Violence against children in Latin America and the Caribbean 2015-2021

A systematic review

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All of the countries in Latin America and the Caribbean (LAC) region have adopted the Sustainable Development Goals and have made a significant commitment to increasing evidence on, and accelerating action towards, eliminating violence against children including harmful practices, eliminating gender-based violence against women and girls, and creating safe, non-violent and inclusive environments, as well as significantly reducing all forms of violence and related deaths over the next decade.

This study, commissioned by the UNICEF Latin America and Caribbean Regional Office (LACRO), is a systematic review of the prevalence, drivers, and consequences of violence against children (VAC) and the evaluated interventions that seek to prevent violence in the region. This review assessed 262 studies conducted in the region since 2015, including reviewing and conducting secondary analyses on 72 datasets.

Evidence from this review shows how violence against children is prevalent in the region and can be deeply damaging to children and adolescents. Regional data adds new findings to the global evidence base. Analyses show how violence conspires unevenly to create and maintain inequalities between and within countries. However, strong evaluation data from the region also shows that violence against children is preventable.

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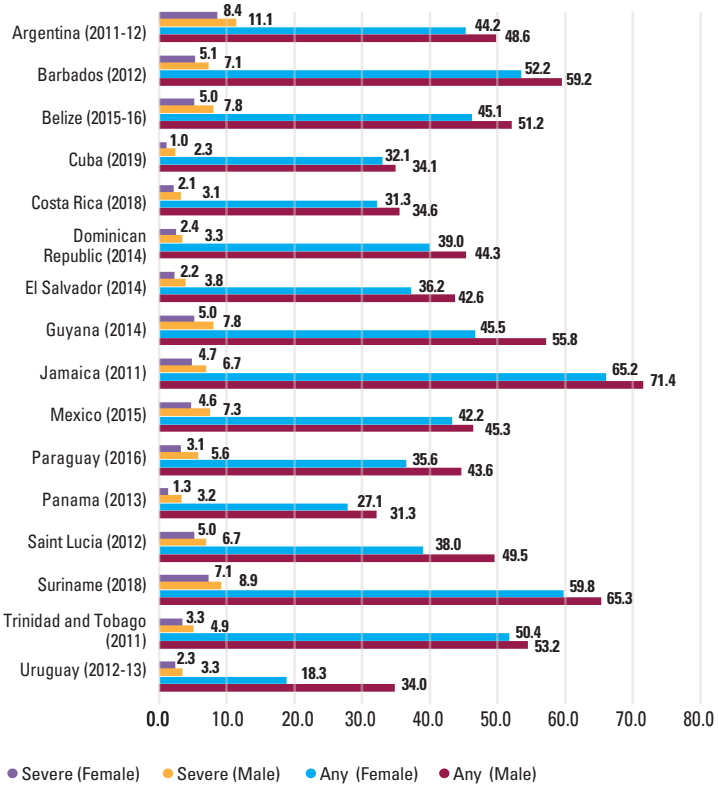
Magnitude of violence against children in Latin America and the Caribbean

Prevalence of violent discipline, 1-14 years

Prevalence (%) of physical punishment (any and severe), experienced by children aged 1–14 years, in 16 LAC countries—MICS (2011–2019)



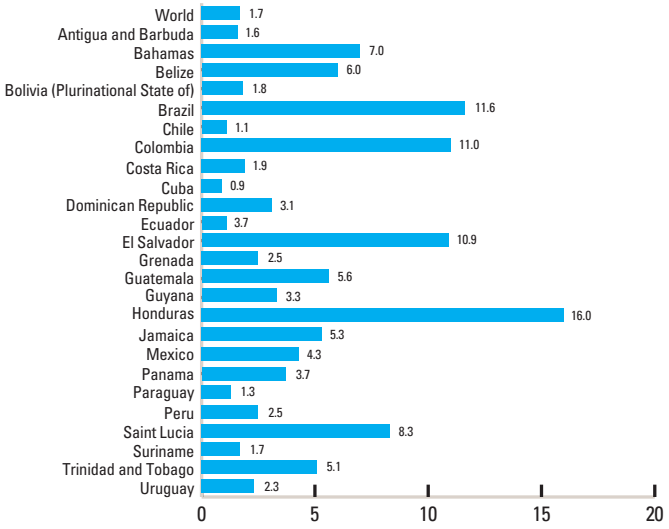
Source: Multiple Indicator Cluster Survey (MICS) datasets from 2011–2019, <https://mics.unicef.org/surveys>.

