Summary report

VIOLENCE AGAINST CHILDREN IN TIMOR-LESTE AND CONSEQUENCES ON ADULT HEALTH AND EXPOSURE TO ADVERSITY

SECONDARY DATA ANALYSIS OF NABILAN BASELINE SURVEY DATA







Background

VIOLENCE AGAINST CHILDREN AND VIOLENCE AGAINST WOMEN ARE BOTH SERIOUS SOCIAL PROBLEMS AROUND THE WORLD.

Violence against children refers to any type of emotional, physical or sexual abuse against a child. Violence against women includes multiple forms of violence perpetrated against women, such as sexual harassment, stalking, sexual violence, emotional abuse, or physical violence. Intimate partner violence (IPV) is one form of violence against women, and refers to emotional, physical or sexual violence against a woman by her intimate partner, such as her husband or boyfriend.

In the Asia-Pacific region, between 40-66% of children have been hit, slapped, pinched or beaten on the backside. In Timor-Leste, other literature suggests that one in four children under the age of four are left alone or in the care of a child younger than 10, and one in three women reported physical IPV by a male partner in the past year.

Violence against women and violence against children are often addressed as separate problems, however, they are closely related. The same factors that increase children's risk of violence also increase women's risk of violence. Often, violence against women and violence against children occur in the same home. Further, women who experience violence during childhood are more likely to experience violence when they are adults. For these reasons, it is important to understand the connections between violence against women and violence against children in Timor-Leste.

The current study used data from the Nabilan Health and Life Experiences Baseline Survey, which is a household survey with women and men in Timor-Leste on their experiences and perpetration of violence during their lives. Adult women and men reported on their childhood experiences of violence, as well as their experiences of violence and their health as adults. (For more information on the Nabilan study, please see the baseline study report, "Understanding Violence Against Women and Children in Timor-Leste: Findings from the Nabilan Baseline Study," which was published in 2015).



USING DATA FROM THE
NABILAN BASELINE STUDY,
THIS REPORT PROVIDES
ANSWERS TO THE
FOLLOWING QUESTIONS:



How common is violence against children in Timor-Leste?



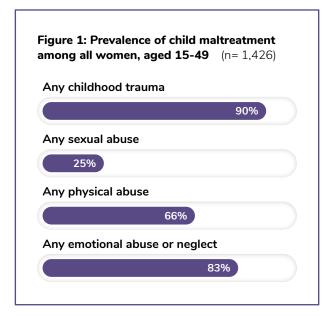
How is violence against children related to women's experiences and men's perpetration of violence when they are adults?



How is violence against children related to women's and men's health when they are adults?

Violence against children

Violence against children is high in Timor-Leste for both women and men. Among all women surveyed, 90% reported at least one incident of physical abuse, sexual abuse or emotional abuse and neglect. The most common form of violence that women experienced as children was emotional abuse or neglect (83%), followed by physical abuse (66%). One in four women reported any childhood sexual abuse (25%).



Among men surveyed in the Nabilan Baseline Study, 88% reported that they experienced at least one form of violence during childhood. Similar to women, emotional abuse and neglect was the most common form of violence experienced by men during childhood (75%). The majority of men in this sample reported experiencing physical abuse before age 18 (62%) and 43% reported at least one form of childhood sexual abuse.

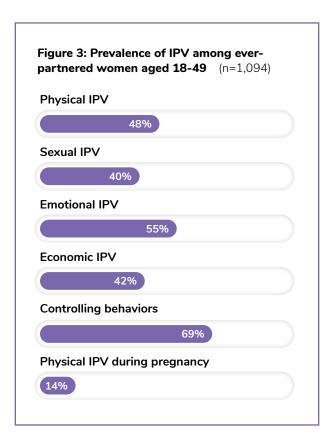


Implications: Many people experience violence during childhood in Timor-Leste. However, violence is preventable. Efforts to stop violence in childhood before it starts should be a priority. These efforts can include adapting programs shown to prevent violence against children in other settings, such as parenting programs at home and through schools, early childhood education projects, and home visits for new parents. Work is also needed to provide timely and appropriate support to children who do experience abuse to prevent negative consequences later in life.

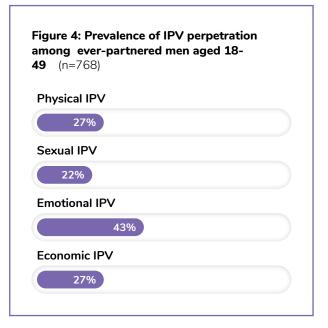
Intimate partner violence

Intimate partner violence is also a significant problem in Timor-Leste. Overall, 48% of women aged 18-49 who had ever been partnered (e.g. married or dating) experienced physical IPV during their life and 40% reported experiencing sexual IPV.

Over half of women reported ever experiencing emotional IPV. Almost three-quarters of women (69%) reported that their male partner used controlling behaviours. Among women who experienced pregnancy, 14% reported physical IPV during their pregnancy.



