Stopping Violence Together

A Teacher's Toolkit on Gender-Based Violence and Domestic Violence



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Introduction

SECTION 1

As an educator you may encounter children who exhibit signs of undesirable or disturbing behaviour in various ways. You often wonder whether the child or teen is acting out, troubled, facing a difficult environment at home, or is a victim of domestic violence or gender-based violence, whether directly or indirectly.

You may ask yourself, "What's going on through this child?" or his/her thoughts, feelings, emotions, behaviours, or "What's happening at this child's home?" and then, driven by professional concern, you will ask, "How can I professionally help this child?"

There is a growing recognition that the home lives of children and young people can have a significant impact on their ability to participate fully in school life and achieve academically. Furthermore, children and young people are the next generation of potential victims and perpetrators of domestic abuse. Schools are therefore in a key position to raise the issue of domestic abuse in a safe, structured, learning environment.

This toolkit is meant for educators in the last years of primary school, addressing the specific topics of gender-based violence and domestic violence.

Some educators may normally refrain from speaking about such problems in class, for reasons including lack of information, taboo, fear of being misunderstood or passing incorrect or misleading information, lack of resources or lack of awareness. This toolkit should serve as a tool for educators to get informed themselves and then tackle the topic confidently and effectively and to start or enhance the process through which students become aware of possible situations involving violence in their life and to be able to address the problem accordingly.

Schools can:

- challenge the myths that perpetuate domestic abuse;
- support children to seek help and safety;
- model and promote healthy, non-violent relationships.

The objectives of this toolkit are:

- To inform about the different forms of gender-based violence and domestic violence
- To identify, assess and respond to children experiencing domestic violence
- To prepare a classroom lesson or session on
 - "Stopping Violence Together"

Whilst this toolkit is primarily intended to be used in the last years of primary schools, the information provided will assist other primary and secondary school teachers to develop lesson plans appropriate to the child's or teen's age group according to the level of their development. Similarly, the toolkit can be used by children's and youth's organisations for extra-curricular activities and programmes.

Appendix 1 of this toolkit will deal with helping skills required in "Helping a child to open up about domestic violence".

Appendix 2 enlists referral agencies for reporting domestic violence, domestic violence support, and shelters in Malta and Gozo.

In this toolkit, unless otherwise specified, the term 'domestic violence' includes 'gender-based violence'.

Definitions of domestic violence and gender-based violence

SECTION 2

Legal basis regarding domestic violence and gender-based violence

Maltese law (Chapter 581) defines domestic violence and gender-based violence as: "Domestic violence" means all acts or omissions including verbal, physical, sexual, psychological or economical violence causing physical and/or moral harm or suffering including threats of such acts or omissions, coercion, or arbitrary deprivation of liberty, that occur within the family or domestic unit, whether or not the perpetrator shares or has shared the same residence with the victim, and shall include children who are witnesses of violence within the family or domestic unit.

"Gender-based violence" means all acts or omissions that are directed against a person because of their gender, that result in, or are likely to result in, physical, sexual, psychological or economic harm or suffering, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.

The same legislation defines "gender" by stating that:

"Gender" means the socially constructed roles, expectations, activities, behaviours and attributes that society at any given time associates with a person of any sex, assuming any form of gender identity or gender expression.

The law further makes provision for non-discrimination:

- (1) The implementation of the provisions of this Act, in particular measures to protect the rights of victims, shall be secured without discrimination on any ground such as age; association with a national minority; belief, creed or religion; colour, ethnic origin and/or race; disability; family responsibilities and/or pregnancy; family and/or civil status; gender expression and/or gender identity; genetic features; health status; language; migrant or refugee status; national or social origin; political or other opinion; property; sex or sex characteristics; sexual orientation or any other status.
- (2) Special measures that are deemed necessary to prevent and protect persons who are particularly vulnerable to violence due to their gender shall not be considered discrimination under the terms of this Act.

Social and colloquial definitions of domestic violence and gender-based violence.

Domestic violence is often defined as any act of controlling, coercive, threatening behaviour, violence, or abuse between people in a domestic setting (such as marriages or cohabitation).

Domestic violence can take many forms, and not all experiences will be the same.

Children and young people who witness or experience domestic violence can be seriously harmed psychologically, emotionally and physically. Therefore, children who witness domestic violence are considered victims of such violence, even if they are not directly targeted.

Domestic violence can occur in any relationship, regardless of gender or sexuality, and can continue even after the relationship ends. Given the diverse family and cultural situations, anyone in a household or with access to the household can be a perpetrator or victim of domestic violence. Most cases involve partners or ex-partners; however, it can also occur between family members who may not be in a romantic relationship. The violence can take place inside or outside the home; it can also happen online, over the phone or on social media platforms.

It is recognized that domestic violence is a crime and never the fault of the person experiencing it. Therefore, domestic violence requires immediate mandatory reporting to the appropriate authorities while ensuring the wellbeing of victims, especially children entrusted to our care within schools.

What can domestic violence and gender-based violence look like?

