



Republic  
of Rwanda

# Violence Against Children and Youth Survey

*Findings from a National Survey, 2015-2016*

# Violence Against Children and Youth Survey in Rwanda

*Findings from a National Survey, 2015-2016*



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The Ministry of Health of Rwanda conducted the Violence Against Children and Youth Survey (VACYS). The US Centers for Disease Control and Prevention (CDC) provided technical guidance for this survey, and the International Development Research Center of Canada (IDRC) provided financial support. The United Nations Children's Fund (UNICEF) provided technical and financial support.

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Please contact:

Rwanda Ministry of Health  
P.O. Box 84 KIGALI, Rwanda

Website: [www.moh.gov.rw](http://www.moh.gov.rw)

Email: [info@moh.gov.rw](mailto:info@moh.gov.rw)

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## **FOREWORD**

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The Government of Rwanda is committed to protecting children and youth from violence, exploitation, abuse and neglect, and acknowledges that a lack of comprehensive data on violence against children has been one of the challenges when trying to plan, implement, monitor and evaluate appropriate child protection policies and programmes. To address this issue, the government of Rwanda, through the Ministry of Health decided to undertake the Violence Against Children and Youth Survey (VACYS, 2015-16) which is a nationally representative sample survey. Rwanda is the fourth country in East Africa to perform this kind of the survey.

VACYS project addresses not only the recommendation related to National Plan of Action to fight violence against children but also the recommendations related to the evidence-base, awareness raising and capacity building. It comes 10 years after the launch of the UN global report on violence against children and coincides with the launch of Sustainable Development Goals through which the world leaders, including Rwanda, set specific commitment to end violence against children by 2030.

The Rwanda VACYS 2015-16 provides, for the first time, comparable, national population-based estimates that describe the magnitude and nature of the problem experienced by children and youth in Rwanda. A part of the demographics estimates on children and youth who participated in this survey, the VACYS displayed the results regarding the Sexual Violence, Physical Violence, Emotional Violence and health outcomes related to these forms of violence. This survey provides also the information regarding sexual health taking behaviors as well as the knowledge about availability of services for children and youth victims of Violence.

This survey provides a strong basis for developing and implementing effective prevention strategies, as well as improving service-provision for all children who experience violence. It underscores the importance of placing the problem of violence against children and youth in the context of other public health, welfare and justice concerns. Prioritizing a multi-sectoral approach to prevent and respond to violence is vital, given its impact on human capital and economic development.

The success of the VACYS was made possible by a number of organizations and individuals. In this regard, the financial support was provided by the International Development Research Center (IDRC), the United Nations Children's Fund (UNICEF) and the US Centers for Disease Control and Prevention (CDC) provided the technical support. The Rwanda Biomedical Centre (RBC), the implementer institution worked in close collaboration with the Ministry of Gender and Family Promotion (MIGEPROF), the National Commission for Children (NCC), the Ministry of Education (MINEDUC), the Rwanda National Police (RNP) and the National Institute of Statistics of Rwanda (NISR). Also, in order to facilitate the coordination and follow up of the survey, the Steering Committee on Violence Against Children and the Technical Working Group on Violence Against Children were put in place.

This report will provide policy-makers, planners, researchers and analysts with information to monitor trends in violence against children. We are confident that the data presented in this report provides a solid basis and will be actively applied in Rwanda's socioeconomic planning.

On behalf of the Government of Rwanda, I hereby share with you the results of Violence against Children and Youth Survey and commend its content to national and global use.

**Dr. Diane GASHUMBA  
Minister of Health**

## **ACKNOWLEDGEMENTS**

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We wish to express great appreciation for the work carried out by the technical team members from the Ministry of Health, the Ministry of Gender and Family promotion, the Ministry of Education, the Rwanda Biomedical Centre, the National Institute of Statistics of Rwanda, the National Commission for Children, the Rwanda National Police, UNICEF and CDC who contributed to the successful preparation and implementation of the survey.

We recognize the valuable support provided by the RBC/Mental Health Division and Single Project Implementation Unit for coordinating survey administration, finance and procurement services that allowed the project to run smoothly, safely and in good conditions.

We would like to express our special thanks to the Ministry of Local Government and to the local authorities for their assistance and contribution to the smooth implementation of the survey. Special thanks go to the team leaders, field supervisors, enumerators and drivers, for their valuable time that made this survey possible.

Finally, we are grateful to the survey respondents who generously gave their time to provide the information that forms the basis of this report.

**Jeanine U. CONDO, MD, PhD**  
**Associate Professor**  
**Director General**  
**Rwanda Biomedical Centre**

# KEY FINDINGS

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VACYS data analysis was done based on three age categories: 13-17, 18-24 and 19-24 years old. Results reported on the 13-17 and 19-24 age groups refer to the past 12 months only; for those aged 18-24, the childhood life experience (prior to age 18) was analyzed.

## RESPONDENTS' CHARACTERISTICS

- Overall, 1,032 females and 1,182 males aged 13-24 participated in the study. The total overall response rates were 98% for males and 97% for females.
- Over 97% of children and youths (both male and female) aged 13-24 reported that they had attended school.
- 34% of the females and 32% of the males aged 13-24 reported that they had lost one of their parents before they were 18 years old. 8% of the females and 7% of the males aged 13-24 reported that they had lost both parents before they were 18 years old.
- Among youths aged 18-24, females were more than twice as likely as males to have been married (or to be living together as if married) prior to age 18 (41% versus 18%, respectively).
- Among the youths aged 18-24 who reported sexual activity prior to being 18, males were significantly more likely than females to have had sex prior to age 18 (43% versus 29%, respectively).
- Females reported an older average age of first sex than males in both age groups (for those aged 13-17 the ages of first sex were 13.3 years and 10.3 years; and for those aged 18-24 the ages of first sex were 18.6 years and 17.4 years, respectively).

## SEXUAL VIOLENCE

- 24% of females and 10% of males aged 18-24 had experienced sexual violence prior to age 18. 12% of females and 5% of males aged 13-17 had experienced sexual violence in the 12 months prior the survey.
- 4% of females aged 18-24 had experienced physically forced sexual violence prior to age 18.
- Of those reporting sexual violence, 76% of females and 69% of males had experienced two or more incidents of abuse before the age of 18.
- Among those who reported sexual violence, 34% of both females and males aged 13-17 had first experienced sexual violence at the age of 13 or earlier.
- Among females and males aged 18-24 who had experienced sexual violence prior to age 18, neighbours were the most common perpetrators of the first such incident.
- 35% of females and 46% of males aged 18-24 who had experienced sexual violence in childhood knew of a place to seek services.
- Of females aged 13-17 who reported first sex in the last 12 months, 46% indicated that this sex was unwanted.
- 83% of female respondents aged 18-24 who experienced sexual violence before age 18 abandoned school as a consequence.
- Among respondents aged 18-24 who experienced sexual violence and did not seek services, 53% of females and 68% of males didn't think the violence was a problem.

## PHYSICAL VIOLENCE

- 37% of females and 60% of males aged 18-24 had experienced physical violence prior to age 18.
- Among females aged 18-24 who had experienced physical violence, half had their first incident between the age of 12 and 17.
- Of males aged 18-24 who experienced physical violence, slightly more of them (52%) had their first incident when aged 6-11 than when aged 12-17 (36%).
- 52% of females and 49% of males aged 18-24 who experienced physical violence missed one or more days of school as a result.
- 27% of females and 42% of males aged 13-17 had experienced physical violence in the past 12 months.
- 86% of respondents aged 13-17 who had experienced physical violence had experienced more than one such incident.
- The most common perpetrators of physical violence for both females and males aged 18-24 were reported to be parents, adult relatives and caregivers.

## **EMOTIONAL VIOLENCE**

- 12% of females and 17% of males aged 18-24 reported experiencing emotional violence by a parent or caregiver prior to age 18. Among them, 97% of females and 97% of males experienced multiple incidents.
- Both females and males aged 18-24 who had experienced emotional violence prior to age 18 had experienced the first incident between 12 and 17 years old (43% females and 49% males).
- 9% of females and 11% of males aged 13-17 reported experiencing emotional violence by a parent or caregiver in the past 12 months. Among them, all females and 96% of males had experienced multiple incidents.
- 43% of females and 36% of males aged 13-17 who had experienced emotional violence in the past 12 months had experienced the first incident between the ages of 6 and 11.
- Both females and males aged 13-17 who had experienced emotional violence in the past 12 months had experienced the first incident between the ages of 12 and 17 (49% females and 62% males).

## **OVERLAP OF TYPES OF VIOLENCE: SEXUAL, PHYSICAL AND EMOTIONAL VIOLENCE**

- Among youth aged 18-24, 18% of males and 13% of females had experienced two or all three forms of violence prior to age 18.
- Among children aged 13-17, 8% of males and 7% of females had experienced two or all three forms of violence in the past 12 months.

## **HEALTH OUTCOMES OF SEXUAL ABUSE AND PHYSICAL AND EMOTIONAL VIOLENCE**

- Females aged 18-24 who had experienced sexual abuse or physical or emotional violence in childhood were significantly more likely to have thought of suicide than those who did not experience such violence.
- Males aged 18-24 with a history of emotional violence in childhood were significantly more likely to have experienced mental distress in the past 30 days, or to have been drunk in the past 30 days than those who did not experience such violence.
- Males aged 13-17 with a history of sexual abuse in childhood were significantly more likely to have been drunk in the past 30 days than those who did not experience such violence; those who had experienced childhood emotional violence were significantly more likely to have experienced mental distress in the past 30 days than those who did not experience such violence.
- Females aged 19-24 with a history of sexual abuse in childhood were significantly more likely to have experienced mental distress in the past 30 days and to have suicidal thoughts than those who did not experience such violence; those with a history of physical or emotional violence in childhood were more likely to have suicidal thoughts than those who did not experience such type of violence.
- Males aged 19-24 with a history of childhood emotional violence were significantly more likely to have experienced mental distress in the past 30 days than those who did not experience such violence.
- Among females with experiences of unwanted completed sex in childhood, 48% of those aged 18-24 reported pregnancy as a result.

## **SEXUAL RISK-TAKING BEHAVIOURS AND EXPOSURE TO VIOLENCE IN CHILDHOOD**

- 20% of sexually active males and 16% of sexually active females aged 19-24 reported infrequent condom use in the past 12 months.
- Among sexually active males aged 19-24, 17% reported having at least two sex partners in the past 12 months.
- 54% of females aged 19-24 with experience of sexual abuse and who had had sexual intercourse in the past 12 months had never used condoms.

## **HIV/AIDS-TESTING BEHAVIOURS, TESTING KNOWLEDGE AND ASSOCIATION WITH SEXUAL ABUSE IN CHILDHOOD**

- Among children and youth who had ever had sexual intercourse, 95% of females and 89% of males aged 13-17 knew where to go for an HIV test. All females and 98% of males aged 18-24 knew where to go for an HIV test.
- 36% of females and 46% of males aged 13-17 who have had sexual intercourse had not been tested for HIV.
- Among youth aged 18-24 who had experienced sexual intercourse prior to the age of 18, 97% of females and 89% of males had been tested for HIV.
- Among respondents aged 13-17 who have ever had sexual intercourse, 64.5% of females and 54% of males had been tested for HIV.

## **BELIEFS REGARDING GENDER AND VIOLENCE**

- Not taking care of the children was considered the most common acceptable reason for a husband to beat his wife, among both sexes and across all age ranges.
- In the 13-17 age group, 33% of females and 20% of males believed that women who do not take care of the children provide the main acceptable reason for a man to beat his wife.
- In the 18-24 age group, 25% of females and 15% of males believed that women who do not take care of the children is the main acceptable reason for a man to hit or beat his wife.
- The most common belief among females and males aged 13-17 (71% and 69%, respectively) was that women who carry condoms have sex with a lot of men.
- Among youth aged 18-24, 69% of females believed that men need to have sex with other women even if they have a good relationship with their wives; and 62% of males believed that women who carry condoms have sex with a lot of men.
- Among children aged 13-17, 7% of both males and females reported having committed violence against other persons.
- Among youth aged 18-24, males reported committing physical violence against other persons significantly more than females did (13% and 3%, respectively).

# CONTRIBUTORS

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## Ministry of Health

Alypio Nyandwi  
Mecthilde Kamukunzi

## Ministry of Gender and Family Promotion

Anastasie Nyirabahinde

## Ministry of Education

Claudine Mukagahima

## National Institute of Statistics of Rwanda (NISR)

Apolline Mukanyonga  
Didier Gaga Rukorera  
Dominique Habimana

## National Commission for Children

Germaine Mukabarisa  
James Nduwayo  
Josiane Mukamana  
Rwanda Biomedical Centre  
Emmanuel Hakomeza  
Yvonne Kayiteshonga  
Jean Damascene Iyamuremye  
Jeanne D'Arc Dusabeyezu  
Nancy Claire Misago  
Yvonne Kayiteshonga

## Rwanda National Police

Daniel Uwimana

## UNICEF, RWANDA

Amber Parkes  
Denyse Amahirwe  
Erna Ribar  
Genevieve Uwamariya  
Marie Divine Umurerwa  
Mona Aika  
Patricia Lim Ah Ken  
Rachel Sabates-Wheeler  
Ramatou Toure  
Solrun Engilbertsdottir

## International Development Research Centre

Margaret Emokor  
Marie-Gloriose Ingabire  
Pascale Bruneau

## Centers for Disease Control and Prevention, US

Ansley Lemons  
Ashleigh Howard  
Byron Hernandez  
Howard Kress  
Jennifer Peregoy  
Jose Luis Carlosama  
Juliette Lee  
Kimberly Boer  
Kimberly Nguyen  
Laura Chiang  
Veronica Lea  
Viani Ramirez

## Statistician and Data Manager

Elysée Tuyishime

## Field Supervisors

Camille Manzi  
Dalila Twizerimana

## Field Team Leaders

Amede Tuyisenge  
Charlotte Musabyimana  
Domina Dusabeyezu  
Egide Kabandaho  
Elyse Uwizeye  
Emmanuel Mushinzimana  
Epimaque Habimana  
Etienne Kwigera  
Evaraiste Habiaremye  
Illuminee Mukamwiza  
Jean Bizimana  
Jean Chrystome Nzabihimana  
Jeanne Francoise Mukabarezi  
Judith Nyiransengiyumva  
Liliane Gashagara  
Luc Michel Muramira  
Marcelline Mukantabana  
Ndahi Oussein Rugaza  
Peace Uwimbabazi  
Pierre Claver Nzabakinga  
Robert Bizimana  
Serge Habumuremyi  
Thacien Munyaneza  
Yseult Umulisa

## Enumerators: interviewers

Adelphine Mukamana  
Adolphe Gasirimu N.  
Aime Enock Niyonzima  
Albert Habumugisha  
Alice Kaneza  
Alice Tuyisenge  
Aline Nyirabitanga  
Aloys Gatarayiha  
Alphonse Kalisa  
Alphonse Munyankindi  
Amon Rutungirwa  
Andre Ndikubwimana  
Angelique Mupenzi  
Athanase Habyarimana  
Aurelie Iryumuremyi  
Benjamin Ngamijumukiza  
Benoit Kadage  
Buzizi Diane Kabahire  
Carine Uwineza  
Charles Ndayisaba  
Christella Kamikazi  
Claudine Mushirarungu  
Clemence Nduwayo  
Clement Mizero  
Concorde Ndagijimana  
Conrade Hagenimana  
Consolee Mukamugema  
Consolee Mukasine  
Delphine Uwamahoro  
Diane Ubaruta  
Dieudonne Hitimana  
Emile Habanabakize  
Emmerance Mukayubusa  
Eric Twahirwa  
Esperence Nyiransabimana  
Eugene Nyirihiwe  
Eugene Ruhimbana  
Eustache Ndayambaje  
Evelyne Mushimiyimana  
Evode Niyonsaba  
Felicien Dusabikiza  
Felix Bizimana  
Francine Mukankusi  
Francois Regis Hakizimana  
Genevieve Mukunduhirwe  
Ghislais Guillain Makuza  
Gilbert Kayijuka  
Henriette Uwababyeyi  
Immaculee Nyirabahutu  
Immaculee Nyiramuhzo  
Issa Musabemungu  
J. Christophe Rubibi Bitata

Jacqueline Umutoniwase

Jacqueline Uwamahoro

Jacques Ndamirimana

Jean Baptiste Gatare

Jean Baptiste Twagirumukiza

Jean Claude Mazimpaka

Jean D'amour Ndamyimana

Jean De Dieu Habinshuti

Jean Marie Vianney Mukurakinda

Jean Paul Niyoyita

Jean Pierre Byiringiro

Jeanne Claudine Uwera

Jeannine Kayitesi

John William Shumbusho

Joseph Minani

Joseph Ngizwenayezu

Josephine Mukashyaka

Julienne Mukakunzi

Leonard Bigwagwa

Mary Musabyeyeze

Merci Dieu Ndikumana

Modeste Muvara

Nelson Muhayimana

Odette Uwabyaye

Olivier Dufatanye

Pascal Ndinda

Patrick Karegeya

Pelagie Niwemfura

Pelagie Nyirandagijimana

Phocas Dusenge

Quesie Mukeshimana

Rachel Uwimana

Richard Gakwaya

Richard Kazura Ndayisenga

Robert Janvier Uwineza

Ronnah Mutesi

Rukanyagira Ndanyuzwe

Sabine Mukunduhirwe

Serapie Nizeyimana

Sixte Ben Dedale Higiro

Solange Baribeza

Solange Fitina

Sylvain Niyibizi

Sylvestre Gatabazi

Sylvestre Niyitegeka

Teddy Uwingabire

Thaciene Rwigema

Tharcisse Bizimana

Theogene Munyampundu

Vedaste Muhire

Venuste Ngendahimana

Vestine Umwali

# KEY TERMS AND DEFINITIONS

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The VACYS/Rwanda uses the following definitions:

## 1. Sexual violence

Sexual violence includes all forms of sexual abuse and sexual exploitation of children. This encompasses a range of acts, including completed non-consensual sex acts (i.e. rape), attempted non-consensual sex acts, abusive sexual contact (i.e. unwanted touching) and non-contact sexual abuse (e.g. threatened sexual violence, exhibitionism, verbal sexual harassment). It also includes the inducement or coercion of a child to engage in any unlawful or psychologically harmful sexual activity; the exploitative use of children in prostitution or other unlawful sexual practices; and the exploitative use of children in pornographic performances and materials. In this survey, questions were posed on four types of sexual abuse and on sexual exploitation.

### 1.1 Types of sexual abuse

- Unwanted sexual touching is touching in a sexual way without a person's permission. It includes fondling, pinching, grabbing or touching on or around a person's sexual body parts; but does not include trying or forcing to have sex.
- Unwanted attempted sex is an unsuccessful attempt to make a person have sex against their will.
- Physically forced sex is making someone have sex against their will by physical force.
- Pressured sex is making someone have sex against their will through harassment, threats or tricks.

### 1.2 Sexual exploitation is exchanging sex for food, favours or gifts.

### 1.3 Non-contact sexual violence/exploitation is participating in a sex photo or video, or showing one's sexual body parts in front of a webcam, whether consented to or not.

Other related definitions:

- Unwanted completed sex is either physically forced or pressured sex as per above.
- Sex or sexual intercourse includes vaginal, oral or anal sex, or the insertion of an object into the respondent's vagina or anus.
- Sexually active is a respondent who reported having sex (wanted or unwanted) during the 12 months prior to the survey.

## 2. Physical violence

Physical violence is defined as the intentional use of physical force with the potential to cause death, disability, injury or harm. VACYS in Rwanda indicators of physical violence included punching, kicking, whipping, beating with an object, choking, suffocating, attempted drowning, intentional burning, using or threatening to use a knife, gun or other weapon.

Respondents were specifically asked about physical acts of violence perpetrated by four types of potential perpetrators:

1. Intimate partners including a romantic partner, a boyfriend/girlfriend or a spouse.
2. Peers, including people the same age as the respondent but excluding a boyfriend/girlfriend, spouse or romantic partner. Peers may include siblings, schoolmates, neighbours or strangers.
3. Parents, adult caregivers or other adult relatives.
4. Adults in the neighbourhood such as teachers, police officers, employers, religious or neighbourhood leaders, neighbours, or adults unknown to the respondent.

For each type of perpetrator, respondents were asked about three measures of physical violence:

Has (1) a romantic partner, boyfriend, or husband/ (2) a person your own age/ (3) a parent, adult caregiver, or other adult relative/ (4) an adult in the neighborhood ever:

- Punched, kicked, whipped or beaten you with an object?
- Choked, suffocated, tried to drown you, or burned you intentionally?
- Hurt or threatened you with a knife, gun or other weapon?

### **3. Emotional violence**

Emotional violence is a pattern of verbal behaviour over time or an isolated incident that is not developmentally appropriate and that is likely to damage a child's mental health, or his/her physical, mental, spiritual, moral or social development. In this survey, emotional violence is operationalized if a parent or caregiver spoke to or behaved to the respondent in one of the following ways:

- Treated the respondent unequally compared to other children in the household/family
- Intentionally ignored the respondent
- Repeatedly insulted the respondent.

### **4. Age-group definitions**

Child: any person under the age of 18.

Youth: any person from 18 to 24 years of age.

Childhood: Someone's lifetime before reaching the age of 18.

## LIST OF KEY ACRONYMS

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CDC	United States Centers for Disease Control and Prevention
CI	Confidence Interval
RDHS	Rwanda Demographic and Health Survey
EA	Enumeration Area
HH	Household
IDRC	International Development Research Center
MIGEPROF	Ministry of Gender and Family Promotion
MINEDUC	Ministry of Education
MOH	Ministry of Health
NCC	National Commission for Children
NGO	Non-Governmental Organization
NISR	National Institute of Statistics of Rwanda
PPS	Probability Proportional to Size
PSU	Primary Sampling Unit
RBC	Rwanda Biomedical Centre
RNEC	Rwanda National Ethics Committee
STIs	Sexually Transmitted Infections
UNICEF	United Nations Children's Fund
US	United States
VACYS	Violence Against Children and Youth Survey
WHO	World Health Organization
YRBS	Youth Risk Behaviour Survey

# SECTION 1

## INTRODUCTION AND BACKGROUND

### 1. COUNTRY PROFILE

#### Geography

Rwanda is located in central Africa, immediately south of the equator between latitude 1°4' and 2°51'S and longitude 28°63' and 30°54' E. It has a surface area of 26,338 square km and is bordered by Uganda to the north, Tanzania to the east, the Democratic Republic of Congo to the west and Burundi to the south. Landlocked, Rwanda lies 1,200 km from the Indian Ocean and 2,000 km from the Atlantic Ocean.

Rwanda forms part of the highlands of eastern and central Africa, with mountainous relief and an average elevation of 1,700 m. There are three distinct geographical regions. Western and north-central Rwanda is made up of the mountains and foothills of the Congo-Nile Divide, the Virunga volcano range and the northern highlands. This region is characterized by rugged mountains intercut by steep valleys, with elevations generally exceeding 2,000 m. The divide itself rises to 3,000 m at its highest point but is dwarfed by the volcano range, where the highest peak, Mount Karisimbi, reaches 4,507 m. The Congo-Nile Divide slopes westward to Lake Kivu, which lies 1,460 m above sea level in the Rift Valley trough.

In Rwanda's centre, mountainous terrain becomes the rolling hills that give the country its nickname, "Land of a Thousand Hills." Here the average elevation varies between 1,500 and 2,000 m. The area is also referred to as the central plateau.

#### Population

The fourth population and housing census (RPHC4) in 2012 showed that the Rwandan population was just over 10.5 million (10,515,973) of which 52 per cent were female. Based on Rwanda Demographic and Health Survey (DHS) data, the total fertility rate is estimated to have declined from 6.1 in 2005 to 4.6 in 2010.

Population density is high across the country and has increased steadily over the years, from 183 inhabitants per square km in 1978 to 415 in 2012. The population is largely rural: according to the RPHC4, almost 84 per cent of the country's residents live in rural areas. Of the total urban population, 49 per cent live in the capital city, Kigali. The population is essentially young, with 43 per cent of all Rwandans being under the age of 15 according to the RPHC4.

The study population of VACYS Rwanda covers young people in the age range 13-24 years – according to the RPHC4, this includes 1,301,247 males (49 per cent) and 1,357,181 females (51 per cent).



Figure 1.1: Map of Rwanda

## Economy

Regular efforts have been made to develop Rwanda's service sector and to stimulate investment in the industrial sector. These efforts are now bearing positive results, as the service sector has contributed more to the economy than the agricultural sector in recent years.

Rwanda's economy has grown steadily at about 8 per cent per year since 2001, with gross domestic product (GDP) per capita more than tripling from US\$211 in 2001 to US\$719 in 2015. The rate of growth in food crop production was more than twice the population growth rate between 2007 and 2015. In fact, GDP at current market prices was estimated to be Rwf 5,605 billion in 2015, up from Rwf 5,136 billion in 2013. The service sector contributed 48 per cent of GDP in 2015, of which trade and transport represented 15 per cent, and other services (e.g. information, communication, real estate activities, education, hotels and restaurants) represented 32 per cent.

The agriculture sector contributed 33 per cent of GDP, with food crops representing 23 per cent of this total. The industrial sector contributed 14 per cent of GDP, with different types of manufacturing representing 5 per cent, mining and quarrying 2 per cent, and approximately 5 per cent attributable to adjustment for taxes less subsidies on products.

In the 2014-2015 fiscal year, estimates calculated at constant 2011 prices showed that GDP was 7.3 per cent higher in real terms than in 2013-2014. In this period, the agriculture sector grew by 5 per cent and contributed 1.6 percentage points to overall GDP growth. Activities in the industry sector grew by 7 per cent and contributed 1 percentage point to GDP growth. The service sector increased by 8 per cent and contributed 4 percentage points (NISR 2015-15). The 2015 per capita income was US\$1,800 (Purchasing Power Parity).

## 2. Violence context

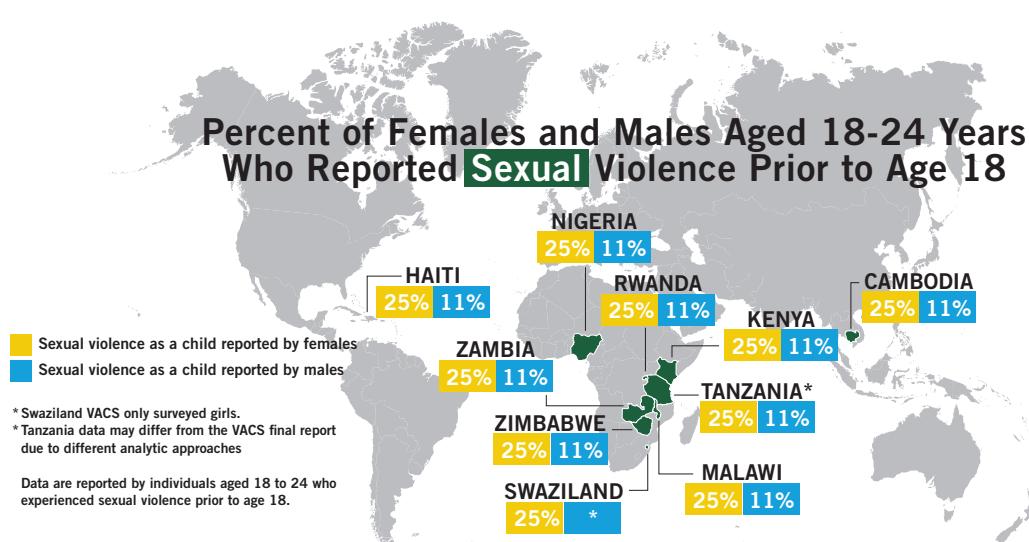
Every child has the right to be protected from all forms of violence. This right is enshrined in the UN Convention on the Rights of the Child (1989), the world's most widely ratified human rights treaty, and regional instruments, including the African Charter on the Rights and Welfare of the Child (1990). Rwanda, like its East African neighbours, Tanzania and Kenya, is committed to the protection of children from all forms of violence. Rwanda's Constitution has several articles which protect children's rights, either explicitly or as part of the general population.<sup>1</sup> The Integrated Child Rights Policy also highlights that the abuse, exploitation and violence against children are intolerable.

Despite this, millions of children around the globe, regardless of their economic and social circumstances, culture, religion or ethnicity, are subjected to violence on a daily basis. Violence against children includes 'all forms of physical or emotional violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse.<sup>2</sup> It occurs across different contexts and in many settings, including in the home and family, in schools, care and justice systems, the workplace and the community. Global evidence shows that perpetrators are usually people responsible for the care of children or with whom children interact daily, such as caregivers, peers and intimate partners.<sup>3</sup>

Data on the prevalence of violence against children worldwide is still inadequate. However, recent studies provide some insight into the magnitude of the problem – they reveal high rates of violence against children in a variety of countries and cultures. UNICEF's 2015 report, Hidden in Plain Sight: a statistical analysis of violence against children, drew on data from 190 countries and showed that in 2012 alone, homicide took the lives of about 95,000 children and adolescents under the age of 20 (almost one in five of all homicide victims that year). Almost one billion children (around six in 10 children), between the ages of two and 14 worldwide, were regularly subjected to physical punishment by their caregivers. A staggering 120 million girls under the age of 20 (about one in 10) were estimated to have been subjected to forced sexual intercourse or other forced sexual acts at some point in their lives. Notably, while studies showed that boys were also at risk of sexual violence, it was not possible to make a reliable global estimate due to the lack of comparable data in most countries.<sup>4</sup>

Recent prevalence studies in sub-Saharan Africa find similarly concerning rates. Findings from the Violence Against Children Surveys (VACYS) conducted in Kenya<sup>5</sup> the Republic of Tanzania<sup>6</sup>, Swaziland<sup>7</sup>, Zimbabwe<sup>8</sup> and Nigeria<sup>9</sup>, for instance, indicate that about one in three girls experienced sexual violence during their childhood (Figure 1.2). In Malawi, the rate was slightly lower at one in five<sup>10</sup>. For boys, the reported prevalence of child sexual abuse ranged from 9 per cent in Zimbabwe to 18 per cent in Kenya. The reported prevalence of physical violence in childhood was between 53 per cent and 76 per cent in Kenya, the Republic of Tanzania and Zimbabwe, with somewhat higher rates of physical violence experienced by boys than girls (Figure 1.3). The reported prevalence of physical violence against girls in Swaziland was 22 per cent. The reported prevalence of emotional violence during childhood for Kenya, the Republic of Tanzania, Swaziland and Zimbabwe was between 24 per cent and 38 per cent, with similar rates indicated for boys and girls.

Figure 1.2



<sup>1</sup> Constitution of the Republic of Rwanda of 1 2003, revised 2015.

<sup>2</sup> Pinheiro 2006.

<sup>3</sup> Pinheiro 2006.

<sup>4</sup> UNICEF 2015.

<sup>5</sup> UNICEF Kenya 2012.

<sup>6</sup> UNICEF Tanzania 2011.

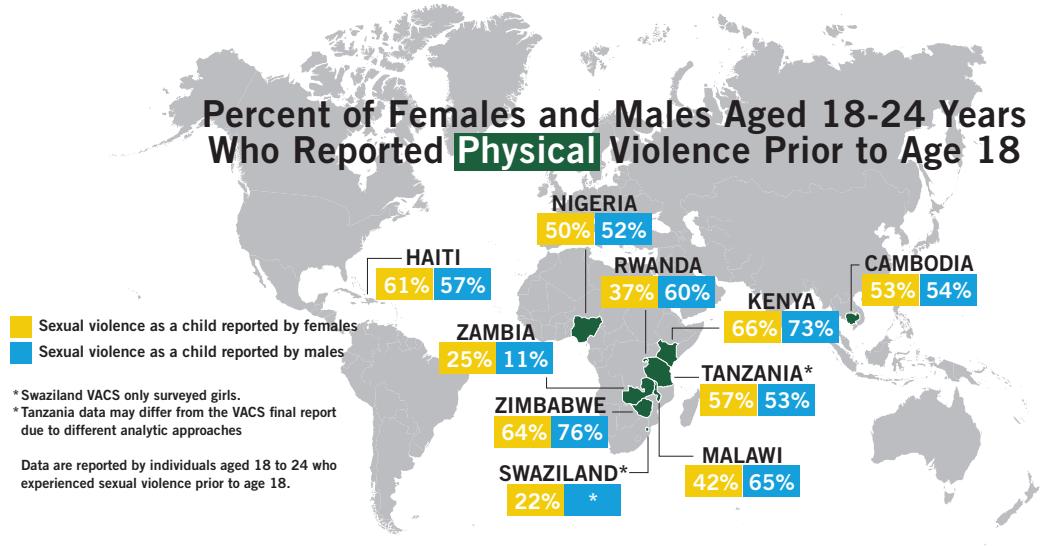
<sup>7</sup> Reza et al. 2009.

<sup>8</sup> Zimbabwe National Statistics Agency 2013

<sup>9</sup> National Population Commission of Nigeria 2015.

<sup>10</sup> Ministry of Gender, Malawi 2015

Figure 1.3



Violence against children is not only a human-rights issue but also a serious public health concern. Children subjected to violence can suffer severe short- to long-term health and social consequences.<sup>11</sup> The impacts of violence may vary depending on a child's age when abused; the duration, frequency and severity of the violence; the relationship with the perpetrator; the child's innate resilience; and co-occurrence with other maltreatment or adverse exposures, such as the mental health of the parents, substance abuse by the parents or violence in the home.<sup>12,13</sup> Neurobiological and behavioural research indicates that early childhood exposure to violence can affect brain development and increase the child's susceptibility to a range of mental and physical health problems that can last into adulthood, including anxiety or depressive disorders, cardiovascular health problems, and diabetes.<sup>14,15,16</sup> Direct experience of violence by parents, caregivers and others has been associated with a number of emotional and behavioural problems in adolescence and adulthood, including aggression, conduct disorder, substance abuse, poor academic performance, anxiety, depression, reduced self-esteem and suicidal behaviour. In addition, exposure to or witnessing violence has also been associated with a variety of behavioural health risks such as smoking and obesity as well as specific health problems such as physical injury, diabetes and ischemic heart disease.<sup>17</sup>

Violence against children can have negative consequences for children's cognitive development, including language deficits and reduced cognitive functioning.<sup>18</sup> In many communities, exposure to violence has led to social stigma and discrimination against the child and his or her family, such as in cases of sexual violence. In its global status report on violence prevention 2015, the World Health Organization (WHO) explains that physical injuries from violence are 'outweighed by the wide spectrum of negative behavioural, cognitive, mental health, sexual and reproductive health problems, chronic diseases and social effects that arise.'<sup>19</sup> While all types of violence have been strongly linked to negative health consequences across a person's lifespan, WHO observes that violence against children and women reportedly contributes disproportionately to the health burden.<sup>20</sup> Violence has profound consequences not only for the individual child and his or her family but the community and society at large. It can result in continuing cycles of re-victimization and re-occurrence of violence as well as transmission across generations.<sup>21</sup>

There is growing evidence too on the social and economic costs of violence against children. Studies show that experiencing violence as a child can have serious consequences for children's academic success, including an increased risk of many forms of educational underachievement and loss of learning potential. Recent studies from the US have confirmed the economic impacts of violence on victims, and a number of studies in different regions of the world have also quantified the economic impact on society, including through direct and indirect costs owing to increased social spending and lost economic productivity.<sup>22</sup> Especially in low- and middle-income countries, violence against children can have major long-term economic and human development implications. The global community formally recognized the impact of violence against children on economic growth in 2015 – the elimination of all forms of violence against children was included as a target in the Sustainable Development Goals launched in September 2015.

<sup>11</sup>UNICEF 2006.

<sup>12</sup>Repetti et al. 2002.

<sup>13</sup>Felitti et al. 1998.

<sup>14</sup>Felitti et al. 1998.

<sup>15</sup>National Research Council 2000.

<sup>16</sup>Kendall-Tackett 2013.

<sup>17</sup>Krug et al. 2002.

<sup>18</sup>Kendall-Tackett and Eckenrode 1996.

<sup>19</sup>WHO 2015.

<sup>20</sup>WHO 2015.

<sup>21</sup>Eriksson and Mazerolle 2015.

<sup>22</sup>UNICEF 2015.

## Rwandan laws and policies relevant to protecting children from violence:

- Official Gazette of the Republic of Rwanda n°26 of 25/06/2012, Law N°54/2011 on Rights and Protection of the Child against Violence.
- Official Gazette of the Republic of Rwanda n°14 of 06/04/2009, Law No. 59/2008 of 2008 on Prevention and Punishment of Gender-Based Violence.
- Official Gazette of the Republic of Rwanda, special of 27/05/2009 Regulating Labour in Rwanda.
- 2003 Policy on Orphans and Vulnerable Children.
- National Integrated Child Rights Policy, August 2011.
- National Strategic Plan for Fighting Against Gender-based Violence 2011-2016, July 2011.
- Official Gazette of the Republic of Rwanda n°37 of 12/09/2016, Law Governing Persons and Family.
- Rwanda's 2015 DHS revealed that 8 percent of women aged 20-24 had experienced sexual violence; and that 4 percent of women aged 15-19 had experienced sexual violence in the last 12 months. Also, 9 percent of women aged 20-24 and 10 percent of women aged 15-19 had experienced physical violence in the last 12 months.

Rwanda's 2015 DHS revealed also that 2 percent of men aged 20-24 had experienced sexual violence; and that 1 percent of men aged 15-19 had experienced sexual violence in the last 12 months. Also, 8 percent of men aged 20-24 and 13 percent of women aged 15-19 had experienced physical violence in the last 12 months.

However, RDHS did not provide information on those younger than 15, and there is little data reflecting lifetime exposure to violence.

### 3. National call for VACYS in Rwanda

The Government of Rwanda is committed to protecting children and youth from violence, exploitation, abuse and neglect, and acknowledges that a lack of comprehensive data on violence against children has been one of the challenges when trying to plan, implement, monitor and evaluate appropriate child protection policies and programmes. The lack of sufficient reliable data on violence against children contributes to the inability of agencies to make informed programmatic decisions. Evidence to support advocacy, to inform national planning and funding allocation, and to monitor the impact of all forms of violence is urgently needed.

As a modest step to fill the gaps, the National Conference on Violence Against Children was organized in 2011 under the auspices of the First Lady, Jeannette Kagame. Conducting an evidence-based plan to end violence against children was one of the key recommendations of the conference. The same recommendation was reiterated by the Committee on the Rights of Child in its Concluding Observations in 2013. The Committee urged the government to develop the National Plan of Action to fight violence against children, based on the recommendations from the national conference held in 2011. The same has also been among the top recommendation of the 7th National Children's Summit of January 4th 2012.

The present VACYS project addresses not only the recommendation related to National Plan of Action to fight violence against children but also the recommendations related to the evidence-base, awareness raising and capacity building. It comes 10 years after the launch of the World report on violence against children<sup>23</sup> and coincides with the launch of Sustainable Development Goals through which the world leaders, including Rwanda, set specific commitment to end violence against children by 2030.

The Rwanda VACYS 2015-16 provides, for the first time, comparable, national population-based estimates that describe the magnitude and nature of the problem experienced by children in Rwanda. This data is indispensable and provides a strong basis for developing and implementing effective prevention strategies, as well as improving service-provision for all children who experience violence. It also helps develop local capacity in data collection and analysis, policy recommendation development, and effective knowledge transmission.

<sup>23</sup>23 Pinheiro 2006.

## 4. Report structure

Following the introduction and background of the survey, the methodology section explains the design, sample-size calculation and sampling frame. The development of the survey and the intensive preparation for implementation (including training for interviewers, supervisors and team leaders, and pilot testing) are then described. The definition of key survey constructs, quality control, data entry and cleaning, and data analyses and weighting procedures are also detailed in the methodology section. Section 3 of the report provides characteristics for the 13-24 year old survey respondents and corresponding household characteristics. Sections 4 to 11 provide a portrait of violence against children and youth in Rwanda, which is based on the findings of the quantitative national survey, with a focus on:

- Sexual, physical and emotional violence in childhood, including the prevalence and perpetrators of violence against children and youth, and help-seeking behaviour and knowledge of services (Sections 4 to 6)
- The overlapping occurrence of sexual, physical and emotional violence (Section 7)
- Health outcomes of experiencing sexual, physical and emotional violence (Section 8)
- Relationships among sexual risk-taking behaviours, HIV/AIDS-testing behaviours and childhood experiences of sexual violence (Sections 9 and 10)
- Beliefs towards spousal violence, and the role of gender in sexual practices and intimate partner violence (Section 11)
- Key results and recommendations to stakeholders on developing, improving and enhancing prevention and response strategies to address violence against children and youth (Sections 12 and 13).

Appendix A details the weighting procedures and response rates. All data tables referenced in the text can be found in Appendix B.

# SECTION 2

## SURVEY METHODOLOGY

### 2.1 PREPARATION AND COORDINATION

Following an introductory workshop in 2013 (facilitated by MOH/RBC), a range of stakeholders agreed to implement the Violence Against Children and Youth (VACYS) Survey, using (and building on) the methodology of nine similar surveys completed in other countries.

The national Steering Committee, chaired by MOH/RBC, was established to oversee the development and implementation of the survey and review the findings. RBC implemented data collection between November and December 2015 in every District in Rwanda.

### 2.2 STUDY DESIGN AND SAMPLING

#### 2.2.1 Study design

The VACYS 2015 is a cross-sectional household survey of young people aged 13-24 years, designed to produce national-level estimates of experiences of physical, sexual and emotional violence in childhood. Cross-sectional surveys reflect a randomly selected, representative subset of the population, at one specific point in time - they provide estimates of relevant indicators at an acceptable level of precision by age-group, sex and other socio-demographic factors. The groups of 13-24 year olds were selected as the most appropriate population to survey in order to better understand childhood violence. It was determined that children younger than 13 would not have the maturity to be able to answer the survey questions, including the more complicated questions on potential risk and protective factors. At the same time, recall bias (the inability to accurately recall events in the past) related to childhood experiences is minimized among respondents aged 24 and younger.

All respondents were asked about their experiences of violence, during their lifetime and during the previous 12 months. For analysis purposes, lifetime prevalence estimates of childhood violence were based on the responses from participants aged 18-24 reporting on their experiences prior to the age of 18. Estimates of current childhood violence were based on

<sup>24</sup>UNICEF, CDC and government officials from the Ministry of Gender and Family Promotion (MIGEPROF), the National Commission for Children (NCC), the Ministry of Local Government (MINALOC), the Ministry of Education (MINEDUC), the National Institute of Statistics of Rwanda (NISR), Rwanda National Police (RNP) and the National Council of Persons with Disabilities (NCPD).

responses from participants aged 13-17 reporting on experiences occurring in the 12 months preceding the survey. The latter allows the examination of current patterns and contexts of childhood violence in Rwanda.

Although the analyses differ by age group, all VACYS respondents were asked the same questions, other than those on pregnancy, which were only asked of females.

## 2.2.2 Sampling frame and sample size calculation

The sampling frame used for the VACYS was the 2012 Rwanda Population and Housing Census (RPHC). The frame consisted of a list of enumeration areas (EAs) covering the entire country, provided by the National Institute of Statistics (NISR). An EA is a natural village or part of a village created for the 2012 RPHC; these areas served as counting units for the census. The sample design involved selecting clusters (enumeration areas) with more than 50 households – this minimum size was set to protect the confidentiality of respondents.

A three-stage sample design was used. In the first stage, 250 EAs were selected using probability proportional to size (PPS) from the list of 14,837 natural villages provided by NISR. These 250 EAs were stratified by sex, because of the split-sample design whereby female and male samples are drawn independently. In the second stage, a fixed number of 25 households were selected by equal probability systematic sampling. In the third stage, one eligible individual (female or male depending on the selected EA) was randomly selected from the list of all eligible respondents (females or males aged 13-24) in each household to respond to the questionnaire. If no one was available for the household interview or if the selected individual was not available after three visits, the interview disposition was listed as unavailable. Unavailable households or individuals were not replaced.

To calculate separate male and female prevalence estimates for violent victimization, a split-sample approach was used, with the surveys for females and for males being conducted in different communities. This approach eliminated the chance that a male perpetrator of sexual violence and the female who was sexually assaulted would both be interviewed in a particular community (and it also eliminated the chance that a female perpetrator and a male who experienced sexual violence would both be interviewed).

