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Teacher violence, school satisfaction and subjective

well-being in children and adolescents in residential care: The moderation effect of staff support

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Abstract

This study involved 608 children and adolescents between 7 and 18 years of age ($M_{age} = 12.9$, $SD_{age} = 2.70$) from 47 residential care centres in Peru (RCC). The objective of the study was to observe the mediating effect of school satisfaction on the relationship between violence by teachers at school and the subjective well-being of children and adolescents, considering how the low or high support from residential care staff can condition this mediating effect as well. The descriptive results show a very high prevalence of violence inflicted by teachers at school for both children and adolescents in residential care in Peru. Regarding the results obtained from the moderated mediation model results, the school satisfaction domain is observed to have a mediating effect on the relationship between teacher violence and subjective well-being in children and adolescents. In addition, a moderated mediation effect conditioned by support from residential care staff is seen only in the case of children.

KEYWORDS

children and adolescents in residential care, staff support, subjective well-being, violence by teachers

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INTRODUCTION

In Peru, as in many other Latin American countries, residential care continues to be the most preferred option for children and adolescents in the child welfare system (Kirk et al., 2017). Children and adolescents entering residential care in Peru have suffered different forms of abuse (inadequate disciplinary methods, neglect, lack of affection and stimulation from the family and/or sexual abuse) in their families of origin, which leads to admission in residential care centres (Decreto Legislativo No 1297, 2018). However, residential care centres (RCC) in Peru are still, in many cases, macroinstitutions with lack of qualified professionals and proper infrastructure for comprehensive attention (Defensoría del Pueblo, 2010). Different professionals form the staff of the residential care centre, including the director, a psychologist, caregivers (low-skilled professionals who act as educators) and other professionals such as cooks and drivers. In total, 246 RCCs operate in Peru and have a population above 12,300 children and adolescents. Many of these children and adolescents stay in the residential context until they turn 18 years old due to a lack of alternative measures for promoting family reunification or foster care.

To remedy this situation, a protection subsystem was created within the National System for Comprehensive Childhood Care (in Spanish, Sistema Nacional de Atención Integral al Niño y al Adolescente). This system incorporated legal amendments that established that RCCs must be protective spaces oriented to the holistic development of children and adolescents in an environment as similar as possible to a family setting (Decreto Legislativo No 1297, 2018). According to these new guidelines, residential care centres will have to conduct deep infrastructural changes, and train professionals so they are able to offer a socio-educational attention that promotes comprehensive development. However, the reform of the child welfare system is still a complex challenge for Peru, since violence toward children and adolescents is still normalised in socialisation contexts such as the family, community, or school (Benavides et al., 2015).

For over thirty years, Peru was affected by numerous attacks perpetrated by the terrorist organisation Shining Path, which caused a total of 69,280 victims between 1980 and 2000, according to the Peruvian Truth and Reconciliation Commission (Hernandez & Church, 2003). Currently, different studies have demonstrated that long periods of exposure to violence have had long-lasting effects in many places of Peru, especially in rural areas, which have high rates of depression, anxiety, and posttraumatic stress disorder (PTSD; Borba et al., 2015). In addition to permanent violence instigated by the terrorist group above, there are other risk factors that increase the possibilities of exposure to physical violence, such as belonging to areas with poverty and inequality, and the classic factors age, disability and gender (Pinheiro, 2006), as well as having indigenous ethnicity in the case of Peru (Miranda, 2016).

As pointed out in the structural violence theory proposed by Galtung (1969), social contexts with several risk factors such as the above and social disparities are likely to legitimate all forms of violence. The existing ecological research on risk behavior has explored how communities exposed to violence, domestic dynamic violence and affiliation with delinquent peers are prone to high levels of violence, victimisation, and perpetration specially in adolescence (Cooley-Quille et al., 2001; Forster et al., 2015). Furthermore, these cycles of violence within a community also cause problems in school climate and have an impact on the high prevalence of bullying (Elsaesser et al., 2016). Different studies show that violence is transmitted from home to school, and students who suffer domestic violence have increased probabilities of becoming victims of both physical and psychological violence at school (Calle et al., 2017; McGill et al., 2014). In addition, it must be noted that children and adolescents in residential care are subject to multiple forms of victimisation from adults, which frequently makes them more prone to other forms of interpersonal violence (Segura et al., 2016; Suárez-Soto

et al., 2019). In concrete, children and adolescents in residential care in Peru have recently been observed to suffer high prevalence of bullying at school (Oriol et al., 2020), which confirms this high exposure to poly-victimisation in this segment of the population.

