Intersections between Violence Against Children and Violence Against Women Identifying Evidence Gaps and Opportunities for Collaboration

Together to #ENDviolence Solutions Summit Series

19 October 2021 15:00 CET



End Violence Against Children Office of Research-Innocenti

World Health Organization



SHARED RISK FACTORS

Gender inequality and discrimination Lack of responsive institutions Weak legal sanctions Male dominance in household Marital conflict Harmful alcohol and drug use

COMMON AND COMPOUNDING CONSEQUENCES

Similar mental, physical, sexual and reproductive health consequences

May have cumulative, compounding effects

ADOLESCENCE

When VAW and VAC intersect Elevated vulnerability When perpetration and victimization often begin Early marriage and childbearing Adolescents sometimes overlooked Opportunities to prevent Violence Against Women and Children

SOCIAL NORMS

Condone violent discipline

Promote masculinities based on violence, control Prioritize family reputation, blame victims Support gender inequality

CO-OCCURENCE

Partner violence and child abuse often occur in same family

Children in households where mother abused more likely to experience violent discipline

INTER-GENERATIONAL EFFECTS

Consequences of VAC last into adulthood

Partner violence affects: birth weight, under-5 mortality, mental health, social development

VAC increases risk of perpetrating or experiencing violence later in life

Opening

Part 1: presentations on the evidence

Taking stock of the evidence on the intersections between VAC and VAW: What do we know and how robust is that knowledge?



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Break

Part 2: expert panel discussion

The path forward: Critical reflections on evidence gaps, priorities and uptake and the opportunities and challenges that lie ahead

Closing



90 minutes Session is being recorded

Audio is muted. Questions via Q&A. Clarifications via chat. Follow-up email with recording and resources

Part I: Taking stock of the evidence on the intersections between VAC and VAW



Isabelle Pearson

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The Co-Occurrence of Intimate Partner Violence and Violence Against Children: Associated Factors in Low- and Middle-Income Countries

Isabelle Pearson, Sabrina Page, Cathy Zimmerman, Franziska Meinck, Floriza Gennari, Alessandra Guedes, Heidi Stöckl







Systematic literature review aimed to:

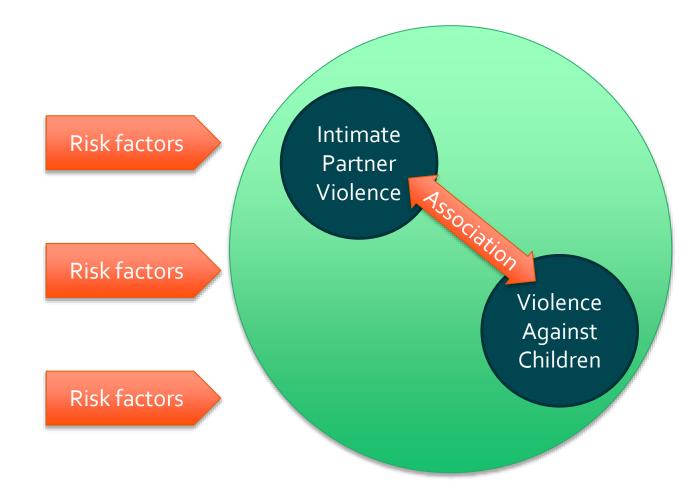
- 1. Identify and synthesise research on co-occurring intimate partner violence and violence against children in low- and middle-income countries
- 2. Identify individual, social and environmental risk factors associated with co-occurring violence
- 3. Consider implications for future joined-up interventions

Setting:

• Low- and middle-income countries due to existing scoping review that covered high-income countries: <u>Sijtsema et al., 2020</u>

Inclusion Criteria: types of co-occurrence





Definitions used (1/2)



Violence Against Children

- <u>Before the child was 18 years old</u>, perpetrator was <u>either parent/caregivers</u>
- Any violent act (physical, psychological and sexual abuse and neglect) administered by either parent/caregiver

Intimate Partner Violence

- In the <u>past year / by current or most recent partner</u> of one of the child's parents/caregivers
- Physical, psychological or sexual violence and economic abuse

