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Children's Perceptions of Violence: The Nature, Extent, and Impact of their Experiences

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Janis Carroll-Lind

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ABSTRACT

Perceptions of increased rates of violence worldwide have heightened the need to understand what children think about their experiences as victims or witnesses of violence. Few studies have examined violence from the viewpoint of children. The purpose of this study was to examine children's perceptions of the prevalence, incidence, and impact of violence experienced or witnessed by them and to explore the factors that might mitigate and reduce its impact. A national survey of New Zealand children, aged 9 to 13 years, with a representative sample of 2,077 children from 28 randomly selected schools of various sizes, geographic areas and socioeconomic neighbourhoods was undertaken. A questionnaire was developed for children to report the nature and extent of physical, sexual and emotional violence (including bullying) experienced within their main contexts (home and school). To assess the impact of this violence, as well as children's perceptions of school, their coping experiences, and the extent to which they used violence in their own interpersonal relationships, analyses of data comprised frequencies, bivariate correlations, *t*-tests, and multiple regressions. Results showed high prevalence rates of physical, emotional, and sexual violence. Comparison of the three types of violence revealed emotional violence to be the most prevalent form of violence and as having more impact on children than physical violence. Sexual violence had the most overall impact. Witnessing violence was more prevalent and, except for sexual victimisation, also had greater impact than direct violence. All types of violence involving adults were rated higher than violence involving children. The study also examined the ethical considerations and philosophy underpinning research that involves children. Guided by Article 12 of the United Nations Convention on the Rights of the Child, the results support the controversial ethical decision to adopt a passive consent procedure. The study demonstrated children's competence to express the ways in which violence has affected them. Conclusions are that effective development of policy and provision should be based on data that reflects children's perceptions of the violence in the context of their own lives.

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Finally I wish to end with a postscript from one of the research participants who wrote: *"Hope something gets done about the violence."* I hope something gets done about it too.

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CHAPTER ONE
INTRODUCTION

Perceptions of increased rates of violence worldwide, whether it occurs at home, in a war zone, or even via television images, have heightened the need to understand how children think and feel about their experiences as victims or as witnesses of violence (Garbarino, Dubrow, Kostelny, & Pardno, 1992; Jaffe, Hurley, & Wolfe, 1990; Leavitt & Fox, 1993). The World Health Organisation (2002) defines violence as:

> The intentional use of physical force or power, threatened or actual, against oneself, another person or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation.

Violence against children is a serious problem (Lowenthal, 2001; Osofsky, 1999, Perry, 2005). Children are more prone to victimisation than adults (Finkelhor, 1995; Hartless, Ditton, Nair, & Phillips, 1995). They suffer many of the same crimes that adults do, but also experience forms of violence that can be unique to children because of their dependency status (Finkelhor & Dziuba-Leatherman, 1994b). With home and school being focal environments for children, two important and relevant areas of research are children's experiences of violence in these settings.

Prevalence of Children's Experiences of Violence

While the international literature indicates that violence is on the increase (Finkelhor, Ormrod, Turner, & Hamby; 2005; Grossman, 2004; Lowenthal, 2001; Reiss, Richters, Radke-Yarrow, & Scharff, 1993), some studies report mixed findings over time (Smith, 2003). Statistics of actual prevalence and incidence rates are ambiguous and difficult to interpret because of the differences among countries in how they are researched and reported (Smith, 2003; UNICEF, 2003; Wolfe, Crooks, Lee, McIntytre-Smith, & Jaffe, 2003). Children are exposed to violence in their families, in their communities, in their schools and in the media. The extent varies according to the different types of violence (Osofsky, 1999) and to the definitions and samples used. For

example, acutely stressful situations, chronic adversity and indirect violence are often researched together (Wolfe et al., 2003). These types of mixed samples raise the issue of multiple risk factors for some children. For example, if children experience domestic violence, the likelihood is increased that they will also be exposed to other types of violence as well (Osofsky, 1999; Wolfe et al., 2003). In the United States, 3.3 million children witness serious spousal violence and 3 million children are estimated to be physically abused by their parents (Osofsky, 1999).

Relatively few studies in New Zealand have reported on children's experiences of violent and traumatic events (Atwool, 2000; Church, 2003; Dobbs, 2005; Fergusson, 1998; Maxwell, 1994; Maxwell & Carroll-Lind, 1996). Between 5-7 in every 1,000 children are reported as being abused in this country (Ministry of Social Development, 2002) and New Zealand's level of child maltreatment deaths are six times higher than the average for the countries with the highest rates of abuse (UNICEF, 2003). As with other countries, the incidence and prevalence rates of child abuse and violence in New Zealand must be interpreted with caution, because of methodological flaws or differences in reporting. The Church Report (2003) outlined factors that affect prevalence estimates (e.g., many crimes against children are not reported) and therefore it is more likely that the rates have been under rather than over estimated. The advocacy group *Action for Children and Youth Aotearoa* (ACYA, 2003) noted that since 1997 there has been little reduction in the rates of violence and abuse against New Zealand children. Although increased incidence has been most noticeable since the 1970s, it is only in the last two decades that social, political and public awareness have been raised about these issues (Fergusson, 1998).

International and New Zealand studies confirm that another type of violence, bullying, is pervasive in schools and affects a large number of students (Maharaj, Tie, & Ryba, 2000; Smith, 2003). Similar to family and community violence, there are varying perceptions among countries as to whether their rates of school violence are increasing (Smith, 2003). One of the difficulties in obtaining accurate prevalence rates for school violence is that definitional issues mask how the terms *violence* and *bullying* are operationalised (Devine & Lawson, 2003; Smith, 2003). However, with the exception of the United States, much of the international literature (particularly in Europe) focuses on bullying rather than on violence (Devine & Lawson, 2003).

Bullying is also the dominant focus of school violence in New Zealand and studies reveal a high incidence of bullying in this country. Tyler (1999) reported that

three out of four children are bullied each year, making it likely that New Zealand children are being bullied more frequently than children from other Western countries (as cited in Maharaj et al., 2000). In addition, assaults by young people against other children have almost tripled within the last few years, along with an increase in bullying-related suspensions from school (Maharaj et al., 2000).

Reasons for the increase in violence involving children are complex. According to Ristock (1995) societal values not only condone or condemn the nature of violence in society, but also contribute to the attitudes and tensions that produce it. Thus child maltreatment is a global problem that occurs in every country and is deeply rooted in cultural, economic and social practices, with poverty and stress, along with drug and alcohol abuse reported to be the factors most associated with the abuse and neglect of children (UNICEF, 2003). As to why the victimisation of children is so common, a contributing reason may be that children cannot choose their families, where they live or the classrooms in which they are placed. Finkelhor and Dziuba-Leatherman consider, "the absence of choice over people and environments affects children's vulnerability to both intimate victimization and street crime" (1994a, p. 177).

A combination of poverty and social policies are blamed for the rise in rates of violence and child abuse in New Zealand (Blaiklock, Kiro, Belgrave, Low, Davenport, & Hassell, 2002; Kelsey, 1995). Currently one third of families with children are said to be living in poverty (ACYA, 2003; Smith, Gollop, Taylor, & Marshall, 2004). This has prompted advocacy groups to argue that the care and protection rights of abused and neglected children are not always being recognised, acknowledged or met adequately and that New Zealand has been slow to appreciate the vulnerability of children in situations of family violence and the subsequent impact of this violence on children (ACYA, 2003).

In 1994, New Zealand's Special Education Service (now called Group Special Education) warned that one in five secondary students were at risk of school failure as a result of poverty, severe behavioural problems, truancy or violence and abuse (as cited in Kelsey, 1995, p. 290). Exposure to violence is a known contributor to disordered behaviour (Bandura, 1977; Cicchetti, 1989; Ghate, 2000; Hawkins, Herrenkohl, Farrington, Brewer, Catalano, Harachi, & Cothern, 2000; Karcher, 2004; Osborne, 2004; Perry, 2004; Pryor & Woodward, 1996; Shepherd, 1996; Sobsey, 1994; Zwi & Rifkin, 1995). In line with this, more children are being identified with behavioural difficulties in New Zealand schools, as confirmed by the Education and Science Committee of the New Zealand House of Representatives (1995) and prevalence

surveys reported in the Church Report (2003). These concerns highlight the need to obtain an accurate measure of the prevalence and incidence of violence against children in order for schools to determine how to better support their students who have been exposed to violent and traumatic events.

Violent ways of behaving are usually learned, sometimes within families (Bandura, 1977, 1986), but the culture of violence is also reinforced within the wider society (Ministry of Health, 1997). For example, violent toys, entertainment violence, interactive video and computer games, television and movies, as well as "real life" violence shown in the media are likely to be the most common types of witnessed violence for most children (Levin, 1994). While prevalence rates will differ among countries (Smith, 2003), more children are being exposed to media violence than previously through the television, movies and internet, with a resulting increase in negative behaviours (Osofsky, 1999).

Currently there are little data on children's indirect experiences of violence, that is witnessing violent acts against others, whether on television or against family members, friends or strangers. Studies show, however, that children are often more distressed by what they see happening to those close to them than by their own direct experiences (Groves, 2002; Jaffe et al., 1990; Lehmann, 1997; Lynch & Cicchetti, 2002; Maxwell, 1994; Osofsky, 1995; Shepherd, 1996).

Impact of Violence on Children

International research (Finkelhor, 1995; Garbarino, 1992, 2001; Morgan & Zedner, 1992; Osofsky, 1999; Perry, 1996, 1997, 2004, 2005; Reiss, Richters, Radke-Yarrow, & Scharff, 1993; Schwatz & Hopmeyer Gorman, 2003; Wolfe, Crooks, Lee, McIntyre-Smith, & Jaffe, 2003) shows that violence experienced by children has profound effects on their development, on their relationships with others, and on their ability to function in the community, school and home environments.

Most literature about the victimisation of children includes reference to the vulnerability of children and the detrimental effect that violence often has on children's development (Wallach, 1994; Wolfe et al., 2003). Yegidis (1992) stated that the impact of violence on children is easy to describe, but difficult to explain. Violence and abuse may harm children in many ways. In particular maltreatment may adversely affect

children's physical, emotional, cognitive or social development (Garbarino, 2001; Osofsky, 1999; Wolfe et al., 2003). Except for the few young people who have some special resilience, violence may damage the adaptive development processes that children require for becoming competent adults (Hanson & Carta, 1996).

Besides the harm it does to children and families, child abuse and violence can create problems for schools (Devine & Lawson, 2003). The challenging behaviours of students involved in violence and bullying can be very difficult to manage in the school environment. Nearly half of all American teachers consider that student misbehaviour interferes substantially with their teaching (Hyman, 1997). New Zealand teachers experience similar difficulties (Education & Science Committee, 1995; Kane & Mallon, 2006), as evidenced by the increasing numbers of students who are suspended, stood down, or excluded from our schools (Glynn & Berryman, 2005; Hancock & Trainor, 2004). Furthermore, teachers feel that social issues bring a concomitant increase in their engagement of social work roles as they are "looked to resolve or attend to some of society's problems in addition to educating their students" (Kane & Mallon, 2006, p. 128). Lashlie (2002) wrote:

> In terms of the education system, many teachers feel under siege and consider themselves overworked and under-appreciated as they continue to grapple with the changing demands of their role. They struggle with the degree to which they have become quasi-social workers and with the fact that for some children, being in the classroom is more about being safe from abuse for a few hours each day than it is about learning. (p. 145)

Moderating Factors

What protective factors are able to mediate the impact of violence or help children cope with its aftermath? Can schools make a difference? Research on school climate indicates that schools can be a powerful protective buffer for students whose feelings of safety have been undermined (Gaffney, Higgins, McCormack, & Taylor, 2004; Yoneyama & Rigby, 2006). Conversely schools can also exacerbate and perpetuate the harm done to children (Howing, Wodarski, Kurtz, & Gaudin, 1993). For example, while it is now generally accepted that the ethos and culture of schools can play an important role in supporting children who have been exposed to violent and traumatic events, a

growing body of literature reports that bullying by pupils and teachers continues to undermine the safety of some New Zealand children (Adair, 1999; Adair, Dixon, Moore, & Sutherland, 2000; Barwick & Gray, 2001; Browne & Carroll-Lind, 2006; Carroll-Lind & Kearney, 2004; Maxwell & Carroll-Lind, 1997a; Raskauskas, Carroll-Lind, & Kearney, 2005, in press; Sullivan, 2000).

In a New Zealand report *Safe Students in Safe Schools,* the Education Review Office (2000) stated:

> The educational and social development of students at school is closely linked to their physical and emotional safety. Students cannot learn effectively if they are physically or verbally abused, victims of violence or bullying, or if their school surroundings are unsafe. (p. 1)

School environments, therefore may be pivotal in understanding and managing children's experiences of violent and traumatic events. How children cope with their experiences may moderate the effects of those events. Children's perceptions of their school environment and their views of the reactions of others in the aftermath of violent and traumatic events may help to inform school practice so that applications of this information thereby improve the cultures and ethos of schools.

Looking beyond the school environment, the New Zealand government's *Agenda for Children* plan (2002) also called for action to reduce violence in children's lives. Responding to violence, however, requires knowledge of the prevalence and incidence of violence, how children report their reactions to violence, and the responses that are likely to be most effective in checking it. These unresolved issues and the need to find out more led to the aims of this study.

The Perceptions of Children

Much has been written about children and violence, but less has been written from the viewpoint of children. Most of the research on violence and children is centred on statistics from official sources. In New Zealand these statistics are often obtained from the statutory agency for children, Child, Youth and Family (CYF) or from the Ministry of Social Development. Family violence is probably under-reported, both to the police and to helping agencies (Finkelhor & Dziuba-Leatherman, 1994a). In New Zealand

there is no mandatory or legal obligation for people who work with children (e.g., teachers and doctors) to report child abuse so cases may be unreported. When it is reported, it is usually recorded in terms of the number of incidences. More often police records focus on men's violence towards women, therefore the number of children involved in family violence may be masked, as it is seldom recorded statistically (Maxwell, 1994). Reported cases can also be masked because they often involve more than one form of abuse. For example, an aggressor might yell, curse or threaten before physically attacking the child, and sexual and emotional abuse is often combined when the child is threatened not to inform others about the abuse because harm will come to the child or other family members (Lowenthal, 2001). Furthermore, adults typically represent children (such as in court hearings) in the belief that children can seldom be trusted to present accurate reports of their realities (Reiss, Richters, Radke-Yarrow, & Scharff, 1993).

New Zealand is not alone in the absence of children from official statistics on violence, but it highlights the history of childhood and society's marginalisation of children and strengthens the need to quantify the incidence and prevalence of children's experiences (Maxwell, 1994; Qvortrup, 1997, 2000). Although New Zealand's late Commissioner for Children, Laurie O'Reilly (1996), stressed that what children say should be listened to carefully, perspectives on children and violence in this country are usually obtained from families and organisations that represent children. As Lansdown (1994) stated, "we do not have a culture of listening to children" (p. 37). Crowley (1992) argued that the concept of rights in relation to children is more an aspiration rather than a reality. Young people, because of their age and immaturity, are often treated as incapable of rational judgement in describing violence.

There is increasing recognition internationally of the value of research that examines the direct experience and perceptions of children (Lloyd-Smith & Tarr, 2000). The meanings that children attach to their experiences are not necessarily those shared by adults because their conceptions are informed by the impact that these events have on them rather than on legislation or research (Lloyd-Smith & Tarr, 2000; Maxwell & Carroll-Lind, 1998). As argued by Anderson, Kinsey, Loader, and Smith (1994),

> ... it is only through trying to understand young people's own views of their experiences as victims and witnesses that we can confront the problem in a way that is meaningful and acceptable to them: that is, in a manner which recognises

both the reality of those experiences and the legitimacy of their strategies for dealing with them. (p. 66)

Consideration of children's expressed experiences of violence is consistent with Article 12 of the United Nations Convention on the Rights of the Child (1989).

> States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.
>
> For this purpose, the child shall in particular be provided with the opportunity to be heard in any judicial and administrative proceedings affecting the child, either directly, or through a representative or an appropriate body, in a manner consistent with the procedural rules of national law (United Nations, 1989, p. 5).

Article 12 acknowledges that children are people who have a right to be heard and underscores the importance of children having opportunities to express their feelings and views. Yet, despite the United Nations Convention being ratified by a number of countries Article 12's statement that children's views must be taken into account does not appear to have led to the examination of children's experiences of violence in terms of children's perceptions and views.

Few studies have examined violence from the point of view of children, in terms of prevalence, incidence and impact. Therefore the purpose of the present study was to examine the prevalence, incidence and impact of the different forms of violence experienced or witnessed by children. Specifically, the study was designed to answer three main questions around children's perceptions about their experiences of violent events:

1. What is the prevalence and incidence of different types and contexts of violence?
2. How do children report the effects of violence?
3. What factors appear to mitigate and reduce the impact of violent events on children?

In 1995 a study was conducted for the Office of the Commissioner for Children (Maxwell & Carroll-Lind, 1996). The objective of that study, which involved 259

children from eight primary schools, was to explore the range and variety of experiences that children find fearful and harmful, and to describe what these experiences meant to them. The study identified different types of violence but it did not definitively determine the *prevalence* and *incidence* of violence in children's lives or the way these events were *experienced and coped with* by the children.

The present study involved a national survey of 2,077 children, aged between 9 and 13 years. In particular the study examined violence that occurs in the family (domestic violence and child abuse) and violence that takes place in the surrounding environment, for example, children's communities and schools. By identifying the patterns and duration of children's exposure to violence and children's reported feelings in response to their experiences of violence, this research sought to extend understanding about some of the protective factors that make children more resilient to violence and to enable recommendations to be made about how to create optimal environments for children. Exploring the children's perceptions of the qualities in schools that promote a culture of non-violence offered an additional purpose of the study. Specifically, the study investigated children's perceptions of how often they experienced violence, directly or indirectly, and how the violence has been and is affecting their lives. It is the hope of this researcher that the research approach adopted in the present study meets the aspirations for research involving children, as stated by Lewis (2004):

> Research with children and young people is crucial. It can advance understanding of how they develop and live their lives, it can contribute to theoretical debates, and its outcomes can impact directly and indirectly on the lives of those researched and others in similar situations. (p. 1)

Significance of the Study

This study describes the nature and extent of children's experiences of violence from the child's perspective. Unless adults listen to what children say they cannot know children's perceptions of how they experience life. Employment of the passive consent procedure facilitates the right of children to report on their own experiences with violence. This study is important because it will provide statistics on children's experiences as recipients and witnesses of violence that more accurately identify the

prevalence and incidence rates of violence involving children and the impact that violence has on them.

Organisation of Chapters

The thesis is organised into six chapters. This first chapter stated the problem situation and outlined the background to the study. It introduced the aims and purpose of the study and the research questions to be investigated. The next chapter reviews the literature and related research that informs and supports these research aims. In particular, it examines the various types of violence and their impact on children, as well as the factors known to mitigate and reduce the impact of violence, such as children's coping strategies and the culture of schools and their ability to create safer environments for children. Chapter Two also outlines the theoretical influences informing the philosophy that underpins this study. Theories that contribute to an explanation of violence and children's perceptions of their violent and traumatic experiences are examined. Chapter Three presents the methods and procedures used to conduct the research. This includes explanation of the process for selection and recruitment of the participants and clarification of the characteristics of the sample through describing the schools and the students who participated. Ethical considerations played a key part in the design of this study; therefore they are outlined in detail. Chapter Four reports the overall findings of this study by presenting the results of the data analysis, and in Chapter Five the discussion of these results takes place. The research questions are revisited in light of the implications of these findings. The findings are also critiqued within the context of the existing literature as well as in regard to issues that could be addressed through future research. The final chapter (Chapter Six) summarises and draws conclusions about the study. Recommendations are made for consideration of how to mitigate and reduce the impact of violence in order to make informed decisions about how to support children to cope with their experiences of violence.

CHAPTER TWO
REVIEW OF THE LITERATURE

A clear picture of the implications of violence against children requires better information on the kinds of acts that children are exposed to. By searching in closely related fields this review of the research literature informed the study about children's experiences of violent and traumatic experiences and how they cope and are supported in coping with those adverse experiences. A key construct was how the ethos and culture of schools can provide a protective buffer for students whose feelings of safety have been undermined.

Literature on the prevalence, incidence and impact of violence at home and at school provides a descriptive overview of the breadth of literature in this area. All of the references with respect to research into discrete forms of violence and abuse (e.g., physical, sexual, and emotional) were assembled through computer searches of key journal articles and books written since 1989 (current to 2006). Earlier examples of literature were selected as being particularly significant and seminal studies on this subject. These selected references were included because they provide background or overview information on children's experiences of violence; because they are significant works on the impacts of violence; or because they are themselves guides to related literature or projects that may lead interested parties to further sources of information. The searches included material from various disciplines, notably, education, psychology, social work, sociology, and medicine, as well as from governmental and non-governmental reports.

The chapter is divided into four parts and addresses the following topics. First, Part A sets the context by examining the nature and extent of violence against children. Introductions to the terminology and the definitional issues around violence and trauma are presented first, followed by an examination of the prevalence and incidence rates of violence for children. Part B reviews studies about the impact of violence on children. Part C explores the moderating factors considered to reduce and mitigate the impact of violent and traumatic events on children. Finally the theoretical influences informing the philosophy that underpins this study are examined in Part D.

Part A: The Nature and Extent of Violence for Children

What is the nature of violence for children? Finkelhor and Dziuba-Leatherman (1994a) grouped the victimisation of children by violence into three broad categories:

1. Pandemic, which affects most children (for example, sibling assault);
2. Acute, which affects a fractional but significant percentage (for example, physical abuse);
3. Extraordinary, which affects a very small group (for example, homicide).

Certain types of violence such as (1) assaults on children by children, including siblings; (2) smacking and other forms of corporal punishment; and (3) bullying and emotional abuse, do not often become a criminal offence (Finkelhor & Dziuba-Leatherman, 1994b). Straus (1994) commented that in many countries to hit children is legal and socially approved (children are taught to believe they deserve the strong punishment or discipline they receive), but to hit one's spouse is a crime. With their family-centred policies, Scandinavian countries have outlawed corporal punishment and the rates of violence against children in those countries are lower than other countries (Durrant, 2004; Ghate, 2000; Kiro, 2004).

The following section examines the prevalence and incidence of children's experiences of violence. The victimisation of children by violence seems extensive. Schwarz and Perry (1994) stated, "terrified helpless youngsters are too often silent witnesses or survivors of violence in homes, schools, streets and war zones all over the world" (p. 311). To ascertain the scope of the problem, research on the prevalence and incidence of violence was examined. While it is necessary to begin with definitions of violence, discrepancies in the way that countries operationalise the concept of violence should be noted at the outset. Variations in how countries define violence, and methodological as well as definitional issues make it difficult to draw conclusions regarding the prevalence and incidence of violence.

Definitions of Violence

Violence is typically defined by adult conceptions of violence. A lack of consensus regarding the various definitions of violence and usage of terms has contributed to confusion. Terms like *abuse* and *maltreatment*, are often used

interchangeably. The World Health Organisation (1996, 2002) was purposely broad (Krauss, 2005; Smith, 2003) in its definition of violence as:

> The intentional use of physical force or power, threatened or actual, against oneself, another person or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation.

Other definitions describe the nature of the violent act. Olweus (1999) for example stated that violence or violent behaviour is "aggressive behaviour where the actor or perpetrator uses his or her own body or an object (including a weapon) to inflict (relatively serious) injury or discomfit upon another individual" (p. 12). Seminal New Zealand work by Jane and James Ritchie defined violence as any act which harms another (Ritchie & Ritchie, 1981). Over the ensuing years Ritchie and Ritchie elaborated their definition to include threats, psychological assaults, and institutional violence (Ritchie & Ritchie, 1990, 1993). Considering violence to occur when someone is violated they stated, "a violent act is a violent act, whether intended or unintended, whether conscious or unconscious, whether direct or hidden, whether physical or psychological... Not all coercive acts are violent – for example, bribery – but all violent acts are coercive" (1990, p. 7). A later definition by Ritchie and Ritchie described the nature of violence as being:

> Any action which harms another when it is inflicted by a person or by social rules or practices which harm people. It is often physical, sometimes not, sometimes horrific, dramatic and attention grabbing but more often slow, insidious, constant and hidden (Ritchie & Ritchie, 2002, p. 8).

These definitions imply that violence occurs when someone harms, using power to induce another person to do, or submit to, something against their wishes which violates the victim's rights through the use of fear, force, intimidation and manipulation (Hilton-Jones, 1994; Ministry of Health, 1997; Ritchie & Ritchie, 1993). The New Zealand Domestic Violence Act (1995) includes a groundbreaking definition of violent acts. Violence constitutes: physical abuse; sexual abuse; and psychological [emotional] abuse, which includes but is not limited to intimidation; harassment; damage to property and threats of physical violence, sexual abuse or psychological abuse. The Domestic Violence Act (1995) definition was innovative at the time because child witnessing of

violence was also implicated as a violent act against children. Section 3 of the Domestic Violence Act stated that:

> Violence occurs against a child if a person causes or allows the child to see or hear the physical, sexual or psychological abuse of a person with whom the child has a domestic relationship, or puts the child or allows the child to be put, at real risk of seeing or hearing that abuse occurring.

A number of studies identify definitional issues around terminology, with the terms *violence* and *abuse* often used synonymously, as seen in the New Zealand Domestic Violence Act. This situation has remained unchanged since Straus and Gelles (1986) first highlighted the difficulty that most definitions do not detail the severity of violence required for an act to be considered abuse and the term abuse covers other forms of abuse as well as violence. In addition, the general term *maltreatment* is commonly used in the international literature, and refers to all types of abuse and neglect (Amaya-Jackson, Socolar, Hunter, Runyan, & Colindres, 2000; Cicchetti, 1989; Groves, 1997; Lowenthal, 2001). Maltreatment is defined in American legislation as "the physical or mental injury, sexual abuse, negligent treatment of a child or maltreatment of a child under the age of 18 years by a person who is responsible for the child's welfare under circumstances which indicate that the child's health or welfare is harmed or threatened hereby" (Lowenthal, 2001, p. 1). Researchers tend to divide maltreatment in to two categories: (1) parental acts of omission (neglect) and (2) parental acts of commission (emotional and physical abuse).

Similarly most definitions in the literature consider *child abuse* to mean the harming of children, whether physically, emotionally, sexually or by neglect as seen in Section Two of the New Zealand Children and Young Persons Amendment Act (1994) which describes child abuse as the harming (whether physically, emotionally, or sexually), ill treatment, abuse, neglect or deprivation of any child or young person.

The terms *violence* and *abuse*, in particular, constitute an exploitation of power, however, direct and indirect forms of violence and abuse are also described in the literature as *traumatic events*, together with other overpowering events that constitute trauma (Atwool, 2000; Garbarino, 2001). Three elements are required for an event to be considered traumatic. The event must be experienced as (1) extremely negative; (2) uncontrollable; and (3) sudden (Carlson, 2000). There are a number of definitions used to describe *trauma* but they all share the common theme that trauma is "an

overwhelming event or series of events which render the individual helpless" (Atwool, 2000, p. 56).

Although violence and abuse constitute trauma, trauma does not necessarily constitute violence and abuse, so the present study also makes no distinction between violence and abuse. As explained in New Zealand's Statement of Policy (NZ Government, 1995) family violence encompasses physical abuse, sexual abuse, and psychological or emotional abuse, therefore the focus of the present study was on those three forms of violence rather than neglect or deprivation.

Physical Violence

Sattler (1998) defined physical abuse as inflicting injuries by hitting, kicking, pinching, choking, shaking, burning, and cutting, that is, hurting an individual in a physical way. The operational definition of physical abuse in the United States is the infliction of physical injury as a result of punching, beating, kicking, biting, burning, shaking or otherwise harming a child. The parent or caregiver may not have intended to hurt the child and the injury may have resulted from over-discipline or physical punishment (American Office of Child Abuse and Neglect, 2000) (OCAN). New Zealand's statutory child protection agency, Child, Youth and Family (CYF) (2001) described physical abuse as any act that results in inflicted injury to a child or young person. It may include but is not restricted to: bruises and welts; cuts and abrasions; fractures and sprains; abdominal injuries; head injuries; injuries to internal organs; strangulation and suffocation; poisoning; burns and scalds. Whether these injuries are deliberately inflicted or the unintentional outcome of rage, the result for the child or young person is physical abuse (Children's Commissioner & UNICEF, 2004, p. 20; CYF, 2001, p. 8).

Sexual Violence

Nunnelley and Fields (1999) stated that sexual abuse occurs when an adult uses a child for sexual gratification, or permits someone else who is an adult to use a child for sexual gratification. However, any unwanted sexual contact, or intrusive sexual behaviour can constitute sexual abuse (Simcock, 2000). In the United States sexual abuse is the employment, use, persuasion, inducement, enticement, or coercion of any child to engage in, or assist any other person to engage in, any sexually explicit conduct

or simulation of such conduct for the purpose of producing a visual depiction of such conduct. Sexual abuse can include fondling a child's genitals, intercourse, incest, rape, sodomy, exhibitionism, and commercial exploitation through prostitution or the production of pornographic materials (OCAN, 2000).

In New Zealand, Child, Youth and Family (2001) described sexual violence as any act or acts that result in the sexual exploitation of a child or young person, whether consensual or not. Sexual violence can involve a variety of both contact and non-contact behaviours. It may include, but is not restricted to: (1) non-contact abuse (exhibitionism, voyeurism, suggestive behaviours or comments, exposure to pornographic material); (2) contact abuse (touching breasts, genital/anal fondling, masturbation, oral sex, object, finger or penile penetration of the anus or vagina, encouraging the child to perform such acts on the perpetrator; and (3) involving the child or young person in activities for the purposes of pornography or prostitution (Children's Commissioner & UNICEF, 2004, p. 20; CYF, 2001, pp. 8-9).

Emotional Violence

Emotional violence or abuse is being shamed, put down, ridiculed, yelled or laughed at by someone in a position of authority (Simcock, 2000). New Zealand's Child, Youth and Family (2001) defined emotional or psychological abuse as any act or omission that results in impaired psychological, social, intellectual and/or emotional functioning and development of a child or young person. It may include, but is not restricted to: (1) rejection, isolation, or oppression; (2) deprivation of affection or cognitive stimulation; (3) inappropriate or continued criticism, threats, humiliation, accusations, expectations, of, or towards, the child or young person; (4) exposure to family violence; (5) corruption of the child or young person through exposure to, or involvement in, illegal, or antisocial activities; (6) the negative impact of the mental or emotional condition of the parent or caregiver; and (7) the negative impact of substance abuse by anyone living in the same residence as the child or young person (CYF, 2001, p. 9; Children's Commissioner & UNICEF, 2004, p. 20).

In the United States the operational definition for emotional abuse (psychological/verbal abuse/mental injury) includes acts or omissions by the parents or other caregivers that have caused, or could cause, serious behavioral, cognitive, emotional, or mental disorders. Serious emotional abuse against a child might be the

confinement of a child in a dark closet and less severe acts could include habitual scapegoating, belittling, or rejecting treatment (OCAN, 2000).

Some researchers prefer to use the term *psychological abuse* rather than *emotional abuse* because they consider psychological abuse to be more wide-ranging in describing the affective, behavioural and cognitive effects of this type of violence (Lowenthal, 2001). The present study, however, uses the term *emotional violence* to describe all forms of verbal and psychological violence and abuse.

A major form of emotional violence or abuse, particularly within the school context, is bullying (Geffner, Loring, & Young, 2001). Bullying is often defined in the literature as deliberately harmful behaviour, repeated over a period of time, by a person or group, who target a less powerful person as the victim. The hurtful actions can be (1) physical, such as hitting and punching; (2) verbal assaults, for example, teasing, taunting, threatening and name-calling; or (3) indirect, such as psychological exclusion from friendship groups or spreading rumours (Demaray & Malecki, 2003; Olweus, 2001; Smith & Ahmad, 1990). Bullying occurs when one child consistently targets another for negative treatment and the victim feels powerless to stop the interaction (Olweus, 2001). Another term used to describe school bullying is peer victimisation, which has been described as repeated exposure to negative actions by one or more peers (Holt & Keyes, 2004), causing discomfort and involving a power imbalance between the aggressor and victim (Espelage & Swearer, 2003; Solberg & Olweus, 2003). A relatively new form of peer victimisation is called *relational aggression* because it involves psychological exclusion and manipulation and damage of peer relationships (Coleman & Byrd, 2003; Crick & Grotpeter, 1995; Crick & Nelson, 2002).

Teasing is a common and problematic event in the lives of some children (Lightner, Bollmer, Harris, Milich, & Scambler, 2000). Teasing is difficult to define because the intent of the teaser and the interpretation by the one targeted has to be taken into account. Adults and children may perceive teasing differently but indications are that childhood teasing is overtly hurtful and the more hostile and negative aspects of teasing can be classified as a form of bullying (Lightner et al., 2000).

There is a consensus among researchers (e.g., Crick & Grotpeter, 1995; Espelage & Swearer, 2004; Olweus, 2001; Raskauskas, 2005; Smith, 2003; Sullivan, 2000b) that bullying is a deliberate misuse of power that makes the victim feel afraid and uncomfortable. Bullying causes harm, whatever form it takes, whether it be physical abuse, standover tactics or less obvious behaviours such as text bullying, gossip,

suggestive comments, practical jokes, name calling, humiliation, or exclusion from groups and games (Darlow, 2005).

Finally, there are definitional issues between countries over how the terms bullying and school violence are operationalised (Devine & Lawson, 2003; Smith, 2003). In many countries, including New Zealand, bullying is viewed as school violence. Except for the United States, severe school violence is rare in most parts of the world (Devine & Lawson, 2003; Grossman, 2004). Consequently researchers tend to only describe bullying when writing about school violence in their countries. The notable exception to this is the USA where distinctions are made between bullying and school violence (e.g., Devine & Lawson, 2003; Grossman, 2004). Inconsistencies in reporting make comparing international research findings problematic.

Family and School Violence

The discussion of definitions has focused on the concept of violence and the different forms it may take (physical, sexual, and emotional). The present study examined children's experiences of violence in their homes and schools. According to Child, Youth and Family (2001), family violence represents:

> A serious abuse of power within family, trust or dependency relationships. It undermines the basic rights of people who, because of their gender, age, disability or dependence, are most vulnerable to abuse. Family violence is a serious social and criminal problem that can result in the death or disablement of its victims. It can involve killing or physical and sexual assault. It also involves other forms of abusive behaviour, such as emotional abuse, financial deprivation and exploitation, and neglect. Family violence often remains a hidden problem that has long-lasting effects on its victims. The main victims are women, children and older people. The abuse and neglect of children and young people by their parents or caregivers is family violence. The exposure of children and young people to other forms of family violence is also abusive and may have long-lasting and negative effects. (p. 7)

CYF's (2001) definition details the nature of family violence. This description broadly encompasses any members of a given family (e.g., the elderly) and includes all forms of familial abuse. By including individual, social, economic, political, and

institutional factors, Furlong, Morrison, Chung, Bates, and Morrison (1997) offered an ecological perspective on school violence by situating children within a system or network of social and environmental relationships. Furlong and colleagues defined school violence to be:

> A public health and safety condition that often results from individual, social, economic, political, and institutional disregard for basic human needs. It includes physical and nonphysical harm which causes damage, pain, injury, or fear, and it disrupts the school environment and results in the debilitation of personal development which may lead to hopelessness and helplessness. (p. 246)

Summary of the Literature on Definitions

There are definitional issues related to the concept of violence. While some studies separate violence from abuse (e.g., Devine & Lawson, 2003), more often than not these terms are used interchangeably within the research literature so it would be impractical to only cite studies on violence and ignore the research on abuse. Furthermore, definitions of violence in the literature have been widened to include aspects of emotional violence and bullying (e.g., Furlong et al., 1997; Ritchie & Ritchie, 1993, 2002; WHO, 2002), with bullying mostly being the preferred term for describing emotional violence in schools.

Prevalence and Incidence of Violence

Children are more prone to victimisation than adults (Finkelhor, 1995; Hartless, Ditton, Nair, & Phillips, 1995). They are also "more sinned against than sinners" (Hartless et al., 1995) because they are more likely to become victims of violence than they are to commit violence against others (Anderson, Kinsey, Loader, & Smith, 1994; Maung, 1995; Zwi & Rifkin, 1995).

It is not easy to provide definitive prevalence and incidence rates for violence against children. Many cases are unreported and the reported cases often involve more than one form of abuse (Lowenthal, 2001; Osofsky, 1999; Wolfe et al., 2003). The variability that exists in countries with mandatory reporting versus voluntary reporting further confounds efforts to compare incidence (Hiatt, Miyoshi, Fryer, Miyoshi, & Krugman, 1998). Studies on prevalence and incidence use dissimilar methodologies in terms of samples, data collection methods, and operational definitions (see Smith,

2003). Estimates are further complicated when some studies report prevalence but not incidence or vice versa (Ghate, 2000).

Baldry (2003) reported that 2.5 million of 8 to 15-year-old Italian children have experienced some form of interparental violence. Existing information on prevalence rates (number of reported cases) of child abuse in the United States shows a rise of approximately 10% per year since 1976. With about two million cases reported annually (Grossman, 2004) violence against children is now considered a "national emergency" (U.S. Advisory Board on Child Abuse & Neglect, 1991, as cited in Lowenthal, 2001) or a "public health epidemic" (Groves, 1997; Osofsky, 1999; Perry, 2005). Perry (2004) stated that each year, approximately five million American children experience some form of traumatic experience, with more than two million of those children being victimised by physical or sexual abuse. A comprehensive, national study by Finkelhor, Ormrod, Turner, and Hamby (2005) surveyed children's experiences of major forms of offences against children, plus other non-violent victimisations. Findings showed high rates of victimisation, with only 29% of children reporting no direct or indirect victimisation. Furthermore the mean number of victimisations for children in this nationally representative study was three. Children who reported one victimisation during a single year had a 69% chance of experiencing another victimisation event. Perry (2004) found that by 18 years of age one in four children in the United States will have directly experienced interpersonal or community violence.

A parallel pattern for prevalence rates seems to be happening in New Zealand. Currently New Zealand has the third highest rate of child homicide deaths in the Organisation for Economic Cooperation and Development (OECD) (UNICEF, 2003). Research by Children, Young Persons and their Families Service (CYPFS) in the 1990s found that out of the approximate 950,000 families living in New Zealand at that time, 385,000 families (approximately one third) were potentially at risk (Department of Social Welfare, 1997). Neglect was the most common type of abuse reported. From 1996 to 1997, CYPFS recorded 12,201 assessments of child abuse. One in five (22%) of the confirmed cases of abuse or neglect also included emotional abuse. Twenty one percent involved behaviour or relationship difficulties; 9% involved emotional abuse; 1% self harm or suicide; 16% included cases of neglect; 13% physical abuse and 11% were cases of sexual abuse.

A few years later (for the 2001 year), Statistics New Zealand recorded a substantiated abuse rate of 5.5 children for every 1,000 children younger than 17. While

these rates are lower than the previous three years (7 in every 1,000 children) this may be more a result of making changes to the recording system rather than a change in prevalence rates for abuse (Ministry of Social Development, 2002). Apparent increases may also be more a result of a growing awareness and recognition about violence than actual increases in prevalence rates. Nevertheless the prevalence and incidence rates of violence against children in New Zealand are of concern and justify further study.

The previous section provided a general overview of the prevalence and incidence of violence and abuse. This next section reviews studies that focus specifically on the prevalence and incidence of discrete forms of violence, namely physical, sexual and emotional violence.

Physical Violence

Physical violence tends to receive the most attention in the media. Beginning with earlier studies, the British Crime Survey conducted in 1992 with 12 to 15-year-olds' experiences as victims found that one third of those surveyed reported that they had been assaulted at least once in the last 6 to 8 months. Children aged 12 to 13 years were particularly vulnerable to harassment and assault at school, many of which were not reported to adults (Maung, 1995).

Anderson, Kinsey, Loader, and Smith (1994) surveyed 1,000 Scottish students, aged 11 to 15 years, and also found that few young people had reported the victimisation in their lives. The survey, conducted in schools, focused on victimisation both at school and in the community and described the impact of victimisation, analysed the barriers to reporting victimisation and offered suggestions for prevention. According to the results, half of the students surveyed had been the victims of crime in the previous nine months.

A more recent American study (Finkelhor et al., 2005) found that over one half (530 per 1,000) of the children surveyed reported experiencing a physical assault in the year of data collection. Homes can be the most dangerous place for children. Hyman (1997) reported that of the 2.9 million children abused or neglected in the United States in 1992, 91% had been victimised by family members.

Physical violence in the home has also been noted in this country and research by Colmar Brunton (1995) revealed a tacit acceptance of physical punishment of children. In that survey 16% of New Zealanders admitted to physically abusing their children;

7% of New Zealanders agreed or strongly agreed, "as long as a child is not hospitalised, physical punishment is okay", and 6% of New Zealanders agreed or strongly agreed, "there are certain circumstances when it is alright for a parent to thrash a child".

Although the introduction of the 1995 Domestic Violence Act may have increased awareness about the need to report domestic violence involving adults, the same recognition is not accorded to children. Parents are usually exempted from assault charges against children, because Section 59 of the Crimes Act (1961) allows the defence of using "reasonable force". Section 59 states "every parent or person in place of a parent of a child is justified in using force by way of correction towards a child if that force is reasonable in the circumstances". Although the Crimes Act defines assault as violence by the use of force to get one's own way, conversely the act of striking a child is not considered to be a crime when performed by a parent (Ritchie & Ritchie, 1993; Smith, Gollop, Taylor, & Marshall, 2004).

While the majority of participants (78%) in Fergusson's (1998) longitudinal study reported that their parents only occasionally used physical punishment, a small minority (4%) experienced violent methods of punishment. Indeed, the earlier Colmar Brunton (1995) study indicated that 4% of homicides could be linked to child abuse. Other statistics from that period showed that in New Zealand's then population of 3.6 million people, approximately eight or nine children would die each year from child abuse (Maxwell & Carroll-Lind, 1998). Consistent with these figures, Doolan (2004) reported that 91 children, under the age of 14, died as a result of maltreatment between 1991 and 2000, with CYF (2006) reports showing that of those children 38 died between 1998 and 2003.

In both international and national studies, associations have been found between violence towards women and violence towards children. If mothers in a family are at risk, so are their children (Jaffe et al, 1990; Ministry of Health, 1997; Perry, 1996). Although often unreported, New Zealand Police estimate that up to 80% of all physical violence in this country is domestic related (Maxwell, 1994).

Sexual Violence

First it should be noted that there are conflicting prevalence rates for sexual violence in the literature because studies report a range of sexual violations, from unwanted sexual comments or touching, non-contact abuse such as indecent exposure,

to repeated rape and sexual assault. As previously mentioned it is also difficult to obtain accurate rates for other types of violence as well but the definitional issues tend to be more pronounced with sexual violence. Researchers consider sexual abuse to be the most under-reported form of child maltreatment because of the secrecy or "conspiracy of silence" that often characterise such cases (OCAN, 2000).

The United States National Centre on Addiction and Substance Abuse (2003) estimated that 12% of American high school girls have been sexually abused. Another comprehensive national survey found that one in 12 children (82 per 1,000) experienced some form of sexual victimisation (Finkelhor et al., 2005). These figures contrast with earlier estimates, in which the US national incidence of child sexual abuse ranged from 0.7 to 1.4 per 1,000 children, but with only 2-5% of victims reporting their sexual abuse (Feindler & Becker, 1994).

Findings from New Zealand studies suggest that the number of women who have been sexually abused as a child range from 9% to 16%. The most commonly cited figure for sexual abuse of boys is 9% (Lapsley, 1993). Other studies (e.g., Fergusson, 1998; Young, Morris, Cameron, & Haslett, 1997) report different levels of prevalence. Fergusson (1998) estimated that in any class of 30 16-year-old girls, one or two would have been exposed to sexual violence involving attempts at sexual penetration. The New Zealand Ministry of Health (1997) cites two studies on sexual abuse. In Tarrant and Scanlen's 1995 survey, 21% of all the students who chose to answer this question said that they had been forced to have sex (as cited in Ministry of Health, [MoH], 1997). Young, Morris, Cameron, and Haslett's (1997) study of 5,000 15-year-olds found that 26% of the females and 16% of the males reported that they had experienced sexual violence. The participants who experienced multiple forms of sexual violence were more likely to have been victimised at a young age.

During her evaluation of New Zealand's *Keeping Ourselves Safe* Health Curriculum programme Briggs (2002) found that 4.3% of the total sample of 252 children reported sexual abuse by babysitters. Thirty-three children detailed the frequency of abuse by people known to them. These children reported that 31% of the sexual violence happened at home and 25% at school. For 6 children the abuse was frequent, and in 16 cases there was one offence. However only 47% of the reported offences were passed on to a child protection agency. Fergusson (1998) also found that the perpetrators of sexual abuse are most likely to be non-nuclear family members who

are known to the child, for example, family friends and other relations within the extended family.

The longitudinal *Christchurch Health and Development Study* reported data consistent with the view that childhood sexual abuse is not an uncommon experience for a number of New Zealand children (Fergusson, 1998). The results of this study found that 17% of females and 3.4% of males reported experiences of sexual violence. When the data were analysed according to severity of abuse it was found that 6% of the girls and 1% of the boys reported severe sexual assaults involving sexual penetration (Fergusson, 1998). This Christchurch study (Fergusson, 1998) found sexual abuse by natural parents to be very uncommon and supports Lapsley's (1993) assertion that in cases of sexual abuse by parent figures or household members, stepfathers are five times more likely to be perpetrators than biological fathers. Girls are more likely than boys to be abused within the family (Lapsley, 1993).

Emotional Violence

The paucity of studies involving emotional abuse suggest that this form of violence is underestimated and unappreciated yet according to OCAN (2000) emotional abuse is almost always present when other forms of child maltreatment are identified. Studies to date have focused on the impact of sexual abuse, physical abuse and neglect, with less attention on the broader spectrum of victimisation such as emotional violence (Finkelhor, 1995; Ghate, 2000; Lightner et al., 2000). Although research has begun to emerge on other aspects of victimisation in recent years, further studies are required to unravel the links between physical violence and other forms of violence. For example, while it is likely that most, if not all children who have been physically abused have also been emotionally abused, researchers currently lack the means to measure the overlap between physical and emotional abuse in a precise way (Ghate, 2000).

As family violence produces an environment of multiple stresses and difficulties it is generally understood that children living in violent homes are more susceptible to abuse themselves (Perry, 1997, 2005; Weis, Marusza, & Fine, 1998). Children suffer emotional abuse when they become the convenient target for being blamed or are manipulated by their parents to take sides. They may be constantly living in a climate of fear for the next conflict or assault, as well as the fear of injury to their caregiver and themselves (Weis et al., 1998).

Osofsky (1999) reported that children from violent homes are abused and neglected at a rate 15 times higher than the national average. In one study of abusive families Groves (1997) recorded that 50-60% of children who were abused experienced more than one form of maltreatment. Child protection agencies in New Zealand also recognise that multiple abuse types may be present, particularly in disadvantaged or dysfunctional families. According to Child, Youth and Family (2001) this is especially so for emotional abuse which is a component of all abuse types. Others (e.g., Shepherd, 1996) have also reported that when abuse or neglect is found in families most cases would also include emotional abuse. For this reason CYF consider it more appropriate to assume that emotional abuse is present in all types of violence rather than isolating it from different types of abuse (CYF, 2001).

Bullying

Another form of emotional violence is bullying. This type of emotional abuse is usually reported in the literature on school violence and demonstrates a growing recognition that bullying remains a pervasive problem facing schools today and needs to be addressed (Ahmad, Whitney, & Smith, 1991; Orpinas, Horne, & Staniszewski, 2003; Rodkin & Hodges, 2003).

Of relevance to the present study is the fact that researchers consider intermediate school (middle or junior high) to be the peak time for bullying and peer victimisation (Bond, Carlin, Thomas, Rubin, & Patton, 2001). Espelage and Swearer (2003) and Nansel and colleagues (2001) report that typically there is an increase in bullying in early adolescence and then a decrease during the secondary school years.

