



Preventing violence against children 2020



*Status report for
the WHO Eastern
Mediterranean Region*



**World Health
Organization**

REGIONAL OFFICE FOR THE **Eastern Mediterranean**

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Violence against children in the Eastern Mediterranean Region

Key facts

- › In 2017, an estimated 10% of the global child homicides occurred in the Eastern Mediterranean Region, which has the third highest estimated child homicide rates in the world (1.5 per 100 000 children).
- › The male child homicide rate is higher than that for females in most participating countries from the Region.
- › In 56% of countries in the Region, child homicide is reported from police or vital registry records.
- › In most of the countries that reported child homicide data, there is a substantial gap between what is reported and what is estimated by WHO.
- › Other, mostly non-fatal forms of violence against children (e.g. bullying, child maltreatment) greatly outnumber homicides in the Region and 61% of participating countries have data on these other forms of violence from internationally comparable nationally representative surveys, including 56% which have data from the Global School-based Student Health Survey.
- › Most participating countries allocate responsibility for addressing violence against children to multiple government sectors.
- › At least one national action plan to prevent violence against children with

Box 1. SDG and WHO child injury prevention targets and mandates

SDG Target 16.2: End abuse, exploitation, trafficking and all forms of violence against and torture of children.

WHO GPW 13 Target 17: Decrease the number of children subjected to violence in the past 12 months, including physical and psychological violence by care givers in the past month, by 20%.

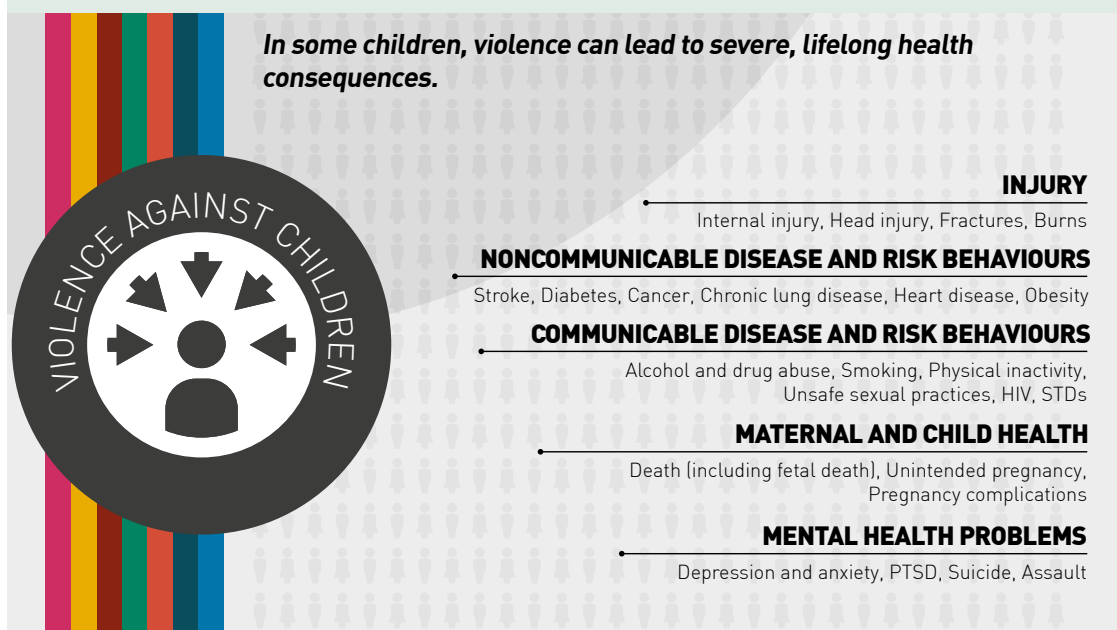
Regional Vision 2023: prioritizes promoting healthier populations through addressing risk factors across the life course and expanding universal health coverage both in development and emergency contexts.

some funding exists in 83% of countries, but only one third have measurable

- › targets to monitor the progress in implementation of these plans.
- › The majority of countries in the Region have laws for preventing violence against children but enforcement of these laws was rated as inadequate.
- › Ratings of the application of the INSPIRE¹ strategies in the Region showed that the education and life skills approaches have most frequently received high reach ratings. However, none of the INSPIRE approaches is perceived by all countries as receiving sufficient support to reach all or nearly all those who need them.
- › Both prevention and response approaches need further strengthening in the Region.

¹INSPIRE serves as a technical package and handbook for selecting, implementing and monitoring effective policies, programmes and services to prevent and respond to violence against children. It comprises seven evidence-based strategies on the: Implementation and enforcement of laws; Norms and values; Safe environments; Parent and caregiver support; Income and economic strengthening; Response and support services; and Education and life skills.

Fig 1. Potential health consequences of violence against children



Background, context, and method

Violence affects the lives of up to 1 billion children globally, with long-lasting and costly health, emotional, social and economic consequences for children, families, communities, and nations. The impact on health and well-being can be detrimental. Beyond deaths, violence against children can lead to injuries and a myriad of adverse physical and mental health consequences that children endure as they grow into adults (Fig. 1). It is therefore critical that prevention and control of violence against children is an inherent component of overall child health and development.

Nevertheless, violence against children is predictable and can be prevented. Moreover, governments have committed to ending it through their adoption of targets within the Sustainable Development Goals (SDGs). Governments are also committed to achieving the related targets of WHO's Thirteenth General Programme of Work and *WHO's strategy for the Eastern Mediterranean Region (2020–2023) - Turning Vision 2023 into action*, both representing joint obligations of WHO and its Member States (see Box 1).

