

Exposure to Violence among Adolescents in Families with Domestic Violence

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Abstract

Studies of domestic violence in India have largely taken into account the experiences of women. In contrast, studies which focus on children's exposure to domestic violence are rare. This study assesses the levels of domestic violence in families and the frequency of adolescents' exposure to it by analysing the accounts of discourses of adolescents themselves. A quantitative approach was adopted to explore the experiences of adolescents. The respondents were school-going adolescents from Kasaragod district of Kerala, India. Only those students who admitted to the occurrence of domestic violence in their homes and were willing to be part of the study were considered. The data was collected through interviews with adolescents growing up in families in which they experienced their fathers' violence against their mothers. This research is relevant and useful to understand how much violence occurs in the adolescents' homes and the levels of this to which they are exposed.

Keywords

adolescents, violence at home, level of violence, exposure

Introduction

"First and foremost, children need a safe and secure home, free of violence, and parents that love and protect them. They need to have a sense of routine and stability, so that when things go wrong in the outside world, home is a place of comfort, help and support." (UNICEF, 2006: 3).

After generations of silence there has been a growing recognition of domestic violence as a social problem in our society in recent years. It is widespread and occurs among all socioeconomic groups. In India, the historical patriarchal system dominates domestic violence discourses. In the social and cultural context of India, it is apparent that some individuals are at greater risk for victimisation than others. Domestic violence has adverse effects on individuals, families, and society in general. The experiences of individuals, and especially children living in families with domestic violence, are greatly moulded by this phenomenon. The issue is highlighted only when severe cases of physical and sexual abuses of children in these families of violence are reported. This study explores the experiences of adolescents living amidst violence in families.

Prevalence of Domestic Violence

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The World Health Organisation (WHO) defines violence as “the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community that either results in or has a high likelihood of resulting in injury, death, psychological harm, mal development or deprivation” (cited in WHO, 2014:2). As spousal violence is the most common form of violence against married women, the severe effects of domestic violence are greatest on women and children. Hackett (2011) says that domestic violence against women is socially tolerated in India provided that the cause is considered “legitimate.” She cites Rao (1997) to point out that disputes over dowries, a wife's sexual infidelity, her neglect of household duties, and her disobedience of her husband's dictates are all considered grounds for wife-beating. Moreover, domestic violence involving sexual abuse, economic deprivation, verbal abuse, incarceration and psychological abuse are rarely publicly acknowledged. In India, women are socialised to accept, tolerate, and even rationalise domestic violence and to remain silent about such experiences.

According to the report on the National Family Health Survey (NFHS-3) by IIPS and Macro International (2007), 34% of women aged 15–49 years have experienced physical violence, and 9% have experienced sexual violence. In all, 35% of women in India have experienced physical or sexual violence, including 40% of married women. The report further states that for most women who have ever experienced spousal violence, the violence first occurred within the first two years of their marriages. Hence it can be presumed that the violence among married couples starts between two to four years into their marriages and continues subsequently. This is the time when children are born into the families and the process of their socialisation begins. Hence children in these families start becoming exposed to violence between their parents at a very young age. Parents being the first socialising agents, the experiences and social lives of children are significantly influenced by positive or negative experiences.

According to the report released by UNICEF in 2006, children who live with and are aware of violence in the home face many challenges and risks that can last throughout their lives. There is a significant risk of ever-increasing harm to the child's physical, emotional and social development. A strong likelihood exists that this will become a continuing cycle of violence for the next generation. Children who grow up with violence in the home learn early and powerful lessons about the use of violence in interpersonal relationships to dominate others, and might even be encouraged in doing so (Lereya, 2013). Children who suffer rejection, neglect, harsh physical punishment and sexual abuse or witness violence at home or in the community are at greater risk of engaging in aggressive and antisocial behaviour at later stages in their development, including violent behaviour as adults (WHO, 2014).

