

# Violence against adolescents: prevention must cross the divide between children and women

**Danielle Engel and colleagues** call for an increased focus on adolescents in scaled up programmes for child protection and gender based violence prevention

**G**rowing up in a safe and supportive environment is the inherent right of every adolescent and is enshrined in international human rights treaties, including the Convention on the Rights of the Child. It is also essential for their development and wellbeing. The United Nations (UN) H6+ Technical Working Group on Adolescent Health and Wellbeing framework therefore sets out that adolescents need to be physically and psychologically safe and protected from all forms of violence, abuse, and exploitation.<sup>1</sup>

One billion children experience violence in multiple, often intersecting forms each year (box 1).<sup>6</sup> Gender and age put adolescent girls at a double disadvantage based on intersectional systems of oppression, exclusion, and discrimination.<sup>7</sup> Living between childhood and adulthood, their experiences and needs are often overlooked. Interventions, programmes, and policies aimed at tackling violence are generally siloed between protection

and economic opportunities, compromising their current and future lives and choices.<sup>10</sup> Evidence highlights multiple intersections between violence against children and violence against women, including shared risk factors, common underlying social norms, co-occurrence, intergenerational effects, and common and compounding consequences. Adolescence is an opportunity for prevention of both violence against children and violence against women.<sup>11</sup>

## Experience of violence across the life course

Violence occurs across the life course. Children are exposed to violence from alarmingly early ages. Unicef reports that close to 300 million children aged 2-4 years experience psychological aggression or physical punishment, or both, by their caregivers at home. One in two (732 million) children aged between 6 and 17 years live in countries where corporal punishment at school is not fully prohibited. One in four (176 million) children under age 5 live with a mother who is a victim of intimate partner violence, which places children and adolescents on a potential trajectory of violence, including intimate partner violence, in young adult relationships.<sup>8</sup>

As children move to adolescence and navigate an increasingly complex social network, their risk of victimisation increases and the violence, abuse, and exploitation experienced may take different forms. Consequences can be tragic: deaths due to violence are more than double those in the first 10 years of life; more than one in three school students aged 13-15 experience bullying; and a similar proportion are involved in physical fights.<sup>8</sup>

In addition to injury and death, violence negatively affects adolescent brain development and health and social development, as well as increasing the likelihood of poor educational outcomes, early and unwanted pregnancy, sexually transmitted infections, mental health disorders, difficulties in social and emotional functioning, risk taking, substance use or misuse, and obesity.<sup>9</sup> The experience or threat of violence can reduce adolescents' access to support services, social participation, as well as education

and economic opportunities, compromising their current and future lives and choices.<sup>10</sup>

Evidence highlights multiple intersections between violence against children and violence against women, including shared risk factors, common underlying social norms, co-occurrence, intergenerational effects, and common and compounding consequences. Adolescence is an opportunity for prevention of both violence against children and violence against women.<sup>11</sup>

## Violence against adolescent girls

During adolescence, violence against children and women overlap: adolescent girls often experience forms of violence common among younger children, such as violent discipline, as well as violence common in adulthood, such as dating relationship violence and intimate partner violence.

Data from demographic and health surveys, undertaken between 2006 and 2020 and which included a domestic violence module, show that adolescent girls experience high levels of physical or sexual violence, or both. In 36 of 54 countries, at least 20% of adolescent girls aged 15-19 years had experienced physical violence since the age of 15, or had experienced sexual violence, with reported levels as high as 55% (in Sierra Leone).<sup>12</sup>

In many low and middle income countries, sexual initiation, marking a transition into adulthood, is often characterised by violence and coercion.<sup>8 13 14</sup> Child marriage affects 12 million girls each year and is a risk factor for physical and sexual violence by an intimate partner.<sup>15</sup>

One in four adolescent girls and young women (aged 15-24 years) who have been in a relationship have experienced intimate partner violence.<sup>16</sup> Widened access to technology and online spaces has resulted in a parallel increase in technology facilitated gender based violence. A survey across 31 high, middle, and low income countries found that over half (58%) of girls and young women who had access to the internet had been harassed or experienced online abuse, with one in four feeling physically unsafe as a result.<sup>17</sup>