Domestic violence and gender-based violence can manifest itself in many ways and can take cultural variations. Examples include:



Hitting (including using objects like belts, wooden sticks, rods, towels etc.), slapping, **Physical Violence** kicking or punching. - Deprivation of basic needs like food, drink and sleep. - Emotional neglect, a child is left alone for a long period of time without supervision, Neglect a child is consistently denied medicine, clean clothing and basic hygiene, a child lives in an unsafe environment (unsanitary conditions, cluttered, fire hazards) etc. Verbal abuse and Using derogatory or insulting language to demean or belittle a partner, children or other family members within the household. name-calling - An act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish or frighten their victim. - Preventing someone from contacting others outside the home, stopping them from going out alone, or controlling access to their phone, mobile, tablet or laptop. - Locking someone inside the home, such as in a room or inside furniture Controlling (e.g. wardrobe, under the stairs cupboard), or restraining them to a chair, table or or another object while fostering feelings of isolation, fear, helplessness etc. - Gaslighting and mental manipulation by making the victim believe in denying coercive behaviour something happened ("That never happened"), questioning one's memory or sanity ("You're crazy", "You're overreacting"), shifting blame ("I wouldn't get angry if you didn't provoke me"), trivializing one's feelings ("You're too sensitive"), and projecting their own negative actions onto you. Gaslighting is a form of manipulation that makes the victim doubt their own reality, memory or perception of events. - Threats, intimidation, name-calling and the use of offensive words, especially to bully, win arguments, induce fear or hate, rejection, condemnation, or to incite someone to self-harm or harm others. It can further include incitement to violence. - Unwanted, offensive or sexually explicit emails or messages; sharing of private images or videos without consent, sexual solicitation (where the victim is encouraged, persuaded or requested to engage in sexual activity in an exploitative and coercive manner or inappropriate advances on social networking sites). - Restricting access to technology. - Doxxing: sharing or revealing private information about a person without their consent (e.g. sharing on Facebook someone's home address, school address, mobile number, ID card number, etc.). **Technology** - Romance frauds: the perpetrator develops a romantic relationship with the victim and through manipulative tactics asks for money, gifts, etc. (Although this is associated facilitated violence with elderly victims, adolescents are also targeted.) Stalking through technological devices, including through spyware/stalkerware apps, online monitoring, accessing private information, installing hidden cameras or GPS location devices etc. - Deepfakes: An image/video of a person is edited, usually by AI websites and apps, so that the person appears naked or doing sexual activity. A lot of the cases involve child and adolescent victims. - Creepshot voyeurism: Taking a photo of another person under their skirt, dress or a photo of their chest area without consent. - The manosphere is an increasing trend where men and boys join online communities and forums to discuss and shape radical attitudes which embrace misogynistic beliefs about gender roles, masculinity, feminism, relationships and dating.

- With holding someone's money or bank card, or expecting accounting 'to the last Controlling cent' for every purchase and money used. someone's - Limiting someone from earning an income or preventing someone from working. This creates financial dependency. finances - Forcing debts on the victim. - Unwelcome verbal, physical or other non-verbal conduct of a sexual nature with the Sex-based purpose or effect of violating the dignity of a person. harassment and - Repeated phone calls to see where the other person is, or following the person from place to place, or expecting to know about every person contacted or spoken to by stalking the victim at all times during the day. Forcing someone to do sexual acts against their will (either with the perpetrator and/ Rape and sexual or with other persons), whether the victim is conscious or put under the influence of violence substances to be unconscious during such acts. - Use of firearms, pointed and cutting instruments (knives, penknives, pokers), slingshot/catapult, harpoon or arrow, and other street weapons. **Threatening** - Fire (lighters, hot iron, hob or cooker, or other hot objects). to harm or kill - Choking or strangulation (by hand, rope, laces, stockings etc.). - Suffocation (using plastic bag, pillow, blanket, etc.). someone - Poisoning (any dangerous chemicals, detergents, animal and plant poisons, etc.). - Torture with any object or any means. - Child marriage and forced marriage. - Female genital mutilation. Gender-based - So-called 'honour crimes'. - Sex-based harassment at work. violence - Forced abortion. - Forced sterilisation.

The consequences of gender-based violence and domestic violence are devastating and can have life-long repercussions for survivors. The worst form of gender-based violence and domestic violence is femicide.

What is child abuse within gender-based violence and domestic violence scenarios?

Child abuse occurs when a child or teen is harmed by an adult, another child or a group of adults or children. It can be physical, sexual, financial, psychological and emotional. It does not only happen in person; it can also happen online. Sometimes a child may be abused and harmed in multiple ways. It can happen once or repeatedly over a long period of time.

Not providing children with the resources, love and care they need is also a kind of abuse, called "neglect". Domestic violence and gender-based violence concerning child abuse can take many forms, similar to those experienced by adult victims. In addition to the signs mentioned above, some common indicators of child domestic abuse include the following forms:

Even in cases where the child witnesses these forms of violence, the child is still considered a victim of gender-based violence and domestic violence.	
Physical Violence	 Beatings, spanking, slapping, hitting, kicking or punching; frequent and recurrent (suspicious) bruising; burns (including cigarette marks); body marks (which can have specific shapes, such as of belts, buckles, objects of specific design etc.). Depriving the child from basic needs, such as food and drink, sending the child without lunch for school, providing adequate sleep, hygiene practices (bathing, washing teeth, combing hair). Physical abuse can take the form of neglect by leaving the child unattended, such as leaving the child in pain after an accident, for example after the child locks a finger in a drawer, bumping his/her head, hands or feet, or suffers any other form of injury. Physical abuse can take the form of child-work exploitation at home, where the child is forced to do house chores or other errands (which could include criminal activities, such as drug couriers) which go beyond activities which help the child to grow responsibly and independently.
Sexual abuse	Explicit request or forcing child to commit sexual acts with the perpetrator or other persons; forced or encouraged to watch pornography and its different forms; talking and luring about sex and sexual activities.
Female Genital Mutilation (FGM)	 The ritual cutting or removal of some or all of the external female genitalia. It violates women's bodies and often damages their sexuality, mental health, wellbeing and participation in their community. It may even lead to death. It needs to be noted that FGM is mainly the result of migrant influx in European countries coming from a diversity of cultures. At least 600,000 women living in the EU have undergone FGM.
Financial abuse	Depriving the child from attending school or social activities which require financial fees; refusing to buy clothes, school uniforms and school requested items for the child to be used in class or in outdoor activities.
Psychological abuse	 Verbal abuse through shouting, calling names, threats; Isolation by locking the child in a room or in a confined space, or in a dark place; Instilling fear within the child by any form or means; depriving and controlling the child from talking to other persons within or outside the family circle; Manipulating the child by influencing their emotions and behaviour through guilt tripping, threats or victim blaming. Gaslighting can also be used on the child to make them question their own feelings, memories or reality by dismissing, denying or underrating their feelings and perceptions.