Research into the phenomenon of bullying began in the 1970s with a seminal study by Olweus (1972), and set the scene for subsequent studies that extended his work (Ahmad, Whitney, & Smith, 1991; Besag, 1989; Olweus, 1992, 1993; Smith, 1994; Smith & Ahmad, 1990; Whitney & Smith, 1993). In 1992, building on his earlier research, Olweus conducted a nationwide survey of over 140,000 junior and senior high school pupils from 8 to 16 years. This Norwegian study on the incidence of bullying became the reference point for subsequent research in this area. Olweus found that 15% of children self reported their own involvement in bullying, with 9% to 10% involved as victims and 5% to 6% percent as bullies. Similarly, a British study (Smith, 1994; Whitney & Smith, 1993) found that up to a quarter of primary school students reported

experiences of bullying. Approximately 1 in every 10 cases involved persistent bullying. Whitney and Smith's (1993) survey also found that girls are equally likely to be victims of bullying but only half as likely to be involved as bullies. Boys mostly tended to be bullied by other boys; however, girls were bullied by both sexes. The findings from this survey also showed that boys are more involved in physical types of bullying, whereas girls engage in more verbal and indirect forms of bullying. While also identifying a gender difference in the types of bullying engaged in, Atlas and Pepler (1998) further identified that boys and girls engage in bullying at the same rate, which suggests there is no gender difference in the prevalence of bullying.

Although there is consensus that bullying occurs in schools worldwide, various studies have yielded different prevalence rates. Studies across several countries (Australia, Canada, Europe, Japan, and the United States) indicate that bullying affects between 7% and 35% of students (Smith, Morita, Junger-Tas, Olweus, Catalano, & Slee, 1999). Grossman's (2004) review of the research reported higher prevalence rates of students involved in bully/victim behaviours. For example, 60% of Japanese, 75% of English and 88% of American students reported their involvement in bullying, being bullied or witnessing bullying. The percentage of American children who only reported being victimised by bullying was 77%, compared to Australia (17%), Canada (15%), Greece (30%), and UK students (41% to 75%, where studies reported differing rates).

An Italian study (Baldry, 2003) that used a self-report anonymous questionnaire involving 1,050 students aged between 8 and 15 years, investigated the relationship between bullying and victimisation in school and exposure to interparental violence. In this study almost half of all boys and girls reported different types of bullying and victimisation within a three-month period, with boys more involved than girls in bullying others. An interesting finding from this study is that exposure to family violence was significantly associated with bullying and victimisation in school, even after controlling for direct child abuse.

Early New Zealand studies mirror these international trends. Kearney (1993) surveyed 300 pupils, aged 9 years and over, from primary, intermediate and secondary schools within one provincial city. She found that half of the children reported being either physically or emotionally bullied two to four times a year. Ten percent of the students said that they had been bullied at least once a week. Cram, Doherty, and Pocock's (1995) major survey of nearly 1,000 students from primary, intermediate, and secondary schools in South Auckland showed 76% of children reported being bullied

and a similar percentage reported witnessing bullying. Approximately 1 in 10 children reported that they were bullied several times a week during the school term. The frequency of bullying was highest for boys and among those aged 7 to 12 years.

Further studies confirm high levels of both physical and emotional bullying in New Zealand schools (Adair, Dixon, Moore, & Sutherland, 2000; Maxwell & Carroll-Lind, 1997a; Nairn & Smith, 2002, 2003). Maxwell and Carroll-Lind (1997a) found that within any given year it is likely that at least half of all school children are bullied and 10% are bullied weekly. Keenan's (1995) study found similarly high levels of both physical and emotional bullying in a New Zealand provincial secondary school. In a national adolescent health survey undertaken by the Adolescent Health Research Group at the University of Auckland (Watson et al., 2003), 38% of Year Nine students reported their schools to have a "big" problem with bullying.

A large New Zealand study by Adair and colleagues (2000) revealed that 20% to 30% of students have ongoing problems with bullying, with 75% of the 2,066 secondary students surveyed reporting they had been bullied during their time at school and 44% had bullied others. Of the sample, 58% said they had been bullied during the current year, with 11% reporting victimisation once a week or more and 8% of students reporting they had bullied others once a week or more. This study was also consistent with Whitney and Smith's (1993) findings about gender related bullying.

In summary, studies reveal a high incidence of bullying in New Zealand compared to other countries (Ministry of Education, 2003). Tyler (1999) reported that three out of four children are bullied each year, making the likelihood of New Zealand children being bullied higher than that of children from other Western countries (as cited in Maharaj et al., 2000). Furthermore assaults by young people have almost tripled within the last few years, along with bullying-related suspensions from school (Maharaj et al., 2000).

Witnessing Family Violence

Since Lorion and Saltzman (1993) recommended that concern must be directed beyond the direct victims of violence (to include those indirectly affected because they have witnessed such events or because such events have occurred to members of their immediate or extended families), more studies have examined the prevalence and incidence of indirect violence.

When violent acts occur at home the nature of families suggest a number of children might witness that violence (Maxwell & Carroll-Lind, 1997b; Perry, 2004). Weis, Marusza, and Fine (1998) warned that being in the presence of violence could place children in danger because either the aggressor could also turn on the children witnessing the violence, or some children get hurt in their attempts to aid the parent being victimised. In New Zealand, McKay (1994) noted that child abuse is 15 times more likely to occur in families already exposed to domestic violence (as cited in Ministry of Health, 1997). Researchers also comment that even if they do not witness the abuse children will observe the physical consequences of their parent's victimisation (Maxwell, 1994; Perry, 2004; Shepherd, 1996).

New Zealand studies vary in their prevalence rates for child witnessing of violence. The New Zealand Children and Young Persons Service (1996) considered children were present during 70% of their reported family violence incidents. Maxwell (1994) examined 1,000 family violence incidents attended by the police and found that in 62% of incidents the victims had children in their care; in 87% of these cases children were at home and usually witnessed the assault; in 19% of cases if the children were present they were also physically abused or were the principal victims of the attack; and if children witnessed the assault, 10% tried to intervene and 6% attempted to get help. Maxwell's findings confirmed an earlier Christchurch study by Church (1984) and the National Collective of Independent Women's Refuges (1991). The latter study found that 90% of children staying at a Women's Refuge had witnessed violence in the home.

Witnessing School Violence

Most children are likely to witness school violence or bullying (Adair, Dixon, Moore, & Sutherland, 2000; Sullivan, 2000b). Given the public nature of bullying, it regularly occurs in the presence of other students, but while they may provide the audience for bullying, most peers do not intervene (Adair et al., 2000; Carroll-Lind, 2002; Jeffrey, Miller, & Linn, 2001).

With bullying there are no neutral observers (Sullivan, 2000b). Earlier studies found peers were present in 88% (Hoover, Oliver, & Hazler, 1992) and 85% (Atlas & Pepler, 1998) of the reported bullying incidents. Similar to other international studies (Boulton & Underwood, 1992; Pepler, Craig, Ziegler, & Charach, 1993) only 10% intervened in Atlas and Pepler's (1998) study in an attempt to stop the bullying. In

comparison 42% of bystanders in a New Zealand study (Adair, 1999) chose not to intervene. In their earlier New Zealand study of 259 Year 7 and 8 students, Maxwell and Carroll-Lind (1997a) reported that 64% watched another child being threatened, frightened or called names and 62% watched another child being ganged up on or excluded during the year under study.

Witnessing Media Violence

Friedlander (1993) remarked that although one of the key functions of parenthood is to protect and filter children's knowledge of the adult world, this is probably almost impossible given the current mass media environment. In the United States, approximately 99% of all households have at least one television, the average child views 12,000 acts of violence each year and the average pre-school child watches 3.5-4 hours of television daily (Groves, 1997). New Zealand's prevalence rates for witnessing media violence are similar. Maxwell and Carroll-Lind's earlier study (identified that 98% of children had watched violence on television, videos, or the movies, with 88% of participants reporting that they witnessed media violence within the previous nine months. Many studies note the parallel between the increase of violence and the proliferation of televisions. The effect of media violence on children is also well documented (Groves, 1997).

Summary of the Literature on Prevalence of Violence Experienced by Children

The perception that violence against children is on the increase is not without foundation. Given the divergence of prevalence and incidence rates among researchers, however, it is not possible to provide consistent estimates. This review highlights the need for future studies to differentiate between prevalence and incidence, because as suggested by Friedlander (1993) it may be that in some countries the prevalence rate is declining, but the incidence of violence is increasing.

In line with Ghate's (2000) review, the findings of this current review of the research literature, and particularly the self-report studies, indicate that the "hidden" prevalence and incidence rates of violence against children are considerable. Figures reported in the literature may underestimate the incidence and prevalence of violence. Conservative estimates suggest the figures may be two to three times the number of

abuse cases reported annually (Grossman, 2004). Furthermore, definitional and methodological problems can reduce the accuracy of these figures considerably which can also lead to under-reporting (Ghate, 2000; Lapsley, 1993). It is also clear that victims' reluctance to disclose personal information can affect the accuracy of figures reported in both research studies and crime statistics. Although under-reporting remains an issue, accurate reporting is more likely to increase rather than reduce the prevalence and incidence rates of violence against children.

Part B: Impact of Violence on Children

Studies indicate that violence experienced by children can impact on their physical, emotional, behavioural, cognitive and social functioning (Finkelhor et al., 2005; Garbarino, 1992, 2001; Groves, 1997, 2002; Perry, 2004; Jaffe, Wolfe, & Wilson, 1990; Morgan & Zedner, 1992; Wolfe et al., 2003).

Physical Impact

The most noticeable effect of violence is physical injury. Although often misclassified as accidents and frequently dismissed as a natural aspect of childhood, Finkelhor and Dziuba-Leatherman (1994a) caution that children who have suffered physical abuse can be identified by unexplained injuries or poor development. Morgan and Zedner (1992) advise that victimisation by violence may lead to severe physical problems, often manifested in poor health, particularly if children have been inflicted with a disability, recurrent illness, or permanent scarring, which becomes an enduring reminder of the victimisation. However, Morgan and Zedner also cautioned against simply assessing the impact by the physical severity of the assault, for example, age and gender of the child may matter more in relation to the effects of physical bruising and scarring.

Psychological or Emotional Impact

A number of researchers (Finkelhor & Dziuba-Leatherman, 1994b; Garbarino, 2001; Hurley & Jaffe, 1990; Lowenthal, 2001; Morgan & Zedner, 1992; Osofsky, 1999; Wolfe et al., 2003) have reported on the psychological and emotional impact of violence on children. Many agree that emotional upset and fear is the most persistent

effect of victimisation (Morgan & Zedner, 1992; Perry, 2005; Osofsky, 1999). Morgan and Zedner (1992) noted that further to their immediate physical injuries some children might suffer from a general sense of psychological distress, ranging from mild upset to severe trauma. Morgan and Zedner (1992) ascertained that the immediate psychological after-effects of violence are usually only noticed in children who were assaulted by a stranger. Therefore the more typical reactions tend to be non-specific, neurotic disorders or deterioration in the child's behaviour (Morgan & Zedner, 1992; Walker, 1993). Morgan and Zedner (1992) and Yegidis (1992) report evidence of previously happy, outgoing children becoming fearful and clingy. Yegidis (1992) found that abused children scored more negatively on measures of self-esteem, depression and behaviour problems in comparison to the control group.

In the same way that gender might influence the effects of physical impact Hurley and Jaffe (1990) suggested that gender may also affect the psychological impact of victimisation. In their view stress reactions in the aftermath of violence are experienced differently according to the child's gender. For example, boys may exhibit externalising behaviours (fighting, destruction of property) and internalising behaviours (withdrawal, anxiousness, depression) as well as deficits in social competence (school behaviour and achievement difficulties). Conversely girls tend to experience significant internalising behaviour problems related to anxiety and depression (Hurley & Jaffe, 1990).

Walker (1993) identified the two major effects of child abuse or violence to be its interference with a child's normal course of development and its destruction of a sense of well-being. These combined effects make it difficult for children to disclose abuse (Walker, 1993). According to Morgan and Zedner (1992) children's lack of understanding about the nature and meaning of violence can intensify their sense of distress. They explain how children depend on adults for their well-being and may feel deeply shaken if the presence of adults fails to prevent the violent act, such as a crime, from happening (Morgan & Zedner, 1992).

Behavioural Impact

Drawing on evidence in the literature Payne (1999) suggested that children who have experienced violence might demonstrate distorted thinking and behaviour, which in turn can have a motivational, cognitive or emotional impact on the child. According to Payne (1999, p. 111) these effects manifest themselves by: (1) feeling a pervasive

sense of having no control in one setting undermines the motivation to initiate efforts to control other situations or events (motivational); (2) difficulty in learning or trusting the success of their own responses, even when they have succeeded (cognitive); and (3) a heightened "reactiveness" to emotional circumstances, especially when fear and frustration are felt (emotional).

Others have asserted that children who cannot anticipate a meaningful future for themselves may also be unable to focus on present tasks of learning and socialisation (Garbarino et al., 1992; Terr, 1991). Having no regard for their own safety, Garbarino et al. point out that they are likely to develop defences against their fears, engage in risk taking and acting out behaviours, or become violent themselves. There is a clear association between exposure to violence or abuse and subsequent antisocial, aggressive acts (Cicchetti, 1989).

Research studies by Perry (1994, 1996, 1997) reveal that many children who were traumatised as young children seem to make satisfactory progress until they become 12 or 13 years old, when symptoms of hypersexuality, aggressive or assaultive behaviours, impulsivity, and anxiety re-emerge.

Social Impact

In addition to emotional, behavioural and academic problems, some children may have difficulties with social interaction because they feel less competent than their peers do (Cicchetti, Toth, & Lynch, 1993). Children's ability to develop and maintain interpersonal relationships during childhood and adolescence is considered to be one of the most important predictors of both their present and future adjustment, but researchers (e.g., Cicchetti, Toth, & Lynch, 1993) consider another negative consequence for children victimised by violence is the impact on their social competence.

According to Putman and Trickett (1993) these problems can submerge and re-emerge during various periods of development. For young children this may impact on later development in adolescence, an already critical period in children's lives for achieving key developmental tasks such as socialisation and independence.

Shepherd (1996) considers children who bully, intimidate, and threaten may be displaying behaviours that have been modelled at home and as result, become socially isolated because of their behaviour. Yet other children may become "pervasively

passive" and demonstrate a "learned helplessness" in their social relationships with others. By avoiding social interaction they actually increase their feelings of fear and alienation (Hurley & Jaffe, 1990; Shepherd, 1996). Schonert-Reichl (1993) indicated that deficiency of empathy skills might predispose children to poor interpersonal relationships and inhibit the development of intimate relationships, a view supported by Shepherd (1996) who noted that some children perform at much lower levels on measures of empathy than children not exposed to violence.

Cognitive Impact

Children who have experienced violence can hold inappropriate attitudes and are more likely to condone violence as a means of resolving conflict (Shepherd, 1996). Studies consistently confirm that abused children score lower on cognitive measures and may achieve less academically than their peers who have not been abused (Lowenthal, 2001; Perry, 2004, 2005). Children can experience school problems that result from their extreme impulsiveness, poor social skills or poor work habits. In general, traumatised children do show some loss of previous functioning or a slow rate of acquiring new developmental tasks (Perry, 2004, 2005). Specific cognitive functions such as memory and time can be affected also (Putman & Trickett, 1993).

In New Zealand Shepherd (1996) established that when children have to defend themselves constantly from outside or inside dangers, there is little energy left for learning. Academic problems may result when the child's schoolwork suffers due to difficulties with concentration and control. Children exposed to violence scored significantly lower on tests of mathematical and reading abilities than children from non-violent homes. Likewise their reading ages were found to be significantly lower than their chronological age, when tested for both accuracy and comprehension. However in contrast to this, some children do very well at school and become exceptional students due to extreme efforts to please their parents (Shepherd, 1996).

Long Term Impact (Post Traumatic Stress Disorder)

Research studies on Post Traumatic Stress Disorder (PTSD) have offered a unifying concept for understanding the long-term impact of violence and trauma on children (Finkelhor, 1995; Jaffe, Hurley, & Wolfe, 1990; Perry, 1994, 2004). At the extreme PTSD describes the anxiety disorder most often associated with overwhelming

life experiences (Jaffe, Hurley, & Wolfe, 1990). This label was originally associated with adult war veterans, but more recently it has been applied to victims of physical abuse, sexual abuse and exposure to community or family violence, because studies indicate that children exposed to violence can be as traumatised as children living in war zones (Finkelhor, 1995; Garbarino, 2001; Osofsky, 1999; Osofsky, Wewers, Hann, & Fick, 1993; Sautter, 1995; Schwartz & Perry, 1994). Osofsky et al. (1999) described symptoms of PTSD as a wide range of social and emotional problems such as: distress; difficulty in concentration; depression; intrusive thoughts or imagery (flashbacks, nightmares); fears of recurrence; sleep difficulties; disinterest and attention difficulties; as well as emotional and psychosomatic disturbances. Perry (2005) advised that the symptoms children develop are dependent on: whether there is a family history of psychiatric disorder (depression may often produce a negative cycle); the age at which the trauma occurred (children will respond differently according to their stage of development); the nature of the trauma (sexual abuse is known to have the most impact); and the pattern of the trauma (victims of prolonged abuse may suffer the most severe symptoms).

If six months after the traumatic incident an adult or child is still persistently anxious, behaviourally impulsive, hypervigilant, motorically hyperactive, withdrawn, or depressed; or they continue to have sleep difficulties and increased blood pressure, it may then be assumed that they are suffering from PTSD (Perry, 1994, 2005). In addition, the more life-threatening the event, the more likely the child is to develop Post Traumatic Stress Disorder. Perry (1994) stated that "the more outside the range of the normal experience and the more life-threatening the experience, the more difficult it will be for the normal mental mechanisms to work efficiently to process and master that experience" (p. 3).

Thus the work of Perry and others suggest that the more prolonged the trauma and the more pronounced the symptoms during the immediate post-traumatic period, the more likelihood of long-term chronic and potentially permanent changes in the child's emotional, behavioural, cognitive, and physiological functioning. Although specific traumatic events may have specific effects on children depending on the type of trauma, stage of development and other risk factors, there are common threads among child victims' symptoms. Children who are the victims of ongoing physical violence will suffer more pervasive harm than children who are traumatised a single time (for example, in a car accident or community violence) and are able to return to a caring,

supportive environment. The traumatic event often initiates a major disruption to the family's way of life. It usually exposes them to a variety of provocative reminders of the original event. For example, ongoing legal action, media coverage, family separation, or dissolution result in a relatively high percentage of children (45 to 60%) going on to develop Post Traumatic Stress Disorder (Perry, 1994, 2005).

Impact of Indirect Violence

Even when they are not the direct victims of violence, children's witnessing of family violence has produced significant negative outcomes for those children, according to Edleson (1999). It appears to be likely that children can often be more distressed by what they see happening to those close to them than by their own direct experiences (Jaffe et al., 1990; Maxwell, 1994; Maxwell & Carroll-Lind, 1997b). Earlier studies reviewed by Lewis, Mallough, and Webb (1989) to address the effects of witnessing family violence all found that children were affected and displayed psychological and behavioural problems, including aggression. In a later meta-analysis (Wolfe et al., 2003) 40 of the 41 studies indicated that children's exposure to domestic violence was related to emotional and behavioural problems relative to children from non-violent families. Wolfe and colleagues did caution, however, that because children who witness violence exhibit similar problems to children who have experienced direct violence, it is difficult to determine which problems are attributable to direct or indirect victimisation. The comparison of studies is further complicated by the wide degree of method variance in definitions, samples and methodology (Wolfe et al., 2003).

Two large longitudinal studies undertaken in New Zealand have documented the effects of adverse factors on various aspects of children's development. The Christchurch Health and Development Study (Fergusson, 1998) found that children who grew up in families exposed to inter-parental violence are at higher risks for conduct problems, anxiety disorders, depression, suicide attempts, substance abuse, and juvenile crimes. These families were characterised by socioeconomic disadvantage, family difficulties and greater exposure to childhood physical and sexual abuse. An important finding from this study is that "physical child abuse and family violence is often embedded in a broader social context that is characterised by multiple sources of social disadvantage, family dysfunction and parental adjustment difficulties" (Fergusson, 1998, p. 171).

Children living in violent homes obviously have potent models to imitate, according to social learning theory (Bandura, 1977; Perry, 1995). If these children also strongly identify with the aggressor, and see that they are successful in gaining power and control through violence, then they will be more likely to imitate the violence (Jaffe et al., 1990; Shepherd, 1996).

Anger may also become internalised into the child's personality structure when they see their mothers, siblings, or themselves mistreated (Wallach, 1993). Conversely boys in particular may feel anger towards their mothers. If they identify with the aggressor, they may view their mothers as being 'weak' for not being able to stop the violence. Shepherd (1996) warns that children also live in an atmosphere of unreality and confusion if the violence is downplayed or ignored by the parents. It becomes even more confusing for children if the violence alternates with some loving periods between the parents. Frequent separations from a parent may bring disruption to the child's home and school environments.

It is common for children to harbour feelings of guilt or blame, both for causing the violence and also for not being able to stop it. In the same way that some children strive to become "super children" at school they may also behave in this way at home in an attempt to make their mother's life easier or to reduce the conflict. If their mother is not coping, these children may take on adult responsibilities, such as caring for younger siblings (Hanson & Carta, 1996; Shepherd, 1996).

In the same way that children are affected by the witnessing of family violence, Jeffrey, Miller, and Linn (2001) maintain that children are also affected by the witnessing of school bullying because bullies create a climate of fear and intimidation that may affect children who witness the victimisation of peers as much as the direct victims.

According to Garbarino (2001) the more television violence that children watch the more likely they will perceive the world to be a dangerous place. Osofsky (1999) reported on studies that showed adverse effects over time on school children exposed to media violence, such that 8-year-old boys who viewed the most violent programmes during their childhood were found to be more likely to engage in aggressive, delinquent, and criminal behaviour in later years. Osofsky warned that witnessing violence in the media potentially puts children at risk of (1) social learning and modelling of inappropriate behaviours; (2) increased predisposition to violence through fictionalised and glamorised violence; and (3) desensitivity to violence.

Comparison of the Impact of Different Types of Violence on Children

James (2005) speaks for many researchers in her statement that the impact of violence is determined by how the child experiences the event rather than by the circumstances of the event itself. Accordingly, the previous discussion reviewed the physical, psychological, cognitive, behavioural, and social outcomes of violence per se. While it seems more appropriate not to examine the impact of different types of violence and abuse in isolation from each other Grossman's (2004) assertion that how children respond to the effects of abuse may depend on the type of abuse experienced is worth investigating to some extent and the following discussion examines studies that compare the impact of different types of violence and abuse.

While a number of studies have been conducted on the effects of child abuse and violence, particularly physical and sexual abuse, it is only more recently that researchers are beginning to report the outcomes of emotional abuse (Lightner et al., 2000). However, Briere and Elliot (1994) reported sexual abuse to have the most severe impact on children, both in the immediate and the long-term. In comparison to the impact of physical violence, where perhaps the combined effects of a disadvantaged childhood rather than the traumatic effects of the violence contribute to later psychosocial adjustment difficulties, Fergusson's (1998) study found that exposure to sexual abuse (especially sexual abuse involving penetration) is clearly linked to an increased risk of later mental health and adjustment problems. Studies have established that the psychological impact for child victims of sexual abuse involves feelings of guilt, fear, pain, distress, the burden of secrecy, non-specific neurotic disorders, or deterioration in behaviour (Briere & Runtz, 1993; Morgan & Zedner, 1992). According to others, this form of victimisation brings with it a sense of "intrusion" and "contamination", as well as "violation" (Morgan & Zedner, 1992; Putnam & Trickett, 1993; Yegidis, 1992). Both Morgan and Zedner (1992) and Lowenthal (2001) referred to children's damaged self-concepts and problems with relationships, through holding self-attributions of blame. For example, children may consider themselves to be responsible for a relative going to prison, or for the break-up of their family (Morgan & Zedner, 1992; Lowenthal, 2001). In her study of sexual violence against children, Yegidis (1992) found that the psychological impact was manifested in sexually abused boys by their dysfunction in behaviour and affect, for example, homophobic concerns, infantile behaviours, and fire-

lighting. Girls who had been sexually abused demonstrated self-mutilating behaviours, for example, eating disorders and body-cutting.

Determining Factors of Impact

Researchers have considered a variety of factors that could influence the level of impact experienced by children. Discussions about the effects of violence that children experience invariably include reference to the developmental consequences of violence (Cicchetti & Lynch; 1993; Finkelhor & Dziuba-Leatherman, 1994a; Finkelhor, 1995; Perry, 2002; Wolfe et al., 2003). Perry (2002) stated, "the earlier and more pervasive the abuse is, the more devastating the developmental problems for the child" (p. 89). The variety of reactions from children, including the nature and severity of the injuries resulting from the victimisation may vary according to children's stages of development. In terms of the severity of the impact, Finkelhor (1995) explained that negative developmental effects are likely to occur if the victimisation (1) is repetitive and ongoing; (2) dramatically changes the nature of the child's relationship with his or her primary support system; (3) adds to other serious stressors; or (4) interrupts a crucial developmental transition (p. 185).

Melzak (1997) contends that while psychological impact is the predominant reaction to acts of violation, the level of impact is determined by a number of factors. Melzak identified these factors as: (1) the child's age; (2) the extent of the violence; (3) the child's relationship with the perpetrator; (4) the long and short term meaning of the violence for the child; (5) the extent to which the violent event is connected with loss and change; and (6) whether or not the child generalises their understanding of the world from their violent experiences.

Morgan and Zedner (1992) consider that the seriousness of the impact is more likely to be affected by the following three factors. Firstly, the circumstances of the offence, for example, betrayal of trust by a known adult will worsen the impact. Secondly, personal characteristics and experiences of the child also play a part in the impact. The impact will be more traumatic for a child with little previous exposure to violence and will also be affected by the child's level of resilience. Thirdly, Morgan and Zedner support the findings of other researchers that the age and gender of the child is important in relation to the effects of bruising and scarring, or whether they choose to disclose their victimisation (Morgan & Zedner, 1992).

Summary of the Impact of Violence on Children

There is a convergence among researchers that exposure to violence has a damaging effect on children. However, children exhibit a range of physical and emotional reactions due to a variety of factors and the severity level of the impact is also determined by a number of factors. The more that a traumatic event disrupts their normal life the more likely it is that a person will develop PTSD.

Whether it is through direct or indirect violence, victimisation in childhood and adolescence has an impact on the children who experience this, which can lead to future disorders by "etching an often indelible signature on the individual's development" (Schwarz & Perry, 1994, p. 311). Most of the research literature is based on studies undertaken to determine the cognitive, behavioural, emotional and long-term effects of violence on children. Considered together, common indicators of victimisation include: low self-esteem; withdrawal; regressive behaviour; impaired capacity to enjoy life and school learning problems (Finkelhor & Dziuba-Leatherman, 1994b; Shore, 1997).

Part C: Moderating Factors

What factors mitigate and reduce the impact of violent and traumatic events on children? To inform the third research question for the present study, this section reviews research studies that extend understanding of those factors. Exploration of this question requires knowledge of (1) the antecedents or demographics that may predict children's exposure to violence; (2) mitigating factors and useful responses in the aftermath of violent and traumatic events; and (3) the characteristics and cultures of schools that help to build environments able to reduce the probability of negative experiences for children.

Antecedents

There is evidence to suggest that the context of poverty (rather than ethnicity) is one of the main risk factors for violence (e.g., Slee, 2003). Although violence crosses all socioeconomic sectors, Weis, Marusza, and Fine advise (1998) it is generally accepted that more people are affected in lower socioeconomic areas and that it can be intergenerational. Violence is linked to poverty and inequity because it occurs more frequently in highly concentrated areas where there is inadequate housing and income

and high rates of drug abuse (Groves, 1997; Weis et al., 1998). Slee (2003) noted a growing international concern that violence is an educational, social and political issue in that it is related to socioeconomically disadvantaged, usually urban areas, and that "the most marginalized in our society – the poor, the young, and the Indigenous – appear most at risk of victimisation" (p. 303).

Similarly a combination of poverty and policies are linked to violence and child abuse in New Zealand (Blaiklock, Kiro, Belgrave, Low, Davenport, & Hassell, 2002; Kelsey, 1995). One third of families with children are reported as living in poverty (Kelsey, 1995; Smith, Gollop, Taylor, & Marshall, 2004) and OECD statistics indicate that New Zealand has the fifth highest gap between the wealthiest and poorest families (Blaiklock, Kiro, Belgrave, Low, Davenport, & Hassell, 2002; UNICEF, 2005). In its second non-government organisations' report to the United Nations Committee on the Rights of the Child, Action for Children and Youth Aotearoa (ACYA) highlighted that 3 out of 10 New Zealand children are living in poverty. ACYA (2003) takes the view that New Zealand has created an unequal society by providing discriminatory social assistance that profoundly affects the realisation of their rights for some groups of children. Consistent with this view, Fergusson (1998) reported that physical child abuse and family violence is "embedded within a broader social context that is characterised by multiple sources of social disadvantage, family dysfunction and parental adjustment difficulties" (p. 171). Fergusson's findings from the *Christchurch Health and Development Study* also corroborate those of the *Dunedin Multidisciplinary Health and Development Study* (Pryor & Woodward, 1996) in relation to the impact of adverse environments and parenting practices on children and subsequent associations with child abuse.

Living in disadvantaged or dysfunctional families therefore increases the risk of exposure to violence. All of the risk factors associated with poverty can have an adverse impact (for example, large families, overcrowded houses, drugs, and alcohol). Harsh parenting practices can lead to further abuse. These accumulative factors all contribute to risk for children reared in such families by adding to the stressors associated with violence and abuse (Fergusson, 1998; Garbarino, 2001; Groves, 1997; Pryor & Woodward, 1996; Weiss et al., 1998).

In addition to the socioeconomic factors that place children at risk, other demographic factors also have an influence. There is evidence to suggest that age and gender may play a role in the types of violence experienced by children. Finkelhor and Dziuba-Leatherman's (1994b) examination of the literature indicated that boys are more

likely to be victims of homicide, assault and robbery, whereas girls experience more sexual violence and are at approximately double the risk of boys throughout childhood and adolescence.

For older children (adolescents) the perpetrator is usually male, and the victim is female (Lapsley, 1993), which contrasts with the abuse pattern of younger children where women are just as likely as men to be the perpetrators (Fergusson, 1998; Lapsley, 1993). Physical abuse is more commonly reported with younger children, whereas reports of sexual and psychological abuse are common with adolescent victims. Further to the earlier discussion about ethnicity, Young et al. (1997) found no link to ethnicity and the prevalence of sexual violence (as cited by the Ministry of Health, 1997).

Other antecedents may prevent children being placed at further risk. For example, there are a number of policies and laws already in place to support children. The United Nations Convention on the Rights of the Child (UNCROC), which New Zealand ratified in 1993, is important for its power to guide practice by regulating governmental changes in policy development for the betterment of children. In June 2002, the Ministry of Social Development launched its *Agenda for Children,* a government strategy aimed at improving the lives of New Zealand children (p. 6). The fourth of seven key action areas intends to address violence in children's lives, with a particular focus on reducing bullying (p. 24). A key principle of the *Agenda for Children* is that Government policies and services affecting children become consistent with UNCROC guidelines.

With its obligation to the United Nations Convention in mind, the New Zealand Government has introduced new child-focused legislation and the merits of old laws are currently under consideration for amendment. Towards the end of 2004, the New Zealand Parliament passed four new Family Law Acts (the Care of Children Act, the Civil Union Act, the Human Assisted Reproductive Technology Act, and the Status of Children Amendment Act). The Care of Children Act, 2004, is most relevant to this study. Using the term "views" to coincide with the term used in Article 12 of the 1989 Convention on the Rights of the Child, this Act goes beyond Section 13(a) of the Children, Young Persons, and Their Families Act 1989, by prioritising the rights of children to contribute and to have their views taken into account in any decision-making process – whether they expressed those views directly or indirectly through a representative (Henaghan, 2005).

A key example of an old law under investigation at this time is the 1961 Crimes Act. Currently children in New Zealand are the only people who can be legally hit (Dobbs, 2005; Dobbs & Duncan, 2004). Section 59 of the 1961 Crimes Act allows parents to use reasonable force to discipline their children. This is contrary to the United Nations Convention on the Rights of the Child and has created a wide-ranging debate of the use of physical punishment on children (Dobbs, Smith, & Taylor, 2006). As stated by Mason and Falloon (2001, p. 106) "physical punishment has historically been a legitimated part of unequal relationships, imposed by persons of authority on others subordinate to them" and its use on children has become a human rights issue. At the present time the New Zealand Parliament has been considering whether to repeal or amend Section 59 of the Crimes Act via the Crimes (Abolition of Force as a Justification for Child Discipline) Amendment Bill. A leading proponent for the repeal of Section 59 stated, "Children's vulnerability and their special needs for positive guidance and control are some of the very reasons why we should reconsider subjecting them to forms of punishment that we find unacceptable with other people" (Wood, 1998, p. 55). Wood suggests "promoting the rights of children to physical integrity challenges outdated notions of children as property and therefore improves their status" (1998, p. 55). Clark (2001) also argues that children have a moral right to bodily integrity and that their moral rights should take precedence over the legal right of parents to use physical punishment on their children. Supported by international research (Straus, 1994) proponents for the repeal of this legislation consider a number of child abuse cases in this country, that commonly occur when parents' physical punishment of their children goes too far, will be prevented with the repeal of Section 59 (ACYA, 2003; Smith et al., 2004, 2005; UNICEF, 2003; Wood, 1998). Synthesis of the research literature by Smith et al. (2004, 2005) on the discipline and guidance of children points to the long-term effects and negative outcomes for children exposed to harsh physical punishment.

Mitigating Factors and Useful Responses in the Aftermath of Violence

In recent years there has been a shift from epidemiological studies emphasising prevalence and the extent of effects of violence on children, towards a focus on the interaction of risk and protective factors that mediate the impact of violence (Wolfe et al., 2003). It is highly likely that children's coping strategies may help to reduce and mitigate the effects of violence. Informed by Kochenderfer and Ladd (2001), the term *coping* is used in the present study to refer to children's preferred response patterns (cognitive, emotional, behavioural) for dealing with their violent and traumatic events, either as it is occurring or after they have been victimised.

Hallet, Murray, and Punch (2003) explored children's perceptions of their worries and problems, their coping strategies and their help seeking behaviour. In particular they examined the ways in which children responded to their problems and how they negotiated pathways for themselves. They found children's responses to be both 'contextual' and 'contingent' (p. 136). Contextual factors involved the children's gender, their living situation and their life experiences. Their 'social status' as children impacted on structural constraints, such as their relative powerlessness in school. Various contingencies also affected their responses, for example, the nature of the problems they faced, their knowledge and perception of the role of formal agencies, the characteristics of their informal network, particularly their friends, and their perceptions of the problem-solving capacity of others. The importance of the present study is that it demonstrates the ability of children to clearly articulate and describe their experiences of both formal and informal responses to their difficulties.

A study by Mullender, Hague, Iman, Kelly, Malos, and Regan (2003) also examined the formal and informal support systems of children, but more specifically in relation to children's experiences of family violence. Those researchers found that children living, or coping with, the aftermath of family violence drew more extensively on informal than formal sources of help. Their findings indicate that when children are forced to shift house in order to escape the violence, they are likely to also lose their support networks as a result. In that study the one consistent link was the children's mother, thus highlighting the need for professionals to nurture this crucial support link if at all possible.

It appears that children can develop coping strategies that help them to survive traumatic experiences (Bear et al., 1993). Coping strategies employed by children are different from those of adults. Children find it more difficult to employ cognitive forms of coping than do adults. This may explain why children rely on parents to interpret cues and translate threatening situations and to determine the appropriate strategies to use (Bat-Zion & Levy-Shiff, 1993). Children's coping strategies need to be understood in terms of their developmental stage as coping strategies that are appropriate for adults cannot be applied to children without modifications because of their unique coping and response styles (Bat-Zion & Levy-Shiff, 1993; Osher, VanAcker, Morrison, Gable, Dwyer, & Quinn, 2004).

Others (e.g., Simpson, 1998) offer different reasons as to why children have different coping mechanisms. Simpson suggested that children experience events differently from adults because they tend to focus on different elements of the event. Therefore children's perspectives of their own feelings may differ significantly from the parents' belief as to how their children are feeling about a family situation (Simpson, 1989, as cited in Tapp & Henaghan, 2000).

Resilience

Debate is ongoing as to children's ability to develop resilience. Children's individual characteristics, early life experiences and protective factors in their physical and social environment, may contribute to their resilience (Levin, 1994; Wallach, 1993). Coie et al. (1993) consider there are two general types of protective factors: (1) the impact of negative events may be buffered by an individual's characteristics, temperament, disposition or personal skills; and (2) environmental attributes, for example, parental warmth, appropriate discipline, social support, adult monitoring and supervision, and family bonding may also serve as protective factors.

Some researchers consider that positive environment influences (i.e., "assets") in a child's environment are crucial to a child's development and ultimately their successfulness (Shapiro et al., 1996). These proponents consider that models of resiliency emphasise the mediating effect of a close confidante and support in protecting against damage from violence and abuse (Maxwell, Robertson, Thom, & Walker, 1995). Others think that too many risks in a child's life do not allow this to happen. They view resilience as an individual experience, ignoring the role of social support

(Osher, Kendziora, VanDenBerg, & Dennis, 1999). Proponents of both viewpoints agree that one caring adult can make all the difference (Arnold, 2005; Osofsky, 1999; Payne, 1999).

There is also consensus that children are vulnerable, however, the notion of resilience in the face of violent experiences warrants discussion. Currently coping research is undergoing considerable debate (Cramer, 2000; Coyne & Racioppo, 2000, Erdelyi, 2000; Folkman & Moskowitz, 2000; Lazarus, 2000; Masten, 2001; Newman, 2000). Perry et al. (1995, p. 285) consider that children are not resilient; rather they are malleable. This is in contrast to other studies on resilience that assumed resilient children were remarkable or special because of their invulnerability or invincibility (Masten, 2001). There is a growing recognition that resilience is not exceptional; instead it is an ordinary phenomenon that usually results from the operation of basic human adaptational systems (Masten, 2001). Masten (2001) explained,

> ... if those systems are protected and in good working order, development is robust even in the face of severe adversity; if these major systems are impaired, antecedent or consequent to adversity, then the risk for developmental problems is much greater, particularly if the environmental hazards are prolonged. (p. 227)

A seminal research study by Rutter (1985) compared resilience with protective mechanisms. He viewed protective factors as being more than the opposite of risk factors. The findings from Rutter's (1985, 1990) research studies indicated that protective factors probably modify a person's response to a particular risk factor. There is agreement among researchers that protective buffers for children exposed to risk include secure and supportive personal relationships, task accomplishment, and opportunities that present themselves at critical times in their lives (Rutter, 1992; Werner & Smith, 1992, as cited in Kazdin, 1994).

Studies demonstrate how children differ in the extent to which they experience events as violent or traumatic (Atwool, 2000). Furthermore, "different events at different times in the life of an individual are likely to result in a different combination of adaptive responses" because a baby, child, and adolescent experience the same event in different ways (Perry, 1995, p. 286). They often cannot verbalise what they are feeling, so it may only be through their disordered and turbulent behaviour that children indicate something is wrong. Walker (1993) advised that if adults are to understand

children's difficulties in speaking out and being heard, then it is essential for them to try to comprehend their world.

Cornille, Boroto, Barnes, and Hall (1996) consider that a child's ability to cope with a negative event hinges on three predictors: the event itself, how the child and family define the event, and the resources and supports available to help the child cope with the experience. Cognitions surrounding the attribution of blame are often explored in the research on victimisation (Finkelhor, 1995; Raskauskas, 2005). It appears that victims may cope better if they do not blame themselves. There are two views of how children apply blame attributions. Reporting on their work with therapists, Bear, Schenk, and Buckner (1993) found many therapists believe that sexually abused children must be taught that they were not to blame for the abuse. Others (e.g., Finkelhor, 1995) believe that attributing all responsibility to the perpetrator reduces children's self-efficacy. They argue that by thinking, for example, "I should have yelled", a child will develop a sense of personal agency in preventing future victimisation. Furthermore Finkelhor (1995) considers that what may matter for other children, however, is not whether they think they have the power to prevent future victimisation, but whether they think that their caregivers do. According to Finkelhor, perhaps more importantly than whether children blame themselves (internal attribution) or others for the victimisation (external attribution) is whether they think that the cause of the victimisation is constantly present across time (stable), and across situations (global). When young people view their future lives to be limited and filled with anticipation of disaster and therefore no hope for the future, they may try to gain a sense of control over their lives through repeated encounters with dangerous situations (Garbarino, 2001; Perry, 1996; Terr, 1991). For example, child victims of ongoing sexual abuse may provoke the sexual encounter in order to choose the time and setting, as their way of clawing back some control over their lives (Garbarino, 2001; Perry, 1996, 2005).

Fergusson and Horwood (2003) used data from the Christchurch Health and Development longitudinal study to explore ways in which a large amount of individual, family, peer and school factors might aid resilience. Logistic regression analyses pointed to the presence of resilience processes that mitigated the effects of exposure to adversity. Fergusson and Horwood's (2003) review of the literature identified six factors considered to enhance the development of resilience in children brought up in at-risk environments. This range of individual, family, and peer factors include

(1) intelligence and problem solving abilities; (2) gender (females may be less reactive); (3) external interests and affiliations; (4) parental attachment and bonding; (5) temperament and behaviour; and (6) positive peer relationships (p. 133).

In their examination of the intervention literature Feindler and Becker (1994) found that children exposed to adversity are more like to recover successfully when: (1) they have a positive relationship with at least one adult; (2) they are good learners and problem-solvers; (3) they are socially engaging with others; and (4) they have an area of competence or perceived capability. But Atwool (2000) advised that children are still dependent on the significant adults in their lives to recognise that they have been exposed to trauma, to validate their experience and to access the resources that support them in their coping with the traumatic event. While it seems likely that children who have been victimised can develop coping skills to adapt to their unsafe, abusive environments, Perry (1995) warned that allowing the destructive myth to persist that "children are resilient" will result in millions of children failing to reach their potential. Similarly Garbarino (2001) stated, "the concept of resilience is useful, but should not be taken as an absolute" (p. 364).

The Culture and Ethos of Schools

The culture and ethos of schools is another moderating factor that can help to reduce or mitigate the effects of violent and traumatic events on children. It may be that teachers can play the most crucial role for victimised children when other important adults in their lives are unavailable to them (for whatever reason). Schools and other helping agencies can help offset the damaging effects of violence in the lives of children by providing valuable support systems, strengthening children's resilience, and providing resources for parents so that they can serve as psychological buffers to protect these children (Levin, 1994; Sautter, 1995; Wallach, 1993).

Promoting "connectedness" to school may mitigate the impact of negative experiences (Karcher, 2004). The concept of connectedness originates from ecological and developmental theory in that the student's ecology of connectedness includes all of Bronfenbrenner's (1979) micro-, macro-, and mesosytems that children experience in their everyday lives (Lynch & Cichetti, 1997; Karcher, 2004). According to Karcher, children's connectedness, defined from an ecological point of view, reflects their

involvement in relationships, contexts, and activities that they find positive, worthwhile, and important.

Sometimes the school environment itself may contribute to a student's lost sense of personal safety, for example, when ridicule, rejection, and humiliation are allowed and even tacitly supported (Payne, 1999; Rutter, 1979). Findings from Nash and Harker's (1998) study of 37 secondary schools indicate that some schools jeopardise the safety of their students. The reasons cited were poor relationships between staff and students and the school's failure to prevent bullying. Nash and Harker warned, "the bullying that goes on in such schools scars more students than we like to think about" (1998, p. 51).

Bullying might be considered to be the most pervasive form of violence in schools (Furlong, Morrison, Cornell, & Skiba, 2004). Swearer and Espelage (2004) use a social-ecological framework to extend understanding of the social ecology that facilitates bullying and victimisation behaviours. Bullying and aggression, which are related to negative school climate, are known to contribute to lower academic performance, school avoidance, and even early school exit among older students (Furlong et al., 2000). Buhs and Ladd (2001) hypothesised that a relationship between bullying and lowered academic achievement is mediated through the negative classroom environment. Students who perceive their classroom climate negatively tend to be involved with bullying and report more absenteeism and less interest in performing in school. A nurturing school is one that is a safe environment where students can focus on learning without fear of attack (Banks, 1997). Emotional safety is the feeling of well-being that comes from an environment that is "structured, predictable, mutually respectful of all individuals, and free from any harmful activity or comment" (Payne, 1999, p. 8).

To extend previous surveys by ascertaining student perceptions of both school safety and school climate, Skiba, Simmons, Peterson, McKelvey, Forde, and Gallini (2004) developed the *Safe and Responsive Schools (SRS) Safe Schools Survey.* Findings from the multiple regression analyses of their data suggest that school connection ("I feel welcome when I am at school") and climate may be more critical than delinquency or major safety items in predicting students' perceptions of the overall safety of their school.

Of particular interest in the present study is whether the culture and ethos of a school matters more than its socioeconomic status. In a 1998 study, New Zealand's

Education Review Office (ERO) did find that schools situated in low socioeconomic areas face more challenges in meeting student learning needs than schools with higher socioeconomic status. ERO attribute this to the greater degree of disadvantage in the students' family and social backgrounds as well as to the limited professional and management expertise available to lower socioeconomic schools, compared with the more advantaged schools (ERO, 1998). Despite these difficulties ERO's study found many examples of successful schools in disadvantaged communities that are providing a quality education to their students. The study concluded that "socioeconomic factors are not an insurmountable barrier to effective school performance" (ERO, 1998, p. 38).

Instead of holding socioeconomic factors responsible (Dalin, 1993) states "the cumulative effect of the different factors in the school-situation seems to be much larger than the influence of any single factor" (p. 83). A decade earlier, with similar subsamples and after controlling for socioeconomic status and racial composition, studies by Purkey and Smith (1982) also found that student achievement was strongly affected by the school social system and varied from school to school.

Recent studies confirm the need to explore the social context of behaviour (Osher et al., 2004). It seems likely, therefore, that an ethos is developed from interaction between different contextual factors. Ethos can be taken to mean "a basic norm that determines values, attitudes and behavioural pattern characteristics for the school as a whole" (Dalin, 1993, p. 83). Socioeconomic levels do not affect ethos. Because ethos is considered such an important school quality, researchers consider it to be a valid indicator of an "effective school" (Dalin, 1993). A seminal longitudinal study involving secondary schools (Rutter, Maughan, Mortimore, & Ouston, 1979) first disseminated findings that the "ethos" of schools influences students as a group.

Classroom climate is the term commonly used to describe the ethos or atmosphere of learning environments. Yoneyama and Rigby (2006) describe a positive classroom climate to be stimulating, task-oriented and orderly, in which students feel supported and respected by their teachers and classmates. They contend that the quality of the classroom climate is largely determined by the contributions of the teacher and the profile of the students in that class. Yet despite increased awareness of the importance of ethos or school climate, Harvey and Evans (2003) consider the emotional atmosphere of the classroom to be one of the most neglected topics in modern educational practice. Smith and colleagues (2001) also highlighted the need to involve teachers in developing programmes to alter the school climate and empower students. The only programmes

that have been effective in addressing the problems of bullying and aggression in schools are those that attempt to alter the school environment rather than focusing on the perpetrators and victims alone (Olweus, 2001).