Evidence-based guidance on what works to prevent and respond to violence against children is readily accessible in the seven INSPIRE strategies (see Table 1, Box 2). This evidence shows that 20–50% decreases in prevalence have been achieved by well designed programmes, many of which have been implemented in low- and middle-income countries. Rapid reductions in violence are clearly possible when there exists political will and strong leadership, evidence-based policies and interventions, and adequate finance.

The Global status report on preventing violence against children 2020, developed through consultation with Member States, measures the extent to which governments around the world are taking evidence-based actions to achieve the SDG targets on ending violence against children drawing on the INSPIRE strategies and provide a baseline against which governments can monitor their progress. It focuses on interpersonal violence that accounts for most acts of violence against children, and includes child maltreatment, bullying and other types of youth violence, and intimate partner violence.

As indicated in the *Global status report on preventing violence against children 2020*, the pandemic and the response to it have demonstrated the linkages between

² Hillis S, Mercy J, Amobi A, Kress H. Global prevalence of past-year violence against children: a systematic review and minimum estimates. *Pediatrics*. 2016;137(3):e20154079.

³ INSPIRE: Seven strategies for ending violence against children. Geneva: World Health Organization; 2018 (https://www.who.int/violence_injury_prevention/violence/inspire-package/en/, accessed 25 January 2021).

Strategy	Approach	Cross-cutting activities
Implementation and enforcement of laws 	<ul style="list-style-type: none"> > Laws banning violent punishment of children by parents, teachers or other caregivers > Laws criminalizing sexual abuse and exploitation of children > Laws that prevent alcohol misuse > Laws limiting youth access to fire-arms and other weapons 	
Norms and values 	<ul style="list-style-type: none"> > Changing adherence to restrictive and harmful gender and social norms > Community mobilization programmes > Bystander interventions 	
Safe environments 	<ul style="list-style-type: none"> > Reducing violence by addressing “hotspots” > Interrupting the spread of violence > Improving the built environment 	
Parent and caregiver support 	<ul style="list-style-type: none"> > Delivered through home visits > Delivered in groups in community settings > Delivered through comprehensive programmes 	<p>Multisectoral actions and coordination</p>
Income and economic strengthening 	<ul style="list-style-type: none"> > Cash transfers > Group saving and loans combined with gender equity training > Microfinance combined with gender norm training 	<p>Monitoring and evaluation</p>
Response and support services 	<ul style="list-style-type: none"> > Counselling and therapeutic approaches > Screening combined with interventions > Treatment programmes for juvenile offenders in the criminal justice system > Foster care interventions involving social welfare services 	
Education and life skills 	<ul style="list-style-type: none"> > Increase enrolment in pre-school, primary and secondary schools > Establish a safe and enabling school environment > Improve children’s knowledge about sexual abuse and how to protect themselves against it > Life and social skills training > Adolescent intimate partner violence prevention programmes 	

Table 1. INSPIRE strategies, approaches and cross-cutting activities for preventing and responding to violence against children

Box 2. INSPIRE strategies, approaches and cross-cutting activities for preventing and responding to violence against children

Launched in 2016, INSPIRE serves as a technical package and handbook for selecting, implementing and monitoring effective policies, programmes and services to prevent and respond to violence against children.

It comprises seven evidence-based strategies for countries and communities working to eliminate violence against children. Each letter of the word INSPIRE stands for one of the seven strategies:

- I** for the implementation and enforcement of laws;
- N** for norms and values;
- S** for safe environments;
- P** for parent and caregiver support;
- I** for income and economic strengthening;
- R** for response and support services; and
- E** for education and life skills.

Each strategy has three or more specific approaches for putting it into effect. There are also two cross-cutting activities (multisectoral action and coordination, and monitoring and evaluation) that connect the seven strategies and monitor the extent of their implementation and impact in addressing the problem. The full INSPIRE package includes a core document that reviews the evidence supporting each of the seven strategies and the approaches within them;² a handbook providing detailed information on implementing the strategies and approaches;⁴ and an indicator framework with guidance on how to monitor the uptake and impact of INSPIRE.⁵ The INSPIRE package is not intended for implementation as a new programme, but rather represents a way of revitalizing, focusing, and expanding current multisectoral efforts to prevent and respond to violence against children.

interpersonal violence and socioeconomic determinants, in which a global surge in domestic violence has been reported. Isolation, restricted movement and stay-at-home measures to contain the spread of the virus in countries across the world, including in the Eastern Mediterranean Region, have a particularly acute impact on families, including women and children, who may be locked in with their abusers.

The global report has also underlined that the likelihood of children being exposed to violence has increased drastically, as family members spend more time in close contact and household stress intensifies, with an even greater risk when families also have to endure potential economic or livelihood losses. Lockdown has also prevented frontline workers in the community, including teachers, social workers, nurses, and physicians, who would be able to detect abuse in the usual circumstances, from reporting suspected

abuse as they no longer had contact with children. An additional factor is the large-scale diversion of health services, including those related to addressing violence against children, to address the pandemic.

In the Eastern Mediterranean Region, information on violence against children in the context of COVID-19 is scarce. However, a review of media reporting of violence against children in the Region, during the first half of 2020 in comparison with the same period in 2019, showed a notable increase in unverified media reports of such violence during the pandemic (starting in March 2020 onwards).

The Global status report on preventing violence against children 2020 calls for more government action and warns of the ‘dramatic impact’ of COVID-19 on violence against children. The focus of global responses to violence against children in the context of COVID-19 has been on

⁴ INSPIRE handbook: action for implementing the seven strategies. Geneva: World Health Organization; 2018 (<https://www.who.int/publications/i/item/inspire-handbook-action-for-implementing-the-seven-strategies-for-ending-violence-against-children>, accessed 25 January 2021).

