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Strengthening Child Protection Systems

Violence against Children

in East Asia and the Pacific

A Regional Review and Synthesis of Findings



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Abbreviations

ACE	Adverse childhood experience(s)
CEA or EA	Child emotional abuse or emotional abuse
CPA or PA	Child physical abuse or physical abuse
CSA or SA	Child sexual abuse or sexual abuse
CTS	Conflict Tactics Scale
CTS2	Revised Conflict Tactics Scale
CTSPC	Parent-Child Conflict Tactics Scale
DHS	Demographic and Health Survey
H	High-income country (World Bank classification)
L	Low-income country (World Bank classification)
LM	Lower middle-income country (World Bank classification)
MICS	Multiple Indicator Cluster Survey
OR	Odds ratio
PAF	Population attributable fractions
RR	Relative risk
SCL-90	Symptom Checklist 90
UM	Upper middle-income country (World Bank classification)
UNICEF	United Nations Children’s Fund
VAC	Violence against Children
WHO	World Health Organization
WV	Witnessing violence

Key definitions

Odds ratios and relative risk: An odds ratio is a measure of effect size, describing the strength of association or non-independence between two data values (Mosteller, 1968). The odds ratio can be calculated in non-random samples, whereas the relative risk is calculated from population-level data. These measures refer to the ratio of the odds of an event occurring in an exposed group versus an unexposed group – in the case of this review it being those with a history of a specific type of child maltreatment and those without a history. In other words, odds ratios allow us to compare whether the probability of a certain outcome occurring is the same for two groups (i.e. those with a history of child maltreatment and those without). Odds ratios can also be used to give an idea of how strongly a given variable may be associated with a specific outcome.

Population attributable fractions (PAF): PAFs are the proportion (%) of any given outcome (e.g. suicide ideation, substance misuse, etc.) incidence in the exposed (those that have experienced child maltreatment) that is due to the exposure (due to having experienced child maltreatment). PAFs can show the proportional reduction in population outcomes that would occur if exposure to a risk factor (in this case child maltreatment) were reduced or eliminated (WHO, 2014). So, if a PAF for substance misuse is 34% for those that have experienced child physical abuse, we can say that 34% of substance misuse in this population is directly due to individuals having experienced child maltreatment (subject to a wide range of assumptions and caveats). This is a very important statistic for policymakers because it shows that investments in the prevention of violence against children will also reduce many other negative health and wellbeing outcomes in the population (such as suicide, mental health disorders, substance misuse, early smoking initiation, etc.). Many outcomes are caused by multiple risk factors, and individual risk factors may interact in their impact on the overall consequences of violence against children. As a result, PAFs for individual risk factors (such as substance misuse or suicide ideation) often overlap and can add up to more than 100 percent (WHO, 2014).

Foreword

Violence against children is everywhere: it affects children at all stages as they develop from infancy through their early years and adolescence; and takes place in all settings where childhood unfolds. This was the main message of the landmark *UN Secretary-General's Study on Violence Against Children* (2006). However, violence is typically experienced by children in secret, is hidden by adults, and, more often than not, goes un-reported. "Making the invisible visible" is thus critical to elevate the issue of violence in the public sphere, and to spur national investments into its prevention and response. Yet such efforts are hampered by a weak evidence base, and a lack of hard data of the forms and magnitude of violence.

In 2012, UNICEF presented the findings of a systematic review of research, *Child Maltreatment: Prevalence, Incidence and Consequences in the East Asia and Pacific Region*. The publication, Number 1 in its series on strengthening child protection systems, found that there had been a tremendous amount of high quality research produced in the region in the previous decade. In fact, some 364 peer-reviewed and grey literature research on child maltreatment that met minimum quality criteria were included in the review. There were large gaps in country-specific data on child maltreatment; nevertheless, the review provided a wealth of information on the scale and nature of child maltreatment, and the immediate and long-term consequences of such maltreatment to individuals, families and society.

The systematic review also supported the development of a costing model used to estimate the minimum, lifetime direct and indirect costs of child maltreatment across countries in East Asia and the Pacific. This exercise demonstrated that the economic burden of child maltreatment is indeed considerable, conservatively estimating an annual loss of close to 2% of regional GDP. The publication of this research is forthcoming.

In commissioning this current work, it was our intention to produce a concise and up-to-date meta-synthesis of the research that began with the systematic review, which is accessible to UNICEF Country Offices, government counterparts, policy makers and technical experts in the region. Its findings have clear implications for future research, and for prevention and response programming in the region. We hope the report will help situate violence against children as a public policy issue critical to social and economic development, and provide fresh impetus for child protection systems strengthening.



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Lastly, appreciation goes to the researchers and service providers who are documenting child maltreatment in the East Asia and Pacific region. Your work is vital in establishing an evidence-base that is being used to advocate for investments in child protection systems, and design programmes to prevent and respond to the violence against children.



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Executive summary

Violence against children – “encompassing physical or mental violence, injury and abuse, neglect or negligent treatment, and maltreatment or exploitation, including sexual abuse” – is prevalent in all societies (UN CRC, 1989; Gilbert et al., 2009; Krug et al., 2002; Pinheiro, 2006). Violence against children can have profound and damaging consequences in childhood, adolescence and throughout adulthood. Lifelong adverse health, social, and economic consequences exist for those affected by violence, including mental and physical health conditions; increased health and other risk behaviours; exposure to further violence; disability from physical injury; reduced health-related quality of life; lower educational attainment; and lower levels of adult economic well-being (Gilbert et al., 2009; Fang et al., 2012).

This report builds on the previously published systematic review of evidence from the East Asia and Pacific Region on the prevalence and consequences of violence against children. This current report represents an update and consolidation of these findings, covering literature published between 2000-2013 in any of the 30 countries in the region. Over 6,000 articles and reports were reviewed and 239 prevalence studies and 178 consequences studies are included in this synthesis.

Violence against children is prevalent in all countries in the East Asia and Pacific region

Meta-analyses of estimates show that violence against children is widespread across the region, with 17-35% prevalence for both boys and girls in low and lower middle income countries and lower prevalence rates (1-13%) in upper middle and high-income countries. Fairly consistent findings across the region highlight that nearly three out of every four children experience violent discipline.

The prevalence of child sexual abuse ranges from 11-22% for girls and 3-16.5% for boys across countries. Child sexual abuse is more prevalent for girls than boys in all areas except in low-income countries in the region, which show a slightly higher prevalence for boys than for girls (16.5% vs. 13% respectively). It is important to build on these studies and to try and disentangle if and why the prevalence and outcomes may be different for boys while still addressing the highly prevalent state of violence against girls in the region.

Prevalence estimates for witnessing parental violence are very similar for both boys and girls with 12% to 32%, respectively, reporting that they witnessed violence between their parents or caregivers at some point in their childhood.

The prevalence estimates for emotional abuse range from 18-41.6%, showing a wide range across countries in the region but very similar estimates for both boys and girls in lower middle and upper middle-income countries. The highest prevalence estimates for emotional abuse are for girls in high-income countries in the region.

Neglect is one area that is under researched in the East Asia and Pacific, with prevalence estimates range from 22-32% for both males and females across the region. Recent research in China has started to explore and measure the neglect of younger children.

Child exploitation is also prevalent in the region. Nearly 1 in 10 children are involved in child labour with some countries having lower rates. Approximately a quarter of children are married by the age of 18 and nearly 1 in 10 children in some countries are married by the age of 15.

Many negative health and wellbeing outcomes in the region are directly attributable to violence against children

All forms of violence against children are linked to mental health problems and depression. A larger percentage of self-harm, suicide ideation and suicide attempts are attributable to both boys and girls having experienced emotional abuse than to any other type of violence against children. Neglect is also largely attributable for suicide attempts in East Asia and the Pacific for both boys and girls across the region.

Approximately one-third to one-half of early smoking initiation in the region is attributable to having experienced child physical abuse. Problem drinking and illicit drug use as outcomes are linked to all types of violence against children.

Though fewer studies exist in the region measuring the physical health consequences of violence against children, the few that do show that proportions of specific outcomes such as stomach pain or sexually transmitted infections are attributable to violence against children.

Exposure to or perpetration of further violence is an outcome associated with experiences of violence during childhood. Lifetime physical interpersonal violence victimization is attributable in part to experiences of child sexual abuse for both males and females in the region.

While evidence is beginning to emerge in the region on the impact of violence against children on health and wellbeing, quantitative studies exploring the impact of violence against children on education and educational outcomes as well as on adult employment opportunities is largely missing. This research could have significant impact in the region where education and economic growth are particularly valued by policymakers.

Many countries in the region still lack rigorous studies on the prevalence or consequences of violence against children

Despite the growing body of evidence in the region, some countries still have little to no data on the prevalence or consequences of violence against children. Yet we know that one of the greatest obstacles to the protection of children from maltreatment around the world is the scarcity of data to inform policies and advocate for programmes for the protection of children and prevention efforts to stop violence from ever occurring. Without data, violence against children remains a hidden and silent issue.

Further attention needs to be paid to study designs in the region. Meta-analyses highlight that survey design (e.g. using face-to-face interviews vs. self-completed surveys) has an impact on prevalence estimates. There is growing evidence from the region that self-completed surveys result in higher child sexual abuse prevalence estimates and may be more culturally appropriate (Ramiro, Madrid and Brown, 2010; WHO Multicountry Study, 2005). Research is required to explore this further in the region.

The aim of this report is to unveil and synthesize the wealth of data that does exist, highlight the methodological challenges to help improve our measurement, and shine a light on the gaps in our understanding of child abuse, neglect, exploitation and violence. This report supports a package of evidence and tools being developed by UNICEF for working with partners to prevent and respond to violence against children in the East Asia and Pacific region.

Introduction

Violence against children involving physical, sexual and emotional abuse, exploitation and neglect, has been shown through the WHO *World Report on Violence and Health (2002)* and the UN Secretary General's *Study on Violence Against Children (2006)*, to be widely prevalent in all societies. Despite these estimates, one of the greatest obstacles to the protection of children from maltreatment worldwide, including the East Asia and Pacific region, has been the scarcity of data on the prevalence and consequences of child maltreatment. The design and implementation of policies, plans, programmes and systems to effectively address child maltreatment must be based on scientific evidence; thus, the dearth of valid data in all countries in the region has been a considerable constraint for governments, INGOs, civil society organizations and UN agencies, including UNICEF, who are working to protect children from such violations of their rights.

In 2010, the UNICEF East Asia and Pacific Regional Office commissioned a systematic review of all the evidence in the region on the prevalence, incidence and consequences of child maltreatment. This original study examined over 6,000 articles and reports, and reviewed and analysed 364 studies that explored child maltreatment in the region (UNICEF, 2012). This current report represents an update and consolidation of these findings, covering literature published between 2000-2013 in any of the 30 countries in the region (for a detailed methodology, see UNICEF, 2012 or Fry et al., 2013 for consequences studies). In particular, this regional report highlights what is known about the prevalence and consequences of child maltreatment across the region and highlights challenges in existing data and comparability of findings across countries*.

In addition to this regional report, a series of data factsheets have been developed for each country in the East Asia and Pacific region with enough primary data. These factsheets are designed for a general audience and can be used by frontline child protection service providers and programme implementers to convey the message that child maltreatment is an important issue to address in *every country in the region*.

This study contributes to the ongoing work in the region to develop a regional package of evidence on child maltreatment to strengthen child protection systems.

* Brunei Darussalam, Cambodia, China, Cook Islands, Fiji, Indonesia, Japan, Kiribati, Republic of Korea, Lao People's Democratic Republic, Malaysia, Marshall Islands, Micronesia (Federated States of), Mongolia, Myanmar, Nauru, Niue, Palau, Papua New Guinea, the Philippines, Samoa, Singapore, Solomon Islands, Thailand, Timor-Leste, Tokelau, Tonga, Tuvalu, Vanuatu and Viet Nam.

Measuring the prevalence of violence against children

What is violence against children?

Violence against children	The UN defines violence against children in line with article 19 of the CRC: “all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse.”
Physical abuse	That which results in actual or potential physical harm from an interaction or lack of an interaction, which is reasonably within the control of a parent or person in a position of responsibility, power or trust. There may be single or repeated incidents.
Sexual abuse	Child sexual abuse is the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violate the laws or social taboos of society. Child sexual abuse is evidenced by this activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person.
Emotional abuse	Emotional abuse involves the failure to provide a developmentally appropriate, supportive environment, including the availability of a primary attachment figure, so that the child can develop a stable and full range of emotional and social competencies commensurate with her or his personal potentials and in the context of the society in which the child dwells. There may also be acts towards the child that cause or have a high probability of causing harm to the child’s health or physical, mental, spiritual, moral or social development. These acts must be reasonably within the control of the parent or person in a relationship of responsibility, trust or power. Acts include restriction of movement, patterns of belittling, denigrating, scapegoating, threatening, scaring, discriminating, ridiculing or other non-physical forms of hostile or rejecting treatment.
Neglect	Neglect can be defined as the failure to provide for the development of the child in all spheres: health, education, emotional development, nutrition, shelter, and safe living conditions, in the context of resources reasonably available to the family or caretakers and causes or has a high probability of causing harm to the child’s health or physical, mental, spiritual, moral or social development. This includes the failure to properly supervise and protect children from harm as much as is feasible.
Exploitation	Commercial or other exploitation of a child refers to use of the child in work or other activities for the benefit of others. This includes, but is not limited to, child labour and child prostitution. These activities are to the detriment of the child’s physical or mental health, education, or spiritual, moral or social-emotional development. Child exploitation also includes the recruitment and use of children in armed conflict, child trafficking and the sale of children.

Definitions are from the *UN Convention on the Rights of the Child and the World Report on Violence and Health*, World Health Organization, 2002. The sexual abuse definition is from the Report of the Consultation on Child Abuse Prevention, 29-31 March 1999. Geneva, World Health Organization, 1999 (document WHO/HSC/PVI/99.1)

What are the difficulties in measurement?

There are several methodological issues involved in measuring child maltreatment and research has shown that some of the variance between study findings may in fact be due to methodological issues (Pereda et al., 2009). Some of the key difficulties in measurement can be found in the *definitions and questions asked, the sampling designs, the age of the respondent and the type of study conducted*.

Definitions and questions asked

One of the key limitations in comparing findings across studies is the lack of standardised measurement of types of child maltreatment. While some studies use validated instruments and scales to measure types of maltreatment such as physical abuse or sexual abuse, each of the studies may report these findings in different ways. We know from previous research that the instruments used (Finkelhor et al., 2013), the order of questions asked (Stark, 2010) and the number of questions asked on a specific topic can have an impact on prevalence estimates (Fang et al., 2014).

Underreporting

Violence against children can be stigmatizing and shameful, which can make it difficult for survivors to share their stories (Dartnall and Jewkes, 2012). Children are in especially vulnerable positions as the perpetrator of the violence may be a parent, family member, caretaker, service provider or significant figure in the community. Children are often coerced or threatened into keeping quiet and the disclosure of experiences has very real consequences for children including separation from family, rejection from community members, punishment, withdrawal of services and even exposure to further violence. A further challenge exists in the social norms surrounding the types of violence against children; examples include ideas about appropriate levels of discipline, ideas on the roles of women and girls, and adult sexual entitlement. These social norms in turn make disclosure and reporting in both research and for services even more difficult.

Underreporting may also be an issue for understanding violence experienced by gender. For example, not all population-based household surveys ask about violence against boys or disaggregate findings by gender and even less is known about the equality of inclusion of boys in qualitative research

Age and type of respondent

Another factor of concern involves adult or retrospective recall of adverse events in childhood, which may cause several errors in estimating prevalence. This could be due to several factors including memory, subsequent experiences that may influence memories and not being able to remember issues such as 'timing' or specifics during the early years of life (Hardt and Rutter, 2004). Similarly, research has shown that accuracy and inaccuracy in reporting prior experiences may be related to current physical or psychological health status (Widom, Raphael and DuMont, 2004). For example, those in poor health may more easily recall early negative experiences (or label them as such) than those who are healthy (Widom, Raphael and DuMont, 2004). This is especially important when looking at the consequences of child maltreatment as retrospective self-reports may mistakenly exaggerate the associations between child maltreatment and depression, drug dependence and other key variables (Widom, Raphael and DuMont, 2004).

Other methods to measure violence against young children, such as interviewing parents, are not always reliable, especially for severe incidents such as sexual violence against infants and young children. Interviewing parents may also lead to an unsafe atmosphere for children and the ethical and safety implications need to be considered with any research involving parents.

Sampling and study design

Sampling designs in addition to the type of respondent (adult, child) and method of survey have shown to impact prevalence findings. Specifically, self-administered surveys may increase the risk of false negatives (i.e. people who say they were not abused when they were) and thus may underestimate actual prevalence numbers (Pereda et al., 2009). However, studies by researchers in China have found that self-administered questionnaires, especially for sensitive topics such as child sexual abuse cause less embarrassment and produce higher response rates (Tang, 2002).

Many countries also do not have reliable surveillance systems, which can sometimes capture severe physical abuse, particularly where it leads to death or 'near misses'. In addition, all study designs (depending in part on sampling techniques) may miss hidden or hard to reach populations of children. Establishment surveys can, to some extent, sample hard to reach children but this method relies upon very good key informants and relationships with local organizations.

All of these issues should be kept in mind when reviewing study findings and regional comparisons. A quality assessment to estimate risk of potential bias has been undertaken for all of the studies in this review and is presented in Appendix A to assist the reader in understanding the strengths and weaknesses of each study.

Available data in the East Asia and the Pacific

Figure 1: Types of data available in the East Asia and the Pacific



Figure 1 presents the types of data and studies available on the prevalence and consequences of violence against children in the East Asia and Pacific region. Nearly three-quarters of countries in the region have some research measuring the consequences of violence against children. A similar number of countries have some sort of prevalence study – either through school-based, community-based or household surveys – measuring child physical abuse or child sexual abuse. Only six countries have any data on the prevalence of child neglect. Even fewer countries have publicly available* child abuse case information through a child protection surveillance system that tracks cases over time. Only two countries in the region have conducted a national violence against children (VAC) survey (data forthcoming), though several other countries in the region are currently planning national prevalence studies.

Figure 2: Countries in the region with little to no data on the prevalence or consequences of violence against children

Brunei Darussalam	Micronesia (Federated States of)	Papua New Guinea
Cook Islands	Mongolia	Samoa
Democratic People's Republic of Korea	Myanmar	Singapore
Lao People's Democratic Republic	Nauru	Tokelau
Malaysia	Niue	Tuvalu

World Bank subregion classification by country

Graphs throughout the report based on meta-analyses of multiple studies are grouped into World Bank subregions classification based on country income:

Low-income countries: Democratic People's Republic of Korea, Myanmar, and Cambodia.

Lower middle-income countries: Indonesia, Fiji, Kiribati, Lao People's Democratic Republic, Republic of Marshall Islands, Mongolia, Nauru, Papua New Guinea, Philippines, Samoa, Solomon Islands, Tonga, Vanuatu and Viet Nam.

Upper middle-income countries: China, Cook Islands, Niue, Palau, Thailand, and Tuvalu.

High-income countries: Brunei Darussalam, Japan, Republic of Korea, Malaysia, Micronesia (Federated States of) and Singapore.

1. Child physical abuse

Key message

Physical abuse against children is prevalent in the East Asia and the Pacific with a 17-35% prevalence for both boys and girls in low and lower middle income countries, and lower prevalence rates (1-13%) in upper middle and high-income countries. When parents are surveyed directly, they report much lower prevalence estimates of using physical maltreatment towards their children.

What are the limitations of the data?

As with most types of child maltreatment, measures of physical abuse rely on the self-report of experiences assessed by respondents (parents, child or adult) answering questions on a survey about their experiences as a child (or towards their child).

Data definitions, availability and comparability

Studies in the region utilize many different questions to measure child physical abuse. The most commonly used measurement scale of studies in this review is the Conflict Tactics Scale (CTS), the Revised Conflict Tactics Scale (CTS2) and the Parent-Child Conflict Tactics Scale (CTSPC). Originally developed in 1979 by Murray A. Straus, these scales have been used extensively in studies worldwide (Straus and Hamby, 1997).

The CTS2 has five scales including: negotiation, psychological aggression, physical assault, sexual coercion and injury. In the physical assault scale there are 12 items including: a) kicked, bit or punched; b) slapped; c) beat up; d) hit with something; e) choked; f) slammed against a wall; g) grabbed; h) threw something at that could hurt; i) used knife or gun on; j) pushed or shoved; i) twisted arm or hair; and j) burn or scalded on purpose (Straus et al., 1996).

The Parent-Child version of the Conflict Tactics Scale (CTSPC) has scales to measure: 1) physical assault; 2) psychological aggression; 3) non-violent discipline techniques; and 4) neglect. The unique feature of this scale is that it measures the behaviours of parents in specific acts of physical and psychological aggression regardless of whether the child was injured as a result of those acts (Straus, Himby, Finkelhor et al., 1998).

Similar to any of the other scales, the wording can be changed depending on whether respondents are parents, children or adults recalling childhood experiences. The physical assault scale includes 13 items: a) spanked on bottom with bare hand; b) slapped on the hand, arm, or leg; c) hit on the bottom with a belt, a hairbrush, a stick or some other hard object; d) shook him/her (for those under 2 and children older than 2); e) hit some other part of the body besides the bottom with a belt, a hairbrush, a stick; f) pinched him/her; g) slapped on the face, head or ears; h) hit with a fist or kicked hard; i) threw or knocked down; j) beat up, that is you hit him/her over and over as hard as you could; k) grabbed around neck and choked; l) burned or scolded on purpose; and m) threatened with a knife or gun.

This scale has been validated in Chinese and includes a culturally adapted scale with two additional scale items:

- Parents hit you on some other part of the body besides the bottom with something like a belt, hairbrush, a stick or some other hard objects,
- Parents pressed you head under water, or used sharp objects, like a knife and broken glass, to hurt you (Leung et al., 2008; Wong, Chen, Goggins, et al., 2009; Tang, 2006).

Studies vary in their reporting of scale items from these instruments, making very few studies directly comparable.

Figure 3: Prevalence estimates of child physical abuse in the Asia-Pacific region by World Bank classification and gender, based on 40 studies

Sample size weighted and corrected for methodological factors

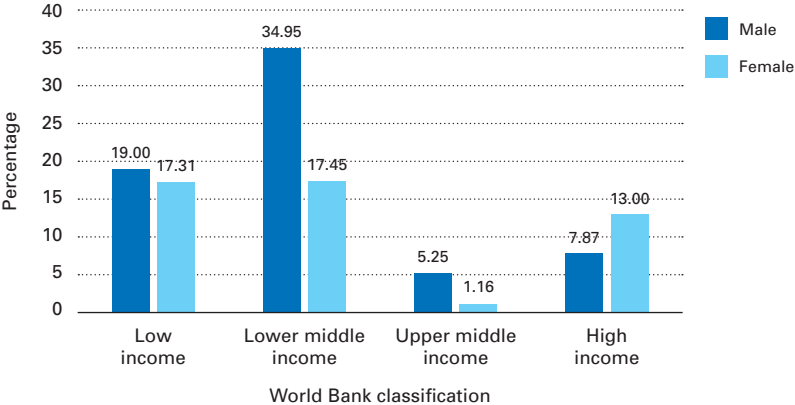
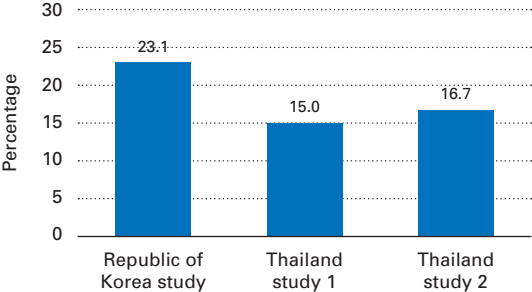


Figure 4: Percentage of adults ever reporting physical abuse as a child, measured using the Conflict Tactics Scale (CTS), Republic of Korea and Thailand



Source: Republic of Korea study (Kim, Park and Emery, 2009); Thailand study 1 (Chaopricha and Jirapramukpitak, 2010); Thailand study 2 (Jirapramukpitak et al., 2010).

Figure 5: Percentage of parents reporting ever using physical maltreatment towards their children, measured using the Conflict Tactics Scale (CTS), Taiwan and Hong Kong



Source: Hong Kong study sample of 2,363 sampled from a larger randomized household survey (Chan, 2010); 1,622 Chinese parents from a probability sample in Taiwan (Tang, 2006).

2. Child deaths

Key message

Emerging evidence from upper-middle and high-income countries in the region suggest that child homicide is a growing concern and that some parents report filicide-suicide ideation. Child death surveillance systems and routine data collection is needed to understand the nature and extent of child deaths in the region.

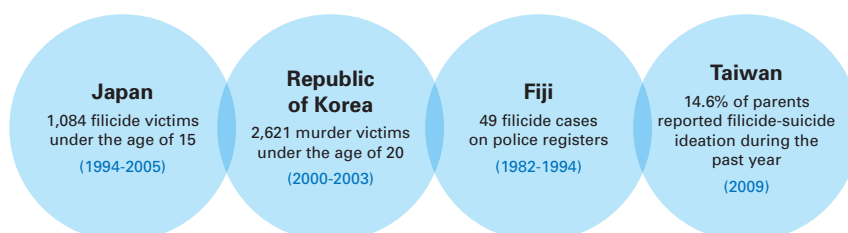
What are the limitations of the data?

Data on child filicide and homicide are usually collected through police reports, newspaper accounts or mortality surveillance systems. Public health surveillance systems are in the nascent stages of development for many countries in the region and reliable and comprehensive child death data is often not collected.

Data definitions, availability and comparability

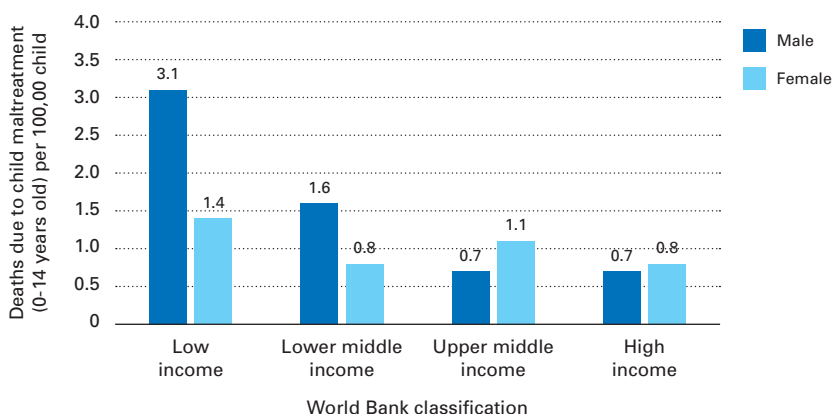
A very limited number of countries in the region collect filicide or homicide data making it difficult to estimate the extent of intentional child deaths. Data that is collected is not directly comparable due to definitions, source of data and time periods.

