Violence begins early

The nature and potential impact of violence on children differs according to children’s age (FIGURE 1) and their level of emotional, cognitive and physical development.

Violence during pregnancy

Evidence suggests that the experience of inter-personal violence begins as early as in infancy, or in some cases even before birth. In the prenatal period, children are primarily affected by violence against their mothers. Until birth, a child’s health and well-being are inextricably bound up with that of the mother who may face physical, sexual or emotional violence from her intimate partner or others during pregnancy.

Violence during pregnancy affects both women and girls, as many young mothers are themselves children under 18. Demographic and Health Surveys, and the International Violence against Women Survey indicate prevalence rates for intimate partner violence during pregnancy for most countries of 4-9 per cent, ranging from 2 per cent in Australia, Cambodia, Denmark and the Philippines to 14 per cent in Uganda.

Child homicide in the early years

Child homicide is the most extreme form of violence against children and a tragic event with serious effects on families and communities. Approximately 95,000 children under 18 years are murdered each year globally, and the risk of being murdered in childhood is strongly associated with age, gender and geography. Of the children who are murdered each year, one in every five is under the age of four.

A systematic review of child homicide perpetrators shows that only 14 countries have data on homicide perpetrators of children under 1 year of age. These data reveal that parents are the most common perpetrators of homicides of children under 1 year. In 12 countries where there are detailed data on parents as perpetrators, mothers commit the majority of parental homicides of children under 1 year. Research also shows that drivers of neonatal homicide include maternal depression, stress

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7. This is excluding studies investigating neonaticides only.
caused by domestic violence as well as lack of economic support, especially in the case of single mothers.\(^8\)

Finally, the greatest risk of violence against children, particularly newborns, is when it is deliberate, for example, when violence is used to force an abortion or miscarriage. In some countries, female fetuses are aborted and newborn girls murdered because of a preference for male children. Such feticide is particularly prevalent in highly gender unequal societies, where social norms accept a preference for boys.\(^9\)

**Corporal punishment and domestic violence**

Boys and girls under age four are both exposed to violence by primary caregivers and other family members, and they can also be hurt inadvertently in incidents of domestic violence. A systematic data review\(^10\) conducted for Ending Violence in Childhood: Global Report 2017 suggests that violence by caregivers starts as early as age 2, with boys and girls exposed to both physical and emotional violence.\(^11\) (FIGURE 2) This puts children on a trajectory of exposure to such violence throughout their childhood.\(^12\)

**The consequences of violence exposure in early childhood**

The earlier a child faces violence, the more damaging are its lifelong impacts.

Domestic violence – physical, sexual or emotional violence at the hands of an intimate partner during pregnancy – poses the gravest danger to both the mother and unborn child. For example:

- Hormones released by women in response to the stress of being harmed, could permeate the placenta and affect the baby’s development.

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\(^10\) The review covered studies from 158 countries with past month, age- and sex-specific violence prevalence estimates.

\(^11\) The review covered studies from 158 countries with past month, age- and sex-specific violence prevalence estimates.


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in utero, potentially resulting in premature birth and problems in the child’s nervous system and brain.\(^6\)

- Women affected by domestic violence have been found to develop complications during pregnancy resulting in miscarriages, abortions or still birth. Their children are also more likely to be stunted and develop diarrhea than children of women who do not face such violence, irrespective of individual and household level factors, including household wealth.\(^7\)

After birth, the effects of domestic violence can negatively influence the mother’s ability to adequately care for her child. For instance, research conducted in the United Kingdom found that women who suffered domestic violence during pregnancy were more likely to be depressed before and after childbirth. Their children were more likely to experience behavioural problems and peer violence before their fourth birthday.\(^8\)

Research confirms the importance of providing a protective environment for children in utero and after birth, particularly during the first 1000 days of a child’s life. This is important for two reasons. First, a child’s brain is built, not born.\(^9\) A child’s environment and his experiences, especially those before the age of three, support or hinder the development of the brain and other organs.\(^10\) Research shows that when children experience strong, frequent, and/or prolonged adversity without adequate adult support during this period, they undergo what is known as ‘toxic stress’.\(^11\) Such toxic stress produces physiological disruptions or biological “memories” that undermine the development of the body’s stress systems and affect the developing brain, cardiovascular system, immune system, and metabolic regulatory controls.

