Potential pathways to prevention:
Understanding the **intersections** of **violence against women and children** in the family

Overview

Around the world, intimate partner violence (IPV) against women and violence against children (VAC) are happening in the same communities, homes and families. Existing data, while sparse, point to a consistent overlap between these two forms of violence (see Box 2). Despite this reality, research and programs have tended to address IPV and VAC in isolation. However, in recent years, more calls are being made for considering — and addressing — the existing intersections between IPV and VAC (Guedes et al., 2016).

Box 1: IPV and VAC in the Family

Intimate partner violence (IPV) is a type of violence against women (VAW) whereby violence is carried out by a current or former intimate partner. The UN General Assembly defines VAW as "any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life" (UN 1993).

Violence against children (VAC) is defined in the UN Convention on the Rights of the Child as "all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse" (Detrick et al., 1992).

Raising Voices is a feminist organization that has been working to prevent *both* VAW and VAC for over a decade. While we understand all violence as an abuse of power (at individual and structural levels) and strive for a cohesive approach, for the most part our VAW and VAC prevention programs have evolved independently. However, now more than ever, we are recognizing the many overlaps between VAW and VAC and are experiencing the need to explore integrated prevention programming more explicitly. For example, our *SASA!* program (www.raisingvoices.org/sasa) focuses on decreasing IPV in the community. However, it can only go so far in shifting community norms

tolerating violence without also challenging parents' use of violence to discipline children. Our Good School Program (www.raisingvoices.org/good-school) focuses on ending VAC within schools. However, it can only go so far in fostering violence-free childhoods without also addressing violence in the home and IPV among adolescents.

While these examples indicate potential opportunities for integrated programming, our experiences at Raising Voices also suggest some points of caution. For instance, women and children are in different life stages, with distinct personal and societal expectations for their autonomy, relationships and behaviors. Can programmatic integration accommodate these nuances? Also, the power dynamics underlying intimate partnerships and parent-child relationships fundamentally differ. While we strive for balanced power in adult relationships, children will continue to depend on adults in many facets of their lives even under ideal circumstances, and parents retain a legitimate role in guiding their children. Can an integrated approach address these diverse manifestations of power effectively?

Given such critical questions, in 2014 Raising Voices partnered with Columbia University to collaborate on the Intersections Study. The aim of this research was to understand perceptions and experiences of intersecting forms of violence in Uganda, while also capturing positive, loving and respectful family dynamics.

The Intersections Study included both a quantitative and a qualitative component. In brief, the quantitative component involved a fresh statistical analysis of the 2014 data from the endline survey of our Good Schools Study in Luwero District, Uganda (Devries et al., 2015). The analysis revealed that, from among 525 caregiver-child pairs, 33% reported both IPV and VAC within their families. Furthermore, parents who reported perpetrating or experiencing IPV were more likely to also report perpetrating VAC, compared to parents who did not report any violence in their intimate relationships (Carlson et al., under review).

While these findings are compelling, what is missing from such quantitative data is an understanding that moves beyond prevalence to *how* and *why* these intersections of IPV and VAC manifest within the family environment. Such was the intention of the Intersections Study's qualitative component (Namy et al., 2017). To our knowledge, no similar research has been conducted in sub-Saharan Africa. This paper summarizes what we learned and the new thinking the qualitative findings have inspired.

Box 2: Emerging Evidence of the IPV-VAC Connection

While no global estimates exist on rates of co-occurring IPV and VAC, several studies (largely from high- and middle-income countries) indicate a strong interconnection. For instance, a review of 31 studies in the US (Appel & Holden 1998) found an average IPV-VAC co-occurrence rate of 40% within clinical samples. More recently, a nationally representative study from the US found that one in three children who witnessed IPV reported being physically abused themselves (Hamby et al., 2010). Emerging research from low income contexts suggests similar patterns; for example, a regional study from Northern Uganda found that IPV was among the most influential predictors of VAC (Saile et al., 2013).

Research Method

The qualitative component of the Intersections Study explored three questions:

  1) What are the shared and contrasting community perceptions of IPV and VAC?

  2) How do families commonly experience intersecting IPV-VAC in their daily lives?

  3) What positive dynamics do family members experience or aspire toward?

Questions (1) and (2) focused on the violence caregivers perpetrate against children and men perpetrate against women. While men also experience IPV, intimate partner violence against women is far more pervasive in Uganda and globally; prevalence data indicates that about one in three women have experienced physical or sexual violence from an intimate partner worldwide (WHO 2016).