Figure 6: Findings on child filicides and homicides across studies



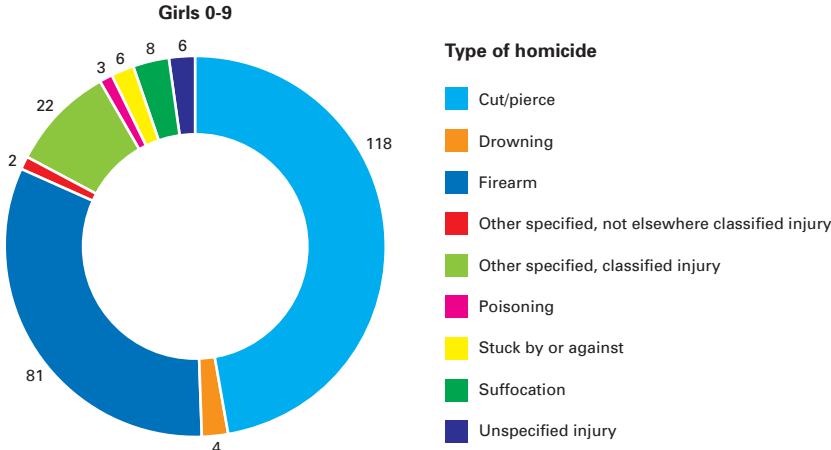
Source: Japan: Yasumi and Kageyama, 2009; Republic of Korea: Government of the Republic of Korea, 2005; Fiji: Adinkrah, 2000; Taiwan: Wei and Chen, 2014.

Figure 7: Child deaths attributable to child maltreatment for 0-14 year olds per 100,000 children (0-14 year olds), based on 2004 WHO data, for the East Asia and Pacific region by World Bank classification and gender



Source: Fang et al., 2014 data from the WHO for violence-related deaths for children aged 0-14 in WHO Member States.

Figure 8: Number of homicide cases for girls in the Philippines aged 0-9 (n = 250) by type of homicide, 1999-2003



Source: Injury mortality data collection of the GBD injury expert group, 2013.

3. Violent discipline by parents and teachers

Key message

Fairly consistent findings across the region highlight that nearly three out of every four children experience violent discipline. Prevalence of violent discipline from parents is similar for males and females. Studies in the region range widely in reports of corporal punishment by teachers. The prevalence of more severe forms of corporal punishment, e.g. punishment resulting in being physically hurt or injured by a teacher, appears to be consistently higher for boys.

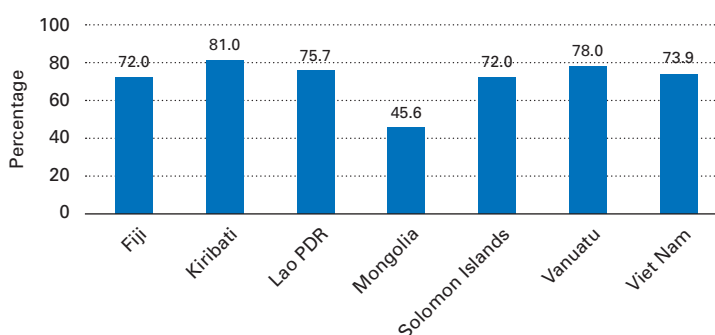
What are the limitations of the data?

Household survey modules used in the MICS (UNICEF Multiple Indicator Cluster Survey) and the DHS (Measure Demographic Health Survey) measure violent discipline from parents consistently across various surveys. Other data on violent discipline or corporal punishment by parents or teachers varies in its use of definitions, questions, type of respondents, location of data collection and reporting of findings. Students, teachers and parents may view corporal punishment as an acceptable response to children's behaviour, increasing the potential of underreporting.

Data definitions, availability and comparability

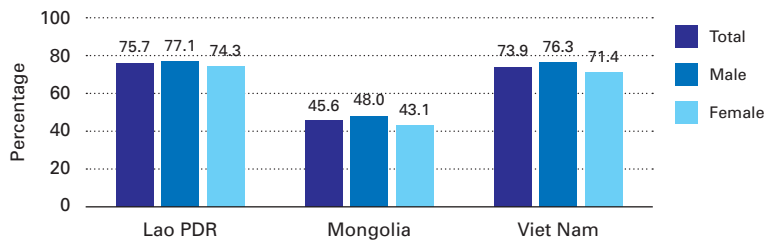
Violent discipline data is available for seven out of the 30 countries in the region, three of which have desegregated data by gender. The source of the violent discipline data for Figures 9 and 10 came from MICS or DHS for the most recent year available for the period 2005-2012. There is difficulty in comparing country level data from other studies on corporal punishment for the reasons stated above. Varying definitions and measurement of violent discipline from teachers make comparability between studies across the region very difficult.

Figure 9: Percentage of children 2-14 years old who experience any violent discipline (psychological aggression and/or physical punishment), by country



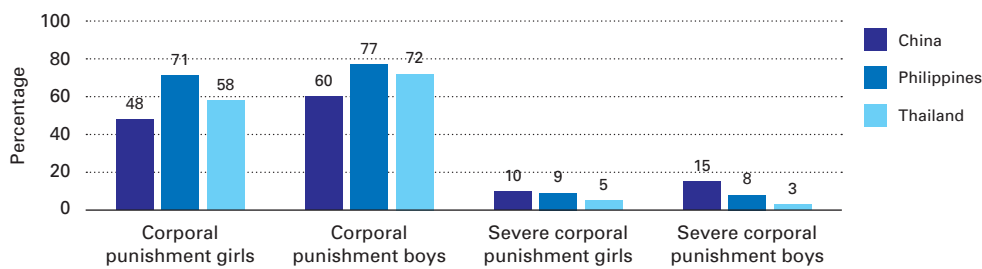
Source: MICS, DHS and other national surveys as summarized in UNICEF, Every Child Counts: The State of the World's Children 2014 In Numbers.

Figure 10: Percentage of respondents reporting using violent discipline by country and gender



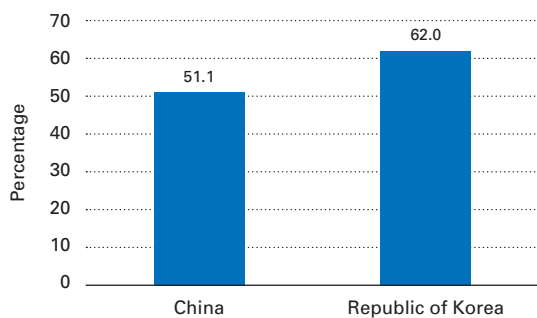
Source: MICS, DHS and other national surveys as summarized in UNICEF, Every Child Counts: The State of the World's Children 2014 In Numbers.

Figure 11: Percentage of parents reporting corporal punishment in the last month by country and gender



Sample sizes for study: China (241), Philippines (120) and Thailand (120).
Source: Lansford et al., 2010.

Figure 12: Percentage of a sample of elementary school children who report experiencing corporal punishment by teachers (n = 972), China and the Republic of Korea



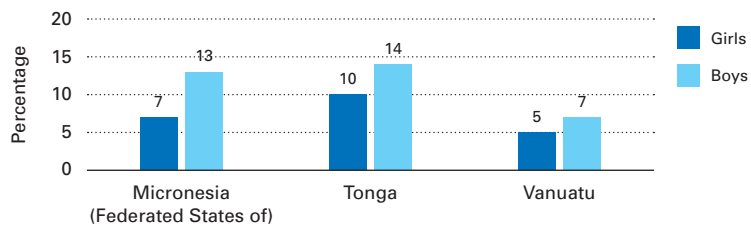
Source: Kim, Kim, Park et al., 2000.

Figure 13: Percentage of 16-17 year olds who report having been physically hurt by a teacher in the past month, using child household questionnaires, by country



Source: Series of studies conducted by UNICEF Pacific 'Protect Me with Love and Care'. Sample sizes for child household questionnaires: Vanuatu (248), Kiribati (200), Solomon Islands (274), and Fiji (248).

Figure 14: Percentage of 11-17 year olds who reported experiencing an intentional injury from a teacher in the previous 12 months, by country and gender



Source: 2007 data from Smith, Phongsavan, Bampton et al., 2008.

4. Child sexual abuse

Key message

The prevalence of child sexual abuse ranges from 11-22% for girls and 3-16.5% for boys across the region. Emerging evidence is highlighting the growing number of boys affected by child sexual abuse, with prevalence estimates for low income countries slightly higher for males than for females, whereas prevalence estimates in upper middle and high income countries shows that sexual abuse is more prevalent for girls.

What are the limitations of the data?

There are many methodological considerations when examining child sexual abuse data. Studies from the region vary considerably in their definitions and measurement of sexual abuse and in their definition of childhood (UNICEF, 2012; Fang et al., 2014). Many studies do not use validated instruments and instead ask only one or two researcher-developed questions which can impact on prevalence estimates (Fang et al., 2014). Child sexual abuse may be underreported due to the stigma and safety implications for children (Dartnall and Jewkes, 2012) though it is unclear how much cultural variation may inhibit disclosure (Finkelhor et al., 2013). It is also unclear how potential underreporting differs by gender within the region.

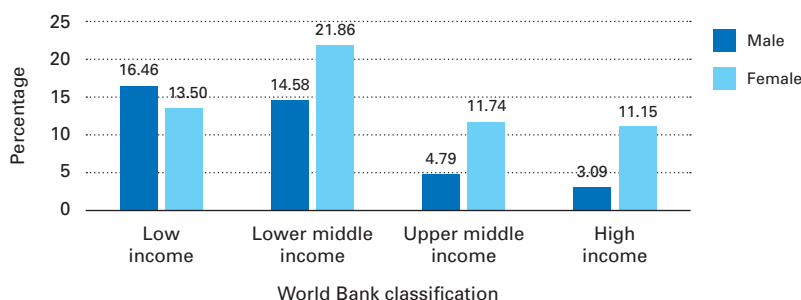
A recent meta-analysis of Chinese studies (Ji et al., 2013) found that child abuse prevalence estimates can be influenced by a number of factors including urban vs. rural location, sampling, whether a study is conducted in multiple sites and whether the survey is administered using face-to-face interviews or self-completed surveys. There is growing evidence from the region that self-completed surveys result in higher child sexual abuse prevalence estimates (Ramiro, Madrid and Brown, 2010; WHO Multicountry Study, 2005).

Data definitions, availability and comparability

Studies within one country may consistently use the same instruments, such as the studies in China that utilise a Child Abuse Scale developed by Chen (2002), which has been shown to have an influence on prevalence estimates. This allows for good intra-country comparisons but may make it difficult to compare studies across countries. The wide variety of instruments and study designs make direct comparisons between individual studies difficult but the large number of studies conducted in the region allow for meta-analyses to be conducted.

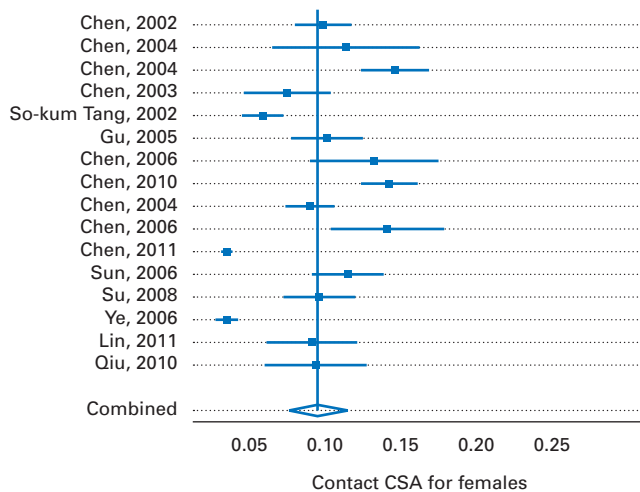
Figure 15: Prevalence estimates in the Asia-Pacific region by World Bank classification and gender, based on 40 studies

Sample size weighted and corrected for methodological factors



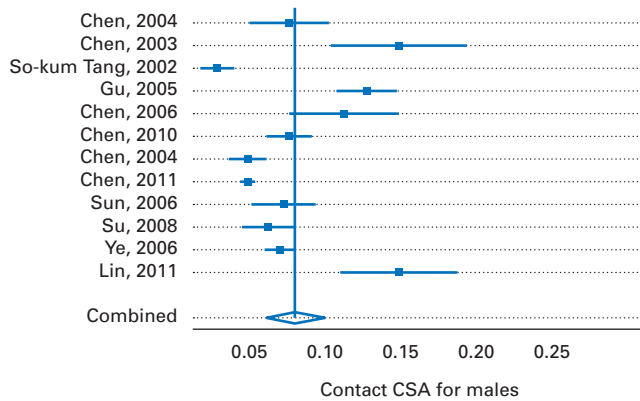
Source: Fang et al., 2014.

Figure 16: Unadjusted child contact sexual abuse prevalence estimates for females, 16 studies, China



Source: Meta-analysis from Ji, Finkelhor and Dunne, 2013.

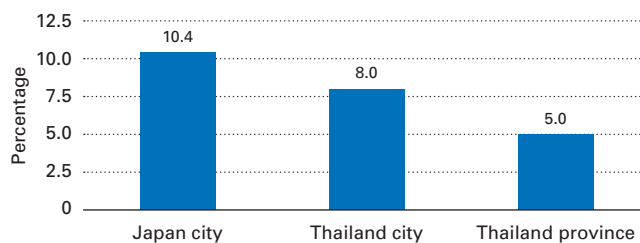
Figure 17: Unadjusted child contact sexual abuse prevalence for males, 12 studies, China



Source: Meta-analysis from Ji, Finkelhor and Dunne, 2013.

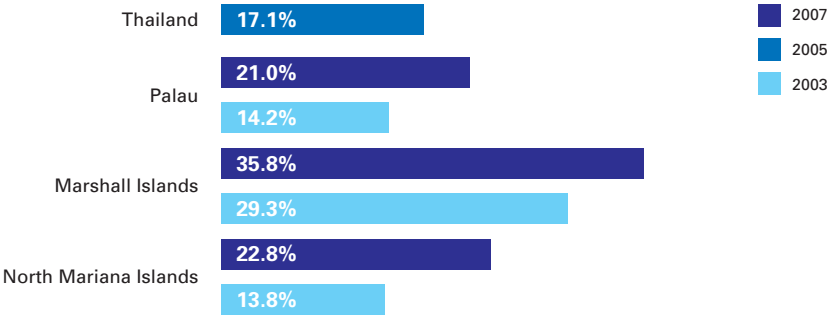
Figures 16 and 17 show the various prevalence estimates for contact sexual abuse for both males and females from studies conducted in China. The horizontal axis shows the prevalence estimate (decimal equivalent of a percentage such that 0.1 equals 10%). The lines for each study shows the prevalence range and the vertical line running through the graph shows the overall prevalence estimate across all the studies.

Figure 18: Percentage of respondents from the WHO multi-country study who reported experiencing child sexual abuse before the age of 15, Japan and Thailand



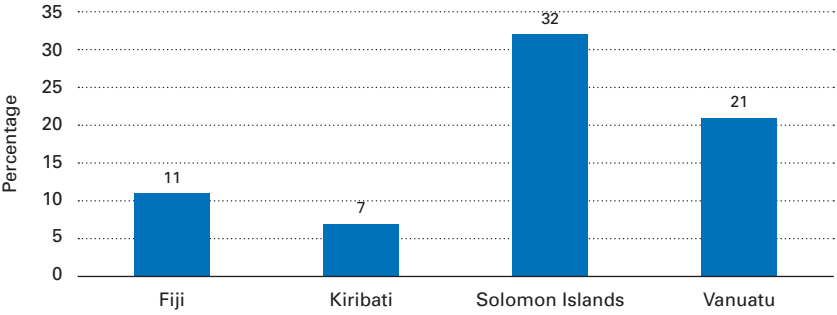
Source: Yoshihama and Horrocks, 2010 and WHO, 2005.

Figure 19: Percentage of young people who reported ever experiencing forced sex, by country



Source: Ruangkanchanasetr et al., 2005; Balling et al., 2003; Lippe et al., 2008.

Figure 20: Percentage of child household questionnaire respondents (16-17 years old) who reported having been touched inappropriately at school in the past month, by country



Source: UNICEF 'Protect Me with Love and Care' studies (UNICEF 2009a-e).

5. Child emotional abuse

Key message

The prevalence estimates for emotional abuse range from 18-41.6%, showing a wide range across countries in the region but very similar estimates for both boys and girls in lower middle and upper middle-income countries. The highest prevalence estimates for emotional abuse are for girls in high-income countries.

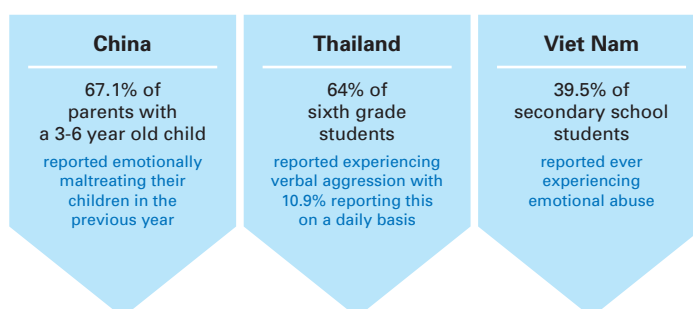
What are the limitations of the data?

One of the main issues in defining and measuring emotional abuse is the use of a term to describe it. Within the East Asia and Pacific Region a variety of labels appear to be used interchangeably with emotional abuse: psychological aggression (Chan, 2010; Leung et al., 2008); emotional abuse (Tao et al., 2006; Jeon et al., 2009; Nguyen, Dunne and Le, 2010); verbal abuse (Esteban, 2006); verbal violence (Kim, Park and Emery, 2009); verbal aggression (Isaranurug et al., 2001); emotional maltreatment (Cui et al., 2010) and mental abuse (Ye, Tao, Fang et al., 2006). It is unclear how much this variation is due to different conceptualisations of emotional abuse versus differences in translation of terms into English.

Data definitions, availability and comparability

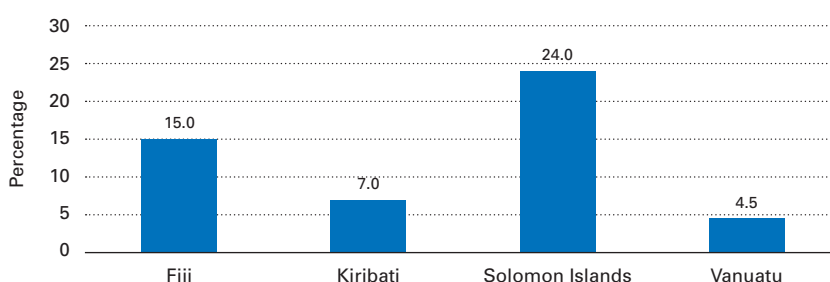
Like other types of child maltreatment, emotional abuse studies across the region often measure different definitions and behaviours making the comparability of individual studies difficult. There were no studies found that explored emotional abuse prevalence in the lowest income countries in the region.

Figure 21: Findings on emotional abuse, China, Thailand and Viet Nam



Source: China study: Cui, Pang, Du et al., 2010; Thailand: Isaranurug, Nitirat et al., 2001; Viet Nam: Nguyen, Dunne and Le, 2010.

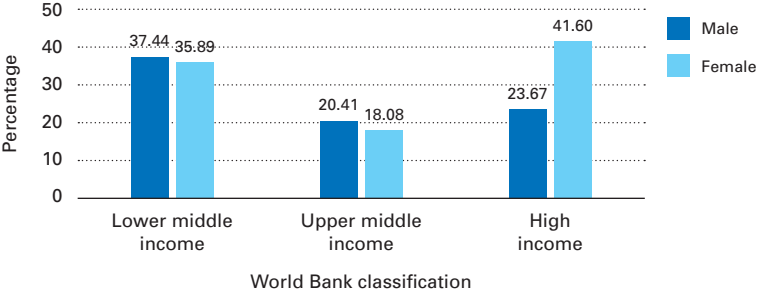
Figure 22: Percentage of 16-17 year olds who reported that an adult at home made them feel unwanted in the past month, by country



Source: Series of studies conducted by UNICEF Pacific 'Protect Me with Love and Care'. Sample sizes for child household questionnaires: Vanuatu (248), Kiribati (200), Solomon Islands (274), and Fiji (248).

Figure 23: Emotional abuse prevalence estimates by World Bank classification and gender, based on 14 studies

Subhead: Sample size weighted and corrected for methodological factors



Source: Fang et al., 2014.

6. Neglect

Key message

Neglect is an area that is under-researched in the East Asia and Pacific region. Prevalence estimates range from 22-32% for both males and females across the region. Recent research in China has started to explore and measure neglect of younger children.

What are the limitations of the data?

Like other forms of maltreatment, there are varying definitions for neglect. One of the main methodological challenges is whether neglect estimates are measuring acts of omission or commission (e.g. intent to cause harm) or both, and how broadly they are measuring neglect (medical neglect, educational neglect, etc.). It is also uncertain whether estimates of neglect include the concept of 'children left behind' which can be common in rural areas in the region.

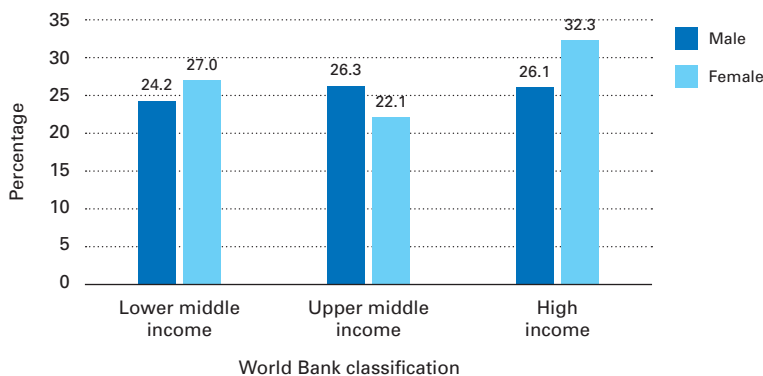
Data definitions, availability and comparability

There is an increased use of common instruments in measuring neglect, including the studies measuring neglect in children aged 3-6 years old in China (see Figure 24) with a similar trend appearing for older age ranges. Studies outside China are scarce, suggesting that neglect is an under researched area of child maltreatment for the region as a whole.

Figure 24 highlights findings from a meta-analysis of neglect prevalence estimates for the region based on 12 studies and using sample size weighted and corrected estimates for methodological factors. This figure is grouped by World Bank subregion classification by country, which to reiterate are as follows:

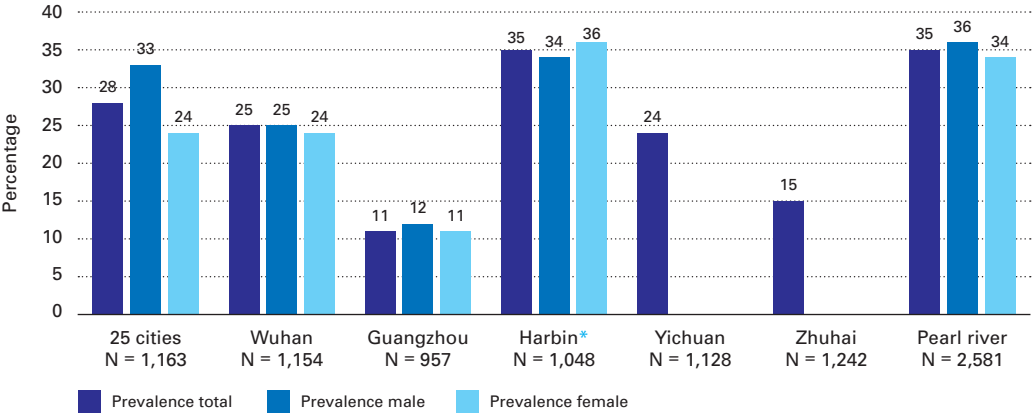
1. Lower middle income countries, including Indonesia, Fiji, Kiribati, Lao People's Democratic Republic, Republic of Marshall Islands, Mongolia, Nauru, Papua New Guinea, the Philippines, Samoa, Solomon Islands, Tonga, Vanuatu, Viet Nam;
2. Upper middle income countries, including China, Cook Islands, Niue, Palau, Thailand, and Tuvalu; and
3. High income countries, including Brunei Darussalam, Japan, Republic of Korea, Malaysia, Micronesia (Federated States of), and Singapore.

Figure 24: Prevalence of neglect in East Asia and Pacific region by World Bank classification and gender, based on 12 studies



Source: Fang et al., 2014.

Figure 25: Prevalence of neglect in children aged 3-6 years old by gender, studies conducted in China



Source: 1) Pang, Yang, Ren et al., 2005; 2) Liu, Jiang, Luo et al., 2010; Zhang, Zhen and Zou, 2006; Chen, Xie et al., 2011*; Duan et al., 2010; Fu, Chen et al., 2011; Wang, Fu, Jing, 2012.

7. Witnessing domestic violence

Key message

An increasing number of studies in the region are exploring the prevalence of children witnessing parental domestic violence. Prevalence estimates for boys and girls are very similar with 12-32% reporting to have witnessed parental violence at some point in their childhood.

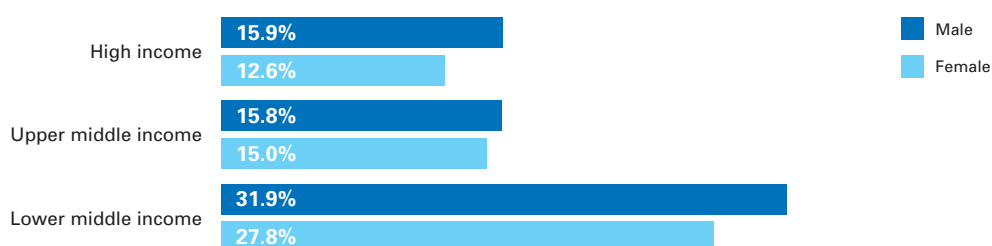
What are the limitations of the data?

