# The Prevalence of Domestic Violence Among Adolescents Attending Selected Secondary Schools in Kajiado County, Kenya

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#### **Abstract**

This study sought to investigate the prevalence of domestic violence meted out on adolescents, in two selected schools in Kajiado County Kenya. A total of 103 adolescents aged between 13-18 years from two schools in Kajiado County, Kenya were purposively selected based on age. A cross-sectional descriptive research design was employed to collect data on the forms of domestic violence that the respondents had experienced. A self-report social demographic questionnaire was administered, and data was analyzed using the Statistical Package for Social Sciences (SPSS) version 29. The overall prevalence of domestic violence in both schools was very high 93 (90.3%) with both schools showing statistically similar prevalence rates (p=.408). The prevalence of other forms of abuse included parents separated (n=50;53.8%); been touched sex organs (n=14; 15.1%); forced to touch others sex organs (n=7;7.5%); forced to sexual intercourse (n=13:14.0%), had unwanted sex (n=8;8.6%), physical abuse (n=46; 49.5%); verbal abuse (n=60; 64.5%); Other abuse (n=27; 29.0%.). Some respondents had experienced multiple forms of abuse as; 1-3 forms (n=63; 67.7%), 4-5 forms (n=20; 21.5%) and more than 6 forms (n= 10; 10.8%). The females had higher prevalence of domestic violence (n=60;64.5%) compared to males (n=33;35.5%) and the older adolescents (15-18 years) had higher prevalence rates of domestic violence (15-16 year old: n=55;59.1%, 17-18 year old: n=29;31.2%) compared to the younger adolescents (13-14 year old: n=9;9.7%). It is necessary to institute mental health programs in schools to cater for the needs of students who have experienced domestic violence. Furthermore, parenting education is required in communities to promote good parenting practices.

Key words: Children and Adolescents, Domestic violence, Kajiado County

## **Introduction and Background**

Domestic abuse is the most widespread violation against children and adolescents and a major public health crisis which constitutes brutality performed within the background of meaningful interpersonal relationships (Perryman et al., 2016). Domestic abuse constitutes hostility between intimate partners that is husband and a wife, or between parents and their children, or sibling hostility (Rakovec-Felser et al., 2014). Parents and guardians are the main perpetrators of DV against children and adolescents making it difficult for victims to report, for fear of reprisals (Bras & Correia, 2019; Goldner et al., 2021). Domestic violence takes many forms, including both direct and indirect manifestations. The indirect form involves youth witnessing interparental violence (IPV), while the direct form of DV encompasses the abuse meted out directly on the youth, by the parents or significant others (Avanci et al., 2021).

The direct forms of DV are physical abuse, psychological abuse and sexual abuse (Flynn & Cicchetti, 2016). Physical violence comprises slapping, pushing, whipping, and physical torture (WHO 2020). Psychological abuse encompasses controling and manipulative behaviors, verbal abuse, criticising, embarrassing, shaming, and blaming, withholding love, abandonment, communication, support and enforced early marriages for girls (Molstad et al. 2023)

Sexual violence is a form of domestic violence which involves any sexual act, unwelcome sexual remarks, directed against a person's sexuality using intimidation. It can be perpetrated by any individual, regardless of their relationship to the victim, in any setting, be it at home or workplace (WHO, 2015). In addition, it constitutes touching or fondling of sexual organs, unwanted sexual remarks, advances or acts to trade (WHO, 2020). The physical abuser aims at instituting power, and control, intimidation and subjugation to the victim. The physical abuse is always accompanied by emotional abuse and injury, and instigating fear and terror for the wounded (Kataoka & Imazeki, 2018).

Psychological violence is usually used to humiliate and control another individual in public or private. Acts such as verbal abuse, name calling, constantly criticizing, blackmailing, saying or doing something intended to make the other person feel embarrassed or lower their self-worth can be down grading (Ali et al., 2016; WHO, 2015). Psychological abuse also encompasses

threats to harm, censorship and constraining movements, limiting approach to friends and family and curbing economic autonomy. Denying someone the right to use information, assistance or other reserves and services such as education or health services also amount to psychological abuse (Ali et al., 2016).

Sexual trauma is correlated with short-term and long-term psychological outcomes. The short - term effects are shock, fear, anxiety and confusion. Within a few months, some survivors go through a decrease in symptoms, while for some the experience of distress may persist for years. Studies have shown that only sexual violence is connected with self-esteem, self-criticism and attachment type. Survivors of sexual brutality tend to recount a great deal more of lower self-esteem and a lot more self-criticism than is necessary (Dworkin et al., 2017; Ensink et al., 2020).

Witnessing of parental conflicts (IPV) is an indirect form of domestic violence for children and adolescents, also known as child abuse (Wathen & Macmillan, 2013). Both men and women are found to perpetrate IPV but women are mostly the victims (Correa et al., 2020). Men report forms of abuse such as being yelled at, insulted, humiliated, or controlling, isolation or monitoring tactics. As a father, having their competence doubted, false accusations of child abuse and persevering threats of the children being withdrawn from home (Bates, 2019:2020; Machado et al., 2018).

Some studies imply that women usually commit IPV as an automatic act of self-protection and this is further supported by the fact that women's violent resistance is short-lived and rarely leads to encounters with the police or law prosecution (Barajas & Smith, 2017).

The self-protection effort of women who attempt to retaliate may nevertheless fail leading to more vicious attacks, increasing the chances of wounding. Women's acts of violence is commonly construed as self-protective endeavours against controlling and violent partners (Ali et al., 2016).

Partriachy is mostly attributed to mens' experience of IPV where men dominate economically, socially and politically. Both Hines et al. (2013) and Perryman et al. (2016) opine that partriachy has detrimental and damaging inferences for men's experiences of brutality. Social beliefs about men as potential victims affects how men view their persecution (Garcia et al., 2022).

Children and adolescents exposed to IPV mostly go through unpleasant outcomes impacting their behavior, emotions, and cognition (Badoe, 2017). Additionally, the exposure may increase the child or adolescent acceptance of violence. Witnessing IPV leads to substantial disruptions in a child and adolescent psychosocial functioning and with raised externalizing and internalizing behavior such as depression, anxiety, attachment disorders, PTSD, and dissociation (Wathen & Macmillan, 2013). Additionally, it may inhibit the progression in emotional regulation process and interfere with the capability to manage their emotions (Buckley et al., 2008; as cited in Ravi et al., 2017

Domestic violence in childhood adversely impacts future relationships such that they become perpetrators of IPV. Foote et al. (2014) study in New Zealand among adults showed that approximately 90% of adults who had PTSD was linked to exposure to DV during childhood. Adolescents who are exposed to violence may act out in adverse behaviors such as fighting with family members and even being truant. The result may be low self-esteem and difficulties making friends, abuse of drugs, bullying others and getting in trouble with the law. This kind of behavior is typical with boys who are abused in childhood more than teenage girls, who are more withdrawn and tend to undergo depression (Child Welfare information Gateway [CWIG], 2018).

