Violence Against Children
Child helpline data on abuse and violence
The Global Network of Child Helplines: Membership as of October 2011

Full members*
114 members in 98 countries

Countries with child helplines that fulfil the CHI membership criteria.

Associate members*
41 members in 40 countries

Countries that CHI is working closely with to start child helplines, and that fulfil the CHI associate membership criteria.

*For full details of individual members please visit www.childhelplineinternational.org
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Types of abuse
In 2010, as in previous years, abuse and violence was the most prevalent topic about which child helplines worldwide were contacted. Over a fifth of all contacts with a known reason were about abuse and violence. Of these, physical abuse was the most common form of abuse reported (39%), followed by bullying (25%), sexual abuse (18%), neglect (9%) and emotional abuse (8%).

Victims
About two thirds of all reported cases of abuse in 2010 involved girls. The percentage of cases involving girls was even higher for sexual and emotional abuse. For boys, physical abuse and bullying were the most common forms of abuse suffered.

Perpetrators
Overall, the majority of abuse cases reported to child helplines in 2010 involved male perpetrators, although neglect and emotional abuse were reported to have been committed relatively more by female perpetrators. Almost two thirds of all reported abuse cases involved a perpetrator who was a member of the child’s family. The exception is bullying, for which peers are the most common group of perpetrators.

Setting
A child’s home, school, neighbourhood and in the street are the most common settings where children report they are abused. Organised sports and recreational activities for children, as well as child care facilities (orphanages, children’s homes and residential care centres) are also significant settings where abuse takes place.

Executive summary

MAKING ABUSE VISIBLE: CHILD HELPLINE DATA
Child Helpline International (CHI) collects data from its member child helplines worldwide about the reasons why children contact them, and collates this data to share with the world. For this report, CHI asked its member child helplines to submit data and information on contacts received about violence and abuse against children. The data is presented here, including trends across regions, Human Development Index (HDI) levels, age and gender of victims and more. The aim is to ensure that the voices of child victims of abuse and violence do not go unheard, and the hope is that policy and decision makers, relevant stakeholders and interested parties will take heed and use these insights to better protect children. Children tell child helplines what is troubling them and what help and protection they are seeking. This report shares that information and makes the abuse visible.
PROTECTING CHILDREN FROM ABUSE: CHILD HELPLINES IN ACTION

Child helplines play an important role in the protection of children from abuse and violence. For many children, child helplines are the first point of contact with any kind of child protection, serving as critical gateways to help and support. All child helplines provide active listening, counselling and referral services to children who suffer abuse.

In countries with low and medium HDI levels, where resources are often scarce and child protection systems therefore more porous, many child helplines also have to provide additional services such as direct intervention, shelter, education and legal services. When referring, most child helplines provide a child with the contact information or address for the service the child needs or take steps to ensure that the protection agency contacts the child. Additionally, child helplines often provide three-way conversations or accompany children in-person to a referral agency, depending on the case and the referral partner.

Most child helplines follow up with referral partners to ensure a child's case has been resolved properly. Additionally, child helplines also often examine children's satisfaction with the services their organisation provides. Child helplines do this by mapping and evaluating relevant comments made by children during contact, by asking children specific questions about satisfaction during and at the end of contact, or by carrying out child satisfaction studies.

Most child helplines report that the services provided by their referral partners (including social workers, hospitals, schools, magistrates, police and local NGOs) are generally good. The same is true for most government ministries, such as ministries for Health, Justice, Family and Children and Education, who child helplines feel generally provide good services.

What is still lacking are clear protocols to outline accountability and responsibility for cases of referral between child helplines and partners in national child protection systems.

Recommendations*

A1 Holistic child abuse prevention strategies should take into account the relationships that commonly exist between victim, perpetrator and location.

A2 Child helplines are an essential source of information on abuse and other problems that children face. Governments and other stakeholders should recognise this and make use of it.

B1 Governments should allocate appropriate resources to child helplines.

B2 Government and social service providers should recognise child helplines as an essential part of any holistic child protection system and formalise their partnership through clear and strong protocols.

* see page 40 for more detailed recommendations
Introduction

Most of the children who contact a child helpline about abuse and violence have never spoken with any other adult about it. Child helplines have access to first-hand, unadulterated information, directly from children.

Every second a child is reaching out to a child helpline. Children tell child helplines their problems. Violence and abuse is the number one reason why children contact a child helpline. Child helpline data shows gaps in child protection systems. Child helplines have access to first-hand, unadulterated information, contact a child helpline. Child helpline data shows gaps in child protection systems.
Violence and abuse against children permeates every stratum of society across the globe. Five years after the United Nations Violence Against Children Study made its recommendations on combating this phenomenon in all its forms, millions of children around the world still face violence on a daily basis. In fact, reports to child helplines on physical abuse, bullying and sexual abuse are more common than ever.

The importance of child helplines when it comes to violence and abuse against children is twofold: On a personal level, most of the children who contact a child helpline about abuse and violence have never spoken with any other adult about it; child helplines are often their first point of contact with any kind of support and help. In addition, child helplines are in the unique position of having access to first-hand, unadulterated information, directly from children who are affected.

The significance of this information – the demographics of the children who contact the child helplines, the types of violence and abuse those children suffer, characteristics of the perpetrators, the settings in which abuse against children commonly takes place – cannot be overstated. Taken together, as is done in this report, the data collected from child helplines across the globe represents crucial insight and a powerful tool to implement strategies to address and prevent abuse from taking place.

Child Helpline International (CHI) has been following up on the implementation of the recommendations made by the United Nations Violence Against Children Study since 2006, detailing the incidence of abuse and violence against children as reported to child helplines worldwide. This is the fifth edition of CHI’s Violence Against Children Report. Based on data collected from 101 child helplines for CHI’s annual data collection and 64 child helplines via the specialised ‘Violence Against Children’ questionnaire, this exceptional report clearly reflects the prevalence of violence and abuse against children around the world. It also details the key role child helplines have in child protection.

In addition to specific data on types of violence and abuse, and victim and perpetrator characteristics, this report also identifies trends across regions, victim ages and genders, Human Development Index (HDI) levels and more. It is not the intention to delve into why certain trends exist, but rather to highlight the issues.

Abuse and violence has been one of the most common reasons children contact a child helpline for help and support every year since CHI started collecting data. We hope that the voices of these children, resonating clearly throughout the data of this report, will not go unheard, and that this report will help contribute to the fight against violence and abuse against children everywhere.

CHI wishes to thank everyone who completed the VAC questionnaire or contributed in another way to make this report possible.

**Child helplines in the following countries have completed the VAC and the CHI data questionnaires:**

Albania, Algeria*, Argentina, Aruba, Australia, Austria*, Bangladesh*, Belgium*, Botswana, Brazil*, Brunei, Cambodia*, Canada, Chile, PR China, Colombia, Croatia*, Curacao*, Czech Republic*, Denmark, Egypt, Estonia, Finland, France, Gambia, Germany*, Greece, Greece*, Guinea Conakry*, Hong Kong S.A.R., Hungary, Iceland**, India, Indonesia*, Iran*, Ireland, Israel*, Italy*, Japan*, Jordan*, Kazakhstan, Kenya, Latvia, Latvia*, Lithuania*, Luxembourg, Macedonia*, Malawi, Maldives, Mauritius, Mexico Aercacatel, Mongolia, Mozambique**, Namibia, Nepal, Netherlands, Nigeria, New Zealand (3x), Pakistan, Palestine, Peru, Philippines, Poland (2x), Portugal, Qatar, Romania*, Russia*, Senegal, Serbia, Singapore, Slovakia, Slovenia, South Africa, Spain*, Sri Lanka, St. Martin, Suriname, Swaziland, Sweden, Switzerland*, Taiwan Province of China, Thailand, Trinidad and Tobago*, U.A.E Sharjah, Uganda, United Kingdom* (4x), Uruguay, USA (7x), USA*, Vietnam, Yemen, Zimbabwe.

