School Violence, Mental Health, and Educational Performance in Uganda

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KEY WORDS
corporal punishment, child maltreatment, violence against children, mental health, education, Uganda, primary school

ABBREVIATIONS
ICAST-CI—International Society for the Prevention of Child Abuse and Neglect Child Abuse Screening Tool—Child Institutional; SDQ—Strengths and Difficulties Questionnaire; SRQ—Self-Report Questionnaire

Dr Devries, principal investigator of the Good Schools Study, designed the study, oversaw the baseline survey, performed the data analysis, and wrote the manuscript; Ms Child participated in the design of the Good Schools Study, managed the fieldwork for the baseline survey, and critically revised the manuscript; Drs Allen, Walakira, and Parkes participated in the design of the Good Schools Study and critically revised the manuscript; Mr Naker developed the Good School Toolkit, initiated the idea of doing a study, participated in the design of the Good Schools Study, and critically revised the manuscript; and all authors approved the manuscript as submitted.

This trial has been registered at www.clinicaltrials.gov (identifier NCT01678846).

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WHAT’S KNOWN ON THIS SUBJECT: Violence from school staff toward children is anecdotally widespread, but there are few empirical data on prevalence and health consequences, especially in low-income settings.

WHAT THIS STUDY ADDS: Despite a ban on corporal punishment, just over 52% of children in Luwero District experienced physical violence from school staff members in the previous week. This was associated with poor mental health in boys and girls and poor educational performance in girls.

BACKGROUND: Violence against children from school staff is anecdotally common in low- and middle-income countries, but data on prevalence and associations with mental health and educational outcomes are lacking.

METHODS: We report data from a cross-sectional survey conducted in June and July 2012 in Luwero District, Uganda. Forty-two primary schools representing 80% of students in the district were randomly selected; 100% agreed to participate. The International Society for the Prevention of Child Abuse and Neglect Child Abuse Screening Tool—Child Institutional; Strengths and Difficulties Questionnaire; and reading, spelling, and math tests were administered. We present descriptive statistics and logistic regression models, accounting for the complex sampling scheme used in the survey.

RESULTS: We surveyed 3706 students and 577 school staff members; 93.3% (SE 1.0%) of boys and 94.2% (SE 1.6%) of girls attending primary school reported lifetime experience of physical violence from a school staff member, and >50% reported experience in the past week. Past-week physical violence was associated with increased odds of poor mental health and, for girls, double the odds of poor educational performance (adjusted odds ratio = 1.78, 95% confidence interval = 1.19–2.66). For boys, significant interactions were present.

CONCLUSIONS: Despite a ban on corporal punishment in Ugandan schools since 1997, the use of violence against students is widespread and associated with poor mental health and educational performance. School violence may be an important but overlooked contributor to disease burden and poor educational performance in low- and middle-income settings. Pediatrics 2014;133:1–9
Exposure to violence in childhood has profound health and social consequences, including increased risk of depression, suicide, conduct disorder, disruptive behavior, and risky sexual behavior. In most countries, children spend more time at school than any other place besides the family home. Despite this, there is little information on the prevalence and health effects of violence experienced by children in schools in low- and middle-income settings.

Uganda is no exception. Corporal punishment was banned in Ugandan schools in 1997 by the Ministry of Education and Sports, yet there are widespread reports of physical punishment. One survey of >1400 children found that >80% had experienced caning and slapping by teachers. Qualitative studies also highlight that Ugandan girls experience sexual violence and harassment at school but are unable to report it for fear of reprisals, similar to other African settings.

In this article, we report on the prevalence of physical, sexual, and emotional violence and neglect experienced by children attending primary school, both from school staff members and others, including parents. We hypothesized a priori that female students would experience more sexual violence and male students would experience more physical violence and injury and that children experiencing more physical violence from school staff would have worse mental health outcomes and educational achievement relative to peers who had experienced less violence. We also hypothesized that school staff members who reported using more violence toward students would have poorer mental health, have experienced more violence themselves, and would use more violence against nonstudents relative to staff who reported less use of violence toward students.

