



Violence Against Children in Nigeria



Findings from a National Survey 2014

Summary Report

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National Survey 2014

Summary **Report**

U.S. Centers for Disease Control and Prevention
National Center for Injury Prevention and Control
Division of Violence Prevention



unicef 

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The findings and conclusions of this report are those of the authors and do not necessarily represent the official position of UNICEF or the US Centers for Disease Control and Prevention.

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Abuja, September 2015



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Foreword

The Violence Against Children Survey (VACS) in Nigeria was the first of its kind not only in Nigeria, but also in West Africa. The VACS Nigeria was executed by the National Population Commission (NPOPC) in 2014. It provides, for the first time, national estimates that describe the magnitude and nature of sexual, physical and emotional violence experienced by under-18 females and males in Nigeria. The information is designed to help support efforts in Nigeria to develop and implement effective child-friendly violence prevention strategies, as well as to improve service provision for all Nigerians, especially for children who experience violence.

The success of the VACS was made possible by a number of organizations and individuals. In this regard, I appreciate the technical and financial support received from the United Nations Children's Fund (UNICEF), the technical support received from the United States Centers for Disease Control and Prevention (CDC) and the Office of the Special Representative of the Secretary General on Violence against Children, and the financial support received from the US President's Emergency Plan for AIDS Relief and the European Union. Consequently, the support and collaboration enjoyed during data collection from the National, State and Local Governments, non-governmental organizations and other stakeholders is acknowledged. Special appreciation goes to the Federal Ministry of Women Affairs and Social Development, the Steering Committee on Violence Against Children and the Technical Working Group on Violence Against Children.

On behalf of the Commission, I wish to express my appreciation for the 2014 Nigeria VACS Technical Team, the Project Director, Mr. Unogu Sylvanus, and the Project Coordinator, the late Mr. Solomon Bello, for the management of all of the technical, administrative and logistic activities for the Survey. I would also like to put on record my sincere appreciation to the Survey Steering Committee and Technical Working Group Members, Field Staff, Data Processing Team, and the Survey respondents and community leaders. Similarly, I wish to express appreciation to the Honorable Federal Commissioners representing 36 States of the Federation plus the Federal Capital Territory for their assistance during their advance management visit to the field and for providing oversight for the Survey during data collection. I greatly appreciate Ms. Jonna Karlsson, Ms. Rachel Harvey and Mr. Tatenda Makoni from UNICEF Nigeria, for their commitment and the great expertise with which they managed all the facets of this Survey.



I am also thankful to CDC Atlanta staff, Dr. Howard Kress for data processing and Mr. Jose Carlosama for facilitating the uploading of data from the field to the center by the data collectors. I recognize the contribution of Mr. Henry Mbene for coordinating the field staff on the use of their notebooks and backup system during data collection. I also commend the efforts of the Commission's staff, Mr. Usman Kolapo (sampling Specialist), who provided technical support for sampling and Mr. Ogunsina Joseph (Geo Position System Specialist). The overall routine survey management of the Director- General, NpopC, Dr. Ghaji Ismaila Bello and the contribution of Director, Planning and Research, Dr. S. O. Olanipekun, and all NPopC Staff is hereby acknowledged.

The availability of the National Violence Against Children data on a periodic basis will provide policy-makers, planners, researchers and analysts with relevant information to monitor trends in violence against children. It is our fervent hope that the data presented on the findings and the response plan will be actively applied in the course of socio-economic planning in Nigeria.

Eze Duruiheoma, (SAN)

Chairman

National Population Commission

List of Key Acronyms

CDC	United States Centers for Disease Control and Prevention
CRA	Child's Rights Act
FBO	Faith-Based Organization
MDAs	Ministries, Departments and Agencies
NGO	Non-Governmental Organization
NPA	National Priority Agenda for Vulnerable Children in Nigeria 2013–2020
NPoPC	National Population Commission
PEPFAR	United States President's Emergency Plan for AIDS Relief
SOPs	Standard Operating Procedures
STIs	Sexually Transmitted Infections
TWG	Technical Working Group on Violence Against Children
UNICEF	United Nations Children's Fund
US	United States
USAID	United States Agency for International Development
VACS	Violence Against Children Survey
WASH	Water, Sanitation and Hygiene

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Key Findings

FINDINGS FROM A NATIONAL SURVEY 2014

Key Findings

There is a high prevalence of violence against children in Nigeria

Before the age of 18 years:

- Approximately 6 out of every 10 children experience some form of violence
- Half of all children experience physical violence
- One in four girls and one in ten boys experience sexual violence
- One in six girls and one in five boys experience emotional violence by a parent, caregiver, or adult relative

Violence is rarely an isolated incident

- The majority of children who experienced physical, sexual or emotional violence in childhood reported multiple incidents
- Girls are significantly more likely to experience both sexual violence and physical violence than other combinations of violence. Boys are significantly more likely to experience both physical and emotional violence, than other combinations of violence