* data questionnaire only
** VAC questionnaire only
Making child abuse visible

Data collected from child helplines across the globe represents crucial insights and a powerful tool to implement strategies to address and prevent abuse and violence.

Child helplines listen to the voices of children. Children have a right to be heard. An average child helpline received more than 11 contacts on violence and abuse every day.
Physical abuse is the exertion of physical force against a child with the intention of hurting or injuring the victim. Physical violence includes all corporal punishment and all other forms of torture, cruel, inhuman or degrading treatment or punishment; and physical bullying and hazing by adults and by other children. (Sources: CHI Glossary and UN CRC)

Physical abuse was the most common form of abuse reported to child helplines worldwide in 2010, accounting for 39% (164,247 contacts) of all reported abuse cases. This represents a sharp increase in the proportion of contacts on physical abuse compared to 2009, when physical abuse accounted for 27% of contacts. Physical abuse was the main form of abuse about which children contacted child helplines in the Americas and Caribbean, Asia Pacific and the Middle East and North Africa (MENA) regions. Physical abuse was also the most reported form of abuse across all HDI levels.

Victims
In 2010, in six out of ten of reported physical abuse cases worldwide the victims were girls. This proportion goes up as HDI levels rise. ¹ In the Americas and Caribbean, Europe and MENA, most cases of physical abuse reported to child helplines involved girls. In Africa and Asia Pacific the majority of physical abuse cases reported involved boys.

Perpetrators
Two thirds of the physical abuse cases reported to child helplines in 2010 were committed by an immediate or extended (step or foster) family member. For cases in which the victim of the physical abuse was a girl, this percentage was even higher, with half of the reported cases committed by a family member. Of the cases of physical abuse committed by a family member, more than a quarter were committed by someone in the child’s immediate family – a parent or sibling.

The proportion of physical abuse cases reported to have been perpetrated by family members increases in countries.
with increasing HDI levels. In low HDI level countries, family members account for more than half of all reported physical abuse cases. In very high HDI level countries nine in ten of the reported physical abuse cases involved family members. Across most HDI levels and regions, for boy and girl child victims, the most common perpetrators of physical abuse were generally brothers and fathers. The exceptions are low and high HDI level countries where girls are generally physically abused more often by their mothers and sisters. There are some regional differences in the relationships reported between the child victims and the perpetrators: In Europe, for nearly all contacts where the perpetrator is known, a member of the immediate family is responsible for the physical abuse. This is higher than the other regions. Members of a child’s immediate and/or extended family accounted for about two thirds of all cases in Africa, Americas and Caribbean and Asia Pacific, and in the Middle East and North Africa (MENA) region, the number of cases in which the perpetrator was reported to be a family member was less than half of all reported physical abuse cases.

Setting
A child’s home, the neighbourhood where he or she lives and a child’s school are the most common settings where physical abuse takes place in all regions and across all HDI levels. In medium and low HDI level countries physical abuse is also frequently reported to take place in child care facilities such as orphanages, children’s homes and residential care centres. In low HDI level countries organised sports are also a common setting for physical abuse.

Child helpline services
Basic child helpline services such as active listening, counseling and referral services are provided by nearly all child helplines to the victims of physical abuse. Exceptions are those child helplines which have had to change the manner in which they provide services and information to children and adults due to the financial crisis, or those which are specialised in online services.

The provision of additional services such as intervention, shelter, family counselling, education, rehabilitation and legal services varies across HDI levels. In countries with high to very high HDI levels, most child helplines do not provide these services themselves. In countries with a low or medium HDI level many of the supplementary child protection services do not exist elsewhere. As a result, child helplines often have to step in and provide these services themselves. The MENA region is an interesting case, as most of the child helplines

Four in ten cases of physical abuse were committed by a member of the child’s family.

2 shows the relationship between the victims (inner ring) and perpetrators (outer ring) of physical abuse per HDI level.

3 shows the relationship between the victims (inner ring) and perpetrators (outer ring) of physical abuse, globally and for Europe.

4 shows the setting where reported physical abuse takes place.

5 shows the services that child helplines provide to victims of physical abuse.
are actually part of a governmental structure and their capacity and responsibility for the provision of a wider range of child protection services is thus heightened. In Europe, national child protection systems are often quite strong and child helplines are thus able to refer cases of physical abuse to the relevant governmental agencies or partner organisations.

CASE STUDIES
Physical abuse
Two women contacted the child helpline and reported seeing the four-year-old neighbour boy with scratches and pinch marks on his body, a swollen forehead and haematomas on his arms. When authorities visited the home to investigate, the boy’s mother denied knowing any boy living in her house. Through several witnesses, authorities were able to track down the boy. A child helpline social worker immediately conducted a visit and assisted in attending to the boy’s medical and legal needs. The boy was placed under the protective custody of the child helpline and he received rehabilitation services.

A 14-year-old girl called the child helpline to talk about the abuse she suffered. Her father was an alcoholic who repeatedly abused her mentally and physically. The girl was upset. She was crying and threatened to leave home. With the help of the child helpline counsellor the girl calmed down and made an appointment to meet a child helpline psychologist. After several meetings, the girl managed to overcome her anger and hatred toward her father and improve communication with her mother. Meetings were held with her parents in order to improve communication within the family and the father perceived his problem. With support from his family, he reported for treatment and the violence stopped. The girl continued to inform the child helpline about the situation.
The perpetrators

Millions of children around the world suffer from abuse and violence every year. In the vast majority of cases, the victims know the person who abuses them. Very often a child’s abuser is a member of their own family - a parent, sibling, uncle, aunt, grandparent, or a close friend of the family.

**Family**

Immediate family members (parents and siblings) are the most common perpetrator group for all forms of abuse of children, accounting for 34% of reported cases overall for which the perpetrator was known. Immediate family members commit more than half of all reported neglect cases and more than one third of physical and sexual abuse cases.

One fifth of all abuse of children is committed by members of the extended family (step and foster parents, cousins, nieces and nephews, aunts and uncles and grandparents). This means that family members (both immediate and extended) account for 60% of all reported cases of violence and abuse against children. Across the different forms of abuse there is some variation in the percentages of abuse cases involving family members as the perpetrators: More than 50% of all physical abuse case reported to child helplines, some 35% of all bullying cases and 40%, of all emotional abuse cases involve an immediate or extended family member.

Teachers and workers in care facilities committed 13% of reported abuse case overall, with varying proportions for different forms of abuse. Overall, less than one in ten reported cases is committed by an adult with whom children do not have a family or guardianship relationship. This makes it clear that the perpetrator of child abuse is most often a member of the child’s own family circle - the very people children are most looking to for care and attention.  

**Perpetrator gender**

Overall, most children are abused by male perpetrators, but the proportion of reported cases committed by male perpetrators varies across the diffe-
rent forms of abuse. Almost two thirds of physical abuse and bullying cases, and nearly three out of four sexual abuse cases, involved male perpetrators. Emotional abuse and neglect, on the other hand, were committed more often by female perpetrators.

Overall, 60% of reported cases were committed by male perpetrators. Conversely, most victims are girls, accounting for 62% of all reported cases. Globally, not all perpetrators target mostly girls however. For cases of physical abuse, male perpetrators mainly target boys, while female perpetrators target girls. For reported cases of sexual abuse there is a clear cross-gender relationship: Two thirds of reported cases committed by male perpetrators involved girls, while most cases committed by female perpetrators involved boys. For other forms of abuse, both male and female perpetrators mostly abused girls. 7

Members of the child’s family are the most common perpetrators for all forms of abuse.

SHOWS THE GENDER OF THE VICTIM IN RELATIONSHIP TO THE GENDER OF THE PERPETRATOR. FOR MOST FORMS OF ABUSE, BOTH MALE AND FEMALE PERPETRATORS TEND TO MAINLY TARGET GIRLS.
Bullying accounted for one quarter of all contacts on violence and abuse worldwide.