A parent who is a victim of abuse can have problems on how to protect a child (Arigliani et al., 2022). Children of brutal couples are also highly likely to be victims of other types of cruelty, and the probability of behaving violently in extra-domestic environments leading to the "cycle of violence" (Richards et al., 2016). One study showed the impact of being witness to parental verbal abuse on cognitive development. The sample were young adults who had witnessed parental conflicts of a verbal nature when they were aged 3- 13 years. Utilizing the Magnetic Resonance Imaging (MRI) variances in gray matter compactness in the left superior temporal gyrus, an area responsible for language processing were noted. These declines revealed substantial relationship to verbal IQ and language understanding (Cook et al., 2017).

According to the National center for PTSD (2023), approximately 3 million cases of children and adolescent abuses are reported annually which involves about 5.5 million children and adolescents. There is evidence of abuse of about 30% of the reported cases. From these cases 65% account for abandonment, physical abuse 18%, sexual abuse 10%, and psychological or

mental 7% abuse. Other studies postulate that the rates could be higher ranging from approximately 3.3 to 10 million of children and adolescents exposed to domestic violence in their homes annually (Wells, 2014). A recent study (WHO, 2020) showed that between 2019 and 2020, the gender-related violence cases globally were approximately 58%. From these cases, 65% accounted for abandonment, physical abuse 18%, sexual abuse 10%, and psychological or mental 7% abuse (National Center for PTSD, 2023).

Different countries report varying statistics for various forms of abuse where for example in the the US, statistics indicate that about 1 in 4 girls and 1 in 13 boys in the United States experience child sexual abuse. (Centers for Diseases Control [CDC], 2022). In the US also, 75% of female IPV survivors and 48% of males undergo some form of wounding associated with intimate partner violence and can even lead to death. Approximately 1 in 5 homicide casualties are killed by an intimate partner (Centers for Disease Control and Prevention [CDC], 2019). In Italy, investigated reports revealed that domestic violence was the most prominent violation against children and adolescents (Schafer et al., 2018). Overally, prevalence rates in the US and Europe are lower compared to other regions ranging from 23%-30%. Nevertheless, the prevalence rates vary (20%-90%) based upon the form of violence victims have been exposed to (WHO, 2013).

Cultural factors predisposing female adolescents to sexual, physical, and psychological violence are early and forced marriages as reported in Nasrullah (2014). In Nepal, 15% of girls are married off by the age of 15 years and in India, the average age at first marriage is 16.4 years (Choudhry et al., 2018). An Indian national study reported that a child was sexually abused every 15 minutes with the perpetrators being parents, relatives or school teachers. Africa also reports high prevalence rates for the various forms of abuse. For example, Ayaya et al., (2021) in South Africa among adolescents aged 15-17 years found that 9.99% of boys and 14.61% of girls had experienced some sexual abuse. Physical abuse increased from 9% in 2008 to 11.4% in 2018. Sexual abuse increased from 3.3% in 2008 to 8.3% in 2018. It was concluded that sexual abuse was the most prevalent among the abuses.

According to UNICEF (2015), physical violence is highly prevalent in East Africa since three in every four children are victims. In Africa, Kenya is rated third highest in terms of child abuse at

54% after Zambia which has the highest prevalence rate of child abuse at 74.5% and South Africa 61.6% (Ayaya et al., 2021; UNICEF, 2020). The most vulnerable population is adolescence (15-19 years) where Africa and Asia, have the highest prevalence such that 37% women have experienced physical and sexual violence. In a study in Ghana, a sample comprising 853 adolescent girls aged 13-19 was conducted using mixed method design. The finding was that overall, the prevalence of child sexual abuse was 32.5%. It is possible that the reason they are most vulnerable is due to lack of assertiveness, poor communication skills, unbalanced power relationships between adults and adolescents, and lack of maturity to make good decisions. (Owusu et al., 2023) In addition, data was collected from 161 countries and areas covering 90% of global population of women and girls 15 and older to approximate those who had experienced domestic violence in the previous year before the survey.

Findings were that the brutality commenced early, distressing adolescent girls and young women with 24% (uncertainty interval between 21-28%) of women aged 15-19 years, and 26% (23-30%) of women aged 19-24 years who had already experienced this violence at least once since the age of 15years. This is evidence that 15-19 years is the most vulnerable age (Sardinha et al., 2022).

The effect of COVID-19 with the subsequent lockdowns heightened cases of domestic violence globally (Sifat, 2020). This was evidenced by a study (Bagheri et al., 2022) in Iran, that documented an increase of 37.5% cases since the virus struck. The study which was on married couples, highlighted that the domestic violence was of the emotional type more than physical or sexual. Thiel et al. (2022) also indicated the increased severity of all types of DV as well as prevalence of psychological, emotional and sexual violence for a large number of victims in the general population, during the COVID-19 pandemic. Comparable increases were also noted in Australia, China, Spain, Cyprus, UK, Brazil and the United States as a result of the COVID-19 instigated lockdowns (Peterman et al., 2020).

Wangamati et al. (2019) study in Kenya revealed that, 23% of the girls and 12% of boys aged 13-17 had experienced some type of sexual abuse including pressured or physically forced sexual intercourse. Ayaya et al. (2020) study in Kenya among 18-year old

adolescents determined to compare current children and adolescent abuse namely physical, emotional, and sexual between children and adolescents living in institutional settings and those in family-based care. Results found that 45% had experienced every form of abuse at baseline and 54% at follow-up. Living in any of the settings did not provide any difference in experiencing any type of abuse.