The Family as a System of Interaction and Learning

The theory that best explains domestic violence is social learning theory. It suggests that violence is a learned behaviour and can be triggered by stress, alcohol abuse and money. The theory holds that children learn directly to be violent by observing their violent parent (s). Observation leads to the imitation of behavioural aggression and the cognitive incorporation of pro-violence attitudes. Imitation of role models is the most important element in learning. Children learn behaviour at an early age in life from parents. In fact parents and guardians have the greatest impact on their behaviour, attitudes and relationships. The learned behaviour is carried by individuals into their adulthood.

According to the family systems approach, families form a system of interacting elements. In a family consisting of two parents and an adolescent, the subsystems would be the mother and the adolescent, the father and the adolescent, and the mother and the father. In families with more than one child or with extended family members who are closely involved in the family, the family system becomes a more complex network of subsystems consisting of

dyadic relationships (a relationship of two persons) as well as every possible combination of three or more persons (Arnett, 2004).

The framework for this research was drawn from Bronfenbrenner's ecological theory (1970) which determines the interplay between the self and the environment. Urie Bronfenbrenner developed the ecological systems theory to explain how everything in a child and in the child's environment affects how that child grows and develops. He labelled different aspects or levels of the environment which influence children's development, including the microsystem, the mesosystem, the exosystem, the macrosystem and the chronosystem (Bronfenbrenner, 1994).

According to the ecological model of influences on domestic violence in India (based on the domestic violence model presented in Naved and Pearson (2005, cited in Hackett, 2011), in the larger societal context, it can be seen that the gender norms and patriarchal histories influence levels of domestic violence. Economic stress and caste inequalities play a role in the 'immediate familial context', influencing the 'individuals involved' and their tendency for violence in the home. Alcohol abuse, education and income are seen as influencing factors at the individual level (Hackett, 2011).

Exposure to Domestic Violence

Exposure is commonly defined as being within sight or sound of the violence (Edleson et al., 2007). Many experts conceptualise exposure to domestic violence (also referred to as marital violence, inter-parental violence (IPV or inter-partner violence), as having to live in a violent and unstable environment or being influenced by negative and limiting role models, as forms of psychological maltreatment or emotional abuse. Exposure to domestic violence is a form of trauma that terrorises the children by forcing them to observe a loved one being physically or verbally assaulted. Children may actually observe a violent act, overhear some form of violent behaviour, or see the results of the assaults, for example in the form of bruises (Barnett, 2005).

Holden (2003, cited in Jaffe et al., 2012) identified ten different types of exposure based on qualitative reports from children and mothers as well as other research reports: (1) exposed prenatally, (2) intervenes to stop the violence, (3) victimised by one or both parents, (4) participates in conflict or violence, (5) is an eyewitness, (6) overhears the violence, (7) observes the initial effects, (8) experiences the aftermath, (9) hears about it indirectly, and (10) is ostensibly unaware of the violence according to a parent (e.g., the assault did not occur at the home, or the mother thought that the child was asleep when the assault occurred).

There are several dimensions that can determine the consequences of inter-parental conflict on adolescents and their parents: frequency, intensity, content, resolution, explanation given to the child, child involvement, and mode of expressing the conflict (Aktinson, 2009). The children in families with domestic violence experience a manifold nature of threats. They blame themselves for not preventing the violence or for causing it. They themselves are likely to experience abuse, neglect or injury. They receive a powerful lesson that people who love each other also hurt each other.

Maternal stress and paternal irritability are two recognised violence-related variables. Men who assault their wives are also likely to be emotionally distant from their children and use power tactics to control them. In an analysis of 116 battered women and their children, the father abused approximately 50% of the children, the mother abused 35% and both the parents abused the remaining 15% (cited in Rodriguez, 2006). The frequent co-existence of domestic violence and child abuse can be accounted for in a number of ways. First, violent adults may often not discriminate between different family members. Second, adult victims may not be able to meet the physical, emotional or supervisory needs of their children as a result of physical injury and/or poor mental health. And third, children may be injured whilst

trying to intervene or while being carried by the adult victim at the time of the assault (Rodriguez, 2006).