8 SHOWS THE PROPORTION OF CONTACTS MADE ON BULLYING PER REGION AND HDI LEVEL.

9 SHOWS THE GENDER OF VICTIMS OF REPORTED BULLYING CASES PER HDI LEVEL.

BULLYING

Bullying is a form of abuse which usually involves a child being repeatedly picked on, ridiculed and intimidated by another child, other children or adults. Bullying may involve physical and psychological violence. (Sources: CHI Glossary and UN CRC)

Worldwide the child helplines in this study recorded 105,037 reports of bullying in 2010. This represents a quarter of all reports on abuse and violence in 2010 and the second most common form of abuse about which child helplines were contacted. The number of bullying cases reported in 2010 is comparable to the figures for 2009, when bullying accounted for 27% of all contacts.

Bullying was the most common type of abuse about which child helplines in Europe were contacted in 2010 and the second most common type of abuse reported in the Americas and Caribbean. In Africa, bullying accounted for only 2% of the reported contacts on abuse. In general, bullying accounted for far less of the reported violence and abuse cases in low and medium HDI level countries than in high and very high HDI level countries. It should be noted that the high proportion of contacts about bullying in Europe and the Americas and Caribbean, and the low level of bullying contacts in Africa cannot be explained solely by HDI levels, indicating that other factors probably play a role.

Victims

Globally, six in ten of all reported bullying cases in which the gender of the victim was known, involved girls. In the MENA region this number was very high, with girls accounting for some 90% of all reported cases of bullying. Compared to other forms of abuse, boys were found to be proportionally more affected by bullying.

Perpetrators

Reports to child helplines in 2010 show that both boys and girls worldwide were generally bullied more by male perpetrators than by female perpetrators. There is, however, a significant difference in the type of relationship girls and boys were reported to have with their tormentors. Boys reported being bullied mainly by men and other boys, with
boys are disproportionately affected by bullying.

male perpetrators accounting for three quarters of cases involving boys. Girls reported being bullied equally by females and males. 

What sets bullying apart from other forms of abuse, also in terms of treatment, is that in cases where the relationship between the victim and the perpetrator was known, peers (members of the same or similar age groups) accounted for almost a third of all bullying cases worldwide, not counting family peers such as cousins, nieces, nephews or siblings. Peers were in fact the most commonly reported perpetrators of bullying. That is not to say that bullying is committed only by peers. Adults also accounted for a significant share of the perpetrators of bullying which were reported to child helplines in 2010.

One in ten reported cases of bullying for both girl and boy victims involved immediate family, including parents, as the perpetrators. In more than one third of bullying cases in which the victims were girls, members of the extended family were the culprits. This is especially true in very high HDI level countries.

Overall, teachers accounted for one in ten of all cases of bullying where the perpetrator was known in 2010. This number is doubled for cases involving boys. In low HDI level countries teachers were reported to be the perpetrators in almost one third of all reported cases involving boys.

Setting

In three quarters of all reported cases on bullying around the world, a child’s home, his or her school and neighbourhood were indicated as the most common settings for bullying. Bullying was also frequently reported to take place in child care facilities such as orphanages, children's homes and residential care centres, as well as organised sports activities for children, although less so in high and very high HDI level countries. In higher HDI level countries, bullying was also reported to take place less on the street, in a child’s neighbourhood or at a child’s friend’s home, and more at school and in a child’s own home.

Regionally there were some significant variations in the settings where bullying took place in 2010. In Africa and Asia Pacific bullying of both girls and boys was reported to have taken place most often in a friend’s home, in care-giving facilities and during organised sporting activities. These settings were less commonly reported as locations for bullying in other regions (the Americas and Caribbean, Europe and the Middle East and North Africa).
Child helpline services

Active listening, counseling and referral services are provided by nearly all child helplines to children contacting them about bullying. Additional services, such as family counseling, intervention, shelter, education, rehabilitation and legal services, are offered by fewer child helplines. There is no clear relationship between the HDI level of a country and the services offered in case of bullying. Overall, child helplines in Africa offer the most comprehensive services with regard to bullying, while the number of child helplines offering referral services in this region is lower than in other regions. This is in line with the general observation that child helplines tend to fill gaps in their nation’s child protection system.

Overall, compared to other forms of abuse, fewer child helplines offer referral services in cases of bullying, possibly due to the nature of this type of abuse and the high rate of peers involved. At the same time, just over half of child helplines around the world do provide intervention services for bullying cases. Few child helplines provide shelter and education services for children who have been bullied. 13

Peers account for one third of reported bullying cases.
On average, European child helplines received more than five contacts on bullying every day in 2010.

**CASE STUDIES**

**Bullying**

An 11-year-old girl called the child helpline because she was being bullied at school. A girl at school called her fat and had insisted that the rest of the kids should not talk to her. She had not shared this with anyone at school but said that she had talked to her mother. Her mother wanted to talk with the mother of the bullying girl, but the girl refused as she thought this would make it worse. Her mother took her to a psychologist to help her to defend herself and to stand up to her bully. However, the bullying girl now torments her by manipulating the rest of the girls into not talking with her. The girl had only one friend. Her parents are divorced and she had little contact with her father. The girl said her mother is great and very understanding. The child helpline counsellor encouraged the girl to tell her teacher in private about what is happening so that the teacher can intervene. The counsellor and the girl also discussed strategies for standing up for herself and communicating against the harassment. The girl was encouraged to make new friends in and out of school. Furthermore, the counsellor told the girl that she could call the child helpline back whenever she needed to and that her mother could also call.

A 17-year-old girl called the child helpline. She said she was frightened due to a chat conversation she had had minutes before. The child helpline counsellor encouraged the girl to talk about her experience. The girl had been on her favourite chat website when she started to talk with a user that she supposed to be a peer. They shared hobbies, passions and interests and they decided to move to a private chat room. Once in the chat room, the other user changed his attitude and started to use obscene language and make indecent proposals. When the girl refused to accept his requests of sending photos and her mobile phone number, the user asked her to give him contacts of other girls, younger and “easier” than her. The counsellor reassured the girl about her discomfort and praised her for not giving out any personal data, stopping the conversation and calling the child helpline. The child helpline counsellor encouraged the girl to report the incident with the police department that deals with computer crimes.
Violence in schools

All children have the right to education. Luckily more and more children are gaining access to school and the opportunity to learn to read, write and do arithmetic. Education is essential to the development of a child and the advancement of his/her community and nation. School can open doors to future possibilities and better lives. Unfortunately, there are children who dread going to school. For these children, rather than being a place of joy, exploration, growth and learning, school is a place of fear and abuse.

Types of abuse at school
Most abuse takes place at a child’s home, but for contacts where the location was known, almost one quarter of all abuse reported to child helplines took place in schools. More than 40% of bullying, one quarter of emotional abuse and one in five contacts on physical and sexual abuse occurred in schools.

Victims’ genders
Girls and boys are generally subjected to different forms of abuse at school. In nearly one quarter of cases of sexual abuse of girls reported to child helplines, the abuse took place at school; for cases of sexual abuse of boys, just 12% happened at school. Conversely, physical abuse in schools happens to boys more often than to girls (20% versus 16% of contacts on physical abuse respectively).

HDI levels
The incidence and type of abuse in school also vary across HDI levels. In low and medium HDI level countries about one in five cases of all reported abuse takes places in a school. In high and very high HDI level countries the incidence of abuse at school rises to over 40% of all abuse cases reported to child helplines. Bullying is relatively more common in high HDI level countries, and tends to take place...
predominantly in schools. Incidences of neglect also vary across HDI levels. In medium HDI level countries one quarter of all reported neglect cases took place in schools, while nearly one third of all neglect cases reported in high HDI level countries occurred at school.

