

National Council for Childhood and Motherhood
UNICEF Egypt Country Office
Social Research Center, American University in Cairo

Towards Policies for Child Protection
A Field Study to Assess Child Abuse in Deprived Communities in Cairo and Alexandria

Egypt
2006

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Study Team, Advisory committee, And Partner NGOs

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**Towards Policies for Child Protection:
A Field Study to Assess Child Abuse in Deprived Communities in Egypt**

Executive Summary

As part of national efforts to formulate comprehensive policies for child protection in Egypt, the Social Research Center of the American University in Cairo, under the auspices of the National Council for Childhood and Motherhood and with support from UNICEF Egypt Country Office, has implemented in 2006 a field study on child abuse addressing physical and emotional abuse, neglect, and exploitation at home, school, and work. The study adopts WHO definition of child abuse which includes “all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power.”

The study covers twelve purposely chosen under-privileged communities in Cairo and Alexandria. It is not a nationally representative sample and hence is not intended to be used to derive national estimates. The study, however, is seen as an appropriate tool to guide national policies as well as an innovation in terms of piloting new framework, design and tools. A detailed discussion of the relevance of the findings for guiding policies is provided in chapter 8. Also, a detailed discussion of the study and its many unique features are provided in chapter 2.

The study addresses the different dimensions of child abuse at three different settings (home, school, work). It uses a multidisciplinary approach and a mixture of quantitative and qualitative tools. Two household and school surveys are conducted. The first covering children under 18 residing in 1,200 households. The second covering 1,200 school children in twelve primary and preparatory schools. The qualitative tools include focus group discussions and in-depth interviews with children, parents, teachers, physicians and social workers, in addition to psychiatric investigations of four case studies. Also, a policy analysis of existing nation-level efforts for child protection is provided (chapter 7).

Main Results

The findings, representing the twelve areas covered by the field study, document the prevalence of different forms of abuse (chapters 3-5).

Examples of these include extremely high levels of corporal punishments at home and school (During the year preceding survey, 81% of children were beaten at home and 91% were beaten at school) as well as exposure to physical abuse at work (Among ever-worked school children, 27% report ever been physically punished). Emotional abuse is also documented. During the year preceding survey, 90% of children were punished verbally at home and 70% were punished verbally at school. Half of ever-worked school children have ever been verbally abused at work. Furthermore, pressures in the form of humiliation, beating and

discrimination are put on school children to take private or extra tutoring. According to caregivers, 80% of children at school take private tutoring or participate in school-based tutoring groups. The study, on the other hand, notes that there is no evidence of medical neglect as well as very little evidence of educational neglect.

The study provides detailed description of the many forms, features and characteristics of abuse, neglect and exploitation. It allows differentiated analysis by sex of the child and parent as well as the setting in which abuse occur. It also provides rich information on attitudes of children and parents and their perceptions of abuse.

The consequences and implications of abuse on well being are also discussed. Examples of these are that many surveyed school children show evidence of alienation from their families (40%), some feel pressured by their families (18%), and a few show evidence of hostility towards their families (5%). Also, some working children experience conflict between work and study (12%) or school attendance (10%). More children (50%) complain that work prevents them from playing and having fun. Many working children complain from the work being too stressful physically (44%) or emotionally (20%).

Risk Factors

The ecological framework adopted (chapter 1), which stresses the importance of contextual factors, provides detailed information of underlying risks and determinants (chapter 6). Examples of these are discussed below.

Disability, chronic illness, low scholastic aptitude of children as well as economically or socially stressful and insecure living conditions for families are associated with higher exposure to physical and emotional abuse.

The main risk factor is not the lack of financial resources at present but rather the lack of the capability to secure the future, or in other words, the lack of the security embedded in human and social capital. Children residing in marginalized areas whose streets and public space lack security and whose resident families lack social harmony and integration are at elevated risk of violence and abuse. There are many reasons for such elevated risk. Parents tend to be over-protective of their children in unsafe neighborhoods, and this is usually expressed in sterner measures of discipline. Adults in such areas live under constant stress and frustration that is usually expressed in intra-familial violence. Lacking safe avenues for their energies, children become hyperactive and aggressive, and this puts more pressure on their parents and teachers.

Policy Recommendations

Based on study findings, and adopting the protective environment framework embraced by UNICEF, Chapter (8) draws on the syntheses of the main findings and translates them into a set of policy recommendations.

The many recommendations introduced by this study are grouped under three broad sections that emphasize:

- Building a national environment conducive to non-violent practices towards children.
- Adopting a comprehensive and integrated framework for child protection.
- Building an effective child protection system for reporting and case handling.

Introduction

This report summarizes the main findings of a study implemented by the Social Research Center (SRC) of the American University in Cairo with support from UNICEF Egypt Country Office (UNICEF ECO). The study is implemented under the auspices of the National Council for Childhood and Motherhood (NCCM).

The study has two entering points. The first is the United Nations study on violence against children. In 2001, the Committee on the Rights of the Child requested an in-depth international study on violence against children to synthesize the current knowledge into a global picture of violence against children that could help develop recommendations to deal with the issue. The study was assigned by the UN Secretary General to an independent expert who conducted the study in collaboration with the Office of the United Nations High Commissioner for Human Rights (UNHCHR), the United Nations' Fund for Children (UNICEF), and the World Health Organization (WHO). The study was completed and submitted to the UN General Assembly in October 2006.

The international mobilization efforts concurrent with the preparation of the UN study have brought the issue of violence against children into focus. The UN Secretary General sent a questionnaire to governments to collect basic information on the legislation and institutional context, specific policies and programs addressing the issue of violence against children, advocacy and preventive campaigns, available data and research, the role of the civil society, and the participatory role of children. Responding to this detailed questionnaire necessitated the formation of national committees and task forces bringing together experts of the highest caliber. The process focused attention on the national context and helped in recognizing the strong and weak points. A number of regional consultancy meetings, through sharing experiences and lessons-learned and recognizing similarities, sharpened national self-recognition. Having the privilege of hosting the regional consultation meeting for the Middle East and North Africa region in June 2005 and its follow-up meeting in March 2006, Egypt assumed a special role and responsibility in preparing the UN study. A number of activities were triggered by Egypt's involvement in the study, including forming a national steering committee and preparing a national plan of action. Available research was reviewed and assembled and new research has been conducted. The current study was envisioned and developed within this positive momentum.

The second entry point of the study is a pioneer project that has been sponsored by UNICEF Egypt Country Office since 1999. The Child Protection Project, which is currently active in a few selected districts in Cairo and Alexandria, works through non-governmental associations to identify children at risk and address their needs. The project mainly focuses on educational and health needs of children living in deprivation, and adopts an integrative multi-dimensional approach. Recently the project also started to address female genital cutting as a priority issue. UNICEF ECO has also decided that there should be a focus on other manifestations of violence against children and child abuse in the areas served by the Child Protection Project. Because of this, a systematic analysis of the situation in the areas served is deemed necessary. A proposal for a study on child abuse was submitted by the Social Research Center in February 2005 and the grant agreement was signed in June 2005. The study had three phases. The preparatory phase, which covered conceptualization and

developing of instruments, extended from July 2005 to February 2006. The second phase, which extended from March to June 2006, witnessed the implementation of the field study. The final phase of study analysis and synthesis started in July 2006 and extended to the end of October 2006. During the preparatory phase it was decided to include both areas served by the Child Protection Project and adjacent areas not served by the Project in order to increase the scope of the study and to provide baseline data that will later help in evaluating the Project's investment in child protection.

The study adopts the WHO definition of child abuse as "all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power." It also adopts the stand stressed by the UN study on violence against children that "no violence against children is justifiable; all violence against children is preventable."

The report has eight chapters. The first chapter presents the conceptual framework of the study, and discusses the adopted definition of child abuse. The study design and tools are presented in the second chapter, which also describes the areas covered by the study. The three following chapters provide information on child abuse in the studied areas, divided according to the setting of abuse. Chapter three covers abuse, neglect, and exploitation at home. Chapter four covers abuse and exploitation at school, and chapter five discusses physical and verbal abuse at work. Precipitating factors of child physical abuse at home are analyzed in chapter six. Chapter seven describes the national setting for child protection in terms of legislation, policy, and programs. It also discusses the role perceived for those involved in protecting children from abuse at the local level. A final chapter discusses and synthesizes the study findings and introduces a set of policy recommendations.

The findings presented in this report refer to the situation in the areas covered by the field study. These areas, as will be made clear throughout the presentation of findings, are not representative of Cairo and Alexandria. Indeed, this lack of representation explains why some of these areas are chosen for the implementation of the Child Protection Project. For example, West Alexandria is chosen for investment in child protection because it is the residence of the poorest and least privileged families in Alexandria. Among other things, school drop-out and child labor is higher in West Alexandria than in other Alexandrian Districts. In Cairo, Ein-Helwan and El-Nahda have been actively served by two influential NGOs since the early 1990s when these two areas were used to shelter homeless families in the wake of the 1992 earthquake. The Child Protection Project has built on that long-term investment and involvement with residences in these areas. Sheltering areas are typically characterized by their heterogeneity and disintegration because they bring together families from diverse backgrounds that have moved to these new areas out of necessity rather than of choice. How much the situation in these areas, as depicted in the following chapters, resembles or differs from the situation in other deprived areas in Cairo and Alexandria remains an open question. In order to answer this question, it is hoped that the current study will be replicated in other areas, or, better still, nationally. The relevance of the current study to national policy is discussed further in Chapter Eight.

1. The Problem: Child Abuse

Child protection is a key dimension in the Convention on the Rights of the Child (CRC). In particular, CRC calls for active measures to eliminate all forms of exploitation and abuse of children and all kinds of violence directed towards them. Addressing child abuse, however, is one of the hardest tasks that face those implementing the articles of CRC and those responsible for monitoring such implementation. One reason behind the difficulty is the lack of reliable information on the phenomenon of child abuse with regard to its prevalence, risk factors, and appropriate preventive and curative measures. The scientific investigation of child abuse has long been hindered by the sensitivity of the issue and its conceptual complexity as well as by serious ethical considerations.

Notwithstanding the inherent methodological difficulties, child abuse remains a global challenge that impairs the well-being and curtails the potential of children. Adopting effective measures to prevent abuse or to treat and rehabilitate abused children should be based on studies that diagnose the problem and evaluate the available protective measures. In recognition of the need for empirical research, the Committee on the Rights of the Child requested in 2001 an in-depth international study on violence against children, a synthesis study to be conducted collaboratively by the Office of United Nations High Commissioner for Human Rights (UNHCHR), the United Nations' Fund for Children (UNICEF), and the World Health Organization (WHO).¹ As a part of the preparation of this study, a regional consultancy meeting was held in Cairo in June 2005.² The UN study on violence against children was completed and presented to the UN General Assembly in October 2006.³ The complete study was launched in Geneva on 20 November 2006.⁴

This chapter aims at presenting background information on the problem of child abuse as a backdrop to the study design and findings. It starts with a background section that focuses on the definitions and taxonomy of the expression “child abuse” and the main issues in studying child abuse. The conceptual framework that guides the current study is introduced in the second section. The chapter then ends with a statement of the study objectives.

1.1. Background

Evidence of child abuse as a widespread phenomenon has been available for a long time. Literature and historical accounts are fraught with reports of infanticide, mutilation, abandonment, and other forms of violence against children. However, systematic scientific attention to the problem is relatively recent. The first studies to address child abuse explicitly from a medical perspective were conducted in the nineteenth century by the French forensic physician Ambroise Tardieu. Analyzing and describing in details many cases of child abuse, Tardieu published from 1857 to 1868 a number of pioneering articles addressing the

¹ United Nations (2002). United Nations Special Session on Children, 8-10 May 2002. New York, USA. (<http://www.unicef.org/specialsession/activities/protect-violence.htm>).

² For more information, see <http://www.atfal.org> or <http://nccm.org.eg>

³ For more information, see <http://www.violencestudy.org>

⁴ Pinheiro, P. S. (2006). *World Report on Violence against Children*. Geneva, Switzerland: United Nations Secretary-General's Study on Violence against children.

identification and consequences of physical and sexual abuse of children.⁵ These pioneering works, unfortunately, were mostly ignored. The medical recognition of child maltreatment as a public health issue remained negligible for almost a century while obscure diagnoses were used to account for children's allegations of abuse.⁶

The American physician Henry Kempe, who coined the term "the battered child syndrome" in his seminal 1962 article⁷, is usually accorded the credit of being the first to identify child maltreatment as a public health issue.⁸ Kempe initially used the term to refer to unexplained fractures in young children detected by x-ray which were hypothesized as a result of physical maltreatment. With time, however, the term has come to refer to all forms of physical abuse and neglect of children by their caregivers⁹. Kempe and his associates could achieve what Tardieu failed to, namely to convince their colleagues as well as the broader community of the seriousness of the problem. These efforts towards mobilizing interest in the United States eventually led to the Congress enacting the first Child Abuse Prevention and Treatment Act in 1974.¹⁰ The First International Congress on Child Abuse and Neglect was held in Geneva in 1976, followed by the founding of the International Society for the Prevention of Child Abuse and Neglect (ISPCAN) in 1977. The International Congress on Child Maltreatment meets biannually, with the aim of raising awareness of the worldwide problems of child abuse and neglect and to discuss national policies in this area.¹¹

Child maltreatment, as it currently stands, goes beyond the battered child syndrome to include other kinds of behaviors from caregivers that are harmful to the child. This expansion is a result of recognizing the limitations of the medical approach to the problem that focuses on diagnosis through manifest physical symptoms. One such limitation is that it emphasizes the extreme forms of physical abuse and misses other important forms, including emotional abuse as well as some forms of sexual abuse. Another limitation is that starting from the outcome (the manifest symptoms), identifying the link to an abusive act – which implies intentionality – is usually problematic, especially when legislative activities are required.¹² The common approach nowadays focuses on identifying the abusive acts themselves, regardless of the manifest outcomes. Sometimes the expression "child maltreatment" is used

⁵ Labbe J, (2005). Ambroise Tardieu: the man and his work on child maltreatment a century before Kempe. *Child Abuse and Neglect*, 29(4): 311-324.

⁶ Lynch, M. A. (1985). Child abuse before Kempe: an historical literature review. *Child Abuse and Neglect*, 9(1): 7-15.

⁷ Kempe, C. H., Silverman, F. N., Steele, B. F., Droegemueller, W. and Silver, H. K. (1962). The battered-child syndrome. *The Journal of the American Medical Association*, 181: 17-24.

⁸ Higgins, D. J. (2004). The importance of degree versus type of maltreatment: a cluster analysis of child abuse types. *The Journal of Psychology*, 138(4): 303-324.

⁹ Trocmé, N., MacMillan, H., Fallon, B. and De Marco, R. (2003). Nature and severity of physical harm caused by child abuse and neglect: results from the Canadian Incidence Study. *Canadian Medical Association Journal*, 169(9): 911-915.

¹⁰ National Research Council (1993). *Understanding Child Abuse and Neglect*. Washington D.C., USA: National Academy Press.

¹¹ ISPCAN (2004). *World Perspectives on Child Abuse*, Sixth Edition. Chicago, USA: International Society for Prevention of Child Abuse and Neglect.

¹² National Research Council (1993). op cit. in note 10.

when the focus is on the acts themselves while the term child abuse is used when the focus is on the manifest outcomes or when intentionality is inferred. The two expressions are usually used interchangeably however, especially as the accepted definition of abuse comes to transcend both manifest outcomes and intentionality– as will be discussed shortly.

Maltreatment could have severely negative consequences in terms of a child's physical, mental and psychological wellbeing and development. Manifest adverse consequences, however, are not the sole rationale for investing in fighting child abuse. Instead, it should always be kept in mind that children are entitled to all human rights, including the right to dignified humane treatment. No violence, physical or emotional, can be justified using claims that it is done for the benefit of the child. For this reason, it can be said that any maltreatment is abuse.

Definitions and Taxonomy

Child maltreatment, child abuse and neglect, and violence against children – concepts that are frequently used interchangeably – fall within the interest of a number of disciplines including public health, social work, law, sociology, psychology, and education. Because of these multiple perspectives it has been difficult to arrive at a consensus regarding the definition of child maltreatment. Terminological vagueness, which makes the definition susceptible to different interpretations in different settings, has been a deterrent to systematic research.¹³ Efforts, especially in the United States but also globally, to unify definitions have resulted in categorical advances in categorizing and researching child maltreatment.

Maltreatment could be defined as “behavior towards another person, which (a) is outside the norm of conduct, and (b) entails a substantial risk of causing physical or emotional harm. Behaviors included will consist of actions and omissions, ones that are intentional and ones that are unintentional”¹⁴

Two concepts are basic to this definition: norm of conduct and substantial risk. And depending on the way each of these two terms is discerned, different definitions of maltreatment may be derived. The spectrum varies from viewing “norms of conduct” to mean acceptable practices within a specific culture to perceiving it as entitled human rights that excludes all types of violence and inhumane treatment. Likewise, “substantial risk” could be measured in a rigid way to imply manifest harm or, at the other extreme, as any risk that exceeds the minimal risks associated with normal life. Such inherent flexibility renders the above definition unusable as an exclusive standard definition. Therefore, practical definitions of maltreatment or abuse tend to be more specific. Still, they all work within the above definition since it might be widened or narrowed depending on the context and application.

Medical, legal, sociological, developmental and psychological approaches to the definition of child maltreatment can be distinguished.¹⁵ Typically, the legal approach tends to apply the most precise definition. A common feature in legal definitions is requiring the harm

¹³ Chamberlain, H., Stander, V. and Merrill, L. (2003). Research on Child Abuse in the U.S. *Armed Forces. Military Medicine*, 168 (3): 257-260.

¹⁴ Christoffel, K. K., Scheidf, P. C., Agran, P. F., Kraus, J. F., McLoughlin, E. and Paulson, J. A. (1992). Standard definitions for childhood injury research: excerpts of a conference report. *Pediatrics*, 89: 1027-1034.

¹⁵ Aber, J. L. and Zigler, E. F. (1981). Developmental considerations in the definition of child maltreatment. In Cicchetti, D. and Rizley, R., eds. *New Directions for Child Development*, San Francisco: Jossey-Bass.

inflicted on the child to be manifest, in death or serious injury (physical or emotional), or otherwise to subject the child to eminent risk. In addition, the legal definition tends to emphasize the “norm of conduct” criterion in defining maltreatment. Therefore, different countries have different legal definitions for child abuse since the boundary of the “accepted normal conduct” that characterizes the legal definition might depend largely on the context. For instance, spanking or slapping a child is not excessive violence according to either the legal or informal norms of American society, although it is in many European countries.¹⁶ It should be noted, however, that the law can be more progressive than the society, and hence “accepted normal conduct” set by the law need not follow “social norms of conduct” but rather leads to it through criminalizing socially accepted practices.

Most statuses recognize four major types of maltreatment: neglect, physical abuse, sexual abuse, and emotional abuse. Other definitions, outside the legal framework, of child maltreatment agree on its classification of abuse and neglect, corresponding to acting in a harmful way and failure to act in a nurturing way, respectively.¹⁷

Social research usually tends to apply broader definitions of abuse that include acts that do not normally constitute recognizable offences under the law. For instances, the Canadian Incidence Study of Reported Child Abuse and Neglect, which is Canada’s first step towards a comprehensive child maltreatment surveillance system, considers exposure to family violence as a form of child maltreatment.¹⁸

Anthropological research has indicated some ambivalence towards potentially harmful practices when they are culturally sanctioned. Focusing on the child’s perception of the practice, some painful rites would be acceptable given the child’s belief in their long-term value. Recently, however, there was strong criticism of such cultural relativism in dealing with harmful practices.¹⁹ Increasingly, definitions and boundaries of child maltreatment are becoming globally unified.

Viewing child abuse from the vantage point of the child and adopting a humans-rights approach, a standardized global definition should be sought. Since child abuse is considered as threatening a child’s wellbeing and health broadly defined, the World Health Organization stands out as the standardizing agency for definitions and taxonomies. The WHO defines child abuse as “all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power.”²⁰

¹⁶ Agee, M. D., Crocker, T., and Shogren, J. F. (2004). An economic assessment of parents’ self-composure: the case of physical child abuse, *Topics in Economic Analysis and Policy*, 4(1): Article 9 (Berkeley Electronic Press).

¹⁷ Malekpour, M. (2004). Child abuse: a review of current research. *Pakistan Journal of Psychological Research*, 19 (1/2), 73-88.

¹⁸ Trocmé et al. (2003). op cit. in note 9.

¹⁹ Korbin, J. E. (2003). Children, childhood, and violence. *Annual Review of Anthropology*, 32: 431-446.

²⁰ World Health Organization (1999). *Report of the Consultation on Child Abuse Prevention*, 29-31 March. Geneva, Switzerland: World Health Organization. (WHO/HSC/PVI/99.1).

The main defining aspect of this standard definition of child abuse or maltreatment is the potential risk for the child from behaviors (or lack of) initiating from those who are supposed to be the child's source of care and nurture. The definition recognizes five major types of maltreatment: neglect, exploitation, physical abuse, emotional abuse, and sexual abuse.

Neglect is defined as the "failure to provide for a child's basic needs."²¹ Neglect may be physical, medical, educational, or emotional. Physical neglect is the failure to provide necessary food or shelter, or lack of appropriate supervision. Medical neglect is the failure to provide necessary medical or mental health treatment. Educational neglect is the failure to educate a child or to attend to special education needs. Emotional neglect entails inattention to a child's emotional needs, failure to provide psychological care, or permitting the child to use alcohol or other drugs. Neglect frequently stems from ignorance or lack of resources and could be overcome through social assistance. Occasionally, however, neglect is a result of a conscious failure to use available information and resources, in which case child protection services should interfere.²²

Exploitation can be defined as the use of the child for the benefit of an adult in a way that is detrimental to the child's health or development. The most common type of exploitation is the economic exploitation in the form of child labor. Sexual abuse can be viewed as sexual exploitation. In the current study, we include acts that are not usually considered within child abuse studies, such as forced private tutoring and excessive household chores, because they fit the adopted definition of child exploitation.

Sexual abuse or sexual exploitation could be defined as the "employment, use, persuasion, inducement, or coercion of any child to engage in, or assist any other person to engage in, any sexually explicit conduct or simulation of such conduct for the purpose of producing a visual depiction of such conduct; or the rape, and in cases of caretaker or inter-familial relationships, statutory rape, molestation, prostitution, or other form of sexual exploitation of children, or incest with children."²³

Emotional abuse is "a pattern of behavior that impairs a child's emotional development or sense of self-worth. This may include constant criticism, threats, or rejection."²⁴

Physical abuse

²¹ National Clearinghouse on Child Abuse and Neglect Information (2004). *What is Child Abuse and Neglect?* National Clearinghouse on Child Abuse and Neglect Information, U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau.

²² *ibid.*

²³ *ibid.*

²⁴ *ibid.*

several attempts to specify particular acts that should be considered abusive. Typically this is done through defining a border based on norms of conduct, and any use of physical force beyond this border is considered abusive. Norms of conduct could be identified by asking people how they view specific acts, or through studying the prevalence of specific acts. In spite of its practicality, however, such an approach embraces cultural relativity and, hence, contradicts the human-rights-based approach. We understand the WHO definition as extending beyond such socially determined norms-of-conduct approach. Accordingly, physical abuse is defined here as any intentional use of physical force that injures or has the potential to injure the child.

Corporal punishment is a special type of physical maltreatment of children. What distinguishes corporal punishment from other types of child maltreatment (except for female genital mutilation) is the positive societal attitude towards it. Corporal punishment is among the most prevalent – and accepted – types of child abuse. This is not surprising given the long history of application of corporal punishment not only in childrearing but also when punishing or subjugating adults. Until recently, inflicting physical pain as means of punishment for both children and adults has been considered legitimate, effective and beneficial not only to the society but also to the individuals punished. Up till now, the legitimacy of corporal punishment is still a controversial issue in many societies, including Egypt. The stand of the current study is that corporal punishment is physical abuse. It is unnecessary, potentially harmful, and is a violation of basic right of a child to be secure from violence.

In addition to these five types of child abuse recognized in the WHO standard definition, the current study includes female genital mutilation (FGM) since it is considered to represent a violent breaching of the rights of the girl child. The inclusion of FGM as a type of child abuse is consistent with the standing of WHO, UNICEF, and UNFPA in their 1997 joint statement that calls for the full elimination of the practice in all its forms²⁵.

Researching Child Abuse

The scientific research of child abuse is hindered by a number of obstacles. To begin with, child abuse is a highly sensitive and emotionally charged issue. Conceptualization is of children is the most studied type of child abuse, especially within the medical discipline. Nevertheless, what exactly constitutes an incidence of physical abuse is still a controversial issue. At one extreme, any use of force could be considered as physical abuse. This is broader than the WHO definition since not every use of force has the potential to injure. At the other extreme, only excessive use of force that results in manifest injury is considered abusive. This is not surprising since the WHO definition is based on the fact that the use of excessive force that has the potential to injure but does not result in manifest injury is still considered abusive. Both criteria are extremely hard to measure. In spite of these obstacles, research on child abuse has increased during the last three decades, not only in developed countries but also in developing countries, as well as in early adolescence. This might be due to the fact that the WHO definition is based on the fact that the use of excessive force that has the potential to injure but does not result in manifest injury is still considered abusive. Both criteria are extremely hard to measure. In spite of these obstacles, research on child abuse has increased during the last three decades, not only in developed countries but also in developing countries, as well as in early adolescence. This might be due to the fact that the WHO definition is based on the fact that the use of excessive force that has the potential to injure but does not result in manifest injury is still considered abusive. Both criteria are extremely hard to measure. In spite of these obstacles, research on child abuse has increased during the last three decades, not only in developed countries but also in developing countries, as well as in early adolescence. This might be due to the fact that the WHO definition is based on the fact that the use of excessive force that has the potential to injure but does not result in manifest injury is still considered abusive. Both criteria are extremely hard to measure.

²⁵ World Health Organization (1997). *Female Genital Mutilation: A Joint WHO/UNICEF/UNFPA Statement*. Geneva: WHO, 1997.

²⁶ Panel on Research on Child Abuse and Neglect (1993). *Understanding Child Abuse and Neglect*. Commission on Behavioral and Social Science and Education, National Research Council. Washington D.C., USA: National Academy Press.

incorporate ecological and familial-level risk factors²⁷, as well as cultural factors²⁸. This trend has been partially driven by policy needs for a solid ground on which to base child protection interventions.

In the Arab region, child maltreatment has been a topic that stimulated a number of studies. These include research on corporal punishment, especially at schools, in Egypt²⁹, Syria³⁰, and Bahrain³¹. There have also been studies on maltreatment and violence against children in Saudi Arabia and Kuwait³² that focused on injuries that required medical treatment. Community factors, however, were mostly absent in those studies.

Studies of child abuse can be divided, depending on the source of data, into population-based studies and record-based studies. Population-based studies usually collect self-reported data on attitudes and behaviors, while record-based studies investigate reported cases of violence and accidents. Record-based data are more accessible but are not representative because many violence cases are unreported, or, when requiring medical intervention, are misreported as unintentional accidents. On the other hand, population-based data are subject to response bias and fear of stigma. Ethical issues concerning confidentiality and safety of victims are relevant to both types of studies³³.

Studies of child abuse can also be divided into four categories reflecting their functions: studies of prevalence of child abuse, studies of risk factors, studies of consequences, and evaluation studies of preventive measures. Single studies, however, usually address more than one purpose.

Child Abuse in Egypt

As a party of the CRC, the periodic reports of Egypt to the Committee on the Rights of the Child incorporate a main section addressing special protection measures in addition to subsections addressing parental responsibility and protection of children deprived from parental care. The second periodic report was submitted in 1998 and discussed by the Committee in 2001. While the report addressed in detail the issue of economic exploitation of children, it gave only scant attention to the issue of sexual exploitation and sexual violence, for which it only addressed the legal framework. The report mostly ignored issues related to

²⁷ Coulton, C. J., Korbin, J. E., and Su, M. (1999) Neighborhood and child maltreatment: a multilevel study. *Child Abuse & Neglect*, 23: 1019-40.

²⁸ Behl, L. E., Crouch, J. L., May, P. F., Valente, A. L., and Conyngham, H. A. (2001). Ethnicity in child maltreatment research: a content analysis. *Child Maltreatment*, 6, 143-7.

²⁹ Youssef, R. M., Attia, M. S., and Kamel, M. I. (1998) Children experiencing violence: I. Parental use of corporal punishment, II: Prevalence and determinants of corporal punishment in schools. *Child Abuse & Neglect*, 22: 959-85.

³⁰ Barakat, M. and Ezz, I. (2003). Survey of Violence against Children in Basic Education Schools in Syria. Damascus, Syria: UNICEF.

³¹ Al-Mahroos, P. (1997). Corporal Punishment and psychological maltreatment among school girls in Bahrain. *Bahrain Medical Bulletin*, 19:70-3.

³² Al-Eissa, Y. A. (1998). Child abuse and neglect in Saudi Arabia: what are we doing and where do we stand?. *Annals of Saudi Medicine*, 18: 105-6; Al-Hait, S. A. S., Mossa, A., and Victorin, L. (1987). Non-accidental injury to children in Kuwait. *The Journal of the Kuwait Medical Association*, 21: 268-75; Al-Moosa, A., Al-Shaigi, J., Al-Fadhli, A., Al-Bayed, K., and Adib, S. M. (2003). Pediatricians' knowledge, attitudes and experiences regarding child maltreatment in Kuwait. *Child Abuse & Neglect*, 27: 1161-78.

³³ Panel on Research on Child Abuse and Neglect (1993) op cit. in note 26.

other kinds of violence and abuse.³⁴ The Committee, in its concluding remarks on the second periodic report, expressed its concern at the incidence of ill-treatment of children in schools and in homes and urged Egypt to take effective legislative measures to prohibit all forms of physical and mental violence including corporal punishment. The Committee has also expressed its concern at the insufficiency of data and lack of awareness of the phenomenon of commercial sexual exploitation of children.³⁵

The preparatory work which was conducted for the third periodic report to the CRC Committee, yet to be finalized, has included a comprehensive rights-based analysis of the situation of children. The situation analysis, sponsored by the National Council for Childhood and Motherhood (NCCM) and UNICEF in 2002, combined the efforts of a team of Egyptian experts under the coordination of Social Research Center (SRC) of the American University in Cairo and Institute of National Planning. The situation analysis report, developed within the framework of CRC, presented available indicators of abuse, violence, exploitation, and discrimination affecting children.³⁶ Special emphases were given to child labor and to street children. Although intra-familial violence against children was recognized as a main issue in the report, the discussion was limited by the severe lack of information. In addition to lamenting the paucity of information, the report acknowledged the lack of adequate legal protection of children from intra-familial violence and the shortage of rehabilitation services available to victimized children.³⁷

The lack of information lamented above refers to systematic consistent national-level statistics. On the other hand, research addressing child abuse and violence against children is not missing in the Egyptian context.³⁸ Previous studies have the limitation of addressing few facets of violence; focusing mainly on physical violence. The majority of these studies address child labor, corporal punishment³⁹ or violence between children at school, and few address the issue of sexual abuse. Few studies have addressed the complete spectrum of child abuse, neglect, and exploitation.⁴⁰

³⁴ United Nations (1999). Consideration of Reports Submitted by State Parties under Article 44 of the Convention on the Rights of the Child – Egypt. Geneva, Switzerland: Office of the United Nations High Commissioner for Human Rights. CRC/65/Add.9.

³⁵ United Nations (2001). Concluding Observations of the Committee on the Rights of the Child – Egypt. Geneva, Switzerland: Office of the United Nations High Commissioner for Human Rights. CRC/C/15/Add.145.

³⁶ UNICEF (2002). *The Situation of Egyptian Children and Women: A rights-based analysis*. Cairo, Egypt: UNICEF Egypt Country Office.

³⁷ *ibid.*

³⁸ Due to the interest in the subject, contemporary to the UN study and the regional consultation, a bibliography of research on violence against children in the Arab region has been compiled within a study on violence against children. For more information, contact UNICEF ECO.

³⁹ Youssef, R. M., Attia, M. S., and Kamel, M. I. (1998). Children experiencing violence I: parental use of corporal punishment; II: prevalence and determinants of corporal punishment in schools, *Child Abuse and Neglect* 22(10): 959-473, 975-985; Zayed, A., Nasr, S., and Abdel-Aziz, S. (2004). *Punishment of Children between Family and School*, Cairo: National Center for Social and Criminological Research (In Arabic).

⁴⁰ UNICEF and Information and Decision Support Center for Egyptian Cabinet (2004). *Children in Six Districts of Upper Egypt, a Situation Analysis*.

1.2. Conceptual Framework

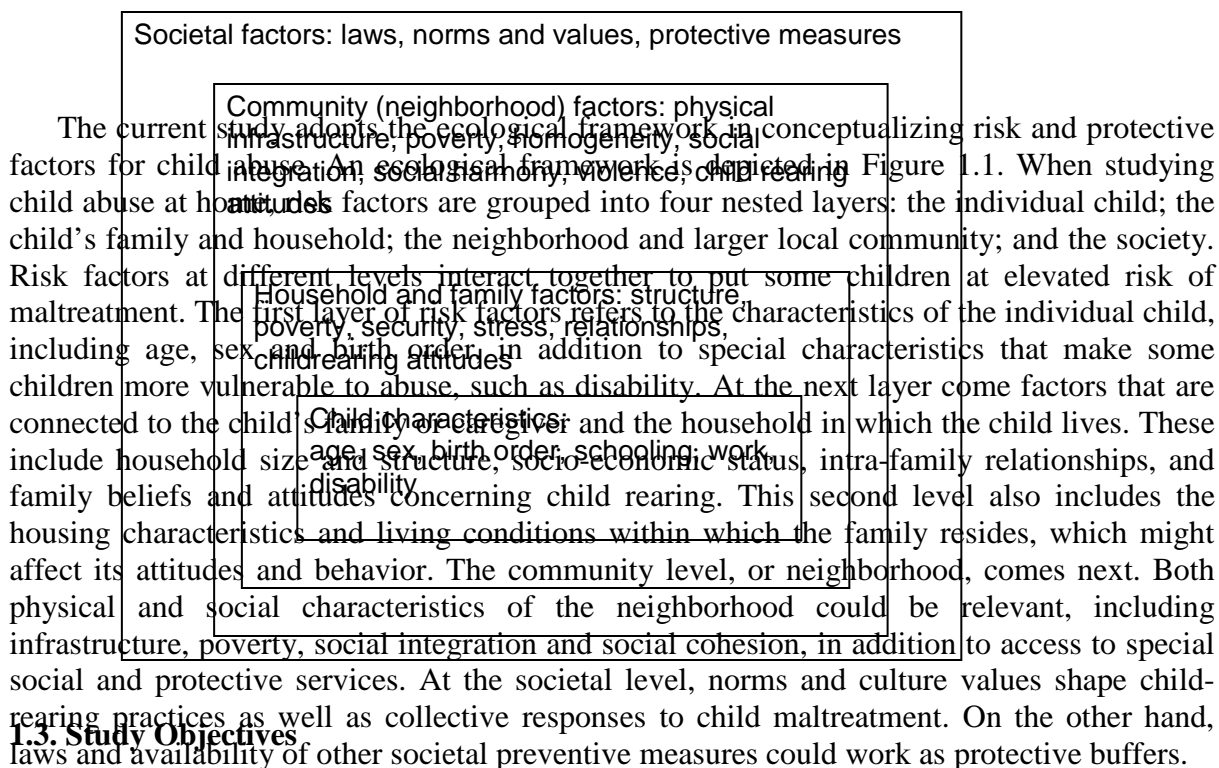
Current research on child development is distinguished from past research in its recognition of the importance of the community in which the child lives which is greater than the child's nuclear family. Child abuse is a product of a complicated set of factors. The ecological model⁴¹ is a currently well-established framework for explaining violence in general⁴². One of the earliest applications of the ecological model has been in an attempt to elucidate the risk factors associated with child abuse.⁴³

⁴¹ Bronfenbrenner, U. (1977). Toward an experimental ecology of human development. *American Psychologist*, 32: 513-531.

