
Ending violence against children through health systems strengthening and multisectoral approaches

Report by the Director-General

INTRODUCTION

1. The Seventy-fourth World Health Assembly, in resolution WHA74.17 (2021), urged Member States to establish interministerial coordination processes to prevent violence against children, strengthen efforts to support the implementation of evidence-based interventions consistent with the INSPIRE framework for ending violence against children, and increase the capacity of health systems to identify violence against children. It requested the Director-General to provide support to Member States through building capacity for the prevention of and response to violence against children including by developing evidence-based parenting interventions to prevent child maltreatment, assessing national violence prevention status through global status reports and supporting nationally representative surveys on violence against children. It also requested the Director-General to report on the implementation of the resolution to the Seventy-sixth World Health Assembly through the Executive Board at its 152nd session.

ACHIEVEMENTS

2. The INSPIRE framework for ending violence against children is a set of seven evidence-based strategies. Each letter of INSPIRE corresponds to a strategy: I for implementation and enforcement of laws; N for norms and values; S for safe environments; P for parent and caregiver support; I for income and economic strengthening; R for response and support services, and E for education and life skills. A major focus of WHO's work is on providing support for the implementation of the INSPIRE framework in countries and developing additional guidance and training materials for the framework as a whole and for specific strategies within it.

3. In April 2021, WHO and partners published a report¹ aimed at documenting the uptake, adoption and implementation of the INSPIRE strategies over the previous five years. The report showed extensive translation of the INSPIRE technical package, with the core document available in a total of 14 languages and the handbook available in three languages. It also showed uptake and implementation of the INSPIRE strategies in at least 67 countries.

4. Progress in implementing the resolution at the country and regional levels has been uneven. In the African Region, follow-up activities have involved the provision of technical support and training on the prevention of and response to violence against children in Côte D'Ivoire, Uganda and the United Republic

¹ INSPIRE: seven strategies for ending violence against children: uptake between 2016 and 2021. Geneva: World Health Organization; 2022 (<https://apps.who.int/iris/handle/10665/353071>, accessed 1 November 2022).

of Tanzania, and the delivery of online capacity-building webinars to 15 countries from the Region. In the Region of the Americas, support for the implementation of INSPIRE strategies at country and local levels was provided to Argentina, Colombia and Honduras. The Regional Office for the Eastern Mediterranean is planning capacity-building activities to take place in 2023. In December 2022, six countries of the European Region that have Pathfinding status in the Global Partnership to End Violence (Finland, France, Georgia, Montenegro, Romania and Sweden) will convene for a training seminar on implementation resources covering several INSPIRE strategies. In November 2021 the WHO Regional Office for the Western Pacific and the UNICEF East Asia and Pacific Regional Office convened a virtual event, the second regional conference to strengthen implementation of the INSPIRE strategies, aimed at identifying actions needed to ensure effective prevention and response to violence against children during the COVID-19 pandemic and recovery. In 2022 Cambodia published an evaluation report of its five-year action plan to prevent and respond to violence against children that assesses the implementation, efficiency and impact of the plan; Indonesia launched a national strategy on elimination of violence against children; and, as part of wider efforts in preventing violence against children, the Philippines enacted a new law increasing the age of sexual consent from 12 years to 16 years. Work in the South-East Asia Region has focused on strengthening country-level understanding and uptake of evidence-based parenting interventions to prevent child maltreatment and enhance child and adolescent development. In October 2022 the Regional Office for South-East Asia hosted a regional consultation on the topic that was attended by government officials and other partners from Bangladesh, Bhutan, India, Indonesia, Maldives, Nepal, Sri Lanka, Thailand and Timor-Leste.

5. During the virtual Leaders' Event of the Together to #ENDViolence global campaign, held on 14 June 2022, several important commitments were made. Based on national policy dialogues convened by UNICEF, WHO and the End Violence Partnership, ministerial-level statements were issued by 15 countries summarizing progress on ending violence against children and identifying key actions necessary to scale up priority programmes in line with national action plans and the INSPIRE framework.¹

6. Efforts to improve the collection of prevalence data on violence against children are continuing. WHO's violence prevention information system (Violence Info), an interactive online resource with prevalence data on all forms of violence against children, information on causes and risk factors, and information on the effectiveness of preventive interventions, was updated with new estimates for the prevalence of homicide and non-fatal violence in mid-2022. A systematic review was initiated to establish the feasibility of computing estimates for all countries of the prevalence of violence against children using the Global Burden of Disease methodology, and findings will be available in late 2022. WHO is contributing to UNICEF's development of a taxonomy of violence against children, intended to increase the comparability of definitions and measurements across countries and over time. As a joint custodian, with the United Nations Office on Drugs and Crime, of Sustainable Development Goal indicator 16.1.1 on rates of intentional homicide, WHO continues to provide estimated country-level homicide rates by age and sex for the Global Health Estimates database.

7. To increase the technical capacity of governments, partners and WHO country offices to prevent and respond to violence against children, several initiatives have been implemented. A guidance document² published in September 2021 highlights the decisions that need to be made in the selection,

¹ The countries are Armenia, Cambodia, Canada, Finland, Georgia, Guinea, Mongolia, Montenegro, Nigeria, Philippines, Romania, South Africa, Uganda, Zambia and Zimbabwe, and the statements are available at <https://www.end-violence.org/sites/default/files/2022-06/National%20Policy%20Dialogue%20%282%29.pdf> (accessed 1 November 2022).