Teachers and peers
Overall, 10% of contacts to child helplines about violence and abuse where the relationship of the perpetrator with the victim was known involved teachers as perpetrators. Nearly one in five contacts about sexual abuse of a girl, nearly one third of cases of emotional abuse of boys and more than one in five cases of bullying of boys involved a teacher. Teachers (in line with levels of neglect reported to take place in schools in these countries).

When it comes to bullying, a common school playground issue, peers are quite often the main perpetrators. Peers, whether friends of the victim or not, are the indicated bully in one third of all bullying cases. For contacts to child helplines about the bullying of boys, the involvement of peers is even higher as HDI levels rise. In high HDI level countries, more than two thirds of cases in which boys were bullied involved peers as the bullies, and in very high HDI level countries eight in ten cases of bullying of boys involved peers.

**Teachers are common perpetrators for all forms of abuse.**
In seven out of ten cases of sexual abuse the victims were girls.

SEXUAL ABUSE
There are several forms of sexual abuse, including sexual penetration, which consists of sexual intercourse with a child; the intentional exposure of a child to sexual activity, such as showing and/or taking sexually explicit or implicit pictures of the child, telling jokes or stories of a sexual nature; tickling in erogenous zones and demanding to be tickled in return. Pressure is usually exerted by an adult or another child in a position of authority. Sexual abuse includes rape and incest, as well as commercial sexual exploitation in all its forms.*

(Sources: CHI Glossary and UN CRC)

* According to the UN Committee on the Rights of the Child, sexual abuse and exploitation includes:
  a. The inducement or coercion of a child to engage in any unlawful or psychologically harmful sexual activity;
  b. The use of children in commercial sexual exploitation; and
  c. The use of children in audio or visual images of child sexual abuse;
  d. Child prostitution, sexual slavery, sexual exploitation in travel and tourism, trafficking (within and between countries) and sale of children for sexual purposes and forced marriage. Many children experience sexual victimization which is not accompanied by physical force or restraint but which is nonetheless psychologically intrusive, exploitive and traumatic.
In 2010 child helplines worldwide received 74,303 contacts on sexual abuse. At 18% (the same as in 2009), sexual abuse was the third most common of all the types of contacts on violence and abuse received overall.

In the Americas and Caribbean 9% of all contacts about violence and abuse to child helplines were about sexual abuse, while in Europe sexual abuse cases accounted for 21% of all reported abuse cases. This relatively high proportion of reported cases on sexual abuse in Europe is especially significant when taking into account that this percentage is higher than expected. Most countries in Europe have either high or very high HDI levels. The proportion of sexual abuse cases reported to child helplines in all countries around the world with similarly high and very high HDI levels was 10% and 18% respectively. Yet in Europe, the proportion of sexual abuse cases was actually much higher (21%), and much more reminiscent of the global average for low HDI level countries, which sits at about 20%.

Victims
Girls were the victims in the vast majority of the cases of sexual abuse reported to child helplines in 2010, accounting for 71% of all reported sexual abuse cases worldwide. Compared to other forms of abuse, sexual abuse disproportionately affects girls. In the MENA region girls were the victims in 91% of reported cases and in the Americas and Caribbean girls were the primary victims in 80% of the cases. There is no significant difference in victim-gender ratios for different HDI levels when it comes to sexual abuse. In countries with medium HDI levels girls were the victims of the sexual abuse in 80% of all reported cases, while in low HDI level countries girls were the victims in some 65% of all sexual abuse cases and in very high and high HDI level countries in 70% of all sexual abuse cases.

Perpetrators
Worldwide men and boys were indicated to be the perpetrators of sexual abuse in close to three quarters of all sexual abuse cases reported to child helplines in 2010. Across all HDI levels and in all regions, the majority of sexual abuse was committed by men and boys. This figure is even higher when looking only at those cases involving girls.

In four out of ten cases the sexual abuse reported to child helplines in 2010 was committed by a member of the victim’s immediate or extended family. The male members of a child’s immediate family (brothers and fathers) made up 18% of all cases. In countries with a very high HDI level the average share of contacts on sexual abuse involving a brother or
father was over half. Looking only at cases in which the victims were girls, this number is even higher, with more than two thirds of all sexual abuse cases in very high HDI levels involving a brother or father. The proportion of sexual abuse cases reported to child helplines that were committed by a male immediate family member is significantly higher in Europe than in other regions.

**Setting**

Sexual abuse takes place mainly at home, at school and in the street or neighbourhood. As HDI levels increase, the proportion of sexual abuse taking place at other locations (child care facilities, friend’s homes or during organised sporting activities for children) decreases. At the same time, a child’s own home generally becomes a more common setting for sexual abuse as HDI levels rise.

**Child helpline services**

Most child helplines provide active listening, counselling and referral services to victims of sexual abuse. Compared to other forms of child abuse, more child helplines tend to provide supplementary services such as intervention, education and legal services to victims of sexual abuse. At the same time, the number of child helplines providing additional services does tend to decrease with increasing HDI levels, mainly because there are more partner organisations available in the child protection system to refer children to for help.
CASE STUDIES
Sexual abuse

A five-year-old girl was playing with friends when her uncle called her into his house and gave her some money. Afterwards she was sexually abused by him. Her uncle abused the girl on several occasions, until he was caught in the act by his wife, who reported the abuse to the child helpline. The child helpline took the girl to a hospital and supported the judicial process of the case. Post-abuse support was provided in the form of counselling. She was also provided with food supplements as her health was affected by the HIV infection that she most likely contracted due to the sexual abuse.

Two sisters aged 10 and 12, were sexually abused by their father, with whom they stayed after their parents separated. The girls confided in their mother who lived in the same village. The mother reported the matter to the local officials, but they did nothing about it. A member of the community called the child helpline to report the case. Case workers from the child helpline travelled to the girls’ village for effective follow-up. As a result, the matter was reported to the police and led to the arrest of the offender. The girls were medically examined and treated. They have been provided with psychosocial and legal support.

A seven-year-old girl had been sexually abused by her adoptive father since she was four years old. Her mum called the child helpline for help. She came into the child helpline office and was diagnosed with having psychological disorders. She was chronically frightened, obsessed by her adoptive father’s abusive activities, and self-isolated. Physically, the girl suffered from the complications of a sexually transmitted disease. An intervention plan was formulated to help the girl overcome her trauma, she was referred to relevant medical centres and counselling was arranged for her and her mother. The girl’s situation is monitored and she continues to receive counselling from the child helpline.

A 15-year-old girl called the child helpline to talk about the sexual abuse perpetrated by her father’s friend. She was too fearful to tell her parents, but she saw the child helpline’s phone number on TV and decided to call so that she could have someone to talk to. The child helpline was able to get the proper authorities involved and get counselling for the girl and her parents who were racked with guilt for not having known what was going on.
Corporal punishment

Parents and parental figures are common perpetrators of physical abuse of children.

Not all physical abuse committed by parents is corporal punishment. However, all corporal punishment committed by care givers as a form of discipline or child rearing is physical abuse.

In General Comment no. 8, the Committee on the Rights of the Child defines corporal punishment as: “... any punishment in which physical force is used and intended to cause some degree of pain or discomfort, however light. Most involves hitting (“smacking”, “slapping”, “spanking”) children, with the hand or with an implement - a whip, stick, belt, shoe, wooden spoon, etc. But it can also involve, for example, kicking, shaking, or throwing children, scratching, pinching, biting, pulling hair or boxing ears, forcing children to stay in uncomfortable positions, burning, scalding or forced ingestion (for example, washing children’s mouths out with soap or forcing them to swallow hot spices).”

According to the Committee “…corporal punishment is invariably degrading. In addition, there are other non-physical forms of punishment that are also cruel and degrading and thus incompatible with the Convention. These include, for example, punishment which belittles, humiliates, denigrates, scapegoats, threatens, scares or ridicules the child.”

