (WHO), and WHO reports from 2013 (Global and Regional Estimates of Violence Against Women) and 2014 (Global Status Report on Violence Prevention). These sources are all listed in section 2 of the full version of this paper.
5. The section “The effects of violence on education” is based on about 20 journal papers (primary studies and reviews) mainly of research in North America. These sources are listed in section 3 of the full version of this paper.
6. The section “The effects of violence on employment” is based on two studies concerning the economic impact of violence against children (Zielinski 2009 and Currie & Widom 2010) in North America. The material on the economic impact of domestic violence against women is based on studies reviewed in two World Bank reports (Intimate Partner Violence, 2013 and Voice and Agency, 2014). These sources are all listed in section 3 of the full version of this paper.
7. The section “Why violence has such a big economic impact” is based on areas of cost noted by a wide range of studies, drawn from section 4 of the full version of this paper.
8. In the section “The effects of violence on economic growth” the South African study (The Economic Burden of Violence Against Children in South Africa) was published in 2016 and involved a significant consortium. Its reference group included the Department of Social Development and the National Treasury of the Government of South Africa, it was commissioned by Save the Children and it was jointly published by Georgia State University in the US, the University of Edinburgh in the UK and the University of Cape Town. As far as we are aware it is the only such study undertaken in Africa. The 4% figure is from a reanalysis of the data published in 2017 (using the most up to date Global Burden of Disease figures). The UNICEF study in South East Asia was undertaken in 2015 (both the South African study and the South-East Asian one were led by Professor Xiangming Fang of Georgia State University). The material about the impact of children witnessing violence is based on journal papers such as the review cited in note 4 above. The material about impaired parenting comes from the 2013 World Bank report Intimate Partner Violence. The material about the economic impact of domestic violence against women comes from a 2012 UN Women study in Vietnam, a 2010 CARE study in Bangladesh and a 1999 study in Nicaragua and Chile (these last two cited in the 2013 World Bank report). These sources are all listed in section 4 of the full version of this paper.
9. The section “Interventions to prevent violence” is based on about 50 sources, almost all of which are primary studies, meta-analyses or reviews published in academic journals, listed in section 5 of the full version of this paper.
10. The section “What helps interventions work well” consists of a commentary by Big Win Philanthropy (for the characteristics of successful programs) and material based on about ten journal papers and official reports (for the enabling factors) which are listed in section 5 of the full version of this paper.
11. The section “Leadership on the violence agenda” is based on about 15 official reports and organizational websites. These are all listed in section 6 of the full version of this paper.
12. The section “Appendix 1: other factors in violence prevention” consists of commentary by Big Win Philanthropy.

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