Overall, boys and girls in the LAC region experience similar levels of physical punishment (both 'any' and 'severe').

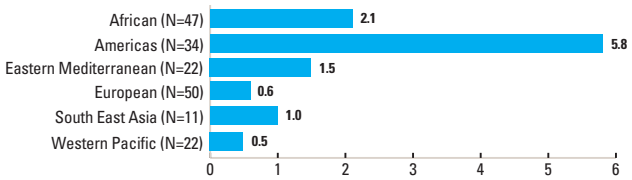
Homicide

The homicide rate per 100,000 population for children aged 0–17 years is between 1–8% for most countries, with 4 countries (Brazil, Colombia, El Salvador and Honduras) above 10%.

Homicide rates per 100,000 population for children aged 0–17 years, in 25 LAC countries—WHO Global Health Estimates (2017)



Global homicide rates per 100,000 population for children aged 0–17, in regions of the world—WHO Global Estimates (2017)

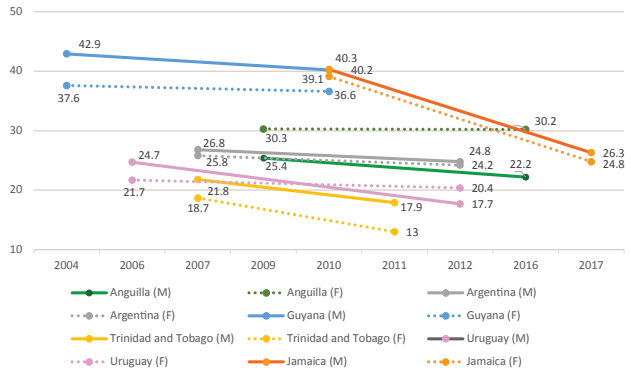


Source: Pan American Health Organization (2020) , based on WHO Global Estimates (2019), <https://iris.paho.org/bitstream/handle/10665.2/53038/9789275122945_eng.pdf?sequence=3&isAllowed=y>.

The Americas has the highest homicide rate in the world. When looking at the gender breakdown, homicide rates are higher among boys (9.3 per 100,000) than among girls (2.1 per 100,000), although the homicide rate among girls is almost two times the global rate for girls (1.1 per 100,000).

Bullying in schools

Prevalence (%) of bullying victimization (boys and girls) on one or more days during the 12 months before the survey at two survey points, in 6 LAC countries—GSHS (2004–2017)

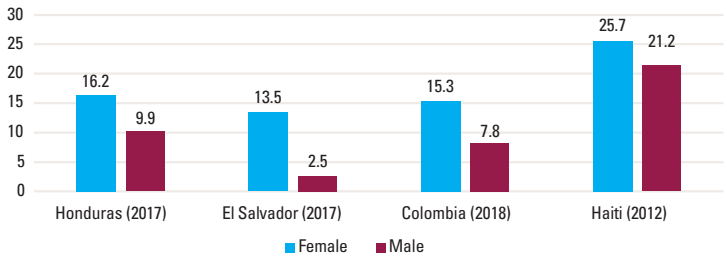


Source: Global School-based Student Health Survey (GSHS) datasets from 2004–2017, <www.who.int/teams/noncommunicable-diseases/surveillance/data>.

Although bullying is still a concern in the region, it is slightly declining for both boys and girls in countries that have at least two time points of data in the Global School-based Student Health Survey (GSHS).

Sexual violence

Prevalence (%) of sexual violence prior to age 18, among 18–24 year-olds, in 4 LAC countries—VACS (2012–2018)



Source: Violence Against Children Survey (VACS) datasets from 2012–2018, <www.togetherforgirls.org/violence-children-surveys>.