Child rearing is often regarded as private, and many believe that parents can and should raise their children as they see fit. Nevertheless, every child first and foremost has the right to grow up without violence, especially that inflicted upon them by the people charged with their very care and well-being. Sadly, the number one reason why children contact child helplines across the world is still physical abuse. Although no specific information on corporal punishment was collected for this study, there is quite a lot of information on physical abuse of children from which a general idea of corporal punishment can also be deduced.

A child’s familial care giver (biological parents, foster and step parents and grand parents), is involved in nearly half of all physical abuse reported worldwide. 21 By definition, physical abuse by teachers is a form of corporal punishment as it is inflicted as part of child education or rearing. Physical abuse caused by teachers accounts for 10% of reported cases everywhere in the world. Workers in care facilities
A large share of physical abuse in all regions is committed by parents and teachers.

In Africa one in five contacts to child helplines about physical abuse involved a child’s teacher(s). In Americas and Caribbean and MENA the proportion of teacher inflicted corporal punishment is even higher, accounting for one in three reports.  

Corporal punishment account for another 3%. This means that more than half of all physical abuse reported to child helplines can be classified as corporal punishment. The proportion of reported cases of physical abuse involving parents rises with increasing HDI level. In countries with a very high HDI level, parents account for two thirds of all reported physical abuse cases. Physical abuse committed by other parental figures is reported less with increasing HDI levels. This does not infer that corporal punishment by parents is more common and those committed by other guardians less common. It means that children in very high HDI level countries contact a child helpline sooner when they are physically abused by a parent.
Worldwide child helplines received 38,636 contacts on neglect in 2010, representing 9% of all contacts on violence and abuse. This is a decrease, both absolute and relative, to 2009, when child helplines received over 60,000 contacts about neglect, representing 14% of all contacts on abuse. There are considerable variations across regions and HDI levels in the proportions of contacts received by child helplines about neglect. Africa is a particularly interesting case, with one quarter of contacts received being about neglect. This is very high compared to other regions and cannot be explained from a HDI level perspective. Child helplines in Africa are located predominantly in countries with low or medium HDI levels. Globally, the percentage of contacts received about neglect by child helplines in low and medium HDI countries was 13% and 18% respectively. The overall African average is thus relatively high compared to the worldwide percentage of cases about neglect reported to child helplines. One possible explanation, offered by Childline Kenya for example, is that the current economic crisis could be impacting the number of neglect cases being reported. With more family members needing to leave home to find work, an increasing number of children in Africa are being left unattended, or are being asked to also find work. As child labour also constitutes neglect, this would most certainly also contribute to rising neglect numbers.

NEGLECT
Neglect is the failure to meet children’s physical and psychological needs, protect them from danger, or obtain medical, birth registration or other services when those responsible for children’s care have the means, knowledge and access to services to do so. It includes but is not limited to: physical neglect, psychological or emotional neglect, neglect of mental or physical health, educational neglect and abandonment. (Sources: CHI Glossary and UN CRC)
Violence Against Children

Two thirds of all reported victims of neglect were girls. This constitutes a similar victim gender distribution as all contacts received on abuse. As HDI levels increase, so does the proportion of contacts about neglected girls. In low HDI level countries boys were reported as victims in about half of all neglect cases. In high and very high HDI level countries, this number drops to a third or less of all neglect contacts involving boys.

Variations in the gender of neglect victims are also discernable between regions: in Africa and Asia Pacific, boys and girls are victims of neglect in near equal proportions. In the Americas and Caribbean and Europe, boys account for about one third of cases and girls for about two thirds. In the MENA region, three quarters of all contacts about neglect cited girls as the main victims.

More than 40% of all contacts to child helplines around the world on neglect involved members of a child’s family (including step and foster parents) as the main culprits. Members of the immediate family accounted for close to 30% of all neglect cases. Neglect by family members was reported to be highest in the Americas and Caribbean where both boys and girls suffered from neglect by family members in eight out of ten cases. In Asia Pacific family members were the perpetrators in the majority of neglect contacts, and in Africa and Europe, half of all reported neglect cases involved family members. In the MENA region, in one in six of the cases reported to child helplines family members were involved in neglect.

Male perpetrators mainly neglect boys. Girls mostly suffer neglect by female perpetrators.

Victims
Worldwide two thirds of all reported victims of neglect were girls. This constitutes a similar victim gender distribution as all contacts received on abuse. As HDI levels increase, so does the proportion of contacts about neglected girls. In low HDI level countries boys were reported as victims in about half of all neglect cases. In high and very high HDI level countries, this number drops to a third or less of all neglect contacts involving boys.

Perpetrators
Globally, cases reported to child helplines in 2010 indicate that male and female perpetrators committed neglect with similar frequencies. In general, however, male perpetrators tend to mainly neglect boys while girls suffer most from neglect by female perpetrators. There were considerable variations between HDI levels in the relationships seen between the victim and the perpetrator: In low HDI level countries, boys were neglected mostly by female perpetrators and girls mainly by male perpetrators. The same was true for high HDI level countries. In medium HDI level countries both boys and girls were neglected predominantly by male perpetrators, and in very high HDI level countries neglect was seen to have been committed mainly by female perpetrators. Similar variations can be found between regions as well.
In 2010 an average child helpline in Africa received a contact on neglect every day.

Neglect of children takes place mainly at home.

Setting
More than half of all neglect cases reported to child helplines worldwide took place at home, followed by the neighbourhood and a child’s school which accounted for one quarter of all neglect contacts.25 With increasing HDI levels, more and more neglect was seen to take place at home. Interestingly, for 70% of contacts received on neglect in Africa, the place where neglect took place was reported to be the child’s home. This relatively high percentage cannot be explained from a HDI level perspective as most countries in Africa have either a low or medium HDI level.

Child helpline services
Nearly all child helplines provide active listening, counselling and referral services to neglect victims, although compared to other forms of abuse less child helplines do so. Conversely, a very high share of child helplines intervene directly (with partners) in cases of neglect.25
A 14-year-old boy called the child helpline and said that he wanted to commit suicide as he couldn’t face his parents’ bad treatment anymore. Every day, he was forced to work for the neighbours for money and he had to take care of his little brothers. Moreover, his parents had made him drop out of school. The child helpline’s counsellor talked to the boy to ease his distress. At the same time, another child helpline counsellor called a child protection organisation which could help with an intervention and bring him to a safe place. After the intervention, specialised personnel worked with the boy and his family on psychological assistance. Three months later the authorities approved the return of the boy to his family. Nonetheless, the case was monitored by the child helpline. The boy called the child helpline back to give thanks for the support.

A 16-year-old girl called the child helpline. It took her a few minutes to speak about her feelings and reasons why she dialled the child helpline number. She was very lonely; her mother died when she was five years old and her father would get drunk every day. She took care of the household and had to have a part-time job. As a result she had no time for school preparation and she failed her examinations. She could not find a reason to live anymore. The counsellor of the child helpline spoke with the girl for nearly an hour and a half. The child helpline counsellor told the girl her feelings were understandable and worked with her to find some solutions for her problems. During this conversation, the girl started to fall asleep. She told the counsellor she had swallowed many of her father’s pills. The counsellor called an emergency number. The girl and the child helpline counsellor spoke until the emergency services arrived.

A very high share of child helplines directly intervenes in cases of neglect.

**CASE STUDIES**

**Neglect**

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Peer violence

Peer violence is common in all regions.

Peers - members of the same or similar age groups - are key to a child’s development and identity. However, not all peer relationships are beneficial or proper.

As the Committee on the Rights of the Child states in its General Comment on article 19 of the Convention on the Rights of the Child, peer violence: “...includes physical, psychological and sexual violence, often by bullying, exerted by children against other children, frequently by groups of children, which not only harms a child’s physical and psychological integrity and well-being in the immediate term, but often has severe impact on his or her development, education and social integration in the medium and long term.”

Several child helplines have indicated a trend that they are receiving a growing number of contacts from children on peer violence.