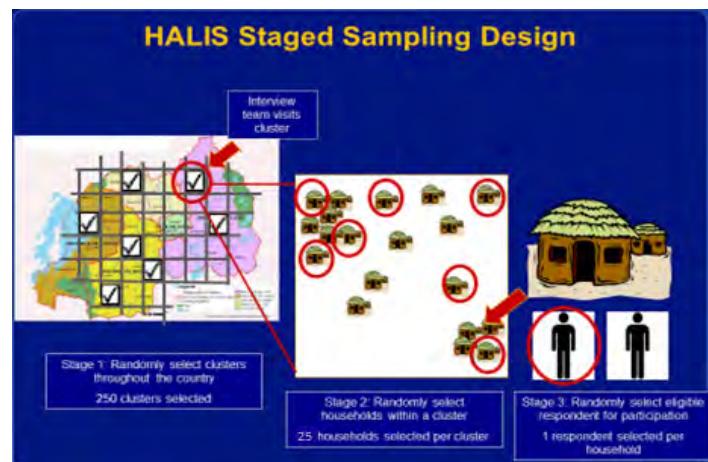
### VACYS used a multi-stage sample design:

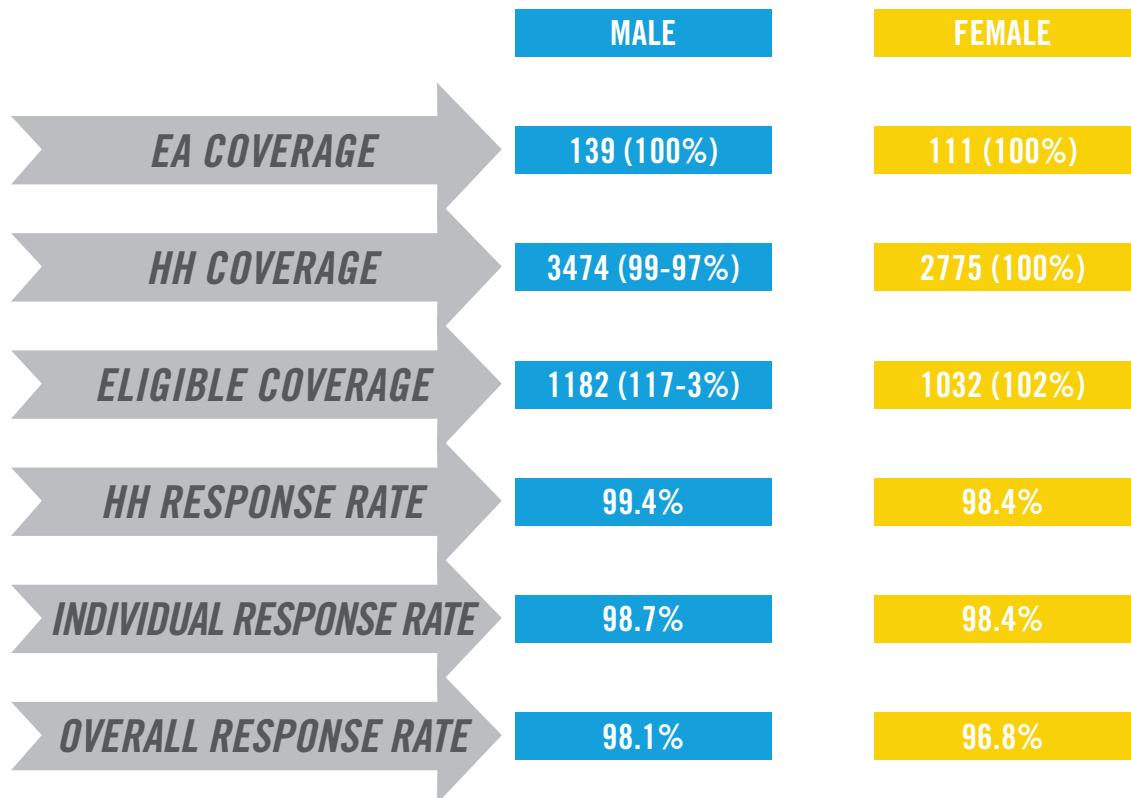
Stage 1 – A total of 250 EAs were selected using PPS. The 250 selected EAs were stratified by sex because of the split-sample design (111 primary sampling units (PSUs) were selected as female and 139 PSUs were selected as male). The differences were based on varying anticipated response rates by sex and household screening rates.

Stage 2 – A cluster of 25 houses were selected by equal probability systematic sampling in each EA.

Stage 3 – One eligible respondent (female or male) was randomly selected from all eligible females (or males) in each household (Appendix A, Table A1a).

The total sample obtained was 1,182 males and 1,032 females. The total overall response rate was 98 per cent for males and 97 per cent for females.





### 2.2.3 Developing the survey questionnaire

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The questionnaire used in VACYs in Rwanda was adapted from one developed by CDC scientists. The similar questionnaire draws questions and definitions from a number of well-respected survey tools. It therefore has the benefit of (a) being able to compare data on various measures with other studies as a useful validation and an interesting comparison, and (b) using measures that have already been field-tested. The questionnaire has been previously implemented in nine other countries (Swaziland, Tanzania, Kenya, Zimbabwe, Haiti, Cambodia, Indonesia, Zambia and Malawi) after being adapted based on vital country-level review by stakeholders.

The following international and national surveys helped to inform the questionnaire:

- Demographic and Health Survey (DHS)
- National Intimate Partner and Sexual Violence Surveillance System (NISVSS)Longitudinal Studies of Child Abuse and Neglect (LONGSCAN)
- ISPCAN Child Abuse Screening Tool (ICAST)
- HIV/AIDS/STD Behavioural Surveillance Surveys (BSS)
- Multiple Cluster Indicator Survey (MICS 4)
- Global School-Based Health Survey (GSBHS)
- The Child Sexual Assault Survey (CSA)
- Youth Risk Behaviour Survey (YRBS)
- National Longitudinal Study of Adolescent Health (Add Health)
- World Health Organization (WHO) Multi-country Study on Women's Health and Domestic Violence against Women
- Behavioural Risk Fact Surveillance System (BRFSS)
- Hopkins Symptoms Checklist

The core questionnaires were independently tested using cognitive testing methods by a team of expert scientists from the National Center for Health Statistics (NCHS) in the Philippines in 2012 and in Malawi in 2013 - they are included in as Appendices to this report.

The household questionnaire covers basic household demographics and questions to assess whether there are any vulnerable children in the household. The female and male respondent questionnaires include the following topics: demographics; parental relations; family, friends and community support; school experiences; physical violence and service utilization; emotional violence; sexual behaviour and practices; sexual violence; perpetration of sexual violence; use of and barriers to services; health outcomes associated with exposure to violence; HIV and sexually transmitted infection (STI) questions; and questions regarding how the respondent felt about participating in the survey. The background characteristics of the study respondents and the head of household survey include questions that assess age, socio-economic status, marital status, work status, education and living situation. The sexual behaviour and HIV/AIDS component utilizes questions from the DHS and the WHO Multi-Country Study.

The sexual violence module includes questions on the types of sexual violence experienced and requests important information on the circumstances of these incidents, such as the settings where sexual violence occurred and the relationship between the victim and perpetrator. There are questions about the first and most recent incidents of sexual violence, including whether sexual violence occurred within the past 12 months. In addition, we developed several questions assessing potential risk and protective factors, including attitudes around sexual violence. Some of these questions were based on DHS, YRBS, and Add Health. We also ask questions regarding the negative health and social consequences as well as health-seeking behaviour related to these events.

MOH/RBC, MIGEPROF/NCC, CDC, NISR, RNP, MINEDUC and UNICEF participated (through the technical committee) in the process of adapting the questionnaires to the local context of Rwanda. They reviewed the Rwanda questionnaires to ensure definitions and question context have remained comprehensive and intact. The questionnaires were translated into Kinyarwanda and back-translated into English to ensure accuracy, with these efforts led by MOH/RBC. The translation was further tested during training and the pilot phase.

## 2.3 FIELDWORK PREPARATION



### 2.3.1 Interviewer and supervisor selection, responsibilities and training

Interviewers for this survey were carefully chosen to facilitate trust and understanding with respondents. The Steering Committee advised that priority be given to candidates with a background in healthcare, psychology, social science and counselling, and to those with experience in collecting confidential data. Interviewers were Rwandan males and females who are culturally sensitive and fluent in the local language (Kinyarwanda). Priority was given to candidates with past experience of survey research and/or research on sensitive topics. The interviewers and supervisors were selected by MOH/RBC with guidance from the steering committee. Additional selection criteria included education level and past job experience and performance. Fifteen teams were selected for male EAs and 10 teams for female EAs. Each survey team was composed of about four interviewers and one team leader. As an additional precaution to ensure confidentiality and trust, team members were not assigned to administer the survey in communities where they were likely to know or be known by any of the respondents.

We also identified male and female team leaders who were responsible for direct supervision of survey implementation. Male team leaders supervised male interviewers; female team leaders supervised female interviewers. Team leaders did not directly participate in the interview process, but were responsible for enumerating the EAs several days prior to data collection, developing the enumeration list and randomly selecting the households. During data collection, team leaders ensured that interviewers followed appropriate consent procedures and provided a list of support services and/or direct referrals to all respondents who needed them (Adverse Effects and Referral Process). Team leaders took part in all aspects of the training, with focused sessions on enumeration methods, sampling procedures, data management using electronic data collection protocols, and assignment of sampling areas. They conducted the pilot of the survey in EAs not included in the study sample.

The steering committee adapted the study materials and designed the fieldwork during two 10-day training sessions. The first was for the team leaders and the second was for the interviewers – team leaders were asked to participate in this training as well. The aim was to ensure standardized, accurate, sensitive and safe interviewing techniques. The training sessions covered the following topics:

- Background: the purpose of the study, and data collection and design
- A participatory review of the questionnaire and practising interview techniques, including role-play
- Enumeration procedures
- Sampling procedures and assignment of sampling areas
- Procedures for and importance of maintaining confidentiality
- Sensitivity toward study subjects
- The importance of securing and maintaining privacy during the interview
- Referral services and procedures
- Identification of and response to adverse effects
- Discussions of interviewers' attitudes and beliefs towards violence, particularly sexual violence
- Interviewer safety, and referral services and procedures for the interviewers
- Quality assurance and quality control of data
- Informed consent and assent, and other human-subjects research protection
- Electronic data collection procedures
- Rwandan legal and policy framework, as it pertains to children's rights.

As mentioned above, the training emphasized the need to ensure privacy during the interview and to ensure that participation itself is kept private. Procedures to ensure privacy of participation included training interviewers to only conduct the interview if privacy can be assured, and to offer to take the respondent to a private area if necessary. Interviewers were also trained to handle interruptions (e.g. by switching to a non-sensitive survey which is saved on the device used for data collection). Respondents are briefed on this technique before the interview begins so he/she can follow cues given by the interviewer – if necessary the interview can be rescheduled. If this is the case, the interviewer and respondent determine a time and place to meet within a day or two of the initial interview such that a follow-up interview is conducted while the survey team is still in the community. If the interview cannot be rescheduled during this time, the interview is considered incomplete.

The training strongly emphasized that interviews must be conducted with sensitivity and empathy. Training also equipped interviewers with the skills to decide when they should provide referrals to respondents who report having been victims of violence. There is evidence that most adult women find that talking about their experiences of violence is beneficial; they appreciate the opportunity to be asked questions about it. In addition, there is some evidence that adolescents and young adults are willing to talk about their experiences of abuse under a supportive structure. Nevertheless, respondents may recall frightening, humiliating or painful experiences, which may cause a strong emotional response. Interviewers, therefore, were trained to be aware of the effects that questions may have and how best to respond, based on the participant's level of distress. They were instructed not to provide any counselling during the interview, but to offer support and counselling to all participants. Interviewers were to offer a list of the local services and sources of support to all study participants, and to provide direct referral services to respondents who become upset or who indicated that they did not feel safe in their current living situation or who have experienced abuse of any form in the past 12 months. All members of the team (interviewers, team leaders and survey coordinators) received extensive training on the referral process to ensure that it is both clear and well-coordinated.

## **2.3.2 Pilot survey**

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After the training described above, team leaders conducted a pilot survey. This consisted of two days in the field interviewing respondents and testing the study protocols, followed by a day of discussion and feedback from the field staff.

For the pilot test, four communities (two in rural areas and two in urban areas) were chosen that had not been selected as primary sampling units in the main survey. As explained above, the survey takes a split-sample approach that separates the male and female surveys. This protects the confidentiality of respondents and removes the possibility that a male perpetrator of a sexual assault and the female victim of his sexual assault (and vice versa) in the same community would both be interviewed. Thus, one community in each of the selected rural and urban settings was designated for interviewing males and another community in these two types of settings designated for interviewing females. The split-sample approach does not, however, address the possibility that same-sex perpetrators and victims may both be selected for participation and therefore become aware of each other. While this is a limitation, we believe that it is less problematic than opposite sex perpetrators and victims learning of survey participation, given the power differential between males and females and gender norms that exists in most cultures.

Given that the primary purpose of the pilot was to test the questionnaire, it was not necessary to follow the procedures for second-stage sampling. Instead of a systematic sample of households with a random start, we used convenience sampling to select households within each pilot site. Interviewers were instructed to skip a certain number of households, depending on the density of households in the area, in order to help ensure confidentiality and anonymity of study participants. In each household, we selected one female aged 13-24 from the communities designated for females and one male aged 13-24 from the communities designated for males. Instead of randomly selecting respondents in each household as described in Section 2.2 (Study design), respondents were selected to ensure adequate representation in the pilot test based on gender and the various age groups (i.e. 13-15 years, 16-17 years and 18-24 years) and from urban and rural settings. We aimed to have approximately five completed interviews in each of the age categories listed above by sex and setting. This helped test the questionnaire among respondents of varied demographic backgrounds to ensure the appropriateness of the questionnaire and study protocols. Just as in the systematic sampling process detailed in Section 2.2, questionnaire data were not linked to households or individual names and all data are non-identifiable.

A three-stage graduated consent procedure was followed in order to remain consistent with the ethics and safety procedures described in Section 2.5.3 below (Informed consent) (Appendix 1). This also gave us the opportunity to ensure that the consent process and the consents themselves had been appropriately adapted for the Rwandan context. As part of the informed consent process, the person responsible for providing the care of dependent respondents (i.e. 13-17 year olds) and non-dependent respondents (i.e. 18-24 year olds, emancipated minors) were told that this study was an opportunity ‘to learn about the social welfare of children and young people in Rwanda, which includes health, educational, and life experiences’ (Appendices 3-4). Respondents in the pilot were then given some basic information on the study (Appendices 5-6) and asked whether they wished to learn more about the study. After privacy had been established for those who agreed to learn more about the study, full consent was obtained from the selected respondent (Appendices 7-8).

The pilot informed the survey procedures, including community entry, how to approach households, gaining consent, as well as the referral process. Through administering the questionnaire in the pilot, we gained a better idea of willingness to participate, the average length of interviews, translation of the questionnaire and the cultural appropriateness of the questions. The IRB amendment was submitted reflecting changes to the survey protocol and questionnaire as a result of the pilot.

## **2.3.3 Finalisation of survey tools**

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The following changes were made during training and after the pilot survey:

- The questionnaires were revised in response to feedback from the pilot to improve the accuracy of the data obtained, and minor translations in Kinyarwanda were made in the core survey questionnaire.
- All prompts and messages in the netbook CSPprogram were translated into Kinyarwanda.<sup>25</sup>
- The format and content of the list of services were revised to be more child-friendly and applicable to Rwanda.
- The response plan list of services was adapted to the Rwandan context and translated into Kinyarwanda language.
- The consent forms were adjusted to guarantee privacy to respondents.

<sup>25</sup>The VACYS used electronic netbooks with CSPro software for data collection.

## 2.4 FIELDWORK



Fieldwork was implemented from 19 November until 23 December 2015.

A one-day pre-departure briefing was held on 17 November to debrief from the practice day and to give all instructions, logistics briefings and forms for fieldwork beginning two days later.

### 2.4.1 Data collection

A total of 1,178 male interviews and 1,032 female interviews were completed, exceeding the target of 1,008 males and 1,008 females. Interviews were completed in 139 male enumeration areas (EAs) and 111 female EAs across all 30 districts of Rwanda.

Field staff worked an additional two days, i.e. for a total of 30 days. This enabled data collection to be completed on time by 23 December 2015. No field staff left the survey or were absent during fieldwork.

### 2.4.2. Inclusion criteria, timing and selection of households and respondents

Inclusion criteria for this study were males and females living in selected households in Rwanda who were 13 to 24 years of age and spoke Kinyarwanda or English. The survey was administered in Kinyarwanda or English, which is consistent with previous national surveys. Survey materials, including the questionnaire and consents, had already been translated into Kinyarwanda. Males and females older than 24 were excluded from the study because of a desire to focus on understanding violence against children and youth, and the fact that recall bias becomes a greater issue the further one gets away from the target age range.<sup>26,27</sup> Based on CDC's prior survey work in Africa, the Caribbean and Asia, we feel confident that recall bias has been minimized by surveying males and females up to 24 years old. Males and females with mental disabilities, who do not have the capacity to understand the questions being asked and those with physical disabilities (e.g. hearing and speech impairment) that prevent the interviewer from oral administration of the surveys, were excluded from the study. During the eligibility phase, disabilities were determined.

We acknowledge that people living with disabilities may be at even greater risk of violence than the general population and that this is an important epidemiologic question. However, since this survey is not designed to produce statistically stable estimates of violence in this sub-population, this issue was addressed in a separate study and done in a separate qualitative protocol.

During survey implementation, upon entering a randomly selected household, interviewers identified the head of household (or the person representing the head of household) in order to introduce the study and to determine eligibility of household members to participate. The household head was invited to participate in a short (15-minute) survey to assess the socio-economic conditions of the household. Where there was more than one eligible participant in a household, interviewers selected one respondent using a random selection program installed on the netbooks. If there was no eligible participant, the head of household was still asked to participate in the household questionnaire. The interviewer made every effort to schedule return visits to the household at times when the selected respondent would be available. However, if the selected respondent was not available after three attempts or refused to participate, the household was skipped regardless of whether another eligible respondent existed in the household; neither the household nor the eligible respondents were replaced.

### 2.4.3 Data collection procedures

#### Community entry

This began with the teams (male or female) arriving in a district and going to the District Office to meet with the Vice Mayor and District Statistician to provide the official letter about the survey from the Ministry of Health (with copies for sector and cell). The survey was described in general terms as 'Life experiences of young people in Rwanda (LEYP)' with no particular mention of violence. Natural villages were the primary sampling units for the survey, and when the team arrived in a new village, they first met with the Village Head to show him or her a copy of the official Ministry of Health letter. The Head then either assigned a guide or served as the guide himself/herself and introduced the team to the household. If the Village Head had questions or issues that could not be addressed by the team leader, the Principal Investigator was contacted for assistance. If necessary, the team had to leave the village and return later.

<sup>26</sup>?

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## **Segmentation**

Extremely small EAs (<50 households) were excluded to protect respondents' confidentiality, as were areas that did not have males or females in the 13-24 age group, and those that contained only institutions (such as orphanages or prisons) rather than households. Large enumeration areas (>250 households) were segmented according to the size. Then, among segments of a selected EA, one was chosen randomly using a computer program in the electronic data-collection package.

## **Privacy during the interviews**

Various precautions were used to ensure privacy during the interviews. The interviewers were instructed to conduct the interview in a safe and private location such as outside, in a public space without risk of interruption (e.g. a community area, school, mosque or church) or in an appropriate place in the home or yard. Before beginning survey work in a new community, the team leader was instructed to seek guidance from the community leader to identify community areas where interviews could be held. Interviewers were instructed to ensure that respondents, parents and household members were comfortable with the location of the interview. If privacy could not be ensured, the interviewer was instructed to reschedule for another time while the survey team was still in the community. If the interview could not be rescheduled while the survey team was in the selected community, the interview was considered incomplete. If the respondent was not available after three attempts to contact her/him over the course of two days, the household was omitted and not replaced. The initial visit-record form of the survey tool had a section that allowed the survey team to track incomplete interviews as well as interviews that needed to be rescheduled.

The VACYS used electronic netbooks with CSPro software for data collection. The VACYS respondent questionnaire consisted of over 280 potential questions and included numerous skip patterns to route the interviewer to the logical sequence of questions based on respondent response. Given the complexity of the skip patterns and logic sequencing in the questionnaire, electronic data collection eliminated routing error and mistakes in data entry.

### **2.4.4. Field supervision**

During fieldwork, the VACYS technical committee undertook 11 monitoring visits to ensure teams were progressing and adhering to the protocol. During field supervision, logistical challenges and technical issues with netbooks were immediately addressed.

### **2.4.5. Field data quality control and management**

A number of quality control measures were used to ensure accuracy during data collection. Interviewers performed an initial check for completeness while they were still at the respondent's house. At the end of each day, team leaders then reviewed each file for completeness and accuracy. Fieldwork supervisors also randomly visited EAs to check data quality and adherence to protocol.

Team leaders performed a backup of their team's data every day and sent an aggregated data file to the data manager through a secure server. The data manager then conducted a preliminary check, and the data supervisor contacted the team leader immediately if any issues arose.

The data supervisor provided regular progress updates to the principal investigator and technical committee during implementation.

## **2.5 ETHICAL CONSIDERATIONS**



### **2.5.1 Ethical review**

WHO recommendations<sup>28</sup> on ethics and safety in studies of violence against women were adhered to in the VACYS. The CDC's Institutional Review Board, and the Rwanda National Ethics Committee (RNEC)/Ministry of Health, which protect the rights and welfare of human research subjects, independently reviewed and approved the survey.

<sup>28</sup>WHO 2001.

## **2.5.2 Referrals**

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As respondents were being asked questions that could remind them of frightening or painful experiences, and as some respondents might have been experiencing violence at the time and would want immediate assistance and /or counseling, the survey team developed multiple ways to link respondents to support.

During survey implementation, all respondents were given a list of the free programmes, services and amenities (including services for violence) available in Rwanda. Free direct referrals were offered to those who: 1) became upset during the interview, 2) felt unsafe in his or her current living situation, including in his or her home or community, 3) had experienced physical, emotional or sexual abuse in the past 12 months, 4) were under the age of 18 and had exchanged sex for money, goods or favours in the last 12 months, 5) reported being in immediate danger, or 6) requested help for violence, regardless of what was disclosed in the interview. If the respondent met certain criteria there was an immediate referral to the team of female and male officers from the Rwanda National Commission of Children (NCC) and contact information was recorded separately from survey responses.

At least 40 social workers were on call for referral during the entire survey period. They were all professional social workers the Child Protection Department in the NCC, and the process and referral mechanism was overseen by the NCC.

If a respondent met the response plan criteria, a referral to services was offered. The respondent could accept or decline the referral. If the respondent indicated that he or she would like a direct referral, the interviewers asked permission to obtain his or her contact information, including name and a safe place or way a social worker could find him or her. Wherever possible, the respondent was given the choice to have the interviewer call the social worker at the end of the interview so that the respondent could make arrangements for a meeting with social worker directly.

For this survey, an acute case was defined as any respondent who self-identified as being in immediate danger. If a respondent indicated to the interviewer that she or he was in immediate danger then the interviewer activated the response plan for acute cases. The interviewer immediately alerted her or his team leader who immediately called the pre-identified contact. As a basis of action, the focal point at the NCC made every effort to ensure that the respondent was offered immediate help in removal from the dangerous situation and given the appropriate medical, psychosocial, and legal service and programme referrals.

While the survey did not specifically ask respondents their HIV status, HIV services were included in the broader list of services. Additionally, if the respondent divulged HIV-positive status or requested services, the interviewer referred the respondent to the nearest government health facility.

## **2.5.3 Informed consent**

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For all selected respondents under 18 years of age, it was necessary to obtain the permission of the parent or primary caregiver to speak with the respondent. When seeking permission, the survey was described as an opportunity to learn more about 'young people's health, educational and life experiences.' WHO ethical and safety recommendations were followed regarding how to obtain informed consent for participation in a survey that contains questions on domestic violence in such a way that safety issues are taken into consideration for both the respondent and the interviewer.<sup>29</sup> According to the WHO guidelines, it is important that the survey is not introduced to the household and wider community as a survey on violence. However, since the WHO ethical and safety guidelines refer to violence research involving adults, it was adapted to inform parents and primary caregivers as fully as possible about the content of the survey without risking possible retaliation against children for their participation. The study description provided to parents/primary caregivers therefore mentioned 'community violence' as part of a list of broad topics, such as access to health services and education, but no reference was made to violence that might be occurring in the home.

In female EAs, female teams (including interviewers that spoke English and Kinyarwanda, as appropriate) conducted the household and respondent interviews. In the same way, male teams with the same language capabilities conducted interviews in male EAs. The first step in the informed consent process was to seek consent from the head of household or adult who was acting as head of household for the household questionnaire. After the adult had agreed to participate in the household questionnaire, the interviewer conducted the head of household interview.

Once an eligible female was selected in the female EA, a female interviewer with the appropriate language skills read the contents of an initial information form that introduced the survey as an opportunity to learn more about young people's health, educational and life experiences in Rwanda; a similar procedure was followed for males. All consents were read in

<sup>29</sup>WHO 2001.

the appropriate language for the all Districts. The trained interviewer obtained informed assent in the households where the selected respondent was a minor (13-17 years old). Once the interviewer and respondent ensured privacy, the trained interviewer read the contents of a verbal assent form. This informed the respondents that information they provided was anonymous, and that their decision to participate was voluntary. Respondents were also told that if they participated, information about their experiences with physical, emotional and sexual violence would be asked. Respondents were informed that the information they shared was confidential and would not be shared with anyone. Informed verbal assent was obtained from each respondent at the end of the assent form.

In households where the selected respondent was an adult (18-24 years old), an emancipated minor, or lived in a child-headed household, a similar consent process was used except that the parental/caregiver permission was not necessary. These respondents were still administered the initial information form described above. Once the initial information form was read, verbal consent to provide more information about the study was obtained from each participant. Once the interviewer and respondent had ensured privacy, the trained interviewer read the contents of a verbal consent form.

## 2.6 DATA ANALYSIS AND RESPONSE RATES



The statistical package SAS (version 9.3) was used for data management and analysis to produce weighted point estimates and standard error calculations. All results were calculated using sampling weights to yield nationally representative estimates (see Appendix A).

### 2.6.1. Data cleaning

Following data collection, the data supervisor extracted all data from the netbooks, checked and cleaned the data set for missing or incomplete data and outliers, and translated field notes and open-ended questions from Kinyarwanda to English. STATA 13 was used for all data cleaning processes.

### 2.6.2. Data weighting

Weighting is a method used to obtain representative parameter estimates from survey data.

Data weighting and cleaning was performed by the VACYS statistician in collaboration with NISR and CDC while training PhD students on the procedures.

All statistical analyses of VACYS data incorporate sampling weights to correct for unequal probability of selection and adjust for non-response, to produce results that are representative of the national population of children and young adults aged 13-24 years. We used standard weighting procedures similar to methods used in Demographic and Health Surveys and other national household surveys.

The VACYS data set was weighted to obtain parameters that represent the total population of Rwanda. A two-step weighting procedure was applied, incorporating (Step 1) computation of base weight for each sample respondent; and (Step 2) adjustment of the base weights for non-response.

The base weight of a respondent in any probability sample is simply one divided by the overall selection probability for the respondent, given the steps completed in selecting the respondent (Step 1). Calculations in this stage include probabilities of selection of enumeration areas, selection of households, gender specification, and selection of eligible individuals. EAs for the VACYS were selected probability proportionate to size. The design weight incorporated the probabilities of selection of the 111 female and 139 male EAs, to account for unequal probabilities of selection. Design weights were adjusted for EA non-coverage, household non-response and individual non-response.

In Step 2, base weights were adjusted to compensate for the losses in the sample outcome due to non-response (Appendix A includes Table A2 showing household and individual response rates). In this step, non-response adjustments were made for non-responding enumeration areas, non-responding households and non-responding respondents. The household-level non-response adjustment was performed by using weighted data by region and enumeration area. For the person-level non-response adjustment, weighting cells were formed taking into account province and sex. Following the weighting process, weighted point estimates and 95 per cent confidence intervals were produced using SAS 9.3.

## **2.6.3. Data analysis**

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Data analysis was undertaken in Rwanda and led by a national statistician, with technical assistance from the CDC Atlanta team.

The analysis stages consisted of a preliminary analysis of the 32 core indicators, and a full, final analysis. While the national statistician was leading the analysis, he worked in close collaboration with the VACYS core team including PhD students.

## **2.6.4 Response rates**

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A total of 6,249 households were visited during the study. The households visited for each of the two groups were: 2,775 for females and 3,474 for males. The household response rates were 98 per cent for females and 99 per cent for males. Within all visited households, a household census was conducted to determine whether an eligible respondent resided in the household. As a result, a total of 2,212 individuals aged 13-24 participated in the VACYS with 1,032 females and 1,180 males completing the individual questionnaire, yielding an individual response rate of 98 per cent for females and 99 per cent for males.

The combined household and individual response rates provide an overall response rate of 97 per cent for females and 98 per cent for males.

Appendix A includes a table showing household and individual response rates. This was reflected in Table A2 and accounted for in the response rates.

## **2.7 TECHNICAL NOTES TO READER**

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### **2.7.1 Weighted percentages and 95 per cent confidence intervals**

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Results presented in this report are based on a sample rather than a census; there is a degree of uncertainty and error associated with the estimates. Sampling weights were created and applied to each individual record to adjust for the probability of selection and differential non-response. Data analysis was conducted using SAS 9.3, a statistical package that contains complex sample procedures that incorporate the weights and cluster stage design. By using the appropriate software that takes into account the complex sample design, accurate standard errors were produced for each estimate.

### **2.7.2 Differences between estimates**

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The method used in this report to statistically ‘test’ for differences between groups is to compare 95 per cent confidence intervals (CI) for point estimates to determine whether they overlap or not.

If the CIs do not overlap, then the estimates are considered ‘statistically different’. CIs were calculated for all point estimates.

### **2.7.3 Definition of unstable estimates**

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For the purposes of the VACYS, estimates based on relative standard error (the ratio of the percent over corresponding standard error) greater than 30 per cent are considered unstable. An asterisk (\*) is displayed in tables in place of all unstable estimates.

In addition to number suppression, some tables have been omitted from the report due to insufficient data for statistical analysis.

## **2.7.4 Data presentation**

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Throughout the report, data were presented complying with specific rules to facilitate a friendly reading environment. In the report, data are presented using graphs following the age groups starting with respondents aged 18-24, then 13-17 and lastly 19-24. All data tables are shown in Appendix B where frequencies (unweighted counts: numerator) and corresponding percentages with 95 per cent confidence intervals are presented. Insufficient data with unstable estimates were suppressed, which resulted in some tables (with unstable estimates in all cells) being omitted. For tables and graphs with unstable estimates on some but not all options, an asterisk was put in place and specified in the footnotes.

## **2.7.5 Treatment of missing data**

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When calculating the national estimates for most measures, missing values were excluded from the analysis.

# SECTION 3

## RESPONDANT CHARACTERISTICS

This section covers selected demographic and socio-economic characteristics of survey respondents, including age group and sex, education status, orphanhood, marital status, age at first marriage, whether they had ever had sex and their working status.

### Highlights

- Two thousand two hundred and fourteen individuals aged 13-24 (1,032 females and 1,182 males) participated in the VACYS 2015.
- Although over 97% of children and youth (both male and female) reported having ever attended school, only about a quarter of them had attained secondary school.
- Forty-two percent of the females and 39% of the males reported that they had lost one or both of their parents before they were 18 years old.
- Among those aged 18-24, females were more than twice as likely as males to have been married or to be living together as if married before the age of 18 (41% versus 18%, respectively).
- Among those aged 18-24 who reported sexual activity prior to being 18, females were significantly less likely than males to have ever had sex prior to age 18 (29% versus 43%, respectively).
- Females reported an older average age of first having sex than males in both age groups (13-17: 13.3 versus 10.3 years old; and 18-24: 18.6 versus 17.4 years old for females and males, respectively).

### 3.1 HOUSEHOLD ECONOMIC RESOURCES

In order to understand the socio-economic resources of the households in which respondents lived, the head of the household (who was presumed to have knowledge of these resources) was asked a set of questions. Results show that around a quarter of households in females and males survey had electricity (23 percent and 26 percent, respectively). Close to 7 in 10 households for both females and males survey had a mobile phone (69 percent and 73 percent, respectively). Around 10 percent of households had a television. More than a half of households in females and males survey owned a radio (51 percent and 53 percent, respectively). Too few households reported owning a refrigerator for the figures to be reported. Only 3 percent and 4 percent of households in female and male survey respectively owned computer.

Metal/ iron sheets were the predominant main roofing material (64 percent of households in females and 67 percent households in males), followed by ceramic tiles (34 percent of households in females and 32 percent of households in males). Around 8 in 10 households reported owning land that could be used for agriculture (79 percent of households in females and 83 percent of households in males) and more than a half households reported owning livestock or farm animals (52 percent of households in females and 60 percent of households in males).

Biomass fuel (of plant origin, such as firewood) was the most reported main cooking fuel (100 per cent of female and 99 per cent of male respondents) and more than 7 in 10 households reported being covered by some of health insurance (76 per cent of female and 76 per cent of male respondents). (Appendix B, Table 3.1)

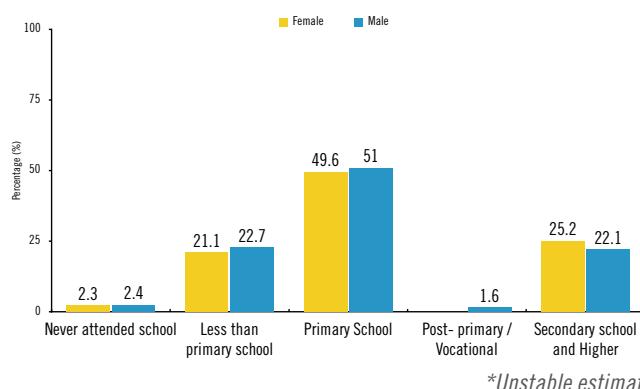
## 3.2 GENDER AND AGE DISTRIBUTION

The VACYS had 2,214 participants aged 13-24 (1,032 females and 1,182 males). Among females, 46 per cent were aged 13-17 (children) and 54 per cent were aged 18-24 (youth). Of the males, 52 per cent were aged 13-17 and 48 per cent were aged 18-24 (Appendix B, Table 3.2).

## 3.3 EDUCATIONAL STATUS

Over 97 per cent of the participants aged 13-24 (both male and female) had attended school. The percentages of females and males at each education level were comparable: just under a quarter of the participants reported their education level as less than primary school (21 per cent of females and 23 per cent of males); about half of them had attained primary school (50 per cent of females and 51 per cent of males); but only 25 per cent of the females and 22 per cent of the males who participated in this survey had attained secondary school and higher (Figure 3.1 and Appendix B, Table 3.2).

Rwanda's academic year runs from January until November. The primary school cycle lasts six years (for children aged 7-12), followed by three years of lower secondary (for the 13-15 age group), and three final years of upper secondary school (for 16-18-year-olds). With the introduction of free education by the government, Rwanda has achieved one of the highest net primary-school enrolment rates in Africa; however, half of the respondents in this survey have not completed primary education, and only about a quarter have reached and/or completed secondary school.



\*Unstable estimates  
Figure 3.1 Highest level of education attained by males and females aged 13-24 years

## 3.4 Age of household head

The average age of female heads-of-household was 43.7 years. The most often reported age-category was 31-50 years old (22 per cent), followed by 51 and over (18 per cent), and 19-30 years (12 per cent).

Figures for the ages of male household heads followed a similar pattern. The average reported age was 45.4 years. The most often reported age-category was 31-50 years old (23 per cent), followed by 51 and over (17 per cent) and 19-30 years (8 per cent).

For both males and females, the under-19 age-category had too few respondents to be reported (Appendix B, Table 3.2).

## 3.5 Orphan status

Among children and youth aged 13-24, the survey found that 30.5 of the females and 29.8 of the males had lost one or both parents, and 5.7 percent of the females and 4.9 percent of the males had lost both parents. As regards to orphan hood before 18 years, 42 percent of the females and 39 percent of the males reported that they had lost one or both parents before they were 18 years old (Figure 3.2; Appendix B, Table 3.2). The percentages of female and male double orphans (those who had lost both parents) were similar (8 percent and 7 percent, respectively). Thirty-four percent of females and 32 percent of males aged 13-24 had lost one parent before they were 18 years old. Although this survey did not determine which parent was likely to have died, we could make a connection with the 31 percent of female-headed household in Rwanda reported by DHS 2014-2015, and infer that mostly fathers were the absentee parent.

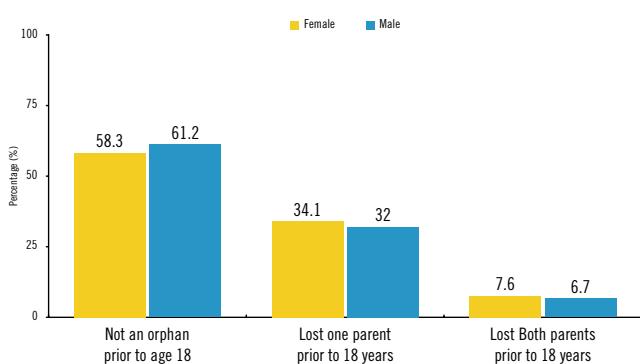
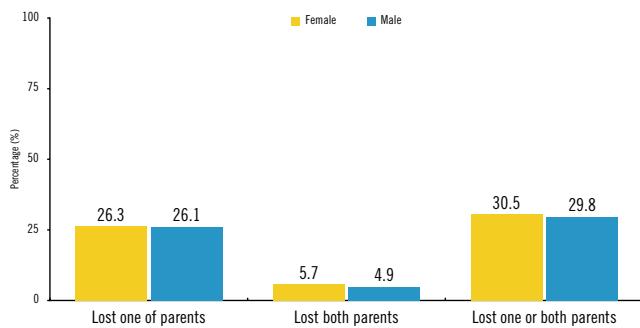


Figure 3.2 Orphan status prior to age 18 among females and males aged 13-24

## 3.6 Marital status

Six per cent of females aged 18-24 had ever been married or lived with someone as if married. (Figure 3.3 and Appendix B, Table 3.2) The data on males were too low and unstable to be reported here.



\*Unstable estimates

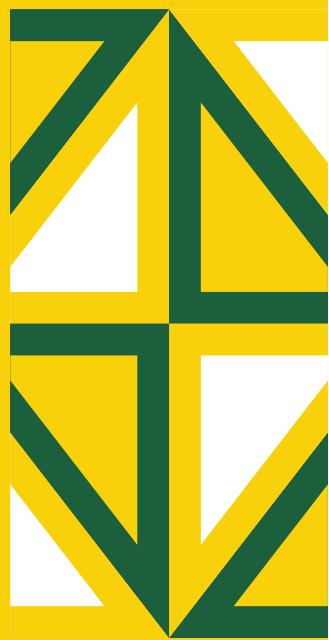
Figure 3.3 Percentage of females and males aged 18-24 years who were married or lived with someone as if married prior to the age of 18

## 3.7 Sexual activity



When asked about having ever had sex, 7 per cent of females and 12 per cent of males aged 13-17 reported having had sex. Among those aged 18-24 who reported ever having had sex, the difference between females and males is not statistically significant (56 per cent (95% CI: 47-64) of females and 52 per cent (95% CI: 48-57) of males). Among the youth aged 18-24 who reported sexual activity before the age of 18, females were significantly less likely than males to have had sex before the age of 18 (29 per cent; 95% CI: 24-33, vs 43 per cent; 95% CI: 35-50, respectively) (Appendix B, Table 3.2).

Among females aged 13-17 who had had sex, the average age of first sex (13.3 years) was slightly higher than among males (10.3 years). Similarly, among 18-24 year olds who had had sex, females reported an older average age of first sex (18.6 years) than males (17.4 years) (Appendix B, Table 3.3).



# SECTION 4

## SEXUAL VIOLENCE IN CHILDHOOD – PREVALENCE, PERPETRATORS AND SERVICE-SEEKING BEHAVIOUR

This section describes the national prevalence and patterns of sexual violence against children in Rwanda, including the contexts in which sexual violence occurs, perpetrators, and children's knowledge of services and help-seeking behaviour.

### Highlights - sexual violence experienced by children

- Twenty-four percent of females and 10 percent of males aged 18-24 had experienced sexual abuse before the age of 18.
- Twelve percent of females and 5 percent of males aged 13-17 had experienced sexual abuse in the 12 months prior the survey.
- Of those reporting sexual abuse, 76 percent of females and 69 percent of males had experienced two or more incidents of sexual abuse before the age of 18.
- Four percent of females had experienced physically forced sexual abuse before the age of 18.
- Thirty-four percent of both females and males aged 13-17 had first experienced sexual abuse at the age 13 or younger.
- Among females and males aged 18-24 years who had experienced sexual abuse before the age of 18, neighbours come at the first position as perpetrators of the first incident of sexual abuse.
- Thirty-five percent of females and 46 percent of males aged 18-24 who had experienced sexual abuse in childhood knew where to seek support services.
- Of females who reported first having sex in the last 12 months, 46 percent indicated that this sex was unwanted.
- Eighty-three percent of females aged 18-24 who had experienced sexual violence before the age of 18 had abandoned school as a consequence.
- Among respondents who experienced sexual abuse and did not seek services, fifty-three percent of females and 68 percent of males stated that they did not do so because they did not think it was a problem.

### Highlights - sexual violence experienced by youth aged 19-24

- Nineteen percent of females and 11 percent of males aged 19-24 had experienced sexual abuse in the past 12 months.
- Of those reporting sexual abuse, 84 percent of females and 82 percent of males aged 19-24 who had experienced sexual abuse, had experienced at least two incidents in the past 12 months.
- Fifteen percent of females aged 19-24 who had first sex in the past 12 months reported the sex was against their will.
- Twenty-seven percent of females and 31 percent of males aged 19-24 reported that more than one perpetrator was present during the first event of sexual abuse experienced in the last 12 months, perpetrators were perceived to be more than 10 years older than the victims for both females and males who experienced sexual abuse in the last 12 months.
- Among youth aged 19-24 who experienced sexual abuse, and did not seek services, 60 percent of females and 72 percent of males stated that they did not seek services for help after suffering sexual abuse because they did not think it was a problem.

# 4.1 Sexual abuse



Sexual abuse is a composite measure of four types of sexual violence measured in the VACYS:

- unwanted touching in a sexual way, such as unwanted touching, kissing, grabbing or fondling;
- unwanted attempted sex in which the perpetrator tried to physically force the respondent but did not succeed in completing sex;
- pressured sex in which the child was pressured in a non-physical way to have sex against his or her will and sex occurred;

and

- physically forced sex in which the child was physically forced to have sex against his or her will.
- The prevalence of sexual abuse, as well as the most common ages at which sexual abuse first occurred for males and females, the types of sexual abuse experienced by children, and demographic variables that may be associated with sexual abuse in childhood are summarized in this chapter.

## 4.1.1 Sexual abuse before the age of 18 among youth aged 18-24

Females (24 per cent) were significantly more likely than males (10 per cent) to experience sexual abuse during childhood. The most reported type of sexual abuse experienced by both females and males was unwanted attempted sex (17 per cent and 7 per cent, respectively). Females were significantly more likely than males to experience unwanted sexual touching (12 per cent versus 5 per cent). Over 4 per cent of females had experienced physically forced sex, while the numbers of males who experienced physically forced sex was too low to be reported. For pressured sex, there were too few cases (for both females and males) to produce reliable statistical estimates (Figure 4.1 and Appendix B, Table 4.1.1).

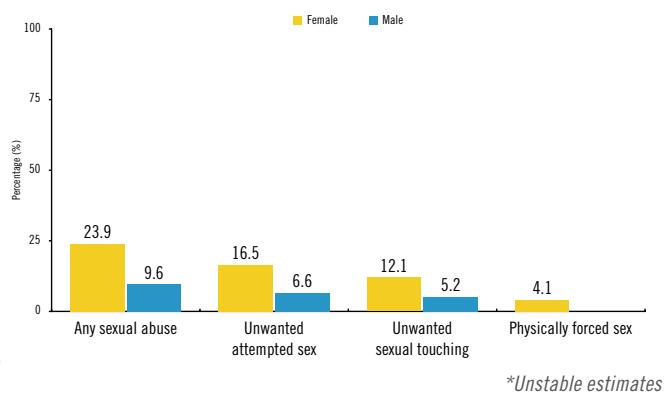


Figure 4.1 Percentage of males and females aged 18-24 years who reported experiencing types of sexual abuse prior to age 18

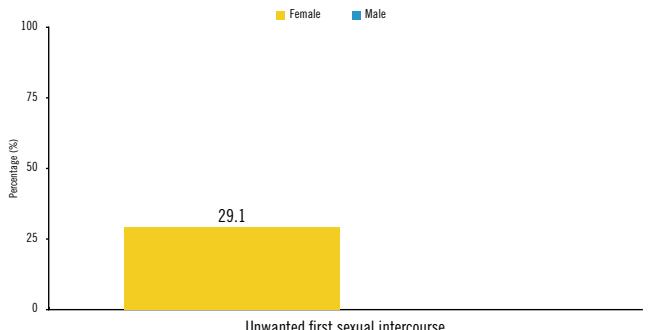
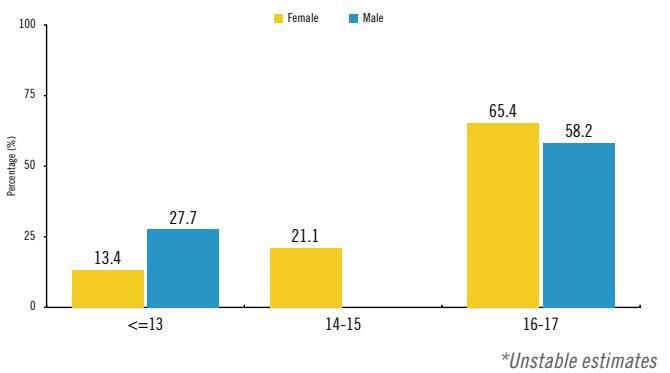


Figure 4.2 Percentage of females and males aged 18-24 years who reported that their first incident of sexual intercourse was unwanted, among those who experienced sexual abuse prior to age 18

Of those who experienced at least one incident of sexual abuse prior to age 18, 76 per cent of females and 69 per cent of males had experienced multiple incidents (i.e. they experienced more than one event of the same type of sexual abuse, experienced more than one type of sexual abuse, or both, Appendix B, Table 4.11.1). Of the females who experienced sexual abuse prior to age 18, 29 per cent indicated that their first experience of sexual intercourse was unwanted. The number of Rwandan males who indicated that their first sexual intercourse experience was unwanted was too low to be reported (Figure 4.2 and Appendix B, Table 4.2.1).