Violence starts at a young age

- For children who experienced violence before the age of 18, over half had their first experience between the ages of 6 and 11. Approximately 1 in 10 children's first experience is under the age of 5
- Of those who experienced sexual violence before the age of 18, a third of girls and nearly 1 in 6 boys experienced their first incident of sexual violence between 14 and 15, while almost a third of boys and approximately 1 in 5 girls experienced their first incident of sexual violence at 13 years and younger
- Approximately half of children first experience emotional violence before the age of 12

Perpetrators are overwhelmingly people whom children know

- A parent or adult relative is the most common perpetrator of physical violence in childhood
- Amongst adults in the neighborhood who perpetrate physical violence, male

teachers are the most frequent perpetrators of the first incident of physical violence

- Girls' first experience of sexual violence is most commonly by a romantic partner, followed by a friend, neighbor, classmate and stranger. Boys' first experience of sexual violence is most commonly by a classmate or a neighbor
- Children are most likely to experience sexual violence in the perpetrator's home, followed by their own home, at school, at someone else's home and on a road
- Amongst adult caregiver or relative perpetrators of emotional violence, parents/step parents, followed by uncles/aunts, are the most common perpetrators of the first incident of emotional violence

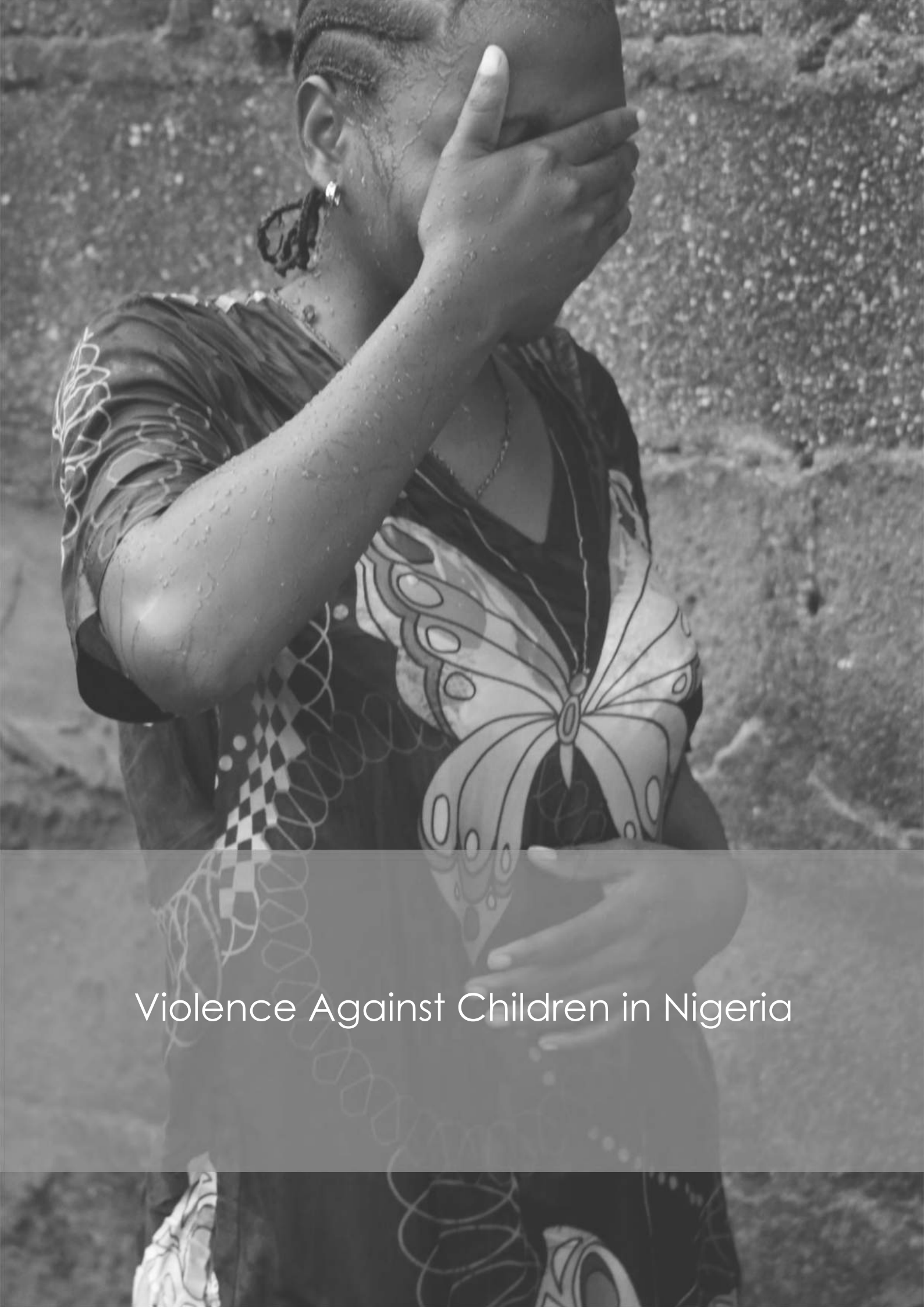
Children are not disclosing violence, seeking or receiving services

