Child Abuse in Natural Disasters and Conflicts: A Systematic Review

Hamed Seddighi¹, Ibrahim Salmani², Mohhamad Hossein Javadi³, and Saeideh Seddighi⁴

Abstract
Violence against children affects a significant portion of youth around the world. Emergencies and natural disasters escalate the risk due to weakened child protection systems and disruption of preventative mechanisms. In this systematic review, 692 related papers were searched in various databases in the initial search. After review, 11 papers were finally selected for full review. These papers were selected based on publication date, relevance to emergencies, their geographical area type of violence, age of subjects, and their gender. Most families affected by natural disasters, especially those in lower socioeconomic status, face greater social and economic pressures. The families that are more vulnerable to loss of food and shelter commit violence against children more frequently. On the other hand, while the rate of violence increases in emergencies, the reported rate of violence is less than the actual rate due to lack of required infrastructure and reporting mechanisms. The emergency housing increased risk of some types of child abuse. The history of exposure to violence, parental substance abuse, poverty, and child labor were predictors of increased violence against children in emergency situations. Sexual violence against girls after conflicts and physical violence against boys after emergencies are common forms of violence. Poverty as another predictor exposes children to more violence due to limited family economic resources and support. Given the identified predictors of violence, humanitarian organizations can come closer to providing appropriate plans to reduce the risk during and postdisaster.

Keywords
child abuse, gender-based violence, conflicts, natural disasters, polyvictimization

Violence against children is a global health concern. Various studies have shown this problem not only affects children’s socioemotional and physical development but also influences the society (Stark & Landis, 2016). An emergency is defined as situation that poses an immediate risk to health, life, property, or the environment, which may last for days, months, and even years (Blanchard, 2008). United Nations International Strategy for Disaster Reduction (UNISDR, 2009) defines disaster as “A serious disruption of the functioning of a community or a society, leading to one or more of the following: human, material, economic and environmental losses and impacts.” This definition includes natural disasters and humanitarian emergencies, as well as conflicts.

Children are the most vulnerable in disasters (United Nations Children’s Fund [UNICEF], 2014). Typically, in developing countries, children hold a high percentage of the population. For example in Haiti, around 40% of the total population are under 18 years old (Flynn-O’Brien et al., 2016). Physiologically and psychologically, children have less chance to cope and survive in acute and chronic traumatic incidences (World Health Organization [WHO], 2008). Children are dependent on their parents or carers for access to food, cloth, shelter, medical care, security, and so on. (UNICEF, 2014). In addition, children suffer more from physical injuries (Yoshihama, Yunomae, Tsuge, Ikeda, & Masai, 2018). Because of consequences of climate change, number of natural disasters is raising, and every year around 400 disasters occur globally (Guha-Sapir, Hoyois, & Below, 2016) affecting the most vulnerable groups, among them children. More than 530 million children are living in disaster-affected areas, that is, a quarter of children population in the world (Boyd et al., 2017). Disasters lead to disruption of social structures (commonly used to protect children) leading to an increased exposure and likelihood of the violence, particularly against children. A significant

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number of violence is not reported due to the lack of appropriate reporting mechanisms, the stigma, and the fact that in many cases perpetrators are parents or relatives of the child (Albutt, Kelly, Kabanga, & VanRooyen, 2017).

Lack of evidence on the extent and intensity of violence against children decrease the effectiveness of humanitarian aid activities to ensure that children receive appropriate targeted care or sufficient resources for effective support (Flynn-O’Brien et al., 2016). Therefore, this study aimed to investigate the studies conducted in this field and inspect existing efforts to identify and prevent violence against children.

### Method

This study used the systematic review method and followed systematic review principles (Mulrow, 1994). Children AND violence AND emergency AND disasters AND conflicts were the key words used to search in the databases (Table 1). Two of the authors (H.S. and I.S.) separately read the titles and abstracts of 692 searched papers and then selected related papers for final consideration. The selected papers should focus on four types of intentional violence included physical, sexual, psychological, and neglect to be included in the final consideration. The definition of these terms of violence was extracted from the UNICEF (2014).