Teacher violence

As commented above, violence in Peru is present in different contexts; therefore, decreasing school violence is currently a priority in the country (Gutierrez et al., 2018). School violence not only implies peer violence but also refers to a multifaceted concept that involves any form of aggression at school (Espelage & Hong, 2019). In this sense, teacher violence is considered a form of school violence as it implies any physical, psychological, or verbal aggression from teachers to students (Merrill et al., 2018), which is still present, especially in middle income countries (Merrill et al., 2018; Nkuba et al., 2018). In the same line, in countries like Peru, the use of physical violence is justified by the same students as a way of correcting disruptive behaviors at school and therefore is considered a pedagogical measure (Guerrero & Rojas, 2016). Furthermore, although families disapprove the use of physical violence, they end up justifying it, as they consider it necessary to correct their children's behavior (Miranda, 2016). On the African continent, there are also different countries with a high prevalence of teacher violence. Violence inflicted by teachers against girls is reported to have 86% prevalence in Kenya, followed by 82% in Ghana and 66% in Mozambique (Parkes & Heslop, 2013). In a study conducted by UNICEF in four developing countries, namely Peru, Ethiopia, India and Vietnam (Orgando & Pells, 2015), the prevalence ratios for corporal punishment by teachers at schools ranged from 20% to 80% in 8-year-old children across countries.

Corporal punishment is still very frequent in different parts of the world (Gershoff & Font, 2016), even in countries like the USA. A study conducted by Gershoff et al. (2015) found that in 2010 there were still 200,000 children in the US who were victim of physical violence from teachers. Recent studies in Peru indicate that students suffer violence from adults who work in educational institutions, and out of these cases, 78% corresponds to aggressions from teachers (Rivera Talavera et al., 2019). This adds up to the fact that between 2015 and 2017 there was an increase in disciplinary records due to harassment or violence against students from teachers (Defensoría del pueblo, 2018). Different studies show that teacher violence leads to increased aggressive behavior by students and triggers the onset of depressive symptoms (Hecker et al., 2018; Merrill et al., 2018).

Teacher violence and subjective well-being

Subjective well-being (SWB) is one of the most important indicators of adolescent adjustment (Casas, 2016). SWB refers to the appraisal people make about their own life, which is composed of a cognitive (general life as a whole [LS] and an affective component (presence of positive affect and absence of negative affect; Diener et al., 1999). Several instruments have been designed to assess the cognitive component of subjective well-being in childhood and adolescence. Some of them are aimed to evaluate global life satisfaction as a whole, while others like the Personal Well-being Index (PWI) are employed to assess the different domains (relationships, safety, and community-connectedness) that represent the first level deconstruction of the global question. Although subjective well-being studies on children and adolescents in residential care are recent, research has observed that the level of subjective well-being of this population is lower than that of their peers in normative population (Llosada-Gistau et al., 2015) and adolescents in foster care (Llosada-Gistau et al., 2017). Therefore,

determining what specific indicators promote an increase in subjective well-being in this type of population is crucial.

As mentioned above, most studies point out to important associations between violence at school and mental health problems, but few of them have explored the connection between these forms of violence and well-being measures in childhood and adolescence (Devries et al., 2015; Fullchange & Furlong, 2016). In addition, there is a lack of research that links violence inflicted by teachers and SWB, as this is a less common issue, albeit more frequent in middle income countries (Nkuba et al., 2018). Despite the lack of data, there is a great body of evidence showing that the support of teachers is fundamental to the subjective well-being of children and adolescents, especially during the transition from childhood to adolescence (Lawler et al., 2015; Oriol, Torres, et al., 2017). For example, in a study conducted by Suldo et al. (2009) using qualitative and quantitative methods to uncover the perceptions of students about the behavior of their teachers, adolescents who felt an emotional supportive connection with their teachers experienced higher subjective well-being. The meta-analysis of 246 studies conducted by Chu et al. (2010) shows that social support from figures like teachers is even more important to subjective well-being as children grow older; thus, adolescence would be a critical period in this sense.

In connection, we believe that violence inflicted by teachers can be a key indicator of a decrease in subjective well-being at these ages, particularly if considering that many children and adolescents in residential care have previously experienced other forms of victimisation from their families of origin (Suárez-Soto et al., 2019).

The mediating role of school satisfaction

As commented above, subjective well-being is a key indicator of the adjustment of children and adolescents; however, it should also be considered that they spend long hours at school and consequently school variables have a high impact on their development and subjective well-being (Casas et al., 2013; Gómez et al., 2019). In this sense, over the last years the role that satisfaction experienced during school life may have in the perception that children and adolescents have of their own global subjective well-being has been underscored (Casas, 2011). In a study conducted with 344 adolescents by Telef et al. (2015) teacher support was observed to promote higher perceptions of school satisfaction, which in turn, influences global subjective well-being through the mediator's role of school satisfaction. In this line, school satisfaction has been observed to play a crucial mediating role in the relationship between different forms of school violence and subjective well-being (Varela et al., 2018).

Specifically, for children and adolescents in residential care, adaptation to school is key to social inclusion and transition to adult life (Montserrat et al., 2013; Jackson & Cameron, 2014). In this sense, a strong relationship between school satisfaction and SWB has been recently observed in adolescents in residential care in Peru (Oriol et al., 2020). This group of adolescents usually presents more academic and behavioral problems at school than their peers (Attar-Schwartz, 2009), as well as higher prevalence of bullying victimisation (Wright, 2016). Consequently, in contexts like the Peruvian, where there is still a strong presence of violence from teachers, there may still be high prevalence of teacher violence in residential care. In this sense, the experiences of children and adolescents in the school environment are a crucial factor to understand the appraisal they made of their own lives in general (Oriol, Torres, et al., 2017). However, despite the scarce literature on how school violence affects the different subjective well-being domains, a negative relationship is observed between peer

bullying victimisation and life satisfaction (Miranda et al., 2019; Varela et al., 2018). In the same line, suffering bullying is negatively related to SWB through school satisfaction in adolescents from the residential care system (Oriol et al., 2020).