Females and males aged 18-24 who had experienced sexual abuse during childhood were significantly more likely to experience their first incident of sexual abuse at age 16-17 than at any other age (65 per cent of females and 58 per cent of males). More than one in five females (21 per cent) experienced their first incident of sexual abuse between the ages of 14 and 15, while too few males reported this incident in this age group. Thirteen per cent of females and 28 per cent of males had experienced their first incident of sexual abuse before the age of 13 (Figure 4.3 and Appendix B, Table 4.12.1).



\*Unstable estimates

Figure 4.3 Age group at which youth aged 18-24 years experienced her/his first incident of sexual abuse, among those who experienced sexual abuse prior to age 18

#### 4.1.2 Sexual abuse in the 12 months prior to the survey: children aged 13-17

Examining experiences of sexual abuse in the year before the survey among children aged 13-17 contributes to our understanding of current patterns and contexts of violence during childhood in Rwanda.

Females aged 13-17 had experienced significantly higher rates of sexual abuse in the past 12 months than males (12 per cent versus 5 per cent, respectively). Unwanted sexual touching and unwanted attempted sex (7 per cent and 3 per cent for females and males, respectively, for both types of abuse) contributed almost equally to the rates of sexual abuse. Physically forced and pressured sex for both females and males provided unstable estimates, which were not reported (Figure 4.4 and Appendix B, Table 4.1.2).

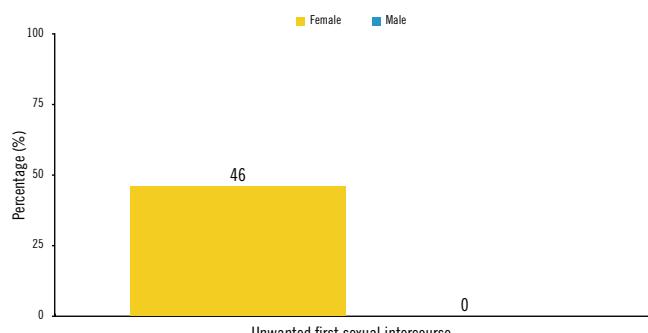


Figure 4.5 Percentage of females and males aged 13-17 years whose first sexual intercourse was unwanted, among those who had ever had sexual intercourse

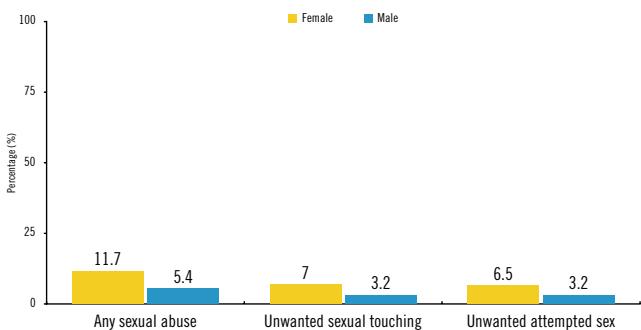


Figure 4.4 Percentage of males and females aged 13-17 years who experienced any sexual abuse and types of sexual abuse in the past 12 months

For females aged 13-17 who had experienced any type of sexual abuse in the past 12 months, the age at first sexual incident is evenly distributed across the three age categories: less than 13, 14-15, and 16-17 (Appendix B, Table 4.12.2). For males in the same age-group who had any type of sexual abuse in the past 12 months, the first sexual abuse occurs in the younger two age categories, and there is insufficient data for the 16-17 years age-group.

For those aged 13-17 who experienced sexual abuse in the past year, 46 per cent of females indicated that their first sexual intercourse was unwanted (Figure 4.5; Appendix B, Table 4.2.2). No males aged 13-17 reported that their first experience of sexual intercourse was unwanted.

### 4.1.3 Sexual abuse in the 12 months prior to the survey: youth aged 19-24

Nineteen per cent of young females and 11 per cent of young males had experienced some form of sexual abuse in the 12 months prior to the survey; this difference is statistically significant. For both females and males, unwanted sexual touching (16 per cent and 7 per cent, respectively) and unwanted attempted sex (11 per cent and 7 per cent, respectively) make up the highest proportion of sexual abuse cases (Figure 4.6 and Appendix B, Table 4.1.3).

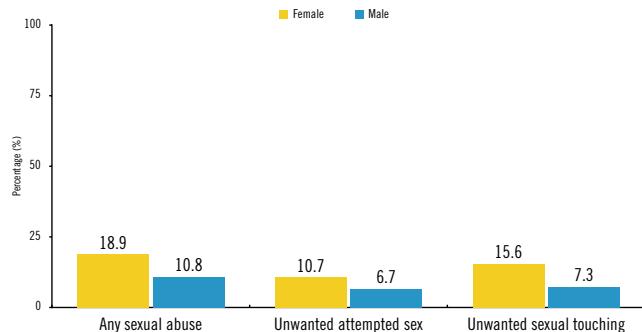


Figure 4.6 Percentage of males and females aged 19-24 years who reported experiencing any sexual abuse and types of sexual abuse in the 12 months prior to the survey

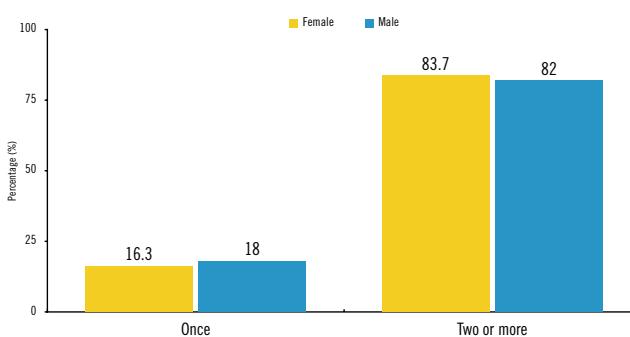


Figure 4.7 Number of incidents of sexual abuse in the past 12 months among Rwandan youth aged 19-24 years who experienced sexual abuse in the past 12 months

Rwandan youth aged 19-24 who had experienced sexual abuse in the past 12 months were more likely to have experienced multiple incidents of sexual abuse than a single incident; with 82 per cent of males and 84 per cent of females experiencing multiple incidents (Figure 4.7 and Appendix B, Table 4.11.3).

## 4.2 Sexual exploitation



The survey defined sexual exploitation as receiving money or goods (in the form of food, gifts or other favours) in exchange for sex, as well as non-contact sexual violence, defined as participating in a sex photo or video or showing sexual body parts in front of a webcam.

There was insufficient data on sexual exploitation among children and youth to report.

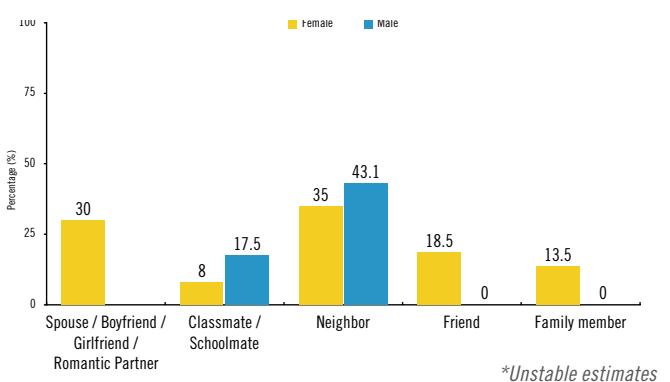
## 4.3 Perpetrators of sexual abuse



National prevalence estimates by perpetrator type are presented for the first reported incident of sexual abuse among those aged 18-24 who had experienced at least one type of sexual abuse (unwanted sexual touching, unwanted attempted sex, pressured sex or physically forced sex) before the age of 18. Similarly, national prevalence estimates by perpetrator type are presented for the most recent incident of sexual abuse among children aged 13-17 and youth aged 19-24 who had experienced sexual abuse in the 12 months prior to the survey. Age differences between victims and perpetrators, sex of perpetrator and prevalence of multiple perpetrators are highlighted.

#### 4.3.1 Perpetrators of sexual abuse prior to age 18: 18-24 year olds

Figure 4.8 presents data for types of sexual-abuse perpetrator against youth aged 18-24 who had experienced any sexual abuse before the age of 18. Perpetrators first reported by females were a neighbour (35 per cent), spouse/ boyfriend/ girlfriend or romantic partner (30 per cent), friend (19 per cent), family member (14 per cent) and classmate (8 per cent). For males, first perpetrators were neighbours (43 per cent) and classmates (18 per cent); other perpetrator categories are not reported, as there were too few cases to produce reliable estimates (Figure 4.8 and Appendix B, Table 4.4.1).



\*Unstable estimates

Figure 4.8 Percentage of females and males who experienced any sexual abuse prior to age 18 by perpetrator of first event of sexual abuse among 18-24 year olds

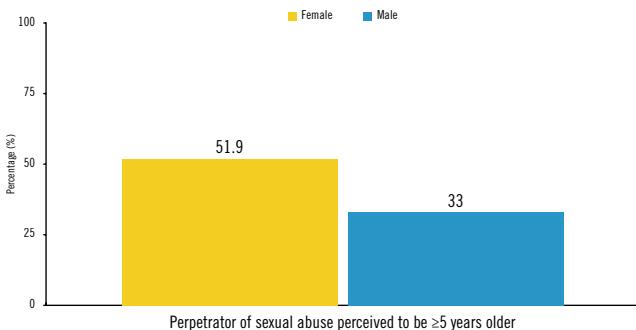


Figure 4.9 Percentage of perpetrators perceived to be at least five years older, by males and females aged 18-24 years who experienced a first incident of sexual abuse prior to age 18

#### 4.3.2 Perpetrators of sexual abuse in the 12 months prior to the survey: children aged 13-17

Both females (46 per cent) and males (57 per cent) most frequently reported neighbours as perpetrators of the most recent incident of sexual abuse, followed by romantic partners for females (21 per cent) (Appendix B, Table 4.4.2).

Females aged 13-17 who had experienced sexual abuse in the last 12 months indicated that 60 per cent of the perpetrators were at least five years older than them. For 28 per cent of males in the same age bracket, the perpetrators were at least five years older than their victims (Appendix B, Table 4.5.2). The sex of the perpetrator of the most recent incident of sexual abuse is similar to the lifetime prevalence rates described above. Males represented 99 per cent of perpetrators against females, while female perpetrators accounted for 86 per cent of the incidents of sexual abuse against male victims (Appendix B, Table 4.6.2).

#### 4.3.3 Perpetrators of sexual abuse in the 12 months prior to the survey: youth aged 19-24

Almost all (96 per cent) of the perpetrators of the most recent sexual abuse against females aged 19-24 were males. Females represented 73 per cent of the perpetrators of sexual abuse against male victims (Appendix B, Table 4.6.3).

For females, about half of the perpetrators of the first incident of sexual abuse were at least five years older than the victim. For males, about a third of the perpetrators were at least five years older (Figure 4.9 and Appendix B, Table 4.5.1). The sex of the perpetrator of the first incident of sexual abuse is largely the opposite sex from the victim: females mostly indicating male perpetrators (97 per cent), and males reporting female perpetrators (66 per cent) (Appendix B, Table 4.6.1).

## 4.4 Location where sexual abuse occurred



To better understand the context of sexual abuse, respondents were asked about the location of the first reported incident by sub-type of sexual abuse (unwanted sexual touching, unwanted attempted sex, pressured sex or physically forced sex). Some females and males experienced multiple sub-types of sexual abuse, which may have occurred at the same or different locations. Prevalence estimates of the location of incidents of all sub-types of sexual abuse are presented below for all three age groups: those aged 18-24 who had experienced sexual abuse before the age of 18; children aged 13-17 who had experienced sexual abuse in the 12 months prior to the survey; and youth aged 19-24 who had experienced sexual abuse in the 12 months prior to the survey.

### 4.4.1 Location where first incident of sexual abuse occurred: 18-24 year olds prior to age 18

Females aged 18-24 who had experienced sexual abuse before the age of 18 were more likely to report the road and street (36 per cent) as the location of first incident of sexual abuse than any other location; followed by in her own home (28 per cent), in the perpetrator's home (19 per cent), in someone else's home (11 per cent) and at school (10 per cent). For males, only two locations have sufficient data to report: in the perpetrator's home and in his own home (both 24 per cent, Figure 4.10 and Appendix B, Table 4.7.1).

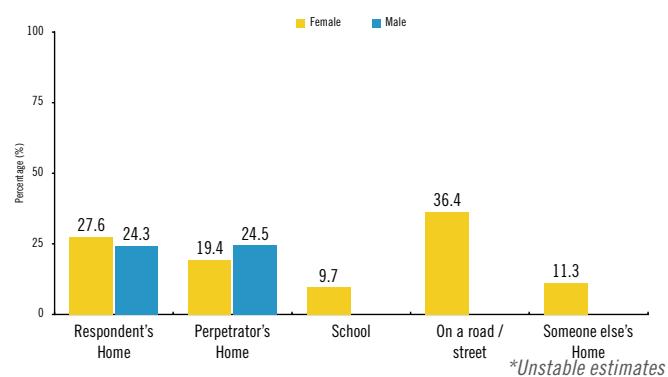


Figure 4.10 Location of first incident of sexual abuse among 18-24 year olds who experienced sexual abuse prior to age 18

### 4.4.2 Location where most recent incident of sexual abuse occurred in the 12 months prior to the survey: children aged 13-17

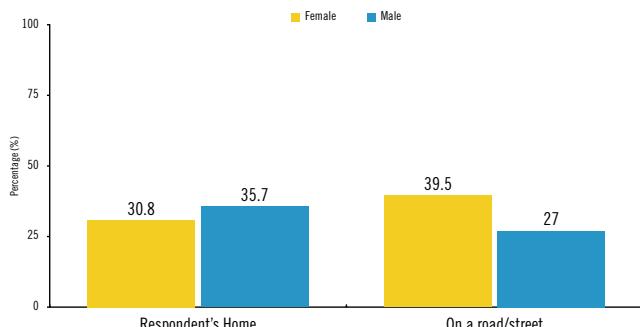


Figure 4.11 Location of most recent incident of sexual abuse among 13-17 year olds who experienced sexual abuse in the past 12 months

Among females aged 13-17, the most frequent location reported was on the road (40 per cent), followed by in the respondent's home (31 per cent). Among males in the same age bracket, the most commonly reported location was in the respondent's home (36 per cent), followed by on a road/street (21 per cent). There were no statistical differences across locations between females and males (Figure 4.11 and Appendix B, Table 4.7.2).

### 4.4.3 Location where most recent incident of sexual abuse occurred: youth aged 19-24 in the 12 months prior to the survey

The location of sexual abuse for females aged 19-24 in the 12 months before the study follows a similar pattern to the other two age categories reported above. Road or street accounts for 42 per cent of cases, followed by victim's home (32 per cent). Other categories have too few cases to create reliable estimates. For males, the victim's home (27 per cent), road or street (23 per cent), and field or natural area (17 per cent) comprise the most common areas (Appendix B, Table 4.7.3).

## 4.5 Time of day when the incidents of sexual abuse occurred



To assess whether time of day is a risk factor, data on the time of day in which an incident of sexual abuse occurred was analyzed for all age groups (first incident for those aged 18-24; most recent incident during the 12 months prior to the survey for the 13-17 and 19-24 age groups).

Among females aged 18-24 who had experienced sexual abuse prior to age 18, evening was the most-reported time of day (69 per cent) for the first incident of sexual abuse; afternoon and morning were reported by 24 per cent and 13 per cent, respectively, and late at night by 9 per cent of females aged 18-24 who had experienced sexual abuse prior to age 18. Similarly, among males, evening was the most-reported time of day (55 per cent), followed by morning and afternoon (21 per cent and 18 per cent, respectively). There was insufficient data to report on late at night for males (Figure 4.12 and Appendix B, Table 4.8.1).

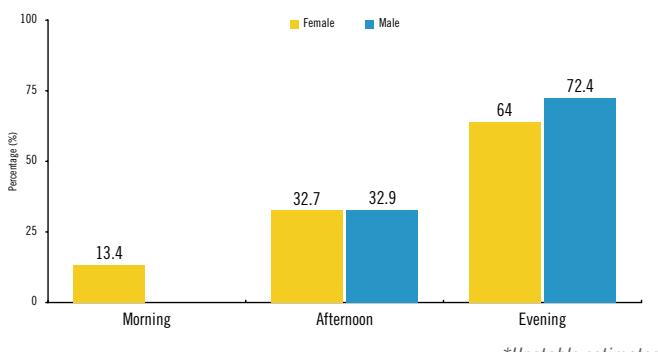
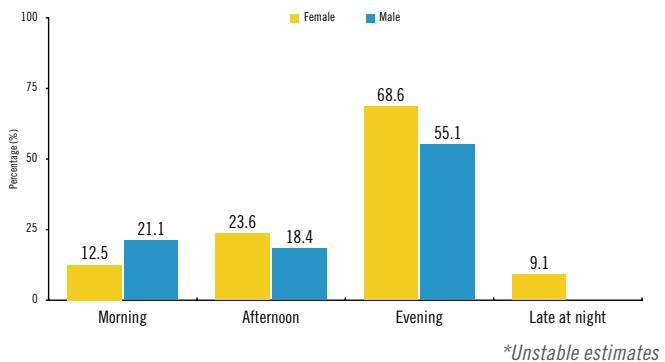


Figure 4.12 Percentage of females and males aged 18-24 years who reported the time of day of first experience of any sexual abuse prior to age 18

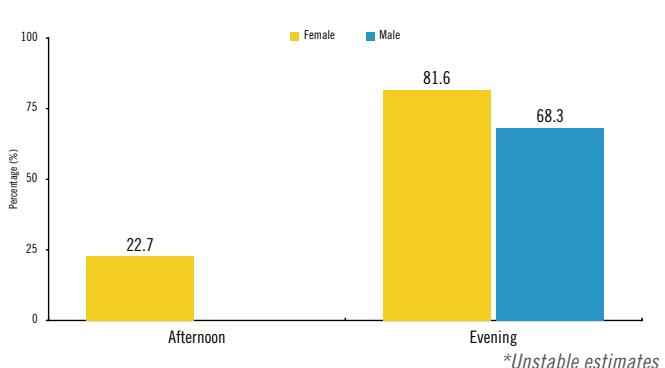
For youth aged 19-24 who had experienced sexual abuse in the 12 months prior to the survey, 82 per cent of females reported evening and 23 per cent reported afternoon as the times of day when the most recent sexual abuse had happened. For males, evening was the most-reported time of day when the most recent sexual abuse had happened (68 per cent) (Figure 4.14 and Appendix B, Table 4.8.3).



\*Unstable estimates

Among females aged 13-17 who had experienced sexual abuse in the 12 months prior to the survey, the most frequent times of day for the most recent sexual abuse were evening (64 per cent), then afternoon (33 per cent) and morning (13 per cent). For males in the same age group who had experienced sexual abuse in the last 12 months, the most frequent times of day for the most recent event of sexual abuse were evening (72 per cent) followed by afternoon (33 per cent) (Figure 4.13 and Appendix B, Table 4.8.2).

Figure 4.13 Percentage of males and females aged 13-17 years who reported the time of day of most recent experience of any sexual abuse



\*Unstable estimates

Figure 4.13 Percentage of males and females aged 13-17 years who reported the time of day of most recent experience of any sexual abuse

## 4.6 DISCLOSURE AND SERVICE-SEEKING BEHAVIOUR OF CHILDREN WHO EXPERIENCED SEXUAL ABUSE



This section describes the reporting and service-seeking behaviour of males and females who had experienced sexual abuse before the age of 18. The findings presented include whether any incidents of sexual abuse were ever disclosed to anyone and whether professional services were received. The reasons why professional services were not sought or received are also highlighted.

### 4.6.1 Disclosure and reporting of sexual abuse among those aged 18-24 who experienced sexual abuse prior to age 18

Among those aged 18-24 who had experienced sexual abuse in childhood, 56 per cent of females and 33 per cent of males had told someone about their experience (Figure 4.15 and Appendix B, Table 4.9.1). Females who told someone about their experience were more likely to tell a friend or neighbour (13 per cent) or a family member or relative (9 per cent) than other individuals. Males were also more likely to tell a friend or neighbour (6 per cent) or a family member or friend (3 per cent) (Appendix B, Table 4.10.1).

Of females who had experienced sexual abuse prior to the age of 18, 35 per cent knew of a place to seek help for an experience of sexual abuse, but there is insufficient data to determine those who sought and received help (Appendix B, Table 4.9.1). Among males who experienced childhood sexual abuse, 46 per cent knew of a place to seek help about an experience of sexual abuse, but there is insufficient data to report those who sought help - none reported receiving services.

There are insufficient data to determine how many females and males had missed school due to sexual abuse. Data are also insufficient to determine whether missing school was due to sexual abuse (Appendix B, Table 4.14.1).

### 4.6.2 Disclosure and reporting of sexual violence among children aged 13-17 who experienced sexual abuse in the 12 months prior to the survey

Among those aged 13-17 who had experienced sexual abuse in last twelve months, 63 per cent of females and 34 per cent of males had told someone about experience (Appendix B, Table 4.9.2). Females who told someone about their experience were more likely to tell a family member or relative (7 per cent) or a friend or neighbour (4 per cent) than any other individuals (Appendix B, Table 4.10.2). Males were more likely to tell a friend or neighbour (2 per cent).

Of females aged 13-17 who had experienced sexual abuse in the past twelve months, 39 per cent knew of a place to seek relevant help, but there is insufficient data to determine what proportion had sought and received help (Figure 4.16 and Appendix B, Table 4.9.2). Among males, 34 per cent knew of a place to seek relevant help, but there is insufficient data to determine who had sought and received services.

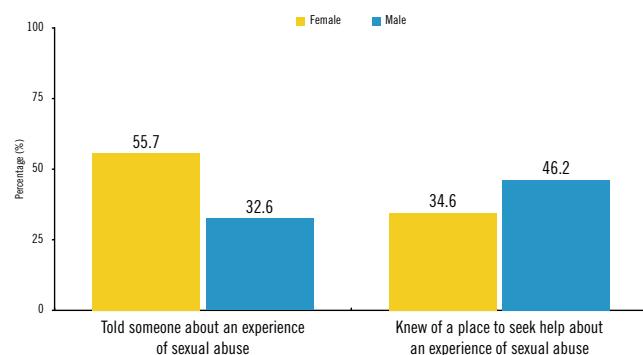


Figure 4.15 Percentage of females and males aged 18-24 years who experienced any sexual violence prior to age 18 who reported disclosure and awareness of support services

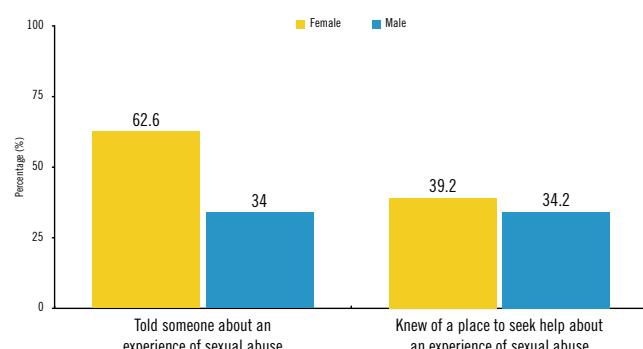
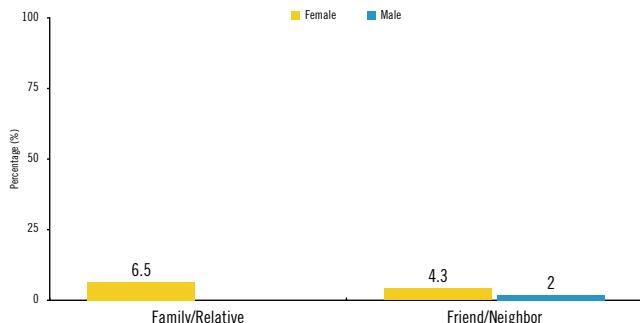


Figure 4.16 Percentage of females and males aged 13-17 years who experienced any sexual violence in the past 12 months who reported disclosure and awareness of support services

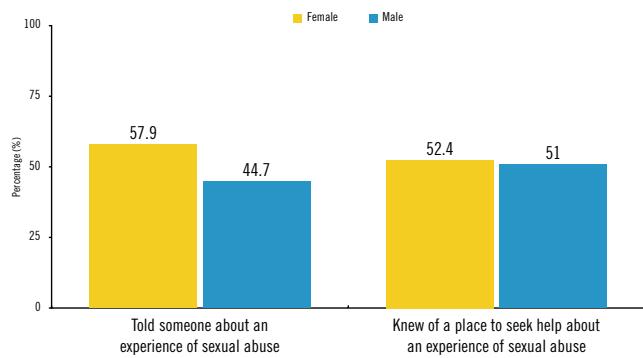


*Figure 4.17 Percentage of females and males aged 13-17 years who disclosed any incident of sexual abuse and who they told (among those who experienced any sexual abuse in the past 12 months)*

#### **4.6.3 Disclosure and reporting of sexual violence among 19-24 year olds who experienced sexual abuse in the 12 months prior to the survey**

Among youth aged 19-24 who had experienced sexual abuse in last 12 months, 58 per cent of females and 45 per cent of males had told someone about the experience. Fifty-two per cent of females and 51 per cent of males aged 19-24 knew where to seek help for an experience of sexual abuse, but there is insufficient data to determine how many of them sought and received help (Figure 4.18 and Appendix B, Table 4.9.3).

There are insufficient data to determine how many missed school due to sexual abuse.



*Figure 4.18 Percentage of respondents aged 19-24 who experienced any sexual abuse in the past 12 months who reported disclosure and awareness of support services*

## **4.7 BARRIERS TO SEEKING SERVICES FOR INCIDENTS OF SEXUAL ABUSE**



Barriers to service-seeking mentioned by children and youth fell into three general categories: individual, relationship and structural. Individual-level barriers were: afraid of getting in trouble / embarrassment for self or family/ did not think it was a problem/ did not need or want services/ felt it was my fault. Relationship-level barriers were: dependent on perpetrator/ perpetrator threatened me/ afraid of being abandoned. Structural-level barriers were: could not afford services / could not afford transport or services too far.

Individual-level barriers comprised over 90 per cent of all reasons for not seeking services across all age groups. Within the individual-level category, 'Did not think it was a problem' was the main reason given by both females and males in all three age groups (see Appendix B, Tables 4.15.1, 4.15.3, 4.16.1, 4.16.2 and 4.16.3).

# SECTION 5

## PHYSICAL VIOLENCE – PREVALENCE, PERPETRATORS AND SERVICE-SEEKING BEHAVIOUR

This section describes the prevalence and current patterns of children's experience of, and exposure to, physical violence. Data on perpetrators and children's knowledge of services and help-seeking behaviour is also presented. The survey defined physical violence as including punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, burning intentionally, or using (or threatening to use) a gun, knife or other weapon.

### Highlights - physical violence in childhood

- Thirty-seven percent of females and 60 % of males aged 18-24 had experienced physical violence before the age of 18.
- Females aged 18-24 had first experienced physical violence at young ages – 11 % of them while younger than five and 51 % of them when aged 12-17.
- For males aged 18-24, just over half of them (52 %) had experienced their first incident of physical violence when they were aged 6-11.
- Fifty-two percent of females and 49 % of males who had experienced physical violence had missed one or more days of school as a result.
- Twenty-seven percent of female respondents and 42 % of male respondents aged 13-17 had experienced physical violence in the past 12 months.
- Eighty-seven percent of females and males aged 13-17 who had experienced physical violence had experienced multiple incidents.
- The most common perpetrators of physical violence against both females and males aged 18-24 were reported to be parents, adult relatives and caregivers.

### Highlights - physical violence among youth (aged 19-24)

- Nine percent of females and 13 % of males had experienced physical abuse in the past 12 months
- Sixty-eight percent of females and 66 % of males reported multiple incidents in the past 12 months. Twenty-seven percent of males had experienced physical injury as a result of physical violence
- Sixty-nine percent of females had told someone about an experience of physical violence and 53 % knew where to seek help
- Seventy-six percent of males had told someone about an experience of physical violence and 69 % knew where to seek help

# 5.1 Experience of physical violence



Prevalence of physical violence before the age of 18, including data on perpetrators, is presented below. The age distribution and proportions of males and females experiencing multiple incidents of physical violence are also highlighted.

## 5.1.1 Physical violence: respondents aged 18-24 before the age of 18

For females and males aged 18-24, 37 per cent of females and 60 per cent of males reported experiencing physical violence before the age of 18 (Figure 5.1 and Appendix B, Table 5.1.1).

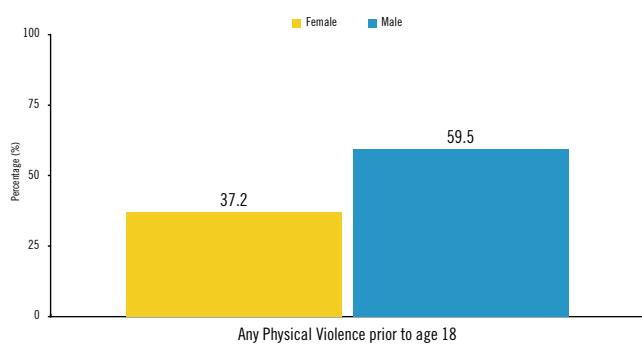


Figure 5.1 Percentage of males and females aged 18-24 years who reported experiencing any physical violence prior to age 18

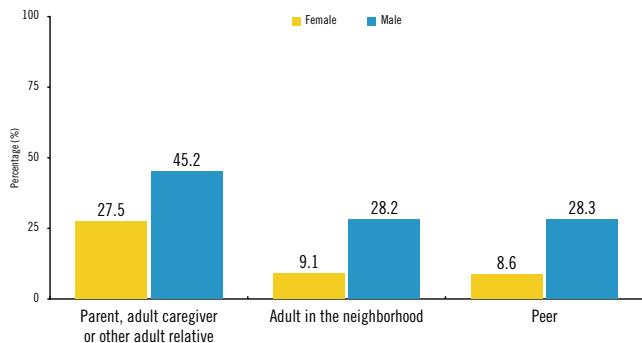


Figure 5.2 Percentage of females and males aged 18-24 years who reported experiencing any physical violence by an intimate partner, parent or adult relative, or adult in the neighbourhood or peer prior to age 18

Only 18 per cent of females and 10 per cent of males who had experienced physical violence had suffered only one incident. More than 82 per cent of both males and females had experienced multiple incidents of physical violence before the age of 18 (Appendix B, Table 5.10.1).

Half (51 per cent) of females had first experienced physical violence in childhood between the ages of 12 and 17; 38 per cent reported first physical violence at ages 6-11, and 11 per cent at five years and younger. For males, the first incident of physical violence was experienced more at ages 6-11 (52 per cent) than while five years or younger (12 per cent) or aged 12-17 (36 per cent) (Appendix B, Table 5.11.1).

These data indicate that, in Rwanda, girls are more likely to suffer their first incident of physical violence in their teenage years, while boys experience physical violence at younger ages.

Among male youth aged 18-24 who had experienced physical violence before the age of 18, the category of perpetrators most frequently reported was parent or adult relative (45 per cent), followed by peer (28 per cent) and community member (28 per cent). For females in the same age group, the most frequently reported perpetrators were parent or adult relative (28 per cent), followed by community member (9 per cent) and peer (9 per cent). There was insufficient data (for both females and males) to assess physical violence by intimate partner. (Figure 5.2 and Appendix B, Table 5.2.1).

## 5.1.2 Physical violence suffered by children aged 13-17 in the 12 months prior to the survey

Twenty-seven per cent of females and 42 per cent of males in this age group reported experiencing physical violence in the past 12 months prior to the survey (Figure 5.3 and Appendix B, Table 5.1.2).

Among males aged 13-17 who had experienced physical violence in the 12 months prior to the survey, the category of perpetrators most frequently reported was community member (24 per cent), followed by parent or adult relative (22 per cent) and peer (17 per cent). For females in the same age group, the most frequently mentioned perpetrators were parent or adult relative (12 per cent), followed by peer (11 per cent) and community member (7 per cent). There was insufficient data (for both females and males) to assess physical violence by an intimate partner (Figure 5.4 and Appendix B, Table 5.2.2).

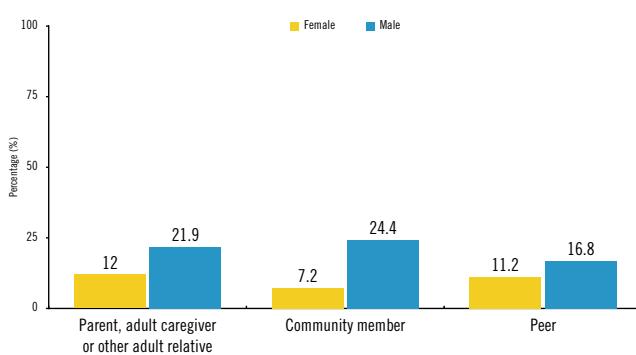


Figure 5.4 Percentage of males and females aged 13-17 years who reported experiencing any physical violence by an intimate partner, parent or adult relative, adult in the neighbourhood or peer in the past 12 months

## 5.1.3 Physical violence suffered by 19-24 year olds in the 12 months prior to the survey

In this age-group, 9 per cent of females and 13 per cent of males reported experiencing physical violence in the past 12 months (Figure 5.5 and Appendix B, Table 5.1.3).

Among males aged 19-24 years who experienced physical violence in the 12 months prior to the survey, the category of perpetrators most frequently reported was peer (9 per cent), followed by community member (3 per cent) and parent or adult relative (2 per cent). For females in the same age group, the most frequently reported perpetrator was intimate partner (5 per cent). There was insufficient data (for both females and males) to further assess physical violence by intimate partner (Appendix B, Table 5.2.3).

Additionally, among those aged 19-24 who had experienced physical violence in the last 12 months, 68 per cent of females and 66 per cent of males reported multiple incidents (Appendix B, Table 5.10.3).

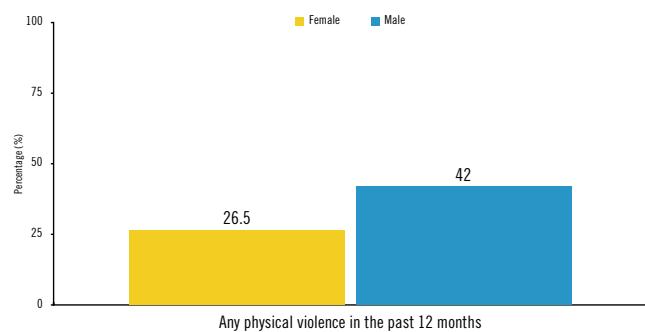


Figure 5.3 Percentage of females and males aged 13-17 years who reported experiencing any physical violence in the past 12 months prior to the survey

Additionally, among those aged 13-17 who had experienced physical violence in the previous 12 months, 87 per cent of females and 95 per cent of males reported multiple incidents (Appendix B, Table 5.10.2). In this age group, 59 per cent of females had first experienced physical violence while aged 12-17 (Appendix B, Table 5.11.2). Thirty-four per cent of females reported having the first experience of physical violence while aged 6-11. For males, first incidents of physical violence were most commonly experienced by those aged 6-11 (62 per cent), followed by those aged 12-17 (27 per cent) and aged five years or younger (12 per cent).

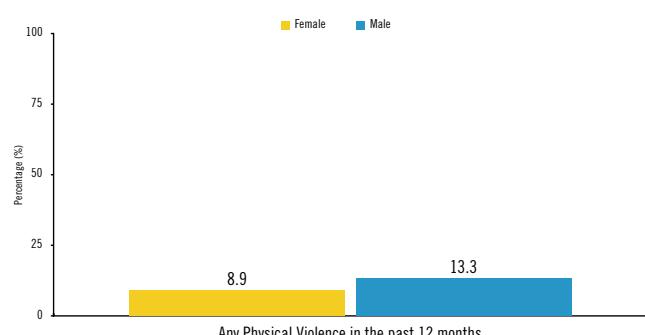


Figure 5.5 Percentage of females and males aged 19-24 years who reported experiencing any physical violence in the past 12 months

## 5.2 Physical injury as a result of physical violence



Among female respondents aged 18-24, 7 per cent had experienced physical injury as a result of physical violence before the age of 18. Nineteen per cent of males in the same age group were similarly injured before the age of 18 (Figures 5.6 and 5.7, and Appendix B, Table 5.3.1).

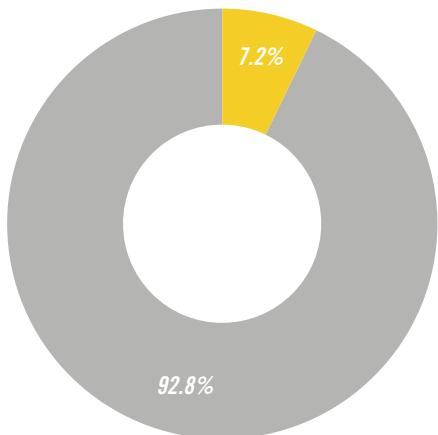


Figure 5.6 Percentage of females aged 18-24 years who reported specific physical harm or injury as a result of any experience of physical violence prior to age 18

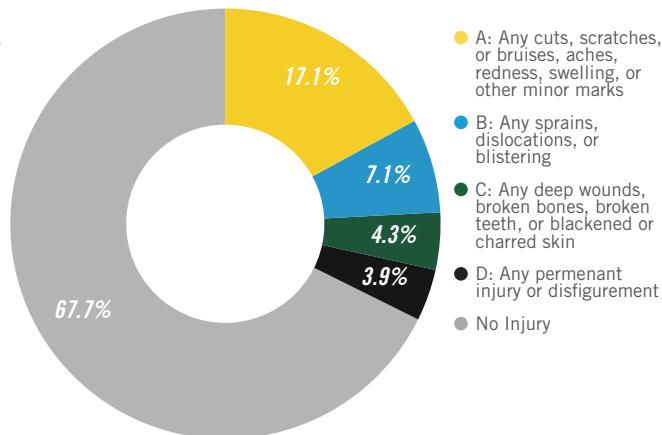


Figure 5.7 Percentage of males aged 18-24 years who reported specific physical harm or injury as a result of any experience of physical violence prior to age 18

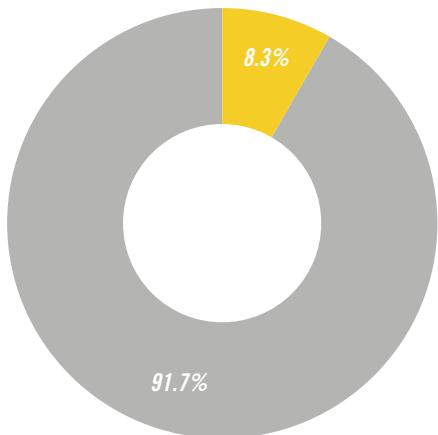


Figure 5.8 Percentage of females aged 13-17 years who reported specific physical harm or injury as a result of any experience of physical violence in the last 12 months

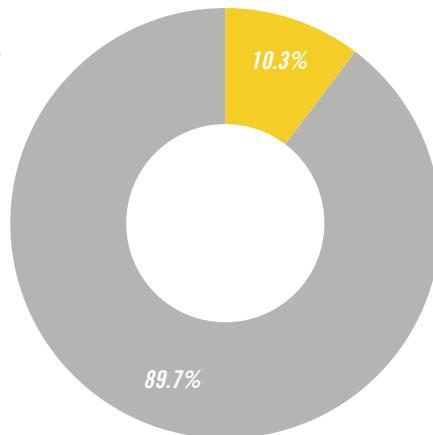


Figure 5.9 Percentage of males aged 13-17 years who reported specific physical harm or injury as a result of any experience of physical violence in the last 12 months

Among those aged 13-17, 8 per cent of females and 10 per cent of males had experienced physical injury as a result of physical violence (Figures 5.8 and 5.9, and Appendix B, Table 5.3.2). Both females and males suffered cuts, scratches, bruises, aches, redness, swelling or other minor marks.

Among those aged 19-24, 27 per cent of males had experienced physical injury as a result of physical violence (Figure 5.10 and Appendix B, Table 5.4.3). The percentage for females was too low to be reported. The majority of the injuries were cuts, scratches, bruises, aches, redness, swelling or other minor marks.

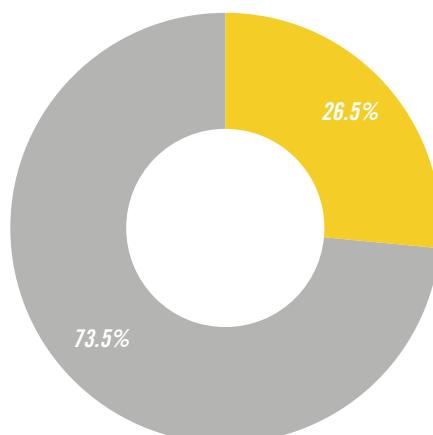


Figure 5.10 Percentage of males aged 19-24 years who reported specific physical harm or injury as a result of any experience of physical violence in the last 12 months

# 5.3 Perpetrators of physical violence



This section analyzes the relationships between perpetrators and victims of physical violence. For those aged 18-24, we report the perpetrators of the first incident of violence. For those aged 13-17, we report the perpetrators of the most recent incident of violence in the 12 months prior to the survey. Data presented in this section provide more detail about the perpetrator categories presented in Figures 5.2 and 5.4; intimate partner, parent or adult relative, neighbourhood member and peers. Each of the subsections takes the overall prevalence rates in Figures 5.2 and 5.4 above and provides further information.

## 5.3.1 Perpetrators of physical violence: 18-24 year olds prior to age 18

### 5.3.1.1 Parent or adult caregiver

Females most often identified their mother as the perpetrator of the first incident of physical violence (33 per cent), followed by father (23 per cent), siblings (19 per cent) and uncle/aunt (11 per cent) (Figure 5.11 and Appendix B, Table 5.6.3). Males reported father (47 per cent), followed by mother (35 per cent), uncle/aunt (5 per cent) and siblings (5 per cent). Among those who had experienced physical violence by an adult relative or parent, 91 per cent of females and 93 per cent of males reported that the perpetrator lived in the same household (Appendix B, Table 5.13.1).

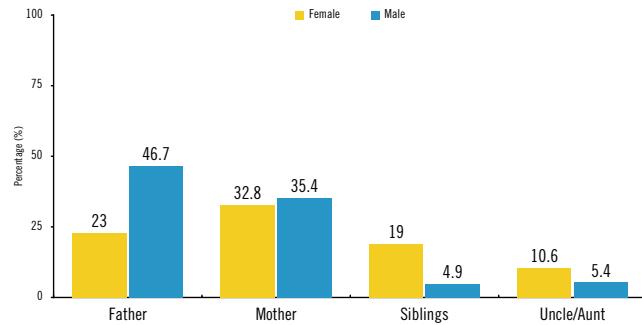


Figure 5.11 Percentage of females and males aged 18-24 years who reported any physical violence by a parent/adult caregiver/adult relative prior to the age of 18, by perpetrator of first incident

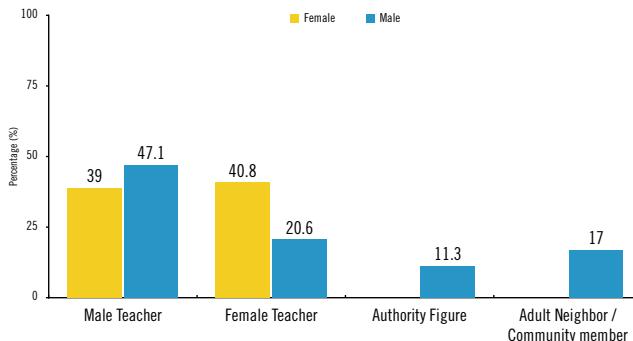


Figure 5.12 Percentage of females and males aged 18-24 years who reported any physical violence by adults living in the community prior to the age of 18, by perpetrator of first incident

### 5.3.1.2 Adults in the community

In this category, females were more likely to report female teachers (41 per cent) as the perpetrator of the first incident of physical violence, followed by male teachers (39 per cent). For males, male teachers were most reported as the perpetrators of the first incident of physical violence (47 per cent), followed by female teachers (21 per cent), neighbours (17 per cent) and authority figures (11 per cent) (Figure 5.12 and Appendix B, Table 5.6.4).

