Violence Against Children and Youth Survey

Findings from a National Survey, 2015-2016
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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Summary

Violence against children and young people is a fundamental violation of their rights. Sexual, physical and emotional violence has a devastating impact on health and happiness and prevents children and youth from contributing to societies to their full potential. Recognising the long-term national significance of this issue, the Government of Rwanda commissioned a survey of over 2,000 children and young people to understand the scale and nature of the problem and to enable appropriate and effective responses to be devised. The survey found that:

Prevalence Of Childhood Violence

Half of all girls and six out of ten boys experience violence during their childhoods.

Young people are exposed to high levels of violence.

28% of young people aged 19-24 have experienced at least one form of violence in the past year.

Perpetrators Of Violence Against Children

Children of all ages experience violence, although adolescents are often most at risk. Children are usually abused by those they know – parents, neighbours, teachers, boyfriends and friends.

Physical and emotional violence is most often committed by a parent or other caregiver.

Sexual violence against girls is carried out by a boyfriend or husband.

Of all physical violence against boys is committed by a peer.

Physical violence against boys is the most common form of violence, followed by physical violence against girls, sexual violence against girls and emotional violence against boys.

Disclosure Of Violence And Service Uptake

Children and young people share experiences of violence with friends and family, but not with service providers and the police. Children say that they don’t seek help because they feel violence is their fault or is not a problem.

63% experienced sexual violence in the past year told someone about it

62% had been physically abused shared their experience
Impact Of Childhood Violence

Children are more likely to abuse other children if they themselves have experienced violence.

12% of physically abused boys say they have been violent towards another person, compared to 4% of boys who have not been physically abused.

Violence in childhood leads to mental distress, early pregnancy and sexual risk-taking.

47% of young men who were sexually abused in childhood had experienced mental distress in the past month, vs 28% of those who had not been abused.

57% of young women who had experienced emotional abuse as children had considered suicide, compared with 30% of those who had not.

20% of young people who had been sexually abused had had two or more sexual partners in the last year, compared to a national average of 5%.

Beliefs About Gender And Violence

Children and young people hold beliefs about violence and sex that could put them at risk or increase the likelihood of their committing violence. Many believe that violence against women is justified and that men should hold the power in sexual relationships.

1/3 of girls and boys think it is acceptable for a husband to beat his wife if she doesn’t take proper care of the children.

Six in 10 children and young people believe that women should tolerate violence to keep families together.

Around a quarter of girls and boys think it is men who should decide when to have sex.

IT IS VITAL TO:

1. Develop a National Plan of Action to address this violence.
2. Take steps to prevent violence by challenging social norms that support it and working to ensure that schools are violence free.
3. Respond effectively to violence by training teachers and others in charge of caring for children, strengthening mental health services and prosecuting perpetrators.
4. Increase the resources allocated to tackling violence against children and young people.
5. Collect more evidence, including on the causes of violence against children.
6. Train both mothers and fathers on positive parenting.

Urgent action is needed to respond to the violence inflicted on children and young people.
FOREWORD

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 present Violence Against Children and Youth Survey (VACYS 2015-16) not only fills the gap on data but also paves a strong foundation for a comprehensive National Plan of Action to fight violence against children. 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 VACYS 2015-16 provides, for the first time, comparable, national population-based estimates that describe the magnitude and nature of violence experienced by children and youth in Rwanda. This survey also provides information on sexual health risk-taking behaviours as well as children’s knowledge about the availability of services to help young 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. The Ministry of Health (MoH) led the research through Rwanda Biomedical Centre (RBC). The technical support was provided by the United Nations Children’s Fund (UNICEF) and the US Centers for Disease Control and Prevention (CDC). The VACYS was financed by the International Development Research Center (IDRC) and the United Nations Child worked with the members of the Steering Committee on Violence against Children and the Technical Working Group on Violence Against Children composed by Ministry of Gender and Family Promotion (MIGEPROF), National Commission for Children (NCC), Ministry of Education (MINEDUC), Rwanda National Police (RNP) and National Institute of Statistics of Rwanda (NISR), UNICEF, CDC and IDRC.

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

The Rwanda Biomedical Centre (RBC) wishes to acknowledge the efforts of a number of organizations and individuals who made significant contributions to the success of this first national survey on Violence Against Children and Youth.

First, we would like to acknowledge the financial assistance from the International Development Research Center and the financial and technical support from UNICEF Rwanda. We express our gratitude to the Centers for Disease Control and Prevention for its collaboration and technical assistance throughout the survey. We gratefully acknowledge the support of the Steering Committee for the overall coordination of the survey.

