



Report

The costs and economic impact of violence against children

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- This study estimates that the global economic impacts and costs resulting from the consequences of physical, psychological and sexual violence against children can be as high as \$7 trillion. This massive cost is higher than the investment required to prevent much of that violence.
- The annual global costs of the worst forms of child labour are approximately \$97 billion, and those resulting from children's association with armed forces or groups can be up to \$144 million annually.
- The evidence clearly shows that 'prevention pays', but current levels of government spending on preventive and responsive actions in relation to violence against children remain very low. Research and advocacy efforts need to continue, with a focus on promoting good practices for prevention. Funding for this should be scaled up.
- More specific data and in-depth primary research needs to be generated on the different forms of violence against children, particularly in low- and middle-income countries. Calculating and reporting the economic costs will lead to stronger arguments for policy-making.

Acknowledgements

We would like to thank ChildFund Alliance, in particular Felipe Cala, Sarah Stevenson and Andrew Johnson, for suggestions and support throughout the development of this report. We would also like to thank the following experts who provided us with useful ideas and guidance: Susan Bissell, Jim Mercy, Alexander Butchart, Xiangming Fang, Reinard Fichtl, Sabine Rakotomalala, Christine Knudsen and Sophie de Coninck. Thanks also to Caroline Harper for reviewing this report and providing useful comments, and to David Walker for his contributions.

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Abbreviations

Abbreviation Description

ACPF African Child Policy Forum

AIDS Acquired Immune Deficiency Syndrome

BETHRUWC Basic Education for Hard-to-Reach Urban Working Children

BfC Budget for Children

CAR Central African Republic

CDC Centres for Disease Control and Prevention

CICL Children in Conflict with Law

CLS Chicago Longitudinal Study

CPC Child-Parent Centre

CPWG Child Protection Working Group

CNCP Children in Need of Care and Protection

CTQ Childhood Trauma Questionnaire

DALY Disability-Adjusted Life Year

DFID Department for International Development (UK)

DRC Democratic Republic of Congo

EAPRO East Asia and the Pacific Regional Office (UNICEF)

ECHO Humanitarian Aid and Civil Protection

ECLAC UN Economic Commission for Latin America and the Caribbean

ELA Empowerment and Livelihood for Adolescents

FAO Food and Agricultural Organization

FGM/C Female Genital Mutilation/Cutting

FTS Financial Tracking Service

GDP Gross Domestic Product

HIV Human Immunodeficiency Virus

ICPS Integrated Child Protection Schemes

ILO International Labour Organization

IPEC ILO International Programme on the Elimination of Child Labour

IRC International Rescue Committee

KILM Key Indicators of the Labour Market

MICS Multiple Indicator Cluster Surveys

MLE Ministry of Labour and Employment

MSI Management Systems International

MTEF Medium-Term Expenditure Framework

MWCD Ministry of Women and Child Development

NDSD National Department of Social Development

NGO Non-Governmental Organisaion

OCHA UN Office for the Coordination of Humanitarian Affairs

ODA Official Development Assistance

OR Odds Ratio

PAF Population Attributable Fraction

PAR Population Attributable Risk

PCAR Protection of Children at Risk

PPP Purchasing Power Parity

QALY Quality Adjusted Life Year

RR Relative Risk

SPARC State Policy and Advocacy Center

SSBG Social Services Block Grant

STD Sexually Transmitted Disease

TB Tuberculosis

UCW Understanding Children's Work

UK United Kingdom

UN United Nations

UNAIDS Joint UN Programme on HIV/AIDS

UNESCO UN Educational, Scientific and Cultural Organization

UNFPA UN Population Fund

UNICEF UN Children's Fund

UN Development Fund for Women

US United States

WDI World Development Indicator

WHO World Health Organization

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Executive summary

A. Introduction

Every day, millions of children throughout the world are subjected to abuse, neglect, exploitation and violence in different settings, including in their homes, schools, communities and work environments. As a result, children experience impacts on their physical and mental health, their education and their overall quality of life. The consequences of violence on children are often intergenerational, with those who have faced violence as a child more likely to become a violent adult. This cycle has a long-term impact on a family's economic wellbeing.

This briefing paper presents the main findings of a report commissioned by ChildFund Alliance, exploring the economic impacts and costs of violence against children. It presents a summary of the available evidence from different countries and provides some estimates of the global costs of violence and exploitation against children. The briefing discusses government spending to prevent and respond to violence against children as well as good preventive practices. It also provides some policy recommendations. In summary, this report finds that there are significant costs for individuals, communities, governments and economies from the different forms of violence against children. In the case of global costs resulting from physical, psychological and sexual violence, these costs can be as high as 8% of global GDP. Considering other forms of violence, such as children's involvement in hazardous work, the global costs are estimated to be \$97 billion every year, which is equivalent to seven times Iceland's 2013 GDP. The economic impact of another form of violence against children – that of children associated with armed forces or groups – has been estimated to be \$144 million annually.

B. Methodology

The report was a desk-based study drawing on existing literature on the consequences and economic costs of violence against children, as well as methodologies to estimate these costs and good practice case studies on prevention policies and programmes. The study includes specific studies that have estimated the costs of violence against children, but also draws on existing data in order to calculate global figures for the following categories of violence against children: physical, psychological and sexual violence, children associated with armed forces or groups and hazardous work as a proxy for the worst form of child labour.

However, there are several limitations in estimating the costs of violence against children, particularly at a global level. There are multiple data gaps and discrepancies in the type of data available regarding the economic cost of violence towards children, which hinders the possibility of calculating accurate national and global estimates. It is rare to find detailed surveys on violence against children in developed and developing countries, although more have been produced recently. Where reports do exist, they mainly focus on the developed or high-income countries, despite the high incidence of violence in Africa, Asia and Latin America. Only a few studies have attempted to estimate the economic cost of violence against children, and the methodologies used can only be applied in settings where sufficient data is available. As such, for the study underpinning this brief, a methodology was developed based on the data limitations at the global level. These factors need to be taken into account when considering the figures presented on the economic impacts of violence against children.

C. Examples of the prevalence of different types of violence and their consequences

Sexual violence – Current data indicates that up to 50% of sexual assaults worldwide are committed against girls under the age of 16 (UNFPA and UNICEF, 2011), with an estimated 1.8 million children subjected to commercial sexual exploitation and child abuse images. Children may experience immediate physical injuries, psychological harm and long-term debilitating physical conditions. This may result in lifelong costs of healthcare and loss of quality of life (CDC, 2014), alongside the possibility of early pregnancy and related lower levels of education, This in turn may lead to labour absenteeism and productivity decline at work as a result of health problems. Determining the pattern of incidence of sexual exploitation, violence and abuse is difficult due to the fragmented data available on its prevalence, and this is compounded by underreporting by victims.

Physical and or psychological violence – Research by UNICEF (2006) indicates that as many as 275 million children worldwide are exposed to violence at home, although limitations of reporting means that millions more may be affected. As a consequence, children may experience immediate physical injuries and/or long-term physical conditions, with potential long- term permanent disability or premature mortality in some cases. The actual costs resulting from violence are based on victims' behavioural responses (UN, 2005) and the availability of services, significantly altering the direct and indirect costs for victims and service providers.

Hazardous child labour – Overall, approximately 5.4% of children worldwide are estimated to be involved in hazardous labour (ILO, 2013) with an estimated 85.3 million children aged five to 17 working in dangerous conditions in a diverse range of sectors, such as mining, construction and agriculture. The worst forms of child labour result in child enslavement, family separation, exposure to serious hazards and illnesses, and isolation – often from a very early age, leading to adverse consequences for the child's health, to exposure to other forms of violence and to consequences for his or her future income—generating activities. Child labour rates are high in the Asia Pacific region. In Bangladesh, hazardous work accounts for 63% of employment among five- to nine-year-olds, 56% among 10- to 14-year-olds, and 57% among 15- to 17-year-olds (UCW, 2011).

Children associated with armed forces or groups – The economic costs of children associated with armed forces are multifold and complex. The current estimate of the number of children associated with the armed forces or groups ranges between 250,000 and 300,000 children (UN, 2000), although this figure is likely to be an underestimate. In emergency contexts in general, risks of violence against children vary by country and are dependent on numerous factors, such as the number of children affected, the capacity of the country to respond and the strength of state institutions. There may be an increased risk of sexual exploitation and violence against boys and girls, alongside a potential increase in child trafficking, psychosocial violence and extreme forms of child labour. As a result, costs may be related to both short- and long-term medical treatment, psychological impacts, secondary effects including loss of productivity and income throughout their lives, and death.

D. Estimating the global costs of violence against children

Physical, psychological and sexual violence against children

Having looked at different methodologies and studies calculating the economic costs of violence against children in individual countries, and since administrative records for health, social and judicial services are not available in most low- and middle-income countries we have identified that the most effective way to estimate the global costs of physical, psychological and sexual violence against children is through a productivity loss approach. Results obtained through this estimate indicate that the global costs of physical, psychological and sexual violence against children are significant. In a lower estimate scenario, the global costs amount to between 2% and 5% of global GDP, and in the highest scenario costs go up to between 3% and 8% of global GDP. It is important to highlight that a varied set of assumptions is made when making such estimations. Violence against children has several costs, such as health costs and social services and judicial expenditures, among others. Since such administrative records are not available for most countries, and as the few variables that are available for estimating the costs are related to productivity and income-generation activities, this approach was required. As such, the global estimate calculated is likely to be below the real costs of such violence.

Worst forms of child labour

To estimate the global cost of the worst forms of child labour, this study uses the proxy of the total number of children involved in hazardous work in different regions per age group, and considers the annual costs of forgone income resulting from lost years of schooling due to hazardous work. According to the data obtained, estimates for global income forgone as a result of lost years of schooling because of children's involvement in hazardous work are equivalent to \$97.6 billion annually, which is approximately equivalent to seven times Iceland's 2013 GDP.

Children associated with armed forces or groups

To calculate the costs regarding children associated with armed forces or groups, the study assumes that the greatest incidence of children's association with armed forces happens in lower income countries, particularly in sub-Saharan Africa. As such, the gross national income per capita utilised for these calculations is that of low-income countries. Another assumption is that out of the total number of children associated with armed forces or groups, half will either die or suffer major injuries, psychological trauma or disabilities such that result in a total loss of productivity in terms of their economic value added to society during the rest of their lifetime. Although there are no precise figures in the literature identifying how many of affected children return to productive life, this is an approximation based on insights gained from the literature. In the case of the remaining half, the assumption is that they will be reintegrated into productive life, but taking into account the years of school lost, the impact on economic costs via income forgone for the latter group will be similar to that for children engaged in hazardous work. For the group of children who face complete economic losses, using the gross national income cost, an approach similar to the cost of DALYs is calculated on an annual cost basis, given that it is impossible to predict how many years a person who suffered through conflict will live. According to this study's estimates, the global costs of children's association with armed forces are significant. In its lower estimate, the cost could be up to \$120 million and the higher estimate up to \$144 million annually.

E. Spending on prevention and response to violence against children

Governments are accountable for taking action to prevent violence against children and to protect children who have been victims of violence. However, whilst there has been significant progress by governments over the past few years in preventing and responding to violence against children (UN, 2013), progress could be more robust, as many children still suffer from different forms of violence.

In order to achieve this, one of the areas that requires significant efforts is the commitment of human and financial resources by governments to policies and programmes to address violence against children. Few governments set aside specific funding for violence-related interventions, and most acknowledge a lack of resources for this area. In fact, from the 100 governments surveyed for the UN's 2011 Global Survey on Violence Against Children (UN, 2013), only 4% indicated that they provided full resources for policies and programmes to address violence against children; 10% said resources were not allocated. Up to two-thirds of governments failed to respond to this question.

While a global-level analysis of spending on prevention and response to violence against children is thus not feasible, an analysis of countries that have carried out analyses of budget and spending on violence against children, including South Africa, Mexico, the United States and India, illustrates two key issues regarding spending on prevention and response to violence against children: first, the complexity of spending within this sector, which involves multiple programmes, agencies and levels of government; second the low levels of budget and spending on prevention and response to violence against children, despite the significant challenges children face in this area and the huge costs of such violence to individuals, society and the state.

F. Examples of cost-effective solutions

From the economic costs that have been estimated and those that are available in the literature, there is a strong case in favour of investing in violence prevention, as adequate preventive actions will help avoid the immediate

and long-term negative consequences that violence will have on the lives of children, their families and communities. Preventive and responsive policies and programmes across the different areas related to violence against children are needed to reduce the consequences of violence on children's lives, as well as to reduce the costs that result from them. Thus, it is critically important to implement and scale up cost-effective interventions for which there is evidence of success.

There is a growing but still limited body of evidence on effective programmes to prevent the different forms of violence against children. Only a few documented case studies of programmes to prevent sexual violence against children have been robustly evaluated or have included a cost-effectiveness analysis. Some of the evidence to date, however, suggests that, in particular for vulnerable girls living in a situation of poverty, combined interventions that provide life skills training, with a particular focus on sexual education, alongside measures to strengthen their economic capabilities, are an effective way to prevent sexual abuse. In case of physical and psychological violence against children, existing evaluative evidence points toward parenting interventions for reducing harsh/abusive parenting, increasing positive parenting practices, and improving parent—children relationships, including in low- and middle-income countries, as effective preventive measures to eliminate this type of violence.

Successful preventive actions to reduce the likelihood of children becoming engaged in the worst forms of child labour are linked to national-level policies and programmes. The ILO (2013) points out that investments in education and social protection appear particularly relevant to the decline of child labour, particularly its worst forms. It is difficult to identify case studies of good practice that focus on prevention of children's association with armed forces or groups as a stand-alone intervention, as most deal with both prevention and reintegration of children who have been conscripted into armed forces. Prevention needs to be promoted and advocated in international legislation that limits children's association with armed forces or groups, in addition to providing families at risk with information about the movements of armed forces or groups so that they can take refuge from them. These families should also be provided with livelihood alternatives, including for children, which might reduce the likelihood of their conscription as a coping mechanism.

G. Conclusion and Recommendations

The global costs related to physical, psychological and sexual violence estimated by this study are between 3% and 8% of global GDP. This is a massive cost, and is many times higher than the investment required to prevent much of the violence from taking place. With respect to the global costs of hazardous work (which this study uses throughout as a proxy for the worst forms of child labour) calculated on the basis of forgone income resulting from loss of schooling and lower wages during the affected children's lives, the estimated global cost is \$97.6 billion annually; this is approximately equivalent to seven times the 2013 GDP of Iceland. Finally, the costs of children's association with armed forces and groups is significant: at the lower end, the cost is estimated to reach up to \$120 million; the higher estimate is \$144 million annually.

It is important to note that violence against children is multi-faceted. As such, the costs of the different components of violence against children cannot be added, but in any component they are sizeable enough to underline the urgency for decision-makers to invest in the prevention of all forms of violence against children.

Most interventions are currently small in scale; increasing their scope and reach might be a way to expand preventive efforts. There are currently multiple programmes to reduce exposure to sexual violence, and there is a need for combined measures to increase schooling and raise household incomes to prevent children from engaging in hazardous child labour.

In case of emergencies, more systematic research and evaluation of the types of programmes that work is needed in order to identify good, cost-effective programmes and to reduce the risk of violence faced by children. Such preventive measures are value for money investments in the short and long term, both for governments and for donors looking to support the sector. More policies and programmes should be implemented and scaled up globally, with the aim of making more rapid progress to eliminate all forms of violence against children.

A few recommendations emerge from the analysis presented in this brief:

- It is clear that 'prevention pays', although at the moment, levels of spending on preventive and responsive actions in relation to violence against children remain very low and are frequently not even documented. Research and advocacy efforts need to continue focusing on promoting good practice in prevention. Funding should be scaled up so good practice can reach a greater share of children, particularly the most vulnerable.
- There is a need for the generation and reporting of more specific data on violence against children. Only a few countries have conducted such specific surveys, and they generally do not have information that explores the consequences for children experiencing violence. Such information is critical to the generation of stronger evidence about the magnitude of the problem and the costs and economic implications associated with it.
- Much more in-depth primary research on the different forms of violence against children needs to be
 conducted in low- and middle-income countries. Currently, most research on the economic costs
 centres on physical and psychological violence against children in high-income countries. More
 research will continue to enrich the evidence base in this area and can lead to more robust advocacy
 efforts by bringing compelling economic arguments to policymakers.
- Just as the formulation and implementation of the Millennium Declaration and the Millennium Development Goals have done for education, health and the prevention of HIV and AIDS, a prioritisation of violence against children as an issue of global concern could certainly help to mobilise the necessary resources, and to scale up preventive and responsive actions to an optimum point in order to effect change on a global scale.

1 Introduction

All children have the right to live and thrive in a safe and caring family environment, free from all forms of violence. However, millions of children throughout the world face abuse, neglect, exploitation and violence every day of their lives, and in different settings such as their homes, schools, communities and work environments. Such violence has important consequences for children's lives in the short, medium and long term, affecting their physical and mental health, their education and their quality of life. In the most extreme cases, violence can lead to death. These consequences of violence for children are often intergenerational, with those who faced violence more likely to be violent adults themselves, and less productive resulting from several factors such as: lost years of education, mental health problems, social isolation, among others - all of which impact on the individual and his/her family's economic wellbeing. Violence is also multifaceted – that is, victims are likely to experience many forms of violence at the same time. For example, some children in the worst forms of child labour are also at risk of becoming victims of trafficking and even sexual violence. At a more aggregate level, violence against children has important costs for society, slowing economic development through aggregate productivity losses and costs of responsive services, eroding nations' human and social capital (ChildFund Alliance et al., 2014).

The UN Secretary-General's Study on Violence Against Children (Pinheiro, 2006), the first comprehensive global study on all forms of violence against children, confirms such violence exists in every country of the world, cutting across culture, class, education, income and ethnic origin. Therefore, despite human rights obligations and children's developmental needs, violence against children is often socially accepted, and is sometimes legal (UN, 2006) for example in the case of child beating, female genital cutting and even the execution of child offenders in some countries. Despite this adverse context, the World Report on Violence against Children's central message is that 'no violence against children is justifiable, and all violence against children is preventable' (Pinheiro, 2006).

Violence against children continues to be a major problem, but there are signs of improvement. The 2013 Global Survey on Violence against Children (UN, 2013), which assesses progress in preventing and eliminating violence against children since the 2006 UN study, finds that protection of children against violence is gaining increasing recognition on international, regional and national agendas. There has been a rise in the collective understanding of children's exposure to violence and its consequences for them, leading to strategic actions to protect children being undertaken in a number of countries. This has been reflected in normative, policy and institutional developments, which have advanced national implementation of prevention and response measures for violence against children. Joint actions at many levels have helped address attitudes and deeply rooted social norms that condone violence against children, and have encouraged the mobilisation of social support for the protection of children against violence. Progress, to make a significant breakthrough, however, has remained slow uneven and fragmented (UN, 2013). As such, violence against children remains a major global challenge, one that requires the urgent attention of and prioritisation by the international community.

Evidence across the world shows violence against children can have lifelong adverse health, social and economic consequences for survivors, including behavioural problems; mental health conditions; cognitive dysfunction; increased likelihood of high-risk behaviours; higher risk of delinquency, adult criminality and violent behaviour; greater risk of chronic diseases; lasting impacts or disability from physical injury; reduced health-related quality of life; lower levels of schooling; lower levels of income; and overall reduced levels of adult economic wellbeing. High prevalence of violence against children and its many negative short- and long-term consequences mean the economic costs for the individual, family, community and state are substantial. Estimating the economic burden is important for several reasons: to raise awareness of the current severity of the problem; to assist policymakers and government officials in prioritising funding in this area; to develop preventive services and other programmes that place the problem in the context of other public health concerns; and to provide data for economic evaluations of interventions to reduce or prevent child maltreatment (Fang et al., 2013). This implies that, for policymakers who consider social and human development problems primarily in relation to cost—benefit analysis or in terms of

balancing the budget by analysing the cost of interventions, it is necessary to generate and provide data that highlight the economic implications of violence against children. This is important because the scale of the costs underscores that prevention of violence is cheaper than paying for its direct and indirect costs (Pereznieto et al., 2010).

The 'cost' or 'economic impact' argument is undoubtedly an important one to make to inform policymakers. However, it should be made clear that, notwithstanding the economic costs, the human costs of violence against children are beyond what can be accounted for in economic terms. Working to reduce violence against children is also an essential human rights and children's rights obligation.

1.1 Purpose of the study

ChildFund Alliance commissioned this report with the purpose of generating evidence on the extent of the economic costs resulting from violence and exploitation against children at the global level, as well as how these compare with the costs of implementing policies and programmes to address the issue. As such, the study aims to provide evidence about the significant economic costs of violence against children in its different manifestations at a global level. To put these costs into perspective, the study analyses some data on government and donor spending on the prevention of violence against children and the protection of victims to highlight how the scale of spending is limited in comparison with the costs of the problem. Lastly, the report provides some examples of good practice programmes to prevent different forms of violence against children, analysing data on their costs and their levels of success to illustrate how prevention of such violence is a more efficient economic choice than incurring the significant costs of its consequences.

1.2 Structure

Section 2 of the report presents the analytical framework, the methodology used and the limitations of the study. Section 3 then explores the consequences and related costs of violence against children, drawing on evidence from the literature in both development and conflict contexts. More detailed cost estimations of violence against children are presented in Section 4, including global cost estimates calculated for this study. The section includes case studies of countries and/or regions that contain detailed estimates of economic costs of different forms of violence against children. Section 5 presents an overview of government and donor spending on child protection, and in particular the resources channelled towards prevention and response to violence against children, when such detailed spending data was available. It illustrates the panorama of limited funding in this area with case studies. Section 6 presents a brief analysis of good practices on the prevention of violence against children. While a full cost effectiveness analysis was beyond the scope of this project, this section provides useful arguments of how the prevention of violence against children is more effective than incurring its costs, and illustrates the point with information from a selection of good practice programmes. Lastly, Section 7 presents the report's conclusions and recommendations.

2 Approach

This section explains the key features of the approach used for this study and presented in this report, including the analytical framework, the focus of the research, the methodology used and its limitations.