⁵ INSPIRE indicator guidance and results framework – ending violence against children: how to define and measure change. New York: United Nations Children's Fund; 2018 (https://www.who.int/violence_injury_prevention/violence/inspire-package/inspire-indicator/en/, accessed 25 January 2021).

⁶ Usher K, Bhullar N, Durkin J, Gyamfi N, Jackson D. Family violence and COVID-19: increased vulnerability and reduced options for support. *International Journal of Mental Health Nursing*. First published 20 April 2020 (<https://doi.org/10.1111/inm.12735>).

required actions by governments and communities to strengthen the capacity and resilience of families to manage the stress resulting from anxiety and lockdown.⁶ A number of global efforts have been pursued offering families practical behavioural suggestions for positive and nurturing parent–child relationships and interactions, strategies for avoiding violent discipline and for positive action to cope with any imminent violence. It is also important to note that in some countries COVID-19 also resulted in the disruption of access to, and availability of, required services to respond to cases of violence, especially during the lockdown.

Longer term efforts entail structured and comprehensive action towards operationalizing the seven INSPIRE strategies to build a strong foundation for addressing violence against children at all levels and in all contexts.

Methods

Based on the findings of the *Global status report on preventing violence against children*, this report focuses on the WHO Eastern Mediterranean Region. Of the Region's 22 countries, 18 participated in the global status report survey. A self-administered survey was completed by officials from different government sectors in each country, who then discussed and reached agreement on the responses. Countries reported on the status of their national action plans, laws, indicators, data collection mechanisms, and about programmes and services along the lines of those given as examples under each of the INSPIRE strategies. The final responses were formally cleared by the relevant government ministry, underlying the report's unique value as being the first time ever that governments are self-reporting on their work to specifically address violence against children.

In addition, as part of this project, homicide estimates were produced by

using country-supplied information on the number and proportion of homicide victims aged 0–17 years to adjust existing WHO homicide estimates. The new homicide estimates for 0–17-year-olds underwent a country consultation process for country-level health estimates, before being finalized.

► Main survey findings

Many countries have mechanisms to support national violence prevention work and much of the plans are fully funded, however, just one third have measurable targets.

In the Eastern Mediterranean Region, 89% of the participating countries allocate responsibility for addressing violence against children to multiple government sectors (average of five agencies per country, range 1–9), with the education, health, justice and social sectors most often mentioned. In the remaining countries, the prevention of violence against children is the responsibility of a single sector.

While a high degree of intersectoral collaboration is crucial for preventing violence against children, the likelihood of achieving collective impact is increased when there is a designated lead agency with sufficient authority and resources to orchestrate inputs from these multiple sectors. On average, three agencies per country are listed as having a coordination function, with as many as six listed for one country. When different functions were examined (Table 2), it was noted that health, education, social welfare, and women and child health were the most predominant sectors involved in coordination, designing interventions and monitoring and evaluation to prevent violence against children; while interior, justice, social welfare, and women and child health were most frequently involved in the development and review of legislation. It was also noted that 83% of

Sector	Coordination		National action plans	Legislation	Monitoring and evaluation		Inter-ventions
	Between different ministries (%)	Across levels of government (%)	Development, revision and/or monitoring (%)	Development, revision and/or periodic review (%)	Establishment and support of data systems (%)	Compilation and dissemination of national statistics (%)	Design and delivery (%)
Health	73	82	64	55	73	64	100
Social welfare	80	73	73	67	73	40	100
Education	78	56	67	56	67	44	100
Interior	50	50	20	60	70	40	90
Justice	55	36	36	73	55	27	82
Women and child health	90	100	90	90	60	60	90
Nongovernmental organizations	17	33	67	50	67	67	83
Statistics	25	25	0	25	100	75	25

Table 2. Percentage of institutional function by sector, 2018 (*n*=18 reporting countries)

nongovernmental organizations who took part in the global status report survey in participating countries were involved in designing the country interventions.

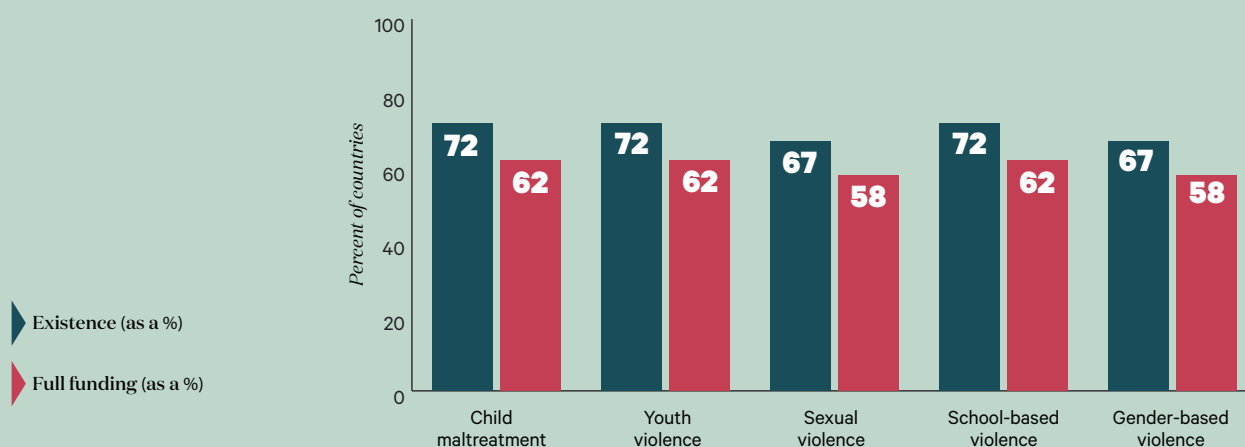
Eighty-three per cent (83%) of countries have at least one national action plan to prevent violence against children and more than half of these plans are fully funded (Fig. 2). Generally, all plans have some funding, even if partial. National action plans were reported:

- to be consistent with, or have written reference to, the INSPIRE technical

document in 33% of countries (Bahrain, Jordan, Kuwait, Lebanon, Morocco and Saudi Arabia);

- to be consistent with, or have written reference to, the WHO Global plan of action on strengthening the role of the health system to address interpersonal violence, in particular against women and girls, and against children (as endorsed by resolution WHA 69.5 in 2016) in 28% of countries (Jordan, Kuwait, Lebanon, Morocco and Saudi Arabia);

Fig 2. Percentage of countries with national action plans by type of violence and funding, 2018 (*n*=18 reporting countries)



- to recognize that violence is a risk factor for the development of health risk behaviours in 28% of countries and territories (Bahrain, Iraq, Sudan, and West Bank and Gaza Strip), which is important because violence has a profound lifelong impact and victims are more likely to engage in health risk behaviours, such as the harmful use of alcohol, drug abuse, cigarette smoking, physical inactivity and over-eating (leading to obesity), and risky sexual behaviour.

Despite many countries having some nationally representative prevalence data (see Box 3), just 17% of countries (Islamic Republic of Iran, Kuwait and Morocco) reported having quantitative baseline and target indicators to monitor the impact of prevention efforts in their national action plans. Such targets are important as they provide a focus for national authorities, and research shows that long-term goals and interim targets lead to increased political will and stakeholder accountability, closer management of strategies and programmes, better and more effective programmes, improved use of public resources, and increased stakeholder motivation.⁷

There are marked differences in the level of government support by INSPIRE strategy

Countries were asked whether they provide some national support such as funding, tools or training (irrespective of the level of enforcement or reach) for local level implementation of each of the seven INSPIRE strategies for ending violence against children. While 56% of countries provide some support, this varies markedly by strategy (see Fig. 3). The most supported strategies are the implementation and enforcement of laws (89% of countries), response and support services (62% of countries), norms and values (61% of countries) and education and life skills (59% of countries). The least

Box 3. Availability of nationally representative prevalence data

Data on the prevalence of violence against children are essential to understand the scale and distribution of the problem, set priorities and target resources, and monitor if and how policy, legal and programmatic prevention efforts are making a difference. The global status report survey revealed that many countries in the Region do not have adequate administrative data systems for reporting child homicides through official sources. Only 44% of countries reported homicides from police records and 11% from civil or vital registration.

Self-reports ascertained via nationally representative surveys are considered the more reliable standard for measuring the magnitude of the problem, identifying vulnerable groups, and measuring progress. In the Eastern Mediterranean Region, 61% of participating countries have data on violence against children available from some internationally comparable nationally representative surveys (Demographic and Health Survey and UNICEF Multiple Indicator Cluster Survey), and 56% have data from the Global School-based Student Health Survey. Completion of these surveys indicates that governments have already shown political will to address the problem, and having such data means they are well prepared to move from data to action. In several instances, the same survey has been repeated at least once, allowing changes over time to be tracked.

implemented strategies in the Region are on safe environment, income and economic strengthening and parent and caregiver support (ranging from 33% to 44% of countries).

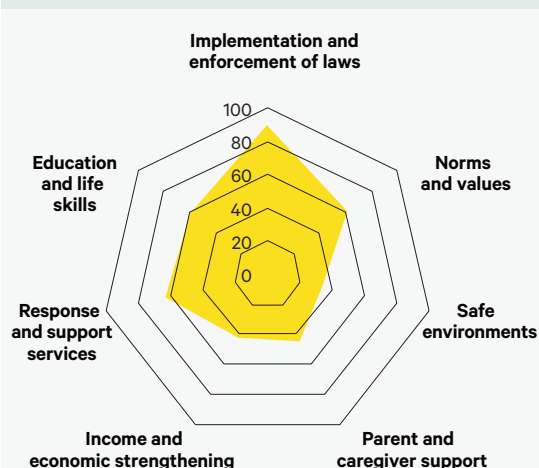
Laws against violence that affects children and laws restricting exposure to alcohol and firearms are widely enacted but often inadequately enforced

To assess the existence of laws and the extent of their enforcement, government respondents were asked to indicate whether a law exists (and to provide a copy of the legislative text), and if so, to provide their best estimate of the likelihood that a person who breaks the law will be sanctioned (i.e. arrested, convicted, penalized, or given a formal warning by a law enforcement agency).

⁷ Quantitative road safety targets. Brussels: European Commission, Directorate General for Transport; 2018.

⁸ Perceived enforcement was assessed using a rating scale ranging from 1 where it was considered highly unlikely that someone breaking the law would be sanctioned, to 10 where respondents considered it highly likely that someone would be sanctioned for breaking the law. The median of the respondents' scores was calculated and assessed according to three levels of enforcement: low enforcement for ratings up to 3.3; medium enforcement for ratings from 3.4 to 6.7, and high enforcement for ratings from 6.8 to 10.

Fig 3. Percentage of countries in the Eastern Mediterranean Region reporting any support for INSPIRE strategies, 2018 (*n=18 reporting countries*)



Of the laws examined, laws to prohibit sexual violence, including statutory rape, contact and non-contact sexual violence exist in 94% of countries. These were followed by laws to regulate civilian access to firearms and to ban corporal punishment (89% of countries) and laws against weapons on school premises (72% of countries). However, the proportion of countries where the perceived enforcement level was considered sufficient to ensure a high likelihood of sanction for people breaking the law is just 58% overall and ranges from 50% for laws against non-contact sexual violence to 72% for laws against statutory rape (Fig. 4).