**METHODS**

**Design**

We analyzed baseline survey data from the Good Schools Study, which is a cluster randomized controlled trial of the Good School Toolkit. The Toolkit was developed by Raising Voices to prevent violence against children in school and improve educational outcomes (http://raisingvoices.org/good-school).

**Setting**

The survey took place in Luwero District, Uganda, in June and July 2012. Luwero is near Kampala and has both rural and urban areas.

**Sampling**

We obtained a list of all 268 primary schools registered in Luwero in 2010 from the Ministry of Education and Sports. We excluded 97 small schools (with <40 students registered in Primary 5) and 20 schools with existing governance interventions. The remaining 151 schools formed our sampling frame. We stratified these 151 schools according to the gender ratio of pupils (>60% girls, >60% boys, or approximately even). Forty-two schools were randomly selected, proportional to the size of the stratum. One hundred percent of the schools agreed to participate. The sampled schools contain 79.7% of Primary 5, 6, and 7 students in Luwero. Within each school, we took a simple random sample of up to 130 pupils from Primary 5, 6, 7 and a complete sample of school staff. If there were <130 students in a school, all were invited to participate. Seventy-seven percent of sampled students provided data; 19% of students were absent from school during the week of the survey or for extended periods.

**Procedure**

For each participating school, headteachers notified staff, students, and parents in advance of the survey. Parents could opt their child out of participation; otherwise individual children provided consent to participate. Staff members provided individual consent to participate in the staff survey. All data on violence and mental health were collected in a face-to-face interview; some of the educational performance data were collected in groups in a normal classroom setting. All interviewers received 3 weeks of training on how to ask about violence in a nonjudgmental way, how to preserve confidentiality, and on procedures to follow if participants became distressed.

A comprehensive child protection plan designed by the study team in conjunction with local services was in place to provide support to those in need of services. We also had a trained counselor available to any child who requested counseling. The response of services is the subject of a separate article.

**Instruments**

All items were translated into Luganda and reviewed by a panel of teachers and Raising Voices staff to ensure that they would be appropriate for Ugandan child participants and school staff. Items were then cognitively tested and refined iteratively in a sample of ~40 children and 20 school staff members from Kampala primary schools to ensure understanding and that meanings of original items were adequately captured. We then surveyed a larger sample of 697 children and 40 staff from Kampala schools to test distributions of items and to test study procedures.

**Children**

Experiences of violence were measured by the International Society for the Prevention of Child Abuse and Neglect Child Abuse Screening Tool-Child Institutional (ICAST-CI) and some items from the World Health Organization Multi Country Study on Women’s Health and Domestic Violence against Women. Reliability and construct validity for the ICAST-CI were initially established in 4 countries, and the
Staff

Items from the ICAST-CI were adapted to ask staff about their use of specific acts of violence toward students in the past week, past year, and ever in their life. All variables were modeled as binary. Staff experiences of violence were measured using items from the World Health Organization Multi Country Study on Women’s Health and Domestic Violence against Women,14 and all were constructed as binary variables. Mental health and well-being was assessed using the Self-Report Questionnaire (SRQ)-20,14 which has been widely used and validated in a number of low- and middle-income settings. There is no validated cutoff for Ugandan populations, thus, consistent with previous research, we deemed the top 30% of the overall distribution as having a “high” score indicative of probable depression/anxiety.2 Cronbach’s $\alpha$ in our sample was .70.

Analysis

All analyses were conducted by using Stata 12.0 (Stata Corp, College Station, TX)18 and were carried out separately for male and female participants. Missing data were excluded from analyses involving those variables (pairwise deletion).

Descriptive statistics on participants’ background characteristics, violence, SDQ score, and educational test performance are presented by gender and compared by using $\chi^2$ tests for binary variables, $\chi^2$ tests for trend for categorical variables, or $t$ tests for continuous variables.

We tested our hypotheses by fitting logistic regression models for reported physical violence from school staff in the past week unadjusted and adjusted for a priori identified potential demographic confounders (see Table 5). We tested for interactions between all exposure variables. There were significant interactions between SDQ score with age and educational performance in boys, so separate adjusted models for boys with “low” plus “medium” levels of mental health difficulties and boys with “high” levels of difficulty are presented.

