

TOGETHER FOR GIRLS: SEXUAL VIOLENCE FACT SHEET



Displaced girl, 12, raped when fetching firewood (Sudan)

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Sexual violence against children, particularly against girls, is universally condemned but much more frequent than people realize. It is a global human rights violation of vast proportions with severe immediate and long-term health and social consequences. It can take the form of harassment, touching, incest, rape or exploitation in prostitution or pornography. It happens in the home, schools, care and justice institutions, the workplace and within communities at large. It occurs everywhere, in developed and developing countries, as well as in emergency settings.

FACTS AND FIGURES¹

- At the time of the last global estimates in 2002, 150 million girls and 73 million boys under the age of 18 had experienced forced sexual intercourse or other forms of sexual violence involving physical contact.²
- Sexual violence against children is a global problem.
 - The National Violence Against Children Surveys showed that among women aged 18–24 years, nearly 38% in Swaziland,³ 27% in Tanzania⁴ and 32% in Zimbabwe⁵ reported experiencing any sexual violence before the age of 18. About 1 in 9 men in Tanzania and 1 in 10 men in Zimbabwe experienced the same.
 - A multi-country survey reveals that the prevalence of forced first sex among adolescent girls younger than 15 years ranges between 11% and 48% globally.⁶
 - In a study conducted in six Central American cities, 3% to 10% of men aged 19–30 reported experiencing sexual abuse as a child. Most men reported this abuse taking place when they were between 4 and 9 years of age.⁷
 - Recent data from the U.S. show that 1 in 5 women has been raped—about 40% of those occurring before age 18.⁸
 - In a study conducted in Bangladesh, nearly half of men who have committed sexual violence against women perpetrated sexual violence for the first time when they were under age 19.⁹
- Violence is often shrouded in silence, which contributes to lack of disclosure and service-seeking among children who have experienced sexual violence.
 - In Zimbabwe, among 18–24 year olds, only about 3% of females and slightly above 2% of males who experienced sexual violence received professional help from institutions such as clinics or NGOs.¹⁰
 - In Tanzania, almost 50% of girls who experienced sexual violence did not disclose to anyone. For males the percentage was even higher.¹¹
 - About 13% of girls in Swaziland who report sexual violence received professional help. Over 60% of girls reporting having experienced sexual violence indicated that they would have liked help, but felt services were not available.¹²

¹ The data presented under 'Facts and Figures' are based on different definitions of sexual violence used in the various studies. Therefore, the data are not a comparison of prevalence across countries/regions but rather demonstrates that sexual violence is a pervasive global problem.

² Pinheiro P. 2006. *The World Report on Violence against Children*. Geneva: United Nations Secretary-General's Study on Violence against Children.

³ UNICEF Swaziland and CDC. 2007. *National Survey on Violence Against Children in Swaziland*. Atlanta: CDC.

⁴ UNICEF Tanzania, CDC, and Muhimbili University of Health and Allied Sciences. 2011. *Violence Against Children in Tanzania: Findings from a National Survey 2009*. Dar es Salaam, Tanzania. *Prevalence data may differ from the report due to additional analysis focusing on 18-24 year olds.

⁵ Zimbabwe National Statistics Agency (ZIMSTAT). 2012. *National Baseline Survey on Life Experiences of Adolescents in Zimbabwe 2011: Preliminary Report*.

⁶ World Health Organization (WHO). 2005. *WHO multi-country study on women's health and domestic violence against women*. Geneva: WHO.

⁷ Contreras J, et al. 2010. *Sexual violence in Latin America and the Caribbean: A Desk Review*. Pretoria: Sexual Violence Research Initiative.

⁸ Black M, et al. 2011. *The National Intimate Partner and Sexual Violence Survey: 2010 Summary Report*. Atlanta: National Center for Injury Prevention and Control, CDC.