New approaches to building positive and nurturing environments are being researched, for example, restorative practices with an emphasis on the culture of schools and whole school climates. Restorative practices (originating out of the criminal justice system) are a more recent alternative in New Zealand schools and offer a new way of promoting positive school behaviour (Hayden, 2001). Within an educational context, a restorative approach facilitates a whole school climate that can prevent, teach and respond to behavioural issues and student needs (Maxwell, 2005). As a moderating factor, this approach has implications for the way that schools might support their students whose violent and traumatic experiences impact on their behaviour at school. Varnham (2004) suggested that the restorative approach shifts the emphasis from seeing antisocial behaviour as challenging the authority of the school to seeing it as damaging to relationships within the school. Being accountable to their victims and to others affected by their misdeeds puts the responsibility back on the student, not on an administrator of punishment and most importantly, it helps to teach students how to handle situations differently in the future (Rappoport, 2005).

The philosophy of inclusion could play a key role in changing the culture and ethos of schools. Inclusion is the process of increasing the presence, participation and achievement of all students in their local schools, with particular reference to those groups of students who are at risk of exclusion, marginalisation, or underachievement (Ainscow & Moss, 2002, p. 3). Based on three of his studies involving the perceptions of students, Slee's (1995) examination of the impact of teachers and schools concluded that improvement and organisation of schools is required to ensure they better meet the needs of marginalised students. Children who have been exposed to violence are one sub-group of at-risk learners, who may only indicate that something has happened to them through their disordered and turbulent behaviour (Carroll-Lind & Lind, 2004). Inclusion involves increasing the capacity of schools to respond to the diversity of such students by restructuring the cultures, policies and practices in schools (Ainscow & Booth, 2002, p. 3).

Summary of the Literature on Moderating Factors

Factors that mitigate and reduce the impact of violent and traumatic events for children can be divided into three areas of research: (1) antecedents known to prevent the possible occurrence of violence; (2) adaptive responses for dealing with the aftermath of violence; and (3) building environments that can support children exposed to such violence. All are called moderating factors because they have the potential to protect and buffer children from the effects of violence and other traumatic events.

First, the demographics of children's lives play a part in their potential exposure to violence. Socioeconomic factors associated with poverty and family dysfunction are associated with violence and abuse. Other demographic factors likely to influence the impact of violence are age and gender.

How children cope and are supported to cope with their violent and traumatic experiences influences the impact. Children's perceptions of these experiences may differ from those of adults and also other children. They have different coping mechanisms. Their levels of resilience vary. Given children's vulnerability, the response and support they receive from other people may help to reduce and mitigate the impact of their adverse experiences.

The culture and ethos of schools can either support or exacerbate the impact of violence as it is played out by the behaviour of children in their schools. Besides promoting positive school behaviour to reduce the probability of negative school experiences, building nurturing learning environments with inclusive whole school climates can provide children with protective buffers such as teachers to support them to cope with the effects of their violent and traumatic experiences.

Part D: Theoretical Influences

Research studies document a number of "competing or complementary" theories and perspectives that explain violence (Ghate, 2000). Children's experiences of violence, in particular, have been examined from a number of different theoretical frameworks. Some researchers have explained violence within an ecological framework (Bronfenbrenner, 1977; Cicchetti & Lynch, 1993; Espelage & Swearer, 2004; Garbarino, 2001; Greig & Taylor, 1999; Sobsey, 1994), others within the sociology of childhood (Alanen, 2001; Lloyd-Smith & Tarr, 2000; Mayall, 2001a), and others again

have explained violence within a sociocultural framework (Taylor & Smith, 2000; Ghate, 2000; Vygotsky, 1978). Elements of these theories have contributed to the present study and the following section now examines those theoretical perspectives.

Ecological, sociocultural, and sociology of childhood theory share common threads. Children are viewed as active participants and able to represent themselves within the context of their environments. Links can also be made to children's rights and children's voices, where the right to speak on matters that affect them (such as their experiences of violence) fits with the concept of children as active participants in their environments. These theories explain violence in the context of children's lives. The present study is as much about children's perceptions of their violent experiences, as it is about examining the violence experienced, and social cognitive theory provides an overall unifying perspective to explain how children might perceive their violent and traumatic events. These philosophical and theoretical perspectives will be individually explained in the following sections.

Ecological Theory

Ecological theory emphasises the analysis of ecosystems, defined as interactive systems comprised of people and their non-living surroundings such as the family, school, and community. Thus, ecological theory promotes concurrent analysis of the individual's adaptation to the environment and the impact of environmental forces (Cole & Chan, 1990).

In this model each child is viewed as a complete entity surrounded by a unique ecosystem. The child is part of a system or network of social and environmental relationships (Greig & Taylor, 1999). Bronfenbrenner (1977, 1979, 1986, 1992) proposed four contextual structures within which individuals and places are located. Often illustrated as four concentric circles, with the child and family situated in the central circle and including many key people (family, teachers, friends) and many settings (home, school, community) these four systems are called the microsystem, mesosystem, exosystem, and macrosystem (Greig & Taylor, 1999; McMillan, 1990).

The microsystem consists of the child's immediate environment, usually the home and school settings. Greig and Taylor (1999) described these as examples of physical space/activity. Microsystems also contain people such as parents, teachers, peers and interactions with these people. The mesosystem is a system of human microsystems that

a person moves through and interacts with, the main focus being the interrelationship between different settings and at different times of development. An example of mesosystems interrelating for a child is the links between home and school (Greig & Taylor, 1999; Richardson & Schwartz, 1998). The exosystem does not directly contain the child but consists of the various social structures that may exert an influence on children. Some examples would be school boards of trustees, parents' employment, activities of siblings, parents' network of friends, and government agencies (Greig & Taylor, 1999; Richardson & Schwartz, 1998). Whereas exosystem influences are those mediated through other people in the child's microsystem, the macrosystem includes social or cultural beliefs and practices that do not presume any direct involvement of the child and his or her family (McMillan, 1990). According to Greig and Taylor (1999) the macrosystem refers to the broader cultural and subcultural settings (e.g., poverty, neighbourhood, ethnicity) within which micro-, meso-, and exosystems are set and consists of cultural ideologies and attitudes, that is, "the overriding consistencies in beliefs, values and accepted practices within a culture or society" (Smith & Taylor, 2000, p. 4) and is the "overarching cultural patterns of which the other systems are concrete manifestations" (Richardson & Schwartz, p. 67). Prominent in its approach to understanding violence, ecological theory offers:

> a way of integrating different disciplinary approaches, by understanding violence as a multiply-determined phenomenon, in which the child and family are viewed as part of a nested system of risk factors and protective factors at the socio-cultural, community, family and individual levels (Ghate, 2000, p. 397).

A key element of this understanding is that it is not the environment itself that is important, but the individuals' experience of the environment that counts. A second key element is that violence cannot be understood apart from the context within which it occurs (Garbarino, 1992, 1995, 2001). Bronfenbrenner's ecological theory (1977, 1979) provides an explanatory framework for examining children's social environments, including the impact of the environmental forces of violence. This theory contributes to an explanation of violence because child abuse and violence are considered to be multi-dimensional phenomena in which cultural, social, economic and psychological factors interact to produce the outcome (Hanson & Carta, 1996; Sobsey, 1994).

By emphasising the interactive nature of factors at different levels, Belsky (1980) interpreted the ecological model to provide an explanation of abusive interactions and

relationships within the context of family, society and culture (as cited in Sobsey, 1994). For example, family interactions are considered within the broader context of social influences, which can strongly affect the risk of abuse. Belsky's model also views individual characteristics and power inequities within the context of social systems that must be considered in order to fully understand abuse. However identifying and conceptually organising these factors is not enough. The key to predicting the likelihood that any one person will become abusive, is understanding the relative importance of each of these compensatory and risk factors (Kaufman & Zigler, 1989). In terms of prevention strategies Belsky's extended ecological model is based on the premise of responding to these interacting social systems as well as intervening at the individual level where the abuse directly occurs (Sobsey, 1994).

Sobsey (1994) further extends Bronfenbrenner's model to include the understanding that micro-, meso-, exo-, and macrosystems interact to increase or decrease the risk of child abuse and violence. Sobsey's integrated model of abuse is based on, and strongly influenced by Bronfenbrenner's ecological model, but it differs in its focus by incorporating elements from the counter control, social learning and social cognitive theories. Physical and psychological aspects of the interacting individuals are considered within the context of environmental and cultural factors and places greater emphasis on the interactive relationship between a potential offender and a potential victim. As Sobsey's integrated model includes both intrafamilial and extrafamilial abuse rather than specifically referring to the family or microsystem, the social unit that provides the context for that relationship is referred to more generally as the environment.

Ecological theory can also contribute to an explanation of school violence and bullying, with the focus on the relationship between perpetrator and victim now extended to the bystanders who witness the bullying and who have an active role in encouraging or discouraging bullying (Slee, 2003; Sullivan, 2000b; Swearer & Espelage, 2004). In this way, the relationships extend beyond the school and into the family and broader community, thus involving all of the child's micro-, meso-, exo-, and macrosystems (Slee, 2003).

Studies show convergence around a social-ecological perspective of violence and bullying (Carney, 2005). As argued by Swearer and Doll (2001) bullying and victimisation are ecological phenomena that are established and perpetuated over time as the result of the complex interplay between inter-and intra-individual variables (cited

in Swearer & Espelage, 2004, p. 1). Ecological theory clearly provides a theoretical explanation for understanding children's experiences of violence. The great advantage of this theoretical perspective is that it encourages educators to look beyond the narrow confines of school with the recognition that children (and violence or bullying) do not operate in a vacuum (Espelage & Swearer, 2004). According to Cole and Chan (1990) ecological theory also highlights the problem that children at risk in the education system perhaps fail because of educators' lack of concern for ecological factors and their influence on education.

Taking an ecological perspective allows the present study to frame the experiences of the participating children within their own unique ecosystem in which they live. The study examines children's experiences of violence within their surroundings and contexts, that is, their physical environments and their interactions with the people in close contact with them. Based on the premise that violence occurs as a result of the complex relationships between individual child, family, peer group, school, community, and culture, ecological theory informs the present study in its examination of children's interactions in the social contexts of home and school that may be contributing to their experiences of violence and abuse.

Sociocultural Theory

Sociocultural theory (Vygotsky, 1978) places the emphasis on children as social and cultural actors, as they interact in their everyday environments (Mayall, 1994, 2001a; Oakley, 1994; Prout, 2001, 2003). This approach explores development within a "social and cultural context and places the social, cultural, and historical frameworks of childhood at the centre of inquiry, rather than as background information" (Smith & Taylor, 2000, p. 3). Similar to ecological theory, Vygotsky's theoretical position focuses on children as individuals within a wider social context, in which development occurs through sociocultural activity. Just as childhood is socially constructed, Vygotsky (1978) considered it to be impossible to understand childhood without understanding cultures (Smith & Taylor, 2000).

Smith (2001) explained that children are "active co-constructors" of their own knowledge and understanding, as opposed to being "passive recipients" of environmental events, so they come to know about their world through their activities, in communication with others. The process of social mediation through the responses or

reactions from other people in the environment helps the child to internalise environmental experiences, that is, they adopt certain views and beliefs, according to the interactions they have experienced (Richardson & Schwartz, 1998; Smith et al., 2005). In this way children's understanding of their world is rooted in the specific historical and cultural activities of the community in which they interact. Children's individual thinking processes therefore relate to their cultural context and social interactions so that cognitive development becomes embedded in the context of social relationships and sociocultural tools and practices (Rogoff, 1990, 2003).

By embedding learning within sociocultural activity and identifying children as active participants, some theorists view learning as a social phenomenon when they adopt the perspective of placing the learner in the context of their lived experience of participating in the world (Lave & Wenger, 1991; Wenger, 1998). Wenger described this to be "learning as social participation" (1998, p. 4). In her examination of the relationship between thinking processes and the cultural context, Rogoff (1990) considered learning to be an "apprenticeship" where the social activity is mediated by adults and peers who support and challenge the child's understanding and skills so that acquisition of cognition is developed through the interaction. Wertsch (1991, 1998) also described the bond between cognition and culture in relation to complex social problems in his sociocultural approach to mediated action.

Vygotsky (1978) coined the phrase *Zone of Proximal Development* to explain his theory that participation is a social activity where children, with the assistance of others, construct their own understanding. Researchers who work within this framework consider Vygotsky's (1978) sociocultural theory provides a useful conceptual framework for understanding children's experiences of violence as a sociocultural phenomenon. Ghate (2000) offers a number of sociocultural explanations for family violence: (1) opportunity, given the large amounts of times that families spend together; (2) impinging activities because conflicts of interests can occur when sharing resources and facilities and not all family members share the same interests; (3) ascribed roles that are often inequitable according to hierarchy, patriarchy, and gender; (4) involuntary membership because children cannot choose the families they are born and sometimes entrapped into; (5) stress, which is often transmissible among family members and exacerbated by poverty; and (6) privacy because families are often isolated and protected from the gaze of outsiders (Ghate, 2000, p. 398). At another sociocultural level, family and even cultural norms may contribute to violence within the family

(Ghate, 2000). Furthermore, children may internalise their experiences of physical punishment by parents and then later engage in those same negative modes of interaction in their own relationships (Smith, Gollop, Taylor, & Marshall, 2004, 2005).

While both ecological and sociocultural theory provide a framework for understanding children's experiences of violence within the broader context of social influences, sociocultural theory also provides a framework for conducting the present study from the perspective of children as participants in the research. Researchers working within this theoretical perspective, strive for partnership by developing empathy and intersubjectivity with their research participants (Taylor & Smith, 2000). Inherent in this present study is the value placed on children's ability and right to speak out on issues that concern them and one of the major benefits of adopting a sociocultural paradigm is that the research allows the voice of the participants to be heard.

Sociology of Childhood Theory

According to sociology of childhood theory, how childhood is conceptualised influences the expectations that society holds for children (Smith, Gollop, Taylor, & Marshall, 2004). Childhood is a "social construction brought about through the influence of cultural mores and practised values experienced by the community groupings in which children may find themselves" (Lloyd-Smith & Tarr, 2000). Thus, from a sociology of childhood paradigm, children are studied as "independent social actors rather than lesser adults progressing towards adulthood through the process of socialisation in families and schools" (Mayall, 1994, cited in Smith & Taylor, 2000, p. 2). James and Prout (1997) also subscribe to this view, which according to Alanen (2001) allows researchers to approach children both as social actors and participants in the social world, but also as participants in the formation of their own childhoods. Conceptually, the sociology of children approach starts from "concrete, living children as they are found acting and participating in their own particular social worlds" (Alanen, 2001, p. 12).

Similar to sociocultural theory, the sociology of childhood paradigm focuses on children as people worthy of respect and appreciation of their competence in being able to understand and experience their own world (Smith, 2001). Lyle (2001) cited Alderson and Montgomery's suggestion that "relevant experience ... is far more salient

than age for acquiring competence" (1996, p. 22). Smith provides examples of how social science research has rebutted previous assumptions about children's competence, for example, their ability to see things from others' perspectives (2001, p. 10).

To understand how society works, Mayall (2002) argues the importance of considering children's needs as well as adults because children are now recognised as agents who are actively shaping their relationships with adults and other children. This has important implications for policies and practice. Sociological approaches to childhood, (e.g., Jenks, 2005) emphasise the active participation of children in society. This respect for children's experiences and views is reflected in Article 12 of the United Nations Convention on the Rights of the Child, which focuses on the participation rights of children to take an active role in decision making involving themselves, and in turn informs the present study.

With an emphasis on children as participants in, as well as outcomes of, social relations, sociology of childhood theory, like sociocultural theory, views children as active agents rather than passive recipients (Prout, 2003). However, to really understand childhood, Woodhead and Montgomery (2003) consider it is necessary to first know the history of beliefs about childhood. Although childhood may be constrained for children through their 'social' status (Jenks, 2005), Mayall (2002) suggests that respecting children's rights will raise the social status of childhood.

According to Smith, Gollop, Taylor, and Marshall (2004) sociology of childhood theory views children as "social actors who can understand and contribute meaningfully to their family and community" (p. 12). While historically children's viewpoints have been ignored because of their perceived incompetence as a result of their immaturity and stage of development, Smith and colleagues consider that sociology of childhood theory champions the rights of children to participate and represent their own views about their childhood experiences. Therefore this theory's application to violence relates to the premise that children have the competency to represent their own views about their violent experiences and that "their views should be listened to and respected" (Smith et al., 2004, p. 12).

Different disciplines view childhood and violence or abuse differently. Sociological models perceive the interactions of the individuals (e.g., parents and child) in a social context as contributing to child abuse. Sociology of childhood theory thus provides a base on which the present study can proceed in its examination of children's perceptions of their violent and traumatic experiences. Jenks (2005), in particular, has

focussed on the way that the image of the child has been viewed in society, by examining the image of children through history and the reality of child abuse. For many of the participating children in the present study violence is part of their lives. In terms of examining children's perceptions, sociology of childhood theory is of specific relevance to this research study because as stated by Alanen (2001), it makes a case for studying children

> in their own right and from their own perspectives, and for implementing this value in sociological work by taking children as the units of research and focusing the study directly on children and their life conditions, activities, relationships, knowledges and experiences. (p. 12)

Other Theoretical Explanations

The culture of violence reflects the social values and behaviours bestowed on children by their parents, society, and the media (Zwi & Rifkin, 1995), allowing various philosophical influences to contribute to explanations of violence. While there is increasing evidence that the "cycle of abuse" can be broken, another theory, the "maladaptive social information processing style", contends that children who are harshly punished are more likely to misinterpret others' behaviour and motivations as hostile and provocative and so they tend to respond aggressively to stress themselves (Ghate, 2000). On the other hand the intergenerational transmission of family violence can be explained by attribution theory, that is, how individuals cognitively process their experiences will mediate the extent to which they will repeat parental behaviours with their own children (Ghate, 2000). Modelling and providing consequences are the key principles of behavioural theory. For example, when parents use physical punishment they model aggressive behaviour, which in turn may facilitate aggressive behaviour in their children (Smith et al., 2004).

Attachment theory, as well as social cognitive theory, can also be used to explain the victim and offender cycle. Attachment and bonding are related concepts that refer to the strength and durability of the relationship between people within a particular social unit (Perry, 2004; Sobsey, 1994). Typically attachment describes the interactions and relationships that children develop towards loving and responsive caregivers (Smith et al., 2004). Strong attachment bonds encourage nurturing behaviour and inhibit abuse (Perry, 1995, 2004; Sobsey, 1994). It is possible that attachment disruptions may

contribute both directly and indirectly to violence and other forms of abuse (Sobsey, 1994). Research clearly indicates that isolation from society increases risk and inclusion in society decreases it (Sobsey, 1994). Therefore child abuse can prompt disruptions in the child's attachment to the abusive caregiver which then leads on to difficulties for the child in forming secure attachments with peers and later his or her own children when they are born (Perry, 1995, 2004; Sobsey, 1994).

Social Cognitive Theory

While the previous theories provide an explanation for violence, of equal importance in this study are the *perceptions* of children about the violence they have experienced. Social cognitive theory contributes to an explanation of the perceptions of children. Derived from his earlier social learning theory (1977), Bandura's (1986) social cognitive theory is similar to sociocultural and sociology of childhood theory in that individuals are viewed as agents that are proactive in their own development and able to make things happen by their actions (Pajares, 2002).

According to social cognitive theory a person's behaviour is determined by an interaction between personal factors such as cognitive, affective and biological events, behaviour and the environment (Bandura, 1977, 1986, 1989). This reciprocal determinism, as explained by Pajares (2002), means that environments and social systems influence behaviour through psychological mechanisms of the self system. Other key fundamental human capabilities that are espoused within social cognitive theory are: symbolising capability, vicarious capability, forethought capability, self-regulatory capability, and self-reflective capability. The way that children use these capabilities extends understanding of how they will perceive and cope with their violent experiences.

Social cognitive theory provides a theoretical framework for understanding children's perceptions of violent and traumatic events, for the reason that how children cognitively perceive their experiences will ultimately affect their behaviour and development. Social cognitive theory recognises that the witnessing or experiencing of violence in childhood promotes a tendency to respond aggressively to stress and to use violence as a tool for problem-solving (Ghate, 2000). In addition, children living in violent homes have potent models to imitate, according to this theory, because most behaviour is learned vicariously, that is, besides learning from their own experiences, children vicariously learn from observing the behaviours of others (Pajares, 2002).

The implications are that environments and social systems can affect children's behaviour to the degree that they influence their aspirations, self-efficacy beliefs, personal standards, emotional states and other self-regulatory influences (Pajares, 2002). While at-risk home environments have a negative impact on children, positive school environments can make a difference in the lives of children exposed to violent and traumatic events. By applying the social cognitive concepts of modelling and vicarious learning teachers can play a powerful role in supporting children to cope with adversity and to overturn negative modelling by learning new ways of behaving.

Vicarious capability is a key construct of Bandura's theory. In regard to the witnessing of violence in the media, even stories can be influential. Television, in particular, has touched most children and increased the amount of harmful models and violent behaviours that children are exposed to (Stone, 1998). Other theoretical perspectives such as ecological and sociocultural theory compliment the social cognitive theory in this regard. Sociocultural elements will be important in determining what happened, how the child responds and how the child evaluates and remembers the event and responses to it.

Bandura (1986) posits that cognition plays a key role in children's capability to construct reality, self-regulate, encode information and perform behaviours and the theory's contribution to this study is that social cognitive theory accepts that children are unique and will perceive events differently, therefore the same event can provoke different responses from different children or from the same child at different times (Jones, 1989). The examination of children's perceptions therefore links in to the body of literature around children's voices and dictated the methodology for exploring the strength of children's feelings in the aftermath of violent and traumatic events, the encoding of them, the memory of them and then the responses of the school and family that affected their reactions.

The starting point for the present study was children's emotional response to violence. The study identified the violent or traumatic events that generated those emotions, and examined how the children interpreted and responded to them, including their perceptions of the consequences of others' responses. Exploring how those emotional events were reacted to first depended on how the child perceived and interpreted them and secondly how those around them responded to the events and more importantly to the child's reactions and behaviour, for other people (parents and teachers) do not always know about the events themselves.

While most research has been conducted from the perspective of the events themselves that are seen within our culture as violent and unacceptable, this study moves back to the experience of the child and their emotional reaction to it. It follows other studies (Anderson, Kinsey, Loader, & Smith, 1994; Maxwell & Carroll-Lind, 1996) that attempted to examine the phenomenology of the world of the child in his or her own eyes rather than through the lens of adult responses.

For the participating children in the present study those adverse events were interpreted first in terms of previous experiences and the responses of those closest to the person. Memories of other similar experiences determined how the child conceptualised the experience and their responses to it in terms of how it was translated into language and action. Family and friends' reactions to similar events and to this event were the next most important determinants. After that, other people, for example, teachers, influenced the child.

Most important is the basic perception of the event and how it is encoded in language and memory. The child's symbolising capability (Bandura, 2001) is the first step in the chain before the social and cultural influences of the past and the present start further shaping the child's understanding of what has happened. Perception is inevitably a complex compound of the experience itself, that is, the cognitive interpretation of it and the sociocultural influences on those cognitions. For this study the social context is prioritised over the cultural, which is less easy to determine because at the child's level the broader cultural responses are much less important than those of the people immediately around them. Furthermore children are exposed to so many various cultures in today's society that homogeneity of experience is not readily predictable. A strength of the social cognitive theory, however, is its ability to extend understanding of how children are socialised into their society (Stone 1998). Of interest to this study also, is the explanation provided by social cognitive theory for the way that children develop, control, or prevent violent and antisocial behaviour, because understanding how social cognitive factors shape children's interpretations and responses to their environments might explain why children might succumb to negative social influences (Pepler & Slaby, 1994).

For many children of this age (9-13 years) their basic belief systems around dangerous events are only partly formed. Therefore this study aimed only to explore children's idiosyncratic responses, freed from the more general beliefs. However this age group are able to construe what has happened from a variety of models around

them, so drawing on social cognitive theory it was possible to examine perceptions and responses within the particular social context of the school and family.

Equally important is the way that the preceding theoretical perspectives contribute to the underlying philosophies about children. Therefore the following section focuses on the philosophical ideas central to the way children are perceived within the present study.

Children's Rights

There is a growing recognition among researchers that children have rights and that they should be consulted in matters that affect them (Greig & Taylor, 1999). Conceptualisation of children's rights provides a framework on which to hinge some key perspectives. For instance, Smith and Taylor (2000) contend that incorporating sociocultural theory with the sociology of childhood adds meaning to a children's rights conceptual framework because within both theories children are respected as citizens in their own right. The view of children as social actors able to contribute to society in their own right provides a sound rationale for listening to and respecting children's perspectives (Smith, Gollop, Taylor, & Marshall, 2004) and lends further weight to the philosophy of children's rights. Furthermore sociology of childhood and sociocultural philosophies fit well with children's rights discourse as defined in the United Nations Convention on the Rights of the Child (Smith, 2001). Within the New Zealand context, discussion around children's rights began in 1993 with the Government's ratification of this Convention (Nairn & Smith, 2003).

United Nations Convention on the Rights of the Child

The Convention on the Rights of the Child (UNCROC) adopted by the United Nations General Assembly resolution 44/25 (20 November, 1989) has been described as the most innovative, comprehensive and widely recognised statement of children's rights (Gilbert, 1998, p. 3). UNCROC outlines 54 articles involving the protection, provision and participation rights of children (Durrant, 2004; Kiro, 2004; Lansdown, 1994). In particular, Articles 12 and 13 focus on the participation rights of children to take a more active role in any decision-making about themselves (Smith, 2001). Of particular interest to this study is Article 12.

The principles of Article 12 of the United Nations Convention on the Rights of the Child (1989) are now outlined. States Parties was the collective term given to all the countries that signed and ratified their agreement to adopt the obligations of the United Nations Convention on the Rights of the Child (UNCROC).

> 1. States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.
> 2. For this purpose, the child shall in particular be provided with the opportunity to be heard in any judicial and administrative proceedings affecting the child, either directly, or through a representative or an appropriate body, in a manner consistent with the procedural rules of national law (Office of Commissioner for Children, n.d., p. 12; United Nations, 1989, p. 5).

By recognising children as participants in society, Article 12 creates a tension between two opposing views that (1) children are incapable of taking responsibility for their own decision-making and are dependent on adults for protection, and (2) that children have basic civil rights, which include the right to participate fully in decisions that affect their lives (Lansdown, 1994). If Article 12 of the Convention is to be properly actioned for children, then there has to be a resolution between the rights of children and the rights of parents (O'Reilly, 1996). Mason and Cohen (2001) have perhaps resolved this tension. For them Article 12

> envisages the rights of the child not as being in conflict with the rights of the adult, nor as an alternative to or an abrogation of the rights of parents, but as an integral part of human rights. It recognizes the child as an individual with needs that evolve with age and maturity. Accordingly, it goes beyond existing treaties by seeking to balance the rights of the child with duties of parents and others responsible for the child's survival, development and protection, by giving the child the right to participate in decisions affecting the child's life. (p. 15)

Article 12 also provides a rationale for incorporating the United Nations Convention on the Rights of the Child into the theoretical framework of the present study:

> The Convention on the Rights of the Child offers special opportunities to the helping professions to inform its implementation, because its perspective is psychological (cf. Melton, 1992). To a large extent, the contours of the Convention are based on children's perceptions; concepts like *family environment* and *dignity* are phenomenological. Accordingly, social scientists can inform policy makers about the conditions that evoke such experiences. In effect, in that regard, the Convention establishes an agenda for child researchers (see Melton & Kaufman, 1997).

Children's Voices

There is a consensus among researchers in this field that listening to the voices and views of children themselves is one of the most neglected aspects of child research (Christensen & James, 2000; Greig & Taylor, 1999; Hallet & Prout, 2003; Lloyd-Smith & Tarr, 2000; Mason & Falloon, 2001; Mayall, 2000; Prout, 2003; Reiss et al., 1993; Smith, Taylor, & Gollop, 2000). Few studies have examined violence from the point of view of children. In New Zealand studies by Barwick and Gray (2001), Browne and Carroll-Lind (2006), Carroll-Lind and Kearney (2004) and Maxwell and Carroll-Lind (1997a) obtained children's views about bullying and Dobbs (2005) researched children's views about physical punishment. However, these studies did not examine children's experiences of violence in terms of prevalence, incidence and impact. Most of the statistics on violence and children are obtained from government and social agencies and mostly include dysfunctional families where authorities have intervened. Australian researchers (Mason & Falloon, 2001) lament the lack of formal research reporting children's perspectives of abuse, where the children are not already defined as "at risk" or part of the child protection system. This issue has particular relevance to studies involving children's self-reporting of abuse and violence. But there is also increasing international recognition of the value of research that examines the direct experience and perceptions of children (Lloyd-Smith & Tarr, 2000). Fielding (2004) explored the theoretical underpinnings relating to the growing field of student voice. He also acknowledged the (1) problems of speaking *about* others; (2) problems of speaking *for* others; and (3) problems of getting heard.

Christensen and James (2000) question why children's voices have been traditionally subdued. They called for a re-examination of the conceptual frameworks

that influence children's representation. Christensen's earlier work (1994, as cited in Christensen & James, 2000) extends the notion that because children have little or no influence over their own social representation, it "leaves more or less unaddressed the child as a social person in their own right, to be understood through his or her perceptions and actions in the social and cultural world" (p. 4). Listening to children's voices provides valuable clues to what they are feeling and how they are making sense of the world (Smith, 2001). It is necessary to grant children the right to represent their own perceptions of the effects of violence because dealing with the negative consequences of violence requires solutions that are meaningful to children and that address their perceptions. As noted by Anderson et al. (1994),

> it is only through trying to understand young people's own views of their experiences as victims and witnesses that we can confront the problem in a way that is meaningful and acceptable to them: that is, in a manner which recognizes both the reality of those experiences and the legitimacy of their strategies for dealing with them. (p. 66)

Consideration of children's perspectives about experiences and events in their lives is relevant to the wider study of violence because it is well recognised within the social science disciplines, that children's values and belief systems are formulated during childhood. For this reason, children's perspectives are more appropriate than the more common studies involving adult participants recollecting and explaining their childhood experiences of violence. Hood, Kelley, and Mayall (1996) are adamant that the only way for children's voices to be heard is for researchers to directly seek the views of children. They stated, "research should not be on children but with them and for them" (p. 119). Indeed, without their voice, the debate is incomplete and renders children invisible (Dobbs & Duncan, 2004; Dobbs, Smith, & Taylor, 2006).

Summary of the Theoretical Influences

There are a number of philosophical and theoretical frameworks that have informed this study. The theories that have a particular contribution to make were discussed first as to how and why they inform the study. In particular ecological, sociocultural and sociology of childhood theories link to each other and to the unifying concept of social cognitive theory in the way that children are able to perceive their

experiences of violent and traumatic events. Social cognitive theory spans all the theoretical influences discussed in this chapter and hence is highlighted as the methodological framework underpinning the present study.

The key theoretical framework for the present study locates the phenomenon of violence within the concept of children's perceptions of the violence they experience. To operationalise this concept means valuing the right of children to represent their own views and for adults to listen to what they say by "listening to children's voices". Children's or student's voice is a radical and recently developed field of study (Fielding, 2004).

Article 12 of the United Nations Convention on the Rights of the Child (1989) guides this present study, and it is well suited to philosophical frameworks that encourage the voice of children to be heard. By viewing children as participants and citizens Taylor and Smith (2000) indicate that

> progress can be made in reorientating research, policies, and practices away from a view of children as dependants whose lives are determined for them toward the view that children are active social and moral agents who can influence the shape of their childhoods. The future direction challenge is clear – the challenge now is to make children's participation and voices a daily reality. (p.207)

The next chapter outlines the methods undertaken to incorporate this philosophy into the present study.

Summary of the Literature Review

The perception of increased prevalence and incidence rates of violence involving children has led to a proliferation of research studies into violence over the last two decades. Most researchers concur that while incidence rates may vary the prevalence of violence has increased among developed countries. Given the divergence of prevalence and incidence rates among researchers, however, it is not possible to provide consistent estimates.

Existing research on children's direct and indirect exposure to violence is unified in the conclusion that violence has a negative and destructive influence on children. Some types of violence are more likely to occur and therefore will affect more children. Some of those incidents may not always be considered by adults to be violent, but the

hurt children feel determines their impact. Conclusions drawn from the research literature are that except for the few young people who have some special resilience, violence damages children's fundamental growth towards competent adulthood (Hanson & Carta, 1996).

Context plays a key role in the way that children conceptualise and are affected by their experiences. To view children-in-context it is necessary to consider that children-in-families-in communities are embedded in social realities that provide the matrix in which they grow, learn and develop (Gregory, Gregory, & Carroll-Lind, 2001). Researchers reported how schools and other helping agencies can help offset the damaging effects of violence in the lives of children by providing support and strengthening children's resilience and coping strategies. Studies examining the culture and ethos of schools found that schools can be a valuable support system for children.

This review of the literature has identified a gap in the literature in regard to research studies that examine violence from the perspective of children. International and national researchers are cognisant of the fact that there has been little attempt to include children's voice in the research process (e.g., Anderson et al., 1994; Christensen & James, 2000; Hood, Kelley, & Mayall, 1996; Prout, 2003; Smith, 1996; Smith, Taylor, & Gollop, 2000). Smith and her colleagues recommend an increased effort to seek children's views in social and educational research.

It is timely, therefore to engage in research that is written from the perspective of children and in accordance with Article 12 of the United Nations Convention on the Rights of the Child. The review focused on the theoretical ideas central to children's perceptions of violence and the philosophical framework that informed and underpinned the present study was presented in this chapter.

CHAPTER THREE

METHOD

To examine children's perceptions about their experiences of violent events this study addressed three main questions:

1. What is the prevalence and incidence of different types and contexts of violence?
2. How do children report the effects of violence?
3. What factors appear to mitigate and reduce the impact of violent events on children?

This chapter determines the data necessary to answer these questions and explains the method for collecting and analysing data that address these questions. The ethical considerations that were integral to all phases of the research process are also discussed in this chapter.

Participants: Schools and Students

Sample Selection: Schools

Children were selected from a stratified random sample of schools throughout New Zealand that serve children aged between 9 and 13 years. A multi-stage sample design was used to stratify schools in which each stratum of the population to be studied was identified and enumerated with elements drawn from it by a computer generated random sampling procedure. A list of all schools was obtained from the Ministry of Education. There are estimated to be 2,700 state primary and secondary schools in New Zealand. The population identified for this study was the total number of schools in New Zealand that serve students aged between 9 and 13 years. Private, special, and secondary schools, as well as Māori immersion schools were eliminated from the database. At the time of the study, there were 2,227 schools serving children in this age group (MOE, 1998). The stratification involved dividing the population sample into homogeneous groups according to geographic location, school size and decile ranking (socioeconomic status of the school neighbourhood; decile 1 = low SES; decile 10 = high SES).

Geographical Location

To select the geographical locations, multi-stage cluster sampling was used to randomly divide the country into segments. Next, five geographical areas across New Zealand were chosen at random via the computer. Stratified and cluster sampling procedures were both used because cluster sampling allowed a national sample to be drawn in a more cost effective way than simple random sampling. Each of the five areas comprised an urban city, surrounded by provincial and rural areas. Once the geographical areas were identified 30 schools within each location were randomly selected, following identification and enumeration. Stratification by geographic region provided a good representation of rural, provincial and urban schools as well as a good representation of the type of schools common to New Zealand. Urban schools are defined as schools in metropolitan areas. Typically in New Zealand smaller schools are situated in rural areas. Provincial schools are situated in small cities or towns that serve surrounding rural areas and are included in the urban statistics for this study.

School Size

Schools were randomly stratified by their decile ratings and also by their size, that is, small, medium, and large schools. First, schools in each of the five geographical locations were sorted according to their school size, based on the number of students attending each school. Selection criteria (for the purpose of this study) involved small schools being defined as schools with up to 150 students, medium sized schools, 151 to 400 students and large schools, 400 plus students. In bigger schools randomisation was also done among classrooms (where students in every second class were invited to participate).

School Decile Ranking

The final stage of the stratification involved randomly selecting schools according to their deciles within the geographical location and size strata. Schools are given a decile rating by the Ministry of Education who calculate this socioeconomic index for schools according to census data. The socioeconomic indicator is used for administrative purposes, as a research tool to aid sampling; and as an analysis variable in research that examines differences between schools (MOE, 1998). Decile 1 schools draw on students from low socioeconomic areas and decile 10 schools draw on students

from high socioeconomic areas or areas with the least socioeconomic disadvantage. To calculate the schools' decile ratings, schools provide the Ministry of Education with a random sample of student addresses. Census data, based on these addresses, are used to estimate household income, number of household inhabitants, educational qualifications, occupation, income support and ethnicity (ERO, 1998).

In the present study all schools serving 9 to 13-year-olds were ranked according to their decile rating from 1 to 10. Schools were then randomly selected from each of these decile categories. For this study, schools with a 1, 2, or 3 decile rating are defined as low decile, schools with 4, 5, 6, and 7 decile ratings are medium decile schools and 8, 9, or 10 decile schools are categorised as high decile schools.

Type of School

Participating schools included the following types of school: full primary, contributing, intermediate, and integrated schools. Full primary schools cater for all students from Years 1 to 8. Contributing schools include students from Years 1 to 6, with their students moving on to the local intermediate school for Year 7 and 8 schooling. Intermediate schools only educate Year 7 and 8 students. Integrated schools are usually defined as Catholic schools that have integrated into the state system. In the present study the two integrated schools were full primary schools.

Summary of Selection Criteria for Schools

The stratified random sample created a useful blend of randomisation and categorisation. The random selection of the 150 schools within geographic constraints was further stratified to achieve a representative sampling of the country, including coverage of different types of schools. Randomisation was done among schools, and in bigger schools among classrooms with every second classroom randomly selected for participation. Random sampling procedures within these constraints ensured that the sample drawn accurately represented the population (Bouma, 1996). The population was identified to enable the findings to be generalised to students aged between 9 and 13 years in New Zealand schools, allowing a representative national sample to be identified.

Sample Selection: Students

In this study of violence a three-stage consent process was used to select the children who participated. The first stage involved the principals of 150 randomly selected schools. These principals were invited by letter to allow children in their schools to participate in a study of children's experiences of violence. Following this process, principals indicated their consent and willingness to participate by returning the reply form to the researcher. A consultation process then took place between the researcher and the school, which initially involved the principal, and, in some instances, members of their governing boards (Board of Trustees).

For the second stage of the consent process, parents and caregivers of children aged 9 to 13 years in the participating schools were sent a letter outlining the details of the research and requesting parental permission for their child to take part in the study. In smaller schools all of the 9 to 13-year-old students were eligible for participation, but in the bigger schools only parents of children in every second classroom were identified and sent a letter. The letter was explicit in explaining that the purpose of the survey was to examine children's experiences of violence. The passive consent procedure was also stated very carefully (see p. 90 for a description of passive consent). While New Zealand law does not require parental consent, it was obtained for this project as part of the ethics approval process. To ensure that every family received information about the study, material was mailed to parents from the school. Stamped, addressed envelopes were provided for parents to mail their written refusal if they did not wish their child to participate. Ethical issues regarding passive consent made it imperative that the letters be mailed to ensure that the parents received the information. A large school in a high socioeconomic neighbourhood had to be withdrawn from the study because the pre-stamped envelopes that contained the parental passive consent form were not mailed, but were instead sent home with the children.

The third stage of the consent process involved the written consent of the children eligible to participate (in smaller schools this involved all 9 to 13-year-olds and, in larger schools, students in every randomly selected second classroom were invited to participate in the study. If the school had not received a letter of refusal from the parent, then those students had a right to decide for themselves whether or not they wanted to participate. The nature of the research was carefully explained, as was their right at any time to refuse to continue or to answer certain questions. The children also signed a

consent form, which stated that they understood the nature of the study, and that they agreed to participate, knowing they could withdraw from the research at any time.

Summary of Permission Procedure to Contact and Recruit Participants

1. Approval to undertake the study was sought and given by the University Ethics Committee (HEC, 98/76, see Appendix A).
2. Approval for children in randomly selected schools was sought and received from the principal and board of trustees to conduct the research in their school with the understanding that any special requirements or conditions they might request would be honoured (see Appendix B).
3. Letters were mailed to caregivers (see Appendix C). As stipulated by the Ethics Committee (to ensure the researcher did not have access to address lists) the schools addressed and mailed the letters on behalf of the researcher. This letter described the study and informed caregivers that if they did not want their child to participate in the research, then they were required to sign the part of the letter which stated they did not want their child to participate and to post it in the reply paid envelope. Names and phone numbers of people involved in the study were supplied so parents could ask further questions.
4. Students whose caregivers did not send the letter back were deemed to be eligible to take part in the research.
5. Students who indicated that they wanted to participate were required to sign the consent form, which was read to them. The confidentiality procedure was explained, with encouragement offered and time given for questions to ensure their full understanding of the survey.
6. If students opted to participate they signed a consent form with the understanding that they could opt out of the project at any time (see Appendix D).
7. After the students read and signed the consent form, it was put in a box (located in the classroom) to protect their anonymity, before the questionnaire was given out.
8. Students who had signed the consent form completed the questionnaire as the questions were read to them (see Appendix E).

Characteristics of the Sample: Schools

Of the 150 randomly selected schools, 30 accepted the invitation to participate in the study. Two schools were withdrawn for the following reasons: First, one school had a small group of parents who were opposed to a study about violence being conducted in schools. Another parent, who represented an opposing parent group wanting the school to be part of the study, contacted the researcher. This group was concerned about the occurrence of bullying in the school. They felt that their children should have an opportunity to voice their feelings about the bullying. However, the school's principal and the researcher jointly decided that it was in the best interests of that school to withdraw from the study. Second, a large school in a high socioeconomic neighbourhood was excluded because of a possible breach of ethical procedures. As a safeguard against any ethical issues, and to ensure the integrity of the study, this school was withdrawn from the study.

Of the 150 schools that were sent letters, 120 schools either declined or did not reply, 30 accepted and 2 schools were withdrawn. All schools that agreed to participate were included in the study. Schools who returned the form declining participation were not expected to provide their reasons for non-participation. Every effort was made to construct a random sample and with further stratification by size and decile, it is unlikely that the self-selecting participating schools differed from the non-participating schools on key variables. Furthermore sufficient numbers of participants were drawn from the participating schools. With 2 schools withdrawn, the final sample reported in this study comprises the 28 schools that participated in the study.

Geographical Location

Figure 3.1 shows the geographical areas from which the participating schools were drawn. In line with the criteria used for the development of the stratified random sampling methodology, it was important to include urban and rural schools that differed according to size and deciles and these five geographical areas were able to provide that range.

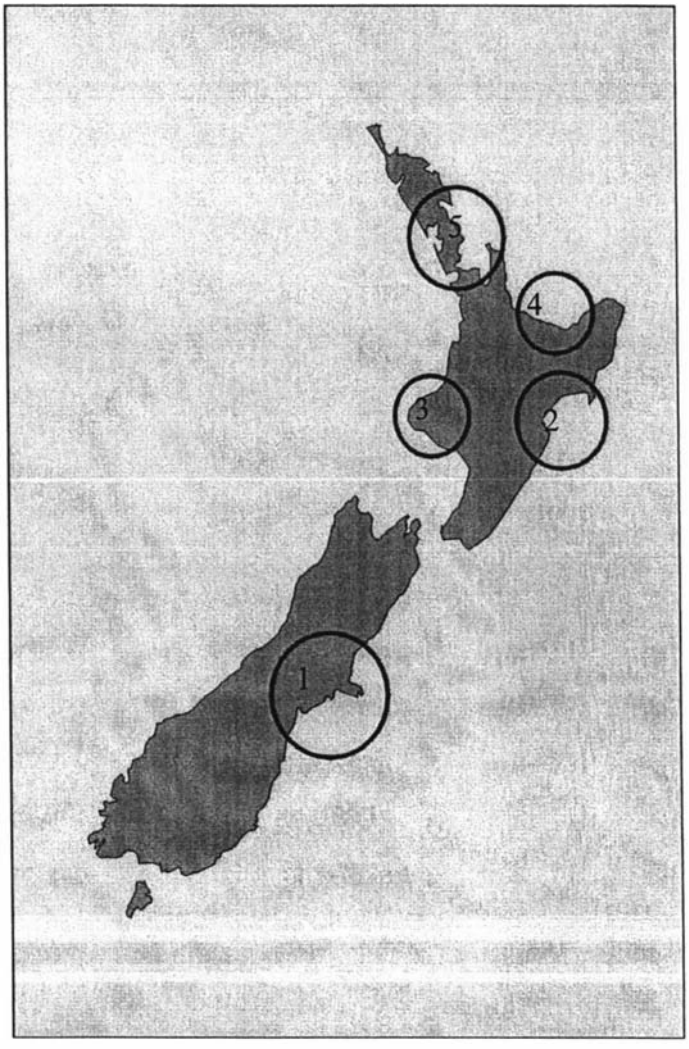


Figure 3.1. Map of geographical regions from which the schools were randomly sampled.

Twenty-eight schools participated in the study. The following table details the number of schools from each area that participated.

Table 3.1

Number of Participating Schools by Geographical Area (N = 28)

Geographical Areas	1	2	3	4	5	Total
Number of Schools	4	7	7	5	5	28

The 28 schools ranged from small rural to large urban. Table 3.2 presents the numbers of urban and rural schools in each of the five geographical locations.

Table 3.2

Participating Schools by Urban and Rural Location (N = 28)

Geog Location	Area 1	Area 2	Area 3	Area 4	Area 5	Total N	Total %
Urban	3	7	4	3	4	21	75%
Rural	1	0	3	2	1	7	25%
TOTAL	4	7	7	5	5	28	100%

There are a greater number of schools in this study from urban and provincial areas, with fewer from rural areas. However, the numbers of participating urban and rural schools in each of the geographic areas reflect a proportional representation of schools across New Zealand. Ministry of Education statistics (2006) show that at the time of data collection 500,292 primary and secondary students attended schools in very large urban areas centred on a city or major urban area. Main urban areas have a minimum population of 30,000. Furthermore 58,286 students attended schools in secondary urban areas (population between 10,000 and 29,000) and 82,457 attended schools in minor urban areas (smaller towns with populations between 1,000 and 9,999). A further 72,630 students attended small rural schools (in rural centres with populations between 300 and 999). In the present study Area 5 (a large metropolitan area) included more urban schools with the participating rural school being situated some distance from the city. Although Area 2 consisted of a number of urban schools, they were mostly situated in smaller provincial towns.

School Size

Table 3.3 shows the number of small, medium and large schools in each of the five locations in comparison to national figures.

Table 3.3

Participating Schools Characterised by Size (N = 28)

Size	Area 1	Area 2	Area 3	Area 4	Area 5	Total	Total %	NZ	NZ %
Small	2	1	2	1	0	6	21%	1,027	46%
Medium	2	4	3	2	4	15	54%	820	37%
Large	0	2	2	2	1	7	25%	380	17%
TOTAL	4	7	7	5	5	28	100%	2,227	100%

In this study there are fewer small schools (n = 6) and more medium (n = 15), and large (n = 7) sized schools when compared to the total number of small, medium, and large schools in New Zealand. Although the participating schools were randomly selected and stratified by both size and decile, the final selection was dependent on which schools chose to participate in the study.

School Decile Ranking

Table 3.4 categorises the schools according to their low, medium, or high decile ranking, in comparison to New Zealand schools overall.

Table 3.4

Participating Schools Characterised by Decile (N = 28)

Decile	Area 1	Area 2	Area 3	Area 4	Area 5	Total	Total %	NZ	NZ %
Low (1-3)	1	4	3	1	3	12	43%	682	31%
Med (4-7)	1	3	2	4	1	11	39%	869	39%
High (8-10)	2	0	2	0	1	5	18%	676	30%
TOTAL	4	7	7	5	5	28	100%	2,227	100%

Although fewer high decile schools participated on the study, the numbers relating to decile 1 and 10 schools in the present study are consistent with data reported by the Education Review Office (1998).

Type of School

The participating schools were either full primary, contributing, intermediate, or integrated schools. Table 3.5 presents the numbers of schools according to type.