“Physical violence” has been defined as “...all physical punishment and other forms of torture, inhuman, or humiliating behavior, as well as physical harm and abuse by adults and other children....” Sexual violence means as “sexual act committed by an adult on a child” or “...the sexual behavior of a child by another child if the offender’s age is considerably more than the victim and uses power, threats, and other forms of pressure.” Psychological violence was defined as “...psychological maltreatment, psychological abuse, spiritual abuse, or emotional neglect.” Neglect refers to parents/guardians or other caregivers who have access and knowledge of services but have a deficit in the provision of resources to meet the physical or mental needs of children. (UNICEF, 2014).

United Nations Convention on the rights of the child includes anyone under the age of 18 years (UNICEF, 1989). Emergency humanitarian situations were also associated with military conflict, natural disasters, or political unrest. These created vast material, human, and natural damage, so that society would not be able to adapt to those conditions according to its resources (Ritchie, Watson, & Friedman, 2015). Year of publication of the papers, its country and region, type of emergencies, method of the research, type of violence, and findings of articles were the factors considered in selecting the papers for final review.

Between 2005 and 2016, Asia had the highest rate of natural disasters in the world (46.7%), followed by America (24.3%), Africa (16.9%), and Europe (8.2%). Over the past decade during 2005–2016, floods were the first cause of catastrophic deaths in all parts of South Africa, Central and South America, as well as in Central, South, and West Asia. Storms produced the highest numbers of deaths in North America, the Caribbean, Southeast Asia, Melanesia, and Micronesia. Extreme temperatures were the deadliest disasters in Eastern, Northern, and Western Europe, and in Australia and New Zealand, while earthquakes caused the most deaths in East Asia, Southern Europe, and Polynesia (Guha-Sapir et al., 2016).

### Search Strategy

The articles were searched in PubMed, PsycINFO, Elsevier, Springer, and Google Scholar by combining the key words mentioned in Table 1. After reviewing the articles and deleting repetitive articles, titles and abstracts were reviewed separately by two authors to determine relevance. Figure 1 depicts methods of the search and selection. Non-English articles were excluded. Search strategy was developed according to Stark and Landis’s (2016) method. All key words related to violence, child, and emergencies were combined with an OR operator, and then three sets of key words were combined with AND operator.

When an article was found with the above descriptions, the title and summary were reviewed to determine whether the article was relevant to the main purpose of the review whether or not it was relevant. In the case of ambiguity, the authors referred to the full text for final decision. Figure 1 displays the process of selecting articles.

### Results

Of 11 articles, 8 were published between 2010 and 2018 (Biswas, Rahman, Mashreky, Rahman, & Dalal, 2010; Flynn-O’Brien et al., 2016; Madkour, Johnson, Clum, & Brown, 2011; Nelson et al., 2011; Rubenstein & Stark, 2017; Saile, Ertl, Neuner, & Catani, 2014; Sriskandarajah, Neuner, & Catani, 2015; Yoshihama et al., 2018) and 3 articles between 2000 and 2009 (Catani, Jacob, Schauer, Kohila, & Neuner, 2008; Catani, Schauer, & Neuner, 2008; Curtis, Miller, & Berry, 2000). The year of publication is important because the frequency of military conflicts and natural disasters vary in different years. According to the Disaster Epidemiology Center,
the number of disasters worldwide has more than quadrupled to around 400 a year when comparing 2015 to 1970, and as a result, more people are affected (Guha-Sapir et al., 2016). Moreover, military conflicts had declined between 2000 and 2009 compared with the 1990s but after 2010 they have increased significantly compared to 1990s (Bellal, 2017). Therefore, it seems that further research is needed in this regard, given the changing nature of military conflicts and the increase in natural disasters and risks, especially in less developed countries. Table 2 presents the characteristics of

![Figure 1. Process for selecting articles for review.](image)

Table 2. Characteristics of Studies.

