

**National Study on Violence against Children
in the Maldives
Final Report**

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Executive Summary

This study was the first large scale national study on the issue of physical and emotional punishment as well as sexual abuse of children in the Maldives. Through a phased approach (desk research of existing studies, qualitative interviews and quantitative interviews), a solid and up to date knowledge base on the issue could be obtained.

The survey found that violence against children exists at home, at school and in the community. At home the main educational measure taken by caregivers is to explain the child, what it did wrong, followed, however, by emotional punishment, such as threatening the child to hit or scolding. The majority of children below the age of 18 have not been neither physically nor emotionally punished (53%). However, on the other side this also means that 47% of Maldivian children, who have undergone at least one or both kinds of punishment in their lives.

The use of emotional punishment is considerably wide-spread and is also supported by the parents' beliefs that this is an effective way of teaching children the proper behaviour. This form of punishment plays an important role for a sizeable portion of the children from age 3 onwards.

Overall, the population of the Maldives is divided over the issue of physical punishment: notions that physical punishment is not particularly efficient could be found throughout the study, leading to an overall lower acceptance of such behaviour. However, it was also found that even opponents of physical punishment have used such measures on their children and that supporters do not use it significantly more, so that this overall mindset can be considered weak. This, and the fact that also students do not see negative effects of this kind of behaviour can be considered to be an indicator for a deeply rooted cultural belief that neither emotional or physical violence is not harmful for children. Although not necessarily leading to the actual use of physical punishment, this mindset can certainly lower the threshold of its application.

Generally, boys appear to be more vulnerable to physical punishment than girls, while at home girls attending secondary school reported to have suffered to a large extent from emotional punishment.

Although prohibited by law, students reported cases of physical punishment at school perpetrated by the teacher. Generally conflicts are being solved by talking calmly to the child. On the other side, 8% of the students attending secondary school, mostly boys, stated to have been hit on at least one occasion by their teacher. The majority of students, who enter an argument with their teacher, also declared that they would talk back to the teacher, a minority even to threaten to hit the teacher or throw something at him or her. Especially the last two forms of behaviour have the potential to initiate a vicious circle of hostility between the students and the teachers.

Nearly 20% of students attending secondary school indicated to be afraid of a gang or other children in the community. For a significant part, girls attending secondary school in Male' feel more insecure in their communities: almost half of them indicated that they are afraid of a gang. Being asked of what children and adults would do to children in the community, at least one in four students (25%) attending secondary school in the Atolls revealed that they have been hit by other children or adults in the last year on at least one occasion, as opposed to every seventh (14%) in Male'.

When being victimized either physically by another child or sexually by an adult, the children signalled that they would inform their parents or their friends. When asked, what the parents

would do when aware of a case of abuse in the community, the majority did choose to not inform the authorities, not cause any trouble and/or due to limited belief in the efficiency of the system. As parents are the main go to persons for the children their reactions are critical for the follow up of the case.

Nationwide, 15% of children attending secondary school, reported that they have been sexually abused at least once in their life. Indeed the prevalence rates of girls are double as high as the ones of as boys (20% vs. 11%, respectively). Specifically Male' turned out to be a place where an increased risk for girls to become victims of sexual abuse exist.

Overall, the Protective Environment was found to suffer gaps in most of the eight elements. The majority of gaps seem to have their foundation in the cultural background of the Maldivian society, which does not particularly prohibit emotional or physical punishment of children. While there is a high awareness of the community on the issue, the evolving open discussion is hampered by the notion that such events should be solved in the home and not discussed publically.

In the area of sexual abuse another large obstacle is the legal system: the victim itself might turn out to be made liable for such an event and might be subjected itself to penal proceedings if the perpetrator does not plead guilty or four witnesses for the prosecution cannot be found.

Therefore, it is recommended to start improving the Protective Environment by educating caregivers (preferably at childbirth and through a nationwide campaign) and teachers about effective non-violent educational practices to build up basic protective mindsets and a minimal cultural consensus. As attitudes themselves might become corrupted without a sound foundation, such educational measures should also provide the target groups with facts about the negative effects of violence in children.

1 Background

Worldwide research has shown that Violence against Children is a multifaceted issue that – despite being a violation of basic child rights – also undermines economic and social development. Although comparatively low in comparison to other countries in South Asia, child abuse and neglect is prevalent also in the Maldives.

Due to the low reporting (hand in hand with a low ‘official’ prevalence rate) of child abuse until now, this issue has not been fully addressed and therefore only very few data exists on the issue for the Maldives. While a qualitative survey in 2004 shed first light on the problem, there is neither reliable, representative data to use for advocacy or policy development, nor an in depth exploration of the issue available. Therefore, a nation-wide study was conducted in August to November 2008 to obtain an accurate and comprehensive assessment and prevalence rates of different forms of child abuse.

This report details findings of the study, which was conducted by consultants from TNS, a global research company.

1.1 Research Objective

Although data on different forms on violence and abuse exist to date, a thorough analysis of the situation of children in the Maldives in his regard has not been conducted. The research was therefore planned to provide UNICEF and the Ministry of Gender and Family with a 360 degree assessment, if, and to which extent the following forms of violence are prevalent in the Maldives...

- Physical abuse and punishment (including physical punishment)
- Psychological and emotional abuse and neglect.
- Witnessing of domestic violence.

... and to explore the factors that promote or hinder child abuse and trafficking as well as the consequences of violence, for example

- perceptions, what constitutes violence, and how violent behaviour is being viewed upon (both from the children’s and the adults points of view);
- patterns of abuse, the identity of perpetrators, and reasons for violent behaviour;
- the consequences of violence, for example on the children, the family and the social environment;
- coping strategies and services used by children experiencing violence or abuse (and reasons to not use these services);
- understand existing mechanisms, laws, services and systems currently in place to respond to violence against children.

1.2 Definitions

For this study the following definitions have been used. As per the WHO definition (2002) “child abuse” is defined as:

- ❑ “All forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust, or power”.
- ❑ The Convention of the Right of the Child (CRC) states that children should be protected from abuse “while in the care of parent(s), legal guardian(s) or any other person who has the care of the child”.
- ❑ Therefore, the study employs this definition using a site-specific, not a perpetrator specific approach: If a child is victimized while under the (legal) supervision of a parent (/ caregiver), the victimization is considered “at home”, disregarding the identity of the perpetrator.

1.3 Research Ethics

Violence is a highly sensitive issue and therefore besides data quality high research ethics were a key focus of this research: Violence has a deep emotional impact especially on victims and every research has to guarantee that respondents are not re-traumatized or that taking part in the research might have other negative aspects. For example, conducting interviews with children near (potential) perpetrators of violence is neither good research practice (victims will choose to answer questions in a way that will not provoke the perpetrator’s revenge) nor ethically sound (if the perpetrator overhears by chance or by poor interview management the child giving answers that identifies him or her as the perpetrator, there is a chance that the child will be abused again as a punishment once the interviewer is away). Another issue that is known from violence related research is the problem of disclosure: How should the interviewer react as soon as a child reports abuse?

From its international perspective, TNS knows and understand the importance of these ethical considerations and have therefore developed besides the survey material a set of protocols that ensure confidentiality of the answers at all times as well as a referral mechanism in case a child reports abuse.

1.4 Research Methodology

After an initial desk review of laws and regulations, for the main primary research phase a mix of qualitative and quantitative methods were employed.

The qualitative component was essential to explore the issue of violence against children and behavioural patterns and cultural beliefs surrounding it. Another issue was to understand the underlying factors that lead to or prevent violence and to get to know *how* different groups address the issue and talk about it. This provided insights about motives, nuances in attitudes and behaviour among the different target groups as well as underlying cultural beliefs and variables which are crucial to get reliable and relevant data. Getting to know how people speak about violence also guaranteed that all questions at the later quantitative stage were asked in an adequate manner, and using the right words.

While the qualitative research is necessary to gain an in-depth view of the mindsets, attitudes and the behaviours that lead to or prevent violence, the findings from the quantitative research

are the only reliable way to get representative data about the prevalence of (different forms of) violence against children in the Maldives.

In both phases - as in all research stages - it was especially important not to use words like 'violence' or 'abuse', as these can be interpreted differently and might also be loaded. It is good research practice (see Murray Straus' Conflict Tactic Scale¹) to rather ask about specific 'behaviours' or 'pedagogical measures' when dealing with children, that can be violent (like 'spanking', 'not providing food when child was naughty', etc.) – or not (e.g. 'explaining why the parent does not accept the child's behaviour'). A variant of the CTS has been used for domestic violence in several country surveys under the DHS².

However, while this approach can be used to get valid data on the prevalence of most kinds of child abuse (physical punishment, emotional abuse, physical abuse at home, at school and in the community), this method has only very limited validity in the area of sexual abuse. The reason is that sexual abuse is outlawed in most cultures so that it cannot be expected that the perpetrators (or witnesses) in household interviews will identify behavioural patterns in the household that imply sexual abuse.

To also understand the perspective of the children (and to triangulate the data from all sources), a second quantitative survey on all kinds of abuse at home, at school and at the community was conducted with children only. Because of logistical and legal reasons, this survey was administered as a series of classroom surveys where one entire class (selected by random, see below) filled out the questionnaire at school. Here it was important that the interviewer – rather letting the survey be administered by the teacher – was present at all times during the interview and collects the questionnaires afterwards. As in all steps of the survey, it is here also of prime importance to stress that this questionnaire is not a test, which the pupils have to fill out, but that participation was voluntary at all times.

1.5 The role of the interviewer

The training and qualification of the interviewers was vital in studies dealing with such sensitive issues as violence: Interviewers needed to be selected not only according to their experiences, but also in regard to how they were perceived by the respondents. For example, using an older male conducting interviews with female victims of sexual abuse is neither ethically sound nor good research practice. Therefore, sex and age of the interviewer play an important role regarding the data quality.

Especially when researching children, only interviewers, who can easily connect with children – or, if at all possible, who have experience in interviewing children - should be employed. This is even more important when conducting research with victims of violence, when solid knowledge in pedagogy and knowledge or access to psychological support (should the respondent break down) are essential.

Due to UNICEF's and the Ministry's wish to build capacities for research in the Maldives, both all interviews were conducted with interviewers from the Maldives. For the qualitative

¹ A brief overview on the Conflict Tactics Scale (CTS) can be found <http://pubpages.unh.edu/~mas2/ctsb.htm>

² Sunita Kishor, Ph.D: Domestic violence measurement in the demographic and health surveys: The history and the challenges, Expert Paper by MEASURE DHS, ORC Macro, 2005, <http://www.un.org/womenwatch/daw/egm/vaw-stat-2005/docs/expert-papers/Kishor.pdf>

research, staff from the Ministry of Gender and Family was utilized, for the quantitative research, personnel was sought using advertisements in newspapers and referrals.

1.6 Quantitative sample size

The breakdown and selection criteria for the qualitative survey is described in detail in the specific report.

The sample for the quantitative household survey was a stratified multistage sample selected in two stages based on the 2006 census frame.

In the first stage, the Census Blocks have been selected from the sampling frame by a stratified systematic selection with selection probability proportional the number of residential households residing in the Census Blocks.

Each region was considered to be one sampling stratum. The sample points have been selected independently in each stratum. Due to cost considerations and after intense discussions with UNICEF and the Steering Committee it was agreed that the sample allocation takes into account the representativity only at the regional level.

Because of the variations regarding the household population of the regions, a disproportional allocation of the sample points was chosen.

For the study an extended 30X7 cluster sampling procedure at each of the six regions was discussed³. As the target group are households in which children age 0-17 live, a similar procedure was chosen, that was adopted to the target group. Therefore, due to methodological, time and cost effectiveness considerations, in each cluster 14 households were chosen by random. It implies that from each of the selected Census Blocks (CB) we will be interviewing 14 children's caregivers.

For the selection of the target respondents from each region, we a two-stage cluster sampling technique was chosen:

- ❑ Within each region a total of 30 Census Blocks was drawn at random, proportional to population size (PPS), for a total geographical coverage of the region. These selected Census Blocks are hereafter referred to as Primary Sampling Units (PSU).
- ❑ Within the PSU 14 addresses were being selected randomly from the census household roster (14 interviews per ward). At the outset of the interview, the interviewer asked the habitants living at this address if they had any children under the age of 18 living there. If there was not such a child living there, the household was discarded and replaced by another randomly chosen household.
- ❑ Within the household the main caregiver of the children living therein was selected. If there are more than one main caregivers, the interviewer did the interview with the adult person that spends most time with the children. If this person was not available, two call backs were initiated. After two unsuccessful call-backs, substitution with another randomly chosen household was considered.

³ This 30x7 cluster sampling procedure has been widely used by WHO, for assessing the coverage of immunization at district level, with availability child in the age group of 12-23 months being the target group.

The final numbers of interviews are described below:

Region	No. of census blocks	Blocks in Sample	Envisaged number of interviews	Final number of interviews
Male	321	30	420	414
North	124	30	420	418
North Central	127	30	420	407
Central	66	30	420	415
South Central	99	30	420	379
South	137	30	420	407
			2,520	2,440

Classroom Interviews: Sample

For the school surveys, an approach similar to the household surveys was used. Here the basis for the PPS were all schools and their students from grade 8 on within each region⁴. As in the household survey a disproportionate sample for the determination of numbers of interviews per school type (Lower Secondary, Higher Secondary) was used to be able to get reliable results for adolescents, who visit Higher Secondary Schools.

Within the selected schools complete classes were randomly chosen. Again, the number of classes depended on then number of students therein. In lieu of accurate data on the size of grades on the school level, a cluster of 10x30 was considered. However, during the pilot test, it became apparent that school and grade sizes differed considerably, it was agreed to use an adapted design to based on 15 clusters per region with 20 interviews per region. Was a class smaller than 20 students, interviewers were instructed to add another class within the same grade or type (lower secondary, higher secondary) at the same school.

At the end of the research, the following numbers of interviews were reached. As it can be seen from the overview below, in three out of six regions the numbers of interviews were not met, but missed by approximately 20%. A methodological discussion connected to this can be found in the chapter “Limitations” in the Annex.

Region	Envisaged number of interviews	Final number of interviews
Male	500	520
North	300	347
North Central	300	231
Central	300	233
South Central	300	250
South	300	333
	2,000	1,911

⁴ This list was handed over to TNS by the Ministry of Education.

2 Country context

The Republic of Maldives consists of 1,190 coral islands which form a chain set in the Indian Ocean. The total population of the Maldives according to the 2006 census was 298,968. The population is scattered over 194 inhabited islands.

The population is relatively young with the 0-14 year group comprising 36 % of the total population according to the Census 2006. As of the 2000 Census the total number of women in the country was 147,509 comprising 49 % of the population. While there is no data from 2006, the Census 2000 described that 47% belonged to the 0-14 year age group, 34% belonged to the 15-24 year age group and 19% belonged to the 25+ age group

The Maldives has achieved remarkable progress in social and economic development. The female labour force participation declined from 62% in 1979 to 21% in 1995. Nevertheless, there have been no studies on how much this decline has affected women. Nor, has there been a study on how much control women exercised over the income generated by their productive labour.

Maldivian women have always played a dual role: a productive as well as a reproductive role. They spend a major portion of their time and energy in the private sphere, undertaking domestic work and providing child-care in their homes and communities. Generally, men do not play an active role in the house or in childcare.

A slow but steady decline can be observed in the total fertility rate for all women of reproductive age: having declined from 6.4 in 1978 to 5 in 1995. Although severe forms of malnutrition are rare, moderate and mild forms of malnutrition are still problems and adversely affect a considerable proportion of women and children. Anaemia is common and contributes to the maternal mortality rate. Approximately 52% of children, 68% of pregnant women and 62% of non-pregnant mothers have hemoglobin levels below the WHO accepted standard. At primary and lower secondary levels, there is no disparity in school enrolment for boys and girls. However, more boys complete higher secondary education and hence go on to further education.

The Government is implementing a wide range of measures and programmes aimed at creating greater gender equality. These measures relate to health, education, access to employment and economic and social development. The Government is fully committed to gender issues. It has thus ratified CEDAW; is in the process of implementing the Beijing Platform of Action and the Commonwealth Plan of Action on Gender and Development and the SAARC Plan of Action on the Girl-Child.

In 2004 more than a third of the Maldivian population was directly affected by the tsunami 29,000 people were forced to leave homes that had been destroyed: 86 people died and 29 others are still considered missing; and economic losses were equivalent 62% of the country's GDP.

2.1.1 Health indicators

The Maldives has made considerable progress in maternal and child health over the last decade. Infant mortality rate has fallen from 15% by 2004. Although child survival has improved over the years under nutrition rate is still high.

The table below presents the health and nutrition indicators for Maldives

Indicator	2004
Under five mortality rate (per 1000 live births)	22
Infant mortality rate (per 1000 live births)	15
Prevalence of underweight children < 5 stunted (weight/age)	31%
Proportion of children <5 stunted (height/age)	24.8%
Proportion of children <5 wasted (weight/height)	13.2%
Proportion of 1 year old children immunized against measles	96%
Maternal mortality ratio	1/ 1000
Proportion of births attended by skilled personnel	85%
DPT 3 coverage rate	97%
% of children <5 who received at least one high-dose vitamin A supplement within the last six months	51%
% of infant exclusively breastfed (<6 months)	18%
% children <5 years with diarrhea who received ORT & continued feeding	55%
% of households using adequately iodized salt	44%

2.2 Education

Almost all children in the Maldives receive primary education, and almost everyone is literate. But the quality of the education is still quite low. Over 30% of teachers in the Maldives are untrained because 80% of staff training costs are transport related.

In a country where 70% of the population lives on islands far from the capital, and where transport among islands can be prohibitively expensive, many children are at the risk of being invisible.

The table below presents the education indicators for Maldives

Indicator	2004
Net enrolment ratio in primary education	100%
Net enrolment ratio in lower secondary education	65%
Net enrolment ratio in higher secondary education	7%
Proportion of pupils starting grade 1 who reach grade 5/ "survival rate" (cohort flow) to grade 5	99%
Ratio of girls to boys in primary education	0.92%
Ratio of girls to boys in secondary education	1.12%
Transition rate from primary to post-primary education and training destinations, by "destinations"	88%

2.3 Legislation

The legal and judicial system in Maldives is based on Shari'a law. The legislative sources are the following: The Constitution of the Republic of Maldives, Laws enacted by Parliament, Statutory Instruments (Rules and Regulations of the various governments authorities). The administration of justice is the responsibility of the various courts under the Ministry of Justice and the High Court of the Maldives, which is the appellate court.

There is a court in each island which hears criminal, juvenile, family as well as civil cases. Male' has four courts; the Criminal Court, the Civil Court, the Family Court and the Juvenile Court which hears the relevant cases. The Ministry of Justice administers these courts.

The following penal codes, laws and legislations addresses policies and laws in the Maldives which are in place to address Violence against Children.

2.3.1 Penal code for sexual misconduct

The penal code for sexual misconduct specifies penalties based on the nature, act and the persons engaged in the violation of sexual misconduct.

As a child has the right to consent to sexual activities, the Maldives officially define child sexual abuse as "contacts or interactions between a child and an older, more knowledgeable or powerful child or adult (stranger, sibling or person in positions of authority, such as parent or caretaker) when the child is being used as an object for the older child's or adult's sexual needs. These contacts or interactions are carried out against the child using force, trickery, bribes, threats or pressure".

Child sexual abuse is a criminal offence in the Maldivian Penal Code. The penalties of sexual misconduct in public places would result in lashing and banishing, if the crime is conducted by a man, and if committed by a woman, placing her under house arrest.

As per the penal code performance of sexual acts with a pubescent child is forbidden. The penalty for non-adherence would result in a man being banished and jailed and a woman being kept under house arrest.

If the act takes place with the consent of the child then according to the level of misconduct the child would be either banished or jailed for 1-3 years if it is a male and if it is a female she should be put under house arrest for the same duration.

If the act mentioned has occurred without the consent of the child then there is no criminal charge for the child.

If a person engages in coital relations with a prepubescent child then he would also be charged under this code.

2.3.2 Law on the protection of the rights of the child - Article 8

In accordance with the current state of legal framework in Maldives, children's rights are also protected under the Law on the Protection of the Rights of Children:

At school

This law prohibits any kind of punishment in schools that is physically or psychologically harmful to the children. Any punishment at school should be appropriate to the age of the child.

At home

Regarding the situation at home, this law also asks parents to prevent acts detrimental to the integrity of children and acts of sexual abuse, exploitation and oppression against children. Knowledge of such an act or suspicion thereof shall promptly be reported to the concerned authority.

No child shall, even as a measure of discipline be subjected to punishment which may cause physical injury or which may be detrimental to the health of the child.

No parent shall, in the event of disagreement or conflict between parents or in the event of separation of parents, act in a manner detrimental to the health, education or conduct of the child.

Parents shall pay particular attention to prevent children from marrying before they attain 16 years of age and shall discourage such marriages.

In the community

No person shall commit an act that is detrimental to the integrity of children, nor shall any person commit an act of sexual abuse, exploitation or oppression against a child. Knowledge of the Commission of such an act or suspicion thereof shall promptly be reported to the concerned Government authority.

2.4 Essential Services and Rehabilitation

The Maldives have set up a Child and Family Protection Service (CFPS) which consist of various individuals and agencies involved in child and family protection. The CFPS might refer individuals to the Family and Child Protection Unit (FCPU) of the Maldives Police Service, Family Protection Unit (FPU) in Indhira Gandhi Memorial Hospital and other government offices agencies and NGOs.

For each referral, a case worker is assigned and entered into a dedicated database. All referrals can be made anonymously and will be kept confidential. The case workers will then make an assessment of each case and devise a Case Management Plan. In urgent cases of severe abuse, the case workers can initiate immediate home visits.

Despite the Ministry of Gender and Family social service network and similar governmental and non-governmental social service agencies being present and Maldives, the TNS qualitative survey found that relatively few children and families sought the assistance of them. The limited usage of formal services clearly reflects the limited availability of such services in the country, as highlighted in the study of *Women's Health and Life Expectancy*. The limited availability of formal services hold truer to atolls as opposed to the capital, Male'.

Another main reason which could be attributed to fewer families and victims seeking assistance of formal services is the belief that services may not be sympathetic and the fear of consequences. Coupled with the tedious process of reporting abuse and violence in place in institutions such as the Police Department, where clearly re-victimization takes place it's hardly surprising that many opt not to seek assistance.

Further more, the cost of travelling from a remote island to the atoll capital, where services are more likely to be available. The common perception and beliefs which are prevalent in the society is also a further barrier which prevents minors and families seeking assistance. For example, having report against family members is also perceived as betrayal.