Children Witnessing Intimate Partner Violence

• Studies where the child reported direct experience of violence from a caregiver and also witnessing parental IPV were also included, with the witnessed IPV being considered evidence for IPV (not child maltreatment)

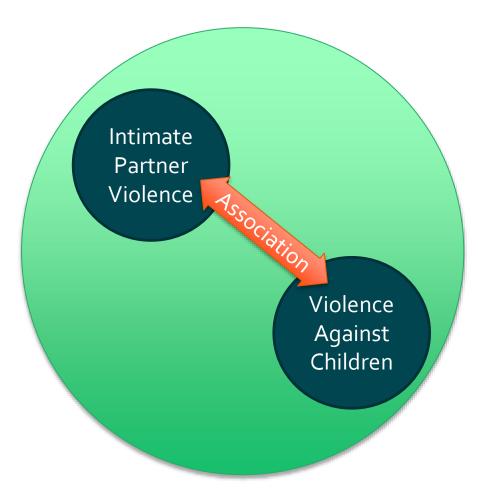
Results: summary



- Search: 1st January 2000 16th February 2021
- **11,236** found \rightarrow **6,520** abstracts double screened \rightarrow **412** full texts double screened
- **33** studies included in the review
- **31** cross sectional, **1** case control, **1** cohort
- **25** countries

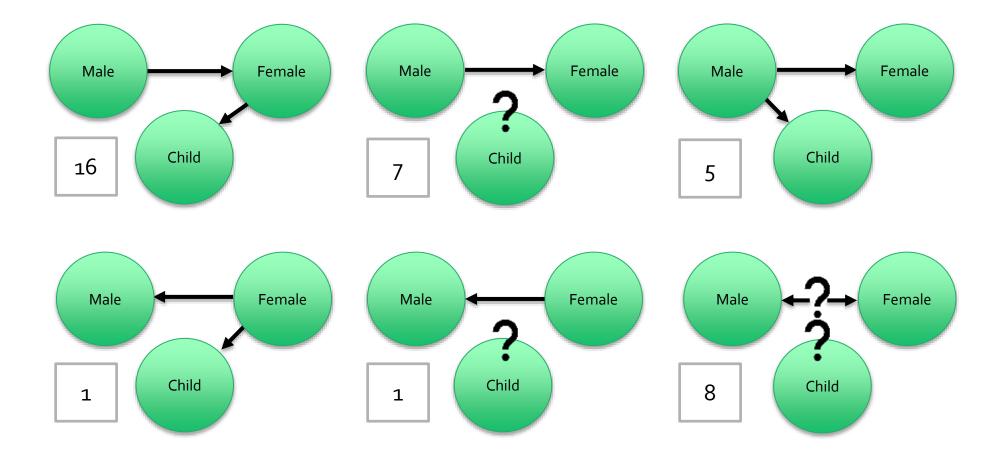
Results: association between IPV and VAC





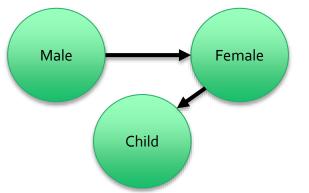
Results: types of violence co-occurrence





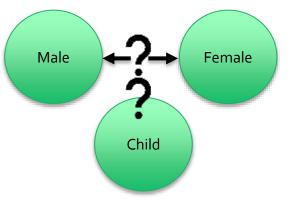
Results: meta-analysis for pooled Odds Ratios (OR)





