VIOLENCE AGAINST CHILDREN IN STATE-RUN RESIDENTIAL INSTITUTIONS IN KAZAKHSTAN:

AN ASSESSMENT











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Foreword

This report on violence against children in state-run residential institutions in Kazakhstan is a product of cooperation between the Office of the Commissioner for Human Rights in the Republic of Kazakhstan (National Center for Human Rights) and the United Nations Children's Fund (UNICEF) in Kazakhstan. It contains comprehensive information on nature and prevalence of violence against children in state-run residential institutions for children and is available in Russian and English languages.

The study conducted to prepare this report followed on the heels of the 2006 UN World Report on Violence Against Children that revealed that institutionalized children around the world are often subjected to violence from staff and officials responsible for their well-being, and from other children in the institution.

This study was conducted based upon the recognition that an evaluation of violence against children in staterun residential institutions for children is necessary to reveal the nature and prevalence of violence against children in the institutions, and to find ways of institutional reforms to improve the situation for children who grow up under the protection of the State.

To protect the interests of children and staff of institutions who participated in the study this report does not indicate the regions that were covered by the study. Data analysis was performed by types of institutions that were sampled and did not run comparisons by regions. In no way does this study claim to be representative of all state-run residential institutions for children in Kazakhstan as it focuses on only 30 different institutions of three regions. Nevertheless, the data does provide us with an estimate of the rates of different forms of violence against children in state-run residential institutions for children in Kazakhstan.

Most importantly, findings from this study and the recommendations that follow can serve as a guide for developing a comprehensive national action plan for the prevention and elimination of all forms of violence against children in residential institutions of care.

Clearly, a range of actions must be taken and a variety of organizations and stakeholders need to be involved, including governmental bodies, non-governmental organizations, and other civil society institutes.

We are particularly grateful to children who participated in the survey as without their views and voices this project would not have been meaningful and also staff from state-run residential institutions who shared their time, perspectives, and experiences.

We also would like to acknowledge and thank the state bodies for the support that they provided in conducting this study, particularly, the Children's Rights Protection Committee of the Ministry of Education and Science of the Republic of Kazakhstan, the ministries of Labor and Social Protection and the Health, akimats of the regions that were included in the study sample as well as international consultant Dr. Robin Haarr and the Research Center "Sange" for making this report possible.

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ABOUT THE LOCAL RESEARCH ORGANIZATION

Sange Research Center is one of the oldest sociological organizations in Kazakhstan that works for businesses, government bodies, and international organizations. Its mission is to provide clients with information for better decision-making in various fields: assessment of government services; social diagnostics; education and children needs; healthcare services; migration and demography; living standards; and marketing. Annually, Sange implements around 20 projects, the majority of which are survey-based with thorough statistical processing, qualitative research, or desk studies. There are around 20 specialists and analysts in two main offices in Astana and Almaty, more than 30 supervisors in all big cities of Kazakhstan and a far-reaching network of interviewer that allows conducting simultaneous surveys in all regions, including urban and rural areas. For instance, Sange has implemented projects on monitoring learning achievements (UNESCO), needs assessments of vulnerable groups (UNICEF), indicators of friendly schools (Ministry of Education), information security of children (Children Rights Committee), access to education for vulnerable children (Soros Foundation).

CHAPTER 1:

INTRODUCTION

Background to the study

In Kazakhstan, many children grow up for substantial periods of time in state-run residential institutions. According to UNICEF, Kazakhstan has one of the highest per capita rates of institutionalization of children in the CEE/CIS Region (1). According to data obtained from the Children's Rights Protection Committee of the Ministry of Education of the Republic of Kazakhstan, out of the 4.5 million children in Kazakhstan, more than 14,000 children are living in institutions for orphans and children without parental care (2). In addition, every year an estimated 2,000 children are abandoned or deprived of parental care, either at maternity wards or around the age of five or six when the state deprives parents of their parental rights. A vast majority of the 150,000 children with disabilities in Kazakhstan are also abandoned and deprived of parental care while growing up in staterun residential institutions for children (3).

In Kazakhstan, both state bodies and the general public generally considers institutional care of children to be a reasonable and "easy" solution; thus, the current care system encourages families in crisis or experiencing a difficult life situation to abandon their children. So, while some children are placed in institutions because they lost their parents, the majority of children in state-run residential institutions are considered "social orphans" (i.e., children with at least one living parent that has been sent to live in institutions because their families are unable to care for them). The leading causes of child abandonment include: poverty; early pregnancy; negligence of parental duties due to alcoholism and/or drug abuse; negligence of parental duties due to illness; violence in the home; and lack of basic parenting skills. Many children are placed in institutions because of physical and mental disabilities, and psychiatric and other severe illness. Children with disabilities are institutionalized at significantly higher rates than other children because of widespread stigmatization of children with disabilities, parents' lack of money and care-giving capacities, and lack of support services for parents to cope with their children's disabilities; oftentimes, these parents feel they have no alternative (4).

Although state-run residential institutions for children were established to provide care, guidance, support and protection to children, children that live in these institutions are at increased risk of violence compared to children whose care and protection is governed by parents at home (5). In fact, the UN World Report on Violence Against Children has revealed that violence in residential institutions is six times higher than violence in family-based foster care. Institutionalized children are often subjected to violence from staff and officials responsible for their well-being. This violence can include harassment,

humiliation, isolation, restraints, beatings, rape, and torture (6). Staff can often subject children to violence in an effort to discipline them, and sometimes these methods of punishment are inhumane and torturous to children. In residential institutions for children with disabilities, children may be subjected to violence in the name of "treatment" and medicated, not for medical treatment, but to control children's behavior and make them more compliant (7).

Children in residential institutions are also vulnerable to violence from other children in the institution. The UN World Report on Violence Against Children has revealed that violence among children in residential institutions often occurs when conditions and staff supervision are poor. Staff may even sanction or encourage violence among children either to maintain control or simply for amusement. In addition, bullying and sexual abuse are often widespread in institutions, as revealed in studies from the 1990s in the UK, Russia, and other countries (8).

In many countries, institutionalized children face discrimination and stigmatization, and that is often expressed in the abusive attitudes and behaviors of poorly trained staff, and reflected in the public's lack of concern for the brutality that children experience in institutions (9). Because state-run residential institutions for children are closed to public scrutiny, incidents of violence against children in institutions remain hidden from the general public and state bodies.

The UN World Report on Violence Against Children also reveals lack of care, often referred to as neglect, as another form of violence against children that occurs in residential institutions. According to the Convention on the Right so the Child (CRC), governments are required to ensure that children's basic needs are met in residential institutions; however, in many countries, conditions in institutions are poor (overcrowded and unsanitary) and children's health, development, and lives are at risk. Many residential institutions for children also lack the necessary resources and qualified and well-trained staff that are necessary to provide children with a supportive, caring, and healthy environment to grow up in (10). In facilities for children with disabilities, disabled children often have no access to education, recreation, rehabilitation, or other programs. In addition, children are often left in their beds or cribs for long periods without human contact or stimulation. Such deprivation leads to negative physical, mental, and psychological deficits and damage to the brain's development; and in some instances can result in death (11).

Studies worldwide have consistently revealed the negative impacts of institutionalization. In particular, children that grow up in residential institutions are more likely to have poor physical health, developmental delays (including social and language development delays), attachment disorder, and

potentially irreversible neural atrophy, adverse brain functioning, and psychological damage(12, 13). The risk of developmental delay and psychological damage is particularly serious for young children under four years of age, which is a critical period during which children bond with their parents or caregivers (14, 15). The problem is that children raised in institutional care are typically deprived of a supportive, intensive, one-on-one relationship with a primary caregiver that is essential for optimal childhood development (16). The negative effects of institutionalization become more severe the longer a child remains in an institution, and are more severe in situations where the conditions of the institution are poor and/or unsafe (17, 18). The social and psychological well-being and functioning of children will also significantly deteriorate with inactivity, social isolation, and violent and abusive conditions that can exist in many residential institutions for children. In fact, research has shown that after spending time in an institution, a child can lose basic skills they had upon entry, such as the ability to look after themselves and to develop caring relationships (19, 20).

Some children may even resort to running away and self-harm or suicide as a result of institutionalization and the lack of human contact and care. Other children may act out with physical aggression and violence toward others or become involved in alcohol and/or drug use/abuse, crime, and prostitution. In fact, research has shown that institutionalized children are more likely to come into conflict with the law (21).

This assessment was designed to generate reliable data and findings about the nature and prevalence of violence against children in state-run residential institutions, as well as efforts to identify and respond to such cases of violence and ensure child protection.

Child runaways from institutions

Some children in institutions, particularly children that are victims of violence from other children and staff in the institution, will run away from the institution (22).

The police often have contact with child runaways because they are on the street and some runaways are picked up by police for begging, street crimes, property crimes, shoplifting, drug and/or alcohol use, and prostitution. The most common response of the police to child runaways, particularly children that run away from residential institutions, is to treat them as juvenile delinquents, hooligans, or criminal offenders and detain them. Or, if the child is not involved in an act of delinquency or offending, the child is typically returned to the institution from which they ran, despite the presence of violence and neglect in the institution. Upon return to the institution, runaways are often punished harshly by staff and victimized

again in the name of discipline; these children often runaway again.

Prior research has revealed that running away is actually a coping strategy or survival strategy that children use to escape the violence and abuse in their lives; however, rarely do police understand or respond appropriately to this reality. If one understands that running away is actually a coping or survival strategy that children use to escape the violence and abuse in their lives, runaways should be considered potential victims of violence and abuse versus immediately labeled as trouble makers and deviants.

In many cases, it may not be in the best interest of the child that has run away to return them to the institution from which they ran, particularly if they are the victim of violence from other children and/ or staff, and experience neglect by staff. Runaways should also be evaluated to determine if they are engaging in acts of self-harm (e.g., cutting, burning, suicides attempts). Moreover, institutions that have incidents of children/youth running away should be investigated for problems neglect and violence against children. Acts of children running away from the institution should serve as a warning sign for potential problems in the institution.

This study was designed to learn more about children's acts of running away from state-run residential institutions, and examine the relationship between running away and children's experiences with violence and neglect in those same institutions.

Child suicides

In recent years, high rates of child suicide in Kazakhstan has resulted in a discussion among government officials and other key stakeholders, along with a joint plan for prevention of suicide among minors. According to data obtained from the Ministry of Education, regional offices reported 264 child suicides in 2009 and 256 child suicides in 2010. In comparison, the Office of the Prosecutor General reported only 144 suicides (including attempted suicides) in 2009 and 152 suicides (including attempted suicides) in 2010.

Suicide can be one of the hardest behaviors for people to understand, but many children engage in a variety of self-harming behaviors, in which an individual intentionally inflicts harm to his/her body (e.g., intentionally cutting of skin, self-bruising or scratching, self-burning, pulling skin or hair, swallowing toxic substances, and breaking bones) or commits suicide. International research has found that self-harm can be undertaken without suicidal intent; however, the relationship is not clear since individuals that report engaging in self-harm are also more likely to report having considered or attempted suicide (23).

Children/youth are normally very secretive about their self-harm and suicidal behaviors; however, international research has revealed that those children/youth that admit to self-harm often say they do it to help alleviate feelings of sadness, anxiety, or emotional distress. They may not be trying to commit suicide, but instead are seeking to manage intolerable feelings or to experience some sense of feeling (24).

Self-harm behaviors can start early in life. International research has found that early onset self-harm is common around the age of 7 years; however, most self-injury behaviors begin in middle adolescence between the ages of 12 and 15 years and can last for weeks, months, or years (25). Children in institutions are at heightened risk of self-harm and suicidal behaviors due to violence, neglect, and poor living conditions in institutions (26).

This study was designed to learn more about institutionalized children's self-harming behaviors, including suicide, and examining the relationship between children's engagement in self-harm or suicide and their experiences with violence and neglect in the institutions.

Life after the institutions

In Kazakhstan, many institutionalized children spend their entire infancy, childhood, and adolescence in institutions, losing all contact with their families. Children who leave the institutions at the age of 18 years are more likely to face stigmatization and low levels of education, unemployed, and poverty. In addition, institutionalized children are at increased risk of drug and alcohol use/abuse and more likely to come in conflict with the law. Institutionalized girls are also at increased risk of becoming pregnant at an early age, and many will place their newborns in state-run infant homes because they are unable to support and care for their child. Institutionalized children, both boys and girls, are also more vulnerable to violence and exploitation, including intimate partner violence, sexual assault/rape, sexual exploitation, and human trafficking.

Current reforms to institutional care systems for children in Kazakhstan

Since the fall of the Soviet Union in 1991, the newly established Government of the Republic of Kazakhstan ratified numerous important conventions. In 1994, the Government of Kazakhstan ratified the UN Convention on the Rights of the Child (CRC). The UN CRC provides clear authorization to the State to protect children from all forms of violence in the home and family, and establishes its role as final arbiter of child welfare in the domestic arena. Moreover, States are

required to provide special protection to children who are deprived of a family environment. The increased risk of violence against children in institutions adds to the State's obligations to develop effective legislation and other measures to protect children in institutions from violence, and to significantly reduce the number of children who are institutionalized. Since then, international organizations and local NGOs have been working in cooperation with the Government of Kazakhstan to address issues of child protection, including practices of institutionalizing children.

The Government of Kazakhstan acknowledges the challenges they face when it comes to state-run residential institutions for children and practices of institutionalizing children. Currently, the Government is fully engaged in Social Protection Reform and the development of social protection services. For instance, the recent 2008 Law on the Provision of Special Social Services represents progress toward introducing concepts such as "family support services." This legislation is interpreted as confirmation of the Government's commitment to reforming the country's child care system; however, the legislation does not address all of the existing challenges. The novelty of the issue and lack of practical experience among key stakeholders remain some of the biggest challenges in the reform effort for the Government of Kazakhstan.

It is also important to point out that the existing system of child protection is very fragmented with a number of various local and central level bodies deciding on the care solutions for children without coordination or special gatekeeping measures. Some of these same local and central level bodies are also responsible for making regular visits to and inspections of the staterun residential institutions for children; unfortunately, however, these visits and inspections are often shallow, bureaucratic exercises versus thorough inspections of the physical and structural conditions of the institution. In recent years, the Government has taken steps to improve the physical and structural conditions of many state-run residential institutions for children; however, their efforts to address the care the children receive in institutions and to reduce the occurrence of violence against children in institutions has been much more limited.

In recent years, the Government of Kazakhstan has undertaken some limited attempts to transform some of the state-run residential institutions into more family-oriented child care environments; however, these transformations have occurred on a very limited scale and on an ad hoc basis. The Government still has no systematic strategy for transforming the "old" residential care system for children. Moreover, many of the activities aimed at reforming the care system appear to have limited impact. This is because the Government still appears to be largely committed to investing in the "old" residential care system versus

creating new types of institutions and community-based alternatives to family care. This, in part, is because there is no tradition of community-based alternatives to family care or of assessing the needs of each individual child in the context of their community of origin and developing a plan for the child's future. In addition, there are very few trained social workers and social services that support and help families through difficult times; thereby, preventing a child's institutionalization.

In 2011, there are reported to be at least 210 children's institutions in Kazakhstan that are subject to child protection reform. Under the supervision of the Ministry of Health there are 25 infant homes with about 1,586 children. Under the supervision of the Ministry of Labour and Social Protection there are 19 institutions for children with psycho-neurological and severe disabilities with about 854 children with disabilities. And under the supervision of the Ministry of Education there are about 166 residential institutions that house about 11,612 children (27).

According to the UNICEF Kazakhstan Country Program for 2010-2015, which is based on the UNDAF for Kazakhstan (United Nations Development Assistance Framework), the child protection reform is one of the priority areas.

Why study violence against children in state-run residential institutions in Kazakhstan?

UNICEF Kazakhstan supports the National Human Rights Centre (Ombudsman Office) of the Republic of Kazakhstan to conduct an assessment of violence against children in state-run residential institutions for children.

Research on violence against children in state-run residential institutions for children in Kazakhstan is virtually nonexistent, and data on the nature and prevalence of violence against children in institutions (including violence among children and by staff) is scant. As a result, there is no clear picture of the situation of violence against children in state-run residential institutions for children in Kazakhstan. This has made it difficult for the National Human Rights Centre (Ombudsman) to monitor and assess the nature and prevalence of various types of violence against children in state-run residential institutions for children in Kazakhstan.

While the main goal of this study was to enhance the National Human Rights Centre (Ombudsman) child rights

monitoring capacities on violence against children, the objective of this study were to:

- Gather reliable data on the nature and prevalence of violence against children in state-run residential institutions for children in Kazakhstan, including violence among children and violence by staff, from the perspective of institutionalized children/ youth, institution staff and directors, and graduates of institutions.
- Analyze data and generate findings that would provide a comprehensive picture of the nature and prevalence of violence against children in state-run residential institutions in Kazakhstan, including violence among children and violence by staff, as well as the relationship between violence, running away, and self-harm/suicide.
- Examine practices of registering, recording and reporting incidents of violence against children in institutions, and responses and mechanisms of coordination to cases of violence among children and by staff.
- Use the data and findings to inform the development of effective prevention, protection, and legal measures and policies to support identification, intervention, and prevention of violence against children in residential institutions.

In no way does this study claim to be representative of all state-run residential institutions for children in the country as it focuses on only three districts/regions and 30 different institutions. Nevertheless, the data does provide us with an estimate of the rates of different forms of violence against children in state-run residential institutions for children in Kazakhstan. Most important, this study will fill a significant gap in the limited research on violence against children in residential institutions for children in Kazakhstan.



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CHAPTER 2:

RESEARCH DESIGN/ METHODOLOGY

Conducting research on the prevalence and nature of violence against children in state-run residential institutions is extremely challenging. Moreover, children who are victims of violence, abuse, and neglect in state-run residential institutions are often reluctant or afraid to report such incidents for fear of punishment or retaliation from their abuser(s) and staff, or negative reaction from other children and staff in the institution. The significant power and age differentials between child victims and their abuser(s) further enhances a child's fear of reporting their experiences with abuse and neglect.

Two other challenges facing researchers who study violence against children in state-run residential institutions is to develop clear operational definitions of the different types of violence and neglect children experience, and to develop tools for measuring the nature and prevalence of each of these types of violence and neglect (1, 2).

Despite the challenges of conducting research on violence against children in state-run residential institutions, a multi-method research design/methodology was developed which enabled us to successfully study the prevalence and nature of violence against children in six different types of staterun residential institutions across three regions of Kazakhstan.

Goal of the study

The main goal of this study was to enhance the National Human Rights Centre (Ombudsman) child rights monitoring capacities on violence against children. Thus, this study is designed to assess the nature and prevalence of various types of violence against children in state-run residential institutions for children in Kazakhstan.

Multi-method research design

To accomplish the goal of this study and collect the data that UNICEF and the National Human Rights Centre (Ombudsman) needs to enhance the Ombudsman's capacities to monitor child rights in state-run residential institutions for children, a multimethod research design was developed. This multimethod research design included:

- surveys of children/youth between 9 and 18 years of age in state-run residential institutions
- surveys of staff working in state-run residential institutions for children
- structured interviews with directors of state-run residential institution for children
- observation checklist of state-run residential institutions for children
- semi-structured interviews with graduates of state-run residential institutions between 17 and 23 years of age that now reside in state-run youth homes

Such a multi-method research design was needed given the challenges of studying violence against children in state-run residential institutions. Violence against children is a phenomenon that often remains hidden by staff and children who are reluctant or afraid to report what happens to them in the institution. Such a multi-method approach is also necessary because there are several different types of state-run residential institutions for children that exist in Kazakhstan and house children of different ages and with different life circumstances. In the following sections, each of the data collection methods and instruments are explained in more detailed.

Study sites

In consultation with the National Human Rights Centre (Ombudsman) and UNICEF, the decision was made to sample state-run residential institutions for children across three regions of Kazakhstan. This decision was based upon the fact that diversity exists across Oblasts/regions of Kazakhstan in terms of population demographics, emphasis on traditions

and cultural practices, and the number of state-run residential institutions for children. Thus, the decision was made to sample institutions across three different Oblasts/regions.

Sample of state-run residential institutions for children

In each of the three Oblasts/regions, data was collected in six different types of state-run residential institutions for children. A total of 30 state-run residential institutions participated in this study. In each Oblast/region, data was collected in 10 state-run residential institutions, including:

- 2 Infant homes (MoH)
- 1 Institution for children with psycho-neurological and severe disabilities (MLSP)
- 1 Special correctional institution of education (MoE)
- 3 Orphanages (MoE)
- 1 Shelter (MoE)
- 1 Specialized institutions of education for children with deviant behavior (MoE)
- 1 Youth house (MoE)

It is important to understand that random sampling of state-run residential institutions for children was not possible in this study given the fact that there were more of some types of institutions (e.g., orphanages and infant homes) and few of other types (e.g., institutions for children with psycho-neurological and severe disabilities, special correctional institutions of education, and specialized institutions of education for children with deviant behavior). Sometimes there was only one type of institution in each of the Oblasts/regions (e.g., institution for children with psycho-neurological and severe disabilities). It is also important note that some institutions housed large numbers of children and others had a small number of children. Thus, the focus was on selecting institutions that had larger numbers of children and would allow for a better sample of children and staff. Effort was also be made to select institutions that housed a mixture of boys and girls.

Detailed information about each institution (i.e., name, address, residential population, description) in each of the three Oblasts/regions was obtained prior to determining exactly which institutions would be selected for sampling. This more detailed information was gathered by the Ombudsman's Office in September and October 2010, and used to select each of the institutions that were sampled.

In order to gain access to the pre-selected institutions, a letter was sent from the National Human Rights Centre (Ombudsman) to the Oblast

Akimat explaining the purpose of the study. The Akimat then forwarded the letter to the regional Akimat offices that were responsible for forwarding the letter on to the state-run residential institutions for children that were pre-selected to be sampled. At each institution, the local researcher team met with the director and explained the purpose of the research and that the institution was pre-selected to be surveyed with the approval of the National Human Rights Centre (Ombudsman). The research team then explained what sort of assistance they needed to organize the children and/or staff for survey, to do the structure interviews with the director, and to complete the observational tour of the institution. After the introduction, the research team divided up in to two groups. One group of four researchers was responsible for administering the survey to children or staff, while the other group of two researchers was responsible for interview the director, and if possible the institutions psychologist or social pedagologist as well. Then, in most institutions there was an effort that the research team as a whole conducted the institutional tour and completed the observational checklist.

Pilot test and training of research team

In an effort to test the research methodology and assessment tools, a pilot was conducted in November 2010 at one of the state-run children's orphanages. Under the direction and supervision of the UNICEF international consultant, Dr. Robin Haarr, the research team conducted the pilot. The pilot training and data collection occurred on 6 November 2010 at one of the institutions for orphans and children without parental care. The pilot provided the international consultant the opportunity to provide the research team with intensive training in the field on how to implement the research methodology and use each of the assessment tools.

Training and data collection then continued from 8 to 11 November 2010 in six more state-run residential institutions for children, including one infant home, one orphanage, one special correctional institution of education, one shelter, one specialized institution of education for children with deviant behavior, and one youth home. The international consultant was involved in data collection along with the research team at each of these institutions, as well as monitored and evaluated the research teams' performance. The training the international consultant provided throughout the week in the field and at the research team's office was focused on developing their capacities to implement the research methodology, use the assessment tools, and comply with ethical guidelines.

Survey of children/youth between 9 and 18 years of age in state-run residential institutions

In 15 state-run residential institutions, children between the ages of 9 and 18 years were surveyed. The 15 state-run residential institutions included:

- 9 Orphanages (3 per Oblast/region)
- 3 Shelters (1 per Oblast/region)
- 3 Specialized institutions of education for children with deviant behavior (1 per Oblast/region)

The Children and Youth Survey was developed after an extensive review of international literature on child abuse and neglect and a review of existing survey instruments used internationally. The UNICEF international consultant, Dr. Robin Haarr, took the lead developing the survey and worked with the National Human Rights Centre (Ombudsman) and the local research team, Sange, to ensure the surveys were culturally appropriate and sensitive. The surveys were originally developed in English, and then translated into Russian and Kazakh for distribution. Translated surveys were reviewed and double-checked by the National Human Rights Centre (Ombudsman), the international consultant, and the local research team for proper translation.

The Children and Youth Survey was designed to allow children to self-report their experiences with violence in the institution, including violence among children and violence by staff. Children were also asked to report the consequences of that violence. In particular the Children and Youth Survey was designed to measure:

- Demographics (i.e., gender, age, number of times in the institution, contact with family, school attendance)
- Conditions in the institution (i.e., rate the conditions, sense of safety, fear of staff and other children)
- Violence among children in the institution (i.e., bullying, harsh verbal abuse, psychological abuse, physical abuse, injuries)
- Response of staff to violence among children in the institution
- Violence by staff in the institution (i.e., harsh verbal abuse, psychological abuse, physical abuse, injuries)

¹ Dr. Robin Haarr has extensive experience conducting survey research in Central Asia on issues of family violence, violence against women and children, child exploitation and trafficking, and child protection through Asia and the former Soviet Union.

- Neglect of children in the institution (i.e., nutritional, clothes, supervision, medical neglect)
- Running away from the institution
- Self-harm or suicide

The Children and Youth Survey was available in Russian and Kazakh, and the research team had both Russian and Kazakh speakers.

Effort was made to survey all children/youth between the ages of 9 and 18 years residing in each of the preselected institutions. Institution directors and staff were cooperative in helping to organize the children to complete the survey. Institution staff were directed that staff were not allowed in the room while the children were completing the survey, except in some institutions one staff member (typically a teacher) was allowed to sit in the coroner strictly to observe, but could not walk around the room, could not talk to the children, and was not allowed to see children's surveys or responses. In fact, neither directors nor staff were ever provided with or let to see a copy of the Children and Youth Survey. When they requested to see a copy of an uncompleted survey, we kindly explained to them the confidential nature of the survey, and that the research design did not allow us to show the survey to them.

The Children and Youth Survey was administered in a face-to-face setting in each of the institutions; however, this was not an interview. Children read and completed the survey on their own. Surveys were administered to groups of 15 to 20 children at a time, typically in their classroom with their peers/cohort. The research team set up the room to ensure plenty of space between each child, so the child could complete the survey on their own. Children were monitored by the research team to make sure they were not talking with each other or looking at each other's answers. Typically, four to five members of the research team were involved in administering the Children and Youth Survey.

The research team began by informing the children of the purpose of the survey, that their anonymity and confidentiality were ensured, and how to complete the survey. Children read through the survey on their own and completed each of the questions on their own. The research team was present in the room while children completed the survey and monitored children's progress completing the survey. The research team also assisted children as needed with completing the survey (e.g., clarification of questions or words, clarification of how to check the box correctly), as children's reading and comprehension abilities varied significantly. It is also important to note that children were not paid or provided any incentives to complete the survey.

Children were informed that they could select not to complete survey questions if they do not want to or did not know how to answer the questions. However, the research team did check all surveys as they were completed to make sure that they were completed in full or understood why certain questions were left unanswered.

Children were specifically instructed not to write their names anywhere on the survey. Once children completed the survey, the survey was immediately placed in a sealed envelope. The sealed envelopes were labeled with an institution number and institution type code to ensure anonymity and confidentiality of both the children and the institution. Neither institutions directors nor staff were allowed access to the sealed envelopes or to view the completed surveys. All completed and partially completed surveys were brought back to the research team's office where they were checked and provided with a survey number, an institution type code, and an institution number. All completed surveys were input into SPSS by the research team, and the SPSS database was analyzed by the UNICEF international consultant.

Survey of staff in state-run residential institutions for children

Staff were surveyed in institutions where children were either too young to be surveyed (under 8 years of age) or had mental or physical disabilities and were unable to complete the survey. Staff were surveyed in 12 state-run residential institutions, including:

- 6 Infant homes (2 per Oblast/region)
- 3 Institutions for children with psycho-neurological and severe disabilities (1 per Oblast/region)
- 3 Special correctional institutions of education (1 per Oblast/region)

The Staff Survey was developed after an extensive review of international literature on child abuse and neglect and a review of existing survey instruments used internationally. The UNICEF international consultant took the lead developing the survey and worked with the National Human Rights Centre (Ombudsman) and the local research team, Sange, to ensure the surveys were culturally appropriate and sensitive. The surveys were originally developed in English, and then translated into Russian and Kazakh for distribution. Translated surveys were reviewed and double-checked by the National Human Rights Centre (Ombudsman), the international consultant, and the local research team for proper translation.

The Staff Survey was designed to allow staff to self-report their experiences with violence against children in the institution, including violence among children and violence by staff. The survey also measured staff's attitudes toward corporal punishment and knowledge

of institutional policies that address violence against children. In particular, the survey was designed to measure:

- Demographics (i.e., gender, age, level of education, number of years working in the institution, number of children responsible for)
- Work environment and motivations for being a staff member at the children's institution
- Violence by other children in the institution (i.e., bullying, harsh verbal abuse, psychological abuse, physical abuse, sexual abuse, injuries)
- Response of staff to violence among children in the institution
- Violence by staff (i.e., harsh verbal abuse, psychological abuse, physical abuse, sexual abuse, injuries)
- Attitudes toward corporal punishment
- Practice of reporting incidents of violence among children in the institution
- Practice of reporting incidents of violence by staff in the institution
- Registration and recording of incidents of violence against children
- Regulations for staff behavior and disciplining staff
- Incidents of children running away from the institution
- Incident of children committing suicide in the institution
- Training on identifying or responding to violence against children

The Staff Survey was available in Russian and Kazakh, and the research team had both Russian and Kazakh speakers

Effort was made to survey all staff working in the institution on the day of the research team visited, including nannies, teachers, psychologists, health care workers, kitchen staff, cleaners, and security staff.

Institution directors and assistant directors were not surveyed because they were interviewed. Institution directors and staff were cooperative in helping to organize all staff to complete the survey. Similar to the Children and Youth Survey, the Staff Survey was administered in a face-to-face setting in each of the institutions; however, this was not an interview. Staff read and completed the survey on their own. Surveys were administered to groups of 15 to 20 staff at a time. The research team set up the room to ensure plenty of space between each staff member, so the staff member could complete the survey on their own. Staff were monitored by the research team to make sure they were not talking with each other or looking at each other's answers.

The research team began by informing the staff of the purpose of the survey, that their anonymity and confidentiality were ensured, and how to complete the survey. Staff read through the survey on their own and completed each of the questions on their own. The research team was present in the room while staff completed the survey and monitored staff progress completing the survey. The research team also assisted staff as needed with completing the survey (e.g., clarification of questions or words, clarification of how to check the box correctly). It is also important to note that staff were not paid or provided any incentives to complete the survey.

Staff were informed that they could select not to complete survey questions if they do not want to or did not know how to answer the questions. However, the research team did check all surveys as they were completed to make sure that they were completed in full or understood why certain questions were left unanswered.