Second, younger children are not able to retaliate as compared to older children, often internalizing the effects of violence, and therefore, exhibiting higher


\(^{15}\) Jack P. Shonkoff, M.D., Director of the Center on the Developing Child at Harvard University.


\(^{17}\) Adversity can include physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship.

levels of psychological and emotional distress when faced with violence. Such physiological disruptions can persist far into adulthood and lead to lifelong impairments in both physical and mental health, affecting later outcomes including education and the ability to secure and maintain gainful employment. Researchers at Harvard Medical School have found that exposure to violence can also increase the risk of stress-related diseases and cognitive impairment. Violence can cause chemical modifications to a child’s DNA. These ‘epigenetic’ changes alter gene expression, putting stress response systems on ‘high alert’ and ultimately creating a disease-promoting hormonal and inflammatory environment. By the time a child victim reaches adulthood, she is often at increased risk not only of depression, post-traumatic stress disorder, and addiction, but also of cardiovascular disease, asthma, obesity, diabetes, cancer, and numerous other illnesses. Such disruptions in childhood also heighten the possibility of involvement in exploitative relationships in later life. Children who are violently abused often grow up viewing violence as normal and acceptable, and could, as adults, perpetrate violence on their family members or partners. They are also more likely to develop behavioural problems, such as exhibiting out of control behaviour.

Policy Recommendations

Build synergies between movements for ending violence against women and children

The culture of silence around childhood violence can be broken if the movements concerned with violence against children and those concerned with violence against women, join forces to highlight the problem. Studies identify many common drivers of violence against women and children. Violence against both groups tend to be more common in societies with weak legal sanctions against violence, where social norms condone violence, or where there are high levels of social, economic, legal, political inequality, including gender inequality. Societies and communities where there are inadequate protections for human rights, weak institutional responses to violence, and high levels of criminal violence or armed conflict are also susceptible to high levels of everyday violence.

There has been progress in reducing domestic violence against women over the years. In almost all countries that have more than one year of data tracking violence against women, the level of women’s and men’s acceptance of wife-beating has decreased. Movements for children’s rights can do the same, especially if they galvanize action by professionals and citizens to encourage bystander intervention and shift social norms. Forging connections between women’s rights and children’s rights can benefit both movements, for both fields grapple with issues of dependency and marginalization – the effects, almost always, of power differentials.

Invest in programmes that will prevent violence

Children need nurturing care to achieve their full potential. Nurturing care consists of five interrelated components: health, nutrition, safety and security, responsive caregiving and early learning. This requires commitment to provide all children with safe and secure environments that protect them from harm and abuse, taking care of their health and nutritional needs, and providing them with opportunities for early learning and interactions that are engaging, loving, developmentally appropriate, and responsive. Ensuring that parents and other caregivers are able to provide optimal care for their children is essential, especially as violence against children tends to start before a child’s first birthday. Interventions that empower pregnant women to deal with abuse, and those that provide nurturing care for all caregivers, including fathers, can equip them with the knowledge, confidence, and skills to provide safe, secure, and nurturing environments for children.
Parental support is an important factor in preventing child maltreatment, irrespective of socio-economic status. There is a greater risk of abuse if parents have a poor understanding of child development and, therefore, unrealistic expectations about their child’s behaviour. Parents are also at risk of abusing their children when they approve of physical punishment, have a more controlling, aggressive or inconsistent parental approach, or were abused themselves.29

Conversely, child maltreatment is less likely when parents are better placed to provide nurturing care to their children, and are affectionate and responsive. Good parenting, strong parent-child relationships and a cohesive family unit are, therefore, important factors in the prevention of child maltreatment. Interventions that address parental capacities to provide better nurturing care have been shown to be effective in improving children’s cognitive and behavioural outcomes.30

Prevent family violence

Preventing family violence is the first step towards ensuring a safe and secure environment for children. Core strategies include extending parenting education and support to parents and other caregivers, involving fathers, reducing alcohol consumption (which often leads to conflicts within the home) and strengthening emotional understanding in familial relationships. (FIGURE 3)

Support pregnant women and young children – Research is largely inconclusive about the best forms of intervention to protect pregnant women and newborns. Nevertheless, promising interventions in high-income countries include counselling and psychological therapy, to give women more confidence and to encourage them to make plans to avoid abuse. Referral to social workers, shelters and other community-based resources may also help. For violent partners, referrals can be made to ‘batterer’ treatment programmes.