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.

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Key Terms and Definitions

Child/ childhood/ young person/ youth
A child is any person under the age of 18; childhood is someone’s life time before the age of 18. In this report a young person, young woman / young man or youth is someone aged 18-24. Similarly, a girl or boy is a female or male child younger than 18.

Sexual violence
Sexual violence includes all forms of sexual abuse and sexual exploitation of children. It encompasses a range of acts, including rape, attempted rape, unwanted touching and non-contact sexual abuse (such as threats of sexual violence, exhibitionism or verbal 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 pornography.

Physical violence
Physical violence is the intentional use of physical force with the potential to cause death, disability, injury or harm. It includes punching, kicking, beating, suffocating, intentional burning or using (or threatening to use) a weapon.

Emotional violence
Emotional violence is verbal behaviour, whether habitual or an isolated incident, likely to damage a child’s mental health or his/her physical, mental, spiritual, moral or social development. It includes ignoring a child, treating him or her less favourably than others in the household and making repeated insults.
1. Introduction

All children have the right to grow up free from sexual, physical and emotional violence. This right is enshrined in the 1989 United Nations Convention on the Rights of the Child and in regional treaties, such as the 1990 African Charter on the Rights and Welfare of the Child. Violence against children and young people has devastating long-term consequences. It affects brain development and prevents children from reaching their full potential in school. It increases anxiety, depression and the risk of heart disease and diabetes, and can lead to behavioural problems and substance abuse. Responding to the impacts of violence is expensive, and economic growth is hindered by the lost human development resulting from violence.¹

The Government of Rwanda recognises the moral, health-related and economic imperative to address violence against children and young people. It has made a strong commitment to end all forms of violence by enacting various laws.² However, the lack of accurate information on the scale and nature of the challenge has prevented the formulation of an effective response. This report presents, for the first time, a comprehensive national picture of violence in childhood and youth using survey data from over 2,000 children and young people. The survey reveals that, in common with many other countries in the region,³ violence against children and young people in Rwanda is a reality and that action is needed.

The report is split into four sections. Following this introduction, section 2 lists the partners and briefly outlines the research methods. Section 3 presents key research findings. The final section summarises these findings and provides policy recommendations for a comprehensive, fully financed National Plan of Action on violence against children and youth.

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¹ 1990 African Charter on the Rights and Welfare of the Child
² 1990 African Charter on the Rights and Welfare of the Child
³ References to regional research appear at the end of this report.
2. Research Methods and Partners

The research was led by the Ministry of Health, with technical support from UNICEF and the United States Center for Disease Control and Prevention (CDC). The International Development Research Centre and UNICEF funded the process. The research was supported by a steering committee and technical working group, which also helped to develop the recommendations listed at the end of this report.

The research involved a survey of 1,182 boys and young men, and 1,032 girls and young women aged 13-24. The survey focused on childhood experiences of violence; some information was also gathered on young people’s exposure to it. Information on violence before the age of 18 was gathered from all respondents, while information on violence experienced between the ages of 18 and 24 was gathered from around 300 19-24 year olds. The 13-24 age group was selected because the questions were deemed inappropriate or too complex for children younger than 13, while adults older than 24 were felt unlikely to be able accurately to recall violence that had happened before the age of 18.

Respondents were randomly selected to be representative of the wider population. Almost all (97%) respondents had attended school, although only a quarter had had secondary-level education.

The survey was developed from questionnaires used in several other countries, tested and refined for the Rwandan context. The interviewers were all fully trained and carefully supervised during data collection, which took place at the end of 2015. Given the sensitive nature of the topic, particular attention was paid to ethics. Referral mechanisms were put in place so that support could be provided to any child or young person who became upset, was in immediate danger, or had previously experienced violence.

Despite our best efforts, there are limitations to the study. The survey focused only on children and youth within households and did not reach children on the streets or in institutional care. Violence is known to be especially high in these settings and research here is likely to reveal further abuse. The survey relied on self-reports of violence, which may be inaccurate because children (and especially young adults) have imperfect memories of violence during childhood. And self-reporting does not pick up data from children and young people reluctant to admit to abuse, either because they are embarrassed or ashamed, or because they fear retribution from the perpetrator. In relation to this last limitation, research teams were trained to be sensitive and to highlight the confidentiality of findings.