Staff were specifically instructed not to write their names anywhere on the survey. Once staff completed the survey, the survey was immediately placed in a sealed envelope. The sealed envelopes were labeled with an institution number and institution type code to ensure anonymity and confidentiality of both the staff and the institution. Neither institutions directors nor staff were allowed access to the sealed envelopes or to view the completed surveys. All completed and partially completed surveys were brought back to the research team's office where they were checked and provided with a survey number, an institution type code, and an institution number. All completed surveys were input into SPSS by the research team, and the SPSS database was analyzed by the UNICEF international consultant.



Interviews with directors of state-run residential institutions for children

At each of the 30 state-run residential institutions for children, structured interviews were conducted with the institution director or assistant director. The structured interviews consisted of a series of openand close-ended questions that had been developed to collect information about:

- Agency information (e.g., name, region, type)
- Instances of violence against children in the institution by other children
- Instances of violence against children in the institution by staff
- Response of staff to violence against children in the institution by other children and staff
- Registration and recording of instances of violence against children in the institution
- Official policies and regulations that require registration and recording of instances of violence against children
- Provision of medical treatment to children that are injured in the institution
- Practice of discussing children's problems in the institution with the child and parents/caregiver
- Referral of child victims of violence for professional intervention or support
- Guidance/training on identify and responding to problems of bullying and violence against children in the institution
- Efforts in the institution to prevent violence against children
- Coordination mechanisms used in cases of violence against children
- Programs to educate staff about child rights and how to ensure healthy development of children

At each of the institutions, effort will also be made to involve the institutions' psychologist or social-pedagologist in on the interview with the institution director, or they were interviewed separately after interview with the institution director. The interview with the institutions' psychologist or social-pedagologist was often much more informal and unstructured.

Typically, two members of the research team were involved in interviewing the director. Interview notes were taken throughout the interviews by the research team; then, interview notes were brought back to the research team's office and input into SPSS and Word. The research team was responsible for initial analysis of the interview data with directors, and the UNICEF international consultant expanded that analysis.

Observation checklist of staterun residential institutions for children

At each institution, an observation checklist was used to gather specific information about the living conditions in the institutions and the overall state

Box 2.1. Types of child abuse and neglect

Bullying – includes a variety of negative acts carried out repeatedly over time; it involves a real or perceived imbalance of power, with the powerful child or group of children attacking those who are less powerful. Bullying can take three forms, including harsh verbal abuse, psychological abuse, and physical violence.

Harsh verbal abuse – includes a pattern of harsh verbal abuse that aims to attack a child's character and undermine their sense of self-worth, self-esteem, and social and emotional development and well-being. Forms of harsh verbal abuse include name-calling, insults, belittling, ridicule, and mean, humiliating, and cruel words that convey to a child the message that he or she is worthless, flawed, unloved, unwanted, or only of value to meet someone else's needs.

Psychological abuse – includes a pattern of intentional verbal and behavioral actions or lack of actions that aim to ignore, reject, control and/or isolate a child, and intimate and cause fear in a child. Psychologically abusive behaviors also include such actions as purposely breaking a child's possessions, and threatening a child with physical harm with the aim of intimidating and evoking fear in a child to control them.

Physical violence – includes acts of physical force against a child by another child or staff member, which cause physical harm or injury or have the potential for harm to the child's health, survival, development, or dignity. There are a broad range of behaviors that are considered physical violence, including: hitting, beating, grabbing, kicking, choking, pulling hair, shaking, biting, strangulation, burning, and assault with an object or weapon. Physical violence often causes some form of harm or injury, and can even result in disability or a child's death.

Neglect – refers to the failure of the staff responsible for children to provide for the development of the children, where the institution is in a position to do so, in one or more of the following areas: nutrition, clothing, supervision, and medical. Neglect can occur only in cases where reasonable resources are available to provide for children.

of children in the institutions. The observation checklist was useful in each of the institutions, as it captured more detailed qualitative data based upon observations that could not necessarily be measured in surveys or structure interviews.

In each of the institutions, several members of the research team or the whole research team participated in a tour of the institution (organized by the director and staff) during which time they completed the

observation checklist and asked questions of children and staff about any and all aspects of the institution and life in the institution. The observation checklist was specifically designed to help clue the research team to look for and identify evidence of the living conditions in the institution, the state of children, and evidence of neglect and violence against children in the institution. Observational notes were taken throughout the tour of the institution by the research team.

Box 2.2. Types of \	violence against children among children and by staff in institutions
Bullying	Child bullies another child
Harsh verbal	Swear at, curse or call a child names (idiot, stupid, bastard)
abuse	Say mean things that hurt a child's feelings or scares them
Psychological	Break or ruins a child's things on purpose (clothes, toys, school supplies)
abuse	Act in a way that made a child afraid they might be physically hurt/injured
	Threaten to physically harm or hurt another child
	Lock a child in a room or small place for a long time
	Tie children up or chain them to something
	Prevent children from using the toilet
	Give children physical tasks/labor around the institution (clean the toilets, garbage or institution)
Physical violence	Twist a child's ear
	Twist a child's arm
	Pinch a child
	Shake a child
	Slap a child in the face or on the head
	Slap a child on the buttocks, back, leg, or arm
	Throw or knock a child down
	Push, grab or knock a child down
	Hit, kick or physically hurt a child
	Hit children so hard that they had marks or were injured
	Hit or attack a child on purpose with an hard object or weapon (whip, stick, belt, gun, knife)
	Burn a child with cigarettes or other hot items
	Physically injure a child
Neglect	Child not given enough food to eat and child went hungry (nutrition)
	Child has to wear dirty or torn clothes (clothing)
	Child has to wear clothes that are not warm enough in the winter or too warm in the summer (clothing)
	Child has to wear clothes that are the wrong size (too big or too small) (clothing)
	Child is not taken care of when sick (not taken to the doctor or clinic, not given medicine to make the child better) (medical)
	Child locked in their room all night without adult supervision

The research teamwas also encouraged to make observations while they wereadministering the survey to children to observe for signs of abuse, neglect, and injuries on children, as well as signs of bullying among children, interactions between children, and interactions between staff and children.

Observation notes were brought back to the research team's office and input Word. The research team was responsible for initial analysis of the observational data, and the UNICEF international consultant expanded that analysis.

Interviews with graduates between 17 and 23 years of age that reside in youth homes

Youth between 18 and 23 years of age from three state-run youth homes (one youth home per Oblast/region) were interviewed. The sample included 30 to 40 youth between 18 and 23 years of age. The goal was to interview at least 10 youth per youth home, preferably 5 boys and 5 girls, for a total of 30 youth from 3 youth home.

The purpose of interviewing youth that graduated from state-run residential institutions for children and were now living in state-run youth homes was to learn more about their experiences growing up in state-run residential institutions for children. This includes their experiences with violence among children and by staff.

Upon arriving at the youth homes, the research team met with the director to explain the purpose of the research. The research team was instructed to then select youth that they wanted to interview (they were instructed to avoid letting the director or staff at the institution select youth to be interviewed).

After explaining the purpose of the interview to the youth, the research team conducted one-on-one interviews with the youth. Each of the youth was guaranteed anonymity and confidentiality. Interview notes were taken throughout the interview by the research team; then, interview notes were back to the research team's office and input into Word. The research team was responsible for initial analysis of the observational data, and the UNICF international consultant expanded that analysis.

Measuring violence against children

Before presenting the findings it is important to explain that both the Children and Youth Survey and the Staff Survey were developed to measure the nature and prevalence of five different types of violence against children – bullying, harsh verbal abuse, psychological abuse, and physical abuse – and four different types of neglect – nutrition, clothing, medical, and supervision – which are defined in Box 2.1.

Definitions of each type of violence against children were operationalized in the survey using a range of behavior-specific questions related to each type of abuse and neglect. The study did not attempt to measure an exhaustive list of acts of violence against children in state-run residential institutions; instead it asked a number of questions about specific acts that commonly occur against children in residential institutions. The acts used to define the five different types of violence and five types of neglect measured in the survey are summarized in Box 2.2.

Despite the highly sensitive nature of violence against children and the hesitancy of children and staff ininstitutions to talk openly about violence against children in state-run residential institutions for children, the surveys were developed to encourage children and staff to self-report the prevalence and nature of violence among children and by staff in the institutions.

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CHAPTER 3:

VIOLENCE AGAINST
CHILDREN IN
ORPHANAGES,
SHELTERS, AND
INSTITUTIONS OF
EDUCATION FOR
CHILDREN WITH
DEVIANT BEHAVIOR

This section of the report begins with a description of the sample of children/youth. Then it reveals children/youth's experiences in each of the three different types of institutions. Comparisons are also made among the three different types of institutions when they are significant. This section also reveals relationships between demographics and children/youth's experiences with violence and neglect in the institutions, running away from institutions, and engaging in self-harm or suicide.

Children/youth sample demographics

Surveys were distributed to 997 children/youth between 9 and 18 years of age living in orphanages, shelters, and institutions of education for children with deviant behavior in three regions of Kazakhstan. Table 3.1 reveals the demographic characteristics of the sample of 997 children/youth from the 15 different state-run residential institutions for children that were surveyed in the three regions of Kazakhstan.

More children/youth were surveyed in orphanages because data obtained from the National Human Rights Centre (Ombudsman) revealed a much larger proportion of children/youth reside in orphanages. In comparison, fewer children/youth were surveyed in shelters and specialized institutions of education for children with deviant behaviors because a there were fewer children in these state-run institutions.

Among the 997 children surveyed, 43.5% were female and 56.5% male. They ranged in age from 7 to 19 years, and the average age was 14.1 years.

Figure 3.2. Type of institution by gender, % 70 60 50 40 30 20 10 0 Orphanage Shelter Specialized institution of education for children with Female Male deviant behavior

Table 3.1. Children/youth demographics						
	N=9	997				
	n	%				
Institution Type						
Orphanage	812	81.4				
Shelter	56	5.6				
Specialized institution of education for children with deviant behavior	129	12.9				
Gender						
Female	434	43.5				
Male	563	56.5				
Age						
7 years	2	0.2				
8 years	1	0.1				
9 years	36	3.6				
10 years	69	6.9				
11 years	63	6.3				
12 years	88	8.8				
13 years	98	9.8				
14 years	121	12.1				
15 years	189	19.0				
16 years	184	18.5				
17 years	109	10.9				
18 years	33	3.3				
19 years	4	0.4				

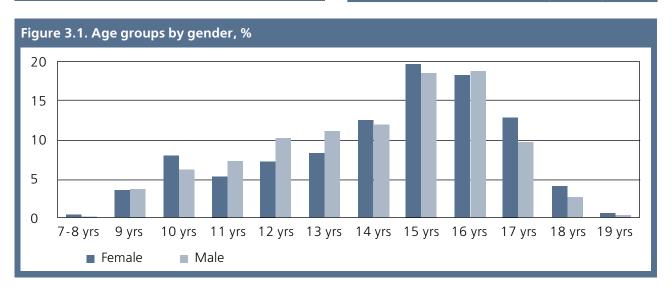


Figure 3.1 reveals a fairly equal distribution of male and female children in each of the age categories.

The data was also analyzed to determine whether males and females are equally represented across the three different types of institutions – orphanages, shelters, and specialized institutions of education for children with deviant behavior.² Figure 3.2 reveals there were more males than girls in each of the three different types of institutions, and significantly more boys (62%) than girls (38%) in specialized institutions of education for children with deviant behavior.

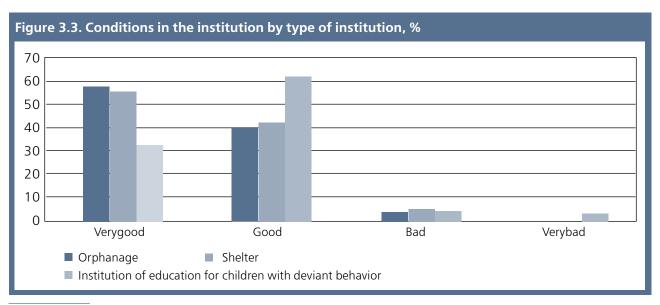
Children's background and contact with family

The first part of the survey was designed to learn about children's background in institutions and their contact with family. Table 3.2. reveals the majority of children/youth reported they know why they are in the institution (86%) and that it is their first time in the institution (54.4%). Whereas, 45% of children/youth reported they have been in and out of staterun institutions; 22.4% of children/youth lived in an institution once before, 31.9% have been in and out two times, 19.6% were in and out three times, and 8.1% were in and out four times. As many as 11.4% of children/youth reported they don't remember how many times they were in and out of institutions.

It is important to note that nearly all children/youth (99%) reported they are able to get an education in the institution. Table 3.2. also reveals that 81% of children/youth reported they have contact with their parents or other relatives (excluding teachers). However, Figure 3.3. reveals that children/youth residing in specialized institutions of education for children with deviant behavior (77.5%) were

Table 3.2. Children's background and contact with family N = 997% n Child knows why they are in 857 86.0 the institution First time child lived in an 542 54.4 institution Number of times child has been in and out of institutions 1 time 102 22.4 145 31.9 2 times 3 times 89 19.6 4 times 37 8.1 5 times 15 3.3 6 times or more 15 3.3 52 11.4 Don't remember Child able to get an education 987 99.0 Child has contact with parents 808 81.0 or other relatives

significantly less likely to report they have contact with their parents or other relatives, than children/youth in orphanages (80.7%) and shelters (94.6%). It is unknown whether the children/youth were deviant because of their lack of contact and bonds with their parents and other relatives (as a result of family breakdown, family violence/abuse, abandonment, or running away), or if their family does not have contact with them because of their deviant behavior.



² The research was designed to survey children and youth between 9 and 18 years of age; however, there were a few younger children and older youth that participated in the survey.

Table 3.3. Feelings of safety and fear in the institution by type of institution							
	Orphanages N=812		Shelter N=56		Institutions of education for children with deviant behavior N=129		
	N	%	N	%	N	%	
Feel safe in the institution	718	88.4	50	89.3	718	88.4	
Afraid of children in the institution	56	6.9	3	5.4	18	14.0	
Afraid of staff in the institution	51	6.3	4	7.1	17	13.2	

Children's assessment of conditions in institutions

The second part of the survey asked children/youth to describe the conditions in the institution. Figure 3.3. reveals that 57% of children/youth in orphanages and 55% of children/youth in shelters described the conditions in the institution as "very good", compared to only 31% of children/youth in institutions of education for children with deviant behavior. Children/ youth in institutions of education for children with deviant behavior (62%) were more likely to describe the conditions in the institution as "good". In addition, 39% of children/youth in orphanages and 41% in shelters also described the conditions in the institutions as "good". Although few children/youth in the different types of institutions described the conditions as "bad" or "very bad", it is important to note that 3% of children/ youth in each of the three different types of institutions described the conditions in the institution as "bad". In addition, 2% of children/youth in institutions of education for children with deviant behavior reported conditions in the institution were "very bad".

Appendix Table 4 reveals that males (5.0%) were slightly more likely to rate the conditions in the institution as "bad" or "very bad", compared to females (2.8%).

Children's feelings of safety and fear in institutions

Children/youth were also asked whether they feel safe in the institution, and if they are afraid of children or staff in the institution. Table 3.3 reveals that 88% to 89% of children/youth in the three different types of institutions reported they feel safe in the institution. At the same time, however, children/youth reported they are afraid of children and staff in the institution. In fact, children/youth in institutions of education for children with deviant behavior were twice as likely to report they are afraid of children (14%) and staff (13.2%) in the institution, compared to children in orphanages (6.9% and 5.4% respectively) and shelters (6.3% and 7.1% respectively). Children/

youth's fear of other children and staff in the institution is a major concern because it demonstrates that the attitudes and actions of some children and staff in the institution threatens children/youth's sense of safety and security in the institution; thus, creating an unpredictable and unsafe environment for children to live and grow up in.

Appendix Table 4 reveals there are no significant differences between males and females in their feelings of safety and fear in the institution.

Children report witnessing violence among children in institutions

Children/youth were also asked to report whether they have witnessed acts of violence among children in the institution. Table 3.4 reveals that children/youth in each of the three types of institutions reported witnessing violence among children in the institution (i.e., bullying, harsh verbal abuse, psychological abuse, and physical violence; see Chapter 2 for definitions of each of these types of violence). In particular, Table 3.4 reveals that 50.4% of children/ youth in orphanages and institutions of education for children with deviant behavior, and 42.9% in shelters reported witnessing one or more of the four different types of violence among children in the institution. This finding is important because it reveals that as many as 1 out of 2 children/youth living in state-run residential institutions witness incidents of violence among children, and more than likely are directly and/ or indirectly affected in negative ways by the violence.

More specifically, Table 3.4 reveals that 21.3% of children/youth in orphanages, 25.0% in shelters, and 30.2% in institutions of education for children with deviant behavior reported witnessing bullying in the institution (i.e., one child bullying another child). Rates of harsh verbal abuse among children are even higher, with 36.7% of children/youth in orphanages, 23.2% in shelters, and 41.9% in institutions of education for children with deviant behavior reporting they have witnessed harsh verbal abuse among children in the institution (i.e., saw a child calling

Table 3.4. Witness violence among children in the institution by type of institution Institutions of Orphanages Shelter education for children with deviant behavior N = 812N=56 N = 129% Ν % Ν % Ν 50.4 409 50.4 Witness violence among children (all forms) 24 42.9 65 39 Witness bullying 173 21.3 14 25.0 30.2 Witness harsh verbal abuse 298 36.7 13 23.2 54 41.9 Witness psychological abuse 12 39 212 26.1 21.4 30.2 Witness physical violence 291 35.8 15 26.8 42 32.6

Note: Each category in this table and totals were computed from the aggregated categories and results in Appendix Table 1.

another child names or saying mean things to hurt their feelings or scare them). It is important to note that children in institutions of education for children with deviant behavior reported witnessing bullying and harsh verbal abuse at a slightly higher rate than children in the other institutions.

The survey also measured the occurrence of psychological abuse among children (i.e., intentional verbal and behavioral actions that aim to threaten, intimate, and cause fear in a child). Table 3.4 reveals that 26.1% of children/youth in orphanages, 21.4% in shelters, and 30.2% in institutions of education for children with deviant behavior reported witnessing psychological abuse among children in the institution (i.e., saw a child breaking or ruining another child's things on purpose, e.g., clothes, toys, personal things; saw a child threatening to harm or physically hurt another child). Thus, as many as 1 out 4 children witnessed psychological abuse among children in the institutions.

Appendix Table 1 provides specific data on the two forms of psychological abuse measured in the survey. Specifically, Appendix Table 1 reveals that 12% of children/youth in shelters, and 18% in orphanages and institutions of education for children with deviant behavior witnessed a child breaking or ruining another child's things on purpose). In addition, 25% of children/youth (1 out of 4) in institutions of education for children with deviant behavior witnessed a child threatening to physically harm or hurt another child, compared to 16% of children/youth in orphanages and 12% in shelters.

Finally, Table 3.4 reveals a significant proportion of children/youth also witness physical violence among children in the institution. In particular, 35.8% of children/youth in orphanages, 26.8% in shelters, and 32.6% in institutions of education for children with deviant behavior witnessed physical violence among children in the institution (i.e., saw a child

grab, push or knock another child down; saw a child hit, kick or physically hurt another child; saw a child hit or attack another child with an object or weapon). Thus, as many as 1 out of 3 children/youth witnessed physical violence among children in the institution.

Appendix Table 1 also provides specific data on the three forms of physical violence measured in the survey. Specifically, Appendix Table 1 reveals that 28% of children/youth in orphanages and institutions of education for children with deviant behavior, and 21% of children/youth in shelters witnessed a child grabbing, pushing, or knocking another child down. In addition, 22% of children/youth in orphanages, 23% in institutions of education for children with deviant behavior, and 16% in shelters witnessed a child hitting, kicking, or physically hurting another child. Children/youth in institutions of education for children with deviant behavior (13%) were two times more likely to witness a child hitting or attacking another child with an object or weapon, compared to children in orphanages (6%); and 13 times more likely than children/youth in shelters.

In terms of gender differences, Appendix Table 4 reveals there were minimal differences between females and males in their witnessing violence. However, females (54.8%) were slightly more likely to report witnessing incidents of violence than males (46.2%). Females were also slightly more likely to report witnessing bullying (25.8%) and harsh verbal abuse (43.1%), than males (20.2% and 31.6% respectively). There were no significant gender differences in terms of witnessing psychological abuse. Finally, females (38.2%) were also slightly more likely to report witnessing physical violence than males (32.3%).

Bullying has traditionally been viewed as child's play, its occurrence usually eliciting the response, "kids will be kids". However, over the past 30 years, bullying has come to be recognized as an abusive behavior (a

form of violence among children) that often leads to greater and prolonged violent behavior (1, 2, 3, 4). Bullying among children includes a variety of negative acts carried out repeatedly over time; it involves a real or perceived imbalance of power, with the powerful child or group of children attacking those who are less powerful (5). Bullying can take three forms (6, 7):

- harsh verbal abuse (e.g., taunting, teasing, name calling);
- psychological abuse (e.g., spreading rumors, purposeful ostracism and social exclusion, extortion, making threats, taking/breaking personal belongings, intimidation); and
- physical violence (hitting, kicking, spitting, pushing, physical attacks, sexual harassment).

Bullying often worsens over time; in many cases, harsh verbal abuse and psychological abuse escalate to physical violence.

Bullying needs to be taken seriously because of the short- and long-term negative consequences it has on children that are directly and/or indirectly exposed to these forms of violence. Children/youth that are victims of bullying often suffer humiliation, hurt feelings, feelings of rejection and worthlessness, feelings of loneliness, lowered self-esteem, stress and anxiety, depression, and fear. Bullying often negatively impacts children's behavior, their social and emotional development (e.g., difficulty making friends and poor relationships with peers), and their academic performance (8, 9). Longitudinal studies suggest that children/youth that are regular victims of bullying and harsh verbal abuse are at increased risk for poor self-esteem, depression, and other mental health problems as adults (10).

Physical violence among children/you thalso needs to be taken seriously because it often causes physical harm or injury, and injuries often have an adverse effect on the short- and long-term physical health and wellbeing of a child/youth. Physical violence can even result in disability or a child's death. To better understand the effects of physical violence against children, children/

youth were asked if they witnessed a child physically injured by another child in the institution. Table 3.5 reveals that children/youth in the three different types of institutions reported witnessing children being physical injured by other children in the institution. In particular, children/youth in institutions of education for children with deviant behavior (27.9%) were two times more likely to witness a child physically injured by another child in the institution, compared to children/youth in orphanages (14.7%), and three times more likely to than children/youth in shelters (8.9%). In other words, as many as 1 out of 4 children in institutions of education for children with deviant behavior have witnessed a child being physically injured by other children in the institution.

Appendix Table 4 also reveals that female (54.8%) were slightly more likely to report witnessing a child physically injured by another child compared to males (46.2%).

Children/youth that reported witnessing a child physically injured by another child in the institution were asked if the staff provided the injured child with medical treatment. Table 3.5 reveals that the majority of children/youth in each of the three different types of institutions reported that staff provided the injured child with medical treatment for their injuries.

Tables 3.4 and 3.5 reveal that violence among children in state-run residential institutions is a serious problem. Violence among children in its various forms can negatively affect the social environment and climate institutions, creating a climate of fear among children/youth; ultimately, threatening children/ youth's sense of safety and security in the institution (11, 12). Children that are the victims of violence (bullying, harsh verbal abuse, psychological abuse, and/or physical violence) typically have a difficult time telling someone about the violence they experience, particularly where they are no signs of physical injuries; moreover, they may not understand that they are being abused, particularly if it is directed at them from other children. Nevertheless, violence among children in institutions needs to be taken seriously.

Table 3.5. Witness children physically injured by other children in the institution by type of institution							
	Orphanages N=812		Shelter N=56		Institutions of education for children with deviant behavior N=129		
	N	%	N	%	N	%	
Witness a child physically injured by another child in the institution	119	14.7	5	8.9	36	27.9	
	N=	119	N=5		N=36		
Staff provided the injured child with medical treatment for their injuries	104	87.4	4	80.0	33	91.7	

Itisimportant to note that international research has also found that children/youth who bully are at increased risk for negative outcomes. Children/youthwho bully often have poor academic performance and drop out of school. They are also at increased risk of antisocial behaviors, including delinquency (e.g., truancy), criminal behaviors (e.g., hooliganism, vandalism, fighting, shoplifting, theft), and drug and/or alcohol use/abuse. Bullying can also lead to criminal behavior later in life; bullies are more likely to be arrested and convicted of a crime in adulthood (13, 14).

Children report being victims of physical violence from other children in institutions

Children/youth were also asked to report their experiences with physical violence from other children in the institution. They were asked if they were ever physically attacked and hurt by another child in the institution. Table 3.6 reveals that 13.8% of children/youth in orphanages, 16.1% in shelters, and 14.7% in institutions of education for children with deviant behavior reported they were physically attacked and hurt by another child in the institution. In each of the three different types of institutions, children/youth that reported being physically

attacked and hurt by another child were significantly more likely to be boys. However, as many as36.8% of those that were physically attacked and hurt by another child in institutions of education for children with deviant behavior were girls, 32.1% of them were girls in orphanages, and 22.2% of them were girls in shelters. Thus, physical victimization of girls in institutions should not be overlooked, as nearly 1 out of 4 girls in shelters, and 1 out of 3 girls in orphanages and institutions of education for children with deviant behavior reported they were physically attacked and hurt by another child in the institution.

Children/youth that were physically attacked and hurt by another child in the institution were also asked what kind of injuries they suffered. Table 3.6 reveals that in each of the three types of institutions, the majority of children/youth that suffered physical attacks experienced small bruises, scrapes, and/or cuts. In shelters (22.2%) and orphanages (14.3%), a significant number of children also reported being knocked out or hit unconscious. In institutions of education for children with deviant behavior, the second most common injury was large bruises, major cuts, and/or back eye (15.8%). In shelters and orphanages, large bruises, major cuts, and black eyes were also common. Children also reported experiencing sprains, broken bones, broken teeth, internal injuries, and head, eye and ear injuries.

Table 3.6. Personal experience with physical violence from other children in the institution by type of institution							
	Orphanages N=812		Shelter N=56		Institutions of education for children with deviant behavior N=129		
	N	%	N	%	N	%	
Physically attacked and hurt by another child in the institution	112	13.8	9	16.1	19	14.7	
Gender	N=	112	N=9		N=19		
Male	76	67.9	7	77.8	12	63.2	
Female	36	32.1	2	22.2	7	36.8	
Kind of injuries							
Small bruises, scrapes, cuts	73	65.2	7	77.8	16	84.2	
Large bruises, major cuts, black eye	11	9.8	1	11.1	3	15.8	
Sprain, broken bone, broken teeth	4	3.6	0	0.0	0	0.0	
Internal injuries	4	3.6	0	0.0	0	0.0	
Knocked out/hit unconscious	16	14.3	2	22.2	1	5.3	
Head, eye or ear injuries	7	6.3	1	11.1	0	0.0	
Other	12	10.7	1	11.1	1	5.3	
Received medical treatment for your injuries	93	83.0	6	75.0	13	68.4	

Some children/youth also reported experiencing other injuries, such as beating beat on the back, head trauma, and cut/loss of an eyebrow. One child reported, "I was beat unmercifully".

Children/youth that were physically attacked and suffered injuries were also asked if they received medical treatment for their injuries. Table 3.6 reveals that children/youth in orphanages (83.0%) and shelters (75.0%) were more likely to receive medical treatment for their injuries than children/youth in institutions of education for children with deviant behavior (68.4%).

Children report staff intervention to incidents of violence among children

We asked children/youth how often staff intervene when a child is being physically hurt by another child. Table 3.7 reveals that while the majority of children/youth in orphanages (70.6%), shelters (80.8%), and institutions of education for children with deviant behavior (80.0%) reported staff "always" intervene when a child is being physically hurt by another child. It is important to note, however, that children/youth in orphanages were more likely to report that staff only "sometimes" intervene when a child is being physically hurt by another child (12.4%), compared to children/youth in shelters (7.7%) and institutions of education for children with deviant behavior (7.2%).

Children report witnessing staff use of violence against children in institutions

Children/youth were also asked to report whether they have witnessed staff using violence against children in the institution. Table 3.8 reveals that children/youth in the three types of institutions witnessed staff using harsh verbal abuse, psychological abuse, and physical violence (moderate and severe physical violence) on children/youth in the institution. To begin, Table 3.8

reveals that 41.1% of children/youth in institutions of education for children with deviant behavior, 35.1% of children/youth in orphanages, and 26.8% of children/youth in shelters reported witnessing staff use of violence against children. This is data is concerning because it reveals that more than 1 out of 3 children/youth in orphanages and institutions of education for children with deviant behavior, and as many as 1 out of 4 children/youth in shelters witness staff using violence against children.

More specifically, Table 3.8 reveals that 30.2% of children/youth in institutions of education for children with deviant behavior reported witnessing staff use harsh verbal abuse on children/youth in the institution (i.e., swear at or curse children or call them names such as idiot, stupid, bastard; say mean things to children to hurt their feelings or scare them), compared to 19.2% of children/youth in orphanages and 16.1% in shelters. In other words, nearly 1 out of 3 children/youth in institutions of education for children with deviant behavior witnessed staff use harsh verbal abuse on children/youth. (See Appendix Table 2 for data on each of the different forms of harsh verbal abuse measured in the survey).

Harsh verbal abuse may be the outcome of uncontrolled frustration on the part of staff or may have a similar purpose to that of corporal punishment – to intimidate or scare a child into obedience and "re-train" their behavior (15). People of maintain harsh verbal abuse (e.g., name-calling, insults, belittling, and ridicule are just words, and that words don't hurt; however, research on harsh verbal abuse provide contradictory evidence. Children who are victims of harsh verbal abuse are likely to internalize the negative name-calling, insults, ridicule, and mean and humiliating words, particularly when directed at them from an adult or authority figure. Also, children who experience harsh verbal abuse don't typically experience only one incident, but often years of harsh verbal abuse that can begin in childhood and continue through into adolescence. The negative effects of harsh verbal abuse on children are numerous, including: hurt feelings, feelings of rejection, feelings of worthlessness and self-doubt, lowered self-esteem, stress and anxiety, depression,

Table 3.7. Staff intervention to physical violence among children in the institution by type of institution							
	Orpha N=	nages 812	She N=		Institutions of education for children with deviant behavior N=129		
	N	%	N	%	N	%	
How often staff intervene when a child is being physically hurt by another child:							
Always	562	70.6	42	80.8	100	80.0	
Sometimes	99	12.4	4	7.7	9	7.2	

Table 3.8. Witness staff use of violence against children in the institution by type of institution Institutions of **Orphanages** Shelter education for children with deviant behavior N = 812N = 56N = 129% % Ν % Ν Ν Witness violence by staff (all forms) 285 35.1 15 26.8 53 41.1 156 19.2 9 39 30.2 Witness harsh verbal abuse 16.1 Witness psychological abuse 133 16.4 6 10.7 22 17.1 Witness physical violence 238 29.3 9 16.1 39 30.2 Moderate physical violence 178 21.9 6 10.7 28 21.7 Severe physical violence 181 22.3 9 16.1 33 25.6

Note: Each category in this table and totals were computed from the aggregated categories and results in Appendix Table 2.

and fear. While the negative effects of harsh verbal abuse may differ depending on the context and the age of the child; nevertheless, children often internalize the negative labels and messages of harsh verbal abuse to the point that it can negatively impact their behavior, social and emotional development, and their academic performance (16).