Table 3.5

Participating Schools Characterised by Type (N = 28)

Type	Area 1	Area 2	Area 3	Area 4	Area 5	Total N	Total %	NZ N	NZ %
Full Primary	1	2	2	2	3	10	36%	1,210	54%
Contributing	3	3	4	3	2	15	53%	881	40%
Intermediate	0	2	1	0	0	3	11%	136	6%
Integrated	0	1	1	0	0	2	7%	218	9%
TOTAL	4	8	8	5	5	28	100%	2,227	100%

Note. Integrated schools are not counted in the final total because they are already included in the full primary figures.

More contributing schools participated in this study than full primary or intermediate schools. However, the contributing schools do not cater for Year 7 and 8 students so when the three intermediate schools and two integrated schools are added to the full primary schools numbers, the numbers of participants are consistent with the numbers of students attending full primary schools in New Zealand. The following table provides an overall description of each participating school.

Table 3.6

Characteristics of Participating Schools (N = 28) and Children (N = 2,077)

Area	School N	N Children	Type	Size	Decile
1	1	12	Contributing	Small	High
1	2	68	Contributing	Medium	Medium
1	3	96	Full Primary	Medium	High
1	4	22	Contributing	Small	Low
2	5	23	Full Primary*	Small	Medium
2	6	98	Contributing	Large	Medium
2	7	86	Contributing	Large	Large
2	8	50	Contributing	Medium	Low
2	9	98	Full Primary	Medium	Low
2	10	131	Intermediate	Medium	Low
2	11	135	Intermediate	Medium	Medium
3	12	154	Intermediate	Large	Medium

Area	School N	N Children	Type	Size	Decile
3	13	92	Full Primary	Large	Medium
3	14	58	Contributing	Medium	Low
3	15	65	Full Primary*	Medium	Low
3	16	26	Contributing	Small	High
3	17	29	Contributing	Small	High
3	18	50	Contributing	Medium	Low
4	19	73	Full Primary	Medium	Medium
4	20	116	Contributing	Large	Medium
4	21	109	Contributing	Large	Medium
4	22	98	Contributing	Medium	Low
4	23	22	Full Primary	Small	Medium
5	24	69	Full Primary	Medium	Low
5	25	97	Contributing	Large	Medium
5	26	80	Full Primary	Medium	Low
5	27	55	Full Primary	Medium	Low
5	28	65	Contributing	Medium	High

Note. *Denotes Integrated School status

The preceding discussion demonstrates that the self-selection process resulted in a reasonably representative sample of schools. This next section outlines the characteristics of the study's participating students.

Characteristics of the Sample: Students

A total of 2,077 children in 28 schools participated in this study. The number of participants from the 28 schools ranged from 12 to 154. Data were obtained on the gender, age, and ethnicity of the participating children. Nearly half (49.9%) of the sample was boys and just over half (50.1%) was girls. Table 3.7 describes the ages of the children at the time of the survey.

Table 3.7

Age of Participating Students: Percentages

Age	8 yrs	9 yrs	10 yrs	11 yrs	12 yrs	13 yrs	14 yrs
%	0.3	16.5	30.4	25.0	18.1	9.6	0.1

The age distribution conforms to the pattern that can be expected for students in Years 5 to 8 classes. The age range was between 8 and 14 years, however the majority of the children were between 9 and 12 years of age. Over half of the sample comprised 10 and 11-year-olds, reflecting the fact that more 10 and 11-year-old children from contributing schools participated than those from full primary or intermediate schools.

Children were asked to identify their ethnicity. From their responses 21.3% identified themselves as indigenous Māori; 62.3% identified themselves as New Zealand European and 16.4% identified themselves as belonging to another ethnic group (mainly Pacific Island and Asian). The relatively high proportion of Māori and other cultural groups presents a demographic reflection of the areas from which the schools were drawn.

Geographical Location

Characteristics of the sample, in terms of the numbers of participating students from each geographical area are now presented in Table 3.8.

Table 3.8.

Participating Students: Numbers and Percentages by Geographical Area (N = 2,077)

	Sample		NZ Population	
Area	N	%	NZ N	NZ %
1	198	10	51,114	20
2	621	30	20,697	8
3	474	23	15,025	6
4	418	20	33,554	13
5	366	18	138,700	54
TOTAL	2,077	100	259,090	100

Although the schools were randomly selected, they had the choice of opting in to the study. So while numbers are sufficiently large for each of the geographic regions, children from Area 5 are under-represented and children from the provincial regions of Area 3 and Area 2 are over-represented.

School Size

Table 3.3 presented data on the comparison of different sized schools across the geographic regions, and now Table 3.9 shows the number of participating *students* attending those small, medium, and large schools in comparison to the total number of students from each school size in New Zealand (based on the number of children enrolled in each school).

Table 3.9

Number and Percentage of Participants According to School Size (N = 2,077)

School Category	N Schools	N Participants	%	NZ students	NZ %
Small	6	134	6%	20,926	8%
Medium	15	1,288	62%	94,452	36%
Large	7	655	32%	143,712	55%
Total	28	2,077	100%	259,090	100%

The spread of participating schools and students within this sample generally fits the pattern of school sizes in New Zealand although more participants in this study were drawn from medium sized schools. While 6 small schools compared to 7 large schools were included in the sample, the larger schools had more students, therefore only every second class within the larger schools was randomly selected and invited to participate.

School Decile Ranking

Table 3.10 presents the number of participants from schools according to their decile ranking.

Table 3.10

Numbers and Percentages of Participants by School Decile Ranking (N = 2,077)

School Category	N Schools	N Participants	%
Low	12	862	41.5
Medium	11	890	42.9
High	5	325	15.6
Total	28	2,077	100.0

These data show that more of the children in this sample were from low and medium decile schools than high decile schools, but that sufficiently large numbers came from each type of school for comparisons to be made.

Type of School

Table 3.11 presents data on the number of participating children who attended the various types of schools (contributing, full primary, intermediate, and integrated full primary).

Table 3.11

Type of School by Number and Percentages of Participating Children (N = 2,077)

	Participants	
Type of School	N	%
Contributing	984	47.4
Full Primary	673	32.4
Intermediate	420	20.2
Integrated Full Primary	88	4.2
Total	2,077	100.0

Note. Integrated schools are not counted in the final total because they are already included in the full primary figures.

Participation Rate

Table 3.12 presents data on the participation rate for each school. The participation rates are shown according to the schools' geographic location, size, decile, and type of school.

Table 3.12

Participation and Agreement Data for Each School (N = 2,077)

School	Size	Decile	N Participants	N Participant Refusal [1]	Participation Rate %
16	Small	High	26	0	100
9	Medium	Low	98	3	97
5	Small	Medium	23	1	96
8	Medium	Low	50	2	96
12	Large	Medium	154	7	96
14	Medium	Low	58	3	95
10	Medium	Low	131	8	94
13	Large	Medium	92	6	94
15	Medium	Low	65	4	94
2	Medium	Medium	68	5	93
6	Large	Medium	98	7	93
3	Medium	High	96	9	91
11	Medium	Medium	135	13	91
7	Large	Large	86	12	88
4	Small	Low	22	7	76
1	Small	High	12	4	75
17	Small	High	29	1	97
18	Medium	Low	50	5	91
19	Medium	Medium	73	0	100
20	Large	Medium	116	5	96
21	Large	Medium	109	7	94
22	Medium	Low	98	7	93

School	Size	Decile	N Participants	N Participant Refusal [1]	Participation Rate %
23	Small	Medium	22	1	96
24	Medium	Low	69	6	92
25	Large	Medium	97	15	87
26	Medium	Low	80	8	91
27	Medium	Low	55	3	95
28	Medium	High	65	8	89
Total			2,077	157	93

Note. [1] Each individual child was counted as a refusal rather than counting families with several children as just one refusal.

The study had a high student participation rate. Table 3.12 shows that the overall rate of participation was 93%, with participation in schools ranging from 75% to 100%. Twenty-three schools had a student participation rate of over 90%. Only 7% of parents declined participation. A small number (23) of information letters were "returned to sender". In these instances the children concerned did not participate in the survey. Overall, out of 2,236 parents who were sent letters, 10 expressions of concern were received (either by phone or letter) about the use of the passive consent procedure. These concerns were all responded to individually. The high participation rate of this study therefore confirms that the passive consent procedure has given more children the right to choose whether they would participate.

Survey

To protect confidentiality an anonymous survey was used. A survey was considered the most appropriate way to address the aims of the research and to freely allow children an avenue to express their views. Survey methodology is considered the most valid and reliable way to collect data when: (1) the topic is sensitive because an interview could be seen to intrude on privacy; (2) an interviewer may be regarded as someone who can impose sanctions on the interviewee, (in this case, reporting the abuse) or as someone who can exploit vulnerable research populations (in this case,

children); or (3) an interviewer can unduly scrutinise the interviewee (Cohen et al., 2000).

Consideration of the survey instruments used by Finkelhor and Dziuba-Leatherman (1994), Richters and Martinez (1993), and Straus and Gelles (1986) aided the design of the *Children's Experiences of Violence Questionnaire* (CEVQ). Studies conducted in the United States (Reiss et al., 1993), Scotland (Anderson, Kinsey, Loader, & Smith, 1994), and New Zealand (Hilton-Jones, 1994) provided guidance for the methodology employed to yield data regarding the prevalence and incidence of children's experiences of violence and to obtain information about the impact and consequences of these violent events. Those earlier studies, as well as more recent studies (see Finklehor, Ormrod, Turner, & Hamby, 2005) indicated that there are advantages in directly surveying children rather than relying on reports from professionals or public agencies. Self-report studies are more likely to elicit accurate incidence and prevalence figures because many incidents of violence involving children are not reported to authorities. The questionnaire was also designed to yield information on the culture of schools. CEVQ items relating to the characteristics of schools were structured on the seminal study by Rutter, Maughan, Mortimore, and Ouston (1979) that explored the effects of schools on students. To avoid the risk of children left feeling distressed on completion of the questionnaire, the abuse items were presented first, followed by more general items about the characteristics of schools.

A pilot study was used to determine its suitability for children aged between 9 and 13 years and to assess the effectiveness of the survey procedures. The wording and format of the CEVQ were piloted to eliminate ambiguous results due to incorrect wording of the questions. Children were consulted about the choice of appropriate wording. Peart, Foley, and Henaghan advise (2003) that child-centred information must be available to children in a form and language they can understand. Therefore the use of child language in the questionnaire and information forms, such as the definitions of physical, emotional and sexual violence, was intentional. The children who participated in the pilot study helped to align the definitions to fit the youth culture. For example, emotional violence was defined as *being threatened, called names, ganged up on, left out, not spoken to, narked on, gossiped about and having tales told about me.*

Description of the *Children's Experiences of Violence* Questionnaire (CEVQ)

The questionnaire employed multiple choice and open-ended questions to examine children's perceptions of their violent experiences. To invite a wide range of responses in terms of what children find "sad" or "frightening", the questionnaire included questions such as: What has happened to you since the Christmas holidays? The next series of questions involved different types of events that they had or had not ever experienced: direct violence (physical, emotional, and sexual); witnessed violence and other traumatic events. The children rated the impact of these events on their lives. Another question asked participants to identify the worst events that had ever happened to them in their whole life. Both the incidence and prevalence of children's experiences of violence were examined. Incidence studies measure either the number of individuals who are victimised by violence over a specified period of time (usually one year) or the number of violent incidents over a specified period of time, or both (Lapsley, 1993). In contrast, prevalence studies measure the number of individuals who have ever been victimised in a specific population (in this study, children are the target population), rather than studies of reported cases (Lapsley, 1993).

In order to explore comparisons of violence in relation to particular aspects of school climate (e.g., the presence or absence of recognised anti-bullying protective measures) the children were asked for their own perspective about the perceived characteristics of their school. The final section of the questionnaire asked about the participants' own involvement in antisocial activities.

The questionnaire was divided into six sections and the first question asked: "What has happened to you since the Christmas holidays?" Asking the questions about what has happened "since Christmas" is considered to be an effective framework for helping children to focus their timeline, because it is easier for children to recall events within a given timeframe (Straus & Gelles, 1986). The aim was to invite a wide range of responses in terms of what children find sad or frightening. The children were asked to identify the events that they found fearful or hurtful in their lives since Christmas. Informed by other researchers (Lapsley, 1993; Reiss et al., 1993; Straus & Gelles, 1986) this question was open-ended to determine the salience of opinions, because the events that stand out for the child may be mentioned first.

Next, a list of events was presented. Respondents were asked to indicate whether or not they had ever experienced direct violence (physical, emotional, and sexual); witnessed violence and other traumatic events. Close attention was paid to distinctions between severe and milder forms of violence in this questionnaire (as recommended by Lapsley, 1993), in an effort to differentiate abuse from other forms of violence. If participants responded that they had experienced one or more of these violent events, the next question asked: (1) whether the events had happened since Christmas (that is, within the last year) and how often (if it happened more than 10 times they wrote L for "Lots"; (2) where it happened (at home, school, or other place); and (3) who did it (friend, sibling, other children, parent/caregiver, teacher, other known adult, stranger, don't know).

The participants also rated the effect of these events on their lives. To determine salience the participants ranked their experiences in terms of impact, using a Likert-type scale, where the respondents rated the impact by selecting one of five options, ranging from "not at all" to "very much". This scale was designed to yield information about children's perceptions of the trauma and nature of the impact and whether the severity, intensity, frequency or continuation of the event might affect its impact.

If children had experienced physical, emotional or sexual violence, they proceeded to answer four questions about their coping strategies, and in particular whether they coped alone, or with support from friends, family and teachers. Specifically, these questions were: (1) Did you feel it was your fault? (2) Could you stop it or make a difference to what happened? (3) Who else knew what happened? (4) Did they help, either then or later?

The next questionnaire item investigated other traumatic events that children might have experienced. Any number of overpowering events may constitute trauma (Atwool, 2000; Garbarino, 2001) and events that children consider to be traumatic were identified in the pilot study. These events included: deaths or accidents to someone close; parents separating; feeling lonely or unloved; being caught doing wrong things, having bad things happen to pets; having things stolen or the house burgled; as well as worrying about possible bad happenings. The children scored these events using the same format as the physical, emotional, and sexual violence items, that is, they indicated which events had ever happened to them, and if it had happened, (1) how often since Christmas? (2) where did it happen? (3) who did it? and (4) how bad was it? Again the children used the same Likert-type scale to rank the impact from not at all

(1) to very much (5). Another question asked participants to identify the three worst events that had ever happened to them in their whole life.

To explore comparisons of violence in relation to the characteristics of schools, (e.g., positive school cultures, or the presence or absence of anti-bullying protective measures) the children were asked for their own perspective about the perceived characteristics of their school. The children rated 10 items on the 5-point Likert scale. Those items were: (1) How much do you like going to school? (2) Can you concentrate and learn at school? (3) Is your school a safe place? (4) Is there a teacher to talk to if bad things happen? (5) Does everyone know the rules at your school? (6) Are some pupils at your school a bad influence on other children? (7) Do your teachers praise pupils? (8) Is there bullying at your school? (9) Do the teachers treat pupils fairly? (10) Overall, is your school a good school? These items were followed by two open-ended questions where the participants were invited to write what they liked about their school and to say how their school could be "made better for them".

The final section of the questionnaire asked participants to provide information on their involvement in antisocial activities. For these items the children indicated how many times (never; once or twice ever; once or twice a week; 3-10 times a week; more often) they had (1) threatened, frightened, left out, ganged up, or called other children names; (2) punched, kicked, or hit their siblings; (3) punched, kicked, or hit other children; (4) stole other children's belongings; (5) got drunk, doped, or sniffed; (6) ran away from home; or (7) shoplifted, stolen, burgled, tagged, or damaged property.

Further items assessed family and leisure patterns. Children were asked about whom they lived with, how many children were in their home, whether they were supervised after school, and whether their caregivers knew their whereabouts when they not at home. The children also indicated how many times a week they (1) did things at home with the family; (2) had friends to visit or vice versa; (3) did things in the neighbourhood; (4) hung around town; or (5) got bored. A copy of the CEVQ is presented in Appendix E.

Procedures

Data Collection

Data were collected from children in the 28 participating schools between the months of September and November. A time to conduct the survey was negotiated with each participating school. The survey was carried out in school time. An initial concern was whether a questionnaire conducted in the classroom would be the safest form of implementation. Pilot studies were conducted with individuals, small groups and classes. Individual interviews seemed to be a more intrusive strategy, whereas the classroom situation provided the most anonymity and the exploration of questions seemed to be accepted by children as consistent with other classroom activities. Alternative arrangements were made for non-participating children. Current classroom practices allow children to undertake different activities without feeling singled out, and none of the participating schools experienced any such difficulties. The children demonstrated that they felt safe and secure in their normal classroom setting, and the opportunity to stay and talk afterwards offered an additional buffer.

The questionnaire was administered to the students in each classroom by the researcher who is a qualified teacher. Standardised instructions were given to all participating children. Children's performance as research participants is determined by their developmental levels in relevant domains and also by the nature of the task (Dockrell, Lewis, & Lindsay, 2000). In the same way that it is inappropriate to expect a 5-year-old child to complete a written questionnaire it might also be inappropriate for a 10-year-old child with reading difficulties. To address this issue specific procedures were implemented. Questionnaire items were shown on overhead transparencies and the researcher read and clarified each question for the students as they wrote their answers on their own copies.

Provisions were made for students' privacy and confidentiality while they were completing their questionnaires. Although they were reassured that it was not a test, the students did complete the questionnaire under test-like conditions: children were seated apart from each other and asked to remain silent during administration of the questionnaire. School personnel were not present while the questionnaire was administered to minimise the chance that children might feel inhibited.

Ethical Considerations

Granting children the right to express their experiences of violence raises ethical and methodological difficulties. Indeed, it is likely that most ethical guidelines could constrain efforts to allow children to describe their experiences of violence. The Massey University Human Ethics Committee approved the protocol for this study and the following discussion reports on the components required for approval, along with the ethical considerations raised by this research.

Passive Consent

Usual guidelines for ethical conduct in research with human participants require procedures for obtaining informed consent from research participants. Studies involving children normally require that active consent be obtained from parents, who sign and return a consent form, specifically stating that they give permission for their child to participate. If the consent form is not returned for any reason, the researcher is unable to include the child in the study. It is not unusual with active consent procedures that parents lose the form, forget, or for other reasons do not return the consent form, even though they may have no objection to their child's participation. In such circumstances children are denied the right to decide for themselves whether or not they wish to participate.

An alternative procedure is passive consent. Passive consent requires only parents who do *not* give their permission for their child to participate to sign and return the consent form. Parents who do not return the form are deemed to have given consent. Passive consent was viewed as an appropriate approach for studying children's perceptions of violence because, in line with Article 12 of UNCROC, this procedure gave children's rights to speak priority over parental rights to privacy.

While human ethics committees tend to require active consent from caregivers before children are eligible to participate, there is a growing international acceptance of the importance of allowing children to describe their views of what has happened to them (e.g., Hallett & Prout, 2003; United Nations, 1989; Hamby & Finkelhor, 2004). This is further brought into focus with the increasing realisation of how children have not had the opportunity to describe abuse experiences in previous studies. Active consent in this type of survey research can also lead to biases on significant demographic variables that may adversely affect the generalisability of the results. In

other words, while ethnic minorities, disadvantaged and at-risk subgroups are more likely to be eliminated from studies requiring active consent; passive consent procedures result in a more representative sample (Anderman, Cheadle, Curry, & Diehr, 1995).

Due to the similar nature of this study gaining access to children could have been problematic. Normally Ethics Committees insist that the active consent of the children's caregiver must also be obtained before the children are approached for their consent. Massey University's Ethics Committee also requires that children must be able to give their own consent if they are of an age to understand the nature of the project. It is generally recommended that this apply from around seven years of age. In New Zealand the Privacy Act gives both parents and adults control over their own information. In other words, the Privacy Act limits permission about the provision of information to the individual and there is no obligation under the act itself to obtain parental permission. However because schools are expected to work in partnership with parents it is more usual for parental permission to be sought in all matters relating to their children.

Peart, Foley, and Henaghan (2003) explain the two main contentious issues in research involving children as: (1) consent of the child or a proxy to the child's participation; and (2) risk of harm to the child. They state "the legal validity of consent depends on the competence of research participants to understand fully the nature of their involvement and on the absence of any improper influence or pressure in the consent process" (p. 271). Research involving children therefore can be problematic because of the imbalance of power between adults and children, however a landmark legal case challenged the previously held views regarding children's competence to be involved in decision making about matters that concern them. The U.K. House of Lords ruled in the 1985 so-called *Gillick versus West Norfolk and Wisbech Area Health Authority* case that children under 16 years of age who are able to demonstrate sufficient understanding and competence to make wise choices can give valid consent on their own behalf (Peart & Holdaway, 1998; Peart et al., 2003; Rutherford, 1999, p. 687, cited in Lyle, 2001).

Nesbitt (2000) poses the question, does researching children's perspectives call for different methods of data gathering and interpretation? In other words, whether and to what extent do children differ from adults as research participants? Smith and Taylor (2000) consider that critics of research involving the perspectives of children raise the developmental 'age and stage' debate by questioning children's competence and

maturity to articulate their own perspectives. Mason and Falloon suggest that age categorisations within childhood reflect an adult-centric hierarchical ordering of knowledge. They refer to the term "ruling relations" as defined by Smith (1999, p. 77, cited in Mason & Falloon, 2001), which, in the case of children, is taken to mean adults and their construction of adulthood, as the possession of maturity and reality. As adults become the gatekeepers' of children's knowledge (Carroll-Lind, Chapman, Gregory, & Maxwell, 2006) the age issue is examined in the children's rights discourse.

While legal opinions a few years ago would have favoured parents over children, this is no longer the case. A study conducted in Italy (Baldry, 2003) used very similar methodological procedures to the present study. Other New Zealand research has been done in this way; clearly this is not the first. Precedents regarding the juxtaposition of parents' and children's rights have been set at other New Zealand universities where these same issues were confronted and worked through (e.g., Children's Issues Centre at Otago University regarding *Counsel for the child study* and *Access arrangements for children following parental separation*). Similarly all procedures undertaken in the present study ensured that parental consent was informed and that parents understood their right to either give passive consent or active dissent. Parents were clearly given the choice of opting in or opting out of the project. This procedure has gained some acceptance for practical reasons and also because of the agreement among nations about the importance of hearing the voice of the child (UNCROC, 1989).

The choice of a passive consent procedure proved to be effective in obtaining a relatively high participation rate and enabled children the right to choose for themselves whether or not they wanted to participate. Seeking active consent from parents and caregivers may have denied some children their right to choose to participate and could have concealed abuse.

Confidentiality

A statement affirming the confidentiality of students' responses was included in the letter to parents and on the children's questionnaire. To protect their anonymity by ensuring that names could not be linked to the questionnaires, the consent forms with the children's names on were deposited in a collection box prior to starting the questionnaire.

It is possible that some children may have been concerned that the information obtained by the researcher would be passed back to the school, parents, or even peers (Dockrell, Lewis, & Lindsay, 2000). Therefore they were assured verbally and on their consent form that their answers were anonymous and confidential to the researcher and that no information on individual children would be made available to teachers, parents, or fellow pupils.

Provisions were made for children's privacy and confidentiality during the administration of the questionnaire by conducting the questionnaire in the same way that the students would complete a test in a classroom setting. To minimise possible test anxiety the children were told very clearly that it was not a test and there were no right or wrong answers, rather these steps were being taken to guarantee their anonymity and confidentiality in order to ensure that they could freely express their own views. The students very seriously went to some lengths to cover their work and refrain from talking.

It is possible with this type of research that parents may feel that their private lives are under scrutiny. In the present study, the view was held that protecting the rights of children was more important than parental rights to privacy regarding abuse in the home. As Perry (1997) suggested, violence and abuse are not private issues; they are social issues.

Minimising Harm

When children are involved in research their wellbeing should be paramount. Given the nature of the study a sensitive approach was taken to all stages of the research. This included giving children the choice as to whether they answered questions that caused discomfort (e.g., negative experiences that had happened to them or the disclosure of criminal activity within the family). The participants were also provided with an information form that listed toll-free telephone numbers of counsellors (see Appendix F). This procedure gave the child the option of accessing help without undermining the anonymity of the survey. As an added precaution, children in each class were instructed to place the form in their desk before beginning the questionnaire, to avoid children identifying themselves as having been abused because they took the information form. These procedures allowed children access to help and support that did not compromise their anonymity.

A number of children took the opportunity to use the free-phone offer. There were no hoax calls. On a few occasions children were obviously phoning to check whether there would be a voice at the other end. Some children simply phoned to say, "I've had a bad day" and welcomed the chance to talk about it. Others telephoned to say they were at home on their own and feeling lonely. The children told of their experiences of being bullied on the school bus, having no friends, and being sad about the death of a person or pet. In these telephone conversations a number of children commented on how much they enjoyed completing the questionnaire because it allowed them to voice their feelings. A common example involved grief, such as parental separation or the death of a family member. Children in these situations felt they could not discuss their feelings with parents for fear it would hurt or upset them.

The safety of participants is a major ethical issue and a number of procedures were taken to protect both the identity and the safety of the participants, so they did not experience negative consequences as a result of participating in the study. In consultation with the participating schools and the Office of the Commissioner for Children, effective ways to assist any children who disclosed abuse in the course of the research were set in place. First, the information letter to parents stated that the only exception to their child's guaranteed anonymity was if the children chose to identify themselves to the researcher as being at risk. Second, in consultation with the participating schools, strategies were introduced to assist and support children who disclosed abuse or bullying during the course of the research. The children were informed that by writing their name on the questionnaire, it would be assumed that they were requesting help, and that the researcher would return to the school to interview the child about their reasons for self-identification. If a child revealed that he or she had been abused or was at risk of being abused, the researcher (with the child's knowledge) notified the teacher and principal so that action was taken according to the school's policy for reporting child abuse.

Finally, once the questionnaires were completed and collected, the children were invited to share in a debriefing session where they participated in an informal class discussion about all the "good" things that had happened to them in their lives. As well as addressing the principle of minimising harm, this procedure was designed to bring a pleasant closure to the questionnaire activity.

Social Sensitivity

It is important to consider ethical issues related to culture. Knowing the cultural background of the participants provided an indicator that the sample population was representative of New Zealand schools, but it was not the intention of this study to compare cultures. This research study examined violence as it affects all children and did not examine the relationship of ethnicity to violence. Therefore bilingual units (Māori and English language) and Kura Kaupapa Māori (total immersion Māori language schools) were not included in the study. As a Pakeha (New Zealand European) teacher, the researcher had an obligation to be both aware and supportive of a school climate that recognises and values Māori cultural identity and was expected to maintain the "mana" (respect and dignity) of all students.

Research should benefit the participants and in accordance with the agreement made with participating schools a preliminary summary report of their individual results was written and sent to each school. A full data analysis of combined results from the participating schools is reported in the results chapter.

Summary

Chapter Three has outlined the techniques and procedures applied to this research study. A stratified random selection procedure resulted in 30 schools agreeing to participate, with 28 schools and 2,077 students comprising the final number of participants in the study. Demographics of the study were presented. Ethical considerations around the consent procedures played an important role in the design of this study. The choice of a passive consent procedure proved effective in obtaining a 93% participation rate overall and was a unique feature of the study.

A questionnaire was developed and piloted to gauge children's perceptions of their experiences of violence. Considered the most effective method for providing anonymity the questionnaire was administered in the students' classrooms where the exploration of questions was accepted by children as consistent with other classroom activities. The survey employed multiple choice and open-ended questions to examine children's perceptions of their violent experiences. Analyses of data obtained from this survey are presented in the next chapter.

CHAPTER FOUR

RESULTS

The results of analyses for 2,077 children across 28 schools who participated in this study are presented in this chapter. The numbers of respondents who answered particular questions vary. It was emphasised to each group of students before they began that they did not have to answer any questions they did not want to, so some children did choose not to answer particular questions. In other cases they did not need to answer particular questions. For example, if children answered: "No it has never happened to me", then the following questions: How often did it happen?; Who did it?; How bad was it? were not applicable. It was also necessary to omit particular questions from the questionnaire in some classrooms due to their specific time constraints (usually either Question 4 on "worst things" or the demographic information in 5). Specifically, 6 out of the 28 schools had one of their participating classes omit one question to ensure that the students got to either technology classes or interschool cross-country competitions on time. Consequently, because numbers of respondents vary for each question, percentages are based on the number of students who answered each particular question.

The results of the quantitative data are presented in tables with the interpretation of these results provided in the text. A variety of statistical techniques have been used to identify relationships between children's experiences of violence and the various outcome variables. Analyses of data comprised frequencies, bivariate correlations, *t*-tests and multiple regressions. Group comparisons measured the impact of violence. Direct occurrences and witnessed violence against children, adults and media violence were examined in relation to impact and comparisons were also made in relation to physical, sexual and emotional violence. Correlations were used to explore differences between the backgrounds of children and their experiences, and to present information on the children's evaluation of the impact of their experiences. In particular correlations explored the demographic, antisocial, coping and school variables and their relationships to impact. Multiple regressions predicted the moderating factors.

Qualitative data from the CEVQ are included in the form of quotes to describe the children's experiences. These quotes have been included to support the quantitative data

and to extend understanding of the violent events that children have experienced. Identifying details have been removed from quotations. In some cases the students' spelling and grammatical errors have been edited to ensure that readers are able to interpret what the child is saying. For example, "My mum has ben heard by my day. My dad has heart as to alot." The edited version of what this child is saying is: "My mum has been hurt by my dad. My dad has hurt us too, a lot."

The Nature and Extent of Violence for Children

The participating children were asked whether or not they had ever experienced a variety of events that were or might have been harmful to them, and in particular, their experiences of direct and indirect physical, emotional and sexual violence. Their violent experiences were categorised according to: "Who did it?" (that is, whether the violence was committed by an adult or another child); "Where did it happen?" (whether the events occurred at home or school), and whether the events had "happened since Christmas" (that is, within the last year). The children rated the impact of these events on their lives. These quantitative and qualitative results are organised and presented around the three research questions.

Research Question One:

What is the prevalence and incidence of different types and contexts of violence?

The first question examined the forms that violence can take and how often children are exposed to the various possible forms. To answer this question data were analysed to reveal the number of children who have ever been victimised (prevalence) and the number of violent or traumatic incidents that have happened to them within the last year (incidence). The types of violence experienced by the children are categorised as physical, sexual, or emotional.

Examining prevalence extends understanding of how common and widespread children's experiences of violence are and provides an estimate of the extent to which these forms of violence may occur in New Zealand. The participating children were asked whether or not they had either directly or indirectly experienced physical, sexual, or emotional violence at some time in their lives. Children were asked whether within

the past year, the violence happened to them and whether they had witnessed violence against others. These are events in which the violence was not directed at them, but was directed at others in their presence (e.g., family members, friends, peers, or others within their own communities). The children were also asked about their exposure to violence in the media such as television, videos and movies.

To determine incidence rates children who reported experiences of either physical, sexual or emotional violence were asked to indicate in the frequency ("ever happened") columns how many times they had experienced this form of direct or indirect violence within the last year. For example, if they had experienced two events, they wrote "2" in this column. If it had happened to them more than 10 times within the last year they wrote "L", meaning "lots" in this same column to indicate their high number of experiences involving that particular form of violence.

The data, by their very nature, are skewed because the numbers of students who reported no direct or indirect involvement varied according to the type of violence (physical, sexual, or emotional). For example, many children had not experienced any form of sexual violence. Rather than reporting the measures of central tendency where the real average of the children who experienced violence will be deflated, the results for all single response answers are presented as frequencies and valid percentages.

Prevalence of Physical Violence

The prevalence of physical violence was explored first. Prevalence studies measure the number of individuals who have ever been victimised. The participating children were asked whether or not they had ever been directly or indirectly exposed to physical violence. In the questionnaire physical violence was defined as "*being punched, kicked, beaten or hit, or getting into a physical fight (punch up).*" In the present study 63% of children reported having directly experienced physical violence at some time in their lives. Two thirds reported having witnessed physical violence directed at other children, and nearly 90% reported having seen violence in the media. Although less common, still more than a quarter of the children reported witnessing violence against adults. Table 4.1 presents prevalence rates for children's experiences of physical violence.

Table 4.1

Number of Children Reporting Physical Violence (N = 2,077)

	Prevalence	
Physical Violence	*N*	%
Direct experience	1,248	63.2
Witnessed against children	1,257	66.3
Witnessed against adults	498	27.3
Witnessed in the media	1,678	89.5

The participants reported a range of direct experiences of physical violence. Some children simply described what happened to them (*"I've been punched, grabbed by the throat and hung over a trellis and then thrown on the concrete"; "I have been hit by a steel bar"; "I get hidings all the time and some people hurt me").* Children clearly were able to make a distinction between physical violence and what might be considered less serious incidents such as physical punishment by parents. When recounting their victimisation some children identified adults as the perpetrators (*"Kicked by somebody I don't know because my dog went on their land"; "My family start to shout at me and beat me more if I don't finish my homework"; "I got into a fight with my Mum and I hit her. Then she hit me with the broom and kicked me out of the house").* Others described being victimised by other children (*"A boy that is at* [Name of School] *beats me up on the way home"; "Some kids tease me and do wrestling moves on me and I'm getting scabs and bruises").*

These quotes, illustrate the nature of the participants' direct experiences of physical violence. The prevalence rate for direct violence was high, but the rates for witnessing physical violence in the media and against children were even higher. While witnessing physical violence against adults was the least prevalent form of violence, the nature of that form of violence was severe, as described by a number of children. For example, *"I saw people having a fight. Blood on walls and carpet. Screaming and yelling."*

Much of the witnessed physical violence against adults involved family members. Indicative comments were: *"My Mum and her boyfriend always get in arguments and I've seen heaps of things get smashed"*, and *"I watched my aunty and my dad fighting with knives inside at night."* The majority of witnessed violence occurred in the

children's homes, but some children did describe witnessing family violence elsewhere. For example, *"My Dad hurt Mum in town and made her mouth bleed."* The following quote reflects how children describe such events from a child's perspective:

> *"In the Christmas holidays my family went away with our friends, but Dad wasn't allowed to come because Mum had a something order out on him. But on the third day we were there Dad came because he needed to talk to Mum and Dad and my Dad's friends got in a big fight with me, all my sisters and the rest of the camp watching."*

New Zealand's Domestic Violence Act (1995) defines *hearing* violence as a form of child abuse and a number of children reported hearing rather than observing the violence that occurred. For example, one child wrote, *"I woke up and heard fighting and banging the walls. I thought my Mum's boyfriend was beating her up."* Another child said, *"When my Mum and Step-Dad broke up they started hitting each other. I was in my room in bed."*

The most prevalent form of physical violence was watching violence on television, videos or movies. A prevalence rate of 90% suggests that most children living in New Zealand have witnessed violence on television, videos or movies. Most children simply described what they had watched: *"I have seen someone get killed by a gun on TV", "Watching people on TV who are dying in hospital* [from violence] *Middlemore and stuff like that", "Seeing people on TV drinking and being stupid and crashing."* Movies specifically depicting family violence were frequently mentioned: *"Well I watched 'Once Were Warriors' when Jake Heke had beaten Beth up and gave her a black eye and bruised her face."* The children's developmental age was sometimes reflected in their descriptions of the movies: *"When the Germans killed Jews in the war on TV. When you say candyman four times, he comes and kills you with a hook."*

Incidence of Physical Violence

The next item in the questionnaire asked the children who were victims of physical violence to write how many times it occurred within the last year. As previously explained, if they had experienced two events, they wrote "2" in this column. If it had happened to them more than 10 times within the last year they wrote "L",

meaning "lots" in this same column to indicate their high number of exposures to physical violence.

The following table presents data on the incidence of physical violence within the year of data collection. Incidence represents the number of times the children reported they had been exposed to physical violence "since Christmas", by either witnessing or directly experiencing it themselves. In this analysis, as in all analyses, it should be noted that of the 2,077 possible participants, children who had not experienced these forms of violence or did not answer the question were classified as not applicable. Furthermore, although the questions specifically asked them to report how often (i.e., the number of times) they had experienced direct and indirect physical violence, 28 children (3%) of the sample wrote they had experienced zero number of physical violence incidents when really that answer was not one of the options because if they had not experienced physical violence, they were not required to have answered that questionnaire item.

Table 4.2 categorises the incidence of physical violence into groups, presenting the numbers of children who experienced physical violence 1 or 2 times, 3 to 6 times, 7 to 9 times, or more than 10 times within the year of data collection.

Table 4.2

Incidence of Experiencing Physical Violence

Occurrences	1-2	3-6	7-9	> 10
Direct experience	407	252	35	372
Witnessed against children	477	235	19	346
Witnessed against adults	210	60	5	88
Witnessed in the media	218	223	37	959

The data indicate that the majority of children had been exposed to either a small amount, or a lot of, physical violence, with the most frequent amount of exposure being in the "1 to 2 times" range (except for witnessing media violence). The table presents conflated categories but when the number of incidents is further disaggregated, 228 children (21%) reported they had experienced physical violence once within the past year and indicates the likelihood that the majority of these children experienced a single incident. Witnessing physical violence on television, videos or movies, was by far the

most common form of witnessing, with 66% of children reporting they had watched physical violence in the media more than 10 times within the past year.

Some children who reported experiences of physical violence also reported experiencing a range of different types of violent events. These events ranged from physical (*"I've been hit with metal or any objects my parents pick up. My Dad abused my Mum when I was young"*) and sexual violence (*"When I got beaten up and when I got chased by a man. When my sister got beaten up by my Dad and when my sister got raped"*) to potential kidnapping (*"Dad coming and trying to kidnap me. Mum and Dad fighting"*). These children all described more than one victimisation, but some children reported multiple experiences:

> *"I have been followed by a man six times. I got taken off my Dad. Dad went to jail for beating my Step-Mum and assaulting her. I got punched by someone in my family. But I am not telling who. And my Mum is having a bad time at the moment at home."*

The children knew their perpetrators, except for 3% of cases involving strangers (e.g., when reporting violence that happened in the community). Most perpetrators were reported to be in the children's home or school environment but other known adults, perhaps extended family members or family friends perpetrated 15% of the violence against children. Siblings were the most frequent perpetrators of physical violence against children (29%). However, when "friends", "classmates", "other children", and "siblings" were combined into a single group representing all children, children committed 81% of physical violence against other children. These findings are consistent with the children's responses that 77% of the violence occurred either at home (36%) or school (41%).

Prevalence of Sexual Violence

In the CEVQ sexual violence was defined as *"having unwanted sexual touching or being asked to do unwanted sexual things."* Prevalence rates for sexual violence were much lower than for either physical or emotional violence. Of the children who answered this question, 192 children (11%) said they had directly experienced sexual violence in some form, 7% reported witnessing sexual violence against adults and 10% reported that they observed other children being asked to perform unwanted sexual

activities or having unwanted sexual touching. Most children's experiences of sexual violence were reported as being witnessed on television, videos or movies (see Table 4.3).

Table 4.3

Number of Children Reporting Sexual Violence (N = 2,077)

	Prevalence	
Sexual Violence	*N*	%
Direct experience	192	10.6
Witnessed against children	159	9.5
Witnessed against adults	123	7.4
Witnessed in the media	1,109	63.9

Children's descriptions of sexual violence mainly included reference to their direct victimisation (*"My granddad was trying to kiss me but I pushed him away", "Me getting touched down there, being raped").* Sometimes other children were involved (*"This man said if we don't run he will rape me. And getting a hiding").* Fewer comments were made about indirect (witnessing) of sexual violence, although one girl wrote: *"When I had to watch my best friend made to drop her pants in front of a man and have him smash a beer bottle in her face."* These quotes describe serious incidents of sexual abuse. Unlike physical and emotional violence, more adults (41%) were identified as perpetrators of sexual violence against children, with "other known adults" being the largest group of offenders at 19%, followed by strangers (13%) and parents and caregivers (9%).

Incidence of Sexual Violence

Children were also asked to report on the incidence of their direct and indirect experiences of sexual violence within the past year. Incidence represents the number of times the children reported their experiences of sexual violence "since Christmas" by either witnessing or directly experiencing it themselves.

For the children who directly experienced sexual violence, "once or twice" was the most frequently reported incidence. Forty-three percent of the participants reported a single incident. Of the small minority who reported direct experiences of sexual abuse,

15% said they were experiencing this on a number of occasions ("lots"). Table 4.4 presents the results of how often children had experienced sexual violence as either a victim or witness, with the incidence figures categorised into groups (1 to 2 times, 3 to 6 times, 7 to 9 times, and more than 10 times).

Table 4.4

Incidence of Experiencing Sexual Violence

Occurrences	1-2	3-6	7-9	>10
Direct experience	77	26	2	20
Witnessed against children	70	23	4	23
Witnessed against adults	47	10	3	25
Witnessed in the media	396	171	14	281

With the witnessing of sexual violence, more children reported watching it in the media rather than directly witnessing sexual violence against adults or children. Again some participants, within the year of data collection, mostly witnessed sexual violence on either 1 or 2 occasions or more than 10 occasions (against both adults and other children).

Prevalence of Emotional Violence

In the CEVQ emotional violence was defined as being threatened, called names, ganged up on, left out, not spoken to, narked on, gossiped about, and having tales told about me. First, children were asked whether emotional violence had ever happened to them as well as whether they had witnessed emotional violence against others. In this study 88% of the participants reported witnessing emotional violence against other children and 80% reported directly experiencing emotional violence themselves.

Table 4.5 indicates that emotional violence was experienced both directly and indirectly by at least 80% of the respondents. The data yielded high rates of prevalence for direct experience as well as for witnessing emotional violence against other children and witnessing emotional violence in the media. Not so prevalent was witnessing emotional violence against adults, although almost a quarter of the sample did report witnessing emotional violence against adults. Table 4.5 presents data on the prevalence of children's experiences of emotional violence.

Table 4.5

Number of Children Reporting Emotional Violence (N = 2077)

	Prevalence	
Emotional Violence	*N*	%
Direct experience	1,528	80.2
Witnessed against children	1,831	88.2
Witnessed against adults	410	23.8
Witnessed in the media	1,380	79.9

The participating children expressed a number of comments that support the quantitative data on emotional abuse. Their quotes could be categorised according to the types of emotional violence described in the CEVQ definition. First children reported being threatened: *"A boy is saying he is going to get me and my friends back for telling on him. He has hurt us before."* Some of the threats were made by telephone (e.g., *"I got a phone call and they said some scary stuff and they knew my name because they asked for me")* or followed up by letter *("My friend rang me up and said mean things to me. Then she sent me a horrible letter that said I was a big show off").* Children also reported sexually explicit threats (*"A boy threatened to rape me and threatened to kill me"*). These quotes demonstrate the serious nature of some of the threats made against children.

Children predominantly described bullying type incidents, perpetrated by other children. Name-calling was a very common occurrence. Indicative comments included: (1) "*People tease me because I shake when I am nervous and they call me Shivery Shake"*; (2) *"In my class there is a boy. He has been calling me names since last year"*; (3) *"When my friend said I was a chicken by not climbing a tree"*; and (4) *"When I was playing basketball someone said that I suck."* There were also instances of racial bullying: *"A girl wouldn't let me sit by her because she said you are an Indian. I am an Indian. When I was with my friends and she said I am a piece of dirt."*

Other children reported feeling ganged up on *("When I catch the High School bus they repeatedly trip me up because they like to see me hurt and all because I go to a different school"*; and *"When some boys in my class have been mean to me. They take my things and will not give it back to me*"). Most of the comments applied to the school

context although the following quote reflects being ganged up on at home. *"My brother's friend shut me in a room and only he was in there."*

More often children reported being excluded in the playground (e.g., *"Left out when I want to play games"*, and *"Name calling; nobody wants to play with me").* The term *relational aggression* defines many of the "ganged up on", "left out" and "gossiped about" comments (*"When my friends be nice to me one day and the next day they fight me or hurt my feelings").* Some comments were particularly abusive: *"Being left out and being told that flies were hanging around me."*

The last phrase in the CEVQ definition of emotional abuse comprised being gossiped about and the target of rumours. Children described a variety of reasons for why other children gossiped about them: (1) *"People get mean to me because my Mum goes out with heaps of men";* (2) *"My friends turned against me and are being very mean. They always have something to tease me about – like my teeth, what I look like, my reactions and who I hang around with";* and (3) *"A girl spread it around the school that I liked a boy when I didn't because she was jealous of me."*

Less frequently the emotional violence involved adults. Indicative comments to illustrate this form of emotional violence included: *"Dad's girlfriend yells at me and swears at me when Dad isn't around for no reason",* and *"People said I would be traded for a dog."*

Incidence of Emotional Violence

As with physical and sexual violence, the children were asked "how often" they had experienced emotional violence within the year of data collection. Table 4.6 presents the results of how many times the children reported experiencing emotional violence. The incidence data are categorised into groups (1 to 2 times, 3 to 6 times, 7 to 9 times, and more than 10 times).

Table 4.6

Incidence of Experiencing Emotional Violence

Occurrences	1-2	3-6	7-9	> 10 times
Direct experience	402	274	30	608
Witnessed against children	342	236	16	488
Witnessed against adults	155	69	2	99
Witnessed in the media	245	199	13	699

An important finding is the high number of children (n = 608) who said that they had experienced emotional violence more than 10 times in the last year, compared to the next highest number of children (n = 204) who said they had experienced emotional violence only once. Even when the numbers are combined to indicate children experiencing emotional violence once or twice within the last year (n = 402) more children experienced "lots" of emotional violence rather than one or two incidents. Recurrent episodes of emotional violence also occurred with children's reporting of witnessing emotional violence, whether it was watching it happen to children, adults or on television, videos, or movies. More children reported witnessing over 10 incidents of emotional violence, with the next highest frequency being watching it happen just once. For example, 60% reported watching emotional violence on television, videos or movies, compared to 21% who said they only watched it once or twice. Similarly 45% of children reported being bystanders to the witnessing of emotional violence against other children more than 10 times within the last year, compared to 31% who witnessed this happen once or twice. When children described their own direct experiences, they reported that the majority (86%) of emotional violence was perpetrated by children (40% by friends and classmates, 31% by other children, and 15% by their siblings).

Correlational Analysis of the Prevalence of Violence

Correlation analyses (see Table 4.7) were performed to examine relationships between variables. Contrary to expectations most of the correlations were weak and therefore of minimal practical significance.