## KEY MESSAGES

- Vulnerability to violence is high in adolescence and poses a considerable threat to adolescents' safety and wellbeing over the course of their lives
- Adolescence represents a critical period of development where interventions can pre-empt key drivers of violence in their present and future lives
- Adolescents are biologically and socially different from younger children and older women, and separate programming to prevent violence in children and in women needs to adapt to their needs and priorities
- Opportunities for greater collaboration include preparing service providers to tackle multiple forms of violence, better coordination between services, school based strategies, parenting programmes, and a common research agenda

**Box 1: Key terminology**

- **Violence against women** is defined by the United Nations<sup>2</sup> as “any act of gender based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life”
- **Violence against children** includes all forms of physical, sexual, and emotional violence, neglect, negligent treatment, and exploitation. Violence against children can happen at home and in the community<sup>3</sup>
- **Gender based violence**, in its original meaning, is “violence that is directed against a woman because she is a woman, or violence that affects women disproportionately. It includes acts that inflict physical, mental, or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty” (general recommendations made by the Committee on the Elimination of Discrimination Against Women, 1992)
- **Physical violence** refers to the intentional use of physical force with the potential for causing death, injury or harm<sup>4</sup>
- **Intimate partner violence** refers to behaviour by an intimate partner or ex-partner that causes physical, sexual, or psychological harm, including physical aggression, sexual coercion, psychological abuse, and controlling behaviours<sup>4</sup>
- **Sexual violence** is any sexual act, attempt to obtain a sexual act, or other act directed against a person’s sexuality using coercion by any person regardless of their relationship to the victim, in any setting. It includes rape, defined as the physically forced or otherwise coerced penetration of the vulva or anus with a penis, other body part, or object<sup>4</sup>
- **Child marriage** is any marriage where at least one of the parties is under 18 years of age, including informal unions<sup>5</sup>

From adolescence into womanhood, a further increase in the prevalence of violence against women occurs.<sup>18</sup> An estimated 736 million women—almost one in three—have been subjected to intimate partner violence, non-partner sexual violence, or both, at least once in their life (30% of women aged 15 and older).<sup>16</sup>

**Risk factors and opportunities**

The underlying causes of and risk factors for violence against adolescents are manifold. They include, but are not limited to, exposure to and experience of violence in childhood, low educational attainment, and gender inequitable and age based social norms and structures. Gender inequities and inequalities, stereotypes, unequal power dynamics, and discrimination put adolescents at different risk of violence based on their gender. While boys are more likely to be victims of homicide, adolescent girls are particularly vulnerable to sexual violence, intimate partner violence, and other harmful practices. Care seeking behaviours among adolescents differ considerably from the adult population.<sup>19</sup> Stigma and social norms related to pre-marital sex or being a victim of violence can easily deter adolescents from seeking professional help. Intimate partner violence among adolescents, for example, often goes unidentified by healthcare providers. As adolescents internalise experiences of various forms of gender based violence, they are forming and assuming harmful gender roles and attitudes that shape their identity and behaviours, and potentially affect their prospects of healthy relationships over their lifetime.<sup>20</sup>

Despite this time of increased vulnerability, adolescence and early adulthood is also the time for laying down

the foundations for healthy behaviours and relationships throughout life. The early adolescent years are particularly sensitive to social and emotional learning: a positive sense of self paired with emotional and physical safety is key to healthy development during this time. Late adolescence sees improvement in self-regulation skills, which are critical for mental and physical health and wellbeing.<sup>20</sup> As such, adolescents are an important age group to pre-emptively tackle key drivers for violence in their present and future lives.<sup>21-23</sup>

In practice, however, programming and research on violence against this age group tends to fall between the categories of violence against children and violence against women. Different funding streams, lead agencies, strategies, and treaty bodies have had the unintended effect of insulated approaches that disadvantage adolescent populations. Adolescents are often overlooked by those involved in child protection or violence against children, who concentrate efforts on younger children, as well as by those working in gender based violence or violence against women, who focus on older women. Neither field has clear adolescent focused approaches that adequately tackle adolescents’ needs and rights.<sup>24</sup> Yet, evidence suggests that consolidating efforts to reduce shared risk factors may help prevent both forms of violence. Common consequences and intergenerational effects of violence call for early and more integrated intervention from those working in the gender based violence and child protection fields.