Emotional abuse	 Constant criticism; Censuring the child from talking and speaking with other members of the household or with friends, be it direct or online; Tearing, breaking or throwing away any personal items, including schoolwork, homework, project work or craftwork, or other toys or loved items by the child; Depriving the child from showing, giving and receiving affection to and from others, such as kisses, hugs and cuddling; Depriving the child from play, watching TV or tablet, engaging and interacting with others, be they family or friends.
Forced marriage	 Marriage concluded under force or coercion – either physical pressure to marry or emotional and psychological pressure. It's closely linked to child or early marriage, when children are wed before reaching the minimum age for marriage. It needs to be noted that forced marriages and early marriages are mainly practiced by migrants entering European countries coming from a diversity of cultures. Forced and arranged marriages when the girl is pregnant, which was and still is very common in the Maltese community (before, it was legal for persons under the age of 18 to marry, with the parents' consent) now is illegal.

Identifying domestic violence and gender-based violence of children attending school

SECTION 3

Witnessing domestic abuse is child abuse

A study funded by the Commission on Gender-Based Violence and Domestic Violence in 2022 on childhood abuse experiences in Malta found that 52.0% of children have witnessed domestic violence and indirect victimisation while a total of 54.3% of children witnessed family violence.

It can be challenging to recognise if domestic violence and abuse are occurring in school children's homes. However, there are some indicators that can help us spot signs of domestic violence, particularly when the child exhibits certain behaviour or actually discloses incidents that happen at home.

A child, who may not be directly affected by violence, may witness a parent (often the mother) being assaulted, disrespected through shouting or being called names, or through other forms of domestic violence. In such cases the child may feel helpless about not being able to protect the victim, and may have increased fear towards the perpetrator of becoming a victim himself/herself. However, at times, the child may emulate the perpetrator and act out similar behaviour both at home as well as within the school environment.

Every child will react and respond differently to the experience and trauma of domestic violence and abuse. All types of domestic violence and abuse can have a serious and devastating impact on a child, affecting them for the rest of their lives.

A child who witnesses domestic violence or is the victim of child abuse is at risk of both short and long-term physical, behavioural, social, cognitive, emotional, developmental and mental health problems. That child may remain a victim of domestic violence even in their adult lives, may become a perpetrator of domestic violence, or may overcome the trauma of domestic violence through appropriate services that help him/her to maintain a healthy adult life.

When children have access to the right support at the right time they have the best possible chance to go on to lead healthy and fulfilled lives. This right support can start with you as an educator, and through your school authority. Identifying the signs of domestic violence and abuse is the first step in helping such children.

Immediate and Short-term effects of domestic abuse

A child who witnesses a parent being abused may show extreme fear, insecurity and anxiety. The child may show that he/she is always on guard, wondering when the next violent event will happen.

This can cause the child to react in different ways, depending on his/her age:

Young children in preschool

Behaviour with other children in the classroom	Children may isolate themselves from their classmates, find difficulties in interacting with their peers and not participate in activities.
Regressive behaviour	 Young children who witness domestic violence and abuse may show regressive behaviour and start doing things they used to do when they were younger, such as bed-wetting, thumb-sucking, increased crying, and whining. They may further show regression in development, including the loss of previously acquired skills such as toilet training or naming colours, letters and numbers.
Bed-wetting and nightmares	 The young child may express that he/she is bed-wetting. The child may state that he/she is waking up in fear, especially of being scolded or beaten up for wetting the bed and nightwear. The child may recount dreaming of violent scenes or being abused or having any form of nightmares (related or not related to domestic violence and abuse) and consequently bed-wetting.
Increased sensitivity	 The child may show increased sensitivity to even the least matters that happen to him/her or others. The child may become withdrawn, sad, angry, moody, clingy, irritable, sulking, whining and complaining on even trivial matters and incidents. The child may start thumb-sucking and clinging to soft toys or cloths for comfort and in a sign of seeking protection. The child may often burst out crying, even without any apparent reason, and may act as if being fearful of persons around him/her. The child may get easily startled or seem on edge. The child may further show signs of anxiety, terror or horror, such as stuttering or hiding, or covering his head or face when someone approaches him/her.
Difficulty to sleep	 The child may have difficulty sleeping or falling asleep. The child will look tired even at the start of the day, and he/she will take naps during activities, at times showing exhaustion through lack of sleep at home. In contrast, the child will show difficulty to sleep when it's time for group nap time, refusing to sleep, sulking and/or crying before actually falling to sleep. The child may get wet or get soiled.
Severe separation anxiety	 The child may show severe separation anxiety. The child may have extreme difficulty to separate from his/her mother on entering the Kindergarten/play school, and will take some time to settle down, interact with other children and respond appropriately to his/her educator (teacher or Kindergarten assistant). Conversely, the child may have difficulty to separate from the educator when it's time to leave Kindergarten/play school. The child may constantly seek attention. At different times during the day the child may often sulk, get agitated and cry, whilst calling for his/her mother. The child may seem unconsolable and will only stop his/her behaviour once the mother returns. The child may immediately cling to the mother, often starting or continuing to cry, showing both affection (clinging and hugging) and disappointment (at times by hitting her) for having left him/her alone.
Preoccupation with domestic violence	The child may be preoccupied with the incident, making it a feature of their conversation and play.