Children also reported that staff psychologically abused children/youth in the institution (i.e., preventing children from using the toilet; breaking or ruining a child's things on purpose, e.g., clothes, toys, personal things; act in a ways that made a child afraid that they might be physically hurt; lock children in a room or small place for a long time; tie children up or chain them to something). Table 3.8 reveals that 17.1% of children/youth in institutions of education for children with deviant behavior, 16.4% in orphanages, and 10.7% of children/youth in shelters reported witnessing staff psychologically abuse children/youth in the institution. (See Appendix Table 2 for data on each of the different forms of psychological abuse measured in the survey).

Psychological abuse has pronounced negative consequences on a child's development and wellbeing. The scars of psychological abuse are real and often run deep in abused children. Oftentimes psychological abuse is coupled with harsh verbal abuse and worsens over time, often escalating to physical abuse (17). Psychologically abused children typically have a difficult time telling someone about the abuse they experience from staff, particularly when there are no signs of physical injuries; moreover, they may not understand that they are being abused by family members. Nevertheless, psychological abuse needs to be taken seriously.

Table 3.8 also reveals that a significant proportion of children witnessed staff using physical violence

against children in the institutions. Children/youth in orphanages (29.3%) and institutions of education for children with deviant behavior (30.2%) were nearly two times more likely to witness staff using physical violence against children, compared to children/youth in shelters (16.1%). This is significant because more than 1 out of 4 children/youth witnessed staff using physical violence against children in orphanages and institutions of education for children with deviant behavior.

The survey was designed to differentiate staff's use of moderate physical violence (i.e., pinch children, twist children's ears and arms) from severe physical violence (i.e., shake children; slap children in the face or on the head; slap children on the buttocks, back, leg, arm; grab, push, or knock children down; hit or kick children; hit children with a hard object or weapon, e.g., stick, belt, whip, ruler, or other little things that hurt; hit children so hard that they had marks or were injured; burn children with cigarettes or other hot items). Table 3.8 reveals that children/youth in shelters (21.9%) and institutions of education for children with deviant behavior (21.7%) were two times more likely to witness staff using moderate physical violence against children/ youth, compared to children in shelters (10.7%). In addition, children/youth in institutions of education for children with deviant behavior (25.6%) and orphanages (22.3%) were more likely to witness staff using severe forms of physical violence against children, than children in shelters (16.1%). This data is concerning because it reveals that as many as 1 out of 4 children/youth in orphanages and institutions of education for children with deviant behavior witness staff using severe physical violence against children in the institution.

Appendix Table 2 also provides specific data on the different forms of moderate and severe physical

Table 3.9. Witness children physically injured by staff in the institution by type of institution							
	Orphanages N=812		Shelter N=56		Institutions of education for children with deviant behavior N=129		
	N	%	N	%	N	%	
Have seen a child physically injured by staff in the institution	55	6.8	3	5.4	15	11.6	
	N=55		N-3		N=15		
Staff provided the injured child with medical treatment for their injuries	39	70.9	2	66.7	10	66.7	

violence measured in the survey. Specifically, Appendix Table 2 reveals that children most often reported witnessing staff slap children in the face or on the head, buttocks, back, legs or arms. They also commonly reported witnessing staff hit children with a hard object or weapon (stick, belt, ship, ruler or other things that hurts), shaking children, and hitting children so hard that they had marks or were injured. Children in institutions of education for children with deviant behavior also commonly reported witnessing staff hit or kick children/youth in the institution.

Appendix Table 4 reveals there are no gender differences in children/youth witnessing staff use of violence against children in the institution.

To better understand the effects of physical violence against children, children/youth were asked if they witnessed a child physically injured by staff in the institution. Table 3.9 reveals that children/youth in the different types of institutions reported witnessing children being physical injured by staff in the institution. In particular, children/youth in institutions of education for children with deviant behavior (11.6%) were two times more likely to witness a child physically injured by staff in the institution, compared to children/youth in shelters (5.4%) and in orphanages (6.8%).

Children/youth that reported witnessing a child physically injured by staff were asked if the staff provided the injured child with medical treatment. Table 3.9 reveals the majority of children/youth in each of the three different types of institutions reported that staff provided the injured child with medical treatment for their injuries. It is important to point out that children/youth that were injured by other children/youth in the institution were more likely to receive medical treatment for their injuries (80% to 91%; see Table 3.5), than children that were injured by staff (66% to 70%; see Table 3.9). This is most likely because staff are aware that institution medical staff will perceive physical abuse and injury of a child/youth by an adult as more serious than physical abuse and injury of a child/youth by another

child/youth; even though each are equally serious and result in similar injuries. It is important to note that Appendix Table 4 revealed there are no gender differences in terms of witnessing a child physically injured by staff in the institution.

Children report being victims of physical violence by staff in institutions

Children/youth were also asked if they were ever physically attacked and hurt by staff in the institution. Table 3.10 reveals that 9.0% of children/youth in orphanages, 7.1% in shelters, and 11.6% in institutions of education for children with deviant behavior reported they were physically hurt by staff. In shelters, all those children/youth that reported being physically hurt by staff were boys. Whereas, in institutions of education for children with deviant behavior, 26.7% of those that reported being physically hurt by staff were girls, and 73.3% were boys. In comparison, in orphanages, as many as 42.5% of children/youth that reported being physically hurt by staff were girls, and 57.5% were boys. This finding reveals that girls, like boys, are at significant risk of being physically hurt by staff.

Children/youth that were physically attacked and hurt by staff in the institution were asked what kind of injuries they suffered. Table 3.10 reveals that in each of the three types of institutions, the majority of children/youth that were physically injured by staff experienced small bruises, scrapes, and cuts. In shelters, a significant proportion of children also reported being knocked out or hit unconscious (25.0%); whereas, in institutions of education for children with deviant behavior (20.0%) and in orphanages (13.7%), a significant proportion of children/youth reported experiencing large bruises, major cuts, and back eyes. Children in orphanages also reported experiencing sprains, broken bones, broken teeth, internal injuries, being knocked out or hit unconscious, and head, eye and ear injuries.

Table 3.10. Personal experiences with physical violence from staff in the institution by type of institution							
	Orphanages N=812		Shelter N=56		Institutions of education for children with deviant behavior N=129		
	N	%	N	%	N	%	
Physically hurt by staff the institution	73	9.0	4	7.1	15	11.6	
	N=	- 73	N=	=4	N=	:15	
Gender							
Male	42	57.5	4	100.0	11	73.3	
Female	31	42.5	0	0.0	4	26.7	
Kind of injuries:							
Small bruises. scrape or cut	44	60.3	3	75.0	11	73.3	
Large bruise. major cut. black eye	10	13.7	0	0.0	3	20.0	
Sprain. broken bone. broken teeth	2	2.7	0	0.0	0	0.0	
Internal injuries	4	5.5	0	0.0	0	0.0	
Knocked out/hit unconscious	7	9.6	1	25.0	0	0.0	
Head. eye or ear injuries	4	5.5	0	0.0	0	0.0	
Other	11	15.1	0	0.0	2	13.3	
Received medical treatment for your injuries	50	68.5	2	50.0	9	60.0	

Some children/youth in orphanages and institutions of education for children with deviant behavior also reported experiencing other injuries, such as head traumas and open wounds on the leg. Children reported being beaten on the back, struck on the head, struck against the door, and beat. As one child/youth reported, "My whole body hurt".

Children/youth that were physically attacked and suffered injuries were also asked if they received medical treatment for their injuries. Table 3.10 reveals that only 50.0% of children/youth physically hurt by staff in shelters, 68.5% in orphanages, and 60.0% in institutions of education for children with deviant behavior reported they received medical treatment for their injuries. It is important to point out that children/youth that were physically injured by staff were less likely to receive medical treatment (50% to 68%; see Table 3.10), compared to children/ youth that were physically injured by other children in the institution (68% to 83%; see Table 3.6). As previously explained, this is most likely because staff are aware that medical staff will perceive physical abuse and injury of a child/youth by an adult as more serious than physical abuse and injury of a child/ youth by another child/youth; even though each are equally serious and result in similar injuries.

Strategies used by children to avoid conflict with other children and staff in institutions

When children live in an environment where they are regularly exposed to violence and victimization they often develop strategies to avoid conflict. We asked children to identify strategies they often use to avoid conflicts with other children and staff in the institution. Table 3.11 reveals that 51% of children/youth in orphanages and institutions of education for children with deviant behavior reported they try to avoid conflicts with staff; whereas, only 32.1% of children/ youth in shelters try to avoid conflicts with staff. This finding can likely be explained by the finding in Table 3.8that children/youth in orphanages (35.1%) and institutions of education for children with deviant behavior (41.1%) were more likely to witness staff using violence against children in the institution, compared to children/youth in shelters (26.8%).

Other commons strategies used by children/youth in the three different types of institutions to avoid conflict with others in the institution was to protect one's self and fight back, and attempt to calm the situation by doing as others say. Children/youth in institutions of education for children with deviant behavior (15.5%)

Table 3.11. Methods children use to avoid conflict with others by type of institution							
	Orphanages N=812		Shelter N=56		Institutions of education for children with deviant behavior N=129		
	N	%	N	%	N	%	
Methods to avoid conflict with others in the institution:							
I show aggression toward them	73	9.0	4	7.1	20	15.5	
I protect myself and fight back	209	25.7	16	28.6	34	26.4	
I escape or hide from them	34	4.2	2	3.6	5	3.9	
I attempt to calm them down by doing as they say	148	18.2	11	19.6	26	20.2	
I report them to the staff/director of the institution	72	8.9	8	14.3	8	6.2	
I ask for protection or help from other children in the institution	66	8.6	5	8.9	10	7.8	
I stay away from conflicts with staff	419	51.6	18	32.1	67	51.9	
Other	126	15.5	16	28.6	27	20.9	

were more likely to report showing aggression toward others, compared to children/youth in orphanages (9.0%) and shelters (7.1%). Whereas, children/youth in shelters (14.3%) were more likely to report those they have conflict with to staff or the director of the institution, compared to children/youth in orphanages (8.9%) and institutions of education for children with deviant behavior (6.2%).

Finally, a significant proportion of children in each of the different types of institutions reported using other strategies to avoid conflicts. These include:

- try to leave
- try to avoid conflicts, fights, trouble
- try to behave calmly, quietly, rationally
- · try to calm both sides down
- try to discuss the problem calmly
- keep silent and do nothing
- don't pay attention
- look for the right way out
- never interfere
- never offend anybody
- try to get along with them
- try to ignore them
- try to solve the problem/conflict
- accept blame and make up with the person
- try to appease them

- stand up for myself
- explain who is right
- find a compromise
- be polite and friendly

This list demonstrates that children use a wide range of strategies to avoid conflicts with other children and staff in the institution. However, further analysis revealed that children that attempted to avoid conflict still experienced physical violence and injuries from other children and staff in the institution.

Appendix Table 4 reveals there were few differences between males and females in methods used to avoid conflict with others in the institution. The only differences is that females (21.4%) were slightly more likely than males (16.3%) to attempt to calm down those they are having conflict with by doing as they say.

Neglect experienced by children in institutions

The survey also measured different forms of neglect experienced by children in institutions. Table 3.12 reveals that children/youth in the three types of institutions reported being neglected. In particular, 26.4% of children/youth in institutions of education for children with deviant behavior, 21.2% in orphanages, and 16.1% in of children/youth in shelters reported being neglected in the institution. The most common form of neglect children experienced was clothing neglect (i.e., having to wear clothes that were the wrong size, too big

Table 3.12. Neglect of children in the institution by type of institution Institutions of **Orphanages** Shelter education for children with deviant behavior N=812 N = 56N = 129% % Ν % Ν Ν 172 Neglect (all forms) 21.2 9 16.1 34 26.4 50 6.2 3 5.4 7 5.4 Neglect - nutrition 7 Neglect - clothing 138 17.0 12.5 25 19.4 Neglect - supervision 17 2.1 1 1.8 3 2.3 4 Neglect – medical 50 6.2 7.1 15 11.6

Note: Each category in this table and totals were computed from the aggregated categories and results in Appendix Table 3.

or too small; having to wear close that were not warm enough in the winter or too warm in the summer; having to wear dirty or torn clothes). Appendix Table 3 reveals one of the most common form of clothing neglect children experienced was having to wear clothes that were the wrong size (too big or too small) and having to wear clothes that were not warm enough in the winter or too warm in the summer.

A significant proportion of children/youth in institutions of education for children with deviant behavior (11.6%) also reported experiencing medical neglect (i.e., not taken care of when sick, not taken to the doctor or clinic, not given medicine when needed). This finding needs to be under stood in combination with the findings in Tables 3.6. and 3.10. that children/youth in institutions for children with deviant behavior were significantly less likely to receive medical treatment for their injuries due to violence from another child or staff.

Table 3.12. also reveals that some children experienced nutritional neglect (i.e., not given enough food to eat and went hungry) and supervision neglect (i.e., locked in your room all night without adult supervision). Appendix Table 4 reveals that females and males were equally likely to experience neglect. The only gender differences in neglect that emerged was related to supervision. Boys (3.0%) were more likely to report supervision neglect than girls (.9%)

Children report running away from institutions

Research has found that children who are victims of abuse and neglect are typically at increased risk of running away from home (18, 19). Children/youth were specifically asked if they ever ran away from the institution, and how many times they ran away. Among the 997 children/youth surveyed,

10.7% (n=107) reported they ran away from the institution. More specifically, Table 3.13 reveals that 10.0% of children/youth in orphanages ran away, 17.9% in shelters ran away, and 12.4% in institutions of education for children with deviant behavior ran away. In orphanages and shelters, the majority of runaways were boys (65.4% and 70.0% respectively), but nearly one-third of the runaways were girls. Moreover, in institutions of education for children with deviant behavior, 50.0% of runaways were girls, and 50.0% were boys.

We asked children/youth who reported running away from the institution, how many times they ran away. In institutions of education for children with deviant behavior, the majority of children/youth who ran away reported they only ran away one time (71.4%). Whereas in shelters, 50% of children/youth reported running away twice and 25.0% ran away as many as three times. In orphanages, while 58.2% of children/youth reported running away only once, 41.9% reported running away multiple times (as many as 7 to 13 times).

Further analysis was conducted to explore whether children/youth that ran away from the institution were more likely to rate the conditions in the institution as "bad" or were afraid of children and staff in the institution. Analysis was also conducted to see if children/youth that ran away witnessed violence among children and by staff in the institution, personally experienced violence from other children and staff in the institution, and experienced neglect in the institution. Finally, analysis was conducted to see if runaways practiced self-harm.

Table 3.14. compares runaways to non-runaways. The data reveals that runaways (5.6%) were slightly more likely than non-runways (3.8%) to rate the conditions in the institution as "bad/very bad". Runaways (15.9%) were also slightly more likely to feel unsafe in the institution, compared to non-

Table 3.13. Patterns of running away among children in the institution by type of institution							
	Orphanages N=812		Shelter N=56		Institutions of education for children with deviant behavior N=129		
	N	%	N	%	N	%	
Runaway from the institution	81	10.0	10	17.9	16	12.4	
	N=81		N=10		N=16		
Gender							
Male	53	65.4	7	70.0	8	50.0	
Female	28	34.6	3	30.0	8	50.0	
Number of times ran away							
1 time	46	58.2	2	25.0	10	71.4	
2 times	10	12.7	4	50.0	0	0.0	
3 times	12	15.2	2	25.0	2	14.3	
4 times	4	5.1	0	0.0	1	7.1	
5 times	3	3.8	0	0.0	0	0.0	
6 times	1	1.3	0	0.0	0	0.0	
7-13 times	3	3.9	0	0.0	1	7.1	

Table 3.14. Runaways' experiences in the institution compared to non-runaways							
	Runaways N=107			naways 890			
	N	%	N	%			
Conditions in the institution							
Rate conditions in the institution as "bad/very bad"	6	5.6	34	3.8			
Feel unsafe in the institution	17	15.9	98	11.0			
Afraid of children in the institution	12	11.2	65	7.3			
Afraid of staff in the institution	12	11.2	60	6.7			
Witness violence in the institution							
Witnessed violence among children (all forms)	66	61.7	432	48.5			
Witnessed violence by staff on children (all forms)	51	47.7	302	33.9			
Victim of violence in the institution							
Physically attacked and hurt by another child in the institution	20	18.7	120	13.5			
Physically hurt by staff at the institution	15	14.0	77	8.7			
Neglect							
Experienced neglect in the institution	35	32.7	180	20.2			
Self-harm							
Purposely hurt themself because they were unhappy or sad	27	25.2	58	6.5			

runaways (11.0%). In fact, runaways were more likely to report they are afraid of children (11.2%) and staff (11.2%), compared to non-runaways (7.3% and 6.7% respectively).

In regard to experiences of violence in the institution, Table 3.14 reveals that runaways were significantly more likely to witness violence among children (61.7%) and by staff (47.7%) in the institution, compared to non-runaways (48.5% and 33.9% respectively). Runaways (18.7%) were also more likely than nonrunaways (13.5%) to be physically attacked and hurt by another child in the institution. Runaways (14.0%) were also significantly more likely to be physically attacked and hurt by staff in the institution, compared to non-runaways (8.7%). In regards to neglect, runaways (32.7%) were significantly more likely to experience neglect in the institution, compared to nonrunaways (20.2%). These findings demonstrate that the act of running away from the institution is often a coping strategy, or survival strategy, that children/ youth use to escape the violence and neglect they are experiencing in the institution.

Finally, Table 3.14 reveals that runaways (25.2%) are four times more likely than non-runaways (6.5%) to report they purposely hurt themselves because they were unhappy or sad (referred to self-harm). In other words, 1 out 4 children/youth that ran away from the institution reported harming themselves on purpose (e.g., self-harm or attempting suicide).

Thus, children that run away should be considered potential victims of violence and neglect versus immediately labeled as trouble makers and deviants. In many cases, it may not be in the best interest of the child that has run away to return them to the institution from which they ran, particularly if they are the victim of violence form other children or staff, and/or neglect from staff. Runaways should also be evaluated to determine if they are engaging in acts of self-harm (e.g., cutting, burning, suicides attempts). Moreover, institutions that have incidents of children/youth running away should be investigated for problems neglect and violence against children. Acts of children running away from the institution should serve as a warning sign for potential problems in the institution.

Children report committing acts of self-harm

Self-harm can be one of the hardest behaviors for people to understand, but many children engage in a variety of behaviors in which an individual intentionally inflicts harm to his/her body (e.g., intentionally cutting of the skin, self-bruising or scratching, self-burning, pulling skin or hair, swallowing toxic substances, and breaking bones). Research has found that self-harm can be undertaken without suicidal intent; however, the relationship

is not clear since individual who report self-harm are also more likely to report having considered or attempted suicide (20).

Children/youth are normally very secretive about their self-harm behaviors; however, research has revealed that those that admit to self-harm often say they do it to help alleviate feelings of sadness, anxiety, or emotional distress. They may not be trying to commit suicide, but instead are seeking to manage intolerable feelings or to experience some sense of feeling (21).

Self-harm can start early in life. Research has found that early onset self-harm is common around the age of 7 years; however, most self-injury behaviors begin in middle adolescence between the ages of 12 and 15 years and can last for weeks, months, or years (22).

In the survey, children were asked if they ever purposely hurt themselves because they were unhappy or sad. They were also asked how many times they hurt themselves on purpose. Table 3.15 reveals that among the 997 children/youth surveyed, 8.5% reported they purposely hurt themselves because they were unhappy or sad. More specifically, 8.1% of children/youth in orphanages, 5.4% in shelters, and 12.4% in institutions of education for children with deviant behavior engaged in self-harm. In the three different types of institutions, the majority of children/youth that engaged in self-harm were boys, but the proportion of girls that engage in self-harm was significant (47.0% in orphanages, 33.3% in shelters, and 37.5% in institutions of education for children with deviant behavior). These findings are important because they reveal that both boys and girls in institutions are at risk of self-harm and suicide.

Children/youth that reported engaging in self-harm because they were unhappy or sad were asked how many times they hurt themselves on purpose. Table 3.15 reveals that most children/youth that engage in self-harm purposely harmed themselves multiple times (from 2 to 100 times). Children in institutions of education for children with deviant behavior reported many more repeated acts of self-harm.

Further analysis was conducted to explore whether children/youth that engage in acts of self-harm were more likely to rate the conditions in the institution as "bad" or were afraid of children and staff in the institution. Analysis was also conducted to see if children/youth that engage in acts of self-harm witnessed violence among children and by staff in the institution, personally experienced violence from other children and staff in the institution, and experienced neglect in the institution. Finally, analysis was conducted to see if children/youth that engage in self-harm ran away from the institution.

Table 3.16 shows that children/youth that engage in self-harm (18.8%) were seven times more likely to

rate the conditions in the institution as "bad/very bad", compared to children/youth that do not engage in self-harm (2.6%). Also, children/youth that engage in self-harm (27.1%) were twice as likely to report they feel unsafe in the institution, compared to children/youth that do not engage in self-harm (10.1%). Moreover, children/youth that engage in self-harm (21.2%) were three times more likely to report they are afraid of children in the institution, compared to children/youth that do not engage in self-harm (6.5%). And, children/youth that engage in self-harm (18.8%) were three times more likely to report they are afraid of staff in the institution, compared to children/youth that do not engage in self-harm (6.1%).

In regard to experiences of violence in the institution, Table 3.16 shows that children/youth that engage in self-harm were more likely to witness violence in the institution. In particular, children/youth that engage in self-harm (84.7%) were nearly twice as likely to witness violence among children, compared to children/youth that do not engage in self-harm (46.7%). In addition, children/youth that engage in self-harm (85.9%) were nearly three times more likely to witness staff commit acts of violence against children, compared to children/youth that do not engage in self-harm (30.7%).

In regard to victimization, children/youth that engage in self-harm (37.6%) were three times more likely to be physically attacked and hurt by another child in the institution, compared to children/youth that do not engage in self-harm (11.8%). In addition, children/youth that engage in self-harm (36.5%) were five times more likely to be physically hurt by staff at the institution, compared to children/youth that do not engage in self-harm (6.7%).

In terms of neglect, children/youth that engage in self-harm (55.3%) were three times more likely to experience neglect in the institution (nutritional, clothing, supervision, and/or medical neglect), compared to children/youth who do not engage in self-harm (18.4%). This finding is important, particularly when coupled with the finding that children who engage in self-harm were significantly more likely to witness violence among children and by staff, as well as to be the victim of violence by other children and staff in the institution.

Finally, Table 3.16 reveals that children/youth that engage in self-harm (31.8%) were three times more likely to run away from the institution, compared to children/youth that do not engage in self-harm (8.8%). In other words, nearly 1 out of 3 children that engaged in self-harm reported they ran away from the institution.

Table 3.15. Patterns of self-harm among children in the institution by type of institution						
			Institutions of education for children with deviant behavior N=129			
	N	%	N	%	N	%
Purposely hurt self because you were unhappy or sad	66	8.1	3	5.4	16	12.4
	N=	-66	N=	=3	N=	:16
Gender						
Male	35	53.0	2	66.7	10	62.5
Female	31	47.0	1	33.3	6	37.5
Number of times hurt one's self on p	ourpose					
1 time	18	38.3	1	50.0	2	15.4
2 times	13	27.7	1	50.0	3	23.1
3 times	8	17.0	0	0.0	0	0.0
4 times	2	4.3	0	0.0	1	7.7
5 times	3	6.4	0	0.0	2	15.4
6 times	0	0.0	0	0.0	1	7.7
9 times	0	0.0	0	0.0	1	7.7
10 times	1	2.1	0	0.0	1	7.7
100 times	0	0.0	0	0.0	1	7.7

Table 3.16. Experiences of children who engage in self–harm vs. children that do not engage in self–harm					
	Children that engage in self-harm N=85			hat do not self-harm 912	
	N	%	N	%	
Conditions in the institution					
Rate conditions in the institution as "bad/very bad"	16	18.8	24	2.6	
Feel unsafe in the institution	23	27.1	92	10.1	
Afraid of children in the institution	18	21.2	59	6.5	
Afraid of staff in the institution	16	18.8	56	6.1	
Witness violence in the institution					
Witnessed violence among children (all forms)	72	84.7	426	46.7	
Witnessed violence by staff on children (all forms)	73	85.9	280	30.7	
Victim of violence in the institution					
Physically attacked and hurt by another child in the institution	32	37.6	108	11.8	
Physically hurt by staff at the institution	31	36.5	61	6.7	
Neglect					
Experienced neglect in the institution	47	55.3	168	18.4	
Runaway					
Ran away from the institution	27	31.8	80	8.8	

These findings provide significant evidence that institutions are particularly unsafe and insecure environments for some children. Moreover, violence against children in institutions can cause children significant anxiety and emotional distress, resulting in acts of self-harm. In fact, existing research has found that self-harm is strongly linked to childhood abuse (23). Institutions that have incidents of suicide or attempted suicide should be investigated for problems neglect and violence against children. Incidents of suicide in institutions should serve as a warning sign for potential problems in the institution.

Children witness acts of selfharm in institutions

The survey also asked children/youth to report if they have heard about or witnessed another child in the institution purposely hurt themself because they were unhappy or sad. Table 3.17 reveals that among the 997 children/youth survey, 18.5% reported they heard about or witnessed another child in the institution purposely hurt themselves because they were unhappy or sad. More specifically, 34.9% of children/youth in institutions of education for children with deviant behavior reported hearing about or witnessing another child in the institution purposely hurt themselves because they were unhappy or sad. Moreover, children/youth in

Table 3.17. Witness children engaging in self-harm in the institution by type of institution							
	Orphanages N=812		Shelter N=56		Institutions of education for children with deviant behavior N=129		
	N	%	N	%	N	%	
Heard about or saw another child in the institution purposely hurt themself because they were unhappy or sad	132	16.3	7	12.5	45	34.9	

institutions of education for children with deviant behavior (34.9%) were twice as likely to hear about or witness another child in the institution purposely hurt themselves because they were unhappy or sad, compared to children/youth in orphanages (16.3%) and shelters (12.5%). The rate at which self-harm in institutions is concerning, as is the negative effects it has on other children in the institution that are exposed to their acts of self-harm and suicide.

Appendix Table 4 also revealed that females (21.7% (were more likely than males (16.0%) to report they have heard about or saw another child in the institution purposely hurt themselves because they were unhappy or sad.

Challenges completing the survey

One of the final questions asked of children was whether it was difficult for them to be completely honest about what happens in the institution. Table 3.18 reveals that as many as 22.5% of children in institutions of education for children with deviant behavior reported they had a difficult time being completely honest about what happens in the institution. This is likely a reflection of the finding in Table 3.3 that children/youth in institutions of education for children with deviant behavior were twice as likely to be fearful of staff and other children in the institution. In addition 11.2% of children/youth in orphanages, and 12.5% in shelters reported they had a difficult time being completely honest about what happens in the institution.

These findings can be interpreted to mean that nearly 11% to 12% of children/youth in orphanages and shelters to 22% of children/youthin institutions of education for children with deviant behavior may have underreported their experiences with violence and neglect in the institution, running away from the institution, and witnessing or engaging in self-harm.

Table 3.18. Challenges completing the survey by type of institution

by type of illistitution							
	Orphanages	Orphanages N=812 Shelter N=56		Institutions of educa- tion for children with deviant behavior N=129			
	N	%	N	%	N	%	
It was difficult to be completely honest about what happens in the institution	91	11.2	7	12.5	29	22.5	

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CHAPTER 4:

VIOLENCE AGAINST CHILDREN IN INFANT HOMES

This section of the report begins with a description of staff surveyed in infant homes. Then it reveals staff attitudes toward their work environment, experiences with violence against children in the infant homes, and attitudes toward the use of corporal punishment on children in infant homes. It also reveals staff experiences with children running away from the institution, and committing acts of self-harm in the institution. Finally, it reveals practices of registering, recording, and reporting incidents of violence against children in the institution, as well as official regulations that regulate staff conduct and discipline of staff.

Infant home staff sample demographics

Surveys were distributed to 284 staff working in six different infant homes in three regions of Kazakhstan. Two infant homes were sampled in each Oblast/region. Table 4.1 reveals the demographic characteristics of the sample of 284 staff from the six different state-run infant homes that were surveyed in the three regions of Kazakhstan.

Among the 284 staff surveyed, 94.0% were female and 6.0% male. They ranged in age from 20 to 64 years, and the average age was 43.6 years. In terms of level of education, 0.7% of staff had only a primary education, 20.4% had a secondary education, 44.7% a vocational education, 3.2% an incomplete education, and 31.0% had a higher education.

Staff that were sampled had worked in infant homes for an average of 10.4 years (ranging from 1 to 39

Table 4.1. Infant home staff demographics N = 284Ν % Gender **Female** 267 94.0 17 Male 6.0 Age 17-19 years 0 0.0 25 8.8 20-29 years 25.0 30-39 years 71 99 34.9 40-49 years 78 27.5 50-59 years 60-69 years 11 3.9 Highest level of education 2 0.7 Primary education Secondary education 58 20.4 Vocational education 127 44.7 9 Incomplete higher education 3.2 88 31.0 Higher education Number of years working in the institution 40.8 1-9 years 116 10-19 years 123 43.3 20-29 years 29 10.2 30-39 years 2 0.7 40-49 years 0 0.0

years). Table 4.1 reveals that 40.8% of staff worked in the infant home for at least 1 to 9 years, 43.3% worked in the infant home for 10 to 19 years, and 10.2% worked in the infant home for 30 to 39 years.

Assessment of the work environment

The first part of the survey was designed to learn about staff's perceptions of their work environment, particularly what they enjoy about being a staff member in the infant home, and difficulties they encounter as staff in the infant home. Table 4.2 reveals that the majority of staff reported they love children (76.4%) and enjoy interacting with children (58.8%), supporting/witnessing children's success (58.1%), and imparting good behavior and knowledge to children (51.4%). Fewer staff reported enjoying the opportunities for self-development (29.2%) and to improve their qualifications (26.4%).

Table 4.2. Enjoy about working in infant homes					
	Infant homes N=284				
	N	%			
What do you enjoy most about be member in the children's institution		ff			
Interacting with children	167	58.8			
Supporting/witnessing children's success	165	58.1			
Imparting good behavior and knowledge to children	146	51.4			
Opportunities for self-development	83	29.2			
Opportunities to improve your qualifications	75	26.4			
I love children	217	76.4			

Table 4.3 reveals that staff were reluctant to identify the difficulties they fact working in infant homes. Nevertheless, the most common problems staff identified were low pay (45.4%) and problems with children's personalities (32.0%). Other difficulties they identified include responsibility for too many children (12.7%), too much work (12.0%), and problems with children's parents (5.6%). There are other responses; however, they are few in number.

