

The ch in children stands for cherish



But South Africa (SA) does not cherish her children, in spite of their right to care and protection, enshrined in our Constitution's Bill of Rights. Of course this failure occurs in a milieu of social tolerance of use of force and violence in the country as a whole, with high levels of

family violence in the home, violence in the community, and violence at the hands of police and in schools (with frequent resort to corporal punishment^[1]). Children from poorer households and from rural areas are particularly affected. [2] An editorial in this issue of SAMJ[3] informs us of the SA position in relation to other countries around the world in the Global Status Report on Violence Prevention 2014, [4] jointly released by the World Health Organization (WHO), the United Nations Development Programme and the United Nations Office on Drugs and Crime.

Izindaba^[5] features the harsh lives of SA's children in this issue. 'The risky lives of South Africa's children: Why so many die or are traumatised' reveals that 80% of children live in informal settlements ('danger-filled environments'), and because of the widespread, tragic absence of the most effective risk-mitigating factor possible - their biological parents - they are highly vulnerable.

Children need adults who will cherish them and on whom they can depend for love, care and, most of all, protection. But many of SA's children are not raised within the conventional nuclear family ... 14.6 million of our 18.5 million children have both parents known to be alive, according to Statistics South Africa's General Household Survey of 2010, [1] only 6.0 million (one in three) aged under 18 years live with both their mother and father, 2.3 million have a mother alive but father deceased or unknown, 0.7 million have father alive but mother deceased or unknown, and 0.9 million have both parents either deceased or unknown. Of 12.4 million children in single-parent homes, the majority live with their mother, a fraction with their father, and the remainder with neither parent.

Daily, thousands of children experience physical, sexual and/or psychological abuse. It is no comfort to learn that the scourge is a global one and rife in so-called sophisticated, developed countries such as the USA and the UK. In the USA, with a population of 360 million, 1 500 children (2012 statistics) die as a result of abuse. [6] SA, with a population of 55 million, a sixth of that of the USA, achieves the same: three children a day (1 200 a year) are murdered.^[7]

In the UK, sexual abuse (defined by the WHO as 'the involvement of a child in a sexual activity that he or she does not fully comprehend, is unable to give consent to, or for which the child is not developmentally prepared and cannot give consent') is rife, as recent news bulletins and the Home Office Secretary confirm, with one in 20 children subject to sexual abuse despite rigorous legal sanctions against perpetrators.[8]

Everywhere, the youngest are most vulnerable. [2] The Teddy Bear Clinic in Johannesburg has dealt with cases of sexual abuse in very young children, [2] and there are statistics of rapes of children aged between 1 and 3 years.^[9] Of female victims of rape, 85% had been raped when aged between 10 and 14 years. [10] Boys are not exempt -3.5% of young men report having been raped by a man.[11]

The perpetrator is typically known to the victim - a friend, a teacher, [12] or worse, a relative or household member, with sexual assault typically occurring in the child's home. [7] Jewkes et al. [11] point out that 'The numerous experiences of sexual harassment by male teachers (and male learners) confirm that it is a major problem in schools. The greatest concern is the teachers' abuse of their power over the schoolgirls to gain sexual access to them. The teachers' conspiracy to support each other is an indication of its pervasiveness. These experiences diminish the educational chances of girls.'

On rare, widely publicised occasions children are the perpetrators, but the Teddy Bear Clinic Constitutional Court case^[13] decriminalised sexual conduct between adolescent consenting children aged under 16 years and placed a moratorium on the reporting duties of doctors

SA appears, in large measure, to have become inured to the horrors perpetrated against her children, and even seeks to rationalise that poverty is the cause. Why, invoking the lyric 'I'm depraved on account of I'm deprived!' (an exclamation by one of the youths serenading Officer Krupke in Leonard Bernstein and Stephen Sondheim's 'West Side Story'[14]), should deprivation be an excuse for depravity? Around the world poverty - in our own country resulting from high levels of parental unemployment - is one possible explanation, but child abuse occurs across all socioeconomic levels. Beyond poverty and unemployment, a look at the 'ecology' of SA's communities reveals a multiplicity of adverse factors that render the neighbourhoods in which children live dangerous, and make crime and sexual violence easy for the perpetrator: failure of electricity and hence poor lighting; poor access to water, with children spending long hours collecting water and exposed along the route; the proliferation of shebeens in townships, and high levels of alcohol and substance abuse.

The long-term mental, physical and social consequences of child abuse can be intuited: [6] damage to the eyes, brain and spinal cord resulting from shaken-baby syndrome; rib and long bone fractures; impaired mental development, depression and withdrawal; psychiatric illness (including depression, anxiety, anger, post-traumatic stress disorder and eating disorders); and academic underachievement, perhaps because of a greater tendency to attention deficit and/or hyperactivity disorder. A third of abused and neglected children develop chronic health disorders as adults, being more prone to suffer from allergies, arthritis, asthma, bronchitis, high blood pressure and ulcers, in addition to physical disabilities caused by the abuse. Add to these antisocial behaviours and a tendency to perpetrate (often violent) crime, which leads to arrest in youth and adulthood, and abuse of alcohol and drugs, with a majority of adults in drug treatment programmes having been abused as children. Abused children are more likely to experience teen pregnancy. A vicious cycle is established \dots abused and neglected children tend to go on to abuse their own children.