Table 4.7

Correlation Table for Prevalence of Different Types of Violence

Moderating Variables	Physical Violence				Emotional Violence				Sexual Violence			
	To Me	To Chn	To Adults	In Media	To Me	To Chn	To Adults	In Media	To Me	To Chn	To Adults	In Media
Antecedents/Demographics												
Age	-.30	.02	.03	.10**	.01	.08**	.02	.12**	-.02	-.02	.03	.13**
Gender	.23**	.12**	-.01	.12**	-.12**	-.05*	-.03	-.04	-.10**	-.02	.01	.05
No. Children in home	.06*	.06*	0.8**	.01	-.02	.03	.07**	.03	.05	.07**	.02	.02
Size of School	.04	.04	-.03	.01	-.02	.03	-.02	-.02	-.01	-.01	-.05	.02
Decile Rating	-.06**	-.08**	-.10**	-.02	.01	-.02	-.04	-.03	-.04	-.05*	-.03	-.03
Constructive Family and Leisure												
Adult at home	-.07**	-.03	-.11**	.03	-.03	-.01	-.06*	-.02	-.03	-.07**	-.06*	.05*
Know whereabouts	.16**	.12**	.14**	.09**	-.03	.04	.09*	.09**	.07**	.10**	.09**	.13**
Home with family	.06*	.04	.03	.04	.05	.07**	.04	-.01	.4	.01	.01	.07**
Friends visit	-.02	-.01	-.05*	-.01	.08**	-.02	-.04	-.06*	-.01	-.02	-.04	-.05
Neighbourhood	-.03	-.03	-.02	-.01	.06*	-.07*	-.06*	-.02	.01	-.01	-.02	.06*
Hang round town	-.05*	-.09**	-.15**	-.09**	.01	-.07**	-.09**	-.12**	-.05*	-.06*	-.08**	-.15**
Bored	-.05	-.03	-.07**	-.07**	-.05*	-.01	-.04	-.02	-.02	-.05	-.06*	-.10**
Antisocial Behaviour												
Threatened other children	.16**	.12**	.12**	.14**	.08**	.11**	.10**	.12**	.05*	.04	.02	.18**
Hit siblings	.19**	.10**	.08**	.13**	.03	.05	.12*	.01**	.06*	.05	.04	.14**
Hit other children	.24**	.18**	.18**	.13**	.03	.14**	.17**	.12**	.05	.06*	.07**	.17**
Stole children's belongings	.09**	.05*	.11**	.04	-.01	.03	.12**	.06*	.09**	.07**	.14**	.10**
Drunk	.15**	.10**	.15**	.07**	-.03	.03	.11**	.05	.15**	.10**	.13**	.13**
Run away	.12**	.09**	.10**	.08**	.06*	.04	.11**	.05	.10**	.07**	.18**	.10**
Vandalised	.14**	.12**	.17**	.08**	.04	.08**	.12**	.07**	.11**	.06*	.08**	.13**
Coping Strategies												
My Fault	-.22**	-.08**	-.03	-.05	-.12**	-.08**	-.09**	-.04	-.37**	-.13**	-.17**	-.05
Could stop it	-.11**	-.05	.03	-.02	-.08**	-.11**	-.04	-.03	-.27**	-.20**	-.22**	-.04
Someone helped	.18**	-.08**	-.04	-.05	-.09**	-.10**	-.04	-.04	-.37**	-.26**	-.16**	-.05
School Culture												
Like School	-.11**	-.07**	-.02	-.09**	-.02	.01	-.03	-.03	.03	.04	-.02	-.10
Can Learn	-.13**	-.09**	-.14**	-.01	.03	.03	-.09**	.02	-.07**	-.01	-.06*	-.01
Safe School	-.12**	-.12**	-.04	-.01	-.07**	-.05*	-.05*	.02	-.02	-.01	-.02	-.03
Teacher to talk to	-.05*	-.03	.01	-.06**	-.05	.02	-.04	-.03	.01	.02	.01	-.10**
Know rules	-.04	-.06**	-.02	-.04	-.03	-.04	-.04	-.03	-.01	-.01	-.04	-.07**
Children bad influence	.12**	.10**	.10**	.07**	.07**	.07**	.09**	.07**	.03	.03	.04	.10**
Teachers praise	-.05**	-.04	-.05*	-.04	.01	.01	-.03	-.02	-.06**	-.06*	-.08**	-.04
Bullying at school	.15**	.13**	.13**	.06*	.07**	.10**	.09**	.05*	.09**	.06*	.09**	.11*
Fair teachers	-.07**	-.07**	-.03	-.06*	-.04	-.02	-.05*	-.05*	-.04	-.04	-.05	-.08**
Overall good school	-.12**	-.11**	-.05*	-.10**	-.04	-.03	-.06*	-.06*	-.01	-.03	-.02	-.12**

Note. * $p < .05$, ** $p < .01$

Students reporting physical violence directed at them were more likely to be male ($r = .23, p < .01$). Gender was very weakly associated with other forms of violence, with girls more likely to report emotional ($r = -.12, p < .01$) and sexual violence ($r = -.10, p < .01$).

The relationship between antisocial behaviour and other forms of violence were not noteworthy. An association was found between children's experiences of direct and indirect physical violence and their own self-reports of participating in antisocial behaviour, for example, threatening other children; hitting, punching, or kicking their siblings as well as other children; stealing other children's belongings, getting drunk or high on drugs; running away and vandalising or burgling property. However, with the

largest correlation being that children who experience physical violence are more likely to hit, punch or kick other children ($r = .24, p < .001$) these very weak correlations are of little practical significance. While a pattern was found between antisocial behaviour and witnessing sexual violence in the media, most of the contextual and demographic factors were not systematically associated with children's experiences of violence.

Moderate relationships were found between the prevalence of the different types of violence and the coping variables, with the largest correlations involving sexual violence. Children victimised by sexual violence reported that they did not feel it was their fault ($r = -.37, p < .01$), or that they could stop it from happening ($r = -.27$, $p < .01$), and that people who knew did not help them to cope ($r = -.37, p. < .01$). Their coping strategies were also important to their witnessing of sexual violence against other children or adults. Children's coping experiences are further examined in relation to the third research question.

Research Question Two:

How do children report the effects of violent events?

Children who experienced violent events were asked to rate the impact of those violent experiences. For all forms of violence (physical, sexual, and emotional) a '1 to 5' Likert-type scale was used to measure the impact, with '1' indicating little or no impact and '5' indicating the highest level of impact.

These results are presented as frequencies, valid percentages, means and standard deviations. These data are further illuminated by the individual voices of children who chose to describe the impact of their experiences of physical, emotional, and sexual violence. Independent sample *t*-tests were conducted to examine whether there are any differences on the averages of different scores on the independent variables. The robustness of *t*-tests to take account of skewed data make these tests particularly appropriate for the nature of this study where data may be skewed for the following reasons:

Respondents answered the questionnaire items as they applied to themselves, that is, if children had only experienced emotional violence they answered those questions, but not the ones related to other forms of violence.

Different numbers were also reported depending on whether children said it happened to them, they watched it happening to adults, other children or in the media. For example, of the 441 children who reported witnessing physical violence against adults, 232 rated its impact highly, compared to 712 children who highly rated the impact of watching physical violence in the media, however a far greater number of children (1,514) had seen violence in the media as opposed to real life.

It is likely that children will be affected by their experiences differently; therefore they are likely to also rate the impact of similar events differently. To explore the impact of physical, sexual, and emotional violence on children *t*-tests determined whether there were significant differences between the means of the impact variables ("happened to me", "watched happening to other children", "watched happening to adults" and "watched on TV, videos, or movies"). Similarly *t*-tests were the most appropriate statistical test for comparing the impact of the different forms of violence (refer Table 4.11).

The Impact of Physical Violence

Table 4.8 presents data for the children who reported their experiences of physical violence as having a high or very high impact on their lives by rating the impact at either high ('4') or very high ('5') on the rating scale. The table presents data on the impact of both direct and indirect physical violence on the participating children.

Table 4.8

The Impact of Physical Violence on Children: Overall and High Impact

	Overall			High Impact	
Target of Violence	*N*	*M*	*SD*	*N*	%
Direct experience	1,189	2.6	1.4	306	25.8
Witnessed against children	1,159	2.9	1.4	385	33.3
Witnessed against adults	441	3.5	1.3	232	52.6
Witnessed in media	1,514	3.1	1.7	712	47.0

The impact of direct violence on children was not as severe as the impact of witnessing violence. In this survey, witnessing physical violence against others was reported as having a greater impact on children than when the violence actually

happened to them. Witnessing physical violence against adults was the least common experience (441 reported this) but more children (over half of the sample) rated the impact of watching violence against adults as having the greatest affect on them.

Separate *t*-tests were performed to compare the impact of the different forms of violence on the participating children. The *t*-test statistics for physical violence all revealed the differences to be outside of those expected by chance. Witnessing violence against other children had more impact ($M = 2.9, SD = 1.4$) than directly experiencing physical violence themselves ($M = 2.6, SD = 1.4$), [$t_{(1,158)} = 7.76, p < .001$], $d = .21$. Witnessing of violence against adults also had more impact ($M = 3.5, SD = 1.3$) than if children directly experienced physical violence themselves ($M = 2.6, SD = 1.4$), [$t_{(440)} = 13.54, p < .001$], $d = .67$.

The *t*-test comparing means of the impact of witnessing physical violence against children and witnessing physical violence against adults resulted in a significant difference, $t_{(440)} = 8.79, p < .001$, in that witnessing physical violence against adults had more impact ($M = 3.5$, SD 1.3) than children witnessing physical violence against other children ($M = 2.9, SD = 1.4$), $d = .44$.

Witnessing physical violence in the media had more impact ($M = 3.1, SD = 1.7$) than if children directly experienced physical violence themselves ($M = 2.6, SD = 1.4$), [$t_{(1,513)} = 12.44, p < .001$], $d = .32$. Witnessing physical violence in the media also had more impact ($M = 3.1, SD = 1.7$) than children witnessing physical violence against other children ($M = 2.9, SD = 1.4$), [$t_{(1,513)} = 5.52, p < .001$], $d = .13$. Furthermore, the *t*-test comparing means of the impact of witnessing physical violence against adults and witnessing violence in the media resulted in a significant difference, $t_{(1,513)} = 8.32$, $p < .001$, in that witnessing physical violence against adults had more impact on children ($M = 3.5, SD = 1.3$) than watching physical violence in the media ($M = 3.1$, $SD = 1.7$), $d = .26$.

More children commented on the impact of witnessing violence against adults than other forms of witnessing. Most described the impact of family violence: (1) "*I have watched my Mum and Dad fight and I have been scared that they might break up and it is very frightening for me and my sisters*"; (2) "*When my aunty's boyfriend beats her it makes me afraid if I am watching*"; and (3) "*People screaming. I was scared when my Mum and her girlfriend were fighting and her girlfriend was hitting my Mum.*"

Some children described how a parent's behaviour could affect them in a number of ways. For example,

"When my Mum and Dad had a fight and my Dad wouldn't stop beating my Mum up and I can't stop thinking about it, but they don't do that any more and when my Dad yells at my brother and the way he speaks."

Another child wrote:

*"My Dad was beating up my Mum. And I could never sleep properly. My Dad had pushed her down the steps when she was having a baby. At school everyone well not everyone but they tease me and my Dad is a real **** because he always hits me and it was over when he stopped drinking."*

The following quote describes the impact for one boy who witnessed community violence.

"Me and my cousin went for a walk, we saw a car and it banged into another car and the back driver got out and smashed the front car window and stabbed him with a knife and then they swore, yelled and done [sic] hand signals. Me and my cousin were very shocked."

Sometimes witnessing violence that involved the adults they love most posed a dilemma for children, as in the case of the child who said, *"I've been scared when my Mum and Dad fight because I don't know who to go to."* A few children tried to rationalise or excuse violent behaviour. For example, *"My Dad has pushed my Mum and my brother because he was really upset."*

Witnessing physical violence against other children also had a higher impact on children than directly experiencing violence themselves. One girl reflected: *"Watching my brother hurt my friend with a hockey stick and I cannot get to sleep."*

More children (n = 1,514) have witnessed violence through the media. Furthermore t-tests revealed the impact of media violence to have more impact on children than direct violence and also more impact than witnessing physical violence against other children. Children described the impact that specific programmes had on them: (1) "*I watched an alien programme that made me scared and Middlemore and things that happen to people – like getting trapped, dog attacks*"; (2) *"Scream 1 and 2. But it was fun at the time, but after it was not so good"*; and (3) *"I am not afraid of anything. But I am afraid for the poor people who died in the river.* [TV News?] *When I'm big I'll help all the poor people."*

Of the 1,189 children who answered this question, 306 (26%) rated the impact of physical violence on them as high or very high ('4' or '5' on the rating scale). For the children who did highly rate the impact of their direct experiences, the following quotes provide a qualitative insight into how some of the children reported the effects of physical violence. One child reported violence at home. *"What made me afraid was my step dad put a hole in the door to get into my room and got in and winded me. That was real scary."* Another child described the impact of community violence:

> *"Something happened to me. I was beaten on a scale of 4. My Mum rang the Police and they put him on a course thing. I got a split lip and I haven't wanted to go walking really alone since. I had my one and a half year old sister in my arms at the time. He punched me on the cheek bone, then kneed me in the lip on the way down."*

These quotes support the quantitative data and indicate the negative impact of physical violence, and in particular, witnessing of physical violence on children.

The Impact of Sexual Violence

In this section of the CEVQ, 176 children reported the impact of sexual violence on themselves, 131 reported the impact of watching sexual violence happen to children, 96 reported the impact of watching sexual violence happen to adults, and a larger number of children (n = 954) reported the impact of watching sexual violence on television, videos or movies. Table 4.9 presents the results for the children who rated the impact of these events as a high ('4') or very high ('5') on the rating scale.

Table 4.9

The Impact of Sexual Violence on Children: Overall and High Impact

	Overall			High Impact	
Target of Violence	*N*	*M*	*SD*	*N*	%
Direct experience	176	3.7	1.5	110	62.5
Witnessed against children	131	3.5	1.5	67	51.1
Witnessed against adults	96	3.5	1.4	52	54.2
Witnessed in media	954	3.2	1.6	443	46.3

Of the 176 children who answered this question, 63% rated it as having a high or very high impact on their lives, with the majority of children who experienced this form of violence awarding it the highest impact score ('5') on the rating scale. Unlike physical and emotional violence where witnessing it happen to others had more impact, the impact of sexual violence was greater when the violence happened directly to the child. Often disclosure about sexual violence involved the breaking up of the family unit. One girl wrote, *"I have been sexually abused and just had it sorted out and I had to move away from all my friends and family. My brothers always hurt me by calling me names about my weight and size."* Another said, *"My Dad went to jail for raping me."*

As with direct sexual violence the highest impact score was consistently reported for all forms of witnessed sexual violence. In other words, more children rated the impact of sexual violence at '5' on a scale of 1 to 5 for all four situations (happened to me, watched happening to children, watched happening to adults, and watched on TV). An interesting finding is that whereas a number of children wrote comments to describe the impact of physical and emotional violence, the quotes relating to sexual violence described what happened without any elaboration about its impact. Some participants indicated in their comments that they found the topic too hard to write about.

Separate *t*-tests were performed to compare the impact of sexual violence on different children. No significant differences were found between the means of the impact of sexual violence on children and the impact of watching sexual violence happen to other children. Nor were any significant differences found between the means of the impact of sexual violence on children and the impact of watching sexual violence happen to adults.

The *t*-test comparing means of the impact of sexual violence on children and the impact of witnessing sexual violence in the media resulted in a significant difference, $t_{(953)} = 9.93, p < .001$, in that directly experiencing sexual violence had more impact on children ($M = 3.7$, $SD = 1.5$) than witnessing sexual violence in the media ($M = 3.2$, $SD = 1.6$), $d = .32$. No significant differences were found between the means of the impact of witnessing sexual violence against children and the impact of witnessing sexual violence against adults.

Witnessing sexual violence against children had more impact ($M = 3.5$, $SD = 1.5$) than witnessing sexual violence in the media ($M = 3.2$, $SD = 1.6$), [$t_{(953)} = 5.99$, $p < .001$], $d = .19$. Witnessing sexual violence against adults also had more impact

(M = 3.5, SD = 1.4) than witnessing sexual violence in the media (M = 3.2, SD = 1.6), [$t_{(953)}$ = 5.10, p< .001], d = .20.

The Impact of Emotional Violence

Table 4.10 presents the results for the children who rated the impact of emotional violence as a high ('4') or very high ('5') on the rating scale.

Table 4.10

The Impact of Emotional Violence on Children: Overall and High Impact

	Overall			High Impact	
Target of Violence	*N*	*M*	*SD*	*N*	%
Direct experience	1,460	2.8	1.4	449	30.8
Witnessed against children	1,165	2.8	1.3	342	29.4
Witnessed against adults	363	3.3	1.4	164	45.3
Witnessed in media	1,220	3.0	1.6	495	28.6

Of the 1,460 children who answered this question, 31% rated its impact as high or very high on the rating scale. These results suggest that for children, emotional violence has a high psychological impact, as indicated by the percentage of children who rated its impact as a '4' or '5' on the rating scale. In this survey emotional violence was experienced more frequently than other forms of violence and the impact was greater for this form of violence than for physical violence. Quite noticeably, the least frequently mentioned experience (witnessing emotional violence against adults) had the highest impact on the children who experienced this situation. Similar to the physical violence findings, although it was reported less frequently (n = 363), watching emotional violence happen to adults had the most impact.

Separate t-tests were performed to test for differences when comparing the impact of emotional violence on different children. No significant differences were found between the means of the impact of emotional violence on children and the impact of witnessing emotional violence against other children. The t-test comparing means of the impact of emotional violence on children and the impact of witnessing emotional violence against adults resulted in a significant difference, $t_{(362)} = 6.01$, $p < .001$, in that witnessing emotional violence against adults had more impact on children (M = 3.3,

SD = 1.4) than directly experiencing emotional violence themselves (M = 2.8, SD = 1.3) d = .37.

Witnessing emotional violence in the media had more impact on children (M = 3.0, SD = 1.6) than directly experiencing emotional violence themselves (M = 2.8, M = 1.4), [$t_{(1,219)}$ = 3.46, p < .001], d = .13. Also, witnessing emotional violence in the media had more impact on children (M = 3.0, SD = 1.6) than witnessing emotional violence against other children (M = 2.8, SD = 1.3), [$t_{(1,219)}$ = 3.46, p = <.001], d = .14. However, the t-test comparing means of the impact of witnessing emotional violence against adults and the impact of witnessing emotional violence in the media resulted in a significant difference, $t_{(1,219)}$ = 7.19, p = <.001, in that witnessing emotional violence against adults had more impact (M = 3.3, SD = 1.4) than witnessing emotional violence in the media (M = 3.0, SD = 1.6), d = .20. Witnessing emotional violence against adults had more impact on children (M = 3.3, SD = 1.4) than witnessing emotional violence against other children (M = 2.8, SD = 1.3), [$t_{(362)}$ = 6.01, p = <.001], d = .37.

The t-tests indicate that out of 1,165 children who answered this question, watching emotional violence or bullying happen to others had more impact than if children had been bullied themselves. While the quantitative data revealed that witnessing emotional violence had the most impact, the participating children chose to report the effects of their own victimisation. The qualitative data reports the children's perceptions of the impact of emotional violence according to the definitional categories listed in the CEVQ. First the impact of being threatened or teased is outlined: (1) *"I have eczema on and around my eyes and it hurts my eyes and it hurts me when people tease me about it"*; (2) *"My friend said I was going to get a bash from a fifth former in college. It has been going for ages but I'm still afraid. It's stopped now but still I'm scared"*; and (3) *"When people tease me and are trying to hurt me it makes me afraid."*

One boy described the effect of being called names. He wrote, *"A few months ago I got beaten up outside school on the way home. And I'm getting peed off. I feel like I'm going to scream. I'm sick and tired of people calling me names like 'Hey fatso don't squash me.' I'm not. I'm big but what have I done anything to them."*

For some children the level of emotional abuse forced them to change schools. *"At my other school I was constantly picked on and it was so bad I had to leave the school and come here."* Many children expressed the effect of feeling left out. An indicative comment was:

"My feelings have been hurt when my ex-best friend dumped me for her worst enemy who is now her best friend. Someone called [name of child], my ex-best friend, said that I am a BITCH and she is going to give me a hiding."

The children's comments confirm that bullying can involve both physical and emotional violence and causes great distress to its victim. As with physical violence the impact was worse when the emotional violence involved adults. One child wrote: *"When older people come up to me and say I am going to beat you up, that is when I am afraid."*

According to New Zealand's Domestic Violence Act (1995) children are considered emotionally abused when they are put in the position of hearing the occurrence of violence. Typically this type of abuse occurs in the family home and children can be affected as much by hearing as witnessing violence. For example, *"My Mum and her boyfriend argue when I'm in bed. It's freaky"*; and *"I hate it when my Mum and Dad fight at night when I'm awake. I get afraid."*

Finally, it was important to compare the impact data for all three forms of violence. Table 4.11 compares the impact of physical, emotional, and sexual violence that children personally experienced. Only data involving the children who rated violence that happened to them as '4' or '5' on the rating scale are presented.

Table 4.11

Comparison of the Impact of Different Types of Direct Violence on Children: Overall and High Impact

	Overall			High Impact	
Type of Violence	*N*	*M*	*SD*	*N*	%
Physical Violence	1189	2.6	1.4	306	25.8
Emotional Violence	1460	2.8	1.4	449	52.3
Sexual Violence	176	3.7	1.5	110	62.5

While far less children have been exposed to sexual violence, the ones who have experienced this form of violence reported its affect to be of higher impact. Although twice the number again reported experiencing the impact of physical violence, only a quarter of those children rated their experiences at a '4' or '5' on the rating scale. Investigation of the measure of central tendency indicates that the sample mean more

accurately reflects the impact on children who have been abused and shows that less children on average rated the impact of physical and emotional violence as high or very high, compared to the children who experienced sexual violence.

Independent sample *t*-tests were performed to compare the means for physical, sexual and emotional violence. The *t*-test comparing means of the impact of physical violence and the impact of emotional violence resulted in a significant difference, $t_{(1,459)} = 5.72, p < .001$, in that emotional violence had more impact ($M = 2.8$, $SD = 1.4$) than physical violence ($M = 2.6, SD = 1.4$), $d = .14$. This is an important finding. However, the *t*-test comparing means of the impact of emotional violence and the impact of sexual violence resulted in a significant difference, $t_{(175)} = 7.82, p < .001$, in that sexual violence has more impact ($M = 3.7$, $SD = 1.5$) than emotional violence ($M = 2.8$, $SD = 1.4$), $d = .62$. In addition, the *t*-test comparing means of the impact of physical violence and the impact of sexual violence resulted in a significant difference, $t_{(175)} = 9.59, p < .001$, in that sexual violence had more impact ($M = 3.7, SD = 1.5$) than physical violence ($M = 2.6$, $SD = 1.4$), $d = .76$.

Comparisons across forms of violence resulted in stronger differences than within forms of violence. In other words, physical violence had stronger differences to sexual violence than, for example, the differences between physical violence and indirectly witnessing violence in the media.

Summary of *t*-test Results

All types of witnessing physical violence (against children, against adults, and in the media) had more impact on children than their own direct experience of violence. Witnessing physical violence against adults and in the media both had more impact on children than witnessing physical violence against other children. Witnessing violence against adults, however, had more impact than witnessing physical violence in the media. The summary of those *t*-tests indicates that physical violence involving adults had the most impact on children.

Similar to physical violence, witnessing emotional violence in the media and against adults had more impact on children than direct exposure to emotional violence. While witnessing emotional violence against adults and in the media also had more impact than witnessing it against children, witnessing emotional violence against adults had more impact than watching it in the media.

Sexual violence elicited some different results. Children reported their direct experiences of sexual violence as having more impact (in contrast to physical and emotional violence). Real life sexual violence had more impact on children than watching it in the media. When comparing the different types of violence, the results indicate that while emotional violence was related to higher impact on children than physical violence, sexual violence had the most impact of all three forms of violence.

In most measures of impact, witnessing violence had more effect on children than direct exposure to violence. In all cases, witnessing the different forms of violence against adults had the most impact. Except for sexual violence, even watching violence on television, videos or movies had a greater impact than direct exposure to physical and emotional violence.

Correlational Analysis of the Impact of Violence on Children

Similar to the analyses regarding prevalence the relationships found in the impact analyses were generally weak and therefore of little practical significance. Of interest are the correlations that were not found to be significant (i.e., decile, number of children in the home). The following table presents these results.

Table 4.12

Correlation Table for Impact of Different Types of Violence

	Physical Violence				Emotional Violence				Sexual Violence			
Moderating Variables	To Me	To Chn	To Adults	In Media	To Me	To Chn	To Adults	In Media	To Me	To Chn	To Adults	In Media
Antecedents/Demographics												
Gender	-.01	.11**	.07	.04	.13**	.09**	.13*	.01	.16*	.09	.05	.07*
Age	-.20**	-.14**	-.07	-.02	-.14**	-.10**	-.15**	-.01	-.03	-.10	-.12	.01
No. Children in home	.01	.04	.16**	.07*	.03	.05	.12*	.07*	.11	.10	.10	.02
Adult at home	.06	.03	.04	.02	.06*	.04	.08	.04	.05	.08	.10	.07*
Parents know whereabouts	.05	.01	-.06	.01	.04	.08**	-.05	.01	-.03	-.10	-.05	.03
Constructive Family and Leisure												
At home/family	.07*	.01	-.04	.03	-.03	-.04	.06	.01	.03	-.11	-.19	.05
Friends	.03	-.01	.09	-.02	.06*	.02	.05	-.02	.01	.01	-.05	.02
Neighbourhood	.02	.05	.08	.01	.02	.06	.06	.04	.20*	-.13	.09	.02
Hanging around town	.03	-.01	-.04	-.05	.01	-.03	.02	-.05	.04	-.09	.01	-.07*
Get bored in spare time	-.07	-.08*	.01	-.04	-.08**	-.05	-.10	-.04	.04	.05	-.06	-.06
Antisocial Behaviour												
Threatened other children	.01	-.01	-.02	.03	.01	.02	.06	.04	.01	-.04	-.06	.06
Hit, punched siblings	.05	-.01	-.01	.11**	.05	.07*	-.11	.07*	.05	-.07	-.17	.04
Hit, punched other children	.01	-.03	-.02	.05	-.02	.06	-.02	.05	-.05	-.06	-.13	.07*
Stolen other kids' belongings	.06	.03	.04	.03	.01	.05	.07	.06	.22*	.02	-.12	.08*
Got drunk, doped, sniffed	.08*	.04	.06	.09**	.01	.03	.12	.05	-.05	-.08	-.28*	.06
Run away from home	.08*	.09**	-.01	.09**	.08**	.07*	.03	.07*	.12	.01	-.11	.04
Stolen, burgled, or vandalised	.04	.05	.02	.10**	.01	.06	.10	.11**	.04	-.12	-.05	.08*
Coping Strategies												
My fault	-.01	-.03	-.08	-.06*	-.06*	-.07*	-.06	-.04	-.13	-.08	-.11	-.13*
Could stop it	.14**	-.03	.09	-.04	.04	-.06	.07	-.06	.16	.04	-.03	-.064
Others helped	.04	-.08	-.10	.01	.01	-.08*	-.08	-.06	.04	-.08	-.07	-.052

Moderating Variables	Physical Violence				Emotional Violence				Sexual Violence			
	To Me	To Chn	To Adults	In Media	To Me	To Chn	To Adults	In Media	To Me	To Chn	To Adults	In Media
School Characteristics												
Size of school	-.01	.05	-.03	.05*	-.04	-.01	-.06	.05	-.15	-.12	.02	.067*
Decile rating	-.01	-.01	-.10*	-.12**	.03	-.04	-.09	-.09**	-.08	-.02	-.02	-.07*
Like going to school	-.02	.05	.04	-.01	.08**	.10**	.10	-.02	.10	.01	.19	.02
Can concentrate/learn	-.15**	-.10**	-.05	-.03	-.04	-.01	.06	-.03	.01	-.07	.08	-.02
School is a safe place	-.08**	-.04	.02	-.02	-.06*	-.03	.01	-.01	-.05	.05	.23*	-.05
Teacher to talk to	.03	.08*	.18**	.05	.01	.11**	.13*	.05	.07	.15	.23*	.06
Everyone knows rules	-.01	-.04	.04	-.03	-.02	-.01	-.08	-.03	-.03	-.05	-.08	.02
Some pupils bad influence	.05	.12**	.10*	.12**	.09**	.06	.06	.10**	.10	.02	-.12	.11**
Teachers praise pupils	.02	.01	.01	.01	.07**	.03	.05	-.01	.20*	.06	.14	.03
Bullying at school	.12**	.14**	.11*	.09**	.16**	.19*	.04	.15**	.13	-.07	-.09	.16**
Fair Teachers	.01	-.05	.09	.03	.01	.03	.03	.01	.01	.07	.04	.01
Overall, school is good	-.06*	-.04	.07	.02	.01	.04	.12*	-.01	.07	.16	.21*	-.01

Note. * $p < .05$, ** $p < .01$

Some of these weak correlations did warrant further exploration in the multiple regression analyses and these are now briefly acknowledged. Higher impact of physical violence directed at the student was related to being younger in age ($r = -.20, p < .001$). There was a weak relationship between direct physical violence and being less likely to be able to concentrate and learn at school ($r = -.15, p < .001$). Higher impact of witnessing physical violence against adults was associated with the number of children living in the home ($r = .16, p < .001$) and whether children felt they had a teacher they could to talk to at school ($r = .18, p < .001$), thus suggesting that having a teacher to talk to may be a moderating factor that lessened the impact of witnessing violence against adults.

For emotional violence, higher impact of direct exposure was related to whether the student reported that bullying occurred at his or her school ($r = .16, p < .001$). Similarly, a relationship was found between higher impact of witnessing emotional violence against other children and children reporting that bullying happened at their school ($r = .19, p < .01$). These results suggest that much of children's emotional violence is experienced at school and that its impact was also increased if the children were bullied at school. Furthermore, higher impact of witnessing emotional violence in the media was also related to the reporting of bullying at school, however this was a weak correlation ($r = .15, p < .001$). Higher impact of witnessing emotional violence against adults was related to being younger in age ($r = -.15, p < .001$). Although a weak correlation, it seems likely that a younger a child would be more affected by emotional violence involving adults.

Higher impact of directly experiencing sexual violence was related to gender ($r = .16, p < .01$); "doing things in the neighbourhood" ($r = .20, p < .01$); "stealing other children's belongings" ($r = .22, p < .01$); and whether teachers praise pupils

($r = .20, p < .01$). It seems that the impact of sexual violence may have a higher impact on girls and that greater involvement in the neighbourhood (away from parental supervision) places children at greater risk of sexual victimisation. Furthermore higher impact of witnessing sexual violence in the media was related to children's perceptions of bullying at school ($r = .16, p < .001$). In other words if there was bullying at school, children were more affected by witnessing sexual violence in the media. A weak relationship was found between higher impact of witnessing sexual violence against adults and "getting drunk or high on drugs" ($r = -.28, p < .01$), which might contribute towards negative outcomes for children. Caution must be exercised when interpreting these results due to the small order of the correlations.

Research Question Three:

What factors mitigate and reduce the impact of violent events on children?

Research Question Three addressed some of the moderating factors that might mitigate and reduce the impact of violent and traumatic events on children. In particular the question examines how their coping experiences affect children who have experienced violence.

First this section examines some mitigating factors and useful responses in dealing with the aftermath of a child's violent event by presenting the data from the items in the questionnaire concerning aetiology, attribution, and ultimately the children's perceptions of their coping experiences. These questions focus on the examination of children's coping mechanisms in order to identify the protective factors that buffer children from the impact of violent and traumatic events.

The measure of impact (Likert-type scale for "how bad"?) was used alongside the coping questions to analyse the data. First, the data were presented in terms of descriptive reporting, by means of frequency of response percentages, and then by correlational analysis and multiple regression analyses. Next the data about building environments that reduce the probability of negative experiences are reported. This section focuses on the characteristics and cultures of schools that support children who have experienced violence.

Moderating Factors: Children's Coping Experiences

To explore children's perceptions about aetiology and the coping strategies they used for their experiences of physical, emotional and sexual violence, as well as other traumatic events, the participating children in this study were asked four questions: (1) Did you feel it was your fault? (2) Could you stop it or make a difference to what happened? (3) Who else knew what happened? (4) Did they help, either then or later? Children were given the option of responding to the questions by choosing "yes", "partly", or "no" to describe their agreement. Table 4.13 presents data that compares the three different types of violence in terms of the coping variables.

Table 4.13

Comparison of Different Types of Violence in Terms of Coping: Percentages

	Physical %			Emotional %			Sexual %		
	Yes	Partly	No	Yes	Partly	No	Yes	Partly	No
Did you feel it was your fault?	12	42	46	9	30	61	6	4	90
Stop it-or make a difference?	27	24	49	22	28	50	11	7	82
If anyone knew, did they help?	42	22	36	37	21	42	14	8	78

The children's perceptions of how they coped varied with the type of violence they experienced. Very few children attributed the blame to themselves for the physical (12%), emotional (9%) or sexual violence (6%) they experienced. Approximately half of the children exposed to physical or emotional violence felt that they might have been able to stop it or make a difference to the outcome. In comparison 82% of the children who experienced sexual violence perceived they could not stop their victimisation. Furthermore, while children who experienced physical violence (42%) or emotional violence (30%) believed they might have partly contributed to the violent outcome, this was the perception of only 4% of sexual violence victims. Of the children who had experienced sexual violence, 78% considered that those who knew about it had not helped them. Indeed sexual violence was the one experience where children stated very

strongly that it was not their fault, they could not stop it or make a difference to what happened, and those who knew did not help them to cope with their victimisation.

By far the majority of children reported that they were not to blame for violence that happened to them. More children also reported that they could not stop or make a difference to what happened to them. Physical violence was the only type of violence with supportive outcomes if people knew about what had happened. Children reported that other people did not help them to feel any better about the aftermath of either emotional or sexual violence. Sexual violence is the event in which the children considered that (1) they had less power; (2) the victimisation was not their fault; (3) they could not stop it happening; and (4) people who knew did not, or could not, help them. More children felt they were at least partly to blame for the physical and emotional violence that happened to them, and that they could have either helped to stop or prevent it happening to them.

Who the children informed about their victimisation (and whether they told anyone at all) depended on the type of violence they experienced. Friends and classmates were the most likely to be told about physical (28%) and emotional violence (36%), followed by parents or caregivers (27% and 19% respectively). Telling "no one" was the third choice for children who experienced emotional abuse (18% chose this option), but it was by far the most frequent response for children victimised by sexual violence (43%). Disclosing to friends was the next most frequently reported choice (18%), closely followed by parents (16%) for sexual violence. "Telling a teacher" was infrequently reported.

Multivariate Data Analyses

Relationships between variables were tested in part by examining correlations between the impact and demographic and coping variables. Table 4.14 presents these data to show the relationship of whether the children coped well or poorly with the aftermath of their violent physical, emotional or sexual experiences.

Table 4.14

Correlation Table for Relations Between Primary Variables of Interest

Moderating Variables	Impact of Physical Violence	Impact of Emotional Violence	Impact of Sexual Violence
	Antecedents/Demographics		
Gender	-.01	.13**	.16*
Age	-.20**	-.14**	-.03
Number children in home	.01	.03	.11
Adult at home	.06	.06*	.05
Parents know whereabouts	.05	.04	-.03
School Decile	-.01	.03	-.08
School Size	-.01	-.04	-.15
	Coping Strategies		
My fault	-.01	-.06*	-.13
Could stop it/make a difference	.14**	.04	.16
Others helped	.04	.01	.04

Note. * $p < .05$, ** $p < .01$

This correlation table presents the relationships between variables and, as an omnibus test, identifies the variables to be tested in the regression models. The impact of physical violence ($r = -.20, p < .001$) and emotional violence ($r = -.14, p < .001$) was greater for younger children. Children victimised by physical violence were the most likely to consider that they could have made a difference to the outcome ($r = .14$, $p < .001$). Although sample size may affect the strength of the relationship, significant correlation is a necessary condition for moderating and mediating regression analyses, in that a relationship must be established between variables prior to model testing (Baron & Kenny, 1986; Holmbeck, 1997).

Thus, multiple regressions were performed to test the relationship of children's coping skills on each of the impact variables (for physical, emotional, and sexual violence). Multiple regression allowed the independent variables to be entered separately to assess the importance of each variable controlling for variables entered earlier in the process. For example, the first variables entered were those demographic variables to be controlled for. After the amount of variance in the dependent variable was explained by the possible controls, then the coping variables were entered to determine whether they contributed above and beyond those variables previously

entered. A significant regression model indicates a moderating type of relationship between variables with the additive chain predicting the outcome. The amount of variance in the dependent variable explained by the moderating model was calculated and discussed.

One hypothesis for this study was that children's coping experiences could reduce the impact of violent and traumatic events. The following diagram depicts the hypothesised relationship being tested by the mediating models.

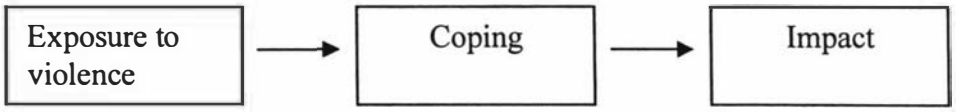


Figure 4.1. Hypothesised relationship between tested by the mediating models.

To examine the contribution of demographic variables and coping variables (regressors) to the prediction of the impact of violence on children, a series of multiple regressions were performed using the following entry format. First, the control variables of gender and age, number of children living in the home, adult supervision at home, parents knowing child's whereabouts, decile, and size of school were entered (Step 1). These variables were chosen because of significant correlations to coping or emphasis in the literature on their importance to violence (i.e., size, decile, number of children in the home). Second, children's self-blame attributions of their coping experiences (aetiology, blame, ability to prevent and level of support) were entered on Step 2. Finally, frequency (how often) violence happened to children was also added as the exposure variable to Step 2. The following three tables present the results of this two-step regression in relation to the three forms of violence being studied (physical, emotional and sexual violence). Table 4.15 shows the multiple regression analysis used to determine the predictive ability of the impact of physical violence on children's coping experiences.

Table 4.15

Regression Analysis for Predicting Impact of Physical Violence

	Physical Impact	
Variable	β	*S.E.*
Step 1: Demographics		
Gender	.02	.10
Age	-.19**	.02
Number of children in home	.01	.03
Adult at home	-.09*	.15
Parents know whereabouts	-.02	.06
School Decile	-.03	.07
School Size	-.01	.08
Step 2: Coping Experiences		
My fault	.01	.07
Could stop it, make a difference	.10*	.06
Others helped	.03	.06
Physical Violence – how often	.23**	.01

Note. *$p < .05$, **$p < .01$

Model F (11, 733) = 9.01, $p < .001$, Adjusted $R^2 = .11$

The overall regression model was significant and explained 11% of the variance in impact of physical violence. The strongest predictor of impact seems to be the frequency of victimisation. The more times physical violence happened, the greater the impact. This finding is consistent with existing literature. Emerging as a significant predictor ($p < .001$) for high impact was whether children felt they could have stopped or made a difference to the physical violence. Although a slight relationship, the impact was greater when children thought they could have done something to stop the violence. Age was significant with younger children being more likely to report a high impact from physical violence.

Using the same model for predicting the impact of physical violence, a multiple regression was conducted for sexual violence. The independent variables were entered as follows: Step 1 – gender, age, number of children in home, adult at home, parents know whereabouts, decile of school, size of school; Step 2 – "my fault", "could stop it,

or make a difference", "others helped", and "how often" did the sexual violence happen. Table 4.16 shows the multiple regression analysis used to determine the predictive ability of the impact of sexual violence on children's coping experiences.

Table 4.16

Regression Analysis for Predicting Impact of Sexual Violence

	Sexual Impact	
Variable	β	*S.E.*
Step 1: Demographics		
Gender	-.12	.35
Age	-.08	.15
Number of children in home	.01	.08
Adult at home	.12	.55
Parents know whereabouts	.26*	.20
School Decile	.03	.26
School Size	-.36*	.31
Step 2: Coping Experiences		
My fault	-.18	.23
Could stop it, make a difference	.17	.20
Others helped	.14	.19
Sexual Violence – how often	.04	.05

Note. $*p < .05$, $**p < .01$

Model $F(11, 71) = 2.31, p < .05$, Adjusted $R^2 = .15$

This model was significant and explained 15% of variance in self-report impact of sexual violence. The size of school that the child attended emerged as a significant predictor, meaning that impact of sexual violence was greater for children in small schools. "Knowing their child's whereabouts" was associated with an increased impact of sexual violence ($p < .05$). It is important to note that frequency of victimisation was not a significant predictor of impact for sexual violence. This may be because most children rated sexual abuse as high in impact regardless of the number of times it occurred, or Step 1 demographic variables explained most of the variance attributed to frequency.

A third multiple regression was run to predict the impact of emotional violence, using the same model as for physical and sexual violence. The independent variables were entered as follows: Step 1 – gender, age, number of children in home, adult at home, parents know whereabouts, decile of school, size of school; Step 2 – "my fault", "could stop it, or make a difference", "others helped", and "how often" did the emotional violence happen. Table 4.17 shows the multiple regression analysis used to determine the predictive ability of the impact of emotional violence on children's coping experiences.

Table 4.17

Regression Analysis for Predicting Impact of Emotional Violence

	Emotional Impact	
Variable	β	*S.E.*
Step 1: Demographics		
Gender	-.19**	.09
Age	-.12**	.02
Number of children in home	.01	.03
Adult at home	-.02	.15
Parents know whereabouts	.04	.06
School Decile	.05	.06
School Size	-.07*	.07
Step 2: Coping Experiences		
My fault	-.06	.07
Could stop it, make a difference	.05	.06
Others helped	.02	.05
Emotional Violence – how often	.24**	.01

Note. *$p < .05$, **$p < .01$

Model $F(11, 855) = 11.18, p < .001$, Adjusted $R^2 = .12$

The strongest predictor of impact for emotional violence was frequency of victimisation. High impact of emotional violence was related to the children's gender and age ($p < .001$). Girls and younger children reported the most impact. Although weak, the regression model also significantly predicted that if children attended a small

school, the impact of emotional violence was greater ($p < .05$). This model explains 12% of the variance of impact for emotional violence.

The regressions predicted different relationships, depending on the type of violence being analysed. More occurrences of physical and emotional violence increased its impact, however, this was not significant in relation to the impact of sexual violence. Physical and emotional violence had more impact on younger children, whereas age was not a predictor for sexual violence. With the coping variables the only significant predictor was that thinking they might have stopped it or made a difference increased the impact of physical violence.

Contrary to expectation the regressions found no relationships between children's experiences of physical, sexual, or emotional violence and the decile rating of their school. This is an important finding because it indicates that school factors other than socioeconomic ones can interact with child experiences to reduce the impact of violence on children.

Moderating Factors: Constructive Family and Leisure Variables

Descriptive data are presented on the demographic and constructive family variables to determine whether children's home circumstances played a role in preventing victimisation or violent and antisocial behaviour. Results showed that over two thirds of the participants reported doing things at home or with their family at least twice a week and nearly as many also visited with friends about as often as they did things in the neighbourhood. On the other hand "hanging around town" was only a regular activity for about a third of the children, with two fifths reporting "being bored" at least two or three times a week. A minority of children (about one in five or more) appeared to have relatively limited spare time options that involved family, friends or neighbourhood activities and frequently spent time "hanging about town".

Questions were also asked about their living arrangements and patterns of parental supervision. Of all the children who participated in the survey 91% had other children besides themselves living in their home; 89% of the respondents said that when they get home from school there is usually an adult or someone over 14 years there; and 11% did not have an adult supervising them after school. Furthermore, 67% reported that their parents always knew their whereabouts and who they were with; 19% said their parents

usually knew; 10% said they sometimes knew their children's whereabouts; and 4% reported that their parents never knew where they were or whom they were with.

The data indicate that at least two thirds of the participating children seemed to be well supervised. While 11% did not have adult supervision, no significant correlations were found between having an adult at home after school and the children's self reports of violence.

Children's experiences of violence and antisocial behaviour

Also of relevance to this study is whether children's perceptions of their violent experiences are linked to their self-reports of antisocial behaviour. This raises further questions as to whether the impact of violence predicts the likelihood that these children will engage in antisocial activities to a much greater degree than children who have not been exposed to violence. Also, are the children who reported a lack of support in helping them to cope with the violent event the ones more likely to engage in antisocial behaviour?

First the participating children were asked about their own involvement in antisocial activities. The results indicate that at least 3 times a week 18% have threatened, frightened, excluded, ganged up on, or called other children names; 32% have punched, kicked or hit their siblings; and 10% have punched, kicked or hit other children. Some children engaged in gang violence. (e.g., *"I had a fight to get in a gang and beat up someone while I was getting hit"*). Data also indicate that a third of the sample reported fighting or bullying siblings and at least 10% to 20% bully other children regularly. A very small minority of children reported engaging in other types of at-risk behaviour. For example: 3% have stolen other children's belongings; 4% have experimented with alcohol, drugs, or solvents; 2% have run away from home; and 3% have shoplifted, stolen, burgled, tagged, or damaged property.

The next stage of analysis was to determine whether the children reporting their own antisocial behaviour were the ones also exposed to the different types of violence. Correlations were used to describe the relationship between children's exposure to violence and their own self-reported antisocial behaviour. Results show children who experienced physical violence were more likely to be physically aggressive with other children ($r = .24, p < .01$). There were relationships between children who have had physical violence happen to them and their emotional bullying of other children ($r = 0.16, p < .01$). Other significant relationships involved children's exposure to physical violence with punching, beating or hitting their siblings ($r = 0.19, p < .01$). In

addition, children who experienced sexual violence were more likely to report running away from home ($r = 0.10, p < .01$) and getting drunk ($r = .15, p <. 01$). Children who watched sexual violence on television were more likely to report threatening, frightening and calling other children names ($r = 0.18, p < .001$). Given the weak correlations, these findings are of minimal practical significance.

Moderating Factors: Characteristics of Schools

It was also of interest to examine students' perceptions of their schools because schools are a key environment for children. Informed by Rutter et al's. (1979) research about the culture and ethos of effective schools, children were asked for their own perspective about the characteristics of their school. It should be noted that all students answered these questions regardless of victim status. The same five point rating scale that was used for earlier questions where '5' was 'very bad' was applied in this section of the questionnaire also. Table 4.18 shows the frequency of responses and the overall mean and standard deviations for each category of the school characteristics, arranged around the means, in ascending order.

Table 4.18

School Characteristics: Children's Perceptions About the Effectiveness of their Own School within a Range of 1 to 5 on the Rating Scale: Means and Standard Deviations

Factors	*N*	*M*	*SD*
How much do you like going to school?	2,012	3.24	1.27
Is there bullying at school?	1,972	3.33	1.30
Are some pupils a bad influence on other children?	1,964	3.57	1.21
Does everyone know the rules at your school?	1,971	3.65	1.23
Can you concentrate and learn at school?	1,994	3.66	1.11
Do the teachers treat the pupils fairly?	1,965	3.74	1.26
Is there a teacher to talk to if bad things happen?	1,968	3.83	1.44
Is your school a safe place?	1,991	3.97	1.17
Do your teachers praise pupils?	1,937	3.98	1.25
Overall, is your school a good school?	1,969	4.17	1.07

As a measure of variance the standard deviation scores indicate that most of the children's scores are grouped around the mean, showing that most children were in agreement. Therefore the students who participated in this survey generally responded positively to questions about their school, and in particular, about their teachers. The frequency data regarding the participating children's responses to those questions about the characteristics of their school, including their qualitative comments are reported next.

How much do you like going to school?

Although 12% of the participating children said they do not like going to school at all, 42%, by rating their enjoyment at '4' or '5' on the rating scale, said that they like going to school very much (*"I'm included. You get accepted for what you are. It's a safe school. Teachers are very fair"; "I really enjoy it. I moved from another school where people were mean to me, but now I have lots of kind friends").* Bullying was the main reason why children said they did not like school and many students voiced similar feelings to this comment: *"If there were no bullies it would make it a better place."*

Can you concentrate and learn at school?

The majority of the respondents thought they were able to concentrate and learn at school. On the 5 point scale, 85% of these children rated their ability to learn and concentrate at either '3', '4', or '5'. Indicative comments included: *"I can work and know that I am safe from my past"; "We do lots of fun things but we learn things by example; "They treat pupils individually and have excellent classes and extra topics (future problem solving)."* Others referred to factors that could make it easier to learn *("If I could see my mum properly and if my behaviour was a bit better"; "If I had a little more encouragement and some easier work"; "If everyone was quiet and they listened").*

Is your school a safe place?

Many children rated their school according to how safe they felt. Far more children felt safe at school than unsafe. Only 12% thought their schools were unsafe ('1' or '2' on the rating scale) whereas 88% rated their school as a '3', '4', or '5'.

Children provided some reasons for why they felt safe at school: *"It's a safe place coz I trust all the teachers and most kids"; "I feel safe and secure. I don't often feel rejected";* and *"It has a well managed playground and great teachers."*

Better adult supervision could, however, be a factor in schools where children considered safety to be an issue. Some indicative comments included: *"There is often a reasonably vigorous fight on the back field before a sports game as when we are deciding on the teams a person gets lowly [sic] off endedbecause they don't want to go on that team"; "If we had a teacher on the field I think there would be no wrestling";* and *"School could be better if we had a playground or something to do at lunch and interval instead of just walking around school."*

Is there a teacher to talk to if bad things happen?