Overall, more than one in six cases of abuse and violence reported to child helplines involved a peer as the perpetrator. When siblings are included as peers, the proportion of abuse and violence cases involving peers grows to nearly one quarter of all abuse cases reported. More than one in five cases of abuse and violence involving girls that were reported to child helplines in Africa were committed by peers.

Peers are not just involved in bullying, as is commonly thought. Peers are involved in all types of violence and abuse, including physical and also sexual abuse. The data collated for this report shows this clearly:

- In more than one in three bullying cases involving boys, the perpetrators were peers, mostly also boys. One in five reported cases involving girls were committed by peers, both boys and girls equally.
- One in eight cases of physical abuse reported to child helplines worldwide was committed by a peer. Similarly, one in twenty cases was perpetrated by a sibling.
- In more than one out of ten cases of sexual abuse of girls reported to child helplines, the perpetrator was the child’s peer.
More than one quarter of emotional abuse cases involving a girl were committed by peers.

Peers are not perpetrators of bullying only, but of all forms of abuse.
Girls were the victims in two thirds of reported emotional abuse cases.

EMOTIONAL ABUSE
Emotional abuse is the pervasive lack of display of love and affection towards a child by an adult entrusted with his care and development, or by another child in a position of authority. This includes constant belittlement, blaming, criticizing, as well as intentionally failing to display emotion to a child, such as not smiling at a child or simply not acknowledging a child’s existence by not looking at him or exclusively engaging a child in a closed and confining emotional relationship.

(Sources: CHI Glossary and UN CRC)

Child helplines received 35,428 contacts about emotional abuse in 2010, representing 8% and the least reported form of abuse and violence worldwide. In 2009 child helplines received 55,373 contacts representing 13% of contacts.

Contrary to the global trend, emotional abuse is the most common form of abuse reported to African child helplines, representing 30% of all contacts received about violence and abuse. In the Americas and Caribbean and MENA emotional abuse constituted 13% and 7% respectively, and in Europe and Asia Pacific emotional abuse cases made up 6% of all reported violence and abuse cases to child helplines. 29

Victims
Worldwide, girls were the reported victims in two-thirds of all emotional abuse cases about which child helplines were contacted, compared to one-third of boys. In low and medium HDI level countries, just over half of all emotional abuse cases involved a girl, while in high and very high HDI level countries this percentage increased to eight and seven out of ten respectively. 30 In the Americas and Caribbean more than 80% of emotional abuse cases involved girls, and in MENA 90% of all emotional abuses cases reported to child helplines involved girls. In Europe cases on emotional abuse involved girls two out of three times, and just over half of all

29 SHOWS EMOTIONAL ABUSE AS A PROPORTION OF ALL REPORTED CASES PER REGION.
30 SHOWS THE GENDER OF VICTIMS FOR REPORTED EMOTIONAL ABUSE CASES PER HDI LEVEL.
emotional abuse cases reported to child helplines in Africa and Asia Pacific involved girls. Despite these trends and variations, girls are disproportionately affected by emotional abuse compared to other forms of abuse in nearly all regions and HDI levels.

Perpetrators
Overall, female and male perpetrators commit emotional abuse in near equal shares. Boys suffer emotional abuse mainly at the hands of male perpetrators and contacts on emotional abuse cases involving girls indicate women as the main perpetrator. This rule does not apply to every region or HDI level, although in all regions and across all HDI levels, male perpetrators of emotional abuse do tend to target boys more than girls while females tend to target girls more.  

Overall more than half of reported emotional abuse cases involved a family member. In countries with a low or high HDI level the proportion of emotional abuse contacts involving a family member is much higher. Similar variations can be found between regions. In Africa and Europe about one third of all reported emotional abuse cases are committed by a family member; while in the Americas and Caribbean only one in ten cases are.

Teachers are indicated to be the perpetrators of emotional abuse in 13% of contacts involving boys. In low HDI level countries, more than one third of emotional abuse suffered by boys is caused by teachers, and in medium HDI level countries 28%. Less contacts on emotional abuse committed by teachers were received by child helplines in high and very high HDI level countries.

Setting
Like the other forms of abuse, a child’s home, the school and the neighbourhood or street are the most common places where emotional abuse takes place, as reported to child helplines. In low HDI level countries a considerable proportion of the emotional abuse reported to child helplines took place in child care facilities and during organised sports activities for children. In medium HDI level countries child care facilities are also common places for emotional abuse to take place, although it is much less so in high and very high HDI level countries.
Nearly all child helplines provide active listening, counselling and referral services to children contacting them about emotional abuse, more so than for other forms of abuse. Conversely, compared to other forms of abuse fewer child helplines provide intervention, shelter and legal services. More child helplines in low and medium HDI level countries do provide such additional services than child helplines in high and very high HDI level countries. As with other forms of abuse, child helplines are providing core services to victims of emotional abuse and to a lesser degree more comprehensive services, but always those that make sense in their country, the situation at hand and those that are needed to assist a victim of abuse.
Case studies

Emotional abuse

An 11-year-old boy called the child helpline and confided that he was feeling disappointed about his school results and hurt by the way his mother treats him. His mother had on many previous occasions asked him to “go to hell” and called him “brainless”. His mother had also physically abused him. The boy refused to see a doctor because he did not want to waste money. He did not confide in any person, including his father, because he did not want his parents to divorce. The boy explained that his father loves him. The child helpline staff contacted the boy’s school counsellor. The school counsellor followed up by identifying the boy and subsequently the case was referred to the national child protection services for further investigation.

A 12-year-old girl called the child helpline to ask for help. Her father died two years ago and she was left with her mother and her younger sister. In the past few months, her mother had become very aggressive towards the girl. Her mother lost her job and was at home now all the time. The girl said she could not help her mother, because her mother screamed at her over everything she would say. Two days ago the mother hit the girl when she had forgotten to do something. The girl was very sad and scared because she felt all alone. A child helpline volunteer talked to her about her feelings and told her that no person is allowed to hit her. The volunteer said that her mother needed some help, so it would be wise for the girl to talk to an adult whom she trusts about what happened. The girl said that she had a good relationship with her teacher and that she felt much better now that she had a plan what to do next.

A seven-year-old girl called to the child helpline and asked: “Are you a veterinarian?” The counsellor answered “No. Do you want to talk to a veterinarian?” The little girl replied “Yes, because yesterday my teacher told me and all my classmates: You are animals and you should visit a doctor”. When the girl cried, the teacher said: “You are really a cow”. The child helpline counsellor comforted the girl and said the teacher was wrong for calling her that. The counsellor asked to speak to the girl’s mother. The counsellor asked the mother to visit the teacher to talk about this issue, the effects it had on the self-esteem and self-confidence of the students, and ask the teacher to stop this behaviour. The counsellor asked the mother to inform the child helpline of the results for possible follow-up. In the following week, the mother called again and told the child helpline counsellor that after visiting the teacher the situation improved.

One in seven of all contacts about emotional abuse of boys involved a teacher as the perpetrator.

In low HDI level countries, a considerable proportion of emotional abuse took place in child care facilities and during organised sports and recreational activities for children.
Protecting children from abuse

Child helplines not only listen to children but also make sure they get the help they need. Child helplines provide counselling and referral services, as well as direct interventions, legal services, shelter and other services when needed.

What is still lacking, however, are clear protocols to outline accountability and responsibility for cases of referral between child helplines and partners in various national protection systems.
Child helplines play an important role in the protection of children from abuse and violence. For many children, child helplines are the first point of contact with the child protection system. All child helplines provide active listening and counselling services to children. In many cases, additional services such as intervention, shelter, rehabilitation or legal services are needed. These services may be provided by other agencies or organisations, in which case child helplines refer children to them. Other times, and especially when there are gaps or weak links in a nation’s child protection system, child helplines need to employ specialised staff or run these additional services themselves.