2.1 Focus and rationale

In order to set out the scope of the current study, it is important to establish the working definition of 'violence against children' to be used. This study draws on Article 19 of the UN Convention on the Rights of the Child: 'all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse'. According to the World Report on Violence against Children, the definition is further refined by that of the 2002 World Report on Violence and Health: 'the intentional use of physical force or power, threatened or actual, against a child by an individual or group, their either results in or had a high likelihood or resulting in actual or potential harm to the child's health, survival, development or dignity' (WHO, 2002). Throughout this report, the phrase 'violence against children' is therefore used as shorthand for all forms of violence, abuse and exploitation perpetrated against children, as per the definition above.

This study takes stock of the literature on violence against children in development and emergency contexts in order to provide a global evidence base on its economic costs. In addition to this, it draws on existing methodologies to estimate some figures for the following four manifestations of violence against children:

- Physical and psychological abuse/violence;
- Sexual abuse and violence;
- Worst forms of child labour;
- Children associated with armed forces or groups.

The rationale for focusing on these four dimensions of violence is rooted in the need to narrow down the scope of the research and evidence generation to what could be feasibly undertaken in the timeframe and resources available for the study. Physical, psychological and sexual abuse and violence are the most 'ubiquitous' manifestations of violence and therefore merit specific attention. The worst forms of child labour are taken as a specific case of exploitation of children, while children associated with armed forces or groups is a concrete example of the type of violence children experienced in emergency contexts.

These categories are, of course, not discrete, with important overlaps across them, as violence against children is multifaceted. For instance, sexual violence generally occurs alongside psychological abuse, and is a frequent occurrence among children – particularly girls – associated with armed forces or groups. As such, the cost estimates and the analysis presented are approximations that build on assumptions to make these categories analytically manageable. Furthermore, much of the literature exploring the costs of violence against children analyses physical, psychological and sexual abuse and/or violence together, in contexts such as home or school. This is largely because specific surveys on violence against children include these three dimensions and so their prevalence data are analysed jointly. As such, the estimates undertaken for this report consider physical, psychological and sexual violence as a single category.

One important element of the definition of violence that we do not explore specifically is that of neglect. Although this is clearly an important manifestation of violence, and one that affects many children, it is difficult to find isolated data on its consequences and related costs, although in several of the studies identified the analysis and figures look at the consequences of neglect jointly with those of physical and psychological violence.

2.2 Analytical framework

As highlighted in the introduction, it is important to be clear about the importance of approaching the issue of violence against children first and foremost from a rights and wellbeing perspective. The analysis of its economic costs is aimed at providing additional information about the dimensions of the problem from a 'practical' policymaking perspective. For policymakers, violence against children can be viewed as a severe public health problem with adverse impacts on the short-, medium- and long-run health status and human capital accumulation of victims, placing a significant financial burden on individuals, communities and countries' economies (CDC, 2013).

In order to provide evidence about the economic impacts and costs of violence against children, it is important to account for several elements. First, studies, including those by the World Health Organization (WHO) (Butchart et al., 2008) and the World Bank (Skaperdas et al., 2009), that have entailed extensive analysis of the economic impacts of violence consistently distinguish between direct and indirect consequences and costs. *Direct* costs are those that need to be 'paid' – for example the direct cost of medical treatment for injuries resulting from violence – or that imply a direct economic loss of resources to the individual, such as the disinvestment in human capital resulting from dropping out of school because of violence. *Indirect* costs are those that relate to impacts on a person's life, on society or on the economy and that are mediated by other factors. For example, evidence suggests an indirect cost of violence against children is its link to the cost of youth violence and crime, which is mediated by several factors, including dimensions of household and community violence, security and the economic contexts in which perpetrators and often victims live (Pereznieto et al., 2010),

As such, when analysing the direct and indirect costs of violence against children, we need to take into account three important factors:

- 1. To whom the economic impact accrues: A complete mapping of economic impacts would analyse the costs to victims, perpetrators, communities, the government and/or other service providers and the overall economy. These costs vary depending on the nature, form and severity of the violence.
- 2. The context where acts of violence occur: This defines the type of response and has implications for the potential costs. For example, in a low-income country with low health infrastructure, no mental health services and a weak judiciary system, the capacity (and therefore the costs) of providing counselling to child victims of physical or psychological abuse may be severely constrained, meaning low costs for the state but high medium- and long-term costs for the individual who is not receiving any form of support to mitigate the impacts of violence on their life.
- 3. The severity of the incident: For every form of violence, the degree of impact depends on the severity of the incident. For instance, in a school, registered incidents of bullying and sexual abuse can range from sporadic verbal abuse to physical assault with beating up a child or rape as some of the extreme manifestations. Corporal punishment is by definition always physical, but it can range from a small reprimand to whacking with a board on the back or arms, causing injury with recorded cases of death resulting from injuries from beating or weapon aggression. Corporal punishment has an important psychological and emotional impact, including fear, stress, anguish, loss of self-esteem and difficulty in concentrating, among others. While this cannot be easily measured, evidence shows it generates costs.

We explore the economic costs of violence against children from different angles. First, we present a comprehensive mapping of the evidence from around the world about the consequences and costs (including figures, where these are available) of different manifestations of the phenomenon, and then through direct estimates of certain dimensions of the costs of violence against children based on available data.

An important feature of this study is that it explores the costs of violence against children in both development and emergency contexts. While there are clear overlaps in the types of violence that take place in these different contexts (physical abuse in the home occurs in both contexts, for example), there are also some important distinctions between them.

Levels of protection of children from violence in a given country or region depend on the protective environment, which includes legislation, policies and care provided by the government, communities and families. There are generally links between a country's level of income and the level of care provided. Poorer countries are more likely to be constrained in their ability to provide protective services for children when faced by multiple and competing demands for basic service provision. Some high-income countries provide comprehensive health, educational, judicial and welfare services to prevent violence against children and protect its victims. Development contexts could be characterised by having legislation and programmes in place that – at least in principle – set out to provide a protective environment for children (although this is not necessarily the case: many states still allow some forms of violence, including, for example, female genital mutilation/cutting (FGM/C) and physical punishment).

In emergency contexts, on the other hand, these protective environments are generally eroded, making children much more vulnerable to child protection risks, particularly to the risks of facing violence. In fact, data suggest children make up at least half of the population affected by conflicts and natural hazards (Global Protection Cluster, 2013). While there is limited evidence on the extent and nature of violence against children in humanitarian situations, both conflict and natural hazard, existing evidence indicates it is more prevalent during emergencies than currently acknowledged (DFID, 2013).

Effectively, emergencies exacerbate existing risks and threats to children. For example, children might be at a higher risk of physical and psychological violence in the home when caregivers are under greater levels of stress resulting from emergency (see, for example, Pereznieto et al., 2014, for evidence of this in the case of Gaza and the West Bank). But emergencies can also present new risks. For instance, conflict situations might suddenly place children at risk of becoming associated with armed forces or groups or being exposed to landmines and unexploded ordnance. Emergencies disrupt structures in place to protect children and create circumstances within which multiple forms of harm and abuse can occur. Families may, for example, lose their home, lose their livelihoods and/or face displacement, causing financial hardship that pushes children into hazardous forms of labour as a coping strategy and exposes them in turn to different forms of violence. As such, emergencies result in significant costs linked to violence against children. This study explores such costs in emergency contexts and provides some specific estimates.

2.3 Methodology

As discussed above, this study draws on different types of methodologies to present evidence on the economic impacts and costs of violence against children. The report first presents findings from a comprehensive literature review that explored evidence on the consequences and related costs of the different types of violence discussed above. It then presents a more detailed discussion about the methodologies and findings from the few specific studies estimating the costs of physical, psychological and sexual violence, presenting two of the studies as case studies. The methodology we utilised in this study to derive a global cost estimate for physical, psychological and sexual violence is based on a productivity approach. This was the only possible methodology, given limitations in the data to calculate other dimensions of violence against children at the global level, including, for example, costs incurred by justice systems, by welfare services and in the provision of mental health support. Section 4 explains the methodology in greater detail.

To calculate the costs for the other dimensions of violence against children – worst forms of child labour and children associated with armed forces or groups – we needed to use different methodological approaches. This is because the patterning of the phenomena and the types of consequences they generate – in particular their magnitude – are distinct, and fewer data are available to calculate the costs globally, meaning assumptions need to be made. These are also detailed in Section 4. An International Labour Organization (ILO) model looking at the economic benefits of eliminating the worst forms of child labour at a global level, supported by a calculation of the global cost of productivity loss, is utilised for hazardous child work. Meanwhile, to estimate the global costs of children associated with armed forces or groups, we estimated the cost of the total loss of productive lives for a share of affected children globally and productivity losses over a number of years as a result of early school drop out for the remaining share of affected children. It is important to note that, in all cases, given the dearth of data, figures are approximate, and are underestimates of the actual costs of violence against children, as not all costs

dimensions can be accounted for. Still, the figures are significant and powerful, providing a sense of the magnitude of the economic impact of the problem. These estimates are supported by a few case studies that provide greater details on the methodology.

For the analysis of spending on child protection, we carried out a substantive online search for data at the global and country level, but we found limited information, mainly in the form of budget and spending analyses for specific countries, which this report captures. We conducted a complementary analysis using secondary sources, particularly for emergency contexts, as well as looking at some trends in aid financing to child protection. In general, it is difficult to disaggregate budget data specifically on violence prevention and response, as country budgets do not usually break down such spending categories in such a level of detail.

The analysis of the benefits of prevention was not planned as a cost effectiveness analysis given the scope and scale of this study. However, by exploring a number of case studies of programmes to prevent the different forms of violence against children under analysis, and looking at their costs and effects on the target population, the report contributes to the argument that prevention of violence against children is cheaper than the short-, medium-and long-run costs to individuals, governments and states of suffering its consequences.

2.4 Limitations of the study

The task of producing evidence in this field at a global level is a challenging one. The main limitation – recognised by all researchers working on studies on violence against children, particularly in relation to its economic costs – is the dearth of complete data in the majority of countries, making it difficult to calculate accurate national and global estimates.

There are multiple data gaps and discrepancies in the types of data available. For example, the level of information in each country is different. Some high-income countries have more comprehensive information and datasets regarding incidence, consequences and direct costs, than most low- and middle-income countries. Similarly, with respect to direct costs, the level of services available to victims of violence varies significantly, with higher direct costs of service provision incurred in countries with higher levels of service provision (by governments, non-governmental organisations (NGOs) or the private sector) and where victims can better access those services. The indirect costs of violence – which include economic losses resulting from lower human capital development and reduced productivity – vary significantly in each country given different levels of human capital development (including, in particular, average schooling levels), productivity and characteristics of the labour market, among other factors. The report discusses these variables in relation to the data presented.

Further, it is rare to find detailed surveys on violence against children in either developing or developed countries, although they are more frequent in the latter. In terms of administrative records, it is challenging to find reliable information on hospital and judicial records in developing countries, even less so when conducting a desk-based study. This is the case also in terms of trying to measure the possible effects of violence against children in the long run. For this, information on the economy, such as on employment, productivity and income, is of paramount importance, since most methodologies calculate the loss in any of these factors as a result of the impacts of violence. In developing countries, for example, formal labour markets are quite underdeveloped. This gives way to informal economic activity that is almost impossible to measure. Meanwhile, high levels of unemployment and underemployment affect the ability to measure the extent to which lost productivity over the life-course correlates with poor work outcomes. Moreover, girls and women usually work at home performing subsistence and community work (Duvvury et al., 2004), which is also extremely difficult to account for, even with standard methods. Finally, multiple factors linked to school demand and supply, and unrelated to violence against children, might stop a child going to school. All this makes estimations for individual countries without adequate levels of data near impossible.

It is also important to note that different forms of violence and the different magnitudes of the violation entail different consequences and different costs, although there are similarities in the types of impacts they have. These differences should ideally be considered when factoring economic impacts, but data are not available for such a level of detailed analysis.

3 Exploring the consequences and related costs of violence against children

Violence against children is a complex issue, and available data and definitions vary by country, so it is reported differently in different contexts. In addition, research methods create differences between coverage and quality of data, and often result in figures that are not comparable among themselves. Nevertheless, it is important to present the evidence that has been produced throughout the world on the consequences and costs of violence against children. This section offers compelling evidence from the literature on the consequences and related costs of violence against children in its different manifestations.

This study uses data available from official statistics, in-country surveys and other relevant literature. We have generally drawn data from studies from across various countries rather than using official data sources, given the limited official data in this area. UNICEF released a statistical analysis of violence against children at the start of September 2014, just as this report was finalised (UNICEF, 2014a). Data included in this report should be seen as complementary to the statistics presented below.

3.1 Sexual violence and abuse perpetrated against children

In 2002, WHO estimated that 150 million girls and 73 million boys under the age of 18 had experienced forced sexual intercourse or other forms of sexual violence (UN, 2005). In addition, WHO estimates place the number of girls and women who have undergone forms of FGM/C at between 100 and 140 million (UNICEF, 2005a).

The first step towards understanding the costs linked to violence against children lies in knowing the magnitude of the problem— that is, how many victims there are. Determining the pattern of incidence of sexual exploitation, violence and abuse is difficult, however, given the fragmented data available on its prevalence, compounded by underreporting, since many victims — both girls and boys — lack the will or the means to report their exposure to such violence. As part of the review of the literature and to inform the cost analysis in Section 4, we compiled data on the prevalence of sexual abuse. We present these in Annex 1.

Indirect and direct costs of sexual violence

Up to 50% of sexual assaults worldwide are committed against girls aged under 16 (UNFPA and UNICEF, 2011). In 2000, an estimated 1.8 million children (mostly girls, but also boys) were involved in commercial sexual exploitation and child abuse images. Around 1 million children are forced into commercial sexual exploitation every year (UNICEF, 2010a). In high income countries that are not experiencing conflict, 21.2% of females and 10.7% of males were victims of sexual abuse between the ages of 0 and 18, meaning an average of nearly 16% of all children (Stoltenborgh et al., 2011). These figures provide some insights into the magnitude of exposure to sexual abuse and violence facing children, particularly girls (Annex 1 presents additional data on the scale of the problem by regions and in some countries for which there is data). The literature from around the world documents many of the consequences and costs of this. We present some important supporting statistics and concrete examples of the costs below. Such information and accompanying figures provide a sense of the scale and adverse impacts of this grave violation of children's rights.

With respect to health-related consequences and costs, children, particularly girls, may experience immediate physical injuries as a result of sexual violence, such as abdominal pain, back pain and gastrointestinal disorders (WHO, 2013), and in extreme cases, injuries resulting from the rape of small children can result in their death. In addition, there is the potential of suffering from long-term debilitating physical conditions such as chronic pain and sexually transmitted diseases (STDs), including HIV and AIDS, leading to lifelong costs of health care and loss of quality of life, among other consequences (CDC, 2014). For example, in Swaziland, sexual violence as a child is associated with more than three times the risk of reporting STDs, including HIV, compared with those not exposed (Reza et al., 2009). In the US, the prevalence of all STDs in sexually abused girls has been found to range from 2% to 7%; in sexually abused boys it ranges from 0% to 5% (Allnock and Hynes, 2011). In the worst cases, these diseases can lead to death. The health care costs of such injuries and disease can be significant, both for individuals in terms of the direct costs of paying for health services and for the state as provider. In countries most severely affected by HIV and AIDS, costs on the economy have been estimated as a loss of around 1.5% of gross domestic product (GDP) per year (Greener, 2004), so a share of this economic loss is associated with HIV and AIDS transmission to children victims of rape.

There is ample evidence of the resulting psychological harm caused to child victims of sexual violence, such as posttraumatic stress disorder, self-harm and depression. A New Zealand study (Cashmore and Shackel, 2013) revealed children who had experienced sexual abuse had rates of mental health disorders, including suicidality, that were 2.4 times higher than those of children not exposed to sexual abuse. For this study, estimates of the population attributable risk (PAR) suggested the elimination of child abuse within the city of Christchurch cohort would have reduced overall rates of mental health disorder in adulthood by 13%. For children in the US, treatment of mental disorders in children, such as depression, costs the most, at \$8.9 billion compared with \$8 billion for asthma and \$6.1 billion for trauma-related disorders (Soni, 2009). A significant share of those mental health costs are the result of violence during childhood.

Pregnancy in children mostly takes place in the context of child marriage (Chaaban and Cunningham, 2011), in itself a form of child abuse, and is also a frequent result of rape (Lalor, 2004; UNICEF Tanzania, et al, 2011). In Tanzania, over 6% of females aged 13-24 who were ever pregnant reported that at least one pregnancy was caused by forced or coerced sex (UNICEF Tanzania et al., 2011). Pregnancy in children has significant costs in terms of the health of the mother and the care of the child. An estimated 1 million girls aged 10-14 give birth every year, and an estimated 16 million aged 15-19. The younger the girl is when she becomes pregnant, the greater the risk to her health. It is estimated that girls under the age of 15 are up to 5 times more likely to die in childbirth than women in their 20s (UNFPA, 2012). There is also a significant opportunity cost linked to school dropout, as girls, particularly in low-income countries, tend to drop out when they are pregnant. A study in Cape Town established that a girl who did not have children stayed in education for an average of 10.1 years, with a percentage dropout rate of 57.8. For a child who is also a mother, the average number of years reduced to 9.6, with a 76.4% chance of dropping out of school. There was only a 21.8% chance of successfully completing high school by the age of 20 (Karra and Lee, 2012).

The cost of pregnancy in children as a share of GDP could be as high as 30% or as low as 1% over a girl's lifetime, depending on the assumptions used to calculate the losses (including the job opportunities available to girls after they complete school). For example, adolescent pregnancies in Bangladesh cost \$442,628,523 per year – 11% of GDP; in Malawi, they cost 27% of GDP, at \$57,821,320. According to Chaaban and Cunningham (2011), the lifetime opportunity costs of pregnancy in children for national economies. These ranged from 1% of GDP in China to 12% in India and 30% in Uganda. In India, pregnancy in children is estimated to lead to 'over \$100 billion in lost income, an amount equivalent to twenty years of total humanitarian assistance world-wide' (Presler-Marshall and Jones, 2012). The number of pregnancies in children resulting from violence and abuse (including from child marriage and rape) contribute significantly to those costs.

Sexual violence and abuse in and around school – as well as the risk of it – increase the likelihood of children disrupting their education through truancy, absenteeism and dropout. Analysis in many low-income countries shows the risk of facing sexual violence in school or on the way to school is one of the important reasons girls stop going to school. For example, one study found sexual abuse was common in all countries in West and Central Africa, and ministries of education were aware it was one of the main reasons girls dropped out (UNICEF, 2004). Worku and Jayalakshmi's (2006) study on sexual violence against girls in schools in Ethiopia showed almost 57% of students considered this to have a high impact on girls' dropout rates (Pereznieto et al., 2010).

Lower levels of schooling lead to a direct effect on potential long-term income levels through lower human capital accumulation, at a huge cost to individuals and economies. A 2008 Plan study based on World Bank research and economic data and UN Educational, Scientific and Cultural Organization (UNESCO) education statistics estimates that the economic cost to 65 low- and middle-income and transitional countries of failing to educate girls to the same standard as boys to be \$92 billion each year (Plan International, 2008). This economic loss from lower levels of schooling is manifested in different ways. For example, some studies have found that children who complete education earn wages 5-15% higher than they would have without the extra year of schooling (Pereznieto et al., 2010). Negative impacts on schooling are common for all forms of violence (sexual, physical and psychological), with different magnitudes of impact.

Adding to the economic impact of sexual violence on children, there are also important consequences with regard to labour absenteeism and productivity declines at work as a result of health problems linked to sexual abuse. A study in several Southern African countries estimated that the combined impact of AIDS-related absenteeism, productivity declines, health care expenditures and recruitment and training expenses could cut profits by at least 6-8%. East African businesses have reported that absenteeism can account for as much as 25-54% of company costs (UNAIDS, 2003).

3.2 Physical and/or psychological violence against children

This section mainly explores data on the consequences and costs of physical and psychological violence against children, although in some cases the figures provided include sexual abuse as well, given that the datasets where the figures come from analyse these three forms of violence jointly.

Annex 2 contains a table with figures on the prevalence of physical and psychological violence against children throughout the world. For example, research by the UN Children's Fund (UNICEF) (2006) suggests that as many as 275 million children worldwide are exposed to violence in the home, although this estimate is constrained by the limitations of reporting on this issue: millions more may be affected. Physical and psychological violence also take place in many other settings, including the community and schools.

The economic cost of physical and psychological violence against children is most widely documented in high-income countries; data that observe only children and data from low-income countries are limited. Additionally, as Section 2 noted, the actual costs of violence are based on victim's behavioural responses (UN, 2005) and the availability of services, which significantly alters the direct and indirect costs for victims and service providers.

Children can experience immediate physical injuries (for example fractures and bruises) as well as potential longterm physical conditions such as chronic pain, leading to lifelong costs related to health care and loss of quality of life. There is also strong evidence that physical and psychological violence can cause permanent disability (see, for example, Dominguez et al., 2001) and premature mortality in some victims who face severe cases of violence, in turn resulting in economic costs linked to loss of life (such as the individual's lost income during his/her lifecourse). These economic losses have been calculated in several countries. In the US, different studies estimate the direct medical treatment costs per abused child at between \$13,781 and \$42,518 (WHO, 2004; 2011). A study exploring the economic impact of child abuse in Canada found the aggregate costs to Canadian society of child abuse to the health sector in the short and long term were CA\$222.57 million (Bowlus et al., 2003). In Turkey, the total health care cost for children aged 0-8 who have faced physical, psychological and sexual violence is calculated at L5,454,559.29 (Basak et al., 2013). A study in Australia estimated violence against women and their children would cost an estimated A\$3,883 million, with violence against children costing A\$211 million, between 2012 and 2022, with costs attributable to pain, suffering and premature mortality (Government of Australia, 2009). With respect to low-income countries, total estimated health costs for a Kenyan child whipped for not completing his homework were between \$5 and \$10 (Plan International, 2010). Given that most Kenyans live below the poverty level of \$1 day, this is likely to represent up to two weeks earnings and have severe economic consequences for the family (ibid.).

WHO estimates that 0.6% of all yearly deaths of children under the age of 15 years owe to child maltreatment¹, which makes up 12.7% of the total number of deaths that result from injury (Walby, 2004). Child homicide occurs most frequently during infancy: in the UK, 35% of child homicide victims are younger than one year (Gilbert et al., 2013). According to Corso et al. (2007), for children aged 0-4, the average cost per case for a fatal assault is \$11,300 (in 2000 dollars) in medical costs and \$1,005,650 (in 2000 dollars) for lost productivity. Adjusted to 2010 dollars, the medical costs and productivity losses are \$14,100 and \$1,258,812, respectively.