<table>
<thead>
<tr>
<th>Author</th>
<th>Scope</th>
<th>Year</th>
<th>Country/Region</th>
<th>Emergency Conditions</th>
<th>Type of Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flynn-O'Brien et al. (2016)</td>
<td>Physical violence against children</td>
<td>2015</td>
<td>Haiti</td>
<td>Earthquake, tsunami</td>
<td>Sexual, physical</td>
</tr>
<tr>
<td>Curtis, Miller, and Berry (2000)</td>
<td>Violence against children after disasters</td>
<td>2000</td>
<td>America</td>
<td>Earthquake, tsunami</td>
<td>Physical, sexual, psychological</td>
</tr>
<tr>
<td>Madkour, Johnson, Clum, and Brown (2011)</td>
<td>Violence between students after disasters</td>
<td>2011</td>
<td>America</td>
<td>Tsunami</td>
<td>Physical, sexual, psychological</td>
</tr>
<tr>
<td>Saile, Ertl, Neuner, and Cataniet (2014)</td>
<td>Violence against children after the war, child exploitation, shock after the accident</td>
<td>2014</td>
<td>Uganda</td>
<td>Military conflicts</td>
<td>Physical, psychological</td>
</tr>
</tbody>
</table>
studies, and Table 3 displays the results extracted from the reviewed papers.

**Emergencies**

Considering the type of the emergencies, papers often concentrated on natural disasters rather than conflict. Among the natural disasters, four studies were conducted in earthquake conditions (Curtis et al., 2000; Flynn-O’Brien et al., 2016; Sriskandarajah et al., 2015; Yoshihama et al., 2018), six in tsunamis (Catani, Schauer, et al., 2008; Curtis et al., 2000; Flynn-O’Brien et al., 2016; Madkour et al., 2011; Yoshihama et al., 2018), and one in flood (Biswas et al., 2010). Examining the frequency of natural disasters in the last decade indicated that floods were the first cause of catastrophic mortality in all regions of South Africa, Central and South America, as well as in Central, South, and West Asia. The storms hit the largest number of deaths in North America, the Caribbean, Southeast Asia, Melanesia, and Micronesia. The severe heats were the deadliest events in the east, north, and west of Europe, Australia, and New Zealand, while earthquakes caused death in East Asia, Southern Europe, and Polynesia (Guha-Sapir et al., 2016). Finally, fewer studies appear to be done on violence in emergencies caused by floods and storms. WHO (2008) argues that very few scientific publications have tried to quantify the health impacts of floods, and we see in our review there is just one paper about child abuse after flood.

**Geographical Region**

Among the reviewed studies, two were related to North America (Curtis et al., 2000; Madkour et al., 2011), one Caribbean Sea Region (Haiti; Flynn-O’Brien et al., 2016), five in south and southeast of Asia, that is, Sri Lanka, Bangladesh, Japan, and Afghanistan (Biswas et al., 2010; Catani, Jacob, et al., 2008; Catani, Schauer, et al., 2008; Sriskandarajah et al., 2015; Yoshihama et al., 2018); and three from Africa, that is, Democratic Republic of the Congo, Ethiopia, and Uganda (Nelson et al., 2011; Rubenstein & Stark, 2017; Saile et al., 2014). All of the articles conducted in Africa investigated the violence only in emergencies caused by military conflicts. Other regions in the reviewed studies discussed about natural disasters except one article carried out in Sri Lanka that studied the violence in a complex emergency after military conflicts and natural disasters (Sriskandarajah et al., 2015).

**Type of Violence**

Most of the papers focused on the following three types of violence: physical violence (Biswas et al., 2010; Catani, Jacob, et al., 2008; Catani, Schauer, et al., 2008; Curtis et al., 2000; Flynn-O’Brien et al., 2016; Madkour et al., 2011; Rubenstein & Stark, 2017; Saile et al., 2014; Sriskandarajah et al., 2015; Yoshihama et al., 2018), sexual violence (Biswas et al., 2010; Catani, Jacob, et al., 2008; Curtis et al., 2000; Flynn-O’Brien et al., 2016; Madkour et al., 2011; Nelson et al., 2011; Rubenstein & Stark, 2017), and mistreatment. On the other hand, only one article had been conducted which included child neglect in global emergencies. Also a neglected component in child abuse in disasters is polyvictimization. Polyvictimization or exposure to multiple types of abuse like physical violence, neglect, and mistreatment seems more common in disasters. Regarding physical violence, almost all studies had a uniform definition and showed this kind of violence in the form of physical punishment, punishment with a hard object, and punching; but in case of sexual violence, there was a lack of homogeneity in the studies. Although some studies have reported sexual violence in the form of aggression by strangers, others have introduced gender-based violence by sexual partners or intimate partner violence. Regarding psychological violence, a wide range of abuse was investigated in the past studies including verbal violence, witnessing, threats, intimidation, and bullying. Less attention has been paid to neglect, as a type of violence approved by the Sphere Standards (a set of minimum standards in core areas of humanitarian assistance), the Child Protection Working Group, and UNICEF. Only one study investigated neglect during floods in Bangladesh (Biswas et al., 2010).