Some studies only measure father-to-mother violence and others measure violence from both parents separately, while still other studies do not specify which parent may be perpetrating the violence. In addition, only a few studies include measures of severity including injury or harm resulting from the violence or length of time witnessing the violence.

Data definitions, availability and comparability

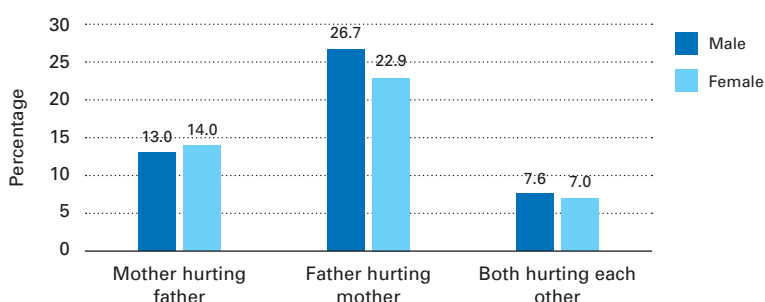
Terminology and the measurement of parental domestic violence varies between studies, making it difficult to directly compare results.

Figure 26: Prevalence of witnessing domestic violence in countries in the East Asia and Pacific region by World Bank classification and gender, based on 17 studies



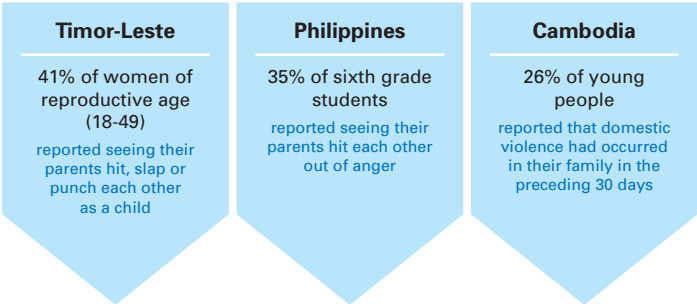
Source: Fang, X et al., 2014.

Figure 27: Percentage of Filipino 17-19 year olds who reported recalling parental domestic violence by gender (n = 2,051)



Source: Hindin and Gultiano, 2006.

Figure 28: Findings on witnessing parental violence, Timor-Leste, the Philippines and Cambodia



Source: Timor-Leste: IRC, 2003; Philippines: Maxwell, 2001; Cambodia: The Ministry of Education, Youth and Sports, UNICEF and UNESCO, 2004.

8. Reported cases of child abuse

Key message

For all countries in the region that collect administrative data, cases of reported child abuse follow a steadily increasing trend.

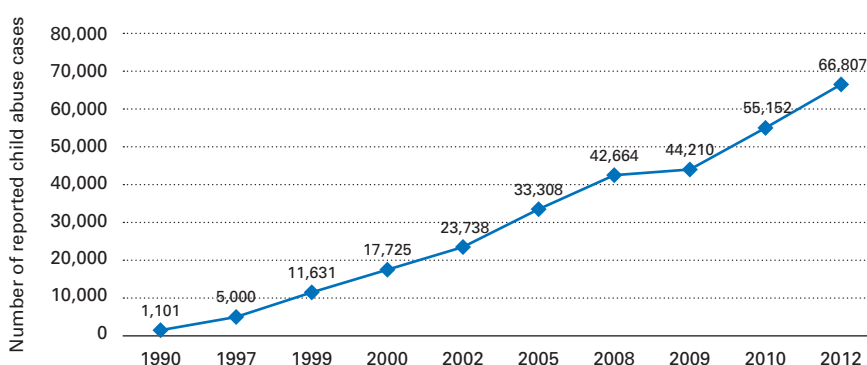
What are the limitations of the data?

As case management, child protection systems and prevention messaging improves, numbers of reported child abuse cases may also increase making it difficult to ascertain if there is a true increase in the number of child abuse cases or simply an increase in reporting and detection.

Data definitions, availability and comparability

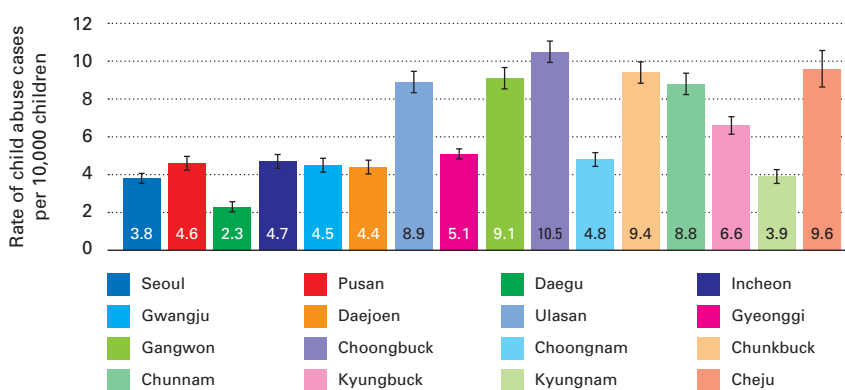
Very few countries in the region have accessible routinely collected administrative surveillance data on the number of child abuse cases. Those countries that do collect this administrative data show very similar upward trends in the number of cases each year despite having differing total caseloads.

Figure 29: Number of reported child abuse cases in Japan, 1990-2012



Source: Data on child abuse cases collected by the Japanese ministry of health, labour and welfare.

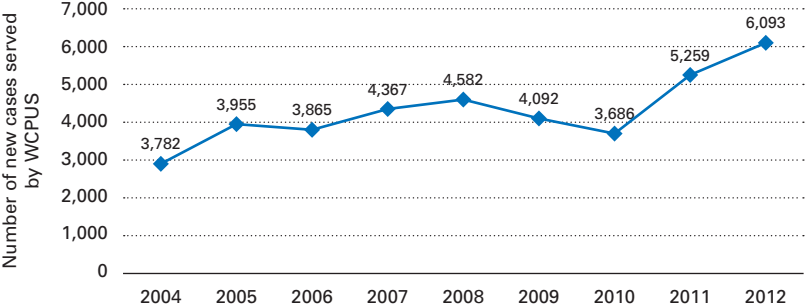
Figure 30: Rate of child abuse cases per 10,000 children in the Republic of Korea for each of the 16 districts/provinces, 2001-2008



The child population rate for children aged 0-17. Bars represent confidence intervals.

Source: Pai et al. 2009.

Figure 31: Number of new child abuse cases in Women and Child Protection Units (WCPUs) across the Philippines, 1997-2012



Source: Child protection network, child protection annual report, 2012.

9. ACE: Adverse childhood experiences

Key message

In countries that have conducted studies exploring adverse childhood experiences (ACE), the findings show that three out of every four children have experienced at least one adverse experience in their childhood (ranging from child abuse and neglect to dysfunctional family environments, characterized by substance misuse to domestic violence and community violence) and many children experience multiple adverse experiences.

What are the limitations of the data?

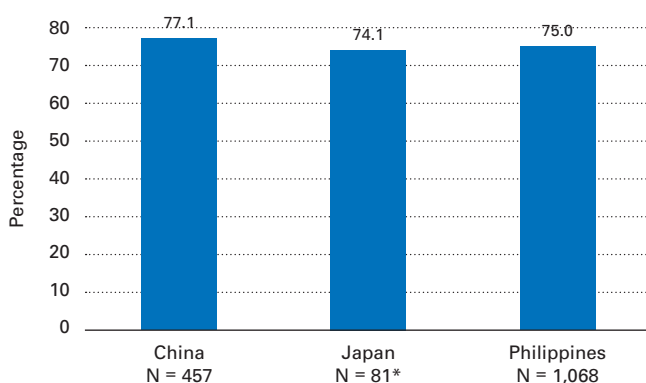
Measuring adverse childhood experiences is broader than measuring only child abuse experiences and includes measures of other traumatic and stressful events in childhood including, for example, parental substance misuse. One limitation with the broader measurement is that it is often difficult to disentangle what 'type' of adverse childhood experience is being reported if only the aggregate prevalence of experiencing one, two or three ACE's is presented.

Data definitions, availability and comparability

Only a handful of countries in the region have used a validated ACE measurement scale to explore childhood adversity. Other countries have started to look at multiple victimization experiences using other, often self-developed, questionnaires and measures making it difficult to compare findings across countries.

The World Health Organization is undertaking to help to foster research into ACEs in low and middle-income countries. The Violence Prevention Division of the WHO is working with international teams of researchers in low and middle income countries to rigorously adapt, translate and field test a modified ACE tool that has utility in multiple cultural contexts. More information on this modified ACE instrument can be found at: http://www.who.int/violence_injury_prevention/violence/activities/adverse_childhood_experiences/en/

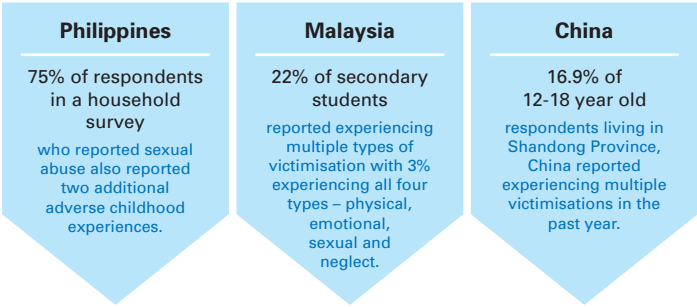
Figure 32: Prevalence of at least one adverse childhood experience for females (15-18 years old), China, Japan and the Philippines



* This sample consisted of females in conflict with the law.

Source: China: Mai, Dai and Guan, 2012; Japan: Matsuura, Hashimoto and Toichi, 2013; Philippines: Ramiro, Madrid and Brown, 2010.

Figure 33: Prevalence of multiple victimizations from multiple studies, the Philippines, Malaysia and China



Source: Philippines: Ramiro, Madrid and Brown, 2010; Malaysia: Choo et al., 2011; China: Dong et al., 2013.

10. Child marriage

Key message

Prevalence of child marriage varies across countries in the region, with approximately a quarter of children married by the age of 18 and nearly 1 in 10 children in some countries married by the age of 15.

What are the limitations of the data?

Child marriage can be difficult to measure since it is often a hidden issue. It may also be difficult to ascertain the age of a child where no official documents exist. Surveys may underestimate child marriage in countries where it is taboo or against the law.

Data definitions, availability and comparability

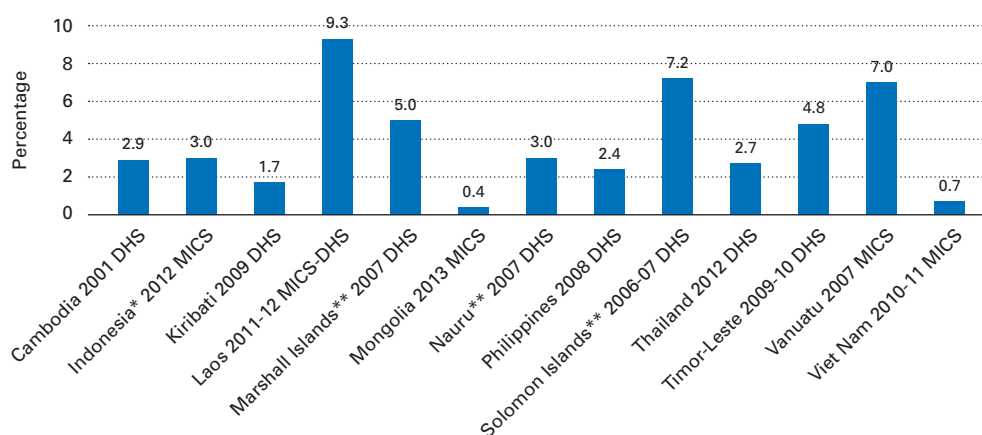
Child marriage data is available for 12 out of the 30 countries in the region. The source of all the data comes from either the UNICEF Multiple Indicator Cluster (MICS) survey for the Demographic Health Survey (DHS) for the most recent year available for the period 2002-2012. Three countries, Lao PDR, Marshall Islands and Vanuatu, show a consistently higher prevalence of child marriage than other countries in the region.

Figure 34: Child marriage data from multiple studies

Papua New Guinea
The 2000 census of Papua New Guinea reported 3,870 married girls between the ages of 10 and 14. (GoPNG, 2000 as cited in UNICEF 2009)
Solomon Islands
A qualitative study on the sexual exploitation of children in the Solomon Islands by men involved in the logging industry highlighted 12 stories of children being forced into child marriage or being sold into marriage by their parents. (Herbert, 2007)

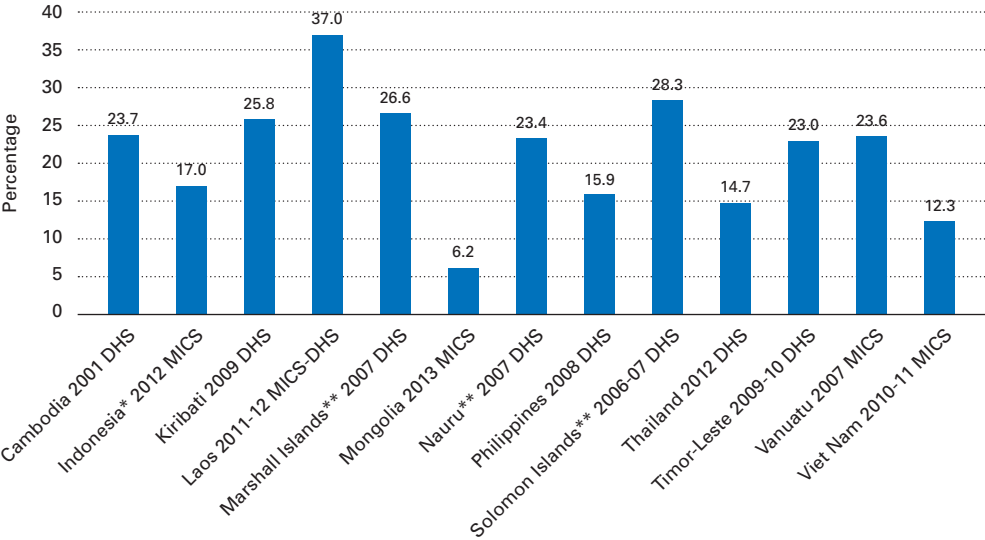
Source: Philippines: Ramiro, Madrid and Brown, 2010; Malaysia: Choo et al., 2011; China: Dong et al., 2013.

Figure 35: Percentage of children married by the age of 15 (based on 15-49 year old female respondents), by country



Source: UNICEF Multiple Indicator Cluster Survey (MICS) or Demographic Health Survey (DHS) data from most recent year available for the period 2002-2012.

Figure 36: Percentage of children married by the age of 18 (based on 20-49 year old female respondents), by country



Source: UNICEF Multiple Indicator Cluster Survey (MICS) or Demographic Health Survey (DHS) data from most recent year available for the period 2002-2012.

11. Child labour

Key message

Nearly 1 in 10 children in the region are involved in child labour, with lower rates for some countries. There is an approximately equal prevalence of child labour for both girls and boys in the region with the exception of Mongolia, which has a child labour prevalence that is more than double that of other countries in the region from which data was collected.

What are the limitations of the data?

There is limited systematic information on the types of child labour performed by girls and boys in the region as it often a hidden issue. Furthermore, while qualitative studies and rapid assessments have highlighted the abuse that child labourers are often subject to, there is limited data across the region on the range of exploitative experience of children labourers.

Data definitions, availability and comparability

Child labour is measured in the UNICEF Multiple Indicator Cluster (MICS) under the following classification: a) children 5 to 11 years of age that during the week preceding the survey did at least one hour of economic activity or at least 28 hours of domestic work; and b) children 12 to 14 years of age that during the week preceding the survey did at least 14 hours of economic activity or at least 42 hours of economic activity and domestic work combined.

Child labour data is available for seven out of the 30 countries in the region, all of which have desegregated data by gender. The source of the data is either from the MICS or the Demographic Health Survey (DHS) for the most recent year available for the period 2002-2012.

Figure 37: Child labour data from multiple studies, Cambodia, Viet Nam and Indonesia

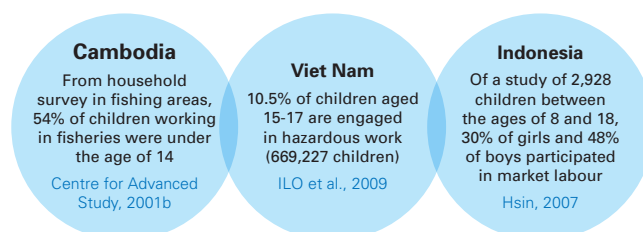
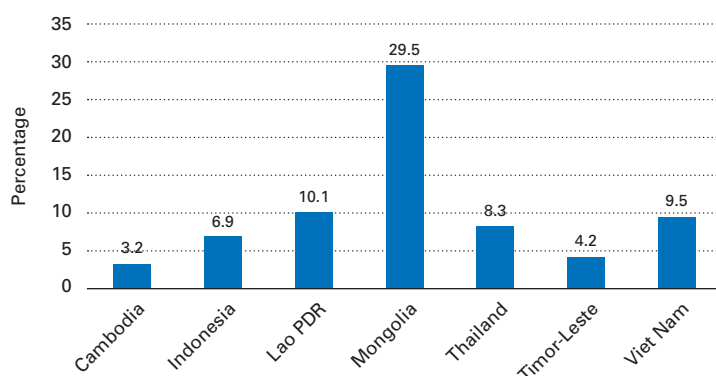
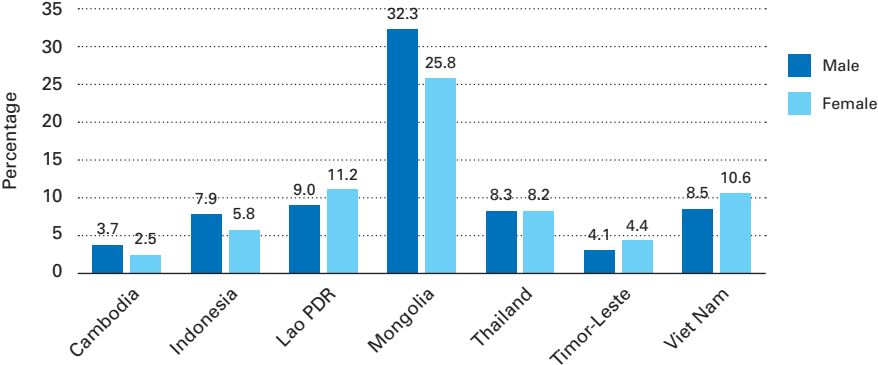


Figure 38: Percentage of children aged 5-14 involved in child labour, by country



Source: UNICEF Multiple Indicator Cluster Survey (MICS) or Demographic Health Survey (DHS) data from most recent year available for the period 2002-2012.

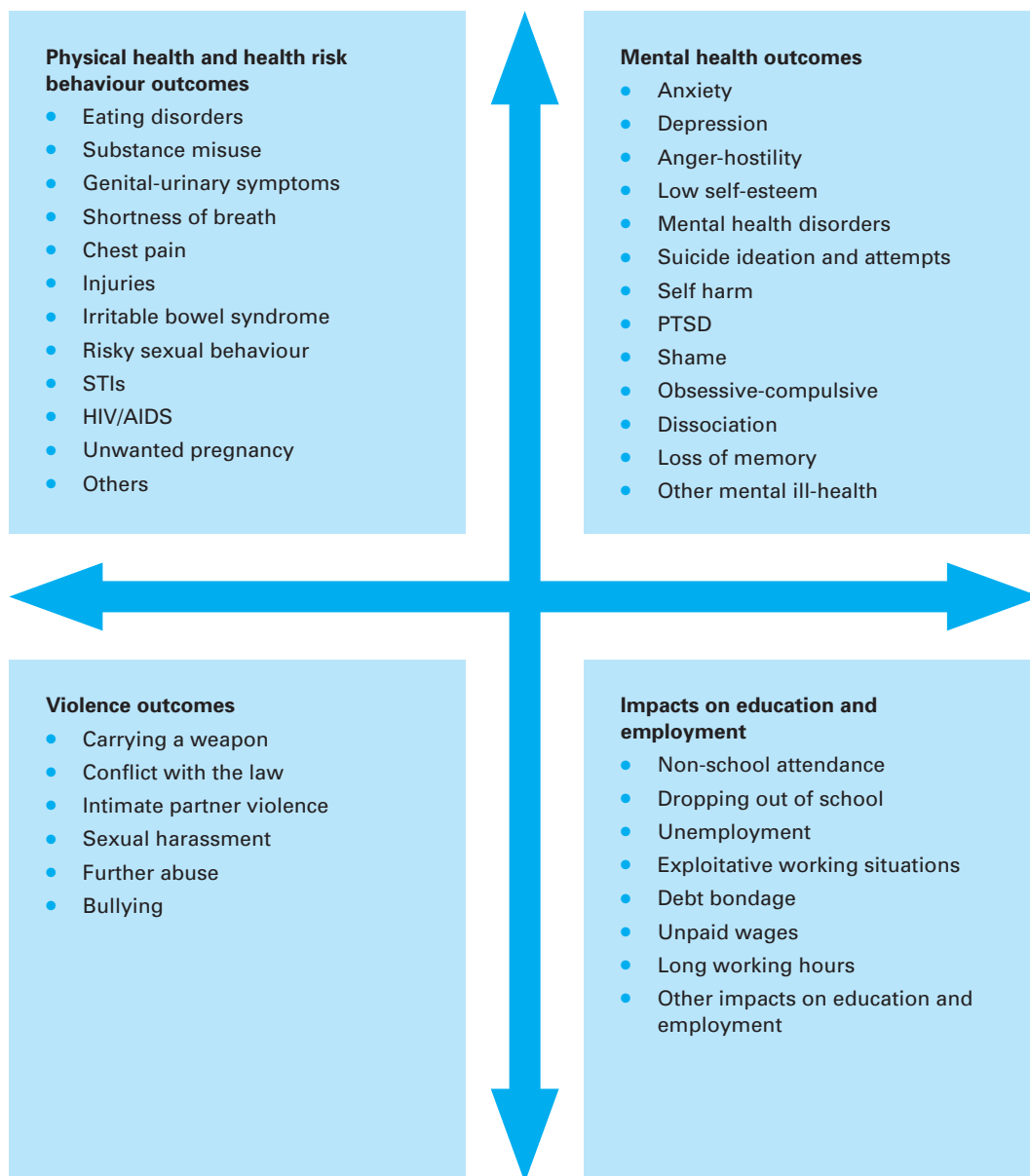
Figure 39: Percentage of children aged 5-14 involved in child labour, by country and gender



Source: UNICEF Multiple Indicator Cluster Survey (MICS) or Demographic Health Survey (DHS) data from most recent year available for the period 2002-2012.

The consequences of child maltreatment

Figure 40: The consequences of child maltreatment in the East Asia and Pacific region based on 178 studies



Studies were included in the review that explored the consequences or outcomes of violence against children. These were divided into four main areas: physical health, mental health, violent outcomes, and impacts on education and employment. This section focuses mainly on the first three areas for which quantitative data is available.

12. Depression and other mental health consequences

Key message

All types of violence against children attribute directly to mental disorders among individuals, with emotional abuse and sexual abuse having a greater impact. Population attributable fractions for mental disorders are similar between males and females with the exception of females who experience sexual abuse.

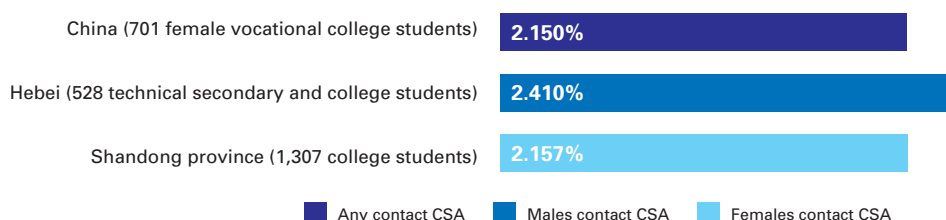
What are the limitations of the data?

One significant issue in estimating the mental health consequences are that child maltreatment studies typically exclude many possibly important confounding factors such as genetic inheritance and predisposition which may explain some portion of the associations between maltreatment and later mental health (and other) outcomes.

Data definitions, availability and comparability

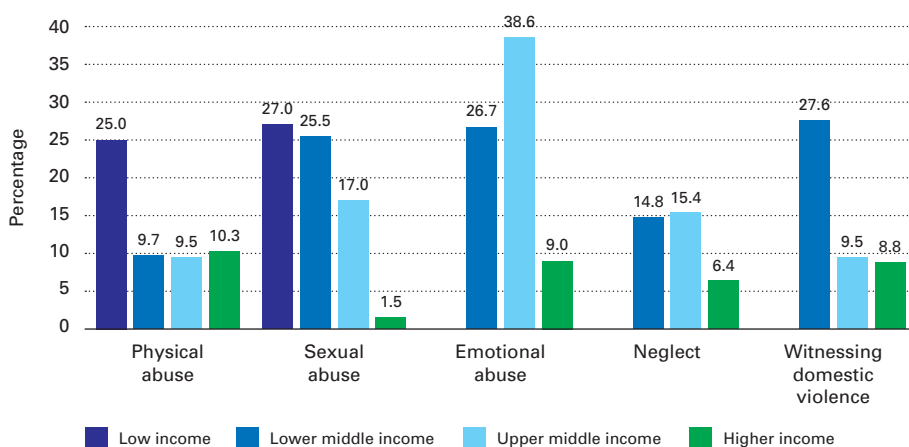
No data on mental health outcomes was available from low-income countries for emotional abuse, neglect or witnessing domestic violence.

