



Evidence Brief

Violence Against People with Disabilities: Lessons from the Programme for Evidence to Inform Disability Action (PENDA)



© Sightsavers Michael Goima

Violence Against People with Disabilities: Lessons from the Programme for Evidence to Inform Disability Action

Programme for Evidence to Inform Disability Action (PENDA) at the International Centre for Evidence in Disability (ICED), London School of Hygiene & Tropical Medicine (LSHTM).

Executive Summary

Violence is a significant public health issue, affecting people with disabilities across the life course. Evidence from the Programme for Evidence to Inform Disability Action (PENDA) consistently shows that children and adults with disabilities experience higher levels of violence than their peers without disabilities, yet there remains limited evidence on how best to prevent this violence.

Our research using nationally representative Multiple Indicator Cluster Surveys over 20 low- and middle-income countries (LMICs) has shown that adults with disabilities are at increased risk of robbery and assault (Bhatia et al., forthcoming), while children with disabilities are more likely to experience violent discipline in the home¹. Despite these heightened risks, children with disabilities have been largely excluded from evaluations of violence-prevention policy and interventions². Moreover, a global systematic review found that among 160 evaluations of school-based violence-prevention interventions, only three reported intervention effects amongst children with disabilities³.

PENDA evaluated whether ICC-T (Interaction Competencies with Children - for Teachers) was also effective for children with disabilities, as this school-based violence-prevention intervention has been shown to reduce violence among children overall.^{4,5} Our trial found no evidence that ICC-T reduced violence experienced by children with disabilities. No significant effects were observed on violence perpetrated by teachers, peer victimisation, emotional and behavioural wellbeing, quality of life, or teacher attitudes towards disability.

Our findings suggest that violence-prevention interventions that work for the general population may not automatically benefit children with disabilities. Future programming may require disability-specific adaptations and approaches that directly address stigma, discrimination, exclusion, and other disability-related drivers of violence.

The Problem

People with disabilities face disproportionately high levels of violence worldwide⁴. While violence affects individuals across the life course, evidence increasingly shows that disability is associated with two-times greater risk of violence in childhood⁴. The consequences of violence in childhood can be severe, including poorer educational outcomes, social exclusion, reduced wellbeing, and long-term impacts on health and participation⁵⁻¹⁰.

PENDA research has documented these inequalities across LMICs and age groups. Our analysis of the MICS demonstrates that adults with disabilities experienced substantially higher rates of violent victimisation, including robbery and assault, compared with adults without disabilities. These patterns held across urban/rural location and amongst poorest and wealthiest income quintiles. A further study using MICS found that children with disabilities were significantly more likely to experience violent discipline in the home¹. The study identified elevated risks of both physical punishment and psychological aggression by caregivers, demonstrating that violence affects children with disabilities within one of the most important environments for child development and protection.



A range of factors likely contribute to this relationship, including: disability-related stigma and discrimination, social exclusion, unequal power relationships, communication barriers, dependency on caregivers, poverty, and limited access to support services and justice systems. Consequently, people with disabilities may face both increased exposure to violence and reduced opportunities to seek protection or redress when violence occurs.

What We Already Knew

Over the last decade, increasing attention has been directed towards school-based violence-prevention interventions^{11,12}. Most of the focus has been on preventing bullying or using schools as platforms prevention of violence that occurs in and around schools, such as dating violence¹⁴. Relatively few Many programmes focus on changing teacher attitudes and behaviour towards use of corporal punishment and, promoting positive discipline¹³.

A recent systematic review of global evidence identified major gaps in disability inclusion in school-based interventions. The review found that in 160 randomised controlled trials of school-based violence-prevention interventions only three trials reported effect estimates amongst children with disabilities. There is therefore limited evidence on whether intervention effects differed between children with and without disabilities and few examples of intervention adaptations or disability-inclusive implementation strategies. Importantly, the review found some evidence that violence-prevention programmes can work for children with disabilities, but the evidence base remains too small to identify what intervention approaches are most effective or what adaptations are necessary to achieve positive outcomes.

Therefore, further evidence is needed on intervention effectiveness and how and why the interventions work amongst children with disabilities.

Evaluation of the Interaction Competencies with Children for Teachers (ICC-T) Intervention

ICC-T is one of the most rigorously evaluated school-based violence-prevention programmes in East Africa^{14,15}. The intervention consists of a 5.5-day participatory teacher-training programme designed to strengthen positive teacher-child relationships, reduce reliance on corporal punishment, and promote non-violent classroom management approaches.

Given the evidence that children with disabilities experience elevated risks of violence, assessing whether proven interventions are effective for this group is critical for achieving safe and inclusive schools for all children.

Evaluation Overview

This study was conducted as a disability-focused sub-study within the PreVio cluster-randomised controlled trial in Morogoro Region, Tanzania. We conducted a randomised controlled trial and process evaluation to evaluate the effectiveness for children with disabilities.

Fourteen primary schools participated, with seven schools assigned to receive ICC-T and seven schools serving as controls. Children with disabilities were oversampled using Municipal Education Office records of children with disabilities.

The final sample included 444 children with disabilities (228 intervention; 216 control) and 693 children without disabilities for comparison purposes. Children represented a range of impairment types, including intellectual disabilities (31%), hearing impairments (16%), and vision impairments (15%) were included.

Outcomes included:

- overall violence perpetrated by teachers
- physical violence
- emotional violence
- peer victimisation
- emotional and behavioural difficulties
- quality of life
- teacher attitudes towards disability

What Did the Study Find?

The study found no evidence that ICC-T reduced violence experienced by children with disabilities. Children with disabilities in intervention schools reported similar levels of overall violence perpetrated by teachers compared with children in control schools (adjusted mean difference -0.16 episodes in the previous week; 95% CI -3.80 to 3.48; $p=0.92$). There was also no evidence of intervention effects on any other violence outcomes.