Another important set of costs are those related to mental illnesses children suffer as a result of physical and psychological violence, such as depression, anxiety, post-traumatic stress disorders, psychosomatic illnesses and suicidal tendencies, which can lead to lifelong costs of health care and lower economic productivity (UNICEF, 2006). According to Gilbert et al. (2013), around a quarter to a third of maltreated children meet criteria for major depression by their late 20s. In the US, 80% of young adults who had been abused as children met the diagnostic criteria for at least one psychiatric disorder at age 21, and children in out-of-home care because of abuse or neglect tended to score lower than the general population on measures of cognitive capacity, language development and academic achievement (ibid.). However, depression must also be considered in light of other factors and contexts (Walby, 2004). In the UK, treating mental disorders, including among children, that owe to domestic violence costs £176 million (Women's Aid, 2013).)

An additional set of costs related to physical and psychological violence includes protective services – including welfare, police, court systems costs, counselling and violence prevention programmes. The cost of providing protective services to victims is significantly higher in developed countries, as victims of violence have access to a series of support services that are not provided in most developing countries (Pereznieto et al., 2010). In the US, for instance, child welfare costs resulting from violence account for \$14.4 billion, with mental health treatment costing \$425 million and hospitalisation \$3 billion (WHO, 2004).

As discussed under the costs of sexual violence and abuse, there are significant costs linked to lost social benefits and educational achievement, leading to lower school attainment and long-term human capital costs, with ample evidence showing the economic loss linked to lower school completion. According to a small but nationally representative study in Ethiopia, over 40% of parents said school violence would have a high impact, discouraging them from sending their daughters to school: 60% of girl students and 42% of boy students felt violence had a high impact on girls' absenteeism from school (Save the Children Denmark et al., 2008). In India, between \$1.483 billion and \$7.418 billion is lost to school violence each year as a result of early school leaving, equating to between 0.13% and 0.64% of GDP (Pereznieto et al., 2010). Similarly, in Brazil, studies assume that between 1% and 5% of early school leavers do so largely as a result of school violence, and \$2.26 billion and \$11.4 billion in social benefits is lost to school violence each year (ibid.). In Pakistan and Lesotho, dropout rates have been linked strongly to corporal punishment. In Palestinian refugee camps in Lebanon, 68% of boys and 58% of girls have dropped out of school because of harsh treatment (MSI, 2008).

Consistent evidence suggests those exposed to violence are more likely to perpetrate violence against their children (Prevent Child Abuse New York, 2003) and children who experience violence at home or anywhere else are more likely to become perpetrators of violence among their peers (Naker, 2005). For example, in the UK, the link between child physical abuse and domestic violence is high, with estimates ranging from 30% to 66% depending upon the study (Hester et al., 2000; Women's Aid, 2013). As such, a critically important indirect impact of exposure to physical and psychological violence during childhood is the higher likelihood of becoming violent as an adult, or turning to crime (UNICEF, 2006). The National Institute of Justice in the US estimates that 13% of violent crime can be linked to earlier child maltreatment (Pereznieto et al., 2010); another study for the US shows children who have experienced violence or abuse as a child are 2.7 times more likely to be arrested for violent or criminal behaviour as an adult, and 11 times more likely to be arrested as a juvenile (Child Poverty Action Group, 2013). There are significant costs associated with youth violence globally (Cunningham et al., 2008). Youth violence and gang violence, for which underlying causes include a culture of violence, school violence and violent dysfunctional families, is a significant issue. In El Salvador, the figure of violent youth crime is 27%; it is 28% in Honduras and 25% in Nicaragua (World Bank, 2011).

¹ According to the WHO's definition, child maltreatment includes all forms of physical and emotional ill-treatment, sexual abuse, neglect, and exploitation that results in actual or potential harm to the child's health, development or dignity. Within this broad definition, five subtypes can be distinguished – physical abuse; sexual abuse; neglect and negligent treatment; emotional abuse; and exploitation.

Violence during childhood has also been linked to future increase in rates of substance abuse, juvenile pregnancy and smoking, alcohol and drug use (WHO, 2006). In the US, those with a history of child abuse and neglect are 1.5 times more likely to use illicit drugs in middle age (Widom et al., 2006). As a result, there are important second generation costs (once reached teenage/ adult years), including higher health care rates, counselling, child protection services and increased pressure on juvenile justice systems.

Yet another dimension of the economic impact of physical and psychological violence against children is lost productivity. Violence can lead to higher chance of unemployment or lower wage achievements, leading to lower GDP rates. It is also linked to lower production from absenteeism, search and hiring costs, lost unpaid work and permanent loss of labour capacity (Fang et al., 2012). In the UK, research based on panel data from the British National Child Development Study found school bullying had a detrimental effect on human capital accumulation, which may influence wages received during adulthood. In particular, the study confirms wage levels (at ages 23 and 33) are higher for those individuals who did not experience bullying (controlling for other factors) than for those who experienced bullying (Brown and Taylor, 2008). In the US, the estimated average lifetime productivity losses per victim of nonfatal child maltreatment are \$144,360 using a cost per case estimate (Fang et al., 2012); Prevent Child Abuse America estimated the costs of child maltreatment and lost productivity to society owing to unemployment in 2003 at \$656 million (Goldman et al., 2003). Currie and Widom (2010) assessed the economic consequences in individuals with documented histories of childhood neglect and physical and sexual abuse and a matched comparison group who were followed up into adulthood. They found individuals with documented histories of neglect and/or abuse earned about \$5,000 less per year on average, controlling for background characteristics.

3.3 Child labour, particularly its worst forms

According to the ILO (2013a), 168 million children worldwide are child labourers, accounting for almost 11% of the global child population as a whole. Not all work children carry out needs to be eliminated². However, labour that deprives children of their childhood, their potential and their dignity, and that is harmful to their physical and mental development should be eliminated.³ The largest absolute number of child labourers is found in the Asia and the Pacific region (77.7 million child labourers aged 5 to 17, which is 9.3% of the total child population in that region), but Sub-Saharan Africa continues to be the region with the highest share of child labourers, at more than one in five children (59 million child labourers aged 5 to 17, which is 21.4% of the total child population in that region).

The worst forms of child labour involve children being enslaved, separated from their families, exposed to serious hazards and illnesses and/or left to fend for themselves on the streets of large cities – often at a very early age. The largest number of children engaged in the worst forms of child labour carry out hazardous work, with an estimated 85.3 million children aged 5-17 in this type of work in 2012 (ILO, 2013a) in sectors as diverse as agriculture, mining, construction, manufacturing, services, hotels, bars, restaurants, fast food establishments and domestic service. This phenomenon is found in both industrialised and developing countries. An estimated 22,000 children are killed at work every year. The numbers of those injured or made ill because of their work are not known. Hazardous forms of child labour are often treated as a proxy for the worst forms of child labour because children in such work account for the overwhelming majority of those in the worst forms and because reliable national data on the worst forms other than hazardous work, such as commercial sexual exploitation and conflict, are difficult to come by.

² Effectively, some forms of child employment are beneficial to the child or adolescent and do not affect their health and personal development or interfere with their schooling, and are generally regarded as being something positive. This includes activities such as helping parents around the home, assisting in a family business or earning pocket money outside school hours and during school holidays. Such activities contribute to children's development and the welfare of their families; they provide them with skills and experience and help prepare them to be productive members of society during their adult life (www.ilo.org/ipec/facts/lang--en/index.htm).

³ This refers to work that is mentally, physically, socially or morally dangerous and harmful to children and interferes with schooling by 1) depriving them of the opportunity to attend school; 2) obliging them to leave school prematurely; or 3) requiring them to attempt to combine school attendance with excessively long and heavy work.

 $^{4\} www.ilo.org/ipec/facts/WorstFormsofChildLabour/Hazardouschildlabour/lang--en/index.htm$

Hazardous child labour is defined by Article 3 (d) of the ILO Convention concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour, 1999 (No. 182) as 'work which, by its nature or the circumstances in which it is carried out, is likely to harm the health, safety or morals of children'. Examples of some hazardous child labour activities that should be prohibited are provided in the accompanying ILO Recommendation No. 190 and include work that exposes children to physical, psychological or sexual abuse; work underground, under water, at dangerous heights or in confined spaces; work with dangerous machinery, equipment and tools, or that involves the manual handling or transport of heavy loads; work in an unhealthy environment, which may, for example, expose children to hazardous substances, agents or processes, or to temperatures, noise levels or vibrations damaging to their health; work under particularly difficult conditions, such as work for long hours or during the night; or work where the child is unreasonably confined to the premises of the employer. For example, 8.1 million children aged 5-17 work in hazardous domestic work, which includes long hours, but also conditions that could cause physical or mental harm, such as night work, exposure to physical or sexual abuse (ILO, 2013b) or operating heavy and dangerous machinery in agriculture (FAO, 2011).

However, ILO (2013a) notes positive progress between 2000 and 2012, with 78 million fewer child labourers at the end of this period, a reduction of almost a third. The fall in girls involved in child labour was greater, with a reduction of 40% during this period, as compared with 25% for boys. The total number of children in hazardous work declined by over half. Annex 3 provides additional data on the number of children involved in the worst forms of child labour throughout the world.

There are significant direct and indirect costs related to hazardous child labour, many of which result from the need for health treatment or the consequences of illness or injury resulting from hazardous forms of labour. While there are important figures on the number of children whose health is affected, few data are available on the costs they incur as a result, although it is clear many of these are significant. Another set of costs, those related to school dropout and the resulting loss of human capital accumulation and productivity, is similar to those children incur facing other forms of violence, as discussed above.

Children can be negatively affected by immediate and long-term health costs such as fractures, injuries or lifethreatening diseases including cancer, tuberculosis (TB) and musculoskeletal problems developing in later life. There is also evidence of premature mortality rates for children in hazardous work (O'Donnell et al., 2002). A large-scale ILO-sponsored survey in the Philippines found 60% of all economically active children were exposed to hazardous working conditions: 19% were exposed to biological, 26% to chemical and 51% to environmental hazards (O'Donnell et al 2002). Further, each year, as many as 2.7 million healthy years of life are lost owing to child labour, especially in agriculture (ibid.). In India, for example, industries with large proportions of child labourers also tend to have high rates of TB and silicosis; stonecutters and slate workers, for example, have silicosis rates of 35% and 55% respectively (O'Donnell, 2002; Parker, 1997). Impacts on the health of children often result from the use of dangerous chemicals. Studies show children who use pesticides in cotton fields experience blurred vision, extreme dizziness, headaches, difficulties in concentration, trouble remembering, difficulties in understanding, depression and numbness (World Vision, 2012). While the literature does not document the direct costs children and their families incur in receiving health attention for these injuries or illnesses, or estimate the costs to the state of providing such services, it is evident that these costs are significant, particularly as child labourers in most cases come from poor families for whom paying such health care costs poses a significant economic burden.

Combining child labour with schooling or dropping out of school altogether leads to lower productivity. The sections above discuss costs to the individual and the economy resulting from lower schooling. The examples below provide a sense of the magnitude of the costs resulting from hazardous work as a result of reduced schooling. In India, the non-attendance rate at school for child labourers is twice the level for non-labourers. This rises to around four times the level in countries such as Bangladesh, Pakistan and the Philippines (Brown, 2012). In Zambia, which has 1.3 million children involved in child labour, a study estimated that the child labourers lag behind non-labourers at every stage of the primary school cycle (UCW, 2009). The gap widens towards the end of the primary school cycle. There is also a distinct rural disadvantage: 88% of children involved in manufacturing attend school compared with 74% in agriculture (ibid.). In Bangladesh, it is estimated that the worst forms of child labour lead to two years less schooling on average; as such, lifetime earning ability is reduced by estimates of 13-20% as a result of entering the workforce at a young age (ILO et al., 2008).

3.4 Violence against children in emergency contexts

This section discusses some of the broader economic costs facing children in emergency contexts, with a particular focus on those linked to children associated with armed forces or groups. As Section 2 noted, some of the consequences of violence against children in emergencies are similar to those explored in sections (a) and (b); in fact, some of the examples and figures provided come from emergency contexts. In emergencies, variations relate to whom the costs accrue to and the magnitude of the costs, which can vary (note the nature and frequency of violence are greater). Economic costs tend to result in high costs to individuals and families in particular; depending on the context and accessibility of services, the state and NGOs may also incur costs, in terms of service provision. These also will vary.

Although there are limited figures for the actual economic costs of children in emergencies, either those who are directly affected by the crisis or those who become associated with armed forces, this section discusses some useful data on the magnitude and scope of violence against children these situations. When seen alongside the economic costs discussed above (in sections (a) and (b)), these data provide a sense of the huge economic costs linked to violence against children in emergencies.

The risks for violence against children that arise during an emergency vary by country and depend on factors such as numbers of children affected; types of problems present before the emergency; level of state organisation and stability before and during the emergency; country capacity to respond; and nature of the emergency.

The negative impacts are enormous. In 2006, an estimated 250-300 million children were affected by humanitarian crises and disasters globally through injury, death and economic costs (Save the Children, 2007), with 50% of the 24.5 million conflict-related internally displaced people estimated to be children (Save the Children, 2007). While some manifestations of violence, including child trafficking, sexual abuse and exploitation, psychosocial violence and extreme forms of child labour, may be present before disasters and/or conflict, emergencies may exacerbate child protection issues. As UNICEF (2005c) states, the breakdown of institutions opens a gap for criminal and corrupt exploitation of the most vulnerable, and particularly children.

In conflict, the risk of sexual exploitation and violence towards girls and boys increases. Many children particularly girls - are at risk of sexual violence, including sexual abuse and rape. Some figures for conflictaffected contexts provide a sense of scale of the problem and thus of the magnitude of related costs. Save the Children (2013) estimates children under the age of 18 comprise the majority of survivors of sexual violence in conflict-affected societies, potentially representing as many as 80% of all survivors of sexual violence during times of war. For example, during the conflict in Colombia, young girls were given to paramilitary forces, or gave themselves to prevent violence against their families (Mazurana and Carlson, 2006). 12,732 cases of sexual violence were reported in 2000, and this increased to 20,000 in 2010, fear of reporting has meant the true figure is unknown. Amnesty International reports that of the 20,000 cases, approximately 85% were under the age of 18 (Castillo, 2011). In the Democratic Republic of Congo (DRC), at least 200,000 cases of sexual violence against women and girls have been documented since 1996, with an alarming increase in reported cases following the upsurge in violence in the eastern province of North Kivu since April 2012 (DFID, World Vision, 2013). In the first half of 2012, 74% of sexual violence survivors treated in Goma's HEAL Hospital were children (HEAL Africa, 2012, in War Child, 2013a). In the Central African Republic (CAR), over 50% of children surveyed reported being victims of sexual exploitation and abuse (UNICEF, 2010, in War Child, 2014). In total, more than 60,000 women and girls were raped in the civil war in Sierra Leone (UNIFEM, n.d). According to 2012 reports by the UN Secretary-General, Darfur has seen a three-fold increase in child rape since 2010 (War Child, 2013a). And in Haiti's capital, Port-au-Prince, almost one-fifth of girls were raped during an armed rebellion in 2004 and 2005 (Kolbe and Hutson, in Save the Children, 2013). While available statistics show that women and girls are most likely to experience sexual violence in conflict, in the past decade incidents of sexual violence against men and boys, including sexual enslavement and forced rape, have been reported in over 25 conflicts worldwide (War Child, 2013a). Stoltenborgh's et al (2011) study found that up to 7.6% of boys have experienced sexual abuse. The cases of Syria and Afghanistan show that rates of abuse against boys in conflict affected areas are likely to be significantly higher than any official or gathered statistics would suggest (War Child, 2013a).

Costs related to sexual violence arise from the need for medical treatment in case of resulting injuries, which are common given the nature of such violence; STD transmission is frequent in some contexts, particularly when

there are gang rapes and rapes of many women in the community. These result in high health-related costs to the individual even when services are not available to give treatment. Pregnancy in children resulting from rape is also common (de Brouwer, 2005; Mazurana and Carlson, 2006), with the added cost of caring for a child who faces significant stigma in the community. Social stigma can result in exclusion from school, work and other elements of community life. In Rwanda, for example, children who are socially stigmatised are referred to as *les enfants mauvais souvenir* ('children of bad memories'), *enfants indésirés* (unwanted children) and 'little killers' (Mukangendo, 2007). Stigma and rejection from the community can in turn lead to a cycle of poverty for these children (de Brouwer, 2010). Sexual violence can also result in the long-term or permanent disability of girls and boys who are victimised, with implications in terms of medical costs, care costs and loss of productivity and income throughout their lives. The psychological impact and trauma can also result in lost productivity over the life-course (Mazurana and Carlson, 2006).

Physical abuse and other forms of household violence are also commonplace in humanitarian settings, as the added strain placed on children's families or caregivers has been known to make these acts more likely to occur (Global Protection Cluster, 2013). The scale of severe physical injury, psychological impacts and death of children is also sobering, in the case of both natural hazards and conflicts. Some examples provide a sense of this loss. In CAR, at least 133 children were killed or maimed over the two months preceding mid-February 2014 (War Child, 2014). In Syria, on average 12 children are killed per day, with over 12,000 children killed since the conflict began (War Child, 2013b). In Iraq, in the aftermath of the war, between December 2012 and April 2013, security reports reveal that an estimated 692 children were killed, and more than 1,976 children and young people have been injured through violent incidents (War Child, 2013c).

Medical costs resulting from violence against children in emergencies tend to be much more severe. In the most extreme cases, when children's lives are lost, in addition to the human dimension of such a loss to families, families and the economy face an economic cost resulting from the foregone income or productivity loss related to those lost lives. Medical costs are high given the nature of injuries, many of which cause permanent disabilities that require medical care for many years, in addition to possible negative impacts on the child's productive capacity over her/his lifetime.

The psychological consequences for children's lives are also significant. For instance, in Colombia, a cross-sectional study comparing the mental welfare of young adults indicated prevalence of somatisation disorder and depression was particularly high in the population that had been exposed to violence: 81.8% for one village and 72.7% for a second. While the study could not determine causality, the results suggest an association (Londono et al., 2012). In Sierra Leone, a two-year follow-up study of 156 male and female child soldiers (aged 10-18) found boys who had wounded or killed during conflict showed an increase in hostility. Girls who were raped displayed higher levels of anxiety and depression over time (Werner, 2012). Psychological trauma and mental health issues also result in lifelong income or productivity losses, even when direct costs are minimal in the near-absence of mental health support services.

Emergencies significantly increase the risks of children becoming involved in the worst forms of child labour, given that their households can be thrown into poverty and have to adopt extreme coping mechanisms, which often include hazardous forms of work. Also, one of the consequences of emergencies for children is separation from their families over the short or long term, another cause of them becoming involved in hazardous work, the costs of which were explored in section (c). Separation can also lead to trafficking, and more physical and sexual violence. Children's association with armed forces or groups is a particularly harmful and costly 'worst form of child labour' that children are at risk of engaging in during conflict. The number of children in this situation is estimated to be between 250,000 and 300,000, 40% of whom are girls (UN, 2000).

In this sense, the scale and effects of abduction and/or conscription of children into armed forces or groups is also alarming. In CAR, War Child identified 371 children in one camp near Bangui of whom 14 spoke of being kidnapped (War Child, 2014). In DRC, more than 30,000 children –boys and girls – have been conscripted into the various militia (War Child, 2006). In Sierra Leone, rebels abducted 5,000-7,000 children and forcibly conscripted them (ibid.). However, separation, violence and lack of resources can also lead children to voluntarily join armed forces and groups (Child Soldiers International, 2012).

Violence against children in emergencies may also result in school dropout, the economic impacts of which we discussed in sections (a) and (b) above. In addition to school dropout as a result of injuries, disabilities, psychological trauma, conscription into armed forces or groups, and pregnancy in children resulting from rape, conflict itself also has huge impacts on children's ability to continue in school. In Syria, the combined effect of the conflict has jeopardised 2.5 million children's education. Only 118,000 child refugees have been able to continue their education in some way. War Child's assessment of Zaatary Camp in Jordan revealed 80% of children were not in education, from the more than 60,000 children residing there (War Child, 2013b). Further, UNICEF estimates 4,072 schools have been destroyed or are being used as shelters across the country; nearly 3 million children are out of education (40% of all children of school age) (UNICEF, 2014b). In Iraq, following the war, 82% of 3-5 year olds are not on track to reach numeracy and literacy standards (UNICEF, 2002, in War Child, 2013c).

While there are no recent estimates of the global scale of children's direct involvement in armed conflict, most of the recent literature refers to the figure cited in the 1996 note to the UN Secretary-General on the impact of armed conflict on children, which notes that, between 1985 and 1995 alone, 2 million children were killed, 4-5 million disabled, 12 million left homeless, 1 million orphaned or separated from their parents and 10 million psychologically traumatised. The scale of this has increased in the past decade. The violence faced by these children will have a devastating impact on their wellbeing, physical security and future development. Furthermore, violence against children also exacts a heavy price on the whole community in terms of lost productivity and risks of future violence.

Annexes 3 and 4 provide data compiled on the number of children affected by emergencies and associated with armed conflict.

4 Estimating the costs of violence against children

This section goes into greater detail on estimates carried out to calculate the economic costs of different forms of violence against children. It includes some case studies from the literature, which provide figures for the costs of violence against children, as well as global estimates calculated for this study.

4.1 Measuring the economic cost of physical, psychological and sexual violence against children

This section focuses on estimates of the economic impacts and costs of physical, psychological and sexual violence. While some victims might experience only one of these types of violence at a time, some others might face several forms of violence simultaneously. Data on the prevalence of these three types of violence are usually captured in the same surveys. As such the literature exploring the economic impacts of violence against children generally analyses them together. Also, although these three types of violence are distinct from one another, they have similar types of consequences and resulting costs over the life-course.

Despite the occurrence of physical, psychological and sexual violence against children being well understood, few estimates of their total economic burden – the minimum direct and indirect costs – exist for international settings. Estimates have been published for a few, mainly high-income, countries but are not yet available for most regions of the world (Fang et al., 2013).