Figure 41: The likelihood (odds ratio) for impairment of mental health (measured using the SCL-90 checklist) for students with a history of contact sexual abuse, based on 3 studies, China



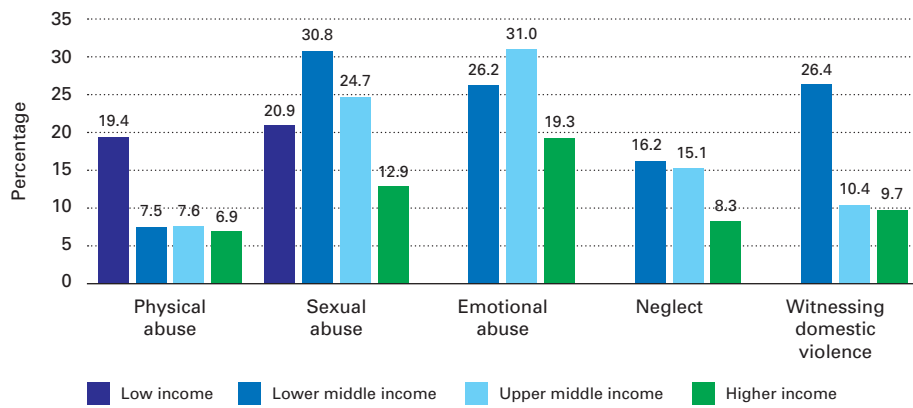
Source: Sun, Zhang, Dong et al., 2008; Ma, Chen, Dunne et al., 2005; Sun, Sun, Duan et al., 2006.

Figure 42: Population attributable fractions for mental disorders attributable to type of child maltreatment for males in the East Asia and Pacific region, by World Bank classification



Source: Fang et al., 2014 based on this review data. Based on the 'median value and uncorrected' method.

Figure 43: Population attributable fractions for mental disorders attributable to type of child maltreatment for females in the East Asia and Pacific region, by World Bank classification



Source: Fang et al., 2014 based on this review data. Based on the 'median value and uncorrected' method.

13. Self-harm, suicide ideation and attempts

Key message

A larger percentage of self-harm, suicide ideation and suicide attempts are attributable to both boys and girls having experienced emotional abuse than to any other type of violence against children. For suicide attempts, neglect is also largely attributable for both boys and girls across the region.

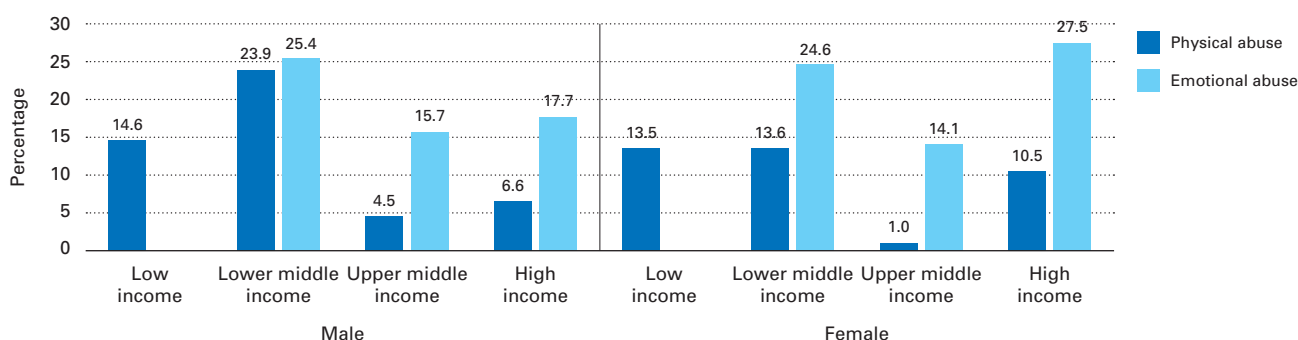
What are the limitations of the data?

Overall, definitions and time-periods for ideation or behaviours differed across studies making groupings difficult.

Data definitions, availability and comparability

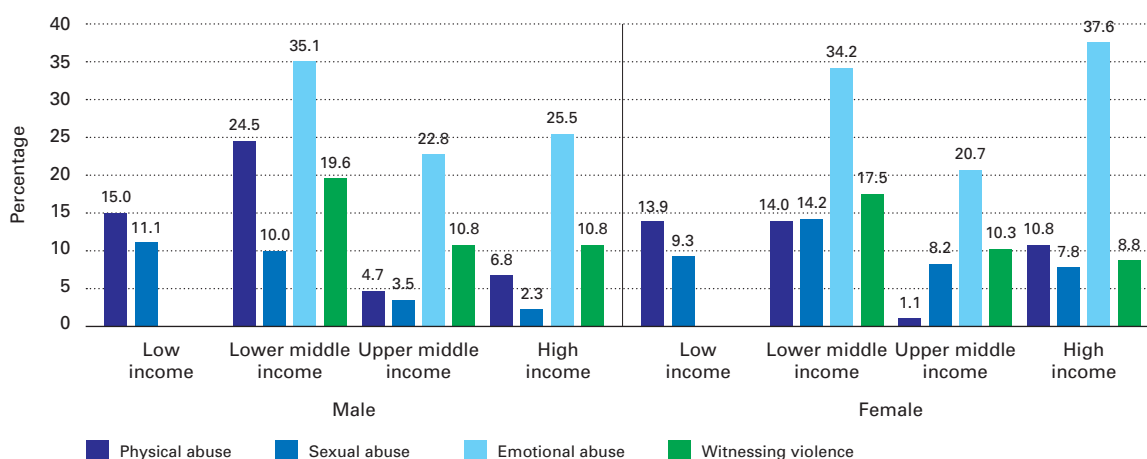
For both self-harm and suicide ideation, there were too few studies available in the region exploring the relationship with neglect to be included. For low income countries, no studies exist which examine the relationship between emotional abuse, witnessing violence or neglect and either self-harm, suicide ideation or suicide attempts.

Figure 44: Population attributable fractions for the percentage of self harm attributable to type of child maltreatment by World Bank classification and gender



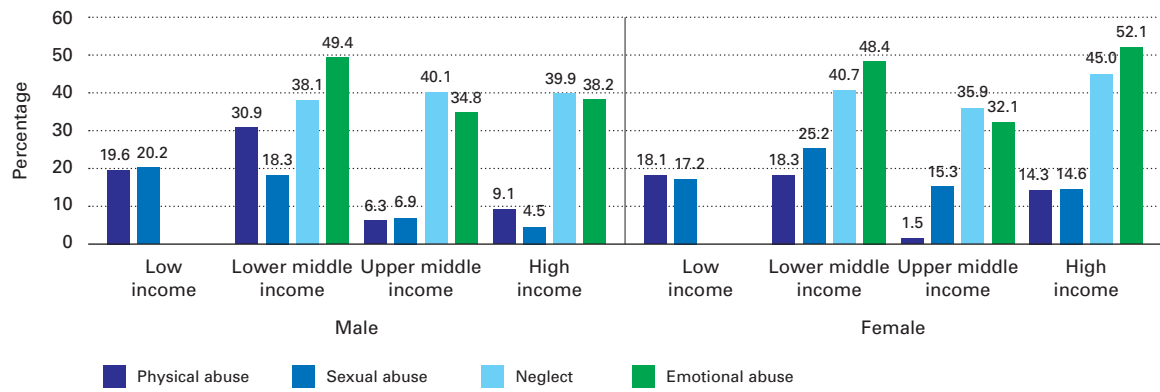
Source: Fang et al., 2014 based on this review data. Based on the 'median value and uncorrected' method.

Figure 45: Population attributable fractions for the percentage of suicide ideation attributable to type of child maltreatment by World Bank classification and gender



Source: Fang et al., 2014. Based on the 'median value and uncorrected' method.

Figure 46: Population attributable fractions for the percentage of suicide attempts attributable to type of child maltreatment by World Bank classification and gender



Source: Fang et al., 2014. Based on the 'median value and uncorrected' method.

14. Substance misuse and early smoking initiation

Key message

Approximately one-third to one-half of early smoking initiation in the region is attributable to experiences of child physical abuse. Whereas problem drinking and illicit drug use are attributable to all types of violence against children.

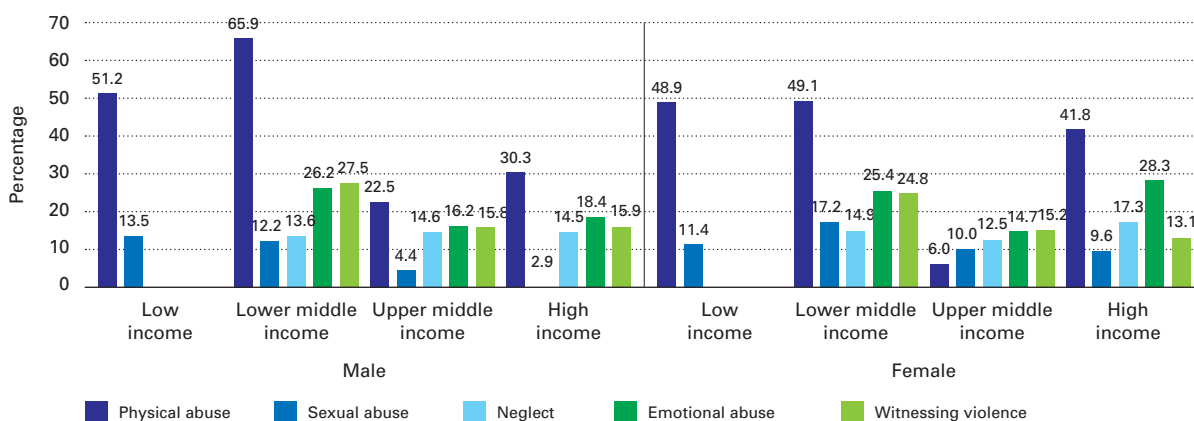
What are the limitations of the data?

Consequences data is based on a limited number of studies and the number of studies within each subregion may also be limited. All data are based on self-reported behaviours, which may mean there is underrepresentation. Also, concepts such as 'problem drinking' are often defined differently across studies.

Data definitions, availability and comparability

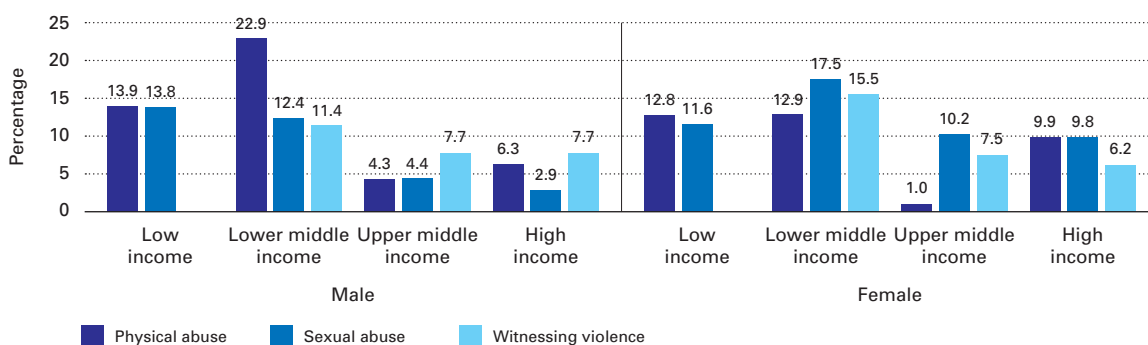
No data comparing substance misuse and early smoking initiation outcomes exist in the region for neglect, emotional abuse or witnessing violence.

Figure 47: Population attributable fractions for the percentage of self harm attributable to type of child maltreatment by World Bank classification and gender



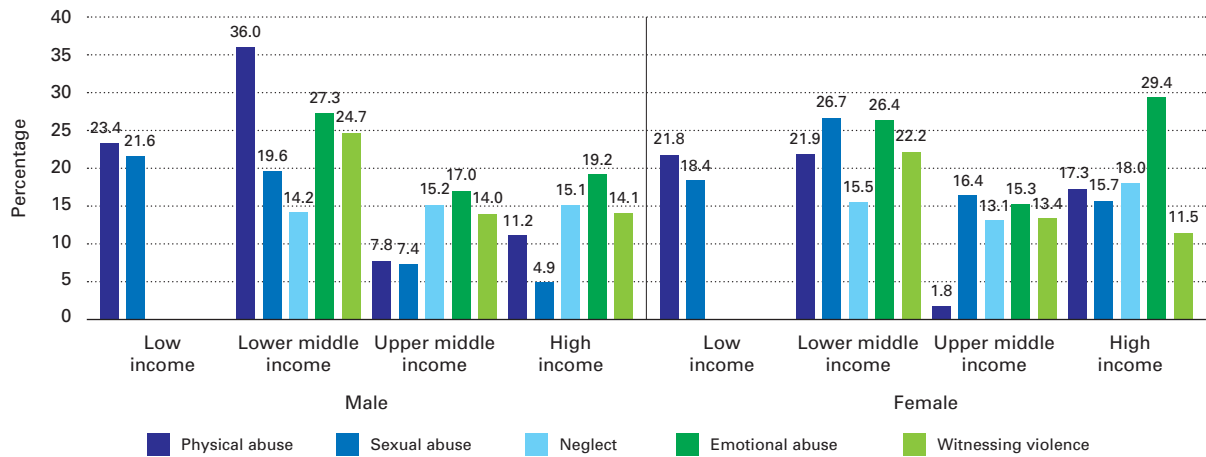
Source: Fang et al., 2014. Based on the 'median value and uncorrected' method.

Figure 48: Population attributable fractions for the percentage of problem drinking attributable to type of child maltreatment by World Bank classification and gender



Source: Fang et al., 2014 Based on the 'median value and uncorrected' method.

Figure 49: Population attributable fractions for the percentage of illicit drug use attributable to type of child maltreatment by World Bank classification and gender



Source: Fang et al., 2014. Based on the 'median value and uncorrected' method.

15. Physical health consequences

Key message

Though fewer studies exist in the region measuring the physical health consequences of violence against children, the few that do show that proportions of specific outcomes such as stomach pain or sexually transmitted infections are attributable to violence against children.

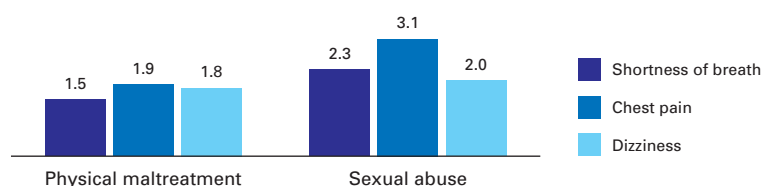
What are the limitations of the data?

Physical health outcomes, like the other outcomes reported, are self-reported and do not include independent validation by a doctor or other source. Most questions related to physical health outcomes include specific language around physical health symptoms but some variation does exist between studies on definitions.

Data definitions, availability and comparability

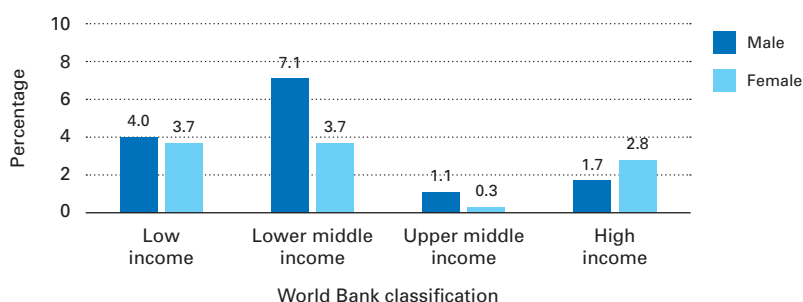
Very few studies in the region exist on physical health outcomes linked to violence against children. Studies that do exist are often not comparable across countries.

Figure 50: Unadjusted odds ratios for negative physical health outcomes for youth with a history of child maltreatment, based on a study of junior high school students (n = 6,628), China



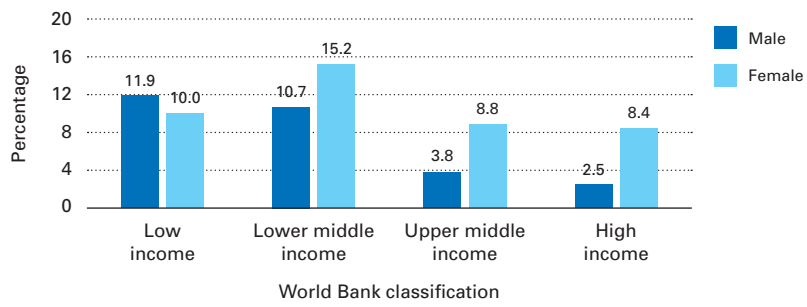
Source: Wong, Leung, Tang et al., 2009.

Figure 51: Population attributable fractions for the percentage of stomach pain attributable to child physical abuse by World Bank classification and gender



Source: Fang et al., 2014. Based on the 'median value and uncorrected' method.

Figure 52: Population attributable fractions for the percentage of sexually transmitted infections (STIs) attributable to sexual abuse by World Bank classification and gender



Source: Fang et al., 2014 based on this review data. Based on the 'median value and uncorrected' method.

16. Intimate partner violence perpetration and Victimization

Key message

Lifetime physical interpersonal violence victimization is attributable in part to experiences of child sexual abuse for both males and females in the region.

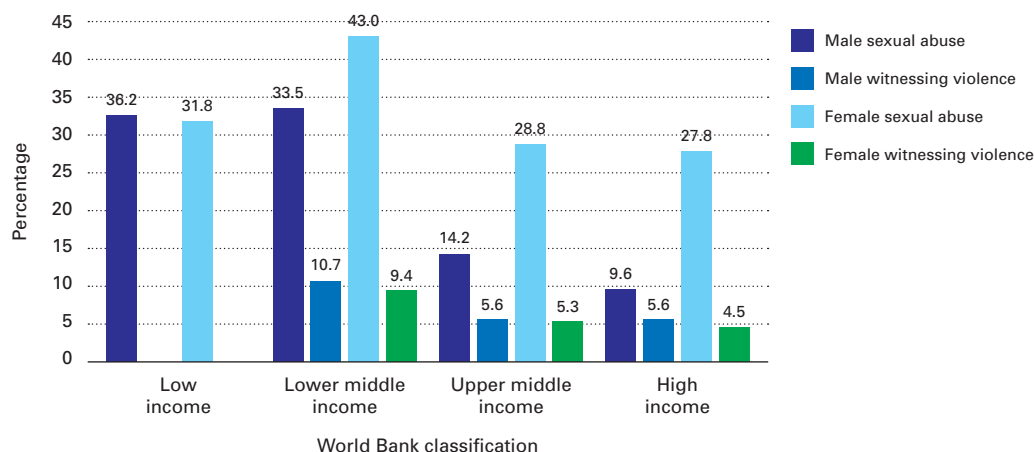
What are the limitations of the data?

Research has shown that accuracy and inaccuracy in reporting prior trauma experiences may be related to current physical or psychological health status (Widom et al., 2004). For example, those currently in a violent relationship may more easily recall early violent experiences (or label them as such) than those who are not currently experiencing violence which may overestimate the prevalence and outcomes relationship. On the other hand, research has consistently shown that even in surveys intimate partner violence is often underreported.

Data definitions, availability and comparability

Increasingly more studies in the region are being conducted that measure intimate partner violence. Many, but not all, of these studies include questions on the respondents' and their partners' experiences of abuse as children.

Figure 53: Percentage of lifetime physical intimate partner violence victimization attributable to child sexual abuse or witnessing domestic violence by World Bank classification and gender



Source: Fang et al., 2014 based on this review data.

Figure 54: Relative risk ratio of current intimate partner violence victimization for women with a history of child maltreatment using the CTS scale, Republic of Korea and China



Source: China: Luo, Parish and Laumann, 2008; Republic of Korea: Kim, Park and Emery, 2009.

Conclusion

This report has shown that violence against children is prevalent in the East Asia and Pacific region and that many negative health and well-being outcomes are directly attributable to this violence.

Urgent action is needed to address violence against children in the East Asia and Pacific region

Children in the East Asia and Pacific region are experiencing violence at alarming rates. Coordinated case management responses that feed into larger child protection systems are nascent to non-existent in many countries in the region. Informal child protection mechanisms do exist but are often not coordinated and cannot reach every child or young person experiencing harm.

This report has highlighted the negative impacts on individuals and by extension families, communities and societies of violence against children. Urgent action is needed to ensure that every child and young person who has experienced violence has access to the best care and responses to help ensure recovery and to hold perpetrators accountable.

Prevention – or ending violence before it ever occurs – should be an equal priority. Prevention efforts target the root causes or drivers of violence. Without changing these drivers, violence against children will continue at the same or possibly higher rates.

Greater attention is needed to improving data collection in the region

Some countries in the region still have little to no data on violence against children. This lack of data hinders policy and programme development for the protection of children. Very few countries in the region have population-based prevalence studies which can provide a national estimate of the magnitude of violence against children. More rigorously designed studies using population-based sampling techniques, standardized and tested instruments and good reporting practices are needed in the region. Several countries in the region are undertaking large-scale Violence Against Children surveys in collaboration with Together for Girls, CDC and UNICEF to get a national picture of the magnitude and scope of the problem. Other countries are undertaking a Research to Policy and Practice Process (R3P) with UNICEF to gather and synthesize existing evidence to prioritize interventions and future research efforts. Concerted action is needed to ensure high quality evidence is available and accessible to policymakers and practitioners nationally and regionally to progress the work to end violence against children in the East Asia and Pacific region.

Further attention needs to be paid to study designs in the region. Meta-analyses highlight that survey design (e.g. using face-to-face interviews vs. self-completed surveys) has an impact on prevalence estimates. There is growing evidence from the region that self-completed surveys result in higher child sexual abuse prevalence estimates and may be more culturally appropriate (Ramiro, Madrid and Brown, 2010; WHO Multicountry Study, 2005). Research is required to explore this further in the region.

Many types of violence against children are understudied in the region. There are several studies that measure child physical and sexual abuse but studies on other types of violence against children are overlooked in the region, including emotional abuse, neglect, witnessing violence and exploitation. The studies that do exist tend to be more qualitatively focused with small sample sizes. More rigorous studies are needed to explore the prevalence and outcomes of these types of violence that are experienced by children in the region.

More studies are needed to understand the impact of violence against children on education and employment. Evidence is beginning to emerge in the region on the impact of violence against children on health and wellbeing. However, quantitative studies exploring the impact of violence against children on education and educational outcomes as well as on adult employment opportunities is largely missing. This research could have significant impact in the region where education and economic growth are particularly valued by policymakers.

More studies are needed to understand violence against boys in the region. The United Nations Multi-country Study on Men and Violence in Asia and the Pacific (Fulu et al., 2013) was a groundbreaking study and provided important evidence highlighting men's experiences of violence as boys across several countries in the region. Findings from the meta-analysis on child sexual abuse also show that boys may be experiencing higher rates of sexual abuse particularly in low-income countries. It is important to build on these studies and to try and disentangle if and why prevalence and outcomes may be different for boys while still addressing the highly prevalent state of violence against girls in the region.

Appendix A: Included studies

This appendix lists all the studies included in the review split out by prevalence and outcomes studies, with some studies overlapping between these areas. More information on quality assessment is also presented.