- Less than half of all respondents who experience physical violence tell someone about it. Respondents who experienced sexual violence had even lower rates of disclosure
- Children who do tell someone are much more likely to tell a friend or relative than a service provider or authority figure
- Children have a low awareness of people or services from which they can seek help. Boys have a significantly higher awareness than girls of where to seek help
- Of those who experienced sexual or physical violence, no more than 6% sought help and less than 5% receive help

Violence has serious impacts on girls' and boys' lives and future

Compared to persons who have never experienced childhood violence:

- Physical violence is associated with higher rates of mental distress, thoughts of suicide, and symptoms or diagnosis of a sexually transmitted infection (STI) among females and with mental distress, thoughts of suicide, and substance use among males
- Sexual violence is associated with higher risk for symptoms or diagnosis of sexually transmitted infections, mental distress and thoughts of suicide among females and with mental distress among males. 15% of females reported getting pregnant as a result of unwanted completed sex.
- Emotional violence is associated with higher levels of mental distress and thoughts of suicide amongst females and higher levels of mental distress and drinking amongst males



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Methodology

FINDINGS FROM A NATIONAL SURVEY 2014

Methodology

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) continues the successful partnership between United Nations Children's Fund (UNICEF) and the US President's Emergency Plan for AIDS Relief (PEPFAR), as well as members of the Together for Girls Initiative to assist countries worldwide in conducting national surveys on violence against children. The Nigeria 2014 VACS follows and builds on the methodology of the surveys completed in Swaziland, Tanzania, Kenya, Zimbabwe, Haiti, Cambodia, Indonesia, and Malawi.

NPoPC authored the Nigeria VACS report, from which this Summary Report is derived. The United States Centers for Disease Control and Prevention (CDC) and UNICEF provided technical support to NPoPC throughout the development and implementation of the survey. A national Steering Committee, chaired by NPoPC, and comprised of key Ministries, Departments, Agencies and Non Governmental Organizations (NGOs) was established to oversee the development and implementation of the survey and review the survey findings.

The Nigeria VACS was commissioned between May and July 2014. The survey consisted of a cross-sectional household survey¹ of females and males aged 13 to 24, designed to produce national-level estimates of experiences of violence. A total of 4,203 individuals in this age group participated in the Nigeria VACS, with 1,766 females and 2,437 males completing the individual questionnaire.

For analysis purposes, respondents were separated into two age sub-groups - 13 to 17 and 18 to 24. Lifetime prevalence estimates of violence in childhood were based on responses from participants aged 18 to 24 reporting on their experiences prior to the age of 18. The group aged 13 to 17 provided information on events occurring in the 12 months prior to the survey, representing current estimates and allowing for an examination of current patterns and the context of violence against children in Nigeria. **Unless otherwise stated, the findings in this Summary Report refer to responses by the 18-24 age group regarding their experiences before age 18.**

¹The survey did not cover children in situations of particular vulnerability – children living in residential or institutional care, children in places of detention, children living and working on the streets, children with disabilities, children living in situations of conflict. While these children experience all forms of violence, programming to meet their specific needs of vulnerability to violence requires targeted quantitative and qualitative research, with a different methodology and tools from the VACS, which seeks to produce reliable national estimates by targeting children living households.

What is Violence against Children?

For the purpose of the Nigeria 2014 VACS:

Emotional violence was defined as being ridiculed or put down by a parent, adult caregiver or adult relative, or being told by them that they were unloved or did not deserve to be loved, that they wished they were dead or had never been born.

Physical violence was defined as physical acts of violence such as punching (hitting with a fist), 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, regardless of whether or not it resulted in obvious physical or mental injury. It is not focused on acts of discipline, although many of those perpetrating the violence may be doing so in the name of 'discipline'.

Sexual violence was used to describe all forms of sexual abuse and exploitation. This encompasses a range of acts, including unwanted completed sex acts (i.e., rape), attempted non-consensual sex acts, abusive sexual contact (i.e., unwanted touching), and pressured sex (such as through threats or tricks), by any person regardless of their relationship to the child experiencing the violence, in any setting. While some of the analysis focused on acts that may be narrowly defined as 'sexual abuse', this Summary Report uses the broad term 'sexual violence' throughout.