SERVICES AND PROTOCOLS

Services
Child helplines report that the child protection services provided by external social workers, hospitals, schools, magistrates, police, local NGOs, UN agencies and international NGOs are generally good. This is true across all HDI levels. Child helplines in all HDI levels also report that the child protection services and policies of government ministries such as ministries for health, justice, family and children, and education are generally good. Notable exceptions are ministries for social affairs in many countries, whose services are often deemed weak by child helplines across the different HDI levels.

There are some variations across the different regions in how child helplines rate the child protection services provided by referral partners and other agencies. In Africa, child helplines report that the services provided by other child protection entities are generally weak or medium, with only
protection services provided by international and national NGOs labelled as strong. In the Americas and Caribbean, Asia Pacific and MENA regions, child protection services are indicated to be at a medium level, except for services provided by the police and NGOs in Asia Pacific, which are deemed to be quite strong. In Europe most child helplines indicate that the services provided by other child protection actors are strong. The policies and services implemented by government ministries are indicated to be at medium level in all regions except in MENA where most child helplines label these services as strong. In Europe, exceptions are the services provided by ministries for social affairs and health, which most child helplines labelled as strong. Across the world, a significant share of child helplines are in fact a part of the Ministry for Social Affairs or of the Ministry for Family and Children in their country.

Protocols
It is important for child helplines to have clear protocols in place with the referral partners in their national child protection system. Such protocols can help ensure the best possible services and protection for children in need. The strength of existing protocols between child helplines and government ministries is reported to be similar on all HDI levels, although child helplines in countries with a low HDI level indicate that protocols are weak. Notable is the general lack of protocols with ministries for health. In medium HDI level countries relatively many child helplines indicate having stronger protocols than in other HDI levels. Significant exceptions are local, national and international NGOs, with whom most child helplines indicate to have adequate or strong protocols. Conversely, there are many child helplines in very high HDI level countries which indicate they have no protocols with social service providers.

There is a general lack of protocols between child helplines and many service providers in all regions. In Africa, exceptions are national, international NGOs and UN agencies, with whom strong protocols exist. Most African child helplines indicate to have medium level protocols with police and social workers. The majority of child helplines in the Americas and Caribbean report having medium level protocols with schools and social workers, and medium or strong protocols with national NGOs. In Asia Pacific child helplines have strong protocols with UN agencies, international NGOs and social workers. Protocols are lacking with magistrates,
hospitals, schools as well as orphanages. Few European child helplines indicate to have protocols with service providers in their countries, although with schools, social workers, police and national NGOs, protocols exist to some degree. Contrary to other regions, strong protocols exist in most MENA countries with (social) police, social workers and care facilities. There are medium or strong level protocols in the MENA region with hospitals and UN agencies. There is a lack of protocols with magistrates and international NGOs.

Child helplines in Africa have protocols with most ministries, although these are not deemed strong. In the MENA region most child helplines report that they have strong and clear protocols with the ministries for education and health. In Europe, Asia Pacific and the Americas and Caribbean, most child helplines indicate that they do not have protocols with these ministries or with their ministries for justice.

**REFERRAL AND FOLLOW UP**

Child helplines provide children with the contact information for the appropriate service they need or have the child protection referral partner contact the child. Some child helplines provide three-way conversations to hand over children directly to a referral partner. Other times a child is accompanied in person by a staff member to the partner organisation. If there is cause for immediate harm or danger to the child, many child helplines will intervene in a case jointly with the partner. These methods are used depending on the partner and the status of the child protection services.

In low HDI level countries child helplines tend to have more specialised staff or provide protection services themselves. This is in line with observations in the previous chapter that child helplines in lower HDI level countries provide more services to children in need themselves. Also, more child helplines in these countries accompany the child to referral partners or undertake a joint intervention with these partners in case of immediate harm or danger. Overall, less child helplines refer children to legal proceedings. Most child helplines refer children to social workers, psychologists,
Most child helplines in high and very high HDI level countries provide children with contact information for the relevant referral partners. On all HDI levels equally, child helplines and partners cooperate and share contact details through which the partner can contact the child. Many child helplines in low and medium HDI level countries cooperate directly with social police to intervene in case of immediate harm. Additionally, many child helplines in low HDI level countries accompany children to the police station to make sure their complaints are heard and that they are treated properly.

Many child helplines have social workers on staff, while relatively few child helplines have health workers on the staff of their organisations. No child helpline in a high or very high HDI level country has social or health workers on staff. Many child helplines do accompany children to a health worker, although none of the child helplines from Europe and very few from the Americas and Caribbean indicated that they do so. Many child helplines in Asia Pacific and MENA work together with magistrates to intervene in cases jointly if there is immediate harm or danger for a child. In the Africa region and in low HDI level countries, many child helplines accompany children to a court or magistrate to make sure their case is heard. This is in line with the observation that especially in low HDI level countries child helplines do provide legal services.

In low and medium HDI level countries many child helplines have psychologists or mental health workers on the staff of their organisation. Also, many child helplines report that they accompany children in person to meet mental health workers and specialists. In high and very high HDI level countries most child helplines provide children with contact information for a mental health worker or ensure that the child is contacted by the mental health worker. In low and medium HDI level countries, if children need to stay in a shelter or care facility, the child helplines mostly accompany the child, run a shelter themselves or intervene together with the care facilities. In high and very high HDI level countries, less child helplines refer to care facilities and shelters. Overall, less child helplines refer children to sponsorship options. If they do, child helplines in medium HDI level countries mostly accompany the child or share a child’s contact information with the partner. In Africa most child helplines provide children with the contact information, so the child can contact the partner.

Only few child helplines do not follow up on cases. All child helplines in low and medium HDI level countries follow up.

Almost all child helplines follow up on child abuse cases after referral.
In Europe and the Americas and Caribbean child helplines tend to follow up with some partners but not all. In other regions most child helplines follow up with nearly all partners in the child protection system. This again signifies that child helplines need to be more active when the child protection system in their country is weak, in order to ensure that children are taken care of and receive the service they need. 38

Nearly all child helplines investigate children’s satisfaction with the services that are provided by their organisation. The most popular method to analyse satisfaction with child helpline services is to use the contacts that children make, as well as asking children a specific question at the end of the conversation. Several child helplines have also done impact studies (especially in the MENA region) or have asked their referral partners for feedback (mostly in Africa and Asia Pacific). Child helplines in low and especially medium level HDI countries mostly use a variety of methods to assess the satisfaction of children with their services, while child helplines in high and very high HDI level countries tend to use fewer methods to analyse satisfaction. 39
A.1. Holistic child abuse prevention strategies should take into account the relationships that commonly exist between victim, perpetrator and location.

Child helpline data shows that one strategy to prevent and address child abuse will not work. Although it has been proven that there are general drivers for child abuse, depending on the type of abuse, the relationship between the victim and perpetrator and location of abuse will vary. These facts need to be taken into account by policy makers and social service providers when designing and implementing strategies to prevent child abuse. One glove does not fit all.

A.2. Child helplines are an essential source of information on abuse and other problems that children face. Governments and other stakeholders should recognise this and make use of it.

Child helplines have detailed information on child abuse, e.g. victim status, their relationship with the perpetrator and location of abuse. This child helpline data provides real insight into child protection issues. This information should be used by partners and stakeholders in the child protection system to design and implement strategies to prevent and address child abuse.
B.1. Government and social service providers should recognise child helplines as an essential part of any holistic child protection system and formalise their partnership through clear and strong protocols.

In most countries there are gaps in the child protections systems, which could lead to child abuse cases not being addressed by social service providers. Child helplines are unique through the fact that they are contacted by children directly and voluntarily. A child contacting a child helpline is a child seeking assistance. For many children, child helplines are the first point of contact in the child protection system. Other actors need to recognise the key role that child helplines fulfil, incorporate them in the child protection system and make sure that no child abuse case remains unaddressed.

B.2. Governments should allocate appropriate resources to child helplines.