Almost half of the participants (49%) rated their experiences of having a teacher to talk to if bad things happen as 5 out of 5. The children identified a range of factors that made it easy for them to talk to their teachers. Teachers understood (*"The teachers understand and help me when I'm sad or stuck");* they were available *("There is always a person to talk to when something is wrong and I feel comfortable around my teachers"; "It is a nice learning environment and a friendly place. If I'm in trouble there is always someone there to help.");* and approachable (*"We get good education. All teachers are nice and friendly. They listen to all of our problems and try to solve them").* A small minority reported feeling fearful about the outcomes of trusting people at their school. One child said: *"School could be better for me if I could talk to people and know it would be private."*

Does everyone know the rules at your school?

The majority (82%) considered that children attending their school knew the rules "well" or "very well," even if they were not always heeded. Several comments referred to positive aspects of the school rules (*"I like the rule treat others as you wish to be treated"; "Everyone, children included, have equal responsibility. We have a strong culture",* and *"It [the school] punishes naughty kids").* Conversely, rules were given as a reason why children felt that their school could be improved upon: *"School could be better if our teacher had never changed the rules";* and *"If the teachers weren't so strict and if we had better rules."*

Are some pupils a bad influence on other children?

Most (82%) stated that there were "some" to "many" children in their school who were a bad influence on other children. For example, (1) "*School could be better for me if there was less bullying and threatening and if I can get on with my life and my work*"; (2) "*School could be better for me if there weren't so many distractions during class. And no one being hurt emotionally*"; and (3) "*If some bad kids were taken away so we can learn better without their annoyance.*"

Do your teachers praise pupils?

Nearly half (47%) gave their teachers the highest rating possible for this question. Although 28% thought that their teachers gave "little" or "no" praise, 87% of the respondents considered their teachers gave them "some" to "a lot" of praise. Indicative comments included: (1) "*They treat everyone fairly. And help us learn lots. They praise us a lot which makes us feel good and like we've achieved something really good*"; (2) "*My teacher gives me chocolate for being good*"; and (3) "*The teachers care for you and help me if I do something wrong. They praise you when you do good things.*"

Is there bullying at your school?

Nearly three quarters of the children (72%) stated that there is "some" to "a lot" of bullying at their schools. Many children made comments about bullying, and these chosen quotes reflect the voices of a number of participants. "*I wish the meanies would stop picking on me*"; "*School could be better for me if no-one would beat me up and if people didn't tease me because I'm fat*"; "*School could be better for me if there were less bullies and they were in a separate area*"; and "*School could be better for me if no one bullied people and everyone cooperated together.*"

Do the teachers treat pupils fairly?

Most of the participants (84%) reported that teachers are "fair" to "very fair" in their treatment of pupils. More teachers were given the highest rating ("5") than any other rating on the scale. Comments indicate the value they place on fair teachers. "*We have a nice teacher. He has the three Fs. They are firm, fair, and friendly*"; and "*We have a fair but firm principal.*" Other comments indicated concerns about unfairness. (e.g., "*Teachers shouldn't keep people in when it is a sunny day*"; and "*School could be*

better for me if teachers will listen to me and hear what I've got to say when I'm in trouble and I didn't do it"; "Teachers should not judge straight away and not make you say what they want to hear"; and *"School could be better for me if a certain teacher would be fair and stop having mood swings"*).

Overall, is your school a good school?

Very few children (8%) rated their school negatively. Again more children gave their school a '5' rating than any other score. Overall 92% of these respondents considered their school to be a "good" to "very good" school and they were also eloquent in praise for their schools (*"It is a great influence on me and I think it is a great school"; "It's a nice school and an involved school. I like the teachers. Lots of friends"*; and *"It is a good school for me. It teaches me with English because I didn't have strong English"*).

Many children seem to have rated their school according to how safe they felt. Far more children felt safe at school than unsafe. Only 12% thought their schools were unsafe ('1'or '2' on the rating scale). What is not so clear is whether the 12% who thought their school to be unsafe included those children who reported experiencing physical violence by adults. The results of the data analysis indicate those children were spread across the 1-5 scale for the item: 'my school is a safe place.' This indicates a normative distribution and is to be expected. Although statistically significant, this can be explained by the large database.

It seems too that school is not all about feeling safe. While there were some humorous comments such as *"if the people that pass forward in touch could go to another school"*, analysis of the children's comments revealed that, more than anything else, their perceptions of school were based on whether they have friends at school and if they like their teachers. Indicative comments included: *"The teachers are kind and I like learning and my friends are always there for me"; "All my friends are here and our teacher is real cool"*; and *"There are good teachers, good students, and fun work and sports. I feel I belong here."* Conversely children who held negative perceptions of their school did not rate their teachers or their peers. These children considered that school would be better for them if: *"I didn't have to worry about my friends ditching me", "People stop saying I am dumb because I am"; "Mrs.* [name of teacher] *dies and goes to hell"*; and *"There were no bullies and nicer people, no hurting."*

Summary

This chapter reported the results of the questionnaire items that addressed the three research questions of the study. Children's perceptions of the prevalence, incidence and impact of violence experienced or witnessed by them were examined and factors (e.g., children's coping experiences) that might mitigate and reduce its impact were explored.

The main themes emerging from these results indicate that New Zealand children experience a range of violent events. The results revealed high prevalence and incidence rates, particularly for physical and emotional violence. Emotional violence was the most prevalent form of direct and indirect violence. Children perpetrated most of the physical and emotional violence against other children and the sexual violence was perpetrated by adults. While *t*-tests found emotional violence to have more impact than physical violence, findings from this study indicate that of the three forms of violence, sexual violence was rated decisively higher for its impact. When the impact scores were examined, indications are that if adults were involved in the event it not only had more impact on the child, but also affected coping strategies and decisions about disclosure (for example, whether or not to tell anyone and who to tell). Results also showed that whatever type of violence they witnessed happening to adults had a high impact on the children who witnessed it. A key finding is that for these children witnessing violence against others had more impact than violence directed at them. Except for direct sexual victimisation even witnessing violence in the media had a greater impact on children than violence directed against them. The results of this study highlight the impact of witnessing violence on children.

Although the correlation method does not determine any cause and effect relationship between variables, associations between these variables could be explored and various themes have emerged. The correlations yielded weak relationships but were consistent with the multiple regression analyses. Multiple regression analyses revealed that the impact of physical, emotional and sexual violence might be predicted by certain sociodemographic and coping variables, although the predictors varied according to the type of violence experienced. Key findings were that the younger the child, the more likelihood that the child would highly rate the impact of violent experiences. Physical and emotional violence had more impact on younger children, but age made no

difference to the impact of sexual violence. Gender also predicted prevalence and impact for some forms of violence, for example, boys reported more physical violence. More occurrences of physical and emotional violence increased its impact, but this was not a factor for sexual violence.

Except for physical violence where some children thought they might have contributed to getting hit, punched or beaten, children reported that they were not to blame or that they could not have prevented the violence from happening. How the event is dealt with directly correlates with how children cope. In particular children who reported experiences of sexual violence also reported that people who knew about the incident did not help them to cope afterwards.

Most children were positive about their schools and teachers and this finding invites further research to test the theory that the culture and ethos of schools may help to reduce and mitigate the effects of violence. The next chapter provides a discussion of these results and explores the possible implications of the research findings.

CHAPTER FIVE
DISCUSSION

The purpose of this study was to examine the prevalence, incidence and impact of the different forms of violence experienced or witnessed by children and to explore the factors that might mitigate and reduce their impact on children. The study provides data on children's experiences as recipients and witnesses of violence in New Zealand. This large quantitative study of violence with a representative sample of students in Years 5 to 8 can be compared to data from international studies. Most studies of this nature are epidemiological but the present study is different in that it takes an educational approach to researching the phenomena of violence. The study revealed large numbers of children who had either been victims or witnesses of violence. These experiences were reported by children to have had a notable impact on their well-being. Observations of violent events were rated as having a more powerful impact on children than their own victimisation.

Employing the passive consent procedure was another key contribution of the present study. This procedure allowed children to report their experiences with violence rather than having parents and organisations represent the views of children. This approach may provide a more accurate representation of children's experiences. Through the passive consent procedure a high participation rate helped to identify more accurate rates of prevalence and incidence. These results, gained from the child's perspective, should better inform policy development and contribute to the creation of safer environments for children and to the provision of supports that will lessen the impact of violence when it is experienced.

This New Zealand research study is timely and relevant because: (1) increasing attention is being given to violence; (2) there is greater recognition of the impact of violence upon children; and (3) there are links between children's experiences of violence and later juvenile crime. There is also a need to acknowledge the right of children to have a voice about important issues in their lives; for children to be safe from the effects of violence; to break the conspiracy to hide and conceal through secrecy; to know the specific characteristics of schools which help to reduce violence;

and to learn how to reduce the impact of violence on learning, health, and development of children.

This chapter utilises the results of the study to extend understanding of children's perceptions of their experiences of violence. The findings will be discussed within the context of the existing literature as well as with regard to issues that could be addressed through future research. Limitations of the study are also presented.

The Nature and Extent of Violence for Children

In this study three broad questions were addressed. The results are discussed in relation to each question. This study indicates that children in New Zealand are being exposed to high rates of violence. Two thirds of these participants experienced direct physical violence, 80% experienced emotional violence and 10% experienced sexual violence. Even larger numbers of children witnessed violence in some form. Thus, New Zealand appears to be a more violent country than previously understood from media reports. New Zealand may be as violent as other countries that are perceived as being especially violent (e.g., USA). While New Zealand may not experience the gun violence more commonly recognised as a problem in the United States, the prevalence and incidence rates of violence found in the present study indicate that perceptions of New Zealand as an idyllic country for children might be erroneous. The consequences of the prevalence and incidence findings from this study may be significant in terms of social and educational policy development.

The present study found that children experience the same types of violence that adults experience, for example, robbery, physical, emotional, and sexual assaults. This is consistent with other studies (e.g., Finkelhor, 1995; Morgan & Zedner, 1992). Children are also vulnerable to other forms of victimisation specific to their status, such as physical and emotional neglect, family abduction, and bullying. Neglect was outside the scope of this study and only a small minority of children reported experiences of abduction (e.g., *"When I was abducted and I might go back I'm scared"*). Bullying, however, was found to be a common childhood experience for many participants (*"My friends turned against me and are being very mean. They always have something to tease me about - like my teeth, what I look like, my reactions and who I hang around with"*). Whether they were rare or common occurrences, the participants' remarks in

this study support Finkelhor's (1995) view that events involving adults "are especially traumatic for children because they "violate children's dependency needs and the social expectation that adults will respect these needs" (p. 181). One girl illustrated this point by stating: *"My family and I were going on holiday to ___ (our home country), and because I'm 12, I have to sign my own name on my passport so my father took me to the computer room and told me he wasn't my biological father and that I had been taken away from my real father. To top that off my real dad, he used to beat my mum and he kidnapped me. IT REALLY HURT. Someday I want to meet him."*

Physical Violence

Data from the study indicate that a high number of New Zealand children experience being punched, kicked, beaten, or hit as part of their childhood. In the present study 63% of the participants said they had experienced physical violence at some time. The prevalence rate for direct experiences of physical violence in this New Zealand study exceeds those of international studies (Britain, 33%; Italy, 50%; Scotland, 50%; USA, 50%).

The national study of American children by Finkelhor and colleagues (2005) also reported high levels of victimisation. In that study more than one half of the children surveyed reported experiencing a physical assault within the year of data collection. It is possible that the New Zealand figures are higher because the prevalence rates relate to whether the violent event "ever happened" as opposed to the American study, which focused on the year that the survey was implemented. When the incidence numbers for direct physical violence during the year of data collection are totalled, a comparable picture emerges because the present study found that 53% reported physical violence happening to them, ranging from one-off incidents to more than 10 times incidents during that year. Despite variations in way the rates are compared, most of the international studies reported that up to one half of their participants experienced physical violence (Anderson et al., 1994; Baldry, 2003; Durrant, 1999; Hartless et al., 1995; Maung, 1995).

Also of note in the present study are the high numbers of children who witnessed violent incidents against others. Much of the witnessed violence involved violence against other children. Furthermore, the majority of participants reported that other children perpetrated the physical and emotional violence witnessed against children,

typically at school. This finding is consistent with Sullivan's (2000b) view of children as bystanders.

A smaller minority reported witnessing violence against adults, compared to the number who reported witnessing violence against other children. Physical violence against adults was most commonly "watching adults fight"; usually their parents or relatives. More students (27%) reported witnessing physical violence against adults than emotional (24%) or sexual (7%) violence. Typically this happened at home or at someone else's house. However, of the 27% who reported witnessing violence against adults, 23% reported witnessing this violence more than 10 times in the year of the survey's implementation. An indicative comment included: *"My Mum and her boyfriend always get in arguments and I've seen heaps of things get smashed."* It seems likely therefore that the violence was ongoing for this group of children. A few of the children's comments described watching violence in the community (*"I watched a kid and her mother getting a hiding by the father at Gymnastics"*), but this was more rare. In general the children's experiences of indirect violence were more personal in nature and involved adults they knew. The prevalence rates for witnessing physical violence at home and at school are of concern because the data suggest that the lives of many children involve an unacceptable level of violence. These findings are especially concerning because some studies have reported that children who witness violence are at greater risk of being physically harmed themselves (Maxwell, 1994; Perry, 2004; Weis et al., 1998).

Children rated any forms of violence involving adults (usually parents or relatives) as having the most impact on them. Their comments about the impact of physical violence often described the children's anguish when they were punched, kicked, beaten, or hit by adults, probably because it is difficult for children to equate why people they love would physically hurt them. For example, *"On Christmas Day my Dad punched me in the face. It hurt me bad and I can't forget it. It is still in my head every night and I can't help it."*

Physical violence involving other children (such as being in a physical fight or punch up with peers) was given lower impact ratings, perhaps because fighting is perceived by some children (particularly boys) to be part of their childhood. Interestingly, witnessing physical violence in the media had more impact on these participants than witnessing physical violence against other children. A possible explanation is that more children reported witnessing media violence than real life

violence. However, this argument does not hold true for witnessing physical violence against adults, which had a far greater impact than watching media violence. The finding that witnessing media violence had more impact than witnessing violence against other children was contrary to expectations. It was thought "real life" violence would be considered more serious, in the same way that children perceived the impact of witnessing violence against adults. However, some children described their turmoil of feeling powerless to intervene when witnessing bullying, perhaps for fear of the bullies turning on them. As stated by this boy, "*My friend got body slammed before my eyes and I was too weak to help him get up.*"

The reasons that children rated the impact of witnessing violence against others as greater than the impact of their own victimisation are difficult to explain. It is possible that children who had never experienced violence themselves were more upset when they witnessed violent events (even on television) and consequently rated it highly for its impact on them. Just as plausible, however, is the explanation that children rated very highly the impact of witnessing violence against someone they love.

Findings from this study that the consequences of violence can be severe are consistent with those of other researchers (e.g., Howing, 1993; Maxwell, 1994; Reiss et al., 1993). Fear is widely reported by children as their most common response to victimisation (Morgan & Zedner, 1992; Yegidis, 1992). Violence also changes normal behaviour and restricts social life because of the child's fear of meeting the perpetrator. In Morgan and Zedner's (1992) study this fear ranged from nervousness about going to specific places, to a more generalised pervading and often debilitating sense of terror, with the most profound psychological damage being ongoing changes in personality or behaviour. Responses, such as, *"I haven't wanted to go walking alone since"* were identified in the present study.

A key finding is that children rated the impact of witnessing violence more highly than the impact of physical violence directed at them. Possibly this result occurred because more children have witnessed violence rather than directly experiencing it themselves. However, while the focus must also remain on keeping children safe from violence, the high prevalence and impact rates of witnessing physical violence found in this study underscore the need to curb the amount of violence witnessed by children and to find better ways of supporting children to reduce the impact when it is observed.

Sexual Violence

Sexual violence was the least prevalent type of violence experienced by children, with 11% reporting experiences of sexual violence. The rate of victimisation reported is relatively consistent with American rates of 12% (Finkelhor et al., 2005; OCAN, 2000). Three quarters of the children who reported sexual victimisation in the present study also reported experiencing this within the last year, which may suggest that the sexual violence was ongoing. The age of children in this study, with many likely to be entering puberty, might heighten this as a vulnerable age group for sexual abuse by adults. Children in the present study reported experiences of sexual violence, largely perpetrated by adults, and highlighted an obvious difference between primary school students and secondary students. In another New Zealand study of 200 female and 170 male high school students, 77% of female and 67% of males reported one or more occurrences of unwanted sexual activity. Those findings indicate that abuse amongst peers (rather than adults) is far more prevalent in older students with the onset of dating relationships (Jackson, 2002, as cited in NZ Family Planning Association, 2006).

Somewhat surprising was the number of children who reported witnessing sexual violence against both adults (7%) and other children (10%). Sexual violence was defined in the questionnaire as "being asked to do unwanted sexual things or having unwanted sexual touching", so it remains unclear as to precisely what the children witnessed. Some of the written comments, however, were fairly explicit, suggesting that children were likely to have witnessed a range of sexual violations (and indeed other forms of victimisation as well). The sexual violations ranged from unwanted sexual comments to more serious physical forms of sexual violence. For example one child described, *"When I had to watch my best friend made to drop her pants in front of a man and have him smash a beer bottle in her face."* Another child wrote: *"My Dad went to jail for raping me."*

It is likely that some children found their sexual victimisation too difficult to write about. For the questions on sexual violence, *"something bad has happened to me, but I did not feel comfortable writing about it"*, was a relatively common response. Later in the questionnaire, when they were asked to rate their life's worst experiences, these particular children rated "bad sexual things happening to me" as their worst experience, which reinforces the importance of providing participants with more than one opportunity to report their victimisation.

The present study is in line with other studies showing that people known to children (rather than strangers) perpetrate most of the sexual violence against them. This form of victimisation is described as dependency-related victimisation because it often involves people on whom the child is dependent and is a direct consequence of the unique dependency status of children (Finkelhor & Dziuba-Leatherman, 1994a; Finkelhor, 1995). Not surprisingly, most of the sexual violence against children in this study occurred in someone else's home or in their own homes rather than at school or in the community. The results did not differentiate between parents and caregivers, but one important finding is that "other known adults" (as opposed to the child's parent or caregiver) were more likely to commit sexual violence against children. The finding is important and troubling because "strangers" are not necessarily those who commit sexual violence against children. Other known adults possibly include relatives (e.g., uncles, cousins) and youth or church leaders; that is, adults who might be trusted by children. The results suggests that children known to adults who are predisposed to engage in unwanted or unlawful sexual activity, are especially vulnerable.

Of the children who reported this form of victimisation, the majority rated the impact of sexual violence at the highest level for all forms (direct occurrences, witnessed against children, witnessed against adults, and witnessed in the media). Sexual violence was the only type of violence where children rated the impact of direct violence ("happened to them") higher than indirect violence ("watched happening"). In addition, correlational analyses revealed that for children who reported experiences of either direct or indirect experiences of sexual violence, higher impact was related to some of the antisocial behaviours, and illustrates how negative outcomes for children can be attributed to their negative experiences.

The study therefore verifies the short- and long-term effects that sexual violence has on its victims. This was confirmed twice in the survey: first, when the children were asked to rate the impact for this type of violence; and secondly, with the weighting it was given by the children when asked about the worst things that had ever happened to them. As previously stated, a few children wrote comments on their questionnaire, stating that sexual violence had happened to them but it was too difficult to write about. None of the participating children made similar comments in the sections on physical and emotional violence, which emphasises the powerful impact that sexual violence can have on children.

The definition of sexual violence for this study includes children's perceptions of what could be termed *sexual harassment*. Sexual harassment, in most cases, does not involve sexual assault. The fact that most children rated highly the impact of sexual violence, even though some children would have only been reporting their experiences of sexual harassment, illustrates how distressing it can be for the children who experience this type of unwelcome attention. This finding is consistent with other studies (e.g., Hyman, 1997) that indicate the impact on victims of sexual harassment whereby victims become fearful, anxious, withdrawn, angry, or suffer severe loss of self-esteem. Those studies indicate that students' lack of faith in school authorities' ability to protect them may result in lower academic performance, retaliation, withdrawal from school, or acceptance of their role as sexual victims. The present study did not examine the impact of violence in terms of academic performance; however, future research could examine this relationship.

Emotional Violence

Of the three forms of violence, emotional violence was the most prevalent type of both direct and indirect violence. This finding is consistent with other studies. Emotional violence or bullying is considered to be the most common form of abuse for 9 to 13-year-olds and the peak time for such victimisation by peers (Espelage & Swearer, 2003; Lapsley, 1993; Nansel et al., 2001). The participants in this study were in the same age group as other studies, and the findings confirmed that peers perpetrated most of the emotional violence reported by children.

Crick and Grotpeter (1995) used the term "relational aggression" to describe emotional violence by children, including the covert intimidation practices reported by the participants in the present study. During the data collection phase of the research, in every classroom the children indicated their personal understanding of the term *emotional violence* with smirks and affirmation of the terminology when asked if they understood the definition after it was explained to them. The results of the survey later confirmed that for these children, being left out and excluded, not spoken to, and gossiped about was a common occurrence for them and their friends. An indicative comment was: "*When my friends be nice to me one day and the next day they fight me or hurt my feelings.*"

Bullying was by far the most common form of emotional violence experienced by children and children were also most likely to be the perpetrators against other children. The study confirms that bullying happens in all schools. Indications are that both boys and girls are subjected to being threatened, called names, ganged up on, left out, not spoken to, "narked" on, gossiped about, and having rumours spread about them. The emotional violence definition in the questionnaire aimed to elicit reports of either emotional abuse or bullying (by both adults and children) and therefore did not necessarily comply with bullying definitions in the literature that refer to ongoing incidents. However, an important finding was the high number of children who reported they had experienced emotional violence more than 10 times in the last year, which is consistent with most definitions of bullying (Espelage & Swearer, 2003; Olweus, 1993) as opposed to one-off incidents.

In the preliminary study (Maxwell & Carroll-Lind, 1996), emotional bullying was experienced by 70% of the participants. This current study found that 80% of children reported victimisation by bullying, with an even larger percentage (88%) reporting their role as a bystander. A survey of New Zealand (North Island) secondary schools by Adair and colleagues found that 75% of the students had been bullied within the current year (Adair, 1999; Adair et al., 2000). In that study 15 of the 17 items related to physical bullying. These figures may support the public perception of the increased prevalence of bullying in New Zealand. In comparison, Rigby's (1999) Australian survey found that 50% of the 8 to 12-year-old participants reported being teased or called hurtful names. Baldry's (2003) Italian study found more than half (59%) of all students reported being victimised or bullied within the previous three months.

The rates for this study therefore, are relatively high and other New Zealand studies (e.g., Adair et al., 2000; Maharaj et al., 2000) also claim that New Zealand's prevalence and incidence rates of bullying are high in comparison to other countries. However, caution is required when making generalisations across studies with different ages and different timeframes. Most studies require more than one event before it can be classified as bullying. Perhaps the present study reports more bullying because the incidence is measured over the year ("since Christmas") rather than the last month or last three months common to many other studies.

The children also reported being emotionally abused by adults, albeit to a lesser extent. Some children detailed a range of abusive behaviours, for example, *"Being yelled at, being called names, being kicked, punched, being ignored, being told off for*

hardly anything, being put outside in the rain, being sent to my room, my sister blocking her ears when I'm talking to her."

Results revealed that emotional violence was the most prevalent form of violence experienced by the participating children and that the impact of emotional violence was greater than for physical violence. Similar to physical violence, witnessing emotional violence against others had more impact than if it happened to the children themselves. This was a key finding. Although witnessing emotional violence against adults was the least mentioned experience, it had the highest impact on children. Comments such as *"I've been scared when my Mum and Dad fight because I don't know who to go to"* demonstrate the dilemma for children when they have to choose between the two people they love the most. Section Three of the New Zealand Domestic Violence Act (1995) states that:

> Violence occurs against a child if a person causes or allows the child to see or hear the physical, sexual or psychological abuse of a person with whom the child has a domestic relationship, or puts the child or allows the child to be put, at real risk of seeing or hearing that abuse occurring.

While this definition states that violence is committed against children if they are psychologically abused by being allowed to, or even put at risk of witnessing violence, the study found that many children are clearly being victimised in this way and that this form of violence has a traumatic effect on them. When describing the impact of emotional abuse a common theme was children's recurring thoughts about the parental violence. Indicative comments were: *"I can't stop thinking about it"*, and *"I could never sleep properly."* This finding is consistent with an earlier New Zealand study. Maxwell (1994) found that children who witness violence against someone they care about rate it to be as traumatic as if the violence had happened directly to them. Called the "unnoticed victims" by Maxwell (1994), children living in violent families are unlikely to be recognised as victims in their own right, even though their experiences as witnesses warrant it. While not the intent of the present study to follow this line of inquiry, the children's comments nevertheless are in line with other studies (e.g., Morgan & Zedner, 1992; Osofsky, 1999), which show that few so-called indirect victims of violence emerge from their experiences without feeling some negative effects.

This study implies that emotional violence needs to be taken just as seriously as physical violence. Although physical violence has possibly always been considered more serious than emotional or psychological violence (people get criminal convictions for physical assault), an interesting finding of this study is the degree to which children feel unwanted, unloved, lonely, or lacking in meaningful friendships. Such feelings can be linked to forms of emotional abuse. Comparisons can be made with an Irish survey of children aged 8 to 15 years which found that half of the children believe that adults do not listen properly to children and one in five reported that "adults are harmful to children" (Kelly, 1998). There are clear indications from this study that children do worry about "bad things happening to them" and, for a variety of reasons, many feel unwanted and emotionally abused, either at home or school. For example, one child wrote, *"Mum said she didn't love me. I was sad".* An indicative school-based example was: *"When my friends come up to me and say that they don't like me anymore and go away then I don't have anyone to play with and it makes me feel very hurt."* This next comment demonstrates the seriousness in which some children view their situation: *"Mum has been quite a witch, spelt with a B, and started screaming at me. I've tried suicide 2 times because of her. She doesn't know."*

Apart from the small percentage of children who reported emotional violence perpetrated by adults, the majority of the emotional victimisation could be described as bullying perpetrated by other children. Witnessing relational aggression among their social peer groups was a common form of bullying amongst these participants. Again, perhaps the level of impact was high because children were worried it would happen to them next time. Although witnessing emotional violence or bullying had more impact on children than direct experiences of bullying, many children also rated the impact of their own victimisation as high. For example, *"My friend said I was going to get a bash from a fifth former in College. It has been going on for ages but I'm still afraid. It's stopped now but still I'm scared."*

The impact of emotional violence was increased if it happened at school and underscores the effect that school bullying has on children. This finding has important implications for teachers and schools who have a legal responsibility to provide a safe learning environment, particularly when the impact of witnessing emotional violence was found to be associated with children's perceptions of their school in relation to bullying and school safety.

The children reported being affected by emotional violence such as teasing and bullying. A few children even reported having to change schools to get away from the bullies. When answering the question as to "how school could be made better for them", overwhelmingly the response from children in all the participating schools was about *"getting rid of the bullies."* The impact of emotional violence seemed greater when the bullying involved criticism of themselves or other family members. For example, one child described how *"People get mean to me because my Mum goes out with heaps of men."* Clearly emotional violence such as teasing and bullying is harmful for children. The comments from the children in this study indicate that the old adage "sticks and stones may break my bones but names will never hurt me" is generally untrue. This finding adds to the weight of evidence elicited from other studies in this regard (Crick, Nelson, Morales, Cullerton-Sen, Casas, & Hickman, 2001; Lightner et al., 2000; Olweus, 2001; Raskauskas, 2005; Swearer, Grills, Haye, & Cary, 2004).

Moderating Contextual Factors

Demographic Factors

Both gender and age were found to be the demographic factors most likely to influence the impact of violence. The relationships found in the correlational analyses of impact revealed that younger children reported higher impact, as perhaps befits their level of development and maturity in terms of being able to conceptualise events. Statistically significant but weak relationships predicted the impact of emotional and sexual violence to be greater for girls, although in the multiple regression analyses only the impact of emotional violence was found to be greater for girls.

The results (frequencies and correlations) found boys were more likely than girls to be victims of physical violence and physical bullying, which is consistent with the research literature (e.g., Adair et al., 2000; Atlas & Pepler, 1998; Baldry, 2003; Whitney & Smith, 1993). The present study identified a similar pattern of gender related bullying to Baldry's Italian study (2003) in that boys were more likely to report all types of direct bullying, that is, physical harm, threats, or verbal aggression, whereas girls more often reported being excluded, in line with relational aggression, which is done with the intent of causing psychological harm. Another New Zealand study of bullying (Adair et al., 2000) also found age and gender differences in their reported incidences of bullying.

Sullivan, Cleary and Sullivan (2004) cite studies that explain the reasons why girls are consistently found to be less involved than boys in physical bullying. They consider the most common explanation is that girls bully to gain reassurance and affiliation whereas boys bully to display power and dominance. As most bullying incidents occur at school, knowledge of gender differences may help teachers to implement anti-bullying measures that help to either reduce or prevent the prevalence and incidence of bullying for both male and female students.

Family Factors

Contrary to expectations the multiple regression analyses did not predict a strong relationship between the number of children living in the home and the impact of violence. A number of studies have found that larger families may place added stress on families already at risk of violence (Groves, 1997; Pryor & Woodward, 1996; Weiss et al., 1998). There is a further link between socioeconomic status and educational achievement (Harker & Nash, 2006; MOE, 1997). If living in disadvantaged or dysfunctional families increases the risk of exposure to violence, large families should be a risk factor in the same way that other risk factors associated with economic disadvantage (for example, overcrowded houses, drugs, and alcohol) can have an adverse impact. Therefore it is somewhat surprising that this study differs from other research findings and the reasons are difficult to explain. The explanation could be due to cultural differences in the relationship between family size and violence between New Zealand and other Western countries. Alternatively, it may also be due to the nature of these data as the majority of children in this study reported four or fewer children in the home, with less than 7% of the sample having five or more children living in the home. There may not have been enough large families in this study to detect differences.

Examination of the most important people in a child's environment (parents or caregivers) did not reveal strong results in terms of the adult supervision factors. An interesting finding, however, was linked to parental supervision and the impact of sexual violence. The impact was greater when parents knew the child's whereabouts, perhaps suggesting that the perpetrator was known and trusted by the family.

Slight relationships were found between children's witnessing of physical violence against both children and adults and their own engagement in antisocial

behaviours. Other relationships were found between antisocial behaviour and types of violence. Children's witnessing of bullying was statistically related to their involvement in bullying others. Finding that "children bully because they are bullied" extends the work of Widom (2000). In addition children who witnessed bullying were also statistically related to involvement in bullying others.

In terms of prevalence, witnessing violence was the most frequently reported experience of violence for the participants in this study. The highest prevalence and incidence rates related to watching violence on television, videos, or movies. This is consistent with Levin's (1994) continuum of violence theory in which both entertainment and real life violence in the media constitute much of the violence in most children's lives. A somewhat surprising finding is that witnessing physical violence in the media had more impact than if children directly experienced physical violence themselves. This finding provides evidence reported from children that exposure to media violence can and does have a negative effect on them. Media violence is the easiest to address and perhaps the main type of violence that can be prevented if parents would monitor what their children watch and policy makers would examine the types and timing of programmes for children to ensure that altruistic motives are practised.

Coping Factors

It was also of interest to examine whether children's attributions and cognitions about the violent event were linked to its impact. The hypothesis was that children's perceptions of whether they felt it was their fault or that they could stop it happening might affect the impact of violence. Similarly, the study aimed to explore whether feeling supported or not supported by the people who knew about the violence, affected the impact on children.

The findings revealed to some extent the ways in which children cope with various types of violent events. Any form of violence involving adults clearly increased the impact, which in turn increased children's difficulty in coping. With the exception of physical violence (where some children admitted that they might have "partly" contributed to the violent outcome), most children felt that they were not to blame for what had happened to them. The multiple regression analyses predicted different relationships for the three types of violence. Children's thinking that they could have "stopped it" or "made a difference" increased the impact of physical violence. The

children's comments suggest that some participants perceived they had contributed to the incident by "getting smart" or provoking the fight. This may explain why physical violence had less impact than emotional violence on children. However the damage of persistent abuse may be illustrated by the finding that the more frequently physical violence occurred the greater its impact.

With emotional violence, greater impact was predicted if the child was younger and a girl. However, the strength of these predictions was minor. Again the number of times the child was exposed to emotional violence increased its impact, thus confirming much of the literature on the effects of bullying. In many instances children felt that they were powerless to make a difference to what happened. Some children seemed to develop an overpowering sense of helplessness to their plight: *"I am very miserable and I hate my life. Most people hurt my feelings. e.g. children at school, family at home and people I don't even know. School would be better if some of the children were nicer to miserable children like me. I have one friend who sometimes sticks up for me."*

Certainly most of the children felt they were not to blame for their victimisation. The participants' external attributions and their perceptions that they could not prevent the bullying might be considered to be a form of learned helplessness. Feeling powerless to stop bullying was also reported by a large number of participants in Adair et al.'s (2000) study and was highlighted by the researchers as one of the most concerning aspects of their study. In the present study, the feeling of powerlessness was also very apparent in relation to the children's experiences of sexual violence. The issue of power affected children's decisions about whether or not to disclose their victimisation and to whom they should disclose.

Children exposed to physical or emotional violence in this New Zealand study were more likely to inform their friends first. The peer group exerts a powerful influence on its members and previous studies (Anderson et al., 1994; Hartless et al., 1995) found that children do not always inform adults about either their victimisation or criminal activities. In the present study the majority of children who experienced sexual violence also chose not to disclose these experiences to friends. Of the children who were victimised by sexual violence, 43% did not tell anyone, compared to 18% of children who never disclosed to anyone about their experiences of emotional violence. In contrast Kelly's (1998) Irish survey found that children are most likely to go to their mother to discuss problems, followed closely by father and friends. Only 27% of the 8 to 11-year-olds in the Irish study said they would talk to a friend about their problems.

Children provided mixed answers when asked if those who knew about their experiences had helped them to cope. With physical and emotional violence, approximately the same number of children felt quite strongly either way about whether people helped or did not help them. Children who reported sexual violence felt they were not helped either at the time or later on. Indeed sexual violence stood out as being the one experience where children stated very strongly that it was not their fault; they could not stop it or make a difference to what happened, and those who knew did not help them to cope with their victimisation. Perhaps the experience is so overwhelming that the child feels little, if any, sense of the control over the situation.

The study's findings suggest that coping strategies employed by children are different from those of adults. Other studies also indicate that children find it more difficult than adults to employ cognitive forms of coping. Bat-Zion and Levy-Shiff (1993) explain that children rely on adults to interpret cues and translate threatening situations and to determine the appropriate strategies to use. Some children in the present study appreciated the opportunity (via the questionnaire) to request help: (*"I think that the pink slip will help me"* [pink form with contact details of counsellors]; *"I am very miserable and I hate my life. I will leave my name with you"*). Children's coping strategies need to be understood in terms of their developmental stage. For some children completing the questionnaire was therapeutic (e.g., *"This test has helped me cope with trouble"*). Coping strategies that are appropriate for adults cannot necessarily be applied to children without modifications (Bat-Zion & Levy-Shiff, 1993; Raskauskas, 2005).

It was hoped that this study would identify whether children's coping experiences could inform ways of reducing the impact of violent and traumatic events on children. But how children coped depended very much on the type of violence they experienced. Sexual violence, in particular, stood out for its negative outcomes compared to both physical and emotional violence. This may mean that schools need to consider employing different strategies for supporting children, according to the type of victimisation experienced.

The bimodal frequency in regard to the number of occurrences of violent experiences reported identified that the majority of children either reported a single event or a number of experiences. The reason might be that a single exposure would be easily remembered and children reporting a number of incidents would know they had experienced "a lot" of violence. The study's findings that impact increases with the

amount of exposure to violence (how many times it happened) may suggest that incidence could act as a barrier to the development of effective coping strategies.

Although some research studies show that children develop coping strategies that help them to survive traumatic experiences (Bear et al., 1993), these strategies may not be the best ones. For example, a number of children engage in acting out and antisocial behaviours as a result of their exposure to violence and abuse. There is evidence (e.g., Perry, 1996; Terr, 1991) to suggest that child victims of ongoing sexual abuse may provoke specific incidents as a way of gaining some form of control. They may think that if they cannot help the abuse happening they may be able to control the time and setting of when it happens. This study extends the findings of others (Bat-Zion & Levy-Shiff, 1993; Masten, 2001) that children need to be able to rely on adults to interpret cues and translate threatening situations and to determine the appropriate strategies to use. As asserted by Masten (2001) appropriate strategies are ones that protect or restore the efficacy of children's basic adaptive systems.

Many comments in this study revealed the importance of other children within a child's ecology. Other studies have found this also. Besag (1992) stated, "children without friends are left without a protective support system, a means whereby experience and knowledge can be shared and social skills tried out and developed" (p. 37). In the present study an example of a child without a protective support system was expressed as *"Being by myself, not playing with anybody"*. Support was found to be one of the strongest predictors of successful problem solving and coping mechanisms and it is usually the children isolated from potential support systems that cope the least. This finding concurs with Cornille, Boroto, Barnes, and Hall (1996). Other studies have found the best predictor for bullying to be children who do not have close friends (Perry, Hodges, & Egan, 2001; Rodkin, 2001; Rodkin & Hodges, 2003).

School Factors

According to ecological theory, friends as well as family hold an important place in children's microsystems. Children in the study were found to have committed much of the physical violence against other children so it should not be surprising that most of the physical violence happened at home or at school. Although parents can be more vigilant about sibling violence (Duncan, 2004) and the supervision of their children, teachers also need to be vigilant about the violence that could be happening in their

schools, both in the classroom and playground. As with other countries a key location for physical violence and bullying in New Zealand appears to be the school playground (Sullivan, 2000b). Some of the children's comments in this study (e.g., *"If we had a teacher on the field I think there would be no wrestling and fighting"*) are consistent with studies by Olweus (1991, 1993). Olweus found playground supervision to be a major factor in reducing the incidence of bullying. Rodkin and Hodges (2003) advise that teachers who get to know their students and the "peer ecologies" in which they operate are the most successful in reducing the incidence of bullying (p. 391).

The qualitative data illustrated the participants' need for social connectedness. This view is consistent with other studies that reveal how the social dynamics of peer ecologies determine whether children feel a sense of belonging to the group or not (Karcher, 2004; Rodkin, 2001; Rodkin & Hodges, 2003). Groups are a natural part of school life and to be excluded from the peer group can be traumatic for children. In the present study, comments along the lines of *"My friends don't like me"* were indicative of how such children felt excluded. Demaray and Malecki (2003) write of the importance of social support for both victims and bullies. As Boivin, Hymel, and Hodges (2001) have noted, "friendships provide contexts for learning social skills, for enhancing self-knowledge and self-esteem, for emotional and cognitive support and coping, as well as for practicing for later relationships" (p. 277).

In the present study two open-ended questions that aimed to explore children's feelings about their school experiences were: *"I like my school because ..."*, and *"School could be better for me if ..."*. Almost all of the responses included statements about teachers and friends, for example, *"All my friends are here and our teacher is real cool."* A similar statement, *"School is a place where ..."* was used by Nash and Harker (1998) to elicit the same types of responses. Both studies independently identified characteristics that made schools "good". Another New Zealand study, conducted by the Adolescent Health Research Group, also reported students' positive connection to school (Watson et al., 2003). Furthermore, a national longitudinal study of adolescent health in the United States found that when students feel connected to school they are less likely to engage in at-risk behaviours such as violence, substance abuse and early sexual activity (McNeely, Nonnemaker, & Blum, 2002).

Skiba et al. (2004) developed the *Safe and Responsive Schools (SRS) Safe Schools Survey.* Using similar questions to the present study in relation to children's perceptions of school, the findings of Skiba and colleagues suggest that school connection (*"I feel*

welcome when I am at school") and climate may be more critical than delinquency or major safety items in predicting students' perceptions of the overall safety of their school. Another study (Bugalski & Frydenberg, 2000) had similar findings to the present study in that effective coping skills require the willingness to seek guidance and support and are also contingent upon the receipt of constructive and effective supports from their "significant others" (p. 127). Cotta, Frydenberg, and Poole (2000, 2002) advocate implementing a coping skills programme to provide a framework that allows students to manage their stress and coping strategies both in the classroom and in their lives outside the classroom. Therefore key items for any programme should include helping the children to feel that they were not to blame for what happened and to provide them with successful support mechanisms to allow them to cope in such a way that aids their healing process in the aftermath of victimisation.

Future studies will need to determine whether the characteristics and ethos of schools can mitigate or exacerbate the impact of violence on children. Statistically significant but weak correlations did not allow conclusions to be drawn from the results of this study. Future studies would need to tease these factors apart because the results are of little practical significance. Overall children rated their schools and teachers positively, but as all students answered the questions about the characteristics of their school, regardless of victim status, it is not possible (from the results of this study) to determine the role that teachers play in lessening the impact of violence for their students who have experienced violence.

Other researchers have also asserted that the best thing to offer children at risk are teachers who care enough to form supportive, protective relationships with them so that they can serve as psychological buffers to help these children cope (Levin, 1994; Sautter, 1995; Wallach, 1993). Yet, despite the potential importance of teachers, in this study they were not usually the people to whom children disclosed their experiences of violence. Perhaps the majority of children reporting they had "a teacher to talk to" were children who had never been victimised and therefore found it easier to talk to their teacher about less personal information. A possible implication of this point is that schools need to consider effective ways to encourage children who have been victimised to tell their teachers in order to obtain their support. One way would be to capitalise on peer support. With both physical and emotional violence, the victim's friends were the first line of support; therefore to ensure successful outcomes peer support may need to become a more formal arrangement within the school's culture.

This applies to bullying in schools as well. Bullying often goes unreported because of the perception that children have to learn to stand up for themselves. As previously stated, teachers often were not told about children's victimisation, even though children rated their teachers highly on the 5-point Likert scale. An important implication of this study therefore, which is consistent with the findings in other studies, is that schools must develop a culture of "telling". Children should understand that it is part of the school's ethos (Olweus, 1993) that informing teachers of inappropriate and unacceptable behaviours is permissible, important, and a responsible form of behaviour because a whole school approach is necessary for successful intervention in reducing bullying (Eslea & Smith, 1998; Orpinas et al., 2003; Sullivan, 2000a; Tattum & Tattum, 1992).

Far more children reported feeling safe at school than unsafe; only 12% thought their schools were unsafe. What is not so clear is whether those who thought their school to be unsafe included those children who reported experiencing violence by adults at home. These results may be interpreted in two ways. First the children who were most affected by physical violence at home were more likely to rate their school as being very safe: none of these children reported being physically hurt by teachers at school. Second, the support they either received or did not receive at school from their teachers and peers could possibly determine how children rated their schools.

It is likely then that the collective culture and ethos of the school children attend has the potential to affect the incidence and impact of the violent events that happen in their lives. Certainly the children's comments in this study are consistent with the findings of Howing et al. (1993) that what children need from schools is "a supportive environment where reasonable rules are fairly and consistently enforced, and where adults view crises as opportunities to model and teach effective coping skills" (p. 111). Indicative comments included: *"I like the rule: Treat others as you wish to be treated"; "We have a nice teacher. He has the three Fs. They are firm, fair, friendly";* and *"It is a nice learning environment and a friendly place. If I'm in trouble there is always someone there to help."* Similar perceptions of fair teachers were reported by the participants in the Adolescent Health Research Study (Watson et al., 2003).

A key finding of this study is that no relationships were found between school decile ranking and negative perceptions of school. However, much has been written about the relationship of violence to socioeconomic status (Slee, 2003) so a likely expectation would be that children attending low decile schools would experience more

bullying and violence at school. Instead, the findings showed that children in the lower decile schools were more likely to report liking school, perceiving it as safe and having a trustworthy teacher to confide in. One explanation could be that in this study school decile rankings were used as a proxy for socioeconomic status. Decile is an imprecise measure because students within schools may vary on level of disadvantage. There may also have been a contrast effect when children came from poor homes. Some of the children's comments supported this explanation. For example: *"It gets me away from home and a break from my parents."* Nearly three quarters of the participants acknowledged there was 'some' to 'a lot' of bullying at their schools, thus verifying the high prevalence of bullying reported by New Zealand researchers. However, no relationship was found between schools with a high incidence of bullying and school decile ranking. Although children from low decile schools may have experienced or been exposed to more violence, analyses of the school characteristics data (e.g., positive ratings of teachers) perhaps demonstrate that by providing learning environments that are inclusive and supportive of all their students, schools may be able to counteract the individual factors that some students bring with them. Further research is needed.

There are some indications in the literature that the size of schools can affect the culture or climate of schools (Osher et al., 2004). Similarly, when multiple regressions were performed to determine children's coping experiences on the impact of violence, the present study found that school size predicted impact on sexual violence. The impact of sexual violence on children was greater when they attended a small school. The reasons why are unclear. Possibly, children victimised by sexual abuse feel that people are more likely to know in a smaller school and prefer to feel more anonymous in a bigger school. Perhaps school size can affect school culture because it is harder to build a sense of community in large schools. To overcome this, Osher et al. (2004) suggest that larger schools should break their syndicates/departments into smaller units where it is easier for teachers to know the students and their families. Students also have more opportunities to find adults or students for support in larger schools.

Due to the nature of the data it is not possible to draw definitive conclusions as to whether the culture and characteristics of schools can mitigate and reduce the impact of violent events on children. From the children's comments the qualitative data suggest that they can, but it is not possible to make this judgement, based on the quantitative data. This does not mean there is no relationship between the culture of schools and the

effects of violence. Possibly teachers are a major protective factor in buffering children from the impact of violence but it cannot be confirmed from the results of this study.

Limitations of the Study

Research involving children is often considered to have inherent methodological and ethical issues (Amaya-Jackson, Socolar, Hunter, Runyan, & Colindres, 2000; Dawes Knight et al., 2000; King & Churchill, 2000; Runyan, 2000). The self-report approach may be considered a limitation of this study. However, the design specifically set out to elicit children's perceptions of their own experiences of violence. The passive consent approach further provided more children with the opportunity to report their experiences. Compared to studies that rely on parent and teacher reports the present study was able to provide a more accurate representation of children's reports of prevalence and incidence. Other researchers have also found self-report studies to be a reliable method for reporting children's exposure to violence (Lapsley, 1993; Schwartz, 2003; Skiba, Simmons, Peterson, McKelvey, Forde, & Gallini, 2004). In comparison to community-based data, student self-report surveys offer the most direct, practical, ethical and anonymous approach for obtaining information about violence (Skiba, et al., 2004).

A potential limitation of questionnaires is that they can provide misleading information and this was overcome in two ways. First, the participants needed to be given every opportunity to recall necessary information, and second, in case some participants lacked the language skills to understand the meaning of the questions, or to produce a decipherable response, procedures were set in place to support such children. For example, it was necessary to ensure that the reading level of the questionnaire for the study corresponded to the participants' chronological age and was written in child-friendly language that was piloted before full implementation. It was also necessary to show all of the questionnaire items on overhead transparencies and to work through the questionnaire together as a class. Reading and pointing to the questions ensured that all the children could complete the questionnaire independently without requiring extra support, which would have compromised their confidentiality and anonymity. In addition the researcher was a trained teacher and therefore experienced in deciphering inaccurate spelling and grammatically incorrect sentence structures.

To elicit the meaning of violence for children, the use of child language in the definitions was intentional. However, the definition for sexual violence using such child language appears to have been imprecise. *Having unwanted sexual touching and being asked to do unwanted sexual things* covers a wide range of experiences. Grouping children's experiences of minor non-contact sexual abuse alongside rape and sexual assault may distort the overall picture of the types of sexual violence.