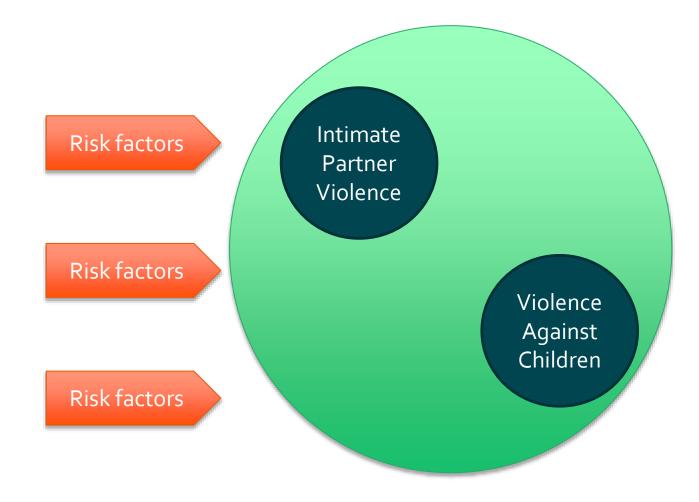
Physical partner violence: OR: 1.57, 95%Cl (1.47-1.67), p=0.00 Sexual partner violence: OR: 1.78, 95% Cl (1.22-2.60) p=0.00 Psychological partner violence: OR: 1.77, 95%Cl (1.43-2.19) p=0.00

Overall partner violence: OR: 3.82, 95% CI (2.28-6.42) p=0.00



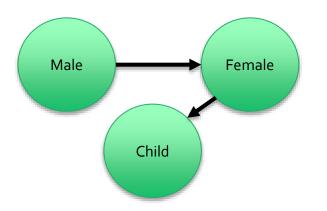
Results: risk factors for co-occurrence





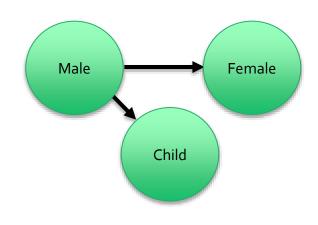


Carlson et al., 2020, Uganda



Protective: Female's education & Female caregivers' emotional attachment to intimate partner

Not significant: age, religious status, socioeconomic status, alcohol use, mental distress, relationship length, caregiver attitudes against VAC



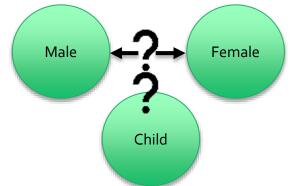
Protective: Male caregivers' attitudes against VAC & Male caregivers' emotional attachment to their intimate partner

Not significant: Education, age, religious status, socioeconomic status, alcohol use, mental distress, relationship length

Risk factors for co-occurring IPV and VAC (n=3)



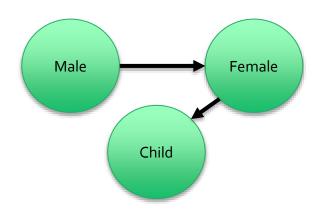
<u>Reichenheim et al., 2019</u>, Brazil, partner violence during pregnancy



Risk: older maternal age, caregiver misuse of alcohol and/or drugs

Protective: Caregiver companion's educational level, presence of children aged under 5 years

Buffarini et al., 2021, Brazil



Risk: Absence of child's father, paternal anti-social behaviour, neighbourhood violence, level of criticism in the relationship, maternal depression, younger maternal age

Not significant: younger paternal age, lower maternal/paternal education, lower family income, maternal alcohol use and maternal illicit drug use



Lack of research regarding men's use of violent parenting

- Most studies did not inquire who was responsible for disciplining the children, or assumed it to be the mother – leading to an over-representation of female-perpetrated violence against children. We should interpret frequently reported female perpetrated violence against children with caution
- Failing to include male's violent parenting is important: two studies found a strong association between the female caregiver's use of harsh discipline with her partner's use of harsh discipline
- Important to move beyond a simplistic and linear understanding of household violence, need to understand the dynamics of the household as a whole

Discussion



Definitional incongruity

- Overlap between terms such as physical violence, maltreatment, abuse, harsh discipline, cruelty

 multiple studies derived from Egyptian 2005 DHS suggest terms are used interchangeably
- Wide spectrum of abuses included with insufficient attention paid to frequency and severity: shouting once at a child to giving third degree burns

Risk factors

- Limited availability of quantitative evidence for risk factors and lack of longitudinal data
- Only 3 studies with inconclusive findings
 - Not unexpected due to the complexities and inconsistencies of the research

Conclusion



- Valuable data on IPV and VAC is being collected and studied across many LMICs, but co-occurrence and associations often not analysed
- Missed opportunities to collect data on identity of perpetrators
- Future research should aim to understand the interlinking factors among both male and female use of VAC, and ensure data is collected for male caregivers too.
- Interventions would benefit from better evidence on potential mediators, moderators and confounders of the interactions between violence types, which would help conceptualise the multifaceted nature of violent relationships.