**How should programming tackle violence against adolescents?**

From the outset, the field of gender based violence needs to adopt a life course

approach when analysing risks and vulnerabilities of women and girls and to recognise that adolescents are biologically and socially different from older women. Programmes should be adapted to the different needs and priorities of adolescents, taking into consideration their evolving capacities across the early, mid, and late adolescence life span and transition to adulthood.<sup>25</sup>

Collection of data on the specific experiences of adolescents is critical. Data collection on violence against children is usually limited to younger children. In contrast, existing data on intimate partner violence generally do not provide sufficient insight into the current prevalence of sexual violence among young adolescents aged 10 to 14 years (although population based surveys such as those drawing on the WHO Multicountry Study on Women’s Health and Domestic Violence methodology and the Democratic and Health Surveys Program do ask about age at first experience of sexual violence).<sup>26-27</sup> The ethics of collecting data from this age group on such a sensitive topic, however, make this type of research especially challenging. As a result, we know little about sexual violence against younger adolescents, including those who experience their first romantic or sexual relationship within the context of dating outside a formal union.<sup>28</sup>

Gender based violence response programmes, including case management systems, require adaptation to support the specific needs of adolescents. The joint UN Essential Services Package for Women and Girls Subject to Violence was launched in 2015 to ensure greater access for all women and girls who have experienced gender based violence to a coordinated set of essential and high quality multisectoral services in the health, police and justice,

and social sectors, particularly in low and middle income countries. However, there is no supplementary guidance for use of the initiative to specifically meet the needs of adolescent girls. This process would require analysis of the needs, barriers, and entry points for designing programmes and case management systems to enable accessibility to acceptable, quality, and appropriate services with the participation of adolescents themselves.

Child protection systems need to recognise the unique experiences of girls and boys and tackle the underlying gender dynamics that affect them differently. This requires programmes for the prevention of violence against children to challenge gender dynamics and consider gender norms and unequal gender relations that drive violence against adolescents, including intimate partner violence, and hinder effective response systems.<sup>29</sup>

Opportunities for greater collaboration between both fields include preparing service providers to tackle multiple forms of violence and better coordination between services for women and for children. It also includes positive parenting programmes, which can help change harmful social and gender norms—root causes of both forms of violence—with beneficial effects on reducing parents’ use of violent discipline against their children and a reduced risk of intimate partner violence among parents themselves.<sup>30</sup> School and community based prevention programmes can increase adolescents’ awareness of violence, and knowledge about where and how to seek help when violence occurs.<sup>31</sup> Components of comprehensive sexuality education for adolescents in and out of school<sup>32 33</sup> support a reduction in their experience of violence. Such a comprehensive education includes modules that promote equitable attitudes and norms, consider stereotypes related to gender and violence, strengthen understanding and skills to resolve conflicts without violence, and create a safe school environment. Robust evidence shows that school based interventions can prevent dating violence, although such interventions are typically delivered by highly trained facilitators, which requires considerable investment.<sup>34</sup>

There is scope for greater coordination among researchers working on violence against children and violence against women as countries prepare to measure progress towards the 2030 sustainable development goals. It is encouraging that researchers, practitioners, activists and donors from both fields are recognising

that collaboration and coherence in programming are essential to meet women’s and adolescents’ needs, and initiatives are underway to enhance cooperation.<sup>35-37</sup>

**Overlooked no more**

Physical and sexual violence is pervasive among adolescents and poses a considerable threat to their safety and wellbeing, not just in the short term but over their life course. At the same time, adolescence is a unique opportunity for preventive action. A focus on early adolescence is particularly critical to stop destructive cycles of inter-generational violence, and to put young people on a path of lifelong health and wellbeing.<sup>20</sup>

In taking a gender lens and a life course approach, violence prevention interventions need to be broadened to account for intersecting drivers of violence in adolescence. This will require increased cooperation between the fields of violence against children and violence against women with holistic, collaborative, and multisectoral prevention and response policies and programmes across different levels of the ecological model. Global efforts must not merely include but must prioritise adolescents and bring their needs to centre stage.

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