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Findings of the Nigeria Violence Against Children Survey 2014

FINDINGS FROM A NATIONAL SURVEY 2014

2.1 Prevalence of Violence in Childhood

Physical violence in childhood

- Physical violence in childhood was the most common type of violence reported.
- Approximately half of females and males experienced physical violence, with over 80% experiencing multiple incidents of violence.
- Of those that experienced physical violence in childhood, over half had their first experience between the ages of 6 and 11. Approximately one in ten children's first experience was under the age of 5.

Sexual violence in childhood

- One in four females and one in ten males reported experiencing sexual violence in childhood.
- Approximately 70% of males and females who had experienced sexual violence reported more than one incident of sexual violence.
- Almost half of females and males who experienced sexual violence reported that their first incident of sexual violence occurred before the age of 16.
- A third of females who experienced sexual violence experienced the first incident between 14 and 15, while almost a third of males experienced the first incident at 13 years and younger.

Emotional violence in childhood

- One in six females and one in five males reported emotional violence in childhood, with over 80% experiencing multiple incidents.
- Almost half of all males and females, who experienced emotional violence in childhood, experienced the first incident before the age of 12.

Overlap of types of violence

- Girls were significantly more likely to experience both sexual violence and physical violence than other combinations of violence. Boys were significantly more likely to experience both physical and emotional violence than other combinations of violence.

High Rates of Violence against Children

Physical violence in childhood was the most commonly reported type of violence across both sexes. Males and females experienced physical and emotional violence at similar rates, whereas females were more likely to report experiencing sexual violence in childhood compared to males (25% versus 11%). 50% of females and 52% of males experienced physical violence prior to the age of 18. Sexual touching was the most common type of sexual violence experienced by both females and males. Among females, 17% reported experiencing emotional violence in childhood compared to 20% of males.

Violence is Rarely an Isolated Incident

Children rarely experience violence only once in childhood. Among those who reported experiencing physical violence prior to the age of 18, 89% of females and 84% of males reported experiencing multiple incidents of physical violence. Of those who experienced sexual violence in childhood, 71% of females and 69% of males experienced multiple incidents. Among those who reported experiencing any emotional violence before the age of 18, females and males reported experiencing multiple incidents in similar proportions – 80% and 78% respectively.

Although specific forms of violence have a distinctive nature and can occur in isolation, attempts to 'categorize' violence can be somewhat artificial given the boundaries between acts of violence often become blurred. For example, sexual violence is often inflicted through the use of physical force and/or psychological intimidation. The survey investigated 'overlaps' in the three types of violence. Overlaps could happen in one of two ways: (1) violence might occur simultaneously, such as when a child is being emotionally and physically abused at the same time; and (2) violence can occur to the same child, but at different points in time.

38% of females experienced one form of violence (sexual, physical, or emotional), 19% experienced two forms of violence prior to age 18 and 6% experienced all three forms of violence. 40% of males experienced only one form of violence, 17% experienced two forms of violence, and 3% experienced all three forms of violence. Females were significantly more likely to experience both sexual violence and physical violence than other combinations of violence. Males were significantly more likely to experience both physical and emotional violence, than other combinations of violence.

Violence Starts at a Young Age

More than 60% of children who experienced **physical violence** experienced the first incident before they became a teenager. Approximately 1 in 10 experienced their first incident of physical violence at 5 years of age or younger. Around half of

females and males first experienced physical violence between the ages of 6 and 11. About a third experienced their first incident between the ages of 12 and 17.

About half of females and males who experienced **sexual violence** in childhood experienced their first incident between 16 and 17 years (48% and 55% respectively). Almost a third of females who experienced sexual violence before age 18 (32%) had their first incident between 14 and 15, while almost a third of males (29%) had their first incident at age 13 years or below.

Females were significantly more likely to report that their first experience of sexual intercourse in childhood was forced. For those whose first sexual intercourse was prior to age 18, 26% of females reported their first sexual intercourse as forced compared to 9.6% of males.

About half of females and males who experienced **emotional violence** in childhood experienced the first incident between the ages of 12 and 17, and around two in five experienced their first incident between the ages of 6 and 11 years.

Witnessing Violence in the Home and Neighborhood

The survey asked respondents about their experience of witnessing physical violence both in the home (hearing or seeing a parent punch, kick or beat the other parent, their boyfriend or girlfriend or a sibling) and in the neighborhood (seeing someone in the neighborhood attacked). This is important as witnessing violence in the home or neighborhood can have similar effects on children's cognitive, behavioral, and social development as directly experiencing violence. The survey found that 66% of females and 58% of males reported witnessing physical violence in the home prior to age 18. Witnessing physical violence at home was significantly more likely than witnessing physical violence in the neighborhood.