School-aged children

- Ambivalent feelings	 School-aged children may show ambivalent feelings towards both the abuser and the non-abusing parent. Children in this age group may feel guilty about the abuse and blame themselves for it. They may believe that they are the cause for their parents' troubles. They may feel helpless and powerless, unable to control the situation at home, an unable to confront the perpetrator in fear of being further abused themselves.
Low self-esteem	 Domestic violence and abuse hurts children's self-esteem. School-aged children may feel worthless, unattractive to others, especially their peers, and have a general sense of "good for nothing". These ideas may resonate from the perpetrator's own words towards them or to wards the victim of domestic violence, or through their own belief in their perception of their situation.
Difficulty in learning	 School-aged children may exhibit learning disorders, including reduced verbal processing and reading, learning delay or diminished intellectual performance. They may show a loss of drive to participate in school activities, whilst achieving lower grades in school. They may have difficulty in learning, concentrating or participating in class because they are worried about their mother and siblings. They may not have slept the night before due to yelling, screaming and/or fear of what may happen to their mother, their siblings or themselves. Since the child may lack financial assistance from home, he/she may not participate in school outings. They may start skiving lessons or absenting or running away from school. They may pay less attention in class or doze off, not do any classwork and home work, resulting in lower grades and further decreased self-esteem.
Withdrawal and isolation	 School-aged children may have fewer friends than others or get into trouble more often. They may become increasingly withdrawn, passive, isolated and showing detached behaviour. They may possibly keep only one friend to confide in, who may provide them with food or other material items when these are lacking. They may display difficulty in communicating (thoughts, feelings, experiences), become silent, hide or leave the room. They may not want to sleep at friends' houses or stay away from home often or for long periods.
Lack of appropriate boundaries	 School-aged children may have difficulty with keeping appropriate boundaries. They may have difficulty in trusting others or be prone to abuse when trusting others without getting to know them first. They may have difficulty in having self-awareness or protection relating to their body, touching and others.

Frustration and aggresion	 School-aged children may show frustration and aggression in their language and behaviour with peers and adults, including teachers. They may destroy or damage property, be cruel to animals, other children or siblings. They may become bossy and overcontrolling of others, get into fights, bullying or get into trouble with other school children who they may believe are making fun of them, are talking about them behind their backs, or are ganging up to hurt or bully them. They may display disobedience and play defiant towards their teachers and school authorities.
Victims of bullying	 Abused school-aged children can become victims of bullying themselves. They may become fearful and withdrawn, perceiving the world around them as a hostile place and wishing to avoid drawing attention to themselves. This may lead to further victimisation and bullying by other children at home, at school or in the community because they are too scared to assert or defend them selves.
Frequent medical treatment	 School-aged children may require medical treatment due to injuries sustained. They may present themselves with regular sickness, such as colds, headaches, asthma, stomach-aches or mouth ulcers. They may experience hearing difficulties, eye problems or chronic illness, including vomiting, eating disorders, allergies etc. They may often complain to their teachers of not feeling well, feeling dazed or con fused, and unable to concentrate in class. They may complain of nightmares or insomnia (being unable to sleep). They may have or display signs similar to children diagnosed with ADHD; however, once safely away from the domestic violence this can often disappear or improve.
Pre-occupation with domestic violence and abuse	 School-aged children may be preoccupied with the incident, making it a feature of their conversation and play. The child may recount what he/she sees at home, expressing the incidents and his/her own fears and ambivalent feelings towards the parents as abuser (perpetrator) and abused (victim). The child may invent stories and/or imitate the abuse through engaging in repetitive play: through acting out with other children (hitting, biting, pinching, shouting, calling names); acting out with toy figures and soft toys; by banging, throwing or tearing objects.

Teenagers

Teens' experience of domestic violence	Teens may display signs of domestic violence as exhibited by other younger school children.
Fear of leaving home	 Teens may show fear of leaving home. They might even refuse to go to school in order to be able to protect their mother or siblings, whilst being fearful and feeling constant anxiety about potential dangers and the safety of loved ones. As a result of this they may leave school early and not want to continue their studies.
Fear of staying home	Conversely, teens may show fear of going home, opt to outdoor activities or spend minimal periods at home, escaping from home or showing the need of wanting to leave home.
Show negative behaviour	 Teens who witness abuse may act out in negative ways, such as fighting with family members or skipping school. They may start fights or bully others, use violence and threats to resolve conflict, and become more likely to get in trouble with the law. They may become involved in juvenile delinquency and adult criminal acts such as stealing, assaults and vandalism, therefore often coming into trouble with the police. They may show abusive behaviours and anger toward the victim parent (sometimes teenagers blame their victim parent [often the mother] for staying in abusive situations as they do not fully understand the difficulties and challenges DV victims face when thinking about leaving their abuser).
Inappropriate intimate relationships	 They may engage in risky behaviours, such as becoming involved in inappropriate intimate relationships for their age and development, having unprotected sex or becoming pregnant as teenagers. They may start using alcohol or drugs. They may display conduct disorders.
Low self-esteem and self-harm	 They may have low self-esteem and have poor impulse control, showing signs of anxiety, depression or suicidal thoughts. They may seek pain, engage in self-destructive behaviour (self-harm), and make unsuccessful or successful suicide attempts.
Poor school performance	 They may show poor school performance or occupational and employment difficulties (unemployment and underemployment). This may be due to lack of academic and social skills, impulsive behaviour, lack of concentration or the inability to maintain a positive rapport with persons in authority. They may have unrealistic expectations of their abilities and limitations.