According to Rosewater (2003), domestic violence is not a series of unrelated incidents but is a patterned, persistent and cumulative process. The author further cites Zweig and Burt (2002) who postulate that violence which escalates over time may pose especially serious and negative consequences and more complex safety concerns for the primary victims, as well as for child witnesses. Edleson et al. (1999) found that a significant proportion of children who witness violence may have long-term developmental problems including depression, trauma-related symptoms, and low self-esteem.

Various researches conducted in India have proved that children are affected during the violent episodes in the family. A study in Kerala by Sunny (2007) reported that children are often close witnesses to the perpetration of violence in the family. This witnessing of domestic violence and growing up in the situation of the strained relationship between their parents may lead to emotional and behavioural problems. A review of personal experiences of children by Sriram (2001), indicated that they were subject to violence by their parents (father 27.5% and mother 29%). The study by Suja and Jincy (2016) of institutionalised adolescents who were victims of domestic violence, shows that self-destruction is higher among the 15–18 age group and that dysfunction is high among children who faced abuse from family members.

Objectives

Through this study an attempt was made to assess the exposure to domestic violence of adolescents aged between 10 and 18 years.

The specific objectives of the study were:

1. To find out the duration of adolescents' exposure to inter-parental violence.
2. To assess the level of violence at home of the adolescents under study.
3. To assess the adolescents' levels of exposure to violence at home.
4. To assess the adolescents' levels of involvement in violence.

Methodology

A quantitative approach was used to account for the experiences of adolescents living in violent families. The sub-scales of the standardised tool, Child Exposure to Domestic violence Scale (CEDV) by Jeffrey Edleson et al. (2007), were used to collect the quantitative data. The CEDV measures varying degrees and levels of child exposure to domestic violence. The subscales of CEDV that measure (1) Level of Violence (2) Exposure to Violence at Home, (3) Involvement in Violence. A section of the CEDV that consists of questions to gather demographic information including gender, age, religion, current living situation and family composition was used. Culture-specific changes were made to the wording of the tool, with permission from the author.

The present study was conducted in Kasaragod, the northernmost district of Kerala in India, among 120 school-going adolescents in the age group 10–18 years, who were identified as severely affected by domestic violence and continue to live with their parents in their families. The students were selected using purposive sampling through the school counsellors in the schools identified as located in the communities where there was a high prevalence of domestic violence.

As in many other parts of the world, in the cultural context of Kasaragod family violence is secretly kept in the family and nobody talks about it. For adolescent students, especially boys, disclosing the issues would mean that they are vulnerable. Hence the identification of the adolescents exposed to domestic violence was a difficult task for the study because the

school counsellors did not have a separate data bank exclusively for this matter. They usually attended to the cases as and when these came to them, either directly or referred to them by teachers. To identify the adolescents affected by domestic violence, the researcher provided an orientation to the school counsellors for equipping them to identify the adolescents exposed to domestic violence. The participants were also provided with the standardised checklists for identifying the adolescents exposed to domestic violence which constitute the primary data of the research. Two things seemed obstructive in the conduct of study, namely the sensitivity of the topic and the hesitancy of adolescents to reveal unpleasant experiences they had from their own homes. Even after identification, not all the respondents were willing to talk about the violence between their parents, as it is considered a stigma to reveal family issues to unknown persons. During data collection it was revealed that even a few of those adolescents who supported the research had not spoken about the issues to their closest friends. More adolescent girls were willing to talk than boys. A few of the school authorities were also reluctant to give permission as it would mean stigmatising the school as having “children with abuse”. For ethical reasons, the respondents were taken only from the government schools in the Kasaragod district, where the presence of School Counsellors was ensured.

Results and Discussion

Demographic Profile

In the present study in which 120 adolescents participated, the majority (80) of them were girls. The adolescent girls seemed more willing to open up to the sensitive issue of domestic violence than were boys. This might also be due to the reason that both the school counsellor and the researchers were females. The adolescent participants varied in age from 10 to 18 years. The majority of the respondents were in 9th (35.8%) and 8th (34.2%) Standard. Eighty-eight per cent of the respondents (106) were Hindus, 10% (12) were Christians and only two (1.7%) of them belonged to Muslim community. Kasaragod is a district predominantly inhabited by people belonging to the Hindu religion. According to the 2011 Census, 55.8% of the population were Hindus, 37.2% Muslims, 6.7% Christians and 0.3% followed other religious beliefs.