⁴² Krug, E. G., Dahlberg, L. L., Mercy, J. A., Zwi, A. B., and Lozano, R. (2002) *World Report on Violence and Health*. Geneva, Switzerland: World Health Organization.

⁴³ Garbarino, J. and Crouter, A. (1978). Defining the community context for parent-child relations: the correlates of child maltreatment. *Child Development*, 49: 604-16.

Figure 1.1. The ecological model for child abuse



1.3. Study Objectives

This study has the ultimate goal of providing scientific evidence that could help in guiding child protection policies in Egypt. One advantage of the ecological framework is its transferring a phenomenon such as child abuse from being perceived as isolated criminal or pathetic incidences to being viewed as one manifestation of underlying social problems that could have other, seemingly unrelated, symptoms. The main questions addressed by the study relate to identification and description of child abuse and assessing the societal context and how it could exacerbate child abusive practice with the protective environment framework. It takes a village to raise a child, but it also takes a village to abuse a child, or alternatively, to protect a child from being abused. In recognition of this view, the study attempts to conceptualize and measure child abuse as an integral part of child rearing and child development, which include the normal and healthy along with the aberrant and the gruesome. Accordingly, the two surveys implemented within the study are empirical survey on child environment and the study could not be restricted to the investigation of the selected areas. The field research component provides the empirical basis of the study, but the study endeavors to include a wider scope where the issue of child abuse on the national level is investigated.

The specific objectives of the study are:

1. Identifying and describing patterns of child abuse in the studied areas, and investigating the societal attitudes towards these different patterns.
2. Assessing the prevalence of physical and emotional abuse of children at home, at school, and at work in the selected areas.

3. Estimating the prevalence of female genital mutilation among female children and adolescents in the selected areas, and investigating the attitude towards performing it among parents and adolescents.
4. Investigating the magnitude of other types of child abuse, such as neglect, exploitation, and other sources of violence such as bullying and community violence in the studied areas.
5. Exploring the dynamics underlying child abuse and its precipitating forces in the studied areas.
6. Investigating some existing societal, legal and institutional mechanisms for protection of children from abuse at the local and national level.
7. Contributing to local and national policies for child protection, including developing indicators for monitoring and evaluation.

2. Study Design

This study is exploratory in nature. Although it is not the first study to address child abuse in Egypt, it is amongst the first to address the multi-dimensionality of the issue and to adopt an ecological framework. The study has several components, adopting both quantitative and qualitative approaches to data collection. The development of study design and analysis has been monitored and guided by a set of experts forming an Advisory Committee. In addition to representatives from UNICEF ECO and NCCM, the Advisory Committee includes experts in the field of child protection, researchers, governmental officials, and representatives of NGOs active in the field of child protection. In order to widen the study's perspective, experts have been selected from many disciplines, including sociology, psychology, psychiatry, criminology, anthropology, and statistics.

Study design has three components: a quantitative component, a qualitative component, and a policy analysis. The following three sections present the main objectives and design for each of the three components. The main characteristics of the studied areas are presented in the first section.

2.1. Quantitative Study

The quantitative part of the study includes household-based and school-based surveys. Together, the two surveys aim at providing baseline information on child abuse in twelve purposively selected areas in Cairo and Alexandria. Structured interviews using interviewer-administered questionnaires are used to identify, assess and describe the patterns and correlates of child abuse in the selected areas. For reasons explained in the first chapter, the two surveys are termed "Surveys on Child Nurture and Development".

Questionnaires

Three questionnaires are designed to assess several aspects of child abuse and to investigate risk and protective factors. In addition, they attempt to probe for evidence of other manifestations of abuse. A copy of each of the questionnaires is attached in Appendix A.

Adopting the ecological framework necessitates measuring several attributes of the child and of the child's family and community. Many of the variables in the adopted framework could be easily measured using one or two straightforward questions. Some constructs, however, are of multiple dimensions and could only be measured using multiple-item scales. To accommodate the exploratory nature of the study, several open questions are included. The development of the questionnaires is informed by a number of available international scales and measuring instruments. These are: World Bank and DHS Wealth Index; World Bank Integrated Questionnaire for Measuring Social Capital; Adult-Adolescent Parenting Inventory; Family Functioning Scale; parent-child version of Conflict Tactics Scale; family life, school, and peer modules of Adolescent Concerns Evaluation; Adolescent Coping Orientation for Problem Experiences. Two waves of pre-testing helped in the adaptation of these scales to the Egyptian context. Reliability and validity checks are used before the items of each of the developed indices are used in the analysis.

Two questionnaires are used in the household survey. The first, the household questionnaire, is applied to all households in the sample whether or not they include children. Data from childless households are used in the measurement of neighborhood attributes. In addition to the household roster, the questionnaire has sections addressing social relationships

and security in the neighborhood, child rearing beliefs and attitudes, family relationships, economic status, and housing characteristics. The second questionnaire, the household child questionnaire collects information about all resident children (aged 0-17 years) from their mothers or main caregivers. In addition to basic demographic information, it collects needed information to assess prevalence of child abuse. A section on education addresses enrollment and drop-out, corporal punishment at school, extra-curricula activities, private tutoring, absenteeism, and the interaction between the child's family and school. A section on work addresses some aspects of economical exploitation and child abuse in the workplace. Health care, accidents, disability, and female genital mutilation are investigated in a fourth section. A final section then investigates the occurrence of different abusive and non-abusive means of child discipline and collects information on the main discipliner, reactions to discipline and running away.

The schoolchild questionnaire used in the school survey attempts, through its seven sections, to collect data that mirror those collected in the household survey, for triangulation purpose. In addition, it collects information on unjustified physical and verbal abuse and on bullying. Multiple-item scales are used to measure a child's feelings towards his or her family, feelings towards school, teachers, and peers, and the child's approaches to problem solving.

Sampling

The study is implemented in partnership with six NGOs currently participating in the Child Protection Project (CPP), a pioneering project supported by UNICEF ECO. These NGOs work in five Districts in two Governorates: Helwan and El-Salam in Cairo and Karmouz, El-Labban, and Mina El-Basal in Alexandria. These correspond to three Education Directorates: Helwan and El-Salam in Cairo and West Alexandria in Alexandria.

The research team visited the six NGOs and conducted a rapid assessment of the areas served by them, identifying their boundaries and assessing the housing and street quality. The areas are classified accordingly to two classes, areas with poor quality living conditions and areas of better quality living conditions. Areas in the first class are characterized by degraded physical environment, narrow uneven streets, residential kiosks, and small crowded buildings made of poor building materials. The areas in the second class are better in terms of building quality and population density, and they have wider paved streets.

Following a suggestion from the Advisory Committee and in order to increase the representativeness of the study findings and to permit further monitoring of the CPP, it is decided to include a control sample of areas not served by the six NGOs. The control areas are selected in the same three Districts¹, from areas with better and with worse living conditions. Therefore, a stratified cluster sampling design is used, with two stratification levels, in addition to the Governorate. The first stratification level distinguishes between intervention areas (i.e. areas served by the CPP) and control areas (i.e. areas not served). The second stratification level distinguishes between areas with worse living conditions and areas with better living conditions. A total number of 12 sites are selected purposely to reflect the two levels of stratification and the five Districts. Eight of the selected sites are from

¹ Except for one control area; South El-Tebeen, which is adjacent and similar to low-standard areas in Helwan District but administratively belongs to another District.

intervention areas, four from each Governorate. Within each Governorate, two sites are representative of worse living conditions and two of better living conditions. Four control sites are selected, two from each Governorate. Within each Governorate, one control site is of worse living conditions and one is of better living conditions .

In order to provide reliable estimates for the prevalence of different forms of child abuse, it is decided to have a total sample of 1,200 households, divided equally among the 12 sites. A cluster design within each site is preferred in order to permit estimating parameters on the neighborhood level, to accommodate the ecological model. Therefore, each of the selected sites is divided into four segments of nearly equal size. A systematic sample of 25 households is selected from each segment. A quick count of households in each segment provides the total number of households in each segment, which is used to compute the sample weights.

For the school survey, a total number of 1,200 school children are chosen from 12 public primary and preparatory schools, four from each of the three Education Directorates (Helwan and El-Salam in Cairo and West Alexandria). The 12 schools are chosen purposely from the three Districts in order to correspond with the chosen sites for the household survey. Six of the sampled schools are primary and six are preparatory. Four of the schools are exclusively for males, four are exclusively for females, and four are mixed. The sample of school children is divided equally among the 12 schools and among male and female children. Within each school, a number of classes are selected randomly from the different forms (five and six forms in primary schools and the three forms in preparatory schools). Pupils are then selected randomly from class lists so that a sample of 100 school children is obtained from each school.

The response rate in the household survey is 94.6 percent, 1,268 households are contacted to secure a sample of 1,200 households. Response rate is higher in Alexandria (99.7 percent) than in Cairo (90.1 percent). Response rate in the school survey reached 100 percent. No school child refused to be interviewed.

Within the 1,200 sampled households, it is found that 883 households contain at least one resident child. Within these households, interviews are carried out with 908 caregivers reporting on 1,921 children (1,041 in Cairo and 880 in Alexandria, 959 boys and 962 girls). In the school survey, classes are chosen in each school in the sample, with an attempt to balance the final sample of children in terms of sex and education level. Children are randomly selected from the lists of the chosen classes.

The sampling design does not yield a self-weighting sample at any level of analysis. Weights are applied to generate estimates representative of the situation in the 12 chosen communities as well as the 12 chosen schools. Results presented in this report are based on weighted figures.

Characteristics of the studied neighborhoods

Table 2.1 compares the household sample of the Survey on Child Nurture and Development [SCND] with a representative sample of households in Cairo and Alexandria, which is a subset of the 2005 Egypt Demographic and Health Survey [EDHS]. Overall, the sampled SCND households resemble the non-rich households in the EDHS sample, which comprises about half the EDHS sample of Cairo and Alexandria. The sampled households in SCND seem to be more affluent and their heads tend to be more educated. In Alexandria, the

SCND sampled households tend to be smaller in size and reside in smaller dwellings, compared to the non-rich EDHS sample.

The physical characteristics of dwellings in the sampled neighborhoods vary significantly across the 12 localities. The contrast is sharpest in Alexandria. As Table 2.2 shows, the number of household members per room, which is an index for crowding, is lowest in Gheit El-Enab and highest in Massaken Miseilhi, El-Tobgia and Mawa El-Sayadeen. One in every six households in the SCND sample (unweighted figure, not shown in the table) lives in a non-apartment dwelling, such as a roof room, a room within an apartment, or a sole standing shack. The different locations vary remarkably in terms of prevalence of these non-standard living quarters. They are most common in Mawa El-Sayadeen and Massaken Miseilhi, where only around half of the households occupy apartments. In South El-Tebeen, Ezbat El-Walda, Arab Ghoneim, and El-Senousi, non-apartment dwellings are less common, comprising around one fifth of the households. Non-apartment housing is rare in the rest of localities. It is interesting to note that a high majority of housing units in Eshash El-Seka El-Hadeed (railway shacks) is classified as apartments. Buildings in that neighborhood are vertically stacked structures of poor building materials. Such vertical shacks are also common in El-Tobgia.

In-house utilities are considered a necessary condition for minimum privacy. Shared utilities are common in many of the sampled localities. Most notably, one in every two households in El-Tobgia and Massaken Miseilhi shares utilities with other households. One in every four households use shared utilities in Arab Ghoneim and Mawa-El-Sayadeen. Shared utilities are less prevalent, but still fairly common in the rest of localities, except for Ein Helwan, El Nahda and El-Salam, the three public housing projects used to shelter dislocated population.

Table 2.1. Characteristics of households and dwellings (SCND household survey), a comparison with EDHS 2005

| Characteristics | SCND 2006 | | EDHS 2005 | | Non-rich EDHS* | |
|--|-----------|------------|-----------|-------|----------------|-------|
| | Cairo | Alexandria | Cairo | Alex. | Cairo | Alex. |
| Sex of household head | | | | | | |
| Male | 83.9 | 80.0 | 84.2 | 85.8 | 82.1 | 82.6 |
| Female | 16.1 | 20.0 | 15.8 | 14.2 | 17.9 | 17.4 |
| Age of household head | | | | | | |
| < 35 | 13.5 | 13.8 | 16.1 | 13.8 | 19.0 | 15.6 |
| 35 – 49 | 38.6 | 34.9 | 36.5 | 35.8 | 34.7 | 32.5 |
| 50 + | 47.9 | 51.4 | 47.3 | 50.4 | 46.2 | 51.9 |
| Education of household head | | | | | | |
| None | 26.7 | 27.8 | 20.3 | 20.0 | 35.6 | 30.4 |
| Incomplete primary | 22.0 | 15.7 | 10.4 | 11.8 | 17.5 | 15.7 |
| Complete primary – some secondary | 20.4 | 26.9 | 15.0 | 26.4 | 21.5 | 30.8 |
| Complete secondary | 19.7 | 17.6 | 24.7 | 24.2 | 19.7 | 17.7 |
| Higher | 11.2 | 12.0 | 29.6 | 17.5 | 5.8 | 5.4 |
| Mean household size | 4.40 | 3.95 | 4.10 | 4.26 | 4.24 | 4.35 |
| Mean number of rooms per dwelling | 2.98 | 3.06 | 3.34 | 3.42 | 2.91 | 3.11 |
| Ownership of durable goods (% owing) | | | | | | |
| Satellite receiver | 50.0 | 7.4 | 29.8 | 18.7 | 2.8 | 2.9 |
| VCR | 21.1 | 19.3 | 30.2 | 15.5 | 2.2 | 0.8 |
| Automatic washing machine | 30.5 | 30.9 | 50.9 | 34.1 | 7.7 | 2.5 |
| Non-automatic washing machine | 82.3 | 86.2 | 63.3 | 71.4 | 88.1 | 92.3 |
| Electric fan | 95.9 | 71.8 | 95.0 | 85.0 | 90.2 | 75.8 |
| Water heater | 69.9 | 55.0 | 65.3 | 73.4 | 27.7 | 53.0 |
| % with shared toilet | 0.8 | 10.0 | 2.7 | 3.0 | 5.7 | 5.2 |
| Number of households | 600 | 600 | 1957 | 1511 | 867 | 843 |

* Excluding households classified in the highest quintile of wealth index

In terms of social characteristics, Table 2.3 reveals a picture of neighborhoods that are largely untrusting. Around 15 percent of respondents trust strangers. Trust of the local government employees and law enforcers is also low, while respondents are more likely to trust private and voluntary service providers. The noticeable exception from the latter general rule is the high percentage of respondents who distrust teachers acting in the role of private tutors. This is consistent with the fact that 37 percent of mothers whose children receive tutoring claim that this is due to teachers' pressure.

Table 2.2. Mean number of household members per room, percentage of non-apartment dwellings and percentage of dwellings with no private utilities (SCND household survey)

| Governorate and Location | Mean number of household members per room | Percentage of non-apartment housing units | Percentage of dwellings with no private utilities * |
|---------------------------------|--|--|--|
| Total | 1.50 | 2.6 | 3.2 |
| Cairo | 1.49 | 1.4 | 1.7 |
| Ezbat El-Walda | 1.56 | 23.8 | 15.0 |
| Arab Ghoneim | 1.70 | 14.5 | 23.6 |
| Ein Helwan | 1.85 | 3.7 | 0.0 |
| El-Nahda | 1.49 | 0.0 | 0.0 |
| South El-Tebeen | 1.72 | 23.1 | 15.4 |
| El-Salam | 1.45 | 0.0 | 0.0 |
| Alexandria | 1.59 | 14.7 | 18.3 |
| Mawa El-Sayadeen | 2.33 | 54.5 | 27.3 |
| El-Tobgia | 2.65 | 0.0 | 50.0 |
| El-Senousi | 1.75 | 17.6 | 17.6 |
| Gheit El-Enab | 1.21 | 7.8 | 14.1 |
| Eshash El-Seka El-Hadeed | 1.70 | 12.5 | 12.5 |
| Massaken Miseilhi | 2.95 | 40.0 | 40.0 |

* Dwellings with shared or no toilet and/or kitchen

Table 2.3. Lack of trust among adult respondents (SCND household survey)

| | Cairo | Alexandria | Total |
|---|--------------|-------------------|--------------|
| Percentage not trusting neighbors | 34.2 | 5.5 | 31.6 |
| Percentage not trusting religious leaders | 8.2 | 10.0 | 8.3 |
| Percentage not trusting hospital doctors | 61.2 | 22.7 | 57.6 |
| Percentage not trusting hospital nurses | 62.9 | 28.4 | 59.5 |
| Percentage not trusting private doctors | 6.2 | 17.4 | 7.2 |
| Percentage not trusting pharmacists | 8.0 | 17.3 | 8.9 |
| Percentage not trusting school teachers | 49.1 | 29.1 | 47.2 |
| Percentage not trusting tutors | 66.5 | 24.5 | 62.6 |
| Percentage not trusting police officers | 60.9 | 26.6 | 57.8 |
| Percentage not trusting local government officials | 62.1 | 32.7 | 59.4 |
| Percentage not trusting civil associations | 33.7 | 29.0 | 33.3 |
| Percentage not trusting strangers | 87.0 | 81.7 | 86.5 |
| Number of respondents | 600 | 600 | 1200 |

There are large differences between the studied localities in the level of trust (results not shown). For example, the percentage distrusting neighbors ranges from zero in Gheit El-Enab to 44 percent in El-Nahda and the percentage distrusting religious leaders ranges from 2 percent in El-Tobgia to 21 percent in El-Senousi. In all neighborhoods, however, respondents universally believe that trust at present is lower than it used to be among the previous generation. Lack of trust in neighbors seems to be associated with people's higher perception of economical variations within their neighborhoods (results not shown).

During in-depth interviews, social workers affiliated with the NGOs participating in the Child Protection Project are asked to describe the neighborhoods in which they work. Heterogeneity seems to be a characteristic of most areas. Residents are a mixture of different backgrounds, educational, social, and economical levels. Some of the residents are peaceful and some are quarrelsome. Many families are poor and reside in single rooms with shared bathrooms. But there are also better-off families. Some household heads are university graduates but many are illiterate. Some residents work in respectable secure jobs, some are unemployed or work intermittently and some are engaged in illegal activities. Thieves, drug-dealers, prostitutes, pimps, and addicts are not uncommon in the studied neighborhoods. Social disintegration and insecurity hence prevail. Community violence and spousal violence is common. Social workers also note that women are the bread-winners in many of the households in the studied areas. Some of these women are counted as household heads because they are divorced or widowed. But many others are *de facto* heads because they are deserted by their husbands or because the husband is unemployed or he refuses to assume the responsibility of supporting his family.

Characteristics of children in the studied neighborhoods

School enrolment for children in the sampled households is high but not universal. Among children 7-17 years old², only one percent has never gone to school. Current enrollment status for males and females is shown in Table 2.4 for three age groups corresponding roughly to the three educational stages: primary, preparatory, and secondary. The two first stages are obligatory basic education and should accommodate all children 6 to 14 years old. While net enrollment is above 95 percent in the primary stage, it decreases slightly in the preparatory stage especially among males. Enrollment further decreases in the third non-obligatory stage. Among children 15 to 17, one quarter has already left school. Dropout in secondary education is higher in Alexandria than in Cairo.

Parallel to the decrease in enrollment, child work rises with age. Among all children aged seven years or more in sampled households, 8.9 percent have ever worked (16.0% among boys and 1.7% among girls). As shown in Table 2.4, the percentage of ever-worked boys increases from less than 2 percent among boys younger than 12 years old to more than one third of boys aged 15 years at least. The percentage of ever-worked girls reaches 5 percent in the age group 15-17.

Although the pattern of percentages in Table 2.4 might give the impression that children, especially boys, are in either school or work, many children are doing both or neither. 42% of ever-worked children are currently enrolled in school. Among boys above six in the household sample, 7.2% are both enrolled in schools and economically active³

² Education data are gathered for all children 6+, but because the survey was conducted at the end of the school year, most 6 year old children were not yet eligible for school enrolment in the current year.

³ A child is considered economically active if he or she has ever worked, whether paid or not.

Table 2.4. Schooling and work among children 7-17 years old (SCND household survey)

| Governorate | Percentage currently in school | | Percentage ever worked | |
|-----------------------|--------------------------------|-------------|------------------------|------------|
| | Males | Females | Males | Females |
| Children 7-11 | | | | |
| Total | 96.7 | 99.6 | 1.5 | 0.0 |
| Cairo | 96.5 | 99.6 | 1.6 | 0.0 |
| Alexandria | 100 | 94.4 | 0.0 | 0.0 |
| Children 12-14 | | | | |
| Total | 85.1 | 96.0 | 14.2 | 1.3 |
| Cairo | 85.1 | 96.4 | 15.4 | 0.0 |
| Alexandria | 84.6 | 90.9 | 18.2 | 2.6 |
| Children 15-17 | | | | |
| Total | 75.2 | 80.6 | 36.1 | 5.2 |
| Cairo | 76.7 | 81.6 | 37.8 | 5.0 |
| Alexandria | 63.6 | 71.4 | 22.7 | 7.1 |

Table 2.5. Prevalence of work among school children (SCND school survey)

| Grade | Percentage ever worked | | | Percentage worked during current school year | | |
|-------------------|------------------------|--------|-------|--|--------|-------|
| | Male | Female | Total | Male | Female | Total |
| Fifth | 13.9 | 5.0 | 11.0 | 0.5 | 3.0 | 1.3 |
| Sixth | 20.2 | 6.0 | 10.7 | 4.0 | 3.0 | 3.3 |
| Seventh | 13.3 | 6.3 | 9.7 | 2.0 | 3.1 | 2.6 |
| Eighth | 46.9 | 11.3 | 20.2 | 6.3 | 5.2 | 5.4 |
| Ninth | 36.4 | 7.0 | 28.6 | 6.8 | 0.0 | 5.0 |
| Total | 21.0 | 6.8 | 13.9 | 3.0 | 3.2 | 3.1 |
| Cairo | 17.5 | 7.8 | 12.6 | 1.0 | 4.0 | 2.5 |
| Alexandria | 28.0 | 5.0 | 16.5 | 7.0 | 1.5 | 4.3 |

2.2. Qualitative Study

The qualitative part of the study is designed to provide an in-depth insight into the different dimensions of child abuse. Three types of qualitative data collection techniques are used: focus group discussions, individual interviews, and case studies. The choice of technique is based on the respondent's type. Individual interviews are used to collect information from providers of health and social services, focus group discussions are used with groups of parents, teachers, and children, while case studies are used with children identified to be in need for protection from abuse.

One of the main challenges of the qualitative study has been the design of the focus groups because of the large number of contrasting variables that are desired. According to the

study design, the qualitative study is to cover parents, teachers, health service providers, social workers, as well as children. It has been considered necessary to differentiate by gender among children, parents, and teachers. Because of the importance of child work, contrasting groups of working and non-working children is also essential. Among working children, it is also beneficial to distinguish between those served by the NGOs and those who are not. It is also deemed important to study groups from both Cairo and Alexandria. At least two groups of each type should be included in the study to enable pattern recognition.

In order to accommodate this large number of desired contrasts within a manageable number of groups, a Latin Square design is adopted. In contrast to a factorial design, in which all different dimensions of comparison are crossed together (in which case, eight basic structures are needed to cross three dimensions each having two levels), the Latin Square design permits comparing the different levels of each dimension without crossing them at each combination level of the other dimensions. This could result in substantial reduction in the number of basic structures, which keeps the conduct and analysis of the discussions manageable. The final design includes a total number of 42 groups: sixteen groups of parents; six groups of school children; six groups of working children supported by the CPP; four groups of working children not supported; four groups of school teachers; three social workers; and three physicians. Because of the scarce number of available respondents, it is decided to carry out individual interviews instead of focus group discussions with health and social providers. Within each of the other types, focus groups are divided equally between males and females. The age range for group members is restricted to 12-15 years for children, 35-45 for mothers and 40-55 for fathers.

Partner NGOs collaborated in assembling the needed groups and providing the meeting places. The NGOs' role was to recruit participants who fit pre-specified criteria, and most meetings were held in NGOs premises in Cairo and Alexandria. The number of participants in each group ranged from 6 to 9, with average and mode of 8 participants per focus group. Individual interviews with physicians and social workers were carried out in Alexandria.

Four topic guides are used for focus group discussion and individual interviews: for physicians; for teachers and social workers; for parents; and for children. The four topic guides have similar basic structures. After collecting background information, the session starts by discussing the meaning of child abuse and the different types of acts or omissions considered by the interviewees as manifestations of child abuse. Also discussed is interviewees' perception of specific types of maltreatment (physical, emotional, sexual, discrimination, neglect, exploitation, deprivation and female genital mutilation), and perception of the causes and consequences of maltreatment. The discussion ends by discussing knowledge, perception, and attitude towards different channels for child protection and potential solutions for the issue of child abuse. Specific topics are added to different guides as appropriate. For instance, providers of health, educational, and social services are asked about actual cases of child maltreatment they have encountered and the procedures used to identify and deal with instances of abuse. Parents and children are asked about their perception regarding child rights and responsibilities, channels available to children to express their emotional turmoil, and means of discipline at home and at school.

Four cases of children at risk are examined by a specialized psychiatrist. Three of the cases are children pre-identified as at risk by CPP. Two of the four cases are boys, one aged

10 and one 16, and two cases are girls, one aged 9 and one aged 15. In addition to interviewing the children, the psychiatrist has studied the reports prepared by the Child Protection Committee on the three cases supported by the CPP. Risk factors and psychological consequences of child abuse are investigated during the case study interviews. In particular, the psychiatrist tried in each of the illustrative cases to demonstrate the most significant risk factors of child abuse operating. However, highlighting individual risk factors does not mean that they are separate factors operating in a simple, clear or additive manner since child maltreatment is a multi-factorial phenomenon that involves different causes which interact to create a cycle of violence, usually within the family.

Psychiatric assessment of the case studies depends essentially on the interview method rather than questionnaires or rating scales. The reason for this is the nature and size of the sample under study since the psychiatrist is dealing with a limited number of children and their families with the aim of demonstrating the mechanisms operating in each case and their subsequent effects on the child. Hence, it is felt that in-depth interviewing is more appropriate than the application of rating scales which are better suited for screening of disturbed behavior in a large sample of children. However, the psychiatrist has used many of the questions included in some of the well known rating scales as probes for eliciting areas of suspected malfunctioning in the child

Although observation of the child and his or her interaction with the caregiver (the mother in the studied cases) is crucial in understanding of the cases presented, the psychiatrist has used the method of empathy so as to understand the feelings of the involved child. Generally speaking, empathy (ability to identify with the feelings of another) is less scientifically valid than the method of observation, yet it is very valuable from the psychological point of view for it enables the interviewer to understand how the patient feels.

Most of the cases presented are not drastic cases of child abuse with outcomes manifested in physical injuries or even bruises. The term best suited to describe the type of outcome encountered is *emotional injury* in response to rejection, isolation and an ignoring attitude which many parents resort to in dealing with their children. Such emotional injury is manifested in depression, aggression, scholastic underachievement or loss of self-esteem.

2.3. Policy Analysis

The conceptual framework presented in Chapter 1 speculates that risk and protection are both embedded into hierarchical layers of circumstances and contexts, starting from the individual and progressing into family, neighborhood, community, region, nation, and the globe. Thus, any local study of child situation cannot be complete without a wider examination of the national environment that could enhance – or threaten – the rights of children. The policy analysis part of the study is the tool to achieve that enlarged perspective. We are not using the term “policy analysis” here in its more technical form, as a systematic identification and evaluation of existent and potential policy alternatives in order to reach policy recommendations. Such a process is far beyond the current study. Rather, it is meant as a critical review of existing nation-level (governmental and nongovernmental) measures for dealing with the child abuse issue. Such measures include laws, rules, principles and

procedures for prevention, identification, treatment, rehabilitation and protection. The protective environment framework⁴ is adopted in the policy review.

A national environment conducive to child protection is characterized by five main components⁵:

1. Strong national commitment to child rights, expressed in a clear and integrative strategy.
2. Adequate legislative framework and its effective enforcement.
3. Appropriate public policy and programs for prevention, protection, and rehabilitation.
4. Effective mechanisms for monitoring, identification, and reporting.
5. Accessible and adequate services for protection, therapy, rehabilitation, and reintegration.

An efficient protective environment should be sensitive, integrated, child-centered, participatory, and non-discriminatory. An effective policy must also be embedded in a social and cultural setting responsive to child rights. A protective social system is characterized by:

1. Attitudes, beliefs, customs, and practices that respect child rights and are intolerant of any form of violence towards children.
2. Openness, participation, and accountability.
3. Involved societal mechanisms for child protection, through proactive approaches to problem solving and supportive social networks.
4. Knowledge and skill levels that guarantee the capacity of children, caregivers, and the larger community for identifying risks and providing protection.

The policy analysis is conducted through a number of in-depth interviews with key personnel in governmental and non-governmental bodies dealing with child abuse. In particular, interviews are carried out with key personnel at the Ministries of Social Solidarity; Manpower and Labor; and Education. Interviews are also conducted with leading personnel in the NCCM-sponsored child help line, and a number of NGOs interested in child rights issues and/or anti-violence initiatives. In addition to the interviews, in which procedures for identification and protection are discussed, relevant documents are obtained and analyzed.

⁴ UNICEF (2003). Medium-Term Strategic Plan 2002-2005, Child Protection: Progress Analysis and Achievement in 2003. UNICEF Programme Division. UNICEF website; Inter-Parliamentary Union and UNICEF (2004). *Child Protection: A Handbook for Parliamentarians*. Handbook for Parliamentarians no. 7. Switzerland: Inter-Parliamentary Union and UNICEF.

⁵ The components listed here are not literally identical to the list of elements embraced by UNICEF. The complete list of the protective environment includes eight components. Four of the original elements are subsumed here under what is called a protective social system. Such system is to be built through effective preventive policy and programs. National policies and programs are not explicitly included in the original list, presumably because they are implied by the national commitment.

3. Maltreatment of Children at Home

Homes and families are supposed to be the ultimate haven for most children. Many parents and other family members, however, subject children to unfair, harsh or degrading treatment that could interfere with the child's healthy development. It is in recognition of the general pattern as well as the many exceptions to it, that the CRC calls for the respect of "the responsibilities, rights, and duties of parents ... to provide, in a manner consistent with the evolving capacities of the child, appropriate directions and guidance" (Article 5), and prohibits the separation of children from their parents, except in cases where "such separation is necessary for the best interests of the child" (Article 9:1). In particular, and in spite of acknowledging the basic responsibilities of parents and legal guardians, the CRC authorizes governments to take "all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child." (Article 19:1)

In order to extend such protection to children, it is imperative to understand how children are treated within the boundaries of their homes. This chapter presents evidence of different types of child maltreatment at home in the studied areas. It includes five sections discussing, respectively, physical abuse, emotional abuse, neglect, exploitation including sexual exploitation, and female genital mutilation. Consistent with the adopted WHO definition of child maltreatment, acts are considered abusive depending on their potential impact rather than on the perception of the child, the parent, or the community.

3.1. Physical Maltreatment at Home

Corporal punishment

According to reports from interviewed caregivers, 51% of children had been corporally punished during the week preceding the survey. This percentage increased to 76% during the month preceding the survey and to 81% during the year before the survey. Table 3.1 presents prevalence rates within the 12 months preceding the survey for specific types of physical punishment for four age groups. Table 3.2 shows the corresponding distribution obtained from school children.

Many children are subjected to more than one type of punishment. During the week preceding the household survey, 10% of children were punished using two different types and 18% were punished using three or more types of punishment. During the month preceding survey, 16% were punished by two types, 12% by three different types and 19% by at least four types of punishment.

It should be noted that each of the main types investigated could include many different subtypes. For example hitting with a hard object entails a large number of different acts that could differ in their severity such as hitting with a belt, a hose, a shoe or slipper, a stick, etc.. In addition, severity is not only determined by the tool used or the part of body hit, but also by the force level used by the discipliner and by the fragility level of the child body parts. In addition, and typical for quantitative surveys, the SCND questionnaires failed to investigate about all possible types of corporal punishment (see Box 3.1).

According to caregivers' reports, mothers are the main punisher for children aged 5+ (76% for girls and 68% for boys). The role of mother as the main discipliner decreases slightly with the growing up of the child. Mothers are the main discipliner for 79% of children aged 5-8, for 71% of children aged 9-12, and for 66% of children aged 13-17. According to caregivers' reports, fathers are most active as discipliners for boys aged 13-17, among them 34% are punished by their fathers. Interestingly, interviewed school children claim that many fathers are likely to be the main discipliner. Among school boys, 36% are punished by their mothers and 53% by their fathers. Among girls, 60% are punished by mothers and 28% are punished by their fathers. The role of the older brother as a discipliner also appears in the reports of the school children, of whom 8% are punished mainly by their older brothers, with no gender differences in this proportion. Such role is insignificant according to caregivers' reports, reaching a maximum of 5% among boys in the age group 13-17, and is negligible in other sex and age groups.

Box 3.1. Corporal Punishment at Home: How Are Children Beaten?