Consequently, as observed in normative population, the school satisfaction perception of children and adolescents in residential care is fundamental to understand how variables related to school violence affect their global subjective well-being.

Staff support as a possible moderator

The school experience of children and adolescents in residential care is crucial for their transition to adulthood and their SWB (Dinisman et al., 2013). Nonetheless, to make this experience positive and prevent problems at school, the staff from the residential care centre (group-care workers) needs to consistently follow-up children's academic development, and joint work between RCCs and schools has to become a common practice in the children welfare system (Attar-Schwartz, 2009). For example, in a study conducted by Simsek et al. (2007), regular contact between staff from the residential care centre and teachers from school was one of the most relevant protective factors against behavioral problems in children and adolescents living in Turkish orphanages. In the same line, a European research project conducted with previous residents of residential care centres, aged 18 to 22 years old, found that support from residential care staff and the involvement of these professionals in school aspects was key to the transition of children to adult life (Montserrat et al., 2013). In this sense, the relationships children and adolescents in residential care build with the staff are important to strengthen their capacity for establishing and maintaining interpersonal relationships with their peer group, and to foster autonomy despite the situations of abuse, neglect and adversity that many of them already experienced with their family of origin (Cahill et al., 2016; Holt & Kirwan, 2012). Additionally, the daily activities that children and adolescents in residential care share with the staff promote an increase in subjective well-being (Orúzar et al., 2019).

Studies on school violence in children and adolescents emphasise the relevance of a socialecological perspective to understand protective factors found in different socialisation contexts, and their potential buffering effect on bullying victimisation (Espelage, 2014). Perceived support in other contexts, especially at home, can be a relevant protective factor for victimisation at school (Miranda et al., 2019; Ozer et al., 2017). Therefore, the international literature underscores that residential care centres need to be emotionally stable spaces, as similar to a real home as possible, turning the emotional and affective support from staff into a protective factor fundamental for this population (Whittaker et al., 2016).

According to the above, support perceived from residential care staff seems to be essential to the health and subjective well-being of children and adolescents in residential care. Additionally, the coordination between staff and school seems to be crucial in the school experience. Thus, we expect that staff support will moderate the effect of both teacher violence and school satisfaction over the subjective well-being of children and adolescents.

Present study

The objective of the study is to observe the mediator effect of school satisfaction over the relationship between violence inflicted by teachers at school and the subjective well-being of children and adolescents in residential care, considering the possible moderation effect of the support from the residential

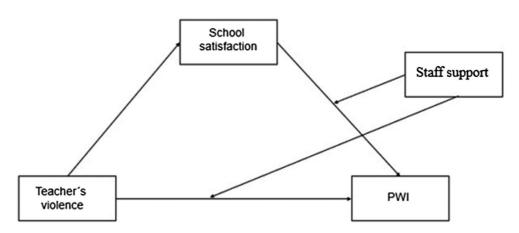


FIGURE 1 Conceptual model of the relationships between teacher violence, school satisfaction, staff support and PWI for students residing in residential care centres

care staff. In concrete, the following hypotheses are proposed for both children and adolescents: (a) Teacher violence is negatively related to school satisfaction and SWB; (b) School satisfaction mediates the relationship between teacher violence and SWB; (c) The association between teacher violence and SWB through school satisfaction is conditionally dependent on the level of staff support; (d) Finally, the relationship between school satisfaction and SWB in this model (teacher violence and SWB through school satisfaction) is also conditionally dependent on the level of staff support (see Figure 1).

METHOD

Participants

Participants came from 47 of the 240 Residential Care Centers (RCC) of Peru, which are distributed across the country. The selection of RCCs was based on the willingness of the directors of such centres to participate in the study. In total, 608 children and adolescents took part in this study. Nevertheless, 5.4% of participants reported not attending any educational institution. This group was excluded from further analyses.

Of the 573 children and adolescents living at RCCs and attending school, 277 (48.4%) were in primary school, 296 were in secondary school (51.6%), 55% were male, and 45% were female) between 7 and 18 years of age ($M_{age} = 12.9$, $SD_{age} = 2.67$). In addition, 97.9% were Peruvian and 2.1% were foreigners; 57.4% had been living in the centre for more than 2 years, 12.2% for less than 1 year and 14.4% between 1 and 2 years, 16% did not know for how long they had stayed at the RCC.

In addition, 85% of interviewees reported not having changed centres since their admission into the residential care system, 52.6% came from centres managed by the government, and 47.4% from private RCCs.