Among ever-partnered men, 27% reported perpetration of lifetime physical IPV and 22% reported perpetration of lifetime sexual IPV. Prevalence of emotional IPV was 43% and 27% of men reported perpetration of economic IPV.



Implications: As reported in the Nabilan Baseline Study, IPV is a significant issue in Timor-Leste. Programs to prevent and respond to women's experiences and men's perpetration of IPV are critical priorities.

These programs can include initiatives to prevent IPV, such as community mobilisation efforts to shift attitudes and norms that make violence seem like an inevitable part of intimate relationships, or safe dating and positive relationship-building interventions. Healthcare and legal systems are needed to provide appropriate support and response to women who have experienced violence.

Connections between violence against children and IPV

Experiencing violence during childhood was a strong predictor of whether a woman would experience IPV as an adult, or whether a man would perpetrate IPV as an adult.¹ Overall, women who experienced any abuse during childhood were four times more likely to experience controlling behaviors by a partner, four times more likely to experience sexual IPV, seven times more likely to experience physical IPV and five times more likely to experience emotional IPV, compared to women who did not experience violence during their childhood.

Figure 5: Odds of experiencing different types of IPV if women experience any violence during childhood

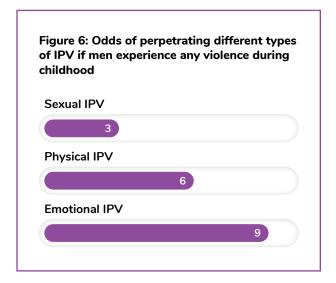
Controlling behaviors

Sexual IPV

Physical IPV

Emotional IPV

Among men, we see a similar pattern. Men who experienced any form of violence during childhood were three times more likely to perpetrate sexual IPV, six times more likely to perpetrate physical IPV and nine times more likely to perpetrate emotional IPV against a female partner, compared to men who did not experience violence as a child.



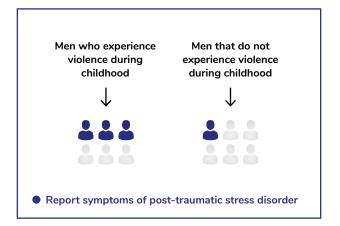
Implications: Women and men's experiences of violence during childhood were related to their risk of experiencing and perpetrating violence in their intimate partnerships as adults. Thus, effects to prevent violence against children can not only reduce children's exposure to violence, but also reduce the risk that children will grow up to experience or perpetrate violence in their marriage or dating relationships.

Connections between violence against children and women and men's health as adults

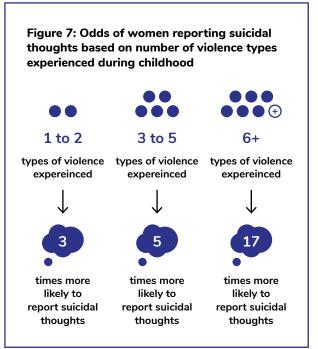
Violence against children also has negative impacts on women and men's health in adulthood.

Women who experienced violence during childhood were more likely to be depressed as adults, and more likely to have more difficulties in daily activities (e.g. walking, seeing, hearing, climbing steps) compared to women who did not experience violence as children.²

Among men, those who experienced violence during childhood also reported more depressive symptoms compared to men who did not experience violence during childhood. Men who experienced violence in childhood were three times more likely to also report symptoms of post-traumatic stress disorder during adulthood, even after also accounting for exposure to conflict-related violence.



Among both women and men, those who experienced violence as children were more likely to report suicidal thoughts compared to those who did not experience childhood violence. For example, women who experienced one to two types of violence during childhood were three times more likely to report suicidal thoughts compared to women who did not experience any violence as children. This pattern was even more stark for women who experienced six or more types of violence as children: they were 17 times more likely to report suicidal thoughts compared to women who did not experience violence during childhood.



Implications: Violence during childhood leads to negative mental and physical health consequences in adulthood. Efforts to prevent violence against children can have positive effects on women and men's health and wellbeing later in life.

Connections between violence against children and family dynamics

Women and men's experiences of violence during their childhood also impacted their family life. Violence during childhood was related to women and men's use of harsh parenting practices (e.g. smacking their own children). For example, women who experienced childhood violence were four times more likely to smack their own child, compared to women who did not experience violence during childhood. The same pattern was observed for men: those who experienced violence during childhood were three times more likely to perpetrate harsh parenting practices against their own children.

Women and men who experienced violence during childhood were also more likely to have gender inequitable attitudes, for example believing that women should obey their husbands or that women who experience sexual violence "asked for it". We created a single score of gender attitudes, with higher scores indicating more equitable attitudes and lower scores indicating less equitable (or more inequitable) attitudes. For both women and men, experiencing any violence during childhood was associated with a decrease in their score, thus indicating less equitable attitudes related to gender.

Finally, we tested the connections between violence during childhood, women and men's harsh parenting practices, gender attitudes and IPV victimisation (women) and perpetration (men).