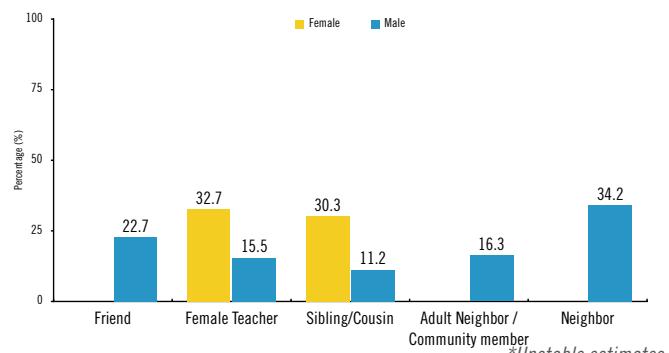


Figure 5.13 Percentage of females and males aged 18-24 years who reported any physical violence by a peer prior to the age of 18, by perpetrator of first incident

**5.3.1.3 Peers**  
Looking at peer perpetrators, females aged 18-24 were most likely to identify classmates or schoolmates as perpetrator of the first incident of physical violence (33 per cent), followed by cousins or peer relatives (30 per cent). Males aged 18-24 most often identified a neighbour as the perpetrator of the first incident (34 per cent), followed by a friend (23 per cent), classmate or schoolmate (16 per cent) and cousin or other same-age relative (11 per cent). Males who had experienced physical violence by other peers accounted for 16 per cent of physical violence. Females were significantly more likely than males to identify cousins or other peer relatives as the perpetrator of first incident of childhood physical violence (Figure 5.13 and Appendix B, Table 5.6.2).

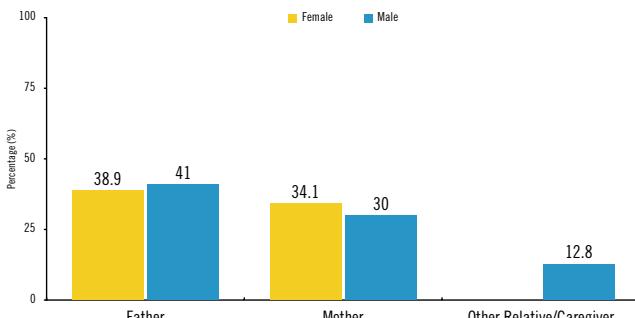
### 5.3.1.4 Intimate partner

With regard to physical violence experienced from an intimate partner such as a spouse, romantic partner or boyfriend/girlfriend, 75 per cent of females experienced such violence. There was insufficient data to report for males (Appendix B, Table 5.6.1).

## 5.3.2 Perpetrators of physical violence: 13-17-year-old in the 12 months prior to the survey

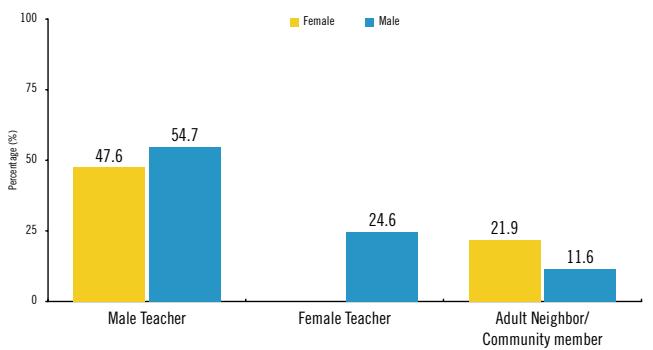
### 5.3.2.1 Parent or adult caregiver

Among females aged 13-17 who had experienced physical violence by a parent or adult caregiver in past 12 months, fathers were the most-reported perpetrators of the most recent incident of physical violence (39 per cent), followed by mothers (34 per cent). For males, fathers are the most-reported perpetrators (41 per cent), followed by mothers (30 per cent) and other relatives (13 per cent) (Figure 5.14 and Appendix B, Table 5.6.7).



\*Unstable estimates

Figure 5.14 Percentage of males and females aged 13-17 years who reported any physical violence in the past 12 months by a parent/adult caregiver/adult relative, by perpetrator of most recent incident



\*Unstable estimates

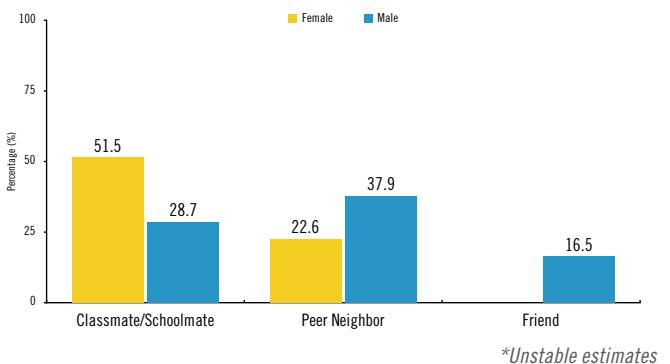
Figure 5.15 Percentage of females and males aged 13-17 years who reported any physical violence by adults in the neighbourhood in the past 12 months, by perpetrator of most recent incident

### 5.3.2.3 Peers

Among females aged 13-17 who reported any physical violence by a peer in the past 12 months, a classmate or schoolmate was most frequently identified as the peer perpetrator of the most recent incident of physical violence (52 %), followed by neighbour (23 %). Males reported peer, neighbour and classmate as the most common perpetrators of the first incident of physical violence by peer (38 % and 29 %, respectively), followed by friend (17 per cent) (Figure 5.16 and Appendix B, Table 5.6.6).

### 5.3.2.2 Adults in the community

With regards to experiences of physical violence perpetrated by an adult in the community in the past 12 months, females aged 13-17 reported male teachers and neighbours as the perpetrator of the most recent incident of physical violence (48 per cent and 22 per cent, respectively). Males reported that male teachers were the most likely to commit physical violence than all other categories (55 per cent), followed by female teachers (25 per cent) and then neighbours (12 per cent) (Figure 5.15 and Appendix B, Table 5.6.8).



\*Unstable estimates

Figure 5.16 Percentage of females and males aged 13-17 years who reported any physical violence by a peer in the past 12 months, by perpetrator of most recent incident

### 5.3.2.4 Intimate partner

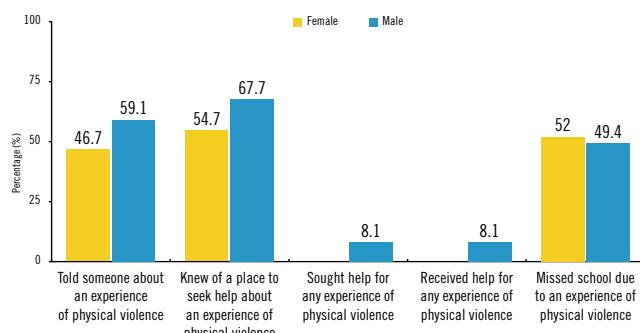
For both females and males aged 13-17, for those who had been subject to physical violence by an intimate partner in the past 12 months, a romantic partner was the most common type of first perpetrator of physical violence for both sexes (77 per cent and 81 per cent, respectively). There were insufficient data to report on husbands/wives in this category (Appendix B, Table 5.6.5).

## 5.4 Disclosure and service-seeking behaviour of children who experienced physical violence

The main objective of this section is to describe the reporting and service-seeking behaviour of females and males who had experienced at least one incident of physical violence before the age of 18. This section describes whether any incidents of physical violence were ever disclosed to anyone and whether professional services were sought and received. Reasons why professional services were not received are also highlighted.

### 5.4.1 Disclosure and service-seeking behaviour among those aged 18-24 who experienced physical violence prior to age 18.

Among females in this category, 47 per cent had told someone about a violent experience and 55 per cent knew of a place to seek help, but there is insufficient data about those who sought and/or received help. Among males, 59 per cent had told someone about an experience of physical violence, 68 per cent knew where to seek help, and 8 per cent both sought and received help for such an experience (Figure 5.17 and Appendix B, Table 5.7.1). Both females and males reported missing school due to an experience of physical violence at similar rates (52 per cent and 49 per cent, respectively) (Figure 5.17 and Appendix B, Table 5.8.1).



\*Unstable estimates

Figure 5.17 Percentage of males and females aged 18-24 years who disclosed, reported service awareness/use and missed school among those who experienced any physical violence prior to age 18

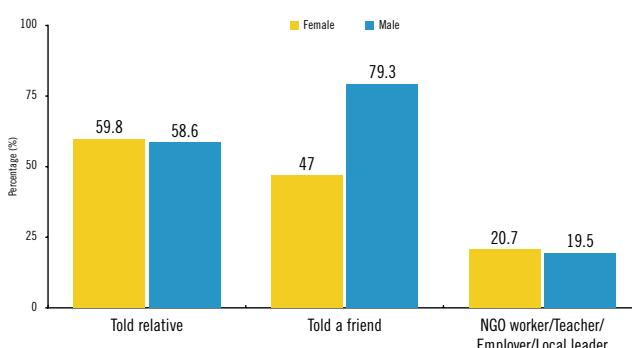


Figure 5.18 Percentage of females and males aged 18-24 years who disclosed any incident of physical violence and who they told among those who experienced any physical violence prior to age 18

Among those aged 18-24 with a history of physical violence in childhood, females who had told someone about their experience most often reported telling a relative (60 per cent), followed by a friend (47 per cent) and then service-providers an authority figures (21 per cent) came last. Males most often told a friend (79 per cent), followed by a relative (59 per cent) and lastly service-providers and authority figures (10 per cent). Disclosure to relatives and friends was significantly higher (for both females and males) than disclosure to service-providers, authority figures or anyone else (Figure 5.18 and Appendix B, Table 5.9.1).

Among those who received help after experiences of physical violence, both males (76 per cent) and females (87 per cent) were significantly more likely to receive help from a local leader than from any other service-provider. (Appendix B, Table 5.14.1).

## 5.4.2 Disclosure and service-seeking behaviour following physical violence among those aged 13-17 who experienced physical violence in the 12 months prior to the survey

Among females in this group, 62 per cent told someone about an experience of violence and 30 per cent knew where to seek help, but there is insufficient data about those who sought and/or received help. Among males, 59 per cent told someone about their experience and 49 per cent knew where to seek help, but there is insufficient data on those who sought and/or received help. (Figure 5.19 and Appendix B, Table 5.7.2). There is insufficient data for both females and males on missing school due to physical violence. (Appendix B, Table 5.8.1).

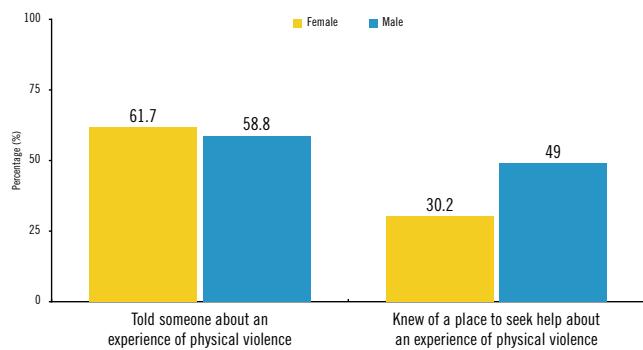


Figure 5.19 Percentage of males and females aged 13-17 years who disclosed, reported service awareness/use among those who experienced any physical violence in the past 12 months

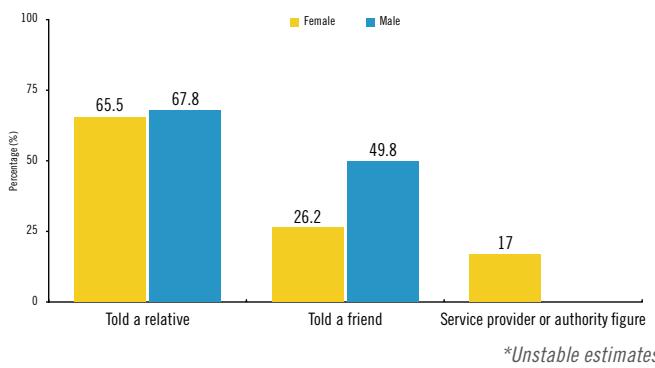


Figure 5.20 Percentage of females and males aged 13-17 years who disclosed to someone about any incident of physical violence and who they told among those who experienced any physical violence in the past 12 months

## 5.4.3 Disclosure and service-seeking behaviour following physical violence among those aged 19-24 who experienced physical violence in the 12 months prior to the survey

Among females in this group, 69 per cent had told someone about an experience of violence and 53 per cent knew of a place to seek help, but there is insufficient data on those who sought and/or received help. Among males, 76 per cent told someone and 69 per cent knew of a place to seek help, but again there is insufficient data on those who actually sought and/or received help (Figure 5.21 and Appendix B, Table 5.7.3). Disclosure in this age group was mainly to relatives and friends (Figure 5.22).

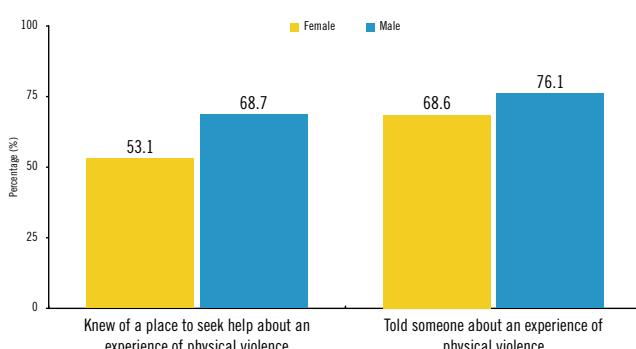


Figure 5.21 Percentage of youth aged 19-24 who reported service awareness/use and disclosure, among those who experienced any physical violence in the past 12 months

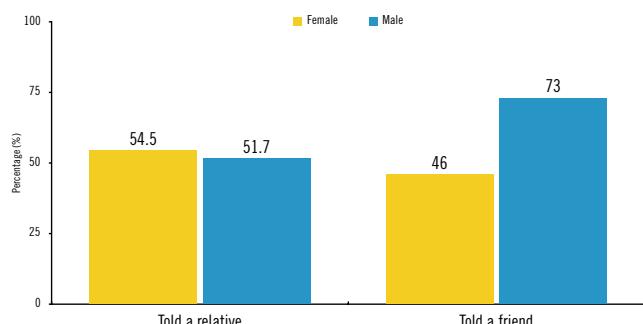


Figure 5.22 Percentage of females and males aged 19-24 years who disclosed to someone about any incident of physical violence and who they told among those who experienced any physical violence in the past 12 months

#### **5.4.4 Service-seeking behaviour following physical violence among those aged 18-24 who experienced physical violence prior to age 18**

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When asked why they had not sought services after an incident of physical violence, both females and males were significantly more likely to cite individual-level barriers such as embarrassment or fear of getting into trouble than any other reason (92 per cent and 89 per cent, respectively). For males, relationship-level barriers (such as dependence on the perpetrator) accounted for just 7 per cent of the reasons for not seeking services, while there is insufficient data to report on females for this category. There is insufficient data for both females and males for structural-level barriers (such as not being able to access or afford the services). (Appendix B, Table 5.16.1.)

Females most often reported that they felt it was their fault (46 per cent) or did not think the physical violence was a problem (30 per cent). Likewise, males most often reported that they thought it was their fault (46 per cent), followed by did not think physical violence was a problem (23 per cent); not needing or wanting services (12 per cent); being afraid of getting in trouble (7 per cent) (Appendix B, Table 5.15.1).

#### **5.4.5 Service-seeking behaviour following physical violence among those aged 13-17 who experienced physical violence in the 12 months prior to the survey**

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When asked why they had not sought services following physical violence, both females and males were significantly more likely to cite individual-level barriers (87 per cent and 93 per cent, respectively) than other reasons. There is insufficient data for relationship-level barriers. No female reported structural-level barriers, and there is insufficient data for males. (Appendix B, Table 5.16.2).

Females most often reported that they did not think the physical violence was a problem (39 per cent) and felt it was their fault (27 per cent). Likewise, males most often reported that they thought it was their fault (45 per cent), followed by being afraid of getting in trouble (14 per cent) and did not think physical violence was a problem (5 per cent) (Appendix B, Table 5.15.2).

#### **5.4.6 Service-seeking behaviour following physical violence among those aged 19-24 who experienced physical violence in the 12 months prior to the survey**

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When asked why they had not sought services following physical violence, both females and males were significantly more likely to cite individual-level barriers (76 per cent and 85 per cent, respectively) than other reasons. There is insufficient data for relationship-level barriers. No female reported structural-level barriers, and there is insufficient data for males. (Appendix B, Table 5.16.3).

# SECTION 6

## EMOTIONAL VIOLENCE IN CHILDHOOD – PREVALENCE AND PERPETRATORS

This section describes the national prevalence and current patterns of emotional violence perpetrated by parents, adult caregivers and other adult relatives against children in Rwanda.

### Highlights - emotional violence in childhood

- Twelve percent of females and 17 percent of males aged 18-24 had experienced emotional violence by a parent or caregiver before the age of 18. Among them, 97 percent of both females and males had experienced multiple incidents of emotional violence.
- Forty-three percent of females and 49 percent of males aged 18-24 who had experienced emotional violence before the age of 18 had experienced the first incident when aged 12-17 percent).
- Forty-nine percent of females and 62 percent of males aged 13-17 who had experienced emotional violence had experienced the first incident when aged 12-17
- Nine percent of females and 11 percent of males aged 13-17 reported experiencing emotional violence by a parent or caregiver in the past 12 months before the survey. Among them, 100% of females and 96 percent of males had experienced multiple incidents of emotional violence.

### Highlights - emotional violence among youth (aged 19-24)

- Nine percent of females and 11 percent of males aged 19-24 had experienced emotional violence in the past 12 months, by a parent or caregiver prior to age 18.
- Among them, 97 percent of females and 98 percent of males had experienced multiple incidents of emotional violence.
- Thirty-four percent of females and 33 percent of males identified fathers as the first perpetrator of childhood emotional violence.

# 6.1 Emotional violence



The prevalence of emotional violence, the age at which it was first experienced and experience of multiple incidents of emotional violence are presented below.

## 6.1.1 Emotional violence: experienced by those aged 18-24 prior to age 18

In this age group, 12 per cent of females and 17 per cent of males had experienced emotional violence. (Appendix B, Table 6.1.1). Of those who had experienced any emotional violence during childhood, 97 per cent of both females and males had experienced multiple incidents. (Appendix B, table 6.3.1).

For females who had experienced emotional violence before the age of 18, the first incident was most-reported to be when aged 12-17 (43 per cent), followed by 6-11 years (35 per cent) and 18-24 years (20 per cent). For males, the first incident was most-reported to occur when aged 12-17 (49 per cent), followed by 6-11 years (28 per cent) and 18-24 years (19 per cent) (Appendix B, Table 6.4.1).

## 6.1.2 Emotional violence: experienced by those aged 13-17 in the past 12 months

In this age group, 8 per cent of females and 13 per cent of males had experienced emotional violence in the past 12 months (Appendix B, Table 6.1.2). Of these, 100 per cent of the females and 96 per cent of the males had experienced more than one incident of emotional violence (Appendix B, Table 6.3.2).

Among those aged 13-17 who had experienced any emotional violence, the most frequently reported age of experiencing the first incident of such violence (for both females and males) was aged 12-17 (49 per cent and 62 per cent, respectively). Forty-three per cent of females and 36 per cent of males experienced their first incident of emotional violence when aged 6-11. Too few males and females reported experiencing emotional violence prior to age 5 to be reported (Figure 6.1 and Appendix B, Table 6.4.2).

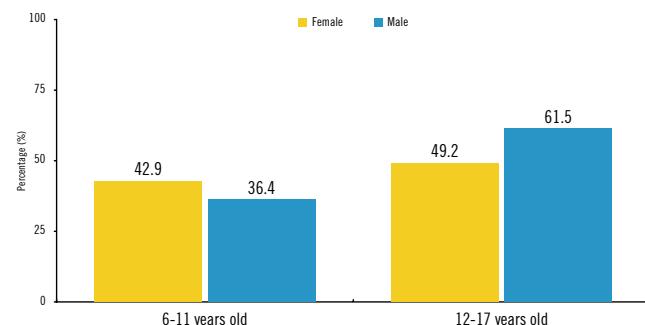


Figure 6.1 Distribution of age at which males and females aged 13-17 years experienced the first incident of emotional violence, among 19-24 year olds who experienced any emotional violence in the past 12 months

## 6.1.3 Emotional violence: experienced by those aged 19-24 in the past 12 months

In this age group, 9 per cent of females and 11 per cent of males had experienced emotional violence in the past 12 months (Figure 6.2 and Appendix B, Table 6.1.3).

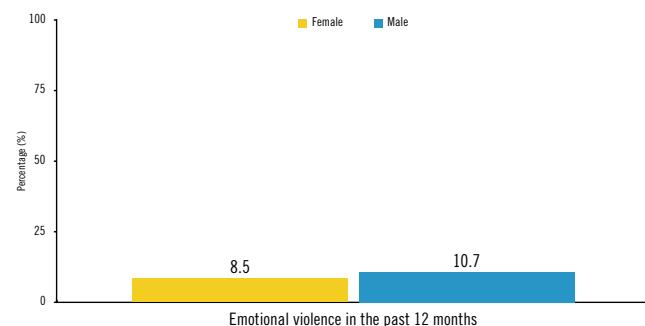


Figure 6.2 Percentage of respondents aged 19-24 years who reported experiencing any emotional violence by a parent, adult caregiver or other adult relative in the past 12 months

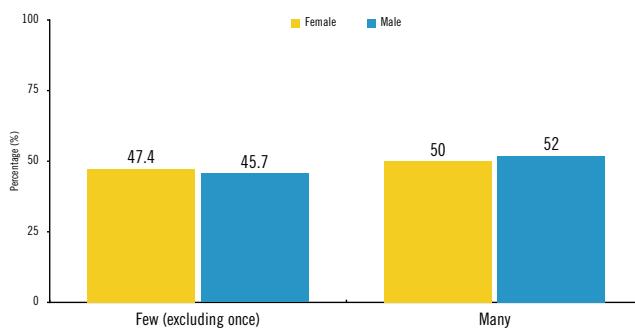


Figure 6.3 Number of incidents of emotional violence, among youth aged 19-24 who experienced at least one incident of emotional violence in the past 12 months

Of these, 97 per cent of females and 98 per cent of males reported experiencing more than one incident of emotional violence (Figure 6.3 and Appendix B, Table 6.3.3).

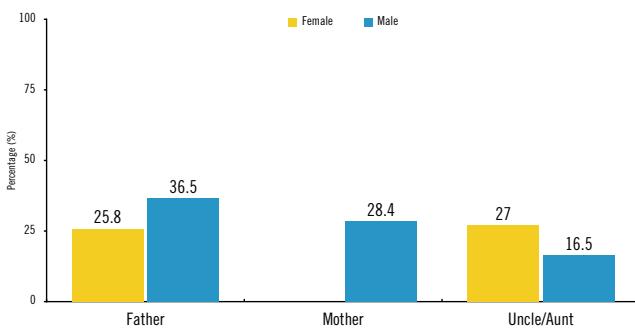
## 6.2 Perpetrators of emotional violence



Data were analyzed for those aged 18-24 who had experienced emotional violence before the age of 18, and for those aged 13-17 and aged 19-24 who had experienced emotional violence in the 12 months prior to the survey, to examine the specific relationship with perpetrators.

### 6.2.1 Perpetrators of emotional violence: against 18-24 year olds, before the age of 18

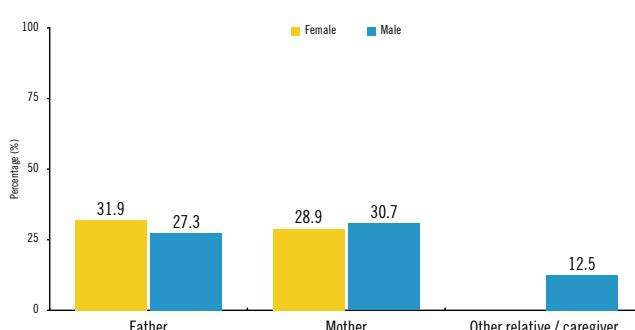
Females in this age group most frequently identified uncles/aunts as the perpetrator of childhood emotional violence (27 per cent), followed by fathers (26 per cent). Males identified fathers as the most common perpetrator of the first incident of emotional violence (37 per cent), followed by mother (28 per cent), and uncle/aunt (17 per cent) (Figure 6.4 and Appendix B, Table 6.2.1).



\*Unstable estimates

Figure 6.4 Percentage of females and males aged 18-24 years who experienced any emotional violence by a parent, adult caregiver, or other adult relative prior to the age of 18, by perpetrator of first incident

### 6.2.2 Perpetrators of emotional violence: against 13-17 year olds, in the past 12 months



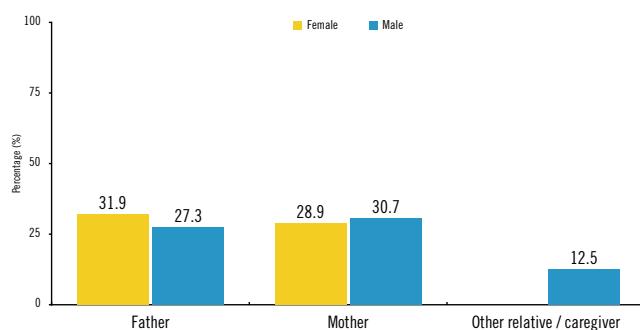
\*Unstable estimates

Figure 6.5 Percentage of females and males aged 13-17 years who experienced any emotional violence by a parent, adult caregiver, or other adult relative in the past 12 months, by perpetrator of most recent incident

Females in this age group most frequently identified fathers as the most recent perpetrator of childhood emotional violence (32 per cent), followed by mother (29 per cent). Males identified mothers (31 per cent) as the first perpetrator of childhood emotional violence, followed by fathers (27 per cent) (Figure 6.5 and Appendix B, Table 6.2.2).

### 6.2.3 Perpetrators of emotional violence: against 19-24 year olds in the past 12 months

Females in this age group most frequently identified fathers as the most recent perpetrator of childhood emotional violence (34 per cent). Males also identified fathers (33 per cent) as the first perpetrator, followed by mothers (29 per cent) (Figure 6.6 and Appendix B, Table 6.2.3).



\*Unstable estimates

Figure 6.6 Percentage of females and males aged 19-24 years who experienced any emotional violence by a parent, adult caregiver, or other adult relative in the past 12 months, by perpetrator of most recent incident

# SECTION 7



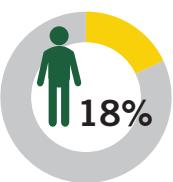
## OVERLAP OF TYPES OF VIOLENCE: SEXUAL, PHYSICAL AND EMOTIONAL VIOLENCE

### HIGHLIGHTS – overlap between types of violence

- Among those aged 18-24, 18% of males and 13% of females had experienced two or all three forms of violence before the age of 18.
- Among those aged 13-17, 8% of males and 7% of females had experienced two or all three forms of violence in the past 12 months.
- Among those aged 19-24, 1% of males and 0% of females experienced two or all three forms of violence in the past 12 months.



aged 18-24 experienced two or more forms of violence prior to age 18



aged 13-17 experienced two or more forms of violence in the past 12 months



aged 19-24 experienced two or more forms of violence in the past 12 months



# 7.1 Children and youth who have experienced any type of violence



This section focuses on the overlap between the three types of violence measured by this survey. Overlap can occur in one of two ways: 1) simultaneously, such as when a child is being emotionally and physically abused at the same time; or 2) they can occur to the same child, but at different points in time.

Recognizing the overlap between different types of violence highlights how violent incidents frequently co-

occur, and how one type of violence may lead to another. It can also indicate the need to identify cross-cutting risk and protective factors that have the potential to address multiple forms of violence at the same time. Examining the distribution of multiple occurrences of violence can provide a more comprehensive picture and profile of children's experiences with sexual abuse, physical violence and emotional violence.

## 7.1.1 Co-occurrence of violence: experienced by 18-24 year olds prior to age 18

Half of the females in this age group had experienced some form of violence before the age of 18 (Figure 7.1 and Appendix B, Table 7.1.1). Thirty per cent of them had experienced only one form of violence (sexual, physical, or emotional), 8 per cent had experienced two forms of violence, and 5 per cent had experienced all three forms of violence before the age of 18.

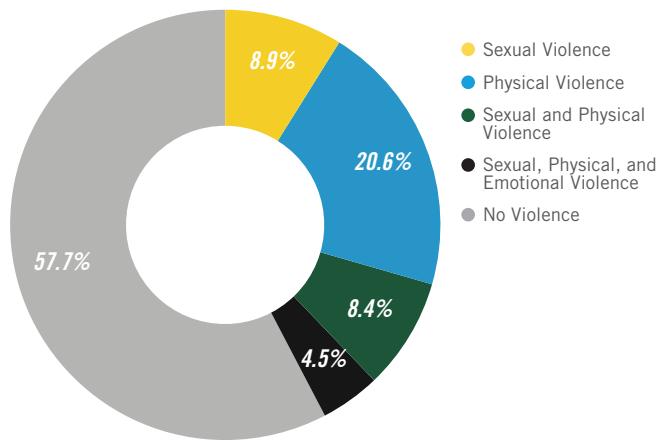


Figure 7.1 Distribution of reported forms of violence experienced prior to age 18, among females aged 18-24 years

Among males, 65 per cent had experienced some form of violence before the age of 18 (Figure 7.2 and Appendix B, Table 7.1.1): 46 per cent had experienced only one form of violence, 15 per cent had experienced two forms, and 3 per cent had experienced all three forms of violence before the age of 18.

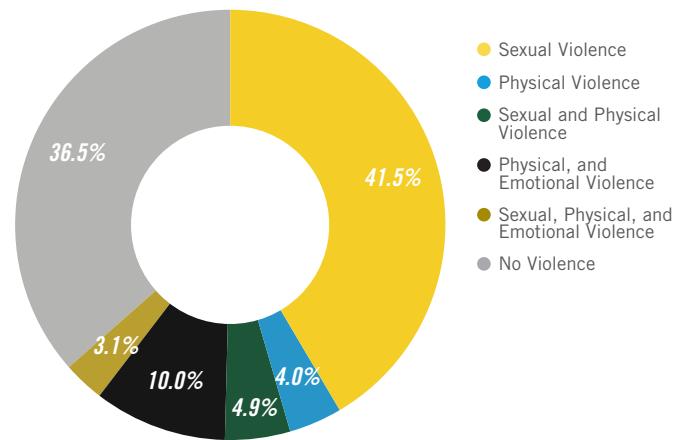


Figure 7.2 Distribution of reported forms of violence experienced prior to age 18, among males aged 18-24 years

No Violence

## 7.1.2 Co-occurrence of violence: experienced by 13-17 year olds in the past 12 months

Among females in this age group, 36 per cent had experienced one or more forms of violence in the last 12 months (Figure 7.3 and Appendix B, Table 7.1.2). Over a quarter of females (27 per cent) had experienced one form of violence (sexual, physical or emotional) and 7 per cent had experienced two forms of violence in the last 12 months.

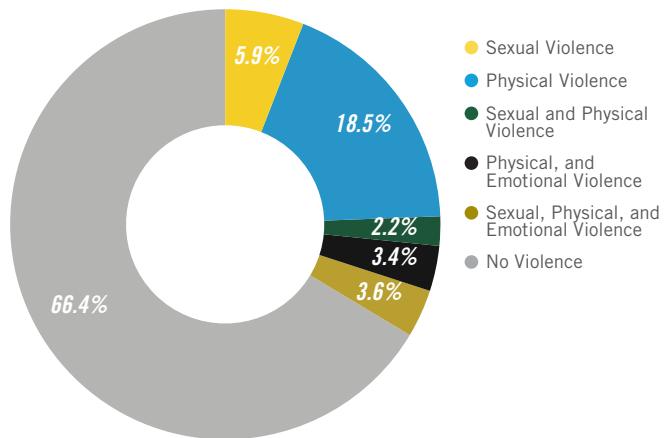


Figure 7.3 Distribution of reported forms of violence experienced in the last 12 months, among females aged 13-17 years

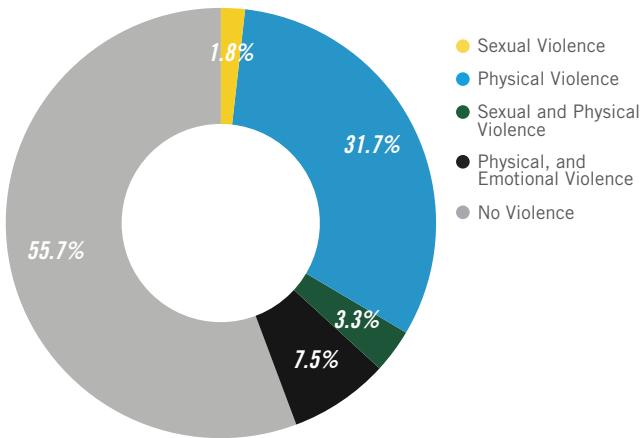


Figure 7.4 Distribution of reported forms of violence experienced in the last 12 months, among males aged 13-17 years

Among males in this age group, 48 per cent had experienced one or more forms of violence in the last 12 months (Figure 7.4 and Appendix B, Table 7.1.2). Over one third of males (37 per cent) had experienced one form of violence (sexual, physical or emotional) and 8 per cent had experienced two forms of violence in the last 12 months.

## 7.1.3 Co-occurrence of violence: experienced by 19-24 year olds in the past 12 months

Among females in this age group, 28 per cent had experienced one or more forms of violence in the last 12 months (Figure 7.5 and Appendix B, Table 7.1.3). Over 12 per cent of females had experienced sexual violence and 5 per cent had experienced physical violence in the last 12 months.

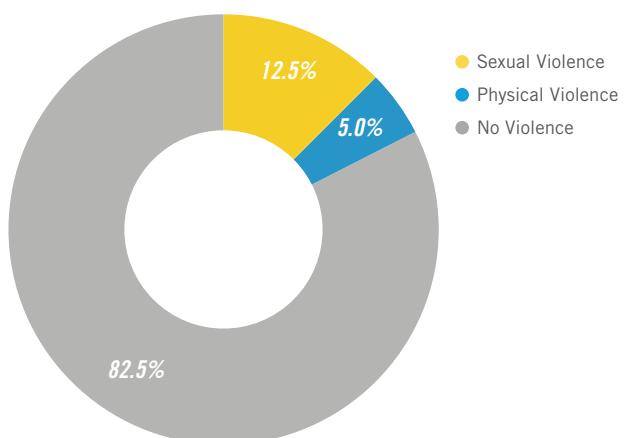


Figure 7.5 Distribution of reported forms of violence experienced in the last 12 months, among females aged 19-24 years

Among males in this age group, 28 per cent had experienced one or more forms of violence in the last 12 months (Figure 7.6 and Appendix B, Table 7.1.3). Almost a quarter (22 per cent) had experienced only one form of violence and 2 per cent had experienced two forms of violence in the past 12 months.

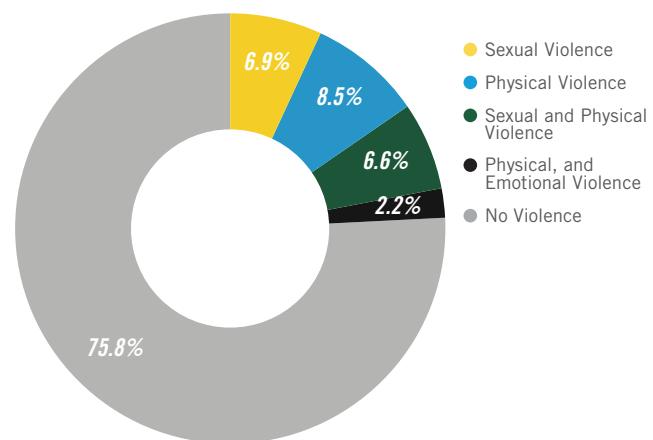


Figure 7.6 Distribution of reported forms of violence experienced in the last 12 months, among males aged 19-24 years

# SECTION 8

## HEALTH OUTCOMES OF SEXUAL ABUSE AND PHYSICAL AND EMOTIONAL VIOLENCE

This section describes health outcomes reported by those who had experienced sexual abuse, or physical or emotional violence in childhood compared to those who had not experienced such violence. Specifically, these health outcomes include mental distress in the past 30 days, being drunk in the past 30 days, smoking in the past 30 days, substance use in the past 30 days, self-harm, considering suicide, attempting suicide, and symptoms or diagnosis of sexually transmitted infections (STIs). Pregnancy amongst females was also assessed.

To examine the significance of these associations, 95 per cent confidence interval (95% CI) were used. Where corresponding 95% CIs overlapped it was concluded there was no significant difference. Where they did not overlap, a statistically significant difference was reported.

### HIGHLIGHTS – health outcomes

- Females aged 18-24 with a history of sexual abuse or physical or emotional violence were significantly more likely than their peers who had not experienced abuse or violence to have considered suicide.
- Males aged 18-24 with a history of emotional violence were significantly more likely to have experienced mental distress in the past 30 days, or to have been drunk in the past 30 days.
- Males aged 13-17 with a history of sexual abuse were significantly more likely to have been drunk in the past 30 days; those who had experienced emotional violence were significantly more likely than their peers who had not had this experience to have experienced mental distress in the past 30 days.
- Of females aged 19-24 who had experienced their most recent episode of sexual abuse in the past 12 months, 53% had experienced mental distress in the past 30 days and 25 % reported having considered suicide.
- Of females aged 19-24 who had experienced physical violence in the past 12 months 53% had experienced mental distress in the past 30 days and 36% reported having considered suicide.
- Of males aged 19-24 who had experienced sexual abuse in the past 12 months, 52% had experienced mental distress and 30% had been drunk in the past 30 days.
- Males aged 19-24 with a history of childhood emotional violence were significantly more likely than those without such experience to have experienced mental distress in the past 30 days.
- Among females with experiences of unwanted completed sex in childhood, 48% of those aged 18-24 and 51% of those aged 19-24 reported pregnancy as a result.
- Of females aged 19-24 with a history of emotional violence during the past 12 months, 61% reported mental distress in the past 30 days and 40% reported having considered suicide.
- Of females aged 19-24 with no experience of emotional violence in the last 12 months, 30% reported mental distress in the past 30 days and 30% had attempted suicide.

## 8.1 Experiences of sexual abuse in childhood and current health status



### 8.1.1 Experiences of sexual abuse in childhood and current health status among those aged 18-24, before the age of 18

The most-reported health outcomes for females aged 18-24 were mental distress in the past 30 days, suicidal feelings and symptoms or diagnosis of STIs. Among females in this age group who had experienced sexual abuse before the age of 18, 38 per cent had suffered mental distress in the past 30 days; 15 per cent reported having thought of suicide; and 8 per cent had had symptoms of or had been diagnosed with STIs. For females with no childhood experience of sexual violence, 34 per cent had suffered mental distress in the past 30 days and 7 per cent had had symptoms of or had been diagnosed with STIs. There was no statistically significant difference in health outcomes between those with a history of childhood sexual abuse and those with no history of childhood sexual abuse (Figure 8.1 and Appendix B, Table 8.2.1.1).

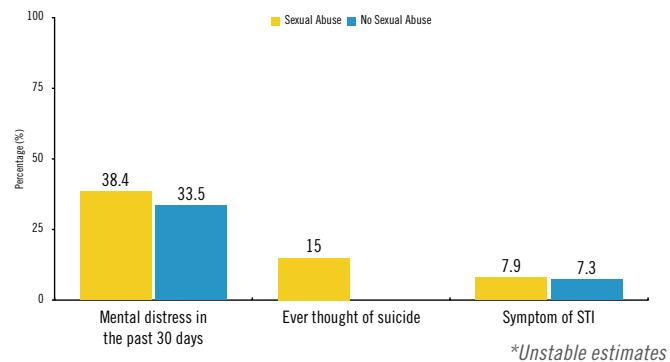


Figure 8.1: Percentage of youth females aged 18-24 years who reported health outcomes among those who did and did not experience sexual abuse prior to age 18

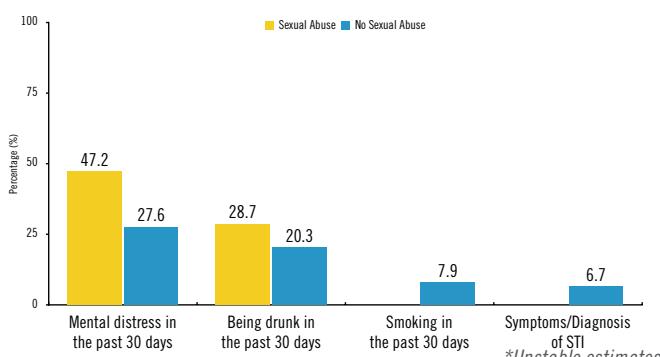


Figure 8.2 Percentage of male youth aged 18-24 years who reported health outcomes among those who did and did not experience sexual abuse prior to age 18

Among males in this age group who had experienced sexual abuse before the age of 18, 47 per cent had experienced mental distress and 28 per cent had been drunk in the past 30 days. For those with no childhood experience of sexual abuse, 28 per cent had had mental distress, 20 per cent had been drunk and 8 per cent had smoked in the past 30 days. Seven per cent reported having had symptoms of or diagnoses of STIs. There is a statistically significant difference between the experience of mental distress in the past 30 days reported by males with a history of childhood sexual violence and those with no such history (Figure 8.2 and Appendix B, Table 8.2.1.2).

### 8.1.2. Experiences of sexual abuse in childhood and current health status: children aged 13-17, in the 12 months prior to the survey

Mental distress was the most reported health outcome among females in this age group: 22 per cent of females who had no history of sexual violence in the past 12 months had felt mental distress in the past 30 days. There were too few cases reported for females with experience of sexual abuse in the past 12 months to produce stable reportable estimates of their health outcomes (Appendix B, Table 8.2.2.1).

Among males in this age group who had experienced sexual violence in the past 12 months, 19 per cent had experienced mental distress and 15 per cent had been drunk in the past 30 days. Among those with no experience of sexual abuse in the past 12 months, 19 per cent had felt mental distress, 10 per cent reported having been drunk, 6 per cent had smoked and 3 per cent had had symptoms of or had been diagnosed with STIs in the past 30 days (Figure 8.3).