An analysis of missing data was conducted on the variables of the study. Cases with more than 10% of responses missing were excluded from the analysis, as suggested by Scheffer (2002). Due to confidentiality aspects, access to the reasons why children and adolescents from the sample were in residential care was not possible. Nevertheless, like in other countries, Peruvian legislation establishes admission to residential care centres when there is a situation of family neglect that can severely affect the physical or mental integrity of the child or adolescent (Decreto Legislativo No 1297, 2018).

Compliance with ethical standards

The study was authorised by the Ministry of Women and Vulnerable Populations of Peru and approved by the Ethics Committee of University of Santiago de Chile. Likewise, the Comprehensive National Program for Family Well-being (INABIF), which is responsible for the operation of state funded RCCs, also authorised it.

Before the application of the questionnaire, the directors of each centre were asked to sign an informed consent. By law, they are the legal representatives of children and adolescents living at RCCs. In centres that did not have this document signed, the instrument was not applied. After authorisation by directors, an informed assent was provided for children and adolescents following the international recommendations established in the Nuremberg Code and in the Declaration of Helsinki. In this sense, children and adolescents were informed about the research objective, the importance of results and that they were free not to answer the questionnaire in case they were not willing to. It was also defined as a protocol that, in case that violence situations were verbalised or identified during the application of the survey, the director of the residential care centre would be immediately informed due to his role as legal guardian. Subsequently, the violence prevalence found was reported to directors and Ministry officials.

Procedure

A self-administered questionnaire was given to the participants in the presence of surveyors trained in its application. These professionals were Psychology students from Universidad Continental and psychologists or social workers from the Ministry of Women and Vulnerable Populations of Peru (MIMPV). They were responsible for the informed assents and application of the questionnaire. For the 8- to-11-year-old group, surveyors read out loud each item of the questionnaire to ensure the comprehension of them. For adolescents aged 12 and above, this process was not necessary. Additionally, they were handed the attention and referral protocol in case some respondent was disturbed by the questions. Lastly, the Psychology department of each RCC was reached to coordinate the implementation of the protocol if necessary.

Measures

This study used the ISCWeb instrument from the Children's World project adapted to children and adolescents in residential care (Anonymous, 2015). The Children's World Project is aimed to test how different aspects in the lives of children and adolescents are related to subjective well-being. The version of the ISCWeb for residential care settings includes domains relative to the residential care centre, things children and adolescents have access to, relationships with friends and other people, the area where they live, school, health, time management and leisure time, as well as indicators specifically addressing subjective well-being. In addition, the ISCWeb for residential care used in Peru also incorporates different indicators of school violence developed and used previously by the Ministry of Education, which are described below. The questionnaire for adolescents comprises of 115 items, while the one for children aged 8 to 11 was reduced to 97 questions. For this study, 4 indicators from the ISCWeb, corresponding to different aspects in the lives of children and adolescents, were used. Concretely, a total of 20 items from the original questionnaire for both children and adolescents were employed.

These indicators are explained below.

Personal well-being index

Adapted from the scale created by Cummins and Lau (2005). This scale has 7 indicators that assess how satisfied students are with their life departing from their relationship with the immediate surroundings. Originally, one of the PWI indicators evaluated satisfaction with school experience; but since one of the variables is related to satisfaction with school, the item was changed for an assessment about how satisfied children were with the centre. Items are evaluated in a 11-point Likert scale, where 1 corresponds to 'completely unsatisfied' and 11 to 'completely satisfied'. (e.g. *How satisfied are you with your life in the* centre?). For this study, the reported Cronbach's alpha was 0.92. Alphas were 0.92 for both primary and secondary students.

Teacher violence

This scale adapted from the School Violence Single Questionnaire (in Spanish, Cuestionario Único de Violencia Escolar; MINEDU, 2013) assesses the prevalence of violence from teachers to students in the last month. The scale is composed of 6 items and evaluates different types of violence, such as physical (e.g. *A teacher has physically hurt you (kick you, beat you or push you)* at school), verbal (e.g. *A teacher has teased you or made fun of you at school*) and relational (e.g. *You have been rejected and isolated at school by a teacher*). Items are evaluated through a 4-point Likert scale (1 = 'Never' and 4 = 'More than three times'), with a reported Cronbach's alpha of 0.92. Alphas were 0.93 and 0.91 for primary and secondary students, respectively.

Staff support

The items used correspond to the International Survey on Children's Well-Being (ISCWeB). Regarding staff support, the items refer to the different workers from the residential care centre. Questions enquire about the director, caregivers (people who are in permanent contact with the children and adolescents) and other staff from the centre. This scale is formed by 3 items (e.g. *My caregivers listen to me and take me into account*), and responses are evaluated through 5 points, where 1 means 'strongly disagree' with the statement, and 5, 'strongly agree'. For this study, the reported Cronbach's alpha is 0.80 Alphas were 0.78 and 0.84 for primary and secondary students, respectively.