All analyses account for the sampling scheme used in the baseline survey; student responses are weighted to account for unequal probabilities of selection for students. SEs are adjusted for clustering at the school level by using Taylor linearization.19

RESULTS

Characteristics of Students and Staff

The survey was completed by 3706 students and 577 staff members, and their characteristics are summarized in Table 2; 78.7% of boys and 84.6% of girls were aged 11 to 14 years. Only 46.5% of boys and 41.0% of girls reported eating at least 3 meals in the day before the survey, indicating that approximately half of all students were possibly hungry. Staff had a mean age in their 30s; 69.2% of female staff and 52.6% of male staff were Baganda, the dominant tribe in the Luwero region. Most male and female staff were married or were living with someone as if married. Just under one-quarter were single, and 7.1% of women were divorced or widowed versus 0.8% of men.

Students’ Experience of Violence From School Staff

Lifetime experience of physical violence from school staff was nearly universal, with 93% of boys and 94% of girls reporting exposure (Table 3). Slightly >52% of students had experienced physical violence from school staff in the past week. Severe physical violence was reported by 7% of students, with 1.8% of reporting severe physical violence in the past week; 2.3% of girls and 1.9% of boys reported lifetime sexual violence from school staff, and past-week
<table>
<thead>
<tr>
<th>Variable</th>
<th>Items</th>
<th>Coding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional violence, neglect</td>
<td>Cursed, insulted, shouted at, or humiliated you? Referred to your skin color, gender, religion, tribe, or health problems you have in a hurtful way? Stopped you from being with other children to make you feel bad or lonely? Tried to embarrass you because you were an orphan or without a parent? Embarrassed you because you were unable to buy things? Stole or broke or ruined your belongings? Threatened you with bad marks that you didn’t deserve? Accused you of witchcraft? Coded 1 if answered yes to any of the items; 0 if answered no to all items.</td>
<td></td>
</tr>
<tr>
<td>Physical violence</td>
<td>Hurt you or caused pain to you? Slapped you with a hand on your face or head as punishment? Twisted your ear as punishment? Twisted your arm as punishment? Pulled your hair as punishment? Hit you by throwing an object at you? Hit you with a closed fist? Hit you with a stick? Caned you? Kicked you? Knocked you on the head as punishment? Made you dig, slash a field, or do other labor as punishment? Hit your fingers or hands with an object as punishment? Crushed your fingers or hands as punishment? Made you stand or kneel in a way that hurts to punish you? Made you stay outside for example in the heat or rain to punish you? Burnt you as punishment? Taken your food away from you as punishment? Forced you to do something that was dangerous? Choked you? Tied you up with a rope or belt at school? Tried to cut you purposefully with a sharp object? Severely beat you up? Coded 1 if answered yes to any of the items; 0 if answered no to all items.</td>
<td></td>
</tr>
<tr>
<td>Sexual violence</td>
<td>Teased you or made sexual comments about your breasts, genitals, buttocks, or other body parts? Touched your body in a sexual way or in a way that made you uncomfortable? By “sexual way,” we mean touching you on your genitals, breasts, or buttocks. Showed you pictures, magazines, or movies of people or children doing sexual things? Made you take off your clothes when it was not for a medical reason? Opened or took their own clothes off in front of you when they should not have done so? Kiss you when you didn’t want to be kissed? Make you touch their genitals, breasts, or buttocks when you didn’t want to? Touched your genitals, breasts, or buttocks when you didn’t want them to? Given you money or things in exchange for doing sexual things? Involved you in making sexual pictures or videos? Threatened or pressured you to have sex or do sexual things with them? Actually made you have sex with them by threatening or pressuring you or by making you afraid of what they might do? Made you have sex with them by physically forcing you (have sex with you)? Coded 1 if answered yes to any of the items; 0 if answered no to all items.</td>
<td></td>
</tr>
<tr>
<td>Injury</td>
<td>Have any of the following things ever happened to you as a result of what teachers or adults at your school have done to you, as you told me about above? You felt pain? You had bruising? You had swelling? You had bleeding? You had cuts? It was difficult to sit down on your buttocks? It was difficult to walk? You lost consciousness, even temporarily? You suffered a dislocated, sprained, fractured, or broken bone? You had any other serious injury? You had to get medical attention, for example, from the health worker or hospital? You had to stay home from school? Coded 1 if answered yes to any of the items; 0 if answered no to all items.</td>
<td></td>
</tr>
<tr>
<td>Physical violence from school staff</td>
<td>What are the methods of physical discipline you have used with students? Have you ever done the following: slapped them with a hand on their face or head as punishment? Twisted their ear as punishment? Twisted their arm as punishment? Pulled their hair as punishment? Hit them by throwing an object at them? Hit them with a closed fist? Hit them with a stick? Caned them? Kicked them? Knocked them on the head as punishment? Made them dig, slash a field, or do other labor as punishment? Hit their fingers or hands with an object as punishment? Crushed their fingers or hands as punishment? Made them stand or kneel in a way that hurts to punish them? Made them stay outside, for example, in the heat or rain to punish them? Burnt them as punishment? Taken away their food as punishment? Forced them to do something that was dangerous? Choked them? Tied them up (with a rope or belt) at school? Tried to cut them purposefully with a sharp object? Made them roll over on the ground until they were dizzy as punishment? Coded 1 if answered yes to any of the items; 0 if answered no to all items.</td>
<td></td>
</tr>
</tbody>
</table>