The impacts of domestic violence are enormous such that it increases hospital visits compared to other types of abuse. One study among a random sample of women (n=3,333; 18-64 years) in UK found that majority of the women had experienced more of the physical abuse compared to non-abused women and women experiencing other forms of abuse such as emotional and sexual abuse. For women with ongoing physical abuse, annual health care costs were 42% higher as compared to those who were not abused (Chibber et al., 2016). Child abuse is associated with increased hazard of an assortment of mental and physical health problems. In a meta-analytic study, child abuse was concomitant with heart-related dysfuctions in 91.7% of the studies, with diabetes in 88.2% of studies, and with blood pressure/hypertension in 61.5% (Basu et al. 2017). Other studies found that those found with ACE history suffered more regularly from digestive, musculoskeletal, respiratory disorders and migraine (Noteboomet al., 2021).

## Methodology

This was a cross sectional descriptive survey aimed at gathering data on the prevalence of domestic violence among adolescents in selected schools in Kenya. The study included a total of 103 respondents, consisting of students from two mixed sex public secondary schools in Kajiado County, Kenya: School A (n=49; 47.6%) and School B (n=54; 52.4%). Both schools are in the low social economic settlements in Ngong town, Kajiado County and the participants were selected stratified random sampling based on age (13-18 years) to ensure inclusivity of all the classes (form 1,2,3 and 4) and to allow for equal gender representation.

Data was collected using a self-report social demographic questionnaire with acceptable reliability ( $\alpha$ =0.652) and validity was ascertained using the Pearson correlation coefficient analysis that assessed whether each of the items inquiring on the forms of abuse were correlated with scores for domestic violence. All the items were valid for assessment of domestic violence

since they had a positive  $(r \ge 0)$  statistically significant relationship  $(p \le .05)$  with overall DV scores aside from the item on emotional abuse since it inquired on only one facet of emotional abuse which was verbal abuse. Hence, emotional abuse was not assessed in this study, but verbal abuse was assessed. The item inquiring on verbal abuse was retained as it was opined to offer insight on the extent of the verbal abuse the respondents had experienced. Data was analyzed using the Statistical package for Social Sciences (version 29) utilizing descriptive statistics and to compare the prevalence rates in both schools.

#### **Results**

### Prevalence of Domestic Violence

The experience of domestic violence was assessed using the socio-demographic questionnaire which inquired on various forms of domestic violence which were; witnessing various types of parental conflicts, various forms of sexual abuse, physical abuse, verbal abuse and other types of abuse. Respondents who had experienced at least one of the forms of domestic violence were selected to proceed with the study. The findings are shown in Table 4.7.

Table 1:The Experience of Domestic Violence in the Experimental and Control groups.

Domestic violence Status	Group		Total	P
	A	В	_	
Domestic violence	43(87.8%)	50(92.6%)	93(90.3%)	.408
No domestic violence	6(12.2%)	4(7.4%)	10(9.7%)	
Total	49(100.0%)	54(100.0%)	103(100.0%)	

Table 1 shows the number of respondents who had experienced domestic violence in the two schools. In the school A 43 (87.8%) of the respondents had experienced domestic violence and in school B, 50(92.6%) of the respondents had experienced domestic violence. Overall, 93(90.3%) respondents had experienced domestic abuse which was quite a high number. Hence, domestic violence in both schools and overally was extremely high with both schools showing non significant differences (p=0.408).

Prevalence of Different Forms of Domestic Violence

Table 2: The Forms of Domestic Violence Experienced by the Respondents in the Both Groups(N=93).

Form of Domestic violence	Frequency		
	N	Percent	
Father beat mom	24	25.8%	
Mother beat father	6	6.5%	
Father shout at mother	25	26.9%	
Parents separated	50	53.8%	
Been Touched sex organs	14	15.1%	
Forced to touch others sex organs	7	7.5%	
Forced to sexual intercourse	13	14.0%	
Had Unwanted sex	8	8.6%	
Physical abuse	46	49.5%	
Verbal abuse	60	64.5%	
Other abuse	27	29.0%	
Forced to sexual intercourse Had Unwanted sex Physical abuse Verbal abuse	13 8 46 60	14.0% 8.6% 49.5% 64.5%	

Table 2 shows the number of respondents who had experienced the various forms of abuse. Based on the frequencies, verbal abuse had the highest representation (n=60,64.5%) then parents separated (n=50,53.8%), then physical abuse(n=46,49.5%). For each respondent, the number of 'domestic violence' forms they had experienced were tallied and overall findings are shown in table 3.

Table 3: The Number of Domestic Violence Forms Experienced by the Respondents in Both Groups

Number of 'domestic violence' forms	Group		Total	P.Chi-
experienced	A	В	_	square
1-3	33(76.7%	30(60%	63(67.7%	
4-5	6(14.0%	14(28%	20(21.5%	.271
More than 6	4(9.3%	6(12%	10(10.8%	.2/1
Total	43(100.0%	50(100.0%	93(100.0%	

Table 3 shows the prevalence of domestic violence in School A and School B based on the number of 'domestic violence' forms experienced. According to the frequencies, the highest number was those who had experienced 1-3 forms of domestic violence (n=63; 67.7%), followed by 4-5 forms of abuse (n=20;21.5%) and then more than 6 forms of abuse (n=10;10.8%) and both schools were statistically similar in the number of 'domestic violence' forms experienced (p=0.271). The prevalence of domestic violence was also investigated based on the socio demographic characteristics.

Table 4: Gender, Age and Education Levels of the Respondents at Baseline in the Control and Experimental Groups.

Socio demographic Vari	ables	Frequency		
		N	%	
Gender	Male	33	35.5%	
	Female	60	64.5%	
	Total	93	100.0%	
Age in years	13-14	9	9.7%	
	15-16	55	59.1%	
	17-18	29	31.2%	
	Total	93	100.0%	
Education level	Form 1	20	21.5%	
	Form 2	19	20.4%	
	Form 3	35	37.6%	
	Form 4	19	20.4%	
	Total	93	100%	

Table 4 shows the prevalence of domestic violence in terms of age, gender and educational level representation. The frequencies indicate there was a higher number of females who had experienced domestic violence compared to the males (Females: n=62;60.2%; Males: n=41;39.8%). Regarding age, the highest prevalence rates were among the 15-16 year old (n=55;59.1%), then the 17-18 year old (n=29;31.2%). Based on the education level, the prevalence rates were highest for those in form 3(n=35;37.6%), then form 1's (n=20;21.5%) and

form 2's and form 4's had equal frequencies each at n=19(20.4%). These differing prevalence rates may need further investigation to understand the predisposing and propagating factors that would enlighten on parenting practices for youth of different gender, ages and educational levels.