It is noteworthy to mention that the long process of reporting abuse may also discourage people from reporting such cases and incidents. For example, if the perpetrator is one's immediate family member, the authorities would require the same members to give a statement and to verify the details of the complaint. This practice prevents many from coming forward with similar grievances.

2.5 Open Discussion of Violence against Children

With the increasing recognition and acknowledgement of the situation of children in the country there has been many recent developments which had been initiated by both the government and NGO sector which the objective of addressing the needs of children.

The UNICEF/URC/MOE report dated 2004 revealed that the main issues pertinent to the sexual abuse of children in the Maldives. In a qualitative research among youth an under-reporting of sexual crimes resulting from the victims fear, sense of shame, self-blame, and the additional trauma arising from a forensic-medical examinations, police investigations and court appearances was found out.

In the vast majority of cases of child abuse described by the 190 participants, no legal intervention occurred as a result of the abuse.

The study also found that while adults are afraid to talk about sexual abuse it makes children afraid to talk about it too, especially if it has happened to them. There are other reasons why children don't tell anyone. Some of these reasons include being told to keep the abuse a secret by the offender, being threatened by the offender, fear of not being believed, fear of being blamed for the abuse, fear of the reactions of others such as being labeled, fear of the consequences of telling such as the family breaking up, and fear of everyone in the community finding out. When the child receives a negative response to his/her disclosure the effects of the sexual abuse can be exacerbated.

In another study carried out by the Ministry of Gender, Family Development and Social Security with support from the UNFPA on **Gender Based Violence (GBV) in the Maldives** in 2004 it was found out through qualitative studies that child abuse was rarely seen at the hospital and not referred to ADK by the police. With the cases they do get parents apparently want to be reassured about the physical health of the child and then to return home and deal with the situation as a family issue.

According to the number of cases of child sexual abuse reported to the Unit for the Rights of the Child (URC) at the Ministry of Gender, Family Development and Social Security, sexual assault, rape and domestic violence are recognized to be under-recorded in police statistics because victims frequently feel that they can not come forward and report the offence to the police. Unlike most other violent offences, domestic violence and child abuse usually take place behind closed doors. The 'hidden' nature of domestic violence – and the fact that the victim often feels that they are to blame – mean that many victims do not feel able to come forward and report the crime to the police. Children in particular are often unable or too scared to speak out.

3 Characteristics of the sample

To get an overview of the situation of the families in the Maldives, the questionnaire started with an identification of all household members and questions about their socioeconomic status. In total information about 17,035 household members in 2,440 households was gathered, which suggests an average size of 6.9 persons *in households with children*. On average around 40-45% of persons in these households are below the age of 18, with the exception of Male' where only 33% of household members is a child.

The age profile below in Figure 1 gives an indication of the surveyed households. While the age distribution compared with the official data from the census in the Maldives dated 2006 is different in some aspects and with no more updated estimates at hand, the distribution was considered to be a robust approximation. As detailed data on the population of the Maldives is not available publically to use for weighting (sex and age distribution on the Atoll or Census Block level), the data was weighted only by the number of counted households in the regions⁵.

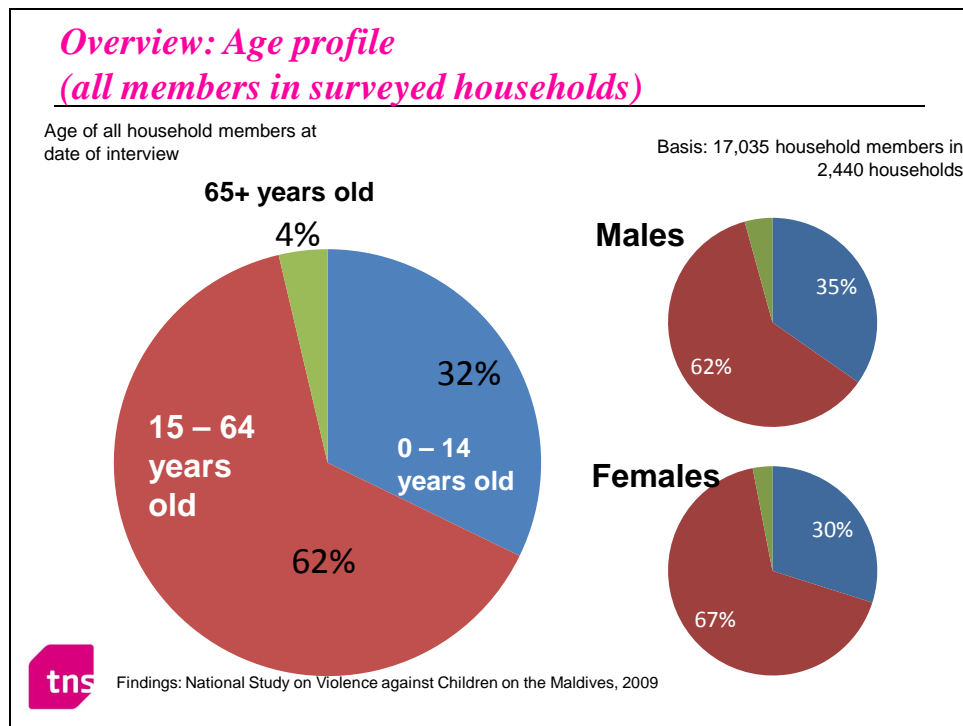


Figure 1: Age distribution of all household members

The survey covered all socioeconomic status of the population in the Maldives as described below. As the household status was calculated from a list of household assets rather than by monetary income, a cluster analysis was conducted. At the end of this step 30% of households were considered to be poor, or of low socio-economic status, 45% “low to medium”, 20% “medium” and 5% of high socio-economic status. The differentiation by regions in Figure 2

⁵ Due to some nonresponse and random attrition effects in some regions, the idea to weight on the atoll or census block level using the numbers of households was discarded: in some cases sampling points with low response rates would have been weighted up dramatically, which beheld the danger of weighting up the overall sampling error.

shows an overall higher population of households in Male', the only urban center in the Maldives.

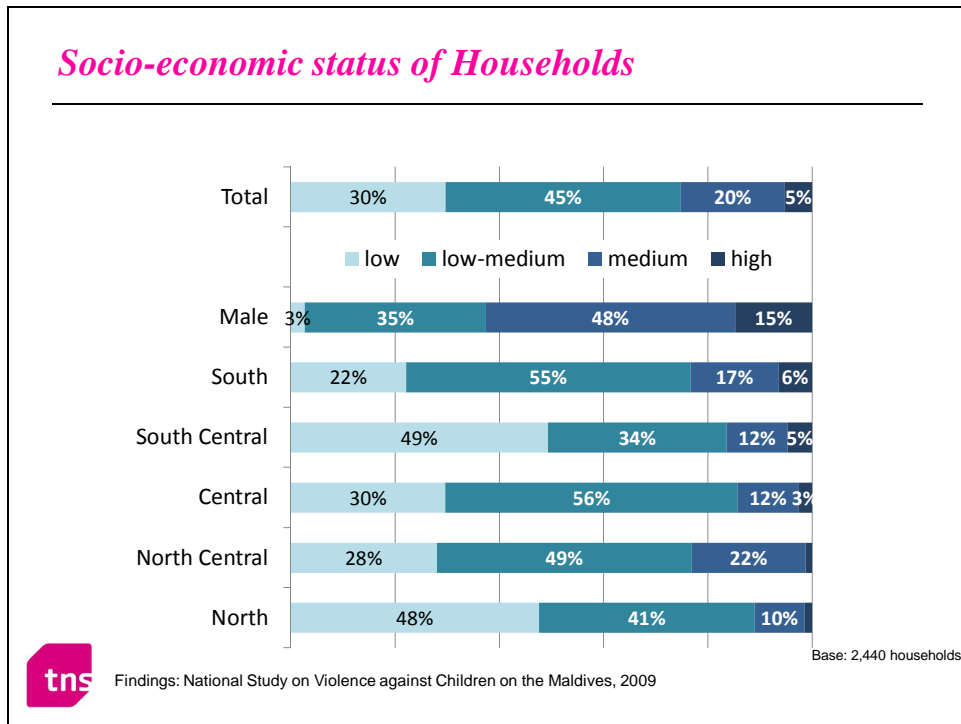


Figure 2: Socio-economic status of households

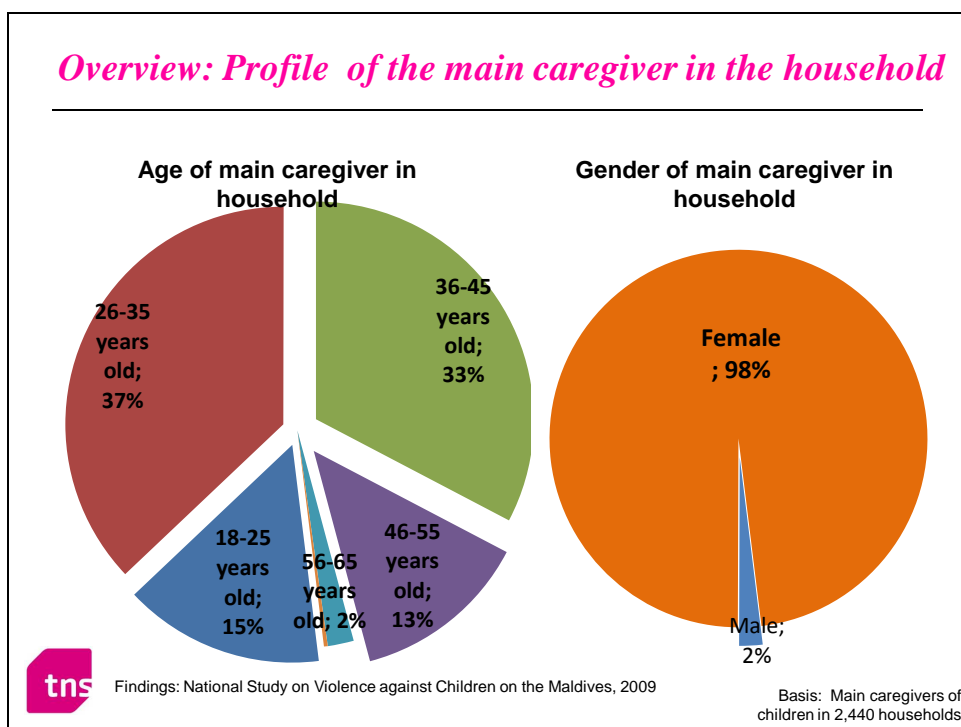


Figure 3: Profile of the main caregiver in the household

In the surveyed households, 98% of the caregivers were females, with roughly equal parts of them being in the age brackets 26-35 and 36-45. 15% of caregivers were young, from 18 to 25 years old.

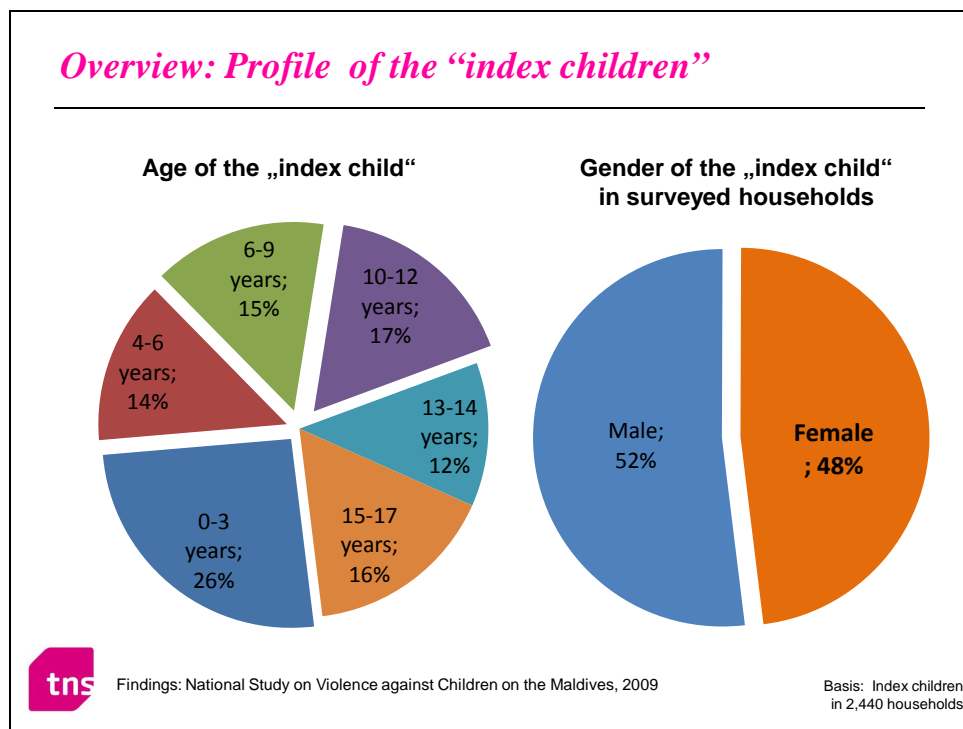


Figure 4: Age and gender profile of the index children

To keep the research time- and cost efficient, the household survey only asked for the educational measures taken for one child. To get representative data, this child was chosen by random, using the “last birthday” method, which is both robust and easy to apply by field personnel.

The age distribution of the index children shows one major difference in age distribution compared to census data: while census data reports the percentage of children age 1-4 being 16%, the study found had 26% of children in this age bracket. With the growing population of the Maldives, and no updated estimates of population growth at this stage of the research there was no data available to classify if this distribution maps the age of children correctly or if the data is skewed in any way. In lieu of official data in the level of detail needed, obtaining results from the latest MICS survey (planned for 2008) might be a practical way to obtain further insights on the age distribution.

However, should no more accurate data be available, findings from this study should be considered to give a representative overview of the situation of households and children in the Maldives.

4 Life at home

The childrens' survey⁶ shows that the majority of children attending secondary school (53%) consider themselves to be "very happy" living at home, with only few differences between boys and girls. 16% of children declare themselves to be "somewhat happy" and 22% of children "so-so" with a larger portion of girls using this option. Considering the age of the children (attending secondary school, age 13-17) asked this result speaks for a largely harmonic life at home. On the other side this also means that 7% of the children consider themselves to be "somewhat unhappy" or "very unhappy".

Looking at with whom the children are living at home, it turns out that in approximately 76%, the male caregiver is the biological father. However, in some families also an older brother over 18 years (7%) or, more rarely, a stepfather or an uncle have taken over this role (ca. 2% each). 4% of the children indicate to not have any male caregiver. On the other side, 87% of children have their biological mother (87%) or an older sister (4%) as a caregiver. As with the male caregivers, step mothers or aunts play a less important role.

Asked for their satisfaction with the time their caregivers spend with them, the children are happier with the time spent with their female caregivers (80% "very happy") than with the males (57%). This result can be partly explained by the significant differences in time spent with the children on a daily basis. While 77% of female caregivers spend three hours or more with the responding child, males account for only 44%⁷.

In the household survey TNS also asked the main caregivers of the children the same question. Overall, more than 90% of caregivers indicate to spend more than three hours on an average day with their child in the age bracket 13-17 years in the household. The younger the children are, generally, the more the main caregivers spend time with them, with close to 100% spending more than 3 hours per day with children under the age of 10.

In so far, the results between the students and parents more or less align and point at homes in which the child is being taken care of most of the time. The difference between the students and the parents is in so far interesting as this hints at different perceptions of what the parents and the students consider to be "spending time". However, more analyses need to be run to directly compare the results between the children and the parents.

On a typical day, 36% of the children attending secondary school indicated to watch television for 1 hour or less, 22% from one to two hours and 38% 2 hours or more on a typical day. Considering the high penetration of TVs in the Maldives (98% in the respondents households), it is no surprise that only 2% of children indicate never to watch TV.

Being asked, what they watch on TV, it becomes clear that wrestling, action movies, reality TV and horror movies are favourites among the children with a share of ca. 35% each⁸⁹. Inter-

⁶ Basis: Children (13-17 years old) attending secondary school, grade 8 and up.

⁷ Given the particularities of the Maldives and the involvement in the tourism industry, 14% of the children also indicate that their male caregiver does not live at home on a regular basis.

⁸ Answers counted „often“ and „always“

estingly enough, these shows are popular to a similar level across all age groups from age 14 on, while the media consumption of violent content of 13 year olds is significantly lower.

Analysed by content type, 58% of the children watch either “often” or “always” violent content (wrestling, action or horror movies). Less than 10% children indicate never to watch such shows, while the rest indicated to see it “sometimes”. That means that most children from 13 years on consume violent content on the media on a more or less regular basis.

4.1 Arguments at home

Arguments at home, the children’s survey found out, evolve around a number of issues, including watching TV (10%), household chores (both 10%), school related things and homework (12%) and staying up late (7%). Here interesting gender effects can be seen as the main area of domestic conflict for around 15% of girls are household chores (boys: 8%) and TV consumption. For the boys main issues are school related or staying up late. Interestingly enough, for 12% of boys the hairstyle is source of a domestic argument, making it their second most important issue.

Asked for domestic arguments in the last month, close to half the children attending secondary school indicated that they have had such an argument. In total 8% of the children said they had an argument “almost daily”, 13% on once or twice a week and 9% twice last month. 16% of children stated that they had one conflict in the last month.

40% of children told the researchers told that they had a conflict with their caregivers not in last month, but before and 3% indicated they had no conflict at all.

⁹ Horror movies, however, are significantly more often watched by boys: with 55% of the boys indicating to see them at least „often” as opposed to 11% of the girls.

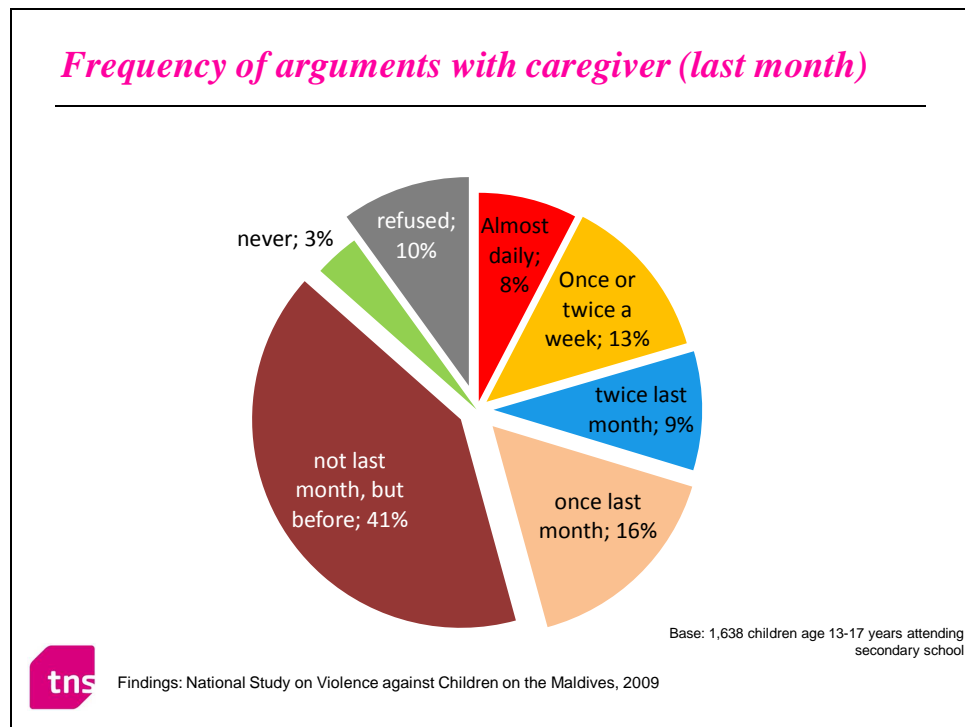


Figure 5: Frequency of arguments with caregiver (last month)

It is interesting however, that around 10% of children refused to answer this question, which underlines the findings of the qualitative survey that students think that it is not right to talk about domestic matters as well the overall high sensitivity of the issue.

When it comes to the resolution of conflicts at home, again both the parents and children's perspectives were gathered.

4.2 Caregivers main reactions to domestic conflicts

The main reactions to conflicts in households regardless of the child in question and the background of the argument are explaining what it did wrong, followed by a threat to hit the child. One in seven children (15%) were actually slapped by their caregivers in the last month and 5% called names by their main caregiver.

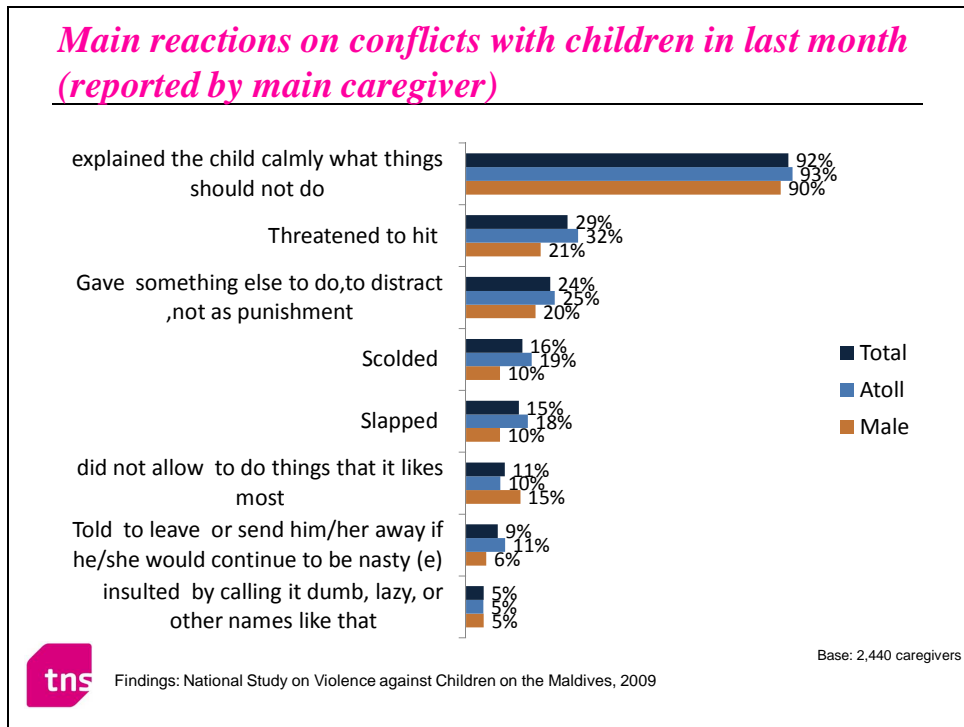


Figure 6: Main reactions of conflicts with children in the last month by regions (reported by main caregiver)

To understand if and in how far there are differences in how age and gender have an effect on how children are dealt with in domestic conflicts, TNS first analyzed the nature of the punishment split by the gender of the children.