In focus group discussions with parents and with children, several methods of corporal punishment are mentioned.

When hitting the child, parents use whatever tools are handy. For example, a tailor stabs with scissors or pinches with pins and a carpenter hits with a hammer or a screwdriver. Spilling hot water, hot oil, or throwing hot pans can occur if a mother loses her temper with a child while cooking. Slippers, shoes, belts, hoses and broom sticks are frequently used by parents. Hard objects, such as chairs, ashtrays, or telephone sets may also be thrown at the child. Lacking a hard object to beat the child with, parents may instead bump the child's head against the hard wall. Biting is also used, especially with girls. And boys are thrown on the floor and their parents step on their abdomens.

Boys are typically beaten harder, usually because they stand up to the beating. A mother may beat her boy until she gets exhausted and fathers can beat very harshly. When beating a child harshly, no part of the body is exempted including eyes and testicles. Harsh beating can result in swollen bodies or broken limbs.

Parents also develop elaborate methods to punish the child. For example, mothers mention two methods that involve stripping the child. In one variant, the child is stripped and placed on the roof in winter to be seen by neighbors. In the other variant, honey, which attracts flies, is spread over the stripped body before leaving the child under the sun for a long time.

Burning the child can also be an elaborate technique. Two types are distinguished: the less violent is done using a candle or a match stick and the more violent using a hot knife or spoon or using an iron. Electricity could also be used to administer pain. Burning is used to cause a mark in order to remind the child not to repeat the mistake. Burning young children's genitals is used to deal with nocturnal enuresis.

Findings from focus group discussions may help clarify the apparent inconsistency in reports on who beats the child. According to mothers, the child is mainly frightened by his or her father who beats indiscriminately. They believe that it is better for the child when mothers are the discipliner because they are less harsh. Mothers tend to threaten their children with their fathers or older brothers, knowing that children fear more those harsher discipliners. Such harsh discipline, even if not as frequent as the lenient discipline by their mothers, is more likely to be remembered and reported by children. School boys in focus group discussions frequently indicate their fear of their fathers, while mothers are portrayed as friendly figures. Working children say that mothers and fathers beat them. They mention fathers less frequently, yet in connection with more vigorous beating. The role of older brothers as harsh discipliner is stressed in reports by girls and is also mentioned by working boys. Stepfathers are also mentioned by working boys as harsh punishers.

School children were asked about the incidence of being beaten at home for no apparent mistake on their part. Only 5% of children report such incidences (8% among girls and 2% among boys). No significant difference is found between primary and preparatory level children. Girls who experience such unprovoked beating seem to have that experience on regular basis, while boys report it happening only occasionally. When asked about the abuser, fathers are mentioned by 30% (58% of boys and 23% of girls), mothers are mentioned by 44% (28% of boys and 48% of girls), and older brothers are mentioned by 30% (27% of boys and 31% of girls).

Parents participating in focus group discussions allude to the incidence of unprovoked assaults when they mention stress as a reason behind beating children. As a father put it, *“once I enter my home, children start asking for petty cash or for tutoring fees, I get too nervous if I don’t have such money.”* Working boys complain of fathers who vent their frustrations and anger on them.

Table 3.1. Percentages of children who had been subjected during the year before the survey to specific types of physical punishment at home (SCND household survey)

| Type of Physical Punishment | Child's Age | | | |
|---------------------------------------|-------------|------|------|-------|
| | 0-4 | 5-8 | 9-12 | 13-17 |
| Spanking | 63.6 | 90.2 | 77.4 | 46.0 |
| Shaking | 38.7 | 41.7 | 50.1 | 32.7 |
| Ear pinching | 14.2 | 26.9 | 33.3 | 15.4 |
| Body pinching | 17.4 | n.a. | n.a. | n.a. |
| Hair grabbing | n.a. | 29.8 | 23.5 | 18.8 |
| Face slapping | n.a. | 46.5 | 33.9 | 29.6 |
| Hitting with hard object ^a | n.a. | 51.0 | 46.5 | 27.9 |
| Knocking down | n.a. | 21.3 | 14.2 | 12.2 |
| Hard beating | n.a. | 12.0 | 14.4 | 6.5 |
| Kicking/punching | n.a. | 3.3 | 3.0 | 4.5 |
| Tying up | 0.5 | 4.0 | 6.0 | 1.8 |
| Knifing ^b | n.a. | 7.2 | 2.2 | 5.7 |
| Burning | 9.0 | 5.9 | 1.0 | 1.3 |
| Any physical punishment | 68.3 | 94.7 | 92.0 | 72.5 |
| Among males | 69.7 | 94.8 | 95.6 | 72.8 |
| Among females | 67.1 | 94.4 | 88.8 | 71.9 |

^a such as a belt or stick.

^b the inquiry was about threatening the child with a knife, pocketknife or scissors.

n.a. not inquired about

Table 3.2. Percentages of children who had been subjected during the year before survey to specific types of physical punishment at home (SCND school survey)

| Type of Physical Punishment | Primary | | Preparatory | |
|-----------------------------|---------|---------|-------------|---------|
| | Males | Females | Males | Females |
| Spanking | 55.5 | 46.5 | 57.4 | 53.9 |
| Shaking | 4.3 | 15.1 | 13.7 | 30.2 |
| Ear pinching | 8.4 | 10.7 | 10.9 | 12.8 |
| Hair grabbing | 5.3 | 18.9 | 9.3 | 22.5 |
| Face slapping | 58.6 | 34.3 | 53.7 | 26.3 |
| Hitting with hard object | 60.3 | 39.9 | 50.8 | 44.9 |
| Knocking down | 5.6 | 8.1 | 9.4 | 14.5 |
| Hard beating | 4.6 | 14.7 | 10.0 | 20.4 |
| Kicking/punching | 12.6 | 4.1 | 14.3 | 7.2 |
| Tying up | 3.7 | 2.8 | 4.1 | 0.9 |
| Knifing | 0.9 | 1.5 | 2.2 | 2.8 |
| Burning | 2.2 | 3.5 | 1.5 | 1.4 |
| Any physical punishment | 90.1 | 73.6 | 82.4 | 81.0 |

3.2. Verbal and Emotional Maltreatment at Home

Emotional abuse is harder to pinpoint than physical abuse. Any physical punishment of children is associated with emotional pressure on the child. Verbal and other means of discipline, as well as neglect, have their emotional impact. Most studies of child maltreatment focus on physical abuse, presumably due to the ease of pinpointing its occurrence and to measure its manifest outcomes. However, emotional abuse can have greater consequences since a harsh insensitive word can hurt more than a blow and psychological scars typically persist longer than physical ones.

Table 3.3 shows the prevalence of verbal and other aversive means of discipline that could be emotionally stressful. The survey inquired about threatening to kick the child out of the home. According to caregivers, 4.6% of children at least five years old have faced that threat during the year preceding the survey. Interestingly, no gender difference exists in this proportion. Focus group discussions with school boys indicate that children could be subjected to another emotionally stressful threat. When angry, some fathers threaten to leave home and desert their children. Since as many as 10% of children covered by the household survey live in female-headed households and 6% of interviewed school children whose fathers are alive do not reside with their fathers, one might infer that desertion by fathers is not such a far-fetched threat. Threats to deliver the child to the police or to a juvenile correction facility are also mentioned in focus group discussions with children. Working boys complain that their fathers threaten to kick them out of the house. One might think that for a working boy such a threat could be taken lightly since he, presumably, is financially independent. Their closeness to the street, however, has introduced working children to the horrors of living in the street and being deprived of family care. Working girls are also kicked out, especially when their parents find out that they have boyfriends, but they are typically sent to relatives for few days and then brought home again.

Many surveyed school children claim to be verbally abused by their family members with no provocation. In particular, 21% claim to be ever yelled at with no provocation from their side and 14% say that they are deeply hurt by insults from their family members. Both phenomena are much more common among girls (33% and 24%, respectively) than among boys (10% and 3%). Girls also tend to report such verbal abuse to occur on a regular basis and not just occasionally. Children in preparatory schools are slightly more likely to complain from unprovoked verbal assaults (23% compared with 17% among children in primary schools). Insults are experienced equally by the two groups of children, however. Mothers, fathers, and older brothers are all blamed for verbal abuse and insult. The comparison with incidences of physical abuse with no provocation (reported by only 5% of school children) shows that children consider verbal maltreatment by their parents and siblings to be less pardonable.

Table 3.3. Percentages of children who during the year before the survey were subjected to specific types of verbal and emotionally stressful punishment at home (SCND household survey)

| Type of verbal or emotionally stressful punishment | Child's Age | | | |
|--|-------------|------|------|-------|
| | 0-4 | 5-8 | 9-12 | 13-17 |
| Grounding or withdrawing privilege | n.a. | 37.4 | 54.0 | 38.2 |
| Time-out | n.a. | 50.5 | 56.2 | 56.7 |
| Threatening to hit | n.a. | 93.4 | 89.2 | 73.9 |
| Left to cry until exhaustion | 21.8 | n.a. | n.a. | n.a. |
| Forcing to eat | 18.4 | n.a. | n.a. | n.a. |
| Yelling | 72.6 | 93.1 | 91.2 | 83.5 |
| Cursing or swearing | n.a. | 78.5 | 70.0 | 65.5 |
| Insulting or name calling | n.a. | 72.4 | 73.7 | 72.3 |
| Kicking out or threatening to | n.a. | 5.7 | 2.0 | 6.2 |

n.a. not inquired about

From a set of 11 statements presented to school children to assess any problems in their relationship with their families, three underlying factors were identified using principal component analysis. Accordingly, three indices are constructed, through counting the number of negative answers to statements found to have high loadings on each of the three underlying factors. The three indices measure alienation, hostility, and pressure. Children scoring positively on any of these three indices show evidence of emotional stress at their homes. Overall, 40% of school children show some evidence of alienation, half of them (20% of all children) showing only mild evidence of alienation (one statement). Moderate alienation (2 or 3 statements) appears among 12% while 8% of children show strong evidence of alienation (at least half of the eight statements). Evidence of hostility was detected in 5% of school children while 18% showed evidence of pressure.

Female children are significantly more likely to show evidence of alienation, hostility, and pressure. Moderate and strong alienation as well as hostility tend to be higher in preparatory schools. There is a strong relationship between reports of insults and unprovoked verbal assaults and the child's tendency to show evidence of emotional stress manifested in alienation, pressure, and hostility (Table 3.4). Schoolgirls in focus group discussions complain of their subjection to verbal assaults that they consider to be evidence of parents' insensitivity. A girl says, "*they make me cry all the time, with or without a reason; they do not understand me or my needs; it upsets me.*" Insults in front of others are considered particularly humiliating. Working girls complain of being forced into engagement to men they do not like, especially to their relatives. They also complain of their parents constantly mentioning mistakes they once made so that they feel haunted by these past mistakes.

Table 3.4. Percentages of school children showing evidence of emotional stress according to their experience of unprovoked yelling or insult at home (SCND school survey)

| Evidence of stress and verbal abuse | Primary | | Preparatory | |
|--|----------------|----------------|--------------------|----------------|
| | Males | Females | Males | Females |
| Mild alienation | | | | |
| Verbal abuse | 25.0 | 25.3 | 18.3 | 22.2 |
| No verbal abuse | 14.1 | 36.0 | 11.6 | 28.8 |
| Moderate alienation | | | | |
| Verbal abuse | 16.7 | 16.0 | 5.0 | 30.2 |
| No verbal abuse | 3.5 | 15.0 | 2.5 | 14.6 |
| Strong alienation | | | | |
| Verbal abuse | 8.3 | 17.3 | 10.0 | 26.5 |
| No verbal abuse | 0.6 | 3.0 | 1.7 | 10.0 |
| Hostility | | | | |
| Verbal abuse | 8.3 | 8.0 | 5.0 | 12.1 |
| No verbal abuse | 0.6 | 5.0 | 0.8 | 9.2 |
| Pressure | | | | |
| Verbal abuse | 9.1 | 34.7 | 6.7 | 45.8 |
| No verbal abuse | 7.1 | 25.0 | 4.5 | 18.7 |

3.3. Neglect

Children depend on adults, especially parents, for providing them with their basic needs and guaranteeing their enjoyment of their rights. “Parents or, as the case may be, legal guardians, have the primary responsibility for the upbringing and development of the child. The best interests of the child will be their basic concern.” (CRC Article 18:1)

Neglect occurs when adults fail to assume their responsibilities in satisfying children’s needs, while exploitation occurs when adults use children to satisfy their own needs with no regard for the needs and rights of children. An adult-centered childrearing value, which considers the needs and desires of adults as superior to those of children, is consistent with both neglect and exploitation.

When probed about children’s needs, parents participating in focus group discussions stress that they are burdened by their children’s unaffordable needs. For them, the good child is the one who has few needs. Now and again, symptoms of an adult-centered culture appear when parents consistently talk about kids’ responsibilities and adults’ rights (see Box 3.2).

Box 3.2. The Adult-Centered Culture

In focus group discussions, parents tend to attribute neglect and exploitation to the lack of material resources. Though poverty and social exclusion may contribute to child maltreatment, abuse is mainly a manifestation of an adult-centered culture of childrearing.

Reproduction is for the sake of the parents, or as one mother puts it, *“we take care of our kids while they are young so that they take care of us when we are old.”* And it is the parents’ needs that are of supreme importance. Even succeeding in school is viewed by parents and by school children not as an advancement of the child’s prospects but as a reward to the efforts spent by the child’s parents.

When child work is discussed in mothers’ focus groups, evidence of the adult-centered culture appears strongly in the following ironic statement: *“when mothers send their girls to work, they are sacrificing their own needs for these girls to help in domestic chores.”*

Fathers frequently make statements exhibiting strong self-centeredness. While discussing causes for punishment, fathers make statements such as, *“I have to beat my son when he faults, otherwise I will not calm down”* and *“when the child fails in school, I feel sorry not for him but for myself because of the money I have spent on his schooling.”* A father even says that he beats his son because *“otherwise my wife would say I was not man enough.”*

Interviewed social workers affiliated with the Child Protection Project note a manifestation of the adult-centered culture when they observe that many parents in the areas they serve do not care for their children’s health, except for working children because they bring in money.

It should be noted, however, that some of the statements mentioned above, especially in relation to child’s performance at school are just figure of speech and may be evidence of identification with the child rather than self-centeredness. The adult-centered attitudes in childrearing is assessed systematically in the household survey (refer to section 6.2 in Chapter 6 for more details).

Physical neglect, i.e. depriving the child of essential needs of food, clothes, shelter, and security, is not assessed systematically in the field study. Amazingly, participants in focus group discussion have volunteered some evidence of physical neglect, along with how it is rationalized. A mother who is keeping her children unclean attributes her behavior to a desire to teach her children to be content. In her own words, *“if a child is kept clean, he will ask for new clothes, but if he never changes, he will not ask for new clothes”*. Another mother claims that *“the child would appreciate and take care of what he has only if he worked hard and was humiliated in order to get it”*.

Emotional neglect has also appeared, with a little probing, in fathers’ discussions. While discussing children’s needs, some fathers stress that they spend little time with their kids, and that supporting them financially is the maximum their children should expect. A father explains that *“boys till the age of 15 and girls till they get married are their mothers’ responsibility.”* Fathers praise their girls for taking care of their parents and accuse their boys of being selfish and ruthless – ironically missing the resemblance between themselves and

their boys. School boys in focus group discussions complain of the emotional neglect they suffer when their parents dismiss them and refuse to listen to them.

Interestingly, school boys seem to recognize that lack of material resources is less degrading than parents' negligent attitudes. Deprivation is defined by school boys as missing parents' care. As a child put it, "*poverty is not deprivation; a good father is better than money.*" School girls, on the other hand, mostly perceive deprivation as lack of material resources. When discussing what is meant by neglect, both boys and girls mention lack of supervision.

Neglect and physical abuse are sometimes considered as the opposite poles of the continuum of child rearing practices. Some participants in focus group discussions express the view that it is negligent to fail to punish children. This view is misleading, however. As will be seen in Chapter 6, physical abuse usually stems from a focus on adults' needs and desires rather than a care for children benefit, and, as such, it manifests violent neglect. Children who are subjected to neglect are hence likely to be the same children who are physically abused. Parental neglect can also subject children to physical abuse in other settings. Neglected children are more subjected to violence from teachers, because they are low achievers, because they are untidy, because they do not pay school or tutoring fees, or simply because they lack the parental defense against abuse. Neglected children are also more subjected to the risks of the street. The following tragic story, related by a mother participating in a focus group discussion is revealing:

"A child was treated badly by his father, who used to beat him and deprive him of pocket money. The son was also treated badly at school, always being beaten and insulted by teachers. As a result, the child escaped from school for 29 days. Spending his time on the street with no money, the child was subjected to sexual molestation in exchange for money, suffered from bleeding and was hospitalized."

Two facets of parental neglect are investigated systematically in the two surveys. These are neglect of the education and scholastic needs of the child and neglect of the child's needs for health care services. The following two subsections present the main findings.

Educational neglect

Enrollment and Drop-out

The household survey documents relatively high investment in child education. Among children of 8 years at least, only 0.4% have never been enrolled in school, according to caregivers' reports. The main reasons¹ given by caregivers are: high cost of education (75%); the need for child's work (25%); and a belief that education has no value (25%).

Among children of 6-14 years who ever enrolled in school, 2.6% dropped out. The reasons given are failure at school (48%), the child's desire to quit school (43%), the high cost of education and the need for the child to work (4%). Around 80% of these drop-outs happened in the primary stage, most usually after completing the fourth grade (36% of all drop-outs). Among all children younger than 18 who enrolled at school, 5% left before completing basic education (grade 9). Girls represent 60% of children of 8+ that never enrolled in school but only 26% of children younger than 15 who dropped out.

¹ It was allowed to mention more than one reason; hence the sum of the percentages exceeds 100%.

It seems that most drop-outs are caused by pushing factors at school combined with family poverty and low appreciation of the value of education (Box 3.3). In focus group discussions with working children, drop-out is attributed not to a family need for child work, but rather to maltreatment at school. According to a working boy, his father made him drop out when the child returned home with a swollen face from being beaten by the teacher. Some working boys who regret leaving school, however, blame their parents for not helping them enough with money and effort to keep them at school. Teachers, on the other hand, blame parents' poverty and illiteracy which result in negligence and carelessness about children's scholastic achievement, especially for girls. They also blame child work which interferes with study or deprives children from rest and play during school holidays. They play during the school year instead.

Box 3.3. Educational Neglect between Home and School

Dropping-out of school cannot be simply blamed on parents. According to fathers, maltreatment at school is a main reason for drop-out, in addition to teachers' neglect and lack of supervision, especially with over-crowded classes. In the SCND household survey, maltreatment at school is mentioned as a reason in 21% of drop-out cases. Maltreatment at school is almost never mentioned alone. Failure or high cost are other reasons given. Both failure and cost are related to maltreatment. Failure triggers maltreatment, and maltreatment makes children resentful of school, which affects their scholastic achievement. Children with low scholastic aptitude are forced into dropping out or succeeding via cheating and corruption. Tutoring seems to be the magic cure – it alleviates maltreatment and prevents failure. But when the cost of tutoring exceeds family resources, drop-out occurs. In such case drop-out could be blamed on failure, high cost, or maltreatment. A hidden culprit, however, is private tutoring (see section 4.3 in the next chapter).

Sometimes, school reaction exacerbates the effect of home neglect. A mother in a focus group discussion mentions that *“when a teacher summons a child's parent and the parent does not show up, the teacher mocks the child in front of other kids by saying that the child's parents do not care”*. There are other reports about mocking and humiliating children whose parents could not afford to pay fees of the school-based tutoring groups or other fees requested of the child.

Absence

Among children enrolled in school in the current school year, 34% have missed at least five school days including 2% who have missed almost the whole school year. The almost complete absence is entirely a male phenomenon, and is attributed to the child's boredom with school or to his desire to sleep in. Among girls, 37% have missed school for five days or more, compared to 30% of boys (including the 4% who have almost never gone to school). Illness is the reason most mentioned for frequent absence (52%) followed by boredom and desire to sleep in (42%). In only 19% of the cases of frequent absence has the school inquired about the reason. Even when the boy missed almost all the school year, the school inquired in

only 52% of the cases, according to caregivers' reports. Adverse educational outcome is indeed a product of neglect from parents as well as from schools (Box 3.3).

Evidence of educational neglect appears in focus group discussions when fathers say that *"if children do not like school, they would be better off finding a vocation or staying at home to help their parents"*. Fathers justify their indifference towards child education by mentioning the high unemployment rate among the educated such that learning a skill guarantees better prospects for their boys. Education is also perceived as pointless for girls who *"better stay at home and help their mothers"*, in the opinion of fathers.

Extra-curricular activities

Participation in school trips and sport activities is uncommon in the studied communities. Among children enrolled in school, only 36% participate in such activities. Unexpectedly, no gender differential is found, since the proportion participating in extra-curricular activities is 39% among boys and 33% among girls. When asked about the reason for lack of participation, many claim fear of danger as the main reason (54%), but high cost is also frequently mentioned (36%). Similar patterns are found for boys and girls. Fear of risks is given as the main reason for 52% of boys and 56% of girls, and high cost is the main reason for 39% of boys and 34% of girls. Regrettably, the survey does not provide information on the kinds of risks feared by caregivers.

Interaction with school

Parents' interest in their children's schooling seems to be reasonably high. A member of the child's family has gone to the school to inquire about the child's performance in 66% of the cases (61% for boys and 71% for girls), and has met the school social worker in 15% of the cases (20% for boys and 10% for girls). Teachers participating in focus group discussions, however, note that parents go to school not to monitor their children's scholastic progress but merely to investigate why their children are punished.

In 4% of the cases when child's school was visited (5% among girls and 2% among boys), the parent was told that the child had a problem and needed special treatment. In almost all cases involving boys, parents had agreed with the school authorities and took action to solve the child's problem. In cases involving girls, however, parents rejected the school's assessment in 14% of the cases, or failed to take any action though agreeing with the school's assessment (62%), and took action in only 24% of the problematic cases of their girls. When parents who have not gone through that experience are asked about their likely reaction in such case, as many as 85% claim they would agree with the school assessment and take action to solve the problem, with no gender differential apparent. A relatively high proportion of caregivers (12%), however, expect to disagree with the school, slightly more likely for their girls (13% compared to 10% for boys). This is evidence of low trust in schools. Teachers in group discussions complain of such mistrust and lack of cooperation between parents and teachers (see Box 3.4).

Box 3.4. Home and School: Cooperation or Antagonism

In all parents' and children's focus group discussions, whenever the issues of schools, teachers, or children's perils are mentioned, private and school-based group tutoring is the quickest issue to surface. Many, indeed, believe that most children are in need of extra tutoring to compensate for their parents' inability to help them study. However, they perceive that school teachers take advantage of this need. How much of the 'tutoring exploitation' syndrome is true and how much is exaggeration is hard to tell. When one mother tries to defend teachers through telling a story of an honest teacher who said that her daughter needed no tutoring, another group participant retorted "*he just thought your daughter was a hopeless case!*"

Evidence of distrust in schools also appears in complaints from parents such as: "*school authorities are insensitive to our problems; they threaten to report us to the police if we enter the school*", "*how are children supposed to love school when teachers beat them, force them to take private lessons and fail to do their work?*" or "*I see my child's teachers sitting at the coffee shop next to the school during school days, they leave the children alone and go to have their breakfast*".

This picture of a school and home at odds, however, contradicts other evidence that parents do entrust their children to teachers, at least when it comes to discipline. Concurrent with all the complaints about maltreatment, corruption, and negligence, one hears comments like "*I once went to a teacher and asked him to beat my daughter hard because she is naughty, but he refused*". "*Before the ban on corporal punishment in schools, children used to respect their teachers, now the teacher has lost his right to discipline pupils*".

School children also have mixed feelings towards their teachers. On the one hand, they complain about what they perceive as teachers' corruption. One boy says "*our teacher collects one pound from each child presumably for school decoration, but she takes the money for herself and there is no decoration*." A girl says that marks are traded with money, "*pay 3 pounds for a study booklet, and you get 3 marks*." Children say that teachers favor children taking private tutoring with easier questions and better marks. On the other hand, children, especially girls, express their trust in their teachers to whom they can talk about their problems.

The picture from the teacher's perspective is no less confusing. On the one hand, teachers complain that parents distrust them, encourage children to be disrespectful, and they may attack, beat, or report them to the police for minor or false accusations of child maltreatment. On the other hand, many of the stories told by teachers portray a picture of parents who, "*resort to a stern teacher to physically discipline their children*". A sick father who is beaten by his son reported the incidents to a teacher to help him control his aggressive child. Teachers largely seem to agree that private tutoring in schools is connected to corruption. From teachers, one hears statements like "*private lessons give the kid privilege to skip school*". "*A teacher gives kids attending tutoring lessons answers to exams*". "*Some teachers do not care whether the child attends tutoring classes or not as long as the fees are paid*". They also have many stories to tell about harsh beating and verbal humiliation of children by teachers. Still, they feel helplessly squeezed between disrespectful children, aggressive parents, uncooperative social workers, and authoritative headmasters. And they bitterly complain of lack of appreciation.

It is of more interest as an indication of child neglect to note the proportion of parents who fail to take any action to solve the child's problem, even while agreeing with the school assessment. Among parents asked hypothetically, 4% admit their expectation to do nothing. In contrast to parents who have gone through the actual situation, parents expect to be more inactive for boys (5%) than for girls (3%). Among caregivers who have agreed or expect to agree with the school assessment, 5% admitted to carelessness in handling the situation. There is no gender difference in that overall percentage.

When asked about handling a problem the child might face at school, 89% of caregivers say that parents would go to the school if the child had a problem, while 3% say the child would complain to the school principal or to a teacher, and 8% say the child would solve his or her own problem. When parents go to school different scenarios could unfold, according to participants in parents' focus group discussions. Parents and school might work together to solve the problem; the school authority might respond passively and dismiss parents' complaints; or parents might act violently towards school teachers.

Health neglect

Health care practices

The household survey shows little evidence of health neglect. If anything, utilization of health care services seems to be too high. Among children under 18 years, only 3% had no health problems during the previous year while 92% had been to a physician. Not all health problems, however, are referred to physicians. Among all children, 59% had been given medication without reference to a doctor during the past 12 months. Sometimes the medication is advised by a pharmacist (24%), but usually it is known from previous medical consultation. Only 0.2% of children under 18 are not treated at all for manifest health problems.

Accidents

During the year preceding the survey, accidents happened to 11% of children under 18 (14% of boys and 8% of girls). Three quarters of accidents were referred to a physician (68% among boys, and 86% among girls). Most accidents happened to girls at home (65%) while only 23% of accidents happening to boys happened at homes. In contrast, 60% of accidents to boys happened in the street, compared to 19% among girls. Around 15% of all accidents happened at school (16% for boys and 12% for girls). Complications occurred in 31% of the accidents (35% among boys and 23% among girls). However, in 9% of cases of the accident resulting in complications the child was not referred to a doctor. This is more common among boys (12%) than among girls (3%). Most of such accidents happened in the street (75%), but some happened at home (23%).

Health practices connected to female genital mutilation

Only 65% of circumcised school girls had the operation performed by a physician, 8% by a trained nurse or midwife, and 25% were operated on by a traditional birth attendant. The operation occurred at home in 63% of the cases, and in a hospital or a private clinic in 36% of the cases. According to caregivers' reports, 62% of circumcisions were performed by a physician, 30% by a trained nurse or midwife, and less than 9% by a traditional birth attendant. Half of the operations occurred at homes and the other half occurred in private clinics. Among circumcised girls, less than 2% suffered medical complications (bleeding in

almost all cases), and all cases were treated by a physician. Circumcised school girls, however, paint a bleaker picture of untreated complications in which 9% develop complications and less than half these complications are treated.

3.4. Exploitation at Home

Exploitation is the use of children for benefit of adults in a way that is detrimental to the child's healthy development.

Exploitation is intertwined with physical and emotional abuse of children and with neglect. The relationship with neglect is straightforward because the adult-centeredness is overt in both. Child labor, for example, is related to school drop-out and educational neglect. The relationship with abuse is less straightforward. Fathers in focus group discussions mention refusal to work or to share work remuneration with their parents among faults justifying physical punishment. When children, especially girls, are assigned many household chores, they are more at risk of making mistakes that would anger their parents and result in physical or verbal abuse. For example, a father in a group discussion says that he beats his daughter when "*she does not carry her younger sister properly*".

Economic exploitation

According to caregivers' reports, only 8% of children 6+ have ever worked (15% of males and 2% of females). Child work is essentially a male phenomenon. Few children work before age 12. Only 3% of children in the age group 9-12 have ever worked (6% of males and 0.2% of females), compared to 18% in the age group 13-17 (31% of males and 4% of females). Among school children, 15% have ever worked (27% of males and 6% of females). Work participation rises quickly with age, from 8% in primary schools (11% of males and 5% of females) to 17% in preparatory schools (28% of males and 7% of females).

Among school children who have ever worked, 18% work within the current school year while 62% have worked during the previous school recess but not during the current school year. During their last week of work, ever-worked school children work on average more than five days and 53 hours per week. As many as 18% of working children work in the street. Most working children work in stores and shops (35%) followed by workshops (18%) and factories (14%). Only 10% of working children work at homes. One of every three working children is employed by a family member, while two thirds work for strangers. Almost one in every five (19%) of working school children is not paid for work (49% of children working for family members and only 4% of children working for non-relatives).

Among working school children, 81% say that they are satisfied with their current or most recent work, 10% say that they prefer other work, while 9% prefer not to work at all. These percentages differ between males and females. Among working females, 25% would rather not to work at all compared to 4% of working boys. A preference for non-work is also higher among primary school children (17%) compared to preparatory school children (7%). When asked about specific problems they might have encountered due to their work, 12% of children report conflict between work and study, 10% report absence from school, while 50% complain that work prevents them from playing and having fun. Many working children complain from the work being too stressful, physically (44%) or emotionally (20%). Table 3.5 compares across sex and education level.

Table 3.5. Percentages of working school children complaining of specific work-related problems (SCND school survey)

| | Conflicts with study | Conflicts with school attendance | Physically tiring | Stressful / embarrassing | Conflicts with play/leisure |
|--------------------|-----------------------------|---|--------------------------|---------------------------------|------------------------------------|
| Primary | | | | | |
| Males | 4.5 | 2.2 | 55.0 | 20.5 | 59.3 |
| Females | 33.6 | 40.1 | 48.3 | 48.9 | 33.6 |
| Preparatory | | | | | |
| Males | 8.1 | 3.7 | 35.7 | 8.2 | 48.6 |
| Females | 27.4 | 29.1 | 69.7 | 59.1 | 52.3 |

Working girls are more prone to adverse outcomes. Girls' work is typically not more stressful physically or time consuming than boys' work, but girls are more likely to work during the school year (40% compared to 11% among boys). Among ever-worked school girls, interference with study is mentioned by 29%, interference with school attendance was mentioned by 32%, interference with play and having fun mentioned by 48%, physical stress mentioned by 65%, and emotional stress by 57%. The corresponding percentages among boys are, respectively, 8%, 4%, 50%, 39%, and 10%.

Some mothers participating in focus group discussions insist that boys should work even if they hate the work. For them, it is the child's responsibility to provide for his own needs and to help his parents financially to take care of younger siblings. Fathers insist that learning a vocation could be more beneficial to the child's future than finishing school. Work is also perceived by parents as protecting boys from the risk of street and bad peer influence. Gaining financial independence and assuming responsibility at young age is seen as necessary for the development of boys' personality. Some, but not all, parents also see benefits for girls as long as they work in a protective environment, since their earnings would help them preparing for marriage costs.

Nevertheless, many parents consider child work as deprivation and exploitation when children are forced to leave school for work, work in humiliating conditions, or are deprived of their wages. Some fathers, however, claim that their boys drop out of school and start working willingly. Some also perceive that boys can refuse to work to help support their families, though they consider this as a selfish attitude. In focus group discussions among working boys who receive social benefits from NGOs, boys confirm that it was their fault to stop studying and drop out of school and they express regret for leaving school.

Many school boys participating in focus group discussions look favorably at work and see it as not just a means to get money but also as a vent to their energies and a useful way to spend their leisure time. According to these boys, work is considered exploitive only when the child works at an early age, is overworked, underpaid, exposed to insults, forced to quit school, or develop bad manners and habits such as smoking. Many working school boys talk proudly about their learning skills that could help them if they fail in their education. A child working with his father tells the group that he has even refused to take the salary offered to him. Some children, however, consider work as degradation because schoolmates would mock and insult working children and look down on them. Working boys consider work

exploitive only when they are denied their earnings and when they do not feel appreciated. When children feel unappreciated and exploited by their parents, work loses its reward (see Box 3.5). As one boy puts it, *“I return home tired after a long day’s work but no one feels for me or appreciates it; I feel neglected and it makes me sad.”*

Working girls also look favorably on work. They perceive it as teaching them important life skills and developing their personality. Work also gives girls a rare opportunity to go outside their homes and to spend time with their friends. In addition, they can use their earnings to buy what they need and to save for marriage costs. Facing rumors as a result of their going out and the potential for subjection to harassment, however, detracts from the value of the girls’ work.

Box 3.5. Work, Abuse, Violence, and Self-Esteem – Case Study

Work, especially for older boys, is typically regarded as a builder of personality and a booster of self-esteem. However, when working children lack the support and appreciation of their parents, work can turn into a damaging experience. The following case study makes the point.

K.A. is a 16 years old, a bright male student who presents himself to the psychiatrist with tearful eyes and complains of being very nervous and irritable. He laments his bad luck in having a negligent, selfish, unemployed, drug-abusing father. The father even borrows money from neighbors to get his drug supply and it is K.A.’s mother who works and provides for the family. It is evident that K.A., as a teenager, lacks a positive self image; always viewing himself as inferior to his schoolmates. He is also torn between his high moral standards and his need for money. He tells the psychiatrist that he works in a petrol station where his colleagues encourage petty stealing from the station’s clients through inadequate fueling which passes unnoticed. As regards education, given the difficult circumstances, K.A. is considered a good achiever being enrolled in the final year of secondary commercial school.

K.A. reports that his angry mood and rapid loss of temper at any minor frustration have recently escalated very much and that he is given to tears much too often.

According to the psychiatrist’s appraisal, K.A. does not enjoy the positive appraisal of his father which is so much needed by youngsters seeking to build a healthy independent self image. Instead his father communicates with aggression and sometimes hits his son.