### **Discussion**

Overall, there was a high number of respondents who had experienced domestic violence (DV) 93(90.3%) in both schools where females who had experienced domestic violence were more compared to the males (Females: n=62; 60.2%; Males: n=41; 39.8%). Contrary findings in research done in Nigeria found that there were no statistically significant gender differences in children's exposure to domestic violence (Asagba et al., 2021). Other studies in East Asia and the Pacific also record higher prevalence rates among females compared to males such that 11-22% of girls and 3-16.5% of boys have experienced sexual violence (UNICEF, 2014). Similarly, Wangamati et al. (2019) study in Kenya found that 23% of the girls and 12% of boys aged 13-17 years had experienced some type of sexual abuse such as unwanted sexual touching, unwanted attempted sex, and pressured or physically forced sexual intercourse. Most studies thus find that sexual abuse is more prevalent among females, although there is a possibility that statistics could be higher since there is under reporting due to taboos and the disgrace associated with being a victim of abuse in some cultures (Radhika, 2018).

Some of the cultural factors predisposing specifically female adolescents to sexual, physical, and psychological violence are factors such as early and forced marriages (Nasrullah, 2014). Furthermore, girls are looked down upon and their emotional needs are ignored and there is stigma affecting girls. Underreporting incidences by healthcare and police administrators are also noted (Radhika,2018).

The general society does not approve the notion that men can be casualties of hostility meted out by a female. Although it cannot be overlooked that women are inexplicably crushed by IPV in the most ruinous modes, domineering social viewpoints and anticipations about men as potential victims may influence how men themselves view their persecution (Morgan et al. 2016). Men do not only play down their encounters of IPV, but even divulging the information and seeking help is difficult for them (Arnocky et al. 2014; Barrett et al. 2020; Moragn et al. 2016 & Tilbrook et

al. 2010). The fear of gender biased ridicule, shame or being labelled the initiator of violence has been reported by some men as the reason for evading seeking help from anywhere (De Puy et al., 2017; Gaman et al., 2016; Machado et al., 2017 & Walker et al., 2019).

Regarding age, the highest prevalence rates were among the older adolescents; 15-16 year old (n=55;59.1%), then the 17-18 year old (n=29;31.2%). Based on the education level, the prevalence rates were highest for those in form 3(n=35;37.6%), then form 1's (n=20;21.5%) and form 2's and form 4's had equal frequencies each at n=19(20.4%). The age 15-18 years constitutes adolescence which is an important stage in human development involving a profoundly great amount of changes in all spheres of development which are biological, cognitive, psychological and emotional. Emotional maturity as well as autonomy tends to set in and they begin advancing moral scope. Personal relationships are also altered during this juncture as peers and romantic partners take central positions as they move on way into and past high school (Bonnie, 2019). Hence, parents may misunderstand their childrens' needs for autonomy which may intensify cases of domestic violence against the youth.

There were respondents who had experienced multipe forms of domestic violence where the highest number was those who had experienced 1-3 forms of domestic violence (n=63; 67.7%), followed by 4-5 forms of abuse (n=20;21.5%) and then more than 6 forms of abuse (n=10;10.8%). The finding of high prevalence of domestic violence for this sample was not surprising given that in Africa, Kenya is rated third highest regarding child abuse at 54% after Zambia which has the highest prevalence rate of child abuse at 74.5% and then South Africa 61.6% (Ayaya et al., 2021: UNICEF, 2020; WHO, 2018).

The effect of COVID-19 with the subsequent lockdowns heightened cases of domestic violence (Sifat, 2020). Candace et al. (2020) also documented alarming rates of increase in DV and that the reports ranged from a 20%–25% upsurge in helpline calls in Spain, Cyprus and the UK and 40% or 50% increase in calls in Brazil (Bradbury-Jones & Isham, 2020). Comparable increases were also noted in Australia, China, and the United States as a result of the COVID-19 instigated lockdowns (Peterman et al., 2020). Based on global studies, the prevalence rate of 90.3% in this

study was an extremely high given that WHO (2020) reported that between 2019 and 2020, the number of gender-related violence globally was 58%.

Atwoli et al. (2015) study postulated that areas where factors such as alcoholism and poverty are prevalent intensify the chances of domestic violence. Bountress and Chassin (2015) additionally forwarded that children and adolescents in families controlled by excessive alcohol use are defenseless, as the constant alcohol use by their parents robs them of the capability to provide a safe and secure environment, and sufficiently pay attention to their emotional and physical needs.

A growing party of support also associates unpredictable housing to child and adolescent abuse (Austin et al. 2020; Mulder et al. 2018). A cross-sectional survey on children aged 12-18 years living in the slum areas of Kampala, Uganda found that, nearly 34% of the children (n = 380) testified experiencing physical abuse, and 12.4% (n = 140) reported experiencing alcohol-related physical abuse.

Alcohol-related abandonment was reported among 19.6% (n = 212) of the children. Physical abuse was also associated with parental alcohol use (OR: 1.85; 95% CI: 1.38- 2.48) and parental partner violence (OR: 5.51; 95% CI: 4.09-7.43) (Swahn et al., 2014). Developed communities characterized by scarcity, law-breaking, and drug-related practices are also frequently at an increased risk of domestic violence for adolescents living in these countries (McGill et al., 2014). Hence, the 90.3% prevalence rate of domestic violence for the respondents in this study was not surprising given that they were mainly drawn from two schools located in the informal settings in Kajiado County.

The two public schools were built for the low- income population and are approximately six kilometers apart in School B is near the Mathare and Gishagi informal settlements. Most of the students are from the informal settlements but some live in Ngong town. School A is located on the northwest side of Ngong and most of the adolescents in the school come from the shanty towns of Bulbul, which is two kilometers away. Hence, the prevalence rates of domestic violence are in line with studies postulating high rates of domestic violence in deprived settings.

Verbal abuse had the highest prevalence (n=60, 64.5%) then 'parents separated' (n=50, 53.8%), and physical abuse (n=46, 49.5%). Global studies also report varying prevalence rates for different forms of domestic violence where for example, a national study in Canada reported prevalence of physical abuse at 48%, abandonment 12%, and educational neglect 11% (Barajas & Smith, 2017). Rada (2014) study in Romania also reported other brutal forms such as being tortured by burning or denying the basic necessity of food. Flynn and Cicchetti (2016) study in the Republic of Korea reported that two-thirds of the parents reported that they had whipped their young ones, while 45% confirmed that they had struck, booted, or beaten them. In this study physical abuse (46.9%) and the details were not as severe as the ones reported in other studies. In comparison to the study in Korea it is higher and this could be due to socioeconomic challenges given that area of residence is characteristic of risk factors of domestic violence.