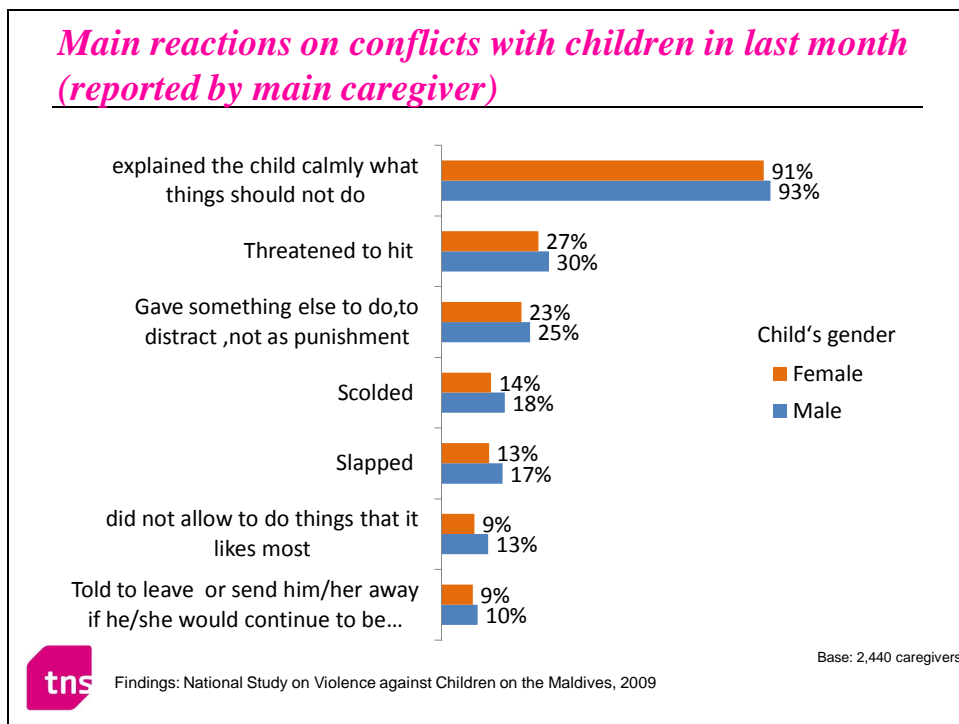
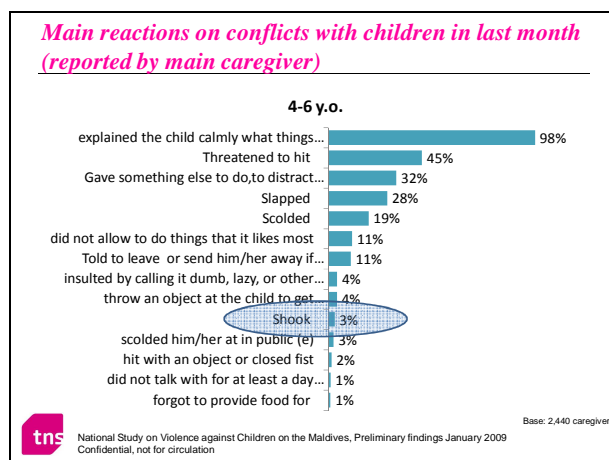
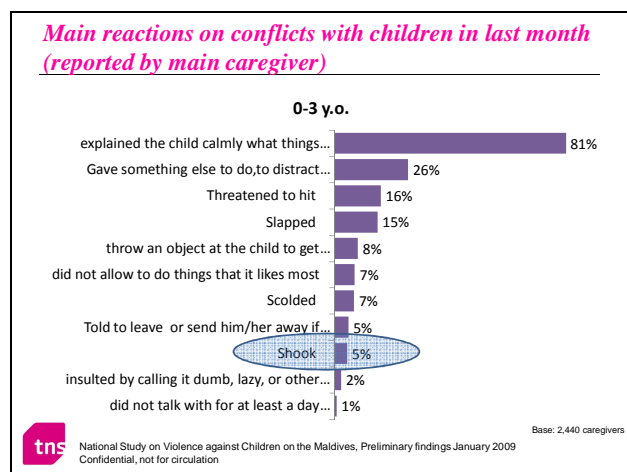


Figure 7: Main reactions of conflicts with children in the last month (by gender of child)

As Figure 7 shows, boys are subjected to significantly more educational measures that girls, but are more susceptible to physical punishment.

Analyzed by age groups, it can be observed that 16% of small children (0-3 years) are already subjected to emotional punishment by being threatened to hit or are actually being hit. In view of the “shaken baby syndrome” it is especially critical to see that 5% of caregivers – the majority of them young mothers below 30 years - indicated to have their child shaken in the last month. With the child’s age the caregiver explains more to the child; however, on the other side almost half of the children age 4-6 were threatened to be hit and one quarter of the children hit. While less frequent than with infants, still 3% of caregivers reported to have shaken their at least once in the last month.



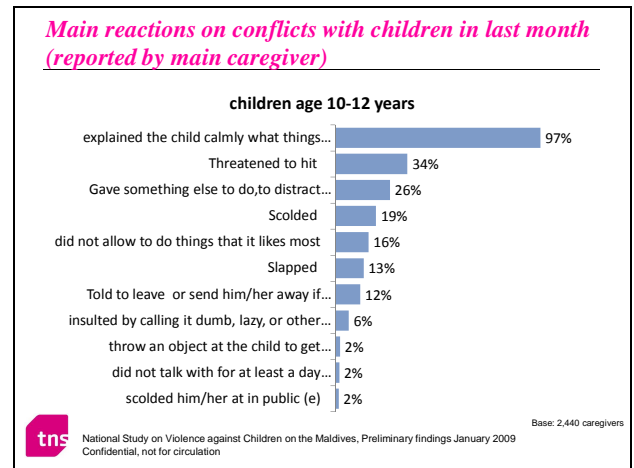
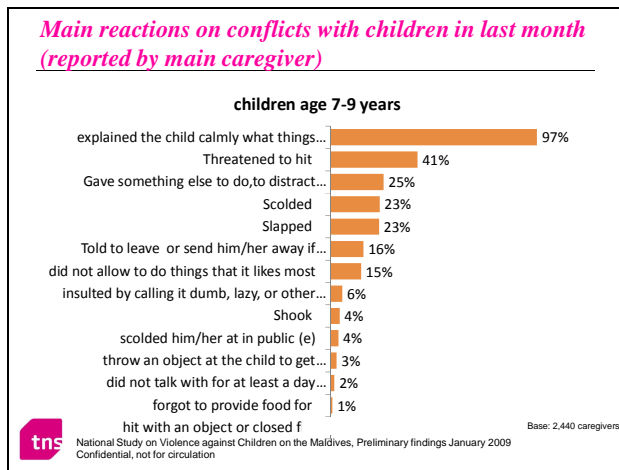


Figure 8: Main reactions on conflicts with children in the last month by age of child

Children of age 7 on are mostly explained what they did wrong, however, more than one third have been threatened to hit and at least 20% slapped. At this age we can also observe a significant portion of caregivers using severe emotional violence like insulting the child (6%) and especially threatening to give the child away (16%).

The children age 13-17 attending secondary school indicated in the classroom surveys that in most cases their parents try to explain their children what they did wrong. Around 75% of children have experienced this behaviour from their parents. Almost half of the children reported that their parents did not allow them to do things they like most as an educational measure.

30% of children attending secondary school marked that they were hit by at least one of their caregivers in the past; 21% five indicated that this happened with an object.

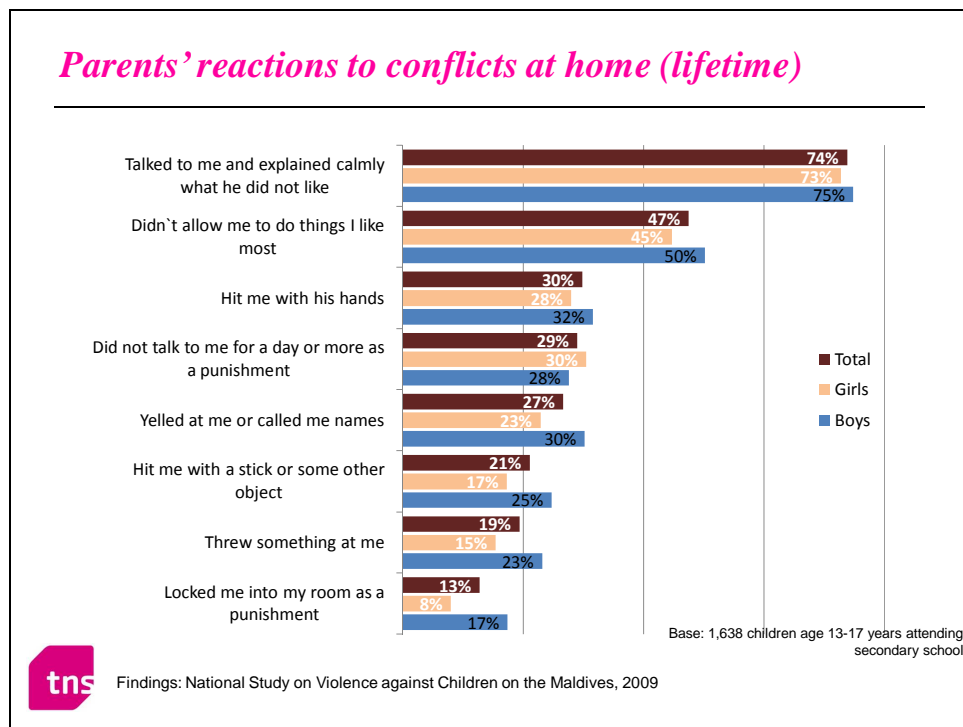


Figure 9: Caregivers reactions to conflicts at home (reported by children)

Analysed by gender it becomes clear that all of these measures are for a slightly larger extent used on boys, which supports the findings already gathered from the qualitative survey.

The direct comparison of the relevant age groups from the parents questionnaire underlines that indeed the main educational measure chosen by caregivers is to explain what the children did wrong. However, there are differences how often this happened. While more than half of the children age 13 to 14 visiting secondary school indicated that happened in the last month, almost every caregiver of children of the same age reported to have done so in the same time.

The second and third ranked reaction reported by the caregivers were “threatening the child to hit it” and/or to “scold he child”. 10% of caregivers also disclosed that the child was slapped as a reaction, insulted or threatened to send the child away. While the parent’s questionnaire was more detailed than the ones for the children, roughly one in seven children (14%) in the same age group declared that they were hit by a caregiver in the last month (not described on charts).

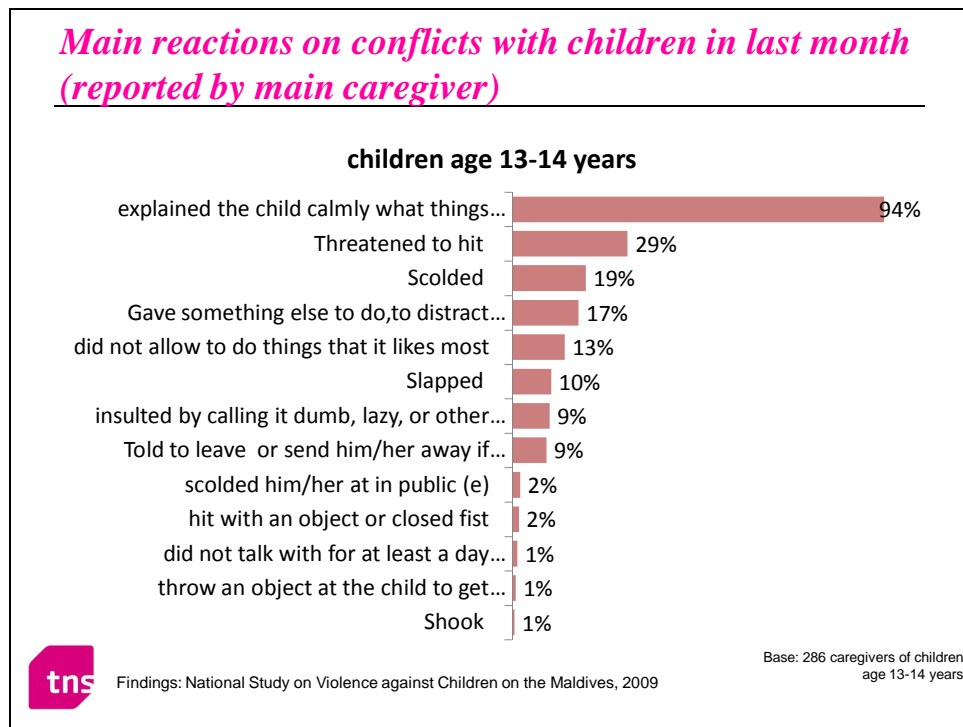


Figure 10: Caregiver's reactions to conflicts by age of child, V

While the reactions to conflicts to 15-17 year olds are similar, however, it is striking that their caregivers indicate that they much less threatened them to be hit (19%) or actually hit (4%), than 13-14 years old children. This suggests that physical punishment is deemed by the caregivers to be less effective with older children. On the other side, one tenth of the students (10%) in this age group also indicated that they have been hit by a caregiver.

Analyzed by the person, who administers the punishment, the findings from the childrens survey suggest that both the male and female caregivers have are involved. Due to the fact that the primary caregiver of most children is the biological mother, it is not surprising that a significantly higher percentage of all kinds of punishments is conducted by the female caregiver, with the male caregivers administering slightly less.

On the other side, the household survey in which the primary caregiver was interviewed, suggested a very strong role of the biological mother in such educational measures, with the (biological) father or other household members being only rarely involved. On the other side, these were incidents that the female caregiver has witnessed, so that this finding might under-report punishments administered by other members of the household. Because of this effect, the findings from the childrens surveys are believed to give a more balanced picture of the situation at home.

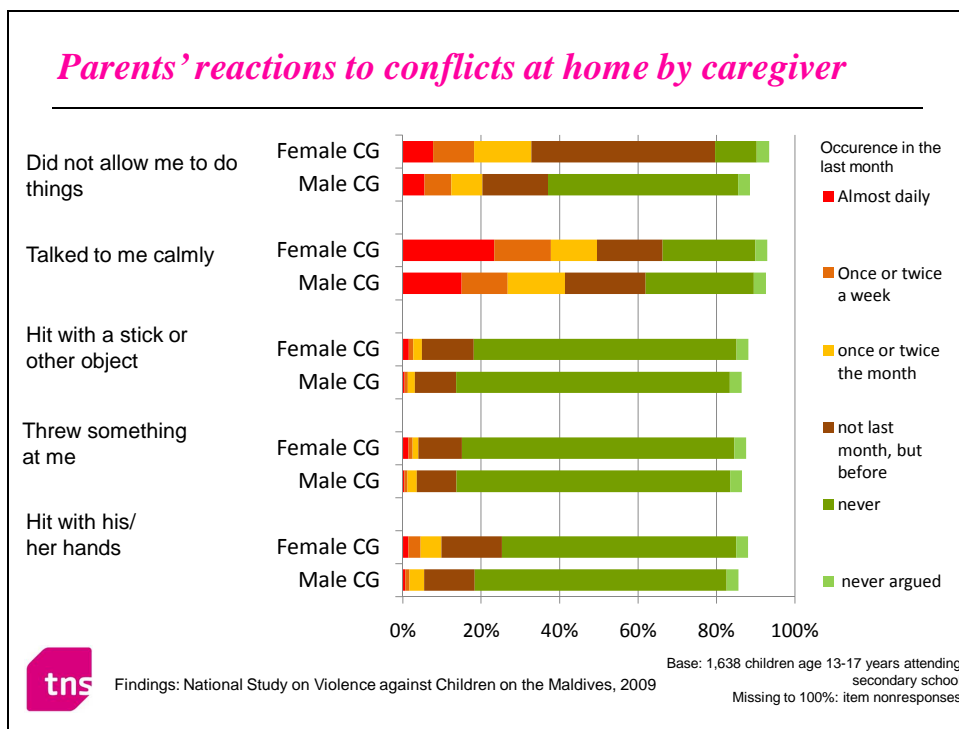


Figure 11: Parents reactions by gender of caregiver, I

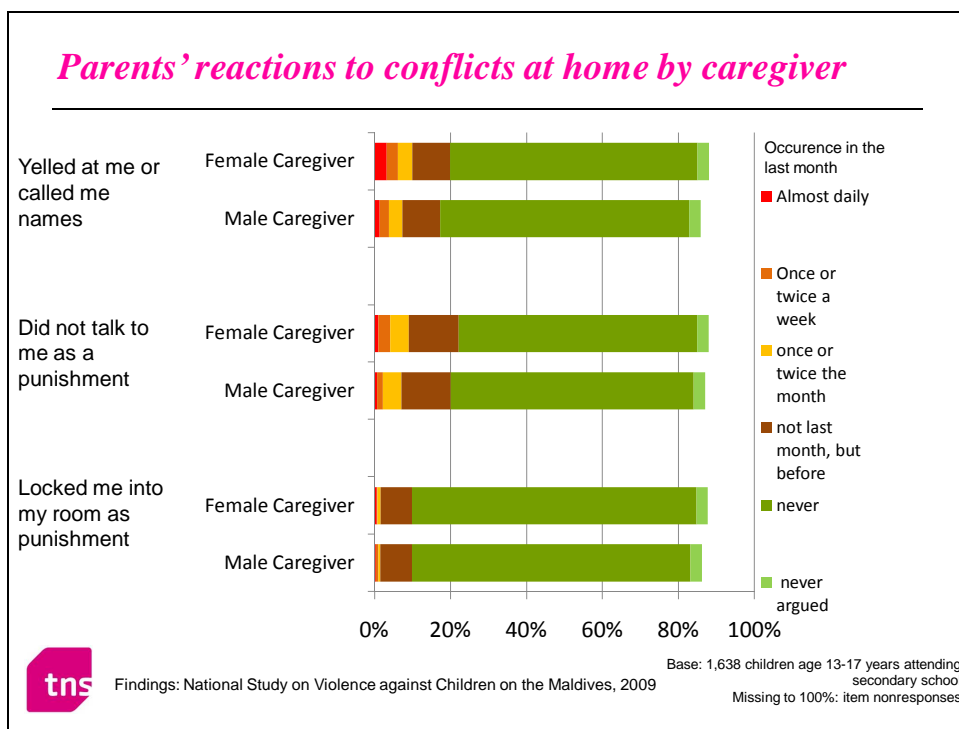


Figure 12: Parents reactions by gender of caregiver, II

4.3 Prevalence of physical and emotional punishment

As the childrens survey could not realize the planned interview numbers, a detailed analysis by the six regions is not possible. However, this kind of analysis was possible for the parents questionnaire.

To get an overview of victimization experiences of children, different behaviours of caregivers were clustered into two types of punishment, according to the classification by Murray Straus¹⁰: emotional and physical punishment (see Table 13). Although the children's questionnaire was not as detailed as the caregivers one, it also covered the main dimensions so that comparisons from both perspectives are possible.

Table 13: Types of punishment

Household Survey		Classroom Survey	
Physical Punishment		Physical Punishment	
Slapped		hit with the caregiver's hands	
hit with an object or closed fist		hit by the caregiver with an object	
Shook		(not asked)	
Hit over and over again ("beat-up")		(not asked)	
throw an object at the child to get (CHILD's) attention		threw something at the child	
Emotional Punishment		Emotional Punishment	
scolded him/her at in public (e)		(not asked)	
did not talk with for at least a day because you/ or another Household member was angry with it		not talked to a day or more as a punishment	
Threatened to hit		(not asked)	
insulted by calling it dumb, lazy, or other names like that		yelled or called names at	
Scolded		(not asked)	
Told to leave or send him/her away if he/she would continue to be nasty		(not asked)	
did not give food to punish him/her		(not asked)	
(not asked)		locked into a room as punishment	

Using this type of analysis for the household survey it can be observed that 14% of children have been subjected to both emotional and physical punishment in his life, 26% to emotional punishment only and more than half to neither.

¹⁰ Straus Et Al, Identification Of Child Maltreatment With The Parent-Child Conflict Tactics Scales: Development And Psychometric Data For A National Sample Of American Parents (CTS-PC), in: Child Abuse & Neglect. Vol. 22, No. 4, Pp. 249-270, 1998: headers of the categories "Psychological aggression" and "physical assault" changed into "emotional punishment" and "physical punishment", respectively.

4.4 Regional, Gender and socioeconomic differences

As Figure 14 below shows, there are significant differences between the regions in the Maldives, with Male's caregivers resorting least to emotional or physical punishment, while 2/3rds of the children in North Central have experienced one or more kinds of punishment in their lives.

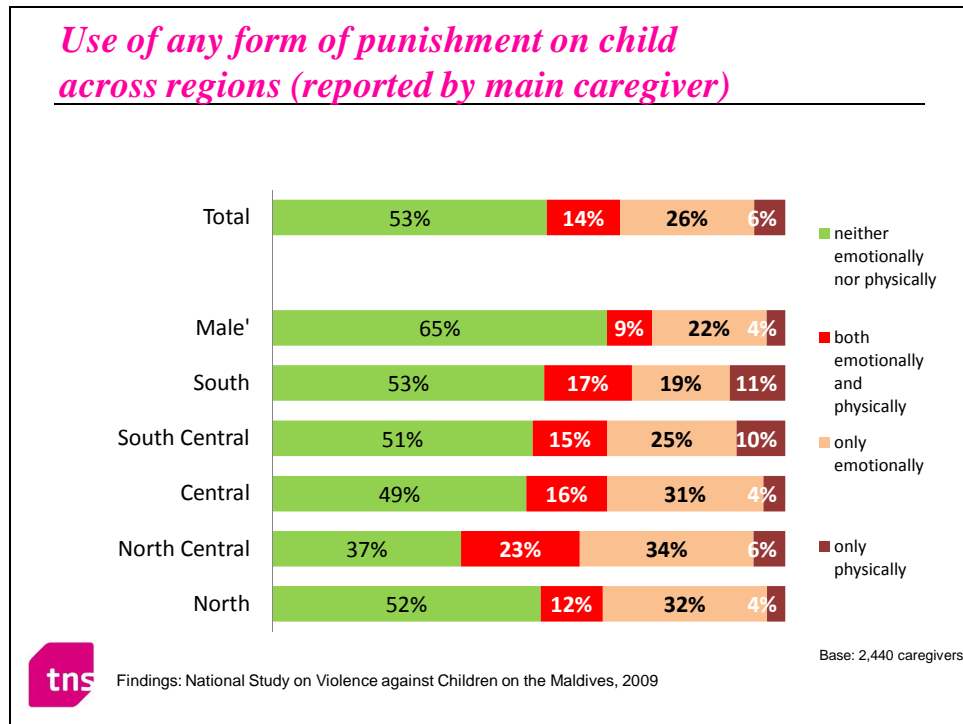


Figure 14: Use of forms of punishment by regions

Looking specifically at the children 13-17 years in the classroom surveys, when clustered into types of punishment, it becomes clear that 28% of boys have been subjected to both emotional and physical punishment in his life as opposed to 19% girls. However, emotional punishment alone (mostly not speaking with the child) is used almost double as much on girls (16% vs. 8%). This finding points into the direction that caregivers use different kinds of punishments according to the child's gender.