Whether K.A.’s sensitivity and intolerance of frustration reflect a genetic predisposition (he has an uncle who was hospitalized for treatment of depression) or are a consequence of adverse circumstances or both, the boy has the intelligence, resilience, and support of his mother which seems to have counteracted his severe sense of inferiority and failure.

K.A. is diagnosed as having a major depression and is given a mild antidepressant drug with recommendations to attend psychotherapy to boost his self-esteem.

Household chores

Like economic work, participation in household chores, though essentially a positive experience under the right circumstances, can be harmful to children when it conflicts with their best interests.

As many as 91% of school children (93% of boys and 90% of girls) report that they sometimes help in household chores. Females are more burdened with such household chores than males. Male children mostly help in shopping for household supplies (98%), but they also help with house cleaning (63%). Females mainly help in house cleaning (98%), but they also contribute in many other activities like shopping for supplies (61%), cooking (29%), and taking care of younger siblings (16%). On average, school boys spend 4.4 hours per week on household chores (with a range from less than an hour to an average of 3 hours per day), while school girls spend 7.7 hours per week (with range extending to as much as 7 hours per day).

Only 6% of children helping at home complain spontaneously from household tasks (4% of boys and 9% of girls). However, when discussing injustice and its manifestations, school boys in focus group discussions mentioned being forced to go to the market after a long day of school and tutoring as one of their complaints. In addition, when survey respondents are probed for specific conflicts or burdens, 12% report conflict with study (3% of boys, 22% of girls), 6% reported conflict with school attendance (1% of boys, 11% of girls), 11% reported conflict with play and leisure (4% of boys, 18% of girls), 11% reported physical stress (3% of boys, 19% of girls), and 5% reported emotional stress (2% of boys, 9% of girls).

Parents participating in focus group discussions agree that girls are more burdened than boys with domestic chores. According to mothers, children of working mothers are especially assigned much domestic work in addition to helping their mothers in their work, e.g. selling vegetables. No significant difference between children of working and non-working mothers is found in the school survey data, however. When probed, mothers do not accept the notion that their children are overburdened or deprived from having leisure time. This seems to result from a view that kids' responsibility is to study, work, and help at household chores. It is believed that enjoying leisure time is not what children in poor families are supposed to do. On the other hand, fathers show sympathy for their girls whom they consider overburdened with household chores in contrast to boys who are considered useless as well as merciless.

The burden of domestic chores has made a constant appearance during the discussions of girl groups. Describing her day, a schoolgirl says, "*after returning from school, I clean the house, cook and attend to my father's needs; all household duties are given to me.*" In addition to managing their own study, some girls help their younger siblings with their lessons. Working outside the house does not excuse the child from household chores. A working girl describes her day as, "*going to work from 7 am to 4 pm, going home to cook and clean because my mother is sick, then returning to work from 7 to 11 pm.*" Most working girls combine work, school, and domestic duties, as a schoolgirl says, "*after school I clean the house and then go open the shop; I return home at 10 pm.*" In general, girls do not object to doing domestic chores *per se*; they want to be helpful at home, they feel they are acquiring proficiency in work that will be their responsibility when eventually they get married, and they consider domestic chores as a useful way to spend their leisure time. Some girls even vent their stress and anger through vigorous household work. Many girls, however, feel that they are overburdened. As a working girl says, "*we want to help, but it should have limits.*"

Paradoxically though understandably, parents, children, and teachers all recognize the domestic burden girls carry, yet they never mention it among facets of child exploitation in contrast to child economic work which is always the first facet they identify. It seems that female unpaid domestic work is destined to be devalued.

Sexual exploitation

Sexual abuse of children is the most difficult subject to investigate. Worldwide, research on child sexual abuse is done either retrospectively through asking adults about their childhood experiences or through case-based research investigating reported cases. Current status, population-based surveys, such as the two SCND surveys are not suitable for a study of sexual abuse of children. Therefore, information on child exposure to sexual abuse is only gathered through focus group discussions and in-depth interviews.

When the issue of sexual abuse is discussed, some parents deny its occurrence while others discuss it freely and have some gossip-like stories to relate, including incest, rape by strangers, and consent sexual affairs. Among the group from Mawa el-Sayadeen, stories on sexual exploitation of young boys seem notorious. Children in some groups also mention sexual exploitation of boys. A schoolboy relates a story of a mother who encourages her son into prostitution. Interviewed school social workers also tell stories about men sexually exploiting young boys and about a girl who is used by her father to bring him young girls to molest. NGO social workers also know many cases of incest and sexual exploitation of girls and boys.

When probed on their perception regarding the precipitating factor of sexual abuse, mothers mention poverty that could make children susceptible to sexual seduction in exchange of money. Exposure to sexually explicit material on television, especially satellite channels, is also blamed. Fathers claim that children would desire to imitate what they watch on television, and a mother relates a story of brother and sister who have engaged in an incestuous sexual relationship as a result of watching a sexually explicit movie. The lack of leisure facilities is mentioned by fathers as the underlying cause since it forces children to spend their time watching television.

Crowding, according to parents and teachers, exacerbates the problem when children sleep in the same room with their parents, or when brothers and sisters share the same bed. Some stories from mothers indicate how children are affected by the forced closeness. One mother mentions that her 13 year old son refuses to sleep in the same room with his sisters and instead sleeps on the floor in the hallway. Another mother describes the situation in her household that consists of herself, her husband, and two sons occupying one room with three beds. The father sleeps on one bed, the older son on another, and the mother shares the third bed with the younger son. The mother reports that her older son forbids his younger brother from hugging his mother in bed. Apparently, for the older son, hugging has strong sexual connotations which developed as a result of his close proximity to his parents' private life.

The stigma associated with sexual abuse exacerbates its negative impact on the child. Relating a case of a hospitalized boy who has been molested by other boys, a group participant mentions that people keep reminding the child of the incidents he has experienced. In different group discussions, harassed girls are blamed as being immodest or loose. A working girl relates that she and some friends were once harassed by a group of boys at the beach and they had a fight. When policemen intervened to stop the fight, they blamed the girls and accused them of being willingly to accompany the boys.

3.5. Female Genital Mutilation

Estimating the prevalence

Female circumcision used to be almost universal in Egypt, especially among lower social classes. This is confirmed by the fact that 98% of female caregivers and of female respondents in households containing no eligible children reported being circumcised (98% in Cairo and 96% in Alexandria). Recent extensive efforts to fight the practice has resulted in a downward trend in the prevalence of such abusive custom, but the complete elimination of the practice is still far from being achieved.

Among all female children 0-17, 24.5% are already circumcised and another 28.2% are not yet circumcised but their parents intend to circumcise them, 21.6% are not circumcised and their parents do not intend to circumcise them, and 25.6% are not circumcised and their parents are not sure whether to circumcise them or not. A range of eventual circumcision prevalence among this group of females can be predicted using these numbers. The lowest possible level is 24.5%, assuming complete eradication of further operations - a highly unlikely event. A more realistic, but still rather optimistic estimate is 52.7% which assumes that the whole unsure group will not perform the operation. A less optimistic scenario would assume that half the not sure group will perform the operation, resulting in a prevalence of 65.5%. A more conservative estimate assumes that the whole unsure group will perform the operation, resulting in a prevalence of 78.3%, which is still much lower than the current prevalence rates among adults.

The potential level of eventual practices can be better gauged through comparing different age groups, as shown in Table 3.6. The declining trend in the practice could be inferred from the figures. According to the optimistic scenario, which assumes none of the unsure category would perform the operation, the inferred prevalence would decline from 72% among females 16-17, to 64% in the age group 13-15 and 63% in the age group 10-12, to 42% among girls currently younger than 10. The declining trend seems to be stronger in Alexandria than in Cairo. It is alarming, though, to note the high fraction of caregivers who are unsure about their intention to circumcise their girls, especially if we note that in 53.1% of the unsure cases, the caregiver reports that she thinks the practice is good, compared to 22.5% in cases when circumcision is not intended.

Results from the school sample (Table 3.7), however, indicate a somewhat higher prevalence of female circumcision than that inferred from the household sample. Assuming that school children are accurately aware of their circumcision status, the lower level in the household reports might reflect some tendency to hide the practice. Before reaching such conclusion, however, further probes in the differences between the household and the school samples are needed. One main factor that could explain the difference is the fact that sampled school children tend to be older than the formal age range for their school grades.

Of special interest is the difference between intervention and control areas in Table 3.6. Since the focus of CPP on FGM has only recently started, its impact is expected to be confined to recent practices and to expectations on future operations. Circumcision typically occurs between ages 9 and 12 years, and CPP outreach activities focus on families including girls within or just younger than this age interval. Among girls 13 years or older, two thirds are already circumcised with no significant difference between the intervention and control areas. Among girls between 7 and 10 years, less than 2% are already circumcised and among the rest, circumcision is reported as intended for 40% and not intended for 24%, also with no

significant difference between intervention and control areas. It is hard to tell whether the CPP efforts have no impact or that its impact has extended beyond the boundaries of the areas formally served by the participating NGOs.

Exposure to advocacy

Exposure to media messages advocating against FGM is high among adult females, but not as high among school girls, as indicated by Table 3.8. Although one may speculate that girls and mothers are exposed to the same kind of media, the surveys findings are consistent with the fact that media messages are directed towards parents – the decision-makers – rather than towards girls – the potential victims. Exposure to mass media advocacy is higher in Cairo than in Alexandria, but its impact is stronger in Alexandria. Participation in seminars or workshops addressing the issue of FGM is very low.

Among caregivers of girls in Cairo, exposure to mass media advocacy is significantly higher in control areas while there is no significant difference between the two areas in exposure to advocacy seminars. The impact of seminars, however, is much stronger among those living in the catchment areas of the CPP.

Less than one quarter of interviewed school girls reports ever been exposed to the subject of FGM at school (1.7% among primary pupils and 31.9% among preparatory pupils). Among those exposed to the subject, the majority (71%, all in preparatory schools) report that this has been within formal school curricula. Most (80%) say that the exposition has been convincing. It is interesting to note that girls enrolled at the same school form at the same school do not agree on their being exposed to the subject within or outside curriculum.

Attitudes

A high fraction of survey respondents, especially adults, indicate positive views towards female circumcision (Table 3.8). Positive attitudes are less prevalent in Alexandria, especially in areas served by the CPP. Among school girls interviewed in the school survey, 42% think it a good practice, while 45% consider it a bad practice.

When asked about the reasons, from their perspective, for performing circumcision, 16% of school girls say it is a tradition, 16% say for cleansing 13% say it is a religious practice, 12% say because it enforces virtue, and 2% say it is a beautifying practice. One third of school girls (43% at the primary stage and 29% at the preparatory stage) could not provide any reason for the practice.

Table 3.6. Percent distribution of female children according to circumcision status, by governorate, sample type, and age groups (SCND household survey)

| Age / Governorate / Sample | Circumcision already performed | Circumcision intended in future | Circumcision unintended | Circumcision undecided yet |
|---|---|--|------------------------------------|---|
| Total | | | | |
| 0-9 | 0.4 | 41.1 | 22.0 | 36.5 |
| 10-12 | 36.4 | 26.6 | 13.6 | 23.4 |
| 13-15 | 57.3 | 6.3 | 29.4 | 7.0 |
| 16-17 | 70.8 | 0.9 | 23.6 | 4.7 |
| Cairo | | | | |
| 0-9 | 0.4 | 43.0 | 19.6 | 37.0 |
| 10-12 | 37.2 | 27.3 | 11.6 | 23.8 |
| 13-15 | 58.8 | 6.9 | 27.5 | 6.9 |
| 16-17 | 71.4 | 1.0 | 24.5 | 3.1 |
| Alexandria | | | | |
| 0-9 | 0.0 | 21.4 | 47.6 | 31.0 |
| 10-12 | 25.0 | 16.7 | 41.7 | 16.7 |
| 13-15 | 41.7 | 0.0 | 50.0 | 8.3 |
| 16-17 | 75.0 | 0.0 | 12.5 | 12.5 |
| Intervention | | | | |
| 0-9 | 0.8 | 41.2 | 20.5 | 37.4 |
| 10-12 | 42.2 | 23.4 | 14.1 | 20.3 |
| 13-15 | 54.3 | 1.4 | 30.5 | 14.3 |
| 16-17 | 72.5 | 2.0 | 15.7 | 9.8 |
| Control | | | | |
| 0-9 | 0.0 | 41.1 | 23.3 | 35.6 |
| 10-12 | 33.6 | 28.6 | 12.6 | 25.2 |
| 13-15 | 60.3 | 11.0 | 28.8 | 0.0 |
| 16-17 | 67.9 | 0.0 | 32.1 | 0.0 |

Table 3.7. Percentage circumcised among school girls, by governorate and educational level and grade (SCND school survey)

| | Total | Cairo | Alexandria |
|--------------------|--------------|--------------|-------------------|
| Total | 60.5 | 63.7 | 51.3 |
| Primary | 43.1 | 43.7 | 40.0 |
| Grade 5 | 32.4 | 31.4 | 30.4 |
| Grade 6 | 51.5 | 50.6 | 52.9 |
| Preparatory | 67.5 | 72.5 | 55.0 |
| Grade 7 | 58.4 | 61.7 | 54.6 |
| Grade 8 | 75.0 | 78.8 | 66.7 |
| Grade 9 | 82.2 | 82.2 | - ^a |

^a Alexandria school sample contained no females in the ninth grade.

Table 3.8: Exposure to advocacy against FGM and attitude towards FGM

| | Percentage ever hearing or watching a media program | Percentage ever attending a seminar | Percentage perceiving the practice as good | Percentage changed their opinion after advocacy * | |
|---------------------|--|--|---|--|---------|
| | | | | media | seminar |
| Caregivers** | | | | | |
| Total | 81.1 | 8.1 | 76.2 | 29.0 | 55.6 |
| Intervention | 69.4 | 8.1 | 78.2 | 27.9 | 90.0 |
| Control | 88.0 | 8.1 | 75.1 | 29.5 | 35.3 |
| Cairo | 82.8 | 8.3 | 77.8 | 27.8 | 53.8 |
| Intervention | 72.0 | 8.4 | 83.1 | 24.7 | 88.9 |
| Control | 88.4 | 8.2 | 75.4 | 29.5 | 35.3 |
| Alexandria | 52.6 | 5.3 | 52.7 | 60.0 | 100 |
| Intervention | 52.9 | 5.9 | 47.0 | 55.6 | 100 |
| Control | 33.3 | 0.0 | 100 | 100 | - |
| School girls | | | | | |
| Total | 39.1 | 4.5 | 42.2 | 59.9 | 92.6 |
| Cairo | 43.5 | 5.6 | 50.9 | 56.8 | 92.0 |
| Alexandria | 26.9 | 1.2 | 18.2 | 73.8 | 100 |

* Among those who have watched a media advocacy program or attended a seminar

Participants in mothers' focus group discussions have mixed attitudes towards FGM. None, however, perceives the practice as abusive because even those who could enumerate a list of side effects fail to see it as a violation of human rights. The medical approach in campaigning against the practice in contrast to a rights-based approach is clear in mothers' discussions of the negative aspects of the practice. Women who are still embracing the practice and insist on performing it to their daughters are also touched by the health-based advocacy. Many women believe that as long as a physician performs the operation under healthy conditions, it is safe and harmless. Some mothers also believe that the practice will have no negative psychological effect on the girl as long as it is performed at young age and anesthetic is used.

Fathers also tend to see the practice as beneficial, though some of them recognize its negative effects and could even consider it as abusive. Religion is invoked strongly in fathers' discussions. Some also perceive the campaigns against the practice as westernizing campaigns. As one says, "*we are Muslims; we do not imitate westerns*". Curbing girls' sexual desires and hence protecting their chastity is seen by fathers as the main benefit of the practice. Fathers fear that failing to circumcise their girls could make them "*as promiscuous as the western women we watch in satellite programs*". Like mothers, they believe that there is no harm done to the girl as long as the procedure is done by a physician and under

anesthesia. They mostly trust physicians' judgment in deciding whether and how to perform the operation so that it does not result in the two negatives they associate with the practice: sexual frigidity and bleeding.

Most schoolgirls in focus group discussions disapprove of female circumcision and consider it an abusive practice. However, they mainly attribute their negative reaction to the health threats from medical complications. Few girls view the practice *per se* as abusive because it is a mutilation of a God-gifted body part. Positive attitudes are still held by some schoolgirls who describe the practice as cleansing and protective. Protection as perceived by girls extends from sexual chastity to protection from infertility and from being insolent.

When asked about their attitude towards female circumcision, all working boys served by NGOs express their approval of it because they believe that it is a religious habit and it makes girls calmer sexually and more respectful and helps them have better marriage prospects. Working girls served by NGOs show some ambivalence. They have attended a lecture advocating against the practice, but still they believe it is a necessary operation mainly because their future husbands and mothers in law will expect them to be circumcised or otherwise would slight them. All working girls not served by NGOs, on the other hand, express their endorsement of the practice perceiving it as beneficial and religious. Alarming, a girl mentions that she has attended a seminar on female circumcision in which an Islamic clergyman said that it could be performed under a doctor's discretion and in such a case would not be forbidden. Such statements need to be monitored and strongly discouraged.

Most male teachers in focus group discussions support female circumcision while most female teachers oppose it. Those opposing the practice perceive it as humiliating, non-religious, and causing frigidity and marital problems. Those who support it claim that it is purifying, beautifying, and endorsed by religion. Non-circumcised girls are expected to be promiscuous and to be slighted or even rejected by their husbands. Two very alarming statements are heard in teachers' focus group discussions. One says, "*how could it be forbidden, it was performed on our mothers?*" and another says, "*it is performed on boys so it is not forbidden for girls.*"

Interviewed school social workers also express the two points of view. For some it is good part of a heritage consistent with Islam and necessary to protect girls' chastity. Some workers, who attended advocacy seminars, express negative views. They relate what they heard at the seminar. They say that doctors are against FGM because it leads to sexual marital problems, to hemorrhage, and to psychological trauma. They also say that it is not endorsed by Islam. Some say that it is religiously forbidden because it exposes female genitals. That last statement is potentially dangerous because the same reason can be invoked to forbid girls from seeking beneficial reproductive health services.

All interviewed physicians except one consider female circumcision an abusive custom. The exception is a physician who mentions that sometimes there is a need for a cosmetic operation that is perceived as not the same as conventional circumcision. When probed, physicians against the practice explain that it is abusive because it is the cutting of a useful body organ and hence it is considered a handicapping practice. They also mention that it is abusive because it negatively affects female sexual enjoyment. These answers are promising since although physicians know and indeed do relate a number of health hazards and possible complications, the rejection of the practice is based on rights-based rather than on a medical-based argument.

Social workers affiliated with the Child Protection Project claim that the seminars held in the NGOs have been effective, especially due to physicians' participation and the testimonies of circumcised women. They, however, perceive that fathers and grandmothers are the main advocates of the practice and they could counteract the impact of the seminars and home visits on mothers.

4. Maltreatment of Children at School

Children spend a large fraction of their lives at school. With the spread of formal education and the steep rise in school enrolment, schools have acquired a prominent position as a childrearing institution. Chapter three briefly discussed how pushing factors at school, including abuse, neglect, and exploitation, interact with parental neglect or lack of resources to drive children out of school and into work or the street (Box 3.3). The strained relationship between school and home is also discussed in Chapter three (Box 3.4). This chapter focuses on children's experience in the school setting and presents evidence of different kinds of abuse children might face at school, either from teachers or from other children. The first three sections discuss, respectively, physical maltreatment, verbal and emotional maltreatment, and exploitation (including sexual exploitation). The last section focuses on bullying and on physical and emotional violence between school children.

4.1. Physical Maltreatment at School

Almost all interviewed school children report being corporally punished at school (96%). Nearly one in every two children (44%) had been corporally punished within the week preceding the survey, and 91% have been corporally punished during the current school year. Males are slightly more likely than females to suffer from physical punishment, as shown in Table 4.1., which shows the proportion punished within the current school year using specific types of physical punishment.

Hitting hands with rulers is the dominant type of corporal punishment in Egyptian schools, and it is the only type of physical punishment at schools that is socially accepted – though clearly a form of violence that violates child's rights and is against approved school procedures in Egypt. Overall, one in every three interviewed children were subjected to being hit on the hands with rulers, sticks or similar hard objects during the current week while more than one in every five (21.5%) were subjected to other types of physical punishment during the current week. Almost 10% of school children were subjected to two different types of punishment during the week preceding the survey and 5% were subjected to three or more types. During the current school year, 22% were subjected to two different types of physical punishment, 12% were subjected to three types and 14% were subjected to at least four different types of punishment.

Regrettably, it is hard using survey data to accurately distinguish between the different types of hand hitting. In focus group discussions, it is made clear that teachers can use some extreme measures when hitting hands, like putting a pencil between the child's fingers before beating the back of the hand. Other ways of hitting are also mentioned in focus group discussions. School boys mention that teachers may use shoes for beating and they pinch children under their armpits. Hanging a child and hitting his bare feet, pushing the child's head against the wall, and slapping on the back of the neck are also mentioned by school boys. Twisting arms is mentioned by schoolgirls.

When asked about the occurrence of unprovoked physical assaults from teachers or other staff members at schools, 7.3% of school children in the survey reported experiencing such assaults (6.5% of primary students, and 7.6% of preparatory students, 7.9% of males, and 6.6% of females).

Table 4.1. Percentages of children who during the current school year have been subjected to specific types of physical punishment at school, by sex and education level (SCND school survey)

| Type of Physical Punishment | Primary | | Preparatory | |
|-------------------------------|---------|---------|-------------|---------|
| | Males | Females | Males | Females |
| Hitting hand with hard object | 88.2 | 84.9 | 86.7 | 79.0 |
| Hitting body with hard object | 28.0 | 19.9 | 46.3 | 11.5 |
| Spanking | 28.2 | 12.1 | 35.1 | 16.0 |
| Shaking | 4.9 | 2.9 | 11.5 | 10.8 |
| Ear pinching | 5.6 | 4.0 | 10.8 | 6.4 |
| Hair grabbing | 2.1 | 1.1 | 8.1 | 4.5 |
| Face slapping | 35.1 | 5.1 | 26.2 | 5.8 |
| Knocking down | 3.2 | 0.8 | 3.9 | 2.0 |
| Hard beating up | 2.4 | 1.3 | 5.3 | 4.8 |
| Kicking/punching | 5.8 | 0.5 | 7.5 | 2.8 |
| Any physical punishment | 95.0 | 89.7 | 92.7 | 89.1 |

Table 4.2. Percentages of children who have been subjected to corporal punishment at school during the current school year according to reports from caregivers, by sex and age group (SCND household survey)

| Sex | Child's Age | | | Total |
|---------|-------------|-------|-------|-------|
| | 6-11 | 12-14 | 15-17 | |
| Males | 40.8 | 56.3 | 9.2 | 34.7 |
| Females | 36.3 | 24.8 | 5.6 | 26.9 |
| Total | 38.5 | 37.3 | 7.6 | 30.7 |

Reports from caregivers on corporal punishment in schools are presented in Table 4.2. The gender difference is apparent in these figures. Prevalence of physical punishment according to reports from caregivers, as may be expected, is generally lower than child reports. When asked about the type of physical punishment the child was subjected to the last time he or she was beaten in school, caregivers mainly mention hitting hands with hard objects (82%). The main reasons given by caregivers for the most recent cases of punishment are misbehaving with classmates (41%) and negligence (27%). Many caregivers believe that the child has deserved the beating (60%). For children in the age group 12-14, caregivers are more likely to believe that the teacher was right in case of males (74%) than for females (42%). No gender difference appeared before age 12 (62% for males and 63% for females).

Interviewed caregivers who think that the child did not deserve the punishment were not asked for their explanation of the maltreatment episodes. Participants in focus group discussions give us a clue, however. When the issue of maltreatment at school is discussed, parents and children have very many stories to tell about pressuring children to take private and school-based tutoring. This point will be further discussed in section 4.3. Low scholastic aptitude also invites physical abuse. Parents, teachers, and even children seem to believe that

a pupil who is not doing well at school deserves punishment, with no regard to whether the low achievement is due to negligence or to learning difficulty. (See Box 4.1)

Box 4.1. Learning Difficulties and Abuse – Case Study

Children suffering from learning difficulties are at higher risk of abuse than children with better scholastic aptitude (see Box 6.1 in chapter six). The following case study indicates how low scholastic aptitude subjects children to abuse, which reinforces their low performance.

W.A. is a 9 year-old girl, enrolled in the third grade of a primary school. She lives in a crowded household with her parents, grandparents, aunts and siblings. She shares the same bed with her grandmother and aunt. W.A. reports that her parents impose discipline by beating her. She says that sometimes this beating leads to physical injury.

Developmentally, she was born by normal delivery, walked and talked at normal age, but she still has diurnal enuresis (passes urine during the day and at night) and occasional encopresis (passes stools) when beaten. She demonstrates externalizing problems in the form of agitation, restlessness, talkativeness and disobedience. A previous IQ test gave the result of 103, but she seems to have much lower intelligence level. She has no hobbies and her school life is chaotic with plenty of bullying and aggression from her classmates. Her mother had to move her once from one class to another as the teacher used to beat her. Her academic grades were poor and were a source of complaint at school. However, she has attended private classes (school-based tutoring groups) and taken private tutoring lessons, so she is able to take from her teacher exam answers.

W.A. shows high levels of both externalizing and internalizing behavior. Since the former signifies aggressive, uncontrolled aspects of behavior and the latter signifies the fearful inhibited over-controlled behavior, the psychiatrist comments that this child is using the full range of symptoms to express her agony. While she is speaking she is smiling not crying. The psychiatrist explains this is due to fear as a result of poor parenting which prohibits any expression of real emotions while enforcing discipline and obedience as the sole aim of upbringing.

The psychiatrist diagnoses the case as one of learning disability and recommends another full scale IQ test as he suspects that her IQ might be much lower than what is reported in the Child Protection file.

4.2. Verbal and Emotional Maltreatment at School

Verbal abuse is generally less frequent than corporal punishment. During the week preceding the survey, 30% of interviewed children were yelled at, 7% were cursed and 4% verbally insulted by a school teacher. The prevalence of verbal abuse during the current school year was 65% for yelling, 17% for cursing, and 11% for insulting. As is clear from Tables 4.3 and 4.4, males, especially in preparatory schools, are more subjected to verbal punishment in general and to cursing and swearing in particular than girls.

Table 4.3. Percentages of children who have been subjected during the current school year to specific types of verbal abuse at school, by sex and education level (SCND school survey)

| Type of Verbal Abuse | Primary | | Preparatory | |
|---------------------------|---------|---------|-------------|---------|
| | Males | Females | Males | Females |
| Verbal Punishment | | | | |
| Yelling | 54.8 | 60.6 | 72.0 | 64.6 |
| Swearing or cursing | 10.3 | 4.1 | 34.0 | 9.3 |
| Insulting or name calling | 15.5 | 7.5 | 15.4 | 6.9 |
| Any verbal punishment | 61.8 | 61.9 | 79.3 | 65.9 |
| Unprovoked yelling | 3.8 | 12.6 | 21.1 | 16.3 |
| Unprovoked insult | 1.7 | 8.0 | 6.0 | 9.0 |

Table 4.4. Proportion of children who have been subjected to verbal punishment at school during current school year according to reports from caregivers, by sex and age group (SCND household survey)

| Sex | Child's Age | | | Total |
|----------------|-------------|-------|-------|-------|
| | 6-11 | 12-14 | 15-17 | |
| Males | 12.6 | 5.2 | 8.6 | 10.3 |
| Females | 15.1 | 10.3 | 0.8 | 10.9 |
| Total | 13.9 | 8.3 | 5.1 | 10.6 |

School children were asked about incidents of unprovoked yelling, swearing and insults from teachers and school personnel. Around 15% of school children report being exposed to unprovoked yelling and 7% reported being subjected to verbal abuse with no provocation on their parts. Such practices are more prevalent in preparatory schools especially among males, as shown in Table 4.3. School boys participating in focus group discussions reported that many teachers and school principals usually used profane words when addressing children.

According to caregivers, 11% of school children were cursed or verbally assaulted by a teacher during the current school year. Although there is no gender difference in this overall measure, a strong age/sex interaction appears in Table 4.4. Compared to Table 4.3, it seems that caregivers are not fully aware of how their children are abused verbally at schools. Caregivers are much less tolerant of verbal discipline by teachers than of physical discipline. Only 9% of caregivers believe the child deserved the verbal insult. Caregivers tend to accept verbal assaults for boys (12%) more than for girls (6%) and for children 12-14 (20%) than for children younger than twelve (7%).

Other types of emotional maltreatment at school are mentioned by parents and school children in focus group discussions. These include humiliating the child in class for not paying school or extra tutoring fees, making the child stand with his or her hands up in front of the class, beating the child in front of the whole school, making children slap their classmates or hold them to be beaten by the teacher, and sticking signs on the child's back

with statements like 'I am dumb'. Children also complain of the insensitivity of their teachers in asking them about their fathers' jobs in front of the class. Also when they do not greet the children when entering classrooms. Children and their parents also mention that children are forced to sweep the classrooms and the playgrounds. Although helping in keeping their school clean and tidy could be a positive experience, the way it is handled by school authorities seems to be sending a wrong message to the children who consider it humiliating.

Fathers focus on teachers' neglect. According to them, *"children return from school as dirty and untidy as if they were coming from playing in the street; teachers pay little attention to their students. Left with no supervision, children fight together and develop bad manners."* School boys also complain of incidences of lack of supervision by their teachers who *"ignore fights and bad manners among pupils"*. Teachers, on the other hand, claim that they supervise children carefully during school breaks. According to them, *"children fight and wrestle in the playground; they would have seriously injured each other if supervision had been lacking."*

School children interviewed in the school survey were presented with 14 statements to assess their feelings towards school and whether they have a healthy relationship with their teachers and classmates. Factor analysis shows four underlying dimensions for the set of statements. Two of the underlying factors are negative, representing resentment of school and teachers (five statements), and estrangement from peers (two statements), while two dimensions are positive reflecting comradeship with peers (three statements) and study motivation (four statements). Four indices are constructed through counting the number of negative answers to statements with high loadings on each of the two negative factors, and counting the number of positive answers to statements with high loadings to each of the two positive factors.

Children scoring positively on the index of resentment (i.e. agreeing with at least one negative statement) are assumed to be emotionally maltreated by their teachers. Those who answer negatively to at least two statements are considered strongly resentful of school and teachers. A little more than half the students (52%) show no evidence of resentment, 25% express mild resentment and 23% express strong resentment. Strong resentment is higher among children exposed to physical discipline during the current school year (23.6%) than among children subjected to no corporal punishment (17.3%). Strong resentment is also more prevalent among children exposed to verbal punishment (26.5%) than among those not exposed to verbal punishment (15.2%). Exposure to unprovoked verbal abuse increases the prevalence of strong resentment to reach 32.4% compared to 19.3% among children not exposed to unprovoked verbal assaults.

4.3. Exploitation at School

In addition to physical and verbal abuse, school children might be exploited by their teachers. Exploitation in the school setting occurs when teachers work for their own benefit against the child's best interests. Sexual harassment is an overt manifestation of exploitation. Another, more prevalent though covert type of exploitation, is forcing children into private tutoring.

Tutoring

According to caregivers, 80% of children at school receive private tutoring or participate in school-based tutoring groups. No gender or age differences exist in the prevalence of

tutoring. Caregivers claim that pressure from school teachers is the reason for taking private or extra tutoring in 37% of the cases. Thus, at least 29% of children enrolled at school are

Table 4.5. Percentages of children enrolled at schools who are taking private tutoring or participate in school-based tutoring groups due to pressure from teachers, by sex and age group (SCND household survey)

| Sex | Child's Age | | | Total |
|----------------|-------------|-------|-------|-------|
| | 6-11 | 12-14 | 15-17 | |
| Males | 37.5 | 21.9 | 15.7 | 28.7 |
| Females | 40.7 | 26.9 | 4.9 | 29.9 |
| Total | 39.3 | 25.2 | 10.9 | 29.3 |

exploited by their teachers through enforced tutoring. No gender differences exist in the prevalence of pressure, but it decreases with age (Table 4.5), as children become more in real need for tutoring. Among children aged 6-11, pressure from teachers is a reason for tutoring in 48% of cases, compared to 31% in the age group 12-14 and less than 15% in the age group 15-17.

It should be noted, however, that some children who are pressured to take private tutoring are in fact in need of tutoring, though they could have chosen another tutor if they were not subjected to pressure from their school teachers. In cases where pressure from teachers is mentioned, 21% also mention that the child had difficulty with the subject. In addition, bad or careless teaching is an indirect way of pressuring school children into taking private tutoring. Poor teaching is mentioned in 40% of all tutoring cases and in 52% of the cases where pressure is mentioned.

Parents in focus group discussions complain emphatically of pressure put on the child – including humiliation and beating – to enforce tutoring. When giving examples of deprived children, fathers include school children whose parents cannot afford paying for tutoring along with those whose fathers fail to support their essential needs. Fathers also accuse some teachers of asking for bribes to help children pass exams. As evidence of corruption, a father says “*the kid is in the sixth grade and cannot write his own name, how could he have passed the previous five grades?*” School children also complain vigorously of discrimination between children taking private tutoring and children who are not. Some teachers participating in focus group discussions agree with the claim that discrimination occurs sometimes and that some teachers only care about exploiting their pupils financially. School social workers also report that some teachers force children to take private tutoring, though they also recognize the need of children of illiterate parents to have extra help. Other teachers, however, claim that teachers are falsely accused and that children insist on taking private lessons because they are jealous of children who do. It is hard, though, to understand why children would feel envious unless there is indeed tutoring-based discrimination.

Sexual exploitation

Sexual exploitation at schools is alluded to in fathers' focus group discussions. It is mentioned that some teachers harass girls by looks and embarrassing physical contact in the classroom, others may molest girls during private lessons. Teachers also have stories to tell about teachers who caress and touch girls improperly. Some stories about teachers raping or attempting to rape school girls are also related in parents and children focus group discussions. Alarming, some fathers and school children seem to blame the girls, and their negligent mothers, while finding excuses for teachers who are perceived as sexually deprived young males who are tempted by voluptuous girls wearing immodest clothes.

4.4. Bullying

When probed, 12% of school children complained of being bullied by older or stronger children at school. Among those children, 11% suffer all the time from bullying all the time, 44% suffer it occasionally, and 45% rarely suffer from it. Bullying is slightly more prevalent in primary schools (16%) than in preparatory schools (10%). Table 4.6 shows that girls, especially in primary schools, are more subjected to bullying than boys (see Box 4.2). The stories of bullying at school mentioned by boys during focus group discussions include throwing buckets of water over their uniforms, insulting and name-calling, being thrown to the floor and forced to swallow dust, and face slapping. Some reports of sexual molestation of boys at school are also mentioned in focus group discussions of parents and school boys. School girls in focus group discussions mention mockery and humiliation directed towards less privileged girls such as those who receive financial aid or those with low scholastic ability who fail to answer teachers' questions (Boxes 4.1 and 4.2).