The qualitative data were collected in December 2015 via 16 focus group discussions (FGDs) and 20 in-depth interviews (IDIs) in a low-income, densely populated community in Kampala, Uganda. With the help of local leaders, we engaged 55 adults and 51 children, ensuring a nearly equal balance of females and males. All adult participants were over the age of 18 and currently living with an intimate partner and at least one child under the age of 18. All child participants were between 10 and 15 years old and living in a household with both female and male caregivers.

FGDs were same sex with separate groups for adults and children. These discussions included a storytelling methodology known as "case vignette" (see Figure 1), which asked participants to step into the shoes of fictional characters and share ideas about the violence portrayed. While the FGDs were used to understand group perceptions and the context for violence, the IDIs prompted personal accounts of IPV and/or VAC previously experienced, perpetrated or witnessed. Both FGDs and IDIs also included questions to elicit positive experiences and ideal dynamics within the family.

We took several steps throughout to protect confidentiality and safety, including conducting all discussions in private locations, providing referral information (and proactive follow up in any child protection cases), watching out for indications of duress or trauma, and ensuring that we did not speak with more than one member of the same household. All adults gave their informed consent to be interviewed and recorded. For the children's discussions, we obtained consent from children as well as their parents. The study protocol was approved by the Ugandan National Council of Science and Technology's ethical review board.

For analysis, a team of three researchers systematically reviewed and coded all FGD and IDI transcripts, subsequently summarizing the data in matrices and mapping emerging themes to our research questions. To validate initial findings and consider alternative interpretations, we held two consultative processes with the full research team.

Limitations

During the qualitative discussions, adults and children focused mostly on physical, emotional and (at times) economic violence, and therefore, our analysis does not reflect other forms of violence such as marital rape and child sexual abuse. The vignette methodology may have also limited the scope of discussion, given that only certain scenarios were depicted. As with all qualitative research, the findings aim to provide a deep understanding of the issues; however, they are not intended to be generalized beyond the community where we worked.

Figure 1: Case Vignettes Used in the Focus Group Discussions
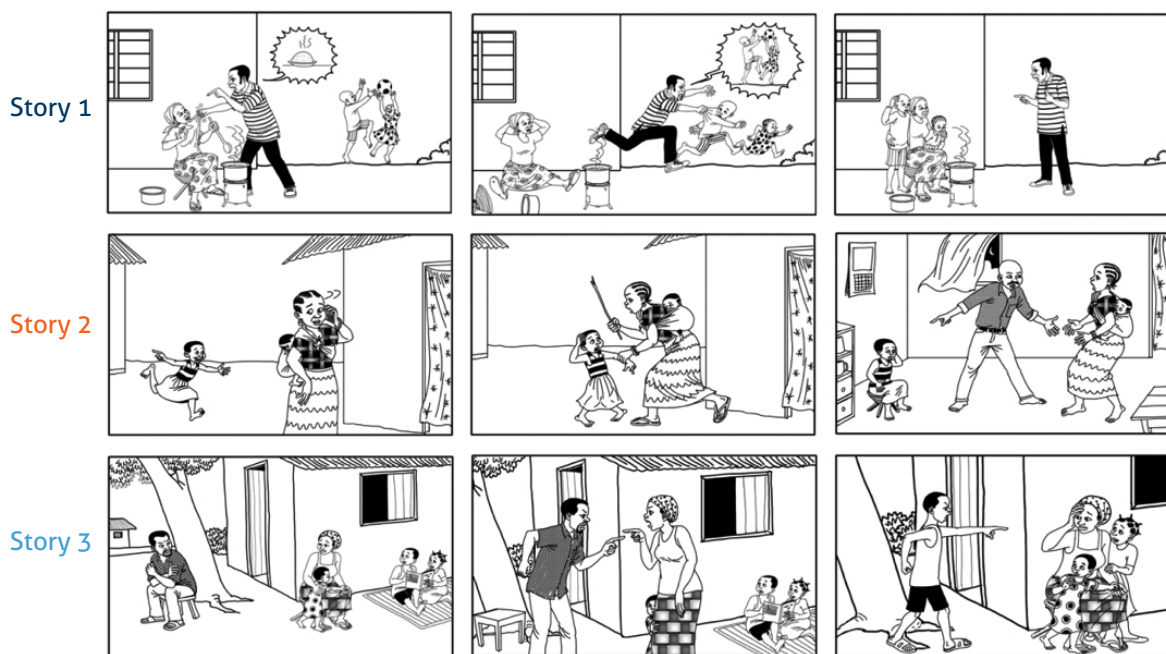
Illustrator: Marco Tibasima

Findings

The Intersections Study led to four key learnings, highlighting the ways that IPV and VAC can become intertwined within families. In addition, our findings exposed the patriarchal norms and values that often underlie both forms of violence. The interpretations to follow are based on a feminist analysis of power and patriarchy in the family (Box 3).