Few examples in the current literature on violence undertake a rigorous examination and estimation of the economic costs and economic impact of violence against children, a few examples are: Access Economics (2004) for Australia, Basak et al. (2013) for Turkey, Bowlus et al. (2003) for Canada, Fang et al. (2012) for the US, Fang et al. (2013) for East Asia and the Pacific and Habetha et al. (2012) for Germany. Importantly, these studies focus on 'child maltreatment', which, in the case of Fang et al. (2013), for example, includes five types of violence: physical abuse, sexual abuse, emotional abuse, neglect and witnessing parental violence.

Most of these studies explore the phenomenon in developed or high-income countries, given the level of data available to calculate cost estimates. Fang and colleagues' recent study in East Asia and the Pacific is a notable exception, but a significant number of background studies specifically commissioned by UNICEF East Asia and the Pacific Regional Office (EAPRO) were required to arrive at this 'epidemiologic approach to economic costs' for the region (see Case Study 2). Turkey represents another middle-income study (Bazak et al., 2013).

These studies use detailed violence-specific surveys to obtain prevalence rates, as well as various administrative health and judicial records to identify certain types of costs related to the different forms of maltreatment, although they generally highlight the limited data available for this purpose. However, the approaches used in the different studies vary, from an 'epidemiologic' analysis of the burden of disease resulting from these forms of violence against children, to an analysis of the productivity losses in the short, medium and long term linked to the psychosocial and physical consequences of violence.

In order to estimate the costs of physical, psychological and sexual violence against children, it is necessary for the prevalence of these phenomena to be calculated to understand the extent of the problem in a country. There are few tools to obtain such estimates and, while medical or judicial records could help in providing a rough estimate of the extent of the problem, only specific surveys on violence, with an emphasis on children, can provide an overall and representative approximation of the rate of violence against children at a national level. Although there is a growing body of such surveys, particularly as a result of a joint UNICEF—Center for Disease Control and Prevention (CDC) initiative in South East Asia and East Africa, these surveys are still very scarce, particularly in developing countries.

In addition to data on the rates of physical, psychological and sexual violence in specific countries, data and information related to the multiple costs identified in Section 2 would need to be available for an accurate estimate of their costs. These include, for example, data on health and medical costs (the extent of which varies in relation to the severity of the violence and the provision of and access to health services); data on the costs of dropouts or non-attendance at school resulting from maltreatment; expenses for social services, judicial services, policing and, in general, government- or NGO-funded child protection services/programmes. Many of these costs were used to calculate the costs of violence in the studies cited above where the data were at least partially available, although these are exceptions since such data are generally unavailable in most countries.

Indirect costs that may be linked to physical, psychological and sexual violence against children, such as property damage/loss (as a result of youth violence, for example); substance abuse; change/loss in lifecycle consumption patterns including reduced income; and pain and suffering costs, though to a certain degree intangible, are estimated in the case of Australia by assigning a value to the Quality Adjusted Life Years (QALYs) lost as a result of injury and illness owing to violence.

In addition to considering all these expenditure categories, several crosscutting elements would ideally need to be taken into account in order to arrive at accurate and reliable estimates:

- All estimates need to be calculated for the lifespan of each individual and then aggregated.⁵
- Data have to be available for the same or close to the same year so they are comparable.
- All estimations need to be brought to present value.
- Information is usually required at all government levels (federal, state, municipal) to be nationally representative.
- Consider that estimates of the opportunity costs in productivity loss throughout the life cycle and health costs in retirement are extremely arbitrary and depend on a wide set of assumptions, such as on life expectancy, education level, employability and expected levels of income, which may or not be applicable when making estimations.

Bearing in mind all these challenges, it is interesting to observe that those studies that conduct a relative rigorous estimation of the economic costs and impacts of violence against children for developed countries reach costs that, when measured in terms of national income, are in a similar order of magnitude. Differences are found in studies in developed countries and those in developing countries. These are linked to the methodology used but mostly to issues related to the availability of reliable data to conduct an estimation.

The case of high-income countries

The studies on the economic costs of violence against children that have been carried out in a few high-income countries where sufficient data has been available to make robust estimates, have found interesting results that underline the high costs of this phenomenon. In Canada, Bowlus et al. (2003) estimated that the total economic cost of violence against children was CA\$15 billion, equivalent to 1.7% of that year's Canadian GDP. Access Economics (2004) estimated the cost of violence in Australia for the period 2002-2003 at A\$8.1 billion, equivalent to 1.2% of Australia's GDP.

In the case of the US, Fang et al. (2012) estimate the economic cost of violence against children at \$124 billion, equivalent to 1% of US GDP, a result that coincides with previous estimates made by WHO (2004). While all these are significant amounts, it is important to highlight that, in all these studies, authors refer to them as 'minimum costs' to society, arguing that in most cases these are 'drastically underestimated and others [costs] are not included at all due to the lack of available data' (Bowlus et al., 2003).

⁵ This point can be debated extensively since the estimate for the lifespan of an individual is completely arbitrary, as it is not known how long each individual will live. While life expectancy could be used to estimate this, a hypothesis that needs to be considered is whether victims of violence against children live shorter or longer lives that those who did not suffer violence when young.

Table 1: Economic costs of violence against children, Canada, Australia and the US

	Costs of violence against children	Share of sector in total
Canada	per sector, per country (million) CA\$	cost per country (%)
Judicial	616.7	4%
Social services	1,178.1	8%
Education	23.9	0%
Health	222.6	1%
Employment	11,299.6	72%
Personal	2,365.1	15%
Total	15,705.9	
Australia	A\$	
Pain, suffering and premature mortality	3,521.0	44%
Health	388.0	5%
Production	484.0	6%
Consumption	2,575.0	32%
Administration and other	480.0	6%
Second generational	220.0	3%
Economic cost of transfers	410.0	5%
Total	8,078.0	
US	US\$	
Non-fatal		
Short-term health care costs	18,903.2	15%
Long-term health care costs	6,096.9	5%
Productivity losses	83,584.4	68%
Child welfare costs	4,474.5	4%
Criminal justice costs	3,906.5	3%
Special education costs	4,631.4	4%
Fatal		
Medical costs	24.5	0%
Productivity losses	2,190.3	2%
Total	123,811.8	

Source: Author's compilation based on Access Economics (2004), Bowlus et al. (2003), and Fang et al. (2012)

Although the studies arrive at similar estimates, differences between approaches and methodologies used are. The studies on Canada and the US estimate that the largest cost of maltreatment stems from employment or productivity losses: these amount to close to two-thirds of the overall cost (see Table 1). In Australia, what appear to be similar costs are in fact separated into other categories, such as consumption, pain and suffering (the largest cost in case of the Australian methodology), and economic transfer costs.

Notable are the differences between health impact estimates for each country, ranging from 1% of the total cost of physical, psychological and sexual violence against children in Canada to 5% in Australia and over 20% in the case of the US. More than being explained by higher health costs in the US, differences owe to the extent of the detail in the information available in each of the countries on health and medical expenditures. More detailed data are available in the case of the US because medical costs of expenditures outside hospital settings, such as on private mental health services, prescription drugs and chronic disease care, sourced through different surveys and medical claims to insurance countries, are included.

The following case study presents a more detailed analysis conducted recently in Germany to estimate the cost of child maltreatment. It provides some insights into how the choice of methodology is determined and estimates are calculated.

Case Study 1: Costs of child maltreatment in Germany

'A Prevalence-Based Approach to Societal Costs Occurring in Consequence of Child Abuse and Neglect', a 2012 study by Susanne Habetha and colleagues, is a prevalence-based cost-of-illness study in Germany. It had the objective of showing how impairment of individual capacities resulting from what the authors define as 'traumatisation' (which are cases of violence during childhood) is reflected in economic follow-up costs borne by society. As such, it goes beyond accounting for individual costs and includes costs borne by society, caused by expenses in cost sectors such as health insurance, social service or losses in added value.

From a societal perspective, 'trauma' (or violence) follow-up costs were estimated using a bottom-up approach. The literature-based prevalence rate includes emotional, physical and sexual abuse as well as physical and emotional neglect in Germany. Costs are derived from individual case scenarios of child endangerment presented in a German cost—benefit analysis. Given their often very pronounced aftereffects, sexual, physical and psychological abuse in the home environment play a central role. Importantly, children are often affected by several types of violence. The costs include those directly linked to what the authors define as traumatisation as well as short- and long-term costs occurring as a result of aftereffects (indirect costs).

The cost per child was obtained from 'Expertise on Cost-Benefit of Early Assistance' by Meier-Gräwe and Wagenknecht, the first study of direct and indirect trauma follow-up costs in Germany that comprises a long lifespan, up to the age of 67 years. Prevalence data were taken from the most recent survey on the prevalence of child abuse and neglect in Germany, the Childhood Trauma Questionnaire (CTQ). Since it cannot be assumed that all victims will suffer the same lifelong aftereffects, particularly not to an extent that would incur further costs, the authors considered only the prevalence of 'severe/extreme' cases as defined by the CTQ. Even for this group, the extent to which the consequences of trauma are reflected as measurable costs is unclear. As such, data from a different studies were used to determine the rate of severe cases of trauma that face significant lifelong costs. The frequency of permanently impaired children among severely affected cases in child protection centres was found to be 21% (including cases of developmental retardation and learning disability), so the authors used this rate for derivation.

The prevalence rate of at least one form of child abuse or neglect classified as 'severe/extreme' was estimated to be 14.5%. When estimated as a share of the German population aged between 15 and 64 years, the age range considered for the prevalence analysis, there would be 7.8 million people affected. According to the methodology utilised, only 21% of the 7.8 million individuals affected by 'severe/extreme' child abuse or neglect was included in the cost calculation. This is equivalent to 1.6 million (or 3.0% of the population aged 15-64 years).

According to this prevalence figure and authors' estimates, the average costs for the age range of 15-64 years are a total of €335,421 (mean value) in the moderate scenario and up to €904,375 (mean value) in the worst-case scenario. The resulting average annual costs, related to a period of 50 years, amount to €6,708 per unit victim in the moderate scenario and to €18,087 in the worst-case scenario, with a resulting total annual costs of €11.1 billion incurred as follow-up costs of child abuse and neglect for German society. In the pessimistic scenario, the figure goes up to €29.8 billion (2008 figures). This is between 0.45% and 1.20% of German GDP for 2008.

Because of the great uncertainty of the information base and the lack of alternative resources, the authors make it clear that this cost-of-illness study reaches a conservative estimate of the costs of violence against children. Thus, they highlight that the general lack of data should be fought in order to enable more detailed future studies. Creating a reliable cost data basis in the first place can pave the way for long-term cost savings, particularly with regard to prevention. At the moment, authors explain that gathering of reliable cost data seems to be a highly challenging task in light of an extremely fragmentary information basis.

Source: Habetha et al. (2012).

The case of low- and middle-income countries

As mentioned above, there are very few examples of studies measuring the costs of physical, psychological and sexual violence against children in low- and middle-income countries. This is a significant gap in the evidence, given that, as WHO (2004) suggests, '[v]iolence disproportionately affects low- and middle-income countries [and] [...] more than 90% of all violence-related deaths occurred in these countries'. Similarly, WHO (2004), estimates homicide rates of children under five years of age at around 2.2 per 100,000 for boys and 1.8 per

100,000 for girls in high-income countries, as compared with 6.1 and 5.1 per 100,000 (for boys and girls, respectively) in middle-income countries. These numbers increase up to 17.9 and 12.7 per 100,000 for boys and girls respectively in Africa. As such, there is a need for more analysis of this kind to be produced for low- and middle-income countries.

Yet, as mentioned in the same report, '[o] fficial statistics often reveal little about the patterns of child abuse. This is partly because, in many countries, there are no legal or social systems with specific responsibility for recording, let alone responding to, reports of child abuse and neglect.'

Thus, despite the high incidence of violence in Africa, Asia and Latin America, few studies have ventured into trying to estimate the economic cost of violence against children in particular. Three specific examples of estimations of the costs of violence against children in low- and middle-income countries stand out: Turkey, Vanuatu and an analysis of costs from East Asia and Pacific (not at an individual country level).

In the case of Turkey, Basak et al. (2013) use the same methodology as Fang et al. (2012) use for the US, which includes multiple variables such as costs of health care, police and justice systems, social services and productivity losses, because at least some of these data are available. The study arrives at estimates of between €4.8 and 47.1 billion, equivalent to between 1% and 10% of Turkey's GDP. The large variation in these estimates stems precisely from the lack of reliable information sources to replicate Fang et al.'s (2012) methodology. In the case of the Pacific island of Vanuatu, according to a study conducted by UNICEF (2005b), costs of violence against children are between 0.5% and 0.75% of the island's GDP, with a prevalence rate ranging between 18% and 36%. The methodology on how these estimates were calculated, however, is not very clear, and it is based on primary data sources rather than detailed data. In the regional study for East Asia and the Pacific, Fang et al. (2013) estimate that the economic value of Disability-Adjusted Life Years (DALYs) lost to violence in 2004 as a percentage of GDP ranged from 1.22% to 3.46% across sub-regions. The estimated economic value of DALYs (in constant 2000 \$) lost to child maltreatment in the region totalled \$150 billion, accounting for 1.86% of the region's GDP.

The next case study focuses on Fang et al.'s (2013) study for East Asia and the Pacific, as a good example of how estimates of economic costs of violence against children are estimated.

Case Study 2: Costs of child maltreatment in the UNICEF East Asia and Pacific region

This case study presents the findings from the analytical report for the project 'Development of Regional Costing Model to Estimate the Economic Burden of Child Maltreatment in the East Asia and Pacific Region' by Xiangming Fang and colleagues (2013). The aim of this study, commissioned by UNICEF EAPRO, is to contribute to the body of evidence on what the authors denominate 'child maltreatment' in the region in order to inform policies and programmes for its prevention. It builds on an existing UNICEF EAPRO-commissioned systematic review (UNICEF, 2012a), and estimates separate population attributable fractions (PAFs)⁶ for costs and consequences of 'child maltreatment', which in the authors' calculations includes physical abuse, sexual abuse, emotional abuse, neglect and witnessing parental violence, in order to develop a regional costing model to estimate minimum costs of child maltreatment in the EAP region.

This report uses an epidemiologic approach to economic costs. This methodology, which looks at the burden of disease to estimate the costs, was preferred in the absence of comprehensive data on other cost variables for child maltreatment in the different countries included in the regional study. The methodology consisted of two key steps. First, existing literature and data on the prevalence of child maltreatment and its impacts were used to estimate PAFs, which were then calculated separately for each of the five major types of child maltreatment in this report and for three of the five categories of outcomes identified by the existing review (effects on mental health and behaviour; effects on physical health and sexual behaviour; and effects on aggression, violence and criminal behaviour). For each type of child maltreatment and category of impact, separate PAFs were estimated both for 'sub-regions' defined by WHO and for country income classifications defined by the World Bank.

6 The PAF is an epidemiologic concept that is widely used to attribute the proportion of morbidity or mortality to a risk factor. Calculation of PAFs requires two pieces of data: 1) the relative risk (RR) of a disease or outcome (e.g. depression) given exposure to a risk factor (child maltreatment), or an odds ratio (OR), which can be converted into an approximate estimate of the RR; and 2) an appropriate measure of prevalence.

Prevalence information varied in its availability and level of reporting throughout the region. As such, this report builds on a baseline set of PAFs for the estimates of the economic burden of child maltreatment, but includes sensitivity analyses based on the other adjusted methods. A regional costing model was developed to estimate minimum costs of child maltreatment in the EAP region based on the PAFs. All PAFs are combined with an estimate of total burden to estimate the share attributable to child maltreatment.

Two measures of burden were used. DALYs lost from deaths, diseases and health risk behaviours attributable to child maltreatment were estimated based on previous WHO reports. DALY losses were then converted into monetary value for each of the subgroups. Both approaches were used since direct financial costs are not available in this region for many of the included impacts of child maltreatment.

New prevalence estimates of child maltreatment and child gender were generated by sub-region on the basis of data compiled by the literature review commissioned for the region (UNICEF, 2012a). It was found that, for the proportion of disease burden attributable to child maltreatment, PAFs are highest for mental disorders for both sexual abuse and emotional abuse. For physical abuse, PAFs are highest for illicit drug use, whereas PAFs of neglect are highest for self-harm. Witnessing IPV contributes most to both mental disorders and illicit drug use.

The study found that the estimated economic value of DALYs lost to violence in 2004 as a percentage of GDP ranged from 1.22% to 3.46% across sub-regions. The estimated economic value of DALYs (in constant 2000 \$) lost to child maltreatment in the UNICEF EAPRO region totalled \$150 billion, accounting for 1.86% of the region's GDP. Based on World Bank classifications, the estimated economic loss of child maltreatment in 2004 totalled \$160 billion, accounting for 1.99% of the region's GDP.

Overall, the aggregate costs of child maltreatment in 2004 as a percentage of GDP are largest in the Western Pacific Region, Group B: 3.01% compared with 2.56% in the Southeast Asia Region, Group B⁸ and 1.22% in the Western Pacific Region, Group A. Across World Bank classifications, the aggregate costs of child maltreatment in 2004 as a percentage of GDP are smallest in high-income countries: 1.45% compared with 3.12% in the lower-middle-income countries and 3.46% in the upper-middle-income countries.

This study therefore finds that child maltreatment is very costly. Estimating the economic burden of child maltreatment is important for several reasons, including increasing awareness of the current severity of child maltreatment, assisting policymakers and government officials in prioritising funding and developing preventive services and other programmes, placing the problem in the context of other public health concerns and providing data for economic evaluations of interventions to reduce or prevent child maltreatment.

Source: Fang et al. (2013).

Global estimation of physical, psychological and sexual violence against children

Having looked at the different methodologies and studies calculating the economic costs of violence against children, we present here a 'global' estimate of such costs. Since administrative records for health, social and judicial services are not available in most low and middle-income countries, the best way to approximate the costs of violence against children is through productivity loss. This is still not a straightforward approach, since, for many countries, wage differentials are not available, nor accurate school dropout rates. It seems, however, the best possible method in this case, and we thus use it for our global estimate of these costs. In order to calculate the economic cost of violence against children, the present study takes into consideration the current economic state of countries in terms of their income level (size of the economy) and productivity level (measured by outcome per worker) as a proxy for the wage differential.

The number of primary school dropouts is considered even if there is insufficient information to ascertain this is linked to violence, as a tool to help define lifetime economic losses in countries – that is, the higher the number of school dropouts, the lower the productivity per worker and thus the higher the loss of possible future gains. Prevalence of child violence is also considered as part of the analysis.

⁷ Cambodia, China, Cook Islands, Fiji, Kiribati, Lao People's Democratic Republic, Malaysia, Republic of Marshall Islands, Micronesia, Mongolia, Nauru, Niue, Palau, Papua New Guinea, Philippines, Republic of Korea, Samoa, Solomon Islands, Tonga, Tuvalu, Vanuatu, Viet Nam.

⁸ Indonesia, Thailand.

⁹ Brunei Darussalam, Japan, Singapore.

The methodology used in this study to estimate the costs of violence against children is based primarily on analyses made by Pereznieto et al. (2010) and Chaaban and Cunningham (2011), which utilise the concept of productivity loss during a person's lifetime as a consequence of violence experienced as a child. This is, of course, an approximation, given that not all countries have sufficient data to categorically confirm that school dropouts or a lower schooling level owe to violence against children, although this it is amply recognised and accepted in the literature as one of the main consequences of experiencing violence during childhood.

The current analysis observes the correlation of the cost of violence against children, as a percentage of GDP, and a set of variables that these as well as others authors regard as key in relation to the economic costs of violence: primary dropout rates, output per worker (as a measure of productivity), percentage of children who experience violence and percentage of children at work. Moreover, the correlation between these variables and cost as a percentage of GDP are made for each income grouping based on the World Bank's categorisation of these groups, namely, low-income, lower-middle-income, upper-middle-income and high-income countries.

Correlations between such variables result in confidence intervals that are translated into a range of lower and higher estimates. The main difference between lower and higher estimates is that, between the lower boundary and the upper one, costs as a percentage of GDP double.^{10, 11}

Table 2: Estimates of economic costs of physical, sexual and psychological violence against children at the global level, by income group (US\$ billions)

	Lower e	estimate	Higher e	stimate
Countries by income grouping	Lower boundary	Upper boundary	Lower boundary	Upper boundary
Low-income	190.8	318.0	254.4	508.8
Lower-middle-income	700.1	2,100.4	1,400.3	2,800.5
Upper-middle-income	560.8	1,402.1	560.8	2,804.2
High-income	501.4	1,002.7	501.4	1,002.7
	1,953.1	4,823.2	2,716.9	7,116.3
Percentage of global GDP	2%	5%	3%	8%

Note: Estimates in Table 2 are in line with results obtained in other studies, such as Bowlus et al. (2003), Chaaban and Cunningham (2011), Fang et al. (2013) and Pereznieto et al. (2010).

Source: Author's calculations based on information from the World Development Indicators 2013, the ILO Key Indicators of the Labour Market (KILM) database and UNICEF Multiple Indicator Cluster Surveys (MICSs).

These results indicate that the global costs of physical, psychological and sexual violence against children are significant. In a given year, the lower estimate scenario, the global costs amounts to between 2% and 5% of global GDP, and in the highest scenario, it goes up to 8% of global GDP.

It is important to highlight that a varied set of assumptions is made when making such estimations. As we have seen, violence against children has several costs, such as health costs and social services and judicial expenditures, among others. Nonetheless, since such administrative records are not available for most countries, and as the few variables that are on hand, for estimating the costs are related to productivity and income-generation activities, this approach was required. In instances where more information is available, such as in the Fang et al. (2013) study, these types of analyses are preferred, although consideration of their limitations is also necessary.

Moreover, the large variance experienced when making such types of calculations results from not only the lack of basic data on the topic at the global level but also the assumptions made by researchers on the exact links between violence during childhood, each of its different natures (such as physical, sexual and psychological, among others) and its lifelong physical as well as mental consequences, in both health and productivity loss terms. This makes it clear that further research on the lifetime costs as well as the extent of violence against children and its physical and mental consequences, is required, but that even in their lower bound, costs of violence against children are significant and require immediate action to be taken.

¹⁰ For example, in the case of higher estimates, for low-income countries the lower boundary cost is the equivalent of 20% of GDP; that for the upper boundary amounts to up to 40%. Similarly, in the case of the lower estimates, for the same income group, estimates for the lower boundary amount to the equivalent of 15% of GDP, whereas those for the higher boundary are calculated at about 25% of GDP

¹¹ Individual percentages are not included in the table for each income grouping as the main purpose of the table is first to show the amount in monetary terms and then to calculate how much these add up to as a percentage of global GDP.