School satisfaction

The items assessed were taken from ISCWeB and measure how satisfied children are with some aspects of school (the school children attend; other children at school; the grades children obtain at school; their experience at school, etc.). The scale contains four items (e.g. *To what extent are you happy with the school you attend?*) with a 11-point response range, where 1 corresponds to 'completely unsatisfied', and 11 to 'completely satisfied'. For this study, the reported Cronbach's alpha is 0.85. The reported Cronbach's alpha is 0.85. Alphas were 0.84 and 0.86 for primary and secondary students, respectively.

Statistical analysis

Data were analysed in four steps. First, a descriptive analysis was conducted on the prevalence of violence in general and by type of violence from teacher to students. Second, a chi-square test was carried out to compare the prevalence reported, as well as the scores of the variables used in the model by sex (men vs. women) and school level (primary vs. secondary). Third, the correlations between variables in general and differentiated by school level were examined.

Finally, a moderated mediation model (see Figure 1) was calculated using SPSS 23.0 and the PROCESS macro (Preacher et al., 2007). PROCESS uses an ordinary least square (OLS) or a logistic regression-based path analytical framework for estimating indirect effects on both un-moderated and moderated mediation models with single or multiple mediators and moderators (Hayes, 2013). Bootstrapping was set to 5,000 resamples. All variables were centreed to the mean. According to our hypotheses, two moderated mediation analyses were conducted considering the school levels reported by respondents. For all the analyses, the demographic variables sex and age were used as control variables and entered as covariables in the regression models.

To further explore this interaction, simple slopes computation was employed and the interactions were graphed using high (1 *SD* above the mean) and low (1 *SD* below the mean) levels of the moderator variables.

RESULTS

Descriptive and correlational analysis

Table 1 presents the prevalence associated with violence inflicted to students from RCCs by teachers at school. The percentage of missing answers was around 5% for the reported indexes. Overall, 51% of respondent's reported having suffered some type of violence from teachers, with a prevalence significantly higher in primary school as compared to secondary school (56%, 46%, p < .05). Regarding types of violence, teasing (30%), fighting (which '*implies that the student responds aggressively to violence inflicted by the teacher*' (22%), insulting (21%), and physical aggression (20%) are the types with higher prevalence. By school level, the phenomenon is more prevalent in primary than in secondary school, particularly in the case of threats (15%, 8%, p < .05), teasing (35%, 26%, p < .05), and

Overall	Primary	Secondary	Girls	Boys
21%	23%	20%	$25\%^*$	$17\%^{*}$
22%	25%	19%	$26\%^*$	$19\%^*$
11%	$15\%^*$	$8\%^*$	13%	10%
12%	15%	10%	13%	11%
30%	35%*	$26\%^*$	28%	33%
20%	25%*	17%*	20%	21%
51%	$56\%^*$	46%*	54%	48%
	21% 22% 11% 12% 30% 20%	21% 23% 22% 25% 11% 15%* 12% 15% 30% 35%* 20% 25%*	21% 23% 20% 22% 25% 19% 11% 15%* 8%* 12% 15% 10% 30% 35%* 26%* 20% 25%* 17%*	21% 23% 20% 25%* 22% 25% 19% 26%* 11% 15%* 8%* 13% 12% 15% 10% 13% 30% 35%* 26%* 28% 20% 25%* 17%* 20%

TABLE 1 Prevalence of violence RCCs students perceive from teachers

*Significant at 0.05 level.

	Minimum	Maximum	Overall	Primary	Secondary	Girls	Boys
Teacher violence	1	4	1.48	1.55**	1.40**	1.48	1.47
PWI-7 (adapted)	1	11	8.70	8.97^{**}	8.45**	8.91^*	8.57^*
School satisfaction	1	11	8.66	8.90^{*}	8.49*	8.80	8.59
Staff support	1	5	4.28	4.32	4.24	4.27	4.30

TABLE 2 Scores of variables indicators and comparison by school level and sex

*Significant at 0.05 level.; **Significant at 0.01 level.

physical aggression (25%, 17%, p < .05). In prevalence by sex, women reported higher percentages of insults (25%, 17%, p < .05), and fights (26%, 19%, p < .05).

Table 2 presents the scores of each index evaluated and compared by school level and sex. Differences are observed in violence by teachers [t(579) = 2.06, p < .01], with primary students scoring higher than secondary students. Regarding school satisfaction, primary students have higher scores than secondary students [t(566) = 2.05, p < .05]. In the case of PWI, primary students reported higher levels of well-being compared to secondary students [t(579) = 4.06, p < .01]. Likewise, in comparison with men, women report higher well-being levels [t(592.27) = 3.21, p < .01]. As for the variable 'staff support', no significant differences are observed by sex or school level.

Overall, most variables under study are significantly associated with each other, except from the staff support indicator related to teacher violence (r = 0.06, p > .05), that is, students who experience higher levels of teacher violence also have lower SWB and school satisfaction levels. In addition, students who experience greater levels of staff support and school satisfaction exhibit higher SWB. In the case of primary students, a similar correlation pattern is observed at the global level, except that in this case the relationship between staff support and school satisfaction is not significant (r = 0.09, p > .05). Secondary students follow the same trend as primary students: there is no significant association between staff support and teacher violence (r = 0.06, p > .05), and satisfaction with school (r = 0.07, p > .05; Table 3).