Prohibiting corporal punishment ensures that children will enjoy equal protection under the law on assault whoever the perpetrator and whether the assault is inflicted as “discipline” or punishment. Corporal punishment should be

prohibited in all settings of children's lives, including home, alternative care settings, day care, schools, penal institutions and as a sentence for crime under state, customary and religious law. Although 89% of countries have a law for prohibiting corporal punishment, only in 63% of countries do these laws cover all settings.

Respondents were asked about legal service legislation for providing victims of violence with compensation and with free/state-funded legal representation in criminal courts. While 72% of countries have laws on providing for victim legal representation, only 33% of countries have laws on providing victim compensation (Islamic Republic of Iran, Iraq, Lebanon, Oman, Sudan and Tunisia).

Most countries (89%) have laws that regulate civilian access to firearms, and most of these laws include restrictions such as a minimum age, criminal history checks, health checks, a time limited licensing period, a waiting period of firearm possession, safe storage and limiting/prohibiting certain types of firearms. Laws in 87% of countries have at least six of these restrictions, and 72% of countries have a registration system to monitor firearm transactions and ownership.

While countries are investing in prevention, decision-makers in every country accept they need to scale up their efforts.

Fig 4. Percentage of countries with national laws to prevent violence and extent to which enforcement was considered sufficient to ensure a high likelihood of people breaking the laws being sanctioned, 2018 (*n=18 reporting countries*)

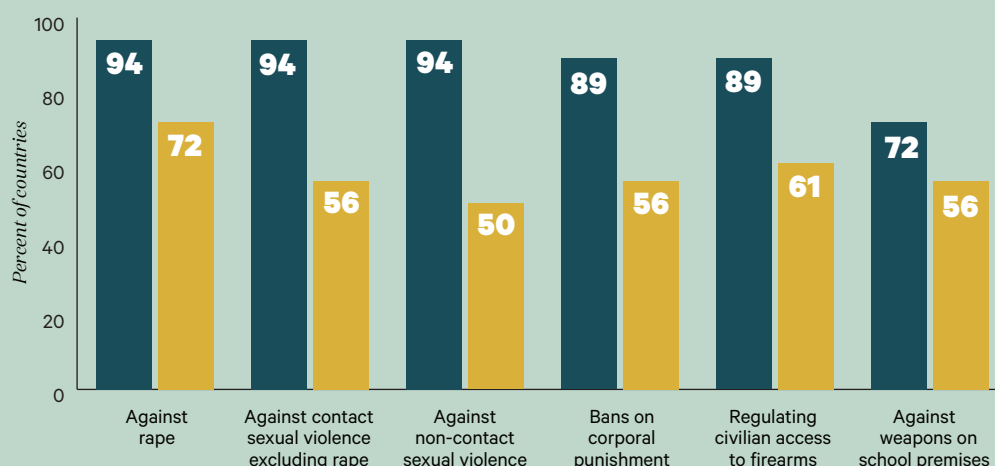
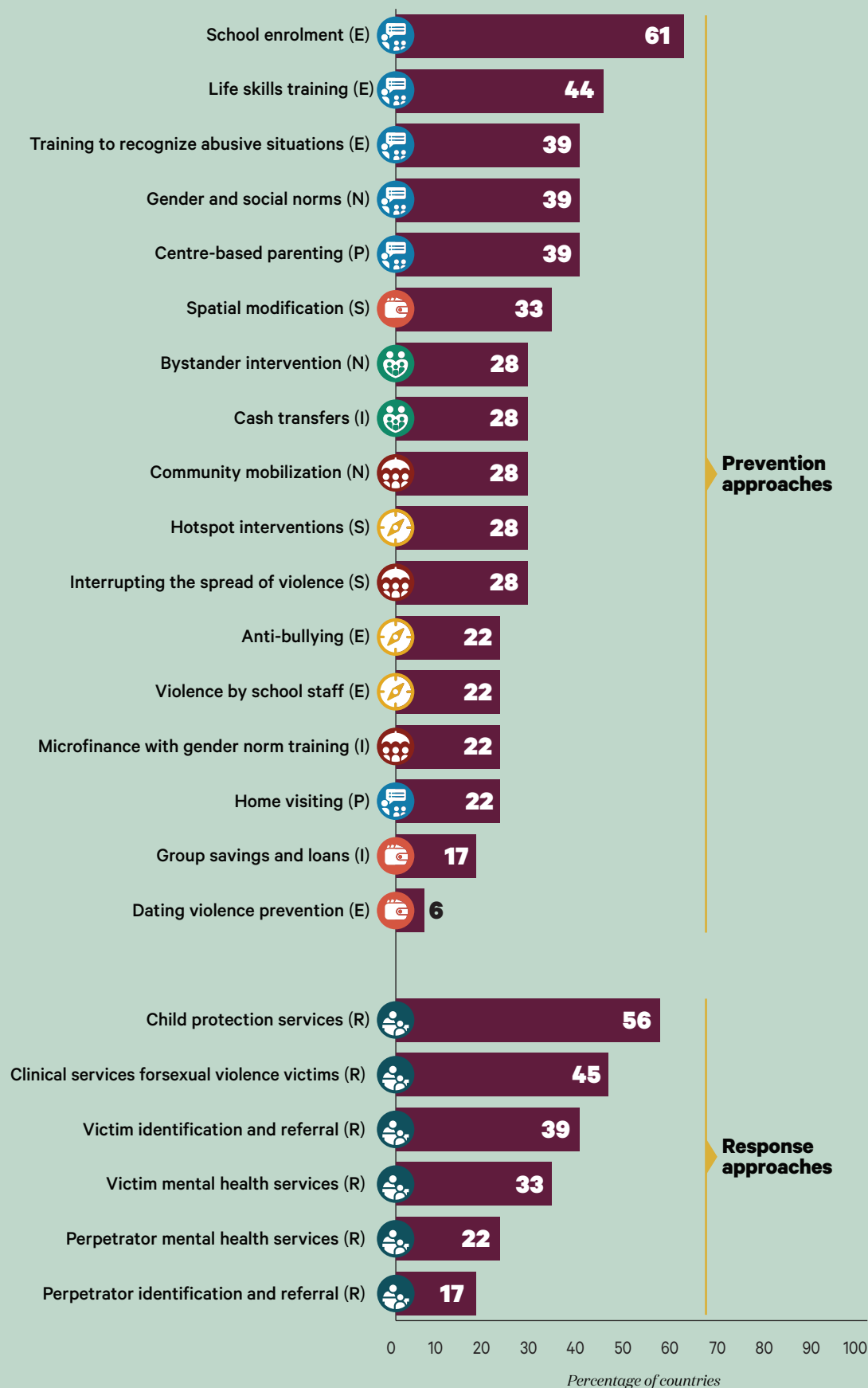