Recent studies have found that, on average, 1 in every 6 girls and 1 in every 10 boys in the region have experienced sexual violence, with important country variations.

Apart from the VACS data for the few countries presented above, there is a lack of sexual violence data in the LAC region.

Latin America and the Caribbean in context

The demographic trend in Latin America and the Caribbean region is of an aging population. The LAC region is home to more than 653 million people across 48 countries, and children and young people represent nearly one-third of the population. Over the years, the age group 0–14 years has been declining and there has been an increase in the age groups 15–64 years and 65 years and above (World Bank, n.d).

Latin America and the Caribbean is one of the most disaster-prone regions in the world. It was designated as the second-most disaster-prone region during the decade 2000–2019 (UNOCHA, 2020). The region experiences a wide range of disasters including volcanic eruptions, hurricanes, droughts, tsunamis, earthquakes, and floods (Humanitarian Policy Group, 2008).

Latin America and the Caribbean region is characterized as multi-cultural and multi-ethnic. There is a rich and diverse mix of people, which can be traced back to the region's history. Indigenous people and people of Afro-descendant make up a significant portion of the diversity. According to UNICEF (2009), Latin America consists of 522 indigenous people speaking 420 distinct languages.

This map is stylized and not to scale. It does not reflect a position by UNICEF on the legal status of any country or area or the delimitation of any frontiers.

Latin America and the Caribbean is one of the regions that experiences the most armed violence and insecurity in the world

The region is home to only **8% of the world's population,** however, it has **44% of the homicides** (Muggah & Aguirre, 2018).

The rates of crime and homicide in the region **vastly exceed** the global average. For instance:

32%
the global burden of homicides involving firearms

67%
proportion reached in Central America

51%
proportion reached in the Caribbean

(Muggah & Aguirre, 2018).

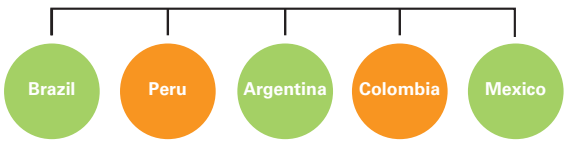
Both violence and the growing economic disparity in LAC countries have led to forced displacement and internal and external migration.

Slow economic growth in Latin America and the Caribbean region has been compounded by COVID-19, leading to high levels of poverty and social inequality. Prior to the COVID-19 pandemic, poverty was already more acute among children, women, indigenous people, people of Afro-descendant, and people living in rural areas (CEPAL, 2019).

The COVID-19 pandemic continues to affect the region extensively, in all political, social and economic spheres. As of writing this summary report (in 2021), the cases of COVID-19 are increasing throughout the region. The capacity to respond to the crisis with healthcare services varies in the different LAC countries and has been especially challenging considering the economic crises, natural disasters and political disturbances experienced in the region in recent years (ECLAC, 2020).

18.9%
COVID-19 cases in Latin America and the Caribbean region

+22
million of confirmed cases
(as of 9 March 2021)



Latin America and the Caribbean region contain 18.9% of the world's COVID-19 cases, making the confirmed cases more than 22 million, as of 9 March 2021. Brazil, Peru, Argentina, Colombia and Mexico have the highest number of deaths in the region, and the region has the second highest number of deaths in the world, **with almost 1.38 million deaths** (32% of the world's COVID deaths) (Congressional Research Service, 2021).

Economic hardship combined with increasing pressure on families and health and social care systems are exacerbating risk factors for violence against children and decreasing access to services.