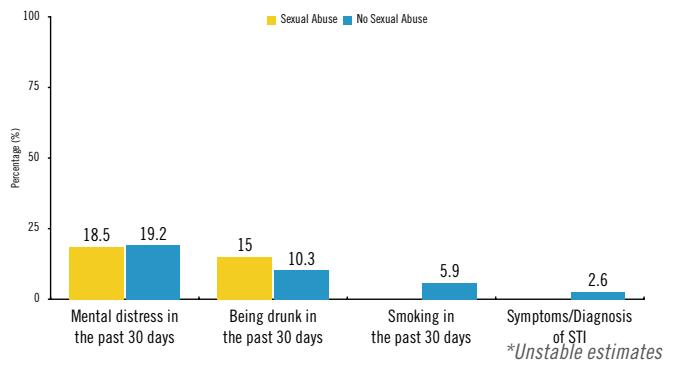


Figure 8.3 Percentage of male children aged 13-17 years who reported health outcomes among those who did and did not experience sexual abuse in the 12 months prior to the survey

### 8.1.3 Experiences of sexual abuse in childhood and current health status: youth aged 19-24, in the 12 months prior to the survey

Among females in this age group who had experienced their most recent sexual abuse episode in the past 12 months, 53 per cent had experienced mental distress in the past 30 days and 25 per cent reported having thought of suicide. Among those with no history of sexual abuse in the last 12 months, 28 per cent had experienced mental distress in the past 30 days, 6 per cent had thought of suicide, 29 per cent had attempted suicide and 6 per cent had had symptoms of or been diagnosed with STIs (Figure 8.4 and Appendix B, Table 8.2.3.1)

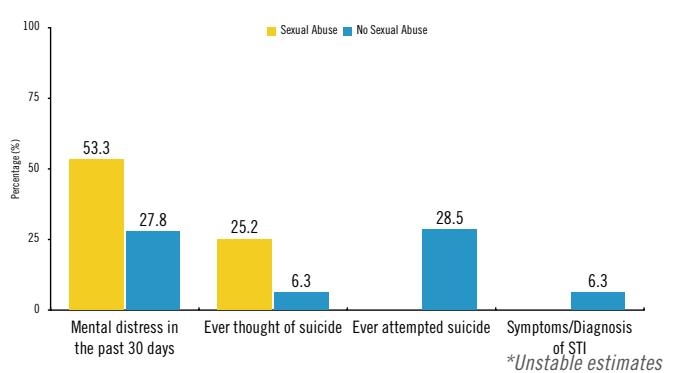


Figure 8.4 Percentage of female youth aged 19-24 years who reported health outcomes among those who did and did not experience sexual abuse in the 12 months prior to the survey

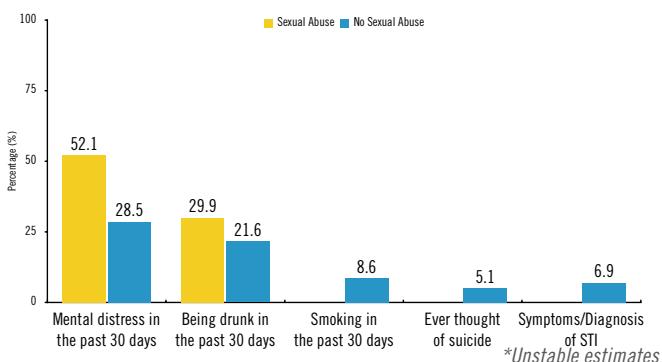


Figure 8.5 Percentage of male youth aged 19-24 years who reported health outcomes among those who did and did not experience sexual abuse in the 12 months prior to the survey

Mental distress (52 per cent) and being drunk (30 per cent) in the past 30 days were the most reported health outcomes among males aged 19-24 who had experienced sexual abuse in the past 12 months. For males in the same age group who had not experienced sexual abuse in the past 12 months, 29 per cent had experienced mental distress, 22 per cent had been drunk and 9 per cent had smoked in the past 30 days. Ideas of suicide (5 per cent) and having symptoms of or being diagnosed with STIs (7 per cent) were the least reported health outcomes (Figure 8.5 and Appendix B, Tables 8.2.3.2).

## 8.2 Experiences of physical violence in childhood and current health status



### 8.2.1 Experiences of physical violence in childhood and current health status among those aged 18-24, before the age of 18

Among females in this age group who had experienced physical violence before the age of 18, 37 per cent had also experienced mental distress in the past 30 days, compared to 33 per cent of those with no history of childhood physical violence. Twenty per cent of females who had experienced physical violence before the age of 18 had considered suicide, compared to 6 per cent of females with no experience of childhood physical violence. For females in this age group who had not experienced physical violence, 47 per cent reported suicide attempts. Ten per cent of females with experience of childhood physical violence and 6 per cent of those without experience of childhood physical violence had had symptoms of or had been diagnosed with STIs (Figure 8.6 and Appendix B, Table 8.2.1.1).

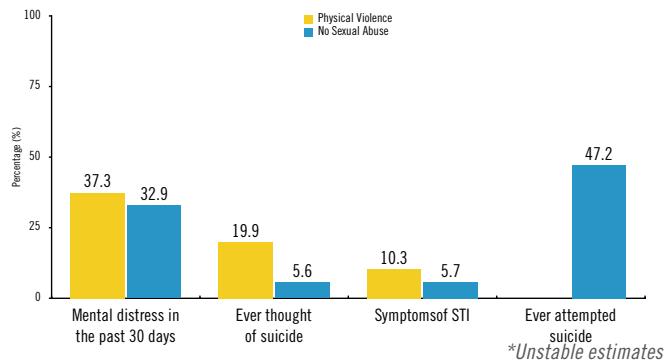


Figure 8.6 Percent of female youth aged 18-24 years who reported health outcomes among those who did and did not experience physical violence prior to age 18

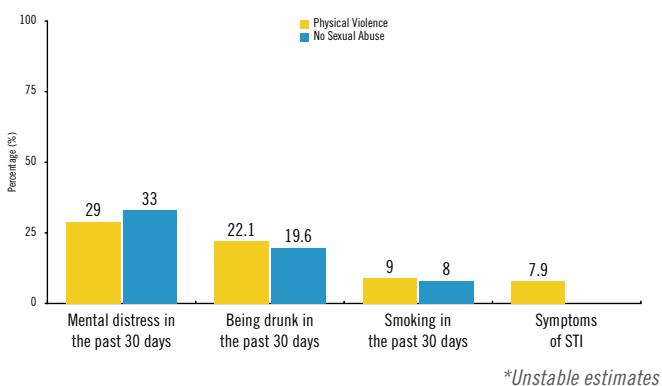


Figure 8.7 Percentage of male youth aged 18-24 years who reported health outcomes among those who did and did not experience physical violence prior to age 18

Twenty-nine per cent of males in this age group who had experienced physical violence before the age of 18 had also experienced mental distress. Other health outcomes were, in decreasing order of magnitude: having been drunk in the past 30 days (22 per cent); smoking in the past 30 days (9 per cent); having symptoms of or being diagnosed with STIs (8 per cent); and ideas of suicide (7 per cent). Among males who had not experienced physical violence during childhood, mental distress (33 per cent) was the predominant health outcome, followed by having been drunk in the past 30 days and smoking in the past 30 days (8 per cent) (Figure 8.7 and Appendix B, Table 8.2.1.2.)

### 8.2.2 Experiences of physical violence in childhood and current health status: children aged 13-17, in the 12 months prior to the survey

Twenty-six per cent of females with a history of physical violence in the past 12 months had experienced mental distress in the past 30 days, compared to 19 per cent of those with no history of childhood physical violence (Figure 8.8 and Appendix B, Table 8.2.2.1).

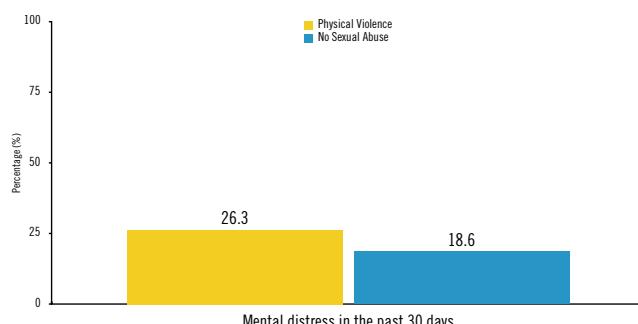
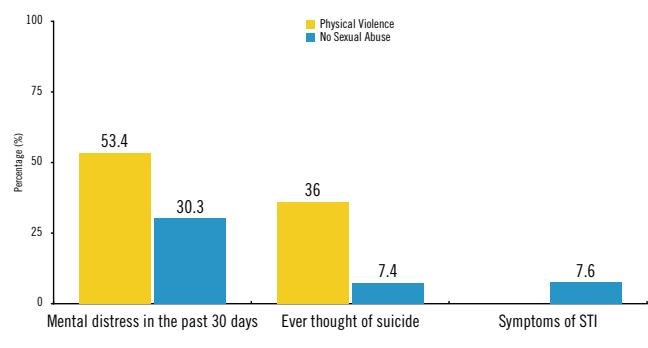


Figure 8.8 Percentage of female children aged 13-17 years who reported health outcomes among those who did and did not experience physical violence

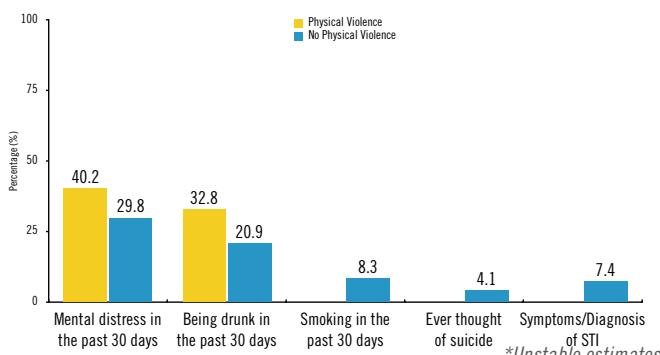
### 8.2.3. Experiences of physical violence in childhood and current health status: youth aged 19-24, in the 12 months prior to the survey

Among female youth who had experienced physical violence in the past 12 months, 53 per cent had felt mental distress in the past 30 days and 36 per cent had considered suicide. For those with no history of physical violence in the past 12 months, 30 per cent had experienced mental distress in the past 30 days, 7 per cent had thought of suicide and 8 per cent had had symptoms of or had been diagnosed with STIs (Figure 8.9 and Appendix B, Table 8.2.3.1).



\*Unstable estimates

Figure 8.9 Percentage of female youth aged 19-24 years who reported health outcomes among those who did and did not experience physical violence



\*Unstable estimates

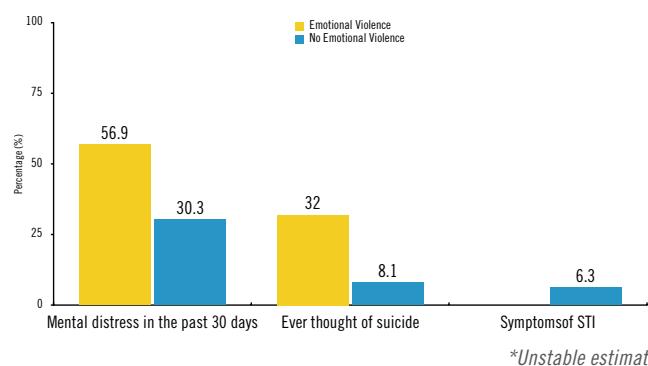
Figure 8.10 Percentage of male youth aged 19-24 years who reported health outcomes among those who did and did not experience physical violence

Among male youth who had experienced physical violence in the past 12 months, mental distress (40 per cent) and being drunk (33 per cent) in the 30 days were the most reported health outcomes. For males with no history of physical violence in the past 12 months, 30 per cent reported mental distress, 21 per cent reported being drunk and 8 per cent reported smoking in the past 30 days. Suicide ideation (4 per cent) and symptoms or diagnosis of STIs (7 per cent) were the least reported health outcomes (Figure 8.10 and Appendix B, Table 8.2.3.2).

## 8.3 Experiences of emotional violence in childhood and current health status

### 8.3.1 Experiences of emotional violence in childhood and current health status: those aged 18-24, before the age of 18

Fifty-seven per cent of females in this age group with a history of childhood emotional violence had experienced mental distress in the past 30 days and 32 per cent had considered suicide. Among those with no history of childhood emotional violence, 30 per cent reported mental distress, 8 per cent had considered suicide and 6 per cent had reported symptoms of or had been diagnosed with STIs. The results show that females aged 18-24 with a history of childhood emotional violence are significantly more likely to have considered suicide than those with no experience of childhood emotional violence (Figure 8.11 and Appendix B, Table 8.2.1.1).



\*Unstable estimates

Figure 8.11 Percentage of female youth aged 18-24 years who reported health outcomes among those who did and did not experience emotional violence prior to age 18

Among males in this age group who had experienced emotional violence before the age of 18, 45 per cent had experienced mental distress in the past 30 days and 35 per cent had been drunk in the past 30 days. Among those with no experience of childhood emotional violence, 25 per cent reported mental distress, 18 per cent reported being drunk and 8 per cent reported smoking in the past 30 days. Suicide ideation (4 per cent) and symptoms or diagnosis of STIs (7 per cent) were the least-reported health outcomes (Figure 8.12 and Appendix B, Table 8.2.1.2).

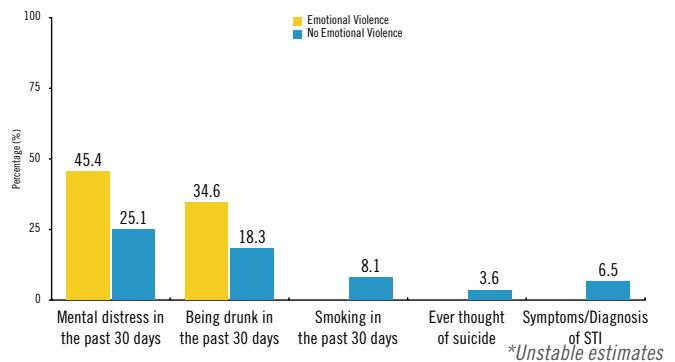


Figure 8.12 Percentage of male youth aged 18-24 years who reported health outcomes among those who did and did not experience emotional violence prior to age 18

### 8.3.2. Experiences of emotional violence in childhood and current health status: children aged 13-17, in the past 12 months

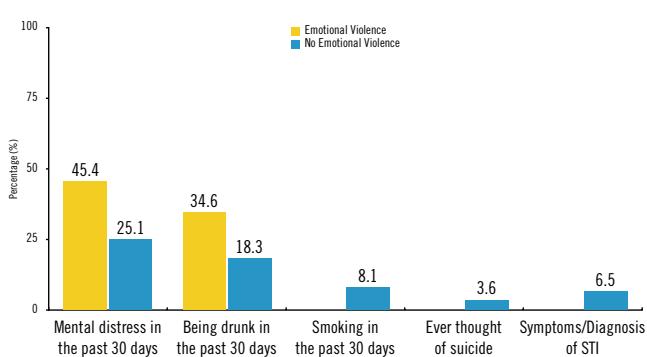


Figure 8.13 Percentage of female children aged 13-17 years who reported health outcomes among those who did and did not experience sexual abuse or physical or emotional violence in the past 12 months prior to the survey

Thirty-two per cent of males in this age group with experience of emotional violence in the last 12 months felt mental distress and 21 per cent had been drunk in the past 30 days, while 14 per cent of those with no experience of emotional violence in the last 12 months had experienced mental distress and 11 per cent had been drunk in the past 30 days. Smoking in the past 30 days (4 per cent) and symptoms or diagnosis of STIs (2 per cent) were the least-reported health outcomes (Figure 8.14 and Appendix B, Table 8.2.2.2).

Among females in this age group who had experienced emotional violence in the past 12 months, 38 per cent had experienced mental distress in the past 30 days, compared to 16 per cent of those with no history of emotional violence in the last 12 months. However, this difference is not statistically significant (Figure 8.13 and Appendix B, Table 8.2.2.1).

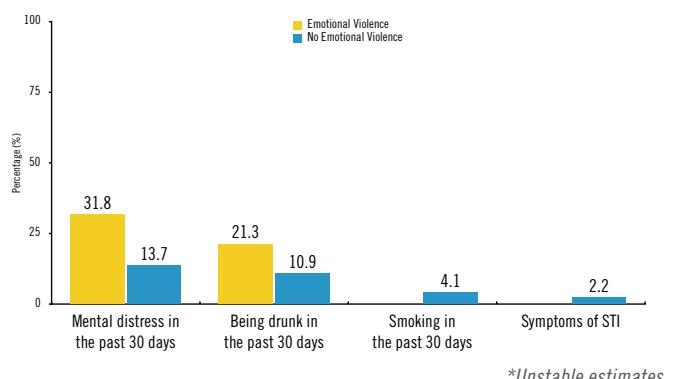
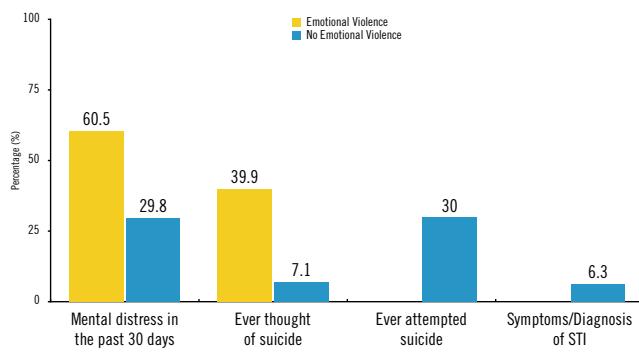


Figure 8.14 Percent of male children aged 13-17 years who reported health outcomes among those who did and did not experience sexual abuse or physical or emotional violence in the past 12 months prior to the survey

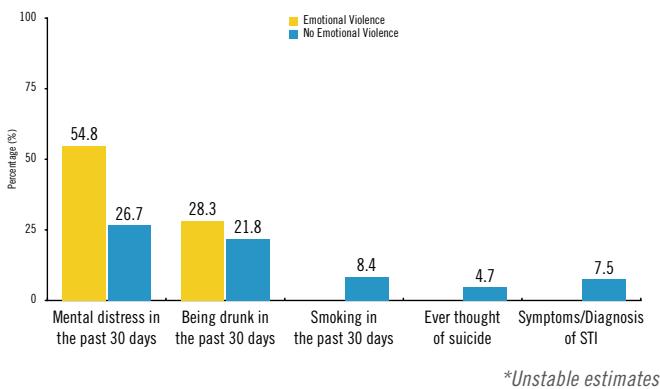
### 8.3.3. Experiences of emotional violence in childhood and current health status: youth aged 19-24, in the past 12 months

Sixty-one per cent of females in this age group with a history of emotional violence in the last 12 months had experienced mental distress in the past 30 days and 40 per cent reported having considered suicide. Among those with no experience of emotional violence in the last 12 months, 30 per cent reported mental distress in the past 30 days and 30 per cent had attempted suicide. Suicide ideation (7 per cent) and symptoms or diagnosis of STIs (6 per cent) were the least-reported health outcomes (Figure 8.15 and Appendix B, Table 8.2.3.1).



\*Unstable estimates

Figure 8.15 Percentage of female youth aged 19-24 years who reported health outcomes among those who did and did not experience emotional violence in the past 12 months prior to the survey



\*Unstable estimates

Figure 8.16 Percentage of male youth aged 19-24 years who reported health outcomes among those who did and did not experience emotional violence in the past 12 months prior to the survey

Among male youth who had experienced emotional violence in the past 12 months, 55 per cent reported mental distress and 28 per cent reported being drunk in the past 30 days. Among those who had not experienced emotional violence in the past 12 months, 27 per cent reported mental distress, 22 per cent had been drunk and 8 per cent had been smoking in the past 30 days. Suicide ideation (5 per cent) and symptoms or diagnosis of STIs (8 per cent) were the least-reported health outcomes (Figure 8.16 and Appendix B, Table 8.2.3.2).

## 8.4 Experiences of unwanted completed sex and pregnancy

For females, data were analyzed on pregnancy and unwanted completed sex (which includes physically forced sex or pressured sex in childhood). Among those aged 18-24 who had experienced sexual abuse in childhood, 48 per cent got pregnant as a result of unwanted completed sex. Among those aged 13-17 who had experienced sexual abuse in the past 12 months, the number was too low to report (Appendix B, Tables 8.3.1; 8.3.2). Among females aged 19-24 who had experienced unwanted completed sex in the past 12 months, 51 per cent reported getting pregnant (Appendix B, 8.3.3).

# SECTION 9

## SEXUAL RISK-TAKING BEHAVIOURS AND EXPOSURE TO VIOLENCE IN CHILDHOOD

This section examines the link between prevalence of sexual risk-taking behaviours – including multiple sexual partners, infrequent condom use,<sup>30</sup> and exploitative sex in the past 12 months – and exposure to violence in childhood. The analyses were restricted to females and males aged 19-24. The primary reason for focusing on this age group is to ensure that the exposure to violence in childhood and the risk-taking behaviours are separated in time. The exposure to violence in childhood preceded the involvement in sexual risk-taking behaviours, and there is no confusion between the directionality of the association between exposure to violence and sexual risk-taking.

### HIGHLIGHTS – sexual risk-taking

- Twenty percent of sexually active males and 16 percent of sexually active females aged 19-24 reported infrequent condom use in the past 12 months.
- Among sexually active males aged 19-24, 17 percent reported having had two or more sex partners in the past 12 months.
- Fifty-four percent of females with experience of sexual abuse before the age of 18 and who had had sexual intercourse in the past 12 months had not used condoms in the past 12 months.

### 9.1 Sexual risk-taking behaviours: 19-24 year olds in the past 12 months

Among sexually active females aged 19-24 who had experienced sexual abuse in childhood and who had had sexual intercourse in the past 12 months, 16 percent had used condoms infrequently in the past 12 months and 6 percent had engaged in transactional sex (meaning sex in exchange for food, favours or money) in the last 12 months.

<sup>30</sup>The condom use of males and females who were married, had had one sexual partner in the previous 12 months, and were not or infrequently using a condom was not classified as low condom use because the reported sex most likely was with a husband or wife.

Among males, 17 percent reported having two or more sex partners in the last 12 months, and 20 percent had used condoms infrequently in the last 12 months (Figure 9.1 and Appendix B Table 9.1).

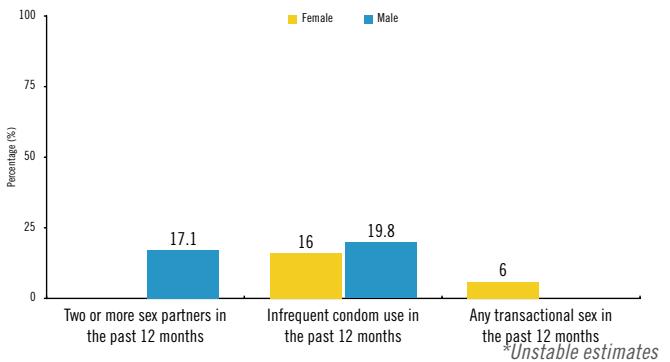


Figure 9.1 Sexual risk-taking behaviours in the past 12 months among 19-24 years old who had ever experienced sexual violence and reported having sexual intercourse in the past 12 months

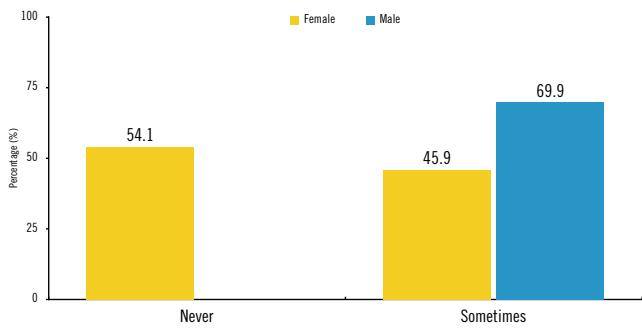


Figure 9.2 Infrequent condom use among youth aged 19-24 who experienced sexual abuse before the age of 18 and reported having sexual intercourse in the past 12 months

Fifty-four percent of females with experience of sexual abuse prior to age 18 who engaged in sexual intercourse in the past 12 months had never used condoms in the past 12 months.

Among males who were sexually active in the past 12 months, 70 percent of those with experience of sexual abuse before the age of 18 had used condoms infrequently.

# SECTION 10

## HIV/AIDS TESTING BEHAVIOURS, TESTING KNOWLEDGE AND ASSOCIATION WITH SEXUAL ABUSE IN CHILDHOOD

The main objective of this section is to describe the knowledge of HIV testing services and HIV-testing behaviours of males and females who experienced at least one incident of sexual abuse before the age of 18. Although unwanted sexual touching and unwanted attempted sexual intercourse are low-risk for direct HIV exposure, all types of sexual abuse may indirectly increase the risk of HIV by reducing a person's ability to negotiate safe sex and increasing their engagement in sexual risk-taking behaviours later in life.

### HIGHLIGHTS

- Among those who have ever had sexual intercourse, approximately 95 percent of females and 89 percent of males aged 13-17, and 100 percent of females and 98 percent of males aged 18-24 knew where to go for an HIV test.
- Sixty-five percent of females and 54 percent of males aged 13-17 who have ever had sexual intercourse have been tested for HIV.
- Among youth aged 18-24 who experienced sexual intercourse prior to the age of 18, 97 percent of females and 89 percent of males have been tested for HIV.

### 10.1 General knowledge and behaviours related to HIV-testing

Among those aged 13-17 who have ever had sexual intercourse, 95 per cent of females and 89 per cent of males knew where to go for an HIV test. About half of the males (54 per cent) and two thirds of the females (65 per cent) had been tested for HIV. Among those who had been tested for HIV, 93 per cent of females and 97 per cent of males had received the test results.

Among those aged 18-24 who have ever had sexual intercourse, all of the females and almost all of the males (98 per cent) knew where to go for an HIV test. The overwhelming majority of females (97 per cent) and males (89 per cent) had been tested for HIV. Of those who had been tested, very nearly all (99 per cent of the females and 97 per cent of the males) had received their test results (Figures 10.1.1 and 10.1.2 and Appendix B, Table 10.1).

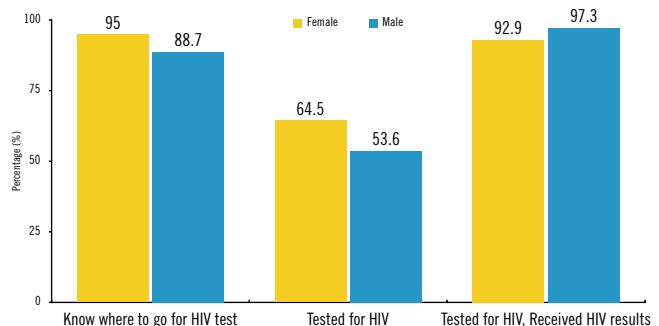


Figure 10.1.1 HIV-testing knowledge and behaviour among females and males aged 13-17 who have ever had sexual intercourse

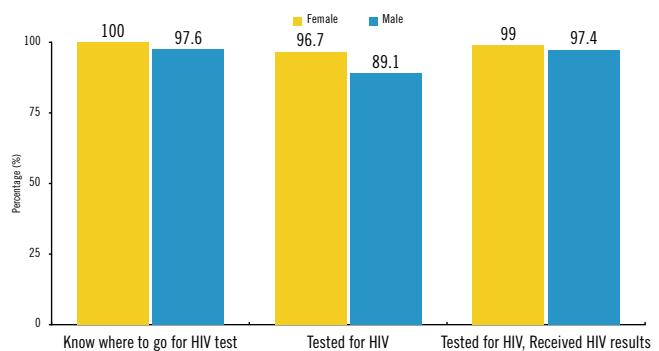


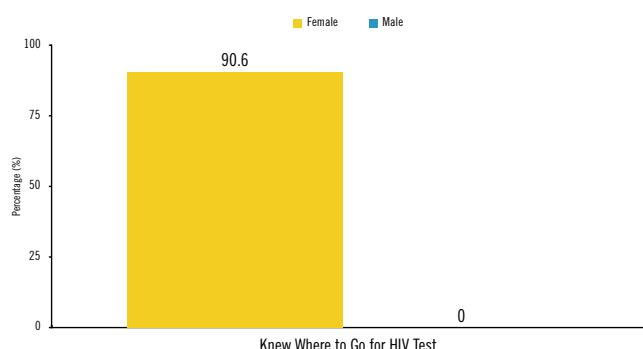
Figure 10.1.2 HIV-testing knowledge and behaviour among youth aged 18-24 who have ever had sexual intercourse

## 10.2 SEXUAL ABUSE AND KNOWLEDGE AND BEHAVIOURS RELATED TO HIV-TESTING: CHILDREN AGED 13-17, IN THE 12 MONTHS PRIOR TO THE SURVEY



Among females aged 13-17 who have ever had sexual intercourse, 91 per cent of those who had experienced sexual abuse in the past 12 months knew where to go for an HIV test, versus 96 per cent of females who had engaged in sexual intercourse with no experience of sexual abuse in the past 12 months (Figure 10.3).

Data reflecting HIV-testing behaviour among males aged 13-17 who had ever had sexual intercourse and had experienced sexual abuse in the past 12 months was too low and unstable to be reported here.



\*Unstable estimates

Figure 10.3 HIV testing knowledge and behaviour among children aged 13-17 years who have ever had sexual intercourse and experienced sexual abuse in the past 12 months

## 10.3

## Sexual abuse and knowledge and behaviours related to HIV-testing: youth aged 18-24, before the age of 18

3

All of the females and males in this age group who had ever had sexual intercourse and had experienced sexual abuse before the age of 18 knew where to go for an HIV test. Of all those who had been tested for HIV, all of them had received the results (Figure 10.4 and Appendix B, Table 10.1.1).

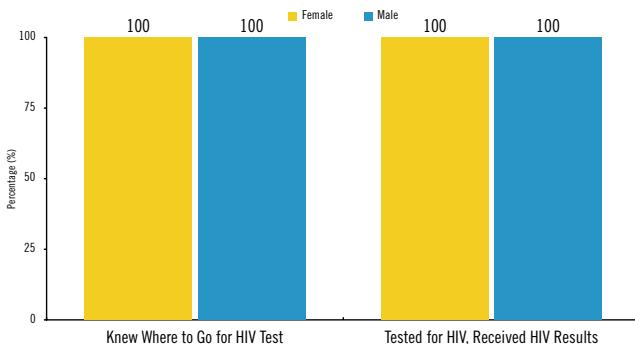
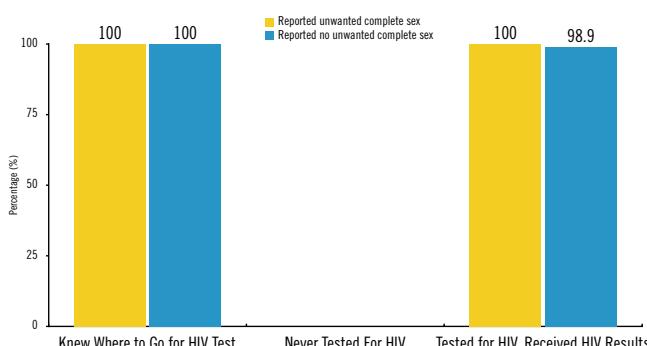


Figure 10.4 HIV-testing knowledge and behaviour among youths aged 18-24 years who have ever had sexual intercourse and experienced sexual abuse prior to age 18

## 10.4

## SEXUAL ABUSE AND KNOWLEDGE AND BEHAVIOURS RELATED TO HIV-TESTING: YOUTH AGED 19-24, IN THE 12 MONTHS PRIOR TO THE SURVEY

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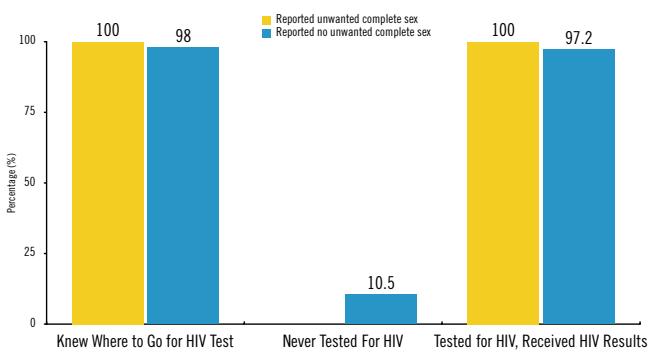


\*Unstable estimates.

Figure 10.5 HIV-testing knowledge and behaviour among females aged 19-24 years who have ever had sexual intercourse by presence or absence of unwanted complete sex in the past 12 months

All of the males in this age group who had ever had sexual intercourse and who had experienced unwanted completed sex in the past 12 months knew where to go for an HIV test. Among those who had taken the HIV test, all had received their results. For the males who had engaged in sexual intercourse without experiencing unwanted completed sex in the past 12 months, 98 per cent knew where they could get tested for HIV; among those who had taken the HIV test, 97 per cent had received their results (Figure 10.6).

All of the females in this age group who had ever had sexual intercourse and who had experienced unwanted completed sex in the past 12 months knew where to go for an HIV test. All those who had taken the HIV test had received the results. Similarly, females who had engaged in sexual intercourse without experiencing unwanted completed sex in the past 12 months all knew where they could get tested for HIV, and 99 per cent of those who had taken the HIV test had received their results (Figure 10.5).



\*Unstable estimates

Figure 10.6 HIV-testing knowledge and behaviour among males aged 19-24 years who have ever had sexual intercourse by presence or absence of unwanted complete sex in the past 12 months



# SECTION 11

## BELIEFS TOWARD GENDER AND VIOLENCE

This section examines beliefs towards and acceptance of the use of physical violence in marriage by husbands against their wives. It also looks at beliefs about the role of gender in sexual practices and intimate partner violence.

### HIGHLIGHTS

- Thirty-three percent of females aged 13-17 versus 20 % of males aged 13-17 believed that not taking care of the children is the main acceptable reason for a man to hit or beat his wife.
- Similarly, 25 % of females aged 18-24 versus 15 % of males aged 18-24 believed that not taking care of the children is the main acceptable reason for a man to hit or beat his wife.
- The most common belief among females and males aged 13-17 (71 % and 69 %, respectively) was that women who carry condoms have sex with a lot of men.
- Among youth aged 18-24 years, 69 % of females believed that men need to have sex with other women even if they have a good relationship with their wives, whereas 62 % of males believe that women who carry condoms have sex with a lot of men.
- Among children aged 13-17 years, 7 % of both males and females reported having committed violence against other persons.
- Among youths aged 18-24, males reported committing physical violence against other persons significantly more than females did (13 % and 3 %, respectively).
- Males aged 18-24 who had experienced physical violence in the 12 months before the survey were significantly more likely to use violence (12 %) than those who had not experienced physical violence (4 %).

# 11.1 Beliefs toward spousal violence



In the survey, respondents were asked whether a husband was justified in hitting or beating his wife under five different circumstances: if she goes out without telling him, if she neglects the children, if she argues with him, if she refuses to have sex with him, or if she burns the food.

Neglecting the children was the most commonly accepted justification for a husband to hit or beat his wife among both females and males of both age groups. Among female, 33 per cent of those aged 13-17 and 25 per cent of those aged 18-24; among males, 20 per cent of those aged 13-17 and 15 per cent of those aged 18-24.

For females aged 13-17 years old, arguing with the husband was the second-most cited justification (20 per cent), followed by going out without telling her husband (19 per cent); while the second most-cited justification among females aged 18-24 was going out without telling the husband (18 per cent). Responses from males aged 13-17 put refusing to have sex with a husband in second place (10 per cent); among males aged 18-24, 7 per cent cited going out without telling him as the second most common reason (95 per cent) (Figures 11.1 and 11.2, and Appendix B, Tables 11.1.1 and 11.1.2).

Females aged 13-17 years (19 per cent) were significantly more likely than males in the same age group (9 per cent) to cite a woman going out without telling her partner as a justification for violence. Females aged 18-24 were significantly more likely than males in the same age group to cite going out without telling him (18 per cent versus 7 per cent) and arguing with him (17 per cent versus 5 per cent) as reasons to justify a husband beating his wife.

Other reasons acceptable to female respondents included refusing to have sex with her husband (18 per cent for those aged 13-17 and 16 per cent for those aged 18-24), and burning the food (11 per cent for those aged 13-17 and 7 per cent for those aged 18-24).

Although somewhat dissimilar in the ranking of the reasons, males were significantly less likely to hold these beliefs. Male respondents aged 13-17 cited refusal to have sex as the second acceptable reason (10 per cent), followed by arguing with her husband, or going out without telling him (both 9 per cent); while the males aged 18-24 cited going out without telling her husband (7 per cent) as the second acceptable reason for the husband to hit or beat his wife, followed by 6 per cent who thought that refusing to have sex and 5 per cent who believed that arguing with her husband are all acceptable reasons to be hit or beaten by the husband. Finally, burning the food was the least acceptable reason for a husband to beat his wife across sexes and age ranges, as only 3 per cent of the males and 11 per cent of females aged 13-17 believed that a wife could be hit by her husband when she burns food. Among those aged 18-24, 3 per cent of the males and 7 per cent of the females believed the same (Figures 11.1 and 11.2 and Appendix B, Tables 11.1.1 and 11.1.2).

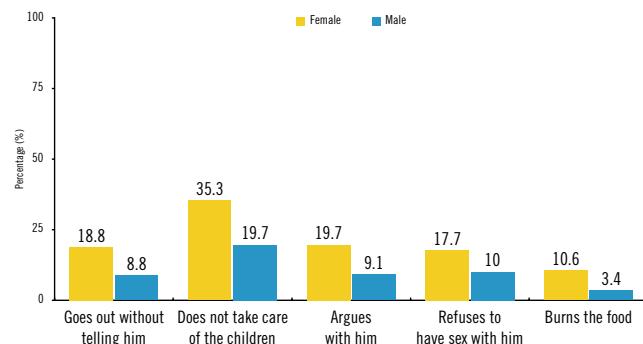


Figure 11.1 Endorsement of one or more circumstances where spousal violence is acceptable among females and males aged 13-17

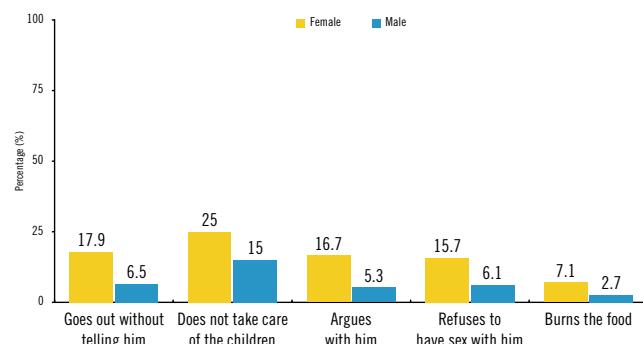


Figure 11.2 Endorsement of one or more circumstances where spousal violence is acceptable among females and males aged 18-24

## 11.2 Beliefs toward the role of gender in sexual practices and intimate partner violence



The survey examined beliefs about the role of gender in sexual practices and intimate partner violence, including that men (not women) should decide when to have sex; that men need more sex than women; that men need to have sex with other women even if they have good relationships with their wives; that women who carry condoms have sex with a lot of men; that a woman should tolerate violence in order to keep her family together.

Among children aged 13-17, for both females and males, the most common belief was that women who carry condoms have sex with lot men (71 per cent and 69 per cent, respectively). They also endorsed the belief that women should tolerate violence to keep her family together at almost similar rates (61 per cent and 62 per cent, respectively). Sixty-two per cent of females aged 13-17 believed that men need to have sex with other women even if they have good relationships with their wives; only about half the males (49 per cent) held the same belief. Among this same age range, 49 per cent of females, and 41 per cent of males believed that men need more sex than women. Finally, just over one quarter (27 per cent) of both females and males believed that men, not women, have the right to decide when to have sex (Figure 11.3 and Appendix B, table 11.2.1).

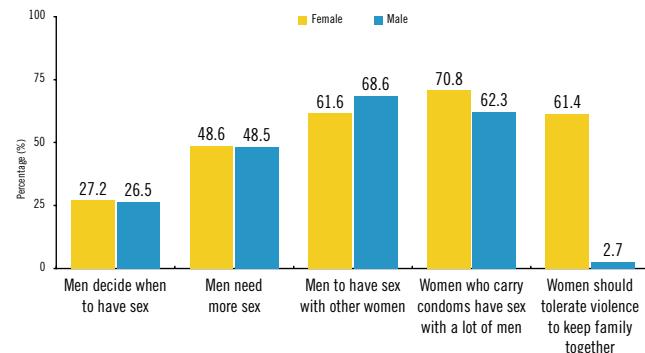


Figure 11.3 Beliefs towards the role of gender, sexual practices and intimate partner violence among females and males aged 13-17

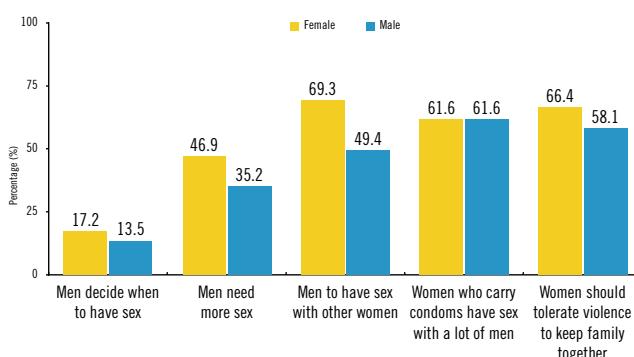


Figure 11.4 Beliefs towards the role of gender, sexual practices and intimate partner violence among females and males aged 18-24

Among youth aged 18-24 years, 69 per cent of the females believed that men need to have sex with other women even if they have good relationships with their wives; 66 per cent of the females believed that women should tolerate violence to keep her family together, 62 per cent believed that women who carry condoms have sex with a lots of men; 47 per cent believed that men need more sex than women; and 17 per cent believed that men not women have the right to decide when to have sex.

For males in the same age group, most of them (62 per cent) believed that women who carry condoms have sex with a lot of men; more than half (58 per cent) believed that women should tolerate violence to keep her family together; half believed that men need to have sex with other women even if they have good relationships with their wives; and only 14 per cent of them believed that only men have the right to decide when to have sex (Figure 11.4 and Appendix B, Table 11.2.2).

## 11.3 Prevalence of perpetration among children and youth

The perpetration of violence (defined for the purpose of this section as: punching, kicking, whipping or beating with an object; choking, smothering, trying to drown or intentionally burning or scalding; or using or threatening to use a weapon, such as a knife or gun, against them; or forcing non-consensual sex) by those aged 13-24 against a current or former partner or another person was assessed. The association of perpetration of violence with childhood experience of violence is also highlighted here.

Among children aged 13-17, 7 per cent of females and 8 per cent of males had committed physical or sexual violence against another person; among those aged 18-24, only 3 per cent of females versus 13 per cent of males had committed such violence (Figure 11.5 and Appendix B, Table 11.3).

Among males aged 18-24, those with prior experience of sexual abuse (18 per cent) or physical violence (18 per cent) before the age of 18 were more likely to commit physical or sexual violence against another person than those with no experience of sexual abuse (13 per cent) or physical violence (6 per cent). However, the differences were not statistically significant.

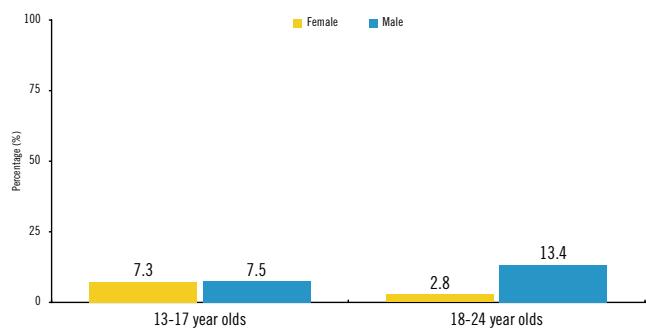


Figure 11.5 Percentage of females and males who reported using violence against another person, by age group

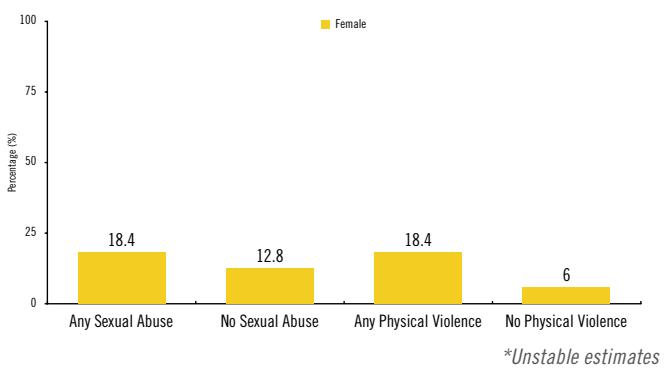


Figure 11.6 Percentage of females and males aged 18-24 years who reported using violence against another person among those who did and did not experience sexual abuse or physical violence prior to age 18

Females who had experienced physical violence in the 12 months before the survey (13 per cent) were not significantly more likely to report using violence against another person than those who did not (5 per cent). Conversely, males who had experienced physical violence in the 12 months before the survey (12 per cent) were significantly more likely to use violence than those who had not experienced physical violence (4 per cent) (Appendix B, Table 11.4.2). The data for males and females who had experienced sexual abuse in the past 12 months was too low and produced unstable estimates; they are not reported here.

Among males aged 13-24 who had ever had a partner, 18 per cent of those aged 13-17 and 14 per cent of those aged 18-24 had committed violence against a current or previous girlfriend, romantic partner wife. The numbers of females in this category were too low to be reported.

Among males aged 13-17 with experience of physical violence, 27 per cent had committed violence against a current or previous girlfriend, romantic partner or wife. Among males aged 13-17 with no experience of sexual abuse, 16 per cent had committed violence against a current or previous girlfriend, romantic partner or wife (Appendix B, Table 11.6.2).

Among males aged 18-24, those with prior experience of sexual abuse (21 per cent) or physical violence (19 per cent) prior to age 18 were significantly more likely to use violence against a current or previous girlfriend, romantic partner or wife than those with no experience of sexual abuse (14 per cent) or physical violence (7 per cent). The numbers collected for females in this age range and categories were low and produced unstable estimates which are not reported here (Appendix B, Table 11.6.1). The differences in committing violence against another person are not statistically significant when comparing the status of experience of sexual abuse.

Among youth aged 19-24, males who had experienced sexual abuse or physical violence in the past 12 months were significantly less likely to commit physical or sexual violence than those with no experience of sexual violence (14 %) or physical violence (14 %) (Appendix B, Table 11.6.3).