Table 1: Included prevalence studies

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
1. Cambodia	Ministry of Education, Youth and Sports, UNICEF and UNESCO. (2004). Cambodia national youth risk behaviour survey. Phnom Penh: Kingdom of Cambodia.	Prevalence and Incidence	S/WV	9,388	Medium
2. Cambodia	Center for Advanced Study. (2001). Child work and child labour at the Chub Rubber Plantation in Cambodia. Phnom Penh: Center for Advanced Study. Zweers, J., Tirith, H. Ketya, S., Sidedine, L, Sareth, K., Sophea, M., Rithy, P.	Prevalence and Consequences	Child Labour	4,081	Medium
3. Cambodia	Center for Advanced Study. (2001). Child work and child labour in the fisheries in Sihanoukville, Cambodia. Phnom Penh: Center for Advanced Study. Zweers, J., Sidedine, L., Ketya, S., Tirith, H., Sareth, K., Sophea, M. and Kannitha, H.	Prevalence and Consequences	Child Labour	114	Medium
4. Cambodia	Chab Dai Coalition. (2006). At what price honour? Research into domestic trafficking of Vietnamese (girl) children for sexual exploitation, from urban slums in Phnom Penh, Cambodia. Phnom Penh: Chab Dai.	Prevalence and Consequences	Trafficking	115	Low
5. Cambodia	ILO. (2005). Mekong Challenge. Destination Thailand: A cross-border labour migration survey in Banteay Meanchey Province, Cambodia. Bangkok: International Labour Office.	Prevalence, Incidence and Consequences	Child Labour	239	Low
6. Cambodia	ILO. (2006). Mekong Challenge. Cambodia's 'beer promotion girls': Their recruitment, working conditions and vulnerabilities. Bangkok: International Labour Office.	Prevalence and Consequences	Child Labour	426	Medium
7. Cambodia	ILO. (2006b). Mekong Challenge. Cambodia's hotel and guesthouse workers: Their recruitment, working conditions and vulnerabilities. Bangkok: International Labour Office.	Prevalence	Child Labour	371	Medium
8. Cambodia	Miles, G. and Thomas, N. (2007). 'Don't grind an egg against a stone'—Children's rights and violence in Cambodian history and culture. <i>Child Abuse Review</i> , 16, 383-400.	Prevalence	E/P/S	1,314	Medium
9. Cambodia	National Institute of Statistics, Ministry of Planning in collaboration with ILO-IPEC. (2004). Child domestic worker survey, Phnom Penh-2003. Kingdom of Cambodia.	Prevalence	Child Labour	293	Medium
10. China	Cai X. A study of child abuse among Meng and Han students. <i>Journal of Chifeng University (Natural Science Edition)</i> . 2008;24(5):179-80.	Prevalence	E/P/N	270	Low
11. China	Cao, Y.P., Zhang, Y.L., Sun, S.Q., Guo, G.Y., Li, Y.C., Yuan, D.,...Li, J.G. (2006). An epidemiological study on domestic violence in Hunan, China. Article in Chinese. <i>Chinese Journal of Epidemiology</i> , 27(3), 200-203.	Prevalence	E/P/S/N	610	Medium

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
12. China	Chan, K.L. and Brownridge, D.A. (2008). Personality characteristics of Chinese male batterers: An exploratory study of women's reports from a refuge sample of battered women in Hong Kong. <i>American Journal of Men's Health</i> , 2(3):218-228.	Prevalence	E/P/S/N	201	Low
13. China	Chan KL(2011) Co-Occurrence of Intimate Partner Violence and Child Abuse in Hong Kong Chinese Families. <i>Journal of Interpersonal Violence</i> 26(7):1322-1342.	Prevalence	P/S	2,363	Low
14. China	Chan K.L, Brownridge DA, Tiwari A and Fong D.Y.T. (2011) Childhood Sexual Abuse Associated With Dating Partner Violence and Suicidal Ideation in a Representative Household Sample in Hong Kong. <i>Journal of Interpersonal violence</i> 26(9):1763-1784.	Prevalence and Consequences	S	1,154	Low
15. China	Chan KL(2011) Children exposed to child maltreatment and intimate partner violence: A study of co-occurrence among Hong Kong Chinese families. <i>Child Abuse and Neglect</i> 35:532-542.	Prevalence	P/E/N	1,094	Low
16. China	Chan K.L, Yan E, Brownridge DA and Ip P. (2013). Associating child sexual abuse with child victimization in China. <i>J Pediatr</i> , 162:1028-34.	Prevalence	P/S	18,341	Low
17. China	Chang, X.L. and Wang, H.Y. (2008). Effect of Psychological Abused and Neglect in childhood on Adult Mental Health. <i>China Journal of Heal the Psychology</i> , 16(11):1239-41.	Prevalence	E/N	230	Medium
18. China	Chen, J.Q. (2004). A retrospective survey in child sexual abuse among 565 university students. Article in Chinese. <i>Chinese Journal of Epidemiology</i> , 25(10), 873-7.	Prevalence and Consequences	S	565	Medium
19. China	Chen, J.Q. (2009). Study on dating violence in 697 male university students. Article in Chinese. <i>Chinese Journal of Epidemiology</i> , 30 (10):1013-1016.	Prevalence	P/S	697	Medium
20. China	Chen J, Dunne MP. (2003) The impact of sexual abuse in childhood on females' mental development. <i>Chin J Public Health</i> , 19(9):1142-3.	Prevalence	S	323	Low
21. China	Chen JQ and Liao W. A study of the relationship between CSA and mental conditions among students in Beijing. 2004.	Prevalence	E	430	Medium
22. China	Chen JQ and Liao W. Childhood humiliated experiences and its correlation with the mental health in technical secondary school students. <i>Chin J School Health</i> . 2005; 26(5):355-357.	Prevalence	E	484	Medium
23. China	Chen J, Liao W. Childhood non-contact corporal punishment revealed in the questionnaire survey of technical secondary school students. <i>Chin Ment Health J</i> . 2005; 19(4): 243-246.	Prevalence	P	484	Medium
24. China	Chen J, Wang X, Dunne MP. Childhood sexual abuse: An investigation among 239 male high school students. <i>Chinese Mental Health Journal</i> . 2003;17(5):345-7.	Prevalence	S	239	Low

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
25. China	Chen J, Wu C, Dunne M, Chen B, Liang Y, Cheng Y. A retrospective survey of childhood corporal punishment by school teachers in students. <i>Chin J Pediatr.</i> 2006;44(1):26-30.	Prevalence	P	528	Medium
26. China	Chen J, Ma Y, Cheng Y, Chen B, Liang Y. A survey on the occurrence and influencing factors of childhood sexual abuse among adolescent students. <i>The Chinese Journal of Human Sexuality.</i> 2006;15(8):3-7.	Prevalence	S	528	Low
27. China	Chen J, Han P, Lian G, Dunne MP. Prevalence of childhood sexual abuse among 2508 college students in 6 provinces in China. <i>Chin J Epidemiol.</i> 2010;31(8):866-9.	Prevalence	S	2,508	Low
28. China	Chen J. A retrospective survey in child sexual abuse among 565 university students. <i>Chin J Epidemiol.</i> 2004;25(10):873-7.	Prevalence	S	565	Medium
29. China	Chen J. Childhood physical and emotional maltreatment and its psychological effects in 391 university students in China. <i>Chin J School Doctor Aug.</i> 2005;19(4):341-344.	Prevalence	E/P	291	Medium
30. China	Chen J, Dunne MP, Han P. Child sexual abuse in China: A study of adolescents in four provinces. <i>Child Abuse and Neglect.</i> 2004;28(11):1171-86.	Prevalence and Consequences	S	2,300	Low
31. China	Chen J, Dunne MP, Han P. Child sexual abuse in Henan province, China: associations with sadness, suicidality, and risk behaviors among adolescent girls. <i>Journal of Adolescent Health.</i> 2006;38(5):544-9.	Prevalence and Consequences	S	351	Low
32. China	Chen J, Dunne MP, Wang X. Prevalence of childhood sexual abuse among female students in a senior high school. <i>Chin J School Health.</i> 2002;23(2):108-10.	Prevalence	S	985	Medium
33. China	Chen J, Han P, Dunne MP. Child sexual abuse: A study among 892 female students of a medical school. <i>Chin J Pediatr.</i> 2004;42(1):39-43.	Prevalence	S	892	Medium
34. China	Chen J, Ma Y, and Liang Y. A Retrospective Survey of Childhood Corporal Punishment and Emotional Maltreatment by Their Parents in Students. <i>Chinese Mental Health Journal</i> 2008;22(112):922-927.	Prevalence	E/P	528	Medium
35. China	Cheng, P, Cao F, Chen Q, Liu J, Li Y, Kong Z, Dong F. Prevalence and influencing factors of juvenile victimization. <i>CJCHC</i> 2010;18(6):479-481.	Prevalence	N	3,155	Low
36. China	Chou CY, Su YJ, Wu HM, Chen SH. Child physical abuse and the related PTSD in Taiwan: The role of Chinese cultural background and victims' subjective reactions. <i>Child Abuse and Neglect.</i> 2011: 58-68.	Prevalence	P	1,966	Low
37. China	Cui, L.H., Pang, S.L., Du, W.R., Xue, L., Ren, Q., Wang, W.X., et al. (2010). Prevalence of physical and emotional maltreatment by parents in preschool children. Article in <i>Chinese Journal of Public Health</i> , 26(4):486- 487.	Prevalence	E/P	243	High

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
38. China	Ding G, Chen Q, Wang D. et al. (2007). A survey on the medicos who were abused in their childhood and their dangerous behavior. <i>Med J West China</i> , 19(3):423-425.	Prevalence	E/P	485	Medium
39. China	Dong F, Cao F, Guo Y, Kong Z, Li Y, Cheng P, Liu J, Chen Q. (2010). Prevalence and relationship between psychological abuse and neglect and internet addiction in junior middle school students. <i>CJCHC</i> , 18(10):761-763.	Prevalence	E/N	1,193	Low
40. China	Duan, Y.P., Li, C.S., Sun, Y.P., Sun, D.F. (2006). Single Factor Analysis of Family Environment and Childhood Sexual Abuse. Article in Chinese. <i>Chinese Journal of School Health</i> , 27(2):131-132.	Prevalence	S	979	Medium
41. China	Fuh JL, Wang SJ, Juang KD, Lu SR, Liao YC, Chen SP. (2010). Relationship between childhood physical maltreatment and migraine in adolescents. <i>Headache</i> , 50: 761-768.	Prevalence	P	4,259	Medium
42. China	Gao Y, Ying L. (2011). Impact of childhood abuse experience on mental health of middle school students. <i>Disease Surveillance</i> , 26(4).	Prevalence	E/P/N	301	Medium
43. China	Gao Y, Pan J, Yang W, Teng H, Ying Y. Cross sectional study on child neglect among rural children aged 9-11 years in Shanxi Province. <i>J Med Theor and Prac</i> . 2013;26(20):2680-5.	Prevalence	N	685	Low
44. China	Gu L, Chi S, Zhang Z. A study of child sexual abuse among college students. <i>Chin J School Health</i> . 2005;26(4):309-10.	Prevalence	S	1,635	Medium
45. China	Guo, S.F., Wu, J.L., Qu, C.Y. and Yan, R.Y. (2004). Domestic abuse on women in China before, during, and after pregnancy. <i>Chinese Medical Journal</i> , 117(3), 331-336.	Prevalence	E/P/S	12,044	Low
46. China	Hazemba, A., Siziya, S., Muula, A.S. and E. Rudatsikira. (2008). Prevalence and correlates of being bullied among in-school adolescents in Beijing: Results from the 2003 Beijing Global School-Based Health Survey. <i>Annals of General Psychiatry</i> , 7(6), 1-6.	Prevalence	E/P	2,348	Low
47. China	Hester M, He J, Tian L. Girls' and boys' experiences and perceptions of parental discipline and punishment while growing up in China and England. <i>Child Abuse Review</i> . 2009;18(6):401-13.	Prevalence	P	498	Medium
48. China	Hou Y, Zhao J, Yang X. Relationship among Parents' Emotional Abuse of College Students and Their Security, Anxiety and Purpose of Life. <i>China Journal of Health Psychology</i> 2010;18(10):1262-1264.	Prevalence	E	757	Medium
48. China	Hou Y, Zhao J, Yang X. Relationship among Parents' Emotional Abuse of College Students and Their Security, Anxiety and Purpose of Life. <i>China Journal of Health Psychology</i> 2010;18(10):1262-1264.	Prevalence	E	757	Medium
49. China	Hu D, Jin L, Wang L. A study of violence against children and policy implications. <i>Zhejiang Academic Journal</i> . 2006;6:149-56.	Prevalence	E/P	336	Medium

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
50. China	Hua, J., Wu, Y., Gu, G.X., Chen, J. and Zhu, L.L. (2006). An investigation in 370 cases of child neglect. <i>Chinese Journal of Clinical Rehabilitation</i> , 10(18):172-175.	Prevalence	N	370	High
51. China	Huang G, Zhang Y, Zou S, Shen J, Xiang H, Zhao L. Plasma Neuropeptide-Y and Cognitive function in female intimates with childhood sexual abuse. <i>Chin J Psychiatry</i> . 2006;39(1):12-5.	Prevalence	E/P/N/S	335	Medium
52. China	Leung, P.W.S., Wong, W.C.W., Chen, W.Q. and Tang, C.S.K. (2008). Prevalence and determinants of child maltreatment among high school students in Southern China: A large school based survey. <i>Child and Adolescent Psychiatry and Mental Health</i> , 2(27), 1-8.	Prevalence	E/P/S/N	6, 592	Low
53. China	Li XB, Wang ZM, Hou YZ, Wang Y, liu JT, Wang CY. Effects of childhood trauma on personality in a sample of Chinese adolescents. <i>Child Abuse and Neglect</i> . 2013.(ahead of print)	Prevalence	E/P	485	Low
54. China	Li Q. A research on undergraduate survivors of childhood sexual abuse. <i>Chinese Journal of Special Education</i> . 2008;4:89-93.	Prevalence	S	697	Low
55. China	Li N, Saifuddin A, Zabin LS. Association between childhood sexual abuse and adverse psychological outcomes among youth in Taipei. <i>Journal of Adolescent Health</i> 2012; 50: S45–S51.	Prevalence and Consequences	S	4,084	Low
56. China	Lin R, Liu W, Zhang W, Liu W, Lin L, Wu J. Situation and influencing factors of abuse among children in Guangzhou. <i>CJCHC</i> 2011;19:(1):21-23.	Prevalence	E/P/S	7,475	Low
57. China	Lin D, Li X, Fan X, Fang X. Child sexual abuse and its relationship with health risk behaviors among rural children and adolescents in Hunan, China. <i>Child Abuse and Neglect</i> . 2011: 35:680-687.	Prevalence	S	683	Low
58. China	Liu, C.X., Jiang, Q.J., Luo, X.B., Chen, G.X, Zhang, D.N., Xiang, G.Y., et al. (2010). Analysis on the Influencing Factors of Child Neglect Among Preschool Children of Urban Wuhan. Article in Chinese. <i>Chinese Journal of School Health</i> , 31(3):307-308.	Prevalence	N	1,154	Medium
59. China	Lu, X, Zhou M, Liang F, Ma X, Zhong Q. (2012). An investigation on child physical and emotional abuse of Zhuang and Han nationalities in western Guangxi. <i>Journal of Youjiang Medical University for Nationalities</i> , 34(4):453-4.	Prevalence	E/P	796	Medium
60. China	Luo Y, Parish WL, Laumann EO. (2008). A population-based study of childhood sexual contact in China: Prevalence and long-term consequences. <i>Child Abuse and Neglect</i> , 32(7):721-31.	Prevalence	S	2,994	Low
61. China	Luo, J., Peng, X., Rong, Z., Yao, K., Hu, R., Du, Q., ... Zhu, M. (2008). The status of care and nutrition of 774 left-behind children in rural areas in China. <i>Public Health Reports</i> , 123, 382-389.	Prevalence and Consequences	N	1,548	Low

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
62. China	Ma YX, Chen JQ. Childhood non-contact corporal punishment and its association with the health related risk behaviors in female students. <i>Chinese General Practice</i> 2007;9:725-27.	Prevalence and Consequences	P	709	Medium
63. China	Ma Y, Chen J, Dunne MP, Liang Y, Cheng Y, Wu C, et al. The impacts of childhood experience of beaten by bare hand on adolescents' mental health. <i>Chin J School Doctor</i> . 2005;26(12):1001-3.	Prevalence and Consequences	P	528	Medium
64. China	Ma Y, Chen J, Xiao W, Wang F, Zhang M. (2011) Parents' self-reporting of child physical maltreatment in Yuncheng City, China. <i>Child Abuse and Neglect</i> 35:592-600.	Prevalence	P	1,394	Low
65. China	Ma JF, Dai JH, Guan SZ et al. Retrospective study on the adverse childhood experience among medical student. <i>Chin J sch Health</i> . 2012;33(12):1454-1456.	Prevalence	E/P/N	475	Low
66. China	Ng, J.W.Y and Tsang, S.K.M. (2008). School bullying and mental health of junior secondary school students in Hong Kong. <i>Journal of School Violence</i> , 7(2), 3-20.	Prevalence and Consequences	E/P	364	Medium
67. China	Niu H, Lou C, Gao E, Zuo X, Shah I. Analysis of childhood sexual abuse among 1099 university students in Shanghai. <i>Journal of Reproduction and Contraception</i> . 2010;21(1):53-61.	Prevalence	S	1,099	Medium
68. China	Qin, L.Z., Sun, Y.Y., Xia, W., Chen, S.F. and Zhang, H.Y. (2008), Risk factors for emotional abuse in 844 adolescents. <i>Chinese Journal of Contemporary Pediatrics</i> , 10(2), 228-230.	Prevalence and Consequences	E	865	Medium
69. China	Qiu C and Ma Y. Sexual Behavior and Influence Factors Among 693 Female Technical Secondary School Students. <i>Chin J SchHealth</i> , 2010;31(4):417-8.	Prevalence	P/S	709	Medium
70. China	Pang, J.P., Yang, Z.N., Ren, X.H., Wang, G.X., Wang, H.S., Xi, W.P.,...Li, H.Q. (2005). Study on the current situation and influential factors of child neglect among aged 3-6 year-olds in the urban areas of China. Article in Chinese. <i>Chinese Journal of Epidemiology</i> , 26(4), 258-62.	Prevalence	N	1,163	Low
71. China	Samuda GM. Child discipline and abuse in Hong Kong. <i>Child Abuse and Neglect</i> . 1988; 12:283-287.	Prevalence	P	100	Medium
72. China	Shen AC. (2009). Long-term effects of interparental violence and child physical maltreatment experiences on PTSD and behavior problems: A national survey of Taiwanese college students. <i>Child Abuse and Neglect</i> , 33:148-160.	Prevalence	P	1,924	Low
73. China	Shen, A.C.T. (2008). Self-esteem of young adults experiencing interparental violence and child physical maltreatment: Parental and peer relationships as mediators. <i>Journal of Interpersonal Violence</i> , 24(5), 770-794.	Prevalence and Consequence	P	1,924	Low

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
74. China	Tang CS. (2002). Childhood experience of sexual abuse among Hong Kong Chinese college students. <i>Child Abuse and Neglect</i> , 26: 23-37.	Prevalence	S	2,147	Medium
75. China	Song, Y., Ji, C.Y. and Agardh, A. (2014). Sexual coercion and health-risk behaviors among urban Chinese high school students. <i>Global Health Action</i> , 7:24418.	Prevalence and Consequences	S	5,215	Low
76. China	Straus MA, Savage SA. (2005). Neglectful behavior by parents in the life history of university students in 17 countries and its relation to violence against dating partners. <i>Child Maltreatment</i> , 10:124-135.	Prevalence	N	7,875	Medium
77. China	Su, P.Y., Tao, F.B. and Cao, X.J. (2008). Study on the relationship between sexual abuse in childhood and psychiatric disorder, risky behaviors in youthhood among 1386 medicos. Article in Chinese. <i>Chinese Journal of Epidemiology</i> , 29(1), 94-5.	Prevalence and Consequences	S	1,428	Medium
78. China	Sun Y, Duan Y, Sun D, Yi M, Wang J, Gao F, et al. (2004). A study of child sexual abuse among 606 adult males. <i>Chinese Journal of Behavioral Medical Science</i> , 13(6):684.	Prevalence	S	606	Low
79. China	Sun Y, Duan Y, Sun D, Yi M, Gao F, Wang J. (2005). Study on the risk factors and characteristics on childhood sexual abuse among female students in a college. <i>Chin J Epidemiol</i> , 26(12):947-50.	Prevalence	S	701	Low
80. China	Tao FB, Huang K, Kim S, et al. (2006). Correlation between psychopathological symptoms, coping style in adolescent and childhood repeated physical, emotional maltreatment. <i>Chin J Pediatr</i> , 9:688-93.	Prevalence and Consequences	E/P	5,141	Medium
81. China	Tang, C.S.K. (2006). Corporal punishment and physical maltreatment against children: A community study on Chinese parents in Hong Kong. <i>Child Abuse and Neglect</i> , 30, 893-907.	Prevalence	P	1,662	Low
82. China	Wang YH, Chen JQ. (2012). Analysis on childhood abuse experience and the influencing factors among 1,762 college students. <i>Modern Preventive Medicine</i> , 39 (18):4654-4656.	Prevalence	E/P	1,762	Medium
83. China	Wang, F.Y., Chen, J.Q., Ma, Y.X. (2007). The Prevalence of Physical Maltreatment by Parents in 810 Kindergarten Children. Article in Chinese. <i>Chinese Journal of School Health</i> , 28(11):987-990.	Prevalence	P	810	Medium
84. China	Wong, W.C.W., Chen, W.Q., Goggins, W.B., Tang, C.S. and Leung, P.W. (2009). Individual, familial and community determinants of child physical abuse among high school students in China. <i>Social Science and Medicine</i> , 68, 1819-1825.	Prevalence and Consequence	P	6,628	Low

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
85. China	Wong, W.C.W., Leung, P.W.S., Tang, C.S.K., Chen, W.-Q., Lee, A. and Ling, D.C. (2009). To unfold a hidden epidemic: Prevalence of child maltreatment and its health implications among high school students in Guangzhou, China. <i>Child Abuse and Neglect</i> , 33, 441-450.	Prevalence and Consequence	P	6,628	Low
86. China	Wong, D.S.W., Lok, D.P.P., Lo, T.W. and Ma, S.K. (2008). School bullying among Hong Kong Chinese primary schoolchildren. <i>Youth and Society</i> , 40(1), 35-54.	Prevalence	P/E	7,025	Medium
87. China	Xia L, Ma W, Nie S et al. (2009). Association between forced sexual intercourse and adverse health behaviors among senior school and college students in Guangdong Province. <i>South China J Prev Med</i> , 35(15):4-8.	Prevalence	S	15,173	Low
88. China	Xiao YN, Tao FB, Xu SJ, et al. (2008). Self-injurious behaviors in adolescents with repeated childhood abuse. <i>Chin J Public Health</i> , 9:1028-30.	Prevalence and Consequences	P	10,894	Medium
89. China	Xiao Q, Dong MX, Yao J, Li WX, Ye DQ. (2008). Parental alcoholism, adverse childhood experiences, and later risk of personal alcohol abuse among Chinese medical students. <i>Biomedical Env Sci.</i> , 21:411-419.	Prevalence	E/P/N	2,073	Low
90. China	Xie Z, Tang, Q, Chang X, Deng Y. (2008). 457 college students' experience of psychological abuse and neglect. <i>Chinese Journal of Clinical Psychology</i> , 16(1):63-5.	Prevalence	E/N	457	Low
91. China	Yan Q, Jiao W, Lin J, Jiao F. (2009). Effect of childhood physical and emotional abuse on psychological health in undergraduate students. <i>Chin J Contemp Pediatr.</i> , 11(8):675-8.	Prevalence	E/P	1,200	Low
92. China	Yang S, Zhang Y, Huang G et al. (2004). A Preliminary Study on Child Abuse. <i>Chinese Journal of Clinical Psychology</i> , 12(2):140-141	Prevalence	E/P/N	282	Medium
93. China	Yang W. (2012). The Psychological Abuse and Neglect of Children and Their Loneliness: the Mediating Effect of Self Awareness. <i>Chinese Journal of Special Education</i> , 150:64-9.	Prevalence	E/N	324	Low
94. China	Ye Q, Tao FB, Fang DS, Huang K, Sun Y. (2006). Impact of childhood abuses on the psychology and behaviors regarding harmful dietary pattern in adolescents. <i>Chin J of Epi.</i> , 27(4):319-323.	Prevalence	P/S	5,141	Medium
95. China	Yen CF, Yang MS, Yang MJ, Su YC, Wang MH, Lan CM. (2008). Childhood physical and sexual abuse: Prevalence and correlates among adolescents living in rural Taiwan. <i>Child Abuse and Neglect</i> , 32:429-438.	Prevalence	P/S	1,684	Low
96. China	Yong N, Wang H, Hu H, Meng HQ, Chen PH et al. (2011). Relationship among child-abuse, depressive symptoms and sleep quality in grade 4-6 primary students. <i>Chin Ment Health J</i> , 25(8):616-621.	Prevalence	E/P	1,417	Low

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
97. China	Zeng Q, Wu Z, Zhu Z et al. (2010). Childhood Experience and Romantic Relationship of University Students. <i>Chin J Sch Health</i> , 31(11):1352-5.	Prevalence	E/P/N	667	Low
98. China	Zhang H, Pan J, Cao C, Luo S, Zhang S. (2010). Analysis of state of high school students neglect for aged 12-17 years in urban China. <i>Chin J Women Child Health</i> , 1(2):76-80.	Prevalence	N	3,539	Low
99. China	Zhang, Z.H., Hao, J.H., Yang, L.S., Zhang, X.J., Sun, Y.H., Hu, C.L., ...Tao, F.B. (2009). The relationship between emotional, physical abuse and Internet addiction disorder among middle school students. Article in Chinese. <i>Journal of Epidemiology</i> , 30(2), 115-8.	Prevalence	E/P	3,798	Medium
100. China	Zhang, D.M., Zheng, H.Y., Zou, Y.H. (2006). Cross-sectional Study on the Influential Factors of Neglect Among Children Aged 3-6 in Guangzhou City. <i>Chinese Journal of School Health</i> , 27(11):947-948.	Prevalence	N	1,013	Medium
101. China	Zhang TH, Chow A, Wang LL, Yu JH, Dai YF, Lu X, Good MJD, Good BJ, Xiao ZP. (2013) Childhood maltreatment profile in a clinical population in China: A further analysis with existing data of an epidemiologic survey. <i>Comprehensive Psychiatry</i> 54:856-864.	Prevalence	E/P/S/N	2,090	Low
102. China	Zhao D, Li L. (2006). A survey on childhood abuse experience among 485 college students. <i>Chin J Dis Control Prev</i> , 10(2):154-7.	Prevalence	E/P/S	485	Medium
103. China	Zhao, Y.Y., Tao, F.B., Su, P.Y., et al. (2008). Childhood abuse and adolescents' life satisfaction. Article in Chinese. <i>Chinese Journal of School Health</i> , 29(4), 302-305.	Prevalence	E/P	2,061	Medium
104. China	Zhao X, Zhang Y and Li L. (2004). Childhood Abuse: An Investigation of 435 Middle School Students. <i>Chinese Journal of Clinical Psychology</i> , 12(4):3737-9.	Prevalence	E/P/N	435	Low
105. China	Zhao, Q., Zhao, J., Li, X., Zhao, G., Fang, X., Lin, X., ...Stanton, B. (2010). Childhood sexual abuse and its relationship with psychosocial outcomes among children affected by HIV in rural China. <i>Journal of the Association of Nurses in AIDS Care</i> (epub ahead of print), 1-13.	Prevalence and Consequences	S	1,019	Low
106. China	Zhong Y , Lu X, Zhou M, Ma X. (2012). Medical nursing student abused in childhood cases analyzed retrospective survey. <i>Journal of Youjiang Medical University for Nationalities</i> , 34(3):358-9.	Prevalence	E/P	456	Medium
107. China	Zhou S, Liu Q, Zhu H, Guo Z, Shen J. (2010). Childhood psychological abuse and neglect: An investigation of 397 senior high school students. <i>Guide of China Med</i> , 8(25):16-18.	Prevalence	E/N	397	Low

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
108. China	Zhu M, Xu X, Su S, Lin D. (2010). Moderating effects of social support on the associations between depression and psychological abuse and neglect of Chinese junior high school students. <i>PPSCS</i> , 121-126.	Prevalence	E/N	659	Low
109. China	Zhu X, Wang C, Zhou Q, Qiao J, Geng D, Li J. Characteristics of big five personality in college students and its relationship with childhood abuse. <i>China Journal of Health Psychology</i> . 2012;7:1083-6.	Prevalence	E/P/N	2,374	Low
110. Indonesia	Hsin, A. (2007). Children's time use: Labor divisions and schooling in Indonesia. <i>Journal of Marriage and Family</i> , 69(5), 1297-1306.	Prevalence	Child Labour	2,928	Low
111. Indonesia	Kakak Foundation and Terres des Homes. (2008). Situation of Child Prostitution in Surakarta: Analysis of the Elimination of Commercial Sexual Exploitation.	Prevalence and Consequences	S	272	High
112. Indonesia	National Coalition for the Elimination of Commercial Sexual Exploitation of Children, Ministry of Women's Empowerment and UNICEF, 2009.	Prevalence and Consequences	S	272	Medium
113. Indonesia	UNICEF (2013) MICS Indonesia: Selected Districts of West Papua Province.	Prevalence	Exploitation (child marriage)	3,000	Low
114. Indonesia	UNICEF (2013) MICS Indonesia: Selected Districts of Papua Province.	Prevalence	Exploitation (child marriage)	3,000	Low
115. Indonesia	Sumargi A, Sofronoff K, Morawska A (2013) Understanding Parenting Practices and Parents' Views of Parenting Programs: A Survey Among Indonesian Parents Residing in Indonesia and Australia. <i>Journal of Child Family Studies</i> . DOI 10.1007/s10826-013-9821-3.	Prevalence	E	165	Medium
116. Japan	Dussich, J.P.J. and Maekoya, C. (2007). Physical child harm and bullying-related behaviors: A comparative study in Japan, South Africa, and the United States. <i>International Journal of Offender Therapy and Comparative Criminology</i> , 51(5), 495-509.	Prevalence and Consequences	P/E	812	High
117. Japan	Fujiwara, T., Kawakami, N. and World Mental Health Japan Survey Group. (2010). Association of childhood adversities with the first onset of mental disorders in Japan: Results from the World Mental Health Japan, 2002-2004. <i>Journal of Psychiatric Research</i> (epub ahead of print), 1-7.	Prevalence and Consequences	E/P/N/S	1,722	Low
118. Japan	Handa, M., Nukina, H., Hosoi, M. and Kubo, C. (2008). Childhood physical abuse in outpatients with psychosomatic symptoms. <i>BioPsychoSocial Medicine</i> , 2(8), 1-6.	Prevalence	P	564	Medium