Among women, increased exposure to violence during childhood was linked with more inequitable gender attitudes, use of harsh parenting practices and experiences of all three types of IPV (physical, sexual and emotional). In particular, the connection between violence during childhood and use of harsh parenting practices was partially explained by women's gender attitudes. That is, women who experienced childhood violence were more likely to have inequitable gender attitudes, and in turn, were more likely to smack their own children.

For men, violence during childhood was related to men's perpetration of emotional IPV in part through their gender attitudes. In other words, men who experienced violence during childhood were more likely to have inequitable attitudes, and in turn were more likely to perpetrate emotional IPV against their female partner.

Implications: Efforts to prevent violence against children may have positive long-term effects on later family dynamics, including reductions in harsh parenting practices and intimate partner violence. Interventions to shift harmful gender norms may also be successful in reducing the prevalence of harsh parenting as well as certain types of IPV.

Conclusion

Violence against children and violence against women are interconnected social problems in Timor-Leste. Violence against children is widespread in Timor-Leste and carries significant consequences for adult health and family well-being. Over three-fourths of women and men in our samples reported experiencing any form of violence during childhood. While emotional child abuse and neglect were the most common forms of maltreatment for both women and men, physical and sexual abuse were also very common.

This study shows that childhood trauma and violence against women intersect in a number of important ways. Men's experiences of childhood trauma were associated with their perpetration of all measured forms of intimate partner violence. Women who have experienced any type of childhood trauma are at increased risk of experiencing violence by intimate partners in adulthood.

Women and men's experiences of violence during childhood were also connected with their mental and physical health as adults. Women who experienced childhood violence were at increased risk of reporting depression, disability and suicidal thoughts. Men who experienced violence as children were more likely to experience depressive symptoms, suicidal thoughts and post-traumatic stress disorder symptoms. These results held even after taking into account age, schooling attainment, socio-economic status and (for men only) exposure to conflict-related violence.

The study also found that harsh parenting is common in Timor-Leste. Women reported use of physical discipline against children younger than 18 more than men. This is consistent with other studies from the region and likely reflects that mothers take primary responsibility for child rearing, and that discipline is considered a part of raising a child. However, the study also found that harsh parenting practices reflect a culture in the home that normalises physical discipline of both children and women. For example, women's use of harsh parenting practices are strongly linked with women's inequitable gender attitudes which also condone men's use of violence against women.

Overall, violence against women and violence against children intersect in a number of important ways, and can no longer be understood as totally separate issues. This data has implications for prevention practice to end both forms of violence, which would benefit from a meaningful integrated approach. In particular, the data points to both a co-occurrence and a cycle of abuse, with violence during childhood leading to both experiences and perpetration of violence against women and further child maltreatment during adulthood. A comprehensive approach to address the home environment and violence-supportive culture as a whole, and to work with families to promote positive parenting practices, is needed. Particularly, there is a need for interventions that focus on addressing gender inequality, the normalisation of violence across the life course, and transforming men's power over women and children.

Recommendations

Reduction in child maltreatment and promoting healthy, stable and safe childhoods is integral to reducing violence in adulthood in Timor-Leste.

Holistic programs that are developmentally appropriate or age and gender-specific are needed. Global evidence on what works to prevent child maltreatment, as outlined in the INSPIRE framework can be adapted to the Timor-Leste context.

Based on this study, the following priority areas should be addressed:

- 1 Develop interventions that take a comprehensive approach to address the home environment and violence-supportive environment as a whole, and work with families to promote positive parenting practices. Interventions targeted at parents or caregivers can disrupt intergenerational cycles of physical child abuse.
- Focus on interventions specifically to address sexual violence against children, both boys and girls. A recent review of the evidence outlines effective interventions that could be adapted.³

- Develop and implement interventions that focus on addressing gender inequality, the normalisation of violence across the life course, and transforming men's power over women and children. Evidence-based and feminist-informed interventions are recommended, adapting interventions that have been identified to be effective (for example, in the RESPECT Framework) to the Timor-Leste context. This could include:
 - Supporting feminist movements and leaders
 - ii. Community-based mobilisation programs such as SASA!
 - iii. Faith-based interventions
 - iv. School-based respectful relationships interventions and comprehensive sexuality education
 - v. Working with men and boys to challenge stereotypes, toxic masculinity, and norms that justify violence
- Support counselling and therapeutic approaches for child survivors that are trauma-informed, age-appropriate and recognise life-course patterns of violence, including exposure to conflict-related trauma.





End notes

- ¹ These analyses are called multivariable logistic regression analyses, and they took into account variation in men and women's schooling, household wealth, and age.
- ² All analyses presented in this section took into account variation in men and women's schooling, household wealth, and age. Analysis of men's PTSD also accounted for men's exposure to conflict-related violence.

³ Ligiero, D., Hart, C., Fulu, E., Thomas, A., & Radford, L. (2019). What Works to Prevent Sexual Violence Against Children. Together for Girls.