Mediation analyses and moderated mediation models

The results show that for primary students, a significant unconditional indirect association was established among the 260 respondents (b = -0.36; 95% CI = -0.58 to -0.18). Teacher violence is negatively associated with school satisfaction (b = -0.68; p < .01), and the latter variable has a positive association with PWI (b = 0.49; p < .01). When the model is controlled for the mediator, the relation between teacher violence and PWI moves from b = -0.68, (p < .01) to b = -0.17, (p > .05). The covariables age and sex are used as control variables in the mediation model.

In addition, the interaction between teacher violence and staff support towards PWI is negative and significant (b = -0.32, p < .01), as well as the interaction between school satisfaction and staff support (b = -0.19, p < .01).

Table 4 presents all the results for primary students, specifically the indirect associations between teacher violence and PWI through school satisfaction in cases in which the moderator—staff support—assumes the values -1 SD, mean and +1 SD. All of them are significant, that is, teacher violence has a significant association with PWI through school satisfaction—mediating variable when staff support—moderating variable—assumes low (b = -0.45, CI = -0.73 to -0.23), medium (b = -0.33, CI = -0.55 to -0.16) and high (b = -0.21, CI = -0.40 to -0.06) values. The mediated moderation index was significant (b = 0.13, CI = 0.05-0.25).

		1	2	3	4
Global	1. Teacher violence				
	2. PWI	-0.19^{**}	_		
	3. School satisfaction	-0.28^{**}	0.65^{**}	_	
	4. Staff support	0.06	0.18^{**}	0.08^{*}	_
Primary	1. Teacher violence	—			
	2. PWI	-0.20^{**}	—		
	3. School satisfaction	-0.27^{**}	0.64^{**}	_	
	4. Staff support	0.06	0.14^{*}	0.09	_
Secondary	1. Teacher violence	—			
	2. PWI	-0.22^{**}	_		
	3. School satisfaction	-0.32^{**}	0.64^{**}	_	
	4. Staff support	0.06	0.20^{*}	0.07	

TABLE 3 Correlations of the variables under study at a global level, primary and secondary education

*The correlation is significant at 0.05 level.; **The correlation is significant at 0.01 level.

Figure 2 shows the interaction between teacher violence and staff support, evidencing that participants who report high levels of staff support (+1 *SD*) from RCC staff and a low level (-1 *SD*) of teacher violence have high PWI (9.56). However, high teacher violence (+1 *SD*) reduces the levels of PWI even when children experience high levels of support from staff (8.85).

In the case of the 295 secondary students, teacher violence is also negatively associated with school satisfaction (b = -0.77; p < .01). Likewise, school satisfaction associates positively with PWI (b = 0.54; p < .01). When the model is mediated by the school satisfaction variable, a significant unconditional indirect association (b = -0.44; 95% CI = -0.70 to -0.21) is reported in the relationship of teacher violence over PWI. As in the case of primary students, the covariables sex and age are control variables.

Table 5 presents the results of the model in terms of the mediating variable effects and the moderations over PWI for the group of secondary students. As for the dependent variable model, teacher violence does not influence PWI significantly (b = 0.03, p > .05). Regarding the model interactions, only the interaction between teacher violence and staff support results significant (b = -0.25, p < .05). The indirect conditional effects for the case in which the moderating variable (staff support) assumes -1 SD, mean and +1 SD values are significant for the three levels, namely low (b = -0.41, CI = -0.70 to -0.17), medium (b = -0.42, CI = -0.68 to -0.19) and high (b = -0.42, CI = -0.70 to -0.19). The mediated moderation index was not significant (b = 0.01, CI = -0.10 to 0.07).

Figure 3 shows the interaction between staff support and school satisfaction. As can be seen, participants who report low levels (-1 SD) of school satisfaction present differences in PWI with those participants who report low staff support (7.43) and high staff support (8.61). Conversely, when students report a high level of school satisfaction, (+1 SD), those who perceive low support from their staff have a PWI score of 10.37, whereas when they perceive high support in the centre, the score is 9.96, that is, having support from staff in cases of dissatisfaction with school prevents a fall in well-being levels, but when school satisfaction is high, support from staff is not as relevant as in the former case.

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students residing in Rees $(N = 200)$				
Predictor	В	SE	95% SE	
Mediator variable model (DV = school satisfaction)				
Teacher violence	-0.68^{**}	0.14	-0.96 to -0.40	
Age	-0.15^{*}	0.07	-0.28 to -0.02	
Sex	0.31	0.27	-0.23 to 0.84	
Dependent variable model (DV = PWI)				
Teacher violence	-0.17	0.10	-0.36 to 0.03	
School satisfaction	0.49**	0.04	0.41 to 0.51	
Staff support	0.18	0.09	0.00 to 0.37	
Teacher violence \times staff support	-0.32**	0.09	-0.50 to -0.14	
School satisfaction \times staff support	-0.19**	0.04	-0.26 to -0.12	
Age	-0.13**	0.04	-0.22 to -0.05	
Sex	0.11	0.63	-0.24 to 0.46	
Moderator values	В	BootSE	95% CI	
Conditional indirect effect at different values of the	e moderator			
-1 SD staff support	-0.45	0.13	-0.73 to -0.23	
Mean staff support	-0.33	0.10	-0.55 to -0.16	
+1 SD staff support	-0.21	0.09	-0.40 to -0.06	
Index of moderated mediation	0.13*	0.05	0.05 to 0.25	
 -1 SD staff support Mean staff support +1 SD staff support 	-0.45 -0.33 -0.21	0.10 0.09	-0.55 to $-0.16-0.40$ to -0.06	

TABLE 4 Conditional indirect effect of teacher violence on PWI with staff support as moderator for primary students residing in RCCs (N = 260)

*Significant at 0.05 level.; **Significant at 0.01 level.