* Severe physical violence.
* Moderate injury.
* Severe injury.
experience was reported by 0.8% of girls and 0.5% of boys. Emotional violence and neglect were also common, with nearly a third of students reporting lifetime experience and slightly >11% reporting past-week experience.

Of the 3476 children who reported lifetime experience of physical and/or sexual violence from school staff, 65.0% of boys and 69.1% of girls reported injuries. More than a quarter of students reported injuries in the past week. Prevalence of moderate injury was significantly higher in girls than boys, with 25.6% of girls reporting experience over their lifetime and 6.8% in the past week, but 17.4% of boys reporting moderate injury over their lifetime and 4.6% in the past week. Among boys 4.4% reported a severe injury over their lifetime, compared with 5.0% of girls, and ∼1% of both boys and girls reported a severe injury in the past week. Violence from other persons besides school staff was also common. The prevalence of lifetime physical violence from other persons was more common in girls (54.8% vs 43.7% of boys); sexual violence was also far more common in girls (11.8% vs 2.5%). Prevalence of emotional violence and neglect was similar in girls and boys (48.6% and 49.4%).

Associations Between Physical Violence, Mental Health, and Educational Performance in Students

Crude associations are displayed in Table 4. In both male and female students, past-week physical violence was associated with medium and high levels of reported difficulties on the SDQ. For girls, those who reported past-week physical violence had nearly double the odds of being a low performer on educational tests versus girls who did not report violence. For boys, this relationship went in the opposite direction, with boys who reported past-week physical violence from school staff less likely to be low performers on educational tests.

Adjusted models reveal that for girls (Table 5), past-week physical violence was independently associated with increased odds of poor mental health (high levels of difficulty on the SDQ) and
Table 3: Prevalence of Violence and Injury Reported by Students

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Male (%)</th>
<th>SE</th>
<th>Female (%)</th>
<th>SE</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>From school staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical violence, lifetime</td>
<td>49.4</td>
<td>2.4</td>
<td>48.6</td>
<td>2.6</td>
<td>.83</td>
</tr>
<tr>
<td>Emotional violence and neglect, lifetime</td>
<td>32.6</td>
<td>2.4</td>
<td>30.0</td>
<td>2.5</td>
<td>.48</td>
</tr>
<tr>
<td>Injury, past week</td>
<td>65.0</td>
<td>3.0</td>
<td>69.1</td>
<td>2.7</td>
<td>.19</td>
</tr>
<tr>
<td>Injuries lifetime (n = 3476)</td>
<td>2.5</td>
<td>0.3</td>
<td>2.3</td>
<td>0.3</td>
<td>.51</td>
</tr>
<tr>
<td>Moderate injury, lifetime</td>
<td>17.4</td>
<td>1.6</td>
<td>25.6</td>
<td>2.4</td>
<td>.002</td>
</tr>
<tr>
<td>Emotional violence and neglect, past week</td>
<td>4.29</td>
<td>2.4</td>
<td>4.86</td>
<td>2.6</td>
<td>.83</td>
</tr>
<tr>
<td>Absent 1 or more days, past week</td>
<td>0.85</td>
<td>.15</td>
<td>0.88</td>
<td>.14</td>
<td>.15</td>
</tr>
<tr>
<td>Low performer on educational tests</td>
<td>0.71</td>
<td>.02</td>
<td>1.81</td>
<td>1.23</td>
<td>.004</td>
</tr>
</tbody>
</table>