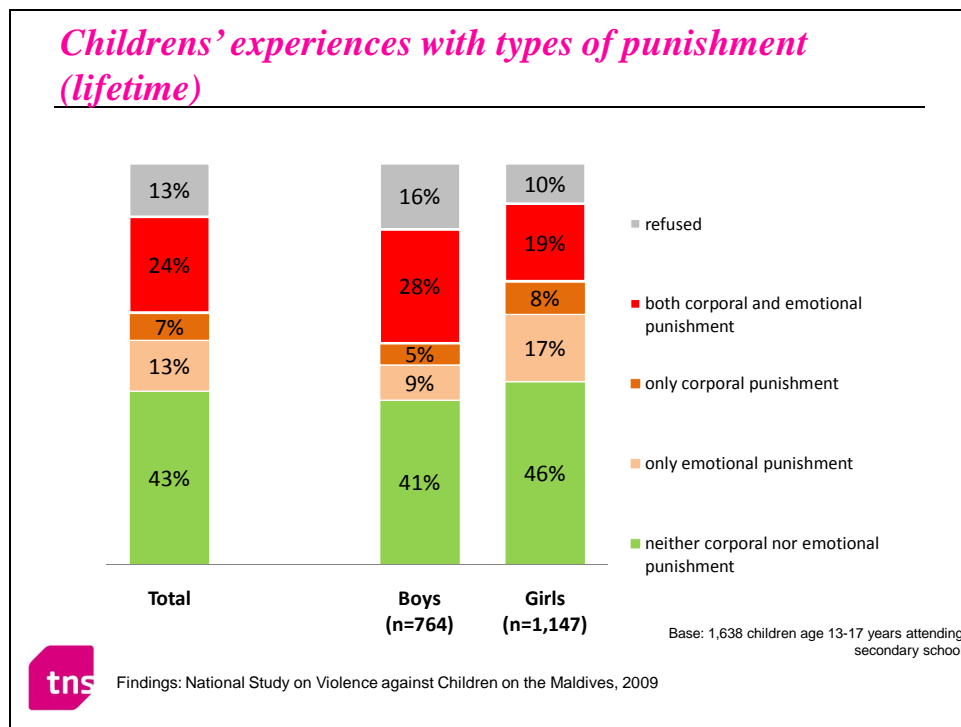


Figure 15: Use of forms of punishment by gender of child

While the socioeconomic status of the household was found to be not a significant factor in child victimization, the educational level of the caregiver gave an overall mixed picture with a slight trend to the use of non-violent upbringing strategies with rising level of education.

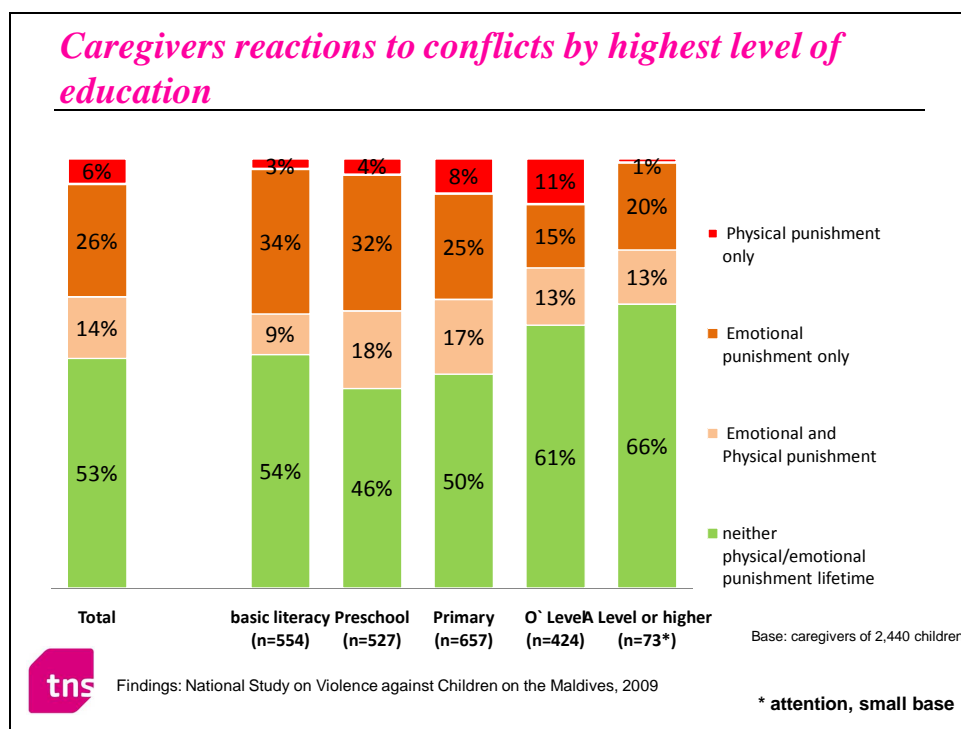


Figure 16 Use of forms of punishment by educational level of caregiver

4.5 Arguments between caregivers

Besides a gender effect, the presence of domestic conflicts in the child's home has an important impact on the rearing of the child: according to the analysis in Figure 17, the risk of children to become victims of emotional and physical punishment rises significantly with the presence of domestic arguments between the primary caregivers.

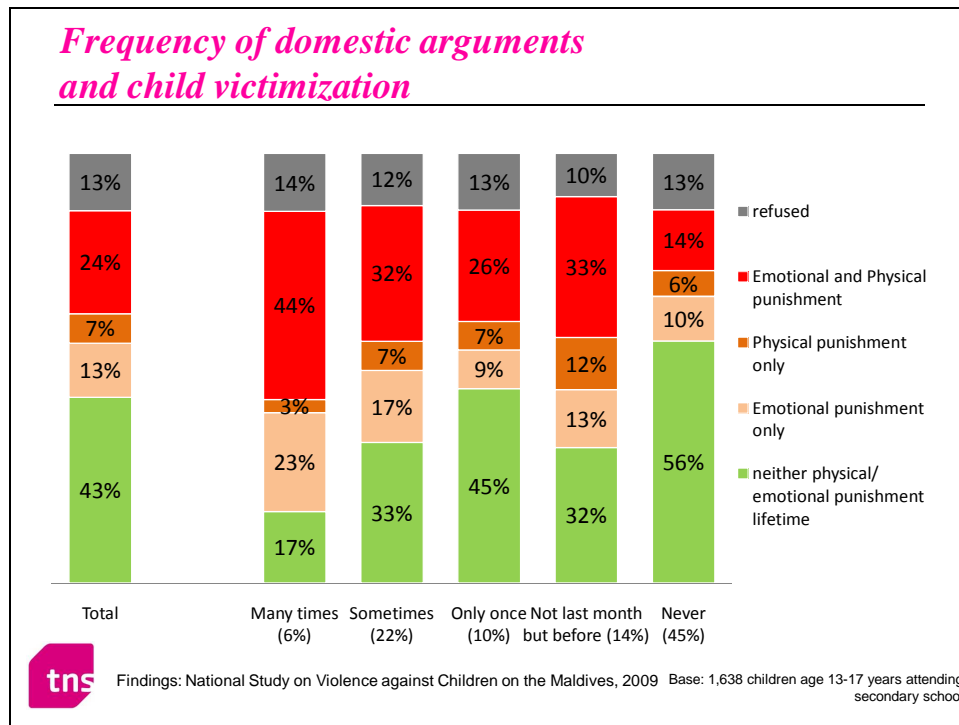


Figure 17: Use of forms of punishment by frequency of domestic arguments among caregivers

4.6 Handicapped children

The questionnaire also asked for the existence of different handicaps of children using the questions from the MICS standard questionnaire¹¹ to ensure comparability of questions.

Of all the children 13-17 attending secondary school asked, slightly more than half indicate that they do not have any of the difficulties enquired. On the other side, around one in four children (25%) indicate that they have health difficulties - the majority of which reported problems seeing and – although to a lesser extend – “walking or climbing stairs”. A minority of children indicated to have “a lot of difficulties” with one health issue, while ca. 3% cannot do at least one of them at all or have severe multiple limitations.

¹¹ “Having problems seeing even though visual aids are worn”, “Having difficulties hearing, even if wearing a hearing aid”; “Having difficulties with self care or washing oneself”; “Having difficulties walking or climbing up stairs”.

To understand if there are any effects of the health of the child and how they are treated by their parents, TNS also analyzed the existence of emotional or physical abuse in children (lifetime).

This analysis yields that children, who suffer from a handicap - however light – have experienced significantly more emotional punishment than children without such handicaps. A similar picture can be seen from the interviews with the primary caregivers (see Figure 19), so that it can be assumed that children with handicaps indeed are at a higher risk of becoming victims of emotional and physical punishment. In an interesting additional analysis (not shown) it became apparent that households with handicapped children are more prone to domestic conflicts between the caregiver, which, in turn, pose the children at a higher risk of victimization.

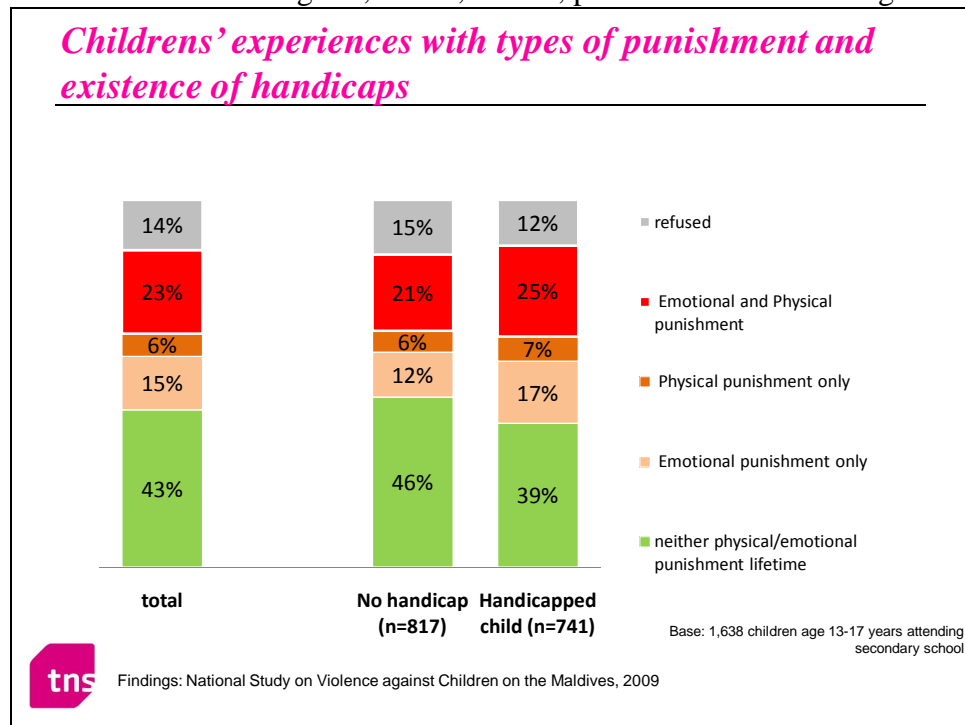


Figure 18 Use of forms of punishment by existence of handicap in child (reported by children)

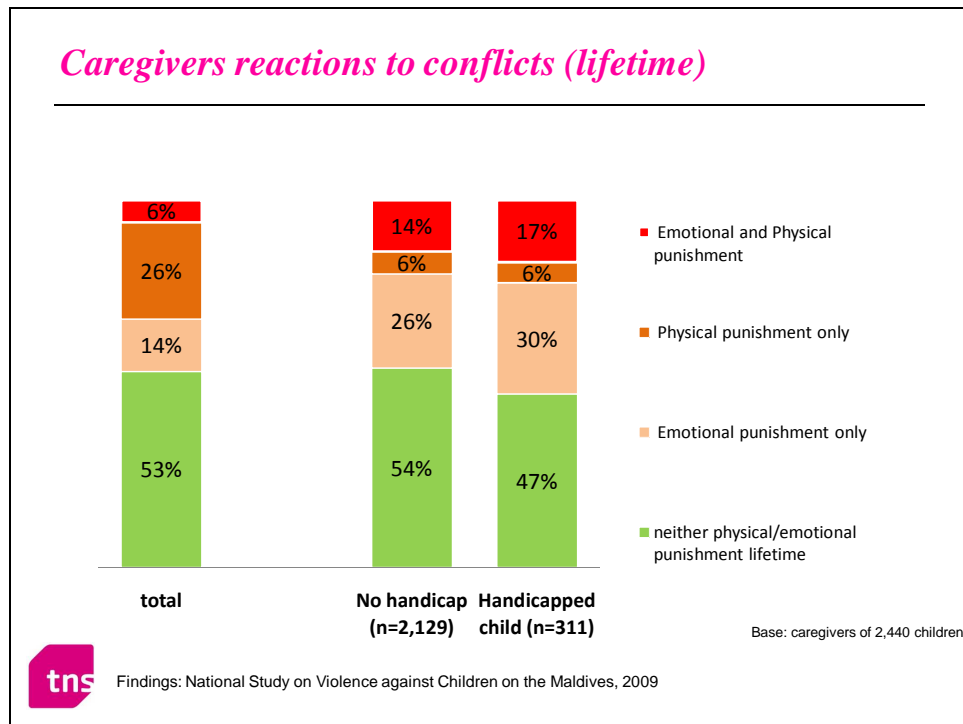


Figure 19 Use of forms of punishment by existence of handicap in child (reported by caregivers)

4.7 Attitudes towards physical punishment at home

These initial findings suggest half of the children have not undergone physical or emotional punishment in their lives so far. On the other side, for around one in five children (20%) attending secondary school physical punishment played a role in their upbringing. When asked for their attitudes regarding negative effects of physical punishment, however, more than half of the children believe that it does not have such negative effects on the children. Only 20% believe that it has negative effects on the child. It is interesting that there are no significant differences between the gender of the children or their age. Only a slight difference in judging this statement can be seen if the responding child has been subjected to physical punishment, but overall the majority of those children also do not consider physical punishment to have negative effects on the children.

The parents were presented with two statements about the issue and were asked to state their level of agreement or disagreement on a scale.

- *“Some children should be punished physically so that they know right from wrong behaviour”*
- *“Physical punishment, if administered correctly, has positive effects on the rearing of the child.”*

As with the question asked to the children it is surprising that around 40% of caregivers tend to agree that some children should be punished physically, although the incidence and prevalence of such behaviour is lower across all regions and age groups.

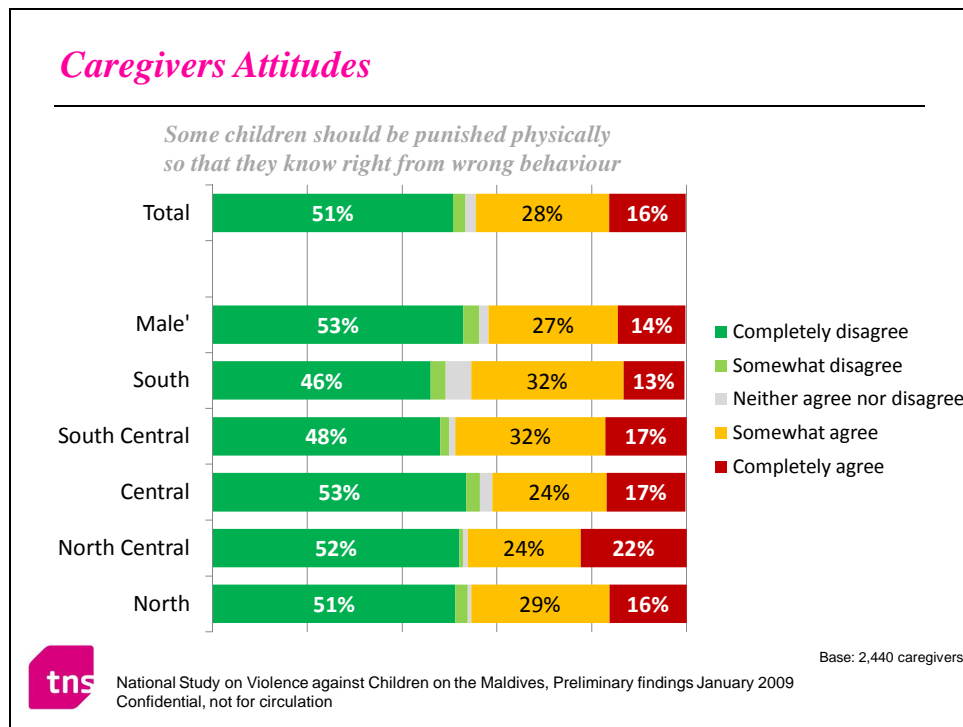


Figure 20: Caregivers' attitudes to physical punishment, I

The other statement that “correctly administered” physical punishment has positive effects on the child reiterates a common prejudice or myth in the area of child rearing. Although such “correct” physical discipline does not exist, it gives important hints on the overall mindset of parents.

As in the statement described before, there is only little variance in the answers across regions, but it is interesting that this question tends to polarize more between the two extreme answers (agree / disagree completely).

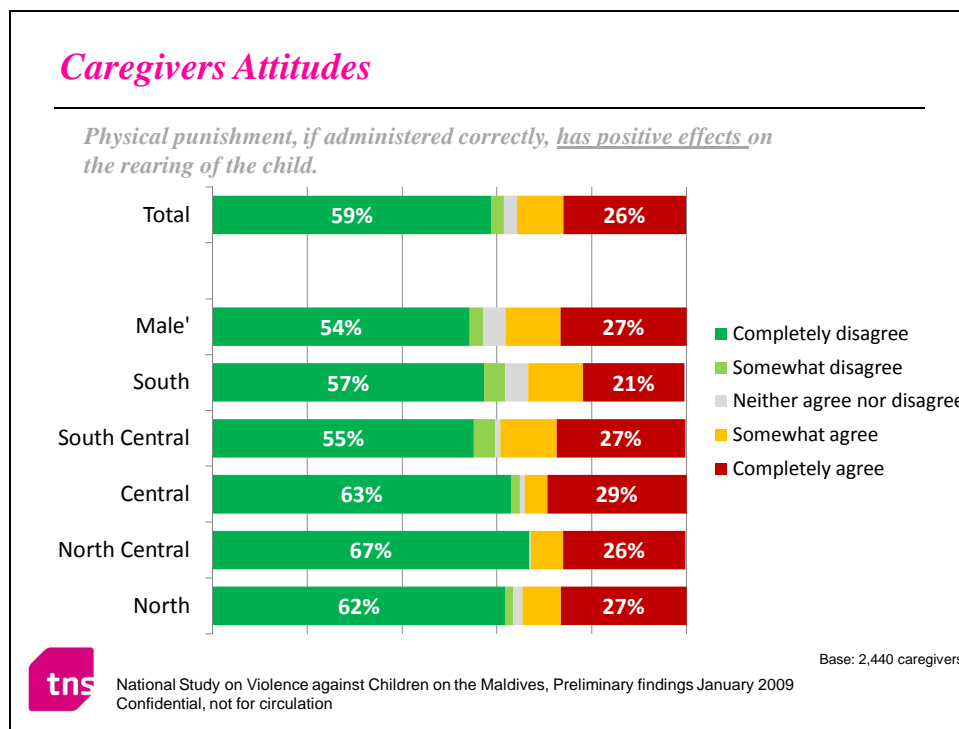


Figure 21 Caregivers' attitudes to physical punishment, II

The limited variance between the regions also points that physical punishment is for some parts of the population a part of a wider belief system, regardless if it comes to practice or not.

To get more insights into belief system, the aforementioned statements together with the statement "All disciplinary problems with children can be solved by talking to them" were put into a multivariate analysis¹². As a result, three clusters of mindsets regarding attitudes towards physical punishment could be identified:

- "Opponents", whose attitudes are against the use of physical punishment
- "Supporters", who exhibited positive attitudes on physical punishment
- "neutral". This group specifically believes that "some children should be punished to physically, to learn the right behaviour", but who, at the same time do not think that physical punishment has positive effects on the rearing of the child.

As it can be seen in Figure 22, according to this classification around 40% of caregivers can be considered to be opposed to physical punishment of children, while around 35% have mindsets favouring it. Apart from the South and the South Central regions the distribution offers only little variance.

¹² It is interesting to note that in this classification the inclusion of this statement did not have any impact on the outcome of the analysis: as this belief is shared by more than 90% of the caregivers, this speaks for the fact that this is an attitude that has only little impact on the actual parenting.

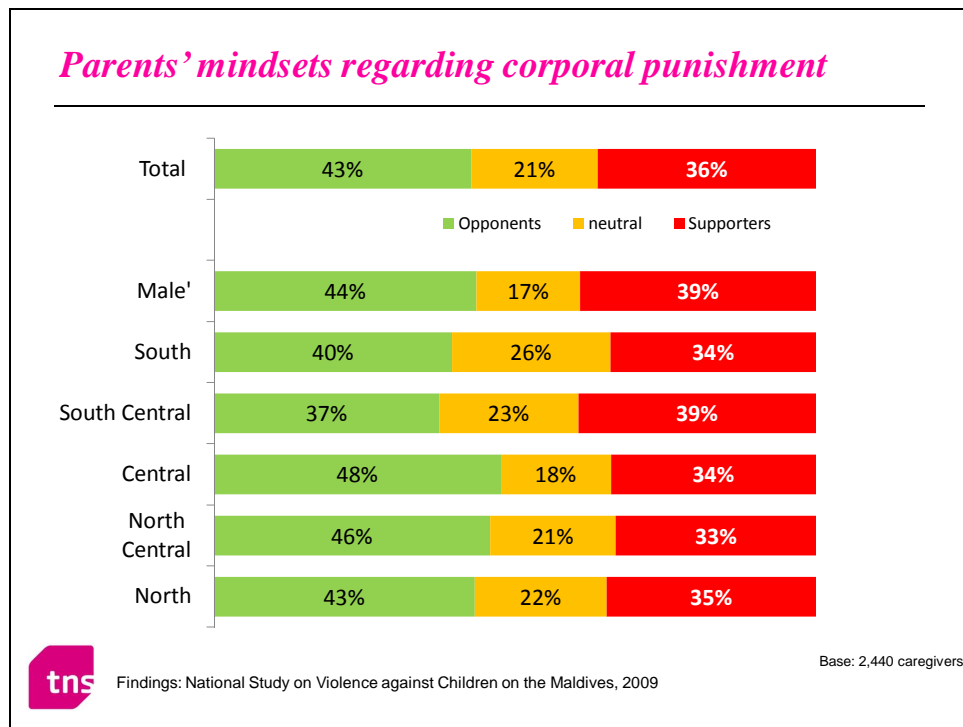


Figure 22 Caregivers' mindsets regarding physical punishment

However, the overall impact of this mindset on the actual use of physical punishment on children is low. This speaks for the fact that the actual use of such measures might be sanctioned by the culture, so that situational circumstances or spontaneous impulses override specific beliefs. Therefore, this mindset can be considered to be very weak. For the children this means a higher and incalculable risk of victimization at home.