Table 4.6. Percentages of children who have been subjected during the current school year to bullying at school by sex and education level (SCND school survey)

| Frequency of Bullying at school | Primary | | Preparatory | |
|------------------------------------|---------|---------|-------------|---------|
| | Males | Females | Males | Females |
| Always | 1.4 | 2.5 | 0.8 | 1.4 |
| Occasionally | 2.1 | 13.3 | 4.2 | 4.4 |
| Rarely | 2.9 | 9.8 | 0.8 | 9.0 |
| Ever been bullied at school | 6.4 | 25.6 | 5.9 | 14.9 |

Around one in every two children subjected to bullying complain to a teacher or school authority (52%). Males are more likely to complain of bullying (64% compared to 49% of girls). Complaints are as common in primary schools (56%) as in preparatory schools (50%). According to the child report school, personnel fail to do anything in 17% of the cases. Girls are more likely to report failure to act on the teacher's part (21% compared to 9% among boys). In focus group discussions, however, school children commend the role played by school social workers in addressing the problem of fighting among children.

Peer estrangement and peer comradeship are expected to be related to bullying and abuse from peers. According to their reactions to a set of relevant statements, children are classified

to be estranged if they agree to at least one of the two negative statements. Children are classified to have weak comradeship if they disagree with at least one of the three positive statements. Overall, 21% of children are classified as estranged and only 8% are classified to have weak comradeship. Estrangement and weak comradeship are higher among children ever exposed to bullying (32% and 14%, respectively) compared to those who are never exposed to bullying (17% and 7%).

Box 4.2. The Tall Lonely Girl and Emotional Bullying – Case Study

Inter-child violence seems to be fairly common in the studied communities. Among boys, violence seems to be their way of releasing energies that have no better channels of expression. Violence between children could result in serious physical injury, and it helps perpetuate the culture of violence in the community at large. Inter-child violence is not restricted to fights and physical bullying. Verbal abuse and emotional bullying is also common, especially among girls, and it can have severe implications for the ridiculed child, as the following case study illustrates.

R.M. is a 15 year-old adolescent girl who is the youngest of seven siblings. She appears depressed, tearful and irritable. She left school after completing primary stage, feeling that she was emotionally abused by her schoolmates who ridiculed her for her big tall stature and nicknamed her ‘tally’. Her feelings of bitterness and shame were made worse by the sudden death of her beloved father when she was 12 years old. Fortunately, *R.M.* has a supportive kind mother and presently she is attending classes in the community center and is steadily progressing academically. *R.M.*’s mother reports that *R.M.* was originally an unwanted child coming after six children and that she took many drugs while she was pregnant with her in unsuccessful attempts to abort the child. The psychiatrist diagnoses *R.M.* as suffering from an adjustment disorder with depression and recommended an IQ test for her.

The case of *R.M.* is a manifestation of the multi-factorial genesis of emotional abuse where physical stature, grief over parental loss, and possible impairment of cognitive abilities by prenatal drugs, create an oversensitive slow learner who becomes readily frustrated at school. *R.M.* demonstrates that what counts in abuse is the individual perception of stress and his or her reaction to it. The psychiatrist recommends a comprehensive IQ test for *R.M.* to establish her cognitive abilities as well as to point to any possible specific learning difficulties given her developmental history and her rapid frustration at school. He also recommends her for psychological counseling to help her deal more effectively with her stature and her interaction with people.

5. Maltreatment of Children at Work

Work is a traumatic experience for many children, as discussed in section 3.4. This happens when children drop out of school to work, when they face a conflict between work and school or between work and enjoying their childhood, when work is so stressful physically or emotionally, or when they work in an unhealthy environment that subjects them to physical or social hazards. In such cases, children are considered to be exploited by adults – their parents or other family members as well as their employers. In this chapter, we move from the view of child work as a form of child exploitation to a focus on the work setting itself where employers are assigned the responsibility for the wellbeing of working children. What is addressed here is the way children are treated at the work place regardless of the lawfulness or acceptability of child work *per se*. The chapter is divided into two sections presenting evidence regarding physical and verbal maltreatment of children at work. The abuser might be the work owner, a supervisor, a workmate, or a customer. The defining characteristic is that the child is exposed to maltreatment because he or she is working and is affected by the power relationships of the work setting.

5.1. Physical Maltreatment at Work

According to caregivers' reports, 17% of children who have worked are beaten at work. Interestingly, only currently working children (i.e. those who were working during the week preceding the survey) are reported to suffer beating at work¹

¹ This might be attributed to wrong questioning pattern that resulted in respondents wrongly understanding the question to refer to recent incidents. Alternatively, it might reflect recall errors.

Table 5.1. Percentages of ever-worked school children who have been subjected to specific types of physical punishment at work, by sex and education level (SCND school survey)

| Type of Physical Punishment | Primary | | Preparatory | |
|--------------------------------|---------|---------|-------------|---------|
| | Males | Females | Males | Females |
| Hitting with hard object | 5.0 | 22.2 | 2.6 | 29.0 |
| Spanking | 20.0 | 33.3 | 17.9 | 6.5 |
| Shaking | 10.0 | 11.1 | 5.2 | 0.0 |
| Ear pinching | 10.0 | 11.1 | 0.0 | 0.0 |
| Hair grabbing | 5.0 | 0.0 | 0.9 | 6.7 |
| Face slapping | 5.0 | 33.3 | 0.0 | 22.6 |
| Knocking down | 10.0 | 11.1 | 0.9 | 0.0 |
| Hard beating up | 5.0 | 22.2 | 0.0 | 6.7 |
| Kicking/punching | 10.0 | 0.0 | 4.3 | 0.0 |
| Throwing hard objects at child | 5.0 | 11.1 | 3.4 | 12.9 |
| Burning | 0.0 | 11.1 | 0.0 | 0.0 |
| Any physical punishment | 30.0 | 55.6 | 23.3 | 32.3 |

. Among currently working children, 29% are corporally punished. Those beaten at work seem to be regularly punished (59%) than children employed by family members are more likely to be physically punished (19%) than children employed by non-relatives (21%). On the other hand, physical abuse is more prevalent among children ever-beaten at work were beaten during the month preceding survey and 95% of children ever-beaten at work were beaten during the month preceding survey. Alternatively, this may be attributed to a reporting bias whereas caregivers tend to report only recent incidences of physical punishment. If the latter explanation is true, then the prevalence rate of physical abuse of children at work is underestimated in the household survey. This is in addition to the expected underestimation resulting from children not telling their families while the child was sent home in the other cases of reported accidents. Working school children report that accidents at work have happened to 5% of them. Working school girls seem to be highly prone to accidents at work (19%) while only 5% of the accidents reported by and is more prevalent among boys younger than 13 years old (62% compared to 11% of boys 13-17). According to caregivers' reports, the main reasons for beating are work mistakes (50%) and impoliteness to the employer (46%). In slightly more than half the cases, the caregiver thought the child deserved the beating. Slapping and spanking are the most prevalent types of physical punishment at work. They largely perceive the employers to be much like their fathers, teaching them skills and taking care of them. Even when beating them, employers are

As expected, prevalence of physical punishment according to children's reports is higher than that reported by caregivers. Among school children who had worked, 27% report being physically punished. Consistent with caregivers' reports, younger children are more subjected to physical violence at work (28% among primary level children compared to 25% among preparatory level children). On the other hand, more working school girls than boys report being punished (36% among girls compared to 24% among boys), the opposite gender pattern to that reported by caregivers. Working girls in both primary and preparatory schools are more likely to report physical punishment at work than working boys (Table 5.1).

Among working children, 18% are verbally insulted at work, according to their caregivers' reports. Verbal insult has exactly the same age and gender patterns (more prevalent among younger children and among boys) and the same reasons (work faults and bad manners) as physical abuse. However, it is not the case that children subjected to physical

5.2. Verbal and Emotional Maltreatment at Work

Among working children, 18% are verbally insulted at work, according to their caregivers' reports. Verbal insult has exactly the same age and gender patterns (more prevalent among younger children and among boys) and the same reasons (work faults and bad manners) as physical abuse. However, it is not the case that children subjected to physical

Table 5.2. Percentages of ever-worked school children who have been subjected to specific types of verbal punishment at work, by sex and education level (SCND school survey)

| Type of Verbal Punishment | Primary | | Preparatory | |
|----------------------------------|----------------|----------------|--------------------|----------------|
| | Males | Females | Males | Females |
| Yelling | 50.0 | 44.4 | 32.5 | 66.7 |
| Swearing or cursing | 10.0 | 22.2 | 25.0 | 10.0 |
| Insulting or name calling | 10.0 | 22.2 | 1.7 | 16.7 |
| Any verbal punishment | 50.0 | 55.6 | 43.6 | 76.7 |

abuse at work are the same ones as those subjected to verbal abuse. Among all working children, 8.7% are subjected to both physical and verbal abuse, 7.7% are subjected to physical abuse only, and 9.6% are only subjected to verbal abuse. Caregivers think that the child deserved the verbal insult in 88% of the cases, which is higher than the percentage accepting physical punishment. This pattern is different from caregivers' attitude towards punishment at school, where physical punishment is more accepted than verbal punishment. It should be noted, however, that parents of working children, unlike parents of school children, represent only a small select subset of all parents.

According to reports from working school children, 51% have been subjected to verbal punishment at work. 41% of working school children are yelled at, 21% are sworn at or cursed and 6% are verbally insulted. The pattern presented in Table 5.2 indicates that working girls tend to be more subjected to verbal abuse than working boys.

Along with the results presented in section 3.4. of Chapter 3, a gender-based pattern in child work emerges. Girls are generally far less likely than boys to participate in earning-related work. However, when they do, girls typically suffer worse working conditions. The reason might be that girls are only forced to work when their parents face severe economic hardship. In such cases, the working girl has little choice of quitting if badly treated as she lacks parental support.

6. Precipitating Factors for Child Abuse

The previous three chapters provided a detailed description of the different facets of abuse children are exposed to in different settings. In order to design policies to protect children from abuse – which is the ultimate goal of the current study – description is not enough. In this chapter the focus moves from description to providing explanations. The question of policy relevance is how to control child abuse. In order to provide an evidence-based answer to this question, factors responsible for increasing the risk of child abuse, or alternatively, decreasing such risk, need to be identified. The objective of this chapter is to explore precipitating and protective factors of child abuse in the studied communities. The search for explanation adopts the ecological and the protective environment frameworks. Elements of these two frameworks are discussed, respectively, in section 1.2 in Chapter 1 and section 2.3 in Chapter 2.

This chapter is divided into four sections. It starts by an investigation of societal attitudes, since one of the basic components of the protective environment is the embracing of attitudes that have zero tolerance of violence against children. Evidence presented in the previous three chapters shows a strong endorsement of corporal punishment as a legitimate way of disciplining and childrearing. Further probing in attitudes towards corporal punishment is presented in the first section of this chapter. The second section moves from attitudes to practices through building a predictive model for child abuse at home, adopting the ecological framework. A unique feature of the study design is the focus on the neighborhood layer of the ecological framework. Neighborhood effects are discussed in more detail in the third section. The final section addresses violent orientation of children as an important dimension of both the causes and the effects of child abuse. Violent orientation means the tendency of children to use violent measures when expressing their emotions or when trying to address their problems. It could be argued that violent orientation of children triggers violent responses from adults. On the other hand, violence against children encourages a child's violent orientation to problem solving. This perpetuates the culture of violence from one generation to another. In the last section of this chapter, evidence regarding violent orientation of children and its precipitating factors are presented.

6.1. Attitudes towards Corporal Punishment

Evidence presented in previous chapters showed that corporal punishment of children is a common practice. Respondents to the SCND household survey were asked whether they believed that corporal punishment is necessary in child discipline and education. As Table 6.1 shows, a sizeable fraction of adult respondents in the sampled households believe in the efficacy and legitimacy of corporal punishment. Respondents are most likely to support corporal punishment by parents, followed by corporal punishment by teachers. Corporal punishment as a way of discipline and education in the workplace is least embraced by SCND adult respondents. There are no noticeable gender differentials in the way respondents perceive corporal punishment as beneficial, though they are more likely to accept corporal punishment of working boys than of working girls. It seems that respondents perceive punishment children at work as an abusive practice in contrast to punishment by parents, and to a lesser extent by teachers, when it is regarded as a proper method of discipline. This is consistent with the view of child work as a potentially exploitive practice, a view emphasized in focus group discussions, as discussed in section 3.4.

Table 6.1. Percentages of household informants who agree with the statement that corporal punishment is necessary for a child's upbringing and education (SCND household survey)

| Site of discipline | Sex of child to be disciplined by corporal punishment | |
|--------------------|---|-------|
| | Boys | Girls |
| At home | 32.6 | 31.9 |
| At school | 18.5 | 18.0 |
| At work | 7.2 | 3.8 |

Not endorsing corporal punishment does not mean that respondents completely reject the practice. When caregivers are asked about actual incidents of corporal punishment of their children in school, 60% of them claim that the teacher was right in hitting the child (61% for boys and 57% for girls). In contrast, only 9% of caregivers think that teachers were justified when they verbally abused children (12% for boys and 6% for girls). It seems that the majority of survey respondents do not believe that beating the child *per se* is essential for discipline, but on the other hand they would not object to beating if they think the child crossed the limits of good behavior.

According to parents participating in focus group discussions, it is mainly the child who brings the punishment on himself or herself. Children annoy their parents by being stubborn, naughty, demanding, nagging, or quarrelsome. Parents think children to be most deserving of punishment when they talk back or are bad-tempered with their parents, and when the child acts in a risky way, such as having bad peers, smoking, or stealing. Two groups of faults resulting in punishment are identified by mothers. The first group includes major mistakes that necessitate punishment, such as stealing, returning home late for girls, or, for boys, smoking, drug abuse, beating younger siblings, escaping from school or behaving badly at school. The second group includes minor faults that are not in themselves deserving of punishment, from the mothers' points of view, but nevertheless could involve punishment in an attempt to correct them. These include nagging, hyperactivity, crying or screaming. Note that the former group of reasons exhibits a child-centered view while the latter group is more adult-centered. In both cases, mothers seem to perceive corporal punishment as their only resort. However, mothers recognize that not all corporal punishment is justified and acknowledge that aggressive or stressed parents would beat their children excessively. On the other hand, parents who fail to punish their children are accused of being negligent. As a father put it, "*if I left my child without harsh discipline, he would go astray.*"

According to mothers, younger children should be beaten so that they grow up obedient and develop good manners. Older children, on the other hand, are beaten less because they already know their limits. Also it is more risky to beat an older child harshly because he or she can run away from home. Conversely, fathers express their belief that children above the age 12 are most in need of harsh discipline. Working boys believe that abusing an older child has more consequences because they think that younger children forget quickly and are less sensitive to violence.

Whether girls should be beaten more or less than boys seems to be an arguable issue. On one hand, parents say that girls are typically more obedient and better-tempered, and so they

need less punishment than boys. Children, boys and girls, also concur that girls should be beaten less severely because they are more sensitive than boys. On the other hand, some parents, especially mothers, believe that girls are more at risk if they are not firmly disciplined. Parents also tend to view girls as more easily controlled. Mothers comment that girls are broken with few strokes unlike boys who stand up to hard beating, while fathers repeat the maxim “*break a girl’s rib; she will develop 21 ribs in its place.*”

When probed about the limit beyond which corporal punishment is considered abusive, parents do not agree on a specific limit. For some, it is cruel to beat the child harshly. For others, the degree of harshness should be proportional to the degree of fault. According to fathers, corporal punishment is abusive when the father hits all body parts or when he is under the influence of drugs. Generally, however, parents believe that what is really cruel is to hurt the child without the intention of disciplining him or her. Distrust and verbal humiliation is considered crueler than beating the child. Parents seem to believe that psychological injury is more potent than physical pain. Reports from children seem to agree with this belief.

Many schoolboys participating in focus group discussions also look favorably on corporal punishment and consider it a proper way to discipline a disobedient child. Like their parents, children consider beating abusive only when it is done with such cruelty that it injures the child and leaves scars or when the child did nothing wrong but is beaten to vent parents’ stress. Girls seem to be less accepting of corporal punishment though some girls consider beating justifiable when the child is disobedient, repeats the same mistake or neglects her domestic duties. The majority of school and working girls believe that parents should listen to them and attempt to explain in a friendly manner. Working boys also seem less accepting of corporal punishment but some of them see beating by their mothers as a beneficial disciplinary practice, as long as the punishment is not excessive in relation to the fault. Boys are particularly annoyed by being tied up before beating because it makes them feel helpless and defenseless.

Parents have ambivalent views about corporal punishment in school. On the one hand, they seem to believe that teachers cannot properly manage children and keep their respect without the use of the stick. On the other hand, corrupt teachers are seen as using physical punishment to force children to take private lessons. When the decree banning corporal punishment at schools is discussed, a father cynically notes, “*it is money that bans punishment, pay for tutoring and your child is not beaten.*” Parents think that corporal punishment in school is only abusive when it is so excessive that it leaves marks on the child’s body, or when it is to force the child to take private lessons.

School boys also justify beating in school when children are at fault, such as when they do not study, disobey teachers, or damage school property. Alarming, they also seem to justify the beating of children with low scholastic aptitude, because they mention among examples of justified beating incidents like repeating the same mistake and failing to answer the teacher’s question even though the lesson has been explained. Some boys believe that beating is necessary or otherwise children will fail. Some working boys mention that beating is better for the child than the alternative of being expelled from school.

According to teachers and school social workers, corporal punishment is necessary to keep order in class and to force children to study. Teachers consider corporal punishment abusive only when it is without reason or too cruel. They have signed the decree that

prohibits corporal punishment at school. Yet, they all consider it as impractical and unjust. Their rationale is that they deal with violent children raised in a violent environment and so can only be managed violently. School social workers also observe that parents beat their children brutally at home but they complain when the child is beaten at school and they may even attack teachers. Teachers also believe that physical punishment is less harmful than the verbal insult and humiliation which they have to resort to instead. Teachers feel that it is unjust to ban corporal punishment at school, while it is practiced with cruelty at home and at the work place with no interference from the law. They claim that the constant threat of being reported, and even falsely accused, ties their hands and puts children and their parents in a more powerful position than their own.

While mothers generally look negatively at physical discipline at work, some fathers consider it a necessary tool for teaching working boys discipline and making responsible men of them. Cruel beating, however, is not excusable. Some school boys also consider beating by employers as a legitimate way of educating children and fair punishment when the child makes mistakes. Others, however, reject the idea of being punished or insulted by employers and consider it abusive, unlike punishment given by their fathers which is, in their view, acceptable as a normal way of discipline. Most working children approve of corporal punishment at work as long as it is seen as helping them learn new skills. A boy says, *“as long as I am learning, I do not care whether I am beaten or not,”* and another boy alarmingly declares, *“he is hiring me so it is his right to treat me anyway he wants.”*

6.2. Predictive Models for Child Abuse at Home

Section 3.1 in Chapter 3 showed that physical discipline at home is very common in the studied communities. A smaller number of children have to suffer regularly from severe forms of punishment. One path to providing protection to children subjected to abuse or those at high risk of abuse is to develop rules to identify such children. One way of providing protection to children subjected to abuse or those at high risk of abuse is to develop rules to identify such children. The study of determinants, using regression analysis, is applied to achieve this end. In the statistical terms, determinants are the characteristics that can be used to identify children at risk, rather than factors that are assumed to result in the abuse. Analysis of determinants is based on the association between variables not on any underlying causation. However, using a sound theoretical understanding to inform the regression analysis, causation could be reasonably inferred from associations. Hence, determinants to be uncovered through the data analysis in this section will be called ‘risk’ and ‘protective’ factors for physical abuse at home.

Proposed Determinants

Informed by the ecological framework, determinants are classified into three levels: the child level, the family and the household level, and the neighborhood and area level. The list of studied determinants, grouped by level, is presented below.

Level 1: The Child

Sex; age; number of siblings; birth order; whether in school or out of school; whether economically active (ever worked) or not economically active (never worked); disability or chronic illness

Level 2: The Family and the Household

Level 2.a: The Family

Whether the child's father is a member of the household; whether the child's mother is a member of the household; intra-family relationship (strong versus weak empathy and whether there is intra-family hostility); child-discipline values (accepting violence versus rejecting violence); child-rearing attitudes (child-centered versus adult-centered).

Level 2.b: The Household

Sex of household head; educational level of head; employment status of head (whether permanently employed, non-permanently employed, or unemployed); socioeconomic level; economic security; crowding (number of household members per room); privacy (whether or not kitchen or toilet utilities are shared with other households); living difficulties measured by the number of problems the household is facing (such as pests, infrequent water supply, problems with electricity or plumbing, lack of sun or fresh air ventilation in the house); physical security of housing.

Level 3: The Community

Level 3.a: The Neighborhood

Whether newly settled or not (measured by average duration of residence in area per household); socioeconomic level; economic security of residents; employment security of residents; economic variability within neighborhood; relationship between neighbors (whether bad or not); fights (whether frequent or not; whether including hand blows; whether including use of weapons); social and economic interdependency; child discipline values; child-rearing attitudes.

Level 3.b: The Area

Governorate; whether intervention (served by the Child Protection Project) or control (not served); living conditions in the area (good or poor).¹

Some of the determinants suggested above are not simply measured using factual questions. Multiple-item scales are used to infer such latent constructs, as discussed in the following subsections.

Household socioeconomic status

This indicator is based on the ownership of 11 durable goods. K-mean cluster analysis is used to classify the household sample into two groups: "middle class" and "low class". Households included in the "low" group are classified as poor. It is assuring to note that the intervention and control groups do not differ significantly in the proportion of poor households (57% in the intervention group compared to 54% in the control group). Several housing characteristics are found to be related to the classification according to socioeconomic status.

Household Economic security

A cluster analysis is also used to distinguish two groups of households using two statements about the sufficiency of income: need for borrowing money, and capacity to save money for unexpected expenses. As might be expected, it is found that households headed by females or by individuals not permanently employed are more likely to be classified in the insecure group.

¹ See the sample design in section 2.1 of Chapter 2.

Intra-family relationship

A set of 13 statements measuring relationships between family members are presented to household informants: two of the statements measure hostility among family members, while the other 11 measure within-family empathy.

K-means cluster analysis is used to classify households according to their empathy level into two groups. The two groups are assumed to be characterized by strong empathy and weak empathy, respectively. The two statements representing hostility are also used through cluster analysis to classify households into hostile and non-hostile.

Child discipline beliefs and child-rearing attitudes

Household informants are presented with 50 statements and are asked to state whether they agree or disagree with each. Half of the statements refer to rearing boys and the other half refer to rearing girls. Respondents tend to give the same answers for boys and girls. The statements could be classified into three sets, and a principal component analysis has confirmed the hypothesized patterns. Each of the three sets uncovers one dimension on which child-rearing ideals could be rated. The three dimensions are:

1. Corporal punishment as the most effective way for improving children's behavior.
2. Pro-adult child-rearing values: high expectations from children, enforcing respect and good behavior
3. Pro-child child-rearing values: respecting children's rights, expressing parental love

Some statements can be classified in more than one dimension. For example an attitude that carrying a baby too often would spoil the baby is a negative indicator for pro-child value (ignores the need of the child) and a positive indicator for pro-adult value (emphasizes the need of the parent to rest from the burden of carrying the baby).

The number of positive answers to statements belonging to each of the three sets are counted and then converted to dichotomous variables.

Violent child-rearing is gauged with 14 statements (7 for each sex). Two categories are constructed: rejects violence (0 statement accepted), accepts violence (at least one statement accepted).

A family is classified in the pro-adult category if the informant answers in favor of pro-adult child-rearing at least 13 of the 24 statements. Otherwise the family is classified in the non-pro-adult category.

A family is classified in the pro-child category if the informant answers in favor of pro-child child-rearing at least 9 of the 18 statements. Otherwise the family is classified in the non-pro-child category.

Families showing evidence of being pro-adult and non-pro-child are classified to have adult-centered values. Families showing evidence of being pro-child and non-pro-adult are classified to have child-centered values. Families showing evidence of both or neither are classified into a neutral category. It is found that violent child discipline values differ significantly among the three groups. The proportion rejecting violence does not exceed 15% of families in the adult-centered and the neutral groups, while it reaches 45% of families in the child-centered group.

The original non-categorized scales for pro-adult and pro-child attitudes are used to construct two neighborhood-level indices for childrearing attitudes.

Neighborhood interdependency

Household informants are asked three questions regarding whom they would place trust in to share problems, to help taking care of the house or children, or to borrow money from. The fraction mentioning neighbors is calculated for each cluster of 25 households. Principal component analysis is used to construct an index of neighbor inter-dependence from the three fractions.

The Predictive Models

Stepwise multiple logistic models are fitted to elucidate the effect of individual risk factors and identify the best set of predictors of child physical abuse. Two response variables are chosen. The first is whether the child was subjected to any physical punishment at home during the year preceding the survey, while the second is whether the child was subjected to the severest types of physical punishment at home during the year preceding the survey. Severe types of physical discipline include knifing, scalding, knocking down, beating severely, kicking or punching, and tying up. The classification is based on two criteria, the potential physical and/or psychological harm for the child and the social acceptance of specific types of punishment as gauged by their prevalence rates.

It should be emphasized that singling out some types of physical abuse as severe does not mean that the other types are acceptable. The stand adopted here is that no kind of treatment that involves inflicting physical pain on the child is justifiable or tolerable. The use of intensity grades is employed not to distinguish between acts but rather between children. The premises is that children subjected to acts of physical maltreatment that are less conforming to what is socially accepted (that is acts described here as severe) are in more pressing need for protection than children subjected to more conformist acts. It cannot be overstated that we consider all children subjected to physical maltreatment to be in need of protection. Grades are tools for prioritizing and targeting, not for exclusion.

Appendix B Tables B.1 and B.2 present the bivariate relationships of the two response variables with selected categorical explanatory variables. Many of the associations found significant in these two tables disappear, or even reverse, when other variables are controlled using multiple regression. The regression results are shown in Appendix Tables B.3 and B.4. Models are also fitted to the sample stratified into four age groups (Tables B.5 to B.8 for any physical punishment and Tables B.9 to B.12 for severe punishment). Several interactions with age are found. Findings are summarized below.

In the all-age model for any physical abuse, 21 variables are selected as the best set of predictors. These variables combined are able to correctly classify 88% of the sampled children, identifying 96% of the cases of physical abuse. For children 0-4, ten variables can correctly classify 87% of children. Seven variables can correctly classify 98% of sampled children in the age group 5-8. Five variables are found significant predictors of abuse among children 9-12, and they together classify 99% of the children. Among children 13-17, 95% of cases of physical abuse can be identified using 15 significant predictors.

In the all-age model for severe physical punishment, 16 variables are selected as the best set of predictors. These variables combined are able to identify 57% of the cases of physical

abuse in the sample. Stratification by age group improves the predictive power of the model. For children 0-4, 16 variables can correctly identify 84% of abuse cases. Sixteen variables can identify 80% of abused children in the age group 5-8. The variables examined lose their power of prediction among older children. Only five variables are found significant predictors of severe abuse among children 9-12, and they together identify 46% of the abuse cases. Among children 13-17, 59% of cases of physical abuse can be identified using 10 significant predictors. It seems that severe abuse of older children is more determined by the unusual circumstances of individual cases.

Child Level

Age: There is an inverse U-shaped relationship between age and exposure to physical punishment at home. During the first years of life, the risk of physical punishment increases rapidly with age, and then stabilizes until it starts to decline slowly during adolescence.

Gender: In the overall model, female children seem to be exposed to less physical punishment than males. The gender differential is not significant in any age group, however. Generally speaking, there is no significant gender difference in the likelihood of severe physical punishment. Among children 5-8, however, male children seem to be slightly less subjected to severe physical punishment than females.

Number of siblings and birth order: Physical punishment increases when the number of children increases. Number of siblings is not significant within any of the four age groups, however. First born children are more exposed to any physical punishment than children of higher order. Controlling for other variables, birth order is not a significant predictor of severe physical abuse.

Schooling: Children over age 9 enrolled in schools are more at risk of any physical abuse and of severe physical abuse. (See Box 6.1)

Economic activity status: Economically active children are less exposed to any physical punishment. Child work does not appear as a significant predictor of severe physical abuse, given the other variables in the models.

Disability and chronic health conditions: Disabled and chronically ill children are significantly more likely to suffer severe physical punishment. This relationship is especially strong among children 5-8 and 13-17. Whether disability triggers abuse or abuse causes disability is a question worth further investigation. It cannot be answered using a cross-sectional design, however.

The existence of a disabled child in the family puts stress on family members, including children whether disabled or not. The burden of having a disabled child is stressed by mothers participating in focus group discussions. NGO social workers note that disabled children are treated badly by their parents, mainly because they are not a source of income like healthy children who could work. Parents lock them up and tie them to beds. Sick children are also considered a burden.

Box 6.1. Double Jeopardy: Schooling and Risk of Maltreatment

Children enrolled in schools are subjected to a high level of physical and verbal maltreatment (see sections 4.1. and 4.2.). They are also more at risk of being physically and emotionally maltreated at home. The school system and practices, as well as the weak interaction between school and family, seem to put double pressure on school children. As a mother participating in focus group discussion puts it, *“the boy is beaten at school, so he escapes to the street and as a result is beaten at home”*. When school teachers complain of a child, many parents will beat the child and/or ask teachers to be harsher with him or her. School boys in focus group discussions say that some teachers punish children by ordering them to crawl on the floor. When the child goes home with a dirty uniform he is punished by his mother. On the other hand, negligent parents could harm their children at school, for example a school boy complains of his mother who wakes him late on the morning of an exam.

For illiterate and poor parents, the cost of education is too high. Because parents cannot help their children studying, they are forced into paying for tutoring. Since many parents choose not to send their children to work during the school year, the cost is seen to be higher. Furthermore, the high unemployment rate among educated young adults results in a heightened perception of the low economic return of education. Still, most parents aspire to educating their children as their sole hope for upward social mobility. The pressure on parents of high cost and abortive aspirations is expressed in pressuring their children by expectations which are too high (see section 3.2 for some evidence of parental pressure). Falling short of these expectations exposes children to severe punishment at home. For it is perceived that, as parents in focus group discussions put it, *“it is the responsibility of kids in school to study and to succeed as a reward for their parents’ efforts”*. The child who fails to succeed, even if he or she does his or her best, is indeed in trouble. Physical punishment and humiliation at school and at home is his or her double jeopardy. They may not even get a second chance. As said in a teachers’ focus group discussion, *“those classified as low achievers are neglected, they are given bad marks before reading their answer sheets.”*

Sometimes, people connect disability and illness to bad temper. Classified as difficult, the sick child is subjected to severe maltreatment, which would only reinforce any violent disposition he or she already has. (See Box 6.2)

Disabled and sick children are also exposed to insult and discrimination at school, according to teachers’ reports. Some teachers may even accuse sick children of faking the illness in order to avoid class. For example when one teacher mentions nocturnal enuresis among consequences of child abuse, another retorts that children do it on purpose to keep going out to the toilet.

The relationship between physical abuse and each of schooling, work, and poor health, seems to suggest a positive relationship between cost of children and exposure to physical punishment.

Family and Household Level

Composition: In the overall model of any physical abuse, living with mother increases the risk of physical abuse. This may be due to the fact that mothers are the main discipliner in the studied areas. There is an interaction between age and the effect of co-residence with mother. Young children (age 0-4) living with their mothers are less exposed to physical punishment while older children (13-17) living with their mothers are more exposed to physical punishment. Children under 13 residing with their fathers are significantly less likely to suffer severe physical abuse. In the bivariate relationship, it appears as if children are more at risk of severe physical punishment than if they are living in female-headed households, a conclusion not supported by the regression results.

The negative relationship between residing with father and severe physical abuse might appear to challenge the common wisdom that fathers are the abusers and mothers are the protectors. It should be noted, however, that mothers are the main discipliner of children in the studied communities, and the absence of fathers put more stress on mothers. Absence of fathers and the gender of the household head are proxies of the stress level in which the household adults live and reflect how children are treated.

There is also evidence that the absence of the father could increase the aggression of mothers in their attempt to play the father's role. In focus group discussions, mothers say that strict discipline is needed more when the father is absent.

Socioeconomic factors: Children in non-poor households, in the studied areas, are more exposed to physical punishment. From bivariate tabulations, it appears as if children are more at risk of severe punishment when they live in households of lower socioeconomic status. This observation is not supported when other variables are included. The multiple regression analysis shows that the employment status of the head of the household might be the dominant factor in the relationship between socioeconomic status and the risk of severe punishment. Risk is highest for children living in households headed by individuals who work in non-permanent jobs.

Education of the household head is significantly related to the likelihood of severe punishment, though the relationship is not straightforward. Children living in households headed by individuals with no or just primary education seem to be more subjected to severe punishment than those with intermediate education. A higher education, on the other hand, is not a protective factor for children younger than 13 years old.

Poverty, as calculated from ownership of durable goods, is not related to the likelihood of severe punishment. For adolescents, poverty might even be a protective factor.

Box 6.2. The Sick Child's Ordeal – Case Study

Disability, poor health, and weak posture are supposed to make children more in need for kind and tender treatment. Evidence, however, suggests that disabled and sick children are subjected to greater physical abuse. Among factors that precipitate abuse of sick children is the belief that sick children are bad-tempered and more difficult to manage, as the following case study demonstrates.

A.Z. is a 12 years old boy, the eldest of three siblings, who is brought for evaluation by his mother for extreme naughtiness. The psychological evaluation of A.Z. has not revealed significant troubles except for the fact that his mother had severe bleeding and anemia while she was pregnant with him. A.Z. has recurrent headaches which brain electroencephalogram indicated as epileptic discharges. On examination, A.Z. is calm and peaceful. He is polite and does not fidget or misbehave during the interview.

His mother and the supervisors in the NGO community center insist that A.Z. is a difficult child and attribute his naughtiness to the fact that he has epilepsy and is on antiepileptic treatment. A.Z.'s scholastic achievement is also poor.

The psychiatrist has the impression that A.Z.'s naughtiness, which is thought to be aggression and misconduct by his mother and supervisors, is within the expected range of behavior in that age. However, his medical condition seems to have affected the way his parents and teachers perceive him. A.Z. is partly entrapped in the psychological sequelae of having a medical label which in this case is brain disorder.