Fig 5. Percentage of INSPIRE prevention and response approaches where support was considered adequate to reach all or nearly all in need, 2018 (*n*=18 reporting countries)



Key I = Income and economic strengthening; P = Parent and caregiver support;
 N = Norms and values; R = Response and support services;
 S = Safe environments; E = Education and life skills;

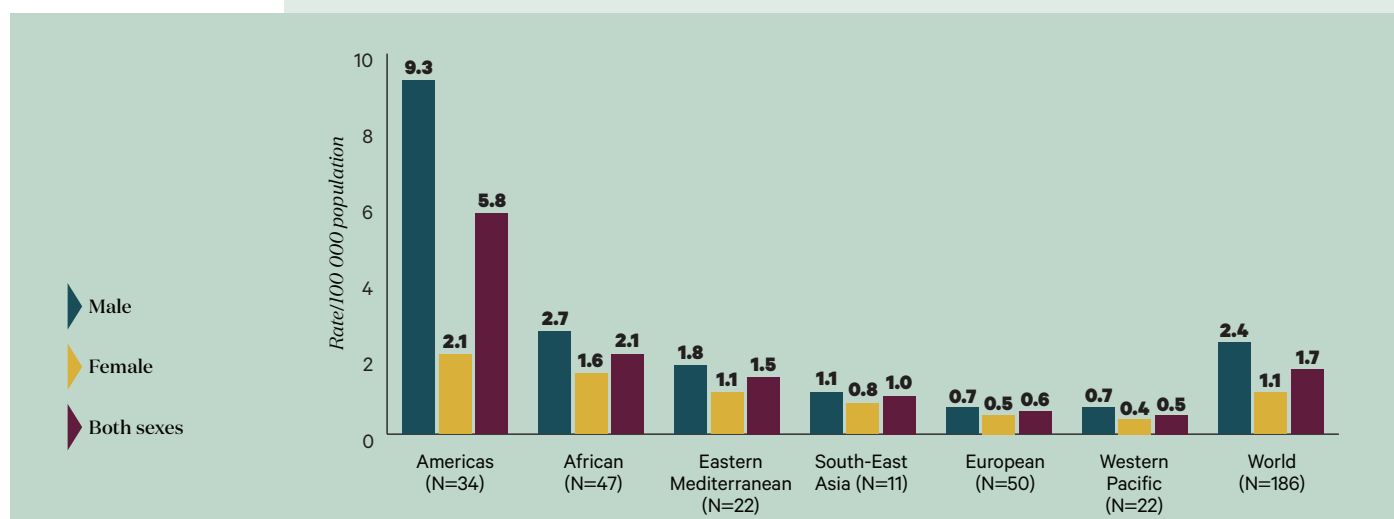


Fig 6. Estimated homicide rates per 100 000 population in children aged 0–17 years by sex and WHO region, 2017 ($n=186$ reporting countries/areas)

The INSPIRE strategy on implementing and enforcing laws is complemented by the remaining six strategies covering prevention programmes and services for victims and perpetrators. The six strategies encompass 23 different approaches. To assess how far these approaches are reaching all their intended beneficiaries, government respondents were asked to provide their best estimate of the extent to which approaches receiving national-level support are reaching all or nearly all who need them.⁹

None of the INSPIRE approaches is perceived by all countries as receiving sufficient government support to reach all or nearly all who need them (Fig. 5). Approaches from the education and life skills strategy most frequently received high-reach ratings. Because these approaches easily fit into the “delivery mechanism” (i.e. schools), their potential for scale-up can be more easily realized than for approaches that are not immediately identifiable with existing sectors. Even so, only 61% of countries consider school enrolment to have high reach, followed by life skills training (44% of countries). Training to recognize abusive situations, centre-based parenting interventions, and gender norms and values were each considered to have high reach by 39% of countries. The other preventive approaches were considered to have high reach in a third or less (6%–33%) of countries.

Of the response approaches, child protection services were rated as sufficiently supported by more than half of government respondents. Victim services, including clinical services, identification and referral, were rated as having higher reach than perpetrator services.