Long-term effects of domestic abuse

Ways of dealing with domestic violence and abuse	 Children who experience domestic violence over a long period of time may find ways to help them deal with the violence at home. They may become emotionally disconnected, numb or block their thoughts to what happens at home, learning not to hear the violence. They may avoid violent situations by leaving the room or the house. They may find excuses to avoid or delay going home (staying at school or at a friend's home) or even run away from home.
Problems of trust	 They may have problems with trusting people and consequently form poor relationships. They may "test out" others. They may avoid inviting friends to their home and be wary of attending parties and other social events for fear of their home environment being raised, being teased or bullied. They may gain highly developed social and communication skills, manipulating their way around their parents and playing their parents off against one another to get their material needs met. These skills can further be subtly displayed at school with teachers and school authorities, or at work with their employers, in order to attain what they want or expect.
Inappropriate relationships	 They may show inappropriate affection to persons they have just met, seeking love and acceptance in the wrong places and with inappropriate friends. They may have sex for the intimacy and closeness it offers, or try to become pregnant as a way to get away from their home or have someone to love them.
Fantasising about a different scenario	 They may fantasise or plan about having revenge on the perpetrator, having a happier life without the abuser, or even about living with another family. Younger children may hope for rescue by a superhero, police or prince charming figure.
Protect victim	 Children who have gained some independence themselves may take charge of the situation at home, protecting their siblings and nurturing them like a surrogate parent. They may even nurture the abused parent.
Prone to dependency on welfare services	- They may encourage their mother to leave the abuser: often ending homeless, whilst resorting to shelter homes for refuge and experiencing dependency on welfare agencies.
Independency at a young age due to neglect at home	- There may be protective behaviour, especially if the child has younger siblings: this may take the form of cooking, taking care of their siblings, doing homework alone, preparing the school bag themselves etc. Although these are responsible actions and they can demonstrate that the parents are teaching them to be responsible, in cases of domestic violence this is often a sign that the child has become the parentified child.

Trouble with the police	They may repeat behaviours seen in their domestic setting, resorting to verbal and physical aggression, showing disregard and disrespect towards authoritative persons and getting into trouble with the police.
Mental health problems	 Children who experience domestic violence may develop mental health problems, such as becoming anxious or depressed, having increased impact on psychosomatic effects, self-harm and developing an eating disorder. They may have a lowered sense of self-worth and may resort to using alcohol and other drugs as unhealthy coping mechanisms.
Seeking help and better ways of coping	 In positive situations children may reach out for help from a teacher, a neighbour, a friend's mother, other supportive adults or the police, from whom they can be referred to receive appropriate services. They may become talkative with school authorities and teachers, attaining the desired sympathy, attention and some form of affection, and meet some material needs which they lack at home. In such situations children may find better ways of coping and having a better future.
Surviving for a better future	 Children who have survived the negative effects of domestic violence may, in the long run, divert their feelings into positive activities such as sport, creative writing, acting, art or music, or striving for academic excellence. They may be able to seek and maintain appropriate jobs, attain healthy relation ships and maintain healthy adult lives within a loving and caring family environment.

Preparing a Lesson on "Stopping Violence Together"

SECTION 4

PSCD Year 5 and 6 Sample Lesson

Unit Title: Stopping Violence Together

Lesson Objective:

To enable the students to reflect on gender-based violence and domestic violence and how they can reach out.

Learning Intention:

You will become aware of healthy and unhealthy relationships at home and how and where to reach out when in fear of harm.

Keywords:

Gender-Based Violence, Domestic Violence, abuse, respect for oneself, respect for others, positive self-esteem.

Note to Teacher:

Inform the class that the national helplines for cases of Domestic Violence are 179 and 116 006. In cases of emergency 112 is to be used.

Activities:

- Explain the different forms of abuse: verbal, physical, sexual, psychological or economical violence. Inform students of how they can reach out for help.
- The following link of the Commission for Gender-Based Violence and Domestic Violence lists information and contact details of all support services:

https://www.stopviolence.gov.mt/directory/

- Appendix 2 enlists Domestic Violence Support and Shelters in Malta.
- Students are then to make two lists: one of five (a) healthy behaviour/activities and one of five (b) unhealthy/abusive behaviour that can take place at home.
- Round robin with students reading two of the behaviours/activities from their lists
 (a) and (b). Continue round robin until all lists have been exhausted.

Resulting Outcome for Educator

The educator may encounter students who are experiencing gender-based violence or domestic violence or abuse and may have to report such incidents to the school authorities for appropriate action.

Resources:

Handouts: Lesson handouts can be found in The Expect Respect Education Toolkit, published by

Women's Aid Federation of England: https://thehub-beta.walthamforest.gov.uk/sites/default/

files/2019-08/Expect_Respect_Education_Toolkit%20%282%29.pdf

Video: https://www.youtube.com/watch?v=B2h_PO9subA

Video: What is Domestic Violence? A Short Film for Children - YouTube

Appendix 1

Helping a child to open up about domestic violence

A child may voluntarily come to you for comfort and support, to speak out and disclose information about what is happening to him/her, particularly concerning the home environment and any situation that could cause harm to him/her or other members at home.

The child may show natural trust in you, and therefore you need to maintain a safe and caring relationship to sustain the trust given to you by the child. In the course of the information provided, at a point during the disclosure, you will have to tell the child that you have to inform other professionals. You have to be cautious in your approach, primarily not to scare off the child from continuing to confide in you, and secondly from shutting down in fear of what could be the consequences at home if the perpetrator had to know of the disclosure. In any case or circumstance you are obliged to report the disclosure of domestic violence to the school authorities.