Family Composition

The family composition showed that the majority (78.3%) of the adolescents lived with their father, mother and siblings. Twenty-five per cent had younger brothers, 20.8% elder brothers, 14.2% younger sisters and 15.8% had elder sisters. The presence of grandparents, a unique feature of the rural Indian culture, was visible in families of a good number of respondents (22.3% had grandmothers and 9.2% had grandfathers). The presence of grandparents and siblings was seen to be a supportive factor for adolescents living in violent homes. Their presence and sharing reduced the effects of domestic violence exposure.

Socio-Economic Status: As regards the family, 85.8% of the adolescents (103) belonged to BPL (Below Poverty Line) families and only 14.2% of them (17), were from APL (Above Poverty Line) families. This is because the areas as listed by Childline sources as being where the majority of domestic violence cases were reported by children, were the mountain and coastal regions of Kasaragod. These are regions inhabited by the tribal, scheduled caste and fishing communities. The adolescents were more comfortable with the usage of the term BPL and APL to assess their families. BPL is an economic benchmark and poverty threshold used by the Government of India to indicate economic disadvantage and to identify individuals and households in need of government assistance and aid. Studies reveal that the economic status of the family is an important predictor of violence. According to the study by

Chatha et al.(2014), 37% of the respondents expressed insufficient income as major cause of spousal quarrels with their husbands which in turn led their husbands to behave violently.

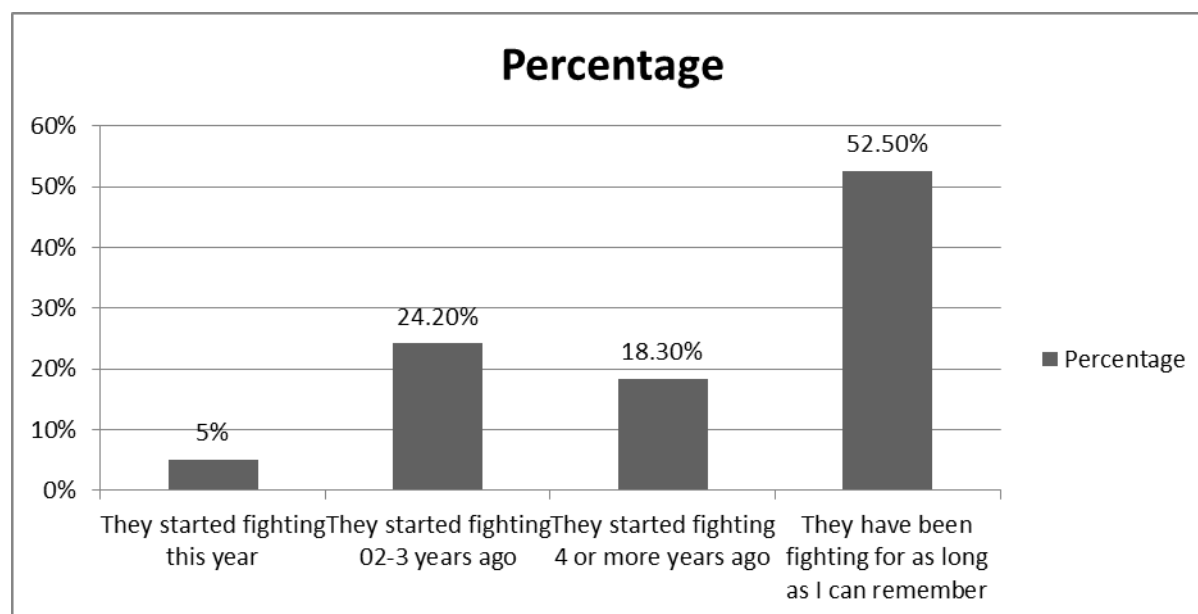
Duration of Adolescent Exposure to Violence at Home

According to the clinical social worker, Terry Gaspard (2015), when parents argue excessively and for too long, it can leave children feeling insecure and fearful. Even if it is not the parents' intention to cause harm, on-going conflict can threaten a child's sense of safety. Parents forget that children are vulnerable to feelings in the their parents' arguments. High parental conflict can send them into high alert. As a result, children may have difficulty sleeping, concentrating at school or on social activities; or be plagued with fear and anxiety about their future.