Drivers of violence affecting children

A socio-ecological model

Based on data from 100 studies

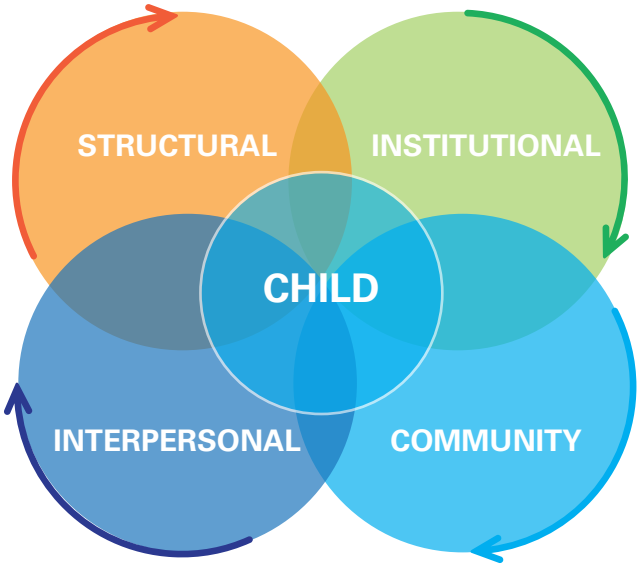
While risk and protective factors reflect the likelihood of violence occurring due to characteristics most often measured at the individual, interpersonal, and community levels, the drivers refer to macro-level structural and institutional factors that influence a child's risk of, or protection from, violence.

Structural drivers:

- Gender based social norms (machismo)
- Armed violence, crime, and insecurity
- Social and economic disparities
- Migration and (forced) displacement
- Crises and humanitarian settings, such as the COVID-19 pandemic

Institutional drivers:

- Weak child protection systems



Community level:

Risk factors

- Living in neighbourhoods with combined prevalence of armed violence and poverty
- Social norms that legitimize and naturalize violence

Protective factors

- Positive environments and positive bonds among community members

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Interpersonal level:

Risk factors

- Economic hardship and social vulnerability
- Drug use
- Caregivers age, mental ill health, and own childhood abuse experience
- Beliefs around the use of violence (social and gender norms)
- Negative parenting styles
- Having experienced violence in the past is a risk factor for experiencing other forms of violence (polyvictimization)

Protective factors

- Caregiver's knowledge and skills to identify and prevent violence

Individual level risk factors for victimization and perpetration:

Risk factors

- Age and gender
- Beliefs that condone the use of violence, including gender social norms
- Externalizing behaviours by the child
- Disability
- Consuming alcohol
- Being 'different' from the 'norm'

Protective factors

- Social skills and information on where to seek support
- Engagement in physical activity

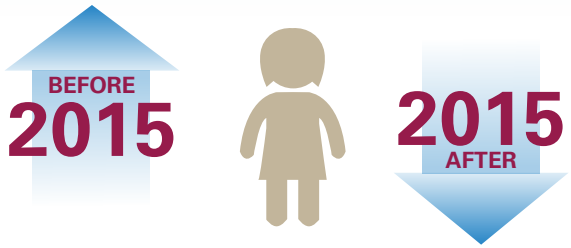
Very few studies have measured protective factors against the use of violence, with most focusing on risk factors for experiencing or perpetrating violence. While protective factors can be the opposite of risk factors, more research is needed in this area.

These drivers and risk factors all create an environment for increased interpersonal violence, but are also underpinned by *structural violence* or "the patterns of differences within large-scale social structures—differences of power, wealth, privilege, education and health—that are unjust and unequal", as they relate to violence against children (UNICEF, 2018). Some examples include age, gender, religion, ethnicity, geography, disability, socio-economic status, and access to education, among other things.

Snapshot: VAC data pre- and post-2015

Prevalence:

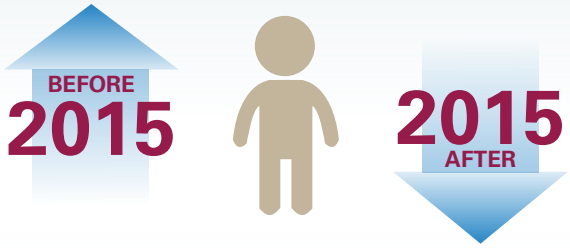
- **Measuring violence against children in the region started with the Violence Against Children Surveys (VACSs), with the first undertaken in Haiti in 2012.** These surveys are important because, for the first time, a nationally representative survey specifically on violence against children has been implemented in multiple countries, making comparison across countries in different regions possible.
- **Violence against children is prevalent in every country where it is measured.** Every survey conducted to date on violence against children in the LAC region has found that it is a significant issue and prevalent for both boys and girls.