Physical Injuries

One in four females and one in five males who experienced physical violence in childhood experienced physical injury as a result of the first incident. Scratches, bruises, aches, redness, swelling, or other minor marks were the most common type of injury reported by both females and males who experienced injury. However, 29% of females and 40% of males who were injured as a result of physical violence had more serious injuries, including: sprains, dislocations or blistering; deep wounds; broken bones; broken teeth; blackened or charred skin; and/or permanent injury or disfigurement.

2.2 Perpetrators of Violence Against Children

- Perpetrators of violence against children were overwhelmingly people who the children knew.
- A parent or adult relative was the most common perpetrator of physical violence in childhood.
- Amongst adults in the neighborhood who perpetrate physical violence, male teachers were the most frequent perpetrators of the first incident of physical violence.
- Males reported high rates of physical violence inflicted by peers.
- Females' first experience of sexual violence was perpetrated most commonly by a spouse, boyfriend or romantic partner, followed by a friend, neighbor, classmate and stranger. Males' first experience of sexual violence was perpetrated most commonly by a classmate or a neighbor.
- Parents/step parents, followed by uncles/aunts, are the most common perpetrators of first incident of emotional violence.

In order to better focus prevention efforts in Nigeria, it is important to know more about who is perpetrating violence against children. One of the common misconceptions amongst the general public is that violence against children is perpetrated solely by offenders with biological predispositions to violent behavior.² The survey revealed that perpetrators of all forms of violence came from all walks of life and were primarily people that children know.

Perpetrators of Physical Violence

Parents or adult relatives were the most common perpetrator of the first incident of physical violence in childhood (females 36%, males 34%), followed by an adult in the neighborhood, a peer and an intimate partner.

²United Nations Children's Fund. (2014). Hidden in Plain Sight: A statistical analysis of violence against children. New York: UNICEF, p. 6

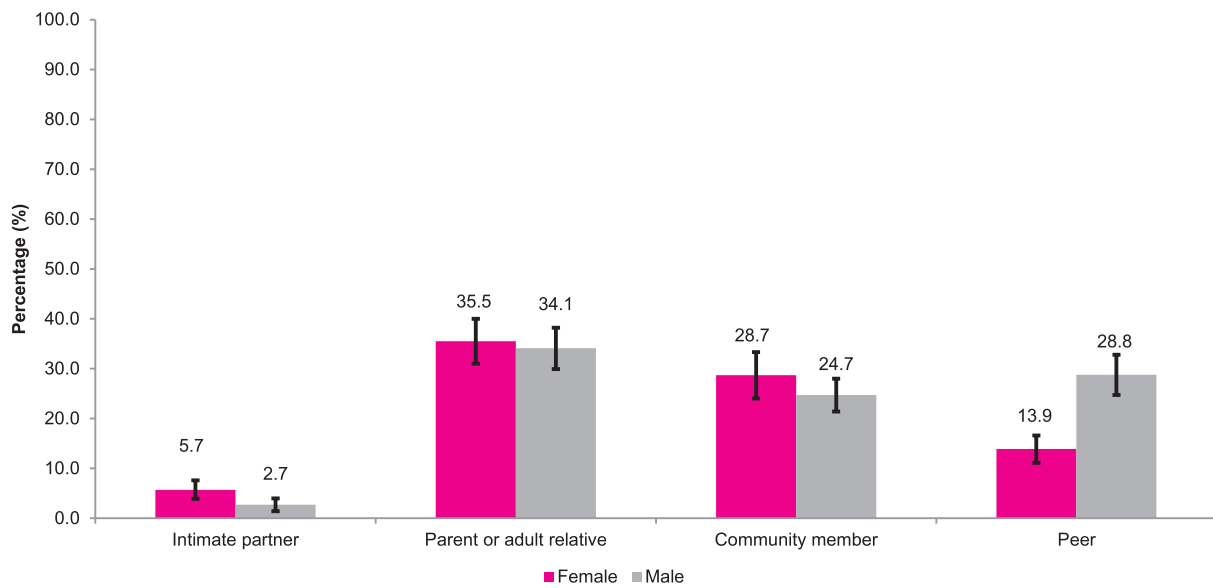


Figure 1. Percent of females and males aged 18-24 years who reported experiencing any physical violence by an intimate partner, parent or adult relative, adult in the neighborhood or peer prior to age 18 – Nigeria VACS, 2014.

The survey further analyzed the most common perpetrators within each of these three groups: – (1) a parent or adult relative; (2) an adult in the neighborhood; (3) and a peer.