The sample selection, while well designed, led to a small percentage of schools participating. The self-selection of the schools in the first stage of the selection process could raise issues about generalisability because of a biased selection. There is a possibility that the data may under-represent or overstate prevalence and incidence because principals were not expected to provide reasons for non-participation. Hence there is also no way of determining whether school principals were unwilling to participate because (1) they considered violence was, or was not, a problem for students attending their school, or (2) they perceived potential difficulties in gaining parental approval due to the sensitive nature of the topic. However, a relatively balanced and representative sample was obtained from the 28 schools that participated in the study and this was further enhanced by the passive consent procedure that facilitated a large sample of participating students.

Although the sample size was large (2,077 participants), the correlations were generally small and therefore of minimal practical significance. As expected, the number of participants reduced, depending on the type of victimisation experienced. The small amount of children who experienced certain types of violence is not a limitation in itself. However, the reduction of the sample from 2,077 to 192 (for the participants reporting direct experience of sexual violence) restricted the types of analyses able to be undertaken. More sophisticated types of data analyses such as structural equation modelling could be utilised in future studies to establish the directionality of the relationships between mediating forms of violence for the three forms of violence.

Further Research

The findings of this study provide new information on the prevalence, incidence and impact of violence on children and the factors that mitigate its effects. Future research will need to confirm these results if the study is to be used to guide policy development in this important area. Longitudinal data, collected at different times over several years, should provide a more robust indication of victimisation. Including school achievement data would be useful in terms of examining the relationship between children's experiences of violence and the impact on academic outcomes. A longitudinal study would provide a more appropriate method for exploring causal relationships between victimisation and social-emotional consequences. Examining comparisons between children who have experienced violence, children who have witnessed violence, children who have experienced both direct and indirect violence, and children who appear to live in violence-free settings will add further to the understanding of the social-emotional and achievement-related consequences of violence.

It is hoped too that future research will explore the implications of these findings for prevention and intervention, including an examination of children's coping strategies (for example, attributions) and protective factors. Further studies could examine the perpetrators of violence against children. Although it was not possible within the scope of the present study to explore the differential impacts, Morgan and Zedner (1992) found there does seem to be a difference in the effects on children who have been victims of incest, and those who have been sexually assaulted by non-family members. This notion is worth exploring in future studies. Exploring the possibility of differences between victimisation by family and non-family members for all three types of violence (physical, emotional, and sexual) is also worth pursuing in future studies. Some interesting findings emerged in relation to children's perceptions about the characteristics of their schools. The characteristics differed across schools. Although not the main focus of the present study, the responses of the children identified this to be a potentially rich source of inquiry for future research. Results of this study did not elicit answers as to whether the culture and ethos of schools is a moderating factor against the effects of violence and so remains an unresolved issue.

Summary

This chapter discussed responses to the research questions. The findings indicate that children experienced high rates of physical, emotional and sexual violence. The direct and indirect experiences of physical and emotional violence appear to be particularly significant for children. While emotional violence was the most prevalent form of victimisation, sexual violence held the most impact. More occurrences of physical and emotional violence increased the impact. However, the number of occurrences was unrelated to the impact of sexual violence. Comparison of the three types of violence revealed that although emotional violence had more impact on children than physical violence, sexual violence had the most impact of all. In other words, more children on average rated the impact of sexual violence as high or very high, compared to the children who experienced physical or emotional violence.

Witnessing violence was more prevalent than experiencing direct violence and the prevalence of witnessing violence was significantly related to impact. The impact of witnessing physical and emotional violence was greater than the impact of violence directed at the child. Excepting direct sexual victimisation, violence involving adults had the most impact of all forms of violence. The study is consistent with international and New Zealand research in that exposure to both direct and indirect violence and abuse is likely to have a detrimental impact upon children (Atwool, 2000; Finkelhor et al., 2005; Ghate, 2000; Maxwell, 1994; Perry, 1997; Reiss et al., 1993). Possibly some children are more likely to engage in antisocial behaviours as a result of their violent experiences.

Discussion centred on how the participants reported the effects of their violent experiences and highlighted the special vulnerability of children in the face of adverse experiences. The majority of children either reported a few or a lot of experiences, probably because if they had only been exposed a few times the number would stand out and similarly children reporting a number of incidents would know they had experienced "a lot" of violence. Differences were found in the way children described their experiences, with little detail provided about the impact of sexual violence, as compared to children's recounting of physical and emotional victimisations.

The present study is consistent with Finkelhor and Dziuba-Leatherman's (1994b) grouping of child victimisation into three broad categories (pandemic, acute, and

extraordinary) and the examples they gave for each category. For example, this study found that the pandemic victimisation affecting most children was sibling assault, followed by other children, and that acute victimisation affected a fractional but significant percentage in the form of physical abuse by adults. As one child said, *"I get hidings* [beatings] *all the time."*

Contrary to expectation no meaningful relationships were found between children's experiences of violence and the decile rating of their school, which suggests the differences in participating schools for this study were related to their characteristics as a social institution. It is likely that schools with positive school climates and ethos, even in disadvantaged areas, can have a helpful effect on students with the implication being that school cultures can create a buffer against violent and traumatic events for their students. Alternatively, individual actions or measures may combine to create a particular ethos or set of values, attitudes, and behaviours, which will become characteristic of the school as a whole. However, acknowledging that the culture of schools can mitigate and reduce the impact of violence on children was not borne out by the results of this study. Very few of the contextual variables in the present study were systematically associated with children's experiences of violence. Therefore, further research is required to confirm or dispute Garmezy's (1993) view that schools can be a major protective factor for students exposed to life's adversities and conversely, in negative contexts, schools can also add to their cumulation of stressors.

The final chapter draws on the results of the study to offer recommendations for change that may help to mitigate and reduce the effects of violence on children.

CHAPTER SIX
CONCLUSION

This study extends understanding of children's perceptions of their experiences of violence. A national survey of New Zealand children, aged 9 to 13 years, reported the nature and extent of their experiences of violence, both at home and at school. Twenty-eight randomly selected schools of various sizes, geographic areas, and socioeconomic neighbourhoods, provided a representative sample of 2,077 children.

The study explored the amount of physical, sexual, and emotional violence experienced by children within their main contexts (home and school) in relation to impact, as well as children's perceptions of their school, their coping strategies, and the extent to which they used violence in their own interpersonal relationships. The study took into account the ethical considerations and philosophy underpinning research that involves children. The use of a passive consent procedure in this study, as a significant and innovative way to both enhance the opportunities for children to voice their experiences of violence, as well as a way to increase the participation rate of children in this study was reported. Article 12 of the United Nations Convention on the Rights of the Child states that children have the right to express their views freely. This study was conducted in line with this United Nations Convention, and in so doing contributes to an understanding of how to conduct research in a manner that creates opportunities for children's voices to be heard.

The study breaks new ground. First, the use of passive consent resulted in a large sample for a study of this nature. Article 12 of the United Nations Convention on the Rights of the Child, guided the controversial ethical decision to adopt a passive consent procedure. The passive consent procedure was debated with the Massey University Ethics Committee. This Committee acknowledged the validity of enabling children to voice their perceptions of the nature, extent, and impact of their violent experiences. Second, the study presents new data for New Zealand on rates of prevalence and incidence. The study found high rates of violence directly experienced and witnessed by children in this country.

Implications

The present study identified a number of implications for children and their families, schools and policy. These implications now guide the following recommendations. First, violence in society has many sources and requires systematic attention at many levels to reduce its prevalence and incidence. Media violence is the most prevalent form of violence in children's lives. Media violence is also the easiest to address and perhaps the main type of violence that can be prevented. Therefore the implications arising from this study are that parents should monitor what their children watch in the media, and policy makers should examine the types of programmes for children. This conclusion stems from the finding that witnessing violence was a common experience of children, and one that was reported to have a significant impact.

Children in the present study reported high rates of both direct and indirect violence. Children should feel safe in their homes, their communities, and in their schools. Emotional violence was the most prevalent form of both direct and indirect violence. For many children in New Zealand, the conclusion can also be drawn that bullying is part of their childhood. Furthermore, this form of emotional violence was found to have a negative impact on their lives. Children rated the impact of emotional violence higher than physical violence, which suggests that the negative effect of emotional or psychological abuse has implications for schools in relation to bullying.

The study found that all violence involving adults had the greatest impact. This finding serves as a salutary reminder that children should not placed in situations where they witness arguments and fights between adults. Witnessing violence involving adults also has more impact on children than violence directed at them. This finding highlights, in particular, the adverse effect of family violence. Although the study found that sexual violence was less prevalent than physical and emotional violence, this form of violence was rated by most of the children who had experienced sexual violence as having the most profound affect. The incidence rates of sexual abuse raised the possibility that for some children the abuse was ongoing at the time of data collection, and perpetrated by people they knew.

Policies and programmes that could safeguard children are often based on statistical data that imply a particular need or reason to be concerned about the safety of children. But the number of children involved in family and domestic violence is

masked, as it is seldom recorded statistically and, if reported, it is usually only recorded in terms of broader family incidences. More accurate data (based on the findings of this study) that reflect the prevalence of children affected by violence could mean that positive government policies and programmes would be implemented to reduce children's experiences of violence. The present study addresses these issues of prevalence and incidence for violence against children and provides a valid base from which parents, schools, communities, professional and government agencies can work together to educate, make decisions about ways to protect children, and raise awareness of the impact of violence on children.

The level of children's exposure to violence in this country is relatively high. While the study revealed high prevalence and incidence rates, contextual factors often associated with violence were found to be of minimal practical importance in this study. The present study revealed, however, that some of the participating children who experienced violence did not feel they had been well supported by adults. Children, who were sexually victimised, often chose not to disclose. Friends were found to be the first line of support for children who did disclose their victimisation. Schools, therefore, may need to include a more formalised arrangement of peer support. By providing an empathetic and supportive environment, however, children may be more likely to seek support from adults instead of mainly confiding in their friends.

There is an immediate need for teachers and schools to confront the pervasive issues of bullying in New Zealand schools. Anti-bullying efforts will also be important for providing safe learning environments. Furthermore, as likely witnesses of bullying, peers should also be taught to voice their disapproval and to intervene. Findings indicate that negative peer interactions can worsen the impact of bullying, so children must be taught to respond appropriately. Schools may be able to intervene effectively to reduce violence, if they acknowledge the problem and adopt school-wide philosophies.

While these suggestions make a difference in the lives of children, the study does not provide all of the answers to reducing and mitigating the effects of violence. There are no simple solutions; rather multifaceted solutions are required. Government bans on spousal and parental violence; reductions in the portrayal of media violence; providing safe schools with supportive cultures; adult and child education programmes as well as all the other recommendations are not in and of themselves enough to significantly reduce family violence. Nor can schools and the people who care for children be responsible for all of the ills of society. The challenge now is for the findings of the

present research study to inform the decision-making of policy makers, which is not easy with research involving children. Children have a different perspective and experience life differently from adults. This difference does not negate the validity of their perspectives and experiences. As Jamison and Gilbert (2000) stated:

> The problem for policy makers is how to understand and give recognition to children's experience of life – including family, school, and other aspects of public life that have an impact on them. This requires a commitment to involving children, learning about ways to involve them, and recognising both real and perceived barriers to their active participation in policy and decision-making processes. (p. 185)

This study aimed to effect policy change as well as practice. The aim of the research was to extend the understanding of violence involving children in the hope recommendations about effective practice could follow. The findings indicate a need to examine the complex interactions of variables that may buffer or exacerbate the negative effects of victimisation and the literature highlights a variety of protective factors.

In terms of research design, this study takes a critical stance to the existing ethical and methodological considerations and philosophies underpinning research that involves children. The children who participated in this study demonstrated their competence to express the ways in which violence has affected them. One area that children have had little voice in until now is about the violent events they experience. Children should be considered "the experts" of their own information because they hold the most valid perception of their experiences. To seek better solutions, prevention and intervention decisions should be based on children's perspectives.

Miljeteig (2000) suggested that to establish a culture for listening to children it may be more appropriate to promote an "adult ears" movement instead of the more common "children's voices" movement (p. 159). The decision to listen and act on the perspectives of children ultimately rests with adults but the act of listening and taking seriously what children have to say will be a big step forward in supporting children who have experienced violence. When children are given a voice they are more than capable of addressing issues that adults find controversial. Unsolicited comments from the children who participated in the survey have vindicated the decision made by Massey University's Ethics Committee to allow children's rights to take priority over

parental rights. A number of the children expressed their appreciation for the opportunity to participate in the study (e.g., *"I really wanted to get some stuff out. Cool survey"*). Although they may not have known the difference between a test, programme or questionnaire, these participants clearly engaged in the task of completing the questionnaire (*"This was a really good test and thank you for coming to my school, and I really thought about things"; "Thanks for letting me do this. Sometimes it made me sad but thank you"*). Some even commented on the benefits of participating (*"I think this programme is a neat idea. Good luck"*). All of these comments support the value of children having a voice about important issues in their lives. Some children found the questions difficult, but they welcomed and took seriously the opportunity to talk about the violence in their lives.

Four inter-related key issues regarding research with children were addressed in this study. First, is a 'deficit discourse model' of children that affects consent procedures; second, is the issue of active versus passive consent procedures; third, is the 'rights of children to speak on matters that concern them'; and fourth is the effect consent procedures have on our ability to incorporate children's perspectives that can better inform our understanding of childhood and the institutions, services, programmes, and policies that are meant to serve these young citizens.

The results acknowledge and support the controversial ethical decision to adopt a passive consent procedure and demonstrate the children's competence to understand the research requirements and their ability to rationally express the ways in which violence has affected their lives. Sanctioned by the University Ethics Committee, the passive consent procedure employed in this study allowed more children to report their experiences of violence and this procedure is recommended for future studies involving children. The Ethics Committee carefully weighed and gave credence to the issue of children's rights to protection and acknowledged and confirmed Article 12 of the United Nations Convention on the Rights of the Child that grants children the right to speak on matters that concern them. Active consent could have compromised both of these rights. Ethical policies and procedures will be more effective if they incorporate research that takes account of and acknowledges the validity of children's perspectives in the context of their own experiences, particularly when those findings are incorporated into environments that affect children.

While all children's thoughts, feelings and behaviours are unique; they are also highly influenced by the general characteristics of their age and level of development.

There are certain characteristics of children's thinking that make it look quite different from mature adult thought and this is reflected in how they described their experiences of violence in this study and underscores the importance of ensuring that children's voices are heard. Moreover, in line with Bandura's (1986) social cognitive theory the data obtained from the children in this study support the view that it is possible to explore children's self-perceptions of violence. Social cognitive theory offers an explanation of how children's perceptions contribute to the impact of violence because the meanings children take from their experiences, even if they have shared the same experience with others, will be different (Atwool, 2000; Levin, 1994). In this study the participating children provided insightful statements about their experiences and demonstrate that children are capable of speaking out on issues that affect them. One 12-year-old participant expressed her concern about *"people underestimating us, not imagining what we can do, think we aren't capable, thinking we can't, too young etc."*

The African proverb that it takes a village to raise a child is relevant to the ecological conceptual framework of this study. According to Osher and colleagues (2004) "ecological explanations have not had a powerful impact on the mental maps of educators and policy makers" (p. 15). Perhaps this is changing. By promoting a whole child approach the New Zealand Government's *Agenda for Children* is adopting a "key settings model" (p. 14) and encouraging adults to "look at children in all their contexts, when working with them and when developing policies and services for them" (Ministry of Social Development, 2002, p. 8).

What is this telling us then? While every effort should be made in the classroom to help children cope, it is also important to address the victimisation of children, from their perspective, in order to effect real change. Valuing children's perspectives and recognising that they hold the most valid perception of their experiences will ensure that the changes are meaningful to the children who have experienced violence. Finally, adults must assume responsibility to reduce our children's exposure to violence because New Zealand cannot afford the devastating effects of failing to protect its children. Society's goal must be to create a generation of children who are competent and capable of speaking up for themselves, of making decisions and judgements on issues that concern them, and of knowing when they need help and how to get it.

This study differs from many other studies in that it explores children's perceptions of their violent experiences. Much has been written about children's experiences of violent and traumatic events from the viewpoint of adults, but fewer

studies have researched this topic from the perspectives of children. The study gained valuable insight into children's experiences through methodological procedures that encapsulate children's perspectives about the nature and extent of violent events in their lives. The study investigated the meanings that children attach to their experiences because as argued by Anderson et al. (1994) "it is only through trying to understand young people's views of their experiences as victims and witnesses that we can confront the problem in a way that is meaningful and acceptable to them" (p. 66). Conclusions are that effective development of policy and provision should be based on data that reflects children's perceptions of the violence in the context of their own lives.

REFERENCES

Action for Children and Youth Aotearoa (ACYA). (2003, March). *Children and Youth in Aotearoa 2003.* The second non-governmental organisations' report from Aotearoa New Zealand to the United Nations Committee on the Rights of the Child. Auckland: Author. Retrieved from http://www.acya.org.nz

Adair, V. (1999). No bullies at this school: Creating safe schools. *Childrenz Issues, Journal of the Children's Issues Centre, 3*(1), 32-37.

Adair, V. A., Dixon, R. S., Moore, D. W., & Sutherland, C. M. (2000). Ask your mother not to make yummy sandwiches: Bullying in New Zealand secondary schools. *New Zealand Journal of Educational Studies, 35*(2), 207-221.

Ahmad, Y., Whitney, I., & Smith, P. K. (1991). A survey service for schools on bully/victim problems. In P. K. Smith, & D. A. Thomson (Eds.), *Practical approaches to bullying* (pp. 103-111). London: David Fulton.

Ainscow, M., & Moss, S. (2002, September). *Exploring the use of action research to develop inclusive practices in urban schools.* Paper presented at the British Education Research Association (BERA) Conference, Exeter, UK.

Alanen, L. (2001). Explorations in generational analysis. In L. Alanen, & B. Mayall (Eds.), *Conceptualizing child-adult relations* (pp. 11-22). London: RoutledgeFalmer.

Alderson, P., & Montgomery, J. (1996, April). What about me? Are children competent to decide on their own treatment, regardless of what their parents think? *Health Services Journal*, 22-24.

Amaya-Jackson, L., Socolar, R. R. S., Hunter, W., Runyan, D. K., & Colindres, R. (2000). Directly questioning children and adolescents about maltreatment: A review of survey measures used. *Journal of Interpersonal Violence, 15*(7), 725-759.

American Office of Child Abuse and Neglect (OCAN). (2000). *What is child maltreatment?* Retrieved from http://www.mhsqic.org/DSQIC/OCAN/ts/ho1_5.htm

Anderman, C., Cheadle, A., Curry, S., & Diehr, P. (1995). Selection bias related to parental consent in school-based survey research. *Evaluation Review, 19*(6), 663-674.

Anderson, S., Kinsey, R., Loader, I., & Smith, C. (1994). *Cautionary tales. Young people, crime and policing in Edinburgh.* Aldershot: Avebury.

Arnold, J. (2005). *Empathetic intelligence.* Sydney: University of New South Wales Press.

Atlas, R., & Pepler, D. (1998). Observations of bullying in the classroom. *Journal of Educational Research, 92*(2), 86-99.

Atwool, N. (2000). Children who have been exposed to risk and trauma. In A. B. Smith, N. J. Taylor, & M. M. Gollop (Eds.), *Children's voice. Research, policy and practice* (pp. 56-71). Auckland: Pearson Education New Zealand.

Baldry, A. C. (2003). Bullying in schools and exposure to domestic violence. *Child Abuse and Neglect, 27*(7), 713-732.

Bandura, A. (1977). *Social learning theory.* Englewood Cliffs, NJ: Prentice Hall.

Bandura, A. (1986). *Social foundations of thought and action: A social cognitive theory.* Englewood Cliffs, NJ: Prentice Hall.

Bandura, A. (1989). Human agency in social cognitive theory. *American Psychologist, 44,* 1175-1184.

Bandura, A. (2001). Social cognitive theory: An agentive perspective. *Annual Review of Psychology, 52*(1), 1-26.

Barwick, H., & Gray, A. (2001). *Analysis of submissions by children and young people to the Agenda for Children: Children's Discussion Pack.* Wellington: Ministry of Social Development. Also available from www.msd.govt.nz (Under Agenda for Children).

Baron, R. M., & Kenny, D. A. (1986). The moderator-mediator variable distinction in social psychological research: Conceptual, strategic, and statistical considerations. *Journal of Personality and Social Psychology, 51,* 1173-1182.

Bat-Zion, N., & Levy-Shiff, R. (1993). Children in war: Stress and coping reactions under the threat of scud missile attacks and the effect of proximity. In L. A. Leavitt, & N. A. Fox (Eds.), *The psychological effects of war and violence on children* (pp.143-162). Hillsdale, NJ: Lawrence Erlbaum.

Bear, T., Schenk, S., & Buckner, L. (1993). Supporting victims of child abuse. *Educational Leadership, 31,* 42-47.

Belsky, J. (1980). Child maltreatment, an ecological integration. *American Psychologist, 35*(4), 320-355.

Besag, V. E. (1989). *Bullies and victims in schools: A guide to understanding and management.* Buckingham: Open University Press.

Blaiklock, A. J., Kiro, C. A., Belgrave, M., Low, W., Davenport, E., & Hassell, I. B. (2002). *When the invisible hand rocks the cradle: New Zealand children in a time of change. Innocenti Working Paper, No.93.* Florence, Italy: United Nations Children's Fund (UNICEF).

Boivin, M., Hymel, S., & Hodges, E.V.E. (2001). Toward a process view of peer rejection and harassment. In J. Juvonen, & S. Graham (Eds.), *Peer harassment in school. The plight of the vulnerable and victimized* (pp. 265-289). New York: The Guilford Press.

Bond, L., Carlin, J.B., Thomas, L., Rubin, K., & Patton, G. (2001). Does bullying cause emotional problems? A prospective study of young teenagers. *British Medical Journal, 323(7311),* 480-489.

Booth, T., & Ainscow, M. (2002). *Index for inclusion. Developing learning and participation in schools.* Bristol: Centre for Studies in Inclusive Education (CSIE).

Boulton, M., & Underwood, K. (1992). Bully/victim problems among middle-school children. *British Journal of Educational Psychology, 12*, 315-329.

Briere, J., & Elliot, D.M. (1994). Immediate and long-term impacts of child sexual abuse. *The Future of Children, 4*(2), 54-69.

Briere, J., & Runtz, M. (1993). Childhood sexual abuse: Long-term sequelae and implication for psychological assessment. *Journal of Interpersonal Violence, 8*(3), 312-330.

Briggs, F. (2002). *To what extent can 'Keeping Ourselves Safe' protect children?* Wellington: New Zealand Police.

Bronfenbrenner, U. (1977). Toward an experimental ecology of human development. *American Psychologist, 32*, 513-531.

Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design.* Cambridge, MA: Harvard University Press.

Bronfenbrenner, U. (1986). Ecology of the family as a context for human development: research perspectives. *Developmental Pyschology, 22*, 723-742.

Bronfenbrenner, U. (1992). Ecological systems theory. In R. Vasta (Ed.), *Six theories of child development: Revised formulations and current issues* (pp. 187-249). London: Jessica Kingsley.

Browne, J., & Carroll-Lind, J. (2006). Relational aggression between primary school girls. *Kairaranga. Weaving Educational Threads, Weaving Educational Practice, 7*(1), 20-29.

Bugalski, K., & Frydenberg, E (2000). Promoting effective coping in adolescents 'at risk' for depression. *Australian Journal of Guidance and Counselling, 10*(1), 111-132.

Buhs, E. S., & Ladd, G. W. (2001). Peer rejection as an antecedent of young children's school adjustment: An examination of mediating processes. *Developmental Pyschology, 57*(4), 550-560.

Carlson, E. B. (2000). A conceptual framework for the impact of traumatic experiences. *Trauma, Violence and Abuse, 1*(1), 4-28.

Carney, J. V. (2005). Factor structure of the bullying situations identification (BSI) instrument. *Journal of School Violence, 4*(3), 77-91.

Carroll-Lind, J. (2002). The 'broomstick incident.' Bullying or peer pressure? *Education Today, 4,* 20-21.

Carroll-Lind, J., Chapman, J., Gregory, J., & Maxwell, G. (2006). The key to the gatekeepers: Addressing the ethical issues surrounding the rights of children to speak on issues that concern them. *Child Abuse and Neglect, The International Journal, 30,* 979-989.

Carroll-Lind, J., & Kearney, A. (2004). Bullying: What do students say? *Kairaranga, Weaving Educational Threads, Weaving Educational Practice, 5*(2), 19-24.

Carroll-Lind, J., & Lind, P. (2004). "I feel I belong here". The culture and ethos of inclusive schools. *Set: Research Information For Teachers, 3*(3), 26-30.

Child, Youth and Family (2001). *An interagency guide to breaking the cycle. Let's stop child abuse together.* Wellington: Author.

Child, Youth and Family (2006). *Children at increased risk from death and maltreatment and strategies for prevention.* Wellington: Ministry of Social Development. Retrieved from http://www.cyf.govt.nz/text/Reports.htm

Children's Commissioner & UNICEF. (2004, Nov). *Protecting children from abuse and neglect.* Wellington: Children's Commissioner and UNICEF.

Christensen, P., & James, A. (2000). Researching children and childhood: Cultures of communication. In P. Christensen, & A. James (Ed.), *Research with children: perspectives and practices* (pp. 1-8). London: Falmer Press.

Church, J. (2003). *The definition, diagnosis and treatment of children and youth with severe behaviour difficulties:* Report to the Ministry of Education. Christchurch: Education Dept, University of Canterbury. Also available from http.//www.minedu.govt.nz

Cicchetti, D. (1989). How research on child maltreatment has informed the study of child development: Perspectives from developmental psychopathology. In D. Cicchetti, & V. Carlson (Eds.), *Child maltreatment. Theory and research on the causes and consequences of child abuse and neglect* (pp. 377-432). New York: Cambridge University Press.

Cicchetti, D., & Lynch, M. (1993). Toward an ecological/transactional model of community violence and maltreatment: Consequences for children's development. In D. Reiss, J. Richters, M. Radke-Yarrow, & D. Scharff (Eds.), *Children and violence* (pp. 96-118). New York: The Guilford Press.

Cicchetti, D., Toth, S. L., & Lynch, M. (1993). The developmental sequelae of child maltreatment: Implications for war-related trauma. In L. A. Leavitt, & N. A. Fox (Eds.), *The psychological effects of war and violence on children* (pp. 41-71). Hillsdale, NJ: Lawrence Erlbaum.

Clark, J. A. (2001). Against the parental right to use corporal punishment to discipline children: Implications for early childhood and primary school teachers. *New Zealand Research in Early Childhood Education, 4,* 177-188.

Cohen, L., Manion, L., & Morrison, K. (2000). *Research methods in education* (5th ed.). London: RoutledgeFalmer.

Coie, J. D., Watt, N. F., West, S. G., Hawkins, J. D., Asarnow, J. R., Markman, H. J., Ramey, S. L., Shure, M. B., & Long, B. (1993). The science of prevention. A conceptual framework and some directions for a national research program. *American Psychologist, 48*(10), 1013-1022.

Cole, P., & Chan, L. (1990). *Methods and strategies for special education.* Sydney: Prentice Hall.

Coleman, P. K., & Byrd, C. P. (2003). Interpersonal correlates of peer victimization among young adolescents. *Journal of Youth and Adolescence, 32*(4), 301-314.

Colmar Brunton. (1995, June). *Breaking the Cycle.* Quantitative Report. Wellington: Author.

Cornell, D. G., & Brockenbrough, K. (2004). Identification of bullies and victims: A comparison of methods. In M. Furlong, G. Morrison, R. Skiba, & D. G. Cornell (Eds.), *Issues in school violence research* (pp. 63-87). New York: The Haworth Press.

Cornille, T. A., Boroto, D. R., Barnes, M. F., & Hall, P. K. (1996). Dealing with family distress in schools. *Families in Society: The Journal of Contemporary Human Services,* 435-445.

Cotta, A., Frydenberg, E., & Poole, C. (2000). Coping skills for adolescents at school. *The Australian Educational and Developmental Psychologist, 17*(2), 103-106.

Cotta, A., Frydenberg, E., & Poole, C. (2002, April.). *Coping skills training for adolescents at school.* Paper presented at the American Educational Research Association Annual Meeting, New Orleans, LA.

Coyne, J.C., & Racioppo, M. W. (2000, June). Never the twain shall meet? Closing the gap between coping research and clinical intervention research. *American Psychologist, 55*(6), 655-664.

Cramer, P. (2000). Defense mechanisms in psychology today: Further processes for adaptation. *American Psychologist, 55*, 637-646.

Crick, N. R., & Grotpeter, J. K. (1995). Relational aggression, gender and social-psychological adjustment. *Child Development, 66*(3), 710-722.

Crick, N. R., & Nelson, D. A. (2002). Relational and physical victimization within friendships: Nobody told me there'd be friends like these. *Journal of Abnormal Child Psychology, 30*(6), 599-607.

Crick, N. R., Nelson, D.A., Morales, J., Cullerton-Sen, C., Casas, J. F., & Hickman, S. E. (2001). Relational victimization in childhood and adolescence. In J. Juvonen, & S. Graham (Eds.), *Peer harassment in school. The plight of the vulnerable and victimized* (pp. 196-214). New York: The Guilford Press.

Crowley, A. (1992). Whose life is it anyway? In C. Jenks (Ed.), *The sociology of childhood. Essential readings.* London: Gregg Revivals.

Dalin, P. (1993). *Changing the school culture.* London: Cassell.

Darlow, N. (2005). *Schools and the right to discipline.* Wellington: Community Law Centre.

Dawes Knight, E., Runyan, D. K., Dubowitz, H., Brandford, C., Kotch, J., Litrownik, A., & Hunter, W. (2000). Methodological and ethical challenges associated with child self-report of maltreatment. *Journal of Interpersonal Violence, 15*(7), 760-775.

Demaray, M. K., & Malecki, C. K. (2003). Perceptions of the frequency and importance of social support by students classified as victims, bullies, and bully/victims in an urban middle school. *School Psychology Review, 32*(3), 471-489.

Department of Social Welfare. (1997). *Assessments of Reports to NZCYPS.* Wellington: Government.

Devine, J., & Lawson, H. A. (2003). The complexity of school violence: Commentary from the US. In P. Smith (Ed.), *Violence in schools: the response from Europe.* (pp. 333-350). London: RoutledgeFalmer.

Dobbs, T. (2005). *Insights: Children and young people speak out about family discipline.* Wellington: Save the Children New Zealand.

Dobbs, T., & Duncan, J. (2004). Children's perspectives on physical discipline: A New Zealand example. *Child Care in Practice, 10*(4), 367-379.

Dobbs, T., Smith, A. B., & Taylor, N. (2006). 'No, we don't get a say, children just suffer the consequences': Children talk about family discipline. *International Journal of Children's Rights. 14*(2), 137-156.

Dockrell, J., Lewis, A., & Lindsay, G. (2000). Researching children's perspectives: A psychological dimension. In A. Lewis, & G. Lindsay (Eds.), *Researching children's perspectives* (pp. 46-58). Buckingham: Open University Press.

Doolan M. (2004). Child death by homicide: An examination of incidence in New Zealand: 1991-2000. *Te Awatea Review*, 2(1), 7–10.

Duncan, R. D. (2004). The impact of family relationships on school bullies and victims. In D. L. Espelage, & S. M. Swearer (Eds.), *Bullying in American Schools. A social-ecological perspective on prevention and intervention* (pp. 227-244). Mahwah, NJ: Lawrence Erlbaum.

Durrant, J. (2004, June). *Whose body is it anyway? Physical punishment, children's rights, and parental responsibility.* Paper presented at the National Seminar, "Stop it, it hurts me": Research and perspectives on the physical punishment of children, Wellington, New Zealand.

Edleson, J. L. (1999). Children's witnessing of adult domestic violence. *Journal of Interpersonal Violence, 18*, 18-32.

Education and Science Committee. (1995). *Inquiry into children in education at risk through truancy and behavioural problems.* Wellington: New Zealand House of Representatives.

Education Review Office. (1998). *Good schools, poor schools. Number 4.* Wellington: Government.

Education Review Office. (2000, Autumn). *Safe students in safe schools. Number 2.* Wellington: Government.

Erdelyi, M. H. (2001, September). Defense processes can be conscious or unconscious. *American Psychologist, 56*(9), 761-762.

Espelage, D. L., & Swearer, S. M. (2003). Research on school bullying and victimization: What have we learned and where do we go from here? *School Psychology Review, 32*(3), 365-383.

Espelage, D. L., & Swearer, S. M. (Eds.). (2004). *Bullying in American Schools. A social-ecological perspective on prevention and intervention.* Mahwah, NJ: Lawrence Erlbaum.

Fancourt, R. (1997). Brain development in young children: The implications for social policy. *Children's Agenda, 1,* 2-3.

Feindler, E. L., & Becker, J. V. (1994). Interventions in family violence involving children and adolescents. In L. D. Eron, J. H. Gentry, & P. Schlegel (Eds.), *Reason to hope: A psychosocial perspective on violence and youth* (pp. 405-429). Washington, DC: American Psychological Association.

Fergusson, D. M. (1998). The Christchurch health and development study: An overview and some key findings. *Social Policy Journal of New Zealand, 10,* 154-176.

Fergusson, D. M., & Horwood, L. J. (2003). Resilience to childhood adversity: Results of a 21 year study. In S. S. Luthar (Ed.), *Adaptation in the context of childhood adversities* (pp. 130-155). Cambridge: Cambridge University Press.

Fielding, M. (2004, April). Transformative approaches to student voice: Theoretical underpinnings, recalcitrant realities. *British Educational Research Journal, 30*(2), 295-311.

Finkelhor, D. (1995). The victimization of children: A developmental perspective. *American Journal of Orthopsychiatry, 65*(2), 177-193.

Finkelhor, D., & Dziuba-Leatherman, J. (1994a). Victimization of children. *American Psychologist, 19*(3), 173-183.

Finkelhor, D., & Dziuba-Leatherman, J. (1994b). Children as victims of violence. A national survey. *Paediatrics, 84* (4), 413-420.

Finkelhor, D., Ormrod, R., Turner, H., & Hamby, S. L. (2005). The victimization of children and youth: A comprehensive, national survey. *Child Maltreatment, 10*(1), 5-25.

Folkman, S., & Moskowitz, J. T. (2000). Positive affect and the other side of coping. *American Psychologist, 55*(6), 647-654.

Friedlander, B. Z. (1993). Community violence, children's development, and mass media: In pursuit of new insights, new goals, and new strategies. In D. Reiss, J. E. Richters, M. Radke-Yarrow, & D. Scharff (Eds.), *Children and violence* (pp. 66-82). New York: Guilford Press.

Furlong, M. J., Morrison, G. M., Chung, A., Bates, M., & Morrison, R. I. (1997). *School violence: Children's needs.* Bethesda, MD: National Association of School Psychologists.

Furlong, M. J., Morrison, G. M., Cornell, D. G., & Skiba, R. (2004). Methodological and measurement issues in school violence research: Moving beyond the social problem era. In M. Furlong, G. Morrison, R. Skiba, & D. Cornell (Eds.), *Issues in school violence research* (pp. 5-12). New York: The Haworth Press.

Furlong, M. J., Sharma, B., & Rhee, S. (2000). Defining school violence victim subtypes: A step toward adapting prevention and intervention programs to match student needs. In D. Singh, & C. B. Aspy (Eds.), *Violence in American schools: A practical guide for counsellors* (pp. 67-88). Washington, DC: American Counseling Association.

Gaffney, M., Higgins, N., McCormack, J., & Taylor, N. (2004). *Developing a more positive school culture to address bullying and improve school relationships: case studies from two primary schools and one intermediate school. A report for the Ministry of Social Development.* Dunedin: Children's Issues Centre, Otago University.

Garbarino, J. (2001). An ecological perspective on the effects of violence on children. *Journal of Community Psychology, 29*(3), 361-378.

Garbarino, J. (with Robert Abramowitz). (1992). *Children and families in the social environment* (2nd ed.). New York: Aldine.

Garbarino, J., Dubrow, N., Kostelny, K., & Pardno, C. (1992). *Children in danger: Coping with the effects of community violence.* San Francisco: Jossey-Bass.

Geffner, R. A., Loring, M., & Young, M. S. (Eds.). (2001). *Bullying behaviour: Current issues, research, and interventions.* New York: The Haworth Maltreatment & Trauma Press. Co-published simultaneously as *Journal of Emotional Abuse, 2*(2/3).

Ghate, D. (2000). Family violence and violence against children. *Children and Society, 14*, 395-403.

Gilbert, L. (1998). *United Nations Convention on the rights of the child. Report on the Article 42 consultation project.* An occasional policy paper, Ministry of Youth Affairs, & Office of the Commissioner for Children. Wellington: Ministry of Youth Affairs.

Glynn, T., & Berryman, M. (2005). Understanding and responding to students' behaviour difficulties. In D. Fraser, R. Moltzen, & K. Ryba (Eds.), *Learners with special needs in Aotearoa New Zealand* (3rd ed.) (pp. 294-315). Southbank, Vic: Thomson Dunmore Press.

Gregory, J., Gregory, R., & Carroll-Lind, J. (2001). The wisdom of children-in-context. *International Journal of Anthropology, 16*(2-3), 65-76.

Greig, A., & Taylor, J. (1999). *Doing research with children.* London: SAGE.

Grossman, H. (2004). *Classroom behavior management for diverse and inclusive schools* (3rd ed.). Lanham, MD: Rowman & Littlefield.

Groves, B. M. (1997). Growing up in a violent world: The impact of family and community violence on young children and their families. *Topics in Early Childhood Special Education, 17*(1), 74-111.

Groves, B. M. (2002). *Children who see too much: Lessons from the child witness to violence project.* Boston: Beacon Press.

Hallet, C., Murray, C., & Punch, S. (2003). Young people and welfare. Negotiating pathways. In C. Hallett, & A. Prout (Eds.), *Hearing the voices of children. Social policy for a new century* (pp. 123-138). London: RoutledgeFalmer.

Hallett, C., & Prout, A. (Ed.). (2003). *Hearing the voices of children. Social policy for a new century.* London: RoutledgeFalmer.

Hamby, S. L., & Finkelhor, D. (2004). *The Comprehensive Juvenile Victimization Questionnaire.* Durham: University of New Hampshire.

Hancock, J., & Trainor, C. (2004). Ensuring consistency with the Education Act 1989: In a child's best interest. *Childrenz Issues, 8*(1), 35-49.

Hanson, M. J., & Carta, J. J. (1996). Addressing the challenges of families with multiple risks. *Exceptional Children, 62*(3), 201-212.

Hartless, J. M., Ditton, J., Nair, G., & Phillips, S. (1995). More sinned against than sinning. A study of young teenagers' experience of crime. *British Journal of Criminology, 35*(1), 114-133.

Harvey, S. T., & Evans, I. M. (2003). Understanding the emotional environment of the classroom. In D. Fraser, & R. Openshaw (Eds.), *Informing our practice* (pp. 182-195). Palmerston North, NZ: Kanuka Grove Press.

Hawkins, J. D., Herrenkohl, T. L., Farrington, D. P., Brewer, D., Catalano, R. F., Harachi, T. W., & Cothern, L. (2000). *Predictors of youth violence.* Washington, DC: Office of Juvenile Justice and Delinquency Prevention. New York: The Haworth Reference Press.

Hayden, A. (2001). *Restorative conferencing manual of Aotearoa New Zealand.* Wellington: Department for Courts.

Henaghan, M. (2005). *Care of children.* Wellington, NZ: LexisNexis.

Hiatt, S. W., Miyoshi, T. J., Fryer, G. E., Miyoshi, P. K., & Krugman, R. D. (1998). *World perspectives on child abuse: The third international resource book.* Denver, CO: University of Colorado School of Medicine, Elsevier Science.

Hilton-Jones, C. (1994). *Eliminating violence: Managing anger. A school and community violence prevention programme.* Manakau City, NZ: Special Education Service.

Holmbeck, G. N. (1997). Toward terminological, conceptual, and statistical clarity in the study of mediators and moderators: Examples from the child-clinical and pediatric psychology literatures. *Journal of Consulting and Clinical Psychology, 65,* 599-610.

Holt, M. K., & Keyes, M. A. (2004). Teachers' attitudes toward bullying. In D. L. Espelage, & S. M. Swearer (Eds.), *Bullying in American Schools. A social-ecological perspective on prevention and intervention* (pp. 121-139). Mahwah, NJ: Lawrence Erlbaum.

Hood, S., Kelley, P., & Mayall, B. (1996). Children as research subjects: A risky enterprise. *Children and Society, 10*, 117-128.

Hoover, J. H., Oliver, R., & Hazler, R. J. (1992). Bullying: Perceptions of adolescent victims in the midwestern USA. *School Psychology International, 13*, 5-16.

Howing, P. T., Wodarski, J. S., Kurtz, P. D., & Gaudin, J. M. (Eds.). (1993). *Maltreatment and the school age child: Developmental outcomes and system issues.* New York: The Haworth Press.

Hurley, D. J., & Jaffe, P. (1990). Children's observations of violence: ii: Clinical implications for children's mental health professionals. *Canadian Journal Psychiatry, 35*(6), 471-476.

Hyman, I. A. (1997). *School discipline and school violence. The teacher variance approach.* Boston: Allyn & Bacon.

Jaffe, P. G., Hurley, D. J., & Wolfe D. (1990). Children's observations of violence: i: Critical issues in child development and intervention planning. *Canadian Journal Psychiatry, 35*(6), 466-470.

James, B. (2005). *Children with complex problems. Helping children with developmental injuries caused by horrible experiences.* One day workshop, 6 April. Wellington: Compass Seminars.

James, A., & Prout, A. (Eds.). (1997). *Constructing and reconstructing childhood: Contemporary issues in the sociological study of childhood* (2nd ed.). London: Routledge Falmer.

Jamison, A., & Gilbert, L. (2000). Facilitating children's voices in the community and government. In A. B. Smith, N. J. Taylor, & M. M. Gollop (Eds.), *Children's voices: Research, policy and practice* (pp. 181-201). Auckland, NZ: Pearson Education.

Jeffrey, L. R., Miller, D., & Linn, M. (2001). Middle school bullying as a context for the development of passive observers to the victimization of others. In R. A. Geffner, M. Loring, & C. Young (Ed.), *Bullying behaviour. Current issues, research and interventions.* New York: The Haworth Maltreatment & Trauma Press.

Jenks, C. (2005). *Childhood* (2nd ed.). New York: Routledge.

Jones, J. W. (1989). Personality and epistemology: Cognitive social learning theory as a philosophy of science. *Zygon, 24*(1), 23-38.

Kane, R. G., & Mallon, M. (2006). *Perceptions of teachers and teaching.* Wellington: Ministry of Education.

Karcher, M. J. (2004). Connectedness and school violence: A framework for developmental interventions. In E. R. Gerler, Jr. (Ed.), *Handbook of school violence* (pp. 7-39). Birmingham, New York: The Haworth Reference Press.

Kazdin, A. E. (1994). Interventions for aggressive and antisocial children. In L. D. Eron, J. H. Gentry, & P. Schlegal (Eds.), *Reason to Hope. A Psychosocial Perspective on Violence and Youth* (pp. 341-382). Washington, DC: American Psychological Association.

Kaufman, J., & Zigler, E. (1989). The intergenerational transmission of child abuse. In D. Cicchetti, & V. Carlson (Eds.), *Child maltreatment. Theory and research on*

the causes and consequences of child abuse and neglect (pp. 129-153). New York: Cambridge University Press.

Kearney, A. (1993). *A study of the nature and extent of bullying in primary, intermediate and secondary schools.* Unpublished manuscript. Palmerston North: Palmerston North College of Education.

Keenan, M. (1995). *A Study of Students' and Staff's Perceptions of the Nature and Extent of Bullying at a Provincial Secondary School.* Unpublished manuscript.

Kelly, G. (1998, September). *Children on Childhood.* The Irish Society for the Prevention of Cruelty to Children. Paper presented at the IPSCAN Conference, Auckland, New Zealand.

Kelsey, J. (1995). *The New Zealand Experiment. A world model for structural adjustment?* Auckland, NZ: Auckland University Press.

King, N. M. P., & Churchill, L. R. (2000). Ethical principles guiding research on child and adolescent subjects. *Journal of Interpersonal Violence, 15*(7), 710-724.

Kiro, C. (2004, June). *Children's rights and physical punishment in Aotearoa New Zealand.* Paper presented at the National Seminar, "Stop it, it hurts me": Research and perspectives on the physical punishment of children. Wellington, New Zealand.

Kochenderfer Ladd, B., & Ladd, G.W. (2001). Variations in peer victimization. In J. Juvonen, & S. Graham (Eds.), *Peer harassment in school* (pp. 25-48). New York: The Guilford Press.

Krauss, H. H. (2005). Conceptualizing violence. In F. L. Denmark, H. H. Krauss, R. W. Wesner, E. Midlarsky, & U. P. Gielen (Eds.), *Violence in schools. Cross-national and cross-cultural perspectives* (pp. 11-35). New York: Springer.

Lansdown, G. (1994). Children's rights. In B. Mayall (Ed.), *Children's childhoods: Observed and experienced* (pp. 33-44). London: Falmer Press.

Lapsley, H. (1993). The measurement of family violence: A critical review of the literature. *Research Report Series, No. 16.* Wellington, New Zealand: Social Policy Agency, Department of Social Welfare.

Lashlie, C. (2002). *The journey to prison. Who goes and why.* Auckland: HarperCollins.

Lave, J., & Wenger, E. (1991). *Situated learning. Legitimate peripheral participation.* Cambridge: Cambridge University Press.

Lazarus, R. S. (2000, June). Toward better research on stress and coping. *American Psychologist, 55*(6), 665-673.

Leavitt, L. A. &. Fox, N. A. (Eds.). (1993). *The psychological effects of war and violence on children.* Hillsdale, NJ: Lawrence Erlbaum.

Lehmann, P. (1997). The development of posttraumatic stress disorder (PTSD) in a sample of child witnesses to mother assault. *Journal of Family Violence, 12,* 241-257.

Levin, D. E. (1994). *Teaching young children in violent times: Building a peaceable classroom.* Cambridge, MA: Educators for Social Responsibility.

Lewis, A. (2004). Doing research with children and young people: An introduction. In S. Fraser, V. Lewis, S. Ding, M. Kellett, & C. Robinson (Eds.), *Doing research with children and young people* (pp. 1-11). London: SAGE.

Lewis, A., & Lindsay, G. (Eds.). (2000). *Researching children's perspectives.* Buckingham: Open University Press.

Lewis, D. O., Mallouh, C., & Webb, V. (1989). Child abuse, delinquency, and violent criminality. In D. Cicchetti, & V. Carlson (Eds.), *Child maltreatment. Theory and research on the causes and consequences of child abuse and neglect* (pp. 707-722). New York: Cambridge University Press.

Lightner, R. M., Bollmer, J. M., Harris, M. J., Milich, R., & Scambler, D. J. (2000). What do you say to teasers? Parent and child evaluations of responses to teasing. *Journal of Applied Developmental Psychology, 21*(4), 403-427.

Lind, J., & Maxwell, G. M. (1996). Children's experiences of violence at school. *Children, 20,* 10-12.

Lloyd-Smith, M., & Tarr, J. (2000). Researching children's perspectives: A sociological dimension. In A. Lewis, & G. Lindsay (Eds.), *Researching children's perspectives* (pp. 59-70). Buckingham: Open University Press.

Lorion, R. P., & Saltzman, W. (1993). Children's exposure to community violence: Following a path from concern to research to action. In D. Reiss, J. Richters, M. Radke-Yarrow, & D. Scharff (Eds.), *Children and violence* (pp. 55-65). New York: The Guilford Press.

Lowenthal, B. (2001). *Abuse and neglect. The educator's guide to the identification and prevention of child maltreatment.* Baltimore: Paul H. Brookes.

Lyle, J. (2001). Children's voice, children's views and wishes and the 'best interests' of the child: Listening to the voices of children in care. In Children's Issues Centre (Ed.), *2001 Collected Articles.* Dunedin: Children's Issues Centre, Otago University.

Lynch, M., & Cicchetti, D. (1997). Children's relationships with adults and peers: An examination of elementary and junior high school students. *Journal of School Psychology, 35*(1), 81-99.