DISCUSSION

Results show a very high prevalence of violence inflicted by teachers at school against both children and adolescents in residential care in Peru. This may be attributed to the fact that, in some areas of countries like Peru, these violence forms from adults at school are justified as corrective measures (Guerrero & Rojas, 2016), without considering the important psychological damage that may occur, especially when these also overlap with other forms of victimisation. High prevalence has also been demonstrated in the normative population of this country. Recent studies show that out of the cases of violence at school, 78% corresponds to aggressions by teachers (Rivera Talavera et al., 2019) and the Ombudsman Office (Defensoría del Pueblo, 2018) reported an increase in the number of disciplinary records for violence from teachers.

For children and adolescents in residential care, the presence of violence from teachers can also imply exposure to an overlap with other forms of interpersonal violence, since many of them enter residential care centres due to abuse situations from their families of origin. Therefore, the poly-victimisation suffered can increase the possibilities of mental health problems (Segura et al., 2018; Suárez-Soto, 2019). The results also show that younger children report violent behaviors from teachers more frequently than secondary students. Future research, perhaps qualitative, should delve into the causes of this phenomenon, since suffering from different forms of violence at early ages can worsen mental health problems, especially during adolescence (Turner et al., 2010).

Regarding the first hypothesis, the results show that overall, students who experience violence from teachers have lower levels of school satisfaction and subjective well-being. In the same line,

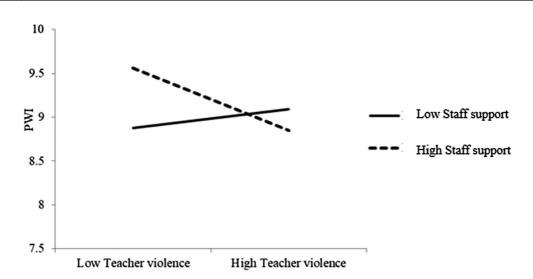


FIGURE 2 Interaction between teacher violence and staff support for elementary school students who reside in RCC

a previous study carried out in Peru shows that violence inflicted by teachers lead to consequences for mental health and subjective well-being (Oriol, Miranda, et al., 2017). As commented above, the presence of this form of violence can also imply an overlap with other previous forms of violence (Segura et al., 2018).

The second hypothesis proposed that the domain of satisfaction with school has a mediating effect on the relationship between violence inflicted by teachers and the subjective well-being of children and adolescents. In this sense, a total effect is observed in both developmental stages, showing the importance of assessing satisfaction with this domain at these stages. School satisfaction is an indicator related to satisfaction with school life in general, which has been demonstrated to have a strong relationship with subjective well-being (Casas et al., 2013; Gómez et al., 2019). Our results emphasise that considering satisfaction with this domain promotes increases in SWB and reduces the effect of violence by teachers on the same construct. This implies a promotion of constant exchanges between residential centre and school staff to help children and adolescents deal with different aspects of school life in appropriate ways. All this should be done bearing in mind that for children in residential care, school can either encourage social inclusion or generate even bigger gaps with their peers, which would make transition to an independent life more difficult for them (Casas et al., 2014). These children and adolescents spend a lot of time at school, where they consolidate their identity by means of interaction with their peers. As suggested by previous studies, the residential care centre staff can help build protective factors around the school experience (Attar-Schwartz, 2009; Dinisman et al., 2013).

In this line, the third and fourth hypothesis proposed that residential care staff could have a moderating effect when children and adolescents in residential care suffer violence by teachers. From a social-ecological perspective, finding protective factors is a key aspect to end up cycles of violence. Children who expressed having greater support from all the professionals at the residential care centre and more school satisfaction were observed to have higher levels of subjective well-being, which is in the same line of studies that show the importance of teachers as support figures and how this contributes to children's SWB (Lawler et al., 2015).