Table 4.3. Difficulties working in infant homes					
	Infant homes, N=284				
	N	%			
What are the main difficulties yo staff member at the children's ins		nter as a			
Too much work	34	12.0			
Children are not well behaved or disciplined	6	2.1			
Problems with children's personalities	91	32.0			
Problems with children's parents	16	5.6			
Responsibility for too many children	36	12.7			
Incidents of quarrels and fighting between children	6	2.1			
Children do not respect staff	3	1.1			
Children are aggressive toward staff	2	0.7			
Overcrowded living conditions in the institution	7	2.5			
Unsanitary conditions in the institution	0	0.0			
Some staff are too harsh with children	8	2.8			
Lack of staff	2	0.7			
Lack of resources and poor working conditions	9	3.2			
Low pay	129	45.4			
Director has no respect/does not support staff	1	0.4			

Staff report witnessing violence among children in infant homes

Staff were asked to report whether they have witnessed acts of violence among children in the infant homes. Table 4.4 reveals that 40.8% of staff reported witnessing violence among children in infant homes (i.e., bullying, harsh verbal abuse, psychological abuse, and physical violence). It is important to understand that children five years and under are in the early stages of social and emotional development. They are also at the stage of discovering their autonomy, and in the process they can often become territorial. This is because their natural, inborn aggressive impulses have not yet been socialized; so, when they are angry they can strike out verbally or physically against other children. They may even resort to breaking another child's things. At this age, if children do not experience clear boundaries and limit setting by parents or caregivers, their natural toddler tendencies to strike out will develop into bullying and other forms of aggression and violence. Thus, it is concerning that 40.8% of staff reported witnessing violence among children in the infant homes.

More specifically, Table 4.4 reveals that 10.9% of staff witnessed bullying in infant homes (i.e., one child bullying another child). International literature recognizes that children five years and under can be "bullies" or "be bullied." In fact, aggressive behaviors or bullying toward other kids may even peak around two years of age. It is in these early stages of social and emotional development that some children find out that bullying works, and they will likely continue to use it as along as it get the child what they want (e.g., control over another person) and is not . In addition, a child that is being denied something may choose bullying as a way to obtain what they want (1, 2, 3).

We also asked staff about harsh verbal abuse among children in infant homes, and 7.7% of staff reported witnessing harsh verbal abuse (i.e., a child calling another child names or saying mean things to hurt a child's feelings or scare them). As children begin to learn to speak and use language they typically mimic words and phrases they hear adults around them using. In these early stages of development, children five years and less do not have the ability or judgment to take a step back and think about whether a word is appropriate for a given situation.

The survey also measured the occurrence of psychological abuse among children in infant homes. Table 4.4 reveals that 22.5% of staff reported witnessing psychological abuse among children in infant homes (i.e., saw a child breaking or ruining another child's things on purpose, e.g., clothes, toys, personal things; saw a child threatening to harm or physically hurt another child).

Appendix Table 5 provides specific data on the two forms of psychological abuse measured in the survey. The most common form of psychological abuse staff reported witnessing was a child breaking or ruining another child's things on purpose, such as clothes, toys, personal things (21.8%). In addition, 6.7% of staff reported witnessing a child threatening to physically harm or hurt another child.

Table 4.4. Witness violence among children in infant homes

infunctionics					
	Infant homes N=284				
	N	%			
Witness violence among children (all forms)	116	40.8			
Witness bullying	31	10.9			
Witness harsh verbal abuse	22	7.7			
Witness psychological abuse	64	22.5			
Witness physical violence	94	33.1			

Note: Each category in this table and totals were computed from the aggregated categories and results in Appendix Table 3.

Finally, Table 4.4 reveals a significant proportion of staff also witnessed physical violence among children in the infant homes. In particular, 33.1% of staff witnessed physical violence among children in the institution (i.e., saw a child grab, push or knock another child down; saw a child hit, kick or physically hurt another child; saw a child hit or attack a not her child with an object or weapon). Thus, as many as 1 out of 3 staff witnessed physical violence among children in the infant homes.

Appendix Table 5 also provides specific data on the three forms of physical violence measured in the survey. Specifically, Appendix Table 5 reveals that 33.0% of staff witnessed a child grabbing, pushing, or knocking another child down. In addition, 13.4% of staff witnessed a child hitting, kicking, or physically hurting another child. Finally, 7.0% of staff witness a child hit or attack another child with an object or weapon.

Physical violence among children five years and under needs to be taken seriously because if left unchecked it can will continue into childhood and adolescence. In addition, toddlers' physical aggression and violent behaviors often causes physical harm and injury to other toddlers, and injuries often have an adverse effect on the short- and long-term physical health and well-being of a child. Physical aggression among children less than five years of age can even result in disability or a child's death.

To better understand the effects of physical violence against children, staff were asked if they witnessed

a child physically injured by another child in the institution. Table 4.5 reveals that 5.6% of staff reported witnessing a child physically injured by another child in the institution. Staff that reported witnessing a child physically injured by another child in the institution were asked if the staff provided the injured child with medical treatment. Table 4.4 reveals that 93.8% of staff reported that staff provided the injured child with medical treatment for their injuries.

Table 4.5. Witness children physically injured by other children in infant homes

	Infant homes N=284		
	N %		
Witness a child physically injured by another child in the institution	16 5.6		
	N=16		
Staff provided the injured child with medical treatment for their injuries	15	93.8	

Staff intervention to incidents of violence among children

We asked staff how often staff intervene when a child is being physically hurt by another child. Table 4.6 reveals that only 62.0% of staff reported that staff "always" intervene when a child is being physically hurt by another child. Surprisingly, 22.9% of staff reported that staff "never" intervene when a child is being physically hurt by another child, and 5.3% reported they "sometimes" intervene. It is concerning that 1 out 4 staff report that staff "never" intervene (or "sometimes" intervene) when a child is being physically hurt by another child. This lack of response from staff communicates to the aggressive child that their aggressive and violent behaviors are acceptable, and communicates to the child that is being victimized that they are not worthy of protection by adults. The best practice would be that staff immediately intervene and help the aggressive child learn to how to control his/her anger, express anger and frustration in appropriate ways, be responsible for his/her actions, and accept the consequences.

Table 4.6. Staff intervention to physical violence among children in infant homes

How often staff intervene when a child is being physically hurt by .	Infant homes N=284		
another child:	N	%	
Always	176	62.0	
Sometimes	15	5.3	
Never	65	22.9	

Staff use of violence against children in infant homes

Staff were also asked to identify the various methods staff use to discipline children, including methods of positive discipline, harsh verbal abuse, psychological abuse, and moderate and severe physical violence. Table 4.7 reveals staff's use of each of the different methods of discipline, including positive discipline, harsh verbal abuse, psychological abuse, and moderate and severe physical violence.

Table 4.7. Witness staff use of violence against children in infant homes

Ciliaren in infant nomes						
	Infant homes N=284					
	N	%				
Witness positive discipline by staff	238	83.8				
Witness violence by staff (all forms)	62	21.8				
Witness harsh verbal abuse	28	9.9				
Witness psychological abuse	28	9.9				
Witness physical violence	52	18.3				
Moderate physical violence	17	6.0				
Severe physical violence	50	17.6				

To begin, Table 4.7 reveals that 83.8% of staff reported witnessing staff using positive discipline on children in infant homes (i.e., tell children what not to do, approach the counselor or psychologist to solve/discuss the problems with the child). At the same time, however, 21.8% of staff reported witnessing staff using violence to discipline children in infant homes. More specifically, 9.9% of staff witnessed staff using harsh verbal abuse (i.e., swear at or curse children or call them names, such as idiot, stupid, bastard; say mean things to children to hurt their feelings or scare them) to discipline children in infant homes. In addition, 9.9% of staff witnessed staff using psychological abuse (i.e., act in a way that made a child afraid that they might be physically hurt/ injured; give children physical tasks/labor around the institution, such as clean the toilets, garbage, or institution; lock children in a room or small place for a long time; prevent children from using the toilets) to discipline children in infant homes. (See Appendix Table 6 for specific data on the six types of psychological abuse measured in the survey).

Finally, Table 4.7 reveals that 18.3% of staff reported witnessing staff using physical violence to discipline children in infant homes. In particular, 17.6% of staff witnessed staff using severe physical violence (i.e., slap children on the buttocks, back, leg, or arm; shake

children; slap children in the face or on the head; hit children so hard that they had marks or were injured; hit children with a hard object or weapon, such as stick, belt, whip, ruler, other thing that hurts; grab, push or knock children down) to discipline children, and 6.0% witnessed staff using moderate physical violence (i.e., pinch children, twist children's ears and arms) to discipline children in the infant homes.

Appendix Table 6 also provides specific data on the different forms of moderate and severe physical violence measured in the survey. Specifically, Appendix Table 6 reveals that staff most often reported witnessing staff use severe forms of physical violence, including slapping children on the buttocks, back, leg or arms (13.4%), and shaking children (10.2%).

Internationally, shaken baby syndrome is the medical term used to describe the injuries resulting from shaking an infant or young child. Shaken baby syndrome occurs when a child is shaken violently as part of an adult/caregiver's pattern of abuse or because an adult/caregiver momentarily succumbs to the frustration of having to respond to a crying baby or young child. Violent shaking is especially dangerous to infants and young children because their neck muscles are not fully developed and their brain tissue is exceptionally fragile. Their small size further adds to their risk of injury (4). According to the World Health Organization, about one-third of severely shaken infants die and the majority of children that survive shaking suffer long-term health problems, such as mental retardation, cerebral palsy, or blindness (5).

It is extremely concerning that 18.3% of staff witnessed the staff using physical violence against children, whether moderate or severe. To better understand the effects of physical violence on children, staff were asked if they witnessed a child physically injured by staff in the infant home. Table 4.8 reveals that only 1.8% of staff reported seeing a child physically injured by staff in infant homes, and all of those staff reported that staff provided the injured child with medical treatment for their injuries.

Table 4.8. Witness children physically injured by staff in infant homes

	Infant homes N=284	
	N %	
Seen a child/youth physically injured by staff in the institution	5 1.8	
	N=5	
Staff provided the injured child with medical treatment for their injuries	5	100.0

Table 4.9. Staff support for corporal punishment		'
	Infant N=2	homes 284
	N	%
Support for corporal punishment	163	25.8
Corporal punishment is necessary to maintain discipline in the institution	6	2.1
Corporal punishment is an effective way to prevent children from misbehaving	9	3.2
Corporal punishment teaches children to respect the staff	5	1.8
Corporal punishment enhances the staff-child relationship	4	1.4
Corporal punishment teaches children to fear the staff	27	9.5
Sometimes it is necessary to shout at children or call them names to get their attention	14	4.9
A good staff person is able to effectively use corporal punishment to discipline children	6	2.1
Children's fear of corporal punishment helps to create an environment of learning	10	3.5
Children prefer authoritarian staff (where very strict measures of discipline are used)	13	4.6
The director prefers authoritarian staff who can effectively use strict measures of discipline	8	2.8
When staff use corporal punishment to discipline or punish children it doesn't really hurt them	13	4.6
When staff shout at or call children names it doesn't really hurt them	11	3.9
Children do not have the right to say "no" to staff who want to use corporal punishment to discipline them (Reversed)	160	25.3
Discipline problems should not be solved together with children in order to teach them to take responsibility for the problem (Reversed)	67	10.6

Note: Support for corporal punishments totals were computed from the aggregated categories and results in this table.

Staff support for corporal punishment

Staff were also asked if they have knowledge of children running away from the infant home. Surprisingly, Table 4.10 reveals that 2.5% of staff reported they have heard about or saw children run away from the infant home. It is unclear how and why children in infant homes (less than five years of age) were left unsupervised long enough that they could run away from the infant home. This reveals an apparent lapse of supervision and care in infant homes included in this study (each infant home included in the study had staff that reported hearing about or seeing children run away from the institution).

Table 4.10. Children runaway from infant homes

· · · · · · · · · · · · · · · · · · ·				
	Infant homes N=284			
	N	%		
Heard about or saw children run away from the institution	7	2.5		

Staff report child suicides in infant homes

Table 4.11. Children commit acts of suicide in

illiant nomes		
	Infant N=2	homes 284
	N	%
Heard about or seen a child attempt suicide or actually commit suicide in the institution	3	1.1
Attempted suicides or actual suicides that occur in the institution are registered or recorded	14	4.9*

* 55.6% of staff reported they do not know if suicides are registered or recorded

Staff were also asked if children in infant homes had attempted or committed suicide. Table 4.11 reveals that 1.1% of staff surveyed reported they had heard about or seen a child attempt or commit suicide in the infant home. Further analysis revealed that staff in only two

of the six infant homes included in this study reported hearing about or seeing a child attempt or actually commit suicide in the institution.

Table 4.11 further reveals that very few staff reported that attempted or actual suicides that occur in the infant homes are actually registered or recorded. The majority of staff (55.6%) actually reported they do not know if suicides are registered or recorded.

Registering, recording, and reporting cases of violence against children in infant homes

The survey was also designed to learn more about the practices of registering, recording, and reporting cases of violence against children in the institution. For one, we asked staff, "If a child experiences violence in the institution from other children, who should the incident be reported to?" Table 4.12 shows that only 62.3% of staff said the incident of violence among children should be reported to the director of the institution, 62.3% said it should be reported to the child's nanny, 47.9% said it should be reported to a health care worker (e.g., nurse, doctor, hospital), and 42.3% said it should be reported to the psychologist in the infant home. Few staff said the incident should be reported to a social worker (13.4%), social pedagologist (16.2%), teacher (16.9%), or a child's parent/guardian (15.8%). Moreover, very few staff said the incident should be reported to a local governmental agency or the police, or to the Ombudsman's Office. Surprisingly, 2.1% of staff said the incident should not be reported to anybody.

Staff were also asked, "If a child is hit or beat by a staff member, who should the incident be reported to?" Table 4.12 reveals that only 84.9% of staff said the incident of violence by staff should be reported to the director. In addition, 34.5% of staff said the incident should reported to a health care worker (most likely to treat the child's injuries), 24.3% said it should be reported to the child's nanny, and 20.1% said it should be reported to the psychologist. Few staff said the incident should be reported to a social worker, local government agency, the police, or the Ombudsman's Office. Surprisingly again, 2.1% of staff said the incident should not be reported to anybody.

The data in Table 4.12 reveals that there are no consistent procedures in infant homes for reporting incidents of violence against children (whether among children or by staff), and it is likely that a significant proportion of violent incidents go unreported and undocumented. Moreover, if there are guidelines and procedures for reporting incidents of violence against children, staff that work in infant homes are unaware of them. This is an issue that needs to be addressed.

To further explore practices of registering and recording incidents of violence against children in

Table 4.12. Reporting incidents of violence against children in infant homes Violence Violence among by staff children N = 284Who should incidents of N = 284violence against children be reported to: % Ν % No one 6 2.1 6 2.1 Director of the 177 62.3 241 84.9 institution Health care worker (nurse, 136 47.9 98 34.5 doctor, hospital) Social worker 38 13.4 45 15.8 42.3 **Psychologist** 120 57 20.1 46 16.2 36 12.7 Social pedagologist Teacher 48 16.9 22 7.7 62.3 24.3 177 69 Nanny Parent/guardian 45 15.8 20 7.0 17 6.0 12.3 Local government agency 35 **Police** 12 4.2 32 11.3 Ombudsman's Office 4 1.4 3 1.1 Community leaders 4 1.4 4 1.4

infant homes, we asked staff, "Are acts of violence against children that occur in the institution registered or recorded?" Table 4.13 reveals that only 8.1% of staff reported that acts of violence against children in infant homes are registered or recorded. Moreover, 70.8% of staff reported they did not know if such incidents are registered or recorded. These findings provide further evidence that most acts of violence against children (among children or by staff) in infant homes are not documented. Moreover, it reveals that there are most likely no procedures for registering and recording incidents of violence against children in infant homes; at least none that staff are aware of.

3

NGO

3

1.1

1.1

Table 4.13. Registering and recording incidents of violence against children in infant homes

	Infant N=2	
	N	%
Are acts of violence against children that occur in the institution registered or recorded?	23	8.1*

^{* 70.8%} of staff reported they do not know if they are registered or recorded.

Regulations on staff conduct and discipline

Staff were also asked if there are any official written regulations that guide staff conduct or the discipline of staff that use violence against children in infant homes. Table 4.14 reveals that only 27.5% of staff reported there is an official written document that regulates staff conduct in the institution. Surprisingly, nearly 62% of staff reported they do not know if there is an official written document that regulates staff conduct in the institution.

Table 4.14. Official regulation of staff conduct and disciplining staff for violence against children

	Infant homes N=284	
	N	%
There is an official written document that regulates staff conduct in the institution	78	27.5*
There are regulations for disciplining staff that use violence against children in the institution	144	50.7**

^{*61.6%} of staff reported they do not know if there is an official document that regulates staff conduct

Table 4.14 also reveals that only 50.7% of staff reported there are regulations for disciplining staff that use violence against children in the institution. Again, nearly 42% of staff reported they do not know if there are regulations for disciplining staff that use violence against children in the institution. These data provide further evidence that there is a lack of guidelines and regulations that regulate staff conduct and responses to violence against children; at least none that staff are aware of.

Staff training on violence against children

One of the final questions in the survey was, "Have you received training on how to identify or respond to violence against children?" Surprisingly, only 29.6% of staff reported they received training on how to identify or respond to violence against children (whether among children or by staff). Since children in residential institutions, including infant homes, are at increased risk of violence, it is crucial that all staff working in infant homes be properly trained to understand, identify, and respond to violence against children. This includes knowing who to register, record, and report such incidents, and how to support children that are victims of violence.

Table 4.15. Staff training on violence against children

Infant homes
N=284

N %

Have received training on how to identify or respond to violence against children

84 29.6

References

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^{** 41.9%} of staff reported they do not know if there are regulations for disciplining staff that use violence against children.

CHAPTER 5:

VIOLENCE AGAINST CHILDREN IN INSTITUTIONS FOR CHILDREN WITH DISABILITIES

This section of the report begins with a description of staff surveyed in institutions for children with disabilities, particularly institutions for children with psycho-neurological and severe disabilities, and special correctional institutions of education. Then it reveals staff attitudes toward their work environment, experiences with violence against children in the infant homes, and attitudes toward the use of corporal punishment on children in infant homes. It also reveals staff experiences with children running away from the institution, and committing acts of self-harm in the institution. Finally, it reveals practices of registering, recording, and reporting incidents of violence against children in the institution, as well as official regulations that regulate staff conduct and discipline of staff. Comparisons are also made between each of the two types of institutions when they are significant.

Staff sample demographics

Surveys were distributed to a total of 349 staff working in six different institutions for children with disabilities in three regions of Kazakhstan. Table 5.1 reveals the demographic characteristics of the sample of 349 staff from the six different state-run institutions for children with disabilities that were surveyed in the three regions of Kazakhstan.

Among the 349 staff surveyed, 206 worked in three different institutions for children with psychoneurological and severe disabilities, and 143 worked in three different special correctional institutions

Table 5.1. Staff demographics in infant homes

Table 5.1. Staff demographics	ın ınfant	homes			
	N=349				
	N	%			
Institution Type					
Institutions for children with psycho-neurological and severe disabilities	206	59.0			
Special correctional institutions of education	143	41.0			
Gender					
Female	323	92.6			
Male	26	7.4			
Age					
17-19 years	2	.6			
20-29 years	53	15.2			
30-39 years	94	26.9			
40-49 years	110	31.5			
50-59 years	84	24.1			
60-69 years	6	1.7			
Highest level of education					
Primary education	1	0.3			
Secondary education	73	20.9			
Vocational education	87	24.9			
Incomplete higher education	20	5.7			
Higher education	168	48.1			
Number of years working in the institution					
1-9 years	208	59.6			
10-19 years	81	23.2			
20-29 years	30	8.6			
30-39 years	8	2.3			
40-49 years	2	.6			

of education (one of each types of institution was sampled in each Oblast/region). Special correctional institutions of education are most often for children with minor disabilities/handicaps, developmental delays, chronic diseases, and drug use/abuse tendencies, as well as for children whose parents lost their parental rights.

Table 5.1 also reveals that 92.6% of staff were female and 7.4% male. They ranged in age from 17 to 67 years, and the average age was 41.6 years. In terms of level of education, 0.3% of staff had only a primary education, 20.9% had a secondary education, 23.9% a vocational education, 5.7% an incomplete education, and 48.1% had a higher education.

Finally, Table 5.1 reveals that staff that were surveyed worked in the institution for an average of 8.47 years (ranging from 1 to 48 years). Table 5.1 reveals that the majority of staff (59.6%) worked in the institution for at least 1 to 9 years. In addition, 23.2% worked in the institution for 10 to 19 years, 8.6% for 20 to 29 years, and 2.3% for 30 to 39 years.

Further analysis revealed that staff that work in special correctional institutions of education (64.9%) were more likely to have a higher education than staff working in institutions for children with psycho-neurological and severe disabilities (36.9%). Whereas, staff in institutions for children with psychoneurological and severe disabilities were more likely to have only a secondary educaiton (28.2%) or vocational training (28.6%), compared to staff in special correctional institutions of children (10.5% and 19.6% respectively).

Table 5.2. Highest institution type	t level	of ed	ducatio	on by
Institutions for children with psycho- neurological and severe disabilities N=143 N=206				
	N	%	N	%
Highest level of educa	tion			
Primary education	1	0.5	0	0.0
Secondary education	58	28.2	15	10.5
Vocational education	59	28.6	28	19.6
Incomplete higher education	12	5.8	8	5.6
Higher education	76	36.9	92	64.3

Assessment of the work environment

The first part of the survey was designed to learn about staff's perceptions of their work environment. particularly what they enjoy about being a staff member in the institution, and difficulties they encounter as staff in the institution. Table 5.3 reveals that the majority of staff in both types of institutions reported they love children (69% to 72%), enjoy supporting/witnessing children's success (65%), and enjoy interacting with children (59%). Staff in special correctional institutions of education (67.1%) were actually more likely enjoy imparting good behavior and knowledge to children, than staff in institutions for children with psycho-neurological and severe disabilities (45.1%). In both types of institutions, few staff reported enjoying the opportunities for selfdevelopment (31% to 37%) and to improve their qualifications (22% to 29%).

Table 5.3. Enjoy about working in institutions by type of institution				
	Institutions for children with psycho- neurological and severe disabilities N=206		inst tion educ	onal
	N	%	N	%
Enjoy most about being a staff member in the institution:				
Interacting with children	121	58.7	85	59.4
Supporting/witness- ing children's success	133	64.6	93	65.0
Imparting good be- havior and knowledge to children	93	45.1	96	67.1
Opportunities for self-development	55	31.6	54	37.8
Opportunities to improve your qualifications	46	22.3	42	29.4
I love children	144	69.9	103	72.0

Staff were also asked to identify difficulties they face working in the institution; however, Table 5.4 reveals staff were generally reluctant to answer this question. Nevertheless, in both types of institutions, the most common problems staff identified were low pay (41% to 45%) and problems with children's personalities (45% to 53%). Other difficulties staff from both types of institutions commonly identified was too much work

(14% to 21%), incidents of quarrels and fighting between children (12% to 14%), and children's aggression toward staff (7% to 10%). It is important to point out that staff working in special correctional institutions of education (21.7%) were significantly more likely to identify too much work as a problem,

Table 5.4. Difficulties encountered working in institutions by type of institution					
	Institutions for children with psycho- neurological and severe disabilities N=206		inst tion educ	al cor- onal itu- s of ation 143	
	N	%	N	%	
Main difficulties encou the children's institutio		as a staf	f mem	ber at	
Too much work	29	14.1	13	21.7	
Children are not well behaved or disciplined	20	9.7	11	7.7	
Problems with children's personalities	94	45.6	77	53.8	
Problems with children's parents	12	5.8	11	7.7	
Responsibility for too many children	34	16.5	7	4.9	
Incidents of quarrels and fighting between children	30	14.6	17	11.9	
Children do not re- spect staff	13	6.3	8	5.6	
Children are aggres- sive toward staff	21	10.2	11	7.7	
Overcrowded living conditions in the institution	15	7.3	6	4.2	
Unsanitary conditions in the institution	9	4.4	3	2.1	
Some staff are too harsh with children	28	13.6	8	5.6	
Lack of staff	20	9.7	3	2.1	
Lack of resources and poor working conditions	18	8.7	11	7.7	
Low pay	93	45.1	59	41.3	
Director has no respect/ does not support staff	11	5.3	12	8.4	

compared to staff in institutions for children with psycho-neurological and severe disabilities (14.1%). Whereas, staff in institutions for children with psychoneurological and severe disabilities were significantly more likely to identify having responsibility for too many children (14.0%) and that some staff are too harsh with children (11.3%) as problems, compared to staff working in special correctional institutions of education (5.4% and 7.6% respectively).

Staff working in institutions for children with psychoneurological and severe disabilities (8.2%) were also more likely to identify lack of staff as a problem, compared to staff working in special correctional institutions of education (2.2%). Table 5.4 revealed that some staff identified a range of other difficulties they encounter as staff in the children's home, but to a lesser extent.

Staff report witnessing violence among children in institutions

Staff were asked to report whether they have witnessed acts of violence among children in the institution. Table 5.5 reveals that 80.4% of staff in special correctional institutions of education, and 69.4% in institutions for children with psychoneurological and severe disabilities reported witness violence among children in the institution (i.e., bullying, harsh verbal abuse, psychological abuse, and physical violence). This is troubling that so many staff in both types of institutions witnessed violence among children in the institution.

Table 5.5. Witness violence among children in institutions by type of institution

	Institutions for children with psycho- neurological and severe disabilities N=206		inst	onal itu- s of ation
	N	%	N	%
Witness violence among children (all forms)	143	69.4	115	80.4
Witness bullying	71	34.5	52	36.4
Witness harsh verbal abuse	86	41.7	92	64.3
Witness psychological abuse	111	53.9	84	58.7
Witness physical violence	119	57.8	94	65.7

Note: Each category in this table and totals were computed from the aggregated categories and results in Appendix Table 7.

More specifically, Table 5.5 reveals that 36.4% of staff in special correctional institutions of education, and 34.5% of staff in institutions for children with psycho-neurological and severe disabilities witnessed bullying among children (i.e., one child bullying another child). These data are concerning because as many as 1 out 3 staff in both types of institutions witnessed bullying among children.

We also asked staff about harsh verbal abuse among children in institutions. Table 5.5 reveals that 64.3% of staff in special correctional institutions of education, and 41.7% of staff in institutions for children with psycho-neurological and severe disabilities reported witnessing harsh verbal abuse among children (i.e., a child calling another child names or saying mean things to hurt a child's feelings or scare them). It is troubling that 2 out of 3 staff in special correctional institutions of education, and more than 1 out of 3 staff in institutions for children with psychoneurological and severe disabilities witnessed harsh verbal abuse among children in the institutions.

The survey also measured the occurrence of psychological abuse among children in institutions, and 58.7% of staff in special corrections institutions of education, and 53.9% staff in institutions for children with psycho-neurological and severe disabilities reported witnessing children psychological abuse among children in the institution (i.e., saw a child breaking or ruining another child's things on purpose, e.g., clothes, toys, personal things; saw a child threatening to harm of physically hurt another child). It is troubling that 1 out 2 staff in both types of institutions witnessed psychological abuse among children. Appendix Table 7 provides specific data on the two forms of psychological abuse measured in the survey, and both forms of psychological abuse were commonly reported by staff.

Finally, Table 5.5 reveals a significant proportion of staff also witnessed physical violence among children in the institution. In particular, 65.8% of staff in special correctional institutions of education, and 57.8% of staff in institutions for children with psycho-neurological and severe disabilities witnessed physical violence among children in the institution (i.e., saw a child grab, push or knock another child down; saw a child hit, kick or physically hurt another child; saw a child hit or attack another child with an object or weapon). It is concerning that 1 out of 2 to 2 out of 3 staff witnessed physical violence among children in the institutions.

Appendix Table 7 also provides specific data on the three forms of physical violence measured in the survey. Specifically, Appendix Table 7 reveals that 60.1% in of staff in special correctional institutions of education, and 53.9% of staff in institutions for children with psycho-neurological and severe disabilities witnessed a child grabbing, pushing or knocking another child down. In addition, 30%

to 38% of staff reported witnessed a child hitting, kicking or physically hurting another child. And, as many as 11% to 14% of staff witness a child hitting or attacking another child with an object or weapon, such as a stick, belt, knife, or other things that hurts.

To better understand the effects of physical violence against children, staff were asked if they witnessed a child physically injured by another child in the institution. Table 5.6 reveals that 24.5% of staff in special correctional institutions of education, and 18.4% of staff in institutions for children with psychoneurological and severe disabilities witnessed a child physically injured by another child in the institution. It is troubling that so many staff in both types of institutions witnessed children physically injuring each other. Staff that witnessed a child physically injured by another child in the institution were asked if the staff provided the injured child with medical treatment. Table 5.6 reveals that 88% to 91% of staff in the institutions reported that staff provided the injured child with medical treatment for their injuries.

Table 5.6. Witness children physically	injured
by other children by type of institution	

by other children by type of institution						
	Institutions for children with psycho- neurological and severe disabilities N=206		inst tion educ	onal itu- s of		
	N	%	N	%		
Witness a child physically injured by another child in the institution	38	18.4	35	24.5		
	N=38		N=	:35		
Staff provided the injured child with medical treatment for their injuries	33	91.7	30	88.2		

Staff intervention to incidents of violence among children

We asked staff how often staff intervene when a child is being physically hurt by another child. Table 5.7 reveals that only 75% to 79% of staff reported staff "always" intervene when a child is being physically hurt by another child. Surprisingly, 15.8% of staff in special correctional institutions of education, and 9.6% of staff in institutions for children with psychoneurological and severe disabilities reported that staff "never" intervene when a child is being physically hurt by another child, and 8% to 10% reported they

"sometimes" intervene. In other 20% to 24% of staff reported staff do not regularly intervene when children are hurting each other.

Table 5.7. Staff intervention to physical violence among children by type of institution					
Institutions for children with psycho-neurological and severe disabilities N=206 N=143					
	N	%	N	%	
	How often staff intervene when a child is being physically hurt by another child:				
Always	158	79.8	101	75.9	
Sometimes	21	10.6	11	8.3	
Never	19	9.6	21	15.8	

Staff use of violence against children in institutions

Staff were also asked to identify the various methods staff use to discipline children, including methods of positive discipline, harsh verbal abuse, psychological abuse, and moderate and severe physical violence. Table 5.8 reveals staff's use of each of the different methods of discipline, including positive discipline, harsh verbal abuse, psychological abuse, and moderate and severe physical violence.