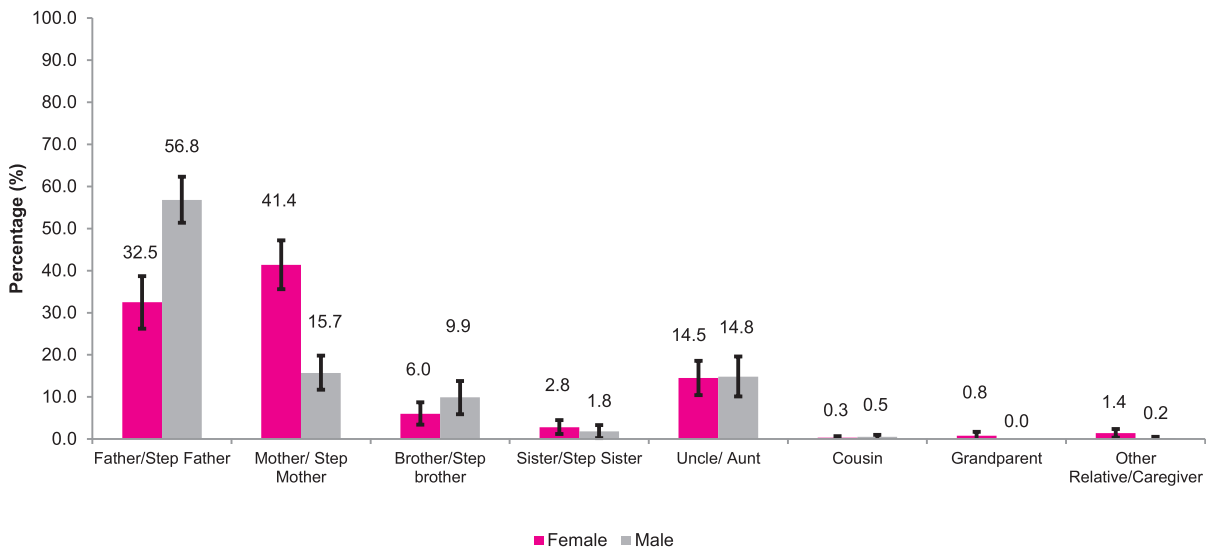


Figure 2. Percent of females and males aged 18-24 years who reported any physical violence by a parent/adult caregiver/adult relative prior to the age of 18, by perpetrator of first incident – Nigeria VACS, 2014.

Where perpetrators were adult relatives or parents, the children experiencing the violence tended to be same sex as the perpetrator.

In relation to physical violence perpetrated by adults in the neighborhood, both females and males were significantly more likely to report male teachers as the perpetrator than any other person in the neighborhood.

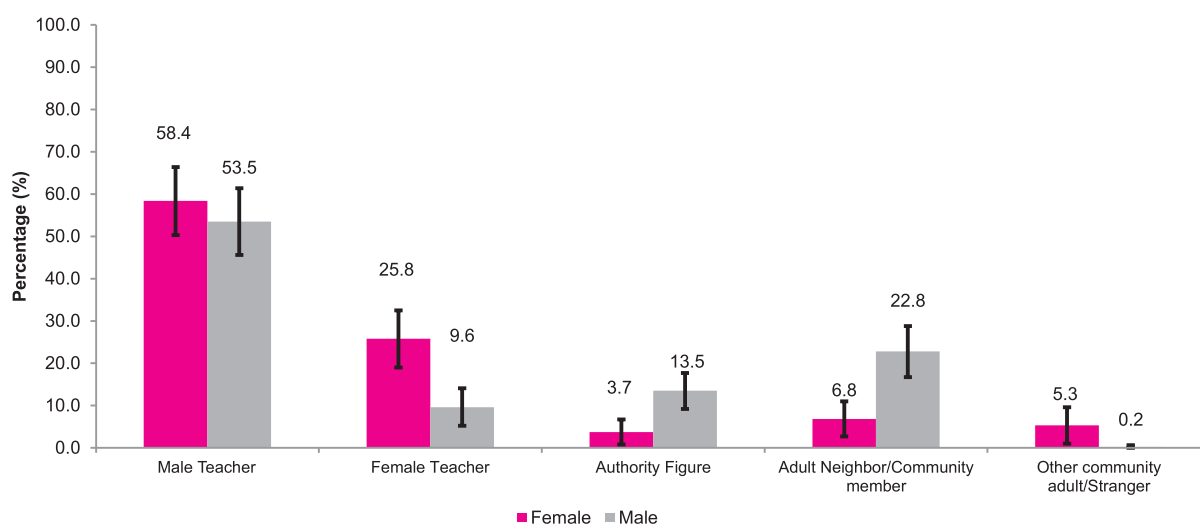


Figure 3. Percent of females and males aged 18-24 years who reported any physical violence by adults living in the neighborhood prior to the age of 18, by perpetrator of first incident – Nigeria VACS, 2014.

The most common peer perpetrator of physical violence differed by sex. Among females, classmates/ schoolmates (37%) were most often identified as the perpetrator of the first incident of physical violence by a peer, followed closely by friends (36%). Males most often identified a friend (40%) as the perpetrator of the first incident of physical violence by a peer, followed by a classmate/schoolmate (27%).