To become efficient, attitudes need to be embedded into a sound foundation of knowledge to turn into action; otherwise they can be overridden short term by impulses, emotions or long term replaced by contrary attitudes and behaviours. As there is a basic attitudinal basis to build in the Maldives, one recommended way of action would be to provide caregivers with a brief training on parenting at childbirth or through community events. During these trainings the negative effects of physical or emotional punishment on children and pedagogical alternatives should be presented. Using this strategy, the caregivers will get a wider framework and theoretical and practical background to reinforce their attitudes. Having both the Knowledge and the Attitudes in place, there is a lower risk for children to be subjected to physical punishment.

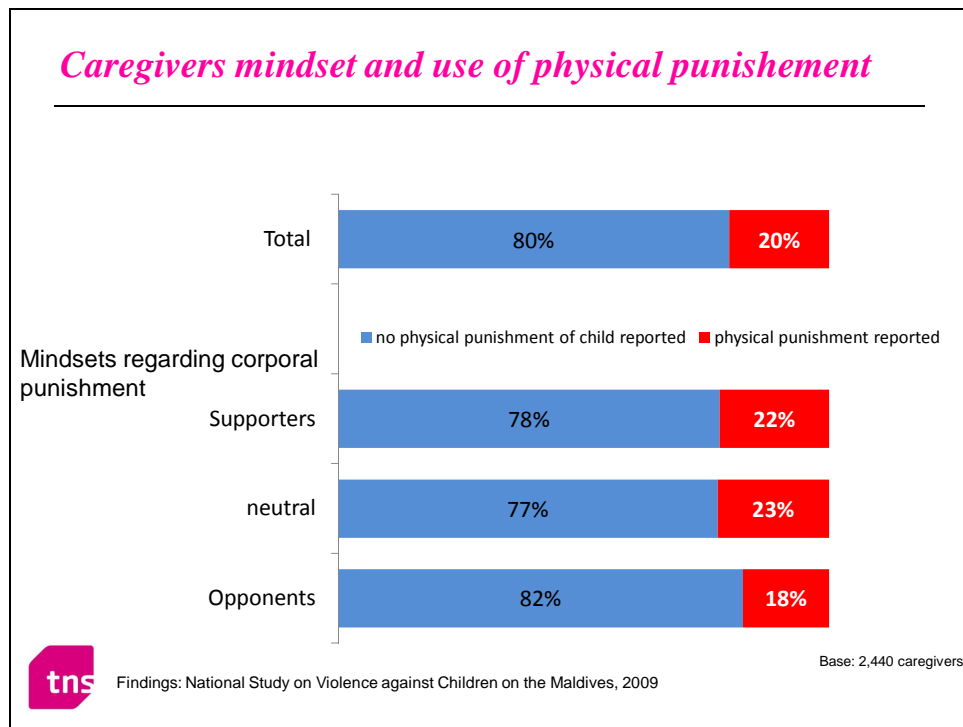


Figure 23: Caregivers' mindsets and use of physical punishment

However, it should be considered that while physical punishment is not used often, the threat to do so is present in a sizeable portion of the households.

Overall, the findings from both the children and the caregivers are therefore an important indicator for the existence of a deep rooted cultural belief. It is important to note that the attitudes do not necessarily contribute or prevent the use of using physical punishment. On the other side, the majority of children do not believe in the negative effects of physical punishment – while this does not necessarily mean that they will use such punishments on their children, it certainly can lower the threshold for using it.

When asked for situations in which it would be acceptable for a caregiver to hit a child, the majority of caregivers indicated in all these physical punishment should not be justified. The main accepted exception is stealing and, to a lesser degree, disobedience. Interestingly enough, the justification to hit children decreases with age, pointing to a possibly increasing trend in the acceptance of physical punishment

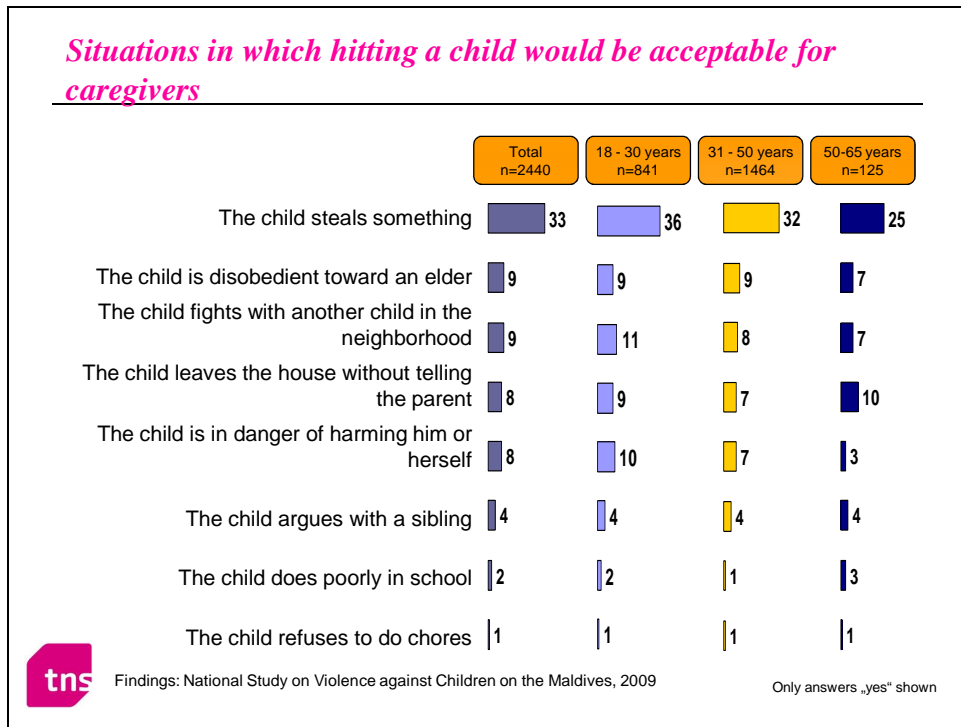


Figure 24: Situations in which caregivers see hitting a child justified

In contrast to hitting, yelling at a child is considered to be an acceptable way of educating a child by a larger number of caregivers with ca. one in four caregivers (25%) supporting most of the circumstances.

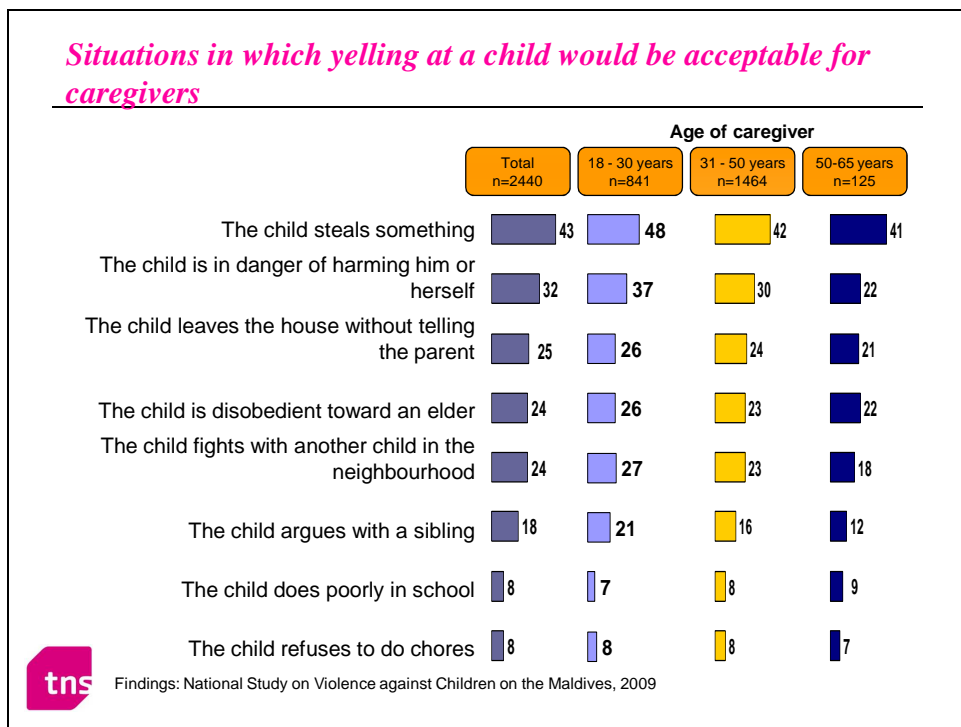


Figure 25: Situations in which caregivers see yelling at a child justified

These findings support the results of the study so far: in the eyes of the caregivers yelling or emotional violence is a different, more accepted form of punishment than physical one: only in the case of stealing, ca. one third of caregivers would find it acceptable to hit a child, while yelling at children is considered to be as appropriate in a wider range of scenarios. At the same time, attitudes and behaviours were found to not always match with each other, leading to the conclusion that the choices for using or not using both emotional and physical punishment are mostly arising spontaneously and are not part of a wider belief system.

4.8 Effects of violence at home

How deeply arguments with caregivers (and their reactions) affect children, can be seen by the fact that one in ten children (10%) attending secondary school “very often” already thought of running away from home. However, when analysed by children with and without having experienced physical or emotional abuse in their lives from their caregivers, it becomes apparent that children with such experience have at least three times more often thought running away from home “very often” or “often” (44%) than the comparison group (13%). Especially the difference between victims of such abuse and non victims who have thought “many times” about running away from home is very high: 2% of non-victimized children versus 19% of victimized children.

Through the qualitative research TNS supports these findings: the verbal and physical abuse can cause a psychological trauma in the children. The interviewed children and victims of violence indicated that controlling behaviours of parents, verbal aggression, intimidation and threats of violence, humiliation and/or physical punishment result them being left to feel helpless and at fault. For them, therefore, home is not considered to be a safe and a secure haven.

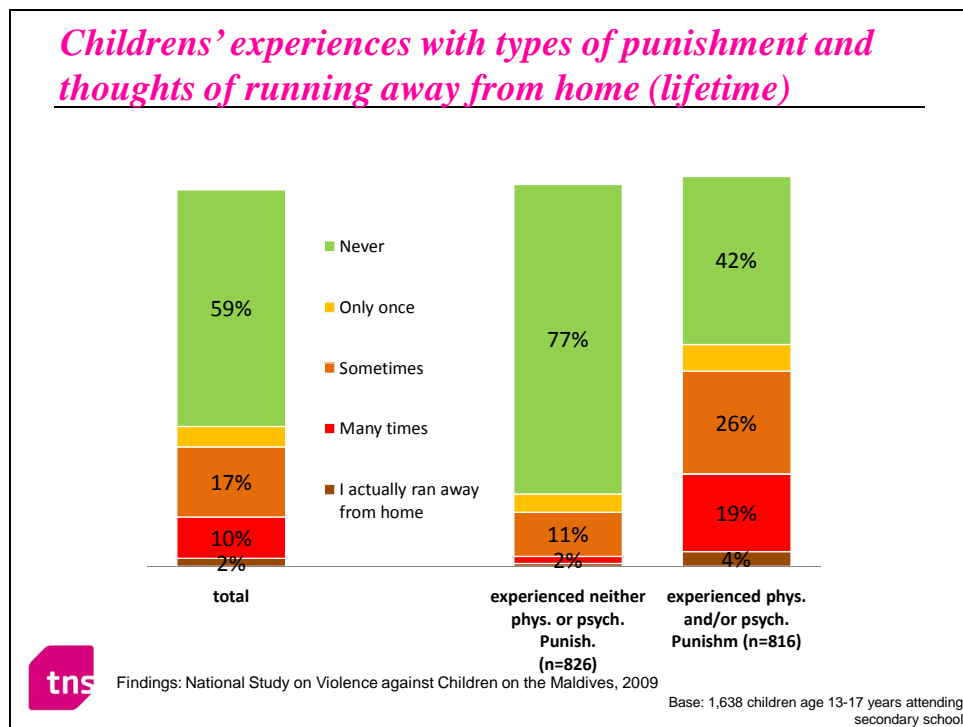


Figure 26: Childrens experiences with types of punishments and thoughts of running away from home

To be able to get a full picture, the interviewers asked the caregivers if they have been subjected to physical or emotional punishment from their caregivers, when they were a child. Analysing this data with the existence of the use same forms of punishment of their children, it appears that the likelihood to physically punish children is significantly higher in parents, who undergone this, too, while exposure to emotional punishment stays stable. However, while the effect is not strong enough to suggest an exclusive link between the use of physical punishment on own children and the caregivers own exposure to it in the past, it certainly shows that experiences of the caregivers past have repercussions into the treatment of their won children.

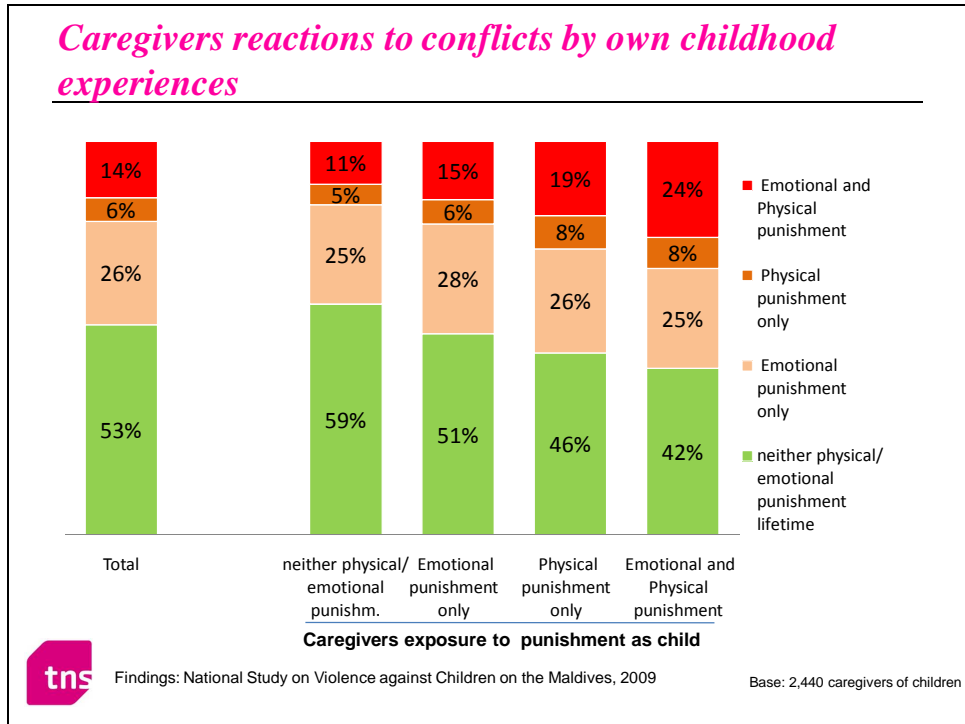


Figure 27: Caregivers' reactions to conflict with the child and punishment in own childhood

On the other side, 16% of caregivers, who indicated to have not undergone physical punishment, also reported to have used it on their children. As indicated in the above sections, this points to the fact that the use or the non-use of physical punishment is largely independent on the overall belief in its attributed efficiency, but rather a spontaneous behaviour, which is not sanctioned by the cultural framework.

5 School

24% of children and young adults attending secondary school indicated that they had an argument with their teacher at least once in last month. 14% noted that they had an argument with the teacher more than a month ago. Therefore, the majority of children never had any kind of argument with their teachers. When analyzed by type of school the children went to at the time of the interview, it becomes furthermore apparent that children attending higher secondary school have been overall involved in less arguments with the teachers than those going to lower secondary school¹³.

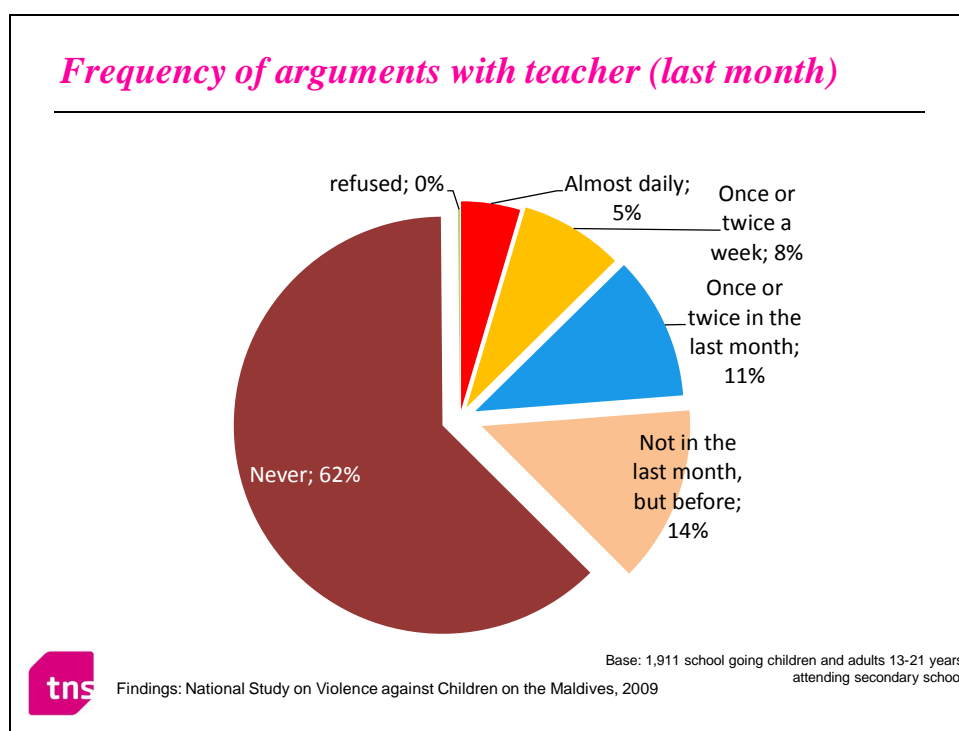


Figure 28: Frequency of arguments with teachers

Of those students, who had an argument with the teacher in lower secondary school, chattering during class was the main issue that started the conflict (37%), followed by not listening and speaking out against the teacher (both around 15%). While chattering in higher secondary school is still the main starting of conflicts, it is to a much lesser extent (22%), while not having done homework and coming late to school (both around 14%) are the other two main reasons.

Gender differences – just like with arguments at home – do exist at lower secondary schools¹⁴, but to a smaller degree - with boys indicating that disturbing class and speaking out against the teacher started an argument while girls were more involved in conflicts around not listening or chattering during class.

¹³ 76% of children in higher secondary school indicated they „never“ had an argument with their teacher versus 60% of children going to lower secondary school.

¹⁴ A detailed analysis by gender for the sources of conflict on the higher secondary school level is not possible due to the fact that less conflicts arise there and therefore the data basis too low.

Teachers usually deal with these arguments by explaining calmly, what the child did wrong, but also by complaining to the parents or throwing children out of the class.

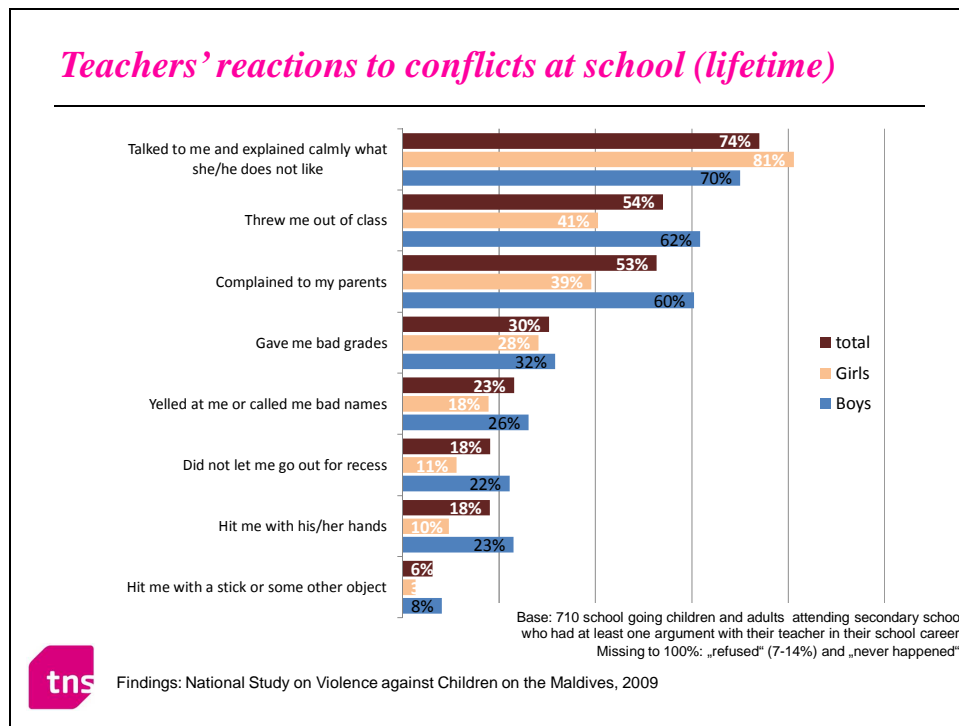


Figure 29: Teachers' reactions to conflicts with children at school (lifetime)

23% of students attending secondary school had a conflict with a teacher report that they have been yelled at or called bad names in at least one occasion during their school career and 18% that they have been hit by the teacher. 30% of students also report that the teacher gave the child a bad grade after such a conflict. It is interesting to see that teachers tend to solve conflicts with girls differently than with boys, for which a conflict is more likely to escalate so that the child is being thrown out of class, or, in rarer cases, being subjected to physical punishment. While being thrown out of class cannot be considered as an act of emotional or physical punishment, the long term effect of this measure can have, however, a strong negative effect on the education of the child: if children are missing classes, they will miss important lessons, so that they might not be able to understand subsequent lessons, hence unleashing more potential for frustration and anger on both the child's and the teachers side and the danger of being thrown out of class again.