The cost (estimated at USD124 billion annually in the USA^[6]) to the SA fiscus is huge, as the editorial by Ward and Lamb^[3] affirms. According to a KPMG report, violence against women alone costs the SA economy between R28.4 and R42.2 billion per year (0.9 -1.3% of the GDP), before adding the costs of child welfare and protection, special-needs education, and demands on the health system and on law enforcement, the courts and prisons.

There is hope ... that 'at the southern tip of the continent of Africa, a rich reward in the making ... will and must be measured by the happiness and welfare of the children, at once the most vulnerable citizens in any society and the greatest of our treasures.'[15] A survey in progress has 'massive potential to inform the design and delivery of interventions to reduce child maltreatment.[3]

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FROM THE EDITOR

- 1. Statistics South Africa. General household survey 2010. Statistical release P0318. http://www.statssa.
- gov.za/publications/p0318/p0318june2010.pdf (accessed 5 January 2015).

 2. Department of Social Development/Department of Women, Children and People with Disabilities/
 UNICEF. Violence against children in South Africa. http://www.cjcp.org.za/uploads/2/7/8/4/27845461/
- vac_final_summary_low_res.pdf (accessed 5 January 2015).

 3. Ward CL, Lamb G. The Global Status Report on Violence Prevention 2014: Where to for the South
- African health sector? S Afr Med J 2015;105(3):183-184. [http://dx.doi.org/10.7196/SAMJ.9305]
 4. World Health Organization. Global Status Report on Violence Prevention 2014. Geneva: WHO, 2014. (SA profile p. 195.) http://www.undp.org/content/dam/undp/library/corporate/Reports/UNDP-GVA-(A) profile p. 132.3 interference and unappeared profile profi
- 2015;105(3):170-171. [http://dx.doi.org/10.7196/SAMJ.9462]
- Childhelp, https://www.childhelp.org/child-abuse-statistics/Childhelp (accessed 5 January 2015).
 Mathews S, Abrahams N, Jewkes R, Martin LJ, Lombard C. Child homicide patterns in South Africa: Is
- there a link to child abuse? http://www.mrc.ac.za/policybriefs/childhomicide.pdf (accessed 5 January 2015).

 8. National Society for the Prevention of Cruelty to Children. http://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/child-sexual-abuse/sexual-abuse-facts-statistics/ (accessed 5 January
- 9. Vetten L, Jewkes R, Fuller R, Christofides N, Loots L, Dunseith O. Tracking Justice: The Attrition of Rape Cases through the Criminal Justice System in Gauteng. Johannesburg: Tshwaranang Legal

- Advocacy Centre, Medical Research Council, Centre for the Study of Violence and Reconciliation, http://www.csvr.org.za/docs/tracking_justice.pdf (accessed 5 January 2015).
- 10. Jewkes R, Levin J, Mbananga N, Bradshaw D. Rape of girls in South Africa. Lancet 2002;359(9303):319-321. [http://dx.doi.org/10.1016/S0140-6736(02)07530-X]
- 11. Jewkes R, Abrahams N, Mathews S, et al. Preventing rape and violence in South Africa: Call for leadership in a new agenda for action. MRC Policy Brief, November 2009. www.mrc.ac.za/gender/ prev_rapedd041209.pdf (accessed 5 January 2015).
- Abrahams N, Mathews S, Ramela P. Intersections of 'sanitation, sexual coercion and girls' safety in schools'. Trop Med Int Health 2006;11(5):751-756. [http://dx.doi.org/10.1111/j.1365-3156.2006.01600.x]

 13. McQuoid-Mason DJ. The Teddy Bear Clinic Constitutional Court case: Sexual conduct between
- adolescent consenting children aged under 16 years decriminalised and a moratorium on the reporting duties of doctors and others. S Afr Med J 2014;104(4):275-276. [http://dx.doi.org/10.7196/SAMJ.7653]
- 14. Officer Krupke in Leonard Bernstein and Stephen Sondheim's 'West Side Story'. https://www.youtube com/watch?v=pq28qCklEHc (accessed 5 January 2015).
- 15. Nobel Lecture Acceptance and Nobel Lecture. Nelson Mandela's Nobel Peace Prize acceptance speech, 10 December 1993. http://www.nobelprize.org/nobel_prizes/peace/laureates/1993/mandela-lecture_ en.html (accessed 5 January 2015).

S Afr Med J 2015;105(3):160-161. DOI:10.7196/SAMJ.9452