Data collected for the females in this age range and rubric were low and produced unstable estimates which are not reported here (Figure 11.6 and Appendix B Tables 11.4.1).

Data on the perpetration of violence and experiences of violence in the 12 months before the survey were analyzed for males and females aged 13-17 to develop a picture of the current prevalence and context of violence.

# SECTION 12

## DISCUSSION

### 12.1 Introduction



Violence against children has been identified as a significant child protection issue in Rwanda, as it is in many other parts of the world. Until now, scientific evidence on its prevalence was lacking. The VACYS 2015-16 provides the first nationally representative data on the prevalence of sexual, physical and emotional violence among girls and boys in Rwanda. This report describes the context and conditions under which violence against children occurs, including co-occurrence of different types of violence, as well as the key health consequences. The report also reveals data about perpetrators; children's disclosure; service-seeking behaviour and service utilization; the relationship between exposure to sexual abuse and HIV-testing patterns and high risk sexual behaviours; and beliefs towards gender and intimate-partner violence.

Violence against children erodes the strong foundation that children require for leading healthy and productive lives, increasing vulnerability and leading to negative behavioural, cognitive, mental health, sexual and reproductive health problems, chronic diseases and social impacts.<sup>31</sup> Numerous studies on the intergenerational transmission of violence suggest that children, particularly males, who are exposed to violence are more likely to become perpetrators of violence later in life and that females more likely to become victims of intimate partner violence.<sup>32</sup> The growing body of evidence on the social and economic costs of violence against children makes the issue of violence of children not only a moral and social imperative, but also a critical issue in terms of human capital and economic development.

The 2006 UN report on violence against children<sup>33</sup> documented the global range and scale of this problem and was a catalyst for action to promote the protection of children from violence and establish systems of response for children affected by violence. Developing and implementing systematic national data-collection and research efforts was one of the study's key recommendations. The VACYS 2015-16 not only represents a critical step in the recognition of global goals but, most importantly, provides Rwanda the unprecedented opportunity to develop evidence-driven policies and plans to prevent and respond to violence. It also provides a baseline from which these efforts may be measured in coming years.

<sup>31</sup>WHO 2015.

<sup>32</sup>Glasser et al. 2001; Jewkes et al. 2006; WHO 2007.

<sup>33</sup>Pinheiro, 2006.

## 12.2 Key findings



The results of VACYS 2015-16 indicate that sexual, physical and emotional violence against children is a serious concern. Before the age of 18, around one in five females and one in 10 males in Rwanda have been exposed to sexual violence, almost four in 10 of females and six in 10 of males have been exposed to physical violence, and about one in 10 females and two in 10 males have faced emotional violence. Moreover, there was overlap in the occurrence of sexual, physical and emotional violence, with 15 per cent of all respondents having experienced more than one form of violence.

All forms of violence – sexual, physical and emotional – were experienced by children in Rwanda and the perpetrators of this violence are often near and known to the children. Sexual violence was most commonly perpetrated by partners (a spouse, boyfriend/girlfriend or romantic partner) and neighbours. The majority of perpetrators of sexual violence against girls were older, with a half of females and a third of males reporting that the perpetrator of at least one incident of sexual violence before the age of 18 was more than five years older than them. In relation to physical violence, children reported being punched, kicked or whipped mostly by parents, teachers and classmates. The most common authority figures to use physical violence against both females and males were parents and teachers. For emotional abuse, the most common perpetrators were parents and uncles/aunts.

For both females and males, sexual violence commonly took place in a home, either that of the perpetrator or that of the child, and on roads/streets during the evening. The high incidence of sexual violence in a child's home or on the street – one being a place assumed to be safe and the other being unavoidable (as most of the children are students and have to attend schools daily using streets and roads) – thus presents a significant challenge to preventing and responding to sexual violence.

Both reporting of violence and subsequent access to services is poor. Those who experienced sexual violence sometimes told someone about their experience, but rarely received services. The study found that four in 10 females and two thirds of males who had experienced childhood sexual violence did not report their experiences to anyone. For females indicating their primary personal reasons for not reporting sexual violence, the most frequently cited reason was that they thought it was not a problem. Among those who experienced childhood sexual violence, awareness of services was high but service-seeking was uncommon.

Clearly a major challenge for improving and strengthening legal, health and social response services will be twofold: first, overcoming the silence of children who experience sexual violence (whose inhibitions prevent them from reporting the incident) and, second, ensuring that when children seek services, those services are available and provided with sensitivity and quality of care. Equally important is the provision of information to people who children naturally identify as their advocates – parents and friends.

In Rwanda, as has been shown worldwide, exposure to violence as a child was associated with a range of short-term health consequences in both females and males (e.g. mental distress, STIs and suicide ideation). These findings are consistent with decades of research in the neurobiological, behavioural and social sciences that indicate conclusively that childhood exposure to violence can impact the development of the brain and subsequent vulnerability to a broad range of mental and physical health problems, ranging from the short-term consequences identified in this study to long-term health outcomes such as cardiovascular disease and diabetes.<sup>34</sup> Reducing the prevalence of violence against children is therefore likely to reduce the incidence and cost of future mental and physical health problems in the population as a whole.

Many risk behaviours are common to both HIV/AIDS and sexual violence. Being sexually abused in childhood or adolescence has been shown to increase the likelihood of engaging in unprotected sex and in transactional sex, both of which are likely to increase the risk of acquiring HIV and STIs. This study revealed that about one in six sexually active females and males aged 19-24 who had experienced sexual abuse used condoms infrequently and that about one in six males aged 19-24 who had experienced sexual abuse reported having two or more sex partners in the last 12 months. This is particularly worrying given the increased risk of HIV transmission associated with unprotected sexual intercourse and the average rate of condom use amongst Rwandan population, which is at 91 per cent and 95 per cent among women and men, respectively.<sup>35</sup> Related to this issue, this study examined self-reported patterns of being tested for HIV/AIDS in relation to childhood sexual violence. Among children aged 13-17 who had engaged in sexual intercourse, around nine in 10 females knew where to go for an HIV test, but only around two in three females and half of the males reported having been tested for HIV. This is consistent with the Rwanda DHS 2014-15 findings that among youth aged 15-24 who have

<sup>34</sup>Cutajar et al. 2010; Testa et al. 2005; Jewkes et al. 2002.

<sup>35</sup>NISR DHS 2015.

had sexual intercourse in the past year, six in 10 young women and half of young men have been tested for HIV in the past year and received the results.

A number of sexual risk-taking behaviours were found to be associated with exposure to sexual violence as a child. About one in six males aged 19-24 who had ever experienced sexual abuse reported having two or more sex partners in the last 12 months.

This survey uncovered a trend in the context of Rwanda whereby the most recent DHS 2014-15 showed that a small percentage of women (1 per cent) and 5 per cent of men had had two or more sexual partners in the past 12 months. For males aged 19-24 who had engaged in sexual intercourse, having sex with two or more partners in the previous 12 months was higher among those with a history of childhood sexual violence. Among females and males 19-24 who have had sex, infrequent or no condom use was more prevalent among those with a history of sexual violence as a child. These findings reinforce other research in sub-Saharan Africa suggesting that violence can indirectly increase the risk of spreading HIV/AIDS by influencing risky behaviours that are known to be the drivers of the epidemic.<sup>36</sup> It is imperative that future prevention work with children and adults addresses the social dynamics and risk factors that reinforce the problem of sexual assault and violence – including, but not limited to, poverty, gender, age, income inequality, and alcohol and drug consumption.

Social acceptance of the use of violence by husbands against their wives was prevalent among both females and males in both age groups, with two in three believing that a female should tolerate violence to maintain family harmony and should not complain to anyone when beaten or abused by her husband. A quarter of females and more than one in seven of males aged 18-24, and one-third of females and about one-fifth of males aged 13-17 believed that a male was justified in hitting his wife if she neglected the children. Among males aged 13-17, the second most common justification for physical violence was if a wife refused to have sex with her husband, while for females in the same age group the second most common reason for a man hitting or beating his wife is when a woman argues with him. This suggests there are embedded social norms and values among young people that support the use of violence against women when their behaviour is perceived to be unacceptable. This finding, coupled with the high prevalence of physical violence against girls and boys uncovered in this survey, raises the important question on how to address the social and cultural legality of violence in Rwanda.

## 12.3 Strengths and limitations of the study

This is the first survey to provide nationally representative estimates of violence against children. Interviewers obtained high individual and household response rates among eligible participants, reflecting a strong design, well-trained interviewers and a national willingness to participate. The survey strengths also provide confidence that the sample interviewed was representative of 18-24 year olds and 13-17 year olds in Rwanda. An additional strength of this survey is the depth of information collected, notably on the context and circumstances of sexual abuse, which should considerably enhance both prevention and response efforts. As the ninth in the series, the VACYS 2015-16 was able to build on lessons learnt in previous studies. The ownership and oversight of the survey by the Government of Rwanda and national stakeholders has played a critical role in guiding the research and in translating the extensive data that has been gathered into action to prevent and respond to violence against children.

Despite the significant amount of information elicited by the study, certain limitations remain. First, as a household survey, the experiences of children living outside family care (e.g. children living on the streets, in institutional or residential care, or in detention) are not included. Neither are the experiences of children affected by violence in school settings. Research from around the world shows that these children are particularly vulnerable and likely to be at higher risk of violence, so the results from a household sample are probably conservative estimates of the true prevalence in Rwanda. On the other hand, when people think of violence against children, they often consider marginalized groups, whereas this survey clearly highlights that violence against children transcends social and economic status.

Second, data were collected only on the first and most recent event of sexual abuse for each of the four types of sexual abuse experienced. Similarly, contextual information was collected with regard only to the first and most recent events of emotional violence and for physical violence within each perpetrator category. Therefore, contextual data for those who experienced more than two events of a particular type of sexual abuse were not collected.

<sup>36</sup>Campbell et al. 2008.

Third, prevalence estimates are based on self-reports and might underestimate the actual prevalence. It is not uncommon for adults who have experienced violence in childhood to have no memory of that abuse, particularly when it occurred at a young age and by someone well known to the victim.<sup>37</sup> Additionally, some respondents might have been less likely to disclose an incident if the perpetrator was known to them.<sup>38</sup> Finally, the survey relied on self-reported HIV testing behaviour and STI symptoms and self-reported diagnosis. Future studies using biomarkers from respondents could further explore the relationship between sexual abuse victimization and HIV/STIs.

There are also limitations stemming from the Rwandan context. For example, as in many countries, gender norms and beliefs towards children (such as the expectation that children will be overtly submissive to their caregivers and other adults),<sup>39</sup> may have inhibited respondents' willingness to share information for fear of parental or societal retribution. Similarly gender norms, including constructions of masculinity which emphasize multiple sexual partners and power over women and girls,<sup>40</sup> have the potential to impact on the study. In order to protect respondents and improve rates of disclosure, interviewer rapport with respondents was emphasized throughout the training of field staff. Particular emphasis was placed on maintaining and assuring respondents' privacy and confidentiality throughout the interview. And, to moderate the impact of field staff gender beliefs, field staff received training on gender issues and the importance of putting aside personal beliefs to conduct neutral and non-judgmental interviews.

Knowing the magnitude of the problem of violence against children and the contexts in which violence occurs are critically important when planning the next steps toward strengthening the protection of children in Rwanda. The data from the survey offer rich opportunities for further analysis of issues around violence against children. The fact that prevalence is most likely underestimated creates an even more urgent call to action for all stakeholders.

In future surveys and secondary data review of the VACYS, it will be important to build upon these initial findings and explore vulnerability factors, such as links between children's orphan status, marital status, educational attainment, engagement in economic activity, disability, etc. and their experience of violence. It will also be important to gather data on those groups of children not covered by this survey: children facing violence in school settings, or living and working on the streets, children in residential or institutional care, or in detention, and children with disabilities. A synthesis of existing research on VACYS would be useful. Undertaking future qualitative research is also important to enable further exploration of risk and protective factors for violence against children, especially the drivers of violence, and to explore in more depth the barriers to disclosure and support-seeking behaviour.

## 12.4 Implications for prevention and response

This study represents an important step toward addressing the problem of violence against children in Rwanda by providing critical evidence on the magnitude and key characteristics of the issue. The ability to describe the prevalence of violence at the national level is an essential first step towards preventing violence in communities and making the institutions that should provide protection and services to children accountable. Without adequate data, there is a risk that the issue of violence against children is compounded by misconceptions that see violence as a 'marginal phenomenon' that only affects certain categories of children and is perpetrated solely by offenders with biological predispositions to violent behaviour.<sup>41</sup> In reality, as the results of the survey show, violence against children is widespread and affects children from all backgrounds, and perpetrators are primarily those responsible for the care of children or with whom children interact frequently.

The study shows that much of the violence experienced by participants went undisclosed until the survey was conducted. Children were largely inhibited from telling someone because of individual factors; most commonly because they did not think what they experienced was a problem. This confirms the need of awareness of the harm caused by violence, including the emotional and psychological impacts. Other individual barriers, including fear of getting in trouble or the embarrassment children would cause to themselves or their family, indicate children in Rwanda are not encouraged to voice their opinions or concerns. It also points to the acceptance of violence by adults and wider society, as there are few reporting mechanisms and obvious routes for children to seek help. These findings serve as a call to action for sectors responsible for providing services to respond to violence against children, including social services, health, law enforcement and justice. The findings also highlight the important role parents, communities and the media need to play in influencing attitudes towards, and responses to, violence.

<sup>37</sup>Williams 1994.

<sup>38</sup>Ullman 2003.

<sup>39</sup>Mbakogu 2004.

<sup>40</sup>Lalor 2008.

<sup>41</sup>UNICEF 2015.

The legal status of corporal punishment is unlikely to reduce the perpetration of violence in Rwanda. This survey did not investigate the views of parents and teachers relating to corporal punishment and whether they approve or disapprove of it, or whether many have simply never questioned its role in child-rearing or education. Notwithstanding, the prevalence of violence perpetrated by parents and teachers shows the need for awareness and skills on more constructive and less harmful disciplinary methods in the home and at school. Such a change of approach has the potential to promote learning and development, understanding and ultimately improved behaviour among children, with a subsequent reduction in the need for physical and emotional violence.

The survey findings on beliefs and behaviour, combined with the prevalence of violence in childhood and the lack of disclosure and help-seeking behaviour, portray a complex picture of immediate and longer-term consequences of failing to address violence against children in Rwanda. The survey revealed the short-term health impacts of violence against children including mental distress, STIs, self-harm and suicidal ideation. Other studies document further consequences including longer-term mental and physical health impacts, negative impacts on children's schooling and work performance as adults, as well as perpetration of violence or victimization in later life. These short- and longer-term consequences lead to high societal costs. The survey therefore highlights the importance of placing the problem of violence against children in the context of other public health, welfare and justice concerns, and prioritizing measures to prevent and respond to violence, given its significant impact on human capital and economic development.

The obligation of all States to work toward the elimination of violence against children is recognized by the 1989 Convention on the Rights of the Child and the 1990 African Charter on the Rights and Welfare of the Child, which were both ratified by Rwanda in 1991. Efforts to prevent violence, therefore, form part of the government's commitment to uphold the right of each child to his or her human dignity and physical integrity. The findings from the VACYS 2015-16 underscore the fact that prevention and response efforts must be strengthened in order to address the needs of Rwanda's children. It is well-recognized globally that preventing violence against children is complicated by the influence of poverty and a limited social protection framework. At present, the social protection system is weakened by unclear or overlapping mandates and conflicting policy and programmatic mandates, little access or availability to quality training and education, overwhelming demands for social protection assistance and inadequate resource allocation, all of which have direct impacts on service delivery. It is important that a multi-sectoral national action plan to prevent and respond to violence against children be developed. Such a plan would provide clear directions for addressing the gap between law and practice. It would also establish clear mandates, roles and responsibilities (at different levels and between actors) for ensuring the provision of preventive community-based child and family protection programmes that would coordinate with health, education and social protection programmes to deliver a range of support for vulnerable children and their families.

While the country is strengthening its national child protection and justice systems to prevent and respond to violence, it will be important to ensure that violence prevention and response initiatives also cut across other established structures such as education and health. Direct support to government structures (ministries, district level governments and community structures) by international partners can also help to ensure not only that children are protected but also that these efforts are sustained. Such collaboration needs strong coordination and a planned, organized response. Such a response also needs a better understanding of children's vulnerability as it is represented in the study findings, with specific and tailored measures to prevent and respond to violence against children and protect the children most at risk.

The results of the survey can therefore assist the Government of Rwanda and all concerned agencies, including international organizations, NGOs and community leaders, to enhance their efforts to raise awareness of violence against children and strengthen prevention and response to the issue. Efforts to address violence against children in Rwanda need to overcome many barriers. Children's and adults' beliefs need to be changed so that violence against children is no longer accepted. Children's rights to protection and participation need to be ensured and their views and voices need to be heard. Structurally, through law and policy, schools, social and health services, community governance and law enforcement, a holistic and coordinated approach is needed to raise awareness of existing laws, to introduce new legislation and policy, to allocate sufficient resources, and to mobilize multi-sectoral stakeholders to comprehensively prevent violence and respond effectively to children who experience violence.

# SECTION 13

## RECOMMENDATIONS

The results of this survey have shed light on widespread violence against children and youth in Rwanda. This evidence base clearly shows that much more should be done to prevent and respond to violence; to ensure that abused children and youth report violence; to make homes and schools safe places for children; and to ensure that high-quality services are readily available. To address all forms of violence against children and youth, efforts should be made to implement comprehensive, holistic and multi-sectoral strategies that prevent violence against children and strengthen child protection systems and responses.

Based on the results of the VACYS 2015/2016 and information on existing interventions, the VACYS steering committee proposes action along five strategic areas: strengthening coordination and child protection systems; prevention of violence against children; responses to violence, including laws and policies; financing child protection; and monitoring and evaluation.

The first step in a response is to develop a national plan of action to assess all existing multi-sectoral response and services, and identify specific, achievable and costed actions that can address violence against children and youth. The recommendations provided here will be further assessed within a systematic process for developing a national plan of action.

### **1. Strengthening cross-sector child protection systems through a multi-sectoral national action plan to prevent and respond to violence against children and youth**

- Disseminate findings of the VACYS report nationwide, especially among target populations affected by violence.
- Based on nationwide consultation, develop a multi-sectoral National Plan of Action to prevent and respond to violence against children; and identify the lead ministry, drawing on the strengths of different sectors and existing platforms for prevention and response.
- Implement integrated child- and youth-friendly, gender-sensitive response systems (with specified operating standards and procedures) to violence against children and youth for both boys and girls.
- Establish and coordinate an integrated referral system to respond to abuse and violence against children.
- Strengthen the capacity and sensitize all those working directly with children and their families to identify, respond, report and refer cases of violence and abuse of children, for both boys and girls, and ensure they are guided by the principle of 'do no harm'.
- Establish coordination mechanisms for community-based actors in the field of child and family protection and for community-based health workers.

## **2. Preventing violence against children and youth**

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Create safe, nurturing and violence-free relationships between children and their parents and caregivers:

- Develop a standardized national parents and caregiver training manual to include protecting children and youth from violence and promoting positive parenting education programmes. The manual should address the needs of girls and boys of different ages.
- Develop holistic programming that integrates child protection into early childhood development programmes.
- Review the national guidelines on early childhood development centres to include standards on creating a violence-free environment for children.

### **Ensure schools are safe places for children and free from violence:**

- Develop a teacher-training package and train teachers both pre- and in-service on non-violent forms of child discipline; end corporal and degrading punishment in schools.
- Develop and enforce a national standardized teacher's code of conduct based on non-violent forms of child discipline.
- Develop a specific policy on prevention and response to all forms of violence against children in school with accompanying standard procedures.
- Review the teaching curriculum of teacher training colleges and include modules on prevention and response to all forms of violence against children.
- Establish and strengthen the reporting mechanisms for violence against children in schools.
- Promote sensitization and awareness of violence against children in all schools targeting teachers, parent-teacher associations, parents, children and the community.

### **Change cultural and social norms that support violence against children:**

- Adopt, implement and enforce laws and policies to prevent and respond to violence against children and youth.
- Mobilize communities to take a zero-tolerance approach to corporal punishment and other forms of violence against children, and to speak out against those who practice and condone it.
- Train front-line workers, including police, local leaders, social workers and community workers on child rights and the importance of preventing and responding to violence of any form against children and youth.
- Run media campaigns aimed at changing perceptions of violence in society, challenging harmful practices and promoting social norms that care for and protect children.
- Mobilize religious leaders to raise awareness and speak out against all forms of violence against children and youth, and to prevent physical and emotional violence.

### **Empower children and adolescents:**

- Explore and promote evidence-based strategies that increase the capacity of adolescents and young people to prevent instances of violence, especially different forms of gender-based violence.
- Ensure that out-of-school adolescents and youth are identified and supported to return to school or engage in livelihoods activities.
- Review the sexual and reproductive health education curriculum and implement it in all primary and secondary schools, focusing on children's life skills.
- Ensure that in-school and out-of-school adolescents and youth are accessing sexual and reproductive health information and services.
- Develop holistic programming that integrates child protection into adolescent and youth development programmes.
- Involve children and young people, especially young girls, in challenging the norms and attitudes that legitimize and accept violence against children, including the acceptability of violent forms of child discipline and peer violence.
- Raise awareness of the harmful impact of drugs and alcohol among parents, caregivers, children and adolescents.

### **3. Responding to violence against children**

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Interventions to respond to violence against children have been initiated based on the existing national policy and legal frameworks. Sexual violence against children, especially child defilement, has been classified as a serious crime, but reporting and subsequent response provided to children need to be strengthened. More could also be done to improve the integrated response offered by One Stop Centres, and to boost the capacities of the judiciary, police and social workforce.

#### **Improve the utilization of legal, health and social response services for sexual, emotional and physical violence:**

- Educate children and their representatives – relatives and friends, authority figures – that any type of abuse or violence is unacceptable and that reporting violence and receiving services are important.
- Establish safe, confidential reporting systems in schools that enable children to report incidents of violence. This would include evaluating and scaling up the existing girls' safe room programme in primary and secondary schools.
- Ensure health centres are safe places for children and adolescents, especially adolescent girls, to report incidents of violence by ensuring confidentiality, and developing and enforcing standard procedures based on the principle of 'do no harm'.
- Ensure police stations are safe places for children and adolescents to report incidents of violence, by ensuring confidentiality, and developing and enforcing standard procedures based on the principle of 'do no harm'.
- Establish real-time data reporting and monitoring systems for immediate response to cases of violence against children.
- Carry out a mapping exercise child protection services and raise awareness of child protection services to children, families and communities.
- Strengthen and scale-up safe spaces (children's clubs, youth clubs and children's forums) for children in communities to speak out.
- Introduce and strengthen guidance and counselling programmes in all primary and secondary schools to support children on issues related to violence and increase their awareness of support services.

#### **Improve quality of services and capacity of professionals working with children**

- Equip all frontline workers (including professional social workers, psychologists, healthcare workers, prosecutors, police and community-based child protection and health workers) with the skills and capacity to prevent and respond to child abuse, through pre- and in-service training.
- Develop standard operating procedures to establish clear reporting, referral and case management for violence against children between actors involved in handling children's cases, namely the police, justice, health and social welfare.
- Improve and continue the scale-up of One Stop Centres for effective violence-against-children service provision and integrated case management in hospitals and health facilities.
- Incorporate violence against children into the curriculum of healthcare workers and ensure violence against children is incorporated into routine health services.
- Strengthen the mental health system and psycho-social services to be able to respond to cases of violence against children.
- Increase funding for legal representation for cases of violence against children both in court proceedings and to enforce court judgments.
- Maximize the use of information and communication technology (ICT) throughout judicial proceedings to expedite cases of violence against children.
- Establish a data registry of perpetrators of violence, especially sexual violence against children, with standard operating procedures.

## **4. Increase the financing for protection of children and young people**

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- Analyze the national budget to get an estimate of public budget allocated to child protection, and violence against children in particular.
- Develop budgeting guidelines on child protection and monitor resource allocation.
- Conduct a longitudinal study to determine the returns on investment in prevention and response to violence against children.
- Undertake a child protection services costing exercise to be able to accurately budget for child protection services.

## **5. Evidence collection, monitoring and evaluation on violence against children and youth**

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- Deepen the analysis of the findings of the VACYS to uncover the drivers of violence and barriers that prevent children speaking out and seeking support in order to inform prevention strategies and public policies.
- Collect periodic data on the prevalence of violence against children and young people.
- Invest in further research to cover evidence gaps around violence against children and youth, for example evidence around the scale and impact of cyber-bullying and online violence, and the impact that growing urbanization has on violence against children and youth.

### **Conclusion**

The VACYS conducted in Rwanda in 2015-16 has not only provided rich data to inform programming, but has also been a catalyst for action for both public and private actors. The launch of the survey report and the initiation of a National Plan of Action to End Violence Against Children signals a strong commitment from the Government of Rwanda and key stakeholders to ensure that the findings of the survey are not left on a shelf but make a significant contribution to ensuring that children in Rwanda can grow up free from violence.

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# APPENDIX A: WEIGHTING PROCEDURES, QUALITY ASSURANCE AND ESTIMATES OF SAMPLING ERROR

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The 2015 VACYS was a nationally representative household survey of all non-institutionalized females and males aged 13-24 designed to produce data on sexual, physical and emotional violence in childhood.

The sampling frame was originally compiled by NISR for the 2012 national population and housing census, during which the country was divided into small areas called Enumeration Areas (EAs). The EAs are convenient areas carved out from localities or group of localities to serve as units of enumeration during censuses and surveys. The sampling frame provided by NISR consists of 14,837 natural villages and 10,482,641 persons.

To calculate separate male and female prevalence estimates for violence victimization, a split-sample approach was used. This means that the survey for females was conducted in different EAs than the survey for males. The split-sample approach serves to protect the confidentiality of respondents, and eliminates the chance that a male perpetrator of a sexual assault and the female who was the victim of his sexual assault in the same community would both be interviewed. The design also eliminates the chance that a female perpetrator and a male victim of sexual violence from the same community would both be interviewed in the selected EA.

The following assumptions were used to estimate the sample size: 95% confidence interval (CI) of +/-2.0% around an estimated prevalence of sexual violence against children of 30 per cent, and a design effect of 2.0. The calculated sample size based on these assumptions was 1,180 completed interviews for males and 1,032 completed interviews for females. Adjustment to the sample size for eligibility as well as non-response resulted in a target of 2,775 households in 111 EAs for the female sample and 3,475 households in 139 EAs for the male sample.

## Stages of selection

The survey utilized a three-staged stratified sample design. In the first stage a total of 250 EAs was selected using probabilities proportional to the population size. The sample was allocated across the 30 districts of Rwanda based on the population of each district. In the second stage, a fixed number of 25 households were selected using equal probability systematic sampling. In the last stage, one eligible respondent (female or male, depending on the selected EA) was randomly selected to answer the questionnaire from the list of all eligible respondents (females or males) aged 13-24 in each household. For EAs containing greater than 250 households, segmentation was conducted to obtain a sample of geographic areas that were of suitable size for the field teams.

**Table A1: Sampling strategy and size estimates**

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	Required Completed Individual Interviews (CII)	Individual Eligibility Rate (IER)	Individual Response Rate (IRR)	Adjusted Individual Interviews (AII)CII/(IER*IRR)	HH Eligibility Rate (HER)	HH Response Rate (HRR)	HH Screen Rate (SR)	Adjusted HH (AdjHH) R*HRR*SR	# HHs Selected AII/AdjHHSelected AII/AdjHH	# Households to select per EA	# PSU
Female	1008	0.98	0.9	1143	0.9	0.98	0.47	0.41	2758	25	111
Male	1008	0.98	0.8	1286	0.9	0.98	0.42	0.37	3471	25	139

## Weighting procedure

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### Weighting

Weighting is a method used to obtain parameters from the data set resulting from sampling so as to represent the total population. VACYS used a two-step weighting procedure: (Step 1) computation of the base weight for each sample respondent; (Step 2) adjustment of the base weights for non-response.

Base weights were calculated that are inversely proportional to the overall selection probabilities for each sample respondent (Step 1). Calculations in this stage included probabilities of selection of EAs, selection of households, gender specification and selection of eligible individuals.

In the final stage of the weighting process (Step 3), calibration adjustment was done to adjust weights to conform with the NSO statistical 2015 population projections distributed by region, age group (13-17 or 18-24), and gender. These variables were used to form weighting cells.

The final weights assigned to each responding unit were computed as the product of the base weights, the non-response adjustment factors and post-stratification calibration adjustment factors. The final weights were used in all analyses to produce estimates of population parameters in SAS V9.3.

### Adjustment for unit non-response

In Step 2, base weights were adjusted to compensate for the losses in the sample outcome due to non-response (Table A2 below shows household and individual response rates). In this step, non-response adjustments were made for non-responding EAs, non-responding households and non-responding respondents. Due to some non-responding EAs, nonresponse adjustments were made at the PSU-level for female EAs (Table A6 present PSU-level non-response adjustment factors for female and male EAs). The household-level non-response adjustment was performed by using weighted data by region and EA. For the person-level non-response adjustment, weighting cells were formed taking into account, region, age-group (13-17 or 18-24) and sex. In the VACYS protocol, it is recommended that any household- or person-level non-response adjustment component that exceeds 3.00 should be set to 3.00. For the 2015 VACYS, there were no values larger than 3.0 in either the household-level and the person-level adjustment factors for non-response.

### Household-level response rate

Using the household disposition codes, the household-level response rates were computed separately for each sample EA using the formula below.

$$\text{Household-Level Response Rate} = ([1] + [2]) / ([1] + [2] + [3] + [4])$$

where:

- [1] = Completed household survey, 1 person selected
- [2] = Completed household survey, no one eligible in household
- [3] = Household refusal
- [4] = Other household non-response
- [5] = Household respondent incapacitated

The corresponding household-level weighting class adjustment was computed as one divided by the weighted household response rate for each sampled EA. Tables A3 and A4 list all household-level non-response adjustment factors for female and male EAs.

### Person-level response rate

Person-level non-response adjustment was performed by using individual-level response rate calculating formula by a combination of weighting class variables. As with the household adjustment component, the person-level adjustment component was computed as one divided by the weighted person-level response rate for each weighting cell. Table A5 reflects the person-level non-response adjustment factors for female and male EAs.

$$\text{Individual-level response rate} = [1] / ([1] + [2] + [4])$$

where:

- [1] = Completed individual survey
- [2] = Selected respondent refusal
- [3] = Selected respondent incapacitated
- [4] = Other individual non-response

**Table A2: Household and individual response rates by sex**

<b>Household</b>	<b>Females</b>	<b>Males</b>
Completed household – 1 person selected	<b>1051</b>	<b>1198</b>
Eligible households	<b>1055</b>	<b>1213</b>
Ineligible households	<b>1700</b>	<b>2259</b>
Total	<b>2774</b>	<b>3474</b>
Household Response Rate	<b>99.60%</b>	<b>99.42%</b>
<b>Individual</b>		
Completed Individual survey	<b>1032</b>	<b>1180</b>
Eligible individuals	<b>1050</b>	<b>1196</b>
Ineligible households	<b>3</b>	<b>2</b>
Total	<b>1053</b>	<b>1198</b>
Individual Response Rate	<b>98.30%</b>	<b>98.70%</b>
*Overall Response Rate	<b>96.18%</b>	<b>98.09%</b>
*Overall Response Rate = Household Response Rate * Individual Response Rate		

## APPENDIX B: DATA TABLES

Notes to tables: Numbering of tables corresponds to key sections in the report

95% confidence interval is abbreviated as 95% CI

\* denotes an unstable estimate

**Table 3.1 Percentage distribution of household economic resources by female and male respondents**

	Females		Males	
	n	% (95% CI)	n	% (95% CI)
<b>Main cooking fuel</b>				
Fuel from fossil <sup>1</sup>	3	*	5	*
Fuel originated from plants <sup>2</sup>	1028	99.7 (98.8 - 99.9)	1166	99.3 (98.5 - 99.6)
Other	1	*	3	*
<b>Household effects</b>				
Electricity	218	22.9 (16.8 - 30.3)	292	26.3 (20.3 - 33.4)
Computer	31	2.9 (1.7 - 5.0)	47	3.8 (2.5 - 5.8)
Radio	514	51.1 (47.0 - 55.3)	620	52.7 (48.8 - 56.6)
Television	95	10.9 (7.0 - 16.6)	106	10.0 (6.9 - 14.2)
Mobile telephone	701	68.6 (63.5 - 73.3)	856	72.9 (69.2 - 76.4)
Refrigerator	9	*	22	*
<b>Main material of the roof</b>				
Metal/Iron sheets	641	64.4 (56.2 - 71.9)	783	66.9 (60.0 - 73.2)
Ceramic tiles	374	34.3 (27.1 - 42.4)	382	32.2 (26.0 - 39.2)
Other <sup>3</sup>	14	1.2 (0.7 - 2.2)	11	*
<b>Any member of this household owns any agricultural land</b>				
Agricultural land	814	79.1 (73.8 - 83.6)	998	82.8 (78.1 - 86.7)
<b>Household owns any livestock, herds, other farm animals or poultry.</b>				
Yes	533	52.0 (47.5 - 56.5)	732	59.7 (54.4 - 64.7)
<b>Head of the household covered by any health insurance</b>				
Any health insurance	795	76.3 (72.8 - 79.5)	890	75.6 (72.1 - 78.7)

<sup>1</sup> Fuel from fossil includes" liquefied petroleum gas (LPG), natural gas, biogas, kerosene, coal,lignite.

<sup>2</sup> Fuel originated from plants includes: charcoal, wood, straw/shrub/grass, agricultural crop.

<sup>3</sup> Other roofing materials includes: thatch/palm leaf, rustic mat, palm/bamboo/grass, wood planks, cardboard, wood, calamine/cement fibre, cement, roofing shingles.

**Table 3.2 Percentage distribution of males and females by select background characteristics**

	Females		Males	
	n	% (95% CI)	n	% (95% CI)
<b>Age group</b>				
13-17 years old	492	45.9 (42.2 - 49.5)	619	51.9 (48.8 - 55.0)
18-24 years old	540	54.1 (50.5 - 57.8)	563	48.1 (45.0 - 51.2)
<b>Highest education level attained</b>				
Never attended school	24	2.3 (1.3 – 3.3)	29	2.4 (1.5 – 3.4)
Less than primary school	210	21.1 (16.8 – 25.4)	267	22.7 (19.7 – 25.8)
Primary school	523	49.6 (45.5 – 53.8)	596	51.0 (47.7 – 54.4)
Post- primary/ vocational	16	*	19	1.6 (0.9 – 2.4)
Secondary school and higher	248	25.2 (20.2 - 30.1)	260	22.1 (19.4 – 24.8)
<b>Reported age of head of household</b>				
<=18	6	*	6	*
19 - 30	235	11.5 (9.1 – 14.4)	190	8.4 (6.6 – 10.6)
31 - 50	432	21.5 (18.2 – 25.3)	555	23.0 (19.6 – 26.8)
51 +	359	17.8 (14.8 – 21.3)	429	17.3 (14.6 – 20.4)
<b>Orphanhood prior to age 18 (13-24 year olds)</b>				
Not an orphan prior to age 18	303	58.3 (49.6 – 67.0)	317	61.2 (56.5 - 65.9)
Lost one parent prior to 18 years	169	34.1 (25.9 – 42.4)	160	32.0 (27.5 - 36.6)
Lost both parents prior to 18 years	43	7.6 (4.7 – 10.4)	33	6.7 (4.4 - 9.1)
<b>Ever been married or lived with someone as if married</b>				
13-17 years old	6	*	0	0(0)
18-24 years old	220	40.8 (32.2 – 49.3)	95	17.8 (13.8 - 21.9)
<b>Ever married or lived with someone as if married prior to age 18 (18-24 year olds)</b>				
18-24 years old	31	6.1 (3.3 – 8.9)	3	*
<b>Ever had sex</b>				
13-17 years old	33	6.6 (4.0 – 9.2)	68	12.0 (8.6 - 15.4)
18-24 years old	311	55.6 (46.5-64.2)	287	52.2 (47.6 - 56.9)
<b>Ever had sex prior to age 18 (18-24 year olds)</b>				
18-24 years old	90	28.6 (24.0 – 33.1)	126	42.5 (35.4 – 49.6)
<b>Ever worked for money or any other payment</b>				
13-17 years old	6	*	41	38.8 (28.2 – 49.4)
18-24 years old	6	*	32	63.2 (50.5 – 76.0)

**Table 3.3 Mean age at first sexual intercourse experience by age group**

Mean age (years) of first sex	Females		Males	
	Total [n]	Mean (95% CI)	Total [n]	Mean (95% CI)
13-17 years old	33	13.3 (12.3-14.3)	68	10.3 (9.3-11.2)
18-24 years old	311	18.6 (18.3-18.8)	287	17.4 (16.9-17.9)

**Table 4.1.1 Percentage of males and females aged 18-24 years who reported experiencing any sexual abuse<sup>1</sup> prior to age 18**

Type of sexual abuse	Females		Males	
	n	% (95% CI)	n	% (95% CI)
Reported experiencing any type of sexual abuse	138	23.9 (20.0-27.8)	54	9.6 (6.9-12.4)
Reported experiencing any sexual touching	67	12.1 (9.3-15.0)	30	5.2 (3.1-7.0)
Reported experiencing any unwanted attempted sex	93	16.5 (13.5-19.6)	37	6.6 (4.3-8.9)
Reported experiencing physically forced sex	27	4.1 (2.4-5.9)	4	*
Reported experiencing any pressured sex <sup>2</sup>	8	*	1	*

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

<sup>2</sup> Pressured sex includes: threats, harassment or tricking.

**Table 4.1.2 Percentage of Rwandans aged 13-17 years who reported experiencing any sexual abuse<sup>1</sup> and types of sexual abuse<sup>1</sup> in the past 12 months**

Types of sexual abuse	Females		Males	
	n	% (95% CI)	n	% (95% CI)
Reported experiencing any type of sexual abuse	62	11.7 (8.7-14.7)	37	5.4 (3.6-7.1)
Reported experiencing any sexual touching in the past 12 months	37	7.0 (4.6 - 9.3)	21	3.2 (1.8-4.6)
Reported experiencing any unwanted attempted sex in the past 12 months	35	6.5 (4.2 - 8.7)	22	3.2 (1.8-4.6)
Reported experiencing any physically forced sex in the past 12 months	5	*	0	0 (0)
Reported experiencing any pressured <sup>2</sup> sex <sup>2</sup> in the past 12 months	1	*	0	0 (0)

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Pressured sex includes: threats, harassment, or tricking.

**Table 4.1.3 Percentage of youth aged 19-24 years who reported experiencing any type of sexual abuse<sup>1</sup> in the past 12 months**

Type of sexual abuse	Females		Males	
	n	% (95% CI)	n	% (95% CI)
Reported experiencing any sexual abuse	93	18.9 (15.0 - 23.0)	51	10.8 (7.7 - 13.9)
Reported experiencing any sexual touching	76	15.6 (11.9 - 19.3)	35	7.3 (4.7 – 9.8)
Reported experiencing any unwanted attempted sex	49	10.7 (7.4 - 14.1)	31	6.7 (4.2 - 9.1)
Reported experiencing physically forced sex	9	*	0	0.0 (0)
Reported experiencing any pressured sex <sup>2</sup>	4	*	1	*

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Pressured sex includes: threats, harassment, or tricking.

**Table 4.2.1 Percentage of males and females aged 18-24 years who reported that their first incident of sexual intercourse was unwanted, among those whose first sexual intercourse was prior to age 18**

Reported that first incident of sexual intercourse was unwanted among 18-24 year olds whose first sex was prior to age 18.	Females		Males	
	n	% (95% CI)	n	% (95% CI)
18-24 year olds prior to age 18	26	29.1 (19.2 – 39.0)	7	*

**Table 4.2.2 Percentage of females and males aged 13-17 years who reported that their first incident of sexual intercourse was unwanted, among those who had ever had sexual intercourse**

Reported that first incident of sexual intercourse was unwanted among 13-17 year olds who had ever had sex	Females		Males	
	n	% (95% CI)	n	% (95% CI)
13-17 year olds	7	46.0 (20.5 – 71.4)	0	0.0

**Table 4.2.3 Percentage of youth aged 19-24 years who reported that their first incident of sexual intercourse was unwanted, among those whose first sexual abuse<sup>1</sup> was in the past 12 months prior survey**

	Females		Males	
	n	% (95% CI)	n	% (95% CI)
Unwanted	9	15.2 (6.4 – 23.9)	2	*

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

**Table 4.3.1 Percentage of males and females aged 18-24 years who reported experiencing any unwanted completed sex<sup>1</sup> prior to age 18**

Reported experiencing any unwanted completed sex <sup>3</sup> prior to age 18	Females		Males	
	n	% (95% CI)	n	% (95% CI)
Unwanted complete sex	28	4.3 (2.6 – 6.1)	5	*

<sup>1</sup> Unwanted completed sex includes: physically forced sex and pressured sex.

**Table 4.3.2 Percentage of males and females aged 13-17 years who reported experiencing any unwanted completed sex<sup>1</sup> in the past 12 months**

Reported experiencing any unwanted completed sex in the past 12 months	Females		Males	
	n	% (95% CI)	n	% (95% CI)
Unwanted complete sex	5	*	0	0.0

<sup>1</sup> Unwanted completed sex includes: physically forced sex and pressured sex.