All in all the vast majority of students was never subjected to violence from teachers in school due to the fact that arguments at school do not seem to be common. Calculated on the entire population of children attending secondary school, 8% have experienced physical punishment at school, mostly at Lower Secondary schools.

The qualitative survey indicated that it is mostly the not so well performing students, who get exposed to either emotional or physical punishment. This is being confirmed by the an analysis by groups of students and type of school (see Figure 30): indeed the academically weaker students visiting Lower Secondary school are victims of emotional punishment. To a much lesser effect this effect can also be seen for the students visiting Higher Secondary school. While the teachers said in the qualitative survey, that the academic performance of students is dependent upon the situation at home, including violent experiences there, such a direct causal effect could not be confirmed by the data. Indeed the correlation of academic performance and

victimization at school seems to be grounded also in the way how teachers deal with unruly or academically weak children.

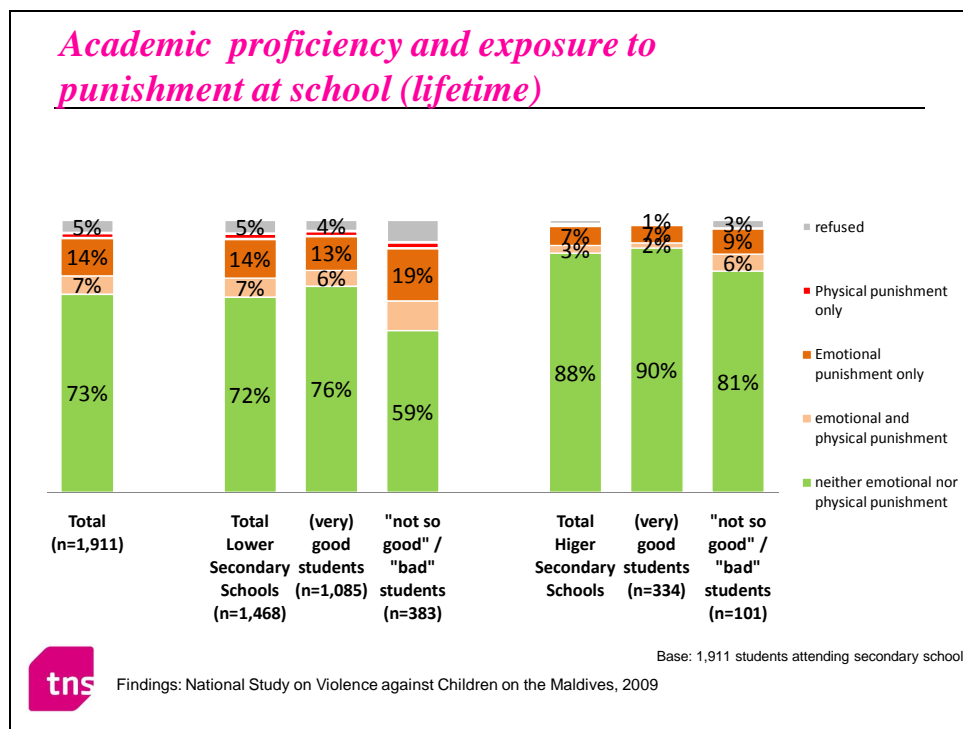


Figure 30: Academic proficiency and exposure to punishment at school

To understand the extent of the issue of physical punishment at school, a further analysis was conducted not on the children's, but on the classroom level. This analysis showed that a large variance between the schools and the grades exists regarding how teachers deal with conflicts. In around one third of the interviewed classes, such punishment was not used regardless of the number of conflicts in class in the last month.

Considering the range of using physical punishment across all schools and regions and its probability in case of conflict, though, it appears that its use is rather dependent upon the culture of the school and the individual teacher. In this light, it should be considered that all teachers should undergo training on efficient teaching methods. In addition, the development of protocols / codes of conduct on the school level are also recommended.

In the majority of conflicts the students in secondary school talk back at the teacher. It is surprising that around one in seven children (15%) indicated to have threatened to hit (or actually hit) the teacher or threw something at him or her. While the latter can also be fantasies on behalf of the students, this behaviour points at this stage of the analysis also at a comparatively low threshold of a minority of children to use violent behaviour also against teachers. The qualitative research also found out that some teachers feel that they are not well respected by some children, that could lead into a vicious circle of verbal and physical abuse.

Differences in the existence of handicaps and the use of physical or emotional punishment in conflicts with teachers were found to be significant as these students are often the ones, who do not always perform well at school.

As in the arguments at home section, the students were also asked if they were ever afraid to go to school because of a teacher. While the overall data gives no evidence that teachers are feared (5% of children indicated that they skipped either once or twice school in the last year) the analysis by victims of physical punishment at school makes a clear statement:

10% of students, who have been victims of physical punishment have actually skipped school once or more often, while the same is true for 3% of non-victims. In case of victims and non-victims of emotional punishment¹⁵, the rate is similar.

5.1 Parents' attitudes towards physical punishment at school

As for physical punishment at home, the caregivers asked two statements to understand their attitudes in this regard for the school. While there are some regional differences, the vast majority would not accept this kind of behaviour from the teacher as they also think it is detrimental to the education of the children.

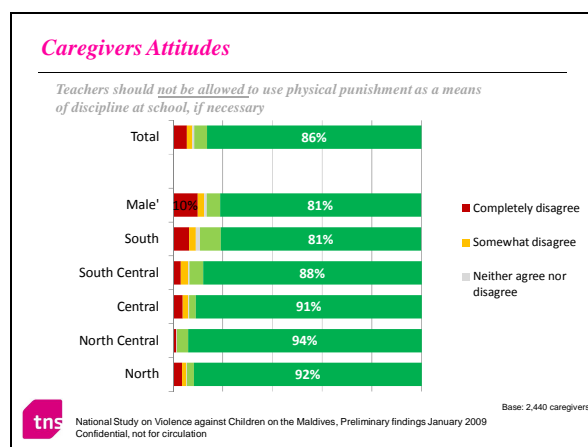


Figure 31: Caregivers' attitudes to physical punishment at school, I

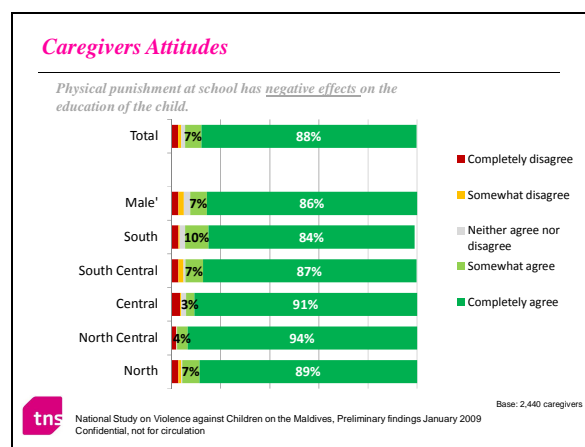


Figure 32: Caregivers' attitudes to physical punishment at school, II

These findings show that physical punishment at home and at school are seen as different categories by the caregivers – physical punishment, it seems is an educational measure that is authorized within the family only. This attitude towards physical punishment in family/non-family settings have also found their way into the legislature (physical punishment is prohibited in schools, but not at home). However, as it can be seen from the vast agreement with the statement that such punishment is harmful for the child's education, it would be recommended to piggyback on this set of attitudes to initiate a Behaviour Change Communication campaign that addresses the same issue at home.

5.2 Arguments between teachers and parents

In the last month ca. 15% of students attending secondary school have seen their parent(s) argue with a teacher and an additional 5% before that. In most cases (88%) the parents and teachers talk with each other calmly, while in 8% they yelled at each other. Although the

¹⁵ Students, who have experienced that the teacher "Yelled at me or called names" or „teacher gave me bad grades“.

qualitative leg of the study mentioned that teachers and parents have been seen in violent fights, therefore, this behaviour seems to be rare¹⁶.

5.3 Bullying at school

To get insights about bullying at school, TNS put two pictures of situations into the students' questionnaire. In each picture three children were depicted, one bully, one victim and one self-confident bystander. The children were asked, which picture would describe them best at school.

In the first situation the bully kicks the victim. Out of all children attending secondary school, 3% identify themselves with the bully, while the vast majority consider themselves to be the bystander, who is saying "nobody treats me like that". Around 10% of children, however, identify themselves with the victim, who is thinking "I wish that child would stop bothering me". Interestingly, more boys identify themselves with the bully than the girls (5% vs. 2%), while the numbers of victims are roughly the same across gender.

This speaks for a small group of boys, who take over the role of bullies in some schools.

To understand besides physical bullying also the emotional one, the other situation described the bully shouting at and verbally abusing the victim. In this scenario ca. one in four students (25%) identified themselves with the victim with only small gender differences. On the other side, however, around one in ten of boys (10%) has marked the bully to describe itself as opposed to one in fifty girls (2%).

Analysed by gender and type of school the students visit, however, it becomes clear that the issue varies quite a lot with these two dimensions. While in Higher Secondary School (HSS) all emotional bullies are boys (7%), the victims are fewer girls than boys (14% vs. 21%). At the same, the number of bullies in the Lower Secondary School (LSS) is almost double as high (again for the most part boys) with also higher proportions of victims. This effect, on the other side, cannot be seen in physical bullying.

There is also a clear age effect. Compared with the other age groups, the percentage of bullies is largest in 13 year olds attending secondary school, while it is decreasing quickly with age.

In a detailed exploration of the childrens mindsets and as part of a methodological test of two different forms to measure bullying, the students were presented with 11 statements to explore the use or the victimization through emotional and physical violence by other children. With this measurement method, it turns out that 70% of the students are not victims of bullying, 14% are victims of emotional violence by other children and 4% of both physical and emotional violence. In total ca. 10% of the students could be identified by their answers and actions against other children as bullies. It is interesting to see in Figure 33 below that bullies are for the largest part boys. As in the findings of the questions on the same issue described above, a further analysis showed that bullying is highly dependent on age and is playing only a very limited role in Higher Secondary Schools.

In a further step, links between exhibiting violent behaviour in daily life on other children and the consumption of violent content in the media or victimization in the home were explored. While a weak correlation exposure to emotional and physical punishment at home and b bul-

¹⁶ This is an exemplary case to stress the point to put reported behaviours from the qualitative phase into a quantitative questionnaire to obtain representative picture of the situation. Such a mix of qualitative and quantitative research bridges the shortcomings of the two methods.

lying behaviour at school could be found, the data does not point into the direction of a causal relationship to each other. The consumption of violent content in the media also does not explain violent behaviour in children. Considering that violence at school originates from young boys, more plausible explanations might be found in the cultural background.

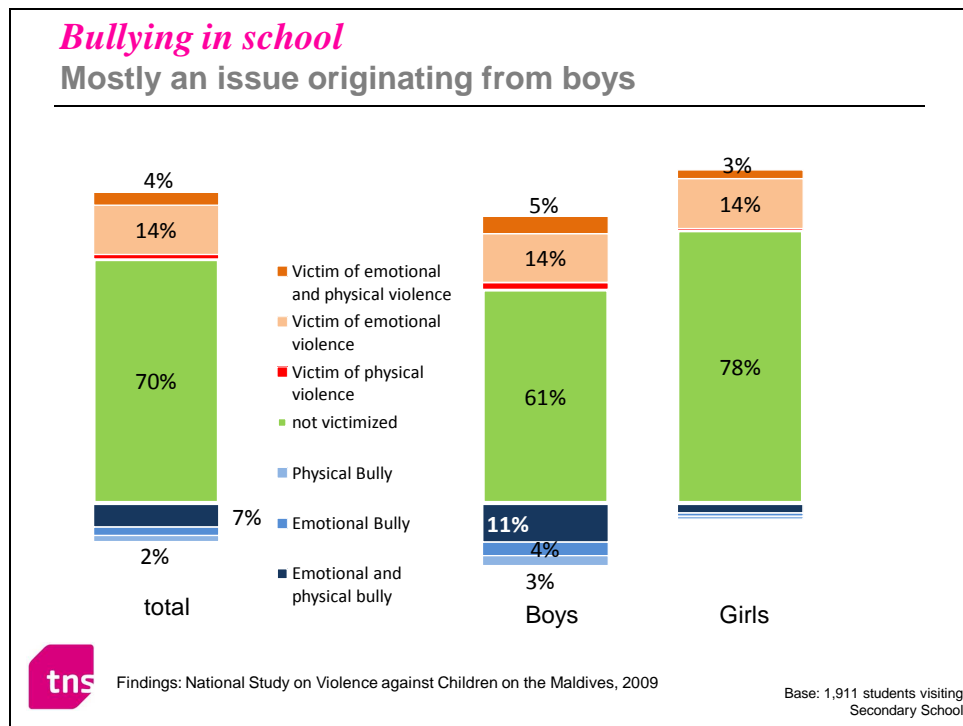


Figure 33: Bullying at school

Although overall physical bullying is a comparatively weak phenomenon in the Maldives and is dependent upon the age of the children, its psychological variant is a somewhat larger issue that should be taken care of, especially in boys.

Only very few students attending secondary school ever skipped school in the last school year because they were afraid of other children (3%), in most cases regardless if the children have identified themselves as victims or not. 5% indicated that they are often afraid of going to school. This finding points into the direction that bullying is a phenomenon that not yet has reached a critical level of severity so that the majority children can deal with and which goes away with the age of the children. In comparison, verbal or emotional violence from teachers or the parents affects children much harder due to the fact that this abuse comes from adults, which children feel helpless against.

However, school can also be a place for strong violence among students. 7% of students attending secondary school reported - most of them boys – to be hurt by another child at school so hard that it had to visit a nurse or a hospital, with most of these cases happened in the last school year.

Such violence usually happened to a large extent to male students in Lower Secondary Schools, while both boys and girls in HSS did not mention such events in the last year.

6 The Community

The majority of children attending secondary school between 13 and 17 years in the school survey reported that they like to live in their neighbourhood, while one in seven (15%) indicated to not like it to a certain degree. To explore the communities more, the questionnaire also asked for three more statements about the community: the overall feeling of safety in there, existence of children or adolescents the respondents are afraid of and the existence of gangs.

As Figure 34 below shows, there are significant differences in how girls and boys attending secondary school see the situation in their community. Especially girls on the Atolls indicated that they are afraid of other children and adolescents and gangs in their living area, which makes 11% of girls feel unsafe in the community. The same effect can be seen much stronger on Male', more than double the girls than boys identify to be afraid of these groups. Indeed almost half of the girls are afraid of a gang and 16% feels to a degree unsafe in their community.

Therefore, while the previous findings pointed to the fact that boys are more vulnerable to violence at home and at school, girls feel themselves insecure in the communities, especially on Male'.

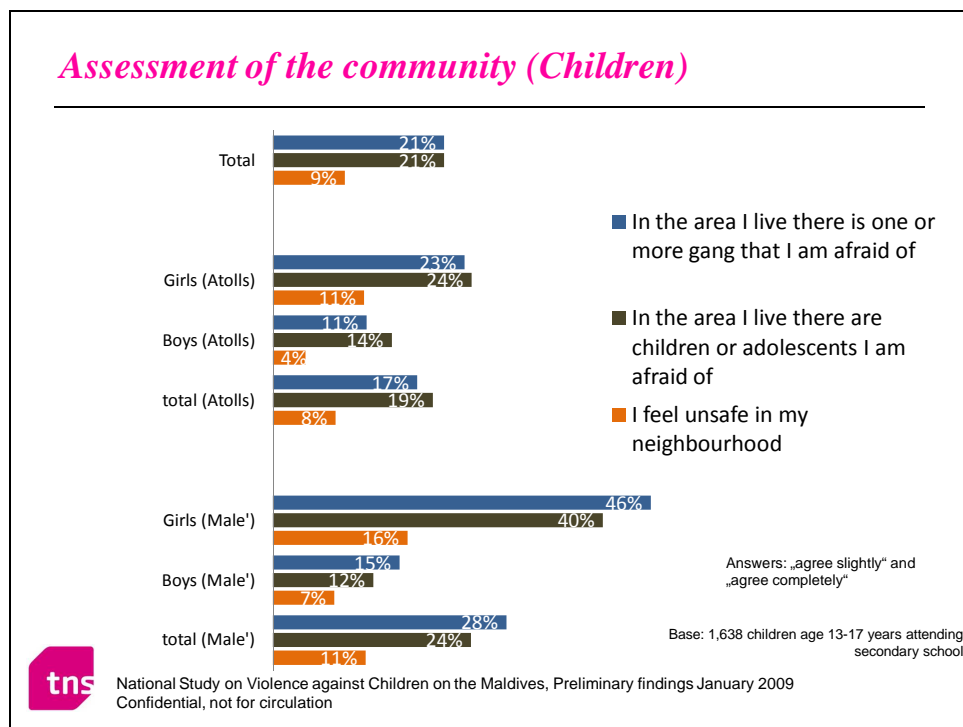


Figure 34: Assessment of the community (reported by children)

Trying to find out the role of abuse in the communities, the children were also asked about events in the past. As Figure 35 below shows, children on the Atolls have experienced these kinds of behaviour from other children significantly more often than on Male'. This is in so far surprising as children feel safer on the Atolls than in Male', where things like that seem to happen less often. On the other side it but can also be an indicator for a more tightly woven social network on the Atolls, which contributes to a higher sense of security.

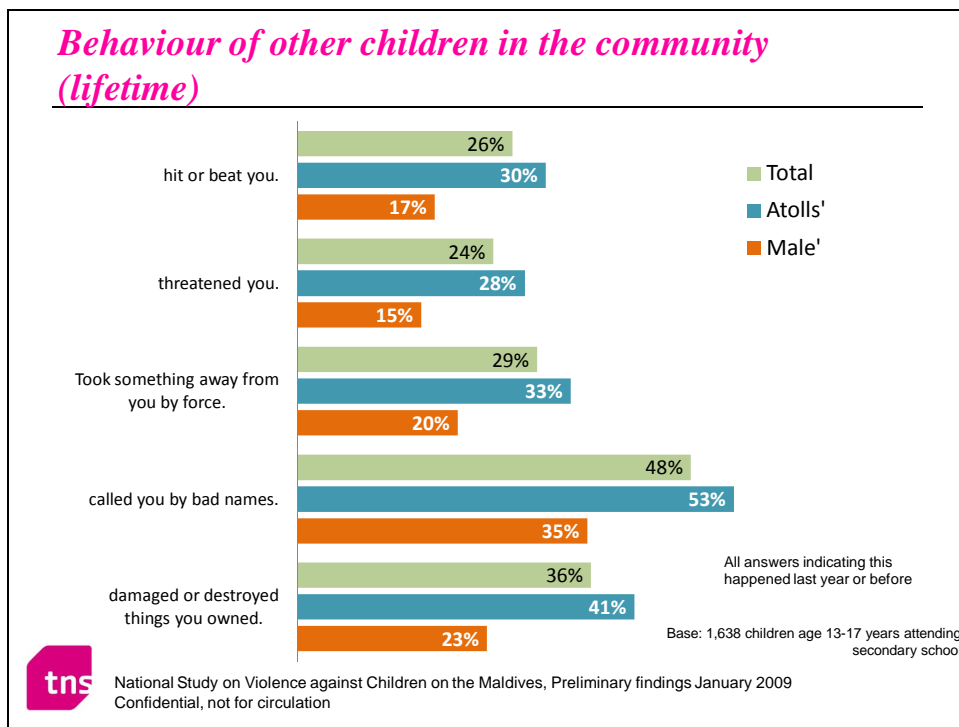


Figure 35: Behaviour of other children in the community

Looking at the behaviour of adults in the communities in the same dimensions, the relative similarity between this and the analysis before is striking: indeed one quarter of children have experienced physical or emotional abuse also from non-family members in the communities. Again, the prevalence is higher on the Atolls than on the capital island.

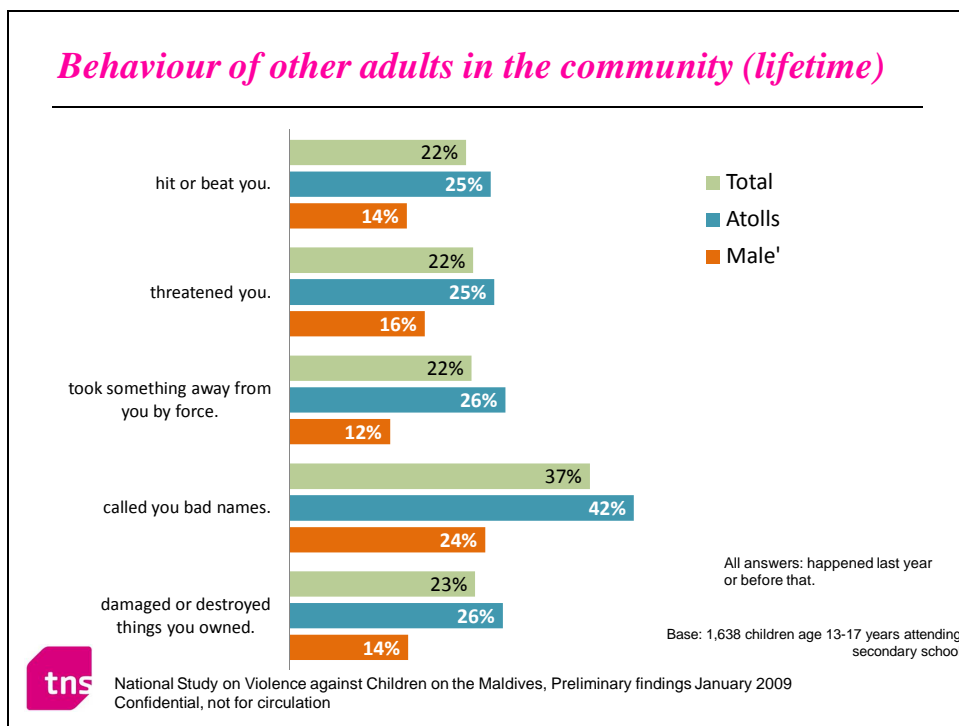


Figure 36: Behaviour of other children in the community

To get a complete assessment of the situation, TNS also asked the caregivers about their opinion regarding the safety in the community. The inhabitants of Male' and the "South" region consider their region to be mostly unsafe, with roughly 25% of caregivers on Male' considering it to be safe for children.