Fry et al. (2016) study found that 49 per 1000 parents used brutal forms of punishment such as hitting the child's head with an object on the head, jolting, thumping and frightening the youngster with a knife or gun. In Asia, a study showed that prevalence of child sexual abuse ranged from 2.2% - 94% for girls, and 1.7% - 49.5% for boys. The prevalence rates for noncontact abuse were 12.6% - 56.5% for girls and 0.7% - 68.7% for boys; contact abuse was 5.3% - 67.2% for girls and 2.2% - 53.3% for boys; penetrating abuse was 0.5% - 88.24% for girls and 1.7% - 57.1% for boys (Solehati et al. 2021). Compared to this study the prevalence of sexual abuse was lower at 12.6% been touched sexually and 13.6% been forced to have sex. The reason for the low rate could be due to undereporting or for fear and shame.

The current study had a notable representation of various forms of abuse, with verbal abuse being the most prevalent at 67.3%. This prevalence is considerably high compared to global estimates of emotional abuse, which typically range from 16.3% to 26.7%, as reported in meta-analytic studies. Verbal abuse, as a subset of emotional abuse, often induces fear and terror in victims and is frequently followed by physical abuse and injury, making it a significant precursor to other forms of abuse. In China, data was collected from 417 adolescents aged 15-18 years old to assess for emotional abuse. The tools used were, Child Psychological Abuse Scale, Rosenberg Self -Esteem Scale (SES) and Multidimensional Scale of Perceived Social Support (MSPSS). The findings were that 25.66% suffered emotional and psychological abuse (Chen C et al., 2022). Compared to this study the findings of prevalence was higher perhaps due to the many

stresses parents experience including looking for school fees which is a major challenge in many families.

It is not unusual for emotional abuse to have a higher prevalence compared to other types of abuse, consistent with findings from other studies. A recent meta-analysis on global prevalence rates of child and adolescent abuse indicated that 35.3% of individuals experience emotional abuse, followed by 22.6% for physical abuse, 18% for neglect, 7.6% for boys, and 18% for girls in the case of sexual abuse.

Sexual abuse was quite low compared to the other forms of abuse. The prevalence rate for the various facets of sexual abuse were 'Been Touched sex organs' n= 14(15.1%), 'Forced to touch others sex organs' n=7(7.5%), 'Forced to sexual intercourse' n=13(14.0%), 'Had Unwanted sex' n=8(8.6%). The global prevalence of sexual abuse among adolescents (15-19 years) is 11.8%. There is a possibility that sexual abuse is under reported since it is shrouded in secrecy and victims encounter both shame and guilt on reporting. They could also face stigma on reporting, or they could be threatened with dire consequences (Solehati et al. 2021). For fear of stigma, males abstain from reporting sexual abuse since most sexual abuse victimization is attributed to females (Bonnie, 2019). Hence, researchers in sexual abuse especially among children and adolescents must be aware of such hindrances and look into ways to encourage respondents to give truthful answers to their experiences.

It is noteworthy that the non-direct forms of domestic violence were observed among the respondents in this study which were witnessing parental separation (n=50; 53.8%). These findings indicate that the rates of intimate partner violence among the parents of these adolescents were high. Children who grow up with IPV may have impaired ability to concentrate; difficulty completing schoolwork and lower scores on measures of verbal, motor, and social skills. These symptoms can also be associated with other stressors, traumas (The National Child Traumatic Stress Network, n.d). There were 25.8% (n=24) respondents who had witnessed their 'Father beat mother', whereas n=6(6.5%) had witnessed 'Mother beat father' and another n= 25 (26.9%) had witnessed "Father shout at mother". Hence, the indirect forms of DV constituting "witnessing IPV" were also experienced by the respondents. Intimate Partner

Violence in an indirect form of violence constituting children/adolescents watching or experiencing abuse of their parents.

Annually, it is estimated that 15.5 million children and adolescents witness IPV in their families, though this approximation may be underreported (Ravi et al. 2017). In the year 2011, the National Survey of Children's exposure to violence found that one in six children and adolescents had witnessed a parental attack in their lifetime (Finkelhor et al. 2013). The prevalence rates of all the forms of domestic violence in this study were therefore high which calls for urgent proactive and intervention measures more so in the low informal urban settlements where the propagating factors for domestic violence coupled with poverty are rampant.

## Conclusion

The prevalence of domestic violence was high 93(90.3%) with the different types having varying prevalence rates where verbal abuse was highest 60(67.3%), physical abuse was 46(46.9%) and parents separated 50(55.6%). The females(n=62;60.2%) had higher prevalence of domestic violencee compared to the males (n=41;39.8%). There were adolescents who had experienced multiple forms of domestic abuse. Hence, preventive measures to curb domestic violence need to be taken and interventions for the respondents should be instituted. Access to mental health services being a priority for adolescents with psychological or mental health issues arising from the domestic violence experienced. Given that domestic violence is a predictor of poor life outcomes, it is important to have parenting sessions in the communities because the children are the sufferers and spend most of their time in school. Involving teachers is crucial as they can play a vital role in monitoring adolescents who exhibit signs of emotional distress and facilitating necessary interventions.

The primary limitations of this study were the exclusive focus on verbal abuse as a measure of emotional abuse. Future research endeavors should aim to employ more comprehensive assessment tools that encompass all dimensions of emotional and psychological abuse, as these are significant precursors to various other forms of abuse. Additionally, it is of paramount importance for stakeholders to allocate both time and resources towards the provision of

effective mental health services within schools and nearby clinics, particularly for adolescents who have experienced domestic violence.