To begin, Table 5.8 reveals that 91% to 93% of staff in both types of institutions reported witnessing staff using positive discipline on children in the infant homes (i.e., tell children what not to do, approach the counselor or psychologist to solve/discuss the problems with the child). At the same time, however, 51% to 56% of staff in the two types of institutions reported witnessing staff using violence against children in the institutions. More specifically, 29.1% of staff in institutions for children with psycho-neurological and severe disabilities, and 25.2% of staff in special correctional institutions of education reported witnessing staff using harsh verbal abuse (i.e., swear at or curse children or call them names, such as idiot, stupid, bastard; say mean things to children to hurt their feelings or scare them) to discipline children in the institutions. In other words, as many as 1 out of 4 staff in both types of institutions reported witnessing staff use harsh verbal abuse on children in the institution. (See Appendix Table 8 for specific data on the two forms of harsh verbal abuse measured in the survey).

Table 5.8 also reveals that 45% to 46% of staff in the two types of institutions reported witnessing staff using psychological abuse (i.e., act in a way that made a child afraid that they might be physically hurt/injured; give children physical tasks/labor around the institution, such as clean the toilets, garbage, or institution; lock children in a room or small place for a long time; prevention children from using the toilet; and tie children up or chain them to something).

Table 5.8. Witness staff use of violence against children by type of institution

children by type of institution						
	Institutions for children with psycho- neurological and severe disabilities N=206		inst tion educ	onal		
	N %		N	%		
Witness positive disci- pline by discipline	189	91.7	133	93.0		
Witness violence by staff (all forms)	103	51.2	79	56.0		
Witness harsh verbal abuse	60	29.1	36	25.2		
Witness psychological abuse	93	45.1	67	46.9		
Witness physical violence	61	30.3	26	18.4		
Moderate physical violence	45	21.8	12	8.4		
Severe physical violence	46	22.9	21	14.9		

Note: Each category in this table and totals were computed from the aggregated categories and results in Appendix Table 7.

Appendix Table 8 reveals specific data on the six different forms of psychological abuse measured in the survey. Specifically, Appendix Table 8 reveals that 44.8% of staff in special correctional institutions of education, and 33.0% of staff in institutions for children with psycho-neurological and severe disabilities reported staff discipline children by giving them physical tasks/labor around the institution (e.g., cleaning the toilets, garbage, or institution). In institutions for children with psycho-neurological and severe disabilities, a significant proportion of staff also reported witnessing staff act in a way that makes a child afraid that they might be physically hurt/injured (12.6%) and lock children in a room or small place for a long time (10.2%). It is also concerning that 4.9% of staff in institutions for children with psychoneurological and severe disabilities witnessed staff tie children up or chain them to something.

Finally, Table 5.8 reveals that 30.3% of staff in institutions for children with psycho-neurological and severe disabilities, and 18.4% of staff in special correctional

institutions of education reported witnessing staff use physical violence to discipline children in the institutions. It is particularly troubling that staff in institutions for children with psycho-neurological and severe disabilities were two times more likely to witness staff use physical violence against children, than staff in special correctional institutions of education. Moreover, staff in institutions for children with psycho-neurological and severe disabilities were significantly more likely to use both moderate physical violence (21.8%) and severe physical violence (22.9%), compared to staff in special correctional institutions of education (8.4% and 14.9% respectively).

Appendix Table 8 reveals specific data on the different forms of moderate and severe physical violence measured in the survey. Specifically, Appendix Table 8 reveals that staff in institutions for children with psychoneurological and severe disabilities commonly reported witnessing staff shake children (18.4%), slap children (18.0%), pinch children (14.1%), twist children's ears (12.1%), and slap children in the face or on the head (9.2%). Whereas, staff in special correctional institutions of education commonly reported witnessing staff shake children (11.2%) and slap children on the buttocks, back, leg or arm (10.5%). Other forms of physical violence were also used, but to a lesser extent.

Table 5.9. Witness children physically injured by staff by type of institution

by staff by type of institution							
	Institutions for children with psycho- neurological and severe disabilities N=206		rectio stituti educ	al cor- nal in- ons of ation 143			
	N	%	N	%			
Witness a child physically injured by staff in the institution	15	7.3	7	4.9			
	N=15		N=	=7			
Staff provided the injured child with medical treatment for their injuries	14	93.3	7	100.0			

To better understand the effects of physical violence on children, staff were asked if they witnessed a child physically injured by staff in the institutions. Table 5.9 reveals that 7.3% of staff in institutions for children with psycho-neurological and severe disabilities, and 4.9% of staff in special correctional institutions of education witnessed a child physically injured by staff in the institution, and nearly all of those staff reported staff provided the injured child with medical treatment for their injuries.

Staff support for corporal punishment

Staff were also asked a series of questions that were designed to measure their support for corporal punishment. Table 5.10 reveals that as many as 53.8% of staff (1 out of 2 staff) in institutions for children with psycho-neurological and severe disabilities, and 38.0% of staff (1 out of 3 staff) in special correctional institutions of education held attitudes supportive of the use of corporal punishment in institutions. Among staff working in institutions for children with psycho-neurological and severe disabilities, some of the more common attitudes

staff held that are supportive of corporal punishment includes: children do not have the right to say "no" to staff who want to use corporal punishment to discipline them (32.0%); sometimes it is necessary to shout at children or call them names to get their attention (21.0%); children prefer authoritarian staff that use very strict measures of discipline (14.5%); when staff shout at or call children names it doesn't really hurt them (14.0%); corporal punishment teaches children to fear the staff (13.8%). Table 5.10 reveals that staff in institutions for children with psycho-neurological and severe disabilities held a wide range of other attitudes supportive of corporal punishment.

Table 5.10. Staff support for corporal punishment by type of institution					
	Institutions for children with psychoneurological and severe disabilities N=206		recti institut educ	al cor- ional tions of ation 143	
	N	%	N	%	
Support for corporal punishment	50	53.8	27	38.0	
Corporal punishment is necessary to maintain discipline in the institution	15	8.3	4	3.1	
Corporal punishment is an effective way to prevent children from misbehaving	22	12.1	5	3.8	
Corporal punishment teaches children to respect the staff	16	8.6	7	5.1	
Corporal punishment enhances the staff-child relationship	16	8.3	8	5.8	
Corporal punishment teaches children to fear the staff	27	13.8	6	4.5	
Sometimes it is necessary to shout at children or call them names to get their attention	38	21.0	14	10.9	
A good staff person is one who is able to effectively use corporal punishment to discipline children	17	8.9	7	5.1	
Children's fear of corporal punishment helps to create an environment of learning	10	5.5	3	2.3	
Children prefer authoritarian staff (where very strict measures of discipline are used)	24	14.5	18	15.3	
The director of the institution prefers authoritarian staff who can effectively use strict measures of discipline	13	8.2	12	10.6	
When staff use corporal punishment on children to discipline or punish them it doesn't really hurt them	18	10.7	6	5.3	
When staff shout at or call children names it doesn't really hurt them	24	14.0	8	6.6	
Children do not have the right to say "no" to staff who want to use corporal punishment to discipline them	57	32.0	19	14.7	
Discipline problems should be solved together with children in order to teach them to take responsibility for the problem (Reversed)	14	7.1	8	5.8	
Note: Support for corporal punishments totals were computed from the agg	regated cat	egories and	results in i	this table.	

Among staff working in special correctional institutions of education, some of the more common attitudes staff that are supportive of corporal punishment includes: children prefer authoritarian staff that use very strict measures of discipline (15.3%); children do not have the right to say "no" to staff who want to use corporal punishment to discipline them (14.7%); sometimes it is necessary to shout at children or call them names to get their attention (10.9%); and the director of the institution prefers authoritarian staff who can effectively use strict measures of discipline (10.6%).

Staff report child runaways form institutions

Staff were asked if they have knowledge of children running away from the institution. Surprisingly, Table 5.11 reveals that 64.3% of staff in special correctional institutions of education, and 50.5% of staff in institutions for children with psycho-neurological and severe disabilities reported they heard about or saw children run away from the institution. This reveals an apparent lapse of supervision and care in these two types of institutions; particularly, in light of what we learned in Chapter 3 about the relationships between running away and violence against children and neglect of children in institutions.

Table 5.11. Children run away from the institution by type of institution						
	Institutions for children with psycho-neurological and severe disabilities N=206 Specia rection stitution education in the section stitution is section stitution education.		nal in- ons of ation			
	N	%	N	%		
Hear about or saw children run away from the institution	104	50.5	92	64.3		

Staff report child suicides in institutions

Staff were also asked if children in the institution attempted or committed suicide. Table 5.12 reveals that staff in institutions for children with psychoneurological and severe disabilities (8.7%) were nearly twice as likely to hear about or see a child attempt suicide or actually commit suicide in the institution, compared to staff in special correctional institutions of education (4.9%). Further analyses revealed that staff in five of the six institutions reported hearing about or seeing a child attempt or actually commit suicide in the institutions.

Table 5.12 further reveals that few staff (26% to 28%) reported that attempted suicides and suicides that occur in the institutions are actually registered or recorded.

Table 5.12. Children commit acts of suicide by type of institution						
	Institutions for children with psycho-neuro- logical and se- vere disabilities N=206		Special rection instruction education N=2	onal itu- s of ation		
	N	%	N	%		
Heard about or seen a child attempt suicide or actually commit suicide in the institution	18	8.7	7	4.9		
Attempted suicides or actual suicides that occur in the institution are registered or recorded	31	28.7	21	26.6		

Registering, recording, and reporting cases of violence against children in institutions

The survey was also designed to learn more about the practice of registering, recording, and reporting cases of violence against children in the institutions. For one, we asked staff, "If child experiences violence in the institution from other children, who should the incident be reported to?" Table 5.13 reveals that only 49.5% of staff in institutions for children with psycho-neurological disorders and severe disabilities said the incidents of violence among children should be reported to the director of the institution, compared to 84.6% of staff from special correctional institutions of education. In institutions for children with psycho-neurological and severe disabilities

staff more commonly reported incidents of violence among children to health care workers (67.0%) and psychologists (60.7%). In comparison, staff in special correction institutions of education, also commonly reported incidents of violence among children to

the nannies (70.6%), psychologists (60.8%), health care workers (56.6%), teachers (55.2%), social workers (54.2%), and social pedagologists (53.1%). Few staff in both types of institutions said the incident should be reported to a local government

Table 5.13. Reporting incidents of violence aga			ons by type o	f institution
	with psycho- and severe	Institutions for children with psycho-neurological and severe disabilities N=206		ectional insti- education 143
	N	%	N	%
Who should incidents of violence among children l	be reported to:			
No one	2	1.0	6	4.2
Director of the institution	102	49.5	121	84.6
Health care worker (nurse, doctor, hospital)	138	67.0	81	56.6
Social worker	82	39.8	78	54.5
Psychologist	125	60.7	87	60.8
Social pedagologist	51	24.8	76	53.1
Teacher	56	27.2	79	55.2
Nanny	148	71.8	101	70.6
Parent/guardian	33	16.0	25	17.5
Local government agency	11	5.3	13	9.1
Police	13	6.3	22	15.4
Ombudsman's Office	4	1.9	4	2.8
Community leaders	4	1.9	6	4.2
NGO	2	1.0	3	2.1
Who should incidents of violence by staff be repor-	ted to:			
No one	2	1.0	3	2.1
Director of the institution	160	77.7	124	86.7
Health care worker (nurse, doctor, hospital)	98	47.6	37	25.9
Social worker	62	30.1	35	24.5
Psychologist	70	34.0	44	30.8
Social pedagologist	40	19.4	36	25.2
Teacher	39	18.9	40	28.0
Nanny	84	40.8	44	30.8
Parent/guardian	18	8.7	15	10.5
Local government agency	18	8.7	22	15.4
Police	22	10.7	24	16.8
Ombudsman's Office	3	1.5	2	1.4
Community leaders	4	1.9	2	1.4
NGO	2	1.0	4	2.8

agency or the police, or to the Ombudsman's Office. Surprisingly, 1% to 4% of staff said the incident should not be reported to anybody.

Staff were also asked, "If a child is hit or beat by a staff member, who should the incident be reported to?" Table 5.13 reveals that 77.7% of staff in institutions for children with psycho-neurological and severe disabilities, and 86.7% of staff in special correctional institutions of education said the incidents of violence by staff should be reported to the director of the institution. Staff also identified a wide range of other professionals that incidents of violence by staff should be reported to, except for local government agencies, police, and the Ombudsman's Office.

To further explore practices of registering and recording incidents of violence against children in institutions, we asked staff, "Are acts of violence against children that occur in the institution registered or recorded?" Table 5.14 reveals that only 21.4% of staff in institutions for children with psychoneurological and severe disabilities, and 27.3% of staff in special correctional institutions of education reported that acts of violence against children in the institution are registered or recorded. Moreover, as many as 53% to 64% of staff reported they do not know if such incidents are registered or recorded.

Table 5.14. Registering and recording incidents of violence against children in institutions by type of institution

type of institution							
	Institutions for children with psycho- neurological and severe disabilities N=206		for children with psychoneurological and severe disabilities Special correctional institutions of education N=143				
	N	%	N	%			
Are acts of violence against children that occur in the institution registered or recorded?	44	21.4*	39	27.3**			

^{* 64.6%} of staff reported they do not know if they are registered or recorded.

These findings in Table 5.14 provide further evidence that most acts of violence against children (among children and by staff) in institutions are not documented. It also reveals that most likely there are no procedures for registering and recording incidents of violence against children in institutions; at least none that staff are aware of.

Regulation of staff conduct and discipline

Staff were also asked if there are any official written regulations that guide staff conduct or the discipline of staff that use violence against children in institutions. Table 5.15 reveals that only 31% to 33% of staff reported there is an official written document that regulates staff conduct in the institution. Surprisingly, 54% of staff in both types of institutions reported they do not know if there is an official written document that regulates staff conduct in the institution.

Table 5.15 also reveals that 47% to 51% of staff reported there are regulations for disciplining staff that use violence against children in the institution. Again, nearly 35% to 41% of staff reported they do not know if there are regulations for discipline staff that use violence against children in the institution. These data provide further evidence that there is a lack of guidelines and regulations that regulate staff conduct and responses to violence against children; at least none that staff are aware of.

Table 5.15. Official regulation of staff conduct and disciplining staff for violence against children by type of institution

	Institutions for children with psycho- neurological and severe disabilities N=206		for childrer with psycho neurologica and severe disabilities		correct al ins tion educ	ccial ction- stitu- s of ation 143
	N %		N	%		
There is an official written document that regulates staff conduct in the institution	65	31.6*	48	33.6**		
There are regulations for disciplining staff that use violence against children in the institution	106	51.5***	89	47.6***		

^{* 53.9%} of staff reported they do not know if there is an official document that regulates staff conduct

^{** 53.1%} of staff reported they do not know if they are registered or recorded.

^{** 54.5%} of staff reported they do not know if there is an official document that regulates staff conduct

^{*** 35.4%} of staff reported they do not know if there are regulations for disciplining staff that use violence against children

^{**** 41.3%} of staff reported they do not know if there are regulations for disciplining staff that use violence against children

Staff training on violence against children

One of the final questions in the survey was "Have you received training on how to identify or respond to violence against children?" Surprisingly, only 37.4% of staff in institutions for children with psycho-neurological and severe disabilities, and 44.8% of staff in special correctional institutions of education reported they received training on how to identify or respond to violence against children (whether among children or by staff). Since children in residential institutions, particularly children with disabilities are at increased risk of violence, it is crucial that all staff working in institutions for children with disabilities are properly trained to understand, identify, and respond to violence against children. This includes how to register, record, and report such incidents, and how to support children that are victims.

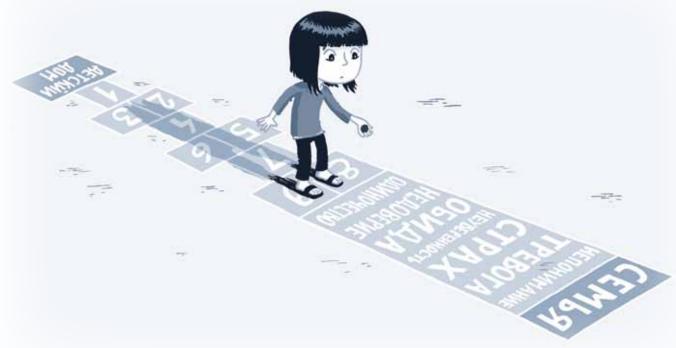
Table 5.16.	Staff training	on violenc	e against
children by	type of institu	tion	

children by type of institution						
	Institutions for children with psycho- neurological and severe disabilities N=206		Special correctional institutions of education N=143			
	N %		N	%		
Have received training on how to identify or respond to violence against children	77	37.4	64	44.8		

Level of educational differences in staff attitudes and behaviors

Finally, Appendix Table 9 provides an analysis differences among staff based upon levels of education in terms of witnessing violence against children, attitudes toward corporal punishment, and responses to violence against children. To begin, Appendix Table 9 reveals that although staff of all educational levels witnessed violence against children in institutions (both violence among children and staff use of violence against children), staff with a higher education were significantly more likely to witness violence against children in all of its forms, than staff with a vocational education or a secondary education or less. In terms of staff use of violence against children, the only significant differences based upon levels of education were related to witnessing harsh verbal abuse and psychological abuse. It is also important to note that staff with a higher education were more likely to witness a child physically injured by another child and by staff, than staff with a vocational education or a secondary education or less. These findings may be due to the fact that staff with a higher education (including an incomplete higher education) are more likely to be responsible for caring for and supervising children in infant homes and institutions for children with disabilities.

Appendix Table 9 also reveals that a significant proportion of staff of all levels of educational support the use of corporal punishment against children in institutions; however, staff with an incomplete higher education (69.2%) and secondary education or less (67.6%) were more likely to hold attitudes supportive of corporal punishment than staff with a vocational education (44.7%) or higher education (40.1%).



Appendix Table 9 also reveal that while all staff heard about or saw children running away from the institution and engaging in acts of self-harm/suicide, staff with a higher education were significantly more likely to report hearing about or witnes sing children run away from the institution and engaging in self-harm/suicide. Again, this finding may reflect the fact that staff with a higher education are more likely to be responsible for caring for and supervising children in infant homes and institutions for children with disabilities.

In regard to responding to cases of violence against children, staff with a higher education were more likely to report that acts of violence against children and suicide that occur in the institution are registered or recorded. However, it is important to note that the proportion of staff with a higher education that reported such incidents are registered or recorded are extremely low (only 25% to 29% of staff with a higher education). In addition, staff with a higher education were slightly more likely to report there are official written documents that regulate staff conduct, and regulations for disciplining staff that use of violence against children.

Finally, Appendix Table 9 reveals that staff with a higher education (43.4%) and vocational education (34.1%) were more likely to report that they received training on how to identify or respond to violence against children, than staff with an incomplete higher education (20.7%) and a secondary education or less (26.1%). However, it is important to note that the proportion of staff trained is very small.

CHAPTER 6:

GRADUATES
FROM STATERUN RESIDENTIAL
INSTITUTIONS
SPEAK OUT ABOUT
VIOLENCE AGAINST
CHILDREN IN THE
INSTITUTIONS

In this secton of the reprot, qualitative data from interviews with graduates from state-run residential institutions for children that now reside in youth homes are presented. Forty youth between 17 and 23 years of age that reside in youth homes in three regions of Kazakhstan were interviewed in a one-on-one, face-to-face setting, including 20male and 20 female youth. The interviewes were conducted in private in youths' rooms at the youth houses. The interviews focused on youths' experiences growing up in state-run residential institutions, including their experiences with violencein the institution.

The data in this section is contextual and narrative in nature because it was collected from interviews. This qualitative data is significant because it supplements the quantitative data presented in Chapters 3, 4 and 5.

Description of the institutional environment

Youth often held very strong memories of their lives in the state-run institutions. Some youth held some positive memories; however, the majority of interviewed youth held very negative memories of life in the state-run residential institutions for children. Some youth described the conditions in the institutions as very bad, difficult, and fraught with misery, suffering, and unpredictability. Recalling these experiences children often explained how they moved from one institution to another, and how things either changed for the better or the worse. For instance, three female and two male youth explained,

"In the N^o A and N^o B Children's Home I did not feel my life, I did not understand anything around me; there was nothing good except mockery... The educators there beat us, insulted us, found vulnerabilities and cuss us morally... In the N^o Z Children's Home my life improved, I was treated better there."

(Female, 18, A)

"The life was gray there [in the institution]. I do not wish anyone to have it [such a life in the institutions]. Boys and girls fought always. They fought for any reason: food, money, etc... Many pupils drank and quarreled. In such cases, the police and IDN were called. The police were often called to the boarding school. I cannot say anything good about that place. I do not communicate with anyone from that place, and I do not have any wish to go there."

(Female, 1, A)

"I do not remember my time in the infant home. Despite the fact that I was little at the children's home, I remember many things from my life in it. Perhaps it is because I have got the biggest part of my physical and moral suffering there. I was a naughty child [it would be interesting to know if she was really naughty or if she was simply labeled as naughty by the staff; or did the environment in the institution cause her to be naughty]. When I was sent to the boarding school №B, I became to study at Kazakh group. It was not good there too. When I was being sent to the boarding school №C, I was crying, I did not want to leave it. After that I was so happy that I was sent to a new boarding school. I liked it there very much. Nobody offended me there. Educators were good with me. The y talked to me calmly, explained things to me. I became another person there."

(Female, 3, A)

"In the shelter, I felt bad because I did not understand why I was there. In the $N^{\circ}C$ boarding school it was not very good, teachers were evil, cursed constantly, and beat us. In the $N^{\circ}Z$ home it

was very good. I can even say excellent. The staff were very kind. We still communicate."

(Male, 16, A9)

"In the children's home it was so-so. There were situations that caregivers punished us and put us into the coroner. When you are small, the staff treats you, I would say, not well. The caregivers make the children grow up fast."

(Male, 11, K)

"[Life in the institutions] was very, very bad. I had a wish to live there as a human, but we were not perceived like this. Even now we cannot get any good job because they [employers] are afraid and they think we are criminals."

(Male, 15, A)

For some youth, the traumas they experienced in institutions were too difficult to talk about. As one male (15, K) explained, "I was living in the children's home since 7 years old till 16 years old. I did not like it. There were alot of older children. There was disorder. It was 8 to 9 years ago when I was small. I do not want to tell you about this."

Transfers between institutions

As mentioned above, interviews with youth revealed that many children were transferred between different state-run residential institutions as they were growing up. The reasons for transfers were not always clear, and some youth reported being transferred to special institutions for children with mental retardation and disabilities, depite the fact that they were not mentally retarded or disabled. Some children even spoke about being transferred to institutions for the mentally ill as a form of punishment (this practice will be presented in later section of this chapter). When children were transferred their lives were disrupted, and sometimes they were seperated from their siblings. The guotes below reveal the challenges that youth faced as they were transferred from institution-to-institution.

"I want to say that when children are transferred from one orphanage to another, this is very hard for them. My little sister and I were lucky that we were transferred together to the NºT Children's Village; otherwise, it would be very hard to be alone. First, family members are separated from each other, and second to get used to a new place and new people is difficult. Also, it is very hard to move from the village to the city. Here [in the city] it is a totally different life, and time is required to adapt. Of course you get used to it, but still, many children become uncommunicative, it is difficult for them. It would be better that the children were in the same institutions until graduation at least."

(*Female*, 1, *E*)

"I remember myself since I was 7 years old. May be I was there [in the institution] earlier, but I do not know exactly. First, I was at the children's home $N^{\circ}A$. While I was there I did not go to school. I liked to be there more than where I was after that place. The atmosphere was different there. Perhaps they were thinking about the place where I would be sent, so their attitude was like this. Then I was visited by the special commission. They showed me something and asked me there. I did not understand what the v wanted from me. If they warned me or prepared me I would behave in another way. People were unfamiliar for me. Perhaps I was confused or I did not want to answer at that time. After without any explanations I was moved to a specialized boarding school. Then I understood that it was according to the commission's decision, they decided that I lagged behind in development."

(Female, 1, A)

"When I was 8 or 9 years old I entered the first children's home. My uncle had brought me and my younger brother there. After the death of my mother, my father started to drink and being drunk sold our apartment and we came to the Children's Home. I never learned, so I was transferred one year later to the NºC boarding school for mentally retarded, but I had no mental problems. The next year I was transferred to the NºZ Children's Home. There I spent one year, I ran home constantly to my father and lived with him for weeks, but after I was pick up they brought me back or he brought me back. After the NºZ Children's Home I went to the NºB Children's Home where I stayed for 4 years, after I finished I went to the apartment."

(Male, 15, A)

As previously mentioned, interviews with youth also revealed that conditions and experiences varied from institution-to-institution varied significantly, particularly for those youth that spent time in two or more different institutions during their childhood. Some institutions were clearly better places than others, and as youth explained, this depended largely upon the directors and staff responsible for managing and operating the institution. As one female (5, A) explained, "Almost everything depended on the educator." Similarly, a male explained,

"In NºD... we had an interesting night life of playing cards, bottles, we went to the girls, we went to them through the windows. In 2000, instead of teachers the cops were on duty at night. Later, they [the cops] communicated with us by drinking together, because they realized it was useless to fight with us. There was hazing there, but not serious, midlevel; and we were beaten, but not so much. The Director was normal, she had her own approach to children, but she did not beat us. There were the teachers who beat us using a pointer."

(Male, 15, A)

Impact of theinstitutional environment on children's well-being and behavior

Sociological research reveals that the environment can be very powerful in shaping youth behaviors, including deviant and criminal behaviors. In fact, interviews with youth graduates from state-run residential institutions revealed that the social environment in state-run residential institutions for children often had a negative effect on children's behavior. Both male and female youth recalled how they became aggressive over time in the institution as they learned that they had to use violence to cope with and survive in the institution. As two female and three male youth explained,

"When I first came to the institution, I was calm. Then I realized that I had to be proactive, otherwise I would be hurt. Each group had its own headman. In our group, I was a chairman. I rarely talked to the kids of the same age. Basically, I communicated always with the guys from high school."

(Female, 14, A)

"With the majority of people I was friendly, but there were occassions when quarreling and cursing with other children took place. Hazing also happened, and for this reason I fought with other children to show my character."

(Female, 2, E)

"Of course, it was hard at first. I was beaten very much, and was mocked. Then I learned how to defend myself against others. Then I completely became starshak."

(Male, 13, A)

"At first it was very difficult there; there was conflict with elder pupils. I had to show myself, and show to other children and elder pupils that I could protect myself from others... During the first year, there were cases of physical violence. I had to fight, I was beaten. I was made to do something. Then it became a little better."

(Male, 9, A)

"I had to fight in order to show myself to others; however, it was only atht early beginning."

(Male, 9, A)

However, not all youth spoke about using aggression or physical violence to cope with and survive in the institution, some youth reported they coped by turning inward. As two female and one male youth recalled,

"I did not have such situations [physical victimization]. I had never allowed anyone to offend me and hurt me. Perhaps it was because

I was in a karate group... I tried to keep silent because you can say one word and then you may quarrel very hard."

(Female, 4, A)

"There were such cases when the caregivers argued with other children, but I tried not to listen to this. I stayed away from everything."

(Female, 17, K)

"At the beginning, I often saw situations in which children hurt other children morally and physically. After such situations, some children had bruises and scars. Educators in most cases could not help them. I personally always tried not to attract attention to me at such situations."

(Male, 9, A)

Children also recalled living in fear of other children in the institution, as the other children used violence against them and abused them.

"I get on well in my own way. I had some friends. I did nto get on well with the elder children. I did not like them... they wanted to teach us everything in order to make us follow their steps. But, I tried to be far away from them. I was forced to do pushups, because of fear I did push-ups 200 times. Now, I think how was it possible for me to do so many times. Once I had a thought to cut one of them."

(Male, 11, K)

Children that were sent to state-run residential institutions along with their siblings faced additional challenges, as they often had to worry not only about their own life and survival in the institution, but their siblings as well. In particular, the eldest sibling often had the additional worries or concerns of protecting their younger siblings in this violent and unpredictable environment. This puts additional stress on children as one male explained,

"It was difficult to be at the boarding school. It was unusual; many unfamiliar people. I was worried about my brothers and sisters. We all were sent there. I was 10 and I was the eldest. At that time, we were given little food, conditions were bad, everyone wore the same clothes."

(Male, 8, A)

Violence among children/ youthin institutions

Most of the male and female youth spoke about violence among children in the state-run residential institutions, including witnessing and experiencing various forms of bullying, harsh verbal abuse, psychological abuse, and physical violence among children. A few children even spoke about the occurence of sexual assault of children by other children in the institutions. The following quotes reveal what female youth said about their experiences with physical aggression and violence among children in the institutions. Some of the girls described their role as the physical aggressors, while others revealed their role as the victims or observers of physical violence. In some of the quotes, the line between aggressor and victim is blurred as girls talk about having to use physical violence to protect and defend themselves; to survive in the institutions.

"Of course, it [life in the institution] was not without conflicts. Once a new girl came to us. There were rumors about her, that she had been the biggest bully and could outdo any of the girls. She behaved very aggressively, and once during lunch she pushed me. I had a fight with her on the street. I punished her for her aggressiveness. After that, we lived well together."

(Female, 14, A)

"It happened [violence among children]. I was insulted and did the same. Many times we fought, staged a fight just for fun [to show who is stronger]. I had a best friend and others persuaded her saying I'm bad. She stopped communicating with me and started to find fault in me. We had verbal skirmishes, and were fighting."

(Female, 18, A)

"Of course we had fights there [in the institution]. If it was not connected with you, you just sat and saw everything from the side. But if they beat those familiar to you, you protected them. I fought with girls several times. I was ale a der an de very one was afraid of me. So in most situations I hurt others."

(Female, 7, A)

"We had fights among boy sand among girls. Fights could be for any reason. I fought once because of theft. One girl from my group stole my things and she did not confess to it. I had to fight her. There were many fights because of money. Children who had parents or relatives got money from them. Other children tried to steal or take this money. Sometimes there were fights because of food."

(Female, 3, A)

While females spoke about physical violence among children in the institutions, some girls felt that boys

fought more often than girls. Some also thought that boys were more likely than girls to fight without reason. As one girl (5, A) explained, "boys fights were without any reason; they need not any reason." Another girl added,

"I could not say that everything was good [in the institution]... Fights were there, but mostly among boys. The reason could be anything. Again, somebody could tell anything about someone or tell a secret or look at someone in a bad way."

(Female, 4, A)

Male youth also spoke about their experiences with violence among children in the institution. Their quotes reveal a wide range of reasons for the occurrence of violence, which includes bullying, harsh verbal abuse, psychological abuse, and physical violence. Similar to girls, some of the boys described their role as the physical aggressor, while others revealed their role as the victim or observer of physical violence. Again, in some of the stoires, the line between aggressor and victim is blurred, particularly when boys reveal how they were provoked to fight or even forced by elders boys to fight with other boys (either boys their age or other elder boys).

"They [children] beat each other with their fists and with a belt... Sometimes when someone was asleep the other kids were making fun of him by putting a match between his fingers and setting them on fire."

(Male, 16, A)

"There were fights... especially among boys. There were cases of fights for bread, but it was at a time when we did not have enought to eat. We used to steal from each other. I saw stealing of pens, copybooks, mobile phones, but then they were caught and got beat for that."