4.2 The costs of the worst forms of child labour

This section focuses on estimating the costs of the worst forms of child labour, using hazardous work as a proxy since, as Section 3 noted, the largest number of children engaged in the worst forms of child labour carry out hazardous work, and it is for this latter classification that data can be found. Table 3 provides recent figures of the number of children involved in hazardous work in the different regions of the world.

Table 3: Number of children involved in hazardous work at the global level

		Hazardous work			
Sex, age and	region	Total Children ('000s)	ldren Number of children in		
World (5-17 ye	ears)	1,585,566	85,344.0		
Sex	Boys	819,877	55,048.0	6.7	
	Girls	765,690	30,296.0	4.0	
Age group	5-11 years	858,925	18,499.0	2.2	
	12-14 years	362,146	19,342.0	5.3	
	15-17 years	364,495	47,503.0	13.0	
Region	Asia and the Pacific	835,334	33,860.0	4.1	
-	Latin America and the Caribbean	142,693	9,638.0	6.8	
	Sub-Saharan Africa	275,397	28,767.0	10.4	
	Middle East and North Africa	110,411	5,224.0	4.7	

Source: ILO 2013a

The 5.4% of children who are involved in hazardous work do so under extreme conditions, not benefiting from the protection provided by the existing or applicable legal frameworks, and are clearly underpaid, if at all. Based on some estimates, each year around 2.7 million years of 'healthy life' are lost owing to the worst forms of child labour, even in developed countries such as the US, where 20,000 children are estimated to die of labour-related injuries each year (O'Donnell et al., 2002).

Since information on the costs of hazardous work is scarce, especially indicators to measure and quantify its consequences and costs in different arenas, such as health and productivity (linked to foregone education), an alternative way to estimate these costs is to determine how much the benefits or gains in health and education are of eliminating the worst forms of child labour. In this regard, the ILO International Programme on the Elimination of Child Labour (IPEC) made such an estimate in 2003, when attempting to calculate the economic costs and benefits of the elimination of child labour, with specific results for the various forms of child labour, different sectors of society and different national and regional entities (ILO, 2013a). Economic costs calculated resulted from the first 10 years of implementation of different programmes to eliminate the worst forms of child labour, such as increasing the education supply and implementing cash transfer programmes, as well as addressing the opportunity cost of child labour for children and their families in terms of lost earnings.

On the benefits side, the ILO study calculated economic gains from a more educated and healthier population, with the latter resulting from the elimination of the worst forms of child labour over a 20-year period. Table 4 presents the estimated benefits.

Table 4: Total economic benefits of eliminating the worst forms of child labour over the period 2000-2010 (\$ billions PPP)

Region	Transitional countries	Asia	Latin America and the Caribbean	Sub- Saharan Africa	North Africa and Middle East	Global
Total benefits	149.8	3321.2	407.2	723.9	504.1	5106.2
Education	145.8	3307.2	403.4	721.8	500.2	5078.4
Health	4	14	3.8	2.1	3.9	27.8

Source: ILO (2003).

According to these data, the total benefits of eliminating the worst forms of child labour over a 10-year period from education and health gains are equal to \$5,106.2 billion, which is a significant figure.

In order to estimate the costs of hazardous work on children, it is particularly important to observe how it affects the lack of years of schooling, given its stark consequences: 'The degree to which work interferes with children's schooling is one of the most important determinants of the long-term impact of early work experience. Reduced educational opportunities constitute the main link between child labour, on the one hand, and youth employment outcomes, on the other. Clearly, if the exigencies of work mean that children are denied schooling altogether or are less able to perform in the classroom, then these children will not acquire the human capital necessary for more gainful employment upon entering adulthood' (UCW, 2011).

Therefore, to complement this calculation, this study provides an additional estimate of the global costs of hazardous work. In this case, the estimate draws on the information in Table 3 on the number of children involved in hazardous work in different regions per age group and considers that years of formal schooling lost (given that hazardous work in general precludes formal schooling) are linked to the age at which they started working. The costs are thus a result of the estimated loss in income resulting from dropping out of school early (see Table 5):

A few assumptions are used to arrive at this calculation, which means the estimate is an approximation and needs to be considered only as a way to provide a sense of the magnitude of the income losses resulting from hazardous work:

- Prevalence of hazardous work for girls and boys is assumed to be the same, as an average is being considered; in reality, there are important gender differences in the prevalence of hazardous work.
- Rural and urban wages are the same, as calculated in the average earnings utilised, although these are different.
- Average years of school lost as a result of hazardous work are considered from the mid-point of the age range to the age of 18, which in general is the international age of completing high school.
- The share of children in hazardous work per age group is assumed to be the same in all regions, calculated as the percentage in age group globally, although there are likely to be discrepancies in the different regions.
- The average rate of return to an additional year of education is estimated to be 10%, based on estimates by Psacharopoulos and Patrinos (2002), although this value varies significantly by region based on the quality of education and returns to work.
- As a proxy of annual earnings, average gross national income (GNI) per capita for the region is used (based on World Bank data), as no globally comparable data on wages are available, especially for low-income countries, where this type of work is more frequent. This is actually a useful proxy, as GNI per capita tends to be lower than average wages, which is a safe assumption, since workers in this category are likely to have below average wages during their lifetime.

Table 5: Annual global costs of hazardous work, based on low- and-middle income regions (USD million)

		Estimated number of children in hazardous work per age group and region (million)	Annual income earned based on complete schooling (complete value) and incomplete schooling (adjusted valued) ^a		Difference in potential annual income (income forgone) ^b
Asia and		33.86	Complete	165,372	
the Pacific	Total				51,192
	5-11 years	7.45	Adjusted	14,027	
	12-14 years	7.79	Adjusted	23,617	
	15-17 years	18.96	Adjusted	76,536	
Latin	Total	9.64	Complete	87,417	27,060
America	5-11 years	2.12	Adjusted	7,415	
and the	12-14 years	2.22	Adjusted	12,484	
Caribbean	15-17 years	5.40	Adjusted	40,457	

	Total	28.77	Complete	44,503	13,776
Sub-	5-11 years	6.33	Adjusted	3,775	
Saharan	12-14 years	6.62	Adjusted	6,355	
Africa	15-17 years	16.11	Adjusted	20,596	
Middle	Total	5.22	Complete	18,033	5,582
East and	5-11 years	1.15	Adjusted	1,530	
North	12-14 years	1.20	Adjusted	2,575	
Africa	15-17 years	2.93	Adjusted	8,346	
Grand total					97,611

Source: Authors' calculations

Notes: ^a Calculated based on working on completion of school (18 years of age) using gross national income per capita as a proxy of average annual earnings per region, World Bank data.

Source: Author's calculations using data on the number of children in hazardous work from ILO (2013a).

According to data in table 5, estimates for global income foregone as a result of lost years of schooling because of children's involvement in hazardous work are equivalent to \$97 billion annually, which is equivalent to seven times the GDP of Iceland in 2013.

To illustrate these costs from a country perspective, using more precise figures including actual rates of hazardous work, loss of schooling and foregone lifetime earnings, we present a case study from Bangladesh.

Case Study 3: The cost of hazardous work in Bangladesh

In Bangladesh, 45% of the total population (estimated at 140.3 million in 2006) are children. Of them, 46% live below the national poverty line, with a quarter in extreme poverty. Many of these children are vulnerable and engage in adverse coping strategies, including hazardous work. An estimated 3.6 million children aged 7-14 years were in employment in 2006, of whom about 2.1 million also attended school. While there are indications of important progress in reducing children's employment in the country, there is still a significant share of children working and many of them who remain out of school.

According to a study by UCW (2011), information about the sector and modality of children's work is available only for those working children who do not attend school – approximately 40% of working children in Bangladesh. This group is of particular interest for the cost analysis since it is based on years of school lost as a result of work and resulting foregone income. Based on 2005/06 data for children working and outside school, 46% of working, non-student 7-14 year olds were found in agriculture and 36% in services; manufacturing accounted for much of the remainder, 16%. Forms of work falling in the 'other' category include children working in the shrimp industry in the sea beach areas and children working in the local cigarette industry (*bidi* workers) in the northern areas.

Studies for Bangladesh noted that 149,000 children were engaged in five hazardous industries: welding, autoworkshops, road transport, battery recharging and recycling and street children. Other hazardous forms of work children in Bangladesh are involved in include bidi factories, construction industry including brick breaking, leather tanneries, fisheries, agriculture and informal sector and domestic services (ILO-IPEC, 2004, cited in UCW, 2011).

Hazardous work accounted for 63% of employment among 5-9 year olds, 56% of employment among 10-14 year olds and 57% among 15-17 year olds. Children in hazardous work are exposed to exploitation and further forms of violence (UCW, 2011).

To estimate the costs of children's involvement in hazardous work in Bangladesh, the same methodology is used as for the global estimates presented above, but using specific data for Bangladesh. According to UCW (2011) data, based on the 2005-2006 Annual Labour Force Survey, there were 4.504 million children in Bangladesh

^b This is the difference between income earned on a yearly basis with complete schooling in low-income countries and lower or 'adjusted' earnings resulting from fewer years of schooling considering that 10% of annual average earnings (per capita gross national income) is lost for every year of schooling foregone, based on Psacharopoulos and Patrinos (2002). Children who are working from an earlier age are assumed to have lost more years of schooling.

involved in hazardous work. Using gross national income per capita as a proxy of average annual earnings for Bangladesh, the estimated annual income earned with complete schooling (at 18 years of age) for these children would have been \$3,783,557. The difference between potential income earned on a yearly basis and actual income resulting from fewer years of schooling assumes a 7% of annual average earnings (per capita gross national income) lost for every year of schooling foregone, based on Niaz Asadullah (2005).

Using the data above, the estimated cost to the economy in terms of foregone income for children to drop out of school early to engage in hazardous work in Bangladesh every year is \$743,538,000. This figure reflects the low value of gross national income per capita in Bangladesh, but is significant in relation to the size of the economy and average earnings. Additionally, this estimate does not include additional health-related costs that can be associated with working in some of these sectors, as discussed in Section 3, which means it is likely to be an underestimate.

Source: UCW (2011).

4.3 The costs of children associated with armed forces or groups

As Section 3 discussed, there are many costs resulting from violence against children in emergency contexts, most of which are difficult to estimate given limited data on the scale and scope of the harm experienced by children and its consequences in such contexts. To give a sense of these costs, however, this study provides an estimate of the global costs resulting from children associated with armed forces or groups, which is only one of those many costs. The economic costs of children associated with armed forces or groups are multi-fold and complex. The human cost to the children themselves, their families and communities is the most important one. However, it is also crucial to understand the scale of the economic costs of children associated with armed forces or groups at the global level.

According to the most recent data available at the global level on the number of children associated with armed forces, the figure globally ranges between 250,000 and 300,000 children (UN, 2000), although this figure is likely to be an underestimate, given the limited data available and the likelihood of underreporting this major problem.

In order to estimate this cost, this study assumes the greatest incidence of children's association with armed forces or groups happens in low-income countries, particularly in Sub-Saharan Africa (although it takes and has taken place elsewhere, including in countries such as Nepal, Sri Lanka and Colombia). As such, the GNI per capita utilised for these calculations is that of low-income countries. Another assumption is that out of the total number of children associated with armed forces or groups, half of them will suffer major injuries, psychological trauma, disabilities or death such that result in a total loss of productivity in terms of their economic value added to society during the rest of their lifetime. Although there are no precise figures in the literature or statistics on children associated with armed forces or groups on how many of the children affected are able to return to productive life, this is an approximation based on insights gained from the literature that discusses the challenges for affected children to reintegrate, particularly in conflict or post-conflict countries, where opportunities and support mechanisms are very limited. In case of the remaining half, the assumption is that they will be reintegrated into productive life, but with years of school lost, so the impact on economic costs via income foregone for the latter group will be similar to that for children engaged in hazardous work.

For the group of children who face complete economic losses, using the gross national income cost, an approach similar to the cost of DALYs is calculated. Since it is impossible to predict how many years a person who suffered through conflict will live, the information presented is on an annual cost basis. Results are presented in Table 6.

¹² World Bank data.

¹³ This study assumes 5 years of school lost, assuming that on average children become associated with armed forces at age 13, and they would have completed school at age 18.

Table 6: Annual global costs of children associated with armed forces or groups (\$)

	Children associated with armed forces or groups	Costs of children facing complete loss in productive capacity over their lifetimes (50%)	Costs of children who are partially reintegrated, but lost 5 years of schooling (50%) ^a	Total
Lower				
bound	250,000.00	74,250,000.00	46,103,408.24	120,353,408.24
Upper				
bound	300,000.00	89,100,000.00	55,324,089.88	144,424,089.88

Source: Author's calculations

The global costs of children's association with armed forces or groups are significant. In its lower estimate, the cost could amount up to \$120 million and the higher estimate to \$144 million annually.

It is important to note that the economic cost of children's association with armed forces is one of many costs of children's involvement in armed conflict, which, as Section 3 discussed, include those resulting from death, disability, illness, sexual abuse and loss of schooling, with permanent physical and psychological effects over the lifetime. Although these precise costs cannot be estimated at the local level because the data are not available (for example, it is difficult to know how many children have been severely physically disabled as a result of conflict in low- and middle-income countries), we can be sure these costs are significant in both the short and the long term, affecting whole generations and countries' economies for years.

5 Spending on prevention and response to violence against children

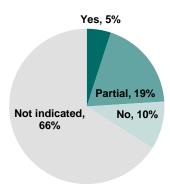
Governments are accountable for taking actions to prevent violence against children and to protect children who have been victims of violence. There has been significant progress by governments over the past few years in providing preventive and responsive services to children, according to the results from the Global Survey on Violence against Children published by the office of the UN Special Representative on Violence against Children at the end of 2013 (UN, 2013).

The Global Survey reveals that children's protection from violence is gaining increasing recognition on international, regional and national agendas, leading to significant progress through the development of strategic actions in a number of countries aimed at achieving effective protection measures. Significant normative, policy and institutional developments have advanced national implementation of prevention and response measures on violence against children, and there has been a revitalisation of networks and strategic partnerships to support advocacy.

Progress could, however, be more robust: many children still suffer from different forms of violence. For example, only 67% of governments responding to the Global Survey confirmed a lead institution was in place to coordinate national responses to violence against children. In some cases, multiple coordinating bodies have been established and their collaboration is uneven. As such, enhanced efforts are still required to secure an institutionalised process of coordination across central departments and between national and decentralised authorities.

In order to achieve this, one of the areas that requires significant efforts is the commitment of human and financial resources by government to policies and programmes to address violence against children. Few governments set aside specific funding for violence-related interventions, and most acknowledge a lack of resources for this area. In fact, from the 100 governments surveyed, only 4% indicated that they provided full resources for policies and programmes to address violence against children; 10% said resources were not allocated. Up to two-thirds of governments failed to respond to this question.

Figure 1: Financial and/or human resources allocated to address violence against children (%)



Source: UN (2013)

This weakness with respect to financing of policies and programmes related to violence against children is exacerbated by limited accessibility of budget and spending data on prevention and response to violence in most countries, despite progress made over the past decade with regard to increasing the transparency of child-sensitive spending.

A growing number of countries have undertaken social sector budget and expenditure analysis from a child-sensitive perspective, but, in general, these focus on a few sectors for which governments have more data, particularly education and health, and increasingly social protection. However, as the Global Survey highlights, child protection the sector where most elements of spending in prevention and response to violence against children are found is generally unavailable. This is either because resources are not allocated to measures included under this sector, or because budget data are so aggregated that analysis in related spending categories – which are usually many and across different functional areas – is not possible.

A global analysis of trends in spending on measures to eliminate violence against children is further complicated by the fact that resources for prevention and response to violence against children fall into a number of areas, which each country classifies differently. For instance, an analysis of child-sensitive spending in Latin America by the UN Economic Commission for Latin America and the Caribbean (ECLAC) and UNICEF for more than 10 countries in the region (Curcio et al., 2010) highlights how each country follows its own methodologies and includes different sectors in the analysis. All include education and basic health as part of child-focused social spending; some include water and sanitation; fewer (Jamaica, Peru, Costa Rica) include aspects related to child protection, and there is limited disaggregation within this sector, which prevents the identification of resources budgeted on prevention and response to violence against children. To illustrate how challenging categorising preventive and responsive spending on violence against children can be, the study mentions as an example that an important component of this spending is in the justice system, but this is difficult to quantify as it is often not included in the executive power's budget, and it is hard to identify earmarked spending on children's courts.

While a global-level analysis of spending on prevention and response to violence against children is thus not feasible, this section draws on examples from four very different countries to illustrate how spending in this area has evolved, and illustrates some of the trends the broader literature bears out. This includes in particular limited spending in the sector with respect to the huge needs and benefits of investing in violence against children, despite positive progress in a few cases.

Since the analysis from the examples and the insights gained from them are more applicable to development contexts, this section also provides an overview of official development assistance (ODA) spent on preventing and responding to violence against children in emergency contexts, in which case the focus shifts to humanitarian spending by donors in this area.

5.1 Government spending on violence against children in development contexts

This first study, from South Africa, discusses how budget and spending on 'child welfare', which includes preventive and protective services for violence (including abuse) against children, has performed over the past few years, including in relation to spending by different provinces, which exercise most of the budget in this area. It highlights that, although resources allocated to child welfare at the national level have generally been increasing, in some cases provinces have low levels of spending on child welfare, despite a demographic and social context that would demand much higher levels of spending in this area.

Case Study 4: Spending on preventive and protective services for violence against children South Africa

In South Africa, child welfare services are defined as those that aim to provide children with the necessary protection from socioeconomic, physical and developmental hardship, abuse and neglect. Budget analysis of this sector includes, among others, the following specific services: places of safety; safe homes; prevention and early intervention; crime prevention programmes; and secure care facilities etc. It is framed by South Africa's Children's Act (No. 38 of 2005) under which the largest share of services to children is provided. The Act aims to prescribe how children's rights will be protected through various programmes:

- Family care, parental care or appropriate alternative care when removed from the family environment;
- Social services;
- Protection from maltreatment, neglect, abuse or degradation; and
- Have children's best interests considered in every matter concerning the child.

At a national level, South Africa is a relatively good performer with respect to child protection spending. On aggregate, services to children constitute nearly half the funding of the welfare services programme for social development, emphasising the importance of children within the welfare sector. The funding of child welfare services has also increased on average by 11% per annum, compared with 7% for other welfare services over the same period.

Despite this generally positive trend, some important imbalances are in place with regard to resources for this important area. Results from an internal prioritisation exercise reveal that some provincial departments (e.g. KwaZulu-Natal, the Eastern Cape and North West) are not allocating sufficient funds to child welfare services from the total welfare services funds they are allocated, especially in the context of demographic data and per capita child expenditure for these regions.

Progress of child welfare budgets

Although child welfare budgets doubled between the period 2007/08 and 2014/15 for almost all provinces, annual growth is irregular, with significant increases recorded in 2008/09, 2011/12 and anticipated in 2013/14, and mixed, with moderate to small increases, in other years. Still, despite South Africa's poor economic forecast, funding of child services is expected to expand over the medium-term expenditure framework (MTEF) period, especially in 2013/14 (16.4%), although this steep rise will be cushioned by small real growth in 2012/13 (1.5%) and 2014/15 (0.3%).

In some instances, however, provinces recorded negative growth – unexpected in light of new legislative obligations. The outlook for public investment in child welfare services at provincial level is not promising over the MTEF period, with five of the nine provinces showing a 5% or lower annual average real increase.

Child welfare as a percentage of government, social development and welfare services

	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15
Child welfare services % of total government expenditure and	0.29%	0.32	0.32	0.32	0.34	0.33	0.38	0.37

estimates								
Child welfare services % of social development expenditure and estimates	2.2%	2.8	2.8	2.8	2.9	2.9	3.3	3.3
Child welfare services % of welfare expenditure and estimates	38.7%	41.6	40.7	40.7	39.6	39.4	42.6	43.2

Source: Budget statements 2012, Medium-Term Budget Policy Statement 2011.

Efficiency in child welfare spending

Despite positive budgeting trends, spending trends on child welfare are less positive, indicating inefficiencies in the use of resources. Total funds unspent by social development departments over the five-year period (2007/08-2011/12) amounted to R1.2 billion, with unspent funds in 2010/11 accounting for more than half this amount (R690 million). This problem was particularly severe in some provinces. Where significant increases in child welfare budgets were observed, under-spending followed in some cases. On aggregate, provinces underspent by 4% of the child care and protection sub-programme in 2009/10 and 2010/11. This is an important finding, as it highlights that the analysis of spending is necessary to assess the efficiency of financing to child welfare, which relates more directly to programme implementation than to budgeting.

Share of child welfare services expenditure at the national and provincial level in South Africa

Child care and crime prevention are mandatory services in terms of the Children's Act. Provincial departments are the main implementers of child welfare services, comprising on average 99% of total child welfare expenditure compared with 1% by the National Department of Social Development (NDSD) over the period considered. Crime prevention services are also largely the domain of the provincial sphere, with no budgeted allocations reflected against the NDSD. This underlines the importance of more and better spending on prevention and response for violence against children at the provincial level. The services are rendered in terms of the Child Justice Act (2008) to promote the constitutional rights of children to be cared for and to receive protection from neglect and abuse

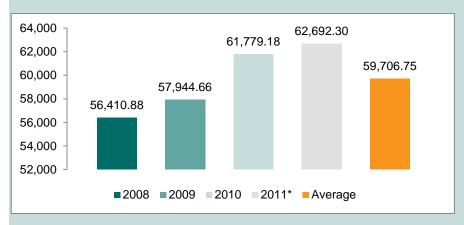
Source: Financial and Fiscal Commission (2013).

The second case study, from Mexico, is interesting since, in the context of a national-level analysis of child-focused budgeting, it paid specific attention to resources going to the child protection sector, highlighting specifically that some of these funds are used in programmes to prevent and respond to violence against children. It underlines the low level of funding for the sector as compared with other child-focused sectors.

Case Study 5: Investments in protection and response services for violence against children in Mexico

Investment in children and adolescents in Mexico grew steadily in nominal terms from 2008 to 2011, implying an important prioritisation to children's rights within the national budget. On average during the period, total spending on children was \$59,706.75 million USD, approximately 5.7% of GDP.