Perpetrators of Sexual Violence

Romantic partners were the most common perpetrators of the first incident of sexual violence in childhood among females. Schoolmates or neighbors were most commonly reported as perpetrators of the first incident of sexual violence among males. Females who experienced sexual violence in childhood were significantly more likely than males to perceive their perpetrator to be 5 or more years older - 70% of females compared to 32% of males. The perpetrator was most commonly identified as being of the opposite sex.

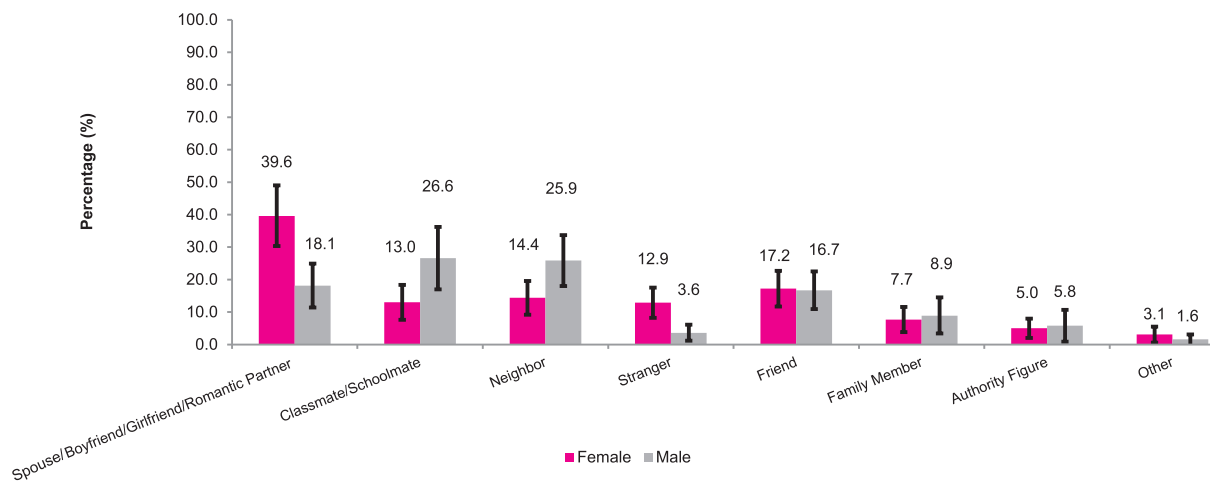


Figure 4. Percent of females and males who experienced any sexual violence prior to age 18 by perpetrator of first event of sexual violence among 18-24 year olds – Nigeria VACS, 2014.

Perpetrators of Emotional Violence

The parent of the same sex was the most common perpetrator of emotional violence in childhood for females and males. Among those who experienced emotional violence by an adult relative or parent, the majority reported that the perpetrator lived within the same household.

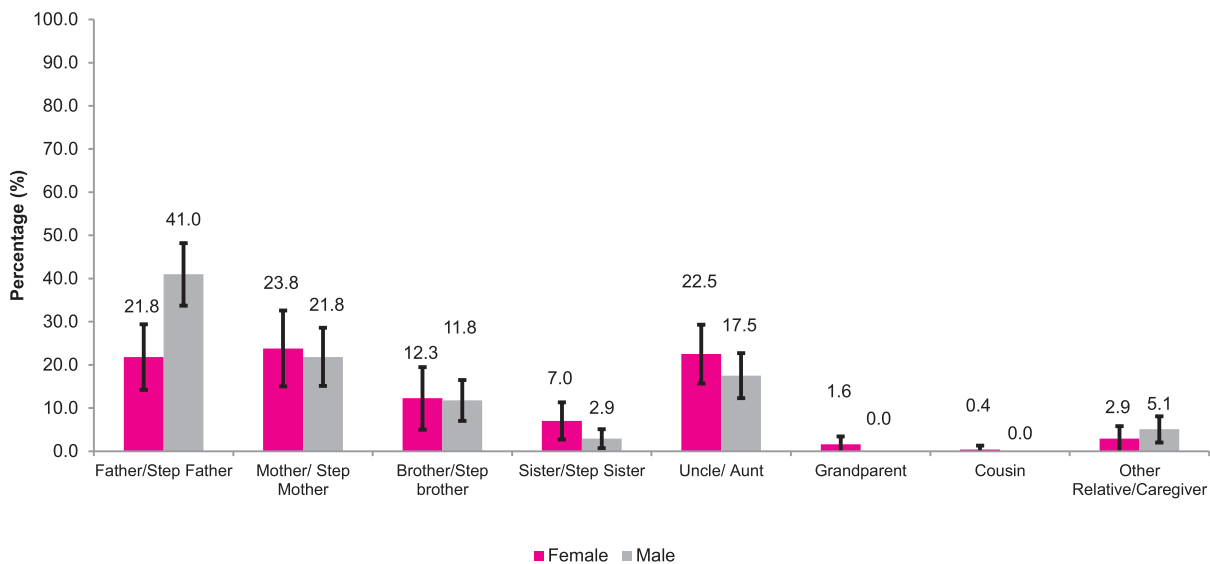


Figure 5. Percent of females and males aged 18-24 years who experienced any emotional violence by a parent, adult caregiver, or other adult relative prior to the age of 18, by perpetrator of first incident – Nigeria VACS, 2014.