**Table 4.4.1 Percentage of females and males who reported experiencing any sexual abuse<sup>1</sup> prior to age 18 by perpetrator of first event of sexual abuse among 18-24 year olds**

Relationship with perpetrator	Female		Male	
	n	% (95% CI)	n	% (95% CI)
Spouse/ boyfriend/ girlfriend or romantic partner	42	30.0 (21.9 - 38.1)	9	*
Family member	17	13.5 (7.6 – 19.5)	4	*
Authority figure <sup>2</sup>	6	*	2	*
Neighbour	45	35.0 (25.0 - 44.9)	23	43.1 (29.8- 56.4)
Classmate/schoolmate	13	8.0 (3.8 - 12.1)	10	17.5 (7.5 – 27.4)
Friend	20	18.5 (7.9 – 29.1)	6	*
Stranger	0	0 (0)	0	0 (0)
Other	6	*	3	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Authority figure includes teacher, police/security person, employer, religious leader

**Table 4.4.2 Percentage of males and females aged 13-17 years who reported experiencing any sexual abuse<sup>1</sup> in the past 12 months by perpetrator of most recent event of sexual**

Relationship with perpetrator	Female		Male	
	n	% (95% CI)	n	% (95% CI)
Spouse/ boyfriend/ girlfriend or romantic partner	11	21.3 (10.3 - 32.3)	4	*
Family member	2	*	0	0 (0)
Authority figure <sup>2</sup>	2	*	1	*
Neighbour	30	45.7 (33.1 - 58.3)	20	56.8 (40.7 - 73.0)
Classmate/schoolmate	5	*	4	*
Friend	4	*	7	*
Stranger	9	*	2	*
Other	3	*	0	0 (0)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Authority figure includes teacher, police/security person, employer, religious leader

**Table 4.5.1 Sexual violence perpetrators perceived to be 5 or more years older among youths aged 18-24 years old who experienced sexual abuse prior to 18 years**

Perpetrator of sexual abuse <sup>1</sup> perceived to be 5 or more years older	Females		Males	
	n	% (95% CI)	n	% (95% CI)
18-24 years old prior to age 18	68	51.9 (41.5 - 62.4)	17	33.0 (19.2 – 46.7)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex

**Table 4.5.2 Sexual violence perpetrators perceived to be 5 or more years older among children aged 13-17 years old who experienced sexual abuse in the past 12 months**

Perpetrator of sexual abuse <sup>1</sup> perceived to be 5 or more years older	Females		Males	
	n	% (95% CI)	n	% (95% CI)
13-17 years old in the past 12 months	39	60.1 (46.2 - 74.0)	9	27.7 (12.0 – 43.4)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex

**Table 4.5.3 Perceived age of perpetrator of most recent incident of sexual abuse<sup>1</sup> among youth aged 19-24 years old who experienced sexual abuse in the past 12 months**

Difference in age between respondents and perpetrator	Females		Males	
	n	% (95% CI)	n	% (95% CI)
< 5 years older	18	18.8 (10.4 – 27.2)	5	*
5-10 years older	29	36.7 (23.4 – 50.0)	11	20.4 (9.5 – 31.4)
> 10 years older	45	44.5 (31.5 – 57.5)	34	69.4 (56.2 – 82.6)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.6.1 Gender of perpetrator of first event of sexual abuse<sup>1</sup> among youth aged 18-24 years who reported experiencing any sexual abuse prior to age 18**

Gender of perpetrator	Female		Male	
	n	% (95% CI)	n	% (95% CI)
Male perpetrator	133	96.8 (94.0 - 99.6)	14	27.1 (14.6 – 39.7)
Female perpetrator	1	*	36	66.4 (54.3 - 78.5)
Male & female perpetrators	4	*	4	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.6.2 Gender of perpetrator of most recent incident of sexual abuse<sup>1</sup> among children aged 13-17 years who reported experiencing any sexual abuse in the past 12 months prior to the survey**

Gender of perpetrator	Female		Male	
	n	% (95% CI)	n	% (95% CI)
Male perpetrator	61	98.7 (96.2 – 100.0)	5	*
Female perpetrator	1	*	31	86.4 (75.5 - 97.3)
Male & female perpetrators	0	0 (0)	1	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.6.3 Gender of perpetrator of most recent incident of sexual abuse<sup>1</sup> among youth aged 19-24 years who reported experiencing any sexual abuse in the past 12 months prior to the survey**

Gender of perpetrator	Female		Male	
	n	% (95% CI)	n	% (95% CI)
Male perpetrator	89	96.3 (92.6 – 100.0)	11	*
Female perpetrator	1	*	37	73.2 (58.2 - 88.2)
Male & female perpetrators	3	*	2	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.7.1 Location of first incident of any sexual abuse<sup>1</sup> among 18–24 years old who experienced sexual abuse prior to age 18**

Location	Female		Male	
	n	% (95% CI)	n	% (95% CI)
Respondent's home	39	27.6 (18.4 - 36.8)	14	24.3 (10.0 - 38.6)
Perpetrator's home	30	19.4 (12.1 - 26.7)	13	24.5 (13.0 - 36.1)
Someone else's home	17	11.3 (5.8 - 16.9)	4	*
On a road/street	46	36.4 (26.0 - 46.8)	6	*
School	15	9.7 (4.8 - 14.7)	9	*
Field or other natural area	9	*	8	*
Other location	6	*	4	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.7.2 Location of most recent incident of any sexual abuse<sup>1</sup> among 13–17 years old who experienced sexual abuse in the past 12 months prior the survey**

Location	Female		Male	
	n	% (95% CI)	n	% (95% CI)
Respondent's home	21	30.8 (19.1 - 42.4)	12	35.7 (20.1 – 51.3)
Perpetrator's home	2	*	1	*
Someone else's home	8	*	2	*
On a road/street	22	39.5 (26.0 - 53.0)	10	27.0 (11.9- 42.0)
School	5	*	6	*
Field or other natural area	6	*	5	*
Other location	7	*	3	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.7.3 Location of most recent incident of sexual abuse among 19–24 year olds who experienced sexual abuse<sup>1</sup> in the past 12 months**

Location	Female		Male	
	n	% (95% CI)	n	% (95% CI)
Respondent's home	31	32.1 (20.1 – 44.1)	14	26.9 (11.9 – 41.9)
Perpetrator's home	10	*	6	*
Someone else's home	10	*	5	*
On a road/street	41	41.8 (29.6 - 53.9)	11	23.4 (11.3 – 35.6)
School	4	*	6	*
Field or other natural area	4	*	9	17.4 (7.3 – 27.6)
Other location	12	*	8	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.8.1 Time of the day of the first experience of any sexual abuse<sup>1</sup> among youth aged 18-24 who experienced any sexual abuse prior to age 18**

Time of day	Any sexual abuse prior to age 18			
	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Morning <sup>2</sup>	19	12.5 (6.1 - 18.8)	11	21.1(9.5-32.8)
Afternoon	34	23.6 (15.2 - 32.0)	10	18.4 (8.0-28.8)
Evening	90	68.6 (59.8 - 77.4)	31	55.1(42.6-67.6)
Late at night	16	9.1 (4.2 - 13.9)	4	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

<sup>2</sup> Morning refers to sunrise-noon, afternoon refers to noon-sunset, evening refers to sunset-midnight, late at night refers to midnight-sunrise

**Table 4.8.2 Percentage of males and females aged 13-17 years who reported the time of day of most recent experience of any sexual abuse<sup>1</sup> in the past 12 months**

Time of day	Any sexual abuse prior to age 18			
	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Morning <sup>2</sup>	8	13.4 (2.8 - 24.0)	3	*
Afternoon	22	32.7 (20.4 - 44.9)	12	32.9 (16.2 - 49.6)
Evening	39	64.0 (50.3 - 77.7)	27	72.4 (56.2 - 88.6)
Late at night	3	*	0	0 (0)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

<sup>2</sup> Morning refers to sunrise-noon, afternoon refers to noon-sunset, evening refers to sunset-midnight, late at night refers to midnight-sunrise

**Table 4.8.3 Time of day of most recent experience of sexual abuse among youth aged 19-24 who experienced sexual abuse<sup>1</sup> in the past 12 months**

Time of day	Any sexual abuse prior to age 18			
	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Morning <sup>2</sup>	11	*	6	*
Afternoon	23	22.7 (12.7 - 32.6)	4	*
Evening	73	81.6 (73.2 - 90.0)	42	68.3 (54.1 - 82.4)
Late at night	8	*	5	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

<sup>2</sup> Morning refers to sunrise-noon, afternoon refers to noon-sunset, evening refers to sunset-midnight, late at night refers to midnight-sunrise

**Table 4.9.1 Percentage of youth aged 18-24 years who experienced any sexual abuse prior to age 18 and knew, disclosed and used services for sexual abuse**

18- 24 year olds who experienced any sexual abuse <sup>1</sup> prior to age 18	Females		Males	
	n	% (95% CI)	N	% (95% CI)
Knew of a place to seek help about an experience of sexual abuse	52	34.6 (26.2 – 43.0)	25	46.2 (31.9 - 60.4)
Sought help for any experience of sexual abuse	13	*	2	*
Received help for any experience of sexual abuse	5	*	0	0(0)
Told someone about an experience of sexual abuse	74	55.7 (45.9 - 65.4)	17	32.6 (19.0 - 46.3)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.9.2 Percentage of children aged 13-17 years who experienced any sexual abuse<sup>1</sup> in the past 12 months prior to the survey and knew, disclosed and used services for sexual abuse**

13- 17 year olds who experienced any sexual abuse <sup>1</sup> in the past 12 months	Females		Males	
	N	% (95% CI)	N	% (95% CI)
Knew of a place to seek help about an experience of sexual abuse	22	39.2 (26.5 - 51.9)	14	34.2 (18.8 - 49.5)
Sought help for any experience of sexual abuse	7	*	1	*
Received help for any experience of sexual abuse	5	*	1	*
Told someone about an experience of sexual abuse	37	62.6 (49.6 - 75.6)	14	34.0 (18.0 - 50.0)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.9.3 Percentage of respondents aged 19-24 years who experienced any sexual abuse<sup>1</sup> in the past 12 months and knew, disclosed and used services for sexual abuse<sup>1</sup>**

Service utilization	Females		Males	
	N	% (95% CI)	N	% (95% CI)
Knew of a place to seek help about an experience of sexual abuse	45	52.4 (40.3 - 64.6)	26	51.0 (36.2 - 65.9)
Sought help for any experience of sexual abuse	7	*	0	0 (0)
Received help for any experience of sexual abuse	7	*	0	0 (0)
Told someone about an experience of sexual abuse	53	57.9 (45.8 - 70.1)	23	44.7 (28.1-61.4)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.10.1 Percentage of respondents aged 18-24 years who disclosed to someone about any incident of sexual abuse<sup>1</sup>, among those who experienced any sexual abuse prior to age 18**

Disclosed to	Females		Males	
	N	% (95% CI)	N	% (95% CI)
Family/ relative	53	9.1 (6.1 - 12.1)	14	2.7 (1.1 - 4.2)
Spouse/romantic partner	7	*	0	0 (0)
Friend/neighbour	63	12.6 (7.9 - 17.2)	34	6.0 (3.9 - 8.1)
NGO worker/teacher/employer/local leader	7	*	2	*
Someone else	13	*	2	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.10.2 Percentage of respondents aged 13-17 years who disclosed to someone about any incident of sexual abuse<sup>1</sup> among those who experienced any sexual abuse in the past 12 months**

Disclosed to	Females		Males	
	N	% (95% CI)	N	% (95% CI)
Family/ relative	33	6.5 (4.4 - 8.5)	9	*
Spouse/romantic partner	1	*	0	0 (0)
Friend/neighbour	22	4.3 (2.5 - 6.0)	15	2.0 (1.0 - 3.0)
NGO worker/teacher/employer/local leader	2	*	2	*
Someone else	3	*	1	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.11.1 Percentage of males and females aged 18-24 years who experienced more than one incident of sexual abuse<sup>1</sup>, among those who experienced at least one incident of sexual abuse prior to age 18 years**

Number of incidents of sexual abuse among those who experienced at least one incident of sexual abuse <sup>1</sup>	Females		Males	
	N	% (95% CI)	N	% (95% CI)
One	33	24.3 (17.0 - 31.6)	14	31.5 (16.2 - 46.8)
Two or more	11	75.7 (68.4 - 83.0)	40	68.5 (53.2 - 83.8)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.11.2 Percentage of females and males aged 13-17 years who experienced more than one incident of sexual abuse<sup>1</sup> among those who experienced at least one incident of sexual abuse in the past 12 months**

Number of incidents of sexual abuse among those who experienced at least one incident of sexual abuse <sup>1</sup>	Females		Males	
	N	% (95% CI)	N	% (95% CI)
One	22	33.9 (20.9 - 47.0)	15	37.3 (20.8 - 53.7)
Two or more	40	66.1 (53.0 - 79.1)	22	62.7 (46.3 - 79.2)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.11.3 Number of incidents of sexual abuse in the past 12 months among youth aged 19-24 years who experienced sexual abuse<sup>1</sup> in the past 12 months**

Number of incidents of sexual abuse among those who experienced at least one incident of sexual abuse <sup>1</sup>	Females		Males	
	N	% (95% CI)	N	% (95% CI)
One	15	16.3 (8.2 - 24.4)	9	18.0 (7.2 - 28.8)
Two or more	76	83.7 (75.6 - 91.8)	41	82.0 (71.2 - 92.8)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.12.1 Distribution of age at which females and males aged 18-24 years first experienced her/his first incident of sexual abuse<sup>1</sup>, among 18-24 year olds who experienced any sexual abuse prior to age 18 years**

Age (years) at which first experienced her/his first incident of sexual abuse <sup>1</sup>	Females		Males	
	N	% (95% CI)	N	% (95% CI)
<=13	19	13.4 (7.7 - 19.2)	14	27.7 (15.8 – 39.6)
14-15	31	21.1 (14.3 – 27.9)	8	*
16-17	88	65.4 (56.9 - 73.9)	32	58.2 (46.4 - 70.1)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.12.2 Distribution of age at which males and females aged 13-17 years first experienced her/his first incident of sexual abuse,<sup>1</sup> among 13-17 year olds who experienced any sexual abuse in the past 12 months**

Age (years) at which first experienced her/his first incident of sexual abuse <sup>1</sup>	Females		Males	
	N	% (95% CI)	N	% (95% CI)
<=13	21	34.1 (21.5 - 46.6)	13	34.2 (18.5 - 49.9)
14-15	26	39.5 (26.7 - 52.3)	18	51.9 (34.2 - 69.6)
16-17	15	26.4 (14.4- 38.4)	6	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.13.1 Mean age of first sexual abuse, among children aged 13-17 years who experienced sexual abuse in the past 12 months**

Females		Males	
Total [n]	Mean (95% CI)	Total [n]	Mean (95% CI)
62	14.4 (14.0-14.8)	37	13.8 (13.0 – 14.6)

**Table 4.14.1 Percentage of females and males who missed school as a result of any sexual abuse<sup>1</sup>**

Missed school due to sexual abuse <sup>1</sup>	Females		Males	
	N	% (95% CI)	N	% (95% CI)
18-24 year old who missed school	13	*	2	*
13-17 year old who missed school	3	*	0	0

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.14.2 Percentage of females and males who abandoned school as a result of any sexual abuse<sup>1</sup>**

Missed school due to sexual abuse <sup>1</sup>	Females		Males	
	N	% (95% CI)	N	% (95% CI)
18-24 year old who missed school	11	82.7 (60.4 – 100.0)	0	0 (0)
13-17 year old who missed school	1	*	0	0 (0)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.15.1 Reasons for not seeking services for incidents of sexual abuse<sup>1</sup> among youth aged 18-24 who experienced any sexual abuse prior to age 18**

Males and females who experienced any sexual abuse <sup>1</sup> prior to age 18 and did not try to seek services because...	Female		Male	
	N	% (95% CI)	n	% (95% CI)
Afraid of getting in trouble	8	*	1	*
Embarrassed for self or my family	5	*	3	*
Could not reach services	1	*	0	0
Dependent on perpetrator	0	0	0	0
Perpetrator threatened me	1	*	0	0 (0)
Did not think it was a problem	23	52.8 (36.8 - 68.7)	16	67.5 (46.7 - 88.3)
Felt it was my fault	2	*	0	0
Afraid of being abandoned	0	0	1	*
Did not need/want services	3	*	2	*

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 4.15.3 Percentage of youth aged 19-24 who reported reasons why they did not try to seek services for incidents of sexual abuse, among those who experienced any sexual abuse in the past 12 months**

Reasons	Female		Male	
	N	% (95% CI)	n	% (95% CI)
Afraid of getting in trouble	6	*	2	*
Embarrassed for self or my family	8	*	1	*
Did not think it was a problem	18	60.2 (38.9 – 81.6)	17	71.9 (52.0 – 91.8)
Afraid of being abandoned	0	0	1	*
Did not want/need services	3	*	2	*

**Table 4.16.1 Individual, relationship, and structural-level barriers for not seeking services for incidents of sexual abuse<sup>1</sup> among youth aged 18-24 who experienced any sexual abuse prior to age 18**

Reasons	Female		Male	
	N	% (95% CI)	n	% (95% CI)
Individual-level <sup>2</sup>	41	97.8 (94.7 – 100.0)	22	94.6 (84.1 – 100.0)
Relationship-level <sup>3</sup>	1	*	1	*
Structural-level <sup>4</sup>	1	*	0	0 (0)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

<sup>2</sup> Individual-level barriers: afraid of getting in trouble / embarrassment for self or family/ did not think it was a problem/ did not need or want services/felt it was my fault.

<sup>3</sup> Relationship-level barriers: dependent on perpetrator/ perpetrator threatened me/ afraid of being abandoned.

<sup>4</sup> Structural-level barriers: could not afford services / could not afford transport or services too far.

**Table 4.16.2 Individual, relationship, and structural-level barriers for not seeking services for incidents of sexual abuse<sup>1</sup> among children aged 13-17 who experienced sexual abuse in the past 12 months prior to the survey**

Reasons	Female		Male	
	N	% (95% CI)	n	% (95% CI)
Individual-level <sup>2</sup>	14	100	10	85.3 (67.7 – 100.0)
Relationship-level <sup>3</sup>	0	*	2	*
Structural-level <sup>4</sup>	0	0 (0)	0	0 (0)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

<sup>2</sup> Individual-level barriers: afraid of getting in trouble / embarrassment for self or family/ did not think it was a problem/ did not need or want services/felt it was my fault.

<sup>3</sup> Relationship-level barriers: dependent on perpetrator/ perpetrator threatened me/ afraid of being abandoned.

<sup>4</sup> Structural-level barriers: could not afford services / could not afford transport or services too far.

**Table 4.16.3 Individual, relationship, and structural-level barriers for not seeking services for incidents of sexual abuse, among youths aged 19-24 who experienced any sexual abuse in the past 12 months**

Reasons	Female		Male	
	N	% (95% CI)	n	% (95% CI)
Individual-level <sup>2</sup>	35	100	22	94.4 (83.7 -100.0)
Relationship-level <sup>3</sup>	0	0 (0)	1	*
Structural-level <sup>4</sup>	0	0 (0)	0	0 (0)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

<sup>2</sup> Individual-level barriers: afraid of getting in trouble / embarrassment for self or family/ did not think it was a problem/ did not need or want services/felt it was my fault.

<sup>3</sup> Relationship-level barriers: dependent on perpetrator/ perpetrator threatened me/ afraid of being abandoned.

<sup>4</sup> Structural-level barriers: could not afford services / could not afford transport or services too far.

**Table 4.17.1 Percentage of males and females aged 18-24 years who reported receiving any money, food, gifts or other favours in exchange for sex prior to age 18**

Reported receiving any money, food, gifts, or other favors in exchange for sex in the past 12 months	Female		Male	
	N	% (95% CI)	n	% (95% CI)
19-24 years old	6	*	2	*

**Table 4.18.1 Percentage of youth aged 19-24 years who reported that more than one perpetrator was present during the most recent event of any sexual abuse in the past 12 months**

More than 1 perpetrator at most recent event of sexual abuse	Female		Male	
	N	% (95% CI)	n	% (95% CI)
19-24 years old	28	27.3 (16.1 -38.5)	16	31.4 (18.9 – 43.8)

<sup>1</sup> Sexual abuse includes: sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment or tricking) sex.

**Table 5.1.1 Percentage of youth aged 18-24 years who reported experiencing any physical violence<sup>1</sup> prior to age 18**

Reported experiencing any physical violence <sup>1</sup> prior to age 18	Female		Male	
	N	% (95% CI)	n	% (95% CI)
18-24 years old, prior to age 18	187	37.2 (32.3 – 42.0)	336	59.5 (54.6 – 64.5)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.1.2 Percentage of children aged 13-17 years who reported experiencing any physical violence in the past 12 months prior to the survey**

Reported experiencing any physical violence <sup>1</sup> in the past 12 months	Female		Male	
	N	% (95% CI)	n	% (95% CI)
13-17 years old	137	26.5 (22.1 – 30.9)	259	42.0 (36.9 - 47.0)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.1.3 Percentage of youth aged 19-24 years who reported experiencing any physical violence<sup>1</sup> in the past 12 months prior to the survey**

Reported experiencing any physical violence <sup>1</sup> in the past 12 months	Female		Male	
	N	% (95% CI)	n	% (95% CI)
19-24 years old	44	8.9 (6.1 – 11.7)	63	13.3 (10.5 – 16.2)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.2.1 Percentage of Rwandans aged 18-24 years who reported experiencing any physical violence<sup>1</sup> by an intimate partner,<sup>2</sup> parent or adult relative, or community member, or peer prior to age 18 by type of violence**

Perpetrator categories	Female		Male	
	N	% (95% CI)	n	% (95% CI)
Intimate partner <sup>2</sup>	11	*	4	*
Parent or adult relative	131	27.5 (22.1 – 32.9)	257	45.2 (40.2 - 50.3)
Community member	51	9.1 (6.0 - 12.2)	162	28.2 (23.6 - 32.8)
Peer	54	8.6 (6.2 - 11.0)	153	28.3 (23.9 - 32.7)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Among those who reported having an intimate partner.

**Table 5.2.2 Percent of children aged 13-17 years who reported experiencing any physical violence by an intimate partner,<sup>2</sup> parent or adult relative, community member or peer in the past 12 months**

Perpetrator categories	Female		Male	
	n	% (95% CI)	n	% (95% CI)
Intimate partner <sup>2</sup>	7	*	7	*
Parent or adult relative	61	12.0 (8.9 – 15.1)	134	21.9 (18.3 – 25.4)
Community member	40	7.2 (4.7 – 9.7)	148	24.4 (20.1 – 28.6)
Peer	58	11.2 (8.5 – 13.9)	103	16.8 (12.8 - 20.8)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Among those who reported having an intimate partner.

**Table 5.2.3 Percent of youth aged 19-24 years who reported experiencing any physical violence<sup>1</sup> by an intimate partner,<sup>2</sup> parent or adult relative, community member or peer in the past 12 months**

Perpetrator categories	Female		Male	
	n	% (95% CI)	n	% (95% CI)
Intimate partner <sup>2</sup>	23	5.1 (2.6 – 7.6)	4	*
Parent or adult relative	9	*	13	2.4 (1.1 – 3.7)
Community member	5	*	18	3.4 (1.9 – 5.0)
Peer	9	*	41	9.4 (6.6 – 12.1)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Among those who reported having an intimate partner.

**Table 5.3.1 Percent who youth aged 18-24 years old who reported any physical harm or injury as the result of physical violence<sup>1</sup> before age of 18**

Females		Males	
Total [n]	Mean (95% CI)	Total [n]	Mean (95% CI)
17	7.2 (3.7 - 10.8)	58	19.2 (15.0 - 23.3)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.3.2 Percentage of children aged 13-17 years who reported any physical harm or injury as the result of any physical violence<sup>1</sup> in the past 12 months**

Reported any physical harm or injury as a result of physical violence <sup>1</sup> in the past 12 months	Female		Male	
	n	% (95% CI)	n	% (95% CI)
13-17 years old	13	8.3 (3.8 - 12.7)	28	10.6(6.5 – 14.7)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.3.3 Percentage of youths aged 19-24 years who reported any physical harm or injury as the result of any physical violence in the past 12 months**

Reported any physical harm or injury as a result of physical violence <sup>1</sup> in the past 12 months	Female		Male	
	n	% (95% CI)	n	% (95% CI)
19-24 years old	7	*	17	26.5 (15.9 – 37.2)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.4.1 Types of physical harm or injury as a result of physical violence among youths aged 18-24 who experienced any physical violence prior to age 18**

Types of physical harm	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Any cuts, scratches, bruises, aches, redness, swelling, or other minor marks	17	7.2 (3.7 - 10.8)	54	17.8 (13.8 - 22.0)
Any sprains, dislocations, or blistering	5	*	20	7.1 (4.0 - 10.2)
Any deep wounds, broken bones, broken teeth, or blackened or charred skin	4	*	12	4.3 (2.0 - 6.7)
Any permanent injury or disfigurement	2	*	11	3.9 (1.6 - 6.1)
No Injury	170	92.8 (89.2 - 96.3)	278	80.8 (76.7 - 85.0)

**Table 5.4.2 Percentage of males and females aged 13-17 years who reported specific physical harm or injury as a result of any experience of physical violence<sup>1</sup> in the past 12 months**

Types of physical harm	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Any cuts, scratches, bruises, aches, redness, swelling, or other minor marks	13	8.3 (3.8 – 12.7)	27	10.3 (6.2 – 14.3)
Any sprains, dislocations, or blistering	5	*	8	*
Any deep wounds, broken bones, broken teeth, or blackened or charred skin	1	*	4	*
Any permanent injury or disfigurement	0	0 (0)	2	*
No Injury	124	91.7 (87.3 - 96.2)	231	89.4 (85.6 - 93.5)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.4.3 Percentage of males and females aged 19-24 years who reported specific physical harm or injury as a result of any experience of physical violence<sup>1</sup> in the past 12 months**

Types of physical harm	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Any cuts, scratches, bruises, aches, redness, swelling, or other minor marks	7	*	17	26.5 (15.9 – 37.2)
Any sprains, dislocations, or blistering	2	*	7	*
Any deep wounds, broken bones, broken teeth, or blackened or charred skin	1	*	4	*
Any permanent injury or disfigurement	1	*	4	*
No Injury	37	88.9 (80.0 - 97.9)	46	73.5 (62.8 – 84.1)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.5.1 Perpetrator of violence against youth aged 18-24 years who reported any physical harm or injury as the result of physical violence prior to age 18**

Perpetrator categories	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Intimate partner <sup>1</sup>	0	0 (0)	1	*
Parent or adult relative	9	*	19	8.2 (4.5 – 11.9)
Community member	4	*	9	*
Peer	6	*	37	25.1 (18.3 - 32.0)

<sup>1</sup> Among those who reported having an intimate partner.

**Table 5.5.2 Percentage of females and males aged 13-17 years who reported any physical harm or injury as the result of any experience of physical violence<sup>1</sup> in the past 12 months by perpetrator**

Perpetrator categories	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Intimate partner <sup>2</sup>	1	*	0	0 (0)
Parent or adult relative	6	*	7	*
Community member	2	*	7	*
Peer	5	*	19	17.7 (9.2 – 26.3)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Among those who reported having an intimate partner.

**Table 5.5.3 Percentage of children aged 19-24 years who reported experiencing any physical violence<sup>1</sup> by an intimate partner,<sup>2</sup> parent or adult relative, community member or peer in the past 12 months**

Perpetrator categories	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Intimate partner <sup>2</sup>	4	*	0	0 (0)
Parent or adult relative	0	0 (0)	2	*
Community member	0	0 (0)	4	*
Peer	3	*	13	29.5 (15.8 – 43.2)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Among those who reported having an intimate partner.

**Table 5.6.1 Percentage of females and males aged 18-24 years who reported any physical violence<sup>1</sup> by an intimate partner prior to the age of 18, by perpetrator of first incident**

Category of intimate partner	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Boyfriend/girlfriend/romantic partner	8	75.3 (46.3 – 100.0)	3	*
Husband/wife	2	*	0	0 (0)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.6.2 Percentage of males and females aged 18-24 years who reported any physical violence<sup>1</sup> by a peer prior to the age of 18, by perpetrator of first incident**

Category of peer of first incident	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Sibling/cousin	17	30.3 (17.4 - 43.2)	17	11.2 (5.4 - 17.1)
Friend	8	*	35	22.7 (15.4 – 30.0)
Classmate/schoolmate	18	32.7 (19.7 – 45.7)	26	15.5 (9.8 – 21.1)
Neighbour	7	*	52	34.2 (26.3 - 42.2)
Other peer	4	*	21	16.3 (9.1 – 23.5)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.6.3 Percentage of females and males aged 18-24 years who reported any physical violence<sup>1</sup> by a parent/adult caregiver/adult relative prior to the age of 18, by perpetrator of first incident**

Category of peer of first incident	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Father	30	23.0 (15.6 - 30.4)	121	46.7 (39.8 - 53.5)
Stepfather	4	*	1	*
Mother	50	32.8 (20.4 - 45.3)	88	35.4 (29.7 - 41.1)
Stepmother	1	*	3	*
Siblings	15	19.0 (9.3 – 28.7)	12	4.9 (2.1 - 7.6)
Uncle/ aunt	13	10.6 (2.6 – 18.7)	14	5.4 (2.7 – 8.2)
Other relative/caregiver	6	*	2	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.6.4 Percentage of males and females aged 18-24 years who reported any physical violence<sup>1</sup> by adults living in the community prior to the age of 18, by perpetrator of first incident**

Community member	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Male teacher	22	39.0 (22.8 - 55.1)	77	47.1 (38.8 - 55.4)
Female teacher	18	40.8 (23.4 – 58.2)	34	20.6 (12.9 – 28.3)
Authority figure <sup>2</sup>	2	*	18	11.3 (6.4 - 16.2)
Male/ female neighbour	7	*	27	17.0 (10.4 – 23.6)
Other male/female in the community	2	*	6	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Authority figure: includes police/security person, employer, and neighbourhood/religious leader.

**Table 5.6.5 Percentage of females and males aged 13-17 years who reported any physical violence<sup>1</sup> by an intimate partner in the past 12 months, by perpetrator of most recent incident**

Intimate partner	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Boyfriend/girlfriend/romantic partner	5	77.3 (47.7 - 100)	6	81.4 (48.9 - 100)
Husband/wife	2	*	0	0 (0)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.6.6 Percentage of males and females aged 13-17 years who reported any physical violence<sup>1</sup> by a peer in the past 12 months, by perpetrator of most recent incident**

Category of peer	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Sibling/cousin	8	*	9	*
Friend	4	*	19	16.5 (9.5 - 23.5)
Classmate/schoolmate	30	51.5 (37.7 - 65.4)	25	28.7 (14.7 - 42.7)
Neighbour	14	22.6 (11.4 - 33.8)	39	37.9 (27.0 - 48.9)
Other peer	2	*	10	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.6.7 Percentage of females and males aged 13-17 years who reported any physical violence<sup>1</sup> in the past 12 months by a parent/adult caregiver/adult relative, by perpetrator of most recent incident**

Relationship with perpetrator	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Father	24	38.9 (26.1- 51.7)	58	41.0 (32.2 – 49.8)
Mother	22	34.1 (23.1 - 45.1)	40	30.0 (21.7 – 38.3)
Stepfather	0	0 (0)	1	*
Stepmother	1	*	0	0 (0)
Sibling	5	*	10	*
Uncle/aunt	2	*	7	*
Other relative	7	*	18	12.8 (7.2 - 18.5)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.6.7 Percentage of females and males aged 13-17 years who reported any physical violence<sup>1</sup> in the past 12 months by a parent/adult caregiver/adult relative, by perpetrator of most recent incident**

Community member	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Male teacher	20	47.6 (30.7 - 64.5)	82	54.7 (47.1 - 62.3)
Female teacher	9	*	34	24.6 (17.1 – 32.1)
Authority figure <sup>2</sup>	0	0 (0)	5	*
Neighbour	8	21.9 (9.5 – 34.3)	20	11.6 (6.6 – 16.7)
Other	3	*	6	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Authority figure: includes police/security person, employer, neighbourhood/religious leader.

**Table 5.7.1 Percentage of females and males aged 18-24 years who reported service awareness/use and disclosure among those who experienced any physical violence<sup>1</sup> prior to age 18**

Service awareness/use and disclosure	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Knew of a place to seek help about an experience of physical violence.	97	54.7(46.5-62.9)	226	67.7 (62.3-73.2)
Sought help for any experience of physical violence.	8	*	23	8.1 (4.7-11.6)
Received help for any experience of physical violence.	8	*	23	8.1 (4.7-11.6)
Told someone about an experience of physical violence.	96	46.7(39.3-54.0)	192	59.1(53.1-65.1)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.7.2 Percentage of males and females aged 13-17 years who reported service awareness/use and disclosure among those who experienced any physical violence<sup>1</sup> in the past 12 months**

Service awareness/use and disclosure	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Knew of a place to seek help about an experience of physical violence.	45	30.2 (22.0 - 38.4)	122	49.0 (42.4 - 55.6)
Sought help for any experience of physical violence.	3	*	4	*
Received help for any experience of physical violence.	3	*	4	*
Told someone about an experience of physical violence.	85	61.7 (52.7 - 70.6)	150	58.8 (51.4 - 66.3)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.7.3 Percentage of males and females aged 19-24 years who reported service awareness/use and disclosure among those who experienced any physical violence<sup>1</sup> in the past 12 months**

Service awareness/use and disclosure	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Knew of a place to seek help about an experience of physical violence.	25	53.1 (37.5 - 68.7)	44	68.7 (54.8 - 82.6)
Sought help for any experience of physical violence.	7	*	10	*
Received help for any experience of physical violence.	7	*	10	*
Told someone about an experience of physical violence.	30	68.6 (54.6 - 82.6)	45	76.1 (65.6 - 86.5)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.8.1 Percentage of females and males who missed school as a result of any physical violence<sup>1</sup> experienced during childhood**

Missed school due to an experience of physical violence <sup>1</sup>	Female		Male	
	N	% (95% CI)	N	% (95% CI)
18-24 year olds who experienced any physical violence prior to age 18	18	52.0 (33.3 – 65.8)	34	49.4 (39.0 – 59.7)
13-17 year olds who experienced any physical violence in the past 12 months	5	*	4	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.9.1 Percentage of males and females aged 18-24 years who disclosed to someone about any incident of physical violence<sup>1</sup> and who they told among those who experienced any physical violence prior to age 18**

Disclosed to	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Family/ relative	46	49.6 (37.0 – 62.2)	90	56.3 (46.4 – 65.6)
Spouse/romantic partner	10	*	6	*
Friend/neighbour	34	42.8 (29.2 – 57.7)	94	77.5 (68.2 – 84.7)
NGO worker/teacher/employer/local leader	13	12.7 (7.1 – 21.7)	24	18.1 (12.0 – 26.5)
Someone else	8	*	8	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.9.2 Percentage of females and males aged 13-17 years who disclosed to someone about any incident of physical violence and who they told among those who experienced any physical violence<sup>1</sup> in the past 12 months**

Disclosed to	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Family/ relative	55	65.5 (53.1 - 76.1)	101	67.8 (58.9 – 75.6)
Spouse/romantic partner	7	*	1	*
Friend/neighbour	22	26.2 (17.7 – 37.0)	73	49.8 (41.1 – 58.6)
NGO worker/teacher/employer/local leader	14	17.0 (10.1 – 27.3)	8	*
Someone else	6	*	4	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.10.1 Number of incidents of physical violence,<sup>1</sup> among youths aged 18-24 who experienced at least one incident of physical violence prior to age 18**

Frequency of incident	Female		Male	
	N	% (95% CI)	N	% (95% CI)
One	30	17.7 (9.3 - 26.2)	35	10.2 (6.7 - 13.7)
Two or more times	156	82.3 (73.8 - 90.7)	101	89.8 (86.3 - 93.3)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.10.2 Number of incidents of physical violence,<sup>1</sup> among children aged 13-17 who experienced at least one incident of physical violence in the past 12 months prior to the survey**

Frequency of incident	Female		Male	
	N	% (95% CI)	N	% (95% CI)
One	17	13.1 (7.0 - 19.2)	15	5.0 (2.2 - 7.8)
Two or more times	120	86.9 (80.8 - 93.0)	244	95.0 (92.2 - 97.8)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.10.3 Number of incidents of physical violence,<sup>1</sup> among youth aged 19-24 who experienced at least one or more incidents of physical violence in the past 12 months prior to the survey**

Frequency of incident	Female		Male	
	N	% (95% CI)	N	% (95% CI)
One	10	32.0 (17.9 – 50.3)	9	*
Two or more times	20	68.0 (49.7 – 82.1)	15	65.9 (43.5 – 82.9)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.11.1 Age category of first incident of physical violence<sup>1</sup> among youth aged 18-24 who experienced physical violence prior to age 18**

Age (years) at which first experienced her/his first incident of physical violence	Female		Male	
	N	% (95% CI)	N	% (95% CI)
<=5 years old	16	11.4 (5.0 – 17.7)	37	12.0 (8.5 - 15.5)
6-11 years old	68	38.1 (29.3 – 46.9)	183	52.4 (45.8 – 59.0)
12-17 years old	101	50.6 (40.9 - 60.2)	115	35.6 (30.3 – 40.9)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.11.2 Age category of first incident of physical violence<sup>1</sup> among children aged 13-17 who experienced physical violence in the past 12 months**

Age (years) at which first incident of physical violence happened	Female		Male	
	N	% (95% CI)	N	% (95% CI)
<=5 years old	8	*	28	11.9 (7.2 - 16.5)
6-11 years old	47	34.3 (26.0 – 42.6)	158	61.5 (53.9 – 69.1)
12-17 years old	1	59.1 (50.0 - 68.1)	72	26.7 (21.0 - 32.3)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.13.1 Percentage of females and males aged 18-24 years who reported that parent or adult relative live within the same household as them when the first event of any physical violence<sup>1</sup> by parent or adult relative occurred prior to age 18**

18-24 year olds who reported any physical violence <sup>1</sup> prior to age 18	Female		Male	
	N	% (95% CI)	N	% (95% CI)
First event	94	91.0 (84.2 - 97.9)	216	92.9 (88.6 - 97.2)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.13.2 Percentage of males and females aged 13-17 years who reported that parent or adult relative live within the same household as them when the first event of any physical violence<sup>1</sup> by parent or adult relative occurred in the past 12 months**

18-24 year olds who reported any physical violence <sup>1</sup> prior to age 18	Female		Male	
	N	% (95% CI)	N	% (95% CI)
First event	56	91.1 (83.4 - 98.8)	121	91.7 (87.2 - 96.1)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.13.3 Percentage of males and females aged 19-24 years who reported that parent or adult relative live within the same household as them when the first event of any physical violence<sup>1</sup> by parent or adult relative occurred in the past 12 months**

18-24 year olds who reported any physical violence <sup>1</sup> prior to age 18	Female		Male	
	N	% (95% CI)	N	% (95% CI)
First event	7	73.5 (42.4 - 100)	9	72.2 (47.7 - 96.8)

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.14.1 Percentage of males and females aged 18-24 years who received help for any incident of physical violence<sup>1</sup> and who they got help from among those who experienced any physical violence<sup>1</sup> prior to age 18**

18-24 year olds who reported any physical violence <sup>1</sup> prior to age 18	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Doctor, nurse or other healthcare worker	3	*	10	*
Police or other security personnel	4	*	7	*
Lawyer, judge/ magistrate or other legal professional other than police	0	0 (0)	1	*
A social worker or counsellor	3	*	6	*
A hotline including phone/internet/ website	1	*	1	*
Local leader	7	87.1 (63.3 - 100)	17	76.3 (57.6 - 95.1)
Community volunteers/ civil society organization.	0	0 (0)	2	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.14.3 Percentage of males and females aged 19-24 years who received help for any incident of physical violence<sup>1</sup> and who they got help from among those who experienced any physical violence<sup>1</sup> in the past 12 months**

Help received from	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Doctor, nurse or other healthcare worker	4	*	6	58.5 (27.4 - 89.6)
Police or other security personnel	4	*	3	*
Lawyer, judge/ magistrate or other legal professional other than police	1	*	0	0 (0)
A social worker or counsellor	4	75.4 (47.0 - 100)	0	0 (0)
A hotline including phone/internet/ website	0	0 (0)	1	74.5 (54.5 – 94.6)
Local leader	6	*	15	*
Community volunteers/ civil society organization.	0	*	2	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.15.1 Percentage of female males and females aged 18-24 years who reported various reasons why they did not try to seek services for incidents of physical violence, among those who experienced any physical violence<sup>1</sup> prior to age 18**

Reasons for not trying to seek services for incidents of physical violence	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Afraid of getting in trouble	9	*	13	6.6 (3.0 - 10.4)
Ashamed/embarrassed for self or my family	2	*	2	*
Could not afford services	1	*	2	*
Could not reach services	1	*	5	*
Dependent on perpetrator	2	*	7	*
Perpetrator threatened me	1	*	0	0 (0)
Did not think it was a problem	23	30.0 (13.5 - 46.4)	44	23.4 (17.1 - 29.6)
Felt it was my fault	32	46.0 (25.3 - 66.8)	79	46.3 (37.8 - 54.8)
Afraid of being abandoned	2	*	6	*
Did not need/want services	8	*	24	11.8 (6.8 - 16.8)
Unsatisfactory / negative prior experience of Services	1	*	1	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.16.1 Percentage of females and males aged 18-24 years who reported individual, relationship, and structural-level barriers for why they did not try to seek services for incidents of physical violence<sup>1</sup>, among those who experienced any physical violence prior to age 18**

Categories of barriers	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Individual-level <sup>2</sup>	74	92.4 (86.8-98.0)	162	89.2 (84.3-94.0)
Relationship-level <sup>3</sup>	5	*	13	6.9 (3.2-10.5)
Structural-level <sup>4</sup>	3	*	8	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Individual-level barriers: afraid of getting in trouble / embarrassment for self or family/ did not think it was a problem/ did not need or want services.

<sup>3</sup> Relationship-level barriers: dependent on perpetrator/ perpetrator threatened me/ afraid of being abandoned .

<sup>4</sup> Structural-level barriers: could not afford services/ did not know where to go/ could not afford transport or services too far.

**Table 5.15.2 Percentage of females and males aged 13-17 years who reported various reasons why they did not try to seek services for incidents of physical violence,<sup>1</sup> among those who experienced any physical violence in the past 12 months**

Reasons for not trying to seek services for incidents of physical violence	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Afraid of getting in trouble	2	*	12	14.1 (5.7 - 22.5)
Ashamed/embarrassed for self or my family	1	*	0	0 (0)
Could not afford services	0	*	1	*
Could not reach services	0	*	1	*
Dependent on perpetrator	1	*	1	*
Perpetrator threatened me	1	*	1	*
Did not think it was a problem	15	38.5 (24.9 - 52.2)	28	4.8 (17.1 - 36.2)
Felt it was my fault	11	26.9 (14.2 - 39.6)	45	45.1 (35.5 - 54.7)
Afraid of being abandoned	1		1	*
Did not need/want services	6	*	9	*
Unsatisfactory / negative prior experience of Services	1	*	2	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

**Table 5.16.2 Percentage of males and females aged 13-17 years who reported individual, relationship, and structural-level barriers for why they did not try to seek services for incidents of physical violence,<sup>1</sup> among those who experienced any physical violence in the past 12 months**

Categories of barriers	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Individual-level <sup>2</sup>	35	86.7(74.5 - 98.9)	94	93.0(87.9 - 98.1)
Relationship-level <sup>3</sup>	3	*	3	*
Structural-level <sup>4</sup>	0	0 (0)	2	*
Others	1	*	2	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Individual-level barriers: Afraid of getting in trouble / embarrassment for self or family/ did not think it was a problem/ did not need or want services.

<sup>3</sup> Relationship-level barriers: dependent on perpetrator/ perpetrator threatened me/ afraid of being abandoned.

<sup>4</sup> Structural-level barriers: Could not afford services/ did not know where to go/ could not afford transport or services too far.

**Table 5.16.3 Percentage of males and females aged 19-24 years who reported individual, relationship and structural-level barriers for why they did not try to seek services for incidents of physical violence,<sup>1</sup> among those who experienced any physical violence<sup>1</sup> in the past 12 months**

Categories of barriers	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Individual-level <sup>2</sup>	11	76.3 (56.4 – 96.1)	23	85.3 (71.3 – 99.3)
Relationship-level <sup>3</sup>	0	*	2	*
Structural-level <sup>4</sup>	1	0	1	*
Others barriers	3	*	1	*

<sup>1</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, suffocating, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Individual-level barriers: afraid of getting in trouble / embarrassment for self or family/ did not think it was a problem/ did not need or want services.

<sup>3</sup> Relationship-level barriers: dependent on perpetrator/ perpetrator threatened me/ afraid of being abandoned.

<sup>4</sup> Structural-level barriers: could not afford services/ did not know where to go/ could not afford transport or services too far.