Child helplines are a key confidential reporting mechanism for children that they can access if they seek assistance. A child helpline will always cooperate with referral partners to make sure children’s needs are addressed and they receive the care and protection they need. In most high and very high HDI level countries, the child protection is densely knit. In many countries the child protection system is weaker and there are gaps. As a result, child helpline organisations step up and provide more comprehensive services. These services are costly. To ensure that they can be provided in a sustainable manner, governments and donor organisations should recognise these child helpline services and allocate appropriate funding.
The twelve Recommendations that were issued by the UNVAC Study are listed below. The recommendations are formulated for all stakeholders and states specifically to take action to prevent and combat violence against children. The following recommendations were made:

**Overarching recommendations**

1. **Strengthen national and local commitment and action:**
   I recommend that all States develop a multifaceted and systematic framework to respond to violence against children which is integrated into national planning processes. A national strategy, policy or plan of action on violence against children with realistic and time-bound targets, coordinated by an agency with the capacity to involve multiple sectors in a broad-based implementation strategy, should be formulated. National laws, policies, plans and programmes should fully comply with international human rights and current scientific knowledge. The implementation of the national strategy, policy or plan should be systematically evaluated according to established targets and timetables, and provided with adequate human and financial resources to support its implementation. However, any strategy, policy, plan or programme to address the issue of violence against children must be compatible with the conditions and resources of the country under consideration.

2. **Prohibit all violence against children:**
   I urge States to ensure that no person below 18 years of age is subjected to the death penalty or a sentence of life imprisonment without possibility of release. I recommend that States take all necessary measures to immediately suspend the execution of all death penalties imposed on persons for crimes committed before reaching the age of 18 and take the appropriate legal measures to convert them into penalties that are in conformity with international human rights standards. The death penalty as a sentence imposed on persons for crimes committed before reaching the age of 18 should be abolished as a matter of highest priority. I urge States to prohibit all forms of violence against children, in all settings, including all corporal punishment, harmful traditional practices, such as early and forced marriages, female genital mutilation and so-called honour crimes, sexual violence, and torture and other cruel, inhuman or degrading treatment or punishment, as required by international treaties, including the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment and the Convention on the Rights of the Child. I draw attention to general comment No. 8 (2006) of the Committee on the Rights of the Child on the right of the child to protection from corporal punishment and other cruel or degrading forms of punishment (articles 19, 28, para. 2, and 37, inter alia) (CRC/C/GC/8).

3. **Prioritize prevention:**
   I recommend that States prioritize preventing violence against children by addressing its underlying causes. Just as resources devoted to intervening after violence has occurred are essential, States should allocate adequate resources to address risk factors and prevent violence before it occurs. Policies and programmes should address immediate risk factors, such as a lack of parent-child attachment, family breakdown, abuse of alcohol or drugs, and access to firearms. In line with the Millennium Development Goals, attention should be focused on economic and social policies that address poverty, gender and other forms of inequality, income gaps, unemployment, urban overcrowding, and other factors which undermine society.

4. **Promote non-violent values and awareness-raising:**
   I recommend that States and civil society should strive to transform
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attitudes that condone or normalize violence against children, including stereotypical gender roles and discrimination, acceptance of corporal punishment and harmful traditional practices. States should ensure that children’s rights are disseminated and understood, including by children. Public information campaigns should be used to sensitize the public about the harmful effects that violence has on children. States should encourage the media to promote non-violent values and implement guidelines to ensure full respect for the rights of the child in all media coverage.

5 Enhance the capacity of all who work with and for children:
I recommend that the capacity of all those who work with and for children to contribute to eliminate all violence against them must be developed. Initial and in service training which imparts knowledge and respect for children’s rights should be provided. States should invest in systematic education and training programmes both for professionals and non-professionals who work with or for children and families to prevent, detect and respond to violence against children. Codes of conduct and clear standards of practice, incorporating the prohibition and rejection of all forms of violence, should be formulated and implemented.

6 Provide recovery and social reintegration services:
I recommend that States should provide accessible, child-sensitive and universal health and social services, including pre-hospital and emergency care, legal assistance to children and, where appropriate, their families when violence is detected or disclosed. Health, criminal justice and social service systems should be designed to meet the special needs of children.

7 Ensure participation of children:
I recommend that States actively engage with children and respect their views in all aspects of prevention, response and monitoring of violence against them, taking into account article 12 of the Convention on the Rights of the Child. Children’s organizations and child-led initiatives to address violence guided by the best interests of the child should be supported and encouraged.

8 Create accessible and child-friendly reporting systems and service:
I recommend that States should establish safe, well-publicized, confidential and accessible mechanisms for children, their representatives and others to report violence against children. All children, including those in care and justice facilities, should be aware of the existence of mechanisms of complaint. Mechanisms such as telephone helplines, through which children can report abuse, speak to a trained counsellor in confidence and ask for support and advice, should be established and the creation of other ways of reporting violence through new technologies should be considered.

9 Ensure accountability and end impunity:
I recommend that States should build community confidence in the justice system by bringing all perpetrators of violence against children to justice and ensure that they are held accountable through appropriate criminal, civil, administrative and professional proceedings and sanctions. Persons convicted of violent offences and sexual abuse of children should be prevented from working with children.

10 Address the gender dimension of violence against children:
I recommend that States should ensure that anti-violence policies and programmes are designed and implemented from a gender perspective, taking into account
the different risks facing girls and boys in respect of violence; States should promote and protect the human rights of women and girls and address all forms of gender discrimination as part of a comprehensive violence-prevention strategy.

11 Develop and implement systematic national data collection and research:
I recommend that States improve data collection and information systems in order to identify vulnerable subgroups, inform policy and programming at all levels, and track progress towards the goal of preventing violence against children. States should use national indicators based on internationally agreed standards, and ensure that data are compiled, analysed and disseminated to monitor progress over time. Where not currently in place, birth, death and marriage data registries with full national coverage should be created and maintained. States should also create and maintain data on children without parental care and children in the criminal justice system. Data should be disaggregated by sex, age, urban/rural, household and family characteristics, education and ethnicity. States should also develop a national research agenda on violence against children across settings where violence occurs, including through interview studies with children and parents, with particular attention to vulnerable groups of girls and boys.

12 Strengthen international commitment:
I recommend that all States ratify and implement the Convention on the Rights of the Child and its two Optional Protocols on the involvement of children in armed conflict and on the sale of children, child prostitution and child pornography. All reservations that are incompatible with the object and purpose of the Convention and the Optional Protocols should be withdrawn in accordance with the Vienna Declaration and Plan of Action of the World Conference on Human Rights of 1993. States should ratify all relevant international and regional human rights instruments that provide protection for children including the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment and its Optional Protocol; the Rome Statute of the International Criminal Court; the Convention on the Elimination of All Forms of Discrimination against Women and its Optional Protocol; ILO Conventions No. 138 on the Minimum Age for Admission to Employment and No. 182 on the Worst Forms of Child Labour; and the United Nations Convention against Transnational Organized Crime and the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime. States should implement all their international legal obligations and strengthen their cooperation with the treaty bodies.
Colophon

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This report is based on the analysis of information received from child helplines in the CHI network through CHI’s data questionnaire and the CHI VAC questionnaire. The conclusions and statements are based on this information and they do not capture the full scope of practices and policies of all countries and cases handled by child helplines and other child protection organisations at the national level.

The percentages in the cells of tables and graphs in this publication have been rounded to a maximum of two significant figures and do not make use of decimal notation. As a result, the percentages of the individual (sub-) categories do not always add up to one hundred percent, although the total percentage will show this figure.
Child Helpline International (CHI) is the global network of child helplines in 133 countries (as of December 2011), which together receive over 14 million contacts a year from children and young people in need of care and protection. CHI supports the creation and strengthening of national toll-free child helplines worldwide and uses child helpline data and knowledge to highlight gaps in child protection systems and advocate for the rights of children.

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