This short synthesis report is based on a longer, comprehensive report that provides more details on the research methods and findings.
3. Research Findings
The Prevalence of Violence Against Children

Any Form Of Violence

Half of the women aged 18-24 who were interviewed about violence during childhood had experienced some form of violence before the age of 18, compared to 65% of males.

These broad figures hide gender disparities – more boys than girls suffer from physical and emotional violence, whereas the opposite is true for sexual violence (Figure 1).

Of those aged 13-17, 36% of girls and 48% of boys had experienced some form of violence in the past year. There are gender disparities in this age group too: overall the most common forms of violence were physical violence against boys, followed by physical violence against girls. Then, in decreasing order of prevalence, came sexual violence against girls, emotional violence against boys, emotional violence against girls and sexual violence against boys (Figure 2).
Physical Violence

Around four out of 10 young women and six out of 10 young men had been exposed to physical violence as children. Forty-two per cent of boys aged 13-17 and 26% of girls in the same age group had experienced physical violence in the past year. In most cases, both boys and girls had experienced multiple incidents. For around half of the young people who were physically abused as children, the violence was severe enough for them to miss school, and around 19% of young men and 7% of young women said that physical violence during childhood had caused injuries.

Boys experience physical violence at a younger age than girls. Boys and young men most commonly reported that their first incident of physical violence happened when they were aged 6-11. For girls and young women, physical violence in childhood more commonly started when they were aged 12 or over.

Sexual Violence

Girls are more likely to experience sexual violence than boys, with two out of every 10 young women having been exposed to sexual violence before the age of 18, compared to one in 10 young men. Twelve per cent of girls aged 13-17 and 5% of boys in the same age group reported exposure to sexual violence in the past month. Most of those who had been sexually abused as children had experienced at least two such incidents. Of the different forms of sexual violence experienced during childhood by those aged 18-24, attempted rape was most common, followed by unwanted sexual touching and forced sex. Four per cent of young women had been forced to have sex before they were 18 years old.

Young people aged 18-24 most commonly reported that their first incident of sexual abuse occurred at the age of 16 or 17, with 65% of sexually abused girls and 58% of sexually abused boys reporting first incidents at this age. However, younger children suffer sexual abuse too: 13% of young women and 28% of young men said the first incident had happened at the age of 13 or younger. For those aged 13-17 who had been sexually abused, the first incident for girls was evenly spread across the age categories (under 13, 14-15 and 16-17 years). For boys, it most commonly occurred aged under 13 or 14-15 years.

Findings from young women and girls suggest that females are most likely to experience sexual violence on the street, followed by in their own home or the perpetrator’s home. Ten per cent of first incidents of sexual violence reported by young women had taken place in schools.

Young men aged 18-24 reported that sexual violence during childhood usually took place in their own home or that of the perpetrator. Boys aged 13-17 reported that sexual violence usually occurred in their own home or on the street. For both boys and girls, sexual violence was most likely to occur in the evening. Of the young women who reported having been sexually abused before the age of 18, approximately one third reported that their first experience of sexual intercourse had been unwanted.

Just under half of the girls aged 13-17 who had been sexually abused said that their first sexual intercourse had been unwanted. Extremely few of the males who had been sexually abused reported that their first experience of sexual intercourse was unwanted.
Emotional Violence

Emotional violence is the second most common form of violence towards boys in Rwanda (after physical violence), and is the least common form of violence suffered by girls. Twelve per cent of young women aged 18-24 and 17% of young men in the same age group reported having suffered emotional violence before the age of 18; for children, 8% of girls and 13% of boys said they had experienced emotional violence in the past year. Virtually all of those who reported emotional abuse had experienced more than one incident of this form of violence. The first incident of emotional violence had most commonly occurred in adolescence: 43% of young women and 49% of young men had first experienced emotional violence at the age of 12 or over. However, as with sexual violence, younger children are also exposed to emotional violence: 35% of young women and 27% of young men who had been emotionally abused as children were first abused while aged 6-11.

Multiple Forms Of Violence

Children who experience violence are often exposed to more than one form. Among those aged 13-17, 7% of children had experienced two or all three forms of violence in the past 12 months. Among those aged 18-24, 18% of young men and 13% of young women had experienced two or all three forms of violence before the age 18 (Figure 3).