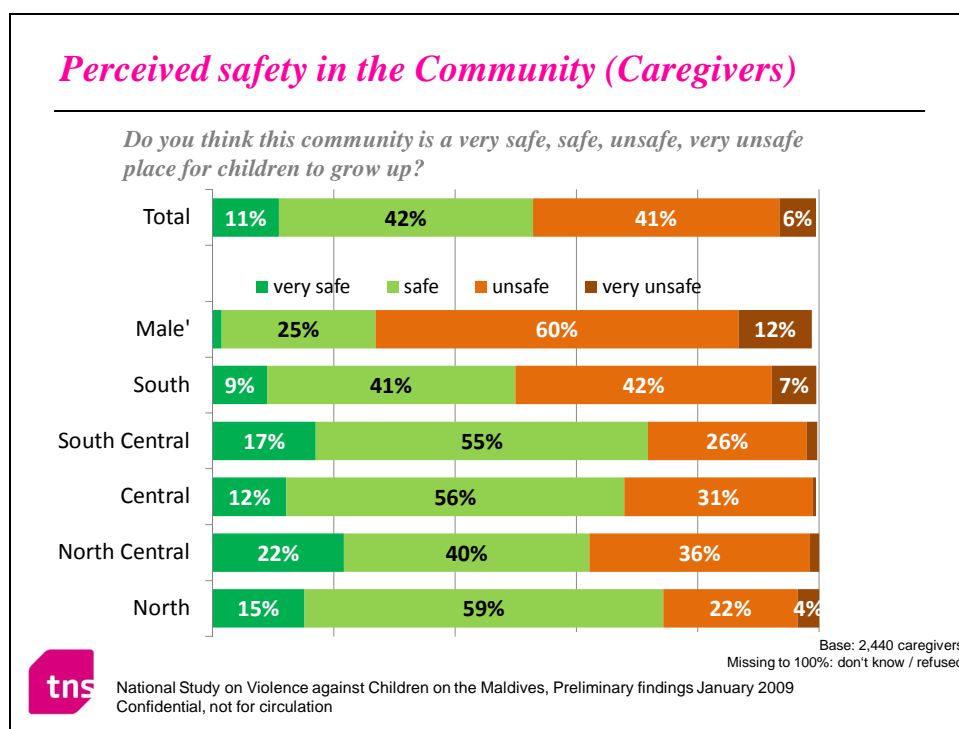


Figure 37: Perceived safety in the community (reported by caregivers)

South Central and North, on the other side are believed to be sheltered communities for children. Whilst the caregivers are more sceptical of the safety than the children, it becomes apparent that Male' unambiguously is seen as an unsafe place. This is, as a follow-up question revealed, due to the fact that roads are considered to be meeting places for criminals and drug users and overall not suitable for children. To lesser extent the first two reasons were also mentioned for schools.

Besides roads, in the North and South Central the beach is also deemed to be a dangerous place for children, while in North Central roughly one in seven respondents (14%) named places outside the community to be unsafe.

	North	North Central	Central	South Central	South	Male'
Streets/Roads	28%	25%	19%	25%	41%	54%
School	3%	2%	2%	2%	5%	10%
Playground	0%	1%	0%	0%	1%	8%
Beach	16%	4%	3%	13%	12%	7%
Cafes	2%	1%	2%	1%	3%	6%
Some times homes	1%	0%	0%	2%	3%	4%
Outside community/ Outside home	7%	14%	6%	2%	9%	4%
Adult Gatherings	4%	1%	3%	3%	0%	3%

Harbour area	1%	1%	0%	3%	2%	3%
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Figure 38 Unsafe Places as seen by caregivers

In addition to the detailed question to the children of any occurrences in the community, the caregivers were also asked if the child in their care was ever threatened, hit or hurt in the community. It is interesting that roughly 2% of all caregivers indicate that such a thing happened to children of all ages. Taking into account only the relevant age group of children 13-17 years, roughly 4% of the caregivers indicate that something like that happened either last month or before that. Comparing these findings to the information the children provided, leads to the conclusion that children are suffering more from violence in the community than they tell the caregivers. This fact can also hint into the direction that the children can or have to deal with the forms of violence in the community by themselves and that the overall severity of it does not prompt them to inform their caregivers.

7 Severe abuse

For the last block of the interviews, TNS used an innovative and child friendly method adapted from focus group discussions to get brief insights on severe events of victimizations. Rather than answering on scales, TNS asked the children to draw a happy face if the event described never happened to them and a sad face, when it did.

7.1 Severe physical abuse

The main result of the first question is that around 5% of children said that it was hurt in its life at least once by a primary caregiver in such a way that it thought it needed to go to a hospital. When analysed by the region, it appears that the majority of abused children Atolls came from the Atolls (6% vs. 2% on Male'). While the margin of error at this stage is too high to talk about a significant difference, the other data from the school questionnaire suggest that indeed the level of physical punishment is overall higher on the Atolls.

Another 5% indicated that they have been hurt by their teacher so that they thought they would need to go to a hospital. While in the former question there was no significant difference between boys and girls, the difference in gender is striking here: on Male' 7% of the boys reported such an event, but none of the girls. On the Atolls the difference is smaller (8% boys to 3% girls). This not only stresses the point that mostly boys suffer from physical punishment at school but indeed should be considered a critical value, as such behaviour is banned in schools.

7.2 Exposure to pornography

During the final stages of the inception of the study (June 2008), several cases of pornography sent through SMS and the Internet have become known in the Maldives. To understand the reach of this material, UNICEF, the Ministry of Gender and Family and TNS agreed to include a question how many children have seen such material.

Approximately every third child said it has seen such a picture or video with boys having seen it significantly more often (46% versus 28%) and a clear age effect¹⁷. It is interesting, that this

¹⁷ 30% of 13 year old children indicate they have seen such material as opposed to 48% of the 17 year olds

material was far more circulated on Male', where half of the children attending secondary school in the survey said to have seen it. This is not surprising, considering the high population density on the main island and the limited number of (large) schools, whereas on the Atolls the population and schools are more scattered.

Overall, from a child protection perspective, the reach of this material proves to be very high and countermeasures, such as informing children about the harmfulness of promoting such material, should be considered.

7.3 Sexual abuse

As this survey set out to identify the prevalence of physical and emotional punishment, the fact that out of ethical considerations one need a dedicated questionnaire for the issue, and the existence of a more detailed study on sexual abuse, only one question on sexual abuse experience was included in the study.

Nationwide, ca one in seven children (15%) attending secondary school gave an affirmative answer to the question "did an adult ever touch you or hurt you in a sexual way when you did not want it". Analysed by gender, girls have been double as often abused as boys (20% vs. 10%, respectively). At the age of 17, 28% of girls attending secondary school reported to have been sexually abused on at least one occasion.

With boys there is not such a clear trend, indicating that sexual abuse in boys is either relative novel, not connected to the age of boys or shifts in abuse patterns over time. However, 17% of 16 years old boys indicate they have been sexually abused.

Analyzed by region and by adding the young adults (age 18-21) into the calculation to obtain more statistical power, it becomes apparent, that girls are especially at risk of abuse in Male'.

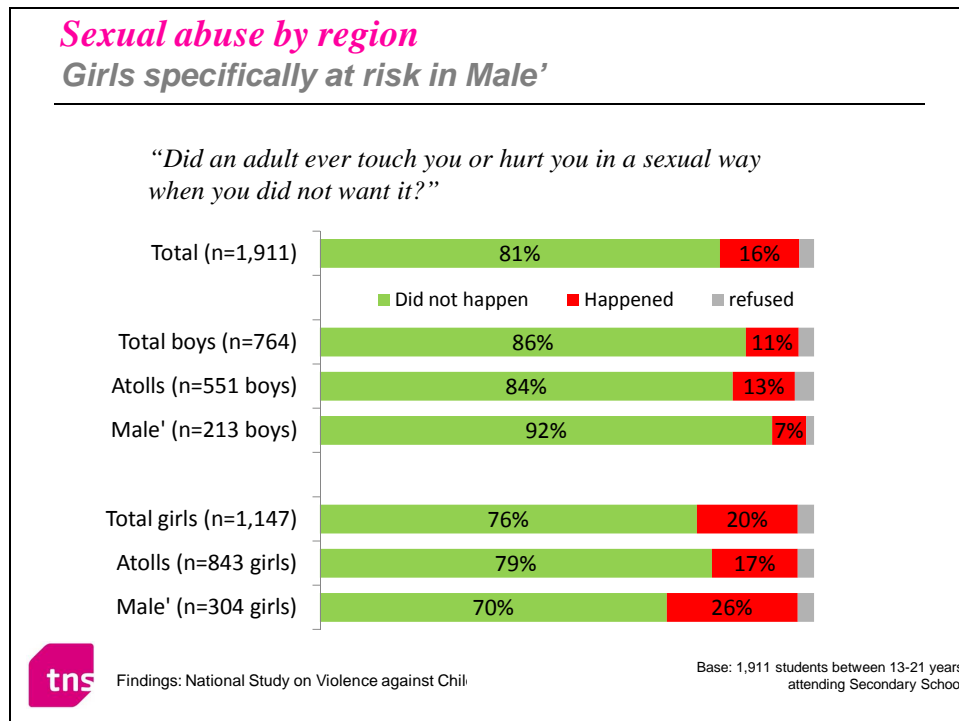


Figure 39: Sexual abuse by gender of child and region

Similar questions were also asked to the caregivers in the households: While 2% of women indicated that they have been raped as a child, there was no age or regional effect to be seen,

speaking for a more or less stable phenomenon across the Maldives. When asked, however about being touched at genitals as a child, 6% of caregivers living in the North region gave an affirmative answer, but as much as 13% in the Central region and Male’.

Although such a regional analysis was not possible for the childrens survey, the data from the caregivers suggest that indeed there are regional differences when it comes to sexual abuse.

8 Life skills and awareness

To find out about how children (would) react in case of victimization, they were asked about two scenarios. The first asked to whom or where they would turn to in case another child hits them very hard, the second what they would do in case of sexual abuse by an adult.

In case of a conflict with another child, the respondents would tell that their parents and/or friends. 9% of children (the vast majority of them boys) would try to take revenge themselves or, as a relatively new phenomenon, get back at the perpetrator with a gang, therefore initiating a vicious circle of violence. Only in few instances, children would tell that to officials like teachers, the principle or the police.

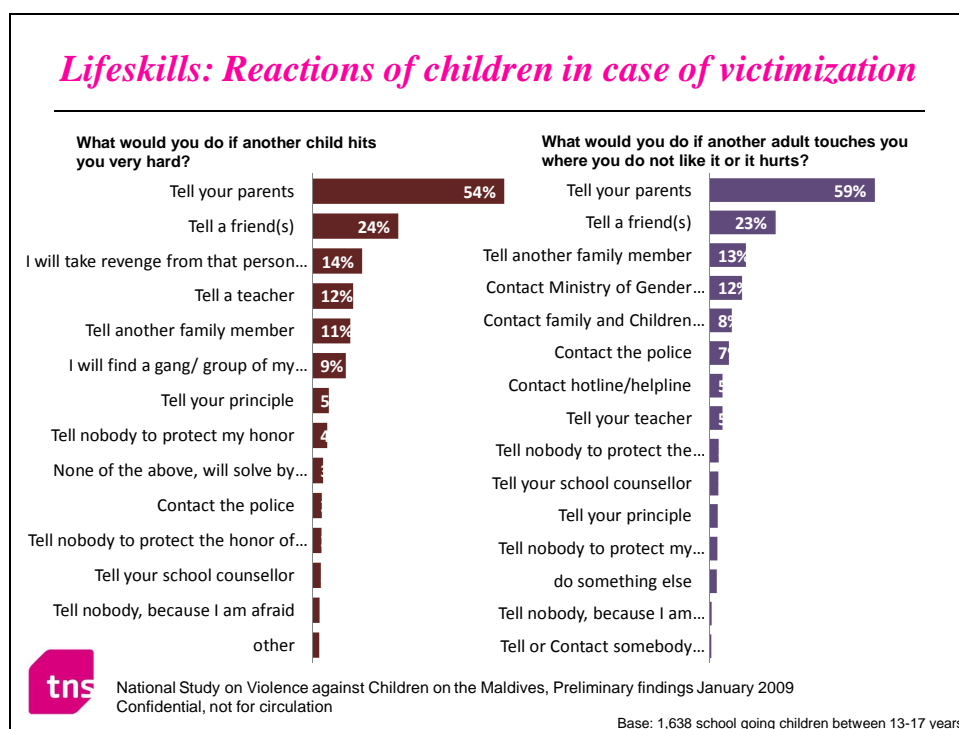


Figure 40: Childrens reactions in case of victimization

In case of sexual abuse, still family and friends are most likely to be informed. However, the severity of this event also leads ca. one in ten children (10%) to inform the (former) Ministry of Gender and Family, the police or other social services. Analysed by gender of the respondent it becomes obvious that mostly boys would inform officials; most of the girls indicated that they would tell this to their parents and – to a lesser extent – to friends. Only a very small minority of them would choose other options. This interesting difference points into the direction that boys consider sexual violence against themselves to be something illegal, while the girls seem to be less confident and seek advice from their parents.

It is a positive sign, that only a very few children would not disclose about such a severe form of abuse and that communities are aware of the services that are available for such matters. On the other side it is clear that the follow-up of the event lies mostly in the hands of the parents.

To get a feeling for the overall awareness of physical punishment and violence against children in their community, in a first step, the interviewers asked the caregivers to give them an estimate of the percentage of mothers and fathers who hit their children on a regular basis. While around 20% in the North region think no mother in their community hit their children, the result for the Maldives in the same category is only 8%. Indeed close to half of the caregivers indicated that at least half of the mothers hits them. Close to one in ten caregivers (8%) think that actually three in four mothers exhibit this behaviour.

Figure 41 shows interesting regional differences that indicate that especially on Male' at least one in four mothers (25%) are suspected to physically punish their children regularly. While these numbers are subjective estimates and cannot serve as a robust basis for understanding the true extend of physical punishment of children. It is interesting, however, that the same question asked for the behaviours of fathers yielded a significantly lower number, which is reflected by earlier findings from both the caregivers and childrens survey.

Overall, this data shows a high awareness of its more or less widespread use of physical punishment on children.

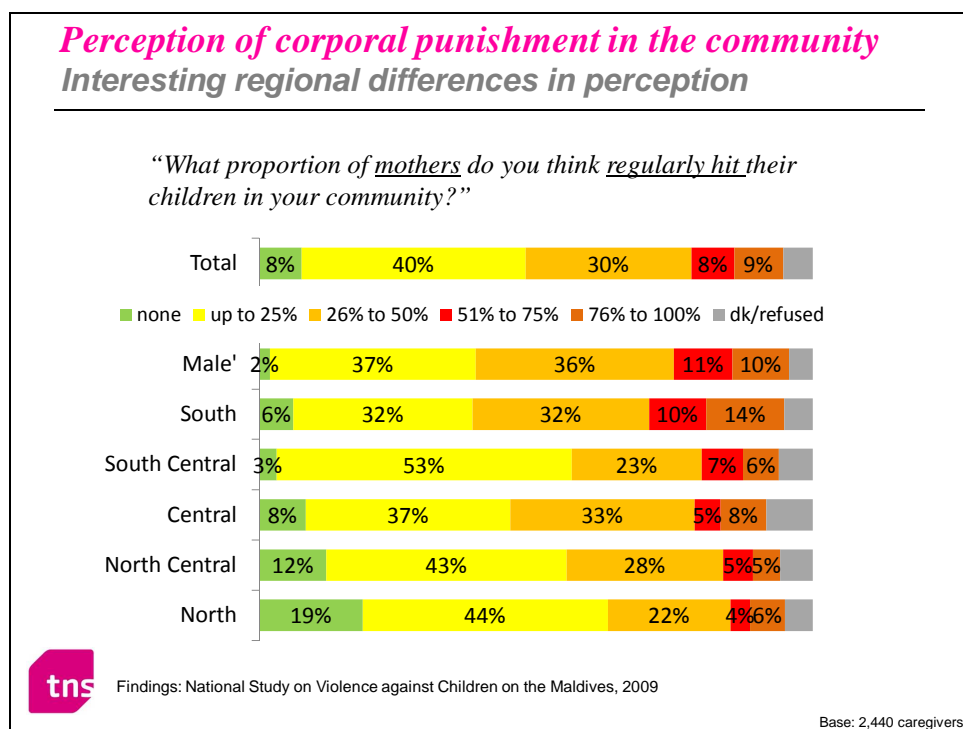


Figure 41: Perception of existences of physical punishment in the community

To get a better understanding of how parents deal with the victimization of children in domestic conflicts, the caregivers were also asked if they suspect or know that a child was hurt by its caregivers so that it needed medical attention. It is interesting to see that the percentage of caregivers suspecting such severe child abuse is reasonably low, while knowing this for a fact is much higher. In total roughly 8% of the caregivers know of such a case. However, considering the particularities of the Maldives and the underlying cluster sample design, it is possible that in some instances in small locations the same case was mentioned by more than one care-

giver. Therefore, this number cannot be used as a measure of prevalence but rather as one of awareness of severe physical punishment.

All respondents, who have suspected or known such a case were then asked with whom they talked about this. Almost 40% of respondents indicated that they did not talk about this with anybody, roughly the same amount only talked about this with friends and family. Only a minority has informed the police or other authorities.

Being asked why they did not inform any authority, the respective respondents indicated that they did not want to cause trouble, do not believe in the system or that reporting would not change anything.

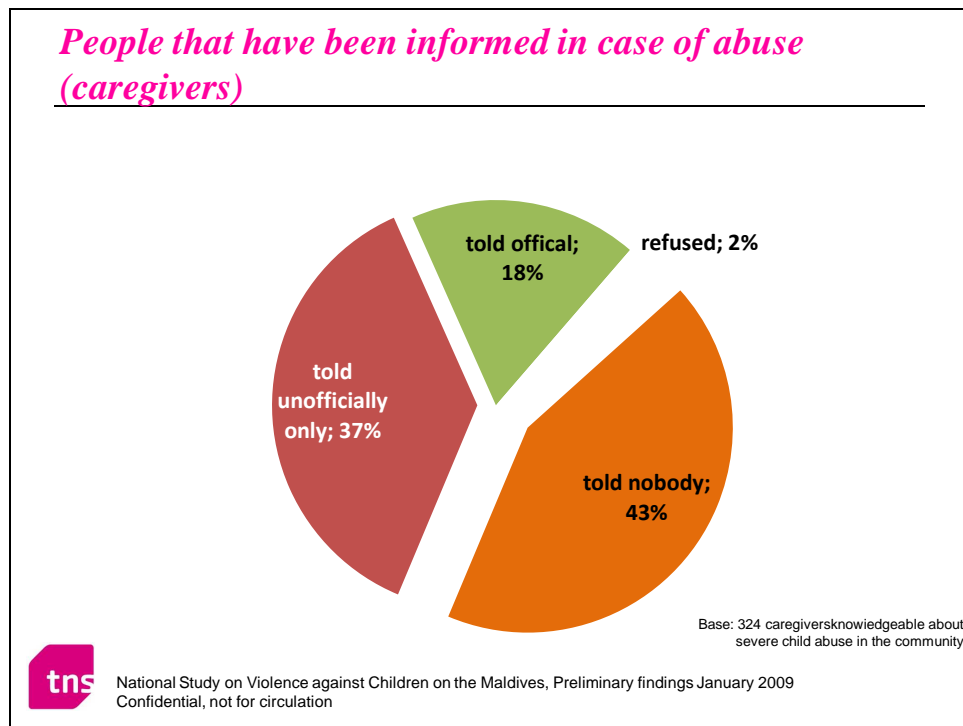


Figure 42: People that have been informed when abuse became known to caregivers

The findings of this question shed an interesting light on how caregivers would react on abuse. While the data asked for a case in the community, reactions if such a severe victimization would happen at home might be different. However, this data shows that there is only a limited open discussion about violence and that abuse at home is treated mostly as a private matter. Considering that parents are the first to be informed about severe forms of abuse from their children improving their reaction is key to the working of a child protection system. It is indeed mostly a lack of trust in the system and the feeling to not want to cause any trouble that prevents witnesses to inform the officials. The findings from the qualitative survey support this as the main obstacle for getting in touch with the social services was the perception that the process would be overly complicated and the child be prone to re-victimization.

9 The Protective Environment

For its programming purposes in Child Protection, UNICEF uses the so-called “Protective Environment” approach.

The Protective Environment (PE) is composed of 8 distinct elements that have been identified to have their impact on how children are protected. As an overall summary of all three elements of the study (desk research, qualitative research and quantitative baseline research), an evaluation of the status of the different elements of the Maldivian Protective Environment will be described.



9.1 Legislation

Overall, two main laws govern the issue of physical, psychological and sexual abuse. While the law prohibits any kind of physical punishment at school, the portion regarding home is prone to loopholes: clear definitions of which physical injuries or behaviours that may be detrimental to the health of the child are missing in the law and are therefore subject to discussion and decision finding in the court.

Indeed on November 20, 2008 Attorney General Dhiyana Saeed also underlined that at this stage full legal protection is not currently given to protect the rights of children¹⁸.

Regarding the law on sexual misconduct, the question of the consent of the child might lead to a significant underreporting of such acts due to criminal charges against the child in this case: Sexual abuse also requires a confession by the perpetrator or four witnesses. If a child over 12-years of age discloses sexual abuse, there are no witnesses and the perpetrator denies the abuse, the child may be found guilty of ‘ziney’ (sex outside marriage). The child victim may then be subjected to 100 lashes as punishment.

The main issue in the area of child sexual abuse case is therefore, the weight of the different parties and the protection of children at court.

In the same case, the banishment of perpetrators of child sexual abuse to another island was found to rather put children at the target island at risk; rather than protecting the children from such perpetrators. Should the perpetrator not be found guilty because of missing witnesses or denial of the deed, the individual will be allowed to stay on the island.

9.2 Open Discussion

The qualitative leg of this study carried out by TNS, children, who have been victims of physical, emotional or sexual violence, said that they face fears not just in terms of credibility i.e. no one believing that they were subject to violence by a family member, but also the fear of other family members being harmed as a result of exposure. Therefore, most children opted to be silent about the violence that they were subjected to.

¹⁸ http://www.minivannews.com/news_detail.php?id=5516

To most children the TNS qualitative survey was perhaps the only time they admitted them being victims and may even be the only occasion in their entire life where they admit being victimized by close family members, friends or even strangers.

However, while sexually abused children do not disclose the act, and therefore there was no public discussion of the issue, starting in May 2007 a series of several severe kinds of sexual abuse, mostly gang rape, have been reported in the Maldivian media and picked up by several dedicated internet blogs. The overall public discussion of violence against children is evolving. Due to the legal proceedings of doing so, victims mostly do not to disclose sexual abuse. However, a series of several severe acts of sexual abuse have found their way into the media and sparked initial awareness and discussions of the issue.