(Male, 17, A)

"Of course, I have seen such situations [violence among children in the institution] every day. The children cussed out each other. The older cussed out and mocked the younger children... Constantly, the children robbed, took the bread and food away. There were such situations when the older children stood in two rows and the younger children had to go through these rows and they [the older children] beat them [the younger children]."

(Male, 11, K)

"I was insulted, but was not beaten. There was fighting with others due to disagreements. There was a situation that one guy, older than me, started touching my friend whom I considered a brother. I began to intercede for him and we started fighting."

(Male, 1, K)



"It happened that newcomers took away cell phones from local children. The cell phone was taken away from a boy then put it on the ground, afterwards they started fighting till the end. The boy who lost would be without the cell phone. There were such situations when children fought among themselves, they were separated by force."

(Male, 10, K)

"We fought and not just once. The older children made us fight. There were such situations when I was forced to fight with two guys simultaneously, and once with the guy was from the nineth class. They forced me to do push-ups and strangled me to the point that I lost consciousness."

(Male, 11, K)

"One elder pupil did not like me and he offended me everytime when he met me. He beat me too much. I had bruises. Sometimes he made me fight with other elder pupils, he humiliated me. I was like a running boy "do this," "bring that." I had to tolerate this because I was afraid of him. Mostly, I was afraid that he could do anything to my younger brothers and sisters [actual siblings]. He could ask someone to do something to them." (Male, 8, A9)

Some youth spoke about how they were bullied by the elder boys and utlimately had to resort to the use of physical violence as a means of self-defense (i.e., to put an end to the bullying and violence that they were experiencing).

"We had siutations when children could take bread of others during the meal in the canteen. We were given two pieces of bread and one piece of butter. If someone did not find his piece on the table there was noise. Then they looked for a person who did this. It was finished with a fight. When we were 14-15 years old elder pupils came and took our stuff still. So, we decided to gather together and beat them. We beat them and they did not come to us anymore."

(Male, 8, A)

"Of course, such situations took place [physical violence among children], and I reacted by the same action... I always tried to fight back and defend myself."

(Male, 2, K)

Some youth also revealed that violence among children in the institutions was sometimes provoked by staff or even the director in the institution. One female (5, A) explained, "Often educators hounded children to offend and fight with each other. "Another female explained,

"We had many of such situations [physical violence among children in the institution]. Usually everybody observed from the side . . . Sometimes children could intercede. We had elder 'defenders' who looked after the younger children; they could intervene in the conflict. I took partina fight myself. I asked one girl to give meroller skates. She gave them to me, so I did not understand d what happened. The 'defender' attacked me. She began to pull my hair and beat me. I began to beat her too. We were taken to the vice director. It turned out that she [the director] sent the 'defender' to me herself. She set her on me again in her cabinet. We began to fight and we broke the table in her cabinet. Then the Vice Director came to separate us, called educators and IDN. I was taken by educators and the 'defender' stayed in the Vice Director's cabinet. The 'defender' had a bruise under her eye. Fight soccur red among girls, as well as among boys. It was normal."

(Female, 1, A)

Children with mental retardation and/or physical handicaps were particularly vulnerable, and could easily find themselves the targets of children and staff's abuse and violence. As one female explained,

"There were children who were scoffed by everyone. Seniors beat cruelly and scoffed at one boy. Everyone thought the boy was a mentally retarded child (he did not have enough "balls") and so he did not care about anything. As if he did not understand anything. Boys undressed him, took off his underwear, etc. The y made him steal bread in the canteen. It was like a joke... The educators did not react to this; they thought the boy was a mentally retarded child, so he did not care what other children did to him. I think they [educators] liked to watch this performance."

(Female, 5, A)

Most youth spoke about same-gender violence among children in the institutions, versus crossgender violence (i.e., boys and girls in the institutions). Nevertheless, one female did reveal the occurrence of intimate partner violence among youth in the institutions. It is a reality in residential institutions for children that boys and girls often develop dating or intimate partner relationships, particularly in their teenage years as girls and boys continue to live in close proximity with each other. Sometimes these intimate/dating relationships result in violence. One girl explained how she was involved in an incident of intimate partner violence with her boyfriend.

"One time I was beaten by my boyfriend. First, I found out that he had relations with another girl. I went out and beat that girl, and then my boyfriend came and beat me. So I realized that our relationship stopped."

(Female, 14, A)

Sexual abuse among children/ youth in institutions

Two youth spoke briefly about the occurrence of sexual violence among youth in the institutions. Because of the taboos surrounding sexual abuse, we did not ask any specific questions about sexual abuse in the institutions (either among children or by staff); therefore, we received limited information about the occurrence of sexual abuse of girls or boys in the institutions. If we had asked specific questions about sexual abuse, we would have most likely received much more information about sexual abuse in children's institutions. Nevertheless, two youth reported,

"I heard in №Z house a girl was raped by a group of children. Later it was found out and they started to deal with it, but no punishment followed."

(Female, 18, A)

"Among the boys, there were some guys who were kept seperately. These guys were avoided after being raped by other 'starshaki.' They ate separetly. These guys were avoided after being raped by other 'starshaki.' They ate seperately, and everyone knew who these guys were and what happened to them."

(Male, 13, A)

Role of "starshaki" in institutions

It is clear from the interviews with youth that elder/ senior youth, referred to as "starshaki," often bully, abuse and commit acts of violence in the institutions. Youth reported that younger children were often the victims of the starshaki, and some of them recalled their experiences of being victimized and tormented by the starshaki. It is important to understand that starshaki are regularly used by many directors and educators in the institutions to maintain order and control, and to discipline and punish the children in their group. Such a system leaves the starshaki in a position of power to define the rules and dispense discipline. As one female (6, K) explained, "The caregivers said to the children [starshaki], 'go and bring them up.' For some reason the caregivers could not bring us up by themselves." In addition, a male youth (15, A) explained, "They [starshaki] had their own rules of behavior. If you did not correspond, you were punished." This same youth went on to explain,

"We had "dedovshina," that is when more senior pupils dominate younger pupils. They made little pupils work for them, 'go bring this or that.' They beat smaller pupils... When someone was naughty or did something wrong they [the staff] called the elder pupils and with their help they educated [beat] children. They [the staff] did not beat [children] themselves. That was the situation until 2004."

(Male, 8, A)

Numerous other youth told stories about their experiences with the starshaki in the institutions, including the various forms of violence that the starshaki committed against other children in the institutions. The stories are violent and horrifying.

"Yes, in №Zand in №B, the guys from the highschool [starshaki] beat me till the 5th to 6th classes, but then I actually started to rebuff. Starsheki mocked us. I was told how starshaki locked the children'sthumbs and tied them with scotch, and then pushed them down the stairs and forced them to climb up quickly while laughing."

(Male, 15, A)

"Probably you have already heard about boxes. Elder children [starshaki] put little children into the boxes and pushed them down the stairs. It was made because of fun. These elder children had the same in their childhood, so they thought that they should do the same with little children. The educators did not react for this."

(Female, 5, A)

"When I entered the RTSTP after the reception center, I was beaten much the first night. At that time, "starshaki" heavily mocked other children for no reason (roughly from 2001 to 2003). However, there were normal kids among the older boys... So I was afraid to run."

(Male, 13, A)

"High school students beat [other children] withfists and used foul language. Once I swore at one of the guys and threw potatoes on him, the starshaki found fault and told me that potatoes was the second bread and they beat me."

(Male, 16, A)

"They [starshaki] locked us in a nightstand and threw it down from the third floor. The door of the nightstand was closed. This is called "the tulip." I was 9 years old, that was in 1996-1998."

(Male, 19, A)

"When we were young, elder students [starshaki] beat us. They punished us due to the fact that we went to walk [outside of the institution] without permission. They beat us on our buttocks and they made us stand in the coroner. I was afraid of the other cases when they beat [more severe beating]... Older children brought us up; they were our seniors... Then we grew up and it became easier. I [as starshaki] have never beat the kids."

(Female, 6, K)

"If they [starshaki] saw [violence among children], they separated at once and punished. Or if they [starshaki] heard us using foul language they punished us. Most of the cases of violence among children were not shown to the employees."

(Male, 15, A)

"The foreigners came and gave us gifts of toys and candy, and high school students came and took them away. We didn't complain to anyone because if they [starshaki] would be punished, then they would punish us with double force."

(Male, 15, A)

The systematic violence used by thestarshaki creates an unsafe and unpredictable environment for children, which instilled a significant level of fear and anxiety in children. In fact, youth recalled that they often lived in fear of the starshaki. As one male youth (7, K) explained,

"We were afraid of older children [starshaki] more because they have been with us from our childhood, and we listened to them. But caregivers just came and left, and we were not afriad of them."

(Male, 7, K)

Children revealed that many staff did not react or respond to acts of violence against children, particularly if it was the starshaki using violence against other children. As one male youth (11, K) explained,

"The staff also closed their eyes to the fact that older children beat the younger children." Similarly, another male explained, "They [staff] closed their eyes to these facts [violence among children]. We had our own rules in the home. If you told about the fact that you were beaten, then educators said to you, "You are a man." We did not see any concrete steps from the side of the educators [to address violence among children]. Sometimes you complained and then you got two times more for this."

(Male, 8, A)

Many children that grow up in institutions suffer years of abuse at the hands of the starhaki. Thus, once they become older and find themselves in the position of starshaki will often use their position of power to commit acts of bullying, abuse, and violence against the younger children in the institutions. One male youth spoke specifically about his own experiences as a "starshak." This particular youth revealed that he did not necessarily enjoy being the "starshak," nevertheless he took on the role and responsibilities of starshak. It is interesting to note, however, that hen he transferred from one insitution to another he refused staff's desire at the new institution to make him "starshak."

"Only with the permission of educators, I was responsible for other children by myself (starshak). RTSTP had the following methods of upbringing of the children by the educators - if one runs away, then all are punished. I tried to keep order among the boys, but in the cases of girls did not interfere. The girls dealt among themselves... I had to watch. In turn, I put the other people in charge of watching the other guys; it was a system... Since I was starshak, I was heavily punished if someone in my group broke the rules. I was beaten or forced to do something... Of course, as the starshak I had more privileges, but also more responsibility. Sometimes it was hard to punish someone for misdeeds. But, if I didn't punish, the educators punished me. At Orphanage №Zeverything was different. They wanted to make me a senior (starshak) on the recommendation of my previous teachers, but I refused."

(Male, 13, A)

Some childrenmaintained that some staff were actually afriad of the starshaki. As two female youth explained,

"I had often seen our head teacher beat the kids; mostly just little kids. The head teacher was afraid to beat the big kids, because the big kids could fight back."

(Female, 14, A)

"There were fights, children quarreled and offended each other. We even fought with educators especially with night educators... We wanted to go for a walk longer, but we had to come to the children's house at 1700. Firstly, we

were afraid to come in late because they [night staff] met us with mops... When we became elder youth [starshaki] we began to leave freely. Educators left us... they were afraid of us."

(Female, 7, A)

Staff use of violence against children in institutions

Youth spoke extensively about the violence they witnessed and experienced from directors and staff working in the institutions. The violence included harsh verbal abuse, psychological abuse, and physical violence. Sometimes the violence was used to punish children; while at other times it appears the violence was more random and unpredictable, for unfroseen reasons. In addition, staff use of violence against children often occurred in front of other children, which had the added effect of humiliating children in front of their peers, as well as instilling fear in other children. Some of the violence that youth reported experiencing at the hands of staff was cruel, tortoreous, and inhuman.

Youth revealed that the violence they suffered at the hands of directors and staff clearly had a negative effect on their emotional health, development, and wellbeing, and in many cases resulted in physical injuries and sometimes even death. The numerous quotes presented below reveal the various forms of violence that staff often used on children in institutions. It is important to note that youth often discussed multiple forms of abuse in one quote, showing that the violence children witnessed and experienced at the hands of staff often came in multiple forms, creating an unpredictable, unsafe, and unsecure environment for children to grow up in. Also, some youth recalled experiences of staff use of violence from two different points and time; therefore, there may be two quotes from the same youth presented one after the other.

"They [staff] screamed and scolded the kids for their own good, but sometimes they [staff] vented their psychosis on the children... In the №B [institution] I was beaten. Once during the football game I told one girl that I disliked an educator. She told that educator. She [the educator] beat me with the keys on my head, when I fell down, kicked me with her foot on my stomach and then put me under cold water. I was shocked and could not come to myself for a long time."

(Female, 18, A)

"Five and six year old children were set on the chair and were punished severely. A child was punished before all children; he was beaten with a stick on his hands (a stick used on dough). Those educators do not work there now, they have been fired."

(Female, 7, A)

"In the canteen educators called me lesbian and beat me before all children. Once, then ighteducator beat me with a stool. All children were beaten. I got concession of the brain. Our doctor said that my blood pressure went down sharply. I still have headaches."

(Female, 7, A)

"Staff regularly offended children. They called them orphans and foundlings. Educators beat children with a belt or stick. They had favorites, but they [the favorites] were beaten too. Children were sent to KPZ. They came back very obedient because they were scoffed and beaten there."

(Female, 1, A)

"The night educator was a man. Once he beat one girl. We gathered with other groups and went to complain to our director. It turned out that she [the director] allowed him [the night educator] to do this often. The director moved him to the boys groups and then she fired him."

(Female, 5, A)

"I regularly saw [staff insult children or cause them physical pain]. We had different situations. They could call us with bad words... you could be called with bad words or you could be beat on the head. If you had problems or difficulties with your studies you were called stupid or idiot. They beat us with a ruler on our hands because of bad handwriting, and also pulled our ears. Everything depended on the educators, some of them were not friendly with their heads, so they could do and say everything they wished."

(Male, 8, A)

"In 2003, I was sent to boarding school № A. It was better there, there were fewer people. In a year conditions changed. The director was a very strict and serious woman. She brought up children herself and did not ask for help. She did not ask elder pupils [starshaki] to help her. She would punish [children] herself. Usually we [starshaki] worked as punishment. Once she beat us with a stick as a mother. She did it because we sold our shoes which we were given. In general, she was a good person and we respected her."

(Male, 8, A)

"Everything depended on the children themselves – if they violated the rules, they were punished. As punishment, the children were forced to clean everything for a few days or even weeks. In other words, we were sent to public works. In addition, there was physical and psychological punishment. One day, someone broke the rules and as punishment everybody was forced to run and cower from the night till 8am. In this way the runaway child was punished. And the child himself was beaten and mocked for a long time over it."

(Male, 12, A)

"When we were young they beat us using a twig for any small fault. All kids were crying, but I was not, I endured the pain. I was a headman and got [beat] for all. At night, if somebody did not sleep, the teachers came and used foul language. At the same time, most of the teachers loved us. Many children called them moms, but I did not call them so."

(Male, 15, A)

"We had a class called KPZ like prison type. But guys were sent there and they did all physical work. If someone did not obey, the teachers called tutors from KPZ and they brought us up by beating, but in some cases it did not help. On the contrary, many kids flew into a rage."

(Male, 15, A)

"Once I missed the lesson of self-preparing and the tutor hit me with a mop for that, so much that I had swollen arms. She used also bad words about my parents, like 'your parents were alcoholics' and 'we found you on the dump.' All this happened till the 8th grade, after that they did not swear, they were afraid of us."

(Male, 15, A)

"Yes, I have seen [violence against children by staff]. It may be done by a palm. There are some reasons. If you come too late after school or if there are serious reasons... Those children who escaped, their heads were shaved. If a girl escapes for several times, all her hairs in her head are shaved. Then, she sits at home and doesn't know what to do. Children ran away for different reasons: somebody was beaten or somebody doesn't like to be here "

(Male, 15, K)

"The educators beat children for different reasons using a belt, stick, by throwing dishes. We fought back"

(Male, 19, A)

"There were normal caregivers, but they were constantly dismissed if they talked to us too much. They were working for four months and then they were fired... Older children [starshaki] were not touched by them, because they cannot do it, but younger children were beaten by them, beaten with a palm on children's heads. When I was 11 years old, I washed the floors badly and because of this they neither gave me supper or dinner. If I walked without permission or went out with home slippers on my feet, I was also punished. We brought food to the punished children from the dining room and fed them."

(Male, 7, K)

"The director could punish us. Once I robbed a garage, I took cookies and candies from there.

It was found out. The director paid money for this and he beat me with a black rubber stick. It was hurtful. There were other times when I was punished. I was patient, I did not complain to anybody. I was not beaten in certain places, they did not choose."

(Male, 7, K)

"When they catch someone who smokes, those were beaten on the lips by a palm, or those who were caught with "nasvay" they were also beaten on the lips or forced to eat "nasvay." Sometimes they insulted [children] with words such as 'ram,' fool,' or worse."

(Male, 10, K)

"Of course, in those days (2000-2006), it was very difficult. It happened that I was beaten, forced to do push-ups by the staff. This happened not only with me, but with other children. Also, sometimes I was forced to wash things and forced to do other not very pleasant things... One caregiver, a man, "killed" us with a stick. He had a rubber stick and he broke the hangers on our heads."

(Male, 11, K)

"They [staff] took away the gifts from the children. Some of the kids were locked in the storage for 2-3 hours. They insulted children often. I didn't see them beat children... When I was insulted, I insulted them too. They insulted for nothing, in some cases the educators were in a bad mood and tried to take revenge on me."

(Male, 17, A)

Harsh verbal abuse by staff

Some of the youth focused particularly on the harsh verbal abuse that staff used against children in the institutions. Staff used harsh verbal abuse to humiliate and belittle children. Youth recalled how the harsh verbal abuse offended them, hurt their feelings, and affected their sense of self-esteem. Some youth also recalled how they responded to such harsh verbal abuse and the impact it had on them. In the numerous quotes below, six female and three male youth recall how both directors and staff used harsh verbal abuse against them in the institutions.

"Educators could tell us 'you will not become people,' 'you will follow your parents' way,' 'alcoholics' children,' and 'foundlings.' This was the most offensive."

(Female, 5, A)

"They could call us prostitutes. They told us that 'you will not get anything in your life,' 'you will follow your parents' way,' 'foundlings,' 'your parents are alcoholics and you will be such people,' and so on. lusuallyturnedandwalked away, but suchbehaviorangeredthem[staff]

even more. They could not do anything because I did not react to their offences. Some children quarreled with them, answered something in response and as a result they did everything worse for themselves."

(Female, 4, A)

"We had one educator who allowed herself to offend children... That educator was the director's sister, so she behaved in this way. Once she called me 'slut.' I never reacted, I turned and went out. She shouted a little and stopped."

(Female, 4, A)

"It is hurtful when they say 'shoshka' [you are a pig] and they say 'zhresh' [a very offense comment meaning 'to eat like a pig']. What right do they have to say so? Honestly, they have never applied physical power. Every duty during the cleaning of toilet, shower room, the caregiver argued with me always, that is it not clean. I do not know why, but always they argued only with me. However, there was a caregiver who I loved and she treated me well."

(Female, 17, K)

"We had situations when we were called alcoholics' children. They said, you would go your parents' way. Unfortunately, children [in the institution] pay for their parents. It is offensive when child is offended because of their parents. We are not guilty, we cannot choose our parents. I think that such words cannot be said to children."

(Female, 6, A)

"I was outraged by my teacher on the basis of ethnic differences. She always picked me out since I was an Uigur. She always caused offense and talked about my parents. There was another guy, he was weak, although he was a Kazakh, but he was offended often because he was weak and could not fight back. The teacher constantly made fun of him."

(Female, 14, A)

"I was called abandonedchild, moron, and so on. I was beaten too."

(Female, 1, A)

"One educator was called the psychological vampire. We always had words. She quarreled with other children from my group."

(Male, 10, A)

"I once washed the door, and the educator opened it so much from the other side that the door hit me on the head, but she used foul language and I went to the hospital with a concussion for two days."

(Male, 15, A)

"Of course, there were such situations [violence by staff against children]. They beat when we escaped from the school, but not all the staff did it. The director did not [beat] about [these] things. She is very tricky. She (the director) insulted the younger children (shit, ram bastards) when you grow up. They started praising you in order you start looking after the order. The staff insulted in different ways, but the most hurtful is when they say, that mother is alcoholic, and we are foundlings, and so on."

(Male, 11, K)

Psychological abuse by staff

Youth revealed that in addition to staff's use of physical violence and harsh verbal abuse on children, they also used various forms of psychological abuse to discipline children in institutions. Psychological abuse was used with the goal of controlling and/or isolating children, and intimating and causing fear in children. As one female explained, sometimes staff cursed children in a way that threated their sense of safety and well-being.

"During the arguments, sometimes the staff cussed us out and shouted as though they are ready to kill us. And, they say always that everything they do is with good intentions for us. Sometimes, caregivers talk that we are in the home and accused parents, saying that the parents left us. Among caregivers, there is one who we are afraid of, and not only we, but also the other caregivers."

(Female, 17, K)

Several youth also reported that staff regularly locked children in small places and rooms in order to lock them away and isolate them from other children for several hours to days. Children were locked in refrigerators and small rooms with little to no light and provided with little to no food and no opportunities to use the toilet (as they were required to defecate in the room in which they were being held). Sometimes children were locked together in the same room; however, still with the goal of locking them away and isolating them from other children in the institution. Such treatment is inhumane and psychologically abusive. As one female and two male youth explained,

"When we were at summer camp we had a punishment, we were closed in the refrigerator. The refrigerator was switched off, but it was dark and stuffy in there. I was lucky; I was never offended [never locked in the refrigerator]. Our educator did not allow herself to do this."

(Female, 5, A)

"Strongly malicious or uncontrolled [children] were sent to the madhouse, or they could be shut in the basement or in the refrigerator for meat (very large, but not working). There was a tragic case when a guy was locked in the refrigerator for three days and he hung himself with his belt on his knees. Most important, nobody was arrested

for this, and everybody said they didn't know anything. Nobody spoke out, they were all afraid." (Male, 15, A)

"I was afraid to run. In those days. chidlren were placed in the punishment room. Educators striped the children to the buff, put 8 to 10 children together in one room with a small window and one cup of water and a slice of bread were given in the day. They [the children] had to defecate in the same room."

(Male, 13, A)

One youth revealed that because of what happend to him when we was locked away in an isolation room, he often tried to separate youth that were fighting in an effort to spare them from being sent to the isolation room.

"When someone behaved badly, he was locked up for 2 to 3 months. If I ever saw the other guys were fighting, I tried to pull them apart."

(Male, 11, A)

Some youth also reported that staff denied children in institutions the right to food as a form of punishment. As one male (12, A) explained,

"Also, as a punishment sometimes they did not allow you to eat for a long time. In general, teachers had their own system – a whole hierarchy."

Several youth also revealed that staff often took gifts away from children in institutions, particularly gifts that were presented to children by visitors to the institution and even children's own parents. As one female (18, A) explained,

"In the NºB boarding school, the gifts were taken away [by staff]. Similarly, female and male youth alike explained,

"I remember that presents were brought to the boarding school. We all were called and we were given presents by sponsors. When sponsors went out our presents were taken from us. I even did not know what was in the presents; however, sometimes we were given some sweets from these presents."

(Female, 1, A)

"Staff took the presents away from us. I remember "KazakMys" brought the presents, but when they left, all presents were taken away."

(Male, 1, K)

"We argued together [children and staff]. I scolded at them, they at me. Usually I left. The reason of arguments often was a cell phone. My father gave me it as a present, but nobody believed me. The confiscated it and not returned. Then I saw the caregiver has used it, and she explained that a director sold it to her."

(Male, 7, K)

Practices of sending children to hospitals for the mentally ill as punishment

Interviews with youth also revealed that children from institutions were often sent to psychiatric hospitals for the mentally ill as a form of punishment for various reasons, including noncompliance and fighting. These children were not necessarily mentally ill and should have never been sent to a psychiatric or mental hospital for days, weeks, and even months, where they were typically medicated until they complied. In fact, children were transferred back to the residential institutions only after compliance.

"We had two very good educators. They took care about us in a good way. There was clean and everything was in order. We were always washed, cleaned, and full. But they were strict and beat us often. They were fired for these facts. After that, there were two new educators. They did not beat us, but they chose another type of punishment. They sent us to the nuthouse. I have heard that they still do this. Once I did not want to put on the uniform which we were given for the 1st of September. It was shapeless, wide and ugly in my opinion. I was punished. I was sent to the nuthouse, which was located near our place. I was there for 1,5 months. I felt that the educator plotted something, but she said that I needed only to donate blood. The most offensive thing was the fact that she persuaded or perhaps she bullied my group mates. If you were there [at the nuthouse], you could not run away. The y prescribed medicine. The n most children came back fat or very slim; however, the food was normal there."

(Female, 1, A)

"The educators interfered, separated and stopped children [fighting with each other] at the NºC boarding school... If a child did not listen to educators and did not understand their words it meant that he was an insane person and he was sent to nuthouse.

(Female, 3, A)

"They [staff] conducted interviews, but did not do anything special. Some people were sent to a psychiatric hospital."

(Male, 16, A)

"They [staff] intervened when they noticed [children fighting], the most inadequate were locked in a mental hospital."

(Male, 17, A)

"Strongly malicious or uncontrolled [children] were sent to the madhouse, or they could be shut in the basement or in the refrigerator for meat (very large, but not working). There was a tragic

case when a guy was locked in the refrigerator for three days and he hung himself with his belt on his knees. Most important, nobody was arrested for this, and everybody said they didn't know anything. Nobody spoke out, they were all afraid." (Male, 15, A)

Runaways from institutions

Youth also spoke about the various forms of violence that runaways sufferred at the hands of staff, as punishment for running away. This included such punishments as being beat by staff and/or starshaki (often in front of one's peers), being locked away in an isolation room, being deprived of food, and having cold water poured over them. One female and three male youth explained the what happened to runaways after they are returned to the institution.

"I was he re till the end; although many children run away. They were searched for and then returned to the boarding school. They were dirty. They told us the y slept in barn sand pan handled. They were scolded and punished in different ways. Some children were beaten and other children had cold water poured over them. There was so called KPZ or lockup. It was cold there and guards were men. No one wanted to go there again. But after 2004 everything became better."

(Female, 1, A)

"I never ran . . . However, my older brother ran 25 times for the whole period of stay in RTSTP . . . For each escape of anyone in RTSTP absolutely everyone was punished. The rule was 'one for all, and all for one.' Several times my brother was punished in front of all. One day after he was caught after his escape, we were all summoned to the street. There with all the kids, my brother was beaten with objects. I once tried to intervene, but I got too much and eventually received a closed head injury. I turned to the director, then my brother and I escaped and appealed to the Committee for Protection of Children. Later, we arrived at RTSTP with the police, where a criminal case was made for the teacher who had beaten, but we took pity on this teacher because he had a pregnant wife and small children. For this reason, we took out statement back and the teacher did not beat us anymore."

(Male, 12, A)

"There are escapers and still some runaway. I ran three times. I was caught. One day I returned by myself one week after walking out of the orphanage. I was missing my father. I was not punished. They could not punish me because I would turn around and go away. Others were punished in the shed for 2 to 3 hours in a day without breakfast, lunch, and dinner."

(Male, 7, K)

"In the NºZ home, I was sent to camps, health spa, I went to the football, dancing. I escaped often from there [because] I wanted to be at home. When I ran away I was caught by the high school guys [starshaki] and they beat me to stop me from running away anymore, but I escaped anyway. I went away from the school."

(Male, 15, A)

Suicide in institutions

Several youth also spoke about child suicidesin staterun residential institutions for children. Based upon the stories told by youth, those youth that attempted or committed suicide did so directly as result of the violence they experienced at the hands of staff. As one female and one male youth explained,

"I escaped one time due to a conflict with my teacher. As punishment, she made me wash the ladies toilet. I washed it, but she still could not calm down. Then she made me wash the men's room. I agreed, but then secretly escaped from the institution. One day, I was struck by the head teacher; not much, but a little on the head. I was offended and ran and drank 100 tablets of demidrola. Next, I didn't remember anything and woke up in the hospital. On another occasion, the teacher beat me much. I escaped and came to my stepbrother. He helped me to write a statement. On arrival at the institution, my teacher asked me to take the statement back from the police. Later, she stopped beating me."

(Female, 14, A)

"A classmate of mine hung himself sitting on his knees in the refrigerator in the year 2003. He hanged himself because the director held him in the meat refrigerator. I was also kept in the refrigerator. I told the director that the boy would hang himself. No one was arrested. They just got fired."

(Male, 19, A)

Youth officially reported incidents of violence in institutions

We asked youth if they ever told anyone about the violence they experienced in the state-run residential institutions. Most all of the interviewed youth revealed they did not tell anyone about the violence and did not officially report their experiences with violence in the institutions. Youth revealed they did not report the violence for fear of being punished by the director, staff, and/or starshaki, but also because they felt everyone knew about the violence in the institutions and they did not know who or where they could go for help. As three male youth explained,

Although there were some rules which we had to follow, such as we had to share with others everything which we were brought. If you did not do this you could have a fight. If a person told to anyone that he was beaten or he was taken away his stuff he became a "marginal." It was the worst thing."

(Male, 9, A)

"No, I never even complained. It you complain it will be worse. If the older children are punished, then you will be punished much worse. I have never had such a situation that I told somebody something. There is no asking for help, namely it is useless; otherwise the punishment would be from both the caregivers and the older children [starshaki]."

(Male, 15, K)

"Everybody knew about this. I did not want to complain to anyone. I would cause new problems. I did not believe that these problems could be solved. I really did not know whom I could tell these facts to, where could I go for help. We were always under total control. We always felt dislike from staff's side. We always felt their attitude toward us was as defective children."

(Male, 8, A)

One female youth also explained that when representatives from government commissions did come to the institution they typically did not interact or talk directly with the children, and if they did, children were instructed by the director and staff to report that everything was good.

"No one from the commission talked with us or we told them that everything was good."

(Female, 7, A)

Most youth reported they "usually share with each other" and "discuss these things among friends and other pupils from the institution." As one male explained, "I can tell my friends. The rest of the people we did not believe."

(Male, 10, K)

Only two youth revealed they made a formal complaint of their experiences with violence from staff to the police. In both of these cases the children were pressured by the director and staff to withdraw their formal complaint, which they did. The result, however, for these two youth was a decrease in the violence from the particular staff member identified in their formal complaint. Other youth may not have had such a positive outcome.

"Several times my brother was punished in front of all. One day after he was caught after his escape, we were all summoned to the street. There with all the kids, my brother was beaten with objects. I once tried to intervene, but I got too much and eventually received a closed head injury. I turned to the director, then my brother and I escaped and appealed to the Committee for Protection of Children. Later, we arrived at RTSTP with the police, where a criminal case was made for the teacher who had beaten, but we took pity on this teacher because he had a pregnant wife and small children. For this reason, we took out statement back and the teacher did not beat us anymore."