Primary students present high levels of well-being when they perceive great staff support and when teachers do not inflict violence on them, and there is an impact on their subjective well-being when suffering violence by teachers, with or without staff support. When children do not receive support

school students who reside in Rees $(N = 295)$			
Predictor	В	SE	95% SE
Mediator variable model (DV = school satisf	action)		
Teacher violence	-0.77^{**}	0.15	−1.07 to −0.47
Age	0.00	0.08	-0.15 to 0.15
Sex	-0.63^{*}	0.25	-1.11 to -0.14
Dependent variable model $(DV = PWI)$			
Teacher violence	0.03	0.12	-0.20 to 0.26
School satisfaction	0.54**	0.04	0.46 to 0.62
Staff support	0.45**	0.10	0.25 to 0.65
Teacher violence \times staff support	-0.25^{*}	0.10	-0.45 to -0.05
School satisfaction \times staff support	0.01	0.04	-0.07 to 0.10
Age	0.00	0.05	-0.11 to 0.10
Sex	-0.50**	0.18	-0.85 to -0.15
Moderator values	В	BootSE	95% CI
Conditional indirect effect at different values	of the moderator		
-1 SD staff support	-0.41	0.13	-0.70 to -0.17
Mean staff support	-0.42	0.13	-0.68 to -0.19
+1 SD staff support	-0.42	0.13	-0.70 to -0.19
Index of moderated mediation	-0.01	0.04	-0.10 to 0.07

TABLE 5	Conditional indirect effect of teacher violence on PWI with staff support as moderator for secondary
school student	s who reside in RCCs ($N = 295$)

*Significant at 0.05 level.; **Significant at 0.01 level.

from the staff there is also a great impact on SWB, even in cases in which children have no conflict at school. This demonstrates the importance of children perceiving that professionals working at residential care centres offer them their permanent support.

In the case of secondary students, high levels of staff support and low levels of violence from teachers translate into greater SWB; yet the effect of moderate mediation in the model for these adolescents does not seem to be significant. This implies that high levels of residential staff support do not condition the different effects between the model's variables.

Regarding the relationship between school satisfaction and staff support and its effect on subjective well-being in primary schools, children who are unsatisfied with school and who also perceive less staff support present lower SWB levels in comparison with children who, despite not being satisfied with school, do have support from staff; with the latter group exhibiting higher levels of well-being. In other words, staff support has a protective effect (preserves the levels of subjective well-being) when school satisfaction is low. On the contrary, if school satisfaction is high, the support from staff seems less relevant. A possible explanation for this could be that children mainly in primary school already feel support from teachers (which reflects in high school satisfaction) more than in secondary school.

Limitations

This study has some limitations worth noticing. First, it is a cross-sectional study, which implies that causality cannot be attributed between variables. Thus, testing these variables with longitudinal data

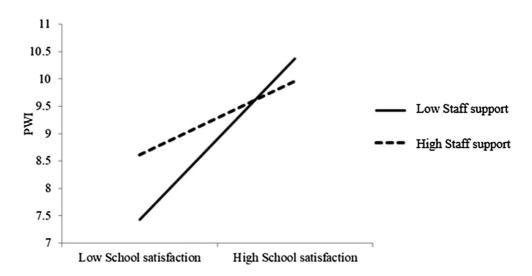


FIGURE 3 Interaction between school satisfaction and staff support for elementary school students who reside in RCCs

would be interesting, specifically whether support from caregivers has a long-term protective effect. Determining the effects of different types of school violence on children in residential care from other countries would also add to this body of evidence. Finally, studies on the different forms of violence and SWB in this population are scarce and delving into this topic becomes necessary.

The selection of the residential care centres to be assessed was based on the monitoring plan of the National Institute for Family Wellbeing (INABIF), which is implemented annually. It is important to note that INABIF selected different residential centres throughout the territory, but the sample does not have national representativeness. In addition, the use of a self-administered questionnaire can also present some social desirability bias.

Implications

The high prevalence of violence from teachers to children and adolescents in residential care observed reveals the complex scenario to which this type of population is exposed, as it also suffers, on many occasions, multiple forms of interpersonal violence. In Peru, like in other low and middle-income countries, exposure to violence is structural in many spheres of the society; therefore, children and adolescents in residential care are even more prone to being victims of different forms of violence in different contexts, which decreases their subjective well-being and leads to more mental health problems.

In this sense, the eradication of violence against these children and adolescents requires an ecological approach that works at different levels and from a multi-factor perspective. In connection, at one level, the government should continue its initial strategy for reducing school violence by promoting the prevention, identification, and notification of violent situations (Gutierrez et al., 2018). In addition, the relevance that permanent connection with the staff has for children and adolescents should be considered. In this line, residential care centres in Peru should envisage the specialisation of professionals undertaking the role of caregivers, since they have no professional qualifications nowadays and this factor can make it difficult for them to provide the academic and socioemotional support required by children and adolescents. According to the results obtained in this study, violence at schools, in this case inflicted by teachers, has a large impact on SWB, as well as satisfaction with school in this context. However, children and adolescents who feel supported by the staff, but are also highly satisfied with school, present higher subjective well-being levels. This is a clear indicator of the need of a joint strategy between residential care settings and schools to reduce the different types of school violence suffered by children and adolescents in care and increase the protective factors that enhance school experience and, in turn, SWB. In turn, the implementation of strategies for the prevention of violence at school and in their community environment is necessary from both the human rights-based work approach and the socioeducational action based on negotiation, follow-up and cooperation between students and teachers.

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CONFLICT OF INTEREST

The authors declare that they have no conflict of interest.

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