#### References

- Ali, P., Dhingra, K., Mcgarry, J. (2016). A literature review of intimate partner violence and its classifications Aggression and Violent Behavior. The *University of Shefield*. https://www.researchgate.net/publication/306225348 A literature review.
- Arigliani, E. Arico, M., Cavalli, G., Aceti, F., Sogos, C., Romani, M., Ferrara, M. (2022). Feasibility of screening Programs for Domestic Violence in Pediatric and child Adolescent Mental Health Sevices: A Literature Review. *Brain Sci.* 2022, *12*(9), 1235; https://doi.org/10.3390/brain.sci12091235.
- Arnocky, S., Vaillancourt, T. (2014). Sex differences in response to victimization by an intimate partner: more stigmatization and less help-seeking among males. *Journal of Aggression Maltreatment & Trauma*, 23(7), 705–724. https://doi.org/10.1080/10926771.2014.933465
- Asagba, R.B., Noibi, O.W., Ogueji, I.A. (2021). Gender Differences in Children's Exposure to Domestic Violence in Nigeria. *J Child Adolesc Trauma*. 2021 Jul 24; 15(2):423-426. doi: 10.1007/s40653-021-00386-6. PMID: 34336081; PMCID: PMC8302967.
- Atwoli, L., Stein, D. J., Koenen, K. C., & McLaughlin, K. A. (2015). Epidemiology of posttraumatic stress disorder: Prevalence, correlates and consequences. Current Opinion in Psychiatry, 28(4), 307-311.
- Austin, A. E. Alexandria, M. L., Meghan, E., Shanahan, (2020). Risk and protective factors for child maltreatment: A review. *SAGE Journals* 7(4): 334–342. doi:10.1007/s40471-020-00252-3.
- Avanci, J.Q., Serpeloni, F., de Oliveira, T.P. *et al.* (2021). Posttraumatic stress disorder among adolescents in Brazil: a cross-sectional study. *BMC Psychiatry* 21, 75 https://doi.org/10.1186/s12888-021-03062-z.
- Ayaya, S. Allison D., Lonnie E., Ayuku, D., Sang, E., Hogan, J., Kamanda, A., Atwoli, L., Makori, D., Mary A. Ott, Ombok, C., Braitstein, P., (2020). Prevalence, incidence and chronicity of child abuse among orphaned, separated, and street-connected children and adolescents in western Kenya: What is the impact of care environment?, *Child Abuse & Neglect*, 139, 2023, 104920, ISSN 0145-2134,
- Bagheri Lankarani, K., Hemyari, C., Honarvar, B. *et al.* (2022). Domestic violence and associated factors during COVID-19 epidemic: an online population-based study in Iran. *BMC Public Health* 22, 774 (2022). https://doi.org/10.1186/s12889-022-12536-y
- Barajas, K., & Smith, S. (2017). Child abuse and neglect. In V. Zeigler-Hill & T. Shackelford (Eds.), *Encyclopedia of personality and individual differences* (pp. 1-9). Cham, Switzerland: Springer.

- Barret, E. M., Teesson, K. M., Sunderland, M., Newton, N., Chapman, C., Slade, T., Stapinski, L., Kelly, E., Champion, K., & Natalie (2020). Revealing the hidden epidemic of child and adolescent trauma in Australia. *Sage Journals* https://www.sydney.edu.au/medicine-health/news-and-events//html
- Basu, A., McLaughlin, K.A., Misra, S., Koenen, K.C., (2017). Childhood maltreatment and health impact: the examples of cardiovascular disease and type 2 diabetes mellitus in adults. *Clin Psychol* (New York). 2017 Jun;24(2):125-139. doi: 10.1111/cpsp.12191. Epub 2017 Apr 10. PMID: 28867878; PMCID: PMC5578408.
- Bates E. A. (2020). "Walking on egg shells": A qualitative examination of men's experiences of intimate partner violence. *Psychology of Men & Masculinities*, 21(1), 13–24. https://doi.org/10.1037/men0000203.
- Bonnie, R. J., Backes, E. P., Alegria, M., Diaz, A., & Brindis, C. D. (2019). Fulfilling the promise of adolescence: realizing opportunity for all youth. *The Journal of adolescent health: official publication of the Society for Adolescent Medicine*, 65(4), 440–442.
- Bountress, K.,& Chassin L. (2015). Risk for behaviour problems in children of parents with substance use disorders. *Am J Orthopsychiatry*, 85:275–287. doi: 10.1037/ort0000063.
- Bradbury-Jones, C., & Isham, L. (2020). The Pandemic Paradox: The Consequences of COVID-19 on Domestic Violence. Journal of Clinical Nursing, 29, 2047-2049. https://doi.org/10.1111/jocn.15296
- Bras, E., & Correia C. M. (2019). Child and adolescent violence: oral story of women who attempted suicide. *Sage journals*. 72(2) http://dx.doi.org/ 10.1590/0034-7167-2017-0814. https://www.scielo.br/j/reben/a/jcwV7hmJjk w5JfRT69GXsFg/abstract/?lang=en.
- Candace Forbes Bright, Christopher Burton, Madison Kosky. (2020). Considerations of the impacts of COVID-19 on domestic violence in the United States, *Social Sciences & Humanities Open*, 2(1), 2020. https://doi.org/10.1016/j.ssaho .2020.100069.
- Centers for Disease Control, N.C.f.I.P.a.C., (2016). Division of Violence Prevention. Adverse Childhood Experiences (ACEs). 2016 https://www.cdc.gov/violenceprevention/acestudy/. https://www.cdc.gov/violenceprevention/pdf/sv-prevention
- Centers for Diseases Control [CDC]. (2022). Fast Facts: Preventing Child Sexual Abuse. https://www.cdc.gov/violenceprevention/childsexualabuse/fastfact.htm
- Chen C, Ji S and Jiang. (2022) Psychological Abuse and Social Support in Chinese Adolescents: The Mediating Effect of Self Esteem. Font. Psychol. 13: 852256. Doi:10.3389/fpsyg. 2022852256.
- Chibber, K., Cantor, J., & Greenberg, E. (2016). Domestic Violence Literature Review:

- Analysis Report. JSI Research & Training Institute, Inc.
- Child Welfare Information Gateway. (2018). *Trauma-focused cognitive behavioral therapy: A primer for child welfare professionals*. Washington, DC: Children's Bureau, United States Department of Health and Human Services.
- Choudhry, V., Dayal, R., Pillai, D., Kalokhe, A.S., Beier, K., Patel, V. (2018) Child sexual abuse in India: A systematic review. *PLoS ONE 13*(10): e0205086. https://doi.org/10.1371/journal.pone.0205086
- Cook, A., Spinazzola, J., Lanktree, C., Blaustein, M., Cloitre, M., et al.(2017). Complex trauma in children and adolescents. *Psychiatr. Ann. 35*, 390-398. Doi:/10.3928/004/00485713-20050501-05
- Correa, N.P., Cain, C.M., Bertenthal, M., Lopez, K.K. (2020). Women's Experiences of Being Screened for Intimate Partner Violence in the Health Care Setting. *Nurs Womens Health*. 24(3):185-196. doi: 10.1016/j.nwh.2020.04.002. Epub 2020 May 5. PMID: 32380012.
- de Puy, J., Abt, M., Romain-Glassey, N. (2017). Coping with multiple adversities: men who sought medico-legal care because of physical violence from a partner or expartner. *Psychology of Violence*, 7(2), 428–439. https://doi.org/10.1037/vio0000101
- Dworkin, E. R., Menon, S. V., Bystrynski, J., & Allen, N. E. (2017). Sexual assault victimization and psychopathology: A review and meta-analysis. *Clinical Psychology Review*, 56, 65–81. https://doi.org/10.1016/j.cpr.2017.06.002
- Ensink, K., Borelli, J. L., Normandin, L., Target, M., & Fonagy, P. (2020). Childhood sexual abuse and attachment insecurity: Associations with child psychological difficulties. *The American journal of orthopsychiatry*, *90*(1), 115–124. https://doi.org/10.1037/ort0000407
- Finkelhor, D., Turner, H. A., Shattuck, A., & Hamby, S. L. (2013). Violence, crime, and abuse exposure in a national sample of children and youth: An update. *JAMA Pediatrics*, *167*(7), 614-621.https://Doi:10.1001/jamapediatrics.2013.42
- Flynn, M., Cicchetti, D., & Rogosch, F. (2016). The prospective contribution of childhood maltreatment to low self-worth, low relationship quality, and symptomatology across adolescence: A developmental-organizational perspective. *Developmental psychology*, 50(9), 2165–2175.https://doi.org/10. 1037/a0037162
- Fry, D., McCoy, A., & Swales, D. (2016). The consequences of maltreatment on children's lives: A systematic review of data from the East Asia and Pacific Region. *Trauma, Violence, & Abuse, 13*(4), 209-233.
- Foote, J., Taylor, A., Nicholas, G., Carswell, S., Wood, D., Winstanley, A., & Hepi, M.

- (2014). Toward a transformed system to address child abuse and family violence in New Zealand. https://www.esr.cri.nz/assets/SOCIAL-CONTENT /TGI.-Towards-a-transformed-system.-Final-report.pdf
- Gaman A, McAfee S, Homel P, Jacob T (2016). Understanding patterns of intimate partner abuse in male-male, male-female, and female-female couples. *Psychiatric Quarterly*, 88(2), 335-347. https://doi.org/10.1007/s111 26-016-9450-2.
- García Mingo, E., & Díaz Fernández, S. (2022). Wounded men of feminism: Exploring regimes of male victimhood in the Spanish manosphere. European Journal of Cultural Studies, 0(0). https://doi.org/10.1177/13675494221140586
- Goldner, L., Lev-Wiesel, R., Binson Bussakorn (2021). Perceptions of Child Abuse as Manifested in Drawings and Narratives by Children and Adolescents. *Frontiers in Psychology* https://www.frontiersin.org/article/10.3389/fpsyg. 2020.562972.
- Hines D. A., Douglas E. M. (2018). Influence of intimate partner terrorism, situational couple violence, and mutual violent control on male victims. *Psychology of Men & Masculinities*, 19(4), 612–623. https://doi.org/10.1037/men0000142
- Kataoka Y, Imazeki M. Experiences of being screened for intimate partner violence during pregnancy: a qualitative study of women in Japan. *BMC Women's Health*. 2018 May 29;18(1):75. Doi: 10.1186/s12905-018-0566-4. PMID: 29843686; PMCID: PMC5975515.
- Machado, A., Hines, D., Matos, M. (2018). Characteristics of intimate partner violence victimization experienced by a sample of Portuguese men. *Violence and Victims*, 33(1), 157–175. https://doi.org/10.1891/0886-6708.VV-D-16-00095.
- McGill, T., Self-Brown, S. R., Lai, B. S., Cowart, M., Tiwari, A., LeBlanc, M., & Kelley, M. L. (2014). Effects of exposure to community violence and family violence on school functioning problems among urban youth: The potential mediating roles of posttraumatic stress symptoms. *Frontiers in Public Health*, 2. https://10.3389/fpubh.2014.00008
- Morgan, W., & Wells, M. (2016). 'It's deemed unmanly': men's experiences of intimate partner violence (IVP). *Journal of Forensic Psychiatry & Psychology*, 27(3), 404–418. https://doi.org/10.1080/14789949.2015.1127986
- Molstad, T.D., Weinhardt, J.M., Jones, R. (2023). Sexual assault as a contributor to academic outcomes in university: a systematic review. *Trauma Violence Abuse*, 24(1):218-230. Doi 10.1177/15248380211030247. Epub 2021 Oct 24. PMID: 34689635; PMCID: PMC9 660281.
- Mulder, T. M., Kuiper, K. C., van der Put, C. E., Stams, G. J. J., & Assink, M. (2018). Risk factors for child neglect: A meta-analytic review. *Child abuse & neglect*, 77, 198-210.

- Nasrullah, M., Zakar, R., & Zakar, M. Z. (2014). Child marriage and its associations with controlling behaviors and spousal violence against adolescent and young women in Pakistan. *The Journal of Adolescent Health: official publication of the Society for Adolescent Medicine*, 55(6), 804–809. https://doi.org/10.1016/j.jadohealth.2014.06.013
- National Center for PTSD (2023). https://www.ptsd.va.gov/.
- Noteboom, Annemieke, Margreet ten Have, Ron de Graaf, Aartjan T.F. Beekman, Brenda W.J.H. Penninx, & Femke Lamers. (2021). The long-lasting impact of childhood trauma on adult chronic physical disorders, *Journal of Psychiatric Research*, *136*, 87-94, ISSN 0022-3956,https://doi.org/10.1016/j.jpsychires.2021.01.031. (https://www.sciencedirect.com/science/article/pii/S002239562100042X)Owusu-Addo E,
- Owusu-Addo SB, Bennor DM, Mensah-Odum N, Deliege A, Bansal A, Yoshikawa M, Odame J. (2022). Prevalence and determinants of sexual abuse among adolescent girls during the COVID-19 lockdown and school closures in Ghana: A mixed method study. *Child Abuse Negl.* 2023 Jan;135: 105997. Doi.org/10.1016/j.chiabu.2022.105997. Epub 2022 Dec 15. PMID: 36528934; PMCID: PMC9750886
- Perryman, S. M., & Appleton, J. (2016). Male victims of domestic abuse: Implications for health visiting practice. *Journal of Research in Nursing*, 21(5-6), 386-414.
- Peterman, A., Potts, A., O'Donnell M., Thompson, K., Shah, N., Oertelt-Prigione, S., van Gelder N. (2020). Pandemics and violence against women and children. *Working Paper 528. Center for Global Development:* Washington, DC. Available: https://www.cgdev.org/sites/default/files/pandemics-and-vawg-april2.pdf [22 July 2020].
- Radhika, K., Manjula, M., & Jai Soorya, T. S. (2018). Ethical gaps in conducting research among adult survivors of child sexual abuse: a review. *Indian J Med Ethics*, *3*, 186-92.
- Rakovec-Felser, Z. (2014). Domestic Violence and Abuse in Intimate Relationship from Public Health Perspective. *Health Psychology Research*, 2.
- Ravi, Kristen, Casolaro, Thomas (2018). Children's Exposure to Intimate Partner Violence: A Qualitative Interpretive Meta-synthesis 35 10.1007/s10560-017-0525-1 *Child and Adolescent Social Work Journal*.
- Richards, T.N.; Tomsich, E.; Gover, A.R.; Jennings, W.G. (2016). The Cycle of Violence Revisited: Distinguishing Intimate Partner Violence Offenders Only, Victims Only, and Victim-Offenders. *Violence Vict.* 2016, *31*, 573–590.
- Sardinha, L., M. Maheu-Giroux., H. Stockl., S.R. Myer., C. Garcia -Moreno. (2022). Global regional and prevalence estimates of physical or sexual or both intimate partner violence against women in 2018. *Lancet Elsevier*. https://Doi.org/10.1016/s0140-6736(21)02664-7