Effective interventions that seek to prevent/respond to intimate partner violence against women and violent discipline: a rapid systematic review

Solutions Summit, 19th October 2021 Manuela Colombini, Loraine J Bacchus, Isabelle Pearson, Alessandra Guedes









- Efforts to respond to the needs of women and children at risk / exposed to various forms of violence still fragmented and siloed
- Scarce research on approaches that explicitly address VAW/VAC intersections (Bacchus, Colombini et al. 2017; Turner 2015)
- Research gaps previously identified:
 - □ small evidence base and methodological weaknesses
 - difficult to identify which components led to promising outcomes
 - □ limited programmes targeting adolescents

SCOPE



Methodology: rapid systematic review approach (Tricco et al 2017)

Focus: IPV and violent discipline (VD)

Inclusion criteria:

- primary prevention and response interventions addressing IPV and VD outcomes
- response (treatment) interventions that report health outcomes consistent with experiences of IPV and VD (e.g. mental health)

Database search: 11,469 studies

Final numbers: 28 studies covering **25** unique interventions

Geographical scope: global (high and low and middle income)

• **15** countries:

➤3 HIC: Sweden, UK, US

▶ 12 LMIC: Afghanistan, Cambodia,
 Colombia, Kenya, Liberia, Papua
 New Guinea, Peru, Philippines,
 Rwanda, South Africa, Uganda,
 Vietnam

KEY PRELIMINARY FINDINGS



Primary Prevention Interventions (17)		
Types	Focus	Main findings
Community- based/couples programme	Reducing IPV with critical reflection on gender norms, power dynamics and gender inequity and the consequences of IPV on health/ relationships	 IPV, physical violent discipline, children's exposure to IPV, acceptability of IPV (community program)
Parenting programmes	Reducing violent discipline of children & developing positive caregiver-child relationship	 in physical violent discipline, indirectly in IPV in awareness of the harmful effects of violence on children
School-based programmes	Changing harmful social norms related to gender and violence at school	 in violent discipline at home, children's exposure to IPV, emotional IPV in gender-equitable attitudes
Cash transfer programmes	Changing social norms on VAW & improving communication & conflict resolution	 No effect on IPV or violent discipline Low impact on changing social norms

KEY PRELIMINARY FINDINGS



Response Interventions (8)		
Types	Focus	Main findings
Health care provider training	 Improving practitioners' knowledge of and multi- agency work on child safeguarding in the context of IPV 	 Changes in knowledge, confidence and self- efficacy; Improved understanding of processes for addressing IPV and child safeguarding
Targeting IPV perpetrators	 Regulating emotions and restoring the father-child relationship and reducing VAW 	 in IPV Changes in attitudes towards violence against wives & children; in anger and affect dysregulation problems
Psychotherapeutic treatment for survivors & their children	 Improving psychosocial wellbeing of the mother and child 	 IPV (new and current relations) use of violent discipline improved mental health of mother and children

RESPONSE INTERVENTIONS TARGETING IPV SURVIVORS & THEIR CHILDREN

4 INTERVENTIONS

- Communitybased treatments
- Court mandated intervention for survivors
- Psychotherapeutic
- Child psychiatric Trauma
 Focussed
 Treatment

MECHANISMS TO REDUCED IPV

- Understanding healthy relationship, recognising danger signs of IPV
- Improved communication skills used in new romantic relationships and with existing partners

MECHANISMS TO REDUCED CHILD EXPOSURE TO VIOLENCE

- Use of non-violent discipline strategies
- Understanding consequences of child exposure to IPV
- Strengthened child-parental bonds & less family conflict
- Better mental health of mother

IPV

- Reduction in IPV
- New relationships violence free
- Increased readiness to decrease violence