Box 3: A Feminist Look at Power and Patriarchy

A feminist perspective considers violence as a means of asserting and maintaining power over another person or group. Thus, men's individual and collective power over women—sustained by patriarchal gender norms, values and structures—is a core driver of men's use of violence against women. We understand patriarchy as a socially constructed and institutionalized system of male domination that explicitly creates gender inequalities and women's subordination.

1. IPV and VAC co-occur and can become profoundly intertwined, creating cycles of abuse in the family.

In alignment with our quantitative findings, focus groups and interviews revealed that IPV and VAC commonly overlap within the same household. Participant experiences suggested four common patterns of intersecting IPV and VAC, frequently manifested as cycles of abuse beyond the primary perpetrator and victim.

The first pattern we describe as **bystander trauma**, in which mothers and children experience psychological effects from witnessing their husband/father victimize another family member:

> When the father turned to the children, the mother cried so much . . . because here [earlier] she had endured the pain from his beating, because she knew that the children were safe. But when he turned to the children, she even put her hands on the head and wailed aloud . . . She was not crying because he had beaten her, but because he was beating her children. - Mother, FGD

> I would feel bad. We all feel bad seeing our mother is beaten or being mistreated in such a way . . . I would hate the situation and hate myself as well. - Daughter, FGD

The second pattern involves **negative role modeling**, whereby children learn and adopt abusive behavior in their current and future families. While a few participants shared examples of how this could affect girls (e.g., instilling a fear of marriage), most commonly this concern focused on boys. For example, many participants worried that if boys witnessed IPV they may grow up to become violent husbands or fathers:

> Children are affected whenever you beat the mother in their presence, because these children will also treat their wives in the same way. We even have a saying that 'It is the older birds that teach the young birds how to fly.' Even this child will never respect his wife, because he will always remember how his father treated his mother. - Mother, FGD

Participants also described how negative role modeling could impact the way children treat their own mothers, as witnessing IPV signals to a child that their mother is not respected or valued within the family:

> [O]nce the children hear your husband shouting at you, they will also start despising you. Like a child can even start telling you that 'I will report you to Daddy.' Do you get that? That means that the child despises you, and thinks that you are a nobody who is always shouted at or beaten.
> - Mother, IDI

The third pattern we describe as **protection and further victimization**, characterized by either a mother or child attempting to stop a husband/father's use of violence. Children mentioned their intentions and actual experiences of protecting their mothers, and mothers shared similar stories. Often such interventions triggered further violence:

> I feel bad to see my mother crying, so what I would do is to team up with my mother and see what we can do to revenge [on my father]. - Son, FGD

> Sometimes their mother annoys you. You grab and hold her [in a way that causes pain], and when your child . . . notices she runs to hold you or the mother while at the same time crying, and because of anger you end up kicking that child as well. But it comes out of high anger. The children will always take their mother's side, because they spend more time together. Generally, it is because of anger that children also are affected by our fights.
> - Father, FGD

The final pattern we call **displaced aggression**, in which children become entangled in conflicts between parents. In some cases, both mothers and fathers described intentionally manipulating their children to retaliate against one another. Other examples showed how a woman may redirect violence from her husband toward her children to assert control or diffuse her own suffering, given that a woman's power vis-à-vis her husband is severely limited by the patriarchal context:

> The reason children are beaten is because of the conditions at home. For example, the wife will tell you, 'Here are your children. You don't want to feed them' . . . She will act out of anger, and because she cannot fight you, she will transfer the anger to the children and beat them. - Father, FGD

> If I am the mother, at times I might have had misunderstandings with the father. By the time [the child] comes back home, I am already angry over what the father has done to me . . . instead of comforting the child, you just start to beat the child, because of the other anger that you still have.
> - Mother, FGD