The Perpetrators Of Violence Against Children

The survey collected information from those aged 18-24 on the perpetrators of the first incident of violence during childhood. Data was also collected on the perpetrators of the most recent incident of violence among those aged 13-17 who reported violence in the previous year. It is clear that most violence against children is perpetrated by those closest to them: for girls, young women and young men, physical and emotional violence was mostly carried out by a family member or other carer.
For boys aged 13-17, neighbours were the most common perpetrators of their most recent experience of physical violence. Findings from both age-groups (18-24 and 13-17) suggest that sexual abuse against both boys and girls was mostly committed by neighbours, though intimate partners were also responsible for a significant proportion of sexual violence against girls (Figure 4).

Physical violence by teachers is high, with young men reporting that 28% of physical violence during childhood was carried out by an adult in the neighbourhood, usually a teacher. This figure is 9% for young women. Classmates, friends and other peers are also responsible for a substantial percentage of violence, especially against boys. Young men reported that 17% of sexual violence and 28% of physical violence during childhood was committed by a peer, including classmates at school. For young women these figures were 26% and 9%, respectively.

Among children aged 13-17, 7% of both boys and girls reported having committed physical or sexual violence against another person. Seventeen per cent of boys who had had an intimate partner reported having physically abused them. There is some evidence to suggest that children and young people, especially males, are more likely to commit violence against another person if they themselves have been abused as a child: 12% of physically abused boys reported having been violent towards another person compared to 4% of boys who had not been physically abused. Twenty-one per cent of young men who had been sexually abused as children had committed violence against an intimate partner compared with 13% of those who had not been sexually abused. For physical abuse, these figures were 19% and 7%, respectively.

Sexual violence was usually committed by someone of the opposite sex, and in almost half of the cases for girls and one third of the cases for boys the perpetrator was at least five years older than the victim. In contrast, both men and women commit physical violence against both boys and girls. Girls and young women reported mothers as the most common perpetrators of childhood physical violence by adult carers, followed closely by fathers. For boys and young men, fathers were most common perpetrators of childhood physical violence, followed closely by mothers. Both male and female teachers committed physical violence against both boys and girls. A wide range of family members (including mothers, fathers, uncles and aunts) abused both boys and girls emotionally.
Disclosure Of Violence And Getting Help

More than half (56%) of young women who had experienced sexual violence as children had told others of their abuse, and 63% of girls who had experienced sexual violence in the past year had told others about it. For young men and boys these figures were 33% and 34%, respectively. Thirty-five per cent of women aged 18-24 who had been sexually abused as children knew where to get help compared with 46% of young men. Thirty-nine per cent of girls and 34% of boys who had been sexually abused in the past year knew where to get help.

Forty-seven per cent of young women who had experienced physical violence as children had told others of their abuse and 62% of girls who had experienced physical violence in the past year had told others. Around 60% of boys had told others when they suffered physical violence.

Fifty-five per cent of young women and 68% of young men who had been exposed to physical violence as a child said they knew where to get help. Thirty per cent of girls and 49% of boys who had been physically abused in the past year said they knew where to get support.

After suffering sexual violence, children most often confided in a friend, neighbour or family member. After physical violence, children most often told a family member, followed by a friend / neighbour and then service providers. Children were asked about what might stop them seeking help, and for both physical and sexual violence children said that the main reasons for not seeking help were not thinking violence was a problem and feeling that violence was their fault.

<table>
<thead>
<tr>
<th>Figure 5: Rates of disclosure of sexual and physical violence during childhood</th>
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<tbody>
<tr>
<td><strong>Sexual Violence</strong></td>
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<tr>
<td>For violence before age of 18, as reported by 18-24 year olds</td>
</tr>
<tr>
<td>Women</td>
</tr>
<tr>
<td>Men</td>
</tr>
<tr>
<td>For violence in the last year, as reported by 13-17 year olds</td>
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<tr>
<td>Women</td>
</tr>
<tr>
<td>Men</td>
</tr>
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Impacts Of Childhood Violence

There is a large body of evidence on the devastating impact of violence on children’s health and well-being. This study supports these findings, showing higher levels of mental distress amongst those who had experienced violence during childhood compared with those who had not. For example, 32% of young women who had experienced emotional abuse as children had considered suicide, compared with 8% of those that had not. Forty-seven per cent of young men aged 18-24 who had been sexually abused as a child had experienced mental distress in the past month, compared with 28% of young men who had not experienced this abuse.

Violent sexual abuse can lead to unplanned and unwanted pregnancy: among young women who had experienced unwanted completed sex in childhood, 48% reported unwanted pregnancy as a result. Childhood sexual violence has been shown to be associated with sexual-risk taking as an adult. About 20% of males aged 18-24 who had ever experienced sexual abuse reported having two or more sex partners in the last 12 months. In comparison, Rwanda’s most recent Demographic and Health Survey shows that, nationally, only 5% of men had had two or more sexual partners in the last 12 months.