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
119. Japan	Kitamura, T., Kaibori, Y., Takara, N., Oga, H., Yamauchi, K. and Fujihara, S. (2000). Child abuse, other early experiences and depression: I. Edpidemiology of parental loss, child abuse, perceived rearing experiences and early life events among a Japanese community population. Archives of Women's Mental Health, 3, 47-52.	Prevalence and Consequences	E/P/N/S	220	Medium
120. Japan	Matsumoto, T. and Imamura, F. (2007). Association between childhood attention-deficit-hyperactivity symptoms and adulthood dissociation in male inmates: Preliminary report. Psychiatry and Clinical Neurosciences, 61, 444-446.	Prevalence and Consequences	E	799	Medium
121. Japan	Miura, H., Fujiki, M., Shibata, A. and Ishikawa, K. (2006). Prevalence and profile of methamphetamine users in adolescents at a juvenile classification home. Psychiatry and Clinical Neuroscience, 60, 352-357.	Prevalence and Consequences	E/P/N/S	1362	Medium
122. Japan	Nagata, T., Kaye, W.H., Kiriike, N., Rao, R., McConaha, C. and Plotnicov, K.H. (2001). Physical and sexual abuse histories in patients with eating disorders: A comparison of Japanese and American patients. Psychiatry and Clinical Neuroscience, 55, 333-340.	Prevalence and Consequences	E/P/N/S	259	Medium
123. Japan	Yasumi, K. and Kageyama, J. (2009). Filicide and fatal abuse in Japan, 1994-2005: Temporal trends and regional distribution. Journal of Forensic and Legal Medicine, 16, 70-75.	Prevalence	P	933	N/A
124. Japan	Yoshihama, M. and Horrocks, J. (2010). Risk of intimate partner violence: Role of childhood sexual abuse and sexual initiation in women in Japan. Children and Youth Services Review, 32, 28-37.	Prevalence and Consequences	S	1,371	Low
125. Japan	Yoshinaga, C., Kadomoto, I., Otani, T., Sasaki, T. and Kato, N. (2004). Prevalence of post-traumatic stress disorder in incarcerated juvenile delinquents in Japan. Psychiatry and Clinical Neurosciences, 58, 383-388.	Prevalence	E	251	Low
126. Japan	Nambu S, Nasu A, Nishimura S, Nishimura A and Fujiwara S (2011) Fatal child abuse in Japan: Does a trend exist toward tougher sentencing? Journal of Injury and Violence 3(2):74-79.	Prevalence	P	24	High
127. Japan	Matsuura N, Hashimotob T and Toichic M. (2013) Associations among adverse childhood experiences, aggression, depression, and self-esteem in serious female juvenile offenders in Japan. The Journal of Forensic Psychiatry and Psychology 24(1): 111-127.	Prevalence and Consequences	E/P/S/N	90	Low
128. Japan	Tsuboi S, Yoshida H, Ae Ryusuke, Kojo T, Nakamura Y, Kitamura K (2013) Prevalence and Demographic Distribution of Adult Survivors of Child Abuse in Japan. Asia-Pacific Journal of Public Health. Published online before print May 16, 2013, doi:10.1177/1010539513488626.	Prevalence	E/P/S/N	2,693	Low
129. Lao PDR	Phetsiriseng, I. (2003). Preliminary assessment on trafficking of children and women for labour exploitation in Lao PDR. ILO-IPEC Lao PDR.	Prevalence and Consequences	Trafficking of women and children	1,614 /21	Low

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
130. Lao PDR	Akmatov MK (2011) Child abuse in 28 developing and transitional countries—results from the Multiple Indicator Cluster Surveys. <i>International Journal of Epidemiology</i> 40:219-227.	Prevalence	E/P	4,898	Low
131. Lao PDR	UNICEF (2012) Positive Child Discipline. UNICEF/LAOS.	Prevalence	P	984	High
132. Malaysia	Runyan, D.K., Dunne, M.P., Zolotor, A.J., Madrid, B., Jain, D., Gerbaka, B., ...Youssef, R.M. (2009). Child Abuse and Neglect, 33, 826-832.	Prevalence	P	120	Medium
133. Malaysia	Fauziah SI (2010) Epidemiologic Features of Child Abuse in Sabah Women and Children's Hospital From January 2010 to June 2010. Poster presentation ABSTRACT IN MJPC 16(2).	Prevalence	E/P/S/N	77	Medium
134. Malaysia	Choo WY, Dunne MP, Marret MJ, Fleming ML and Wong YL. (2011). Victimization Experiences of Adolescents in Malaysia. <i>Journal of Adolescent Health</i> . 49:627-634.	Prevalence	E/P/S/N	1,870	Low
135. Malaysia	Kumaraswamy N. and Othman A (2011) Corporal Punishment Study: A Case in Malaysia. <i>Psychology</i> 2(10): 24-28.	Prevalence	P (corporal punishment)	196	Medium
136. Mongolia	Gender Equality Center and ILO-IPEC. (2005). Study on children and youth working in the service sector, risks of engaging into sexual exploitation and estimation of girls and women engaged in prostitution outside of the service sector in selected urban centres and border towns.	Prevalence and Consequences	S	91	Medium
137. Mongolia	MECS, UNICEF, MSUE and NHRCM. (2007). Violence at school and kindergarten environment and the ways to eliminate it. Mongolia: UNICEF.	Prevalence and Consequences	P/E	811	High
138. Mongolia	Oyunbileg, S., Sumberzul, N., Udval, N., Wang, J.D. and Janes, C.R. Prevalence and risk factors of domestic violence among Mongolian women. <i>Journal of Women's Health</i> , 18(11), 1873-1880.	Prevalence	P	4,967	Low
139. Mongolia	Lansford JE, Deater-Deckard K (2012) Childrearing Discipline and Violence in Developing Countries. <i>Child Development</i> 83(1): 62-75.	Prevalence	E/P	1,280	Low
140. Myanmar	Kachin Women's Association Thailand (KWAT). (2008). Eastward bound: An update on migration and trafficking of Kachin women on the China-Burma border. Chiang Mai: Thailand.	Prevalence	Trafficking of Kachin women on the China-Burma border	63	Medium
141. Myanmar	Human Rights Watch. (2007). Sold to be soldiers: The recruitment and use of child soldiers in Burma. Human Rights Watch, 19(15).	Prevalence	Child Soldiers	c.62	Medium
142. Myanmar	The Women's League of Burma (WLB). (2004). System of impunity: Nationwide patterns of sexual violence by the military regime's army and authorities in Burma. Chiang Mai: Thailand.	Prevalence and Consequences	S/P	26	Medium
143. Myanmar	UNESCAP. (2000). Sexually abused and sexually exploited children and youth in Myanmar. New York: United Nations.	Prevalence	S	19	Low

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
144. Pacific Islands	Balling, A., Grunbaum, J.A., Speicher, N., McManus, T. and Kann, L. (2003). Youth Risk Behavior Survey 2003: Commonwealth of the Northern Mariana Islands, Republic of the Marshall Islands, Republic of Palau. Atlanta: Centers for Disease Control and Prevention.	Prevalence	E	Var.	Low
145. Pacific Islands	Hamelin, C., Salomon, C., Sitta, R., Gueguen, A., Cyr, A. and Lert, F. (2009). Childhood sexual abuse and adult binge drinking among Kanak women in New Caledonia. <i>Social Science and Medicine</i> , 68, 1247-1253.	Prevalence and Consequences	S/E	1,012	Low
146. Pacific Islands	Herbert, T. (2007). Commercial sexual exploitation of children in the Solomon Islands: A report focusing on the presence of the logging industry in a remote region. Solomon Islands: Christian Care Centre.	Prevalence and Consequences	S	370	Low
147. Pacific Islands	Lippe, J., Brener, N., Kann, L., Kinchen, S., Harris, W.A., McManus, T. and Speicher, N. (2008). Youth Risk Behavior Surveillance: Pacific Island United States Territories, 2007. <i>MMWR</i> , 57(SS12), 28-56.	Prevalence	S		Low
148. Pacific Islands	Save the Children Fiji. (2006). The physical and emotional punishment of children in Fiji: A research report. Suva: Fiji.	Prevalence	S	130	Low
149. Pacific Islands	Save the Children Fiji. (2006b). The commercial sexual exploitation and sexual abuse of children in Fiji: A situational analysis. Suva: Fiji.	Prevalence and Consequences	E/P	536	Low
150. Pacific Islands	UNICEF. (2008a). Protect me with love and care: A baseline report for creating a future free from violence, abuse and exploitation of girls and boys in Fiji. Suva: UNICEF Pacific.	Prevalence and Consequences	P/S/E/WV	913	Medium
151. Pacific Islands	UNICEF. (2008b). Protect me with love and care: A baseline report for creating a future free from violence, abuse and exploitation of girls and boys in Kiribati. Suva: UNICEF Pacific.	Prevalence and Consequences	P/S/E/WV	772	Medium
152. Pacific Islands	UNICEF. (2008c). Protect me with love and care: A baseline report for creating a future free from violence, abuse and exploitation of girls and boys in the Solomon Islands. Suva: UNICEF Pacific.	Prevalence and Consequences	P/S/E/WV	918	Medium
153. Pacific Island	UNICEF. (2009). Protect me with love and care: A baseline report for creating a future free from violence, abuse and exploitation of girls and boys in Vanuatu. Suva: UNICEF Pacific.	Prevalence and Consequences	P/S/E/WV	913	Medium
154. Pacific Islands	UNICEF, UNESCAP and ECPAT. (2006). Child sexual abuse and commercial exploitation of children in the Pacific: A regional report. Suva: UNICEF Pacific.	Prevalence	S	N/A	High
155. Papua New Guinea	Family and Sexual Violence Action Committee. (2005). Identification of violence against children in Papua New Guinea: a community consultation. Jessica Redwood.	Prevalence	S	N/A	High

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
156. Papua New Guinea	Human Rights Watch. (2005). "Making their own rules": Police beatings, rape and torture of children in Papua New Guinea. New York: Human Rights Watch.	Prevalence and Consequences	Abuse by police of children in detention	160	Medium
157. Papua New Guinea	Human Rights Watch. (2006). Still making their own rules: Ongoing impunity for police beatings, rape, and torture in Papua New Guinea. New York: Human Rights Watch.	Prevalence and Consequences	Abuse by police of children in detention	90	Medium
158. Philippines	ECPAT and Terra des Hommes. (2004). Endangered generation: Child trafficking in the Philippines for sexual purposes. Jakarta: ECPAT and Terra des Hommes.	Prevalence and Consequences	Trafficking of Children	74	Low
159. Philippines	Edralin, D.M. (2002). Kids at risk: Plight of child workers in the tourism industry in Cebu. <i>DLSU Business and Economics Review</i> , 13(2), 1-26.	Prevalence and Consequences	Child Labour	458	Medium
160. Philippines	Esteban, E.J. (2006). Parental verbal abuse: Culture-specific coping behavior of college students in the Philippines. <i>Child Psychiatry and Human Development</i> , 36(3), 243-259.	Prevalence and Consequences	E/Verbal	294	Low
161. Philippines	Fehringer, J.A. and Hindin, M.J. (2009). Like parent, like child: Intergenerational transmission of partner violence in Cebu, the Philippines. <i>Journal of Adolescent Health</i> , 44, 363-371.	Prevalence and Consequences	P	472	Low
162. Philippines	Hassan, F., Sadowski, L.S., Bangdiwala, S.I., Bizcarra, B., Ramiro, L., de Paula, C.S., Bordin, I.A.S. and Mitra, M.K. (2004). Physical intimate partner violence in Chile, Egypt, India and the Philippines. <i>Injury Control and Safety Promotion</i> , 11(2), 111-116. and Jeyaseelan, L., Sadowski, L.S., Kumar, S., Hassan, F., Ramiro, L. and Vizcarra, B. (2004). World studies of abuse in the family environment —risk factors for physical intimate partner violence. <i>Injury Control and Safety Promotion</i> , 11(2), 117-124. and Runyan, D.K., Shankar, V., Hassan, F., Hunter, W.M., Jain, D., Paula, C.S., ...Bordin, I.A. (2010). International variations in harsh child discipline. <i>Pediatrics</i> , 126, 701-711. and Vizcarra, B., Hassan, F., Hunter, W.M., Munoz, S.R., Ramiro, L. and De Paula, C.S. (2004). Partner violence as a risk factor for mental health among women from communities in the Philippines, Egypt, Chile and India. <i>Injury Control and Safety Promotion</i> , 11(2), 125-129. and Ramiro, L.S., Hassan, F. and Peedicayil, A. (2004). Risk markers of severe psychological violence against women: a WorldSAFE multi-country study. <i>Injury Control and Safety Promotion</i> , 11(2), 131-137.	Prevalence and Consequences	P/S	1,000	Low

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
163. Philippines	Hindin, M.J. and Guiltiano, S. (2006). Associations between witnessing parental domestic violence and experiencing depressive symptoms in Filipino adolescents. <i>American Journal of Public Health</i> , 96,1 660-663.	Prevalence and Consequences	E	2,051	Low
164. Philippines	ILO. (2002). Thailand child labour in illicit drug activities: A rapid assessment. Sunthornkajit, V., Kaiyanunta, T., Varavarn, P and Varatechakongka, S. Geneva: ILO.	Prevalence and Consequences	Child Labour	226	Medium
165. Philippines	ILO. (2004). Girl child labour in agriculture, domestic work and sexual exploitation: Rapid assessments on the cases of the Philippines, Ghana and Ecuador. Geneva: ILO.	Prevalence and Consequences	Girl Child Labour	49	High
166. Philippines	ILO. (2005). Employers' demand for child labor in the pyrotechnics and fashion accessories industries in the Philippines. Geneva: ILO.	Prevalence and Consequences	Child Labour	100	Medium
167. Philippines	Maxwell, C.D. and Maxwell, S.R. (2003). Experiencing and witnessing familial aggression and their relationship to physically aggressive behaviors among Filipino adolescents. <i>Journal of Interpersonal Violence</i> , 18, 1432-1451. and Maxwell, S.R. (2001). A focus on familial strain: Antisocial behavior and delinquency in Filipino society. <i>Sociological Inquiry</i> , 71(3), 265-92.	Prevalence and Consequences	P/E	921 /458	Low
168. Philippines	Ramiro, L.S., Madrid, B.J. and Brown, D.W. (2010). Adverse childhood experiences (ACE) and health-risk behaviors among adults in a developing country setting. <i>Child Abuse and Neglect</i> , 34, 842-855.	Prevalence and Consequences	E/P/S/N	1,068	Low
169. Philippines	Serquina-Ramiro, L. (2005). Physical intimacy and sexual coercion among adolescent intimate partners in the Philippines. <i>Journal of Adolescent Research</i> , 20(4), 476-496.	Prevalence and Consequences	S	600	Medium
170. Philippines	TABAYAN Center for the Care of Abused Children, Inc. (2003). <i>Kuyaw! Street adolescents in street gangs in Davao City</i> . Davao City: TABAYAN.	Prevalence and Consequences	Street Adolescents	113	19/23
171. Philippines	Lansford JE, Alampay LP, Al-Hassan S, Bacchini D, Bombi AS, Bornstein MH, Chang L, Deater-Deckard K, Di Giunta L, Dodge KA, Oburu P, Pastorelli C, Runyan DK, Skinner AT, Sorbring E, Tapanya S, Uribe Tirado LM, Zelli A. (2010) <i>International Journal of Pediatrics</i> Volume 2010, Article ID 672780, 12 pages. doi:10.1155/2010/672780	Prevalence	P (corporal punishment)	120	Medium
172. Philippines	Yacat JA (2011) <i>Child Protection in the Philippines: A situational analysis</i> . Save the Children.	Prevalence	E/P/S/N	N/A	Medium
173. Philippines	Sanapo MS and Nakamura Y (2011).	Prevalence	P	270	Medium
174. Republic of Korea	Ahn, H.Y., Kim, S.J., Ko, J.A. (2002). Child abuse in high-risk group. In Korean. <i>Journal of the Korean Academy of Nursing</i> , 32(6), 775-783.	Prevalence	E/P/S/N	105	Medium

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
175. Republic of Korea	Gover, A.R., Park, M., Tomsich, E.A. and Jennings, W.G. (2010). Dating violence perpetration and victimization among South Korean college students: A focus on gender and childhood maltreatment. <i>Journal of Interpersonal Violence</i> , (epub ahead of print).	Prevalence and Consequences	E/P/S/N	1,339	Medium
176. Republic of Korea	Ju, S. and Lee, Y. (2010). Experiences of family maltreatment by Korean children in Korean National Protective Services. <i>Child Abuse and Neglect</i> , 34, 18-27.	Prevalence and Consequences	E/P/S/N	357	Medium
177. Republic of Korea	Kim, Y.S., Koh, Y.J. and Leventhal, B.L. (2005). School bullying and suicidal risk in Korean middle school students. <i>Pediatrics</i> , 115, 357-363.	Prevalence and Consequences	E/P	1,718	Low
178. Republic of Korea	Kim, Y.S., Leventhal, B.L., Koh, Y.J., Hubbard, A. and Boyce, W.T. (2006). School bullying and youth violence: Causes or consequences of psychopathologic behavior? <i>Archives of General Psychiatry</i> , 63, 1035-1041.	Prevalence, Incidence and Consequences	E	1,655	Low
179. Republic of Korea	Kim, J., Park, S. and Emery, C.R. (2009). The incidence and impact of family violence on mental health among South Korean women: Results of a national survey. <i>Journal of Family Violence</i> , 24, 193-202.	Prevalence and Consequences	E/P/S/N	1,079	Low
180. Republic of Korea	Park, S.K., Kim, H.S., Kim, H. and Sung, K.T. (2007). Exploration of the prevalence and correlates of substance use among sheltered adolescents in South Korea. <i>Adolescence</i> , 42(167), 603-616.	Prevalence and Consequences	Prevalence of substance use	132	Low
181. Republic of Korea	Yang, S. (2009). Cane of Love: Parental Attitudes Towards Corporal Punishment in Korea. <i>British Journal of Social Work</i> (2009) 39, 1540-1555.	Information to inform Prevalence	P	110	7/23
182. Republic of Korea	Han IY, Lee Y, Yoo SK, Hong JS (2011) Prevalence of and Risk Factors for Male Sexual Abuse: The Case of South Korea. <i>Journal of Loss and Trauma</i> , 16:84-101.	Prevalence	S	1,043	Medium
183. Republic of Korea	Lee Y and Kim S (2011) Childhood maltreatment in South Korea: Retrospective study. <i>Child Abuse and Neglect</i> 35:1037-1044.	Prevalence	S/P/E	539	Medium
184. Singapore	Back, S.E., Jackson, J.L., Fitzgerald, M., Shaffer, A., Salstrom, S. and Osman, M.M. (2003). Child sexual abuse and physical abuse among college students in Singapore and the United States. <i>Child Abuse and Neglect</i> , 27, 1259-1275.	Prevalence and Consequences	P/S	152	Low
185. Singapore	Sim, T.N. and Ong, L.P. (2005). Parent physical punishment and child aggression in a Singapore Chinese preschool sample. <i>Journal of Marriage and Family</i> , 67, 85-99.	Prevalence	P	286	Low
186. Solomon Islands	Secretariat of the Pacific Community (2009) Solomon Islands Family Health and Safety Study: A study on violence against women and children.	Prevalence		Not mentioned	High
187. Thailand	Aekplakorn and Kongsakon, 2007.	Prevalence	P	580	Medium
188. Thailand	3ILO-IPEC. (2001). Asian Regional Meeting on the Worst Forms of Child Labour, Phuket, Thailand 1999. Bangkok: International Labour Office.	Prevalence and Consequences	S/P/E	N/A	N/A

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
189. Thailand	Chaopricha, S. and Jirapramukpitak. (2010). Child abuse and risky behaviours among youths. <i>Journal of the Medical Association of Thailand</i> , 93(S7):S160-165.	Prevalence and Consequences	E/P/N/S	488	Medium
190. Thailand	ECPAT International. (2003). A survey report: Our children at risk online the example of Thailand. Bangkok: ECPAT International.	Prevalence and Consequences	Internet use and experiences of children and young people	557	High
191. Thailand	Farley, M., Cotton, A., Lynne, J., Zumbeck, S., Spiwak, F., Reyes, M.E.....Sezgin, U. (2004). Prostitution and trafficking in nine countries. <i>Journal of Trauma Practice</i> , 2(3):33-74.	Prevalence and Consequences	Prostitution and Trafficking	166	High
192. Thailand	Garcia-Moreno, C., Jansen, H.A.F.M., Ellsberg, M., Heise, L, Watts, C.H. on behalf of the WHO Multi-country Study on Women's Health and Domestic Violence against Women Study Team. Prevalence of intimate partner violence: findings from the WHO multi-country study on women's health and domestic violence. <i>Lancet</i> , 368, 1260-69.	Prevalence	P	2,073	Low
193. Thailand	ILO. (2006). The Mekong Challenge. Working Day and Night: The plight of migrant child workers in Mae Sot, Thailand. Geneva: ILO.	Prevalence and Consequences	Child Labour	1,012	Medium
194. Thailand	ILO. (2006b). The Mekong Challenge. Underpaid, Overworked and Overlooked: The realities of young migrant workers in Thailand (Volume 1). Geneva: ILO.	Prevalence and Consequences	Child Labour	313	Medium
195. Thailand	Im-Em, W., Kanchanachitra, C. and Archavanitkul, K. (2005). Sexual coercion among ever-partnered women in Thailand. In Jejeebhoy, S.J., Shah, I. and Thapa, S. (Eds.), <i>Sex without consent: Young people in developing countries</i> (pp74-85). London: Zed Books.	Prevalence	S	2,817	Medium
196. Thailand	Isaranurug, S., Nitirat, P., Chauytong, P. and Wongarsa, C. (2001). Factors relating to the aggressive behavior of primary caregiver toward a child. <i>Journal of the Medical Association of Thailand</i> , 84, 1481-1489.	Prevalence	P/E	413	Medium
197. Thailand	Isaranurug, S., Auewattana, P., Chansatitporn, N. and Wongarsa, C. (2002). Violence against children by parents. <i>Journal of the Medical Association of Thailand</i> , 85, 875-880.	Prevalence	P	212	Medium
198. Thailand	Jirapramukpitak, T., Harpham, T. and Prince, M. (2010). Family violence and its 'adversity package': a community of family violence and adverse mental outcomes among young people. <i>Social Psychiatry and Pyschiatric Epidemiology</i> , (epub ahead of print).	Prevalence and Consequences	P	1,052	Low
199. Thailand	Jirapramukpitak, T. (2005). The experience of abuse and mental health in the young Thai population. <i>Social Psychiatry and Pyschiatric Epidemiology</i> , 40, 955-963.	Prevalence and Consequences	E/P/N/S	202	Low

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
200. Thailand	Kerley, K.R., Xu, X., Sirisunyaluck, B. and Alley, J.M. (2010). Exposure to family violence in childhood and intimate partner perpetration or victimization in adulthood: Exploring intergenerational transmission in urban Thailand. <i>Journal of Family Violence</i> , 25, 337-347.	Prevalence and Consequences	E/P/S	816	Low
201. Thailand	Kongsakon, R., Bhatanaprabhabhan, D. and Pocham, N. (2008). Impact of domestic violence: a study in communities of Bangkok Metropolitan, Thailand. <i>ASEAN Journal of Psychiatry</i> , 9(2):55-64.	Prevalence and Consequences	E/P	580	Medium
202. Thailand	Laeheem, K., Kuning, M., McNeil, N. and Besag, V.E. (2008). Bullying in Pattani primary schools in Southern Thailand. <i>Child: Care, Health and Development</i> , 35(2), 178-183.	Prevalence	E/P	1,440	Medium
203. Thailand	Pradubmook-Sherer, P. (2009). Prevalence and correlates of adolescent dating violence in Bangkok, Thailand. <i>Journal of Sociology and Social Welfare</i> , 36(1), 9-37.	Prevalence	P/S/E	1,296	Low
204. Thailand	Ruangkanchanasetr, S., Plitponkarnpim, A., Hetrakul, P. and Kongsakon, R. (2005). Youth risk behavior survey: Bangkok, Thailand. <i>Journal of Adolescent Health</i> , 36I, 227-235.	Prevalence	P/S/WV	2,311	Low
205. Thailand	ILO. (2002). Thailand child labour in illicit drug activities: A rapid assessment. Sunthornkajit, V., Kaiyanunta, T., Varavarn, P and Varatechakongka, S. Geneva: ILO.	Prevalence and Consequences	Child Labour	100	Medium
206. Thailand	Techakasem, P. and Kolkijkovin, V. (2006). Runaway youths and correlating factors, study in Thailand. <i>Journal of the Medical Association of Thailand</i> , 89(2), 212-6.	Prevalence	P/S/	42	Medium
207. Thailand	Thailand National Statistical Office, 2006.	Prevalence	S	43,400	Low
208. Thailand	Trangkasombat, U. (2008). Sexual abuse in Thai children: A qualitative study. <i>Journal of the Medical Association of Thailand</i> , 91(9), 1461-7.	Prevalence and Consequences	S	60	Low
209. Thailand	UNICEF. (2008). Everyday fears: A study of children's perceptions of living in the southern border area of Thailand. Bangkok: UNICEF.	Prevalence and Consequences	P	2,640	Low
210. Thailand	Wakai, K., Miura, H. and Umenai, T. (2005). Effect of working status on tobacco, alcohol, and drug use among adolescents in urban area of Thailand. <i>Addictive Behaviors</i> , 30, 457-464.	Prevalence and Consequences	Child Labour and Tobacco/ Drug use	215	Low
211. Thailand	Jirapramukpitak T, Abas M, Harpham T and Prince M (2011) Rural-Urban Migration and Experience of Childhood Abuse in the Young Thai Population. <i>Journal of Family Violence</i> 26:607-615.	Prevalence and Consequences	P/S/E	1,052	Low
212. Thailand	Sherer P and Sherer M (2013) Witnessing Violence Among High School Students in Thailand. <i>International Journal of Offender Therapy and Comparative Criminology</i> .	Prevalence	WV	2,897	Medium