**Age and Gender**

Based on the age-group classification including infancy and early childhood (0–8 years old), middle childhood (9–11 years old), and adolescence (12–18 years old; Stark & Landis, 2016), nine studies investigated violence against children in teenage years (Biswas et al., 2010; Catani, Jacob, et al., 2008; Catani, Schauer, et al., 2008; Curtis et al., 2000; Flynn-O’Brien et al., 2016; Madkour et al., 2011; Nelson et al., 2011; Rubenstein & Stark, 2017; Yoshihama et al., 2018). Five studies focused on violence on middle childhood, either alone or along with teenage years (Catani, Jacob, et al., 2008; Catani, Schauer, et al., 2008; Saile et al., 2014; Sriskandarajah et al., 2015; Yoshihama et al., 2018), and one article was related to violence in early childhood (Yoshihama et al., 2018). Of the reviewed studies, only one article (Nelson et al., 2011) studied girls in particular, and the rest analyzed violence against children in disasters without separate analysis by sex. Sexual violence against girls was reported mostly in war-related studies, while the studies related to natural disasters did not discuss the sexual violence (Catani, Jacob, et al., 2008; Catani, Schauer, et al., 2008; Nelson et al., 2011; Rubenstein & Stark, 2017). For example, Nelson et al. (2011) found pediatric survivors were more likely than adult survivors to have experienced gang rape, been attacked by a civilian perpetrator, and been assaulted during the day. Also physical violence against boys after emergencies is a common form of violence during and after disasters.

**Perpetrators**

Parents were offenders in the majority of instances of child abuse in emergencies. The majority of violence committed by fathers was physical violence, and mothers committed more
<table>
<thead>
<tr>
<th>Article</th>
<th>Perpetrator</th>
<th>Age of Victims</th>
<th>Country/Region</th>
<th>Type of Violence</th>
<th>Finding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flynn-O’Brien et al. (2016)</td>
<td>Family, teachers</td>
<td>13–24</td>
<td>Haiti</td>
<td>Sexual, physical</td>
<td>More than one third of respondents between the ages of 13 and 17 were reported to be subject to violence. Violence is often carried out by parents and teachers in order to create discipline or punishment. 98.8% of the victims of violence were hit by hand and foot, and 11% were violent by knives and other means. Girls were twice as likely to suffer from violence and sustained injuries and injuries to boys.</td>
</tr>
<tr>
<td>Sriskandarajah, Neuner, and Catani (2015)</td>
<td>Family</td>
<td>8–11</td>
<td>Sri Lanka</td>
<td>Physical, psychological</td>
<td>Mother and father were the perpetrators of violence, and after that, close relatives such as uncle and aunt and most of the violence was for punishment about domestic disorder or discipline. Most respondents who surveyed 83.8% of cases were at least once included in domestic violence. 71.6% reported that violence continues. Hitting the body and shaking, beating the hard tool, and oral threats have been the most abundant. 3.1 of children have been subjected to sexual violence at least once. One eighth of the children pointed out that at least one injury was caused by violence, and 5% of the children needed medical treatment. The most numerous perpetrators of violence were fathers (97.5%) and mothers (89.8%). Dietary alcohol consumption has been the most predicted violence against children.</td>
</tr>
<tr>
<td>Biswas, Rahman, Mashreky, Rahman, and Dalal (2010)</td>
<td>Family</td>
<td>Under 18</td>
<td>Bangladesh</td>
<td>Sexual, physical, psychological</td>
<td>Most families affected by the flood of 90% find it difficult to find food and shelter and thus become more violent than their children at home. 38% cutting, 22% fall, and 21% drowning had the highest frequency of neglect due to inadvertent damage to the flood. A large proportion of children were subject to violence of their parents during the floods (70% by mother and 40% by father). The level of violence was related to the socioeconomic level, and the lower the status of the family, the more violence was applied. It was also found that women are more likely to commit mental violence against children, and men commit more physical violence.</td>
</tr>
<tr>
<td>Curtis, Miller, and Berry (2000)</td>
<td>Family</td>
<td>Under 18</td>
<td>America</td>
<td>Physical, sexual, psychological</td>
<td>Based on the number of cases, it’s important to note that physical abuse is the most severe type of violence, and the number of confirmations is usually less than a quarter reported, as well as the rate of violence against children in the third and sixth months after the Hugo storm was higher than ratio of the same period before the disaster. • Emotional impacts in children may immediately create more problems and increase stress for parents, which can lead to violence. • Another common topic in the interviews was that ill-treatment is associated with an increase in the rate of recovery among victims. Especially among those who used less than predisaster economic resources. The postdisaster postponement was slow, and untagged housing, limited transportation, and reduced job opportunities in the short term helped the people to disappoint.</td>
</tr>
<tr>
<td>Madkour, Johnson, Clum, and Brown (2011)</td>
<td>peers</td>
<td>12–18</td>
<td>America</td>
<td>Physical, sexual, psychological</td>
<td>Significant increases in violence were observed before and after Katrina’s storm. The results show that, as compared to before the storm, more absence from schools was reported because of insecurity, as well as more guns, physical violence and sexual violence. These observations were similar between boys and girls.</td>
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</tbody>
</table>