The findings were consistent across sex and impairment type. Researchers found no evidence that intervention effectiveness differed between boys and girls or between impairment groups.

Why was the study less effective amongst children with disabilities? In the process evaluation we find:

- negative attitudes towards disability, resulting in different forms of violence and stigma and discrimination.

- limited understanding of disability, resulting in violence amongst less visible impairments
- challenges implementing positive discipline approaches for children with diverse impairments.
- Most importantly, these findings contrasted with results from the broader trial population, where ICC-T had previously demonstrated reductions in violence among children overall.

What Do These Findings Mean?

Large-scale population studies show that children and adults with disabilities face elevated risks of violence across multiple settings. Systematic review evidence shows that children with disabilities have been largely overlooked in violence-prevention research. Our evaluation findings from Tanzania suggest that interventions which successfully reduce violence among the

general population may not automatically reduce violence among children with disabilities.

These results do not imply that violence-prevention programmes cannot work for children with disabilities. Rather, they suggest that current interventions may not sufficiently address disability-specific drivers of violence, including stigma, communication barriers, social exclusion, and unmet support needs.

Future violence-prevention efforts require disability-responsive adaptations, such as:

- teacher training on disability inclusion and stigma reduction approaches
- disability-responsive positive-discipline strategies
- targeted approaches to address disability-related bullying and exclusion
- accessible reporting and safeguarding mechanisms
- meaningful involvement of children with disabilities in intervention design and implementation

Policy Recommendations

For Ministries of Education

- Improve inclusive education through teacher training on disability and appropriate resourcing
- Integrate disability inclusion into violence-prevention policies
- Strengthen teacher training on disability-responsive classroom management
- Improve monitoring of violence experienced by children with disabilities

For Schools

- Ensure reporting and referral mechanisms are accessible to children with disabilities
- Promote inclusive school cultures that challenge disability stigma
- Address disability-targeted bullying and exclusion explicitly

For Donors and Development Partners

- Invest in disability-inclusive violence-prevention research
- Support adaptation and testing of proven interventions for children with disabilities
- Strengthen evidence generation on what works to reduce violence against people with disabilities across the life course

Conclusions

PENDA's research has demonstrated that people with disabilities face elevated risks of violence across childhood and adulthood, including violent discipline, robbery, and assault. At the same time, evidence on effective prevention strategies remains limited. The Tanzania ICC-T study represents one of the largest evaluations of a school-based violence-prevention intervention among children with disabilities in a low- and middle-income country. Its findings suggest that interventions that are effective for children overall may not be sufficient to address the unique risks faced by children with disabilities.

Achieving inclusive violence prevention will require moving beyond assumptions that mainstream interventions benefit all children equally and towards approaches that explicitly recognise and address the realities of violence experienced by people with disabilities.

References

1. Bhatia A, Davey C, Bright T, et al. Inequities in birth registration, violent discipline, and child labour by disability status and sex: Evidence from the Multiple Indicator Cluster Surveys in 24 countries. *PLOS Glob Public Health* 2023; 3(5): e0001827.
2. Eldred E, Zinke-Allmang A, Kim J, et al. Children with disabilities are missing from global efforts to address violence. *Lancet Child Adolesc Health* 2025; 9(11): 757-9.
3. Eldred E, Devries K, Zinke-Allmang A, et al. Are school-based violence prevention interventions inclusive and effective for children with disabilities? A systematic review of global evidence. *eClinicalMedicine* 2025; 80.
4. Fang Z, Cerna-Turoff I, Zhang C, Lu M, Lachman JM, Barlow J. Global estimates of violence against children with disabilities: an updated systematic review and meta-analysis. *The Lancet Child & Adolescent Health* 2022.
5. Fry D, Fang X, Elliott S, et al. The relationships between violence in childhood and educational outcomes: A global systematic review and meta-analysis. *Child Abuse Negl* 2018; 75: 6-28.
6. Devries KM, Mak JY, Child JC, et al. Childhood sexual abuse and suicidal behavior: a meta-analysis. *Pediatrics* 2014; 133(5): e1331-44.
7. Norman RE, Byambaa M, De R, Butchart A, Scott J, Vos T. The long-term health consequences of child physical abuse, emotional abuse, and neglect: a systematic review and meta-analysis. *PLoS Med* 2012; 9(11): e1001349.
8. Mathews SA, P, October, L. and Makola, L. Evidence review: Prevention of violence against children through schools in the Global South. *Raising Voices, Uganda and University of Cape Town, South Africa*, 2021.
9. Eldred E, Devries K, Nelson KA, et al. A systematic review and equity analysis of school-based violence prevention interventions evaluated in randomised controlled trials. *BMC Public Health* 2026.
10. Nkuba M, Hermenau K, Goessmann K, Hecker T. Reducing violence by teachers using the preventative intervention Interaction Competencies with Children for Teachers (ICC-T): A cluster randomized controlled trial at public secondary schools in Tanzania. *PLoS One* 2018; 13(8): e0201362.
11. Ssenyonga J, Katharin H, Mattonet K, Nkuba M, Hecker T. Reducing teachers' use of violence toward students: A cluster-randomized controlled trial in secondary schools in Southwestern Uganda. *Children and Youth Services Review* 2022; 138.

Acknowledgements

PENDA research programme funded by the UK Foreign, Commonwealth & Development Office, based at the International Centre for Evidence in Disability, London School of Hygiene & Tropical Medicine.

For further information, visit our website: www.lshtm.ac.uk/penda
Get in touch: disabilitycentre@lshtm.ac.uk