On the other side, physical, psychological abuse or sexual abuse at home have not yet been emerged in the public discussion. This is due to the fact that most violence taking place at home does not enter the public domain in any way.

9.3 Essential Services and Rehabilitation

As it could be shown in the initial parts of this report, essential services for taking care of abused children are in place. However, for them to work, a case of abuse, regardless of the location (home, school, community) must be reported, which, due to the official process and the cultural background of the Maldives poses to be a major obstacle.

The TNS qualitative survey also found that against the backdrop of the above stated socio-cultural setting the availability of informal support groups are not that prominent or significant. Openly speaking about violence and abuse was not very evident as most have accepted it as the harsh reality of daylily life. Boys rarely reached out to obtain the assistance of informal networks of support. As the quantitative results of the survey will show, most girls confine in their mothers and friends rather than reporting it to official sources.

9.4 Monitoring and Reporting

The Ministry of Gender and Family documents all cases reported to them and its follow up in a specific database. However, the consultants are not aware of any monitoring and reporting system that is available to the public.

9.5 Government Commitment

Following the elections, the new Ministers of Health, the Attorney General and the former Minister for Gender and Family issued public statements indicating their willingness and importance for addressing the issue of child abuse.

9.6 Attitudes

Overall, the data suggests a strong differentiation between the realms “home” and “school” when it comes to physical or emotional punishment. While caregivers indicated that schools need to be free of both such measures, the home is considered to be a different realm.

The quantitative study showed, that basic mindsets exist regarding the use of physical or emotional punishment. Emotional punishment, such as yelling, is considered by a significant part to be an appropriate measure in dealing with children. On the other side, physical punishment turned out to be an debated issue. Although ca. 40% turned out to be against the use of such punishment on children and the roughly the same amount to support it, in the end such atti-

tudes turned out to have only a limited impact on the actual use of such measures. At the same time, a majority of children – even victims - told the researchers that they do not see any negative effects coming out of physical punishment.

Overall, therefore, attitudes are considered to be not particularly protective as they appear to be not part of a wider belief system which is enforced by knowledge. Therefore, even protective mindsets can be easily overridden by impulses, circumstances or external effects.

Throughout the research, it also became clear that emotional or physical punishment within the home are considered to be internal affairs and something that outsiders should not and do not want to be involved with. This attitude underlines the need to build up protective attitudes directly within the caregivers and children.

9.7 Awareness of Community

Home

Overall, the awareness of the community when it comes to physical punishment – and through a series of published cases of severe sexual abuse – can be considered high. Roughly 8% of caregivers indicated that they are aware of a case of severe physical abuse in their community and in some regions the majority of them believes that at least 25% of mothers hit their children on a regular basis.

On the other side, the awareness of the community does not translate into taking action against it, both due to the fact that such issues are considered to be family affairs and also due to overall weak mindsets.

School and community

Overall, a mismatch of awareness on behalf of the caregivers was found in the areas schools and community: while the children indicated to become victimized by other children or even adults, caregivers exhibited a certain level of ignorance. However, this might be due to the fact that children do not mention such incidents at home, either because of shame or missing life skills. Therefore, raising the awareness for such incidents in these locations should be one step to improve the protective environment.

9.8 Lifeskills

Home

In case of severe victimization, children reported that their parents would be the first to be informed. Therefore, the caregiver's reaction is key if such an event is being referred to officials. However, with a lack of trust in the system and the feeling to not want to cause any trouble, might be an obstacle to report such an incident. In addition, the qualitative survey found that getting in touch with the social services and the following process was would be overly complicated, inefficient and the child would be prone to re-victimization.

As in most cases the perpetrator of both emotional and physical punishment at home is the caregiver him/herself, children are in danger that they have to deal with such experiences all by themselves. In addition, the mindset in the Maldives do not particularly sanction such behaviour, so that children might not find anybody to talk about such incidents about. Therefore, the life skills of children to deal with these problems are considered to be low.

School and community

Regarding the situation in the schools and in the community, children seem to deal with bullying and with punishment at schools mostly by themselves. This is supported by the fact that the caregiver's overall awareness of such incidents was low. Violence, it seems, is an issue that is not to be discussed with caregivers (who might themselves be perpetrators), so that even cases of the legally forbidden – and widely condemned - physical punishment at schools or other events in the communities do not reach the caregivers. Again, in this dimension, the overall life skills of children are to be considered low.

9.9 Summary: The Protective Environment

While some important elements of the protective environment are in place, specifically social protection services and to some extent also legal provisions, overall the status of the Protective Environment shows critical gaps.

Indeed, the majority of gaps seem to have their foundation in the cultural background of the Maldivian society, which does not particularly prohibit emotional or physical punishment of children. Indeed, while general attitudes regarding such behaviours exist, such are considered to have only little consequence on a behavioural level. While on the one side, there is a high awareness of the community on the issue, the evolving open discussion is hampered by the notion that such events should be solved in the home and not discussed publically.

In addition to a cultural threshold to report incidents of violence against children to official sources, in the area of sexual abuse another large obstacle is the legal system: the victim itself might turn out to be made liable for such an event and might be subjected itself to penal proceedings.

Therefore, it is recommended to start improving the Protective Environment by educating caregivers (preferably at childbirth with later intervals) and teachers about effective non-violent educational practices to build up basic protective mindsets and a minimal cultural consensus. As attitudes themselves might become corrupted without a sound foundation, such educational measures should also provide the target groups with facts about the negative effects of violence in children, to effectively reinforce protective attitudes by sound knowledge.

9.10 Recommendations

In the light of these findings, the following recommendations are being made:

While the legal system has established legal proceedings to deal with sexual abuse, there are critical loopholes that might rather protect the perpetrator in court than the child: it should be considered to give the child's testimony more weight in court proceedings rather than keeping the current practice that requires the perpetrator to plead as guilty (or the summoning of four witnesses) to get to a punishment.

The strengths and weaknesses of the current follow-up system in case of child victimization should be identified when it comes to child abuse at home, at school and in the community: As the study showed, parents do not necessarily inform official sources when it comes to severe child abuse. Besides cultural beliefs to stay out of other families' affairs, it is a distrust in the system and the perceived benefits of such a report became apparent. The workings and efficiency of the follow-up system should, if appropriate, also be communicated to the public to contribute to a greater trust.

Especially emotional punishment (mostly scolding and threatening to hit the child) takes over an important role early on for children from age 3 on. The negative effects of such punish-

ment should be explored and discussed publicly and efficient alternatives and role models shown.

Shaking small children below the age of three has been found to be at a critical level of 5% incidence just in the last reported month. Especially young women were found to have done this, so that young parents should be informed before childbirth of this behaviour's extremely harmful effects.

Caregivers and family members should be informed through a communications campaign about the harmful effects of both emotional and physical punishment. While protective mindsets already exist, these need to be reinforced by knowledge and facts on these issues to efficiently shape behaviour.

It is also deemed to be efficient to offer short parenting courses on effective child education measures following childbirth. At this stage of life, parents are grateful for tips on parenting so that information provided there is believed to be consumed and effectively used. Such a training course could also forge a bond between parents in communities and could therefore lead to a "community of practice".

A Communications Campaign and Open Discussion should be initiated to explicitly addressing the issue of sexual abuse. Due to the high prevalence in children age 14-17 this behaviour should be discussed publically to raise more awareness for its happening and its widespread negative effects on the child.

It is imperative to remind teachers of the strict legal prohibition of physical punishment at school and enforce such laws on the school level. While teachers might be aware of this ban, ca. 30% of teachers were found by another study to have undergone only little training. Therefore, it would be recommended to train teachers specifically in forms of non-violent punishment to show efficient alternatives. As it seems that physical punishment is dependent on the culture of the school and the mindset of teachers, it is furthermore recommended to initiate a project to establish codes of conduct on the school level that are agreed by all staff and put into effect.

Annex

Setup and Methodological background

For the qualitative leg a set of Focus Group Discussions, In Depth Interviews and Key Informant Interviews were conducted. Focus Group Discussions are a good way of exploring the broader issues connected with violence, for example, how violence is perceived, how violence affects and what forms of violence exist. This kind of research is especially valuable with a homogenous group of respondents, e.g. children of roughly the same age, parents, teachers, etc to distil the essential messages and attitudes. It has also proven worthwhile in some cases to let mixed groups consisting of teachers and parents discuss about the role of violence at school. However, in this case it is important that a level of anonymity of the respondents is still guaranteed (so that if controversies on this very sensitive arise, the children would not suffer from snide remarks or different grades from the teacher, because he disagrees with his/her parents view as uttered in the FGD).

With other groups, like police, headmasters, social service and hospital staff and researchers, Key Informant Interviews were used to explore the issue from their point of view.

When actual victims of violence at home or at school should be researched to get more insights about this issue, in depth interviews can provide very deep insights and case studies.

For these qualitative interviews, special semi-structured topic guides were developed specially for each of the different target groups. This is especially important for the research of the children, as the instruments need to be tailored to cognitive development of the different groups of children and adolescents.

For the quantitative household interviews, a structured questionnaire was developed based on the findings of the qualitative phase and face to face interviews to be conducted. In this phase, interviewers contacted the target household (details on the procedure see in “*Sampling*”) and selected a parent by random to give details about the household, forms of (non) violent upbringing of the children prevalent in the household, witnessing violence against children at school and within the community as well as own experiences with violence when being a child (“recall”).

Interviewer Training

This study was conducted exclusively by specifically recruited interviewers from the Maldives. Although some of them had experience in doing moderation or group moderation, for most of them this study was the first one to conduct interviews for a research project. Therefore, a full curriculum was devised to train the project staff in taking over different roles in the survey. For both stages of the survey, a senior field manager from TNS India was established during the field phase as a resource person in the Maldives and the project team. The teams from TNS Vietnam and Sri Lanka also offered extensive backstopping.

Qualitative training

In the course of one week (February 24-28, 2008) the field personnel was trained by a representative from TNS Sri Lanka to:

- get an understanding of the recruitment process

- gain an understanding on how identify and recruit the most eligible respondents
- get an introduction to the ethical and safety recommendations in conducting field work

More specifically, the moderators (“interviewers”) were trained to:

- cultivate an appreciation for the art of moderating.
- develop the ability to conduct interviews and discussions successfully.
- understand the ethical and safety guidelines conducting discussions.
- process of the recruitment of respondents.

The note takers were furthermore trained to:

- capture exact phrases and statements made by participants. The consideration here was that the note taking should not interfere with the discussion.

Quantitative Training

After the formulation of Terms of References for the personnel for the quantitative leg of the study, the training of the interviewers was conducted from July 20 to July 25, 2008 by the Lead Consultant.

Themes within the training were:

- Background of the survey, its rationale and an overview of the different survey tools used (half day).
- Overview of skills needed during interviews, including research ethics (half day)
- Explanation of each question in the questionnaires and the overall interview flow. Quality control measures (1½ day).
- Training interviews in which the survey personnel was divided several into groups of interviewers and respondents (2½ days).
- Specialized training for Quality Control Team and Supervisors (½ day).
- Conduction of 3 pilot interviews per interviewer on the island Hulhumale’ and the discussion of issues during those interviews (½ day).

Ethical and Safety measures

Due to the sensitivity of the topic, it was important to eliminate any fears or ambiguous aspects of the survey and to clarify the objectives and the nature of the survey for the respondents as well as caregivers to willingly attend the same.

The safety of the respondents and the research team was paramount, and guided all project decisions.

If the focus of the survey i.e. violence against children, became known – either within a household or among the wider community – a perpetrator may have found out about the purpose of the interview. For children experiencing violence, the mere act of participating in a survey may provoke further violence, or place the respondents or the survey team at risk. Therefore, the survey was not introduced to the household and wider community as a survey on violence. Instead the study was framed in a different manner – such as a study on “understanding children’s growth and behaviour patterns”. Hence, the field recruitment team carried the introductory letter about the survey at all points and provided copies to concerned parties.

The venue / location of the qualitative discussions took place in a completely “private setting” safe from any one over hearing, disturbing or eavesdropping. Prior experience suggested that community centers, youth clubs, sports centers and schools provide to be suitable venues for the focus group discussions.

The quantitative household interviews were conducted with only the respondent present; the interviewers were trained on how to deal with interferences from other members of the household and how to ensure privacy.

Likewise, the interviewers were trained in how to conduct the classroom interviews and on how to create a private setting therein (i.e. by letting children sit wide apart or build visual barricades between bank neighbours).

Occurrences in the fieldwork and response rates

Due to lack of personnel to conduct the fieldwork, the initial idea to conduct interviews in the month of August only was discarded and it was agreed to spread it over two months. With the Holy Month of Ramadan taking place in September, fieldwork rested during this time and was resumed in October.

The single most important effect on the fieldwork were the presidential elections in the Maldives, which were conducted in two rounds and which required interviewer staff to get back to their home islands. In addition to these administrative issues, political tensions in the population leading up to the elections also left their mark on the effectiveness of the fieldwork. Instead of the envisaged 2 months of fieldwork one month more was needed to obtain the envisaged number of interviews.

As the interviewers presented the target persons with credentials from both UNICEF and the Ministry of Gender and Family, and the avoidance of any words indicating “violence” or “abuse” in the name of the survey, overall a very high response rate of 97% calculated on the number of valid households could be obtained.

Figure 43: Response rates household survey

Number of households visited by interviewers		2,830	
Neutral / no target household	Address does not exist anymore	12	
	Address exists, but building is empty	112	
	Address exists, but building does not exist anymore	13	
	No household living at address (i.e.business address or office)	3	
	Foreigners living at address	15	
	No child below 18 living there	150	
	No adult lives there	1	
	Caregiver of children is a child	3	
<i>Subtotal</i>		309	
Valid target households		2,521	100%
Refusals	Caregiver of children refuses to take part	16	1%
	Household head refuses to take part on behalf of family	3	0%
	Refused (other)	8	0%
	Interview partly successful, but respondent refused rest	5	0%
	<i>Subtotal</i>	32	1%

No interview possible	Nobody home at time of contact (tried 3 times)	14	1%
	No adult at time of contact (tried 3 times)	4	0%
	Caregiver of children was away at time of contact	2	0%
	Caregiver of children does not have time now (tried 3 times)	5	0%
	Household gone for holiday	1	0%
	Caregiver lives somewhere else	2	0%
	Caregiver cannot read	3	0%
	Due to health problems (eye), caregiver could not answer	3	0%
	Caregiver of children is absent for duration of interviewer's stay on island	15	1%
	<i>Subtotal</i>	49	2%
Successful	Interview completed	2,440	97%
Net response rate: 97%			
Gross response rate: 86%			

Considering the very good quality of address material used and the overall low refusal rate of 1%, the findings can be considered to be representative for all caregivers of children living in the Maldives.

On the other side, the school survey suffered from a number of setbacks in the field. Despite a letter of endorsement from the Ministry of Education and the fact that all schools were informed in advance about the survey, when the interviewers arrived at the schools, 2 selected grades were busy with exams, so that the interviews could not be conducted. At the same time, one school on a separate island could not be visited due to logistical obstacles.

While interviewers made every effort to replace such grades and those with a significantly less number of students than expected with similar grades, this did not always succeed, due to the small size of schools on the one hand and the high logistical and monetary effort to use schools in other locations that have not been originally considered to be part of the sample.

As with every survey, participation was voluntary. While the participation of households was exceptionally high, significant problems were encountered with especially male students, who did not want to take part in the survey themselves or as a wish from their parents. Although interviewers were trained specifically to take care of these cases, only in a few cases interviewers succeeded in persuading parents or children to take part. This resulted, as it could be seen in the final dataset, in a significant skew of the data to the female students, so that the Gender proportion in Secondary Schools was not 48% boys to 52% girls as official estimates suggest, but rather 40% boys : 60% girls.

For these reasons, the final number of interviews envisaged could not be reached. However, considering the cost and effort put into this component, the research team decided to use data and findings from this part of the study to be able to give children a voice. As the number of interviews is below expectations, all findings should be considered as approximations, not as stable findings.

Limitations of the study

It became clear from the raw data obtained classroom surveys that only 40% of the respondents were boys and 60% girls. Further requests for information revealed a higher percentage of refusals of boys than of girls. Considering that official data on the age and gender distribution on the school level was not available at the time of writing this report, the school data was weighted based on the universe of children going to Higher or Lower Secondary school on either the Atolls and Male'. Although most findings for the schools are being reported split by gender, an additional gender weight was introduced based on the estimated gender parity index of Secondary Schools in the Maldives (1 boy : 1.07 girls). In lieu of official data on the school grade level, this approach was used to obtain balanced data on the national and regional level.

Furthermore, the school survey suffered from a number of setbacks as described in the chapter "Occurrences in the fieldwork and response rates", such as adverse weather, elections, local holidays and exams, that lead to a number of non-responding schools, grades or students. In total, ca. 20% of the envisaged interviews could not be obtained, which rendered the envisaged weighting and data analysis strategy on the six regions impossible. However, to be able to use the data obtained, all analyses were agreed to be conducted on the regional level (Male' vs Atoll) and on the type of school (Higher Secondary vs. Lower Secondary).

It can be seen in Figure 44 the age distribution is problematic as the target audience of school going children age 13-17 years was exceeded to a large part on behalf of older students. Indeed it seems that not only Higher Secondary Schools, but also Lower Secondary Schools in the Maldives are also visited by a significant part of adults age 18 or older (12%): the island secondary schools they are bound to have older students as they do not often get the opportunity to have higher education opportunities and are retained in the school until they get such an opportunity.

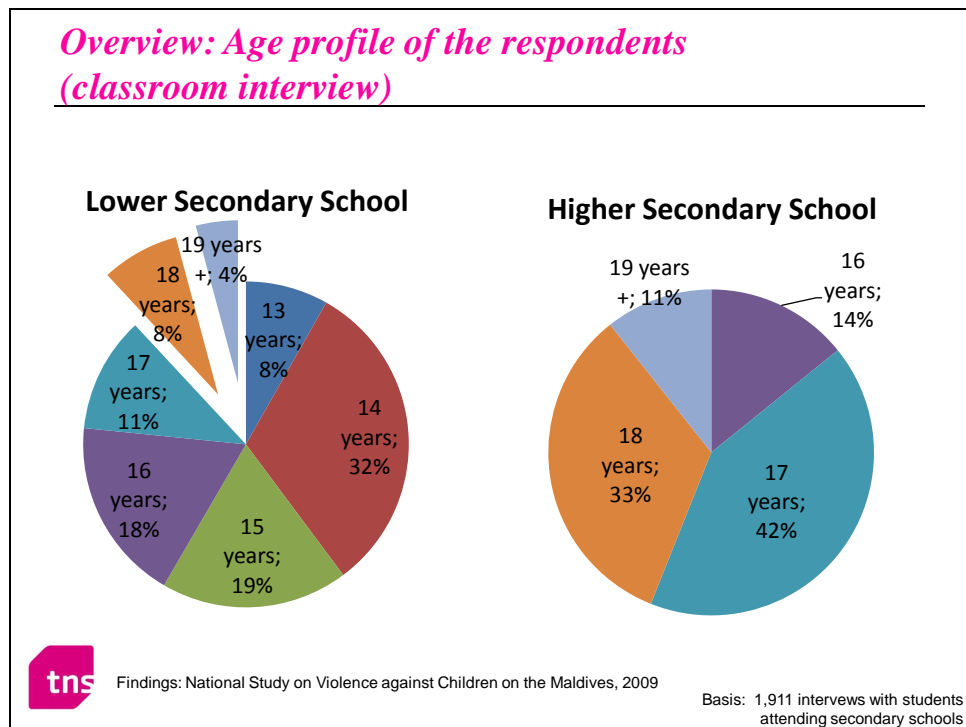


Figure 44: Age distribution of students attending secondary school

In addition a very low population of children age 13 were found to be attending grade 8, the first grade of Lower Secondary School. Therefore, information from adults going to secondary school needed to be discarded for the analysis of “violence at home” and “violence in communities”, while they have been left in to get an overview of the situation at schools. In addition, the low population of 13 year old children also prevents the study to be truly representative for school going children age 13-17, so that the findings represent *children attending Secondary School* rather than *children age 13 and up*.

Overall, with the weights applied and adults taken out of the analysis for some parts, the data from the school component is believed to be reasonably robust to provide general insights on the issue through the eyes of the children. However, due to the issues encountered in the field, this data should not be used as a robust basis for calculating incidence or prevalence rates or tracking success of policies. From that background, it is highly recommended to view the data from the children’s survey always with the results for the more robust household survey in the background.

The household survey appears to provide the researchers with robust data, although in no region the envisaged numbers of interviews have been reached and the realized number of interviews was drastically low in one region, South Central.

Item Nonresponse

A number of children participating in the survey also used item non-response and skipped some questions without giving an answer. This behaviour, however, was seen to be not random as it could be observed specifically in sensitive questions like reporting (violent) victimization experiences as in the selection of questions below:

Question	% item nonresponse
How happy are you living at home?	1%
Reaction MALE Caregiver: Talked to me and explained calmly what he did not like	8%
Reaction MALE Caregiver: Yelled at me or called me names	15%
Reaction MALE Caregiver: Hit me with his hands	15%
Reaction FEMALE Caregiver: Talked to me and explained calmly what he did not like	8%
Reaction FEMALE Caregiver: Yelled at me or called me names	13%
Reaction FEMALE Caregiver: Hit me with his hands	14%
Reaction TEACHER: Talked to me and explained calmly what she/he does not like	3%
Reaction TEACHER: Yelled at me or called me bad names	6%
Reaction TEACHER: Hit me with his/her hands	8%
How often have you argued with your teacher in the last month?	0%
Were you ever hurt at home by your primary care giver in such a way that you thought you needed to go to a hospital	2%
Were you ever hurt at school by a teacher in such a way that you thought you needed to go to a hospital?	2%
Have you ever seen pornographic material (like a video or pictures) of a Maldivian boy or girl?	3%
Did an adult ever touch you or hurt you in a sexual way when you did not want	3%

As with all cases of item non-response it is not clear, what the reasons for not marking the answer are. It might be either indicate that this answer does not apply or to evade giving an answer, or, in few cases, that the question was skipped involuntarily my mistake. A thorough analysis of these cases of non-response was inconclusive. Therefore, it was decided to list item non-response as a category in the respective questions to show this certain level of uncertainty.

Looking at the item non-response table above, though, it is notable to have achieved comparatively low rates in the most sensitive questions of the study, namely the last four questions asking for severe abuse experiences. This underlines the overall success of these questions and using such is therefore recommended for upcoming surveys.