The psychiatrist believes that psycho-education for the family is very much needed in this case to eliminate the detrimental effects of labeling the child's mental state and to show the parents that the disorder can be treated and the importance of offering support and help to the child to help with the treatment.

Housing characteristics: Children over 9 years living in crowded households are more at risk of any physical punishment and of severe punishment. On the other hand, crowded households seem to be a protective factor for young children. This may be because crowded households alleviate the burden of caring for young children.

Living in a house with shared utilities slightly decreases the risk of severe punishment, especially for children 5-8. The strongest determinants of risk, however, are the physical safety of the housing and the ease of living, measured by the number of problems the household is facing. Children living in households facing more living problems, including problems with building safety, are more likely to be subjected to any physical punishment as well as to severe physical punishment. This relationship is consistent across all age groups and is not weakened by the inclusion of other socioeconomic factors at the household or the area level.

Intra-family relationships: Children living in families enjoying strong empathy appear, from the bivariate relationship, as if they are less exposed to physical abuse. Controlling for

other variables in the model, however, strong intra-familial empathy is in fact correlated with higher risk of any physical punishment. Focusing on severe physical punishment, however, it is found that strong empathy among family members is indeed a potent protective measure of children. Hostility between family members increases the likelihood of any physical abuse for children in the age group 5-8. Children, especially after age 12, are more subject to severe physical abuse if they are living in families showing evidence of a hostile relationship.

Intra-family hostility is not only a risk factor of physical abuse; it is itself a kind of child maltreatment. Spousal violence is seen by participants of fathers' focus group discussions as a type of child abuse and many participants relate incidences when children suffer because of spousal conflict. The emotional impact of watching their mothers beaten could negatively affect children. Children could also get physically hurt when trying to help their mothers. School boys also mention family conflict as a risk factor for child abuse. Spousal conflict can also result in marriage dissolution through divorce, separation, or desertion. Residing in single-parent households, as shown above, is positively related to physical abuse.

Child-rearing values: Children are more exposed to physical punishment in households where corporal punishment is endorsed. The relationship with severe punishment is not as straightforward, however. Table B.2 shows that children are more severely punished in households where violent ways of discipline are embraced. However, the multiple regression analysis indicates that this factor does not add to the other structure and relational variables, it is simply the mechanism through which they affect child discipline practices. It could be concluded that when parents get so stressed and abuse their children as a result of that stress, they develop an attitude that what they are doing to their children is the best way of bringing them up.

Another kind of child-rearing value, on the other hand, seems to add significantly to the risk of severe means of discipline. Attitudes towards child-rearing that stress the needs of adults and downplay the needs and rights of children are strong predictors of both any and severe physical discipline.

Neighborhood and Area Level

Location and quality of physical environment: These two variables do not add to the prediction of the risk of severe punishment. Even the bivariate relationship does not show any significant differential by Governorate or by the living conditions of the area. Any physical punishment seems to be slightly more prevalent in areas with better conditions, though children under 5 are more physically abused in areas with worse conditions.

Economic characteristics of neighborhood: Children who are residing in areas with a higher fraction of poor and economically insecure households are more at risk of any physical abuse. No consistent relationship between economic characteristics of the neighborhood and the risk of severe child abuse is apparent from the regression analysis. A higher fraction of economically secure households in the neighborhood is predictive of a lower risk of severe physical abuse among children younger than 5 but a risk factor among children older than 12. Among children 9-12, it is the fraction of non-poor households that is a protective factor of severe physical abuse.

Child-rearing values prevalent in the neighborhood: Severe physical abuse is more likely in neighborhoods that show evidence of stronger pro-adult child-rearing values. For children

under 5, a lower risk of abuse is correlated with stronger pro-child child-rearing values and less acceptance of violent child discipline at the neighborhood level.

Social characteristics of the neighborhood: The indices used to measure social cohesion at the neighborhood level generally failed to predict risk of child abuse. However, children 5-8 seem to be affected by neighborhood-level social relations. Risk of severe abuse is higher in neighborhoods experiencing violent fights in which weapons, such as knives and razor blades, are used. In addition, children are less at risk in settings where there is more inter-dependence between neighbors. The neighborhood effects on children are further discussed in the next section.

Child Protection Project: Children living in areas served by the CPP are at significantly lower risk of severe physical abuse. This relationship is consistently true for children in different age groups. A closer look at the pattern of relationship shows that it is the recognition of an NGO in the neighborhood which is connected to lower risk, not the residence in an area targeted by CPP. (See Box 6.3)

Conclusion

Many of the patterns of relationships discussed above point to a common underlying risk factor: stress. Caring for disabled children, being a single-parent, insecurity of employment, living in insecure house, and facing multiple living problems result in elevated levels of stress. The fact that stressed parents would unjustifiably abuse their children is also recognized by members of focus group discussions. As a working mother puts it, *“I come from work so tense and suffocated; my only ventilation is through beating my children”*.

6.3. Neighborhood Effects

Around 18 percent of respondents in the sampled households consider the relationship among neighbors in their communities as bad or very bad, as shown in Table 6.2. Localities differ vary largely in this regard. El-Nahda, El-Salam, and Massaken Miseilhi suffer the worst social harmony, with one fifth or more of respondents reporting bad relationship among neighbors. Quarrels and fights among neighbors are common in all localities. Overall, more than 70 percent of respondents in the household sample report inter-neighbor fights, with 30 percent reporting frequent fights, although the prevalence differs largely across the 12 localities. Table 6.2 focuses on violent fights, and shows that 69% of SCND respondents report the occurrence of disputes that are settled through hand fighting and 42% report the occurrence of fights using weapons or sharp objects such as knives and razor blades. As might be expected, violent fights are most common in the three neighborhoods most lacking in social harmony: El-Nahda, El-Salam, and Massaken Miseilhi. But they are also very common in neighborhoods not reported as lacking harmony, such as Ein Helwan and El-Tobgia. Fathers in focus group discussions also mention that street fights with knives, swords, and home-made petrol bombs. In these circumstances, peaceful residents do not try to intervene to stop the fight – as is the custom in inner city neighborhoods.

Adults in such a violent environment feel helpless and can fear losing their children's respect. As a response, fathers may become stern and violent with their own children in order to give vent to their feeling of helplessness. Or, alternatively, they may avoid embarrassing encounters with their children by becoming emotionally detached. In violent settings, fathers,

hence, tend to be either physically abusive or emotionally negligent of their children. Parents also tend to be overprotective of their children in risky neighborhoods²

² Shonkoff, J. P. and Phillips, D. A. (2000) *From Neurons to Neighborhoods: the Science of Early Childhood Development*, Washington D.C., USA: National Academic Press.

Box 6.3. The Impact of the Child Protection Project

Data show a significant difference between intervention and control areas with respect to the prevalence of the severest types of physical abuse at home, in favor of the areas served by the Child Protection Project (CPP). The question is whether this effect could indeed be attributed to CPP.

Interviewed household informants were asked whether they know of any NGO active in their neighborhood. The following table shows the prevalence of severe physical punishment according to recognition of active NGOs.

| Area | Is there an NGO in your area? | % of children severely abused |
|---------|-------------------------------|-------------------------------|
| CPP | Yes (35.1%) | 28.9 |
| | No (64.9%) | 37.3 |
| Non CPP | Yes (20.4%) | 18.9 |
| | No (79.6%) | 41.5 |

The difference between those recognizing the existence of the NGO and those who do not, is significant in both groups of areas. Among those recognizing no NGO activities, there is no significant difference between CPP and non-CPP areas. On the other hand, among those recognizing the activities of NGOs, severe physical abuse is significantly lower in non-CPP areas than in CPP areas.

These results can be interpreted as follows. Children are less abused in households aware of NGOs active in their neighborhoods, whether or not the area is systematically served by the Child Protection Project. NGOs seem to help alleviate stress which is a main precipitating factor of child abuse. If anything, the impact is stronger in areas not targeted by the CPP. This might be due to the greater resonance of the NGOs in CPP targeted areas, which make families more aware of them. In non-targeted areas, recognition of an NGO might be more closely related to recognition and benefiting from its child-related services. It should be noted that the control areas are adjacent to the CPP targeted areas. Hence, some of the impact of NGOs in these control areas could be traced to extended CPP-related activities.

NGOs affiliated with CPP do not address physical abuse of children explicitly. This might explain the lack of significant impact on the prevalence of any physical abuse. Severe physical abuse, on the other hand, usually results in manifest physical and emotional injuries that show those children who are at risk. It is hoped that the impact of the CPP will be extended to protect children from all kinds of abuse.

How does CPP protect children from physical abuse? Interviews with teachers and social workers indicate that one pathway is through providing children with a much needed space where they can express themselves and interact peacefully with friends in a safe and nourishing environment. Among other things, this helps children be better-tempered and to develop better manners. All things being equal, better-tempered children are less exposed to abuse. CPP activities also help parents with the pressing needs of bringing-up children under adverse social and economical conditions. By focusing on children, CPP services could help off-set the adult-centered culture that prevail in the served neighborhoods (see Box 3.2). The project, however, has to operate within the adult-centered context. For example, social workers say that girls participating in the NGO social activities have to work late at night at their homes to finish their domestic chores in order to have some leisure time.

6.4. Child Violent Orientation

Violent children attract severe punishment and abuse. However, most violent children are not born with violent tendencies. Child abuse breeds hostility in children against their abusive parents as well as against the world at large³

³ Meadows, S. (1986) *Understanding Child Development: Psychological Perspectives in an Interdisciplinary Field of Inquiry*, New York, USA: Routledge.

Table 6.2. Percentages of respondents reporting bad relationships, quarrels, and violent quarrels among residents in their neighborhood (SCND household survey)

| Governorate and Area | Percentage reporting bad relationships | Percentage reporting violent quarrels (using hands) | Percentage reporting very violent quarrels (using weapons) |
|--------------------------|--|---|--|
| Total | 18.1 | 68.6 | 41.7 |
| Cairo | 19.6 | 71.8 | 43.8 |
| Ezbat El-Walda | 0.0 | 47.6 | 4.8 |
| Arab Ghoneim | 0.0 | 50.9 | 12.7 |
| Ein Helwan | 7.4 | 70.4 | 50.0 |
| El-Nahda | 23.0 | 82.7 | 67.3 |
| South El-Tebeen | 0.0 | 28.6 | 0.0 |
| El-Salam | 21.3 | 70.8 | 39.2 |
| Alexandria | 3.7 | 36.4 | 20.9 |
| Mawa El-Sayadeen | 8.3 | 45.5 | 25.0 |
| El-Tobgia | 0.0 | 66.7 | 66.7 |
| El-Senousi | 0.0 | 35.3 | 31.3 |
| Gheit El-Enab | 1.6 | 29.7 | 10.9 |
| Eshash El-Seka El-Hadeed | 0.0 | 25.0 | 14.3 |
| Massaken Miseilhi | 25.0 | 80.0 | 75.0 |

Table 6.3. Percentage of respondents reporting that their neighborhood is not safe for children and percentage reporting the occurrence of crimes/accidents within the last five years (SCND household survey)

| Governorate and Area | Percentage reporting that neighborhood is unsafe for children* | Percentage reporting the occurrence of crime/accident within the last 5 years |
|--------------------------|--|---|
| Total | 61.9 | 50.1 |
| Cairo | 66.4 | 53.4 |
| Ezbat El-Walda | 23.8 | 14.3 |
| Arab Ghoneim | 29.1 | 23.6 |
| Ein Helwan | 66.7 | 51.9 |
| El-Nahda | 74.8 | 60.9 |
| South El-Tebeen | 30.8 | 7.7 |
| El-Salam | 68.2 | 54.8 |
| Alexandria | 16.4 | 18.3 |
| Mawa El-Sayadeen | 18.2 | 9.1 |
| El-Tobgia | 33.3 | 33.3 |
| El-Senousi | 41.2 | 17.6 |
| Gheit El-Enab | 6.3 | 17.5 |
| Eshash El-Seka El-Hadeed | 14.3 | 12.5 |
| Massaken Miseilhi | 40.0 | 40.0 |

* Among those reporting unsafe neighborhood, 75.0% mention drugs, 65.8% mention quarrels and fights, and 16.5% mention rape, sexual assaults or sexual harassment.

Box 6.4. Neighborhoods of Risk

Some of the areas covered by the study are fraught with different kinds of problems. Mawaa El-Sayadeen, Kom El-Shakafa and El-Kabbany areas in Alexandria seem to suffer from violence and degraded morality. Newly developed neighborhoods that are used to shelter displaced families, like El-Nahda and El-Salam in Cairo, are particularly problematic. Fights, accidents and crimes are more prevalent in these neighborhoods. Social disintegration, manifested in hostility, distrust, frequent fights and low neighbor interdependence, characterizes these new mosaic communities. Children in these neighborhoods are at greater risk of abuse for many reasons. They are directly subjected to street violence and sexual abuse. They are also indirectly affected. Parents in high risk neighborhoods tend to be more abusive to their children for multiple reasons. Firstly, as expressed repeatedly in focus group discussions, parents feel a need to protect their children from the bad influence of the street through sterner discipline. Secondly, parents feel themselves under stress and they ventilate that stress through being violent towards their children. Thirdly, the violent culture penetrates all aspects of life and makes domestic violence seem normal and acceptable. Fourthly, social disintegration negates social accountability, a main factor in establishing a community in which neighbors could interfere to protect children from abusive parents.

Lack of safe outlets for leisure activity is another risk factor. As an Alexandrian father says, *“our kids cannot enjoy the sea because taking them to the beach would cost lots of money we cannot afford.”* Working Alexandrian boys, not served by the Maritime Scouts Association, complain of the fee they have to pay to use Kabbary Youth Center to play football. They consider the nominal fee of half a pound unaffordable. Missing safe accessible outlets for their energies, children become susceptible to bad peer influence and could engage in risky behaviors.

The neighborhoods covered by the study share a sense of being on the city periphery, spatially as well as socially. Poverty is not the main problem in these neighborhoods, but rather isolation and insecurity.

7. Child Protection Systems

After presenting evidence on child abuse in the studied communities and examining precipitating factors that put some children at elevated risk of abuse, channels for protection need to be investigated. According to the ecological framework (see Figure 1.1), the protective environment does not stop at the local level but extends to factors at play in the national setting. This chapter, hence, starts with some glimpses into existing national systems that deal with child abuse, including preventive as well as protective measures. The roles played by both governmental and non-governmental bodies are discussed. The second part of the chapter focuses on protection systems at the local level. In particular, roles played by different stake holders are investigated. By stake holders, is meant those with rights and those with duties, including the community at large. The first part draws mainly on the findings of the policy analysis part of the study, while the second part uses findings from quantitative and qualitative field study (see Chapter 2).

7.1. The National Setting

As will be shown below, efforts by governmental and non-governmental agencies to combat child abuse are not negligible. However, such efforts need to be coordinated to become effective, to cover geographically all areas and community sectors, and to avoid abundance of services in one area and scarcity in another.

Another feature that will be clear from the exposition is that prevention is not given due emphasis. It is always easier to prevent a problem rather than to attempt to solve it. Prevention works not only at the individual level (the micro level), but also at the community level (the macro level). For example, community development programs could readily address problems such as child labor, street children, and delinquency, as well as mainstream violence.

Laws and Legislation

Egypt has been a party to the Convention on the Rights of the Child (CRC) since 1990. In addition, Egypt has ratified the two optional protocols of the CRC. As such, and according to Article 161 of the Egyptian Constitution, the CRC is considered a part of Egyptian legislation.

The Egyptian legislation explicitly addresses the issue of abuse. Egypt's civil law guarantees complete personal rights at birth to all individuals. Accordingly, criminal penalty law covers children with protection from abusive practices resulting in manifest injuries or in eminent danger. In some cases, such as rape, sexual molestation and drug trafficking, victimizing a child is considered an aggravating circumstance that necessitates a harsher penalty. The Child Code, in addition, guarantees preeminence to the child's best interest and states that children have the right to be protected from exposure to risk by their parents or guardians.

Egyptian legislation, however, does not generally extend prohibition to all abusive practices regardless of the existence of manifest complications or eminent risk¹

¹ Amendments to the Child Code, proposed by NCCM, are currently under consideration at the parliament. These amendments fix many of the shortcomings addressed in this report.

bylaws. Physical punishment in schools, however, is explicitly forbidden by the Ministerial Decree 515 of year 1998.

Child labor is one area where legislation is most advanced. Both the Child Code and the Labor Code explicitly address the economic activities of children and lays down the conditions according to which employing children is permitted. The Child Code (Law No. 12 for the year 1996) includes a chapter on child labor (Chapter One of Part V – articles 64-69). The Unified Labor Code (Law No. 12 for the year 2003) also includes a chapter on child labor (Chapter Three of Part VI of Book II – articles 98-103). Other articles in other chapters of the law also have some bearing on child labor. The two laws do not contradict each other and their provisions are almost identical, often with the same wording.

Article 4 of the Labor Law states explicitly that the law as a whole does not apply to domiciliary service workers and to those working for their families. Unfortunately, a large portion of child labor, amounting to perhaps a majority of working children, is done for the children's own family business. Also, paid domestic services for other families are often performed by boys and, especially, girls under 18 years of age, and they are known to be subject to a multitude of forms of abuse. These two categories are not covered by the law from the outset. In addition, article 103 (of the chapter on child labor) states that the provisions of the mentioned chapter do not apply to children working in agriculture. So, a large majority of working children are deprived of the legal protection offered by law to workers in general and to working children in particular.

A Ministerial Decree (No. 118 for the year 2003) on child labor provides further elaboration including prohibition of child labor in hazardous occupations, enumerating 44 categories of occupations, activities or workplaces on the prohibited list. Additional categories are added for children below 16 years of age.

In addition to laws and ministerial decrees, a series of international conventions signed and ratified by the Egyptian state, and are therefore considered to be part and parcel of its prevailing legislation, are applicable to child labor. The most important of these conventions are the convention on setting the minimum age for child labor at 15 years (1973), with the possible reduction of this age to 14 years in developing countries, and the convention on prohibition of the worst forms of child labor (1999), prohibiting illegal and immoral forms of child labor as well as those hazardous to children's health.

The minimum age for child labor is set by the Egyptian law at 14 years or the age of completion of basic education, whichever is higher. In practice, this means that the minimum age is 15 years, since admission to primary education is not allowed before the age of 6, and basic education (primary + preparatory) has been extended to 9 years (6 primary + 3 preparatory) instead of 8. However, the law allows the starting of training at the age of 12 years, a potential pitfall allowing circumvention of the law.

Children should not work for more than 6 hours daily, and breaks for rest and meals should not be less than one hour daily in total. The child should not work for more than 4 hours uninterrupted. Children should not work extra hours, on holidays or during the time period from 7 p.m. (8 p.m. in Child Law) to 7 a.m. In particular, physical discipline is not generally criminalized, with the exception of whipping which is banned. Employers should notify authorities about children facilities employing children, the nature of their work and the names of their supervisors.

The above mentioned ministerial decree also provides that employers have to arrange for a medical checkup of children by the General Authority for Health Insurance. This checkup is to be performed before employment as well as periodically (once every year, at least) and at the end of employment. This medical examination aims at assessing fitness for work, guidance to work assignments appropriate for health, checking for occupational diseases or injuries and the maintenance of the physical fitness of working children. In case of disease or injury, employers have to provide treatment. Working children have to be oriented about safety regulations and supervised to ensure their compliance. Meals are to be provided according to given specifications.

National Policies

National Council for Childhood and Motherhood

Strategizing and developing policy directions for child protection falls within the mandate of the National Council for Childhood and Motherhood. The NCCM is also responsible for coordinating the child protection policies in relevant governmental bodies, such as the Ministry of Interior, the Ministry of Justice, the Ministry of Social Solidarity, the Ministry of Education, the Ministry of Health, and the Ministry of Manpower and Labor. The NCCM works closely with NGOs. For years, the NCCM has been active in developing national strategies, guiding national policies, and piloting pioneer programs in several child protection areas. Focal protective issues tackled by the NCCM include child labor, street children, and disabled children. There has also been a focus on the girl child, especially with the declaration of 2003 as Year of the Girl Child. Three violations of girls' rights are tackled: exclusion from education, female circumcision, and early marriage.

The last years has witnessed an increased focus by the NCCM on protecting children from violence. The new focus extends beyond female genital mutilation, street children, and child labor to include all forms of violence at home, at school, on the street and at institutions. In particular, the five-year plan for the period 2002/03-2006/07 includes an explicit component addressing the issue of violence against children and child abuse. A number of programs piloted or supported by the NCCM address violence at school and child abuse at work. The pioneering Child Help Line, discussed further in the next section on reporting, was inaugurated in 2005.

Initiating a national dialogue in order to address the issue of child abuse candidly using a participatory approach could be considered among the major contributions of NCCM efforts. Egypt was the host of the Middle East and North Africa regional consultancy meeting in 2005 as part of the preparation of the UN study on violence against children. A national steering committee has been formed and there have been serious steps in developing a national plan of action, to be adopted by the NCCM as the supreme national agency for coordination and monitoring.

Ministry of Education

In the last decade the Ministry of Education has manifested a marked interest in dealing with the problem of school violence, whether it is violence perpetrated by teachers or other school staff on students, or violence among school children themselves. A ministerial decree, with the explicit title of "Prevention of Violence in Schools" was issued (Ministerial Decree No. 591, issued on 17/11/1998). This decree prohibits corporal punishment and all other forms of maltreatment at school. However, it would be fair to mention that earlier laws and

decrees in Egypt, going back even to the nineteenth century, also prohibited corporal punishment at school, but maltreatment continued and still continues despite laws and decrees, as evidenced by the Child Help Line calls (during school year 2005/06, 80 teachers were suspended because of their maltreatment of children who complained through the Help Line, either by themselves or through their guardians), and as evidenced by the quantitative and qualitative findings of the current study.

The Ministry of Education also adopts a preventive strategy to reduce the magnitude of violence to children, not only in schools but also within families. This is carried out through programs conducted by the General Directorate for Social Education. This general directorate has satellite offices in all educational district directorates (257 all over Egypt). In each school there is one or more social worker functioning under the supervision and guidance of those offices.

One of the interesting programs conducted by the General Directorate for Social Education is that of “Education for Parents”, addressed to both parents and children, especially adolescent children. This program is implemented through group meetings to inform and discuss with parents the proper approaches for dealing with their children.

Another program is labeled: “Basic Skills Needed by Students to Face Challenges of Our Time”. This program aims at helping them acquire additional skills and attitudes, including a readiness to accept differences, resolve conflicts and avoid violence.

School broadcasting, school magazines and school activity groups are also made use of to reinforce attitudes against violence or to combat certain behaviors related to violence such as smoking and drug addiction.

Schools, through the General Directorate for Social Education, cooperate with the National Council for Childhood and Motherhood to implement a large scale program for “Protecting Youth from the Risks of Addiction”.

A recent ministerial decree (Decree No. 334, issued on 14/09/2006) reorganized the Parents Teachers Associations (PTAs), changing their names to “Councils of Trustees, Parents and Teachers” along with modifying their mandate. The new mandate includes support of school activities and follow-up implementation to develop the personalities of students and encourage their ability to face negative phenomena they might encounter such as smoking, addiction and violence (Article 4-E).

Ministry of Manpower and Labor

The Ministry of Manpower and Labor, and its directorates in governorates, exercise their regulatory functions mainly through labor inspectors carrying out in-situ field inspections. They are vested with the legal powers needed to carry out their duties. However, because of the insufficient numbers of inspectors, inspection visits to establishments are infrequent, sometimes once every year or even every two years, therefore, irregularities may pass undetected.

Since child labor is of special national significance, a specialized directorate was established in 1990 called the Child Labor Unit. The name was later changed to the Child Welfare Unit then to the current name of the Child Labor Inspection Directorate. The mandate of this directorate is to draw up policies, plans and programs for child labor inspection in collaboration with Labor Directorates in governorates, and to follow up the implementation and evaluation of those plans through periodical reports and field visits.

The Child Labor Inspection Directorate has planned an integrated project on the welfare of the working child in collaboration with the International Labor Organization (ILO). This project is being implemented in collaboration with a number of NGOs.

The central directorate at the headquarters of the Ministry of Labor is mirrored by provincial directorates within the General Directorate of Labor in each governorate. These include labor inspectors specializing in child labor inspection. One of the most successful examples which we have been able to visit is that of Gharbia governorate. Upon request of the Labor Directorate, the Governor of Gharbia has created a “Local Council for Welfare of Working Children in Gharbia”, chaired by the Governor himself and including as members the directors of labor, education, youth and sports, health, social solidarity, culture, illiteracy eradication as well as representatives of businessmen, NGOs, the National Council for Childhood and Motherhood and the Local Council for Women, to coordinate efforts for the welfare of working children.

A computerized database has been created in Gharbia to include all legally working children. The database is continuously updated. As of September 2006, it covers 3,763 children. Extrapolating from this figure (Gharbia population is about 6% of the Egyptian population), a rough estimate of legally working children in Egypt could be about 65,000 children, a small minority of all working children. This might suggest that the database is still far from covering all working children in Gharbia. And this could be explained by observing that only legally employed children are covered.

Each legally working child is provided with an identity card, including his or her personal data and photo. The card is actually a 16-page booklet with separate pages allocated to different service directorates: health, education, etc. Through the card, the child is enabled to obtain health, sport, recreational and other services, as well as to monitor his employment status.

Non-governmental organizations significantly contribute in these welfare activities. By October 2006, 14 NGOs in Gharbia were contributing. Collaboration with other agencies has had fruitful results. A concrete example is that of a joint research with the Educational Reform Project (ERP) to identify causes of dropout from school to enter the labor market. The Gharbia example is rated by the Ministry of Labor as one of the best, but its success implies the possibility of it being replicated in other governorates.

Reporting and Case Handling

Reporting

No periodic reports are available in Egypt regarding child abuse or even child deaths due to violence². Responding to the UN Secretary-General questionnaire on violence against children, the Ministry of Interior has provided information on the number of reported cases involving violence against children that are investigated. The total number of cases investigated during the period from 2000 to 2003 was 265 cases only. The under-reporting is starkly evident.

It is worth noting that a short version of the questionnaires developed as a part of the current study (Appendix A) can be used, if applied periodically on a national sample, to

² An Egyptian NGO; Land Center for Human Rights, publishes periodic reports on violence against children in Egypt. The report does not use formal national statistics, but rather depends on cases reported in daily and weekly Egyptian newspapers.

generate estimates for child abuse. In order to illustrate this capability, a set of indicators are developed that cover a number of aspects of child abuse in different settings. The list of indicators, along with estimates obtained for the study areas, is presented in Appendix C.

The Egyptian law gives the right to anyone who witnesses a crime against children to report it to the police or public prosecutor. Reporting is obligatory for public employees who, while performing their public duties, witness or know of such crimes. However, there are no explicit mechanisms for reporting. Children have the right to file complaints, but the available mechanisms for doing so are not child-friendly.

In cases of manifest child abuse that have been brought for the care to medical centers, reporting to the police is obligatory. Physicians interviewed in the field study had witnessed a large number of cases involving child abuse, including such injuries as burns, broken bones from child beating and also a case of a raped child. They have also treated a number of injuries resulting from child fights at school and in the street. When asked how they identified cases of abuse, physicians mention that some types of injury can suggest abuse, for example marks denoting biting or cigarette burns. Physicians can also identify abuse through directly asking the injured child. Cases of abuse are discovered in the Emergency Room, and in other hospital departments like general surgery, orthopedics, and skin and venereal departments. Physicians attend to these cases medically and refer the case to a social worker or a psychiatrist as a follow up with the child and the family. There is no formal protocol for dealing with cases, but it is left to doctors' discretion. However, severe cases are referred to forensic medicine. These include death, rape, handicapping injuries, head injuries, wounds caused by knives or work tools, and cases attributed to parental negligence or criminal acts. These cases have to be reported to the police and the hospital drops the case after delivering the file to the police.

An interviewed physician admitted to be more reluctant to report cases identified in private practice to the police because parents could react violently and destroy the clinic. Another physician says that there is no problem with reporting a case identified at a private clinic. What is feared is the trouble from the police if the physician fails to report the case.

Child Help Line (CHL)

The Child Help Line, or hotline 16000, is a pioneering intervention piloted by the NCCM to enhance the identification and reporting of child maltreatment. The program was launched by the Egyptian First Lady H.E. Suzanne Mubarak on June 30, 2005. The CHL is a toll-free hotline receiving calls 24 hours a day. The program is operated by the NCCM. The figures that follow refer to a one-year period (July 1, 2005 – June 30, 2006), the first year of the program.

Calls are received by a group of specialized trained staff at a central hall at the NCCM headquarters. Calls are screened, referred to appropriate agencies (including the NCCM itself) and followed up to ensure that satisfactory actions have been taken. When launched the service covered the governorates of Cairo, Giza, Qalyubia and Alexandria, except for female genital mutilation calls which could be received from any governorate. The service has gradually expanded to cover all Egyptian governorates. Agencies to which complaints are referred include: the Ministries of Interior, Social Solidarity, Justice, Education, Health (including Health Insurance) and Labor as well as Governors, Al Azhar, the Prime Minister's Office, the United Nations Organization for Refugees, as well as a group of select non-

governmental organizations, who received appropriate orientation to fulfill this function. Overall, about 320 persons share in responding to problems brought forth by calls.

During the specified first year of activity, CHL operators received 10,996 genuine calls, i.e. notifications of acts defined as falling within child protection jurisdiction, with a daily average of 30 calls only. Only a minor fraction of calls were explicitly classified as child maltreatment. However, child abuse could be classed under other categories such as addiction, behavioral problems, upbringing problems, and psychological problems.

Mothers are the callers in the majority of cases (61.6%), followed by fathers (15.1%), and siblings or other relatives (11.2%). Neighbors and others unrelated to the child come next (8.4%). Children themselves call in only 4% of the cases. It is noteworthy that the Help Line received 928 calls through the year from persons unrelated to the child with the problem. This implies that a sector of the community perceives child welfare as a community problem, the responsibility of every citizen, not just a family matter not to be tackled outside home boundaries. This is a positive departure from traditional attitudes.

The field study has investigated public knowledge of and its attitude towards the Child Help Line as well as other channels for child protection that caregivers and children may resort to in case of need. The results are presented in Tables 7.1 and 7.2. The Child Help Line is still very far from being known to either adults or children³

³ A strong media campaign advocating the Child Help Line started after the field study ended. Now knowledge of the service is expected to be much higher than the levels presented in this report.

Table 7.1. Knowledge of and attitude towards Child Help Hotline [CHL] (SCND household and school surveys)

| | Percentage of adult respondents | Percentage of school children |
|--------------------------|---------------------------------|-------------------------------|
| Ever heard of CHL | | |
| Total | 5.5 | 2.4 |
| Cairo | 5.7 | 2.5 |
| Alexandria | 3.7 | 2.1 |
| Would use CHL | | |
| Total | 51.1 | 63.4 |
| Cairo | 53.4 | 67.9 |
| Alexandria | 27.8 | 48.6 |

Table 7.2. Channels for protection (SCND household survey)

| Institution | Percentage expecting the institution to solve a community problem | | | Percentage who would call the institution for child protection | | |
|---------------------------|---|------------|-------|--|------------|-------|
| | Cairo | Alexandria | Total | Cairo | Alexandria | Total |
| Local governmental | 34.5 | 38.1 | 34.9 | - | - | - |
| Police | - | - | - | 7.6 | 23.6 | 9.0 |
| Medical | - | - | - | 70.5 | 80.3 | 71.4 |
| Community, NGO | 76.7 | 52.3 | 74.5 | 1.4 | 0.9 | 1.3 |
| None | 16.5 | 8.1 | 15.8 | 20.2 | 5.2 | 18.9 |

responses contrast sharply with respondents' answers to the question on their expectations of who would solve a general (non-child related) emergency in their neighborhood. In this latter case, the Ministry of Social Solidarity carries out its child protective role through the directorates of the General Directorate for Social Defense and the Directorate for Child and Family Social Defense. Another striking observation was that the proportion who expected that the general problem would be solved by neither was lower than the percentage expecting Social Defense in case of a child-related emergency.

The General Directorate for Social Defense (GDSD) is affiliated to the central directorate of Social Welfare, one of the central directorates of the Ministry of Social Solidarity (formerly called the Ministry of Social Affairs). The essential mandate of the GDSD is to provide care to delinquent citizens or to those at risk of becoming delinquent. Thus, its role is preventive as well as curative. Its services are provided to all citizens, but we are concerned here only with those offered to children, i.e., citizens under 18 years of age.

The basic philosophy underlying the GDSD activities is that of considering individuals who have transgressed the law, especially children, as citizens who need rehabilitation, rather than criminals who are to be punished. The GDSD works closely with the Police (Ministry of Interior) and Juvenile Courts (Ministry of Justice). The GDSD includes 12 directorates. Activities related to children are covered by the Social Welfare Directorate but other GDSD directorates support these activities.

The Social Welfare Directorate essentially deals with children classified by courts or law enforcers as delinquent juveniles. According to the Ministry of Interior statistics, the total number of juvenile delinquents was 13,021 in the year 2002. They are mostly males (97.3%), about two thirds were in the age group 7-15 years (64%) and about one third (36%) are in the age group 15-18 years. The most prevalent delinquencies are street begging (41.9%), association with suspects (41.1%), and homelessness (9.5%). Note that none of these necessarily entails unlawful practices and that they are mostly intertwined with child abuse and neglect.

Different types of institutions and service offices are affiliated to the GDSD. They can be classified into two main groups. The first group of institutions is concerned with children in conflict with the law, while children classified as at risk are the concern of the second.

I. Institutions for children in conflict with law

1. Social welfare institutions

These are institutions where children in conflict with law are kept to serve confinement and other freedom depriving sentences imposed by courts. Three types of social welfare institutions are available: open, semi-closed, and closed. One building can accommodate more than one type, especially in governorates other than Greater Cairo. There are 27 social welfare institutions, distributed across 14 governorates.

2. Observation houses

These are 20 houses, located in 17 governorates. They may be separate entities or included within larger social units or institutions. Children in conflict with law whose ages vary between 7 and 18 years are confined there, upon a prosecutorial order, as a preliminary step, before appearing before courts. Social and psychological reports concerning each child are compiled to be presented to courts. Boys and girls are admitted in separate places. Children in conflict with the law may be confined in those houses starting from the age of 7 years, however only children above 15 years may be subjected to provisory incarceration in those houses, since prison sentences can be applied only for those above 15 years of age.