(continued)
Table 3. (continued)

<table>
<thead>
<tr>
<th>Article</th>
<th>Perpetrator</th>
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<th>Country/Region</th>
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<th>Finding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nelson et al. (2011)</td>
<td>Strange</td>
<td>Under 18</td>
<td>Democratic Republic of the Congo</td>
<td>Sexual</td>
<td>A total of 389 survivors of sexual violence under age 18 were interviewed at Panzi Hospital between 2004 and 2008. Most survivors, 52.2%, were between 11 and 15 years old, and almost 95% never married. The findings show that sexual violence against girls is different from that of adults. Sexual slavery is more common among single girls. The pattern of sexual violence against girls is apparently dynamic and has been steadily rising between 2004 and 2008.</td>
</tr>
<tr>
<td>Catani, Jacob, Schauer, Kohila, and Neuner (2008)</td>
<td>Family</td>
<td>9–15</td>
<td>Sri Lanka</td>
<td>Physical, sexual, psychological</td>
<td>Nearly all 95.6% of children reported having at least one experience of domestic violence. 64.2% reported that violence continues. Children have seen at least 5.3 violent incidents in their families. The high level of violence against children is carried out by caregivers. 18% of children suffer from at least one injury because of violence, and 55.4% of children reported being beaten and violent against their family members. 4.3% of children reported having experienced sexual violence.</td>
</tr>
<tr>
<td>Saile, Ertl, Neuner, and Catani (2014)</td>
<td>Family, relatives</td>
<td>7–8</td>
<td>Uganda</td>
<td>Physical, psychological</td>
<td>In this study, 86% of male caregivers and 93% of female caregivers used spontaneous violence, 71% male caregivers and 88% female caregivers used physical punishment for disciplining children. The most common type of physical violence for punishment was to beat the back of a child with a hard object, with 83% of female caregivers and 70% of male caregivers using this method. 36% of female caregivers and 20% of male caregivers reported having at least one physical punishment against their child. The findings of this study indicate that war violence helps to continue the violence against children during the postwar period. A high level of family violence against children requires more effective efforts to protect children in postwar situations and even more as protection of children as an integral part of the peace-building process. In order to effectively protect children in families affected by war, the relationship between war, domestic violence, and psychological consequences in the postwar period should be taken into consideration.</td>
</tr>
<tr>
<td>Catani, Schauer, and Neuner (2008)</td>
<td>Mother, father, relatives</td>
<td>7–15</td>
<td>Sri Lanka, Afghanistan</td>
<td>Physical</td>
<td>In regression analysis, the history of war crimes for the child and the family was a predictor of domestic violence in both cases. In addition, child labor and poverty predict domestic violence in Afghanistan, and drug addiction of fathers predicts bad behavior against children in Sri Lanka. It can be argued that children in postwar societies are not only affected by disastrous events within the framework of organized violence but also suffer from family-oriented stressors such as domestic violence and the use of parents’ materials and stressors at the community level such as child labor and poverty. None of the factors alone is effective, and on the contrary, it seems that the clash of these stressors together brings families to the persecution of children in particular.</td>
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</table>
### Table 3. (continued)