² INSPIRE guide to adaptation and scale up. New York: INSPIRE Working Group; 2021 (<https://www.who.int/publications/m/item/inspire-guide-to-adaptation-and-scale-up>, accessed 7 November 2022).

adaptation and scaling up of interventions within the multisectoral INSPIRE approach. It provides tools for collecting and analysing the information needed to take action, and to ensure that interventions are aligned to existing evidence and are part of each country's national action plan. A free online course on the INSPIRE framework, developed jointly with the Care and Protection of Children (CPC) Learning Network and Columbia University, was launched in mid-2022. A handbook was published and used to inform the training of 50 trainers on the INSPIRE framework across all WHO regions in late 2021. A guide for solutions-based reporting about violence against children was also published, and a training course was delivered in December 2021 to some 50 journalists to develop their skills in solutions-based reporting.

8. To strengthen the capacity of health care providers in responding to child maltreatment, a clinical handbook¹ was published in August 2022. It operationalizes several WHO guidelines on health service responses to child physical, sexual and emotional abuse and neglect, and aims at empowering front-line health providers by increasing their ability to recognize signs of maltreatment and, where needed, to respond by providing a minimum level of care and protection. The handbook has been widely disseminated at regional and country levels, and is being translated into Chinese and Spanish. A guideline on parenting interventions to prevent maltreatment and enhance parent–child relationships in children aged 0–17 years is under development and recommends that evidence-based parenting interventions be made readily accessible to all parents who need them, in low-, middle- and high-income countries, including in humanitarian settings.

9. Several additional resources were developed to address emerging issues in the understanding and prevention of violence against children. These include a policy brief on the burden, consequences and preventability of online violence against children,² and a systematic review of what works to prevent such violence. In the Western Pacific Region, a consultation was held to develop practical recommendations for addressing violence against women and children in the Western Pacific Region to support Member States in their selection, implementation and monitoring of evidence-based approaches for addressing violence against women and against children at policy, service and community levels.³

10. In 2021, work was initiated to develop a framework centred on social determinants of health to support implementation of the INSPIRE strategies. Negative social determinants of health are well-established root causes of poor and inequitable health outcomes including violence against children, which is most prevalent in the poorest communities of societies with high social and economic inequalities. Broad social determinants that affect health and social outcomes include income and social protection; education; employment and job security; food and water security; housing, basic amenities and the environment; early childhood development; social inclusion and non-discrimination; structural conflict; strong and fair judicial systems; and affordable access to quality health services and health literacy. While many of these factors have been associated with violence against children, evidence on effective social determinants-based approaches to preventing violence against children and the legislative and policy frameworks that support them is not well understood. The proposed project addresses this gap, aiming to support countries in the implementation of the INSPIRE strategies by

¹ Responding to child maltreatment: a clinical handbook for health professionals. Geneva: World Health Organization, 2022 (<https://apps.who.int/iris/handle/10665/361272>, accessed 1 November 2022).

² Violence against children online: What health systems and health care providers can do. Geneva: World Health Organization, 2022 (<https://www.who.int/publications/m/item/violence-against-children-online>, accessed 4 November 2022).

³ Meeting report Informal consultation to develop practical recommendations for addressing violence against women and children. Geneva: World Health Organization, 2022 (<https://apps.who.int/iris/bitstream/handle/10665/341175/RS-2020-GE-01-virtual-eng.pdf?sequence=1&isAllowed=y>, accessed 4 November 2022).

setting out a policy and legal framework, grounded in an approach that focuses on the social determinants of health.

11. WHO played a leading role in the establishment of the Global Initiative to Support Parents to prevent child maltreatment and optimize child development. This multi-agency consortium aims to ensure that all parents and caregivers have access to quality, evidence-based parenting support interventions according to their needs by the year 2027. The mission of the Global Initiative is to transform national investment in evidence-based parenting interventions for preventing child maltreatment and improving child health and well-being through targeted assistance and international advocacy. Activities to date have included regional convenings of Member States, other entities of the United Nations system and relevant civil society organizations in the African Region (June 2022), the Americas, South-East Asia and Western Pacific regions (October 2022), and the Eastern Mediterranean Region (planned for January 2023). Instead of a convening, the WHO Regional Office for Europe is preparing a report that maps national activities to advance the uptake of evidence-based parenting interventions. Each regional convening and the report of the European Region will serve as a springboard for subsequent national level efforts to scale up support for parenting interventions. Lessons learned from the regional convenings are expected to feed into a global meeting on parenting, proposed for mid-2023, that will be led jointly by WHO and UNICEF.

ACTION BY THE EXECUTIVE BOARD

12. The Executive Board is invited to note this report and, in its discussions, to consider the following questions.

- At country level, what are the main challenges to and opportunities for scaling up health sector involvement in preventing and responding to violence against children?
- What can WHO do to better integrate the recognition of and response to child maltreatment into routine health service provision?
- How can WHO best support Member States to ensure multisectoral coordination for the prevention of violence against children with sectors such as education, social welfare and finance?

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