3. Social monitoring and follow-up care offices

These are 221 offices found in all governorates. Their mandate includes the following tasks:

(a) Conducting social investigations of children in conflict with the law, who are to appear before courts, in their “natural” milieu. This role is carried out by those offices for children who have not been confined in the above mentioned “observation houses”.

(b) Follow-up of sanctions specified by courts such as assignment of specific duties, enrollment in vocational training, or judicial probation. Social workers in social monitoring offices have to follow up the implementation of those sanctions and to submit reports to the courts at the end of the sanction period advising on the ending, extending or modifying of sanctions.

(c) Follow-up care services for those who have satisfactorily undergone sanctions or those who were released from social care institutions and are residing within the geographical domain of the offices. These follow-up services are optional for those who need them and not compulsorily imposed.

(d) These offices also have a role in the prevention of delinquency through cooperation with social workers at schools, ministry of labor offices and police agencies. They also conduct studies and do research to draw up a preventive policy for delinquency within the geographical domain of each office.

This last mandate extends the role of social monitoring and follow-up care offices beyond children in conflict with law to children at risk.

II. Institutions for children at risk

1. Hospitality houses

Again, these could be separate entities, or affiliated to larger units or institutions.

Two categories of children reside in these houses:

(a) Children at risk (as defined by Child Law, No. 12 for the year 1996), that courts or prosecutors order to be entrusted to these houses as they are trustworthy guardians.

(b) Children at risk who themselves (or their guardians) request this service.

Care programs provided to children residing in social care facilities include social, psychological, medical, vocational, educational, cultural, sport, artistic and religious care programs in addition to recreational trips and financial support. In some cases follow-up care might be extended after discharge from the facility.

2. Residential Service

The Directorate of Child and Family of the Ministry of Social Solidarity supervises a number of residential services operated by a vast network of NGOs. Children who are essentially deprived of their natural parents and who need such services are offered residential services. Three types are available (figures refer to the year 2003):

(a) Residential nurseries: For children 2-6 years with no families to care for them (41 nurseries accommodating 1,225 children).

(b) Residential facilities: For children 6-18 years with no families capable of providing care for them. This could be because of orphan-hood, family disruption or inability of the family to provide appropriate care. Potential beneficiaries also include lost children whose families could not be traced, and foundlings and toddlers whose parents could not be identified (232 facilities accommodating 7,669 children, 57% males and 43% females).

(c) Substitute families: For children older than 12 years whose biological (original) families are unable to provide appropriate care (fostering 4,394 children).

NGOs' Participation

In previous sections, reference has been made several times to the important role played by NGOs such as their roles as partners with the NCCM in the Child Help Line activities, in addiction prevention programs, in child labor programs and their activities in association with the Social Defense Department of the Ministry of Social Solidarity, the Social Education Department of the Ministry of Education and the Child Labor initiatives of the Ministry of Labor.

Several NGOs (such as CARITAS) have got active programs against specific forms of violence like: female genital mutilation, street children abuse and addiction. However, till now NGOs usually have not directly targeted the problem of mainstream child abuse, i.e., offering immediate help to children exposed to beating or other cruel maltreatment by their

parents, teachers or other guardians. Nevertheless, some NGOs offering help to women exposed to domestic violence also extend their services to children, since violent acts often involve wives and children at the same time. NGOs conducting orientation sessions to parents on pedagogic issues often include the topic of violence and its negative sequela on children. Character-building programs for children are conducted by certain NGOs. These programs help children to gain self confidence and act properly if exposed to, or threatened by, violence.

An interesting example is that offered by the CEWLA Foundation, where about 125 boys and girls attend cultural and recreational programs involving discussion groups, trips, plays, watching video films, etc.,. These programs are to help build their characters, orient them to the principles of the CRC, and to encourage them to request their rights in an effective way whether from local executive councils or schools. Special emphasis is given to the problem of violence. This is paralleled by programs addressed to teachers aimed at transforming schools into child friendly institutions.

7.2. The Local Setting in Study Areas: Stake Holders and Their Roles

The following subsections summarize the main findings from the qualitative part of the field study on the roles perceived by studied communities for different stake holders. These include parents, children, neighbors, physicians, law enforcers, schools, and NGOs.

Parents

Parents in focus group discussions express a sense of helplessness when it comes to protecting their children from violence. When discussing abuse at school, many parents claim that they are prevented from complaining or that their complaints are ridiculed by the school authorities. Mothers discussing maltreatment at work say that employers are in stronger position than parents because they can dismiss the child if his or her parents complain. And because most parents believe that their children are vulnerable to street dangers, they think that the only way to protect children is to keep them at work (for boys) or locked at home (for girls).

There are some promising exceptions, nevertheless. These include: a mother who protected her child through threatening to report an abusive teacher to the education directorate so that the headmistress interfered: parents who reported a corrupt teacher who favored children taking private tutoring so that the teacher was transferred from the school after the investigation: and a father from El-Nahda – a neighborhood rampant with drugs and violence – who proudly says that his daughter is a member of a self-defense club for girls.

Children are not willing to accept helplessness from their parents. Working children blame their parents when they force them to return to work after being insulted by their employer. They recognize that most parents are reluctant to report cases of physical abuse at work. Some children complain of their parents' failure to protect them from abuse from older brothers. A working boy complains that *"my brother unjustly beats me and my mother instead of defending me says that I must have done something wrong."* But even when parents sympathize with the wronged child, this might be of little help. A working girl says, *"when my brother beats me and my father tries to punish him, he escapes and hides in the bathroom or runs to the street; as soon as my father goes to work, my brother starts beating me again."* Some also complain that their parents agree with teachers' claims that they punish children in order to educate them better.

Children

Parents largely perceive children to be in charge of their own happiness. According to parents, children should be satisfied with what they get and be content with whatever their parents can afford. A responsible child is the one who is sensitive to his or her parents' resources and has no needs. School boys echo the same sentiments; children should be obedient and please their parents through better scholastic achievement. Working and earning money is also perceived by school boys as a protective force.

On the positive side, some schoolgirls recognize that they can play an active role in protecting themselves. They relate a story of a number of girls who jointly wrote and signed a complaint to the school principal about a teacher who punished children for not paying tutoring fees and prevented them from attending classes.

Working boys have expressed a pro-active attitude, at least when it comes to sexual abuse. Incidences of reporting rape attempts and sexual transgression to the police are mentioned during the focus group discussions. Working girls perceive that the girl is the one who can stop abuse at work through doing her job properly, being polite, and thus stopping bad treatment by employers. It is not clear, though, what means they consider are at girls' disposal for stopping abuse at work.

On the other hand, NGO social workers do not perceive any active role for children in preventing abuse. Some of them, however, suggest that the issue of abuse should be discussed with children in order to assess their ideas about possible solutions.

Neighbors

When asked whether anyone intervenes to protect a child subjected to punishment at home, 61 percent of surveyed caregivers say that other household members intervene, at least sometimes, while 19 percent report that neighbors might also intervene. A participant in a fathers' focus group discussion relates a story about a boy who was chained to his bed until his leg was broken. It was a neighbor who rescued the boy and took him to the hospital. Some participants feel that no one can interfere to protect an abused child except the grandparents and neighbors who are on good terms with the abusive parents. Neighbors are credited for saving a girl from a rape attempt and for reporting incidents of sexual harassments by school boys.

Neighbors can also act as abusers or helpers of abusive parents. According to fathers, neighbors could help discipline children. Parents may also feel pressured to beat a naughty child to appease a wronged neighbor. Girls complain of neighbors who react with rumors and accusations of their being loose when they are punished by their parents.

Physicians

When discussing hospitalized cases of child abuse, mothers repeatedly mention that physicians could be persuaded or bribed into reporting an abusive case as an accident. Mothers and children could also lie to protect an abusive father. According to a report from a schoolgirl, a beating from her mother injured her eyes but at the hospital the girl claimed that she fell down. Working boys also mention that victims of child abuse at work usually deny being beaten. An interviewed social worker, however, was reported to the police when her daughter injured her chin while playing and was taken to the hospital.

Interviewed physicians believe that their role in addressing the issue of child abuse is limited because they can only identify the case after the harm has been done and because they can only deal with the case medically.

Law enforcers

When discussing the reporting of abusive cases to the police, parents and children in focus group discussions say that they are unlikely to report a case unless it is very severe. And even in such cases, the child and other family members may change their testimony to acquit the abusive parent. Generally, they claim parents who maltreat their children are not deserving of punishment because their intentions are good.

Listening to the stories told during group discussions, one has a sense that the arm of law has not yet extended into the studied areas. Drugs, violent fights, crimes, and prostitution, including child and homosexual prostitution, are talked about as normal facets of life. Law enforcers make only a ghostly appearance. They seem to be used by parents to scare children into obedience and to scare teachers into better treatment of school children.

Schools

School boys mention that they can complain to their teachers who are more understanding than their fathers. Schools also help them by facilitating club membership and extra-curricular activities. The existence of a complaints box is also praised because they can use it to report on incidents of abuse by teachers.

Teachers feel that they could have a major role in identifying cases of child abuse, since they can note injured, aggressive, absentee, or dejected children. Social workers agree with that view. However, teachers feel that their potential role is limited by the lack of cooperation within the school as well as between school and home. In a model situation, teachers would report to the school social worker who would then investigate the case and work with the child's family to solve the problem. Instead, teachers complain of ineffective social workers, authoritarian headmasters, aggressive parents and an overloaded work schedule. Teachers also feel handicapped by the small appreciation they get from children and parents which they attribute to the effect of adverse media messages and lack of support from their superiors at the Ministry of Education.

Interviewed school social workers seem to be attentive to child abuse. They tell of a number of incidents when they have investigated cases of injured children and identified cases of abuse at home. Social workers can also identify cases through investigating absenteeism from school. Children whose parents are divorced are recognized as at risk and monitored closely. Social workers feel that they can have a role in listening to children's complaints and talking with parents about how to treat their children better. However, they say that few children resort to the social worker. In addition, parents may be insolent when they try to talk with them. According to reports by school children, social workers seem to play a good role in dealing with bullying and with fights among children. Their role in addressing abuse by teachers is less appreciated.

School teachers point out a couple of issues that could be addressed through a school system more attentive to the needs of poor children. One issue is the money for the transfer fees: this expense can oblige parents to keep their children at a school very far from their homes. Another issue is school meals. These seem to be irregular and of low quality, though they are seen as a potential attraction for children as well as providing them with much

needed nourishment. Teachers also suggest that schools could have an active role in fighting exploitive child work through productive programs that provide children with skills as well as earnings. Schools could also attend to the needs of working children through school re-entry programs. Encouraging children with high scholastic aptitude with financial rewards is also proposed as a way to fight dropping out and child work.

Pre-school education is mentioned by working boys as a means to prepare them for learning. The idea of a head-start for less privileged children is worth further investigation.

NGOs

Providing a safe space and a healthy social environment for deprived and disadvantaged children is an important contribution by NGOs. This has been clear in discussions by working boys served by the Maritime Scout Association. Children regularly participating in NGO social activities develop a sense of comradeship and solidarity. After leaving the NGO, they play together. As evidence of their solidarity children relate that when breaking glass while playing football, they collected money to fix it. The Association provides working children with many services such as meals, clothing, medical check-ups, literacy classes, and arts classes. It encourages them through trips, sports, and celebrating birthdays. Spending time with friends under loving supervision is what children seem to appreciate the most, however. As working boys say, *“we come to talk.”*

Working girls supervised by the Helwan Red Crescent Association also appreciate what they get from the NGO which provides them with literacy classes, helps them learn new skills, engages them in sports and other leisure activities, and promotes their life skills through special educative programs. Like boys, working girls appreciate the friendships they develop through the NGO's social activities. NGO social workers also look positively at the difference they make to children's lives. Working children, however, complain of disruptive children who usually have bad manners and are trouble-makers. They wish the personnel at the NGOs could force more discipline on those children.

Social workers of the Child Protection Project believe that they cannot fight child labor but they regard positively their role in fighting dropping out of school.

School teachers comment on the roles played by NGOs, mainly Caritas and Sidi Ali El-Sammak, in helping to keep children in school. Meals, school supplies, financial assistance, and night classes are provided to disadvantaged children.

The Child Protection Project does not explicitly address child abuse. However, cases of abuse can be brought to the attention of NGO social workers while they are visiting homes or working with disadvantaged families. Collaborating health centers and school social workers also refer cases of abuse to the NGOs.

8. Synthesis of Main Findings and their Policy Implications

The previous chapters presented and discussed the main findings of different parts of the study. The objective of this final chapter is to develop a set of policy recommendations based on these findings. A coherent synthesis of these detailed and diverse findings is the first step towards this objective. Before compiling the synthesis and attempting to translate it into policy directions, an important question has to be answered about the relevance of findings of a localized study to the formulation of national policies. Hence, the chapter starts by discussing the relevance of the findings, then proceeds to summarizing them and ends with a set of proposed policy directions based on these findings.¹

8.1. Relevance of Study Findings

One way to view the current study is as a pilot study of child abuse that has many unique features. New questionnaires and qualitative data collection topic guides were developed and tested through triangulation. The study addressed the different types of child abuse in three different settings (home, school, work) as well as the interaction among the different types and settings. It attempted to explain the underlying causes of child abuse, adopting a comprehensive ecological framework. Protective systems and policy issues were also investigated.

The main objective of the study, however, went beyond piloting a new framework, design and methods. As indicated by its main title, the study aspired to inform national policies for child protection. A legitimate question hence arises about the validity of a localized study investigating a phenomenon in a few under-privileged neighborhoods as a tool to guide national policies. Indeed, some of the estimates obtained for the prevalence of different abusive practices could be thought of as the upper limit of the prevalence among Egyptian children, for example that four out of every five children are beaten at home and nine out of every ten are beaten at school at least once each year². Nevertheless, the fact that the indicators of child abuse obtained from the study are not representative of the national average does not compromise the validity of the study. A rights-based approach to policy formulation necessitates a focus on inequity, which implies giving more weight to social segments that suffer from higher levels of abuse³

¹ Members of the Advisory Committee of the study have significantly contributed to the development of this chapter. At the invitation of H.E. Ambassador Moushira Khattab, the NCCM Secretary-General, a first draft was put before members of the National Steering Committee at their meeting on 26 December, 2006. Inputs from Ambassador Khattab and members of the Steering Committee have been incorporated in the current version.

² The qualification “at least once” is implicit in yearly prevalence rates. The high weekly and monthly prevalence as well as the high percentage of children subjected to multiple types of physical punishment, however, clearly indicate that children who are beaten once are beaten on regular basis.

³ It should be noted that not all indicators of child abuse in the studied areas are expected to be higher than the national average. For example, exploitation by teachers is likely to be higher among school children from better-off families, FGM and educational neglect are higher in Upper Egypt, and economical exploitation might be higher in rural areas.

The relevance of the findings of the current localized study extends beyond piloting and describing the worst situations and practices. Some of the findings support other evidence and informal impressions about the national level. These include, for example, societal acceptance of corporal punishment, exposure to mass media campaigns against FGM and the recent decline in its practice, and the spread of private tutoring in schools and the corruptive practices associated to it. The systems of child protection – or rather lack of such systems – reviewed in the previous chapter are especially relevant to the overall national context.

The studied communities are among the sources of street children, who are pushed to the street out of their residence in these and similar localities. The household survey does not include children who are not currently residing in the sampled households, and hence it is not possible to estimate the number of children who have abandoned their original families and are currently living in the street. However, the survey has inquired about incidences when children currently residing in the households have run away. Caregivers' reports show that 4% of boys in the age group 13-17 have previously run away, though they returned to their families. From this percentage, and allowing for underreporting (especially for girls), one can infer that a not insignificant number of children previously residing in the studied households might currently be among street children. The qualitative part of the study has also confirmed that running away is a possible reaction to child abuse at home and school. This observation is confirmed by studies interviewing street children⁴. The phenomenon of street children is a high-priority issue in Egypt's child protection efforts. Policies that target children at risk of running away are among the most effective preventive policies for street children.

To sum up, the relevance of the study findings to the national setting stems from the following characteristics:

1. The adoption of the ecological framework has enabled the identification of neighborhood and community attributes that represent risk or protective factors for child abuse. Results can hence be generalized to other neighborhoods and communities exhibiting similar attributes.
2. The focus on more deprived communities is consistent with the rights-based approach that aims at reducing inequity and reaching all children without discrimination. National averages typically tend to conceal inequities, especially when small pockets of marginalized areas are missed in large national surveys. Although we do not claim that the studied communities are representative of all disadvantaged areas in Egypt, it could be assumed that factors identified in the present study as risk factors – such as stress, social disintegration, and the lack of secure public space, would play similar roles in other marginalized communities. Study findings reveal many characteristics that are not confined to the studied communities but are widespread in the Egyptian context. Such characteristics as societal attitudes, school systems, and specialized systems for child protection, affect a majority of Egyptian children regardless of their socioeconomic backgrounds.
4. Policies that protect deprived children from abuse at home, school and work decrease the likelihood of children running away from their families. As such, these policies are effective preventive measures for street children, a priority child protection issue in Egypt.

8.2. Synthesis of Main Findings

The following points summarize the main policy-relevant findings of the study.

⁴ Mehanna, S. and Al-Sharmani, M. (2005) Participatory Assessment Research of Violence against Street Children, unpublished report, Cairo, Egypt: Social Research Center, the American University in Cairo.

1. Children, in the studied communities, are subject to a host of abusive means of discipline at home and at school. Most children are regularly exposed to harsh beating using hands or hard objects as well as to verbal abuse, humiliation and insults. Some children are occasionally subject to severe physical abuse, such as kicking, stabbing and burning. Some children are also exposed to threats and pressure, while others suffer from emotional neglect. The exposure to physical and emotional abuse results, for some children, in a strong hostility towards their homes and schools, which pushes them to the street with all its risks, violence, and degradation. If the dangers of the street bring children back home, they are received by harsher maltreatment that drives them back again into street, trapped in a vicious cycle of abuse and violence.
2. Disabled children and children who are physically weak or suffer from chronic health problems and children with low scholastic aptitude are exposed to greater physical and emotional abuse at home and at school.
3. There is a consensus among participants in the qualitative study that sexual abuse is the gravest risk a child faces. However, the discussion of actual cases of sexual abuse reveals an alarming tendency for denial, and an even more alarming tendency to blame the victims.
4. The majority of parents who maltreat their children do this under the illusion that what they do is in their children's best interest. The fact that the great majority of parents are interested in the wellbeing of their children is reflected in a very high level of school enrolment and in parents' relatively high expenditure on education (mainly tutoring) and on health care. Such parents abuse their children for one of two reasons. The first is a misconception that violence is necessary for discipline and good breeding as it guarantees children's submission to authority and protects them from bad peer influence. The second is parents' frustration when the child fails to do what they consider his or her duty – mainly to succeed in school.
5. Some parents, on the other hand, abuse their children to serve their own self-interest. Some parents maltreat their children to vent their own stress and frustration. Others exploit their children by forcing them to drop out of school and go to work.
6. Violence at schools, likewise, is with good or bad intentions. Some teachers use corporal punishment because they are ignorant of constructive ways of discipline. Others abuse children and discriminate among them in order to force them into private or school-based tutoring.
7. Children aspire to better understanding, appreciation, and respect from their parents and teachers. They, however, tend to accept corporal punishment as a proper way of discipline. Most children think that the best they can do to prevent abusive treatment is to submit to authority and be obedient. Few others may consider rebelling, dropping out of school, or running away from home. Generally, children do not think of themselves as holders of basic inalienable rights to be protected from abuse and to receive humane treatment that preserves their dignity and nourishes their healthy development.
8. Families living in stress and insecurity, economically or socially, tend to be more abusive of their children. The main risk factor is not the lack of financial resources at present but

rather the lack of the capability to secure the future, or in other words, the lack of the security embedded in human and social capital.

9. Children residing in marginalized areas where streets and public spaces lack security and whose resident families lack social harmony and integration are at a higher risk of violence and abuse. There are many reasons for such higher risk. Parents tend to be over-protective of their children in unsafe neighborhoods, and this is usually expressed in sterner measures of discipline. Adults in such areas live under constant stress and frustration that is usually expressed in intra-familial violence. Lacking safe avenues for their energies, children become hyperactive and aggressive, and this puts more pressure on their parents and teachers.
10. Working boys and their parents look favorably on work as their best option to help them acquire vocational skills and build their personalities. It also keeps them away from the risks of leisure and bad peer influences, and provides them with much needed financial resources. Work, however, exposes children to abuse and danger. It conflicts with their studies, and detracts from what should be normal childhood experiences. The fact that work seems such an attractive alternative stems from the failure of schools to provide a healthy environment and useful education.
11. The efforts advocating against female genital mutilation are reaping their returns. There is still a long way to go extend the view that FGM is an abusive practice and to fight ambivalence. Males, young and old, have been least affected by advocacy efforts against FGM. The lack of conviction and cooperation from males; i.e. present fathers and future husbands, is threatening the campaigns. For many, especially males, anti-FGM campaigns are associated with western culture and imperialism. Efforts to combat this association by using religious leaders are not very effective, though, because they themselves tend to be ambivalent, unconvinced or make statements that compromise the advocacy. On the other hand, most parents trust physicians to make the decision whether and how to perform the operation. Unlike the majority of opponents to FGM, physicians tend to view the practice as abusive in human-rights term rather than on the potential medical complications.
12. Both boys and girls suffer from abuse. However, there is a gender dimension to child abuse expressed in the types of abuse children face. Boys are more exposed to physical abuse, to profane verbal abuse, and to inter-children fights, while girls struggle more with insults, humiliation, discrimination, and from emotional bullying. Girls are less likely to drop out from school than boys. Domestic chores, however, interfere with girls' studying. Both boys and girls share in household chores, but the burden is much heavier on girls. Child labor, on the other hand, is far less prevalent among girls than among boys. When girls work, however, they may suffer worse treatment than boys. It seems that poverty is what mainly pushes girls into work, usually in abusive circumstances.
13. The Child Protection Project, though not yet addressing child abuse explicitly, has a positive preventive impact. This might be attributed to multiple factors: adopting a child-centered integrated approach, helping reduce the cost of raising children, and providing a friendly safe environment for children.
14. Notwithstanding several interventions aiming at child protection, there is still a lack of a national rights-based vision of child protection that combines prevention and protection

through integrated far-reaching policies. There is confusion between children at risk and children in conflict with the law. There are no clear procedures for reporting cases of child abuse. The Child Help Line is a good initiative, but needs to be integrated within a comprehensive system for child protection in which children and families with complaints can receive adequate services and in which the attainment of care is monitored.

15. Societal acceptance of violence, particularly of corporal punishment as a disciplinary method, presents a major obstacle to efforts towards child protection. On the other hand, societal refusal to accept child neglect and emotional abuse constitutes a promising base upon which child protection advocacy could build.
16. The study findings have identified several incidents of missed opportunities, namely by schools, health professionals, and neighbors. School teachers and social workers are in the best position to identify cases of child abuse at home or at work. The school can also play a significant role in protecting children and prevent abuse through education and advocacy. In schools, children should find a nourishing environment that enhances growth, develops socialization abilities, and encourages active participation. The realities of schools, however, are in stark contrast these ideals. Violence, discrimination, and neglect are what children mostly experience at school. In addition, the protective role of school is negated due to the antagonism between school and home and the problems of the profusion of private and school-based tutoring. Medical doctors, especially private doctors, and pharmacists are also in a position to detect child abuse. Health professionals are trusted by parents, which enables them to play an active role in child protection. Yet, they do not seem to appreciate the roles they can play through education about and prevention of child abuse. Neighbors, especially in settings with strong interdependency and trust, could provide much needed protection for children. Sometimes neighbors do intervene to protect maltreated children, but generally the role that can be played by neighbors and community leaders in protecting children is not recognized.

8.3. Policy Recommendations

The findings of the study summarized above hint at a multitude of entry points to formulate effective policies for child protection. The protective environment framework (Section 2.3) serves as the backbone of the following set of policy recommendations. Protection policies need to be integrated within non-discriminatory social policies. They should combine protection with early identification, effective reporting, case handling, and rehabilitation. Needless to say, the process of policy development should adopt a multi-disciplinary participatory rights-based approach.

1. Build a National Environment Conducive to Non-Violent Practices towards Children

- Address the culture of violence. There is a need to educate parents, teachers and work owners about effective methods of discipline of children which are physically and psychologically non-violent and that respect the dignity and enhance the healthy development of the child. Such education and awareness needs to take place through different channels including the mass media and inter-personal communication. An effective approach to societal education would capitalize on the already existing interest in children and on societal rejection of child neglect and emotional abuse.

- Educate children about their rights. Engender in children the recognition that they are holders of basic rights that they should aspire to and could work peacefully and collectively to secure. Student unions, youth clubs, scout associations, and other participatory avenues for children can be effectively used to this end.
- Encourage candid public discourse on issues of child abuse, including sexual abuse. Special efforts should be directed in the mass-media and other communication channels towards fighting the tendency to blame the victims of sexual abuse. Deprived families and children at risk should be portrayed not as liable to deviance or in need of charity but as citizens holding full rights to wellbeing and an adequate standard of living.

2. *Adopt a Comprehensive and Integrated Framework for Child Protection*⁵

- Embed child protection policies within a comprehensive social policy that targets deprived and marginalized families. They have to adopt a rights-based, integrated and multi-disciplinary approach which includes both preventive and protective components. Corrective social policies and international standards of handling the abused and abusers should be clearly stated in laws.
- Stress CRC guidelines that families should be responsible for child care and development under guidance, support and supervision from the state. In particular, the state in its provision of social security, financial assistance and welfare systems has to include strong child protection programmatic components.
- Emphasize prevention through establishing decentralized monitoring mechanisms that monitor families at risk of breakdown and/or at risk of the child being harmed. Other channels for prevention include providing secure public spaces for children through, for instance, free clubs for children and youths. School buildings and backyards could be used for child leisure activities in summer and after class. Prevention of abuse, as well as protection, can be assisted by informal community-based watchdog groups and safe-house initiatives in neighborhoods suffering from security or child abuse issues.
- Transform the school environment to make it attractive to children and conducive to healthy development. This is to be done through addressing pressing issues at school such as abuse, discrimination, exploitive tutoring and bullying, and the underlying reasons which include lack of school resources, low pay of teachers, and poor tutoring techniques. In addition, there is a need to help deprived children succeed at school through special head-start programs that put them on an equal footing with children with a better socioeconomic background. There is a need, too, for interventions that help children of deprived families stay at school by subsidizing the indirect costs of education. Such transformation of the school environment can capitalize on the ongoing structural changes in school systems, especially the notion of the productive school and the new councils for trustees, parents and teachers.
- Initiate new protection services, as well as upgrade existent ones. Such services include quality counseling centers for families and children and temporary shelters, and

⁵ This part is in accordance with the overarching recommendations of the report of the independent expert for the UN study on violence against children, Pinheiro, P. S. (2006). *World Report on Violence against Children*. Geneva, Switzerland: United Nations Secretary-General's Study on Violence against children.

rehabilitation institutions for abused children. Specialists working in these institutions should receive proper training to help them deal effectively with abused children.

- Sustain current efforts for FGM abandonment as a part of a comprehensive program addressing violence against children adopting a rights-based approach.

3. *Build an Effective Child Protection System for Reporting and Case Handling*

- Develop a flexible decentralized system that reaches children at risk of abuse, neglect and exploitation. The suggestion is a semi-formal system at the local level (district/ village level) that can be used for early detection of cases of children at risk, assessment, referral and rehabilitation; The UNICEF supported Child Protection Project could be adopted in that regard. At local level, schools, medical centers (including private doctors and pharmacists), NGOs, Ministry of Social Solidarity offices, and juvenile police/justice should be assigned clear responsibilities for identification, assessment, rehabilitation and monitoring. In addition, it is essential to secure active involvement of parents and other community members, such as the suggested community-based watchdog groups, as well as religious leaders. Such decentralized monitoring systems, or what could be termed “local child protection units”, are to be connected to a national system for reporting and case handling to which cases are referred when outside the intervention mandate and capacity of the unit.
- Develop a child-friendly national system for reporting and case handling. Mechanisms for identification, assessment and referral of children at risk, such as the child help line and the suggested “local child protection units”, have to be attached to a national system for child protection which would be the referral point for all governmental and non-governmental bodies and give the strong mandate to its employees to identify and interfere with cases of children at risk. In order to be effective, procedures have to be both child-friendly and authoritative. There is a need for a national dialogue which could be led by both NCCM and MOSS in order to identify the best focus for such system. It might be beneficial to attach the protection system to local administrative units, which is the body nearest to the family. Problems with lack of community trust and potential corruption have to be faced, however. The system could also be based in MOSS at centralized and decentralized levels to facilitate the integration with social security and family welfare systems.

Appendix A

Survey Questionnaires

Appendix B
Tables for Determinants of Physical Abuse at Home

Table B.1. Percentage of children physically punished at home during the year preceding the survey by selected explanatory variables (SCND household survey)

| Exploratory Variables ^a | All | Child's Age | | | |
|---|----------|-------------|------|------|-------|
| | children | 0-4 | 5-8 | 9-12 | 13-17 |
| Total (1921) | 81.2 | 68.3 | 94.7 | 92.0 | 72.5 |
| Child level | | | | | |
| Sex | n.s. | n.s. | n.s. | * | n.s. |
| Male (959) | 82.8 | 69.7 | 94.8 | 95.6 | 72.8 |
| Female (962) | 79.7 | 67.1 | 94.4 | 88.8 | 71.9 |
| Number of siblings | n.s. | n.s. | n.s. | n.s. | * |
| 0-2 (1101) | 80.5 | 69.2 | 93.4 | 91.4 | 67.6 |
| 3+ (820) | 82.4 | 65.6 | 96.5 | 93.4 | 75.8 |
| Birth order | * | n.s. | n.s. | n.s. | n.s. |
| First (566) | 84.9 | 73.5 | 95.1 | 93.8 | 78.2 |
| Second or third (884) | 79.3 | 65.4 | 93.4 | 91.1 | 70.0 |
| Fourth or higher (471) | 80.5 | 67.3 | 96.2 | 91.9 | 71.8 |
| Schooling status | *** | | * | *** | n.s. |
| Currently enrolled (1005) | 85.8 | | 92.5 | 93.5 | 73.1 |
| Not currently enrolled (916) | 74.6 | | 97.7 | 33.3 | 69.9 |
| Economic activity | * | | | *** | n.s. |
| Has worked (103) | 71.2 | | | 38.5 | 75.8 |
| Never worked (1818) | 81.8 | | | 93.5 | 71.8 |
| Disability or poor health | n.s. | n.s. | n.s. | ** | * |
| Has disability or chronic problems(190) | 83.8 | 73.5 | 100 | 76.2 | 84.8 |
| No disability/chronic problems (1730) | 80.9 | 67.9 | 94.1 | 93.5 | 70.6 |
| Household & family level | | | | | |
| Sex of household head | n.s. | ** | n.s. | * | n.s. |
| Male (1764) | 81.0 | 67.0 | 94.3 | 91.3 | 73.6 |
| Female (157) | 83.2 | 92.3 | 100 | 100 | 67.4 |
| Lives with father | n.s. | *** | n.s. | n.s. | * |
| Yes (1740) | 81.2 | 64.5 | 94.1 | 92.6 | 75.2 |
| No (181) | 81.5 | 96.7 | 100 | 87.7 | 61.4 |
| Lives with mother | * | * | n.s. | ** | * |
| Yes (1805) | 82.0 | 66.7 | 94.3 | 93.2 | 74.7 |
| No (116) | 74.0 | 82.4 | 100 | 66.7 | 59.7 |
| Education of head | *** | ** | *** | *** | *** |
| No schooling (487) | 86.0 | 80.4 | 100 | 92.9 | 74.2 |
| Primary (610) | 83.6 | 58.3 | 100 | 99.4 | 78.6 |
| Intermediate (672) | 79.8 | 71.9 | 91.4 | 82.2 | 70.7 |
| High (152) | 71.1 | 61.5 | 88.9 | 100 | 41.2 |
| Employment status of head | * | *** | * | *** | * |
| Permanent work (1352) | 80.2 | 64.3 | 93.7 | 89.9 | 74.6 |
| Non-permanent work (260) | 87.9 | 73.7 | 100 | 100 | 86.2 |
| Not working last week (301) | 83.8 | 98.2 | 100 | 100 | 64.3 |

^a Unweighted number of children between parentheses.

Table B.1. (continued)

| Exploratory Variables ^a | All | 0-4 | 5-8 | 9-12 | 13-17 |
|---|------------|------------|------------|-------------|--------------|
| Economic security of household | ** | ** | * | ** | n.s. |
| Insecure (944) | 83.5 | 73.9 | 92.9 | 94.8 | 72.9 |
| Secure (974) | 77.3 | 60.4 | 97.5 | 85.4 | 71.7 |
| Socioeconomic status | n.s. | n.s. | ** | * | n.s. |
| Non-poor (822) | 81.6 | 68.5 | 92.4 | 94.0 | 73.5 |
| Poor (1099) | 80.5 | 68.0 | 99.2 | 88.4 | 70.4 |
| Intra-family empathy | ** | n.s. | * | n.s. | *** |
| Strong (1110) | 78.5 | 65.9 | 96.7 | 90.2 | 65.3 |
| Weak (803) | 84.5 | 70.4 | 91.9 | 94.5 | 82.7 |
| Intra-family conflict | n.s. | ** | n.s. | ** | * |
| Hostile (1494) | 82.1 | 63.1 | 95.4 | 95.3 | 76.3 |
| Non-hostile (426) | 80.0 | 75.5 | 93.0 | 87.8 | 67.6 |
| Child discipline values | *** | ** | *** | ** | *** |
| Rejecting violence (242) | 65.9 | 50.8 | 84.3 | 83.3 | 49.6 |
| Accepting violence (1679) | 84.5 | 70.7 | 96.7 | 94.0 | 79.6 |
| Childrearing values | *** | ** | *** | * | *** |
| Adult-centered (532) | 90.9 | 78.4 | 100 | 95.0 | 91.2 |
| Neutral (896) | 80.7 | 65.1 | 96.8 | 93.4 | 76.3 |
| Child-centered (493) | 70.4 | 61.3 | 85.6 | 87.8 | 39.8 |
| Privacy of living | n.s. | n.s. | n.s. | n.s. | n.s. |
| Private utilities (1528) | 81.3 | 68.8 | 94.4 | 91.9 | 72.5 |
| Shared utilities (393) | 80.0 | 60.0 | 100 | 100 | 73.7 |
| Crowdedness of living quarters | n.s. | * | n.s. | n.s. | n.s. |
| Not crowded (<2 per room) (1134) | 82.3 | 70.7 | 94.0 | 90.9 | 75.4 |
| Crowded (2+ per room) (782) | 78.7 | 60.6 | 96.0 | 96.3 | 66.3 |
| Ease of living | *** | *** | *** | n.s. | *** |
| Not difficult (0-4 problems) (1223) | 76.4 | 59.3 | 90.8 | 90.6 | 64.3 |
| Difficult (5+ problems) (698) | 87.0 | 79.0 | 100 | 94.0 | 79.8 |
| Housing safety | n.s. | n.s. | n.s. | n.s. | n.s. |
| Unsafe housing (332) | 84.4 | 62.5 | 100 | 96.8 | 81.0 |
| Safe housing (1589) | 80.9 | 68.9 | 94.2 | 91.7 | 71.3 |
| Area level | | | | | |
| Governorate | n.s. | * | n.s. | n.s. | n.s. |
| Cairo (1041) | 81.3 | 69.9 | 94.1 | 91.9 | 71.1 |
| Alexandria (880) | 79.9 | 52.3 | 97.3 | 92.9 | 82.7 |
| Served by Child Protection Project | n.s. | *** | n.s. | * | ** |
| Yes (1283) | 79.7 | 54.9 | 92.5 | 95.8 | 79.3 |
| No (638) | 82.4 | 79.1 | 96.1 | 89.7 | 66.7 |
| Area living conditions | n.s. | n.s. | n.s. | n.s. | n.s. |
| Better (870) | 81.1 | 69.2 | 94.1 | 91.3 | 72.1 |
| Worse (1051) | 82.0 | 62.9 | 96.4 | 98.1 | 76.5 |
| Number of children (unweighted) | 1921 | 551 | 421 | 413 | 536 |

n.s. not significant * significant at 0.05 ** significant at 0.005 *** significant at 0.0005

^a Unweighted number of children between parentheses.