Repetti et al. (2002) in their study of risky families examined 47 studies that linked children's experiences in risky family environments to later issues in adulthood. They found that those who grew up in homes with high levels of conflict had more physical health problems, emotional problems, and social problems later in life when compared to control groups. As adults they were more likely to report vascular and immune problems, depression and emotional reactivity, substance dependency, loneliness, and problems with intimacy.

As shown in Figure 1, with regard to the conflicts between the parents, 63 of the adolescents (52.5%) claimed that their parents had been fighting for as long as they could remember. Twenty-two (18.3%) respondents said that they remembered that their parents had started fighting for four or more years. Twenty-four per cent of the adolescents (29) admitted that their parents had started their fights recently in two or three years. Six (5%) of the respondents stated that their parents had started fighting in front of them since last year.

Figure 1. Perception of respondents of the time when the quarrel among parents started

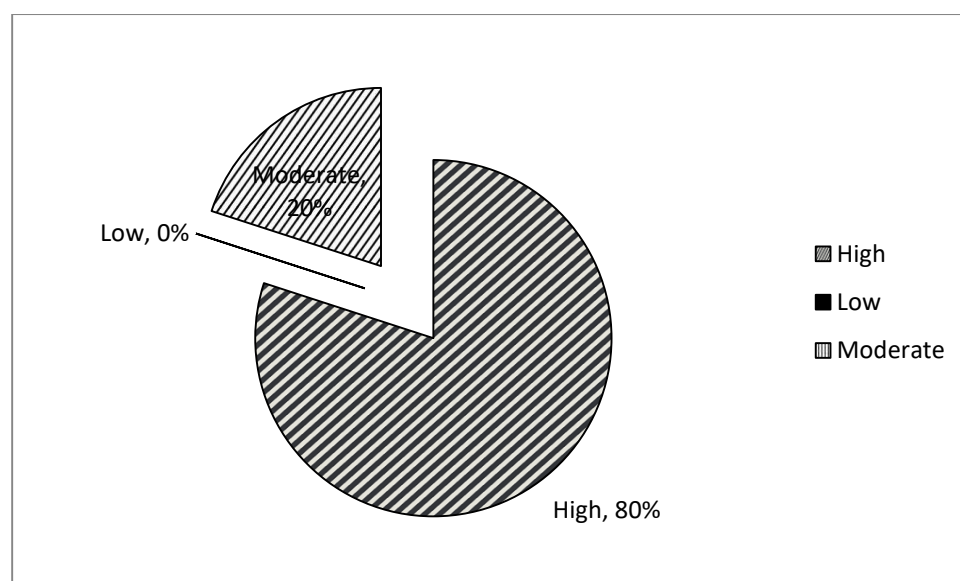


Adolescents Exposure to Domestic Violence

Purposive sampling was used to select the respondents exposed to domestic violence. Only those adolescents who admitted to the occurrence of violence among their parents were interviewed for the study. The overall data shows (Figure 2) that out of the 120 respondents, the majority i.e. 96 respondents (80%) were exposed to domestic violence in their families at

a higher rate and 24 respondents (20%) were exposed to domestic violence at a moderate level.

Figure 2. Occurrence of domestic violence



Level of Violence Between Adolescents' Parents

They reported that 50% to 70% of women were abused by their male partners. Davies (2011) identified the kinds of destructive tactics that parents use with each other that harm children: verbal aggression like name-calling, insults and threats of abandonment; physical aggression like hitting and pushing; silent tactics like avoidance, walking out, sulking or withdrawing; or even capitulation—giving in that might look like a solution but is not a true one.