2. Patriarchy is a cross-cutting risk underlying both IPV and VAC.

In analyzing how violence manifests in families, patriarchy emerged as a connecting theme. Throughout the qualitative discussions, we found numerous examples of how family dynamics were significantly shaped by rigid gender norms and a clearly defined hierarchy (based on sex and age), such as the expectation for women and children to perform more subservient roles, and the belief that men are intrinsically more valuable (than women and children) and should be "heads of the household" responsible for decision making, economic security and more. While gender inequality is commonly recognized by activists and researchers as a core driver of IPV, there has been relatively little exploration of how systemic inequality between women and men is linked to VAC. Focus group and interview data from this study helped to make these connections more apparent (see Figure 2).

First, upon acknowledging IPV and VAC in the family, many participants were quick to normalize both types of violence as legitimate ways to enforce expected gender and childhood roles and correct behaviors considered inappropriate. This came to light in the many victim-blaming attitudes expressed, with similar language used to describe women and children who experienced violence. For instance, participants — including mothers, fathers, daughters and sons — frequently characterized women experiencing IPV as "big headed," "behaving badly," "going astray," or "being rude," and thus "forcing" their husbands' aggression. The notion that some women and children "deserved" the violence they experienced was even more pronounced in the case of VAC, with both children and adults suggesting that beating or shouting at children is at times a necessary parenting function (see Learning 4). Such examples reflect the ways in which the patriarchal family structure — by positioning men at the top of the family hierarchy and defining expected (subservient) roles for women and children — can normalize violence as a way to maintain power over "weaker" family members (e.g., women and children):

> " Sometimes it is right [to shout at your wife], because there are times a wife behaves like a young child at home. If you are not tough with her, she might fail to understand. There are things that she does, and you feel that you have to shout at her to put a stop to it . . . You scare her a little bit . . . It is appropriate. - Mother, IDI

> " [My parents] only beat us if we have done something wrong, but if no mistake has been made, they do not do anything to us . . . I do not have anything [else] to say. If they beat me, it is because I have done something wrong. I accept that, and I do not talk to anyone else about it. - Son, IDI

Second, when discussing *men's* use of violence in particular, participants often persisted in justifying or excusing that violence, even when it was characterized as "too extreme," or when the woman or child being victimized had not done anything considered "wrong." Rather than rejecting such violence, some participants took lengths to rationalize the situation, for example assuming that the man must have been fired, drunk or experiencing some other difficulty. Others went so far as to consider men's use of violence as a "natural" trait linked to their need to show "authority and power":

> *There are some men who fight with their wives, because they are naturally like that. He always wants to fight, and he wants to show his authority and power at home. He is so quarrelsome . . . that man is naturally quarrelsome and picks fights. - Mother, FGD*

Relatedly, several participants (including both children and adults) explained men's use of violence as arising from anger or shame when they felt unable to fulfill their expected roles (e.g., earning money). Feminist theorists have described this use of violence as a way that men demonstrate masculinity when they feel they have failed, once again illustrating the potential link between patriarchy, gender norms and violence. For instance, with one father, violence appeared to be a deliberate strategy to navigate the gap between his "responsibility" to provide for his family and the financial reality:

> *For example, the man will go out to look for money as a responsibility he has. But he may not get it in return . . . If I left home under bad conditions and I go to work, but I also fail to find a solution [money], how do I handle that in a way that keeps the family intact? Because when you return without a solution, you have to resort to anger as a way to divert the attention. Because when you are angry, no one will ask you for anything. Even the children who ask you to buy something will fear [you], and the wife will fear you as well. - Father, FGD*