<table>
<thead>
<tr>
<th>Article</th>
<th>Perpetrator</th>
<th>Age of Victims</th>
<th>Country/Region</th>
<th>Type of Violence</th>
<th>Finding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rubenstein and Stark (2017)</td>
<td>Family, relatives, neighbors, soldiers</td>
<td>Under 18</td>
<td>Ethiopia, Democratic Republic of the Congo</td>
<td>Sexual, physical</td>
<td>Most teenage girls (51.62%) reported having been victims of at least one type of violence in the last 12 months: 31.78% reported having struck or beat 36.79% of oral violence and 26.67% of sexual violence. In both countries, having a boyfriend and living with an intimate partner has been a strong predictor of violence.</td>
</tr>
<tr>
<td>Yoshihama, Yunomae, Tsuge, Ikeda, and Masai (2018)</td>
<td>Family, relatives, neighbors, strangers</td>
<td>Younger than 5 to 13–16</td>
<td>Japan</td>
<td>Sexual, physical,</td>
<td>Eleven reported cases involved violence against minors, both girls and boys. Victims’ ages ranged from “younger than 5” to “13–16.” Accounting for multiple perpetrators in some cases, there were 15 unduplicated perpetrators. Five were strangers, and the remaining perpetrators were individuals the victim knew, such as family members (e.g., father or grandfather), residents of an evacuation center, disaster response personnel, and volunteers. All but one of the reported cases took place at a location to which the victim had evacuated or relocated after the disaster, such as an evacuation center or a relative’s residence. The incidents at emergency evacuation centers included sexual molestation, unwanted sexual contact, and voyeurism: An adult male evacuation center resident followed a girl and attempted to kiss her, a male evacuation center resident approached a boy and removed his underwear, a stranger touched the body of a girl at an emergency evacuation center, and a man peeked into a makeshift dressing area where a girl was changing clothing.</td>
</tr>
</tbody>
</table>
psychological abuse (Biswas et al., 2010; Catani, Jacob, et al., 2008; Catani, Schauer, et al., 2008; Curtis et al., 2000; Flynn-O’Brien et al., 2016; Madkour et al., 2011; Rubenstein & Stark, 2017; Saile et al., 2014). After parents, relatives (Catani, Jacob, et al., 2008; Rubenstein & Stark, 2017; Saile et al., 2014), teachers (Flynn-O’Brien et al., 2016), strangers (Nelson et al., 2011), and peers (Madkour et al., 2011), respectively, have committed more child abuse. Food and shelter insecurity, lower socioeconomic status, substance abuse, child labor, and a history of exposure to violence were the most common predictors.

Discussion

The study found that acquaintances and family members committed more child abuse in emergencies rather than strangers (Biswas et al., 2010; Catani, Jacob, et al., 2008; Catani, Schauer, et al., 2008; Curtis et al., 2000; Flynn-O’Brien et al., 2016; Madkour et al., 2011; Rubenstein & Stark, 2017; Saile et al., 2014; Sriskandarajah et al., 2015; Yoshihama et al., 2018). Moreover, even though girls are less exposed to physical violence than boys, they are more vulnerable and the impacts of the violence against them are greater (Catani, Jacob, et al., 2008; Flynn-O’Brien et al., 2016; Rubenstein & Stark, 2017; Sriskandarajah et al., 2015). Injuries sustained from violence varied by victim gender and perpetrator, while female injuries take twice recovery time compared to that for males (Flynn-O’Brien et al., 2016). Women (mothers, relatives, caregivers, and teachers) mostly committed psychological abuse, and on the other hand, men (father, relatives, caregivers, and teachers) mostly committed physical violence against children (Biswas et al., 2010; Saile et al., 2014; Sriskandarajah et al., 2015).