Antenatal visits allow healthcare professionals to identify women who are suffering from intimate partner violence, and offer help. The most frequently tested intervention in antenatal care is a short ‘empowerment counselling’ intervention, which provides information about the types of abuse and the cycle of violence, conducts an assessment to look at risks and preventive options, and develops a safety plan with the pregnant woman. Results in the United States and Hong Kong show that this type

Source: Know Violence in Childhood 2017.

FIGURE 3: Preventing family violence – pathways of change

- Improved communication between family members
- Reduced alcohol consumption
- Involved fathers

- Less conflict in the home
- Adults serve as positive role models for children
- Men enabled to spend more time with the family than with peers
- Caregivers better able to cope with stressful situations
- Transformed traditional gender norms
- Empowered women, enjoying greater freedoms

of intervention decreases psychological and physical violence, and results in improvements in women’s physical and mental health.\textsuperscript{31}

Home-visitation programmes starting from pregnancy and extending for a few years of a child’s life have shown positive results, when part of a continuum of care provided to families with young children. Positive effects include improved health outcomes for women and children, and also reductions in child abuse and neglect.\textsuperscript{22} Evidence from an evaluation of a home-visiting programme in the United States shows a reduction in emergency department visits and injuries for children whose parents were in the intervention group.\textsuperscript{20} Moreover, at a 15-year follow-up study, rates of child abuse in the intervention group were reduced by 48 per cent compared with the children in a control group.

\textit{Encourage and support male care-giving} – Programmes that provide support to fathers and other male carers can reduce domestic violence and increase men’s engagement in the care of children. For example, the Fatherhood Institute in the United Kingdom offers a wide range of training and consultancy services on how fathers can become better carers for their children. It also educates young boys and girls, and prepares them for a future shared role in caring for their children,\textsuperscript{39} thereby helping transform masculine norms around the roles of each parent in sharing the burden of care.

Besides parenting support and training, a reduction in the consumption of alcohol by men appears to improve domestic relationships. Spending more time at home, as opposed to drinking with peers, can help reduce partner conflict. Men also appear better able to deal with volatile situations when they are not under the influence of alcohol.\textsuperscript{40}

\textit{Support children to deal with violence exposure} – Research suggests that children can be educated at a young age to recognize and cope with violence exposure. Curricula used in early childhood education programmes can be an effective tool in reducing violence in childhood. It can include, for instance, activities where children learn social-emotional skills and dispositions, and practice them regularly with adult guidance. Children can also develop skills by doing activities that foster creative play and social connections; teach them how to cope with stress; show how to resolve conflicts with adult help; and direct their own actions with ever-decreasing adult supervision.\textsuperscript{26}

Estimates suggest that not even half of the world’s eligible children attend formal early childhood education programmes.\textsuperscript{27} Without such investments, children are more likely to use violence as a conflict resolution mechanism when they enter adulthood; or may become victims of violence themselves.\textsuperscript{36} Investment in early childhood education curricula needs to be complemented by investment in expanding access for those children who need it most.