* Asked only of those who reported experiencing lifetime physical and/or sexual violence.

For boys, adjusted models revealed a more complex picture (Table 5). For the boys with low and medium difficulties, past-week physical violence was independently associated with medium levels of mental health difficulties (versus low levels), after controlling for demographic factors and experience of other forms of violence. Boys who reported past-week violence were less likely to report poor educational test performance. Boys reporting a disability were also less likely to report past-week physical violence. In the boys with high levels of difficulties, after controlling for experiences of other forms of violence from school staff, past-week physical violence was related to lower odds of low educational performance, at a larger magnitude than in boys with medium and low difficulties.

### Which School Staff Members Use Violence?

Both male and female school staff members reported similar levels of use of physical violence against their students: 80.8% of men and 75.7% women reported lifetime use of violence (Table 6), and 40.2% of men and 42.6% of women reported use of violence in the past week. For female staff, higher SRQ scores, experience of intimate partner violence, nonpartner sexual violence, or childhood sexual abuse were not associated with increased odds of using physical violence against students in the past week in crude analyses. For male staff members, high SRQ score was not associated with increased odds of using violence. However, both experiencing intimate partner violence and/or childhood sexual abuse as well as use of violence against people other than students was associated with increased odds of using physical violence against students.

### Discussion

Despite a ban on corporal punishment in Ugandan schools since 1997, nearly all primary school children in Luwero have experienced physical violence from a school staff member in their lifetime, and >50% in the past week. Even after controlling for experience of other...
forms of violence from school staff and violence from non–school staff, students reporting past-week physical violence from school staff had higher levels of mental health difficulties, and for girls, nearly double the odds of low educational performance. Approximately 40% of school staff reported using physical violence, and for male staff members, experiencing violence themselves and using violence against others was associated with increased odds of using physical violence against students.

Comparison With Other Studies
We report results from one of the first surveys using a probability sample and standardized assessments to document school violence and its association with poor mental health and school performance in a low-income setting. In central Uganda, where Luwero District is located, 79.6% of primary school–age children were actually enrolled in school in 2011, making our results relevant for a large number of children. In contrast to other research, we found more violence from school staff versus any other perpetrators. The US Centers for Disease Control survey in Tanzania showed that 52.6% of female and 50.8% of male respondents aged 13 to 24 had experienced violence from teachers, and nearly 60% had experienced physical violence from parents. However, this survey included children both in and out of school, thus the total prevalence of school violence may have been higher if only those attending school were included.

### TABLE 5 Adjusted Associations Between Key Variables and Past-Week Physical Violence From School Staff

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Female (n = 1920)</th>
<th>Males With Low and Medium SDQ Scores (n = 1578)</th>
<th>Males With High SDQ Scores (n = 181)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>aOR 95% CI  P</td>
<td>aOR 95% CI  P</td>
<td>aOR 95% CI  P</td>
</tr>
<tr>
<td>SDQ score</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>1</td>
<td>1.15 (0.82–1.60) .42</td>
<td>1.15 (1.19–2.50) .005</td>
</tr>
<tr>
<td>Medium</td>
<td>1.82 (1.17–2.82)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any sexual/emotional violence from school staff, lifetime</td>
<td>2.70 (1.97–3.70) &lt;.001</td>
<td>2.84 (2.10–3.84) &lt;.001</td>
<td>4.13 (1.40–12.25) .01</td>
</tr>
<tr>
<td>Any violence from others, lifetime</td>
<td>1.64 (1.27–2.13)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low performer on educational tests</td>
<td>1.78 (1.19–2.66)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age, y</td>
<td>0.90 (0.84–0.96)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ate at least 3 meals yesterday</td>
<td>0.77 (0.61–0.98)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Share sleeping area with ≥2 children</td>
<td>1.14 (0.86–1.51)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Share sleeping area with adults</td>
<td>1.16 (0.96–1.41)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disability</td>
<td>1.32 (0.83–2.11)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hours worked/d outside school</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&gt;1</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1–2</td>
<td>1.19 (0.99–1.42)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>≥2</td>
<td>1.54 (0.89–2.65)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### TABLE 6 Prevalence and Association: Physical Violence Reported by Staff