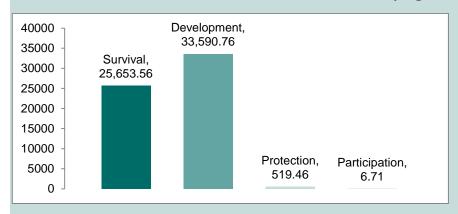
Overall results, investment in children and adolescents, 2008-2011 (\$ millions)



Note: Exchange rate used: 1 MXN=0.07646 USD.

However, within investments to promote children's rights, those linked to survival and development (such as health and education) have been dominant, receiving up to 99% of total resources spent on children (\$59,244.32 million). On the other hand, resources in the areas of child protection (which includes preventive and protective services for violence against children) and child participation receive only the remaining 1% (\$526.17 million).

Breakdown of total investment on children and adolescents by rights area, in 2010 (in \$ millions)



The imbalance in investment on child protection with respect to other rights areas is indicative of a budget planning problem in this sector. It implies insufficient spending, particularly in an area that, in Mexico, requires multiple efforts, such as the development of legal frameworks for the protection against violence, abuse, exploitation and discrimination; the implementation of public policies in relation to these frameworks and programme implementation; and the generation of information and the creation of special mechanisms that allow for the restitution of rights that have been violated.

In an analysis of investment by themes, 8 out of 10 pesos invested in children and adolescents in Mexico go to education and health, which concentrated 46.9% and 34.4%, respectively, of total budget execution in 2010, whereas themes linked to prevention and response against abuse, violence, exploitation and discrimination, information and citizen participation receive less than 1% each.

Source: UNICEF Mexico (2012).

The next case study, from the US, provides insights on the complexity of child welfare budgeting in a high-income, highly decentralised federal system in which funding and programme implementation decisions are highly dependent on state-level spending, despite resources coming from national level. According to the classification in the US, child welfare spending comprises several areas, from resources to support the adoption and foster care system (the majority) to resources to prevent and protect against violence and abuse.

Case Study 6: Child welfare financing in the US

Child welfare agencies in the US are charged with ensuring the safety, permanency and wellbeing of children who have been abused or neglected, and those deemed at risk of abuse or neglect. State child welfare agencies vary in their approaches to responding to and caring for abused and neglected children, as well as children at risk of maltreatment. There is great variation in the continuum of services provided to these vulnerable children and families, and also distinctions in how states finance their child welfare systems. Many sources of public funding are available to help support child welfare activities, making the overall approach to child welfare financing in the US a complex system of federal, state and local dollars.

Based on the most recent data available in the 2008/10 survey, the State Policy and Advocacy Center (SPARC) conducted an analysis of total expenditures on child welfare services in the US. It found that nearly \$29.4 billion dollars in FY2010 were spent on child welfare services, including the following: 1) services for children and families to prevent abuse and neglect; 2) family preservation services; 3) child protective services (intake, family assessment, investigation and case management); 4) in-home services; 5) out-of-home placements; and 6) adoption and guardianship services and supports.

Total expenditures came from the following sources: \$13.6 billion from federal funds; \$12.5 billion from state funds; and \$3.3 billion from local funds.

At the federal level, the main source of resources to support prevention and response to abuse comes from the Social Services Block Grant (SSBG), which received 12% of federal child welfare spending in the US in 2010. Title IV-B of the Social Security Act, which represented 5% of spending on child welfare that year and consists mainly of discretionary grants, also includes funding for the Promoting Safe and Stable Families programme, which links directly to violence and abuse. As such, from the overall federal budget on child welfare, less than 20% is targeted to child abuse and violence-related spending, although some other components might contain related spending that might not be as clearly earmarked (for example Medicaid health spending, which can include payment for medical treatment resulting from violence).

In addition to the primary federal sources described above, states can use a variety of other federal grants and awards for child welfare purposes. For example, those for prevention from violence, abuse and neglect include those linked to the Child Abuse Prevention and Treatment Act and the Children's Justice Act

Beside the federal sources described above, states spend their own dollars on child welfare services, both to match federal funds and to meet a required maintenance of effort for a federal programme. They may also spend dollars over and above what is required to draw down the federal sources. Nationally, state funds accounted for 43% of all child welfare expenditures in FY 2010. However, the level of local funds each state spent on child welfare varied significantly, with some states spending 0% of local funds and others up to 40%.

In an overall federal budget in 2010 of \$3.5 trillion, the share of resources allocated to child welfare was only 0.39%.

Source: DeVooght and Cooper (2012).

The last case study presents a comprehensive analysis of investment in child protection in India, including in prevention and response to violence against children. As with the case of Mexico, it comes from a report analysing child-focused budgeting and spending across the different rights areas, and it comes to a similar conclusion: despite overall positive progress on child-focused spending, including with respect to child protection funding, this continues to be low with respect to investment in other areas, such as education and health, and particularly low considering the large scale of violence, abuse, neglect and exploitation in India. As with the other case studies, it contributes to the evidence on the low levels of violence against children funding despite huge needs for investment in prevention and response to this problem.

Case Study 7: The budget for children in India

Provision of child protection, defined as protection from violence, exploitation, abuse and neglect, is a key intervention in India's 11th Plan, which provides the main framework for policy development. India has recognised the right to protection for its children through its constitutional commitments and the laws, policies, and the programmes it has put in place over the years.

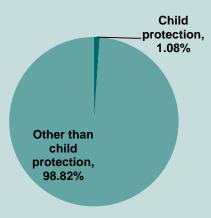
According to a study by HAQ: Centre for Child Rights in India (HAQ, 2009), despite these measures, there are several ways in which India fails to protect its children. The country has the world's largest number of sexually abused children, with a child below 16 years raped every two and a half hours, a child below 10 every 13th hour and 1 in every 10 children sexually abused at any point in time. Several Indian states, especially in the northern region, still have traditional violent and exploitative practices such as child marriage and routine killing of girls in the womb and after birth, as well as high levels of hazardous labour for both girls and boys, which often keep them from school. State governments have also failed to check the rising incidence of organised crime against children, such as sexual abuse and trafficking to work in domestic labour or slave labour in factories or in the sex trade etc., which have thrived alongside increased prosperity, urbanisation and consumerism.

Despite India's many legal and policy commitments on child protection, there is a gap in the effective rollout of these. The Juvenile Justice (Care and Protection of Children) Act 2000 (and as amended in 2006) targets two categories of children: children in conflict with law (CICL) and children in need of care and protection (CNCP). The latter group includes most categories of children facing violence, abuse, neglect and exploitation.

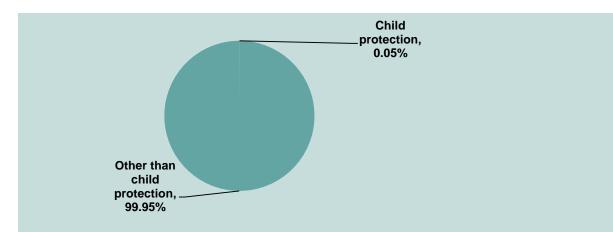
The budget for child protection suffers from two major problems. First, it allocates too little money to tackle the magnitude of the problems facing children in India. Second, and most important, the programmes and schemes on the protection of children target a small fraction of all children in difficult circumstances in India. This is despite the fact that in 2007, the Ministry of Women and Child Development (MWCD), along with civil society groups, formulated a new scheme for the sector called Integrated Child Protection Schemes (ICPS), aimed at looking at child protection in a holistic manner.

Of the four child-related sectors included in the Budget for Children (BfC) (education, health, early childhood development and child protection), protection has consistently received the least share of both the union budget and the BfC – an average of 0.05% and 1.08%, respectively, during the five-year study period of 2004/05 to 2008/09.

Share of protection in budget expenditure in the BfC, average allocation 2004/05 to 2008/09



Share of protection in the union budget, average allocation 2004/05 to 2008/09



In 2007/08, protection spending increased by almost 54% on what it was in 2006/07, the highest annual rise, bringing the share of the allocation for protection in the union budget to 0.5%. In 2008/09, it increased further, by 35% on the previous year, pushing its share in the total budget as well as in the BfC to respectable levels. For the first time, protection received 0.7% of the union budget and 1.43% of the BfC. Sharp rises in later years also helped lift the average annual increase in allocations over the five-year period to 33.36%.

The prospects of the child protection sector looked positive with the introduction of the ICPS, an integrated mechanism to help pursue the right to child protection, in 2007/08. Compared with 0.01% of the BfC in the 1990s, by 2008/09 child protection accounted for 1.43%. The ICPS, along with higher spending on Schemes for Relief to and Rehabilitation of Rape Victims, was responsible for the sharply increased protection budget in the last three years of the study period. However, although ICPS allocation has seen a remarkable rise, implementation of the scheme remains partial.

In terms of spending efficiency, the protection sector not only received the least share of budget within the BfC but also showed the highest average under-spending, of 12.76% in the study period, reflecting the low priority accorded to it by the government.

Allocation and spending on child labour

The importance of programmes to address child labour in India, which are implemented by the Ministry of Labour and Employment (MLE) and not MWCD, is clear from the fact that, on average, allocation for these programmes alone was equivalent to 49.27% of the total allocation to child protection under MWCD over the five-year period of study. In terms of spending, it accounted for an even higher share – 65.86% on average – in the four major schemes.

Source: HAQ: Centre for Child Rights (2009).

The analysis presented in these four case studies helps illustrate two key issues regarding spending on prevention and response to violence against children. First is the complexity of spending within this sector, which involves multiple programmes, agencies and levels of government; second is the low levels of budget and spending on prevention and response to violence against children, despite the significant challenges children face in this area and the huge costs to individuals, society and the state that such violence results in.

5.2 Spending on violence against children in emergencies

Estimating what governments spend on preventive and protective measures against violence against children in emergencies poses several challenges. First, particularly during rapid onset emergencies, resources spent are likely not planned in the budget and are authorised as spending without clear earmarks, with their rollout being on a response basis. Second, many countries affected by emergencies – particularly low-income countries affected by conflict – are unlikely to have detailed budget and spending data on programmes to prevent and respond to violence against children. Third, if such data exist, they are not available in the literature; primary research is

needed to compile and analyse such figures. As such, this section takes a different approach to looking at violence against children spending in emergencies.

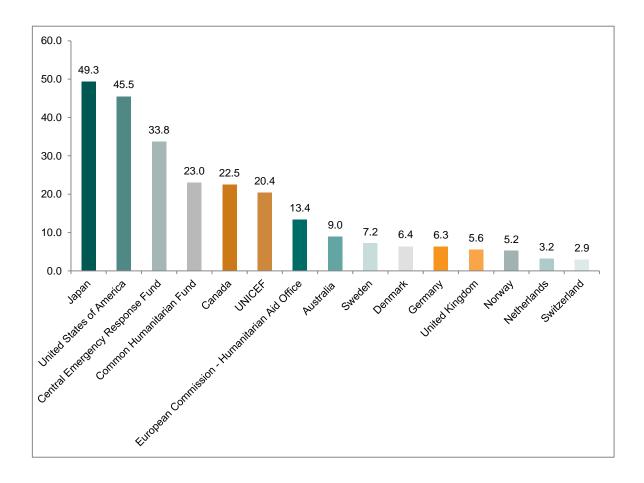
Drawing on the desk-based methodology used by the Child Protection Working Group (CPWG) commissioned report 'Too Little, Too Late' (Lilley et al., 2011), this analysis presents an overview of donor funding to child protection in emergencies from 2010 to 2013, drawing on data from the UN Office for the Coordination of Humanitarian Affairs' (OCHA), Financial Tracking Service (FTS), a global, online, real-time database of humanitarian funding needs and international contributions.

The data below present a summary of contributions by the top fifteen donors to projects and programmes linked to prevention and response to violence against children in emergencies. It includes FTS data under the following three sectors: health, education and protection/human rights/rule of law. The criteria used to identify the interventions included from the database were:

- Project description refers directly to child, children, boys or girls or translations thereof; and;
- Project description refers directly to protection or child protection or protective environments or safe schools; or health/nutrition in the case of conflict affected children or child friendly spaces; and;
- Project description refers directly to a form of violence or gender-based violence or sexual- and gender-based violence or conflict or separation/trafficking
- not
- Reintegration or resettlement of displaced, or other, children into education facilities or alternative education except if there is a direct reference to this taking place during conflict (so not, for example, in case of drought, flood or food crisis)
- Project description refers to primary or secondary prevention from harm i.e. basic need needs
 provision such as WASH, shelter and nutrition except if there is a direct reference to 'conflict
 affected children'

Figure 2 shows the total level of contributions for prevention and response projects and programmes linked to violence against children in emergencies as per the criteria defined above. It presents the total contributions per donor during the period 2010-2013 by the fifteen donors with the highest level of funding to this sector. The three highest donors per actual contributions during this period are: Japan, the United States, and the Central Emergency Response Fund¹⁴.

Figure 2: Total contributions to prevention and response interventions linked to violence against children in emergencies, 2010-2013, 15 main donors (million \$)¹⁵

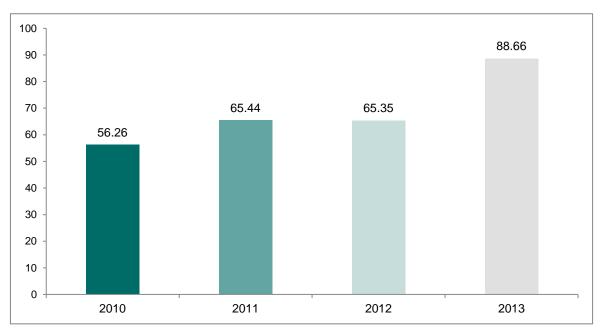


Source: Authors' calculations based on OCHA-FTS data

Figure 3 shows the size of the contributions by all donors to prevention and response interventions linked to violence against children in emergencies from 2010 to 2013. While there are important variations in the levels of financial contributions to this sector from these donors for each year in the period, this is not necessarily the result of greater or lower willingness to finance. Rather, it is influenced largely by the number of crises, the number of appeals for funding and the number of programmes being developed each year to respond to violence against children in emergencies.

¹⁵ It is important to highlight that it is very difficult to follow the expenditure of donors' resources during an emergency. The fact, however, that donors request the categorization of data aimed specifically at children in emergency settings, reveals a lot about their concern in their assistance priorities.

Figure 3: Total contributions to prevention and response interventions linked to violence against children in emergencies, by year, 2010-2013 (millions \$)



Source: Authors' calculations based on OCHA-FTS data

This analysis does not provide enough information on the size of funding for prevention and response against violence against children in emergencies with respect to needs, as these data are not reported. Lilley et al. (2012) note for 2007-2009 that humanitarian funding of the sector was inconsistent, despite significant requests and requirements for programme work. To understand the size of funding available in relation to needs, it is important first to develop more systematic research and information on the size and value of prevention and response projects relative to other programmatic areas in the protection sector, which might in fact be leading to smaller financing. This needs to be analysed in light of the implementation capacity of governments and NGOs responding to emergencies, to address key issues related to the prevention of and response to violence against children.

6 Good practices on prevention of violence against children

The World Report on Violence against Children (Pinheiro, 2006) notes that, according to research and practice over the past few years, the knowledge and capacity to prevent violence against children and reduce its consequences exist. It explains that the science base for developing effective violence prevention strategies and therapeutic interventions is expanding and that there is a growing evidence base for strategies showing that — with sufficient commitment and investment — creative approaches to prevention can make a difference. This is critical, since preventive actions that protect children from violence have the potential to reduce many forms of violence in society, as well as reducing the long-term social and health consequences of violence against children discussed in previous sections.

WHO's 2002 report on violence and health makes a strong case for violence prevention. It reviewed available scientific evidence and indicated that, to achieve results, it is necessary for prevention to work at all levels – with individuals, families, communities and societies – and to draw on the contributions of multiple sectors, such as justice, education, welfare, employment and health. It concluded that, although complex, violence prevention can be achieved. Similarly, WHO's 2004 report on the economic dimensions of interpersonal violence strengthens the case for investing in prevention even further. It highlights the enormous economic costs of the consequences of interpersonal violence, and reviews the limited but significant evidence for the cost effectiveness of prevention programmes.

Focusing specifically on violence against children, and having explored in detail and provided evidence about the high costs at all levels of such violence in this report, we look here at four case studies of preventive policies and programmes that significantly reduce different dimensions of violence against children. We examine their costs in relation to their outcomes, to contribute to the evidence base showing preventive actions are more cost effective than dealing with the consequences of violence against children. It is important to underline, however, that, although there is a strong economic rationale for investing in preventive actions to reduce violence against children, from a human and child rights perspective the argument is even stronger: adequate preventive actions will help avoid the immediate and long-term negative consequences that violence will have on the lives of children, their families and their communities.

With regard to the evidence on preventive programmes and policies on violence against children, given the complexity of violence and its causes and drivers, effective interventions need to have multiple actions that work on different stakeholders- children, their parents or caregivers, teachers and government decision makers with the power to affect policy - depending on the nature and magnitude of the problem. Different types of violence against children require distinct preventive measures to be put in place. To date, these preventive interventions have usually been relatively small-scale programmes, which can be implemented by NGOs, local or national governments, civil society and even the private sector. On some rare occasions, these interventions take the form of larger-scale policies linked to education achievements and broad-based poverty and inequality, particularly in the case of specific forms of violence such as the worst forms of child labour, so actions are taken by the state as part of broader policy commitments. This section explores one such case.

Most documented case studies related to preventive programmes for violence against children, particularly in developing countries, have limited details about their success rates (including a dearth in formal evaluations of interventions). In the literature that does explore impact or achievements, very few studies provide a cost-effectiveness analysis that contributes significantly to the evidence on the value for money of prevention.

This section provides some useful examples (good practice case studies) that illustrate how well-designed programmes and policies can have a significant positive impact in terms of preventing violence against children and thus can be a good value for money investment in relation to the short and medium economic costs they can save. It looks at case studies across the four key areas explored in earlier sections: physical and psychological violence, sexual violence, worst forms of child labour and children associated with armed forces or groups.

6.1 Preventing physical and psychological violence against children

Evidence has shown that physical and psychological violence in the household are more likely in families that have difficulties developing stable, warm and positive relationships. According to research by the Violence Prevention Alliance (WHO, 2013), children are at increased risk of being maltreated if a parent or guardian has a poor understanding of child development. This is also the case if parents and guardians do not show the child much care or affection, are less responsive to the child, have a harsh or inconsistent parenting style and believe corporal punishment is an acceptable form of discipline. As such, strengthening parenting practices plays an important role in preventing child maltreatment.

According to the evidence, treating and later trying to remedy the effects of physical and psychological violence are both less effective and more costly than preventing them in the first place (Mikton and Butchart, 2009). Nevertheless, epidemiological data on and policies and programmes against child maltreatment are limited in most low- and middle-income countries. This is problematic, as it cannot be assumed that the current evidence on the effectiveness of universal and selective physical and psychological violence prevention programmes applies outside high-income countries, given differences in culture and risk factors and reduced institutional capacity for evidence-based programme implementation and evaluation (ibid.).

A recent systematic review investigating the effectiveness of parenting interventions for reducing harsh/abusive parenting, increasing positive parenting practices and improving parent—children relationships in low- and middle-income countries found, based on the two largest, highest-quality, programme evaluations that parenting interventions may be feasible and effective in improving parent—child interaction and parental knowledge in relation to child development in low- and middle-income countries, and therefore may be instrumental in addressing prevention of child maltreatment in these settings (Knerr et al., 2013). This is particularly important since, in low- and middle-income countries, physical and psychological violence represents a greater health burden and slows economic and social development to a greater extent than it does in high-income countries.

One type of intervention that has shown evidence of positive outcomes is parenting programmes (WHO, 2013). These next two case studies provides evidence of two different types of parenting programmes, one in a high-income context, the US, and one in a low-income context, Liberia, to illustrate the overall benefits, including the cost-effectiveness benefits, of investing in prevention versus dealing with the consequences of physical and psychological violence against children in the middle and long term.

Case Study 8: The case of the Chicago Child-Parent Centres in the US

The Chicago CPCs provide comprehensive educational support and family support to economically disadvantaged children and their parents. The guiding principle of the programme is that, by providing a school-based, stable learning environment during preschool, with parents as active and consistent participants in their child's education, scholastic success will follow. The programme requires parental participation and emphasises a child-centred, individualised approach to social and cognitive development.

Evaluations of the CPC programme used information from the Chicago Longitudinal Study (CLS), which followed 1,539 low-income minority students (95% African-American and 5% Hispanic). The students were scheduled to graduate kindergarten in 26 public elementary schools in Chicago in the spring of 1986. Students were followed for a total of 19 years, after which time they were an average of 23-24 years old. Student outcomes were assessed using a variety of measures, including delinquent behaviour; arrest, conviction and incarceration records; and child maltreatment reports.

In addition to many significant positive indicators of academic performance, Reynolds et al. (2001; 2002) found

that, at the 15-year follow-up (ages 20-21), the CPC preschool group had significantly better outcomes on:

- Number of years of special education from ages 6 to 18 (0.73 years versus 1.43 years);
- Percentage of children who experienced child maltreatment (reports of abuse/neglect) from ages 4 to 17 (5.0% versus 10.3%);
- Arrests of any type (16.9% versus 25.1%) and violent arrests (9.0% versus 15.3%);
- Number of petitions to juvenile court by age 18 (an average of 0.45 versus an average of 0.78 petitions);
- High school completion by age 21 (61.9% versus 51.4%).

Also, Reynolds et al. (2007), reporting on outcomes at the 19-year follow-up (ages 23-24), found that the CPC preschool group had significantly better outcomes than the non-preschool group on:

- Rate of felony arrest (16.5 versus 21.1%);
- Rate of incarceration (20.6 versus 25.6%);
- Rate of any conviction (20.3 versus 24.7%) (marginally significant);
- Rate of felony conviction (15.8 versus 19.9%);
- Rate of violent crime conviction (5.1 versus 7.1%) (marginally significant);
- Number of months having received any type of public aid (32.1 versus 28.3 months);
- Depressive symptoms (12.8% versus 17.4%).

Cost effectiveness

Reynolds et al. (2002) estimate that the preschool programme provided a return to society of \$8.47 per dollar invested by increasing the economic wellbeing of participants and tax revenues from those participants, and by reducing public expenditures for remedial education, child welfare, criminal justice treatment and crime victims. The cost of the CPC programme per participant was \$5,219 for each year.