- **More holistic treatment of violence against children is needed**. The global post-2015 data highlights that violence occurs across a child's social ecology and is not limited by setting or type. Of particular importance is the link between community violence and violence that occurs in the home (the municipality homicide rate and presence of armed groups were identified as risk factors for violent discipline in the home) and at school (gang and armed violence in the community transfers across settings and continues in schools).
- **We also need more information on violence against children by age and gender**. While the field still has a long way to go in terms of fully disaggregated data, important gender differences have emerged in recent data, including boys being more at risk of homicide and armed violence and that both boys and girls experience violent discipline in the home in roughly equivalent numbers. Post-2015 data has also highlighted the increased risk of non-gender conforming children experiencing violence, especially in school.
- **Trend data shows some declines in violence.** Both violent discipline in the home and bullying in schools among both boys and girls appear to be declining in most LAC countries with multiple data points (with a few exceptions). Further research is needed on the policies and programmes that may have contributed to these declines. However, **other areas of violence appear to be increasing, such as armed violence resulting in homicide of children and young people.**

Drivers:

- Research started to focus on gender norms among adolescent boys and how machismo norms influence everything from gang membership and armed violence to bullying and adolescent intimate partner violence (IPV).



- **Negative gender norms and inequalities linked to machismo** which create an environment in which violence against both girls and boys is more likely to happen, continue to be strong risk factors as well as structural drivers across countries in the region.
- Data is beginning to emerge showing **links between histories of violence in the region and children's perceptions and behaviours related to the acceptability of the use of violence in certain situations.**

Consequences:

- An instrumental secondary analysis of Demographic (and Reproductive) Health Survey (DHS/RHS) datasets conducted by the Pan American Health Organization (PAHO, 2020) highlighted the **links between violence against women and violence against children across the region.**

- **Violence against children impacts on the health and education of children:** A significant body of evidence in the region shows that violence in childhood has a significant impact on the physical and mental health of children and is linked to suicide ideation, especially among young girls, across the region. Violence in childhood also significantly impacts on education and learning outcomes for children—impacting on both children's concentration and connectedness with school, but also their education progression, among other things.

Consequences of violence against children

A total of 64 studies published between 2015 and 2021 explored these linkages and found consequences in four areas:

Physical and mental health outcomes

- Low self-efficacy
- Psychological distress, including fear and loneliness
- Suicidal ideation or suicide attempts
- Self harm
- Lack of adequate sleep
- Negative impacts on the overall quality of children's physical health (e.g., oral health)
- Neurobiological disorders
- Exacerbation of other pre-existing conditions

Social outcomes

- Negative impacts on children's ongoing and future relationships with peers, their caregivers and members of their communities
- Increased risk of replicating violent behaviours
- Negative impact on children's attitudes and beliefs around violence, which heightens the risk of perpetuating negative social norms
- Child migration and forced displacement

Education and learning outcomes

- Poor learning outcomes
- Increased concentration and cognitive difficulties
- School drop out and other negative education progression outcomes
- Climate of generalized fear at school

Behavioural outcomes

- Substance use, including drugs and alcohol
- Early smoking initiation
- Aggressive behaviour
- IPV perpetration
- IPV victimization

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The links between violence against children and education and learning outcomes

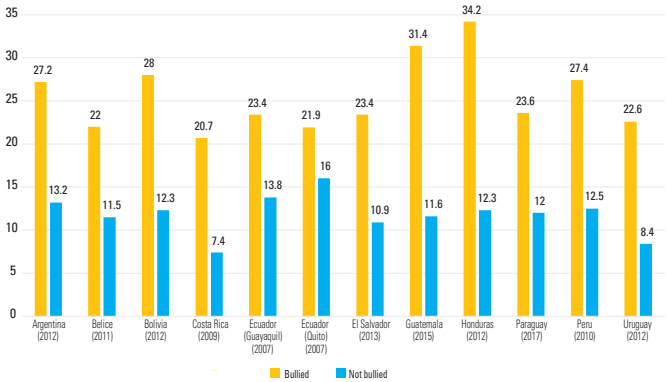
Findings from a secondary analysis of Third Regional Comparative and Explanatory Study on Education Quality (TERCE) data in the LAC region found that a **child's self-reported fear in school** was the most robust and consistent indicator of low reading scores in 15 countries (Chávez et al., 2020).