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Male Staff (n = 239)</th>
<th>Female Staff (n = 338)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevalence % SE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lifetime physical violence to students</td>
<td>80.75 (2.97)</td>
<td>75.74 (3.89)</td>
</tr>
<tr>
<td>Physical violence to students, past week</td>
<td>40.17 (3.96)</td>
<td>42.60 (3.93)</td>
</tr>
</tbody>
</table>

### Comparison With Other Studies
We report results from one of the first surveys using a probability sample and standardized assessments to document school violence and its association with poor mental health and school performance in a low-income setting. In central Uganda, where Luwero District is located, 79.6% of primary school–age children were actually enrolled in school in 2011, making our results relevant for a large number of children. In contrast to other research, we found more violence from school staff versus any other perpetrators. The US Centers for Disease Control survey in Tanzania showed that 52.6% of female and 50.8% of male respondents aged 13 to 24 had experienced violence from teachers, and nearly 60% had experienced physical violence from parents. However, this survey included children both in and out of school, thus the total prevalence of school violence may have been higher if only those attending school were included.
Similar to other studies examining sexual and physical abuse from any perpetrator in high-income settings, we also find children who experience more violence have poor mental health and, for girls, poor performance on school tests. For boys, relationships between physical violence and educational outcomes are in the opposite direction to girls, and much stronger in those with higher levels of mental health difficulties versus those without. Ugandan classrooms are large, and there are varied levels of ability in students. It may be that boys who are doing well in school but who score higher on mental health difficulty measures behave more disruptively in class because they are not engaged in lessons, which then is associated with violence from teachers. Additional research is needed to investigate and understand the relationship between physical violence and educational performance in boys.

Contrary to our hypothesis, staff members’ mental health was not related to increased use of physical violence against students. Experiences of intimate partner and sexual violence predicted increased use of violence against students among men but not among women. It is important to note that men’s self-reported experience of intimate partner violence is highly correlated with their use of violence against intimate partners. Men who use intimate partner violence also report more fights at work and other conflicts, possibly indicating a general predisposition to use violence as a means of conflict resolution.

**Limitations**

We present some of the first rigorous data on violence from school staff and health consequences in a low-income setting. Although it is clear that experiences of violence in students are associated with adverse mental health conditions and poor educational test results, our cross-sectional survey does not allow inference as to whether these are a cause or consequence of experiencing violence. There is also the possibility that previous exposure to trauma and violence outside the school setting may be influencing children’s behavior in the classroom, making them more vulnerable to violence from school staff. Although we employed extensive interviewer training, it is possible that some children did not feel comfortable disclosing their experiences of violence during interviews. Sexual violence in particular may have been underreported because of the shame and stigma associated with these experiences.

**Implications and Future Directions**

Given this high prevalence, school violence could be a major contributor to poor health and educational outcomes in this population. We know from longitudinal studies in high-income settings that children who experience violence from other students in school may be more likely to miss classes and to drop out, which directly affects their educational performance and life trajectory. Abused children are at increased risk of developing conduct disorder, which predicts later use of violence in adult relationships. The levels of violence from school staff observed here underline the need to consider school violence in prevention interventions, in addition to home and parenting interventions.

**CONCLUSIONS**

Violence from school staff against children is widespread and associated with poor mental health and educational performance. Interventions to reduce violence against children and prevent adverse consequences need to address violence from school staff.

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**REFERENCES**

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