Women & children's Mental Health

- Decreased anxiety/depression
- Increased self-efficacy

Child Exposure to Violence at Home

 Reduction in use of harsh punishment

RESPONSE INTERVENTIONS THAT TARGET HEALTH CARE PROFESSIONALS

2 INTERVENTIONS

- RESPONDS training
- Women Centre Safeguarding and Domestic Violence Pilot

MECHANISMS TO CHANGES IN ATTITUDES/KNOWLEDGE

- Training content (e.g. linking IPV and child safeguarding in practice, holding difficult conversations about IPV, speaking directly to children, working with other professionals)
- Increased awareness of referral pathways and services
- Recognising impact of IPV on children and need to ask children about it
- Establishment of multi-agency steering groups
- Improved awareness re: child safeguarding and IPV & ways to improve multi-agency approaches (P)
- Use of case mapping approach to reflect on multi-agency management of domestic abuse cases

IPV AND CHILD SAFEGUARDING

- Changes in knowledge, confidence and selfefficacy on Domestic Abuse & Safeguarding Children
- Improved professionals' understanding of processes for addressing IPV and child safeguarding

INTERVENTIONS FOR MALE PERPETRATORS OF IPV

2 INTERVENTIONS

- Fathers for Change
- Responsible Men Club

MECHANISMS TO REDUCED IPV

- Improved communication and problem-solving skills
- More mutual support and shared decision making
- More positive notions of power

MECHANISMS TO REDUCED CHILD VIOLENCE AT HOME

- Children developed social competencies which led to less behavioural problems
- Reduced use of violence by men
- More positive notions of power
- Use of 'time out' technique

IMPACT ON IPV & CM

- Reduction in IPV
- Changes in attitude towards violence against wives & children
- Decrease in anger and affect dysregulation problems



Key 'ingredients' for reducing IPV and violent discipline

- Improved couple communication and use of conflict resolution strategies
- Reflection on gender equitable norms
- Awareness of adverse health consequences of IPV (and violence in general) on children
- Broader approach v. survivor-centric

Tendency to focus more on one type of violence or addressed the other type of violence in a very limited way

Acknowledgements



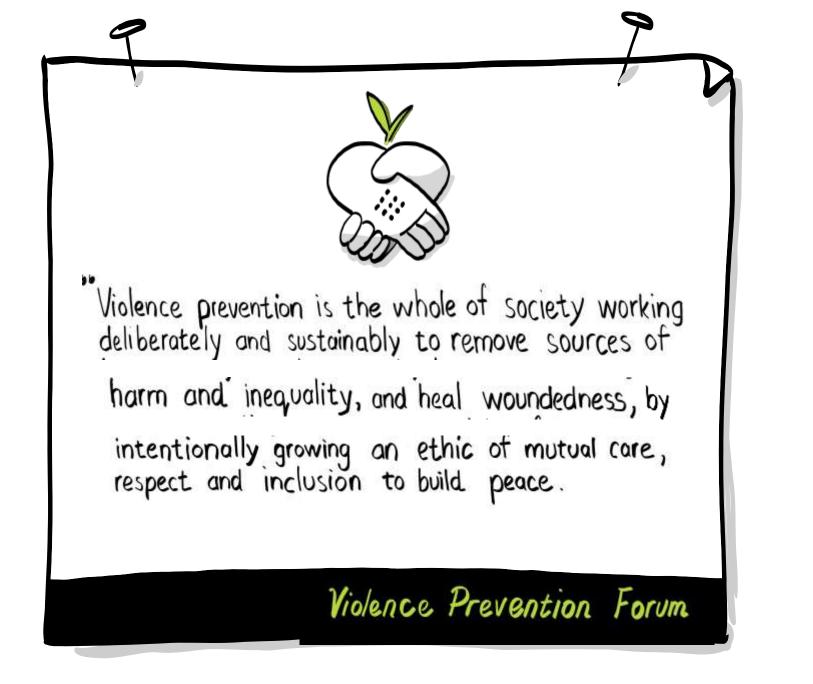
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Q & A



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See you in 3 minutes

Part II: The path forward

Critical reflections on evidence gaps, priorities, and uptake and the opportunities and challenges that lie ahead



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Thank you

Sign up to contribute to a global research agenda on the intersections between VAC/VAW