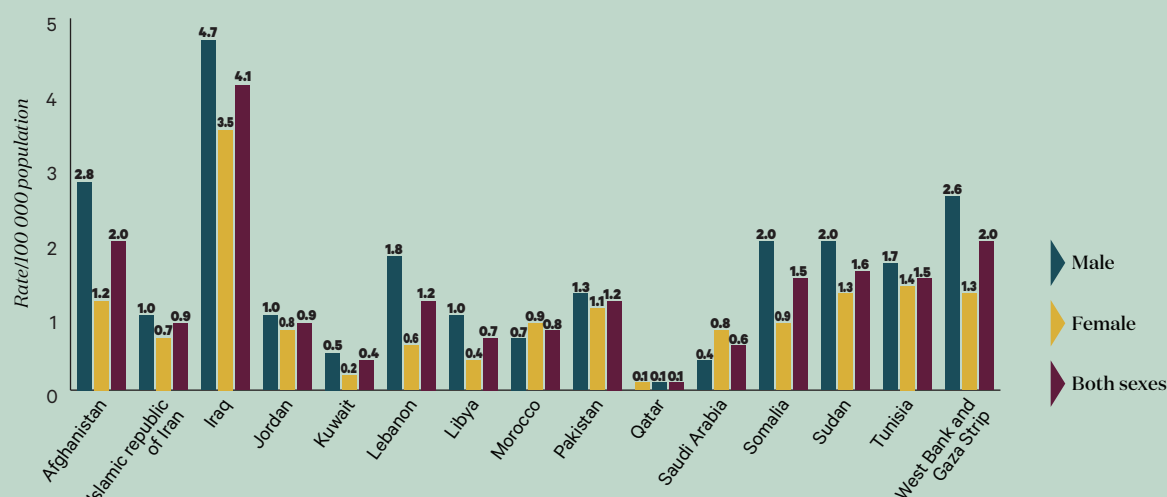
► Data on homicide

The Eastern Mediterranean Region has the third highest child homicide rate globally.

Country capacity for homicide data collection was assessed by asking countries to supply homicide data from police and vital registration sources. Only 44% of countries reported homicides from police records and 11% from civil or vital registration for children aged 0–17 years.

Global, regional and national estimates of homicide for children aged 0–17 years are available for the first time as part of this project. In 2017, an estimated 10% of the global child homicide figures ($N=40\,150$ globally) occurred in the Region (Fig. 6). The estimated child homicide rate in the Region is 1.5 per 100 000 children, which represents the third highest rate in the world, after the Americas (5.8 per 100 000) and African (2.1 per 100 000) regions. The regional child homicide rate is the third highest for both sexes, with the homicide

⁹ Perceived reach was assessed using a rating scale ranging from 1 where an approach was considered to reach very few who need it, to 10 for an approach considered to be reaching all or almost all who need it. The median of the respondents' scores was calculated and assessed according to three levels of reach: low reach (to very few in need) for ratings up to 3.3; medium reach (to some in need) for ratings from 3.4 to 6.7, and high reach (to all or nearly all) for ratings from 6.8 to 10.



rate for males (1.8 per 100 000) somewhat higher than for females (1.1 per 100 000).

For most countries in the Region, the male child homicide rate is higher than that for females, while in Morocco and Saudi Arabia, the rate among females was higher (Fig. 7).

Discussion

This report is based on the *Global status report for preventing violence against children 2020*, the first ever report that measures the extent to which governments are implementing evidence-based actions to achieve the SDG targets on ending violence against children. It can be used as a baseline against which governments can monitor their progress. The report identified that violence against children in the Eastern Mediterranean Region accounts for 10% of the global child homicide aged 0–17 years and is the third highest rate in the world. Beyond deaths, thousands of incidents of violence against children lead to injuries requiring medical interventions and several long-term health, educational, social and economic consequences.

Most countries in the Region reported that multiple government sectors address violence against children. However, the survey revealed that the Eastern

Mediterranean Region, alongside the Western Pacific Region, has the smallest violence prevention footprint of all regions suggesting governments in the two regions are substantially less likely to provide any kind of support for INSPIRE prevention and response strategies than governments of countries in other regions. Few countries reported government support for policies and programmes at levels sufficient to reach all children who need them. Many countries have fully funded national action plans but these lacked indicators on the prevalence of violence against children with baseline and target values by which to monitor progress over time. The survey also revealed that few countries report child homicide from the official data sources such as civil registration and police data. It is notable that very few examples of evidence-based prevention programmes published in scientific literature come from countries in the Region. This suggests that there are few region-specific examples of effective programmes that countries in the Region can emulate and underlines an urgent need for increased investment in scientific outcome evaluations of programmes to prevent violence against children.

Laws for preventing violence against children exist in most of the participating countries but the enforcement of these laws was rated as inadequate. The availability of performance indicators to

Fig 7. Estimated homicide rates per 100 000 population in children aged 0–17 years by sex and selected countries, Eastern Mediterranean Region, 2017

measure the compliance with laws can enhance their enforcement. The survey revealed that 56% of countries provide some support for INSPIRE strategies and that they vary markedly by strategy. The most supported strategy in the Region is the implementation and enforcement of laws (89% of countries).

For the other six INSPIRE strategies, only school enrolment and child protection services were rated as having high reach in more than half of countries. Clearly, greater efforts are needed for both prevention and response approaches. Strengthening prevention efforts can be beneficial not only in reducing the prevalence of violence, but can also reduce the burden on health, justice and welfare systems and have positive effects on many other health outcomes, social well-being, and educational attainment.

Unlike most other regions, the Eastern Mediterranean Region experiences chronic levels of collective violence affecting several countries in the Region, and sporadic outbursts of acute collective violence in other countries. These instances of collective violence tend to draw attention away from the violence of everyday life that affects children and families in all countries and underlines a need for increased efforts to advocate for sustained attention to the often overlooked but epidemiologically significant challenge of violence against children. Besides its direct heavy toll, anecdotal evidence and media reports point to increased levels of domestic violence and violence against children during situations of collective violence, including wars.

► Conclusion and recommendations

The global status report survey revealed that many efforts to prevent violence against children are under way in the Region, including institutional

management, plans, implementing INSPIRE strategies and monitoring and evaluation. Nevertheless, more national support is needed to fill the gaps within these activities. International guidelines and tools together with the baseline of the results of this report can support national efforts to strengthen these efforts.