Children are more likely to be subjected to physical violence in disasters, and concurrently, the risk of family violence against children escalated due to psychological pressures on the family members (Catani, Jacob, et al., 2008; Catani, Schauer, et al., 2008; Curtis et al., 2000; Saile et al., 2014; Sriskandarajah et al., 2015). Most families affected by natural disasters, especially those in lower socioeconomic conditions, face greater social and economic pressures. The families that are more vulnerable to loss of food and shelter commit violence against children more frequently (Biswas et al., 2010; Catani, Jacob, et al., 2008; Curtis et al., 2000; Sriskandarajah et al., 2015). On the other hand, while the level of violence increases after many emergencies in comparison to before disasters, the rate of violence reporting is less than the real rate due to disruption in infrastructure and the reporting mechanism. Following emergencies like natural disasters and conflicts, many child protection systems could experience disruption at various levels. Child protective case workers experience same stresses as do the affected children accompanied by interrupted child protection infrastructures by natural disasters and disrupted physical infrastructures like roads, telephones, and so on. All of these factors could contribute to an inaccurate picture of the extent to which child maltreatment actually changes following natural disasters (Curtis et al., 2000).

Sexual violence against girls escalated in emergencies, particularly in military conflicts (Biswas et al., 2010; Catani, Schauer, et al., 2008; Curtis et al., 2000; Flynn-O’Brien et al., 2016; Madkour et al., 2011; Nelson et al., 2011; Rubenstein & Stark, 2017). Children as the main victim of exacerbated violence in emergencies may experience the symptoms of posttraumatic stress disorder. According to our sample of articles, the history of violence exposure, parental substance abuse, poverty, and child labor are predictors of violence against children in emergency situations (Biswas et al., 2010; Catani, Jacob, et al., 2008; Catani, Schauer, et al., 2008; Curtis et al., 2000; Madkour et al., 2011; Nelson et al., 2011; Sriskandarajah et al., 2015). On the other hand, there is an important point revealed in the reviewed studies: The emergency housing increased the risk of some types of child abuse especially stranger sexual assault by others in the shelter.

Conclusion and Critical Findings

1. Violence increases after many emergencies compared to the conditions prior to emergencies and disasters. Polyvictimization or exposure to multiple types of abuse like physical violence, neglect, and mistreatment seems more common in disasters.

2. Food and shelter insecurity, lower socioeconomic status, substance abuse, child labor, and a history of exposure to violence were the most common predictors.

3. Given that families and caregivers of the child are among the main perpetrators of violence against children in this context, attention to this issue in humanitarian interventions can help reduce violence. The majority of violence committed by fathers was physical, and mothers committed more mistreatment.

4. Sexual violence against girls is one of the most prevalent type of violence after conflicts. The emergency housing increased risk of some types of child abuse, particularly sexual abuse against girls. Given the identified predictors of violence, humanitarian organizations can come closer to providing appropriate plans to reduce the risk of sexual violence during and postdisaster.

Implications for Practice, Policy, and Research

Practice

- Training all stakeholders in emergencies like humanitarian organizations, police department, and service delivery organizations on child protection is necessary because the risk of child abuse in conflicts and natural disasters increases.
- Focusing on lower socioeconomic status families in aid distribution is important in order to reduce the domestic violence especially against children.
- Emergency shelter increases risk of child abuse, and therefore, recovery after emergencies should be
provided quickly. Also child protection in emergency camps and shelters should be taken seriously, and professionally trained caregivers should supervise children treatments during disasters.

Policy

- All stakeholders in conflicts and natural disasters should prepare child protection minimum standards at different levels for their staff and people (global, national, local).
- Child protection policies in national level should be strengthened accompanied with other emergency relief sectors like food, health, shelter, and so on.

Research

- One of the main topics for further research is violence against children based on their race, ethnicity, physical abilities, religious beliefs, and other diversities.
- Although neglect is one of the main types of child maltreatment, little attention has been paid to this issue in the literature.
- There is a lack of evidence on violence in early childhood (0–8 years) in reviewed papers that can be a subject for further studies. Given that the development between 0–8 years of age provides the very critical early child development including physical, socioemotional, and cognitive developments, the studies regarding this age limit is critical for all societies.
- Sexual- and gender-based violence is a topic for further studies. Most of the studies didn’t focus on violence against boys or girls and gender-based violence separately.
- Despite the importance of the recent humanitarian crisis in Syria, Iraq, and Yemen, these disasters have not been adequately studied by researchers—with regard to violence against children. Similarly, earthquakes in Pakistan and Iran with substantial damages have not been studied in reviewed articles.
- Child abuse patterns after different disasters and conflicts are different, and researchers can work on this important issue in different disasters like flood, drought, earthquake, and so on.

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