

Nigeria VACS 2014 Data File

SUMMARY

Led by the National Population Commission (NPopC) of the Federal Government of Nigeria, Nigeria is the first country in West Africa to undertake a national survey on violence against children. The Nigeria Violence Against Children Survey (VACS) 2014 continues the successful partnership between United Nations Children's Fund's (UNICEF) and the US President's Emergency Plan for AIDS Relief (PEFPAR), as well as members of the Together for Girls Initiative, to assist countries worldwide in conducting national surveys on violence against children. The Nigeria VACS 2014 follows and builds on the methodology of the surveys completed in Swaziland, Tanzania, Kenya, Zimbabwe, Haiti, Cambodia, Indonesia, and Malawi.

Known locally as the Health and Life Experiences Survey of Young People in Nigeria (HALIS), the Nigeria VACS 2014 was designed to: (1) provide information that will guide policies and strategies to prevent, identify, and respond to violence against children; (2) estimate the national lifetime prevalence of sexual, physical, and emotional violence against children (occurring before 18 years of age); (3) identify risk and protective factors for sexual, physical, and emotional violence against children; (4) recognize the health and social consequences of violence against children; (5) assess the knowledge and use of medical, psychosocial, legal, and protective services available for children who have experienced sexual and physical violence in Malawi as well as barriers to accessing such services; and (6) identify areas for further research.

The following topics were included in the Nigeria VACS 2014: demographics; socioeconomic status; parental relationships; education; general connectedness to family, friends, and community; work; marital status; gender attitudes; safety; witnessing violence in the home or community; sexual history and risk behavior; HIV testing; experiences of physical and emotional violence, and sexual abuse; sexual exploitation including sex exchange for money or goods; violence perpetration; pregnancy; health outcomes and risk behaviours; and utilization and barriers to health services. A multi-stage, geographically clustered sample design was used to produce nationally representative data. Questions regarding the negative health and social consequences, as well as health-seeking behaviors related to these events, were also included. There were a total of 4,203 completed interviews: 1,766 females with an overall response rate 93.7% and 2,437 males with overall response rate 93.7%.

The survey was administered in English, Hausa, Igbo, or Yoruba using electronic netbooks with CSPro software for data collection. A pilot test of the survey was conducted in four communities, which provided an opportunity to test the survey to ensure that the intent of questions was consistent after translation and appropriate for the Nigerian context.

The Nigeria VACS 2014 used a four-stage cluster sample survey design and was implemented between May 2014 and July 2014. The Nigeria VACS 2014 design incorporated a sampling frame originally compiled by the NPopC for the 2006 National Population and Housing Census. The primary sampling units (PSUs) were the enumeration areas (EAs) from the 2006 census, excluding 24 local government areas (about 2% of the population) due to political unrest. The sample size was determined from a standard cluster sample formula where the estimated prevalence of 30% for sexual violence in childhood was assumed based on previous VACS studies conducted in Tanzania, Kenya, and Zimbabwe.

In the first stage of selection for the Nigeria VACS 2014, 353 EAs out of 662,529 EAs were selected with a probability proportional to size of the EAs (the EA size is the number of households it contains). In the second stage of selection, a mapping and listing team from NPopC visited all of the selected EAs to identify structures and households. In stage three, a fixed number of 20 households (per PSU) were selected by equal probability systematic sampling. In stage four, one eligible respondent (female or male, depending on the selected EA) was

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randomly selected from the list of all eligible respondents aged 13 to 24 years in each household and administered the survey.

To calculate separate male and female prevalence estimates for violent 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 served to protect the confidentiality of respondents and eliminated 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 eliminated the chance that a female perpetrator and a male victim of sexual violence from the same community would both be interviewed.

A three step weighting procedure was used, incorporating: (Step 1) computation of base weight for each sample respondent; (Step 2) adjustment of the base weights for non-response; and (Step 3) post-stratification calibration adjustment of weights to conform with NPoPC 2013 population projections distributed by urbanization, age group (13-17 or 18-24), and gender.

Due to the complex sample design, clustering, stratification and sample weights should be taken into account in the data analysis in order to obtain proper point estimates and variances. Users of the Nigeria VACS 2014 Data Files should use statistical software packages such as SAS, SPSS, SUDAAN, or Stata that have specific analytic procedures for complex survey designs. The stratification, cluster and sample weight variables are GP, PSU and Finalwgt, respectively.

Further details on the Nigeria VACS 2014 methodology and results can be found in the country report, 'Violence against children in Nigeria: Findings from a national survey 2014', available at: <http://www.cdc.gov/violenceprevention/vacs/publications.html>.