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
213. Thailand	Chaopricha S and Jirapramukpitak T. (2010) Child Abuse and Risky Behaviour Among Youths. Journal of Medical Association Thailand 93(7): S160-165.	Prevalence and Consequence	S/P/E	488	Medium
214. Timor-Leste	IRC, 2003	Prevalence	S/P (GBV)	288	Low
215. Timor-Leste	PRADET Timor Lorosa'e and UNICEF East Timor. (2002). An investigation on child abuse and commercial sexual exploitation of children (CSEC) in East Timor: A one month pilot study preliminary report. Dili: PRADET.	Prevalence and Consequence	S/Exploitation	103	High
216. Viet Nam	ActionAid International Viet Nam. (2005). Synthesis report of three research studies Cambodia, Taiwan (China), Viet Nam on the trafficking of Vietnamese women and children. Viet Nam: ActionAid.	Prevalence and Consequence	Trafficking of Women and Children	376	Medium
217. Viet Nam	Ruiz-Casares, M. and Heymann, J. (2009). Children home alone unsupervised: Modeling parental decisions and associated factors in Botswana, Mexico, and Viet Nam. Child Abuse and Neglect, 33, 312-323.	Prevalence and Consequences Consequence	N	147	Low
218. Viet Nam	Human Rights Watch. (2006). "Children of the dust": Abuse of Hanoi street children in detention. New York: Human Rights Watch.	Prevalence and Consequence	P/S	25	High
219. Viet Nam	Krantz, G. and Vung, N.D. (2009). The role of controlling behavior in intimate partner violence and its health effects: A population based study from rural Viet Nam. BMC Public Health, 9 143-153.	Prevalence and Consequence	P/S	883	Low
220. Viet Nam	Nguyen, H.T., Dunne, M.P. and Le, A.V. (2009). Multiple types of child maltreatment and adolescent mental health in Viet Nam. Bulletin of the World Health Organization, 87, 22-30.	Prevalence and Consequence	E/P/N/S	2,591	Low
221. Viet Nam	Rubenson, B., Anh, N.T.V., Höjer, B. and Johansson, E. (2004). Child domestic servants in Hanoi: Who are they and how do they fare? The International Journal of Children's Rights, 11, 391-407.	Prevalence and Consequence	S	22	Low
222. Viet Nam	Rushing, R., Watts, C. and Rushing, S. (2005). Living the reality of forced sex work: Perspectives from young migrant women sex workers in Northern Viet Nam. Journal of Midwifery and Women's Health, 50(4), e41-e44.	Prevalence and Consequence	S	20	Low
223. Viet Nam	Rydström, H. (2006). Masculinity and punishment: Men's upbringing of boys in rural Viet Nam. Childhood, 13, 329-348.	Prevalence and Consequence	P	Not Stated	Low
224. Viet Nam	ILO. (2006). Can Tho City, Hau Giang Province, and Tay Ninh Province in Southern Viet Nam: The situation of migration and trafficking of children and women: A rapid assessment. The Quality of Life Promotion Centre and Christina Cacioppo. Bangkok: International Labour Office.	Prevalence	P/S/E	372	Medium

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
225. Viet Nam	Vung, N.D. and Krantz, G. (2009). Childhood experiences of interparental violence as a risk factor for intimate partner violence: A population-based study from northern Viet Nam. <i>Journal of Epidemiology and Community Health</i> , 63, 708-714.	Prevalence and Consequences	E/P/S	730	Low
226. Viet Nam	Wasserman, D., Thanh, H.T.T., Minh, D.P.T., Goldstein, M., Nordenskiold, A. and Wasserman, C. (2008). Suicidal process, suicidal communication and psychosocial situation of young suicide attempters in a rural Vietnamese community. <i>World Psychiatry</i> , 7(1), 47-53.	Prevalence and Consequences	Suicide	274 districts	Low
227. Viet Nam	Akmatov MK (2011) Child abuse in 28 developing and transitional countries—results from the Multiple Indicator Cluster Surveys. <i>International Journal of Epidemiology</i> 40:219-227.	Prevalence	E/P	2,433	Low
228. Multi-Country: Cambodia and Philippines	Ray, R. and Lancaster, G. (2005). The impact of children's work on schooling: Multi-country evidence. <i>International Labour Review</i> , 144(2), 189-210.	Prevalence and Consequences	Child Labour	Not Stated	N/A
229. Multi-Country: Cambodia, China and Papua New Guinea	Fulu, E., Warner, X., Miedema, S., Jewkes, R., Roselli, T. and Lang, J. (2013). Why Do Some Men Use Violence Against Women and How Can We Prevent It? Quantitative Findings from the United Nations Multi-country Study on Men and Violence in Asia and the Pacific. Bangkok: UNDP, UNFPA, UN Women and UNV.	Prevalence	P/S/E/WV	13,284	Low
230. Multi-country: China and Republic of Korea	Kim, D.H., Kim, K.I. and Park, Y.C. (2000). Children's experience of violence in China and Korea: A transcultural study. <i>Child Abuse and Neglect</i> , 24(9), 1163-1173.	Prevalence and Consequences	P	972	Low
231. Multi-country: China and Republic of Korea	Straus, M.A. and Savage, S.A. (2005). Neglectful Behavior by parents in the life history of university students in 17 countries and its relation to violence against dating partners. <i>Child Maltreatment</i> , 10(2), 124-135.	Prevalence and Consequences	E/P/N/S	7,875	Medium
232. Multi-country: China, Republic of Korea and Singapore	Straus, M.A. (2004). Prevalence of violence against dating partners by male and female university students worldwide. <i>Violence Against Women</i> , 10(7), 790-811.	Prevalence	P/S	Sample Size Not Given	Medium
233. Multi-country: China, Republic of Korea and Singapore	Douglas, E.M., Straus, M.A. (2006). Assault and injury of dating partners by university students in 19 countries and its relation to corporal punishment experienced as a child. <i>European Journal of Criminology</i> , 3, 293-318.	Prevalence and Consequences	P/S	814	Medium
234. Multi-country: Japan and Thailand	World Health Organization. (2005). WHO multi-country on women's health and domestic violence against women: summary report of initial results on prevalence, health outcomes and women's responses. Geneva: World Health Organization.	Prevalence	P/S	3,444	Low

Table 1: Included prevalence studies (continued)

Country	Reference	Prevalence/ Consequence (P/C)	Type(s) of maltreatment -Emotional, Physical, Sexual, Neglect (E/P/S/N)	Total Sample Size	Risk of Bias* (High, Medium or Low)
235. Multi-country: China, Philippines, Thailand, and others	Lansford, J.E., Alampay, L.P., Al-Hassan, S., Bacchini, D., Bombi, A.S., Bornstein, M.H.,...Zelli, A. (2010). Corporal punishment of children in nine countries as a function of child gender and parent gender. <i>International Journal of Pediatrics</i> .	Prevalence	P	2,563	Low
236. Multi-country: Thailand, Lao P.D.R. and Myanmar	ILO. (2001). Thailand-Lao People's Democratic Republic and Thailand-Myanmar Border Areas: Trafficking in children into the worst forms of child labour: A rapid assessment. Wille, C. Geneva: ILO-IPEC.	Prevalence and Consequences	Trafficking of Children	283	11/23
237. Multi-country: Indonesia, Philippines and Thailand	Porio, E. and Crisol, C.S. (2004). The use of children in the production, sales and trafficking of drugs: A synthesis of participatory action-oriented research programs in Indonesia, the Philippines and Thailand. Geneva: IOM-IPEC.	Prevalence and Consequences	Use of Children in Trafficking of Drugs	Not Stated	Medium
238. Region-wide	UNICEF. (2002). Adult wars, child soldiers: Voices of children involved in armed conflict in the East Asia and Pacific region. Bangkok: UNICEF EAPRO.	Prevalence and Consequences	Child Soldiers	69	Low
239. Region-wide	UNESCAP. (2000). Sexually abused and sexually exploited children and youth in the Greater Mekong subregion: A qualitative assessment of their health needs and available services. New York: UN.	Prevalence and Consequences	S	260	Low

* Risk of Bias: Quality Assessment

Each article was reviewed for data quality using the Newcastle-Ottawa Scale (NOS) for case control and cohort studies (Wells et al., 2010), the Guidelines for Evaluating Prevalence Studies (Boyle, 1998), or the Critical Review Form for Qualitative Studies (Letts et al., 2007). The Guidelines for Evaluating Prevalence Studies has eight main questions:

- 1) Is the target population defined clearly?
- 2) Was probability sampling used to identify potential respondents?
- 3) Do the characteristics of respondents match the target population?
- 4) Are the data collection methods standardized?
- 5) Are the survey instruments reliable?
- 6) Are the survey instruments valid?
- 7) Were special features of the sampling design accounted for in the analysis?
- 8) Do the reports include confidence intervals for statistical estimates?

The Newcastle-Ottawa Scale for assessing the quality of nonrandomized studies in meta-analyses also measures quality across eight main areas for case-control studies:

- 1) Is the case definition adequate?
- 2) Representativeness of the cases
- 3) Selection of controls
- 4) Definition of controls
- 5) Comparability of cases and controls on the basis of the design or analysis
- 6) Ascertainment of exposure

- 7) Same method of ascertainment for cases and controls
- 8) Non-response rate

The Critical Review Form for Qualitative Studies assesses quality across the following domains:

- 1) Clarity of study purpose
- 2) Appropriateness of study design
- 3) Sampling
- 4) Procedural rigour
- 5) Analytical rigour
- 6) Auditability
- 7) Credibility
- 8) Transferability
- 9) Dependability

Determination of low, medium and high risk of bias were ascertained following established cut-offs used for the same scales in a previous regional systematic review on child maltreatment (Fry, 2012), where studies which answered six to eight/nine of the eight/nine questions in the right direction as 'low risk of bias', studies that answered three to six questions as 'medium risk of bias' and studies that answered none to two questions in the right direction as 'high risk of bias'.

All of the included studies have medium or low risk of bias as reflected by the rigorous inclusion criteria for the quantitative analyses. The main reason for medium risk of bias involves the sampling design, lack of statistical reporting (e.g. confidence intervals) or the use of researcher-developed questions. These limitations are discussed more fully in the manuscript discussion section.

Table 2: Included consequences studies

Country	Study Reference
1. Cambodia	Center for Advanced Study. (2001). Child work and child labour at the Chub Rubber Plantation in Cambodia. Phnom Penh: Center for Advanced Study. Zweers, J., Tirith, H. Ketya, S., Sidedine, L, Sareth, K., Sophea, M., Rithy, P.
2. Cambodia	Center for Advanced Study. (2001). Child work and child labour in the fisheries in Sihanoukville, Cambodia. Phnom Penh: Center for Advanced Study. Zweers, J., Sidedine, L., Ketya, S., Tirith, H., Sareth, K., Sophea, M. and Kannitha, H.
3. Cambodia	Chab Dai Coalition. (2006). At what price honour? Research into domestic trafficking of Vietnamese (girl) children for sexual exploitation, from urban slums in Phnom Penh, Cambodia. Phnom Penh: Chab Dai.
4. Cambodia	Chenda, K. (2006). Life After Reintegration: The Situation of Child Trafficking Survivors. Phnom Penh: International Organization for Migration.
5. Cambodia	De Jong, J.T.V.M., Komproe, I.H., Ommeren, M.V., Masri, M.E., Araya, M., Khaled, N. , Somasundaram, D. (2001). Lifetime events and posttraumatic stress disorder in 4 postconflict settings. <i>JAMA</i> , 286(5), 555-562.
6. Cambodia	ECPAT-Cambodia. (2008b). Total rape, sexual trafficking and debauchery cases in 2008. Phnom Penh: ECPAT-Cambodia.
7. Cambodia	Hilton. (2008). I thought it could never happen to boys: Sexual abuse and exploitation of boys in Cambodia, an exploratory study. Phnom Penh: Social Services of Cambodia (SSC).
8. Cambodia	ILO. (2005). Mekong Challenge. Destination Thailand: A cross-border labour migration survey in Banteay Meanchey Province, Cambodia. Bangkok: International Labour Office.
9. Cambodia	ILO. (2006). Mekong Challenge. Cambodia's 'beer promotion girls': Their recruitment, working conditions and vulnerabilities. Bangkok: International Labour Office.
10. Cambodia	Jegannathan, B., Dahlblom, K. and Kullgren, G. (2013): 'Plue plun' male, 'kath klei' female: gender differences in suicidal behavior as expressed by young people in Cambodia, <i>International Journal of Culture and Mental Health</i> .
11. Cambodia	McCauley, H.L., Decker, M.R. and Silverman, J.G. (2010). Trafficking experiences and violence victimization of sex-trafficked young women in Cambodia.
12. Cambodia	Micheau, P., Lauwers, F., Vath, S.B., Seilha, T.C., Dumurgier, C. and Joly, B. (2004). Acid burns. An experience of 24 patients treated in Cambodia. <i>Annales de chirurgie plastique esthetique</i> , 49, 239-254.
13. Cambodia	Nishigaya, K. (2002). Female garment factory workers in Cambodia: Migration, sex work and HIV/AIDS. <i>Women and Health</i> , 35(4), 27-42.
14. Cambodia	Yi, S., Poudel, K., Yasuoki, J., Yi, S., Palmer, P.H., and Jimba, M. (2013). Exposure to violence in relation to depressive symptoms among male and female adolescent students in Cambodia. <i>Soc Psychiatry and Psychiatric Epi</i> , 48:397-405.
15. Hong Kong, China	Chan, K.L., Yan, E., Brownridge, D.A., Tiwari, A. and D.Y.T. Fong. (2011). Childhood sexual abuse associated with dating partner violence and suicide ideation in a representative household sample in Hong Kong. <i>Journal of Interpersonal Violence</i> , 26(9):1763-1784.
16. Hong Kong, China	Chan, K.L. (2011). Co-occurrence of intimate partner violence and child abuse in Hong Kong Chinese families. <i>Journal of Interpersonal Violence</i> , 26(7):1322-1342.
17. Hong Kong, China	Chan, K.L. (2011). Association between child sexual abuse and adult sexual victimization in a representative sample in Hong Kong Chinese. <i>Child Abuse and Neglect</i> , 35:220-229.
18. China	Chang, X.L. and Wang, H.Y. (2008). Effect of Psychological Abused and Neglect in childhood on Adult Mental Health. <i>China Journal of Heal the Psychology</i> , 16(11):1239-41.
19. Taiwan, China	Chen, J.K. and Astor, R.A. (2010). School violence in Taiwan: Examining how western risk factors predict school violence in an Asian culture. <i>Journal of Interpersonal Violence</i> , 25(8), 1388-1410.
20. China	Chen J, Dunne MP. (2003) The impact of sexual abuse in childhood on females' mental development. <i>Chin J Public Health</i> , 19(9):1142-3.
21. China	Chen J, Dunne MP, Han P. (2004). Child sexual abuse in China: A study of adolescents in four provinces. <i>Child Abuse and Neglect</i> , 28(11):1171-86.
22. China	Chen J, Dunne MP, Han P. (2006). Child sexual abuse in Henan province, China: associations with sadness, suicidality, and risk behaviors among adolescent girls. <i>Journal of Adolescent Health</i> , 38(5):544-9.
23. China	Chen, J.Q. (2004). A retrospective survey in child sexual abuse among 565 university students. Article in Chinese. <i>Chinese Journal of Epidemiology</i> , 25(10), 873-7.

Table 2: Included consequences studies (continued)

Country	Study Reference
24. China	Chen JQ and Liao W (2004). A study of the relationship between CSA and mental conditions among students in Beijing.
25. China	Chen JQ and Liao W. (2005). Childhood humiliated experiences and its correlation with the mental health in technical secondary school students. <i>Chin J School Health</i> , 26(5):355-357.
26. China	Chen JQ, Wu CM, Dunne MP et al. (2006). A retrospective survey of childhood corporal punishment by school teachers in students. <i>Chin J Pediatr</i> , 1:26-30.
27. China	Cheng HG, Huang YQ, James CA. Childhood physical punishment and later alcohol drinking consequences: evidence from a Chinese context. <i>J. Stud. Alcohol Drugs</i> 2011;72:24-33. and Cheng, H.G., Anthony, J.C., Huang, Y., Lee, S., Liu, Z. and He, Y. (2011) Childhood physical punishment and onset of drinking problems: Evidence from metropolitan China. <i>Drug and Alcohol Dependence</i> , 118:31-39.
28. China	Cheng, F. and Lam, D. (2010). How is street life? An examination of the subjective well-being of street children in China. <i>International Social Work</i> , 53(3), 353-365.
29. Taiwan, China	Chien, M.H. (2007). Consequences and impact of childhood sexual abuse on Taiwanese women. <i>Social Development Issues</i> , 29(3), 47-58.
30. Taiwan, China	Chien, M.H. (2008). The current relationship of Taiwanese women with a history of childhood sexual abuse to their non-offending mothers. <i>Journal of Social Service Research</i> , 34(4), 29-39.
31. China	Chou, C.Y., Su, Y.J., Wu, H.M., and Chen, S.H. (2011) Child physical abuse and the related PTSD in Taiwan: The role of Chinese cultural background and victims' subjective reactions. <i>Child Abuse and Neglect</i> , 35: 58-68.
32. China	Cong E, Li Y, Shao C, et al. Childhood sexual abuse and the risk for recurrent major depression in Chinese women. <i>Psychological Medicine</i> 2012; 2:409-17.
33. China	Dong F, Cao F, Guo Y, Kong Z, Li Y, Cheng P, Liu J, Chen Q. (2010). Prevalence and relationship between psychological abuse and neglect and internet addiction in junior middle school students. <i>CJCHC</i> , 18(10):761-763.
34. China	du Prel Carroll X, Yi H, Liang Y, Pang K, Leeper-Woodford S, et al. (2012) Family-Environmental Factors Associated with Attention Deficit Hyperactivity Disorder in Chinese Children: A Case-Control Study. <i>PLoS ONE</i> 7(11):e50543.
35. China	Fuh JL, Wang SJ, Juang KD, Lu SR, Liao YC, Chen SP. (2010). Relationship between childhood physical maltreatment and migraine in adolescents. <i>Headache</i> , 50:761-768.
36. China	Gao Y, Ying L. (2011). Impact of childhood abuse experience on mental health of middle school students. <i>Disease Surveillance</i> , 26(4).
37. China	Kwok, S.Y.C.L., Chai, W., and He, X. (2013). Child abuse and suicidal ideation among adolescents in China. <i>Child Abuse and Neglect</i> , 37:986-996.
38. China	Lau, JTF, Chan, K, Lam, PKW et al. Psychological correlates of physical abuse in Hong Kong Chinese adolescents. <i>Child Abuse and Neglect</i> 2003; 27:63-75.
39. China	Lau, JTF, Kim, JH Tsui, HY et al. The relationship between physical maltreatment and substance use. <i>Journal of Adolescent Health</i> 2005; 37:110-19.
40. China	Lee, S., Guo, W.J., Tsang, A., He, Y.L., Huang, Y.Q., Zhang, M.Y. et al. (2011). The prevalence of family childhood adversities and their association with first onset of DSM-IV disorders in metropolitan China. <i>Psychol Med</i> 41(1): 85-96.
41. China	Li N, Saifuddin A, Zabin LS. Association between childhood sexual abuse and adverse psychological outcomes among youth in Taipei. <i>Journal of Adolescent Health</i> 2012; 50:S45-S51.
42. China	Li, X.B., Wang, Z.M., Hou, Y.Z., Wang, Y., Liu, J.T. and Wang, C.Y. (2014) Effects of childhood trauma on personality in a sample of Chinese adolescents. <i>Child Abuse and Neglect</i> , 38(4):788-96.
43. China	Lin, D., Li, X., Fan, X., and Fang, X. (2011). Child sexual abuse and its relationship with health risk behaviors among rural children and adolescents in Hunan, China. <i>Child Abuse and Neglect</i> , 35(9):680-7.
44. China	Luo Y, Parish WL, Laumann EO. (2008). A population-based study of childhood sexual contact in China: Prevalence and long-term consequences. <i>Child Abuse and Neglect</i> , 32(7):721-31.
45. China	Luo, J., Peng, X., Rong, Z., Yao, K., Hu, R., Du, Q., ... Zhu, M. (2008). The status of care and nutrition of 774 left-behind children in rural areas in China. <i>Public Health Reports</i> , 123, 382-389.

Table 2: Included consequences studies (continued)

Country	Study Reference
46. China	Ma YX, Chen JQ. (2007). Childhood non-contact corporal punishment and its association with the health related risk behaviors in female students. <i>Chinese General Practice</i> , 9:725-27.
47. China	Ma Y, Chen J, Dunne MP, Liang Y, Cheng Y, Wu C, et al. (2005) The impacts of childhood experience of beaten by bare hand on adolescents' mental health. <i>Chin J School Doctor</i> , 26(12):1001-3.
48. China	Ng, J.W.Y and Tsang, S.K.M. (2008). School bullying and mental health of junior secondary school students in Hong Kong. <i>Journal of School Violence</i> , 7(2), 3-20.
49. China	Qin, L.Z., Sun, Y.Y., Xia, W., Chen, S.F. and Zhang, H.Y. (2008), Risk factors for emotional abuse in 844 adolescents. <i>Chinese Journal of Contemporary Pediatrics</i> , 10(2), 228-230.
50. China	Shen, A.C.T. (2008). Self-esteem of young adults experiencing interparental violence and child physical maltreatment: Parental and peer relationships as mediators. <i>Journal of Interpersonal Violence</i> , 24(5), 770-794.
51. Taiwan, China	Shen AC. (2009). Long-term effects of interparental violence and child physical maltreatment experiences on PTSD and behavior problems: A national survey of Taiwanese college students. <i>Child Abuse and Neglect</i> , 33:148-160.
52. China	Song, Y., Ji, C.Y., and Agardh, A. (2014). Sexual coercion and health-risk behaviors among urban Chinese high school students. <i>Global Health Action</i> , 7:24418.
53. China	Su PY, Tao FX, Cao XJ, et al. (2008). Study on the relationship between sexual abuse in childhood and psychiatric disorder, risky behaviors in youthhood among 1386 medicos. <i>Chin J Epidemiol</i> , 1:94-95.
54. China	Tao FB, Huang K, Kim S, et al. Correlation between psychopathological symptoms, coping style in adolescent and childhood repeated physical, emotional maltreatment. <i>Chin J Pediatr</i> 2006; 9:688-93.
55. China	Tang J, Ma Y, Guo Y, Ahmed NI, Yu Y, et al. (2013) Association of Aggression and Non-Suicidal Self Injury: A School-Based Sample of Adolescents. <i>PLoS ONE</i> 8(10):e78149.
56. China	Tang CS, William CW, Wong, P, Leung MS, et al. (2011) Health compromising behaviors among Chinese adolescents: Role of physical abuse, school experience, and social support. <i>Journal of Health Psychology</i> 16:456-66.
57. China	Wong, W.C.W., Chen, W.Q., Goggins, W.B., Tang, C.S. and Leung, P.W. (2009). Individual, familial and community determinants of child physical abuse among high school students in China. <i>Social Science and Medicine</i> , 68, 1819-1825.
58. China	Wong, W.C.W., Leung, P.W.S., Tang, C.S.K., Chen, W.-Q., Lee, A. and Ling, D.C. (2009). To unfold a hidden epidemic: Prevalence of child maltreatment and its health implications among high school students in Guangzhou, China. <i>Child Abuse and Neglect</i> , 33, 441-450.
59. China	Xia L, Ma W, Nie S et al. (2009). Association between forced sexual intercourse and adverse health behaviors among senior school and college students in Guangdong Province. <i>South China J Prev Med</i> , 35(15):4-8.
60. China	Xiao YN, Tao FB, Xu SJ, et al. (2008). Self- injurious behaviors in adolescents with repeated childhood abuse. <i>Chin J Public Health</i> , 9:1028-30.
61. China	Ye Q, Tao FB, Fang DS, Huang K, Sun Y. (2006). Impact of childhood abuses on the psychology and behaviors regarding harmful dietary pattern in adolescents. <i>Chin J of Epi.</i> , 27(4):319-323.
62. China	Yong N, Wang H, Hu H, Meng HQ, Chen PH et al. (2011). Relationship among child-abuse, depressive symptoms and sleep quality in grade 4-6 primary students. <i>Chin Ment Health J</i> , 25(8):616-621.
63. China	Zhao, Q., Zhao, J., Li, X., Zhao, G., Fang, X., Lin, X., ...Stanton, B. (2010). Childhood sexual abuse and its relationship with psychosocial outcomes among children affected by HIV in rural China. <i>Journal of the Association of Nurses in AIDS Care</i> (epub ahead of print), 1-13.
64. Indonesia	Beazley, H. (2002). 'Vagrants wearing make-up': Negotiating spaces on the streets of Yogyakarta, Indonesia. <i>Urban Studies</i> , 39, 1665-1683.
65. Indonesia	Berman, L. (2000). Surviving on the streets of Java: Homeless children's narratives of violence. <i>Discourse Society</i> , 11: 149-174.
66. Indonesia	Bessell, S. (2009). Indonesian children's views and experiences of work and poverty. <i>Social Policy and Society</i> , 8(4), 527-540.
67. Indonesia	Federman, M. and Levine, D.I. (2005). The effects of industrialization on education and youth labor in Indonesia. <i>Contributions to Macroeconomics</i> , 5, 1-32.