The adolescents were asked to respond to different levels/situations that commonly occurred before and during violent episodes and its frequency of occurrence.

Table 1. Level of violence between respondents' parents

Level of violence	Frequency and Percentage				Total
	Never	Sometimes	Often	Almost always	
1. Parents disagree with each other	3(2.5%)	67(55.8%)	35(29.2%)	15(12.5%)	120 (100%)
2. Father hurts mother's feelings by calling her names, yelling, threatening	23(19.2%)	41(34.2%)	43(35.8%)	13(10.8%)	120(10 0%)
3. Father stopped mother from doing something.	43(35.8%)	41(34.2%)	31(25.8%)	5(4.2%)	120(10 0%)
4. Father stopped mother from eating/ sleeping.	54(45%)	41(34.2%)	20(16.7%)	5(4.2%)	120(10 0%)
5. Father and mother argued about you.	49(40.8%)	36(30%)	29(24.2%)	6(5%)	120(10 0%)
6. Father broke/destroyed something on purpose.	66(55%)	24(20%)	25(20.8%)	5(4.2%)	120(10 0%)
7. Father hurt mother's body by slapping, hitting, kicking, choking, pushing etc.	40(33.3%)	34(28.3%)	35(29.2%)	11(9.2%)	120(10 0%)

8. Father threatened to use weapon to hurt mother	82(68.3%)	25(20.8%)	10(8.3%)	3(2.5%)	120(100%)
9. Father hurt mother with knife or other object.	99(82.5%)	18(15%)	0	3(2.5%)	120(100%)

Table 1 reveals significant levels of violence as occurring in these adolescents' homes. Almost all the respondents (117, 97.5%), except a few (3, 2.5%) revealed that disagreements between parents are common in their household. According to them, this usually triggers the beginning of severe violence, of using abusive language (97, 80.8%), leading to slapping, pushing, pulling hair and finally to abusing the body physically. A total of 80 (66.6%) respondents revealed that their "father hurt their mother physically", sometimes (34, 28.3%), often (35, 29.2%) or almost always (11, 9.2%). A total of 31.6% reported the threatened use of weapons (25, 20.8%) sometimes or often (10, 8.3%) and always (2.5%, 3). 17.5% reported actual injuries sometimes (18, 15%) or often (3, 2.5%) to their mother by their father using weapons.

The findings conform with the research by Chatha et al. (2014) which revealed that most of the women respondents experienced verbal abuse, being slapped, beaten with hands or shoes and were thrown out of their houses, and in 80% of cases the perpetrators were their husbands.

Level of Exposure to Violence in the Home

Children may directly witness instances of violence, or they may hear violence taking place through walls or see the implications of the violence in the aftermath in the form of bruises, lacerations, tears and broken objects (Beth, 2013).

Table 2: The level of exposure to violence in the home

Home Exposure (variable)	Saw the out come	Heard about it after wards	Heard it while it was happening	Saw it from far away while it was happening	Saw it and was near while it was happening
1. Parents in your family disagree	0	27	25	7	89
2. Father hurt Mother's feelings (verbal abuse)	10	12	15	5	70
3. Father stopped mother from doing something.	16	17	16	0	56
4. Father stopped mother from eating/sleeping.	8	7	6	0	43
5. Father and mother argued about you.	1	22	7	3	35
6. Father broke/destroyed something.	2	4	5	3	40
7. Father hurt mother's body	11	15	13	3	63
8. Father threatened to use weapon to hurt mother	2	2	3	0	30
9. Father hurt mother with knife or other object	0	3	0	1	13

Note: Multiple responses

Table 2 shows that many children reported seeing or hearing violence in multiple ways. It is important to note that in the large majority of families, the adolescents saw it directly and were nearby while the domestic violence was happening. The adolescents said that their

homes were usually small with two rooms, a hall and a kitchen. The violence took place in front of them and they were direct witnesses to everything that happened. As one respondent said:

“When I was back from school, I could see my mother’s hair spoiled and her eyes red....I understood she was crying. I knew father was home early that day.”

