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One world, one family, many cultures. Strengthening children and families affected by personal, intra-familial and global conflict.

Abstract

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There are many misleading myths related to violence and underlying causes. One of these beliefs is that the first world is a safe place for children. Three children from Switzerland (central Europe), age 11,14 and 16, talk about their every day experiences and possible solutions for dealing with their conflicts related to violence.

From the author's experiences the participation of children within the family and society is crucial for the prevention of violence. When we study violent outbursts such as school shootings we often find that there is a lack of mutual respect and a lack of empowerment of juveniles – the family structure, the school environment and the cultural situation often do not provide helpful models for conflict solutions for juveniles. Their role models are misleading. As a worse case scenario they lose their orientation and finally commit suicide; and often kill others.

The aim of this presentation is to stimulate the discussion about children's participation as an effective strategy in preventing violence. To give children a voice must be seen in accordance with the CRC; in conflict solution adults should try to take the perspective of children instead of seeing the world through their own eyes.

Learning objectives:

- The audience will learn that there is a development towards violent behavior which takes years or even decades.
- Attachment theory clearly indicates that we must focus on the needs for juveniles, otherwise their development is disturbed. The presenter discusses this issue and provides case examples.
- Children need to be integrated into decision making process, their voice must be heard and even sought out. Three children share their experiences.

Take home message

Often violence prevention does not focus on the developmental needs of juveniles. However, their integration into decision making processes is crucial for their well-being. We should establish a procedure to identify children at risk. Therapeutic intervention must start as early as possible to be effective.