Table 2: Included consequences studies (continued)

Country	Study Reference
68. Indonesia	Human Rights Watch. (2005). Always on call: Abuse and exploitation of child domestic workers in Indonesia. Human Rights Watch, 17(7).
69. Indonesia	Kakak Foundation and Terres des Homes. (2008). Situation of Child Prostitution in Surakarta: Analysis of the Elimination of Commercial Sexual Exploitation.
70. Indonesia	National Coalition for the Elimination of Commercial Sexual Exploitation of Children, Ministry of Women's Empowerment and UNICEF. (2009). Report on seminar and workshop on the results of rapid assessment on the situation of CSEC in Indonesia held in Jakarta 2-3 September 2009. Report in Bahasa. Medan: Koalisi Nasional.
71. Indonesia	Tresno, F., Ito, Y. and Mearns, J. (2012) Self-Injurious Behavior and Suicide Attempts Among Indonesian College Students, <i>Death Studies</i> , 36(7):627-639.
72. Japan	Bandou, N., Koike, K. and Matuura, H. (2010). Predictive familial risk factors and pharmacological responses in ADHD with comorbid disruptive behavior disorders. <i>Pediatrics International</i> , 52, 415-419.
73. Japan	Dussich, J.P.J. and Maekoya, C. (2007). Physical child harm and bullying-related behaviors: A comparative study in Japan, South Africa, and the United States. <i>International Journal of Offender Therapy and Comparative Criminology</i> , 51(5), 495-509.
74. Japan	Endo, T., Sugiyama, T. and Someya, T. (2006). Attention-deficit/hyperactivity disorder and dissociative disorder among abused children. <i>Psychiatry and Clinical Neurosciences</i> , 60, 434-438.
75. Japan	Fujiwara, T., Kawakami, N. and World Mental Health Japan Survey Group. (2010). Association of childhood adversities with the first onset of mental disorders in Japan: Results from the World Mental Health Japan, 2002-2004. <i>Journal of Psychiatric Research</i> (epub ahead of print), 1-7.
76. Japan	Igarashi, H., Hasui, C., Uji, M., Shono, M., Nagata, T. and Kitamura, T. (2010). Effects of child abuse history on borderline personality traits, negative life events and depression: A study among a University student population in Japan. <i>Psychiatry Research</i> , 180:120-125.
77. Japan	Kitamura, T., Kaibori, Y., Takara, N., Oga, H., Yamauchi, K. and Fujihara, S. (2000). Child abuse, other early experiences and depression: I. Edpidemiology of parental loss, child abuse, perceived rearing experiences and early life events among a Japanese community population. <i>Archives of Women's Mental Health</i> , 3, 47-52.
78. Japan	Koizumi M, Takagishi H (2014) The Relationship between Child Maltreatment and Emotion Recognition. <i>PLoS ONE</i> 9(1):e86093.
79. Japan	Matsumoto, T. and Imamura, F. (2007). Association between childhood attention-deficit-hyperactivity symptoms and adulthood dissociation in male inmates: Preliminary report. <i>Psychiatry and Clinical Neurosciences</i> , 61, 444-446.
80. Japan	Matsuura, N., Fujiwara, T., Okuyama, M. and Izumi, M. (2013). Testing a cascade model of linkage between child abuse and negative mental health among battered women in Japan. <i>Asian Journal of Psychiatry</i> , 6:99-105.
81. Japan	Miura, H., Fujiki, M., Shibata, A. and Ishikawa, K. (2006). Prevalence and profile of methamphetamine users in adolescents at a juvenile classification home. <i>Psychiatry and Clinical Neuroscience</i> , 60, 352-357.
82. Japan	Nagata, T., Kaye, W.H., Kiriike, N., Rao, R., McConaha, C. and Plotnicov, K.H. (2001). Physical and sexual abuse histories in patients with eating disorders: A comparison of Japanese and American patients. <i>Psychiatry and Clinical Neuroscience</i> , 55, 333-340.
83. Japan	Yoshihama, M. and Horrocks, J. (2010). Risk of intimate partner violence: Role of childhood sexual abuse and sexual initiation in women in Japan. <i>Children and Youth Services Review</i> , 32, 28-37.
84. Lao PDR	Phetsiriseng, I. (2003). Preliminary assessment on trafficking of children and women for labour exploitation in Lao PDR. ILO-IPEC Lao PDR.
85. Malaysia	Chan, L.F., Maniam, T., Saini, S.M., Shah, S.A., Loh, S.F., Sinniah, A. et al. (2013). Sexual abuse and substance abuse increase risk of suicidal behaviour in Malaysian Youth. <i>Asia-Pacific Psychiatry</i> , 5:123-126.
86. Malaysia	Fahrudin, A. and Edward, D. (2009). Family characteristics and traumatic consequences associated with the duration and frequency of sexual assault. <i>Asian Social Work and Policy Review</i> , 3, 36-50.
87. Malaysia	Wahab, S., Tan, S.M.K., Marimuthu, S., Razali, R. and Muhamad, N.A. (2013). Young female survivors of sexual abuse in Malaysia and depression: What factors are associated with better outcome? <i>Asia-Pacific Psychiatry</i> , 5:95-102.
88. Malaysia	WHO. (2006). National report on violence and health Malaysia. Kobe: WHO Kobe Centre.

Table 2: Included consequences studies (continued)

Country	Study Reference
89. Mongolia	Gender Equality Center and ILO-IPEC. (2005). Study on children and youth working in the service sector, risks of engaging into sexual exploitation and estimation of girls and women engaged in prostitution outside of the service sector in selected urban centres and border towns.
90. Mongolia	MECS, UNICEF, MSUE and NHRCM. (2007). Violence at school and kindergarten environment and the ways to eliminate it. Mongolia: UNICEF.
91. Multicountry: Cambodia and Philippines	Ray, R. and Lancaster, G. (2005). The impact of children's work on schooling: Multi-country evidence. <i>International Labour Review</i> , 144(2), 189-210.
92. Multi-country: China and Republic of Korea	Kim, D.H., Kim, K.I. and Park, Y.C. (2000). Children's experience of violence in China and Korea: A transcultural study. <i>Child Abuse and Neglect</i> , 24(9), 1163-1173.
93. Multi-country: China and Republic of Korea	Straus, M.A. and Savage, S.A. (2005). Neglectful Behavior by parents in the life history of university students in 17 countries and its relation to violence against dating partners. <i>Child Maltreatment</i> , 10(2), 124-135.
94. Multi-country: China, Republic of Korea and Singapore	Douglas, E.M., Straus, M.A. (2006). Assault and injury of dating partners by university students in 19 countries and its relation to corporal punishment experienced as a child. <i>European Journal of Criminology</i> , 3, 293-318.
95. Multi-country: Thailand, Lao P.D.R. and Myanmar	ILO. (2001). Thailand-Lao People's Democratic Republic and Thailand-Myanmar Border Areas: Trafficking in children into the worst forms of child labour: A rapid assessment. Wille, C. Geneva: ILO-IPEC.
96. Multi-country: Indonesia, Philippines and Thailand	Porio, E. and Crisol, C.S. (2004). The use of children in the production, sales and trafficking of drugs: A synthesis of participatory action-oriented research programs in Indonesia, the Philippines and Thailand. Geneva: IOM-IPEC.
97. Multi-country: Thailand, Lao P.D.R. and Myanmar	ILO. (2001). Thailand-Lao People's Democratic Republic and Thailand-Myanmar Border Areas: Trafficking in children into the worst forms of child labour: A rapid assessment. Wille, C. Geneva: ILO-IPEC.
98. Multicountry: Thailand, Lao P.D.R. and Myanmar	ILO. (2001). Thailand-Lao People's Democratic Republic and Thailand-Myanmar Border Areas: Trafficking in children into the worst forms of child labour: A rapid assessment. Wille, C. Geneva: ILO-IPEC.
99. Multicountry: Indonesia, Philippines and Thailand	Porio, E. and Crisol, C.S. (2004). The use of children in the production, sales and trafficking of drugs: A synthesis of participatory action-oriented research programs in Indonesia, the Philippines and Thailand. Geneva: IOM-IPEC.
100. Myanmar (Burma)	Kachin Women's Association Thailand (KWAT). (2005). Driven away: Trafficking of Kachin women on the China-Burma border. Chiang Mai: Thailand.
101. Myanmar (Burma)	The Shan Human Rights Foundation (SHRF) and The Shan Women's Action Network (SWAN). (2002). License to Rape: The Burmese military regime's use of sexual violence in the ongoing war in Shan State.
102. Myanmar (Burma)	The Women's League of Burma (WLB). (2004). System of impunity: Nationwide patterns of sexual violence by the military regime's army and authorities in Burma. Chiang Mai: Thailand.
103. Pacific Islands (Solomon Is.)	Herbert, T. (2007). Commercial sexual exploitation of children in the Solomon Islands: A report focusing on the presence of the logging industry in a remote region. Solomon Islands: Christian Care Centre.
104. Pacific Islands	Roberts, G. (2007). Masculinity, mental health and violence in Papua New Guinea, Vanuatu, Fiji and Kiribati. <i>Health Promotion in the Pacific</i> , 14(2), 35-41.
105. Pacific Islands	Save the Children Fiji. (2006b). The commercial sexual exploitation and sexual abuse of children in Fiji: A situational analysis. Suva: Fiji.
106. Pacific Islands	UNICEF. (2009a). A regional summary of the Fiji, Kiribati, Solomon Islands, and Vanuatu child protection baseline reports. Suva, Fiji: UNICEF Pacific.

Table 2: Included consequences studies (continued)

Country	Study Reference
107. Pacific Islands	UNICEF. (2009c). Protect me with love and care: A baseline report for creating a future free from violence, abuse and exploitation of girls and boys in Kiribati. Suva: UNICEF Pacific.
108. Pacific Islands	UNICEF. (2009a). A regional summary of the Fiji, Kiribati, Solomon Islands, and Vanuatu child protection baseline reports. Suva, Fiji: UNICEF Pacific.
109. Papua New Guinea	Human Rights Watch. (2005). "Making their own rules": Police beatings, rape and torture of children in Papua New Guinea. New York: Human Rights Watch.
110. Papua New Guinea	Human Rights Watch. (2006). Still making their own rules: Ongoing impunity for police beatings, rape, and torture in Papua New Guinea. New York: Human Rights Watch.
111. Papua New Guinea	Lewis, I.R. (2012) At Risk: The Relationship between Experiences of Child Sexual Abuse and Women's HIV Status in Papua New Guinea, <i>Journal of Child Sexual Abuse</i> , 21(3):273-294.
112. Philippines	Abrera-Mangahas presentation published in ILO. (2001). Thailand-Lao People's Democratic Republic and Thailand-Myanmar Border Areas: Trafficking in children into the worst forms of child labour: A rapid assessment. Wille, C. Geneva: ILO-IPEC.
113. Philippines	ECPAT and Terre des Hommes. (2004). Endangered generation: Child trafficking in the Philippines for sexual purposes. Jakarta: ECPAT and Terre des Hommes.
114. Philippines	Figer, R.C. (2008). Looking through the eyes of the child: The phenomenon of child verbal abuse in the Philippines. <i>Relational Child and Youth Care Practice</i> , 21(4), 46-58.
115. Philippines	Edralin, D.M. (2002). Kids at risk: Plight of child workers in the tourism industry in Cebu. <i>DLSU Business and Economics Review</i> , 13(2), 1-26.
116. Philippines	Esteban, E.J. (2006). Parental verbal abuse: Culture-specific coping behavior of college students in the Philippines. <i>Child Psychiatry and Human Development</i> , 36(3), 243-259.
117. Philippines	Fehringer, J.A. and Hindin, M.J. (2009). Like parent, like child: Intergenerational transmission of partner violence in Cebu, the Philippines. <i>Journal of Adolescent Health</i> , 44, 363-371.
118. Philippines	Hassan, F., Sadowski, L.S., Bangdiwala, S.I., Bizcarra, B., Ramiro, L., de Paula, C.S., Bordin, I.A.S. and Mitra, M.K. (2004). Physical intimate partner violence in Chile, Egypt, India and the Philippines. <i>Injury Control and Safety Promotion</i> , 11(2), 111-116. and Jeyaseelan, L., Sadowski, L.S., Kumar, S., Hassan, F., Ramiro, L. and Vizcarra, B. (2004). World studies of abuse in the family environment—risk factors for physical intimate partner violence. <i>Injury Control and Safety Promotion</i> , 11(2), 117-124. and Runyan, D.K., Shankar, V., Hassan, F., Hunter, W.M., Jain, D., Paula, C.S., ...Bordin, I.A. (2010). International variations in harsh child discipline. <i>Pediatrics</i> , 126, 701-711. and Vizcarra, B., Hassan, F., Hunter, W.M., Munoz, S.R., Ramiro, L. and De Paula, C.S. (2004). Partner violence as a risk factor for mental health among women from communities in the Philippines, Egypt, Chile and India. <i>Injury Control and Safety Promotion</i> , 11(2), 125-129. and Ramiro, L.S., Hassan, F. and Peedicayil, A. (2004). Risk markers of severe psychological violence against women: a WorldSAFE multi-country study. <i>Injury Control and Safety Promotion</i> , 11(2), 131-137.
119. Philippines	Hesketh, T.M., Gamlin, J., Ong, M., and Camacho, A.Z.V. (2012). The psychosocial impact of child domestic work: A study from India and the Philippines. <i>Arch Dis Child</i> , 97:773-778.
120. Philippines	Hindin, M.J. and Gultiano, S. (2006). Associations between witnessing parental domestic violence and experiencing depressive symptoms in Filipino adolescents. <i>American Journal of Public Health</i> , 96, 660-663.
121. Philippines	ILO. (2002). Thailand child labour in illicit drug activities: A rapid assessment. Sunthornkajit, V., Kaiyanunta, T., Varavarn, P and Varatechakongka, S. Geneva: ILO.
122. Philippines	ILO. (2004). Girl child labour in agriculture, domestic work and sexual exploitation: Rapid assessments on the cases of the Philippines, Ghana and Ecuador. Geneva: ILO.
123. Philippines	ILO. (2005). Employers' demand for child labor in the pyrotechnics and fashion accessories industries in the Philippines. Geneva: ILO.

Table 2: Included consequences studies (continued)

Country	Study Reference
124. Philippines	Maxwell, C.D. and Maxwell, S.R. (2003). Experiencing and witnessing familial aggression and their relationship to physically aggressive behaviors among Filipino adolescents. <i>Journal of Interpersonal Violence</i> , 18, 1432-1451. and Maxwell, S.R. (2001). A focus on familial strain: Antisocial behavior and delinquency in Filipino society. <i>Sociological Inquiry</i> , 71(3), 265-92.
125. Philippines	Ramiro, L.S., Madrid, B.J. and Brown, D.W. (2010). Adverse childhood experiences (ACE) and health-risk behaviors among adults in a developing country setting. <i>Child Abuse and Neglect</i> , 34, 842-855.
126. Philippines	Rudatsikira, E., Mataya, R.H., Siziya, S. and Muula, A.S. (2008). Association between bullying victimization and physical fighting among Filipino adolescents: Results from the Global School-Based Health Survey. <i>Indian Journal of Pediatrics</i> , 75(12), 1243-1247.
127. Philippines	Serquina-Ramiro, L. (2005). Physical intimacy and sexual coercion among adolescent intimate partners in the Philippines. <i>Journal of adolescent Research</i> , 20(4), 476-496.
128. Philippines	Tabayan Center for the Care of Abused Children, Inc. (2003). <i>Kuyaw! Street adolescents in street gangs in Davao City</i> . Davao City: TABAYAN.
129. Region-Wide	UNESCAP. (2000). Sexually abused and sexually exploited children and youth in the Greater Mekong subregion: A qualitative assessment of their health needs and available services. New York: UN.
130. Region-Wide	UNICEF. (2002). <i>Adult wars, child soldiers: Voices of children involved in armed conflict in the East Asia and Pacific region</i> . Bangkok: UNICEF EAPRO.
131. Republic of Korea	Don, H.S., Shin, N., Kim, M.J., Hong, J.S., Choi, M.K., Kim, S. (2012). Influence of marital conflict on young children's aggressive behaviour in S. Korea: The mediating role of child maltreatment. <i>Children and Youth Services Review</i> , 34:1742-1748.
132. Republic of Korea	Emery, C.R., Kim, J., Song, H.A. and Song, A.Y. (2013). Child abuse as a catalyst for wife abuse? <i>Journal of Family Violence</i> , 28:141-152.
133. Republic of Korea	Gover, A.R., Jennings, W.G., Tomsich, E.A., Park, M.R., and Rennison, C.M. (2011). The influence of childhood maltreatment and self-control on dating violence: A comparison of college students in the U.S. and South Korea. <i>Violence and Victims</i> , 26(3):296-318.
134. Republic of Korea	Gover, A.R., Park, M., Tomsich, E.A. and Jennings, W.G. (2010). Dating violence perpetration and victimization among South Korean college students: A focus on gender and childhood maltreatment. <i>Journal of Interpersonal Violence</i> , (epub ahead of print).
135. Republic of Korea	Ju, S. and Lee, Y. (2010). Experiences of family maltreatment by Korean children in Korean National Protective Services. <i>Child Abuse and Neglect</i> , 34, 18-27.
136. Republic of Korea	Kim, J. and Kim, K. (2014). Behavioral and musical characteristics of the children who are exposed to child maltreatment and poverty in South Korea: A survey. <i>Child Abuse and Neglect</i> , 38(6):1023-32.
137. Republic of Korea	Kim, Y.S., Koh, Y.J. and Leventhal, B.L. (2005). School bullying and suicidal risk in Korean middle school students. <i>Pediatrics</i> , 115, 357-363.
138. Republic of Korea	Kim, S.S., Jang, H., Chang, H.Y., Park, Y.S., and Lee, D.W. (2013). Association between childhood adversities and adulthood depressive symptoms in South Korea: Results from a nationally representative longitudinal study. <i>BMJ Open</i> , 3:e002680.
139. Republic of Korea	Kim, Y.S., Leventhal, B.L., Koh, Y.J., Hubbard, A. and Boyce, W.T. (2006). School bullying and youth violence: Causes or consequences of psychopathologic behavior? <i>Archives of General Psychiatry</i> , 63, 1035-1041.
140. Republic of Korea	Kim, J., Park, S. and Emery, C.R. (2009). The incidence and impact of family violence on mental health among South Korean women: Results of a national survey. <i>Journal of Family Violence</i> , 24, 193-202.
141. Republic of Korea	Lee, S.H., Kim, K.H., Kim, J.S. and Kim, K.S. (2012). Influence of personal characteristics, child abuse and stressful experience on suicidal ideation in middle school students. <i>Journal of Korean Ac Comm Health Nursing</i> , 23(4):386-394.
142. Republic of Korea	Park, S.K., Kim, H.S., Kim, H. and Sung, K.T. (2007). Exploration of the prevalence and correlates of substance use among sheltered adolescents in South Korea. <i>Adolescence</i> , 42(167), 603-616.
143. Singapore	Back, S.E., Jackson, J.L., Fitzgerald, M., Shaffer, A., Salstrom, S. and Osman, M.M. (2003). Child sexual abuse and physical abuse among college students in Singapore and the United States. <i>Child Abuse and Neglect</i> , 27, 1259-1275.

Table 2: Included consequences studies (continued)

Country	Study Reference
144. Singapore	Choo, H., and Shek, D. (2013). Quality of parent-child relationship, family conflict, peer pressure, and drinking behaviors of adolescents in an Asian context: The case of Singapore. <i>Soc. Indic. Res.</i> 110:1141-1157.
145. Thailand	The Asian Research Center for Migration (ARCM). (n.d.). Migrant children in difficult circumstances in Thailand. Chulalongkorn University: ARCM.
146. Thailand	Berger and Glind chapter in ILO. (2001). Thailand-Lao People's Democratic Republic and Thailand-Myanmar Border Areas: Trafficking in children into the worst forms of child labour: A rapid assessment. Wille, C. Geneva: ILO-IPEC.
147. Thailand	Chaopracha, S. and Jirapramukpitak. (2010). Child abuse and risky behaviours among youths. <i>Journal of the Medical Association of Thailand</i> , 93(S7):S160-165.
148. Thailand	ECPAT International. (2003). A survey report: Our children at risk online the example of Thailand. Bangkok: ECPAT International.
149. Thailand	Farley, M., Cotton, A., Lynne, J., Zumbek, S., Spiwak, F., Reyes, M.E. ...Sezgin, U. (2004). Prostitution and trafficking in nine countries. <i>Journal of Trauma Practice</i> , 2(3):33-74.
150. Thailand	ILO-IPEC. (2001). Asian Regional Meeting on the Worst Forms of Child Labour, Phuket, Thailand 1999. Bangkok: International Labour Office.
151. Thailand	ILO. (2002). Thailand child labour in illicit drug activities: A rapid assessment. Sunthornkajit, V., Kaiyanunta, T., Varavarn, P and Varatechakongka, S. Geneva: ILO.
152. Thailand	ILO. (2006). The Mekong Challenge. Working Day and Night: The plight of migrant child workers in Mae Sot, Thailand. Geneva: ILO.
153. Thailand	ILO. (2006b). The Mekong Challenge. Underpaid, Overworked and Overlooked: The realities of young migrant workers in Thailand (Volume 1). Geneva: ILO.
154. Thailand	Jirapramukpitak, T., Harpham, T. and Prince, M. (2011). Family violence and its 'adversity package': a community of family violence and adverse mental outcomes among young people. <i>Social Psychiatry and Psychiatric Epidemiology</i> , 46(9):825-31.
155. Thailand	Jirapramukpitak, T. (2005). The experience of abuse and mental health in the young Thai population. <i>Social Psychiatry and Psychiatric Epidemiology</i> , 40, 955-963.
156. Thailand	Kerley, K.R., Xu, X., Sirisunyaluck, B. and Alley, J.M. (2010). Exposure to family violence in childhood and intimate partner perpetration or victimization in adulthood: Exploring intergenerational transmission in urban Thailand. <i>Journal of Family Violence</i> , 25, 337-347.
157. Thailand	Kongsakon, R., Bhatanaprabhabhan, D. and Pocham, N. (2008). Impact of domestic violence: a study in communities of Bangkok Metropolitan, Thailand. <i>ASEAN Journal of Psychiatry</i> , 9(2):55-64.
158. Thailand	Trangkasombat, U. (2008). Sexual abuse in Thai children: A qualitative study. <i>Journal of the Medical Association of Thailand</i> , 91(9), 1461-7.
159. Thailand	UNICEF. (2008). Everyday fears: A study of children's perceptions of living in the southern border area of Thailand. Bangkok: UNICEF.
160. Thailand	Wakai, K., Miura, H. and Umenai, T. (2005). Effect of working status on tobacco, alcohol, and drug use among adolescents in urban area of Thailand. <i>Addictive Behaviors</i> , 30, 457-464.
161. Thailand	Chaopracha S, Lerthattasilp T and Pimsungkul K (2011) Parenting, Parent and Child Mental Health in the Families of Maltreated Children Registered with the Child Protection Unit, Thammasat University Hospital. <i>Journal of Medical Association Thailand</i> 94(7):S86-94.
162. Timor-Leste	ALOLA Foundation. (2004). Trafficking in East Timor: A look into the newest nation's sex industry. Dili: Alola Foundation.
163. Timor-Leste	PRADET Timor Lorosa'e and UNICEF East Timor. (2002). An investigation on child abuse and commercial sexual exploitation of children (CSEC) in East Timor: A one month pilot study preliminary report. Dili: PRADET.
164. Viet Nam	ActionAid International Viet Nam. (2005). Synthesis report of three research studies Cambodia, Taiwan (China), Viet Nam on the trafficking of Vietnamese women and children. Viet Nam: ActionAid.
165. Viet Nam	Human Rights Watch. (2006). "Children of the dust": Abuse of Hanoi street children in detention. New York: Human Rights Watch.

Table 2: Included consequences studies (continued)

Country	Study Reference
166. Viet Nam	ILO. (2002). Children in prostitution in Hanoi, Ho Chi Minh City and Can Tho: A Rapid Assessment. Duong, L.B. Bangkok: International Labour Office.
167. Viet Nam	Krantz, G. and Vung, N.D. (2009). The role of controlling behavior in intimate partner violence and its health effects: A population based study from rural Viet Nam. <i>BMC Public Health</i> , 9 143-153.
168. Viet Nam	Le, M.T.H., Nguyen, H.t., Tran, T.D., and Fisher, J.R.W. (2012). Experience of low mood and suicidal behaviors among adolescents in Viet Nam: Findings from two national population-based surveys. <i>Journal of Adolescent Health</i> , 51:339-348.
169. Viet Nam	Nguyen, H.T., Dunne, M.P. and Le, A.V. (2009). Multiple types of child maltreatment and adolescent mental health in Viet Nam. <i>Bulletin of the World Health Organization</i> , 87, 22-30.
170. Viet Nam	Nguyen, H.T., Child maltreatment in Viet Nam: Prevalence and associated mental and physical health problems. PhD thesis, Queensland University of Technology, 2006.
171. Viet Nam	Rubenson, B., Anh, N.T.V., Höjer, B. and Johansson, E. (2004). Child domestic servants in Hanoi: Who are they and how do they fare? <i>The International Journal of Children's Rights</i> , 11, 391-407.
172. Viet Nam	Rubenson, B., Hanh, L.T., Höjer, B. and Johansson, E. (2005). Young sex-workers in Ho Chi Minh City telling their life stories. <i>Childhood</i> , 12, 391-411.
173. Viet Nam	Ruiz-Casares, M. and Heymann, J. (2009). Children home alone unsupervised: Modeling parental decisions and associated factors in Botswana, Mexico, and Viet Nam. <i>Child Abuse and Neglect</i> , 33, 312-323.
174. Viet Nam	Rushing, R., Watts, C. and Rushing, S. (2005). Living the reality of forced sex work: Perspectives from young migrant women sex workers in Northern Viet Nam. <i>Journal of Midwifery and Women's Health</i> , 50(4), e41-e44.
175. Viet Nam	Rydström, H. (2006). Masculinity and punishment: Men's upbringing of boys in rural Viet Nam. <i>Childhood</i> , 13, 329-348.
176. Viet Nam	UNESCAP. (2000). Sexually abused and sexually exploited children and youth in Viet Nam: A qualitative assessment of their health needs and available services in selected provinces. New York: UN.
177. Viet Nam	Vung, N.D. and Krantz, G. (2009). Childhood experiences of interparental violence as a risk factor for intimate partner violence: A population-based study from northern Viet Nam. <i>Journal of Epidemiology and Community Health</i> , 63, 708-714.
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