This study suggests that although children know where to go for HIV testing, relatively few sexually active children actually go for tests (Figure 6). Among those aged 13-17 who had ever had intercourse, 95% of females and 89% of males knew where to go for an HIV test, though only 65% of those girls and 54% of these boys had actually been tested. For those aged 18-24 the figures were somewhat higher, with the vast majority of those who had had sex prior to the age of 18 knowing where to go for a test, and 97% of these young women and 89% of these young men actually having been tested. Boys and young men were tested less frequently than girls and young women.
Violence Against Young People

While the research largely focused on violence in childhood, some information was also collected on violence against young people in early adulthood (18-24 years). To collect this information, those aged 19-24 were interviewed about their experiences of violence over the last 12 months. Key findings include:

- **Prevalence of violence:** 28% of both males and females aged 19-24 had experienced one or more forms of violence in the last 12 months. Nineteen per cent of young women and 11% of young men had experienced sexual violence in the last 12 months, mostly unwanted sexual touching or unwanted attempted sex. Over 80% of these young people had experienced multiple incidents of sexual violence. Sexual violence usually took place in the evening, either in the perpetrator’s home or on the streets. Nine per cent of females and 13% of males reported physical violence in the past year. Eight per cent of females and 11% of males had been exposed to emotional violence in the past year and, in most cases, these young men and women had experienced more than one incident of emotional violence.

- **Perpetrators of violence:** most perpetrators of sexual violence against those aged 18-24 were of the opposite sex. Physical violence against young men was usually committed by a peer, followed by community members or adult male relatives. For young women, physical violence was usually committed by an intimate partner. Fathers were the most frequent first perpetrators of emotional violence.

- **Disclosure of violence and seeking help:** 58% of young women and 45% of young men who had experienced sexual abuse in the past year had told someone of their abuse and approximately half knew where to get help. Sixty-nine per cent of young women who had experienced physical violence in the past year had told someone about it, compared with 76% of young men. Fifty-three per cent of young women and 69% of young men knew where to go to get help.

- **Impact of violence:** among young women who had experienced their most recent incident of sexual abuse within the past year, 53% had suffered mental distress in the past month and 25% had considered suicide, compared with 28% and 6% for young women who had not been sexually abused in the past year. Fifty-two per cent of young men who had had their most recent incident of sexual abuse within the past year reported experiencing mental distress, compared with 28% of those who had not been abused. There were similar findings for both physical and emotional abuse. For example, 36% of young women who had been physically abused in the past year had thought of suicide compared with 7% who had not been abused. Fifty-five per cent of young men who had been emotionally abused in the past year had experienced mental distress, compared with 27% who had not been emotionally abused.

These findings show similarities between the experiences of children and young people, but there are interesting differences. For example, those aged 19-24 appear to have experienced lower overall rates of violence in the past year than those aged 13-17. Young people were also less likely than children to have experienced multiple forms of violence. Sexual violence was the most common form of violence experienced by young women in the past year, whereas physical violence was the most common form for girls. Young men seemed to be more willing to share experiences of sexual violence with others than were boys.

\[4\] 18 year olds were excluded from these questions as, had they been asked about violence in the last 12 months they could have described experiences prior to the age of 18 (i.e. in childhood) and this would have confused the research findings.
Beliefs About Sex, Gender And Violence

The survey explored attitudes towards violence and sex amongst children and young people, examining beliefs about domestic violence by husbands against wives and about sex and gender.

Many children and young people feel that violence against wives is justifiable (Figures 7 and 8): girls and young women seemed to find this violence more acceptable than boys and young men. In both age and gender groups, not taking good care of children was the most common justification for violence against wives, with a third of girls aged 13-17 and a quarter of young women aged 18-24 considering this to be an acceptable reason. Arguing with husbands, going out without telling them and refusing to have sex were also seen as justification for a husband to beat his wife. Around six in 10 children and young people believed that women should tolerate violence to keep families together.