Source: http://www.promisingpractices.net/program.asp?programid=98

Case Study 9: The Parents Make the Difference project in Liberia

Implemented by the International Rescue Committee (IRC), this project aimed to promote the development and wellbeing of young children aged 3-7 through reducing harsh punishment, improving parenting practices and increasing malaria prevention behaviour (Sim, 2014).

In Liberia, the majority of children grow up experiencing physical and psychological punishment, as the use of physical punishment is highly normalised among parents and caregivers. In order to address these risks, the IRC implemented the Parents Make the Difference project in Lofa county from 2012 to 2013. Lofa was the scene of intense fighting and displacement during the civil war.

The programme consisted of 10 weekly group sessions and 3 individual home visits. Adapted from various evidence-based parenting interventions, the programme uses behavioural skills training to teach content on positive parenting and child development.

The impact evaluation used a randomised waitlist controlled trial design to examine the impact of the intervention on caregivers' parenting practices and children's cognitive, social and emotional outcomes. A total of 270 families participated in the impact evaluation. In addition, qualitative interviews were conducted with a subset of 30 caregivers in order to explore their experience.

The programme's positive results were as follows:

- The intervention was feasible and acceptable in this low-resource, post-conflict setting.
- The intervention significantly reduced the use of harsh physical and psychological punishment.

Caregivers who participated in the programme reported an average decrease of 25.4% in the use of harsh punishment. When asked what they did the last time their child misbehaved, only 10% of caregivers in the treatment group reported beating their child, compared with 44% in the control group. Qualitative findings suggest some participants replaced harsh punishment with non-violent discipline strategies using new knowledge and skills they had learned through the programme.

- The intervention significantly increased caregivers' use of positive parenting strategies, as reported by children. Qualitative findings suggest participants had more positive relationships with their children, including spending more time talking and playing together.
- Qualitative findings suggested potential unanticipated positive changes in participants' families and communities, including participants reporting lower marital conflict and improved communication and problem solving within the household.

The evaluation showed parenting interventions are feasible and can be delivered at low cost in resource-constrained context, characterised by very limited financial and human resources. It also shows it can be implemented in culturally diverse and post-conflict settings.

IRC is currently conducting a cost-effectiveness analysis of this project, to be completed in September 2014. While analysis from the evaluation would suggest investment in this programme results in positive outcomes for children, reducing the short- and long-term costs of child maltreatment, as explored in Sections 3 and 4, the cost-effectiveness analysis will provide further evidence on why investing in such programmes in low-income countries is an effective way of allocating resources, to avoid paying for the expensive costs to individuals, communities and the state of dealing with the consequences of physical and psychological violence against children.

Source: Sim (2014).

6.2 Preventing sexual violence against children

There are numerous studies looking at interventions to prevent sexual violence against children and to protect, counsel and support those who have been victims of violence, in both development and emergency contexts. Few of the documented case studies, however, provide a good impact analysis of preventive measures on the incidence of sexual violence, and cost-effectiveness analyses in this area are rare. Given the number of consequences and costs linked to sexual violence, as explored in Sections 3 and 4, generating more evidence about the cost effectiveness of programmes to prevent sexual violence is critical to be able to make a stronger case for investing in them, although the literature is cognisant in practice of the human and financial benefits of investing in prevention.

One good example is BRAC's Empowerment and Livelihood for Adolescents (ELA) programme in Uganda. ELA takes a comprehensive approach towards empowering adolescent girls. While its focus is not solely on preventing sexual violence, it recognises the issue as one of the causes of girls' increased vulnerability and as an important obstacle to their personal and financial empowerment. As such, its combined interventions approach specifically tackles prevention of sexual abuse with positive results.

Case Study 10: Empowerment and Livelihood for Adolescents, Uganda – a cost-effective programme with important impacts in terms of eliminating the risk of sexual abuse of adolescent girls

Implemented by the NGO BRAC in Uganda, this programme is designed to empower adolescent girls against health challenges associated with HIV and risky sexual practices, as well as against economic challenges arising from an uncertain transition into the labour market. It does this through the simultaneous provision of 1) life skills to build knowledge and reduce risky behaviours; and 2) vocational training enabling girls to establish small-scale enterprises.

Based on findings from a rigorous evaluation of the programme, which follows a panel of 4,800 girls over a 2-year period, this case study highlights the programme's effectiveness in preventing unwilling sex – sexual abuse

or rape – in programme beneficiaries, in addition to other important positive impacts related to their sexual health, decision-making and income-generating capacities.

The randomised control trial used by the evaluation found the programme significantly improved HIV- and pregnancy-related knowledge, as well as that on corresponding risky behaviours: among those sexually active, self-reported routine condom usage had increased by 50%. Of particular importance, the rate of adolescents reporting having had sex unwillingly during the year prior to the evaluation decreased by 17.1 percentage points in treated communities. Starting from a baseline of 21%, this corresponds to a near 83% reduction in the incidence of such events. This provides a dramatic illustration of the programme enabling girls to become empowered in their relations with men. This impact is likely a direct result of the life skills sessions on negotiation, rape and legal rights, where girls are sensitised and discuss prevention measures.

On outcomes related to vocational training, the intervention raised the likelihood of girls being engaged in income-generating activities by 35%, driven mainly by increased participation in self-employment.

Only adolescent girls aged between 14 and 20 are permitted to participate in the ELA programme. The key topics covered in the life skills training sessions include sexual and reproductive health, menstruation and menstrual disorders, pregnancy, STDs, HIV and AIDS awareness, family planning and rape; other sessions cover enabling topics such as management skills, negotiation and conflict resolution, as well as leadership among adolescents. There is also a class on life skills training focused on providing girls with legal knowledge on women's issues, such as bride price, child marriage and violence against women. These life skills lessons are supported by vocational skills training, which comprises a series of courses on income-generating activities, focused mainly on adolescent girls establishing small-scale enterprises of their own. These courses are supplemented by financial literacy courses covering budgeting, financial services negotiation and accounting skills.

Evaluation findings indicate the programme's design, combining interventions, might be more effective among adolescent girls than single-pronged interventions, as the individual programme elements complement each other: girls are more likely to take on board health-related education in terms of knowledge and behaviours when they are simultaneously offered new income-generating skills. At the same time, the expected returns to the provision of vocational skills training to this target population might be larger when they are simultaneously provided with information to help reduce their exposure to economic activities that involve risky behaviours.

Cost-benefit analysis

The evaluation accurately documented the cost of the programme per eligible girl to judge how large the per girl benefits would have to be for the programme to be sustainable. Summing across all costs in the 100 treated communities, in year 1 the programme costs were \$365,690. This fell to \$232,240 in year 2 as some of the set-up costs are sunk and do not recur. On that basis, the second year per girl incurred cost was \$17.90. This corresponds to only 0.54% of household incomes at baseline. Further, self-employment earnings by girls that generate positive income were \$26.70 and by themselves more than offset the per girl programme cost.

Considering the high costs linked to rape and other forms of sexual abuse, as discussed above, without considering the costs to society, this well-implemented intervention, at such low costs per beneficiary, is an example of a cost-effective way to scale up efforts to prevent sexual violence against adolescents that would cost the state much less than dealing with its consequences.

Source: Bandiera et al. (2012).

6.3 Preventing the worst forms of child labour

The economic benefits of preventing the worst forms of child labour can be viewed from a macro perspective, as they relate largely to human capital accumulation and the potential to reach higher levels of education and increase productivity and income-generating capacity over the life-course. As such, more than with other types of violence against children, preventive actions to reduce the likelihood of children becoming engaged in the worst forms of child labour are linked to national-level policies and programmes more than to smaller programmatic interventions. ILO (2013a) points out that greater attention, commitment and ownership by governments have

been critical over the past few years in reducing child labour. In particular, policy choices and accompanying investments in education and social protection appear particularly relevant to its decline (ibid.).

The evidence on investing to achieve greater levels of education is clear. Better education status has been shown to be associated with a lower disease burden, improved individual-level productivity and skill-sets, access to higher wages and positive externalities on the whole society and economy (Rees et al., 2012). The average rate of return to an additional year of education is estimated to be around 10% (Psacharopoulos and Patrinos, 2002), although this rate varies depending on whether it is primary, secondary or tertiary, as well as on the wealth of the country. From a productivity perspective, education adds skill to labour, which enhances the productivity of labour. As such, policies and programmes that prevent child labour and promote increased schooling have high returns.

Social protection protects vulnerable populations from shocks, and helps achieve greater equity so marginalised and excluded families can participate more effectively in the economy. There is an increasing body of evidence showing the impacts of social protection programmes on child labour prevention (see, for example, ILO, 2003). The following case study explores the potential effects of expanding social protection programmes targeted at children in Bangladesh on urban labour, street children and orphan children (who are at greater risk of participating in exploitative forms of labour). By looking at the costs of expanding these programmes and comparing them with the gains in terms of education and productivity achievements, it is clear such policies make good economic sense.

Case Study 11: Social protection to reduce hazardous work in Bangladesh

Case study 3 highlights the scale of children's involvement in hazardous work and its costs in terms of income foregone for Bangladesh. On the basis of this problem, this case study explores how the Bangladeshi government is putting in place preventive actions to eliminate hazardous work.

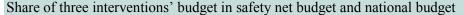
There are a number of specific priorities for accelerating progress in the fight against child labour in Bangladesh. One of them is expanding social protection programmes or instruments to prevent vulnerable households from having to resort to child labour as a buffer against negative shocks. Social protection in particular has been found to be an effective way to reduce child labour across the globe (ILO, 2013c).

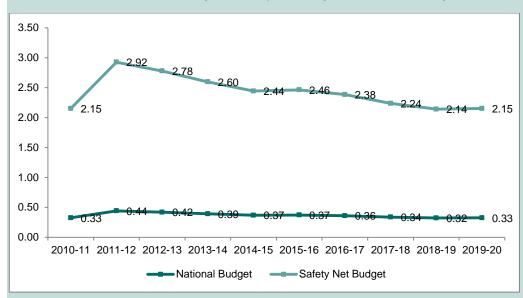
The Bangladeshi government, in an effort to honour its commitments to reduce poverty, has been implementing a number of social safety net programmes in the country aimed at providing the 'temporarily poor' with an opportunity to graduate out of poverty. In FY 2009/10, the government's total budget was approximately \$16 billion, of which \$2.4 billion was allocated to social safety net programmes – 15.12% of the total budget and 2.42% of GDP. However, only 16 social safety net projects out of an estimated 84 were directly related to children, so children were only directly allocated about 9.8% (Tk. 19 billion) of the social safety net budget, which was about 1.44% of the national budget in FY 2010/11. Of these 16 projects, only 4 directly target the most vulnerable children: urban working children, street children and orphans. These children have provisionally been allocated only about 0.66% (Tk. 1.3 billion) of the safety net budget.

To improve the situation for the most vulnerable children, including those in hazardous work, the government, with the support of UNICEF, launched three social protection projects: Basic Education for Hard-to-Reach Urban Working Children (BEHTRUWC); Protection of Children at Risk (PCAR); and Amader Shishu (Our Children), aimed, respectively, at enhancing the developmental opportunities, living conditions and livelihood opportunities of urban working children, street children and orphans. In 2009, BEHTRUWC covered only about 170,000 targeted urban working children, PCAR 10,000 street children and Amader Shishu 2,100 orphans aged 0-14 years. UNICEF estimated that the cost per child per year for BEHTRUWC, PCAR and Amader Shishu interventions was \$61, \$258 and \$276, respectively, which is a low cost per child given the high costs in reduced productivity over their life-course from continuing in this form of work (Section 4).

In an analysis to understand the effectiveness of investing additional resources in these targeted safety net programmes (de Rooy and Shafiqul Islam, 2010), it was assumed that, if 10% of the vulnerable children in each group are covered each reference year, it will take 10 years to cover all the children targeted by these three interventions. When the total budget of the three interventions is plotted against the projected safety net and budget and fiscal budget, it shows the share of their combined budget would result in only a marginal increase in

the safety net (2.2%) and fiscal budgets (0.3%) for FY 2010/11. Since the retention period of these interventions for each child varies from one to seven years, the share of the three interventions' budget in the safety net and fiscal budgets sharply increases in the initial fiscal year (taken to be 2011/12). But, from the second year, this share decreases gradually over time.





Source: De Rooy and Shafiqul Islam (2010).

Given the global evidence base of the positive effects of social safety net or social protection programmes to reduce the incidence of the worst forms of child labour (ILO, 2013c), as well as the scope for improving the situation of children in hazardous forms of labour in Bangladesh, suggests that investing in social protection programmes is a positive and cost-effective option. This is particularly given that the estimated costs arising from these children in terms of human capital and productivity losses as discussed in Sections 3 and 4 are high. As such, the estimated benefit of implementing these programmes and impacting on the worst forms of child labour, decreasing their social and economic costs to individuals, families and societies, is significant.

Sources: De Rooy and Shafiqul Islam (2010); UCW (2011).

6.4 Preventing children's association with armed forces or groups

Identifying good practice case studies that focus on the prevention of children's association with armed forces or groups as a stand-alone intervention is difficult, as most deal with both prevention and reintegration of children who have been directly affected by conflict, including through conscription into armed forces and suffering rape and other types of atrocities. Prevention of violence against children in a context of conflict is particularly challenging as conflicts generally respond to larger interests that seldom take into consideration human rights or the costs of such conflict. The focus of prevention in this section therefore is children associated with armed forces or groups.

Children 'associated with armed forces or groups are those who have been taken forcibly by armed forces or groups to serve different purposes: as fighters, sexual slaves, cooks, porters, spies etc. This includes children who enrol themselves to join as a coping strategy, as in principle armed forces or groups should not have children in their ranks and should therefore turn children away when they volunteer, though they seldom do.

What has been done in terms of prevention, in addition to promoting and advocating for the enforcement of international legislation that limits children's association with armed forces or groups, including their conscription, is trying to reduce the vulnerabilities facing the children who are the most likely to voluntarily join

armed forces or groups as a coping strategy – although there is limited evidence that such actions have an impact on forcible conscription. In this sense, children's association with armed forces or groups is seen as a particularly harmful worst form of child labour, and actions to prevent it are similar to those implemented for other forms of child labour, although they take place in much more complex conflict or post-conflict contexts.

Case Study 12: Child and community-led strategies to avoid children's recruitment into armed forces or groups in West Africa

This case study presents findings of a study by Save the Children (2005) exploring effective efforts to prevent the recruitment of children into armed forces or groups in Côte d'Ivoire, Liberia and Sierra Leone. It draws on evidence from 298 children and 211 adults in 6 communities and examines community-led strategies to avoid forced, voluntary and re-recruitment.

The research reveals a complex range of strategies to recruit children as well as a wide variety of reasons why children want to voluntarily join forces or groups and shows there are no simple solutions. However, four responses have shown to be likely to reduce recruitment:

- 1. Ensuring children remain within their families and are properly cared for and protected during conflict;
- 2. Addressing attitudes towards recruitment to remove the desire to join;
- 3. Reducing the household poverty that pushes many children into armed forces or groups;
- 4. Providing children with alternatives through schooling or skills training.

During periods of conflict, the research suggests a number of measures to implement this four-pronged approach. For voluntary recruitment, it includes:

- Taking immediate action to provide relief to prevent hunger;
- Developing targeted messages that address the specific motivations of children in the community. These may include the desire for revenge or to protect themselves or family members; a belief that joining the fighting forces or groups will stop external oppressors from threatening the community; a longing for material gain or power; and a lack of understanding of the hardships of war;
- Involving parents, children, community leaders, teachers and the wider community in delivering messages and ensuring statements about children's recruitment are constantly reiterated;
- Keeping schools open for as long as possible, but regularly re-evaluating the risks to schoolchildren who may be targeted during recruitment drives or become separated from parents in attacks.

For forced recruitment, these measures include:

- Putting mechanisms in place so any prior knowledge of attacks can be shared quickly with communities, enabling them to plan their departure if necessary. Here, community leader and teacher involvement is key;
- Identifying areas where risks of recruitment are greatest and ensuring community members are aware of where they can find safety;
- Assisting in the safe and organised movement of populations;
- Ensuring refugee or internally displaced person camps provide safe havens for children and their families who are fleeing to avoid the fighting forces.

The research suggests that, in addition to actions taken during a conflict, periods of relative peace and stability should be used to develop longer-term preventive strategies. These include:

- Efforts to enhance household livelihoods so families are better able to cope in times of crisis;
- Investment in education to ensure all children have access to free schools and/or vocational training, and attempts to enhance the quality of education on offer;
- The development of community and household-level emergency preparedness plans so strategies are in place to respond to attacks and safely escape if necessary. These should involve community leaders, teachers, parents and children themselves;
- Work to encourage the reintegration of boys and girls formerly associated with armed forces or

- groups, including carefully developed disarmament, demobilisation and reintegration programmes that do not favour ex-child soldiers to the extent that others in the community resent them;
- Campaigns to generate a shift in attitudes so children's recruitment is universally acknowledged as being unacceptable. This may involve changing school curricula, and war crimes trials for those suspected of encouraging the use of child recruits;
- The establishment of community child protection networks involving child and adult community
 members to monitor and protect children's wellbeing and help implement the activities described
 above.

Many of these actions should be fostered in any case as part of governments' commitments to guaranteeing quality education for all and supporting poverty reduction, and can be supported through programmes such as cash transfers or other social protection interventions, which, depending on their design, have been proven to increase schooling and reduce household poverty (ILO, 2013c).

The research found the risk of being recruited was greater when the family stayed near the place of fighting or the location where fighting forces were. In all three countries, families felt that, when they received information on the location of safe heavens and warnings of attacks, they were able to leave in a much more timely manner, which also reduced the risk of family separation. This strategy can also enable children who become separated from their parents during attacks to be quickly reunited with them.

Save the Children's experience globally suggests community-level child protection mechanisms are extremely valuable in ensuring children's wellbeing and can be used to help communities prepare children for possible attacks (McCallin, 2001). These groups – usually formed by parents, children and key adult community members such as chiefs and teachers – monitor and respond to rights abuses. In particular, the study suggests parents play a pivotal role in preventing children from joining the fighting forces. During group discussions, children and adults in all three countries identified parents as the most important force in ensuring children were not recruited. Children who were separated from their parents, especially those living on the streets and without alternative care, were identified by many of the research participants as being vulnerable to recruitment. During the in-depth interviews, around one-third of ex-soldiers said they had joined shortly after they had become separated from their parents.

This evidence suggests attempts to reduce the recruitment of children should include efforts to avoid separation and ensure proper family care. Efforts should also be made to reunite separated children with their families as quickly as possible, and, where this is not possible, to provide them with suitable alternative care. For children who have been separated from their parents, the research suggests institutional care should be used as a last resort only. In fact, participants from Liberia reported recruiters deliberately targeting orphanages. Foster or extended family care offers a much better long-term solution, and the research shows that, in some cases, such carers are able to fulfil similar functions to mothers and fathers in preventing the recruitment of children.

Although this case study does not provide details about the impact or success of interventions to prevent the recruitment of child soldiers, it does provide some relevant information about low-resource, community-based initiatives that have been proven to work. With the support of governments and NGOs, these can be implemented prior to and during conflict to prevent the terrible consequences of recruitment for children and their families and to reduce their short- and long-term economic costs. Some of the more complex policy interventions, to strengthen education and livelihoods, should be part of the government's commitments to guarantee children's rights, promote education and reduce poverty

Source: Save the Children (2005).

7 Conclusions and recommendations

This report has looked in detail at the economic impacts and costs of violence against children in both development and emergency contexts. Drawing on existing literature and data, it presents much of the evidence generated to date in relation to the consequences and resulting economic costs to individuals, families, societies, governments and economies of different forms of violence against children. These range from short-term health service costs and loss of schooling (which have significant costs in terms of human capital disinvestment); to medium-term mental health costs and productivity losses over the life-course, in addition to the significant costs resulting from loss of life in the worst cases of violence. The analysis focuses primarily on four manifestations of violence: sexual abuse and exploitation; physical and psychological violence and abuse; worst forms of child labour; and children associated with armed conflict, given the greater prevalence of some of these forms of violence in relation to others, but also to ensure the scope of the analysis was manageable.

In addition to presenting existing documented evidence of the consequences and economic costs of the different forms of violence against children based on a comprehensive review of the literature, this report presents some 'global' estimates for these costs, drawing on existing methodologies that have been used to calculate the costs of violence against children to individuals and society. According to these estimates, the global costs related to physical, psychological and sexual violence alone are between 3% and 8% of global GDP. This is a massive cost, possibly many times higher than the investment required to prevent much of the violence leading to such costs. In many cases such investments could be transformative, changing behaviours and attitudes over the long term, which would reduce costs of violence not only now but into the future with decreasing marginal costs of prevention. With respect to the global costs of hazardous work (which this study uses throughout as a proxy for the worst forms of child labour) calculated on the basis of foregone income resulting from loss of schooling and lower wages during the affected children's lives, the estimated global cost is \$97 billion annually, approximately equivalent to seven times Iceland's 2013 GDP.

Lastly, the costs of children's association with armed forces or groups is significant: in its lower estimate, the cost could amount up to \$120 million and the higher estimate to \$144 million annually based on the assumption that half of the victims experience physical and psychological impacts that result in a total loss of productivity in terms of their economic value added to society during the rest of their lifetimes, while the other half is partly reintegrated and is able to work, but with lower lifetime earnings resulting from years of education lost. It is important to note that, as violence against children is multifaceted, some of the children who experience physical violence will also be those working in hazardous forms of labour, and those who are counted as experiencing sexual abuse might be, for example, some of those associated with armed forces. As such, the costs of violence against children in the different components estimated cannot be added, but, in any of the components, they are sizeable enough to underline the urgency for decision makers, from a cost perspective, to invest in the prevention of all forms of violence against children.

The report also explores government spending on policies and programmes for the prevention and response to violence against children. Although spending patterns on violence against children are unavailable for most countries – given the complexity of the sector, the generally limited disaggregated data generated on child-focused spending and a dearth of reporting on such spending – the report draws relevant conclusions from case studies where analysis of spending on violence against children has been conducted. Findings indicate that, at a global level, a significant effort is required to generate and publish more detailed information on spending on preventive

and responsive actions against violence to better understand how government actions in this sector are progressing.