The following recommendations for countries in the Region are informed by the findings of the global status report drawing on the INSPIRE technical package and building on existing efforts in countries.

Because government decision-makers and programme planners are the primary target audience for the global status report, national-level recommendations are prioritized. A second set of global recommendations highlight research priorities and networking opportunities that can support national action.

National recommendations

Promote good governance and coordination. These recommendations are intended to strengthen the prevention potential of multisectoral action. Governments must ensure that:

- › an in-depth institutional assessment is undertaken to specify a management and investment framework to overcome institutional capacity barriers and support the successful implementation of violence against children interventions, accelerate knowledge transfer and sustainably scale up investment to improve results;
- › an appropriately resourced agency is explicitly mandated to coordinate multisectoral action to end violence against children;
- › ministerial line responsibility is mandated for the delivery of the norms and values, parent and caregiver support, safe environments and income and economic

strengthening strategies, which may not be clearly aligned with existing sectoral roles and responsibilities;

- › INSPIRE strategies and approaches are integrated into national policy frameworks and capitalize on the violence prevention potential of the economic, education, employment, health and social development sectors by using policies in these sectors to reduce risk factors for violence and strengthen those that protect against it;
- › policy dialogues between sectors concerned with violence against children are undertaken to improve the decision-making process.

Prioritize data collection and national action plans. Countries should prioritize collection of data on key violence-related indicators as part of regular SDG reporting and use these to set measurable targets in data-driven national action plans.

- › Countries that have yet to conduct nationally representative surveys, including questions on violence against children, should prioritize the initiation of such surveys.
- › Homicide data collection must be improved, particularly to ensure that such data can be disaggregated by age so that the number of child homicides can be counted.
- › Both the consistency and quality of reporting homicide data from civil/vital registry should be strengthened and feasible options identified for validating different sources (such as vital registry and police records) to improve the routine reporting mechanisms.
- › Existing national action plans should be critically reviewed against best practice standards, and where necessary, revised, to ensure that they are specific, measurable, achievable, relevant and time bound.
- › Governments should invest more in monitoring the uptake, reach and

Many national efforts exist in the Eastern Mediterranean Region to prevent violence against children, but more actions are needed to scale up evidence-based prevention efforts if we are to end all forms of violence against children by 2030.

impact of evidence-based prevention and response approaches to balance the focus on measurement of the problem with equal attention to the measurement of solutions.

- › Governments should invest in scientific outcome evaluations of programmes that prevent violence against children in the Region and enhance research capacity-building.

Strengthen legislative frameworks. To optimize the effectiveness of legislative frameworks in helping to end violence against children, it is important that governments ensure:

- › universal legal protections for children;
- › laws meet best practice standards;
- › a renewed commitment to the implementation and enforcement of laws.

Use evidence to enhance the effectiveness of prevention and service programming. Governments should draw upon the evidence-based solutions presented in the INSPIRE strategies that provide a collection of proven and promising approaches. They should:

- › assess the extent to which their existing support for violence prevention programming is consistent with the INSPIRE evidence-based solutions;
- › use the INSPIRE technical guidance to revise their support to ensure it promotes actions aligned with those in INSPIRE;
- › ensure that both the prevention and response approaches are taken into consideration.

Ensure adequate funding. Funding for evidence-based approaches to ending violence against children must be

increased and be embedded in medium-term expenditure frameworks at national and subnational levels. Governments must:

- › conduct reviews where necessary to ascertain why existing national action plans are inadequately funded and address these problems;
- › draft new budgets for implementation of the INSPIRE strategies and make the requisite funds available.

Global and regional recommendations

Ensure full use of international support mechanisms by countries. Governments are encouraged to join the End Violence partnership as pathfinder countries, and to participate in the closely linked INSPIRE Implementation Working Group, a technical network and community of practice dedicated to supporting INSPIRE uptake and monitoring.

- › As part of the Decade of Action, pathfinder countries should be encouraged to submit plans for accelerated actions to end violence against children to the United Nations with the aim of demonstrating measurable change by the second SDG Summit in 2023.
- › Countries should be encouraged and supported to agree on a set of voluntary performance targets to track the implementation, reach and impact of INSPIRE strategies and approaches.
- › Further global status reports on preventing violence against children should be published in 2025 and 2030 to track changes in the uptake of, and support for, the INSPIRE strategies and approaches against the voluntary performance targets.
- › Partnerships with actors working on other SDGs – especially health, education, social protection – should be strengthened.

Increase funding for evidence-based prevention. Donor funding to support INSPIRE implementation in low- and middle-income countries must be increased, and mechanisms to ensure that such funds are effectively implemented must be established.

Strengthen implementation research. Support for high-quality implementation research must be increased, and more of this research must be conducted in low- and middle-income countries. Implementation research should focus on:

- › how to take the INSPIRE approaches to scale, including through the identification of light, low-cost delivery options;
- › the role of INSPIRE and subsets of INSPIRE strategies and approaches to accelerate progress towards multiple SDG goals and targets;
- › building links between preventing violence against women and preventing violence against children;
- › building a case for investment for each INSPIRE strategy, identifying unit costs for implementation in low-, middle-, and high-income settings, and calculating the financing gap.

Scale up efforts to address violence against children in emergency settings. Investment must be increased in developing guidance on preventing and controlling violence against children within child health efforts in humanitarian settings, including:

- › how to adopt a coordinated approach to preventing violence against children in humanitarian settings;
- › how to obtain data on violence against children and use it to generate priority actions;
- › how to plan and take coordinated action to address identified priorities;
- › how to use data systems to review and improve activities.