Lynch, M., & Cicchetti, D. (2002). Links between community violence and the family system: Evidence from children's feelings of relatedness and perceptions of parent behavior. *Family Process, 41*(3), 519-532.

Maharaj, A. S., Tie, W., & Ryba, K. (2000). Deconstructing bullying in Aotearoa/New Zealand: Disclosing its liberal and colonial connections. *New Zealand Journal of Educational Studies, 35*(1), 9-23.

Mason, J., & Falloon, J. (2001). Some Sydney children define abuse: Implications for agency in childhood. In L. Alanen, & B. Mayall (Eds.), *Conceptualizing child-adult relations* (pp. 99-113). London: RoutledgeFalmer.

Masten, A. S. (2001). Ordinary magic. Resilience processes in development. *American Psychologist, 56*(3), 227-238.

Mason, S. P., & Cohen, C. P. (2001). Children's rights in education. In S. Hart, C. P. Cohen, M. F. Erickson, & M. Flekkoy (Eds.), *Children's rights in education* (pp. 15-36). London: Jessica Kingsley.

Maung, N. A. (1995). *Young people, victimization and the police: British Crime survey findings on experiences and attitudes of 12 to 15 year olds.* Home Office Research Study 140. London, HMSO.

Maxwell, G. M. (1994). *Children and family violence: The unnoticed victims.* Occasional Paper No. 3. Wellington: Office of the Commissioner for Children.

Maxwell, G. M. (2005, October). *The defining features of a restorative society.* Paper presented at the "Towards a Restorative Society" Seminar, Wellington.

Maxwell, G., & Carroll-Lind, J. (1996). *Children's experiences of violence.* Wellington: Office of the Commissioner for Children.

Maxwell, G., & Carroll-Lind, J. (1997a). *The impact of bullying on children.* Occasional Paper No. 6. Wellington: Office of the Commissioner for Children.

Maxwell, G., & Carroll-Lind, J. (1997b). Children's experiences as witnesses of violence. *Children, 22,* 12-14.

Maxwell, G., & Carroll-Lind, J. (1998). Distorted childhoods: The meaning of violence for children. *Social Policy Journal of New Zealand, 10,* 177-189.

Maxwell, G., Robertson, J., Thom, A., & Walker, B. (1995). *Researching care and protection.* Wellington: Office of the Commissioner for Children and Social Policy Agency.

Mayall, B. (Ed.). (1994). *Children's childhoods: Observed and experienced.* London: Falmer Press.

Mayall, B. (2000). Foreword. In A. B. Smith, N. J. Taylor, & M. M. Gollop (Eds.), *Children's voices* (pp. vii-viii). Auckland: Pearson Education New Zealand.

Mayall, B. (2001a). Introduction. In L. Alanen, & B. Mayall (Eds.), *Conceptualizing child-adult relations* (pp. 1-11). London: RoutledgeFalmer.

Mayall, B. (2001b). Understanding childhoods: A London study. In L. Alanen, & B. Mayall (Eds.), *Conceptualizing child-adult relations* (pp. 114-128). London: RoutledgeFalmer.

Mayall, B. (2002). *Towards a sociology of childhood: Thinking from children's lives.* Buckingham, PA: Open University Press.

McMillan, B. W. (1990). An ecological perspective on individual human development. *Early Child Development and Care, 55*, 33-42.

McNeely, C. A., Nonnemaker, J. M., & Blum, R. W. (2002). Promoting school connectedness: Evidence from the National Longitudinal Study of Adolescent Health. *Journal of School Health, 72*(4), 138-46.

Melton, G. B. (1992). The law is a good thing (Psychology is too): Human rights in psychological jurisprudence. *Law and Human behaviour, 16*, 381-398.

Melton, G. B., & Kaufman, N. H. (1997). Monitoring of children's rights. In A. B.-A. H. Wintersberger (Ed.), *Monitoring and measuring the state of children: Beyond survival. Eurosocial Report No. 62* (pp. 81-88). Vienna: European Centre for Social Welfare Policy and Research.

Melzak, S. (1997). The emotional impact of violence upon children. In V. Varma (Ed.), *Violence in children and adolescents* (pp. 2-21). London: Jessica Kingsley.

Miljeteig, P. (2000). Children's democratic rights: Are we ready? What we can learn from young workers. In A. B. Smith, M. Gollop, K. Marshall, & K. Nairn (Eds.), *Advocating for children: International perspectives on human rights* (pp. 159-175). Dunedin: University of Otago Press.

Ministry of Education. (1998). *1997 TFEA survey for 1998 TFEA Deciles: List of Schools.* Wellington: Author.

Ministry of Education. (2003). *Reading literacy in New Zealand. Final results from the Progress in International Reading Literacy Study (PIRLS) and the repeat of the 1990-1991 Reading Literacy Study (10-year trends Study) for Year 5 students.* Wellington: Author.

Ministry of Health, Public Health Group. (1997, September). The health and disability sector's response to family violence: Background paper. *Family violence: Guidelines for providers to develop practice protocols: A discussion document.* Wellington: Author.

Ministry of Justice. (2004). *Restorative Justice in New Zealand. Best practice.* Wellington: Ministry of Justice.

Ministry of Social Development. (2002). *New Zealand's agenda for children.* Wellington: Author.

Ministry of Youth Development. (2004, Sept). *United Nations Convention on the Rights of the Child (2004) Five-year work programme 2004-2008.* Wellington: Ministry of Youth Development. Retrieved from www.myd.govt.nz.

Montgomery, H., & Woodhead, M. (Eds.). (2003). *Understanding childhood: An interdisciplinary approach.* Hoboken, NJ: John Wiley & Sons.

Morgan, J., & Zedner, L. (1992). *Child victims. Crime, impact and criminal justice.* Oxford: Clarendon Press.

Mullender, A., Hague, G., Iman, U. F., Kelly, L., Malos, E., & Regan, L. (2003). 'Could have helped but they didn't'. The formal and informal support systems experienced by children living with domestic violence. In C. Hallet, & A. Prout (Eds.), *Hearing the voices of children. Social policy for a new century* (pp. 139-157). London: RoutledgeFalmer.

Nairn, K., & Smith, A. B. (2002). Secondary school students' experiences of bullying at school – and their suggestions for dealing with it, *Childrenz Issues, 6*(1), 16-22.

Nairn, K., & Smith, A. B. (2003). Taking students seriously: Their rights to be safe at school. *Gender and Education, 15*(2), 133-149.

Nansel, T. R., Overpeck, M., Pilla, R. S., Ruan, W. J., Simons-Morton, B., & Scheidt, P. (2001). Bullying behaviors among U.S. youth: Prevalence and association with psychosocial adjustment. *Journal of American Medical Association, 285*(16), 2094-2100.

Nash, R., & Harker, R. (1998). *Making progress. Adding value in secondary education.* Palmerston North: ERDC Press, Massey University.

Nesbitt, E. (2000). Researching 8 to 13-year-olds' perspectives on their experience of religion. In A. Lewis, & G. Lindsay (Eds.), *Researching children's perspectives* (pp. 135-149). Buckingham: Open University Press.

Newman, L. S. (2001, September). Coping and defense: No clear distinction. *American Psychologist, 56*(9), 760-761.

New Zealand Care of Children Act 2004.

New Zealand Children and Young Persons Amendment Act 1994.

New Zealand Children, Young Persons and their Families Act 2004.

New Zealand Children and Young Persons Service. (1996). *Breaking the cycle. Interagency protocols for child abuse management.* Wellington: Author.

New Zealand Civil Union Act 2004.

New Zealand Crimes Act 1961.

New Zealand Domestic Violence Act 1995.

New Zealand Family Planning Association. (2006, Nov). *Relationship Matters, 1*(2), 1-2.

New Zealand Government. (1995). *Government Statement of Policy on Family Violence.* Wellington: Author.

New Zealand Privacy Act 1993.

New Zealand Reproductive Technology Act 2004.

New Zealand Status of Children Amendment Act 2004.

Nunnelley, J. C., & Fields, T. (1999). Anger, dismay, guilt, anxiety: The realities and roles of reporting child abuse. *Young Children, 54*(5), 74-80.

Oakley, A. (1994). Women and children first and last: Parallels and differences between children's and women's studies. In B. Mayall (Ed.), *Children's childhoods observed and experienced* (pp. 13-32). London: The Falmer Press.

O'Reilly, L. (1996). Understanding the United Nations Convention on the Rights of the Child 1989: Making it real for children and young persons. In N. J. Taylor, & A. B. Smith (Eds.), *Investing in children. Primary prevention strategies* (pp. 13-26). Dunedin: Children's Issues Centre, University of Otago.

Office of Child Abuse and Neglect. (2000). *What is child maltreatment?* Retrieved from http://www.mhsqic.org/DSQIC/OCAN/ts/ho1_5.htm

Office of the Commissioner for Children (n.d.). *The United Nations Convention on the Rights of the Child.* Wellington: Author.

Olweus, D. (1993). *Bullying at school: What we know and what we can do.* Oxford: Blackwell.

Olweus, D. (1999). Sweden. In P. K Smith, Y. Morita, J. Junger-Tas, D. Olweus, R. Catalano, & P. Slee (Eds.), *The nature of school bullying: A cross-national perspective* (pp. 7-27). London: Routledge.

Olweus, D. (2001). Peer harassment: A critical analysis and some important issues. In J. Juvonen, & S. Graham (Eds.), *Peer harassment in school. The plight of the vulnerable and victimized* (pp. 3-20). New York: The Guilford Press.

Orpinas, P., Horne, A. M., & Staniszewski, D. (2003). School bullying: Changing the culture by changing the school. *School Psychology Review, 32*(3), 384-400.

Osborne, J. W. (2004). Identification with academics and violence in schools. In E. R. Gerler, Jr. (Ed.), *Handbook of school violence* (pp. 41-74). New York: The Haworth Reference Press.

Osher, D., Kenziora, K. T., VanDenBerg, J., & Dennis, K. (1999). Beyond individual resilience. *Reaching Today's Youth, 3*(4), 2-4.

Osher, D., VanAcker, R., Gable, R., Dwyer, K., & Quinn, M. (2004). Warning signs of problems in schools: Ecological perspectives and effective practices for combating school aggression and violence. In M. J. Furlong, G. M. Morrison, R. Skiba, & D. G. Cornell (Eds.), *Issues in school violence research* (pp. 13-37). New York: The Haworth Press.

Osofsky, J. D. (1995). Children who witness domestic violence: The invisible victims. *Social Policy Report, 9*, 1-18.

Osofsky, J. D. (1999). The impact of violence on children. *Domestic violence and children, 9*(3), 33-49.

Osofsky, J. D., Wewers, S., Hann, D. M., & Fick, A. C. (1993). Chronic community violence. In D. Reiss, J. E. Richters, M. Radke-Yarrow, & D. Scharff (Eds.), *Children and violence* (pp. 36-46). New York: Guilford Press.

Pajares, F. (2002). Overview of social cognitive theory and of self-efficacy. Retrieved August 16, 2006, from http://www.emory.edu/EDUCATION/mfp/eff.html

Payne, R. K. (1999). *Preventing school violence by creating emotional safety.* TX: aha! Process.

Peart, N., & Holdaway, D. (1998). Legal and ethical issues of health research with children. *Childrenz Issues, 2*(2), 42-46.

Peart, N., Foley, M., & Henaghan, M. (2003). Children as research participants. In J. Dawson, & N. Peart (Eds.), *The law of research: A guide* (pp. 269-284). Dunedin: University of Otago Press.

Pepler, D., & Slaby, R. (1994). Theoretical and developmental perspectives on youth and violence. In L. D. Eron, J. H Gentry, & P. Schlegal (Eds.), *Reason to hope. A psychosocial perspective on violence and youth* (pp. 27-58). Washington, DC: American Psychological Association.

Pepler, D., Craig, W., Ziegler, S., & Charach, A. (1993). A school-based anti-bullying intervention: Preliminary evaluation. In D. Tattum (Ed.), *Understanding and managing bullying* (pp. 76-91). Oxford, UK: Heinemann.

Perry, B. D. (1994). Neurobiological sequelae of childhood trauma: Post-traumatic stress disorders in children. In M. Murberg (Ed.), *Catecholamine function in post-traumatic stress disorder. Emerging concepts* (pp. 253-276). Washington, DC: American Psychiatric Press.

Perry, B. D. (1995). *Principles of working with traumatized children: Special considerations for parents, caretakers and teachers.* CIVITAS Child Trauma Programs: Houston, TX: Baylor College of Medicine.

Perry, B. D. (1996). Neurodevelopmental adaptations to violence: How children survive the intragenerational vortex of violence. In B. D. Perry. *Violence and childhood trauma: Understanding and responding to the effects of violence on young children* (pp. 1-18). Cleveland, OH: Gund Foundation.

Perry, B. D. (1997). Incubated in terror: Neurodevelopmental factors in the 'cycle of violence'. In J. D. Osofsky (Ed.), *Children in a violent society* (pp. 124-149). New York: Guilford Press.

Perry, B. D. (2002). Childhood experience and the expression of genetic potential: What childhood neglect tells us about nature and nurture. *Brain and Mind, 3*, 79-100.

Perry, B. D. (2004). *Understanding traumatized and maltreated children: The core concepts.* Houston, TX: Child Trauma Academy.

Perry, B. D. (2005, March). *New directions in interventions with maltreated and traumatised children and adolescents.* Paper presented at the Brain Development Seminar, Wellington, New Zealand.

Perry, D. G., Hodges, E. V. E., & Egan, S. K. (2001). Determinants of chronic victimization by peers. In J. Juvonen, & S. Graham (Eds.), *Peer harassment in school. The plight of the vulnerable and victimized* (pp. 73-104). New York: The Guilford Press.

Prout, A. (2001). Preface. In L. Alanen, & B. Mayall (Eds.), *Conceptualizing child-adult relations* (pp. xi-xii). London: RoutledgeFalmer.

Prout, A. (2003). Participation, policy and childhood. In C. Hallett, & A. Prout (Eds.), *Hearing the voices of children. Social policy for a new century* (pp. 11-25). London: RoutledgeFalmer.

Pryor, J., & Woodward, L. (1996). Families and parenting. In P. A. Silva & W. R. Stanton (Eds.), *Child to Adult. The Dunedin multidisciplinary health and development study* (pp. 247-258). Auckland: Oxford University Press.

Purkey, S. C. & Smith, M. S. (1982, December). Too soon to cheer? Synthesis of research on effective schools. *Educational Leadership, 40,* 64-69.

Putman, F. W., & Trickett, P. K. (1993). Child sexual abuse: A model of chronic trauma. In D. Reiss, J. E. Richters, M. Radke-Yarrow, & D. Scharff (Eds.), *Children and violence* (pp. 82-96). New York: Guilford Press.

Qvortrup, J. (1997). A voice for children in statistical and social accounting: A plea for children's voice to be heard. In A. James, & A. Prout (Eds.), *Constructing and reconstructing childhood: Contemporary issues in the sociological study of childhood* (2nd ed.) (pp. 85-106). London: RoutledgeFalmer.

Qvortrup, J. (2000). Macroanalysis of Childhood. In P. Christensen, & A. James (Eds.), *Research with Children. Perspectives and Practices* (pp. 77-97). London: Falmer Press.

Rappoport, A. L. (2005). *Restorative practices.* Retrieved from http://www.metrokids.com/january05/restorative0105.html

Rauskauskas, J. L. (2005). *Role of attribution style and coping strategy selection in the relationship between peer victimization and outcomes among economically disadvantaged students.* Unpublished doctoral dissertation, University of California, Davis.

Raskauskas, J., Carroll-Lind, J., & Kearney, A. (2005). Text-bullying: Is it related to relational or verbal aggression? *SET: Research Information for Teachers 3,* 7-10.

Raskauskas, J., Carroll-Lind, J., & Kearney, A. (in press). Multiple peer victimization in New Zealand: Relations to bullying behaviour. *New Zealand Journal of Educational Studies, 41*(2).

Reiss, D., Richters, J. E., Radke-Yarrow, M., & Scharff, D. (Eds.). (1993). *Children and violence.* New York: Guilford Press.

Richardson, P., & Schwartz, I. (1998). Making friends in preschool: Friendship patterns of young children with disabilities. In L. H. Meyer, H-S. Park, M. Grenot-

Scheyer, I. S. Schwartz, & B. Harry (Eds.), *Making friends: The influences of culture and development* (pp. 65-80). Baltimore, MD: Paul H. Brookes.

Richters, J. E., & Martinez, P. (1993). The NIMH Community Violence Project: 1. Children as victims of and witnesses to violence. In D. Reiss, J. E. Richters, M. Radke-Yarrow, & D. Scharff (Eds.), *Children and violence* (pp. 7-21). New York: Guilford Press.

Rigby, K. (1999). Gender and bullying in school. In P. T. Slee, & K. Rigby (Eds.), *Children's peer relations* (pp. 47-59). London: Routledge.

Ristock, J. L. (1995). *The impact of violence on mental health: A guide to the literature.* Ottawa, Ontario: Health Canada.

Ritchie, J., & Ritchie, J. (1981). *Spare the rod.* Sydney: Allen & Unwin.

Ritchie, J., & Ritchie, J. (1990). *Violence in New Zealand.* Wellington: Allen & Unwin.

Ritchie, J., & Ritchie, J. (1993). *Violence in New Zealand.* Wellington: Huia.

Ritchie, J., & Ritchie, J. (2002). The rainbow path to overcoming violence. In J. Ritchie, J. Ritchie, K. Birch, R. McClay, B. Easton, D. Wilson, A. Powell, T. Cardigan, Weave, C. Marshall, J. Consedine, & J. Roberts (Eds.), *Overcoming violence in Aotearoa New Zealand* (pp. 8-17). Wellington: Philip Garside.

Rodkin, P. C. (2001). Peer ecologies of aggression and bullying. In D. L. Espelage, & S. M. Swearer (Eds.), *Bullying in American schools. A social-ecological perspective on prevention and violence* (pp. 87-106). Mahwah, NJ: Lawrence Erlbaum.

Rodkin, P. C., & Hodges, E. V. (2003). Bullies and victims in the peer ecology: Four questions for psychologists and school professionals. *School Psychology Review, 32*(3), 384-400.

Rogoff, B. (1990). *Apprenticeship in thinking: Cognitive development in social context.* New York: Oxford University Press.

Rogoff, B. (2003). *The cultural nature of human development.* Oxford: Oxford University Press.

Runyan, D. K. (2000). The ethical, legal, and methodological implications of directly asking children about abuse. *Journal of Interpersonal Violence, 15*(7), 675-681.

Rutter, M. (1985). Resilience in the face of adversity: Protective factors and resistance to psychiatric disorder. *British Journal of Educational Psychiatry, 147*, 598-611.

Rutter, M. (1990). Psychosocial resilience and protective mechanisms. In J. E. Rolf, A. S. Masten, D. Cicchetti, K. H. Nuechterlein, & S. Weintraub (Eds.), *Risk and*

protective factors in the development of psychopathology (pp. 181-284). Cambridge, England: Cambridge University Press.

Rutter, M., Maughan, B., Mortimore, P., & Ouston, J. (1979). *Fifteen thousand hours: Secondary schools and their effects on children.* Somerset: Open Books.

Sattler, J. M. (1998). *Clinical and forensic interviewing of children and families.* San Diego: Author.

Sautter, R. C. (1995, January). Standing up to violence. Kappan special report. *Phi Delta Kappan,* 384-392.

Simpson, B. (1989). Giving children a voice in divorce: The role of family conciliation. *Children and Society, 3*(3), 261-274.

Schonert-Reichl, K. A. (1993). Empathy and social relationships in adolescents with behavioral disorders. *Behavioral Disorders, 18,* 189-204.

Schwarz, E. D., & Perry, B. D. (1994). The post-traumatic response in children and adolescents. *The Psychiatric Clinics of North America, 17*(2), 311-326.

Schwartz, D., & Hopmeyer Gorman, A. (2003). Community violence exposure and children's academic functioning. *Journal of Educational Psychology, 95*(1), 163-173.

Shapiro, J. P., Friedman, D., Meyer, M., & Loftus, M. (1996, November 11). Invincible kids. *U.S. News and World Report,* 62-71.

Shepherd, P. (1996). Family violence and children: How schools can respond. *Set: Research Information for Teachers, 1*(5), 1-4.

Shore, R. (1997). *Rethinking the brain: New insights into early development.* New York: Families and Work Institute.

Simcock, A. (2000). *Safe not sorry: A handbook for selecting suitable people to work with children.* Hamilton: The Institute for Child Protection Studies.

Skiba, R., Simmons, A. B., Peterson, R., McKelvey, J., Forde, S., & Gallini, S. (2004). Beyond guns, drugs and gangs: The structure of student perceptions of school safety. In G. Morrison, M. Furlong, R. Skiba, & D. Cornell (Eds.), *Issues in school violence research* (pp. 149-171). New York: The Haworth Press.

Slee. P. T. (2003). Violence in schools: An Australian commentary. In P. K. Smith (Ed.), *Violence in schools. The response in Europe* (pp. 301-316). London: RoutledgeFalmer.

Slee, R. (1995). *Changing theories and practices of discipline.* London: The Falmer Press.

Smith, A. (1996). *Incorporating children's perspectives into research in New Zealand.* Unpublished manuscript. Dunedin: University of Otago.

Smith, A. B. (2001). Promoting diversity rather than uniformity: Theoretical and practical perspectives. In Children's Issues Centre (Ed.), *2001 collected articles.* Dunedin: Children's Issues Centre, University of Otago.

Smith, A. B., Gollop, M. M., Taylor, N. J., & Marshall, K. (2004). *The Discipline and guidance of children: A summary of research.* Dunedin: Children's Issues Centre, University of Otago and the Office of the Children's Commissioner.

Smith, A. B., Gollop, M. M., Taylor, N. J., & Marshall, K. (Eds.). (2005). *The discipline and guidance of children: Messages from research.* A review of research literature for the Office of the Children's Commissioner by the Children's Issues Centre. Dunedin and Wellington, NZ: Children's Issues Centre and Office of the Children's Commissioner.

Smith, A. B., & Taylor, N. J. (2000). The sociocultural context of childhood: Balancing dependency and agency. In A. B. Smith, N. J. Taylor, & M. M. Gollop (Eds.), *Children's voices. Research, policy and practice* (pp. 1-17). Auckland: Pearson Education New Zealand.

Smith, A. B., Taylor, N. J., & Gollop, M. M. (Eds.). (2000). *Children's voices. Research, policy and practice.* Auckland: Pearson Education New Zealand.

Smith, P. K. (1994, Winter). Bullying: From crisis management to prevention. *Children UK,* 3.

Smith, P. K. (Ed.). (2003). *Violence in schools. The response in Europe.* London: RoutledgeFalmer.

Smith, P. K., & Ahmad, Y. (1990). The playground jungle: Bullies, victims and intervention strategies. *Set, 1*(6), 1-4.

Smith, P. K., Morita, Y., Junger-Tas, J., Olweus, D., Catalano, R., & Slee, P. (Eds.). (1999). *The nature of bullying: A cross-national perspective.* London: Routledge.

Sobsey, D. (1994). *Violence and abuse in the lives of people with disabilities. The end of silent acceptance?* Baltimore, MD: Paul H. Brookes.

Solberg, M. E., & Olweus, D. (2003). Prevalence estimation of school bullying with the Olweus Bully/Victims Questionnaire. *Aggressive Behavior, 29,* 239-268.

Stone, D. (1998). *Social Cognitive Theory.* Tampa, FL: University of South Florida. Retrieved from http://hsc.usf.edu/~kmbrown/Social_Cognitive_Theory_.htm

Straus, M. (1994). *Beating the devil out of them.* New York: Lexington Books, Macmillan.

Straus, M. A., & Gelles, R. J. J. (1986). Societal change and change in family violence from 1975 to 1985 as revealed by two national surveys. *Journal of Marriage and the Family, 48,* 465-479.

Sullivan, K. (2000a). Bullying in schools. Issues for New Zealand teachers. *SET, 2,* 39-43.

Sullivan, K. (2000b). *The anti-bullying handbook.* Auckland: Oxford University Press.

Sullivan, K., Cleary, M., & Sullivan, G. (2004). *Bullying in secondary schools. What it looks like and how to manage it.* London: Paul Chapman.

Swearer, S. M., & Doll, B. (2001). Bullying in schools: An ecological framework. *Journal of Emotional Abuse, 2*(2-3), 7-23.

Swearer, S. M., & Espelage, D.L. (2004). Introduction: A social-ecological framework of bullying among youth. In D. L. Espelage, & S. S. Swearer (Eds.), *Bullying in American Schools. A social-ecological perspective on prevention and intervention* (pp. 1-12). Mahwah, NJ: Lawrence Erlbaum.

Swearer, S. M., Grills, A. E., Haye, K. M., & Cary, P. T. (2004). Internalizing problems in students involved in bullying and victimization: Implications for intervention. In D. L. Espelage, & S. M. Swearer (Eds.), *Bullying in American schools. A social-ecological perspective on prevention and violence* (pp. 63-83). Mahwah, NJ: Lawrence Erlbaum.

Tapp, P., & Henaghan, M. (2000). Family law: Conceptions of childhood and children's voices – the implications of article 12 of the United Nations Convention on the Rights of the Child. In A. B. Smith, N. J. Taylor, & M. M. Gollop (Eds.), *Children's voices. Research, policy and practice* (pp. 91-109). Auckland: Pearson Education New Zealand.

Taylor, N. J., & Smith, A. B. (2000). The way forward: Incorporating children's perspectives in research, policy and practice. In A. B. Smith, N. J. Taylor, M. M. Gollop (Eds.), *Children's voices: Research, policy and practice* (pp. 202-207). Auckland: Pearson Education New Zealand.

Terr, L. (1991). Childhood traumas: An outline and overview. *American Journal of Psychiatry, 148*(1), 10-20.

UNICEF (2003, Sept). UNICEF: *A league table of child maltreatment deaths in rich nations.* Innocenti Report Card, No. 5. Florence: Innocenti Research Centre.

UNICEF (2005). UNICEF: *Children living below national poverty lines.* Florence: Innocenti Research Centre. Retrieved from www.unicef.icdc.org

United Nations (1989). *The United Nations convention on the rights of the child.* Geneva: Author. Retrieved from http://www.unicef.org/crc/fulltext.htm

United States National Centre on Addiction and Substance Abuse (2003). *The formative years: Pathways to substance abuse among girls and young women ages 8-22.* New York: Columbia University.

Varnham, S. (2004). *Seeing things differently: Restorative justice and school discipline.* Retrieved from http--www.sacl.vuw.ac.nz-fca-sacl-files-Seeingthingsdifferently.pdf

Vygotsky, L. S. (1978). *Mind in society.* Cambridge, MA: Harvard University Press.

Walker, M. (1993). *Surviving secrets. The experience of abuse for the child, the adult and the helper.* Buckingham: Open University Press.

Wallach, L. B. (1993, May). Helping children cope with violence. *Young Children.* NAEYC.

Wallach, L. B. (1994). *Violence and young children's development.* ERIC Digest. Retrieved from http://ericeece.org/pubs/digests/1994/wallac94.html

Watson, P. D., Denny, S. J., Adair, V., Ameratunga, S. N., Clark, T. C., Crengle, S. M., Dixon, R. S., Fa'asisila, M., Merry, S. N., Robinson, E. M., & Sporle. A. A (2003). A health profile of New Zealand youth who attend secondary school. *New Zealand Medical Journal, 116*(1171). Retrieved from http://www.nzma.org.nz/journal/116-1171/380/

Weis, L., Marusza, J., & Fine, M. (1998). Out of the cupboard: Kids, domestic violence, and schools. *British Journal of Sociology of Education, 19*(1), 53-73.

Wenger, E. (1998). *Communities of practice: Learning, meaning, and identity.* Cambridge, UK: Cambridge University Press.

Wertsch, J. V. (1991). *Voices of the mind. A sociocultural approach to mediated action.* Cambridge, MA: Harvard University Press.

Wertsch, J. V. (1998). *Mind as action.* New York: Oxford University Press.

Whitney, I., & Smith, P. K. (1993, Spring). A survey of the nature and extent of bullying in junior/middle and secondary schools. *Educational Research, 35* (1), 3-25.

WHO Global Consultation on Violence and Health (1996). *Violence: a public health priority.* Geneva: World health organization (document WHO/EHA/SPL.POA. 2).

Wolfe, D. A., Crooks, C. V., Lee, V., McIntyre-Smith, A., & Jaffe, P. G. (2003). The effects of children's exposure to domestic violence: A meta-analysis and critique. *Clinical Child and Family Psychology Review, 6*(3), 171-187.

Wood, B. (1998). Physical punishment of children: Legal and ethical issues. *Childrenz Issues, 2*(2), 53-55.

World Health Organisation (2002). World Report on Violence and Health. Retrieved from http://www.who.int/violence-injury_prevention/violence/world_report/en/

Yegidis, B. L. (1992). Clinical care update. Family violence: Contemporary research findings and practice issues. *Community Mental Health Journal, 28*(6), 519-529.

Yoneyama, S., & Rigby, K. (2006). Bully/victim students and classroom climate. *Youth Studies Australia, 25*(3), 34-41.

Zwi, A. B. & Rifkin, S. (1995). Violence involving children. *British Medical Journal, 311*(25), 1384.

APPENDICES

A Ethical Approval

B Letter to School Principals

C Letter to Parents

D Children's Consent Form

E Guide Sheet for *Children's Experiences of Violence* Questionnaire (CEVQ); and *Children's Experiences of Violence* Questionnaire (CEVQ)

F Form Providing Toll-free Telephone Numbers of Counsellors

Appendix A

Ethical Approval

MASSEY
UNIVERSITY

Private Bag 11 222
Palmerston North
New Zealand
Telephone +64-6-356 9
Facsimile +64-6-350 5

FACULTY OF
BUSINESS STUDIES

DEPARTMENT OF
HUMAN
RESOURCE
MANAGEMENT

27th May 1998

Janis Carroll-Lind
Department of Learning and Teaching
College of Education
MASSEY UNIVERSITY

Dear Janis

Re: Human Ethics Application HEC 98/76

Thank you for your letter of 20th May and your discussions with Arohia Durie.

It seems that on this occasion because of the circumstances of the research we are prepared to approve the use of passive consent. As you mention in your letter this undertaking was given on the basis that a precedent would not be set. As a result the ethics of your proposal are approved.

Yours sincerely

Professor Philip Dewe
Chairperson
Human Ethics Committee

Appendix B

Letter to School Principals

Massey University
COLLEGE OF EDUCATION
Te Kupenga o Te Matauranga

LEARNING AND TEACHING
Private Bag 11 222
Palmerston North
New Zealand
T 64 6 356 9099
F 64 6 351 3383
www.massey.ac.nz

18 June 1998

Dear Principal

I am a teacher currently lecturing in Special Education at Massey University College of Education. For my thesis I am doing research on children's experiences and perceptions of violence. The research project will also be done in conjunction with the Office of the Commissioner for Children. I would like to invite your school to participate in this project.

The primary goal of the research is to contribute to knowledge of children's experiences and perceptions of violence in order to plan effective prevention and intervention programmes and strategies to protect children. The findings of this study may also be used by the Office of the Commissioner for Children to influence policy making that will positively affect children's lives.

Another goal is to assist schools to improve the ways in which they can prevent harm to children and assist those who have been harmed. Schools which participate will be offered the opportunity to share in a seminar presentation to inform staff of current thinking on children's experiences of violence and offer suggestions for how to reduce the incidence of violence within schools. A summary of the findings of the study will be distributed to all participating schools at the conclusion of the project.

If you choose to participate, it would involve a questionnaire being conducted in some classrooms of children aged 9-13 years. Permission will also be sought from all pupils and families who take part. Anonymity and participants' confidentiality are paramount. This project meets the strict guidelines set down by Massey University's Ethical Principles which cover: informed consent, confidentiality, avoidance of harm and deception, social sensitivity and the understanding that the right of the participant supersede that of the researcher. Procedures have been developed by the researcher to ensure the safety of all students who participate, and effective ways to assist any children who may disclose abuse in the course of the research are in place. Details of the arrangements will be discussed with all participating schools and modified to meet any concerns raised by Principals, Staff or Boards of Trustees.

We would especially appreciate your participation as it is important to include a representative cross section of schools and children in New Zealand.

Yours sincerely

Janis Carroll-Lind

Please could you complete and return this form to: Janis Carroll-Lind, Dept. Learning & Teaching, Massey University College of Education, Private Bag 11-035, Palmerston North.

Principal's Name: _____

Name of School: _____

I am willing for my school to participate Yes / No

I would like further information Yes / No

Signature_____ Date_____

CHILDREN'S EXPERIENCES OF VIOLENCE

RESEARCH INFORMATION SHEET

DESCRIPTION OF PROJECT:

The purpose of this study is to examine children's experiences of violence in New Zealand. There is limited New Zealand research data on children's experiences of violence, that is being bullied, assaulted and harassed by schoolmates, family and non-family members. There are also limited data available on children's indirect experiences of violence, that is, witnessing violent acts against others; whether on television or against family members, friends or strangers. Information regarding children's experiences of violence is important as overseas research indicates that violence experienced by children has profound effects on their development, on their relationships with others and on their future mental health; for example their ability to function in their community, school and home environments.

The intent of this study is to obtain data that are relevant and represent the current prevalence, incidence, impact and consequences of children's experiences of violence in New Zealand. A representative national sampling will be conducted that will assess children's perceptions of how often they have experienced violence, directly or indirectly, and how violence has and is affecting their lives.

Information gained from the perspective of the child reflects Article 12 of the United Nations Convention on the Rights of the Child which states the importance of hearing the child's own voice. Advocacy for the rights of children must include valid information based on children's views of their own experiences. Data from this sampling would provide a valid base from which government, communities, schools and parents could make decisions about ways to better protect children from violence and from which services and programmes could be identified or designed to effectively carry out these decisions.

The study extends earlier research conducted by the Office of the Commissioner for Children on: Children's Experiences of Violence (Maxwell & Carroll-Lind, 1996). Results from this study identified a variety of different types of children's experiences of violence and provided a picture from the perspective of 11-13 year olds of hurtful and fearful events in their lives. The results indicate that children are vulnerable to events which are intended and preventable as well as to events that are unintended and unpreventable.

This current study builds on the earlier research findings and will examine issues not addressed in the initial study, such as the incidence and prevalence of violence; the ways in which the actual violent events are experienced and coped with by the children and factors that need to be considered in order to create a safer world for children. A questionnaire designed to yield data regarding the prevalence and

incidence of children's experiences of violence and to obtain information about the impact and consequences of these violent events will be given to a representative national sampling of children aged 9-13 years.

Objectives:

The overall goal of the project is to examine children's experiences of violence in New Zealand – at home and school; to use this information to create safer environments for children and to provide supports that will lessen the impact of violence when it is experienced. This overall goal will be achieved through the research questions which focus on the following four main themes or objectives.

Objective 1 – Violence toward children – how much and how often:
To conduct a national survey using a random sample of schools, that will determine prevalence and incidence of various types of experiences of violence that hurt and harm 9 -13 year old children.

Objective 2 – Family violence and childhood disadvantage:
To examine the relationship between violence at home, family disadvantage and/or protective factors, and violence at school as either a victim or perpetrator.

Objective 3 – Violence and the culture of the school:
To explore the correlates of violence in regard to particular aspects of school climates, for example the presence/absence of recognised anti-bullying protective measures.

Objective 4 – Cognitions of violence and bullying and children's coping strategies:
To examine the impact of violence on children's academic achievement and mental health.
To also identify strategies and attributions children make regarding violence (especially with respect to blame and beliefs about aetiology), and to gain their view of the effective coping strategies that can be used by themselves and/or others.

Janis Carroll-Lind
August 1998

Appendix C

Letter to Parents

Massey University
COLLEGE OF EDUCATION
Te Kupenga o Te Matauranga

LEARNING AND TEACHING
Private Bag 11 222
Palmerston North
New Zealand
T 64 6 356 9099
F 64 6 351 3383
www.massey.ac.nz

14 October 1998

Children's Experience of Violence

Dear Parents/Caregivers

Your child's school has been randomly selected to be invited to participate in my research study.

My research is about 9-13 year old children's experiences of violence. I wish to learn what makes children afraid and what hurts them. Some children have had very few experiences of violence. Others have had several. I want as many children to take part as possible so that I can describe the different experiences that different children have.

Knowledge gained from this research should provide a better understanding of how to guard children against harm and may help schools to improve the ways in which they can reduce the impact of violence on children's learning, health and development.

A questionnaire that will take about twenty minutes will be administered in the classroom by a researcher who is also a qualified teacher. The questions are designed to get at the types of violence children witness or experience, and when, where and how this violence has affected them.

The children will **not** put their names on their questionnaires. The questionnaire will be anonymous and all information from the questionnaires will be confidential. When they finish filling out their questionnaire, the children will be instructed to put it into a sealed envelope, then place the envelope into a collection box. Nothing on the questionnaire will identify the person who filled it out. The only exception to this is if the child chooses to identify themselves to the researcher as being at risk. The questionnaires will be treated with strictest confidence, that is, they will be kept in a locked file until destroyed. The data from the questionnaires will be analysed and a report written. No child will be able to be identified from information given in the report. The overall findings of this project will be sent to the school to be shared with those who have participated. All correspondence will be sent out by the school on behalf of the researcher who will not have access to any home or private addresses.

I would appreciate it if you allow your child to participate. Your child will also be given a choice as to whether or not to participate. Permission initially given by either you or your child may be withdrawn at anytime. Thank you for your consideration of this important matter.

If you would like further information, please phone me at the address below:

Janis Carroll-Lind
Massey University College of Education
Phone: (06) 357-9104 (extn: 8802)

If you do NOT want your child to participate, you must fill out the form below, then refold this letter so the return address and freepost number is showing, and send it back by: 5 *November*

==========

I do NOT want my child to participate in the research project described in this letter.

Name of parent/caregiver (print) _____

Name of child (print)_____ School/Room_____

Signed (Parent/Caregiver)_____ Date_____

Appendix D

Children's Consent Form

Children's Experiences of Violence

This questionnaire will be strictly confidential.
After you have finished the questionnaire you will put it in a sealed envelope so you cannot be identified.
This is not a test! There are no right or wrong answers - we are only interested in what you think.

Please sign the form below.

Name: _____

I understand that I don't have to answer any questions I don't want to.	Yes ( ) No ( )
I understand that I can withdraw at any time.	Yes ( ) No ( )
I am willing to take part in this study.	Yes ( ) No ( )

Signed:_____ Date:_____

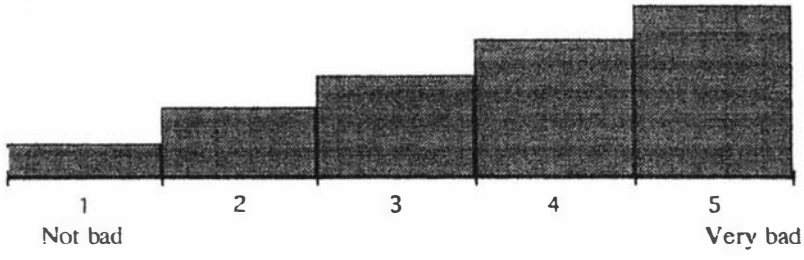
Appendix E

Guide Sheet for *Children's Experiences of Violence* Questionnaire (CEVQ)

WHICH OF THESE THINGS HAS EVER HAPPENED TO YOU?

On the next page is a list of things that might have happened to you. Here is a guide for how to answer these questions to save you doing lots of writing.

Ever happened	How often since Xmas?	Where did it happen?	Who did it?	How bad was it?
Y=Yes, N=No	Write number of times it happened. If it happened more than 10 times, write lots. (L=lots)	S=school H=home O=other	F=friends, classmates S=brothers & sisters C=other children P=parent / caregiver T=teacher OKA=other known adult ST=stranger NO=no-one DK=don't know	Write either 1, 2, 3, 4, or 5 using the scale below



On the next page you should put your answers in the box under each question. Here is an example of how to answer the questions.

If **being in a fire** has never happened to you - your answer would look like this:

Example 1	Ever happened?	How often since Xmas?	Where did it happen?	Who did it?	How bad was it?
Being in a fire	**No**				

If the fire has happened once since Xmas, it happened at school, you don't know who was responsible, and it has hurt you very badly, - your answer would look like this:

Example 2	Ever happened?	How often since Xmas?	Where did it happen?	Who did it?	How bad was it?
Being in a fire	**YES**	**1**	**S**	**DK**	**5**

Children's Experiences of Violence Questionnaire (CEVQ)

This questionnaire aims to find out what it is that hurts children and what makes them afraid. The questions are about the bad things that have happened to you or that you have watched happening to others that have upset you.

There are no right or wrong answers – we are just interested in what you think.
All your answers will be confidential.
No-one else in the school will see them.
There will be no name on your questionnaire.
You will be given a sealed envelope to put the questionnaire in when you finish.

WHAT HAS HAPPENED TO YOU SINCE CHRISTMAS?

1 Think about what has happened in your life (to you) since the Christmas holidays. Write down all the bad things that:

Happened to you or that ***You watched happening***

Hurt you or that ***Made you afraid***

Do not worry if you can't think of anything

2 Now you should put your answers in the boxes below:

There is an X in the boxes that you do not need to answer.

TOPICS:

1. Physical Violence: Being punched, kicked, beaten or hit, or getting into a physical fight (punch up)	Ever happened?	How often since Xmas?	Where did it happen?	Who did it?	How bad was it?
(a) Happened to me					
(b) Watched happening to other children					
(c) Watched happening to adults					
(d) Watched on T.V, videos or movies			X	X	

COPING:

If these did happen think about the worst thing that happened to you. In each box write either the words **Yes, Partly or No** *to answer the questions about coping.*

Question	*Answer*		
1. Physical Violence	**Yes**	**Partly**	**No**
(a) Did you feel it was your fault?			
(b) Could you stop it or make a difference to what happened?			
(c) Who else knew what happened? _____			
(d) Did they help, either then or later?			

2. Emotional Violence: Being threatened, called names, ganged up on, left out, not spoken to, narked on, gossiped about & having tales told about me.	Ever happened?	How often since Xmas?	Where did it happen?	Who did it?	How bad was it?
(a) Happened to me					
(b) Watched happening to other children					
(c) Watched happening to adults					
(d) Watched on TV, videos or movies			X	X	

COPING:

Question *Answer*

2. Emotional Violence	**Yes**	**Partly**	**No**
(a) Did you feel it was your fault?			
(b) Could you stop it or make a difference to what happened?			
(c) Who else knew what happened?_____			
(d) Did they help, either then or later?			

3. Sexual Violence: Having unwanted sexual touching or being asked to do unwanted sexual things	Ever happened?	How often since Xmas?	Where did it happen?	Who did it?	How bad was it?
(a) Happened to me					
(b) Watched happening to other children					
(c) Watched happening to adults					
(d) Watched on T.V, videos and movies			X	X	

COPING:

Question *Answer*

3. **Sexual Violence**	**Yes**	**Partly**	**No**
(a) Did you feel it was your fault?			
(b) Could you stop it or make a difference to what happened?			
(c) Who else knew what happened?_____			
(d) Did they help, either then or later?			

4. **Traumatic Events**	Ever happened?	How often since Xmas?	Where did it happen?	Who did it?	How bad was it?
Someone close dying, having a bad accident or being very sick					
Parents separating, divorcing					
Being lonely or having no friends					
Feeling unwanted or unloved					
Caught doing wrong things					
Bad things happening to pets					
Worries about bad things					
Having things stolen or house burgled					
Other----------					
Other----------					

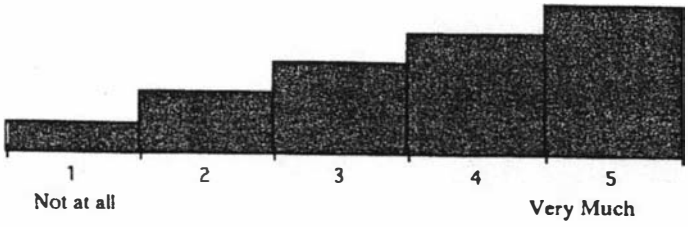
COPING:

Question *Answer*

4. **Traumatic Events**	**Yes**	**Partly**	**No**
(a) Did you feel it was your fault?			
(b) Could you stop it or make a difference to what happened?			
(c) Who else knew what happened?_____			
(d) Did they help, either then or later?			

3 SCHOOLS CAN MAKE A DIFFERENCE:

For the next questions, write a number from the scale below.



Question	*Answer*
School Characteristics	**1-5 Scale**
(a) How much do you like going to school?	
(b) Can you concentrate and learn at school?	
(c) Is your school a safe place?	
(d) Is there a teacher to talk to if bad things happen?	
(e) Does everyone know the rules at your school?	
(f) Are some pupils at your school a bad influence on other children?	
(g) Do your teachers praise pupils?	
(h) Is there bullying at your school?	
(i) Do the teachers treat pupils fairly?	
(j) Overall, is your school a good school?	

1. I like my school because_____

_____

_____

2. School could be better for me if_____

_____

_____

4 WORST THINGS

In all your life what are the three worst things that ever happened to you. Write 1, 2 or 3 beside the events listed below.

e.g. If getting knocked off your bike and going to hospital was the third worst thing that has ever happened your answer would look like this:

A bad accident or illness to self or others	**3**

You will put a number (either 1, 2 or 3) in 3 boxes only.

Now you should put your 3 answers in the correct boxes below.

Someone close dying	
A bad accident or illness to self or others	
Parents splitting up, separating, or divorcing	
Being bullied at school	
Being blamed or punished by adults	
Being physically hurt by adults	
Being lonely or having no friends	
Watching adults verbally fight each other	
Watching adults physically fight each other	
Bad sexual things happening to me	
Caught doing wrong things	
Feeling unwanted or unloved	
Other_____	
Other_____	
Other_____	

BACKGROUND

5 Can you tell us a little more about yourself?

a) Are you?

1	a boy	2	a girl

b) Are you?

1	Maori	2	NZ European/Pakeha
3	Other _____		

c) How old are you?

age _____

d) Who do you live with?

1	mother	2	father
3	brother(s) & sister(s)	4	other children
5	other adults	6	others_____

e) How many children in your home? *Include yourself in the number of children.*

number of children _____

f) When you get home from school, is an adult or someone over 14 years old usually there?

1	yes	2	no

g) When you go out, do your parents or those who look after you know where you are, and who you will be with?

1	always	2	usually
3	sometimes	4	not often

h) What do you do in your spare time? *Tick the best box in each row for your answer*	Most days	2-3 times a week	Less often	Never
Doing things at home or with my family				
Having friends visit or visiting them				
Doing things in the neighbourhood/sports/ clubs				
Hanging around town				
Do you get bored in your spare time?				

6 Finally here are some questions about your behaviour – you do not have to answer these if you do not want to.

i) Have you ever? *Tick the best box in each row for your answer*	Never	Once or twice ever	Once or twice a week	3-10 times a week	More often
Threatened, frightened, left out, ganged up, or called other children names					
Punched, kicked or hit your brothers and sisters					
Punched, kicked or hit other children					
Stolen other children's belongings					
Got drunk, doped or sniffed					
Run away from home					
Shoplifted, stolen, burgled, tagged or damaged property					

7 **Other Comments**_____

_____

_____

Thank you for answering these questions.
Now, put your questionnaire in the envelope and seal it.
Remember all your replies will be confidential.
Remember to take the pink page away with you.

Appendix F

Form Providing Toll-free Telephone Numbers of Counsellors

This Page Is For You To Keep

Pull this page off the questionnaire and take it away with you.

Perhaps you still feel very bad about something that has happened to you. Talking about it sometimes makes people feel better. Here are the phone numbers of people that you can trust. If you think that you might like to talk to someone, phone them. You do not have to give them your name unless you want to.

phone:	**0800 322 323**	**Jan**
phone:	**0800 376 633**	**Youth Line**

Remember, what you do and who you decide to talk to is your choice.