Impacts of **witnessing violence among caregivers** on children's school attendance were found in a Mexican randomized controlled trial. Overall, 23.3% of women reported their child's school attendance was disrupted due to intimate partner violence (Scolese et al., 2020).

Recent case-control studies in both Brazil and Colombia found **more pronounced cognitive impairments in those children who had experienced violence** in all tasks (Nuñez et al., 2017), and adolescents who had experienced violence performed below the control group in almost all domains of executive cognitive function, including abstract abilities, cognitive flexibility, motor planning, and sensitivity to interference (Cunha et al., 2015).

Links between violence against children and suicide ideation and self-harm

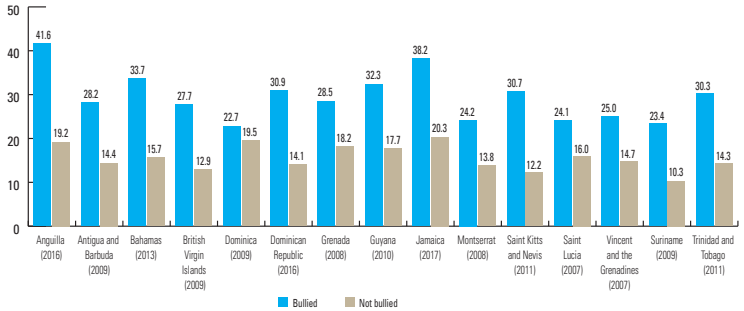
Prevalence (%) of students aged 13–15 who seriously considered attempting suicide who were bullied, versus non-bullied, in 11 Latin American countries—GSHS data (2007–2017)



Source: Global School-based Student Health Survey (GSHS) datasets from 2007–2017, <www.who.int/teams/noncommunicable-diseases/surveillance/data>.

Over a quarter of adolescents who reported **contemplating suicide** in Argentina, Bolivia, Guatemala, Honduras, and Peru and approximately 1 in 5 adolescents in Belize, Costa Rica, Ecuador, Paraguay and Uruguay had also been bullied (GSHS data).

Prevalence (%) of students aged 13–15 who seriously considered attempting suicide who were bullied, versus non-bullied, in 15 Caribbean countries—GSHS data (2007–2017).



Source: Global School-based Student Health Survey (GSHS) datasets from 2007–2017, <www.who.int/teams/noncommunicable-diseases/surveillance/data>.

Between one-half to over a third of adolescents in the Caribbean who **contemplated suicide** also experienced bullying in the past month, with large percentages seen in Anguilla and Jamaica (GSHS data).

Self-harm is among the top five causes of death for both younger and older adolescents in the region. Among younger female adolescents, it is the top reason for cause of death in countries that measure this data (WHO Maternal, Newborn, Child and Adolescent Health Data Portal).

<www.who.int/data/maternal-newborn-child-adolescent-ageing/indicator-explorer-new>.

Evaluated interventions to prevent violence against children

Implementation and enforcement of laws

Fewer policy evaluations for VAC have been conducted post-2015 than for other areas of INSPIRE, but data highlight the following:

- Less than a third of countries in the LAC region ban corporal punishment in all areas.
- Evaluations of small arms policies highlight how measurement needs to be improved, particularly around three indicators: the seizure of firearms, arms prices on illicit markets, and firearm homicides.
- The enforcement of existing laws and policies was identified as a key area of concern across countries in the region.

Norms and values

Norms and values interventions in the region are often combined with education and life skills, as well as other INSPIRE strategies. A few examples include Cure Violence in Honduras, which has proved to be effective in reducing armed violence, particularly among gangs. In Mexico, the *Amor… pero del Bueno* (True Love) programme has shown positive results in reducing the prevalence of perpetrating and experiencing psychological violence, as well as significantly reducing attitudes and beliefs used to justify sexism and violence in dating relationships in high schools in Mexico City.