Figure 7: Percentage of 13-17 year olds who think that violence by husbands against wives is justifiable, by reason and gender

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Doesn’t take care of children</td>
<td>33.1%</td>
</tr>
<tr>
<td>Argues with him</td>
<td>19.7%</td>
</tr>
<tr>
<td>Goes out without telling him</td>
<td>19.6%</td>
</tr>
<tr>
<td>Refuses sex</td>
<td>18.8%</td>
</tr>
<tr>
<td>Burns food</td>
<td>18.8%</td>
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</tbody>
</table>

Figure 8: Percentage of 18-24 year olds who think that violence by husbands against wives is justifiable, by reason and gender

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doesn’t take care of children</td>
<td>25%</td>
</tr>
<tr>
<td>Argues with him</td>
<td>15%</td>
</tr>
<tr>
<td>Goes out without telling him</td>
<td>16.7%</td>
</tr>
<tr>
<td>Refuses sex</td>
<td>17.9%</td>
</tr>
<tr>
<td>Burns food</td>
<td>15.7%</td>
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</table>
Children and young people have strong beliefs about the role played by gender in sexual relationships (Figures 7 and 8). Such beliefs may influence whether they themselves behave violently and may affect their ability to protect themselves from violence. Over a quarter of children believed that men should decide when to have sex and nearly half thought that men needed more sex than women. Over 60% of girls and nearly 50% of boys thought that men needed to have sex with other women, even if they were happy with their wives, and around seven out of 10 children thought that women who carry condoms have a lot of sex with men. Those aged 18-24 shared these beliefs (Figure 8).
4. Conclusion and Recommendations

This survey shows that children and young people in Rwanda are at risk of sexual, physical and emotional violence. The perpetrators are often the very people who are supposed to protect and nurture children in their homes and communities where they should be safe. Some children and young people hold beliefs about sex, gender and violence that may put them or their peers at risk.

Children and young people often, but not always, tell their friends and family when they have experienced violence. However, children and young people do not usually report violence formally to the police or to service providers, and worrying barriers exist to their getting help, such as a belief that they are at fault or that violence is not a problem. Sexual violence places children at higher risk of HIV infection, yet many children are not being tested despite knowing where to go for testing.

Violence is having a devastating impact on the mental health of children and young people, and is placing them at heightened risk of early pregnancy and sexual risk-taking. Violence is expensive, leading to an increased need across Rwanda for mental health services, maternal health care for highly vulnerable girls and HIV treatment. Violence generates further violence because victims of some forms of childhood violence are more likely to abuse others. Stopping this cycle of violence is imperative for the well being of both children and society at large. The survey steering committee therefore recommends:

1. The development of a National Plan of Action to address violence against children and youth. This plan should:
   - Be based on nationwide consultations, following the dissemination of survey findings.
   - Identify a lead ministry, but work across sectors.
   - Identify appropriate responses to violence, including referral mechanisms between the different agencies.
   - Seek to strengthen the awareness and capacity of those working directly with children and families to identify and respond appropriately to violence.
   - Establish mechanisms for coordination between agencies.

2. The development and implementation of interventions to prevent violence against children and youth, including:
   - Training parents and other caregivers in non-violent discipline.
   - Ensuring that schools and early childhood development centres are free from violence. This would include training on child protection, introducing codes of conduct and strengthening reporting mechanisms.
   - Challenging social and cultural norms that support violence against children through media campaigns, targeted awareness-raising with service providers and the introduction of new laws and policies.
   - Increasing the involvement of children and young people in the interventions.

3. The development and implementation of interventions to respond to violence against children and youth, including:
   - Developing standard operating procedures for the management of child protection cases.
   - Training frontline workers (social workers, healthcare workers, the police etc.) in effective response to violence.
   - Improving reporting and referral mechanism in schools and health centres, and providing counsellors in schools.
   - Mapping child protection services and ensuring that children and families are aware of their local services.
   - Strengthening mental health service provision for children, young people and families affected by violence.
   - Supporting the prosecution of perpetrators.

4. Increasing financing for the protection of children and young people. It is important to:
   - Estimate how much of the public budget is currently allocated to addressing violence against children and monitor ongoing resource allocation.
   - Calculate the cost of effective child-protection services to help ensure accurate budgeting.
   - Conduct a longitudinal study to determine the returns on investment in preventing and responding to violence against children.

5. Collecting more evidence on violence against children and continuing to monitor the response, including:
   - Further research on the drivers of violence and the factors that prevent children from speaking out about violence.
   - Periodic data on the prevalence of violence against young people.
   - Research on other gaps in understanding, such as on cyber-bullying and online violence, or the impacts of urbanization on violence against children and young people.
References

General


The Impacts of Childhood Violence


Rwandan Laws and Policies Relating To Violence Against Children and Youth

• 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, special of 27/05/2009 Regulating Labour in Rwanda.

• 2003 Policy on Orphans & Vulnerable Children (OVC).

• 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.

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