In many instances, however, a child will show withdrawal behaviour, staying alone from his/her friends, seeming lost or inattentive in class and other school activities, not participating in play, extracurricular activities or school outings. It is in such cases that you will need to approach the child and investigate caringly and discreetly.

A child's ability to communicate is affected by many factors.

Some factors include:

- Age of the child
- Vocabulary
- Gender
- Older or younger siblings
- School/daycare/educational opportunities
- Abilities/disabilities
- Exposure to friends or adults other than parents

What should you do if you notice signs of domestic abuse or you're worried about a child?

If you are concerned that a child may be at imminent risk of domestic abuse always report to the school authorities immediately.

- Use the child or young person's own words when reporting.
- Include your own observations of the child's behavioural and emotional state.
- Avoid being judgmental, generalising or providing immediate solution to the problem.
- The school is to refer the child to other professionals.
- Contact further services for support and action as required.

The information you have may help professionals to build a picture about what might be happening to the child at home and help him/her accordingly.

What to do if a child reveals abuse.

Recognise, Respond, Report

Recognise	 Children or young persons who disclose that they have experienced harm (domestic violence) or are at risk of harm need to feel supported and safe. Provide a safe space for the young person where there is total privacy, even from parents. Use age-appropriate words, phrases and references that the child can understand and associate with.
Respond	 Make the child feel safe and comfortable by providing reassurance. Ensure that the child understands that it is not his/her fault that there is such a situation at home. The child or young person is experiencing a crisis. Control your own emotions and any expressions of panic or shock. Listen attentively to the child's experience, the words he/she chooses and the manner by which he/she expresses him/herself. Take what the child says seriously. Show your concern about their well-being and the rest of the family. Do not push to ask questions. Let them share as much as they are comfortable with. Explain that such situations have happened to others and that some adults do wrong things which are not acceptable. Emphasise that you will do your best to support them, but do not make promises you may not be able to keep. Empathise with the child that his/her situation is unique to them. Explain to the child what you will do next, and that you need to tell someone who can help them.
Report	 Never make contact or confront the alleged abuser, as this can increase direct risk and danger. You are obliged to report what you've been told immediately to the school authorities. The school authorities are to refer the child to other professionals and contact further services for support and action.

Helping skills when sitting with the child

There are some attitudes which help maintain a "therapeutic relationship" between the helper and the child. Gerald Egan (1975) introduced the acronym SOLER for non-verbal communication for helping skills.

s: SIT SQUARELY on to the child or teen, facing each other. Sitting squarely says, "I'm here with you; I'm available to you." If, for any reason, facing the person squarely is too threatening for him/her, then an angled position (5 o'clock) position may be more helpful, to avoid the possibility of staring.

O: Maintain an OPEN posture at all times, not crossing your arms or legs, which can appear defensive. Adopt an open posture. Crossed arms and/ or crossed legs can be a sign of lessened involvement with or availability to others. An open posture says you are open to the child and what he/she has to say. It is non-defensive in nature.

L: LEAN slightly in towards the child. It says, "I'm with you; I'm interested in you and what you have to say." Leaning back can suggest the opposite. Remember not to lean too far forward, as this may be seen as placing a demand on the child, who may find it intimidating.

E: Maintain EYE CONTACT with the child without staring. It's another way of saying, "I'm interested; I'm with you." Remember this is not the same as staring. You will need to look away every so often, in order not to stare, but monitor the amount you look away. It could say something about your own level of comfort/discomfort.

R: RELAX. Be relaxed and natural in your attitude. This should in turn help the child to relax and feel at ease. If you are fidgeting nervously it will distract the child. Being relaxed tells the child that you are comfortable with using your body as a means of personal contact and expression.

Empathy

Use empathy in your relationship with the abused child. This means that you show understanding, caring, compassion, connection and sound communication with the child calling for help.

Empathy is different from sympathy, though they are both ways we respond to people's suffering. Whilst sympathy is acknowledging someone else's pain, empathy is choosing to feel the pain with them. Sympathy says, "I care about you" whilst empathy says, "I'm hurting with you." Empathy, therefore, can be described as the ability to sense other people's emotions, together with the ability to imagine what someone else might be thinking or feeling, sometimes referred to as "walking in someone else's shoes".

There are some responses which you may need to use with caution or avoid completely during a disclosure relationship:

- Judgmental	Judgmental behaviour on your part can be harmful to the disclosure relationship as it can suggest negative evaluation or criticism whilst hindering open communication.
Interpretation	Interpretation, whilst it can be helpful in clarifying a confusing or ambiguous situation, or a person's perspective in ensuring mutual understanding, can suggest scenarios which are not real to the child seeking help.
Reassurance	Reassurance can provide comfort, reduce anxiety and offer hope. However, it can create a false sense of security through false reassurance to the child's harmful situation and how the problem can be addressed and resolved.
Exploration and Probing	Exploration and probing are important to gather information and understand the child's situation through open-ended questions. However, you need to be cautious not to make the child feel as if he/she is under investigation and being bombarded with questions which he/she may perceive as threatening and suspicious.
Solution to a problem	Providing the child with a solution to the home situation, on your part, can give false expectations in solving the problem or seeking alternatives to the situation. Problem-solving strategies are to be left to competent experienced professionals who can explore and understand better how to find solutions in helping the child and his/her family.

Open-ended questions, closed-ended questions and leading questions.

A child's disclosure of domestic violence or child abuse raises many questions. During a disclosure session with a child you may need to ask questions to clarify the situation.

These clarifications will assist, providing sufficient information to the school authority and other professionals to make an informed assessment and an objective report. If the child chooses not to respond to your questions, don't pressure.

On the other hand, answer any questions the child may ask of you honestly, keeping your answers appropriate to the child's age and development.

Avoid asking the child too many questions, especially closed-ended and leading questions.