\textit{Empower communities to prevent and end violence} – Community mobilization programmes can help to reduce violence against women and children. The SASA! programme in Uganda, for example, works at the community level to focus attention on a core driver of gender-based violence – the imbalance of power between women and men, and girls and boys. The programme achieves this by supporting and enabling communities to rethink and reshape social norms that underpin the acceptance and perpetuation of gender-based violence. Though the programme did not include a specific parenting component, an evaluation study found that participation in the programme was associated with fewer children witnessing intimate partner violence, and men spending more time, and being less violent, towards their children.\textsuperscript{39}

Ending violence requires a strong alliance across all stakeholders – building local, national,
regional and global movements. Social movements starting from the bottom-up, at the community level, and sustained over long periods can achieve significant social transformation. Rather than being viewed as a threat, such movements should be encouraged by governments and supported by donors, as a crucial investment for the future of the world’s children.40

Responsibility for ending violence ultimately rests with communities, states and nations. Whatever be their mode of administration, they should collaborate with partners who can harness knowledge to scale-up good practices. This is important because many of the new forms of child abuse are trans-national – especially online bullying and cybercrimes – and require concerted, cooperative action across national boundaries.

A good example of a campaign that has worked across such boundaries is MenCare.org.41 The global fatherhood campaign is active in more than 45 countries across five continents and promotes men’s active, equitable and nonviolent involvement as fathers and caregivers. Through media outreach, programme development, and advocacy, the programme works with men and couples as programme participants in parenting groups, as well as with entire communities, trying to change norms around what it means to be ‘a man’. It also supports organizations and community mobilizers to push for progressive legislation, and works with institutions and governments to see men’s engagement in caregiving as a key dimension of gender equality.

Implement and enforce laws and work to shift underlying social norms

Laws prohibiting violent behaviours like corporal punishment of children signal that society does not consider these behaviours acceptable. Despite laws being in place, however, social and cultural norms in a society can create a climate in which violence is encouraged and normalized. For example, despite a law banning corporal punishment, and the general belief that it is not normal, a society may still justify it as a form of discipline. In such a scenario, strict implementation and enforcement of laws and policies (for example, laws banning harsh punishment of children or policies such as maternity benefits that enable parents provide early nurturing care) alone may not help. It may have to be supplemented with approaches like community mobilization programmes, bystander interventions, and small group programmes that challenge attitudes around disciplining children or attitudes around beating women, including pregnant women.42

Conclusion

Preventing violence against children through investments in early childhood development, is one of the best ways a country can boost prosperity, promote economic inclusiveness, expand opportunities and end extreme poverty. It is good for everyone – for governments, businesses, communities, parents, and caregivers, and most of all, for children themselves.

There are rapid advancements being made in understanding and preventing violence against children. Although greater investment is needed to increase our knowledge about how best to prevent violence against children, there is sufficient evidence to encourage investment in violence-prevention, particularly through supporting safe, stable and nurturing environments in which children can thrive. Violence against children is preventable, but prevention needs to start early.

Every day millions of boys and girls around the world experience fear and violence – physical, emotional or sexual. This need not happen. Violence in childhood is preventable – through concerted and collective action that addresses the root causes of violence and lays firm foundations for both sustainable development and more peaceful societies.

To fulfill the commitments to ending all forms of violence that are enshrined in both the Convention on the Rights of the Child and the Sustainable Development Goals of the 2030 Agenda, states and societies must analyze the causes of childhood violence, and invest in preventing violence against women and children.

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41. https://men-care.org/
The Partnership for Maternal, Newborn & Child Health (The Partnership, PMNCH) is an alliance of more than 1000 organizations in 92 countries from the sexual, reproductive, maternal, newborn, child and adolescent health communities, as well as health influencing sectors. The Partnership provides a platform for organizations to align objectives, strategies and resources, and agree on interventions to improve maternal, newborn, child and adolescent health. The Partnership represents ten constituencies: partner countries; donors and foundations; intergovernmental organizations; non-governmental organizations; academic, research and training institutions; adolescents and youth; healthcare professional associations; private sector partners, UN agencies and global financing mechanisms. Collectively, PMNCH partners have catalyzed tremendous progress over the last decade and continue to drive momentum toward improved maternal, newborn, child and adolescent health outcomes.

Our mission is to increase the engagement, alignment and accountability of partners, by creating a multi-stakeholder platform that will support the successful implementation of the Every Woman Every Child Global Strategy, enabling partners to achieve more together than any individual partner could do alone.

PMNCH is supported by a small secretariat hosted at the World Health Organization. (www.pmnch.org)