- Schäfer, Ingo. Manoëlle Hopchet, Naomi Vandamme, Dean Ajdukovic, Wissam El-Hage, Laurine Egreteau, Jana Darejan Javakhishvili, Nino Makhashvili, Astrid Lampe, Vittoria Ardino, Evaldas Kazlauskas, Joanne Mouthaan, Marit Sijbrandij, Małgorzata Dragan, Maja Lis-Turlejska, Margarida Figueiredo-Braga, Luísa Sales, Filip Arnberg, Tetiana Nazarenko, Natalia Nalyvaiko, Cherie Armour & Dominic Murphy (2018). Trauma and trauma care in Europe, *European Journal of Psychotraumatology*, 9:1, DOI: 10.1080/20008 198.2018.1556553
- Sifat, R. (2020). Impact of the COVID-19 pandemic on domestic violence in Bangladesh. *Asian Journal of Psychiatry*, *53*. https://doi:10.1016/j.ajp. 2020.102393.
- Solehati, T., Pramukti, I., Hermayanti, Y., Kosasih, C.E., Mediani, H.S. Current of Child Sexual Abuse in Asia: (2021). A Systematic Review of Prevalence, Impact, Age of First Exposure, Perpetrators, and Place of Offence. *Open Access Maced J Med Sci.*, *9*(T6),57-68. https://doi.org/10.3889/oamjms.2021.7334
- Swahn, M., Culbreth, R., Staton, C., Self-Brown, S., & Kasirye, R. (2017). Alcohol-Related Physical Abuse of Children in the Slums of Kampala, Uganda. *International Journal of Environmental Research and Public Health*, *14*(10), 1124. MDPI AG. http://dx.doi.org/10.3390/ijerph14101124
- The National Child Traumatic Stress Network, n.d). Intimate partner violence. https://www.nctsn.org/what-is-child-trauma/trauma-types/intimate-partner-violence
- Thiel F, Büechl VCS, Rehberg F, Mojahed A, Daniels JK, Schellong J, & Garthus-Niegel S. (2022). Changes in Prevalence and Severity of Domestic Violence During the COVID-19 Pandemic: A Systematic Review. *Front Psychiatry*. 2022 Apr 13;13:874183. doi: 10.3389/fpsyt.2022.874183. PMID: 35492711; PMCID: PMC9043461.
- Tilbrook E., Allan A., Dear G. (2010). Intimate partner abuse of men. Edith Cowan University. https://researchers.uq.edu.au/researcher/17672.
- UNICEF, (2014) United Nations Children's Fund, Violence against Children in East Asia and the Pacific: A Regional Review and Synthesis of Findings, Strengthening Child Protection Series, No. 4, UNICEF EAPRO, Bangkok, 2014. ISBN: 978-974-685-145-9
- UNICEF. (2015) Adolescents under the rader in Asia- Pacific aids response. https://www.unicef. org/media/files.
- UNICEF (2020). New five-year National Prevention and Response Plan and 'Spot It, Stop It' campaign to tackle violence launched. https://www.unicef.org/kenya/press-releases/
- Walker A., Lyall K., Silva D., Craigie G., Mayshak R., Costa B., Hyder S., Bentley A (2019). Male victims of female-perpetrated intimate partner violence, help-seeking and reporting behaviors: A qualitative study. *Psychology of Men & Masculinities*, 21(2), 213–223. https://doi.org/10.1037/men0000222

- Wangamati, C. K., Yegon G., Sandby J., Prince R. J., (2019). Sexualised violence against children: A review of laws and policies in Kenya, *Sexual and Reproductive Health Matters*, 27:1, 16-28, doi: 10.1080/26410397.2019. 1586815.: https://doi.org/10.1080/26410397.2019.1586815.
- Wathen, C. N., & MacMillan, H. L. (2013). Children's exposure to intimate partner violence: Impacts and interventions. *Paediatrics & Child Health*, 18(8), 419-422. https://doi: 10.1093/pch/18.8.419.
- Wells, M. C. (2014). Preventing Child maltreatment: A critical startegy for stopping intimate partner violence in the next generation. *Shift: The Project to End Domestic Violence* .https://prism.ucalgary.ca/bitstream/handl/1880/51906/R2
  1Shift\_2014\_Preventing>Child>Maltreatment>in\_Alberta.pdf;jsessionid=.
- World Health Organization, (2013). Global and regional estimates of violence against women: Prevalence of health effects of intimate partner violence and non-partner sexual violence. https://apps.who.int/iris/bitstream/handle/10665/85239/9789241564625eng.pdf;jsessionid =
- World Health Organization. (2015). Mh GAP intervention guide for mental, neurological and substance use disorders in non-specialized health settings. https://www.who.int/europe/publications/i/item/9789241549790. Geneva, Switzerland.
- World Health Organization. (2020). *Child maltreatment*. https://www.who.int/news-room/fact-s sheets/detail/child-maltreatment.