⁹ Partners for Prevention. 2011. *Men's Attitudes and Practices regarding Gender and Violence against Women in Bangladesh*. Dhaka: icddr/b.

¹⁰ ZIMSTAT. *Life Experiences of Adolescents in Zimbabwe*.

¹¹ UNICEF Tanzania. *Violence Against Children in Tanzania*.

¹² UNICEF Swaziland. *Violence Against Children in Swaziland*.

SHORT- AND LONG-TERM CONSEQUENCES

- Sexual violence experienced as a child can have a profound impact on core aspects of emotional, behavioral and physical health and social development throughout life. Sexual violence can also result in immediate and chronic physical and psychological consequences as wide ranging as heart disease to symptoms of post-traumatic stress disorder, depression and attempted or completed suicide.
- Sexual violence is also associated with increased risk of sexual and reproductive health problems, including unintended pregnancy, HIV and other sexually transmitted infections.
 - In Tanzania, over 6% of females 13–24 years of age who were ever pregnant reported that at least one pregnancy was caused by forced or coerced sex.¹³
 - Exposure to sexual violence as a child in Swaziland was associated with more than three times the risk of lifetime reported sexually transmitted infections, including HIV, compared to those not exposed.¹⁴
 - One study in rural South Africa showed that girls who experienced sexual abuse often in childhood had a 66% greater risk of HIV infection compared to young women who had not been abused.¹⁵
- Witnessing violence as a child can also lead to a cycle of violence.
 - Studies have found a strong association between witnessing and experiencing violence in childhood and becoming victims or perpetrating intimate partner and sexual violence during adulthood. Data from multiple countries show that girls who witness violence among their parents are at higher risk of becoming victims of intimate partner and sexual violence later in life^{16, 17} and that men who had witnessed or been victims of violence were more likely to use violence against their partners.¹⁸

RECOMMENDATIONS TO ADDRESS SEXUAL VIOLENCE

- ✓ **Increase the evidence base on sexual violence against children:** Supporting prevalence studies, such as the Violence Against Children Survey, is effective to mobilize action as well as track progress. Support is also needed for qualitative research to better understand the circumstances surrounding violence and action research to identify cost-effective prevention interventions and care and support strategies. National information systems, including birth registration, can help protect children and track progress.
- ✓ **Mobilize political will and resources to end sexual violence against children:** Sustained momentum toward addressing sexual violence requires evidence-based advocacy and partnerships at the local, national and global levels.
- ✓ **Implement effective legislation, policies and programs to prevent and respond to sexual violence against children, with a focus on girls:** Addressing sexual violence requires an integrated legislative, policy and programmatic response from the national and local levels, including legal, health, child protection, education, social welfare, gender and HIV sectors.
- ✓ **Empower governments, civil society, communities and families to be accountable and take action** to address the social tolerance of violence against children, especially sexual violence against girls, and promote a climate of social change against harmful norms, attitudes, behaviors and practices.
- ✓ **Support girls and boys** to have the life skills, knowledge and support systems to lead productive and healthy lives.

¹³ UNICEF Tanzania. *Violence Against Children in Tanzania*.

¹⁴ Reza A, et al. 2009. Sexual violence and its health consequences for female children in Swaziland: a cluster survey study. *Lancet*. 373(9679): 1966-1972.

¹⁵ Jewkes R, et al. 2010. Associations between childhood adversity and depression, substance abuse and HIV & HSV2 incident infections in rural South African youth. *Child Abuse Negl*. 34(11): 833–841.

¹⁶ Contreras J, et al. *Sexual violence in Latin America and the Caribbean*.

¹⁷ Jewkes R, et al. 2006. Rape perpetration by young, rural South African men: Prevalence, patterns and risk factors. *Soc Sci Med*. 63(11):2949-61.

¹⁸ Barker G, et al. 2003. *Engaging young men in violence prevention and in sexual and reproductive health*. Rio de Janeiro: Instituto Promundo.