(Male, 12, A)

"I escaped one time due to a conflict with my teacher. As punishment, she made me wash the ladies toilet. I washed it, but she still could not calm down. Then she made me wash the men's room. I agreed, but then secretly escaped from the institution. One day, I was struck by the head teacher; not much, but a little on the head. I was offended and ran and drank 100 tablets of demidrola. Next, I didn't remember anything and woke up in the hospital. On another occasion, the teacher beat me much. I escaped and came to my stepbrother. He helped me to write a statement. On arrival at the institution, my teacher asked me to take the statement back from the police. Later, she stopped beating me."

(Female, 14, A)

Impact of institutionalization on youth

Research has revealed that institutionalization most often has a negative effect on children's emotional well-being and development. Institutionalization of children, particularly when it includes such high rates of violence among children and by staff, has negative effects on children's emotional well-being and development. The end result is that many of the youth we interviewed reported they do not trust anyone and that they have no friends. As three women explained,

"I do not trust anyone. I have friends but I cannot tell them everything."

(Female, 5, A)

"I cannot trust anyone. I keep everything inside. Perhaps because of this I cannot forget my childhood."

(Female, 3, A)

"No, I do not trust to anyone. I do not have a friend."

(Female, 4, A)

Finally, one youth pointed out that institutionalization and the violence against children in institutions continues to occur despite efforts for institutional reform. He maintains the violence in institutions remains largely hidden. He proposes that it is not enough to change one director or staff person, or a group of staff, rather the whole system of institutions and practice of institutionalizing children needs to be eliminated. He maintains there will be long-term effects in the society for institutionalize so many children, and treating them so inhumanely.

"It seems to me these days everything has changed globally. Today's children are more sensitive. Moreover, such institutions have become more frequent visits of the commissions. Educators are constantly checked and in case of any violations, they are immediately subjected to administrative punishment. After my departure about 40% of all educator staff had been dismissed... Even after these changes, it seems to me that even now it's all there. Physical, moral, and enforcement actions are used against children, although they always hide these situations. If I had the opportunity, I would have disbandedthe whole system. Children, even committing small errors do not merit such harsh punishment. Often there were times when children become fiercer after the institution. If it will continue so, what will happen to succeeding generations? Children need to be treated very humanely."

(Male, 12, A)

CHAPTER 7:

INTERVIEWS WITH DIRECTORS OF INSTITUTIONS

In this secton of the report, data from interviews with directors of state-run residential institutions for children are presented. Twenty-seven directors of state-run residential institutions were interviewed, including nine directors in three regions of Kazakhstan. The interviews focused on issues of violence against children in state-run residential institutions, including their experiences with children running away from and committing suicide in institutions.

It is important to note that most directors generally denied the occurrence of violence against children in their institutions, either among children or by staff. They also tended to deny that children runaway from their institutions and commit acts of suicide in their institutions. These assertions contradict the findings from the survey of 997 children presented in Chapter 3, findings from the survey of 633 staff presented in Chapters 4 and 5, and interviews with youth graduates presented in Chapter 6. Thus, it is obvious from the findings in this section that directors were extremely reluctant to honestly reveal the state of affairs in their institutions as it relates to the occurence of violence against children, responses of the director and staff to cases of violence agaisnt children, and directors response to staff that use violence against children; therefore, little weight should be given to the findings from interviewers with directors.

Violence against children in institutions

Directors of institutions were asked about the occurrence of violence agianst children in their institutions, including violence among children and staff use of violence against children. Table 7.1 reveals that overall, only 51.9% of the 27 directors reported incidents of violence among children in their institutions (48.1% of directors reportedno such incidents of violence among children occur in their institutions). More specifically, directors ofinfant homes (66.7%) and institutions for children with psycho-neurological and severe disabilities (100.0%) were most likely to report incidents of violence among children in their institutions. Whereas, very few directors of orphanages (44.4%), shelters (33.3%), special correctional institutions of education (33.3%), and institutions for children with deviant behavior (33.3%) reported incidents of violence among children in their institutions.

Table 7.1 also reveals that overall, only 40.7% of directors reported having problems with staff treating children in their institutions badly/poorly (55.5% of directors reported they had no problems with staff treating children badly/poorly). More specifically, directors of orphanages (66.7%) and institutions for children with deviant behavior (66.7%) were most likely to report problems with staff treating children badly/poorly. Whereas, very few directors of infant homes (16.7%), special corrections institutions of education (33.3%), and institutions for children with psycho-neurological and severe disabilities (33.3%) reported problems with staff treating children badly/

Table	7.1.	Occurrence	of	violence	against
childre	n by	type of instit	utio	n	

	amon dren	ence g chil- in the ution	of vio agains dren	fuse lence st chil- in the ution
	N	%	N	%
All institutions (total)	14	51.9	11	40.7
Infant homes	4	66.7	1	16.7
Orphanages	4	44.4	6	66.7
Shelters	1	33.3	0	0.0
Special correctional institutions of education	1	33.3	1	33.3
Institutions for children with psycho-neurological/severe disabilities	3	100.0	1	33.3
Institutions for children with deviant behavior	1	33.3	2	66.7

Table 7.2. Staff fired for use of violence against children by type of institution

cimarcii by type or montanon							
	Staff were fired because they treate children badly/poor						
	N	%					
All institutions (total)	14	51.9					
Infant homes	1	16.7					
Orphanages	6	66.7					
Shelters	1	33.3					
Special correctional institu- tions of education	2	66.7					
Institutions for children with psycho-neurological/ severe disabilities	2	66.7					
Institutions for children with deviant behavior	2	66.7					

poorly. Surprising, all shelter directors reported they had no problems with staff treating children badly/poorly.

It is important to note that directors operating institutions with some of the highest rates of violence against children were most likey to deny the occurrence of violence among children and staff use of violence against children in their institutions.

The findings in Table 7.1 clearly contradict the findings obtained from surveys of 997 children and 633 staff in the same institutions as presented in Chapters 3 through 5 which revealed that all institutions included in the study had problems with violence among children and staff use of violence agianst children (e.g., harsh verbal abuse, psychological abuse, and moderate to severe physical violence). The findings in Table 7.1 also contradict the findings obtained from interviews with 40 youth graduates where youth provided many detailed accounts of violence among children and by staff that they experienced while growing up in the state-run residential institutions (those same institutions included in this study). Thus, these contradictory findings reveal that directors were not being forthright about the prevalence of violence against children in their institutions, and were trying to hide the full nature and extent of the problem.

We also asked directors if they ever had to fire or let staff go because they treated children badly/poorly. Table 7.2 reveals that 51.9% of directors reported they had to fire staff because they treated children badly/poorly. This finding contradicts the finding in Table 7.1 that only 40.7% of directors reported they had problems with staff treating children poorly/badly. Clearly some of the directors' responses are contradictory which provides evidence that directors were not forthright about staff use of violence against children in the institutions.

Registration of incidents of violence against children in institutions

Directors were also asked if incidents of violence among children in the institution are registered or recorded. Table 7.3 reveals that overall, 88.9% of the 27 directors reported that incidents of violence among children in their institution are registered or recorded. More specifically, all of the directors of infant homes, shelters, and special correctional institution of education reported that incidents of violence among children in the institution are registered or recorded. In comparison, only 88.9% of directors of orphanages, 66.7% of directors of institutions for children with psycho-neurological and severe disabilities, and 66.7% of directors of institutions for children with deviant behavior reported cases of violence among children in the institution are registered or recorded.

Table	7.3.	Regist	rationof	cases	of	violence
agains	t chil	dren by	type of	institu	tior	1

agamet cimal cir by ty				
	lence child the in tion regis	of vio- among Iren in nstitu- n are tered/ orded	staff violed the ir tion regist	es of use of nce in nstitu- n are tered/ orded
	N	%	N	%
All institutions (total)	24	88.9	12	44.4
Infant homes	6	100.0	3	50.0
Orphanages	8	88.9	4	44.4
Shelters	3	100.0	1	33.3
Special correctional institutions of education	3	100.0	1	33.3
Institutions for children with psycho-neurological/severe disabilities	2	66.7	2	66.7
Institutions for children with deviant behavior	2	66.7	1	33.3

Table 7.3 also reveals that only 44.4% of directors reported that cases of staff use of violence against children are registered or recorded (51.9% of directors reported they do not register or record such cases). More specifically, 66.7% of directors of institutions for children with psycho-neurological and severe disabilities and 50.0% of directors of infant homes reported they register or record cases of staff use of violence against children. Whereas, very few directors of orphanages (44.4%), shelters (33.3%), special correctional institutions of education (33.3%), and institutions for children with deviant

behavior (33.3%) reported registering or recording such cases.

The findings in Table 7.3, along with findings from Tables 7.1 and 7.2, reveal that incidents of violence against children in institutions remain largely hidden because they go unrecorded.

Directors were also asked if they could tell us how many cases of violence against children were officially recorded in the past year (2010). Table 7.4 reveals that overall, only 25.9% of the 27 directors could tell us how many cases of violence among children were officially recorded in 2010 (74.1% of directors reported they could not tell us how many of such cases were officially recorded), and only 11.1% of directors could tell use how many cases of staff use of violence against children were officially recorded in 2010 (85.2% of directors reported they could not tell us how many cases of staff us of violence against children were officially recorded). Thus, the majority of directors in each of the different types of institutions reported the could not tell us how many cases of violence against children (either violence among children or violence by staff) were officially recorded in 2010. These findings are interesting, particularly in light of the fact that 88.9% of directors reported incidents of violence among children were officially recorded, and 44.4% of directors reported cases of staff use of violence against children were officially registered or recorded (see Table 7.3). The

Table 7.4. Number of cases of violence against children recorded in the past year by type of institution

	many of vio amon dren reco the	ell how cases lence g chil- were rded past	many of sta of vio agains dren	lence st chil- were ed the
	N	%	N	%
All institutions (total)	7	25.9	3	11.1
Infant homes	0	0.0	0	0.0
Orphanages	3	33.3	2	22.2
Shelters	1	33.3	0	0.0
Special correctional institutions of education	1	33.3	0	0.0
Institutions for children with psychoneurological/severe disabilities	1	33.3	1	33.3
Institutions for children with deviant behavior	1	33.3	0	0.0

findings from Table 7.4 reveal that it is most likely that incidents of violence against children in instituions are not really registered or recorded.

Among directors that were able to provide us with the numbers of cases of violence agianst children recorded in the past year, the following numbers were provided. Only one director of an institution for children with psycho-neurological and severe disabilities reported 12 cases of violence among children in 2010 (the other two directors of institutions for children with psycho-neurological and severe disabilities reported nosuch cases were recorded in 2010). Also, only one director of an institution for children with psychoneurological and severe disabilities reported one case of staff use of violence against children in 2010 (the other two directors of institutions for children with psycho-neurological and severe disabilities reported no such cases were recorded in 2010).

Among orphanages, only one orphanage director reported three cases of violence among children and another orphanage director reported 13 cases of violence among children in 2010 (the other seven orphanage directors reported no cases of violence among children in 2010). Also, two orphanage directors reported on case each of staff use of violence against children in 2010 (the other seven orphanage directors reported no cases of staff use of violence against children in 2010).

Among shelter directors, only one shelter director reported six cases of violence among children in 2010 (the other two shelter directors reported no cases of violence among children in 2010).

Finally, among special correctional institutions, only one director of a special correctional institution of education reported five cases of violence among children in 2010 (the other two directors of special correctional institutions reported nocases of violence among children in 2010). Directors of infant homes and institutions for children with deviant behavior reported there were nocases of violence against children (either among children or by staff) recorded in 2010. The figures reveal that incidents of violence against children in instituions are not really registered or recorded, and the problems remains largely hidden.

Policies that regulate reporting of cases of violence against children in institutions

Directors were also asked if they were actually required by official policy or regulation to report cases of violence against children in their institutions. Table 7.5 reveals that overall, only 37.0% of directors reported they are required by official policy or regulation to record cases of violence among children in their institutions, and only 18.5% of directors reported they are required by official policy or regulation to report cases of staff use of violence against children in their institutions. In other words, the majority of directors reported they are not required by official policy or regulation to report cases of violence against children in their institutions (either violence among children or violence against children by staff).

When directors were asked to identify which official policy or regulation mandates that they report cases of violence against children in institutions, the majority of directors were unable to identify or name any official policy or regulation. However, nearly half of infant home directors thought it was a requirement of the "Law on the Rights of the Child." Two orphanage directors thought the requirement was in the "Law on Marriage and Family" or the "Law on the Rights of the Child." Some directors maintained the requirement was only outlined in an internal document.

In addition, when directors were asked to identify which official policy or regulation mandates that they report cases of staff use of violence against children, the majority of directors were unable to identify or name any official policy or regulation. Several directors thought this requirement was outlined in of the following laws/regulations: "Labor Code of the Republic of Kazakhstan," the "Law on the Rights of the Child," or the "Law on Marriage and Family." Some directors maintained the requirement was only outlined in internal documents, such as rules of ethical behavior of employees and/or internal job descriptions.

Table 7.5. Required by official policy/ regulation to report cases of violence against children by type of institution

	by of polic report of vic	uired ficial cy to cases lence ong dren	official to re staff of vio aga	red by policy port use lence inst dren
	N	%	N	%
All institutions (total)	10	37.0	5	18.5
Infant homes	3	50.0	2	33.3
Orphanages	5	55.6	3	33.3
Shelters	0	0.0	0	0.0
Special correctional institutions of education	1	33.3	0	0.0
Institutions for children with psychoneurological/severe disabilities	0	0.0	0	0.0
Institutions for children with deviant behavior	1	33.3	0	0.0

There is a clear lack of knowledge among directors as to any official policy or regulation that mandates reporting cases of violence against children in institutions, which explains why so few directors (11% to 25%) could tell us how many cases of violence against children (either among children or by staff respectively) were officially recorded in 2010. Moreover, it explains why so few cases of violence against children (either among children or by staff) were recorded in 2010.

Several directors did indicate there is a need for the development of official policies, regulations, and protocols for recording incidents of violence against children in institutions, particularly staff use of violence against children, but also violence among children. Some directors also reported they need more information and clarification of the different forms of violence against children, as well as guidance on the forms of discipline that should be handed down to staff that commit acts of violence against children.

Discuss problems of violence with child victims

To understand how directors handle problems of violence against children, we asked directors if they make an effort to discuss problems of violence with child victims. Table 7.6 reveals that overall, 85.2% of directors reported they make an effort to discuss problems of violence with child victims. All directors of institutions, except directors of infant homes (33.3%) reported discussing problems of violence with child victims.

Table 7.6. Discuss problems of violence with child victims by type of institution

When you have a child that has been the victim of violence by other children or staff, do you make an effort to discuss the problem with the child?

effort to discuss the problem with the child?					
	N	%			
All institutions (total)	23	85.2			
Infant homes	2	33.3			
Orphanages	9	100.0			
Shelters	3	100.0			
Special correctional institutions of education	3	100.0			
Institutions for children with psycho-neurological/severe disabilities	3	100.0			
Institutions for children with deviant behavior	3	100.0			

Refer child victims to professional intervention or support

We also asked directors if they referred child victims for professional intervention or support. Table 7.7 reveals that 81.5% of directors reported they refer children who have been victims of violence in the institution(either by other children or staff) for professional intervention or support. Directors also revealed that the professional intervention or support children typically received was from institution psychologists and/or educators, and typically included individual conversations and practical advice on how to prevent and resolve conflicts.

Table 7.7. Refer child victims to professional intervention/support by type of institution

	Refer child victims of violence (by other children or staff) for professional intervention/ support		me how childre referre profes interve in the	ou tell w many n were ed for ssional ention e past ar?	
	N	%	N	%	
All institutions (total)	22	81.5	7	25.9	
Infant homes	2	33.3	1	16.7	
Orphanages	9	100.0	1	33.3	
Shelters	3	100.0	2	22.2	
Special correctional institutions of education	3	100.0	2	66.7	
Institutions for children with psycho-neurological/severe disabilities	3	100.0	0	0.0	
Institutions for children with de- viant behavior	2	66.7	1	33.3	

Table 7.7 also reveals that overall, only 25.9% of directors could actually tell us how many children were referred for professional intervention or support in the past year (2010). This is most likely because records of referrals are not kept by directors or staff. Only the majority of directors of special correctional institutions of education (66.7%) were able to tell us how many children were referred for professional intervention or support in 2010.

Table 7.8. Staff training on violence against children by type of institution								
	any specific identifying ar to problems	our staff have training on nd responding s of violence children	Do you or your staff hav any specific training or identifying and respondi to problems of violence against children					
	N	%	N	%				
All institutions (total)	20	74.1	24	92.3				
Infant homes	3	50.0	4	80.0				
Orphanages	7	77.8	8	88.9				
Shelters	2	66.7	3	100.0				
Special correctional institutions of education	3	100.0	3	100.0				
Institutions for children with psycho-neurological/ severe disabilities	2	66.7	3	100.0				
Institutions for children with deviant behavior	3	100.0	3	100.0				

Staff training on violence against children

Table 7.8 reveals that overall, the majority of directors (74.1%) reported they themselves and/or their staff had received training on identifying and responding to problems of violence against children. This finding contradicts findings from the survey of staff in Chapters 4 and 5, where only 29% of staff in infant homes, 37% of staff in institutions for children with psycho-neurological and severe disabilities, and 44% of staff in special correctional institutions of education reported they have received training on violence against children. Thus, it appears that directors may have over reported the training of staff on issues of violence against children. Moreover, many of the directors reported they could not remember when the training occurred, who conducted the training, or what was covered in the training. Among those directors that were able to explain the training they received, it appears that most of the trainings consisted of a one-day seminar on the subject of violence prevention and was offered only to institution administrators, medical staff, and teachers; not all staff in the institutions.

Table 7.8 also reveals that 92.3% of directors reported they have programs focused on educating staff about child rights or how to ensure the healthy development of children.

Coordination mechanisms for responding to violence against children

Table 7.9 reveals that directors reported using a variety of coordination mechanisms to respond to cases of violence among children in institution. Overall, 92.0% of directors reported having meetings with staff to discuss cases of violence among children. In addition, 68.0% of directors reported coordinating with psychologists, 64.0% coordinated with doctors, and 52.0% coordinated with the police and social workers on cases of violence among children. Few directors (36.0%) reported coordinating with children's parents/guardians regarding cases of violence among children. Table 7.9 reveals significant variation between the different types of institutions in the use of each of these coordinating mechanisms to respond to cases of violence among children.

In regard to coordination mechanisms related to cases of staff use of violence against children, Table 7.10 reveals that overall, 92.0% of directors reported having meetings with staff to discuss cases of staff use of violence against children. In addition, 60.0% of directors reported coordinating with psychologists, and 52.0% of directors coordinated with doctors in cases of staff use of violence against children. Fewdirectors reported coordinating with social workers (48.0%), police (44.0%), and children's parents/guardians (32.0%) related to cases of staff use of violence against children. It is interesting to note that directors were much less likely to coordinate with police (44.0%) in cases of staff use of violence against children compared to cases of violence among children (52.0%). One would expect the opposite. Table 7.10 also reveals significant variation between

Table 7.9. Coordination mechanisms to respond to cases of violence among children by type of institution Coordination with children'sparents/guardians on cases with the police on Coordination with Coordination with Coordination with social workers on psychologists on cases doctors on cases Meetings with staff to discuss Coordination cases cases Ν Ν % Ν % Ν % Ν % Ν % All institutions (total) 23 92.0 13 52.0 16 64.0 13 52.0 17 68.0 9 36.0 2 40.0 Infant homes 4 80.0 1 20.0 3 60.0 1 20.0 40.0 2 7 Orphanages 87.5 5 62.5 4 50.0 3 37.5 6 75.0 5 62.5 **Shelters** 3 100.0 2 66.7 2 66.7 2 66.7 2 66.7 0 0.0 Special correctional 3 100.0 100.0 100.0 100.0 3 100.0 33.3 1 institutions of education Institutions for children with psycho-neurological/severe 3 100.0 0 0.0 2 66.7 2 66.7 2 66.7 0 0.0 disabilities Institutions for children with 3 2 2 2 2 1 100.0 66.7 66.7 66.7 66.7 33.3 deviant behavior

Table 7.10. Coordination mechanisms to respond to cases of staff use of violence against children by type of institution												
	Meetings with staff	to discuss cases	Coordination with	the police on cases	Coordination with	doctors on cases	Coordination with	social workers on cases	Coordination with	psychologists on cases		children's parents/ guardians on cases
	N	%	N	%	N	%	N	%	N	%	N	%
All institutions (total)	23	92.0	11	44.0	13	52.0	12	48.0	15	60.0	8	32.0
Infant homes	4	80.0	1	20.0	2	40.0	2	40.0	2	40.0	2	40.0
Orphanages	7	87.5	4	50.0	4	50.0	3	37.5	5	62.5	2	25.0
Shelters	3	100.0	2	66.7	2	66.7	2	66.7	2	66.7	2	66.7
Special correctional institutions of education	3	100.0	2	66.7	2	66.7	2	66.7	3	100.0	1	33.3
Institutions for children with psycho-neurological/severe disabilities	3	100.0	0	0.0	1	33.3	1	33.3	1	33.3	0	0.0
Institutions for children with deviant behavior	3	100.0	2	66.7	2	66.7	2	66.7	2	66.7	1	33.3

the different types of institutions in the use of each of these coordinating mechanisms to respond to cases of staff use of violence against children.



Child suicides in institutions

Directors were also asked about instances of suicide in their institutions. Table 7.11 reveals that overall, only 16.0% of directors reported having children attempt or commit suicide in their institutions. When directors were asked how many suicides they had in the past year (2010), only one orphanage director reported three suicide attempts or suicides in 2010, and one shelter director reported one child suicide attempt to suicide in 2010. One director revealed a child attempted to hang themselves, but the suicide was prevented. In addition, another director revealed that children committed suicide by cutting or bloodletting.

The findings in Table 7.11 clearly contradict the findings obtained from the surveys of 997 children and 633 staff in the same institutions, as presented in Chapters 3 through 5, which revealed that all institutions included in the study had problems with children engaging in acts of self-harm or suicide. Children and staff revealed the rates of child suicides were much higher in institutions than directors revealed. Clearly most of the directors were not forthright about staff use of violence against children in the institutions.

Table 7.11. Child suicides by type of institution						
	Have you had instances in the institution where a chattempted suicide or committed suicide?					
	N %					
All institutions (total)	4	16.0				
Infant homes	0	0.0				
Orphanages	1	12.5				
Shelters	1	33.3				
Special correctional institutions of education	0	0.0				
Institutions for children with psycho-neurological/ severe disabilities	1	33.3				
Institutions for children with deviant behavior	1	33.3				

CHAPTER 8:

RECOMMENDATIONS

The following recommendations are guided by the human rights obligations of the Government of Kazakhstan under the Convention on the Rights of the Childe (CRC) and the UN World Report on Violence Against Children. The CRC recognizes that children should ultimately grow up in a family environment, except when it is in the child's best interest that alternative arrangements be made, in which case it is the State's responsibility to provide special protection for children that are deprived of a family environment. The increased risk of violence against children in residential institutions adds to the State's obligations to develop effective legislation and other measures to protect children in residential institutions from violence (1). The CRC also specifically addresses the rights of children with disabilities, and recognizes that segregation and institutionalization of children with disabilities is not justified, despite the fact that children with disabilities are frequently institutionalized (2).

Findings from this study reveal that violence among children in institutions is a serious problem. Nearly 43% of children in shelters and 50% of children in orphanages and institutions for children with deviant behavior reported witnessing violence among children in the institutions (see Chapter 3). In addition, 40% of staff working in infant homes, 69% of staff in institutions for children with psycho-neurological and severe disabilities, and 80% of staff in special correctional institutions of education reported witnessing violence among children in the institutions (see Chapters 4 and 5). At the same time, both children and staff revealed that violence against children by staff is also a serious problem in institutions. In particular, 26% of children in shelters, 35% in orphanages and 41% in institutions for children with deviant behavior reported witnessing staff use of violence against children in institutions (see Chapter 3). In addition, nearly 22% of staff in infant homes, 51% of staff in institutions for children with psycho-neurological and severe disabilities, and 56% of staff in special correctional institutions of education reported witness staff use of violence against children in institutions. Moreover, 25% to 53% of staff supported the use of corporal punishment against children in institutions.

According to the CRC and the UN World Report on Violence Against Children, the State has an obligation to protect children from all forms of violence, wherever they are placed and irrespective of who is responsible for their care and protection. To effectively prevent and address violence against children in residential institutions, a range of actions must be taken, and a variety of organizations and stakeholders need to be involved.

The recommendations that follow can serve as a guide for developing a comprehensive national action plan for the prevention and elimination of all forms of violence against children in residential institutions of care. Such a policy should be developed to include the identification of the primary responsible ministries and the coordination of all actions with other governmental bodies, NGOs, and other civil society organizations.

Legislative action

Chapters 4 and 5 reveal that very few staff (8% to 27%) reported that acts of violence against children that occur in the institutions are registered or recorded. In addition, very few staff were aware of any official written documents that regulate staff conduct in the institutions (27% to 33%) or regulations for disciplining staff that use violence against children in the institutions (47% to 51%). Chapter 7 also reveals that only 37% of directors reported they are required by official policy to report cases of violence among children, and 18% reported they are required by official policy to report staff use of violence against children. Very few directors were able to identify

which official policy or regulation mandates that they report cases of violence against children.

According to the UN World Report on Violence Against Children, it is of "utmost importance" that all children placed in institutional care systems should be protected from allforms of violence (3). This requires a clear legal framework and a range of policies and regulations that prohibit all forms of violence against children in residential institutions, including corporal punishment and other forms of cruel and degrading punishment, and requires mandatory reporting of incidents of violence against children, as well as running away and self-harm/suicide.

Recommendation 1: Ensure legislationexists that prohibits all forms of violence against children in residential institution, including corporal punishment and others forms of cruel and degrading punishment

The UN World Report on Violence Against Children notes that laws on criminal assault are seldom interpreted as prohibiting physical chastisement or corporal punishment, and all other forms of cruel or degrading punishment of children in residential institutions for children (4). In fact, findings from this study reveal that legislation to effectively address violence against children in residential institutions either does not exist or may exist, but is not effectively implemented or applied in cases of violence against children in residential institutions. These findings demonstrate that there needs to be a careful analysis of legislation that regulates the protection and care of children in residential institutions, governs staff conduct and treatment of children in residential institutions, criminalizes all forms of violence against children in residential institutions, including physical chastisement or corporal punishment, along with all other forms of cruel and degrading punishment of children in residential institutions and alternative family settings where children are cared for and reside (e.g., special schools for children, boarding schools for children, shelters for children, and institutions for disabled, orphaned, and wayward/troubled children).

There also needs to be a careful analysis of legislation that regulates the response to violence against children in residential institutions. Based upon findings from this analysis, legislation may need to be established or modified and/or existing legislation identified and monitored for implementation that prohibits all forms of violence against children and corporal punishment, as well as establishes a formal code of conduct for directors and staff, specifies reasons for and processes of disciplining and dismissing of directors and staff found to either commit and/or ignore incidents of violence against children in institutions (either among children or by staff). It is important that such legislation be consistent with the CRC and other human rights instruments (5).

These findings demonstrate that the Government of Kazakhstan needs to implement not only legislation, but also mechanisms that ensure effective and consistent implementation of legislation that addresses violence against children in residential institutions, and more broadly the protection and care of children in residential institutions. For legal reform to be effective and achieve the intended goal, advice and training will be needed to all those who work in residential institutions for children (e.g., directors, educators, psychologists, pedagologists, medical and health care professionals, and others) and all those involved in child protection systems (e.g., child protection officials/civil servants, social workers, police, prosecuting authorities, and court staff and judges) (6).

The aim should be to stop directors and staff from using violence or other cruel or degrading punishment – harsh verbal abuse, psychological abuse, moderate and severe physical violence – against children and from neglecting children. The focus should be on using effective interventions that address the various underlying risk factors that contribute to violence against children in residential institutions (7).

It is also important that the Government of Kazakhstan work in collaboration with international organizations and local nongovernmental organizations or civil society organizations to develop mechanisms to ensure systematic and consistent monitoring of the implementation of legislation and regulations that address violence against children in residential institutions (8).

Recommendation 2: Mandatory reporting of incidents of violence against children, running away, and self-harm/suicide in residential institutions

Effective legislation should include mandatory registration, recording, and reporting of incidents of violence against children in residential institutions, as well as incidents of running away and self-harm/suicide among children in institutions. It is important that any legislation and policies related to mandatory reporting provide a clear definition of reportable cases or suspicions of violence against children, sanctions for failure to report, and protection from civil, criminal, and administrative proceedings for all who report in good faith well founded suspicions of cases of violence against children that may turn out not be true.

Effective complaint procedures should also include the establishment of independent bodies (outside of the institutions) that are responsible for dealing with complaints and provide the complaining child and/or staff with protection from negative reactions from other children and staff in the institution. These independent bodies could operate at the regional level or at the local level depending on the numbers of institutions per region. It is also important that the

Committee on the Rights of the Child be involved in the complaint process.

In addition, there should be mandatory investigation by competent bodies of reported incidents of violence against children, running away, and self-harm/suicide. Legislation should ensure that institutions no longer operate as closed setting, without accountability; thus, effective monitoring and reporting systems of competent bodies (including independent agencies such as human rights institutions and ombudspersons) should be established in law, with the power to demand ongoing information on conditions of children and conditions in the institutions, and to investigate and redress allegations of violence against children, running away, and self-harm suicide (9).

Protecting children from violence

According to the UN World Report on Violence Against Children, it is of utmost importance that childrenplaced in institutional care systems are protected from allformsof violence (10). To accomplish this goal, institutional reform must take place in Kazakhstan. The focus should be on improving institutional environments with a focus on: improving staff attitudes toward institutionalized children through selection and training; monitoring and investigating incidents of violence against children in institutions; and establishing a process for staff and children in institutions to file complaints related to violence against children.

Recommendation 3: Staff selection, training, compensation, and accountability

Given the high levels of violence against children documented in this study (including violence among children and staff use of violence against children) it is crucial that the Government ensure that directors and staff who work in residential institutions of care should be qualified and fit to work with children and youth. Directors and staff should be carefully selected, undergo criminal record background checks, receive appropriate training and necessary supervision, be fully qualified, and receive adequate wages related to their professional status (11).

All directors and staff that work in residential institutions for children must be well-trained in:

- Legislation and regulations related to child rights, child protection and care, and violence against children
- · Code of conduct for directors and staff
- Regulations for discipline and dismissal of directors and staff
- Registration, recording, and reporting
- Forms of violence against children and impact on children

- Children with special needs and vulnerable populations
- Running away and self-harm among children
- Non-violent teaching, learning, discipline and communication
- Violence prevention in institutions
- Whistle blowing

Findings from this study revealed that only 29% to 44% of staff reported they received training on how to identify or respond to violence against children. Training, however, is not enough; it is important that directors and staff also be regularly supervised and held accountable for their actions, including disciplined for inappropriate conduct and interactions with children/youth.