Table B.2. Percentage of children physically punished severely at home during the year preceding the survey, by selected explanatory variables (SCND household survey)

| Exploratory Variables | All children | Child's Age | | | |
|-------------------------------------|--------------|-------------|------|------|-------|
| | | 0-4 | 5-8 | 9-12 | 13-17 |
| Total | 35.9 | 47.8 | 38.1 | 32.6 | 25.1 |
| Child level | | | | | |
| Sex | n.s. | n.s. | n.s. | n.s. | n.s. |
| Male | 34.6 | 43.9 | 35.8 | 36.2 | 23.0 |
| Female | 37.2 | 51.6 | 40.9 | 29.6 | 27.0 |
| Number of siblings | n.s. | n.s. | ** | n.s. | * |
| 0-2 | 34.4 | 46.8 | 33.4 | 29.8 | 19.2 |
| 3+ | 38.1 | 50.8 | 47.6 | 37.2 | 28.9 |
| Birth order | n.s. | * | n.s. | * | n.s. |
| First | 38.4 | 55.5 | 44.4 | 28.1 | 20.2 |
| Second or third | 33.0 | 41.0 | 33.3 | 30.1 | 27.4 |
| Fourth or higher | 38.0 | 51.8 | 38.1 | 42.7 | 25.6 |
| Schooling status | ** | | n.s. | n.s. | *** |
| Currently enrolled | 33.2 | | 41.5 | 32.9 | 28.4 |
| Not currently enrolled | 39.7 | | 33.3 | 18.2 | 10.8 |
| Economic activity | * | | | * | n.s. |
| Has worked | 24.0 | | | 7.7 | 25.3 |
| Never worked | 36.6 | | | 33.2 | 25.1 |
| Disability or poor health | *** | n.s. | ** | n.s. | *** |
| Has disability or chronic problems | 50.8 | 61.8 | 59.5 | 35.7 | 49.3 |
| No disability or chronic problems | 34.2 | 46.8 | 35.8 | 32.4 | 21.5 |
| Household & family level | | | | | |
| Sex of household head | *** | *** | n.s. | *** | n.s. |
| Male | 34.6 | 45.6 | 37.3 | 28.5 | 25.6 |
| Female | 47.6 | 92.0 | 52.2 | 68.0 | 23.1 |
| Lives with father | *** | *** | n.s. | *** | n.s. |
| Yes | 34.0 | 43.4 | 37.3 | 28.9 | 26.0 |
| No | 47.5 | 81.4 | 46.3 | 59.6 | 21.6 |
| Lives with mother | n.s. | n.s. | *** | n.s. | n.s. |
| Yes | 35.5 | 47.8 | 35.6 | 32.8 | 25.7 |
| No | 39.1 | 49.0 | 76.9 | 28.6 | 21.1 |
| Education of head | *** | ** | *** | *** | *** |
| No schooling | 37.0 | 66.3 | 49.0 | 38.1 | 6.8 |
| Primary | 44.7 | 50.0 | 48.0 | 45.5 | 39.6 |
| Intermediate | 29.8 | 40.8 | 28.2 | 20.3 | 28.0 |
| High | 33.0 | 42.9 | 50.0 | 20.0 | 2.9 |
| Employment status of head | *** | *** | * | *** | *** |
| Permanent work | 32.5 | 42.1 | 35.9 | 28.1 | 21.9 |
| Non-permanent work | 57.8 | 65.8 | 64.3 | 33.3 | 58.6 |
| Not working last week | 42.9 | 80.0 | 40.5 | 50.6 | 24.1 |

Table B.2. (continued)

| Exploratory Variables | All | 0-4 | 5-8 | 9-12 | 13-17 |
|---|------------|------------|------------|-------------|--------------|
| Economic security of household | ** | ** | n.s. | *** | n.s. |
| Insecure | 38.4 | 53.2 | 36.0 | 40.0 | 24.9 |
| Secure | 31.3 | 39.8 | 41.4 | 15.3 | 25.4 |
| Socioeconomic status | ** | * | n.s. | ** | n.s. |
| Non-poor | 33.6 | 44.0 | 37.2 | 27.5 | 26.2 |
| Poor | 40.3 | 55.2 | 40.5 | 41.3 | 23.0 |
| Intra-family empathy | *** | *** | *** | *** | * |
| Strong | 23.2 | 30.0 | 24.5 | 16.9 | 21.5 |
| Weak | 51.3 | 67.0 | 56.2 | 50.7 | 30.3 |
| Intra-family conflict | *** | * | ** | *** | *** |
| Hostile | 43.1 | 51.7 | 44.3 | 41.6 | 34.6 |
| Non-hostile | 26.0 | 42.5 | 28.7 | 19.9 | 13.1 |
| Child discipline values | *** | *** | n.s. | ** | * |
| Rejecting violence | 24.3 | 22.0 | 45.7 | 17.8 | 17.6 |
| Accepting violence | 38.3 | 51.2 | 36.7 | 35.9 | 27.4 |
| Childrearing values | *** | *** | *** | *** | *** |
| Adult-centered | 45.9 | 61.7 | 56.3 | 33.1 | 33.3 |
| Neutral | 40.2 | 49.3 | 37.8 | 45.5 | 28.5 |
| Child-centered | 16.8 | 24.3 | 18.3 | 17.7 | 6.8 |
| Privacy of living | n.s. | n.s. | n.s. | * | n.s. |
| Private utilities | 35.4 | 48.2 | 37.6 | 31.7 | 24.6 |
| Shared utilities | 45.6 | 40.0 | 50.0 | 58.8 | 36.8 |
| Crowdedness of living quarters | *** | n.s. | n.s. | ** | *** |
| Not crowded (<2 person per room) | 32.8 | 45.9 | 36.0 | 29.0 | 21.1 |
| Crowded (2+ persons per room) | 45.7 | 51.2 | 45.5 | 44.0 | 41.3 |
| Ease of living | *** | *** | *** | *** | n.s. |
| Not difficult (0-4 problems) | 25.5 | 30.1 | 25.3 | 23.9 | 21.8 |
| Difficult (5+ problems) | 48.2 | 69.0 | 55.8 | 44.4 | 28.1 |
| Housing safety | *** | n.s. | *** | n.s. | ** |
| Unsafe housing | 48.8 | 50.0 | 66.7 | 43.3 | 41.3 |
| Safe housing | 34.7 | 47.8 | 35.8 | 31.8 | 22.7 |
| Area level | | | | | |
| Governorate | n.s. | ** | n.s. | n.s. | n.s. |
| Cairo | 36.0 | 50.0 | 37.4 | 32.4 | 23.8 |
| Alexandria | 35.0 | 25.0 | 44.4 | 35.7 | 35.3 |
| Served by Child Protection Project | n.s. | *** | n.s. | * | n.s. |
| Yes | 34.4 | 38.4 | 37.2 | 37.5 | 25.3 |
| No | 37.0 | 55.4 | 39.0 | 29.1 | 24.9 |
| Area living conditions | n.s. | n.s. | n.s. | n.s. | n.s. |
| Better | 35.6 | 48.8 | 36.8 | 31.9 | 25.5 |
| Worse | 37.9 | 41.1 | 47.3 | 38.5 | 22.0 |
| Number of children (unweighted) | 1921 | 551 | 421 | 413 | 536 |

n.s. not significant * significant at 0.05 ** significant at 0.005 *** significant at 0.0005

Table B.3. The best set of determinants for physical punishment at home during the year preceding the survey: summary of stepwise logistic regression model (SCND household survey)

| Variables in the Model | Reference Category | Direction and Significance of effect |
|--|--------------------|--------------------------------------|
| Level 1: Child | | |
| Age (linear effect) | | + *** |
| Age (quadratic effect) | | - *** |
| Sex | Female | |
| Male | | + *** |
| Number of siblings | | + *** |
| Birth order (linear effect) | | - *** |
| Economic Activity | Never worked | |
| Ever worked | | - * |
| Level 2a: Family | | |
| Living with mother | No | |
| Yes | | + ** |
| Intra-family empathy | Weak | |
| Strong | | + * |
| Intra-family hostility | Non-hostile | |
| Hostile | | - * |
| Child discipline values | Accepting violence | |
| Rejecting violence | | - *** |
| Childrearing values | Child-centered | |
| Adult-centered | | + *** |
| Neutral | | + *** |
| Level 2b: Household | | |
| Education of head | High | |
| No education | | - n.s. |
| Primary | | - n.s. |
| Intermediate | | - * |
| Socioeconomic status | Poor | |
| Non-poor | | + *** |
| Crowding (persons per room) | | - * |
| Living difficulties (number of problems) | | + *** |
| Safety of housing | Safe | |
| Unsafe | | + ** |
| Level 3a: Neighborhood | | |
| Fraction of household classified as poor | | + *** |
| Fraction of households classified as economically secure | | - *** |
| Fraction describing neighborhood as economically heterogeneous | | + *** |
| Fraction reporting frequent fights | | - *** |
| Inter-dependency score | | - *** |
| Level 3b: Area | | |
| Quality of life | Worse | |
| Better | | + * |
| Nagelkerke R ² | | 0.482 |
| Overall correct classification | | 88.1 |
| Correct classification among abused children | | 96.4 |
| Correct classification among non-abused children | | 51.6 |

+ odds ratio>1, - odds ratio<1, n.s. not significant, * p-value<0.05, ** p-value<0.005, *** p-value<0.0005

Table B.4. The best set of determinants for severe physical punishment at home during the year preceding the survey: summary of stepwise logistic regression model (SCND household survey)

| Variables in the Model | Reference Category | Direction and Significance of effect |
|--|--------------------|--------------------------------------|
| Level 1: Child | | |
| Age (linear effect) | | + *** |
| Age (quadratic effect) | | - *** |
| Number of siblings | | - * |
| Disability / chronic illness | No | |
| Yes | | + *** |
| Level 2a: Family | | |
| Living with father | No | |
| Yes | | - * |
| Intra-family empathy | Weak | |
| Strong | | - *** |
| Intra-family hostility | Non-hostile | |
| Hostile | | + * |
| Child-rearing values | Child-centered | *** |
| Adult-centered | | + *** |
| Neutral | | + *** |
| Level 2b: Household | | |
| Education of head | High | ** |
| No education | | - ** |
| Primary | | - ** |
| Intermediate | | - *** |
| Employment of head | Not working | ** |
| Permanent work | | - n.s. |
| Non-permanent work | | + n.s. |
| Economic security | Secure | |
| Insecure | | - *** |
| Private utilities | Shared | |
| Private | | + * |
| Living difficulties (number of problems) | | + *** |
| Safety of housing | Safe | |
| Unsafe | | + *** |
| Level 3a: Neighborhood | | |
| Fraction characterizing neighbor relationship as bad | | - *** |
| Mean of scale for pro-adult child-rearing values | | + * |
| Level 3b: Area | | |
| Area served by CPP | No | |
| Yes | | - *** |
| Nagelkerke R ² | | 0.325 |
| Overall correct classification | | 75.0 |
| Correct classification among abused children | | 56.8 |

+ odds ratio>1, - odds ratio<1, n.s. not significant, * p-value<0.05, ** p-value<0.005, *** p-value<0.0005

Table B.5. The best set of determinants for physical punishment at home during the year preceding the survey for children aged 0-4: summary of stepwise logistic regression model (SCND household survey)

| Variables in the Model | Reference Category | Direction and Significance of effect |
|--|--------------------|--------------------------------------|
| Level 1: Child | | |
| Age (linear effect) | | + *** |
| Age (quadratic effect) | | - *** |
| Birth order (linear effect) | | - ** |
| Level 2a: Family | | |
| Living with mother | No | |
| Yes | | - * |
| Child-rearing values | Child-centered | ** |
| Adult-centered | | + * |
| Neutral | | - n.s. |
| Level 2b: Household | | |
| Education of head | High | ** |
| No education | | + n.s. |
| Primary | | - n.s. |
| Intermediate | | + * |
| Employment of head | Not working | *** |
| Permanent work | | - *** |
| Non-permanent work | | - ** |
| Crowding (persons per room) | | - * |
| Living difficulties (number of problems) | | + ** |
| Level 3a: Neighborhood | | |
| No variable included in the model | | |
| Level 3b: Area | | |
| Area served by CPP | No | |
| Yes | | - *** |
| Quality of life | Worse | |
| Better | | - ** |
| Nagelkerke R ² | | 0.676 |
| Overall correct classification | | 87.4 |
| Correct classification among abused children | | 92.6 |
| Correct classification among non-abused children | | 76.4 |

+ odds ratio>1, - odds ratio<1, n.s. not significant, * p-value<0.05, ** p-value<0.005, *** p-value<0.0005

Table B.6. The best set of determinants for physical punishment at home during the year preceding the survey for children aged 5-8: summary of stepwise logistic regression model (SCND household survey)

| Variables in the Model | Reference Category | Direction and Significance of effect |
|--|--------------------|--------------------------------------|
| Level 1: Child | | |
| Disability / chronic illness | No | |
| Yes | | - * |
| Level 2a: Family | | |
| Intra-family empathy | Weak | |
| Strong | | + *** |
| Intra-family hostility | Non-hostile | |
| Hostile | | + *** |
| Child discipline values | Accepting violence | |
| Rejecting violence | | - ** |
| Child-rearing values | Child-centered | |
| Adult-centered | | + ** |
| Neutral | | + *** |
| Level 2b: Household | | |
| No variable included in the model | | |
| Level 3a: Neighborhood | | |
| Mean of scale for pro-adult child-rearing values | | + *** |
| Mean of scale for pro-child child-rearing values | | + *** |
| Level 3b: Area | | |
| No variable included in the model | | |
| Nagelkerke R ² | | 0.644 |
| Overall correct classification | | 98.0 |
| Correct classification among abused children | | 100 |
| Correct classification among non-abused children | | 63.0 |

+ odds ratio>1, - odds ratio<1, n.s. not significant, * p-value<0.05, ** p-value<0.005, *** p-value<0.0005

Table B.7. The best set of determinants for physical punishment at home during the year preceding the survey for children aged 9-12: summary of stepwise logistic regression model (SCND household survey)

| Variables in the Model | Reference Category | Direction and Significance of effect |
|---|--------------------|--------------------------------------|
| Level 1: Child | | |
| Age (linear effect) | | - *** |
| Age (quadratic effect) | | + *** |
| Schooling status | Not enrolled | |
| Currently enrolled | | + *** |
| Level 2a: Family | | |
| No variable included in the model | | |
| Level 2b: Household | | |
| Education of head | High | *** |
| No education | | - n.s. |
| Primary | | - n.s. |
| Intermediate | | - n.s. |
| Crowding (persons per room) | | + ** |
| Level 3a: Neighborhood | | |
| Fraction of households heads non-permanently employed | | + ** |
| Level 3b: Area | | |
| No variable included in the model | | |
| Nagelkerke R ² | | 0.775 |
| Overall correct classification | | 98.6 |
| Correct classification among abused children | | 99.7 |
| Correct classification among non-abused children | | 85.8 |

+ odds ratio>1, - odds ratio<1, n.s. not significant, * p-value<0.05, ** p-value<0.005, *** p-value<0.0005

Table B.8. The best set of determinants for physical punishment at home during the year preceding the survey for children 13-17: summary of stepwise logistic regression model (SCND household survey)

| Variables in the Model | Reference Category | Direction and Significance of effect |
|--|--------------------|--------------------------------------|
| Level 1: Child | | |
| Age (linear effect) | | - *** |
| Birth order (quadratic effect) | | - * |
| Disability / chronic illness | No | |
| Yes | | + * |
| Level 2a: Family | | |
| Living with mother | No | |
| Yes | | + *** |
| Child discipline values | Accepting violence | |
| Rejecting violence | | - *** |
| Child-rearing values | Child-centered | |
| Adult-centered | | + *** |
| Neutral | | + *** |
| Level 2b: Household | | |
| Employment of head | Not working | |
| Permanent work | | + *** |
| Non-permanent work | | - n.s. |
| Privacy of living | Shared utilities | |
| Private utilities | | + *** |
| Living difficulties (number of problems) | | + *** |
| Safety of housing | Safe | |
| Unsafe | | + * |
| Level 3a: Neighborhood | | |
| Mean number of years lived in the neighborhood | | + * |
| Fraction of households classified as economically secure | | + ** |
| Fraction of household heads permanently employed | | + * |
| Fraction describing neighborhood as economically heterogeneous | | + * |
| Level 3b: Area | | |
| Area served by CPP | No | |
| Yes | | + ** |
| Nagelkerke R ² | | 0.665 |
| Overall correct classification | | 90.5 |
| Correct classification among abused children | | 94.6 |
| Correct classification among non-abused children | | 79.5 |

+ odds ratio>1, - odds ratio<1, n.s. not significant, * p-value<0.05, ** p-value<0.005, *** p-value<0.0005

Table B.9. The best set of determinants for severe physical punishment at home during the year preceding the survey for children aged 0-4: summary of stepwise logistic regression model (SCND household survey)

| Variables in the Model | Reference Category | Direction and Significance of effect |
|--|--------------------|--------------------------------------|
| Level 1: Child | | |
| Age (linear effect) | | + *** |
| Age (quadratic effect) | | - *** |
| Level 2a: Family | | |
| Living with father | No | |
| Yes | | - ** |
| Intra-family empathy | Weak | |
| Strong | | - ** |
| Intra-family hostility | Non-hostile | |
| Hostile | | + * |
| Child-rearing values | Child-centered | ** |
| Adult-centered | | + n.s. |
| Neutral | | + ** |
| Level 2b: Household | | |
| Education of head | High | ** |
| No education | | + n.s. |
| Primary | | - * |
| Intermediate | | - n.s. |
| Employment of head | Not working | *** |
| Permanent work | | - ** |
| Non-permanent work | | + n.s. |
| Economic security | Secure | |
| Insecure | | - *** |
| Crowdedness (persons per room) | | - *** |
| Living difficulties (number of problems) | | + *** |
| Safety of housing | Safe | |
| Unsafe | | + *** |
| Level 3a: Neighborhood | | |
| Fraction of households classified as economically secure | | - *** |
| Mean of scale for violent child discipline ideals | | + * |
| Mean of scale for pro-child child-rearing values | | - *** |
| Level 3b: Area | | |
| Area served by CPP | No | |
| Yes | | - ** |
| Quality of life | Worse | |
| Better | | - * |
| Nagelkerke R ² | | 0.719 |
| Overall correct classification | | 88.5 |
| Correct classification among abused children | | 84.1 |

+ odds ratio>1, - odds ratio<1, n.s. not significant, * p-value<0.05, ** p-value<0.005, *** p-value<0.0005

Table B.10. The best set of determinants for severe physical punishment at home during the year preceding the survey for children aged 5-8: summary of stepwise logistic regression model (SCND household survey)

| Variables in the Model | Reference Category | Direction and Significance of effect |
|---|--------------------|--------------------------------------|
| Level 1: Child | | |
| Sex | Female | |
| Male | | - * |
| Birth order (quadratic effect) | | - * |
| Disability / chronic illness | No | |
| Yes | | + *** |
| Level 2a: Family | | |
| Living with mother | No | |
| Yes | | - ** |
| Intra-family empathy | Weak | |
| Strong | | - *** |
| Child-rearing values | Child-centered | |
| Adult-centered | | + * |
| Neutral | | + ** |
| Level 2b: Household | | |
| Education of head | High | |
| No education | | - * |
| Primary | | - * |
| Intermediate | | - *** |
| Economic security | Secure | |
| Insecure | | - *** |
| Private utilities | Shared | |
| Private | | + ** |
| Living difficulties (number of problems) | | + *** |
| Safety of housing | Safe | |
| Unsafe | | + *** |
| Level 3a: Neighborhood | | |
| Fraction reporting occurrence of frequent fights | | - *** |
| Fraction reporting very violent fights (using weapon) | | + * |
| Score of inter-neighbor dependency | | - * |
| Mean of scale for pro-adult child-rearing values | | + * |
| Level 3b: Area | | |
| Area served by CPP | No | |
| Yes | | - *** |
| Nagelkerke R ² | | 0.615 |
| Overall correct classification | | 87.5 |
| Correct classification among abused children | | 80.5 |

+ odds ratio>1, - odds ratio<1, n.s. not significant, * p-value<0.05, ** p-value<0.005, *** p-value<0.0005

Table B.11. The best set of determinants for severe physical punishment at home during the year preceding the survey for children aged 9-12: summary of stepwise logistic regression model (SCND household survey)

| Variables in the Model | Reference Category | Direction and Significance of effect |
|--|--------------------|--------------------------------------|
| Level 1: Child | | |
| No variable included in the model | | |
| Level 2a: Family | | |
| Living with father | No | |
| Yes | | - *** |
| Intra-family empathy | Weak | |
| Strong | | - *** |
| Level 2b: Household | | |
| Education of head | High | * |
| No education | | - n.s. |
| Primary | | - * |
| Intermediate | | - ** |
| Living difficulties (number of problems) | | + *** |
| Level 3a: Neighborhood | | |
| Fraction of households classified as poor | | + *** |
| Level 3b: Area | | |
| No variable included in the model | | |
| Nagelkerke R ² | | 0.324 |
| Overall correct classification | | 73.8 |
| Correct classification among abused children | | 46.1 |

+ odds ratio>1, - odds ratio<1, n.s. not significant, * p-value<0.05, ** p-value<0.005, *** p-value<0.0005

Table B.12. The best set of determinants for severe physical punishment at home during the year preceding the survey for children 13-17: summary of stepwise logistic regression model (SCND household survey)

| Variables in the Model | Reference Category | Direction and Significance of effect |
|--|--------------------|--------------------------------------|
| Level 1: Child | | |
| Schooling status | Not enrolled | |
| Currently enrolled | | + *** |
| Disability / chronic illness | No | |
| Yes | | + *** |
| Level 2a: Family | | |
| Intra-family hostility | Non-hostile | |
| Hostile | | + *** |
| Child-rearing values | Child-centered | *** |
| Adult-centered | | + *** |
| Neutral | | + *** |
| Level 2b: Household | | |
| Education of head | High | *** |
| No education | | - n.s. |
| Primary | | + * |
| Intermediate | | + * |
| Socioeconomic status | Poor | + * |
| Non-poor | | + * |
| Crowdedness (persons per room) | | + *** |
| Safety of housing | Safe | |
| Unsafe | | + ** |
| Level 3a: Neighborhood | | |
| Fraction of households classified as economically secure | | + *** |
| Level 3b: Area | | |
| Area served by CPP | No | |
| Yes | | - *** |
| Nagelkerke R ² | | 0.506 |
| Overall correct classification | | 85.0 |
| Correct classification among abused children | | 58.7 |

+ odds ratio>1, - odds ratio<1, n.s. not significant, * p-value<0.05, ** p-value<0.005, *** p-value<0.0005

Appendix C
Indicators for Child Abuse

| Indicators for Child Abuse * | Total | Males | Females |
|---|--------------|--------------|----------------|
| Child Abuse at Home | | | |
| Physical Abuse at Home | | | |
| 1./h. % of children disciplined at home during the year preceding survey using physical punishment | 81.2 | 82.2 | 79.7 |
| 1./s. % of school children disciplined at home during the year preceding survey using physical punishment | 81.7 | 84.6 | 78.8 |
| 2.a/s. % of school children regularly beaten at home without being faulted | 1.7 | 0.1 | 3.2 |
| 2.b/s. % of school children occasionally beaten at home without being faulted | 2.1 | 0.8 | 3.5 |
| 2.c/s. % of school children ever beaten at home without being faulted | 5.0 | 1.9 | 8.0 |
| Emotional Abuse at Home | | | |
| 3./h.% of children disciplined at home during the year preceding survey using verbal or other emotionally stressful punishment | 90.9 | 90.9 | 90.9 |
| 3./s.% of school children disciplined at home during the year preceding survey using verbal or other emotionally stressful punishment | 55.5 | 55.0 | 56.1 |
| 4. a/s. % of school children regularly yelled at by family members without being faulted | 5.6 | 1.4 | 9.7 |
| 4. b/s. % of school children occasionally yelled at by family members without being faulted | 10.7 | 5.3 | 16.0 |
| 4. c/s. % of school children ever yelled at by family members without being faulted | 21.3 | 9.7 | 32.9 |
| 5. a/s. % of school children regularly insulted by family members without being faulted | 5.2 | 0.5 | 9.7 |
| 5. b/s. % of school children occasionally insulted by family members without being faulted | 6.2 | 1.7 | 10.6 |
| 5. c/s. % of school children ever insulted by family members without being faulted | 13.7 | 3.3 | 23.9 |
| 6. a/s. % of school children feeling strongly alienated at home | 8.5 | 2.2 | 14.7 |
| 6. b/s. % of school children feeling moderately alienated at home | 11.6 | 3.3 | 19.7 |
| 6. c/s. % of school children feeling mildly alienated at home | 20.4 | 13.3 | 27.5 |
| 7./s. % of school children feeling hostile towards family | 5.3 | 1.3 | 9.3 |
| 8./s. % of school children feeling under pressure from family | 18.0 | 5.7 | 30.0 |

* See notes at final page.

| Indicators for Child Abuse | Total | Males | Females |
|--|--------------|--------------|----------------|
| Educational Neglect at Home | | | |
| 9./h. % of children 8+ never enrolled at school | 0.4 | 0.3 | 0.4 |
| 10.a/h. % of ever enrolled children who dropped out before finishing basic education (grade 9) | 5.4 | 8.1 | 2.8 |
| 10.b/h. % of ever enrolled children 6-14 who have already dropped out | 2.6 | 4.2 | 1.2 |
| 11./h % of enrolled children who were absent almost the whole school year | 1.9 | 4.0 | 0.0 |
| Health Neglect at Home | | | |
| 12.a/h. % of children who were not treated at all among those who got ill during the year preceding survey | 0.3 | 0.3 | 0.4 |
| 12.a/s. % of school children who were not treated at all among those who got ill during the year preceding survey | 7.7 | 3.3 | 11.6 |
| 12.b/h. % of children who were treated with medicine advised by a pharmacist among those who got ill during the year preceding survey | 23.6 | 28.6 | 18.9 |
| 12.b/s. % of school children who were treated with medicine advised by a pharmacist among those who got ill during the year preceding survey | 48.4 | 42.5 | 53.8 |
| 13./h % of children who were not examined by a physician among those who had an accident with complications during the year preceding survey | 28.8 | 35.5 | 10.1 |
| 13./s % of school children who were not examined by a physician among those who had an accident with complications during the year preceding survey | 56.0 | 17.2 | 68.7 |
| 14.a/h. % of female children circumcised by a non-medical personnel | 2.1 | - | 2.1 |
| 14.a/s. % of female school children circumcised by a non-medical personnel | 20.4 | - | 20.4 |
| 14.b/h. % of female children circumcised by a non-medical personnel among circumcised female children | 8.7 | - | 8.7 |
| 14.b/s. % of female school children circumcised by a non-medical personnel among circumcised female school children | 25.2 | - | 25.2 |
| 15.a/h. % of female children having complications among those circumcised | 1.7 | - | 1.7 |
| 15.a/s. % of female school children having complications among those circumcised | 6.9 | - | 6.9 |
| 15.b/h. % of female children whose complications untreated among those having complications during circumcision | 0.0 | - | 0.0 |
| 15.b/s. % of female children whose complications untreated among those having complications during circumcision | 51.6 | - | 51.6 |

| Indicators for Child Abuse | Total | Males | Females |
|--|--------------|--------------|----------------|
| Exploitation by Parents/Family | | | |
| 16.a/h. % of children 6+ who worked more than 30 hours per week during the year preceding survey | 6.6 | 11.9 | 1.3 |
| 16.a⁺/h. % of children 12+ who worked more than 30 hours per week during the year preceding survey | 13.2 | 23.5 | 2.6 |
| 16.a/s. % of school children worked more than 30 hours per week during the year preceding survey | 11.7 | 20.1 | 3.5 |
| 16.b/h. % of children 6+ who worked in the street during the year preceding survey | 1.3 | 2.5 | 0.2 |
| 16.b⁺/h. % of children 12+ who worked in the street during the year preceding survey | 2.7 | 5.1 | 0.3 |
| 16.b/s. % of school children who worked in the street during the year preceding survey | 2.7 | 3.8 | 1.7 |
| 17.a/s. % of school children whose work has interfered with study or school attendance, among all school children | 2.2 | 1.7 | 2.6 |
| 17.b/s. % of school children whose work has been physically too stressful, among all school children | 6.5 | 8.8 | 4.2 |
| 17.c/s. % of school children whose work has been emotionally too stressful, among all school children | 3.0 | 2.3 | 3.7 |
| 18.a/s. % of school children who spend on domestic chores more than 30 hours per week | 0.4 | 0.0 | 0.9 |
| 18.b/s. % of school children who spend on domestic chores more than 20 hours per week | 3.6 | 0.1 | 7.1 |
| 18.c/s. % of school children who spend on domestic chores more than 10 hours per week | 9.8 | 0.5 | 19.0 |
| 18.d/s. % of school children whose domestic chores interfere with study or school attendance, among all school children | 13.7 | 3.0 | 24.2 |
| 18.e/s. % of school children whose domestic chores are physically too stressful, among all school children | 10.3 | 3.1 | 17.4 |
| 18.f/s. % of school children whose domestic chores are emotionally too stressful, among all school children | 4.7 | 1.4 | 8.0 |

| Indicators for Child Abuse | Total | Males | Females |
|--|--------------|--------------|----------------|
| Child Abuse at School | | | |
| Physical Abuse at School | | | |
| 19./s. % of school children disciplined at school during current school year using physical punishment | 91.3 | 93.4 | 89.2 |
| 20./s. % of school children subjected at school during the current school year to unjustified physical assault from teachers or school staff | 6.4 | 6.5 | 6.2 |
| Verbal and Emotional Abuse at School | | | |
| 21./s. % of school children disciplined at school during current school year using verbal punishment | 69.3 | 73.9 | 64.7 |
| 22.a/s. % of school children subjected at school during the current school year to verbal assault from teachers or school staff without being faulted | 6.0 | 4.5 | 7.4 |
| 22.b/s. % of school children subjected at school during the current school year to unjustified yelling from teachers or school staff | 13.2 | 14.4 | 12.2 |
| 23.a/s. % of school children feeling strong resentment towards school | 23.0 | 17.4 | 28.5 |
| 23.b/s. % of school children feeling mild resentment towards school | 25.4 | 21.2 | 29.5 |
| Exploitation at School/by Teachers | | | |
| 24./h % of children enrolled in school taking private or group-based tutoring due to pressure from teachers, among all children enrolled in school | 29.3 | 28.7 | 29.9 |
| Bullying at School | | | |
| 25.a/s. % of school children regularly bullied by older or stronger children at school | 1.4 | 1.0 | 1.7 |
| 25.b/s. % of school children occasionally bullied by older or stronger children at school | 5.3 | 4.6 | 7.0 |
| 25.c/s. % of school children who have ever been bullied by older or stronger children at school | 12.0 | 6.0 | 18.0 |
| 26.a/s. % of school children feeling estranged from their peers at school | 21.0 | 7.2 | 34.6 |
| 26.b/s. % of school children feeling weak comradeship with their peers at school | 8.1 | 1.8 | 14.3 |

| Indicators for Child Abuse | Total | Males | Females |
|--|--------------|--------------|----------------|
| Child Abuse at Work | | | |
| Physical Abuse at Work | | | |
| 27./h % of children 6+ ever disciplined at work using physical punishment, among ever-worked children | 16.8 | 18.3 | 2.4 |
| 27./s. % of school children ever disciplined at work using physical punishment, among ever-worked school children | 27.1 | 24.5 | 36.0 |
| 28.a/h. % of children 6+ who ever had an accident at work and were not referred to medical service, among ever-worked children | 0.2 | 0.1 | 1.2 |
| 28.a/s. % of school children who ever had an accident at work and were not referred to medical service, among ever-worked school children | 4.7 | 0.8 | 17.8 |
| 28.b/h. % of children 6+ who ever had an accident at work, among ever-worked children | 0.9 | 0.8 | 1.7 |
| 28.b/s. % of school children who ever had an accident at work, among ever-worked school children | 10.5 | 8.1 | 18.7 |
| Emotional Abuse at Work | | | |
| 29./h. % of children 6+ ever disciplined at work using verbal punishment, among ever-worked children | 17.9 | 19.5 | 3.1 |
| 29./s. % of school children ever disciplined at work using verbal punishment, among ever-worked school children | 50.7 | 44.6 | 71.9 |

Notes:

1. Figures represent the studied 12 communities and 12 schools only
2. /h denotes that indicator is based on answers from caregivers in the household survey
3. /s denotes that indicator is based on answers from children in the school survey
4. Unless otherwise indicated, household-based indicators cover all children 0-17 while school-based indicators cover all children enrolled in grades 5 to 9
5. Unless otherwise indicated, percentages are calculated relative to all children