Remember, it is the responsibility of the Child Protection Services (CPS), the Domestic Violence Unit (DVU) and law enforcement systems to conduct interviews concerning child abuse and domestic violence.

Multiple interviews can traumatize a child as well as have a negative impact on the CPS and DVU assessment or criminal investigation.

Open-ended questions

Asking open-ended questions will help the child answer through his/her own perspective and perception of the situation. They will invite whatever information the child wishes to provide, without leading the answers you receive in a particular direction or a limited range of options to choose from. The open-ended questions allow the child to respond with a range of answers.

Open-ended questions are the best way to gain more information from the child or young person, particularly if they are feeling vulnerable or afraid or are testing out how prepared you are to hear what they want to tell.

Examples of open-ended questions are:

"I notice that you have a bruise. How did it happen?"

This helps you to connect with the child and he/ she may start to open up. At this stage the child may tell the truth or may invent excuses or stories.

"Tell me more about that."

This will help you maintain the conversation with the child, whilst encouraging him/her to open up and be truthful and sincere in his/her responses.

"You seemed to get angry when I asked you that question."

(Pause to allow the child to respond, implying, "Why?" or "How come?")

"Tell me more about..."

This encourages the child to elaborate on a specific topic or experience they've mentioned.

"What happened?"

This is a direct question that invites the child to describe an event or situation.

"When did this happen?"

This helps establish a timeline of events.

"Who else was there?"

This helps identify other potential witnesses or individuals involved.

"Has this happened before?"

This helps determine if the incident is isolated or part of a pattern.

"What happened next?"

This encourages the child to continue their narrative.

"How often does it happen?"

This helps understand the frequency of the abuse or neglect.

"How do you feel about it?"

This helps the child to express their emotions related to the situation.

"How did the other person react?"

This helps to establish the level of danger within the home.

"What are you most worried about now?"

This helps assess the child's current concerns.

"Tell me about your relationship with..."

This will help assess the child's feelings and attitudes towards the other person.

"What else should I know?"

This is a general question that encourages the child to share any other relevant information.

"How do you see your future?"

This will assess the child's expectations and the services required to assist the child and his/her family.

Open-ended questions can't be answered with a "yes" or a "no" but help you gain information from a child in his/her own words. Open-ended questions allow the child to tell the full story without being influenced by the question itself, painting the big picture for you so that you can understand the circumstances around an injury or behaviour pattern.

Closed-ended questions

During a disclosure by a child you may need to follow up with closed-ended questions in order to gather specific and factual information.

Closed-ended questions most often suggest a "yes" or "no" answer, or a simple factual response.

Closed-ended questions are the "who, what, when, where, how" questions that help you collect specific facts about a situation.

In response to an open-ended question relating to child abuse, the child may respond by saying, "My father hit me." You can ask specific closed-ended questions to gather and gain a better picture, more knowledge and information about the child abuse.

Examples of closed-ended questions specific to child abuse are:

"Where did this happen?"

"When does this happen?"

"What did he hit you with?"

"How often does this happen?"

"Has this ever happened before?

Leading questions

A leading question implies or contains its own answer. It subtly prompts the respondent to answer in a particular way. Leading questions can lead a disclosure off track, prompting the child to answer in the way they think you want to hear or are comfortable with rather than what they want to share. It is furthermore important to avoid putting words in the child's mouth.

Rephrase a leading question so that it no longer suggests an answer. You can ask an open question, "I notice that you have a bruise.

How did it happen?" rather than asking a leading question, "He hurt you, didn't he?"; "Your mommy told me you fell. Is that true?" or "Did someone give you a bad touch?"

Remember that a child's testimony might later be considered not trustworthy if the child was asked leading questions.

Do's & Don'ts when Talking to Children

- Do keep questions simple.
- Don't use jargon or technical terms.
- Do consider the pace of your conversation. The use of extended pauses and silence conveys to the child that you are interested in their answer to questions you may have asked.
- Don't use grammatically complex questions.
- Do consider your non-verbal behaviour. Children will be more accurate if questions are asked by a warm and supportive individual.

Appendix 2

Referral agencies for reporting Domestic Violence

Malta: Police General Headquarters

San Kalċidonju Square, Floriana

Telephone: 2294 2717 / 2294 2777

Santa Luċija Domestic Violence Hub, Dawret it-Torri, Santa Luċija

Telephone: 2294 3231/2294 3232/2294 3233

Victim Support Agency

52, Old Theatre Street, Valletta

Victim Support Regional Centres: Qawra, Santa Luċija, Malta and Xewkija, Gozo.

Telephone/The National Victim Support Line: 116006

Email: vsasupport@gov.mt

Website: vsa.gov.mt

Gender-Based Domestic Violence Unit

Tel: 2294 2717 / 2294 2777

Email: gbdv.police@gov.mt

Gozo: Victoria Police Station

133, Triq ir-Repubblika, Rabat, Gozo

Telephone: 2156 2040 / 2294 4200 / 2294 3014

FSWS, Aģenzija Appoģģ

36, Triq Il-Mimosa, Tal-Pietà PTA 1318

Telephone: 2295 9000

Telephone/FSWS Support line: 179

Ghabex Emergency Shelter (through FSWS referral)

Legal Aid Malta Agency

'188-189', Old Bakery Street, Valletta

Telephone: 2247 1500

Email: info.legalaidmalta@gov.mt

Website: https://legalaidmalta.gov.mt/

Note: Telephone numbers in Malta start with the prefix 00356 or +356

Domestic Violence support and shelters

Malta: Support services offered by schools through the Ministry for Education and the Secretariat for Catholic Education.