Further, where data is available for analysis, findings indicate that, though there has been positive progress, with higher spending on violence prevention and response policies and programmes in some countries over the past five to ten years, this sector still receives a very small share of total welfare spending, including when compared with spending in other child-focused sectors such as health and education – although some interventions to promote increased and higher quality schooling, for example, can also serve as important empowering measures that help children not to fall victims of some forms of violence. Although some preventive actions are indeed related to strengthening education supply, so spending can be found in the education sector, most other actions, including smaller programmes, are typically linked to child welfare or child protection spending. Spending on this sector is very small relative to the size of countries' budgets, but, more importantly, in relation to the scale and costs resulting from violence against children.

Donors can play an important role in supporting governments in low-income countries in particular to implement and scale up efforts to prevent and respond to violence – particularly where there is a complete absence of preventive and support services as a result of limited budgets and competing spending demands, including in relation to providing basic services to children. Donor funding to prevent and respond to violence against children is particularly important during emergencies, as government resources might not be amenable to or might be compromised with other responses, despite the huge need for programmes to be in place to ensure children can avoid the short- and long-term consequences and costs of facing violence.

Finally, the study presents a few good practice examples of programmes and policies being implemented to prevent the different types of violence against children. This is with the aim of illustrating how cost-effective investment in violence prevention can be, if innovative and successful programmes are scaled up to reach a larger share of the population.

For example, positive parenting programmes have been found to be a good value-for-money option to prevent physical and psychological violence against children in both high- and low-income countries. Although most of these interventions are small in scale, increasing their scope and reach might be a way to expand preventive efforts.

There are also multiple different programmes to reduce exposure to sexual violence, particularly in the case of adolescent girls, although the rates of success of most have not been systematically evaluated and thus are difficult to replicate based on evidence of their success. Some of the evidence that does exist from evaluations of such programmes indicates that those that provide life skills training with specific knowledge about sexuality and self-awareness, combined skills development and income generation opportunities, can be an effective way of empowering adolescent girls to avoid sexual abuse, in low-income countries in particular.

With regard to the worst forms of child labour, combined measures to increase schooling and household incomes, especially through child-sensitive cash transfer programmes, have been shown to be an effective way to reduce children's involvement in hazardous work, in addition to helping achieve poverty reduction and education commitments by governments.

In the case of emergencies, more systematic research and evaluations on the types of programmes that work are needed to be able to identify good, cost-effective programmes, to reduce the risks facing children and their vulnerability to violence.

Given the high economic costs of violence against children, such prevention measures are certainly good value-for-money investments in the short and long run, but more importantly, they can better reflect governments' and donors' true commitment to support such a basic human rights issue. More such policies and programmes should be implemented and scaled up globally with the aim of progressing more rapidly on the elimination of all forms of violence against children.

As highlighted throughout this report, the main thrust to prevent and eliminate all forms of violence against children goes beyond the incentive of making more value-for-money investments despite the high economic costs of violence against children. The main driver should be the underlying rights of children and states' duties to

ensure children can live their lives safe and free from violence. The benefits are worthwhile in terms of the human rights achievement and general happiness levels that individuals, households and societies could attain, which are of incalculable value.

Here are some recommendations that emerge from this report:

- There is a need for the generation and reporting of more specific data on violence against children. Despite growing efforts to develop survey data on the prevalence of violence against children, only a few countries have conducted such specific surveys, and they generally do not have information exploring the consequences for children experiencing violence during their lifetimes. Such information is critical to generate stronger evidence across the globe about the magnitude of the problem, its causes, consequences and the costs and implications associated with it.
- Much more in-depth primary research on the different forms of violence against children needs to be conducted in low- and middle-income countries. Currently, most research on the economic costs centres on physical and psychological violence against children in high-income countries, where data are more forthcoming. More research will continue to enrich the evidence base in this area and can lead to more robust advocacy efforts by bringing compelling economic arguments to policymakers, some of whom are not easily persuaded by the fundamental human rights imperative of preventing violence against children.
- From the evidence in this report and the literature it draws on, it is clear that 'prevention pays', although at the moment levels of spending on preventive and responsive actions in relation to violence against children remain low, and are frequently not even documented. As such, research and advocacy efforts need to continue focusing on promoting prevention good practices and scaling up funding for these, so they can reach a greater share of children affected by different forms of violence, particularly the most vulnerable children who are most at risk (such as those who are poor and socially marginalised, girls and children with disabilities).
- Preventive and responsive programmes need to be thought about more holistically, involving
 protection and welfare services, but also identifying linkages to other core sectors, such as health,
 education, poverty reduction (through social protection, for example) and how these to contribute to
 more robust measures that protect children in a more comprehensive way.
- Just as the formulation and implementation of the Millennium Declaration and the Millennium
 Development Goals have done for education, health and the prevention of HIV and AIDS, a
 prioritisation of violence against children as an issue of global concern can certainly contribute to
 mobilise the necessary resources, and to scale up preventive and responsive actions to an optimum
 point to effect global scale change.

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Annex 1: Sexual violence – evidence on the scale of the problem globally

Region/co	untry	Statistic	Source
Global pati	terns	In 2002, 150 million girls and 73 million boys under the age of 18 had experienced forced sexual intercourse or other forms of sexual violence	Pinheiro (2006)
		involving physical contact.	
		Up to 50% of sexual assaults worldwide are committed against girls aged under 16.	UNFPA and UNICEF (2011)
		In 2000, it was estimated that 1.8 million children were being sexually	UNICEF (2010a)
		exploited in prostitution and pornography. Around 1 million children are thought to enter prostitution every year.	(=====,
		In high income countries that are not experiencing conflict, 21.2% of	Stoltenborgh et al.
		females and 10.7% of males aged 0-18 are victims of sexual abuse, meaning an average of nearly 16% of all children.	(2011)
		A review on the prevalence and risk of violence against children with disabilities, published in July 2012, found that, overall, children with disabilities were almost four times more likely to experience violence than non-disabled children. Children with disabilities were 3.7 times more likely to be victims of any sort of violence, 3.6 times more likely to be victims of physical violence and 2.9 times more likely to be victims of sexual violence. Children with mental or intellectual impairments appear to be among the most vulnerable, with 4.6 times the risk of sexual violence.	Jones et al. (2012)
Sub- Saharan	Swaziland	Sexual violence as a child is associated with more than three times the risk of reporting STDs, including HIV, compared with those not exposed.	Reza et al. (2009)
Africa		Nearly 38% of women aged 18-24 report experiencing sexual violence before the age of 18.	UNICEF Swaziland and CDC (2007)
	Tanzania	27% of women aged 18-24 report experiencing sexual violence before the age of 18.	UNICEF Tanzania et al. (2011)
		Over 6% of females aged 13-24 who were ever pregnant report that at least one pregnancy was caused by forced or coerced sex.	
	Zimbabwe	32% of women aged 18-24 report experiencing sexual violence before the	Zimbabwe
		age of 18.	National Statistics Agency (2012)
		Among 18-24 year olds, only about 3% of females and slightly above 2% of males who have experienced sexual violence received professional help from institutions.	
	Uganda	65% of females aged 15-19 report sexual or physical violence.	UNICEF (2011)
	Liberia	80% of victims of gender-based violence in 2011-2012 were younger than 17 and almost all were raped.	Save the Children (2013)
	Sierra Leone	70% of the sexual violence cases seen by IRC were girls under 18 and more than 20% were under 11 following the conflict.	Save the Children (2013)
		215,000-257,000 Sierra Leonean women and girls may have been subjected to sexual violence	
		83% of survivors of gender-based violence in 2011-2012 were younger than 17 and almost all of these cases involved rape.	
	DRC	65% of 16,000 cases of sexual violence during conflict involved children, mostly adolescent girls. 10% of the victims in 2008 were children less than	Save the Children (2013)

		10 years	
	Cote	10 years. Between November 2010 and September 2011, children made up 51.7% of	Save the Children
	d'Ivoire	cases of sexual violence. In more than half of these cases against children, the survivors were below 15 years of age.	(2013)
	Kenya	The US National Center for Education Statistics claims in 2007-2008 there were 800 rapes on elementary, middle and high school campuses and 3,800 cases of sexual battery aside from rape.	Robers et al. (2010)
	South Africa	Recent South African police statistics show 21,000 cases of child rape or assault reported, against children as young as nine months old. Only an estimated 1 in 36 cases of rape is reported.	ILO (n.d.)
	Malawi	Between three-fifths and two-thirds of offences against children were reported to someone, be this a parent, a teacher or the police. Bullying is most often reported (65.5%), whereas forced sex (61.4%) and oral sex (60%) are the least reported.	Jones et al. (2008)
	Africa	Around 3 million girls in Africa are at risk of undergoing FGM/C every year. Estimates indicate that 91.5 million girls and women over age nine in Africa are currently living with the consequences of FGM/C.	Yoder et al. (2004) Yoder and Khan (2008)
Asia	India	53.22% of children report facing sexual abuse, 52.94% boys and 47.06% girls. 21.90% of children have been sexually assaulted	Kacker et al. (2007)
		In 2007, MWCD reported the presence of over 3 million female sex workers in India, with 35.47% of them entering the trade before the age of 18. Girl prostitutes in India are tortured, held in virtual imprisonment, sexually abused and raped. Brothel keepers regularly recruit young girls.	Pietkiewicz- Pareek (2012)
	Thailand	In 2013, more than 19,000 children were treated at provincial hospitals because of abuse; about 70% were treated for sexual abuse.	UNICEF (n.d.)
	Cambodia	Of the 1,499 reported rapes during 2007-2008, 69.7% were against children; of the 535 rape incidences in 2009 seen by NGOs, 72% were of children.	UNICEF (2012)
Pacific	Papua New Guinea	Nearly half reported rape victims are under 15 years and 13% are under 7 years.	UNICEF (2008)
		50% of those seeking medical help after rape are under 16, 25% are under 10 and 10% are under 8.	Davidson (2013)
South/ Central America	Latin America and the Caribbean	Across Latin America and the Caribbean, a review found that between 8% and 27% of women and girls reported sexual violence by a non-partner. However, the level of reported violence varies widely by collection and data analysis.	Contreras et al. (2010)
	Peru	One report in Lima revealed that nearly one in five women reported sexual abuse – defined as unwanted sexual touch or sex acts before 15 years of age – as did 18% in Cusco.	Contreras et al. (2010)
	Honduras	Domestic servants, who are predominantly girls, may live in isolated homes and are susceptible to physical and sexual abuse.	US Department of Labor (2012a)
	Brazil	In 2011 alone, more than 10,000 children and adolescents were reported as being victims of sexual abuse, some as young as 11.	Plan International (2014)
		Sexual violence is the second most reported crime against children in Brazil, with most victims aged between 10 and 14.	
North America	US	Nearly 1 in 5 women (18.3%) and 1 in 71 men (1.4% have been raped. 42.2% of female victims were raped before the age of 18.	Black et al. (2011)
	Haiti	Almost one in five girls in Haiti's capital Port-au-Prince were raped during an armed rebellion in 2004-2005.	Save the Children (2013)
Europe	UK	One in five women (aged 16-59) has experienced some form of sexual violence since the age of 16.	Ministry of Justice et al. (2013).

Annex 2: Physical and/or psychological violence against children – evidence on the scale of the problem globally

Region/country		Statistics	Source
Global patterns		A UNICEF study of 37 countries found 86% of children aged 2-14 were subject to violent discipline (physical punishment or psychological aggression) by a parent or caregiver, and two out of three were subject to physical punishment.	UNICEF (2010b)
		Between 20% and 65% of school children report being verbally or physically bullied. Almost 90 countries have not yet prohibited corporal punishment in schools, despite the UN Committee on the Rights of the Child calling for a universal ban.	BBC (2010)
		A study of 40 developing countries showed exposure to bullying ranged from 8.6 (45.2%) in boys to 4.8 (35.8%) in girls.	WHO (2004)
		Although reliable data are rare, there were an estimated 57,000 homicides among children under 15 years of age worldwide in 2000. Very young children aged 0-4 years are at greatest risk. The most common cause of death is head injuries, abdominal injuries and intentional suffocation.	WHO (2002)
Sub- Saharan	Ghana	71% of children report corporal punishment at school, alongside shaming and humiliating students.	Vigil et al. (2012)
Africa	South Africa	According to Body Shop International Country Statistics, 500,000-1.3 million children are estimated to be exposed to domestic violence.	UNICEF (2006)
Asia	Pakistan	According to Body Shop International Country Statistics, 6.1 million children are estimated to be exposed to domestic violence.	UNICEF (2006)
	Bangladesh	Bangladesh has the highest worldwide incidence of acid violence and acid burns constitute 9% of the total burn injuries in Bangladesh, and children, particularly girls, may be target.	UNDAW (2005)
	Thailand	According to Body Shop International Country Statistics, 903,000 to 2.6 million children are estimated to be exposed to domestic violence.	UNICEF (2006)
	India	India's MWCD published a study on child abuse in India. Based on the experiences of 12,447 children aged 5-18 years across 13 states, it found 69% of children reported physical abuse, with 62% of the corporal punishment in government and municipal schools. In addition, 53.2% of children reported having faced one or more forms of sexual abuse, of which 21.9% was severe.	Pereznieto et al. (2010)
	China	The Tibet Justice Centre reveals ethnic and political minorities are subject to discriminatory violence, with Tibetan children subjected to torture and degrading treatment, beaten, burned and forced to kneel on sharp objects.	Jones et al. (2008)
Pacific	Korea	According to Body Shop International Country Statistics, 1.2 million children are estimated to be exposed to domestic violence.	UNICEF (2006)
	New Zealand	In 2011/12, there were 6,750 substantiated cases of child abuse for children aged 0-4, with the rate for Maori children remaining consistently higher than the rate for Pacific and other children. In 2011/12, there were 3,618 substantiated cases of child abuse of Maori children, equivalent to almost 400 cases per 10,000 Maori children in this age group.	New Zealand Ministry of Justice (n.d.)

		Intentional injury hospitalisation rates for Maori were 1.5 times higher on average than for Pacific children, and four times higher than for other children aged 0-4 years from 2006/ 07 to 2011/12. In New Zealand, hospital admissions for injuries arising from assault, neglect or maltreatment for children aged 1-14 years declined between 2000 and 2010; however, mortality remained relatively static. In 2012, approximately 16,000 children were admitted to hospital; 8 children died. This study was based on a method that analyses primary diagnosis of injury and external cause code of intentional injury.	New Zealand Child & Youth Epidemiology (n.d.)
South America	Brazil	Youth violence in Brazil is a widespread problem, with a study documenting that 84% of students in 143 schools from six state capitals consider their school violent, and 70% have reported being victims of violence in schools, including robberies, homicides, sexual abuse, threats and property damage.	Pereznieto et al. (2010)
North America	Mexico	According to Body Shop International Country Statistics, 1.6-8.5 million children are estimated to be exposed to domestic violence.	UNICEF (2006)
Europe	Austria	According to Body Shop International Country Statistics, 82,000 children are estimated to be exposed to domestic violence.	UNICEF (2006)
	Italy	According to Body Shop International Country Statistics, 385,000-1.1 million children are estimated to be exposed to domestic violence.	UNICEF (2006)
	UK	According to Body Shop International Country Statistics, 240,000-963,000 children are estimated to be exposed to domestic violence. 70% of children living in UK refuges have been abused by their father.	UNICEF (2006) Women's Aid (2013)
	Siberia, Russia, Romania	24-29% is the yearly prevalence of physical abuse for Siberia, Russia and Romania.	Gilbert et al. (2009)
	Macedonia, Latvia, Lithuania, Moldova	12.5-33.3% is the yearly prevalence of severe or moderate psychological abuse reported.	Gilbert et al. (2009)

Annex 3: Worst forms of child labour – evidence on the scale of the problem globally

Region/country	Statistics	Source
Global Patterns	The number of children in hazardous work in the world has declined by 30 million, from 115.3 million in to 2008 to 85.3 million in 2012. In absolute terms, the Asia Pacific region has the most child labourers aged 5-17 (77.7 million) compared with 59 million in Sub-Saharan Africa and 12.5 million in Latin America and the Caribbean.	Diallo et al. (2013)
	However, Sub-Saharan Africa has the highest incidence of child labour, with one in five children involved. About 1 in 12 of the total child population in Middle East and North Africa (9 million) was in child labour in 2012.	
	With regard to children in hazardous work (5-17 years), the largest number of children in this worst form of child labour is found in the Asia Pacific (33.9 million) and Sub-Saharan Africa (28.8 million) regions. There are 9.6 million children in hazardous work in Latin America and the Caribbean and 5.2 million in the Middle East and North Africa. In relative terms, Sub-Saharan Africa has the highest incidence of children in hazardous work, with 1 in 10 children involved.	
	168 million children worldwide work in child labour, accounting for almost 11% of the child population as a whole. 85 million in absolute terms are in hazardous labour.	
	There are 5.8 million girls involved in hazardous domestic work, compared with 2.3 million boys.	
	The total number of children in hazardous work is 115,000 (2008 estimates). This is over 7% of all children aged 5-17.	ILO (2013b)
	Progress in reducing the worst forms of child labour has been uneven. Of greatest concern is an alarming 20% increase in hazardous work of children in the 15-17 year age group, a rise from 51.9%.	ILO (2013a)
	The rates of injury are much higher for migrants and ethnic minorities than for dominant populations. For example, Hispanic child workers in the US have twice the number of deaths as non-Hispanic workers, a rate of 6.3 deaths per 100,000 worker deaths.	ILO (2011)
	ILO estimates state that 58.6% of children and young workers in the world are found in the agriculture sector, with 16% of rural youth aged 15-19 registered as having not completed primary school in 2010 during to child labour.	ILO (2013c)
	In 2000, ILO reported that 5.7 million children were in forced or bonded labour, 1.8 million were in prostitution and pornography and 1.2 million were victims of trafficking.	ILO (n.d.)
	There are reports of child labour in some of the world's biggest cotton industries including in China, India, the US, Pakistan, Brazil, Uzbekistan and Turkey.	World Vision (2012)

		In Gujarat, India, a child working on a cotton seed farm received less than A\$1 per day. Children may work up to 12 hours in extreme temperatures. In Uzbekistan, children are made to work from early in the morning to evening with sufficient food. In Uzbekistan, Tajikistan, Kyrgyzstan and China, children may be quoted unrealistic quotas of up to 50 kg per day and are punished if they do not meet them.	
Sub- Saharan Africa	Mali	Over 800,000 Malian 5-14 year olds are exposed to dust, fumes and gas in their workplaces; over 600,000 must work in extreme temperatures; over 400,000 must operate dangerous tools; and many thousands more are exposed to other hazards such as extreme temperatures, excessive noise, chemical and radiation – all with untold consequences for their immediate and long-term health and safety.	ILO and UCW (2010)
Asia	Bangladesh	Children engaged in hazardous labour aged 5-17 are estimated to number around 1.3 million. A quarter of all working children reported they had been physically punished at their workplaces, according to a 2008 children's opinion poll.	UNICEF (2010c)
	India	Even after a nationwide ban on child labour in hazardous industries was introduced, over 12 million Indian children, aged between 5 and 14, continue to work in dangerous occupations. Based on a 2001 consensus, 208,833 worked in the construction sector and 49,898 in auto repair workshops.	UNICEF India (n.d.)
		The federal police estimate that 1.2 million children are victims of commercial sexual exploitation. In 2009, six-eight-year old-children were found working in mines in Jharkhand and Bihar that were extracting mica for export to the global cosmetics industry.	United States Department of Labour (2012b)
		India has 13 million child workers aged 5-14 years, the largest number in the world, and a large majority of them are Dalits or from Scheduled Tribes and other minorities.	Human Rights Watch (2014)
	Uzbekistan	Every year, between 1.5 and 2 million children are forced to work during the cotton harvesting seasons. This practice is government-sanctioned. Schools may be closed for up to three months, and staff are tasked with ensuring children work in the fields.	World Vision (2012)

Annex 4: Children affected by and/or associated with armed conflict or fighting forces – evidence on the scale of the problem globally

Country	Statistic	Source
Global	Estimates from 2005 suggest that, of the approximately 300,000 child soldiers involved in combat worldwide, 40% of them are girls.	Save the Children (2005)
Syria	As of January 2014, more than 10,000 children have lost their lives to Syria's violence. Boys as young as 12 have been recruited to support the fighting, some in actual combat, others to work as informers, guards or arms smugglers.	UNICEF (2014)
	According to a recent UN report, children as young as 11 are being detained with adults. In some cases, they are being subjected to torture and sexual abuse to humiliate them, force confessions or pressure relatives to surrender.	
	There have also been reports of child rape, including gang rape, and of children used as human shields – forced to the front lines to stand between tanks and fighters to dissuade enemies from attacking.	
Ethiopia	Most women and girls reported having heard or experienced sexual violence in the camps, including girls of 13 or younger. Women and girls reported feeling most at risk of rape when collecting firewood. More than 69% of the Somali refugee population is composed of children under the age of 18 (33% girls and 36% boys).	Save the Children (2013)
Mali	In Mali, evidence gathered suggests at least 175 boys (ages 12-18) have been recruited into armed forces or groups, at least 8 girls have been raped or sexually abused; and 2 boys (ages 14 and 15) were killed in separate incidents related to unexploded ordnance and 18 children were maimed.	UNICEF (2012b)
	The closure of the vast majority of schools across the region is further cause for concern, affecting up to 300,000 children in basic education alone. Children out of school are at risk of recruitment, violence and exploitation.	
Bosnia	Conservative estimates suggest 20,000-50,000 women and girls were raped during the 1992-1995 war in Bosnia and Herzegovina.	UN Women (n.d.)
Rwanda	Approximately 250,000-500,000 women and girls were targeted in the 1994 Rwandan genocide.	UN Women (n.d.)
Sierra Leone	Thousands of women and girls were abducted by rebels and subjected to sexual slavery, and an estimated 30% of child soldiers were girls. Children between the ages of 10 and 14 were widely targeted for rape and	Human Rights Watch (2003); Denov and Maclure (2006)
	sexual slavery, and between 5,000 and 10,000 were forcibly conscripted into armed forces or groups.	Save the Children (2012)
DRC	Over 200,000 women and children have been raped since the onset of the conflict. Between June 2007 and June 2008, in Ituri province in eastern DRC, 6,766 cases of rape were reported – a number that probably represents only a fraction of the assaults taking place.	WHO (2009)



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ISSN: 2052-7209

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