**Table 6.1.1 Percentage of females and males aged 18-24 years who reported experiencing any emotional violence<sup>1</sup> by a parent, adult caregiver, or adult relative prior to age 18**

Reported experiencing any emotional violence <sup>1</sup> by a parent/adult caregiver/adult relative prior to age 18	Female		Male	
	N	% (95% CI)	N	% (95% CI)
13-17 years old	58	11.8 (7.3 – 16.3)	95	17.3 (13.4 – 21.2)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.1.2 Percentage of males and females aged 13-17 years who reported experiencing any emotional violence<sup>1</sup> by a parent, adult caregiver, or adult relative in the past 12 months**

Reported experiencing any emotional violence <sup>1</sup> by a parent/ adult caregiver/adult relative in the past 12 months	Female		Male	
	N	% (95% CI)	N	% (95% CI)
13-17 years old	42	8.3 (5.8 - 10.7)	78	13.0 (10.0 - 16.0)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.1.3 Percentage of males and females aged 19-24 years who reported experiencing any emotional violence<sup>1</sup> by a parent, adult caregiver or adult relative in the past 12 months**

Reported experiencing any emotional violence <sup>1</sup> by a parent/ adult caregiver/adult relative in the past 12 months	Female		Male	
	N	% (95% CI)	N	% (95% CI)
19-24 years old	29	8.5 (2.7 - 14.3)	52	10.7 (7.6 - 13.8)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.2.1 Percentage of females and males aged 18-24 years who reported any experience of emotional violence<sup>1</sup> by a parent, adult caregiver or other adult relative prior to the age of 18, by perpetrator of first incident**

Relationship with perpetrator	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Father	11	25.8 (11.9 – 39.6)	35	36.5 (27.7 – 45.2)
Stepfather	4	*	2	*
Mother	13	*	28	28.4 (19.1 - 37.6)
Stepmother	4	*	5	*
Brother	3	*	1	*
Sister	3	*	5	*
Uncle/aunt	12	27.0 (13.2 – 40.8)	14	16.5 (7.7 – 25.3)
Other relative	6	*	4	*

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.2.2 Percentage of males and females aged 13-17 years who reported any experience of emotional violence<sup>1</sup> by a parent, adult caregiver, or other adult relative in the past 12 months, by perpetrator of most recent incident**

Relationship with perpetrator	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Father	14	31.9 (17.7 - 46.0)	23	27.3 (16.5 – 38.0)
Stepfather	2	*	1	*
Mother	11	28.9 (15.3 - 42.5)	24	30.7 (20.5 – 40.9)
Stepmother	6	*	5	*
Brother	0	0 (0)	3	*
Sister	1	*	1	*
Uncle/aunt	4	*	8	*
Other relative	4	*	12	12.5 (5.5 - 19.5)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.2.2 Percentage of males and females aged 13-17 years who reported any experience of emotional violence<sup>1</sup> by a parent, adult caregiver, or other adult relative in the past 12 months, by perpetrator of most recent incident**

Relationship with perpetrator	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Father	14	31.9 (17.7 - 46.0)	23	27.3 (16.5 – 38.0)
Stepfather	2	*	1	*
Mother	11	28.9 (15.3 - 42.5)	24	30.7 (20.5 – 40.9)
Stepmother	6	*	5	*
Brother	0	0 (0)	3	*
Sister	1	*	1	*
Uncle/aunt	4	*	8	*
Other relative	4	*	12	12.5 (5.5 - 19.5)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.2.3 Percentage of males and females aged 19-24 years who reported any experience of emotional violence<sup>1</sup> by a parent, adult caregiver, or other adult relative in the past 12 months, by perpetrator of most recent incident**

Relationship with perpetrator	Female		Male	
	N	% (95% CI)		% (95% CI)
Father	7	33.6 (16.9 – 50.3)	17	33.4 (21.8 - 45.0)
Stepfather	2	*	1	*
Mother	10	*	16	28.6 (15.7 - 41.4)
Stepmother	0	0 (0)	4	*
Brother	4	*	1	*
Sister	0	0 (0)	3	*
Uncle/aunt	2	*	3	*
Other relative	4	*	6	*

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.3.1 Number of incidents of emotional violence, among youth aged 18-24 who experienced at least one incident of emotional violence prior to age 18**

Number of incidents	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Once	2	*	2	*
Few	25	44.1 (33.9 – 54.2)	41	41.1 (29.7 - 52.4)
Many	31	53.2 (43.5-62.8)	51	55.9 (43.8 - 68.0)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.3.2 Number of incidents of emotional violence, among children aged 13-17 who experienced any emotional violence in the past 12 months**

Number of incidents	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Once	0	0 (0)	3	0
Few	19	44.0 (28.5 - 59.4)	41	51.6 (38.2 - 65.0)
Many	23	56.0 (40.6 - 71.5)	34	44.1 (31.0 - 57.2)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.3.3 Number of incidents of emotional violence, among children aged 19-24 who experienced any emotional violence in the past 12 months**

Number of incidents	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Once	1	*	1	*
Few	13	47.4 (34.1 – 60.6)	23	45.7 (33.8 - 57.7)
Many	15	50.0 (36.8 – 63.2)	28	52.0 (39.9 - 64.0)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.4.1 Distribution of age at which females and males aged 18-24 years experienced her/his first incident of emotional violence<sup>1</sup>, among 18-24 year olds who experienced any emotional violence prior to age 18**

Age (years) at which first experienced her/his first incident of emotional violence <sup>1</sup> prior to age 18	Female		Male	
	N	% (95% CI)	N	% (95% CI)
<=5 years old	2	*	5	*
6-11 years old	23	34.6(23.8 – 45.3)	33	27.5(18.0 – 37.1)
12-17 years old	32	43.3(32.8 – 53.8)	56	49.0(37.8 – 60.2)
18 or older	20	20.3 (9.3 – 31.3)	26	19.3 (11.7 – 27.0)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.4.2 Distribution of age at which males and females aged 13-17 years experienced her/his first incident of emotional violence,<sup>1</sup> among 13-17 year olds who experienced any emotional violence in the past 12 months**

Age at which experienced her/his first incident of emotional violence <sup>1</sup>	Female		Male	
	N	% (95% CI)	N	% (95% CI)
<=5 years old	3	*	2	*
6-11 years old	16	42.9 (23.1-62.6)	25	36.4 (23.8-49.1)
12-17 years old	21	49.2 (29.9-68.6)	50	61.5 (48.8-74.2)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.5.1 Percentage of females and males aged 18-24 years who reported that parent or adult relative lived within the same household as them when the first event of any emotional violence<sup>1</sup> by parent or adult relative occurred prior to age 18**

18-24 year olds who reported any emotional violence prior to age 18	Female		Male	
	N	% (95% CI)	N	% (95% CI)
First event	53	94.3 (87.8 – 100.0)	79	83.9 (74.6 - 93.1)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.5.2 Percentage of males and females aged 13-17 years who reported that parent or adult relative lived within the same household as them when the most event of any emotional violence<sup>1</sup> by parent or adult relative occurred in the past 12 months**

Any emotional violence in the past 12 months	Female		Male	
	N	% (95% CI)	N	% (95% CI)
First event	42	100	72	93.7 (88.5 - 99.0)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 6.5.3 Percentage of males and females aged 19-24 years who reported that parent or adult relative lived within the same household as them when the most event of any emotional violence<sup>1</sup> by parent or adult relative occurred in the past 12 months**

Any emotional violence in the past 12 months	Female		Male	
	N	% (95% CI)	N	% (95% CI)
First event	26	91.2 (79.6 – 100.0)	47	89.8 (80.9 - 98.6)

<sup>1</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 7.1.1 Distribution of reported type of violence experienced prior to age 18, among 18-24 year old females and males**

Types of violence	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Sexual violence only <sup>1</sup>	58	8.9 (6.0 - 11.9)	8	*
Physical violence only <sup>2</sup>	105	20.6 (17.3 – 23.8)	235	41.5 (37.2 – 45.9)
Emotional violence only <sup>3</sup>	12	*	20	4.0 (2.1 – 5.9)
Sexual abuse and physical violence	48	8.4 (5.8 – 11.0)	28	4.9 (3.2 - 6.6)
Sexual abuse and emotional violence	12	*	2	*
Physical and emotional violence	14	*	57	10.0 (7.3 - 12.8)
Sexual abuse and physical and emotional violence	20	4.5 (1.9 – 7.1)	16	3.1 (1.5 - 4.6)
No violence	270	50.2 (46.0 - 54.5)	196	34.8 (29.6 - 40.0)

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon by intimate partner, parent/adult relative, community member or peer.

<sup>3</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 7.1.2 Distribution of reported type of violence experienced in the past 12 months, among 13-17 year old males and females**

Types of violence	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Sexual violence only <sup>1</sup>	34	5.9 (3.7 - 8.1)	12	1.8 (0.8 - 2.8)
Physical violence only <sup>2</sup>	99	18.5 (14.2 - 22.8)	195	31.7 (26.9 - 36.6)
Emotional violence only <sup>3</sup>	12	2.2 (1.0 – 3.5)	19	3.3 (1.8 - 4.8)
Sexual abuse and physical violence	15	3.4 (1.7 - 5.0)	10	*
Sexual abuse and emotional violence	7	*	5	*
Physical and emotional violence	17	3.6 (2.0 - 5.2)	44	7.5 (5.3 – 9.8)
Sexual abuse and physical and emotional violence	6	*	10	*
No violence	302	64 (59.3- 68.7)	323	52.1 (47.3 – 57.0)

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon by intimate partner, parent/adult relative, community member or peer.

<sup>3</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 7.1.3 Distribution of reported type of violence experienced in the past 12 months, among 19-24 year old males and females**

Types of violence	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Sexual violence only <sup>1</sup>	64	12.5 (4.7 - 9.7)	32	6.9 (4.5 – 9.4)
Physical violence only <sup>2</sup>	23	5.0 (5.6 - 11.4)	38	8.5 (6.0 - 11.0)
Emotional violence only <sup>3</sup>	8	*	31	6.6 (4.0 – 9.3)
Sexual abuse and physical violence	11	*	10	*
Sexual abuse and emotional violence	11	*	6	*
Physical and emotional violence	3	*	12	2.2 (0.9 – 3.5)
Sexual abuse and physical and emotional violence	7	*	3	*
No violence	327	72.2 (66.7 - 77.7)	330	71.8 (67.7 - 76.0)

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon by intimate partner, parent/adult relative, community member or peer.

<sup>3</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

**Table 8.1.1.1 Frequency and type of mental distress in the past 30 days among female youths aged 18-24 years who experienced any violence prior to age 18**

Mental distress	All/ most of the time		Some of the time		A little of the time		None of the time	
	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)
Nervous	22	9.5 (4.5 – 14.4)	49	16.9 (11.7 - 22.1)	32	10.6 (6.4 - 14.7)	166	63.1 (57.6 - 68.6)
Hopeless	24	9.8 (4.7 - 14.9)	48	15.8 (10.5 - 21.0)	28	11.6 (5.6 - 17.6)	169	62.8 (55.9 - 69.8)
Restless	30	11.5 (6.5 - 16.6)	46	16.3 (11.0 - 21.6)	37	14.8 (8.5 - 21.0)	156	57.4 (50.7 - 64.2)
So sad that nothing could cheer you up	32	13.2 (8.3 - 18.2)	45	18.2 (12.6 - 23.8)	23	10.2 (4.2 - 16.1)	169	58.4 (50.3 - 66.5)
Everything was an effort	16	*	27	9.1 (5.5 - 12.7)	20	6.8 (3.8 - 9.7)	206	78.6 (72.1 - 85.1)
Worthless	17	*	26	9.0 (5.1 - 12.9)	24	7.4 (4.2 - 10.6)	202	77.7 (71.4 - 84.1)

**Table 8.1.1.2 Frequency and type of mental distress in the past 30 days among male youths aged 18-24 years who experienced any violence prior to age 18**

Mental distress	All/ most of the time		Some of the time		A little of the time		None of the time	
	N	% (95% CI)	N	% (95% CI)	N	% (95% CI)	N	% (95% CI)
Nervous	35	10.1 (6.9 - 13.2)	69	18.2 (13.8 - 22.6)	43	12.4 (8.8 - 16.1)	219	59.3 (53.6 - 65.0)
Hopeless	25	6.7 (4.1 - 9.4)	62	16.8 (12.8 - 20.7)	31	8.9 (6.0 - 11.9)	248	67.5 (62.3 - 72.7)
Restless	26	6.7 (4.0 - 9.3)	67	17.3 (13.2 - 21.5)	57	16.1 (12.5 - 19.7)	216	59.9 (54.6 - 65.2)
So sad that nothing could cheer you up	24	6.2 (3.5 - 8.9)	50	13.9 (9.7 - 18.1)	37	9.7 (6.2 - 13.3)	255	70.2 (65.4 - 75.0)
Everything was an effort	15	4.3 (2.2 - 6.3)	30	8.6 (5.5 - 11.6)	24	5.4 (2.9 - 8.0)	297	81.7 (77.6 - 85.8)
Worthless	13	*	24	6.3 (3.7 - 9.0)	25	5.8 (3.6 - 8.0)	304	83.6 (79.8 - 87.5)

**Table 8.1.2.1 Frequency and type of mental distress in the past 30 days among female children aged 13-17 years who experienced any violence in the past 12 months**

Mental distress	All/ most of the time		Some of the time		A little of the time		None of the time	
	N	% (95% CI)	N	% (95% CI)	N	% (95% CI)	N	% (95% CI)
Nervous	7	*	15	*	15	7.5 (3.7 - 11.4)	152	80.2 (74.0-86.7)
Hopeless	7	*	12	*	16	8.1 (4.2-12.1)	155	81.6 (75.3-88.0)
Restless	7	*	19	9.5 (4.6 - 12.6)	17	7.9 (5.5 - 14.1)	147	78.7 (69.9-83.6)
So sad that nothing could cheer you up	8	*	19	8.6 (4.5 - 12.7)	18	9.8 (5.3 -14.3)	145	76.8 (70.4-83.1)
Everything was an effort	4	*	14	8.0 (4.0 - 11.9)	12	6.0 (2.5 - 9.5)	159	83.3 (77.7-89.1)
Worthless	5	*	14	6.8 (3.2 - 10.5)	6	*	165	86.3 (81.1-91.6)

**Table 8.1.2.2 Frequency and type of mental distress in the past 30 days among male children aged 13-17 years who experienced any violence in the past 12 months**

Mental distress	All/ most of the time		Some of the time		A little of the time		None of the time	
	N	% (95% CI)	N	% (95% CI)	N	% (95% CI)	N	% (95% CI)
Nervous	11	*	43	14.1 (9.5 - 18.6)	26	9.0 (5.5 - 12.4)	215	73.3 (67.0 – 79.5)
Hopeless	5	*	27	9.1 (5.6 - 12.6)	15	4.8 (2.4 - 7.3)	247	84.1 (79.4 - 88.8)
Restless	9	*	34	11.4 (7.4 - 15.4)	34	11.3 (7.6 - 15.0)	218	74.2 (68.4 – 80.0)
So sad that nothing could cheer you up	11	*	27	9.7 (6.0 - 13.4)	25	8.0 (4.8 - 11.1)	232	78.7 (73.4 – 84.0)
Everything was an effort	8	*	13	*	17	4.9 (2.5 - 7.4)	257	87.6 (83.6 - 91.6)
Worthless	5	*	16	5.6 (2.6 - 8.6)	10	*	264	89.5 (85.8 - 93.2)

**Table 8.1.3.1 Frequency and type of mental distress in the past 30 days among female children aged 19-24 years who experienced any violence in the past 12 months**

Mental distress	All/ most of the time		Some of the time		A little of the time		None of the time	
	N	% (95% CI)	N	% (95% CI)	N	% (95% CI)	N	% (95% CI)
Nervous	11	*	33	22.4 (13.3- 31.6)	13	*	70	55.9 (47.1 - 64.7)
Hopeless	14	*	24	16.4 (9.4 - 23.4)	13	*	76	59.7 (51.6 – 67.8)
Restless	17	16.0 (6.7 – 25.2)	32	22.8 (14.3 - 31.2)	19	13.4 (6.6 – 20.3)	59	47.8 (39.6 - 56.1)
So sad that nothing could cheer you up	18	18.3 (9.3 - 27.3)	26	17.9 (10.1 - 25.7)	16	11.3 (5.5 - 17.1)	67	52.5 (44.9 - 60.1)
Everything was an effort	10	*	16	10.7 (5.0 - 16.4)	11	*	90	73.8 (64.2 - 83.4)
Worthless	9	*	20	13.8 (7.4 - 20.2)	14	9.6 (4.6 - 14.7)	84	70.0 (60.9 – 79.2)

**Table 8.1.3.2 Frequency and type of mental distress in the past 30 days among male children aged 19-24 years who experienced any violence in the past 12 months**

Mental distress	All/ most of the time		Some of the time		A little of the time		None of the time	
	N	% (95% CI)	N	% (95% CI)	N	% (95% CI)	N	% (95% CI)
Nervous	17	13.2 (7.4 – 18.9)	37	27.1 (19.6 -34.7)	16	14.5 (7.1 - 21.9)	62	45.2 (36.9 - 53.6)
Hopeless	12	9.0 (4.1 – 13.9)	30	22.1 (14.7 - 29.5)	19	16.1 (8.7 - 23.6)	71	52.7 (43.6 - 61.9)
Restless	14	10.4 (5.5 - 15.3)	34	23.7 (16.5 - 30.9)	22	18.1 (11.1 - 25.0)	62	47.8 (38.8 - 56.9)
So sad that nothing could cheer you up	13	9.5 (4.8 - 14.2)	23	17.3 (9.9 - 24.7)	12	9.2 (4.2 - 14.4)	84	64.0 (55.7 - 72.3)
Everything was an effort	7	*	17	12.6 (6.7 - 18.5)	11	*	97	72.8 (64.0 - 81.7)
Worthless	6	*	14	10.9 (5.6 - 16.2)	14	10.0 (4.9 - 15.2)	98	74.5 (66.0 - 82.9)

**Table 8.2.1.1 Percentage of females aged 18-24 years who reported health outcomes among those who did and did not experience sexual abuse<sup>1</sup> or physical<sup>2</sup> or emotional<sup>3</sup> violence prior to age 18**

	Health outcomes & violence															
	Females who reported...															
	Mental distress in the past 30 days	Being drunk in the past 30 days	Smoking in the past 30 days	Substance use in the past 30 days	Ever intentionally hurt themselves	Ever thought of suicide	Ever attemptedv suicide <sup>4</sup>	Symptoms/ diagnosis of STI <sup>5</sup>	n	% (95% CI)	n	% (95% CI)				
n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)			
Reported experiencing any sexual abuse prior to age 18	33	38.4 (28.4-48.4)	6	*	3	*	0	0(0)	2	*	22	15.0 (9.1-21.0)	3	*	14	7.9 (3.3-12.6)
Reported experiencing no sexual abuse prior to age 18	53	33.5 (25.6-41.4)	6	*	6	*	1	*	7	*	30	9.6 (3.4 – 15.9)	10	*	26	7.3 (3.8-10.8)
Reported experiencing any physical violence prior to age 18	40	37.3 (27.9-46.7)	4	*	3	*	0	0(0)	4	*	30	19.9 (8.6-31.1)	4	*	17	10.3 (4.3-16.3)
Reported experiencing no physical violence prior to age 18	46	32.9 (24.4-41.3)	8	*	6	*	1	*	5	*	22	5.6 (3.1-8.2)	9	47.2 (26.5 - 68.0)	23	5.7 (3.3-8.2)
Reported experiencing any emotional violence prior to age 18	22	56.9 (37.0-76.8)	1	*	1	*	0	0 (0)	3	*	17	32.0 (19.5-44.5)	3	*	5	*

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon by intimate partner, parent/adult relative, community member or peer.

<sup>3</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

<sup>4</sup> Among those who reported thinking of suicide.

<sup>5</sup> Symptoms include: genital sore/ulcer.

**Table 8.2.1.2 Percentage of males aged 18-24 years who reported health outcomes among those who did and did not experience sexual abuse<sup>1</sup> or physical<sup>2</sup> or emotional<sup>3</sup> violence prior to age 18**

	Health outcomes & violence															
	Females who reported...															
	Mental distress in the past 30 days		Being drunk in the past 30 days		Smoking in the past 30 days		Substance use in the past 30 days		Ever intentionally hurt themselves		Ever thought of suicide		Ever attemptedv suicide <sup>4</sup>		Symptoms/ diagnosis of STI <sup>5</sup>	
	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)		
Reported experiencing any sexual abuse prior to age 18	18	47.2 (31.4-63.0)	14	28.7 (15.5-41.9)	8	*	4	*	0	0 (0)	6	*	1	*	6	*
Reported experiencing no sexual abuse prior to age 18	66	27.6 (21.7-33.6)	94	20.3 (15.4-25.1)	40	7.9 (5.3-10.6)	5	*	6	*	24	4.3 (2.5-6.2)	5	*	35	6.7 (4.2-9.2)
Reported experiencing any physical violence prior to age 18	52	29.0 (21.7-36.3)	70	22.1 (16.4-27.8)	32	9.0 (5.8-12.2)	6	*	6	*	25	6.9 (4.2-9.6)	6	*	27	7.9 (4.8-11.0)
Reported experiencing no physical violence prior to age 18	32	33.0 (22.2-43.8)	38	19.6 (13.5-25.7)	16	8.0 (4.2-11.8)	3	*	0	0 (0)	5	*	0	0 (0)	14	*
Reported experiencing any emotional violence prior to age 18	30	45.4 (32.8-57.9)	32	34.6 (24.4-44.8)	12	*	2	*	2	*	11	*	1	*	10	*
Reported experiencing no emotional violence prior to age 18	54	25.1 (19.2-31.1)	76	18.3 (13.8-22.8)	36	8.1 (5.3-10.9)	7	*	4	*	19	3.6 (1.8-5.3)	5	*	31	6.5 (3.9-9.2)

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon by intimate partner, parent/adult relative, community member or peer.

<sup>3</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

<sup>4</sup> Among those who reported thinking of suicide.

<sup>5</sup> Symptoms include: genital sore/ulcer.

**Table 8.2.2.1 Percentage of females aged 13-17 years who reported health outcomes among those who did and did not experience sexual abuse<sup>1</sup> or physical<sup>2</sup> or emotional<sup>3</sup> violence in the past 12 months**

	Health outcomes & violence															
	Females who reported...															
	Mental distress in the past 30 days		Being drunk in the past 30 days		Smoking in the past 30 days		Substance use in the past 30 days		Ever intentionally hurt themselves		Ever thought of suicide		Ever attemptedv suicide <sup>4</sup>		Symptoms/ diagnosis of STI <sup>5</sup>	
	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)
Reported experiencing any sexual abuse in the past 12 months	3	*	3	*	1	*	0	0(0)	1	*	5	*	0	0(0)	4	*
Reported experiencing no sexual abuse in the past 12 months	24	22.4 (13.9-30.8)	6	*	4	*	0	0(0)	0	0(0)	7	*	1	*	5	*
Reported experiencing any physical violence in the past 12 months	11	26.3 (12.3-40.3)	2	*	1	*	0	0(0)	1	*	8	*	1	*	2	*
Reported experiencing no physical violence prior to age 18	16	18.6 (9.6-27.6)	7	*	4	*	0	0(0)	0	0(0)	4	*	0	0(0)	7	*
Reported experiencing any emotional violence in the past 12 months	12	38.2 (20.9-55.4)	2	*	0	0(0)	0	0(0)	0	0(0)	5	*	2	*	3	*

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon by intimate partner, parent/adult relative, community member or peer.

<sup>3</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

<sup>4</sup> Among those who reported thinking of suicide.

<sup>5</sup> Symptoms include: genital sore/ulcer.

**Table 8.2.2.2 Percentage of males aged 13-17 years who reported health outcomes among those who did and did not experience sexual abuse<sup>1</sup> or physical<sup>2</sup> or emotional<sup>3</sup> violence in the past 12 months**

	Health outcomes & violence															
	Males who reported...															
	Mental distress in the past 30 days		Being drunk in the past 30 days		Smoking in the past 30 days		Substance use in the past 30 days		Ever intentionally hurt themselves		Ever thought of suicide		Ever attempted suicide <sup>4</sup>		Symptoms/diagnosis of STI <sup>5</sup>	
	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	N	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)
Reported experiencing any sexual abuse in the past 12 months	3	*	13	35.8 (20.6-51.0)	2	*	0	0 (0)	0	0 (0)	2	*	0	0 (0)	3	*
Reported experiencing no sexual abuse in the past 12 months	35	19.6 (13.5-25.7)	63	11.0 (8.1-13.8)	23	4.3 (2.6-6.0)	1	*	2	*	7	*	2	*	15	2.1 (1.0-3.3)
Reported experiencing any physical violence in the past 12 months	18	18.5 (10.0-27.0)	40	15.0 (10.1-19.9)	6	*	0	0 (0)	1	*	5	*	1	*	7	*
Reported experiencing no physical violence prior to age 18	20	19.2 (10.5-27.9)	36	10.3 (6.6-14.1)	19	5.9 (3.3-8.4)	1	*	1	*	4	*	1	*	11	2.6 (1.1-4.1)
Reported experiencing any emotional violence in the past 12 months	18	31.8 (21.3-42.3)	17	21.3 (12.6-30.1)	4	*	0	0 (0)	2	*	5	*	2	*	4	*

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon by intimate partner, parent/adult relative, community member or peer.

<sup>3</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

<sup>4</sup> Among those who reported thinking of suicide.

<sup>5</sup> Symptoms include: genital sore/ulcer.

**Table 8.2.3.1 Percentage of females aged 19-24 years who reported health outcomes among those who did and did not experience sexual abuse<sup>1</sup> or physical<sup>2</sup> or emotional<sup>3</sup> violence in the past 12 months**

	Health outcomes & violence															
	Females who reported...															
	Mental distress in the past 30 days		Being drunk in the past 30 days		Smoking in the past 30 days		Substance use in the past 30 days		Ever intentionally hurt themselves		Ever thought of suicide		Ever attempted suicide <sup>4</sup>		Symptoms/diagnosis of STI <sup>5</sup>	
	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	N	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)
Reported experiencing any sexual abuse prior to age 18	28	53.3 (35.8 - 70.9)	3	*	2	*	0	0 (0)	4	*	18	25.2 (10.5 - 39.8)	5	*	8	*
Reported experiencing no sexual abuse prior to age 18	43	27.8 (19.9 - 35.8)	7	*	6	*	1	*	4	*	24	6.3 (3.5 - 9.2)	7	28.5 (12.5 - 44.4)	27	6.3 (3.7 - 9.0)
Reported experiencing any physical violence prior to age 18	19	53.4 (36.2 - 70.5)	3	*	0	0 (0)	0	0 (0)	2	*	14	36.0 (22.0 - 49.9)	6	*	4	*
Reported experiencing no physical violence prior to age 18	52	30.3 (21.4 - 39.2)	7	*	8	*	1	*	6	*	28	7.4 (4.0 - 10.7)	6	*	31	7.6 (4.2 - 11.0)
Reported experiencing any emotional violence prior to age 18	14	60.5 (36.7 - 84.3)	2	*	1	*	0	0 (0)	4	*	11	39.9 (25.7 - 54.0)	3	*	4	*
Reported experiencing no emotional violence prior to age 18	57	29.8 (22.4 - 37.1)	8	*	7	*	1	*	4	*	31	7.1 (4.4 - 9.8)	9	30.0 (14.8 - 45.2)	31	6.3 (3.9 - 8.7)

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon by intimate partner, parent/adult relative, community member or peer.

<sup>3</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

<sup>4</sup> Among those who reported thinking of suicide.

<sup>5</sup> Symptoms include: genital sore/ulcer.

**Table 8.2.3.2 Percentage of males aged 19-24 years who reported health outcomes among those who did and did not experience sexual abuse<sup>1</sup> or physical<sup>2</sup> or emotional<sup>3</sup> violence in the past 12 months**

	Health outcomes & violence															
	Females who reported...															
	Mental distress in the past 30 days		Being drunk in the past 30 days		Smoking in the past 30 days		Substance use in the past 30 days		Ever intentionally hurt themselves		Ever thought of suicide		Ever attempted suicide <sup>4</sup>		Symptoms/diagnosis of STI <sup>5</sup>	
	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	N	% (95% CI)	n	% (95% CI)	n	% (95% CI)	n	% (95% CI)
Reported experiencing any sexual abuse prior to age 18	17	52.1 (34.1 – 70.1)	15	29.9 (17.0 - 42.8)	5	*	3	*	1	*	5	*	1	*	9	*
Reported experiencing no sexual abuse prior to age 18	58	28.5 (21.9 – 34.9)	78	21.6 (15.9 - 27.2)	36	8.6 (5.6 - 11.5)	5	*	4	*	23	5.1 (2.9 - 7.3)	5	*	29	6.9 (3.9 - 10.0)
Reported experiencing any physical violence prior to age 18	17	40.2 (23.6 - 56.9)	19	32.8 (18.2 - 47.3)	8	*	2	*	3	*	11	*	2	*	9	*
Reported experiencing no physical violence prior to age 18	58	29.8 (22.4 - 37.3)	74	20.9 (16.0 - 25.7)	33	8.3 (5.4 - 11.1)	6	*	2	*	17	4.1 (2.1 - 6.2)	4	*	29	7.4 (4.2 - 10.5)
Reported experiencing any emotional violence prior to age 18	23	54.8 (41.5 - 68.0)	15	28.3 (16.0 - 40.6)	6	*	0	0 (0)	1	*	7	*	1	*	7	*
Reported experiencing no emotional violence prior to age 18	52	26.7 (20.0 - 33.3)	78	21.8 (16.3 - 27.3)	35	8.4 (5.5 - 11.4)	8	*	4	*	21	4.7 (2.5 - 6.8)	5	*	31	7.5 (4.7 - 10.4)

<sup>1</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

<sup>2</sup> Physical violence includes: punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, burning intentionally, using or threatening to use a gun, knife or other weapon by intimate partner, parent/adult relative, community member or peer.

<sup>3</sup> Emotional violence includes: being told that you were unloved or did not deserve to be loved, that they wished you were dead or had never been born, ridiculed or put down.

<sup>4</sup> Among those who reported thinking of suicide.

<sup>5</sup> Symptoms include: genital sore/ulcer.

**Table 8.3.1 Percentage of females aged 18-24 years who reported pregnancy, among those who experienced unwanted completed sex<sup>1</sup> prior to age 18**

Never got pregnant		Got pregnant		Pregnant at the time of data collection		Pregnant but not end in live birth	
n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	N	% (95% CI)
22	52.2 (35.7 – 69.3)	19	47.8 (30.7 – 64.9)	1	*	9	*

<sup>1</sup> Unwanted completed sex includes: physically forced sex and pressured sex.

**Table 8.3.2 Percentage of females aged 13-17 years who reported pregnancy, among those who ever experienced unwanted completed sex in the past 12 months**

Never got pregnant		Got pregnant		Pregnant at the time of data collection		Pregnant but not end in live birth	
n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	N	% (95% CI)
4	78.6 (48.5 – 100)	2	*	1	*	0	0

**Table 8.3.3 Percentage of females aged 19-24 years who reported pregnancy, among those who experienced unwanted completed sex in the past 12 months**

Never got pregnant		Got pregnant		Pregnant at the time of data collection		Pregnant but not end in live birth	
n	% (95% CI)	n	% (95% CI)	n	% (95% CI)	N	% (95% CI)
13	48.7 (24.6 – 72.7)	12	51.3 (27.3 – 75.4)	0	0 (0)	5	*

**Table 9.1 Sexual risk-taking behaviours among youths aged 19-24 years who experienced sexual abuse in childhood and reported having sexual intercourse in the past 12 months**

Sexual risk behaviours	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Two or more sex partners in the past 12 months	4	*	19	17.1 (8.5 - 25.6)
Infrequent condom use in the past 12 months	38	16.0 (10.7 - 21.4)	21	19.8 (12.1 - 27.5)
Any transactional sex in the past 12 months	19	6.0 (2.9 – 9.0)	10	*

**Table 9.2 Number of sexual partners in the previous 12 months, among 19-24 year olds who experienced sexual abuse in childhood**

Number of sexual partners in the past 12 months	Female		Male	
	N	% (95% CI)	N	% (95% CI)
2-5 partners	2	*	4	*
2-5 partners	0	*	1	*

**Table 9.3 Infrequent condom use among youths aged 19-24 who experienced sexual abuse in childhood and reported having sexual intercourse in the past 12 months**

Infrequent condom use in past 12 months	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Never	14	54.1 (34.5-73.7)	6	*
Sometimes	16	45.9 (26.3-65.5)	16	69.9 (49.8 – 90.0)

**Table 9.4 Infrequent condom use among youths aged 19-24 who experienced physical abuse in childhood and reported having sexual intercourse in the past 12 months**

Infrequent condom use in past 12 months	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Never	6	*	6	*
Sometimes	20	*	14	*

**Table 9.5 Infrequent condom use among youths aged 19-24 who experienced emotional abuse in childhood and reported having sexual intercourse in the past 12 months**

Infrequent condom use in past 12 months	Female		Male	
	N	% (95% CI)	N	% (95% CI)
Never	5	*	4	*
Sometimes	4	*	4	*

**Table 10.1 HIV-testing knowledge and behaviour among Rwandans aged 13-24 years who have ever had sexual intercourse**

HIV testing knowledge and behaviour	Females		Males	
	n	% (95% CI)	n	% (95% CI)
<b>13-17 years old</b>				
HIV-testing knowledge				
Know where to go for HIV test	31	95.0 (87.6 - 100)	56	88.7 (79.7 - 97.8)
HIV-testing behaviour				
Never tested For HIV	12	35.5 (18.6 – 52.4)	31	46.4 (34.1 – 58.6)
Tested for HIV	22	64.5 (47.6 – 81.4)	34	53.6 (41.4 – 65.9)
Received HIV results	20	92.9 (83.1 - 100)	33	97.3 (92.2 - 100)
<b>18-24 years old</b>				
HIV-testing knowledge				
Know where to go for HIV test	311	100	280	97.6 (94.8 - 100)
HIV-testing behaviour				
Never tested For HIV	12	3.3 (1.4 - 5.2)	28	10.9 (7.1 - 14.7)
Tested for HIV	299	96.7 (94.7 - 98.6)	256	89.1 (84.6 - 93.5)
Received HIV results	295	99.0 (97.9 - 100)	250	97.4 (95.4 - 99.5)

**Table 10.1.1 HIV-testing knowledge and behaviour among females aged 18-24 years who have ever had sexual intercourse by presence or absence of unwanted complete sex<sup>1</sup> prior to age 18**

Experience of sexual abuse prior to age 18	HIV/AIDS-testing knowledge		HIV/AIDS-testing behaviour			
	Know where to go for HIV test		Never tested For HIV		Tested for HIV, Received HIV results	
	N	% (95% CI)	n	% (95% CI)	N	% (95% CI)
Reported unwanted complete sex	28	100	1	*	27	100
Reported no unwanted complete sex	283	100	11	3.4 (1.4 – 5.4)	268	98.9 (97.7 – 100.0)

<sup>1</sup> Unwanted completed sex includes: physically forced sex and pressured sex.

**Table 10.1.2 HIV testing knowledge and behaviour among males aged 18-24 years who have ever had sexual intercourse by presence or absence of unwanted complete sex<sup>1</sup> prior to age 18**

Experience of sexual abuse prior to age 18	HIV/AIDS-testing knowledge		HIV/AIDS-testing behaviour			
	Know where to go for HIV test		Never tested For HIV		Tested for HIV, Received HIV results	
	N	% (95% CI)	n	% (95% CI)	N	% (95% CI)
Reported unwanted complete sex	4	100	0	0	4	100
Reported no unwanted complete sex	276	97.6 (94.8 – 100.0)	28	11.0 (7.2 - 14.9)	246	97.3 (95.3 - 99.5)

<sup>1</sup> Unwanted completed sex includes: physically forced sex and pressured sex.

**Table 10.2.1 HIV-testing knowledge and behaviour among females aged 13-17 years who have ever had sexual intercourse by presence or absence of unwanted complete sex<sup>1</sup> in the past 12 months**

Experience of sexual abuse prior to age 18	HIV/AIDS-testing knowledge		HIV/AIDS-testing behaviour			
	Know where to go for HIV test		Never tested For HIV		Tested for HIV, Received HIV results	
	N	% (95% CI)	n	% (95% CI)	N	% (95% CI)
Reported unwanted complete sex	4	90.6 (71.7 – 100.0)	3	*	1	*
Reported no unwanted complete sex	27	95.9 (87.9 – 100.0)	8	*	19	97.7 (93.1 – 100.0)

<sup>1</sup> Unwanted completed sex includes: physically forced sex and pressured sex.

**Table 10.2.2 HIV-testing knowledge and behaviour among males aged 13-17 years who have ever had sexual intercourse by presence or absence of unwanted complete sex<sup>1</sup> in the past 12 months**

Experience of sexual abuse prior to age 18	HIV/AIDS-testing knowledge		HIV/AIDS-testing behaviour			
	Know where to go for HIV test		Never tested For HIV		Tested for HIV, Received HIV results	
	N	% (95% CI)	n	% (95% CI)	N	% (95% CI)
Reported unwanted complete sex	0	0 (0)	0	0(0)	0	0(0)
Reported no unwanted complete sex	56	88.7 (79.7 – 97.8)	30	45.8 (33.6 – 58.0)	33	97.3 (92.2 – 100.0)

<sup>1</sup> Unwanted completed sex includes: physically forced sex and pressured sex.

**Table 10.3.1 HIV-testing knowledge and behaviour among females aged 19-24 years who have ever had sexual intercourse by presence or absence of unwanted complete sex<sup>1</sup> in the past 12 months**

Experience of sexual abuse prior to age 18	HIV/AIDS-testing knowledge		HIV/AIDS-testing behaviour			
	Know where to go for HIV test		Never tested For HIV		Tested for HIV, Received HIV results	
	N	% (95% CI)	n	% (95% CI)	N	% (95% CI)
Reported unwanted complete sex	11	100	3	*	8	100
Reported no unwanted complete sex	280	100	7	*	269	98.9 (97.8 – 100.0)

<sup>1</sup> Unwanted completed sex includes: physically forced sex and pressured sex.

**Table 10.3.2 HIV-testing knowledge and behaviour among males aged 19-24 years who have ever had sexual intercourse by presence or absence of unwanted complete sex<sup>1</sup> in the past 12 months**

Experience of sexual abuse prior to age 18	HIV/AIDS-testing knowledge		HIV/AIDS-testing behaviour			
	Know where to go for HIV test		Never tested For HIV		Tested for HIV, Received HIV results	
	N	% (95% CI)	n	% (95% CI)	N	% (95% CI)
Reported unwanted complete sex	1	100	0	0	1	100
Reported no unwanted complete sex	260	98.0 (95.1 – 100.0)	24	10.5 (6.6 - 14.5)	232	97.2 (95.0 - 99.4)

<sup>1</sup> Unwanted completed sex includes: physically forced sex and pressured sex.

**Table 11.1.1 Beliefs on acceptable reasons for a man hitting or beating his wife among respondents aged 18–24**

Respondents' beliefs	Females		Male	
	n	% (95% CI)	n	% (95% CI)
Goes out without telling him	106	17.9 (13.5 - 22.4)	39	6.5 (4.5 - 8.5)
Does not take care of the children	152	25.0 (19.8 – 30.2)	82	15.0 (11.9 - 18.2)
Argues with him	98	16.7 (12.7- 20.7)	32	5.3 (3.3 - 7.3)
Refuse have sex with him	94	15.7 (11.7- 19.6)	35	6.1 (3.9 - 8.3)
Burns the food	43	7.1 (4.8 - 9.3)	16	2.7 (1.2 - 4.2)

**Table 11.1.2 Beliefs on acceptable reasons for a man hitting or beating his wife among respondents aged 13-17**

Respondents' beliefs	Females		Male	
	n	% (95% CI)	n	% (95% CI)
Goes out without telling him	93	18.8 (15.1 - 22.4)	60	8.8 (6.4 - 11.2)
Does not take care of the children	164	33.1 (28.5 - 37.7)	129	19.7 (16.5 - 22.9)
Argues with him	100	19.7 (15.8 - 23.6)	58	9.1 (6.7 - 11.5)
Refuse have sex with him	84	17.7 (12.6 – 22.8)	62	10.0 (7.2 - 12.9)
Burns the food	56	10.6 (7.4 - 13.9)	22	3.4 (1.8 - 4.9)

**Table 11.2.1 Beliefs of respondents aged 13-17 towards the role of gender, sexual practices and intimate partner violence**

Beliefs of respondents	Females		Male	
	n	% (95% CI)	n	% (95% CI)
Men decide not women when to have sex	108	27.2 (22.6 - 31.8)	147	26.5 (22.2 - 30.8)
Men need more sex than women	187	48.6 (43.7 - 53.5)	224	41.0 (36.4 - 45.7)
Men need to have sex with other women even if they have good relationship with their wives	262	61.6 (56.0 - 67.3)	271	48.5 (43.6 - 53.3)
Women who carry condoms have sex with a lot men	306	70.8 (66.2 -75.5)	394	68.6 (64.4 - 72.8)
Women should tolerate violence to keep her family together	306	61.4 (55.3 - 67.4)	372	62.3 (58.2 - 66.5)

**Table 11.2.2 Beliefs of respondents aged 18-24 towards the role of gender, sexual practices and intimate partner violence**

Beliefs of respondents	Females		Male	
	n	% (95% CI)	n	% (95% CI)
Men not women decide when to have sex	98	17.2 (13.7 - 20.6)	76	13.5 (10.4 - 16.7)
Men need more sex than women	255	46.9 (39.9 - 53.9)	191	35.2 (30.1 - 40.3)
Men need to have sex with other women even if they have good relationship with their wives	364	69.3 (64.5 - 74.1)	270	49.4 (45.1 - 53.6)
Women who carry condoms have sex with a lot of men	333	61.6 (53.6 - 69.7)	336	61.6 (56.7 - 66.6)
Women should tolerate violence to keep her family together	360	66.4 (62.7 - 70.1)	331	58.1 (53.1 - 63.1)

**Table 11.3 Percentage of youth and children who reported committing physical<sup>1</sup> or sexual<sup>2</sup> violence against another person**

Age group	Females		Male	
	n	% (95% CI)	n	% (95% CI)
13-17 years old	39	7.3 (4.7 - 10.0)	46	7.5 (5.4 - 9.7)
18-24 years old	19	2.8 (1.4 - 4.2)	78	13.4 (10.5 - 16.3)

<sup>1</sup> Physical violence includes: slapping or pushing or punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, intentionally burning, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

**Table 11.4.1 Percentage of youths aged 18-24 years who reported committing physical or sexual violence by presence or absence of sexual<sup>1</sup> or physical<sup>2</sup> violence prior to age 18**

Experience of violence	Females		Male	
	n	% (95% CI)	n	% (95% CI)
Reported experiencing any sexual abuse prior to age 18	9	*	11	18.4 (8.7 - 28.0)
Reported experiencing no sexual abuse prior to age 18	10	*	67	12.8 (9.8 - 15.8)
Reported experiencing any physical violence prior to age 18	11	*	64	18.4 (14.1 - 22.7)
Reported experiencing no physical violence prior to age 18	8	*	14	6.0 (2.8 - 9.1)

<sup>1</sup> Physical violence includes: slapping or pushing or punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, intentionally burning, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

**Table 11.4.2 Percentage of children aged 13-17 years who reported committing physical<sup>2</sup> or sexual<sup>1</sup> violence by presence or absence of sexual or physical violence in the past 12 months**

Experience of violence	Females		Male	
	n	% (95% CI)	n	% (95% CI)
Reported experiencing any sexual abuse in the past 12 months.	7	*	6	*
Reported experiencing no sexual abuse in the past 12 months.	32	6.6 (4.1 – 9.1)	40	7.2 (4.9 - 9.4)
Reported experiencing any physical violence in the past 12 months.	18	13.1 (6.8 - 19.3)	32	12.4 (8.3 - 16.5)
Reported experiencing no physical violence in the past 12 months.	21	5.3 (2.4 – 8.1)	14	4.0 (2.0 - 6.1)

<sup>1</sup> Physical violence includes: slapping or pushing or punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, intentionally burning, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

**Table 11.5 Percentage of children and youths aged 13-24 years who reported ever using violence against a current or previous boyfriend, girlfriend, romantic partner, husband or wife among those who ever married or had a romantic partner**

Age group	Females		Male	
	n	% (95% CI)	n	% (95% CI)
13-17 years old	2	*	30	17.5 (11.3 - 23.7)
18-24 years old	10	*	60	14.4 (10.0 - 17.8)

**Table 11.6.2 Percentage of children aged 13-17 years who reported ever using violence against a current or previous boyfriend, girlfriend, romantic partner, husband or wife, by presence or absence of sexual<sup>1</sup> or physical<sup>2</sup> violence in the past 12 months**

Experience of violence	Females		Male	
	n	% (95% CI)	n	% (95% CI)
Reported experiencing any sexual abuse in the past 12 months	0	0 (0)	6	*
Reported experiencing no sexual abuse in the past 12 months	2	*	24	16.2 (9.5 - 22.8)
Reported experiencing any physical violence in the past 12 months	0	0 (0)	21	27.4 (17.2 - 37.7)
Reported experiencing no physical violence in the past 12 months	2	*	9	*

<sup>1</sup> Physical violence includes: slapping or pushing or punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, intentionally burning, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

**Table 11.6.1 Percentage of youth aged 18-24 years who reported ever using violence against a current or previous boyfriend, girlfriend, romantic partner, husband or wife, by presence or absence of sexual<sup>1</sup> or physical<sup>2</sup> violence prior to age 18**

Experience of violence	Females		Male	
	n	% (95% CI)	n	% (95% CI)
Reported experiencing any sexual abuse prior to age 18	4	*	11	21.4 (10.6 - 32.0)
Reported experiencing no sexual abuse prior to age 18	6	*	49	13.5 (10.0 - 17.1)
Reported experiencing any physical violence prior to age 18	5	*	49	18.9 (14.4 - 23.5)
Reported experiencing no physical violence prior to age 18	5	*	11	6.8 (2.9 - 10.6)

<sup>1</sup> Physical violence includes: slapping or pushing or punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, intentionally burning, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

**Table 11.4.3 Percentage of youth aged 19-24 years who reported using violence by presence or absence of sexual<sup>1</sup> or physical violence<sup>2</sup> in the past 12 months**

Experience of violence	Females		Male	
	n	% (95% CI)	n	% (95% CI)
Reported experiencing any sexual abuse in the past 12 months	10	*	14	27.3 (14.6 - 39.9)
Reported experiencing no sexual abuse in the past 12 months	9	*	51	12.0 (9.1 - 14.9)
Reported experiencing any physical violence in the past 12 months	4	*	9	*
Reported experiencing no physical violence in the past 12 months	15	2.8 (1.2 - 4.4)	56	13.7 (10.3 - 17.1)

<sup>1</sup> Physical violence includes: slapping or pushing or punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, intentionally burning, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

**Table 11.6.3 Percentage of ever-partnered youth aged 19-24 years who reported ever using violence against a current or previous boyfriend, girlfriend, romantic partner, husband or wife, by presence or absence of sexual<sup>1</sup> or physical violence<sup>2</sup> in the past 12 months**

Experience of violence	Females		Male	
	n	% (95% CI)	n	% (95% CI)
Reported experiencing any sexual abuse in the past 12 months	3	*	8	*
Reported experiencing no sexual abuse in the past 12 months	7	*	43	13.7 (9.9 - 17.4)
Reported experiencing any physical violence in the past 12 months	2	*	7	*
Reported experiencing no physical violence in the past 12 months	8	*	44	14.3 (10.3 - 18.4)

<sup>1</sup> Physical violence includes: slapping or pushing or punching, kicking, whipping, beating with an object, choking, smothering, trying to drown, intentionally burning, using or threatening to use a gun, knife or other weapon.

<sup>2</sup> Sexual abuse includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