Commission on Gender-Based Violence and Domestic Violence

Zentrum Business Centre, Triq l-Imdina, Hal Qormi

Telephone: 2276 8301

Email: contactus@stopviolence.gov.mt Website: https://stopviolence.gov.mt/

Facebook: https://www.facebook.com/stopviolencemalta

Fondazzjoni Dar il-Hena

126, Fleur De Lys Road, Birkirkara

(Ministry for Family, Children's Rights and Social Solidarity, Caritas Malta and

the Alfred Mizzi Foundation)

Telephone: 7702 6644 Email: info@fdh.org.mt

Dar Maria Dolores

Telephone: 21445431 Mobile: 79436781 Email: info@fdh.org.mt

Facebook: www.facebook.com/fondazzjonidarilhena/

Fondazzjoni Kenn u Tama: Dar Emmaus

Telephone: 2155 2390 Mobile: 9986 6673

Email: kennutama075@gmail.com

Facebook: https://www.facebook.com/DarEmmaus/

Fondazzjoni Sebħ

72/B, Triq Villambrosa, Hamrun, HMR1127

Telephone: 2247 0900 Email: info@sebh.mt

Il-Milja

Telephone: 2148 2504 / 7934 5123

Jeanne Antide Foundation (SOAR)

Telephone: 2180 8981 / 7960 2595

Email: soar@antidemalta.org

Website: https://www.antidemalta.org/

Facebook: https://www.facebook.com/soarservice/ Facebook: Meraki Soaps | Tarxien - Facebook

Kellimni.com / SOS Malta

Telephone: 2124 4123 / 2133 5097

Website: www.kellimni.com Email: info@kellimni.com

Migrant Women Association Malta

1A Rhea Buildings, Triq is-Santissima Trinità, Hamrun, MRS 2280

Email: migrantwomenmalta@gmail.com

Telephone: 9969 4638

Rainbow Support Service

32, Parish Street, Mosta, MST 2021

(Support Services for LGBTIQ+ persons)

Telephone: 2143 0009 Mobile: 7943 0006

Email: support@maltagayrights.org

Facebook: https://www.facebook.com/rainbowsupportservice/

The Good Shepherd Sisters

Website: www.darmerhbabik.org

Facebook: https://www.facebook.com/darmerhbabik

Instagram: https://www.instagram.com/dar_merhba_bik_foundation/?hl=en

Victim Support Malta

Telephone: 2122 8333

Email: info@victimsupport.org.mt Website: https://victimsupport.org.mt/

Facebook: https://www.facebook.com/victimsupportmalta/

Women for Women Foundation

131, Triq il-Madonna tal-Ġebla, Gżira

Telephone: 9900 4440

Email: info@womenforwomen.foundation

Facebook: www.facebook.com/wfwfoundationmalta

Instagram: @women4womenfoundation
Website: www.womenforwomen.foundation

Women's Rights Foundation

203/1, Vincenti Buildings, Old Bakery Street, Valletta

Telephone: 7970 8615 Email: info@wrf.org.mt

Website: https://www.wrf.org.mt/

Facebook: https://www.facebook.com/wrfmalta/

Gozo

FSWS Gozo Branch Operations

Triq il-Hamrija, Xewkija, Gozo

FSWS Victoria Community Centre, Triq il-Belliegha, Victoria, Gozo

Telephone: 2334 5020

Social Work Unit - Ministry for Gozo

Social Work Unit, Level 3, Tiġrija Palazz, Republic Street, Victoria, Gozo

Telephone: 2215 6630

Email: socialworkunit.mgoz@gov.mt

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Online:

 $\textbf{\textit{Relationships education, relationships, sex education and health education guidance:} \ \ \textbf{https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1090195/Relationships_Education_RSE_and_Health_Education.pdf}$

https://commission.europa.eu/strategy-and-policy/policies/justice-and-fundamental-rights/gender-equality/gender-based-violence/what-gender-based-violence_en

https://courts.delaware.gov/childadvocate/training/TalkingwithKidsTips.pdf

https://fsws.gov.mt/wp-content/uploads/2024/12/MRG-Document-13.04.21.pdf

https://healthyschoolscp.org.uk/keeping-safe/domestic-violence/

 $https://the hub-beta.waltham for est. gov.uk/sites/default/files/2019-08/Expect_Respect_Education_Toolkit\%20\%282\%29. pdf for example of the following property of the proper$

https://womenshealth.gov/relationships-and-safety/domestic-violence/effects-domestic-violence-children #references + the first properties of the fir

https://www.barnardos.org.uk/get-support/support-for-parents-and-carers/child-abuse-and-harm.

https://www.barnardos.org.uk/get-support/support-for-parents-and-carers/child-abuse-and-harm/children-affected-domestic-abuse-violence and the contract of t

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https://www.childprotection.sa.gov. au/report-suspected-harm/what-not-to-report-as-suspected-harm/what-not-as-suspected-harm/wha

https://www.dorightbykids.org/how-to-ask-questions/

https://www.jennysplace.org/recognising-childrens-responses-to-domestic-violence/

https://www.justice.gov/ovw/domestic-violence

https://www.ramsey solutions.com/personal-growth/empathy-vs-sympathy

 $https://www.un.org/en/coronavirus/what-is-domestic-abuse \#: \sim :text = Domestic \% 20 abuse \% 20 is \% 20 typically \% 20 manifested, economic \% 20 or \% 20 sexual \% 20 in \% 20 nature$

https://www.unhcr.org/what-we-do/protect-human-rights/protection/gender-based-violence

https://www.womensaid.org.uk/information-support/the-survivors-handbook/im-not-sure-if-my-relationship-is-healthy/#unhealthy-behaviour https://www.womensaid.org.uk/information-support/what-is-domestic-abuse/