Recommendation 4: Monitoring and investigation of incidents of violence against children in institutions

The risk for injury and damage to a child's physical and mental health, social and psychological wellbeing and development, and academic achievement increases with the frequency and severity of child abuse and neglect. Therefore, it is extremely important that cases of violence against children in residential institutions be identified as soon as possible, and that appropriate intervention be provided to bring an end to the violence. It is also important that incidents of children running away and engaging in self-harm/ suicide be monitored and investigated because as this study revealed, children that run away and engage in self-harm were significantly more likely to report that conditions in the institution were bad/very bad, to fear other children and staff in the institution, to witness violence among children and staff use of violence against children, to experience physical victimization from other children and staff, and to experience neglect in the institution (see Chapter 3). Thus, running way and self-harm/suicide serve as important warning signs for violence against children and other problems in institutions.

In keeping with recommendation outlined in the UN World Report on Violence Against Children, all residential institutions for children should be independently inspected and monitored by qualified bodies with full access to the facilities and freedom to interview children and staff in private. These bodies should have the power and capacity to monitor conditions and investigate any allegations of violence in a timely manner, while respecting children's privacy rights (12).

Recommendation 5: Ensure effective complaint, investigation, and enforcement mechanisms

Findings from this study revealed that a significant proportion of children and staff were willing to report problems of violence against children in institution, as well as problems of children running away from the institution and engaging in acts of self-harm/ suicide when they are able to do so anonymously and confidentially (see Chapters 2, 3, 4 and 6). Obviously, few of these cases of violence against children came to the attention of the director or were registered, recorded, or reported (see Chapter 7).

In keeping with recommendations outlined in the UN World Report on Violence Against Children, children in residential institutions should have simple, accessible and safe opportunities to complain about the way they are treated without risk of reprisal or fear of retribution. Children should also have opportunities to express themselves freely and verbalize their concerns, and have access to legal advocates and the courts when necessary (13).

It is important that when directors and staff identify a suspected case of violence against children that they be required by law to report their suspicions to authorities, or should be expected to do so irrespective of legal obligation. To be effective, reporting must be matched with effective investigation. It is crucial that all complaints of violence be investigated thoroughly and promptly, safeguarding 'whistleblowers' from reprisals and retribution (14).

It is also important that effective sanctions be made against perpetrators of violence. In cases of staff use of violence against children, the Government should adopt and apply a continuum of appropriate criminal, civil, administrative and professional proceedings and sanctions against individuals who are responsible for violence against children in institutions, as well as against those who are responsible for managing institutions where violence takes place (15). Violence against children will never be fully eliminated as long as perpetrators believe that they can get away with it (16).

As outlined in Recommendation 2, effective complaint, investigation, and enforcement mechanisms should include the establishment of independent bodies (outside of the institutions) that are responsible for taking and investigating complaints, and providing the complaining child and/or staff with protection from negative reactions from other children and staff in the institution.

Recommendation 6: Ensure response mechanisms to child victims of violence

In keeping with recommendations form the UN World Report on Violence Against Children, children affected by violence must receive appropriate care, support and compensation. Children who have been subjected to violence (either previous to or subsequent to their placement) should also receive appropriate medical and mental health care. Appropriate interventions can include educational and psycho-social support, or psychotherapy. Special attention should be given to restoring children's confidence in relationships as an important part of the healing process (17).

Prevention

Research continues to show that violence against children can be prevented. The key is to ensure national legislation and policies are coupled with prevention programs aimed at the public, including children and staff in institutions in particular.

Recommendation 7: Develop awareness raising prevention campaign related to violence against children

In cooperation with relevant civil society organizations (such as NGOs) and UNICEF the Government of Kazakhstan should develop and conduct campaigns to inform the general public about the negative consequences and costs of violence against children, and alternative ways to correct and discipline children. Similar awareness raising prevention programs should also be developed and conducted specifically for children and staff in residential institutions for children and alternative family settings where children are cared for and reside (e.g., special schools for children, boarding schools for children, shelters for children, and institutions for disabled, orphaned, and wayward/troubled children).

Prevention programs should include the use of media such as state radio and television, newspapers, and the information bulletinss. Other creative media, such as cartoons, documentary films, comic books, posters that have an emotional impact and a mobile theatre group that performs skits about violence against children can be used to promote change in residential institutions for children and rural areas whwere mass media are not readily available.

Public health experience shows that general public awareness campaigns may have little effect by themselves, and must be accompanied by focused outreach and policy changes.

Recommendation 8: Develop anti-violence programs for children/youth in residential institutions for children

Efforts to address violence against children in residential institutions for children should involve children/youth that reside in institutions. Children/youth in institutions should be actively involved in efforts to change the institutional environment and to create an environment free of violence. To accomplish this objective, education and programming should be developed specifically for children/youth, including:

- Education child rights, violence against children, the negative consequences and costs of violence against children, and alternative ways to correct and discipline children.
- Interactive and role playing education designed to teach children/youth methods of non-violent communication and discipline, with a focus on encouraging children/youth to effectively

- communicate their emotions, feelings, needs, and desires, and have an increased understanding of non-violent communication and conflict resolution.
- Education on violence prevention and non-violent conflict resolution with the goal of creating a violence-free environment in residential institutions for children.
- Education on how to register, record, and report incidents of violence against children that occur in institutions, including violence among children and violence by staff against children. Also, information on how children/youth can have access to monitoring and reporting agencies, including the National Human Rights Centre (Ombudsman) and protections for children/youth that whistle blow about cases of violence among children and staff use of violence against children in institutions.
- Social and life skills education for youth, with a
 focus on promoting healthy alternatives to risky
 behaviors through activities that are designed to
 teach children/youth to:develop the necessary
 skills to resist social/peer pressure to engage in
 risky behaviors; increase their knowledge of the
 immediate consequences of alcohol and substance
 abuse; help students to develop greater selfesteem and self-confidence; enable students to
 effectively cope with anxiety; enhance behavior
 skills to live a healthy lifestyle.
- Job skills training and career development for older youth to prepare and assist them in the transition to independent living after life in the institution.
- Child care and parenting skills education for older youth to help assist and prepare them for family life and their future roles as parents and caregivers.

The abovementioned education and programming for children/youth should involve coordination between government bodies, NGOs, and other civil society organizations.

Data collection

Recommendation 9: Improve data collection and analysis on violence against children in residential institutions

This assessment was one of the first important efforts to collect reliable data on the nature and prevalence of violence against children in state-run residential institutions for purposes of policy development; policy is always improved when it is based upon reliable data. Thus, it is important to strengthen data collection efforts related to all forms of violence against children, including running away and self-harm/suicide in institutions. Governments should also ensure that all placements and movements of children between institutions are systematically recorded, reported, and published. It would be beneficial if such data is disaggregated by type of

institution and region, as well as children's sex, age, disability status, and reasons for placement (18).

It is also important that information on violence against children in institutions be collected through confidential exit interviews with all children leaving such institutions, in order to measure progress in ending violence against children (19).In fact, findings from this study revealed that interviews with graduates residing in youth homes were extremely useful in revealing the nature and prevalence of violence against children (either among children or by staff) in state-run residential institutions, patterns of children running away and engaging in self-harm, and the negative effects of institutionalization on children (see Chapter 6).

It is important that data collection and analysis be carried out by different key stakeholders, including government agencies, commissions, and independent bodies. Many key stakeholders will likely need capacity building on data collection and analysis related to violence against children.

Advocacy

Recommendation 10: Promote a public dialogue about violence against children in residential institutions

One of the cornerstones of any strategic response to violence against children in residential institutions is to break the silence on the subject matter. A dialogue about issues of violence against children in residential institutions systems needs to take place in political and public spaces where effective solutions can be adequately discussed and implemented (20). Without a public dialogue, involving key government officials and other key stakeholders, it will be difficult to reduce violence against children in residential institutions.

Preventing institutionalization of children

The negative effects of institutionalization are well documented; thus, policies governing the protection and care of children should also reduce the number of children that enter into to various residential institutions, including both state-run and private institutions for children.

Recommendation 11: Ensure institutionalization is a last resort

According to the CRC, institutional care of children should be a "last resort," reserved for children whose needs cannot be met in their own family or an alternative family setting, and placement should be made only after careful consideration of the best interests of the child and an evaluation of his/her long-term needs (21). Thus, the Government should ensure that placement of

children in residential institutions is avoided whenever possible, and a range of alternatives should be available for both care and justice systems (22). Using institutionalization as a "last resort" will help to reduce the number of children in residential institutions.

Recommendation 12: Develop alternative systems of family-based care and community-based services

In order to reduce the reliance on institutional care and the number of children in residential institutions. family-based and community-based alternatives must be developed and resources allocated, and strategies for reintegrating children into communities must be in place (23). Findings from this study revealed that children remain in institutional care until 17 or 18 years of age, after which many are sent to live in youth homes until 23 years of age. Youth homes are supposed to serve as a sort of transitional housing for graduates of the institutions; however, youth are provided will few services and little assistance with reintegrating into the community and resolving significant problems related to housing, job skills training, job placement, access to vocational and/or higher education, life skills training, and parenting skills training.

The Government of Kazakhstan in collaboration with donors, international organizations, and nongovernmental organization should support the development of family-based and community-based alternatives to institutional care of children.

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APPENDICES

Appendix Table 1. Specific forms of violence among children witnessed by children by type of institution								
	Orphanages N=812		Shelter N=56		education t	iions of for children nt behavior 129		
	N	%	N	%	N	%		
Witness bullying								
A child bullying another child	173	21.3	14	25.0	39	30.2		
Witness harsh verbal abuse								
A child calling another child names or saying mean things to hurt their feelings or scare them	298	36.7	13	23.2	54	41.9		
Witness psychological abuse								
A child breaking or ruining another child's things on purpose (clothes, toys, personal things)	153	18.8	7	12.5	24	18.6		
A child threatening to physically harm or hurt another child	133	16.4	7	12.5	33	25.6		
Witness physical violence								
A child grabbing, pushing or knocking another child down	234	28.8	12	21.4	36	27.9		
A child hitting, kicking or physically hurting another child	180	22.2	6	16.1	30	23.3		
A child hitting or attacking another child with an object or weapon (stick, belt, knife, or other thingthat hurts)	56	6.9	0	0.0	17	13.2		

Appendix Table 2. Specific forms of violence children witness staff using on children by type of institution							
	Orphanages N=812		Shelter N=56		Institutions of education for childrer with deviant behavior N=129		
	N %		N	%	N	%	
Harsh verbal abuse							
Swear at or curse children or call them names (idiot, stupid, bastard)	128	15.8	8	14.3	37	28.7	
Say mean things to children to hurt their feelings or scare them	105	12.9	3	5.4	26	20.2	
Psychological abuse							
Prevent children from using the toilet	53	6.5	4	7.1	10	7.8	
Break or ruin a child's things on purpose (clothes, toys, personal things)	37	4.6	1	1.8	8	6.2	
Act in a way that made you afraid that you might be physically hurt	74	9.1	2	3.6	20	15.5	
Lock children in a room or small place for a long time	38	4.7	3	5.4	3	2.3	
Tie children up or chain them to something	12	1.5	0	0.0	3	2.3	
Moderate physical violence							
Pinch children	107	13.2	2	3.6	13	10.1	
Twist children's ears	128	15.8	6	10.7	22	17.1	
Twist children's arms	36	4.4	0	0.0	11	8.5	
Severe physical violence							
Shake children	65	8.0	4	7.1	15	11.6	
Slap children in the face or on the head	98	12.1	4	7.1	24	18.6	
Slap children on the buttocks, back, leg or arm	119	14.7	4	7.1	21	16.3	
Grab, push or knock children down	37	4.6	1	1.8	15	11.6	
Hit or kick children	53	6.5	1	1.8	18	14.0	
Hit children with a hard object or weapon (stick, belt, whip, ruler, or other thing that hurts)	65	8.0	2	3.6	13	10.1	
Hit children so hard that they had marks or were injured	60	7.4	2	3.6	12	9.3	
Burn children with cigarettes or other hot items	14	1.7	0	0.0	5	3.93	

Appendix Table 3. Specific forms of neglect experienced by children in the institution by type of institution								
	Orphanages N=812		Shelter N=56		Institutions of education for childrer with deviant behavior N=129			
	N	%	N	%	N	%		
Nutritional neglect								
Not given enough food to eat and went hungry	50	6.2	3	5.4	7	5.4		
Clothing neglect								
Have to wear dirty or torn clothes	30	3.7	1	1.8	9	7.0		
Have to wear clothes that were not warm enough in the winter or too warm in the summer	70	8.6	12	9.3	3	5.4		
Have to wear clothes that were the wrong size (too big or too small)	95	11.7	6	10.7	18	14.0		
Supervision neglect								
Locked in your room all night without adult supervision	17	2.1	1	1.8	3	2.3		
Medical neglect								
Not taken care of when you were sick (not taken to the doctor or clinic, not given medicine to make you better)	50	6.2	4	7.1	15	11.6		

Appendix Table 4. Children's experiences in institutions by	1					
	Female N=434		Male 1	N=563	Sign	
	N	%	N	%	Jigii	
Conditions in the institution						
Rate conditions in the institutions as very good/good	422	97.2	535	95.0	.08*	
Rate conditions in the institution as bad/very bad	12	2.8	28	5.0		
Feel safe in the institution	385	88.7	497	88.3	.83	
Afraid of children in the institution	27	6.2	50	8.9	.12	
Afraid of staff in the institution	33	7.6	39	6.9	.68	
Witness violence among children in the institution						
Witness violence (all forms)	238	54.8	260	46.2	.01*	
Witness bullying	112	25.8	114	20.2	.04*	
Witness harsh verbal abuse	187	43.1	178	31.6	.00*	
Witness psychological abuse	123	28.3	140	24.9	.22	
Witness physical violence	166	38.2	182	32.3	.05*	
Witness a child physically injured by another child	60	13.8	100	17.8	.09*	
Witness staff use of violence against children in the institution						
Witness violence (all forms)	165	38.0	188	33.4	.13	
Witness harsh verbal abuse	99	22.8	105	18.7	.11	
Witness psychological abuse	71	16.4	90	16.0	.87	
Witness physical violence	132	30.4	154	27.4	.29	
Moderate physical violence	95	21.9	117	20.8	.67	
Severe physical violence	106	24.4	117	20.8	.17	
Witness a child physically injured by staff	29	6.7	44	7.8	.50	
Neglect						
Neglect (all forms)	93	21.4	122	21.7	.93	
Neglect – nutrition	22	5.1	38	6.7	.27	
Neglect – clothing	75	17.3	95	16.9	.87	
Neglect – supervision	4	.9	17	3.0	.02*	
Neglect – medical	32	7.4	37	6.6	.62	
Witness self-harm/suicide						
Heard about/saw another child in the institution purposely hurt themselves because they were unhappy/sad	94	21.7	90	16.0	.02*	
Methods to avoid conflict with others in the institution						
I show aggression toward others	45	10.4	52	9.2	.55	
I protect myself and fight back	109	25.1	150	26.6	.59	
I escape or hide from others	17	3.9	24	4.3	.79	
I attempt to calm them down by doing as they say	93	21.4	92	16.3	.04*	
I report them to the staff/director of the institution	36	8.3	52	9.2	.60	
I ask for protection or help from other children	40	9.2	41	7.3	.27	
I stay away from conflicts with staff	229	52.8	275	48.8	.22	
* Significant differences between girls and boys are based upon	cross-ta	bulation <u>s</u>	and chi	squares		

Appendix Table 5. Specific forms of violence among children staff witnessed in infant homes					
		homes 284			
	N	%			
Witness bullying					
A child bullying another child	31	10.9			
Witness harsh verbal abuse					
A child calling another child names or say mean things to hurt their feelings or scare them	22	7.7			
Witness psychological abuse					
A child breaking or ruining another child's things on purposes (clothes, toys, personal things)	62	21.8			
A child threatening to physically harm or hurt another child	19	6.7			
Witness physical violence					
A child grabbing, pushing or knocking another child down	88	33.0			
A child hitting, kicking, or physically hurting another child	38	13.4			
A child hitting or attacking another child with an object or weapon (stick, belt, knife, or other thing that hurts)	20	7.0			

Appendix Table 6. Specific methods of discipline used by staff in infant homes						
		homes 284				
	N	%				
Positive discipline						
Tell children what not to do	237	83.5				
Approach the counselor or psychologist to solve/discuss the problems with the child	44	15.5				
Harsh verbal abuse						
Swear at or curse children, or call them names (idiot, stupid, bastard)	20	7.0				
Say mean things to children to hurt their feelings or scare them	19	6.7				
Psychological abuse						
Act in a way that made a child afraid that they might be physically hurt/injured	16	5.6				
Give children physical tasks/labor around the institution (clean the toilets, garbage, or Institution	4	1.4				
Prevent children from using the toilet	5	1.8				
Lock children in a room or small place for a long time	6	2.1				
Break or ruin a child's things on purpose (clothes, toys, personal things)	0	0.0				
Moderate physical violence						
Pinch children	10	3.5				
Twist children's ears	14	4.9				
Twist children's arms	0	0.0				
Severe physical violence						
Slap children on the buttocks, back, leg or arm	38	13.4				
Shake children	29	10.2				
Slap children in the face or on the head	9	3.2				
Hit children so hard that they had marks or were injured	6	2.1				
Hit children with a hard object or weapon (stick, belt, whip, ruler, other thing that hurts)	5	1.8				
Grab, push or knock children down	2	.7				
Tie children up or chain them to something	0	0.0				
Hit or kick children	0	0.0				
Burn children with cigarettes or other hot items	0	0.0				

Appendix Table 7. Specific forms of violence among children staff witnessed in institutions by type of institution							
	Institutions for children with psychoneurological and severe disabilities N=206		correc institut educ	cial ctional cions of ation			
	N N	%	N N	%			
Witness bullying	14	/0	14	/0			
A child bullying another child	71	34.5	52	36.4			
Witness harsh verbal abuse							
A child calling another child names or say mean things to hurt their feelings or scare them	86	41.7	92	64.3			
Witness psychological abuse							
A child breaking or ruining another child's things on purposes (clothes, toys, personal things)	91	44.2	71	49.7			
A child threatening to physically harm or hurt another child	68	33.0	58	40.6			
Witness physical violence	Witness physical violence						
A child grabbing, pushing or knocking another child down	111	53.9	86	60.1			
A child hitting, kicking, or physically hurting another child	63	30.6	55	38.5			
A child hitting or attacking another child with an object or weapon (stick, belt, knife, or other thing that hurts)	24	11.7	21	14.7			

Appendix Table 8. Witness staff use of specific types of violence against children by type of institution							
	Institutions for children with psychoneurological and severe disabilities N=206		correc institut educ	ecial Etional Eions of ation 143			
	N	%	N	%			
Positive discipline							
Tell children what not to do	185	89.8	128	89.5			
Approach the counselor or psychologist to solve/discuss the problems with the child	115	55.8	100	69.9			
Harsh verbal abuse							
Swear at or curse children, or call them names (idiot, stupid, bastard)	44	21.4	24	16.8			
Say mean things to children to hurt their feelings or scare Them	39	18.9	28	19.6			
Psychological abuse							
Give children physical tasks/labor around the institution (clean the toilets, garbage, or institution	68	33.0	64	44.8			
Act in a way that made a child afraid that they might be physically hurt/injured	26	12.6	11	7.7			
Break or ruin a child's things on purpose (clothes, toys, personal things)	11	5.3	2	1.4			
Prevent children from using the toilet	10	4.9	3	2.1			
Lock children in a room or small place for a long time	21	10.2	2	1.4			
Tie children up or chain them to something	10	4.9	0	0.0			
Moderate physical violence							
Pinch children	29	14.1	8	5.6			
Twist children's ears	25	12.1	10	7.0			
Twist children's arms	11	5.3	3	2.1			
Severe physical violence							
Shake children	38	18.4	16	11.2			
Slap children in the face or on the head	19	9.2	5	3.5			
Slap children on the buttocks, back, leg or arm	37	18.0	15	10.5			
Grab, push or knock children down	10	4.9	3	2.1			
Hit or kick children	14	6.8	3	2.1			
Hit children with a hard object or weapon (stick, belt, whip, ruler, or other thing that hurts	8	3.9	5	3.5			
Hit children so hard that they had marks or were injured	13	6.3	1	.7			
Burn children with cigarettes or other hot items	0	0.0	0	0.0			

Appendix Table 9. Staff experiences with violence against children in institutions by staff level of education									
	educa	ndary tion or I=134	Educ	tional ation 214	hig educ	nplete her ation =29	Educ	her ation 140	Sign.
	N	%	N	%	N	%	N	%	
Witness violence among children in instit	utions								
Witness violence (all forms)	59	44.0	106	49.5	18	62.1	191	74.6	.00*
Witness bullying	25	18.7	37	17.3	6	20.7	86	33.6	.00*
Witness harsh verbal abuse	28	20.9	46	21.5	8	27.6	118	46.1	.00*
Witness psychological abuse	40	29.9	68	31.8	11	37.9	140	54.7	.00*
Witness physical violence	41	30.6	89	41.6	15	51.7	162	63.3	.00*
Witness a child physically injured by another child	11	8.2	18	8.4	5	17.2	55	21.5	.00*
Witness staff use of violence against child	lren in i	nstitutio	ons						
Positive discipline	104	77.6	187	87.4	23	79.3	246	96.1	.00*
Witness violence (all forms)	36	27.1	68	32.1	7	24.1	133	52.8	.00*
Witness harsh verbal abuse	17	12.7	31	14.5	3	10.3	73	28.5	.00*
Witness psychological abuse	31	23.1	45	21.0	7	24.1	105	41.0	.00*
Witness physical violence	22	16.5	48	22.6	5	17.2	64	25.4	.22
Moderate physical violence	15	11.2	24	11.2	3	10.3	32	12.5	.96
Severe physical violence	18	13.5	39	18.4	5	17.2	55	21.8	.26
Witness a child physically injured by staff	7	5.2	3	1.4	0	0.0	17	6.6	.02*
Support for corporal punishment	46	67.6	51	44.7	9	69.2	57	40.1	.00*
Witness running away and self-harm/sui	cide								
Heard about/saw children run away from the institution	32	23.9	37	17.3	9	31.0	125	48.8	.00*
Heard about/saw a child in the institution purposely hurt themselves because they were unhappy/sad	5	3.7	5	2.3	0	0.0	18	7.0	.05*
Registration of violence against children									
Acts of violence against children that occur in the institution registered/recorded	20	14.9	27	12.6	4	13.8	55	21.5	.09*
Acts of suicide in the institution are registered/recorded	11	12.1	12	11.7	3	17.6	40	29.9	.00*
Official written documents that regulate	staff cor	nduct							
There is an official written document that regulates staff conduct in the institution	32	23.9	58	27.1	4	13.8	97	37.9	.00*
There are regulations for disciplining staff that use violence against children	58	43.3	100	46.7	13	44.8	147	57.4	.07*
Training									
Received training on how to identify or respond to violence against children	35	26.1	73	34.1	6	20.7	111	43.4	.00*
* Significant difference based upon levels	of edu	cation (based (upon cr	oss-tab	ulations	and ch	i-square	e)

Comments of Children's Rights Protection Committee of the Ministry of Education and Science of the Republic of Kazakhstan

To: United Nations Children's Fund (UNICEF)

Children's Rights Protection Committee of the Ministry of Education and Science of the Republic of Kazakhstan having considered the findings of the study on violence against children in state-run residential institutions within the scope of its competency is sending the comments.

Enclosure on three _I	pages.
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Head of the Committee

R. Sher

Exec. A. Sekerbayev, 74-20-49

ENCLOSURE

Comments to findings of the study on violence against children in state-run residential institutions.

Currently in the Republic of Kazakhstan 14,052 children are raised in 210 residential institutions of education, healthcare and social protection systems. Including 1,586 children in 25 infant homes in the system of healthcare, 854 children in 19 orphanages for children with disabilities in the system of social protection, and 11,612 children in 166 organizations in the system of education.

Orphanages use up-bringing programs taking into account individual characteristics of a child. The environment similar to family environment was created for children (siblings and friends are placed as one family, separate sections for families).

Deinstitutionalization of the above mentioned institutions is one of the main priorities of the Children's Rights Protection Committee.

Pursuing this goal with the support of members of the Parliament of the Republic of Kazakhstan the Law of the Republic of Kazakhstan "On state budget for 2011-2013" allocated funds (14387.204 million tenge) for payments to tutors and guardians to support foster children in the amount of 10 monthly calculation indexes. Currently regions are processing such payments to guardians of children.

Such measures will allow decreasing the number of children in orphanages as many of them have relatives who can take the child given the financial support.

Moreover, charity events such as "Rizashylyk" ("Gratitude") and "Dobrota vo blago detyam" ("Goodness for the sake of children") are held for children in orphanages as well as national program "Kuan sabi" ("Cheer up baby") targeted at identifying and attracting people who would like to take a child without parental care into their family. Due to this, during winter and spring breaks of current year 861 children from orphanages spend their time with families of Kazakhstan citizens.

With the goal of developing in public minds of the idea of a healthy and full-fledged family and stirring up of informational-educational work on accommodating orphans in the families of Kazakh citizens by means of media within the bounds of state order a TV program "Ya i moya sem'ya" ("Me and my family") was launched and aired on TV channel "Kazakhstan". The main idea of the program is to cover the most important aspects of family upbringing that influence child's personality development.

In 2010 chief national TV channels broadcasted 14 social commercials. Series of programs "Nashi deti" ("Our children") are broadcasted on TV channel "Yel Arna". Local newspapers opened special columns "Kazhdomu rebenku – sem'yu" ("A Family for each child"), "Mama, naidi menya" ("Find me, mommy"), "Miru nuzhen ya – mne nuzhna sem'ya" ("World needs me and I need a family") and others.

In the regions 14 schools for foster parents and 7 Family support services were set up in order to support citizens who are willing to adopt or foster orphans or children without parental care.

Ministry of Education and Science jointly with National commission for women affairs and family-demographic policy under the President of the Republic of Kazakhstan, Ministry of Communication and Information and Ministry of Culture developed a Plan of action on propaganda work targeted at prevention of social orphanhood, propaganda of adoption of orphans and children without parental care. On 14January 2011 with the aim of solving the issues of orphans and children without parental care Deputy Head of Presidential Administration of the Republic of Kazakhstan M. Ashimbayev approved the Plan.

According to the Plan a number of events such as conferences for fathers, round tables were held in the regions and short films "Ar balaga otbasynyn bakyty" ("A happy family for each child"), series of TV shows "Nadezhda detskikh serdec" ("Hopes of children's hearts") dedicated to accommodation of children from orphanages with families of our citizens were broadcasted on regional TV channels.

As a result of the work done, nationally, the number of children in organizations for orphans and children without parental care decreased by 4,146 since 2006 (18,198 in 2006 and 14,052 in 2010).

At the same time organizations for orphans and children without parental care are under constant control by respective state agencies.

Prosecutor's office conducts checks of orphanages not less than once in six months.

Ministry of Education and Science approved the Evaluation criteria of level of risk in organizations for orphans and children without parental care regarding observance of the rights of this group of children (1 March 2010 Joint Order of the Minister of Education and Science of the Republic of Kazakhstan № 91 and 26 March 2010 Minister of Economic Affairs and Budget Planning of the Republic of Kazakhstan № 6140).

In accordance with the Order, Children's Rights Protection Committee in 7 regions of the country inspected the work of 56 organizations for orphans and children without parental care. Information on results of inspections was sent to akimats of respective regions for taking measures. Similar inspections are carried out by Children's Rights Protection Departments which the regional offices of the Committee.

Orphanages are not closed institutions. Almost all non-governmental organizations working on issues of children have access to institutions. Almost all cases of violation of children's rights are covered in media and are discussed by wider public.

Children in orphanages are aware of their rights and know where they can apply in case of violation of their rights. In Kazakhstan there are 168 public reception offices for children and 243 hotlines that provide legal, psychological and consultation support to children in difficult life situation.

A project "National free hotline 150" was launched in Astana and Almaty with the support of United Nations Children's Fund (UNICEF) and Union of Crisis Centers.

In 2007 with the goal of coordination of the work on creating environment for full-fledged development of children and safeguarding their rights and legal interests a National Council of directors of organizations for orphan children and children deprived of parental care was created.

Moreover, there are children-run self-government bodies in orphanages that allow children to participate in decision making on important issues (internal rules, organization of recreational activities and others).

In September-October 2010 national interactive seminars on implementation of current legislation on protection of the rights of orphan-children and children deprived of parental care were held. Seminars also covered issues of promotion of family-type accommodation of orphan-children and children deprived of parental care.

Ministry of Education of the Republic of Kazakhstan jointly with NGO "Union of crisis centers" in 2008 conducted a study on assessment of violence against children in the family and at school and analysis of development of social infrastructure of protection of rights of children from violence.

In 2009 Ministry of Education of the Republic of Kazakhstan jointly with Center "Institute of social studies" conducted a study "Monitoring of protection of children's rights from abuse and sexual exploitation". Findings of the study were considered on 27 April 2009 at the forth meeting of the Interagency commission on minors' affairs and protection of their rights under the Government of the RK.

Comments of the Ministry of Health of the Republic of Kazakhstan

United Nations Children's Fund (UNICEF)

Copy to: National Human Rights Center

For: № KAZA/097, 12 April 2011

Department of organization of medical help of the Ministry of Health of the Republic of Kazakhstan having considered the findings of the study on violence against children in staterun residential institutions of Kazakhstan informs that it does not have any suggestions and comments.

Director A. Tulegaliyeva

Comments of Ministry of Labor and Social Protection of Population of the Republic of Kazakhstan

To: United Nations Children's Fund (UNICEF) in the Republic of Kazakhstan 10 Beibitshilik Street "A", Block 1, Astana

For: № 096, 12 April 2011

Ministry of Labor and Social Protection of Population of the Republic of Kazakhstan having considered draft report on findings of the study on violence against children who live in psycho-neurological medical-social institutions for children, within its competency informs as follows.

Findings of Your study are of significant importance for decision making regarding protection of the rights and interests of children and providing care to them.

Specific legal measures on prevention of violation of the rights of children with disabilities who reside in medical-social institutions have been taken.

Thus, according to the Standards of specialized social services delivery in the area of social protection of population (endorsed by 6 December 2010 Order of the Minister of Labor and Social Protection of Population of the Republic of Kazakhstan № 394-e) medical-social institutions create a book of complaints and suggestions that is to be kept with the head of the institution and to be given to service recipients and visitors immediately upon request.

The book of complaints and suggestions is reviewed by the head of

medical- social institution on a weekly basis and on a monthly basis by the regional and Astana and Almaty city departments on coordination of employment and social programs.

We assume that acts of violence against children with psycho-neurological pathologies that were identified in the study were committed due to incompetence of staff at the medical-social institutions including those who were newly hired.

Taking into account that organization of the work of medical-social institutions is in the competence of local authorities we believe that administrations of regional akims and akims of Astana and Almaty cities can be recommended to organize special trainings on communication with children with disabilities for staff of medical-social institutions as well as to provide staff with psychological support by the end of the work day.

Vice-minister A. Nusupova

Exec. G. Salemova, tel. 74 33 39