Adolescents Involvement in Violence: The adolescents in this age group understand the implications of physical violence against their mothers. Hence they get involved in the violence between their parents by trying to stop it. This involvement puts the adolescents at risk of becoming physically and emotionally hurt.

Table 3. Involvement in violence

Variable	Never (Frequency& Percentage)	Sometimes	Often	Almost Always
1. Yelled at mother and father during fight	27 (22.5%)	45 (37.5%)	25 (20.8%)	23 (19.2%)
2. Yelled at mother and father during fight from a different room	24 (20%)	48 (40%)	30 (25%)	18 (15%)
3. Called for help by phone or going next door.	70 (58.3%)	24 (20%)	18 (15%)	8 (6.7%)
4. Physically involved to stop mother and father's fight	32 (26.7%)	37 (30.8%)	32 (26.7%)	19 (15.8%)
5. Father did something to you to hurt/scare mother	92 (76.7%)	20 (16.7%)	6 (5%)	2 (1.7%)
6. Tried to get away from the fighting	74 (61.7%)	32 (26.7%)	9 (7.5%)	5 (4.2%)
7. Father's query about mother's actions	80 (66.7%)	20 (16.7%)	15 (12.5%)	5 (4.2%)

Table 3 shows that the children had deep involvement in violent events at home. A majority of the adolescents yelled at their father and mother during fights, sometimes (45, 37.5%), often (25, 20.8%) or almost always (23, 19.2%). More than half of the respondents yelled something to their mother and father from a different room either sometimes (48, 40%), often (30, 25%) and almost always (18, 15%). Respondents also called for help, sometimes (24, 20%), often (18, 15%) or almost always (8, 6.7%).

Many children (88, 73.3%) became physically involved to stop the fights between their parents, sometimes (37, 30.8%), often (32, 26.7%) or almost always (19, 15.8%). Over half (46, 38.3%) tried to get away from the fights sometimes (32, 26.7%), often (9, 7.5%) or almost always (5, 4.2%). The majority of male respondents spoke of walking away from home when the fights started. This they started doing only after growing up and entered adolescence. They spent time with friends. One 16-year old male respondent said, “As soon as I hear my father’s voice rising, I go out of the house....I know what will happen next....I spend time with friends at a youth club nearby and return only late night.”

Concerns of Adolescents Living in Families with Violence

The adolescents from violent families seemed to be highly concerned about certain matters, even while they are in school. The alcohol abuse of their fathers was found to be one of the greatest worries among adolescents, which according to them is the major factor triggering

violence. For a few of them, their mother's alcohol abuse is also a cause of worry as it adds to the reasons.

Table 4. Factors affecting adolescents

Variable	Never	Sometimes	Often	Almost Always
Worried about father's alcohol abuse	18 (15%)	21 (17.5%)	18 (15%)	63 (52.5%)
Worried about mother getting drunk	106 (88.3%)	2 (1.7%)	5 (4.2%)	7 (5.8%)

Table 4 shows that a huge majority of adolescents are worried about their father's alcohol abuse, almost always (63, 52.5%), often (18, 15%) or sometimes (21, 17.5%). Although small in number, 14 of the respondents reported that they are worried about their mother consuming alcohol, almost always (7, 5.8%), often (5, 4.2%) or sometimes (2, 1.7%). These adolescents who talked of their mother's alcohol abuse belonged to either tribal or fishing communities. The women in these communities were seen to be engaged in their traditional occupations of "kutta" (basket) making (tribals) or fish vending and were economically independent.

Overall Assessment of Adolescents' Exposure to Domestic Violence

The overall assessment of the adolescents' exposure to domestic violence can be viewed by compiling all the different variables under study, namely the duration of exposure to violence, the level of violence at home, frequency of exposure to violence and level of involvement in violence.