Figure 2: Conceptual Model of Intersecting Violence in the Family
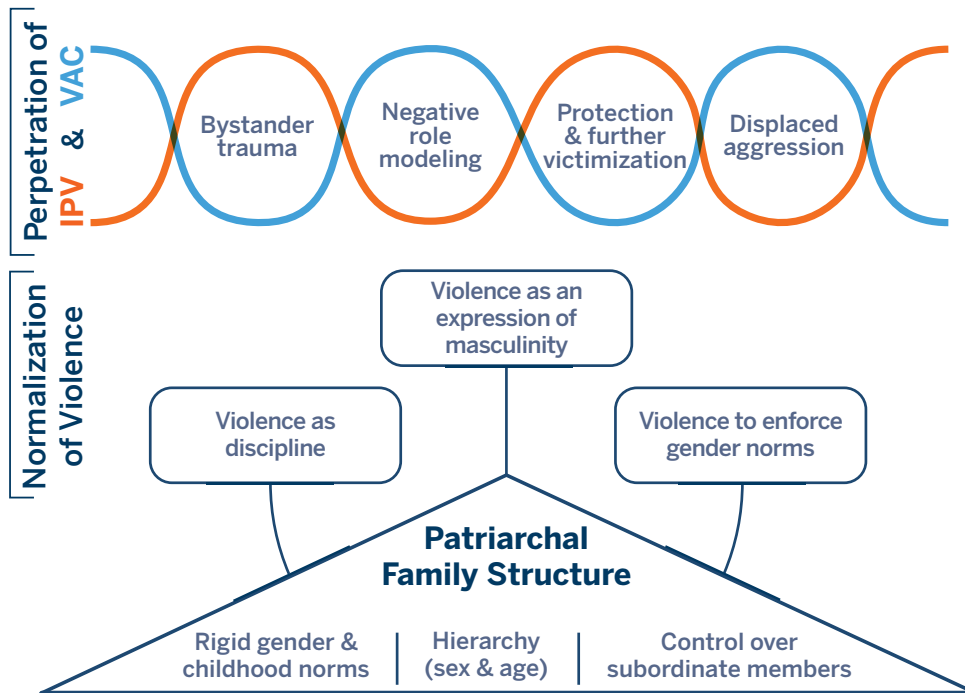
3. Despite widespread acceptability and use of violence, children and adults aspire for violence-free relationships between parents/partners.

In sharp contrast to the many attitudes normalizing IPV and VAC, when asked to describe ideal relationships between parents/partners, participants expressed the importance of friendship, nonviolence and two-way communication. Children frequently responded by emphasizing that a "good" relationship is one in which the husband does not beat his wife, and one in which both partners endeavor to support and care for one another. Adult participants shared similar aspirations:

> [W]hen you come back home, you should ask me about my day. You can give me a hug, show me that you love me . . . spare some time for me in the bedroom, put your love into action . . . I want you to declare that in the presence of all people . . . Once you do that for me, I will give you everything. Just show me that love. - Mother, FGD

> Interviewer: What would be an ideal relationship for this couple [pointing to a picture of a smiling wife and husband]?
>
> Daughter: They should be working together, and they should not be quarrelling but instead be agreeing together. They should be discussing these things together so that they can remain happy . . . [and] they should be supporting each other in every way.

Even when discussing actual (rather than aspirational) scenarios, a few participants rejected the use of IPV. The rejection of IPV was most often expressed by children, who emphasized that as "mature adults" women should not be beaten—a perspective that, while delegitimizing IPV, implicitly reinforces the acceptability of violence against children:

> It is not right to beat your wife, because she is a mature human being like you . . . She is not your daughter . . . I think it is just not good to beat your wife . . . because even if she had respect for you, she will gradually stop respecting you and in the end will even despise you. - Son, IDI

4. Perspectives justifying VAC are more entrenched than those regarding IPV.

While some participants spoke out against IPV, interestingly no one unequivocally rejected VAC, suggesting that social norms tolerating violence against children are more deeply embedded. Adult and child participants alike expressed the importance of a loving relationship between parents and children. However, violent forms of discipline within this relationship were never contested as wrong or unjust. On the contrary, adults and children articulated clear views on "acceptable" VAC, and this use of violence was almost always justified as appropriate parental discipline (though a few adults described violence as "ineffective"):

> In a good relationship, a parent is supposed to teach the child how to conduct themselves, even outside the home . . . The children only emulate whatever comes their way. That's why sometimes when you ask them to do something and they refuse, you use the stick to put them right, because simply talking to them will not help them realize whatever you mean. But the stick will prove that you are stressing the point. - Father, IDI

> Sometimes, as a parent, you might decide to punish your child, but you must punish them in an appropriate way. If you have decided to cane the child, you should not overbeat, and if you have decided to beat the child, ask him to lie down and you beat him on the buttocks . . . You can give a child a few canes, like three of them. - Mother, IDI

Despite this more inflexible stance on VAC compared to IPV, findings suggest that mothers, fathers and children intuitively grasp the interconnections between the two forms of violence. For example, the strong position against using IPV in front of children (which emerged frequently in our data) implies an understanding that children's exposure to IPV brings family turmoil and emotional fallout, which participants frequently described as generating "hatred" within the family:

> It is not good at all for parents to quarrel and fight when children are seeing. The children will grow up fearing you, because they see you beating their mother. Secondly, the children will never feel emotionally attached to you, because they will be like, 'If daddy can beat mum, then he can beat us as well.' They will never give you time to sit with them and talk about their concerns. They will be running away from you all the time. - Father, FGD

> I always tell my husband to leave our children out of the conflict . . . because you are introducing a bad heart in the children . . . It is bad, because you are instilling hatred into these children. I see these things among my neighbors. - Mother, IDI

Turning Research into Action

In summary, the qualitative findings of the Intersections Study showed four distinct ways IPV and VAC can become intertwined and create cycles of abuse in the family, as well as how the use of violence against "subordinate" family members is normalized and sustained within a patriarchal family structure. In contrast, findings also revealed aspirations for nonviolent and emotionally connected relationships, and an appreciation for how nonviolence between parents/partners can translate into positive relationships with children. The quantitative component of the Intersections Study similarly found that adults who indicated a respectful and compassionate relationship with their partners were less likely to report IPV *and* VAC. This idea of relationship values — such as love, empathy and meaningful communication — being potential antidotes to family violence has been substantiated by other research (Starmann et al., 2016). Below we translate findings into actions that can advance emerging dialogue and experimentation related to integrated violence prevention programming:

- **Address patriarchal norms and abuses of power as core drivers of *both* IPV and VAC**. While IPV prevention programs often recognize the importance of dismantling patriarchal norms, this approach has not been emphasized within most VAC prevention work. Our findings illustrate how gender inequality and rigid expectations around "appropriate" roles and behaviors — for women as well as for children — contribute to the normalization of violence, cycles of abuse, and victim-blaming attitudes. Thus, entry points for integrated programming may include helping community members reflect upon — and challenge — the social acceptability of using violence to assert power over "weaker" family members, and helping community members re-imagine the hierarchal structure of the family.

- **Develop strategies to foster positive relationship qualities among family members**. Findings suggest a clear divide between desired expressions of love, empathy and meaningful communication on the one hand, and the violent tactics participants believe must sometimes be employed against women and children. This tension presents an opportunity for programming that connects community members to core needs for love, respect and empathy, and then builds skills in how to discipline children, resolve marital conflict, and make family decisions in a manner that aligns with (and promotes) these qualities.

- **Encourage reflection about the harmful effects of direct and indirect experiences of violence in the family**. The consistency with which participants rejected IPV in front of children was surprising, including many parents' wish that children not learn from or repeat the IPV they may witness. This seemed to contradict (1) adults' justification of IPV within their own lives, and (2) the fact that using violence to discipline children was almost never refuted (even by children). This disconnect suggests that discussing concerns about children *witnessing* intimate partner violence could be a pathway to exploring the harmful consequences of women and children *experiencing* violence. In addition, including a discussion about the potential impacts of IPV on children even when they are not physically present could help delegitimize the perception that IPV is "acceptable" if it occurs in private.

- **Deepen coordination and shared learning across the IPV and VAC prevention fields**. Joint IPV-VAC programming may not always be desirable, and as others have noted, may come with certain risks (for further discussion, see Guedes et al., 2016). However, irrespective of whether groups opt for integrated or independent programming, the interconnectedness of family experiences highlights the importance of communication between violence prevention programs. To begin, we can learn from, exchange and build on each other's successes, and we can honestly share our challenges to avoid repeating what does not work. Even if integrated programming is not the goal, any organization working to prevent violence could potentially increase its influence by acknowledging these intersections in their work. Lastly, gathering insights about families that do not use violence (IPV and/or VAC) may highlight avenues for building resilience within families and realizing aspirations for nonviolent relationships.

Interested in learning more?

- As part of the Know Violence in Childhood Global Learning, there is a multi-disciplinary working group dedicated explicitly to the potential synergies between VAW and VAC. Read their summary blog at: *http://www.knowviolenceinchildhood.org/blog/intersections-between-violence-against-children-and-violence-against-women-expert-meeting/*

- The REAL Fathers initiative (Institute for Reproductive Health, Save the Children, and USAID) includes a mentorship training curriculum around non-violent intimate couple communication and positive discipline: *http://irh.org/wp-content/uploads/2015/12/REAL_Fathers_Mentor_Curriculum_FINAL.pdf*

- Several relevant articles are also included under References below.

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