

2012 VACS Haiti Data File

SUMMARY

The 2012 Violence against Children Survey (VACS) in Haiti is the first national survey on violence against children in the Republic of Haiti. The VACS Haiti was made possible by the partnership and collaboration between the Centers for Disease Control and Prevention (CDC), Interuniversity Institute for Research and Development (INURED), United Nations Children's Fund (UNICEF), Multi-Sectoral Task Force known as the Comité de Coordination (CC), and the Together for Girls Partnership. The CC includes representation from the Ministry of Social Affairs and Labor, Ministry of Public Health and Population, Ministry of Justice and Public Security, Ministry of Women's Affairs and Women's Rights, Institute of Social Welfare and Research, Brigade for the Protection of Minors, and other key governmental and non-governmental partners. Implemented in June of 2012, the VACS Haiti is a nationally representative household survey of females and males aged 13 to 24 years that is based on a three-stage cluster design and that yields separate estimates for experiences of sexual, physical, and emotional violence prior to age 18 for both, females and males in Haiti. The survey also includes a short questionnaire for an adult in the household to build rapport with the family and to determine current socioeconomics of the household.

The VACS Haiti was designed to: (1) estimate the national prevalence of sexual violence, physical violence, and emotional violence against boys and girls that occurred prior to turning age 18; (2) identify risk and protective factors for sexual, physical, and emotional violence against children to inform stakeholders and guide prevention efforts; (3) recognize the health and social consequences of violence against children; (4) assess the knowledge and utilization of medical, psychosocial, legal, and protective services available for child victims of sexual and physical violence in Haiti as well as barriers to accessing such services; (5) assess the impact of the January 12, 2010 earthquake and the complex, protracted humanitarian crisis on sexual violence; (6) identify areas for further research; and (7) provide information that will guide strategies to prevent, identify and respond to violence against children, especially, sexual violence.

Field work for the VACS Haiti was conducted during April and June of 2012. The paper-pencil survey, administered in Haitian Kreyol, included the following topics: demographics; socioeconomic status; parental relations; education; general connectedness to family, friends, and community; marital status; domestic servitude; displacement following the January 2010 earthquake; sexual behavior and practices; sex in exchange for money or goods; pregnancy; HIV/AIDS testing; experiences of physical, emotional, and sexual violence; health outcomes associated with exposure to violence; and utilization and barriers to services. There were a total of 2916 completed interviews: 1457 females (individual response rate 93.1%) and 1459 males (individual response rate 88.5%). The combined household and individual response rates provide an overall response rate for females of 85.6% and for males of 82.0%.

The survey incorporated standard enumeration areas, known as Section d'Enumeration (SDE), the primary sampling unit based on geographical subdivisions in Haiti determined by the Haitian Institute of Science and Information (IHSI), as well as camps/tent settlements for internally displaced persons (IDP) resulting from the 2010 earthquake. There were a total of 11,967 SDEs in Haiti. The VACS Haiti sample design was first stratified into IDP camps/tent settlements and non-camp enumeration areas. For the non-camp population, the sample was further stratified by *Domaine* with the Ouest Department being split into rural areas and the Port-au-Prince metropolitan area. The sample was allocated proportional to the population size of the *Domaine*. In the first stage, for the non-camp sample, 177 SDEs were selected with the probability of selection proportional to size (PPS) from the non-camp sampling frame. For IDPs, a total of 11 camps were selected using PPS from the camp sampling frame and included as part of the national study sample. As such, a total of 188 enumeration areas (EAs) were selected - 177 SDEs for the non-camp sample and 11 camps or camp segments for the IDP sample. The non-camp and camp selected EAs were then randomly assigned to the female survey or male survey, using systematic sampling with a random start. Based on gender differential response rates and differences in the proportion of households with eligible females or males, a total of 84 female EAs and 104 male EAs were selected. In Stage 2, following a complete mapping and listing of structures and households within each EA, a cluster of 35 households was selected from each EA systematically with a random start. In Stage 3, using the Kish method, one eligible respondent was randomly selected from the list of all eligible respondents aged 13–24 years in each household and administered the questionnaire. Within each EA, children of only one gender were considered eligible based on the gender assignment for that EA.

To calculate separate male and female prevalence estimates for violence victimization, a split sample approach was used.

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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.

Due to the steadily declining camp population and the closing of many camps in 2012, the sample size calculation was based on the non-camp population. The following assumptions were used to estimate the non-camp sample size for both males and females: 95% confidence interval (CI) of +/-2.0% around an estimated prevalence of sexual violence against children of 30%, and a design effect of 2.0. The calculated sample size based on these assumptions was 1,008 completed interviews for males and 1,008 completed interviews for females. Adjustment to the sample size for eligibility as well as non-response resulted in a target of 2,678 households in 89 EAs for the female sample and 3,692 households in 123 EAs for the male sample. While not oversampling the IDP camps/tent settlements, they were included in the survey in order to provide overall representative national estimates. Camps were not included in the sampling frame provided by IHSI and therefore a separate sampling strategy was required. In order to determine the number of camps in the study sample, two approaches were taken. First, the camps/tent settlements were considered as a separate stratum, in which separate camp estimates were not being made. Instead, the sample was proportionally allocated and was determined to be 5.6% of the total national population. Second, the desired camp/settlement sample size was 60 completed female interviews and 60 completed male interviews. Adjusting for eligibility and non-response at the household and individual levels, using the numbers above for non-camp sample, 164 and 204 households were estimated to yield the necessary number of completed IDP camp/settlement interviews for females and males, respectively.

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 VACS Haiti Public Use Data File should use statistical software packages such as SAS, SPSS, SUDAAN, or Stata that have specific analytic procedures for complex survey designs. A three step weighting procedure was used for VACS Haiti: (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 known population totals. The final weights were used in all analyses to produce estimates of population parameters.

There is no personally-identifying information in the data. The stratification, cluster and sample weight variables are: domaine, PSU, and Finalwgt, respectively.

Further details on the VACS Haiti methodology and results can be found in the country report, "Violence against children in Haiti: Findings from a national survey 2012", available at: <http://www.cdc.gov/violenceprevention/vacs/publications.html>