Figure 3. Overall assessment of adolescent exposure to domestic violence

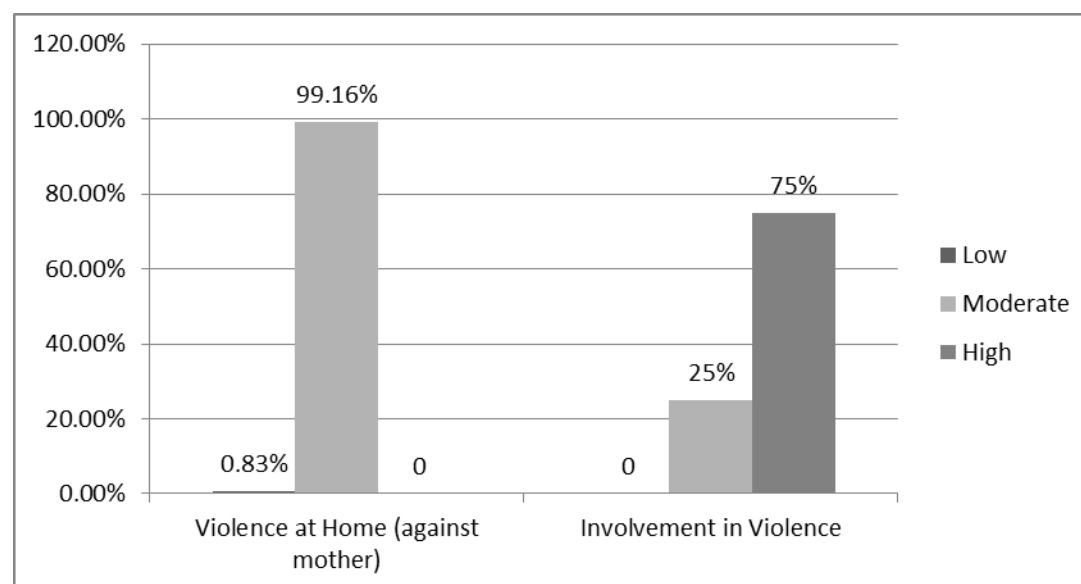


Figure 3 shows that all the adolescents were exposed to one form of the father's violence against the mother. The exposure was at moderate levels for 99.16% (119) adolescents, while only one respondent claimed it to be low. In the existing cultural context, domestic violence is an accepted phenomenon. Only very severe forms of physical abuse are considered to be domestic violence by the general community and by the respondents at the time of the study. The associated psychological or economic deprivations are not regarded as domestic violence, unless these coexist with severe physical abuse.

The adolescents understand the implications of physical violence against their mothers. Of the 120, 90 of them highly (75%) and 30 of them moderately (25%) get involved in the violence between their parents, trying to stop it. This involvement puts the adolescents at risk of becoming physically and emotionally hurt.

Conclusions

The Census 2011 data of India states that the adolescent population of India is 253 million, forming a critical segment on whom the future demographic, social, economic and political developments depend. Therefore proper planning and investment to provide the best possible services for the healthy development of adolescents would go a long way in determining the nation's progress. The study clearly points to the fact the adolescents are highly exposed to domestic violence between their parents in their own homes. With more than half of the adolescents stating that their parents had been fighting for as long as they could remember, these children with long term exposure and the remainder with short term exposure are certainly at risk. Along with direct exposure and a high rate of adolescents' involvement during the violent episodes, it can be concluded that the adolescents are extremely vulnerable. Although the central and state governments have initiated programmes such as Childline Services, Counselling and Guidance programmes, appointment of School Social Workers and Child Protection Services there is no specific programme addressing the school-going adolescents from vulnerable backgrounds. A large majority of them still remain a hidden population, suppressing the vulnerabilities to themselves. Hence, to provide the adolescents exposed to domestic violence with an opportunity to heal and develop resilience, there is a need for joint efforts by parents, teachers, child rights organisations, social work professionals, NGOs, and the health care system in collaboration with government. Both direct and indirect interventions at community, school, familial and individual levels that include mass campaigns, awareness programmes and specific training programmes at community level/school for building a culture of non-violence and proper implementation of existing laws would truly benefit the upcoming generation of our nation.

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