Safe environments

Hot-spots policing (which focuses resources on a small number of areas with high crime rates) and problem-oriented policing (a preventive strategy that tailors response interventions to increase the chances of apprehending an offender and reduce opportunities for criminal behavior) have been shown to be effective in reducing community violence in the region. Data from Guatemala suggests that criminal justice response interventions may also be effective in increasing the reporting of sexual violence against children and changing social norms around reporting.

Parenting and caregiver support

There is a growing body of evidence in the LAC region that programmes aimed at preventing and reducing violence against children that target parents and caregivers are effective. Examples of programmes with post-2015 evaluations include:

- Roving Caregiver Programme (Grenada)
- Nadie es Perfecto (NEP) (Nobody is Perfect) (Chile)
- Programa Internacional de Desarrollo Infantil (ICDP) (International Child Development Programme) Colombia
- Día a Día (Day by day) (Chile)
- Lobi Mi Pikin (LMP) (Suriname)
- Projeto Parceria's positive parenting unit (Brazil)
- Triple P (Chile)

Income and economic strengthening

There is a strong body of evidence on cash transfer programmes in the region. The evaluations related to VAC tend to measure the impact of cash transfers on intimate partner violence or community violence.

- There are promising findings on the impact of cash transfers on preventing IPV in the household, especially for educated women.
- Emerging evidence cautions that IPV may increase among cash transfer families with a large number of children, but further research is needed in this area.
- Cash transfers have also been found to reduce community violence and lessen the impact of crime on youth and adolescents.

Response and support services

Response and support services have been found to be effective in responding to VAC and supporting children's wellbeing following violence, particularly interventions aimed at providing children with mental health and psychosocial support services (MHPSS). Examples of programmes with post-2015 evaluations include:

- Psychotherapy and cognitive behavioural group therapy for sexually abused children (Chile and Brazil)
- Spiritually Oriented Trauma-Focused Cognitive Behavioural Therapy (SO-TFCBT) for child victims of restavek (a form of modern-day slavery) (Haiti)
- Family and individual psychosocial support services through the Equilibrium Program (TEP) for children and adolescents (Brazil)

Education and life skills

Education and life skills interventions have been shown to prevent bullying, IPV, and physical aggression. These interventions are often combined with norms programming. Examples of programmes with post-2015 evaluation published include:

- Active-Start (Chile)
- *Amor… pero del Bueno* (True Love) programme (Mexico)
- Theatre of the Oppressed (Brazil)
- *Aulas en Paz* (Classrooms in Peace) (Colombia)
- IRIE Classroom Toolbox (Jamaica)

Implementation and enforcement of laws

Norms and values

Safe environments

Parent and caregiver support

Income and economic strengthening

Response and support services

Education and life skills

Methodology

This study began with a **systematic review** of the qualitative and quantitative literature on the prevalence, drivers, risk and protective factors, and consequences of violence affecting children in the 36 countries of Latin America and the Caribbean region published between 2015–2021, as well as a systematic review of evaluated interventions to prevent VAC in countries in the region. This was complimented by a **secondary analysis** of 30 Global School-based Student Health Survey (GSHS) datasets, as well as data from an additional 42 datasets from Multiple Indicator Cluster Surveys (MICSs), Demographic (and Reproductive) Health Surveys (DHSs/RHSs), the Third Regional Comparative and Explanatory Study (TERCE), and Violence Against Children Surveys (VACSs). These were complimented by **in-depth interviews** with 8 participants to capture the pre-2015 landscape and contextualize the findings within the LAC region.

This systematic review assessed 262 studies published in the region between 2015–2021. Of these, a total of 75 articles and reports had prevalence data, 100 had data on drivers of violence, 64 had data on consequences and 60 presented data from evaluations of interventions. Finally, 37 studies presented data on multiple areas (between prevalence, drivers, consequences and interventions).

Next steps

- The findings of this systematic review will be used to inform and contribute to better evidenced based programmes and policies in the region.
- This systematic review will be used as a baseline of the evidence base for future studies.

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This synthesis is a complement to the report Violence against children and adolescents in Latin America and the Caribbean 2015-2021: A Review systematic.
To access the full report, please visit: www.unicef.org/lac

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