2.3 Context of Sexual Violence Against Children

In addition to identifying perpetrators of sexual violence, the survey sought to understand where and at what time violence took place in order to better focus prevention efforts. The first incident of sexual violence in childhood was examined.

Females and males who experienced sexual violence in childhood were significantly more likely to report the first incident of sexual violence happening during the afternoon, following closely by the evening, compared to morning or late at night.

The perpetrator's home was the most commonly reported location by both females and males for the first incident of sexual violence.

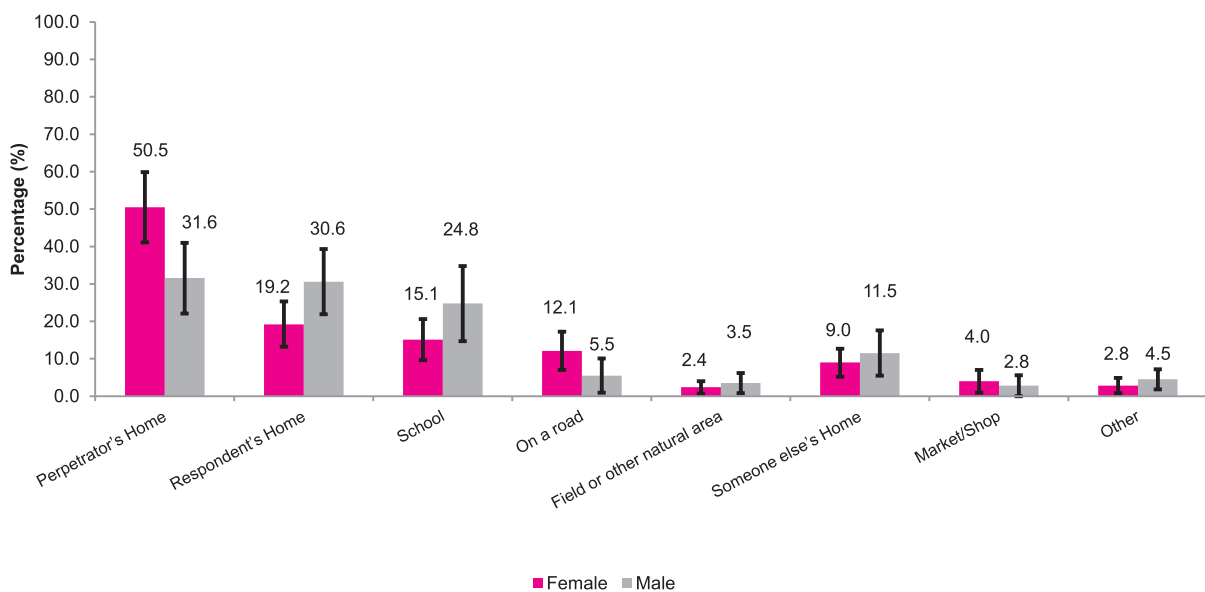


Figure 6. Location of first incident of sexual violence among 18–24 year olds who experienced sexual violence prior to age 18- Nigeria VACS, 2014.

2.4 Children's Disclosure and Service-Seeking Behavior

- Less than half of all females and males who experienced physical violence told someone about it. Those who experienced sexual violence had even lower rates of disclosure.
- Males and females who did disclose were more likely to tell a friend or relative about an experience of violence than a service provider or authority figure.
- Females and males who experienced violence had low awareness of people or services from which they could seek help. Males had a significantly higher awareness than females of where to seek help.
- Of those who experienced violence, no more than 6% sought help and less than 5% received assistance.
- Males and females most commonly cited individual-level barriers that prevented them from seeking help, such as not thinking the violence was problematic.

Low Rates of Disclosure and Service-Seeking Behavior for Physical Violence

Less than half of all females and males who experienced physical violence in childhood told someone about it. Of those that experienced physical violence before they turned 18 years, 45% of females and 43% of males told someone.

Females who experienced physical violence and told someone about their experience most often reported telling a relative (71%), followed by a friend (24%). Males also most often told a relative (72%), followed by a friend (36%). Disclosure to a service provider or authority figure was low (3% for females and 5% for males).

Females and males who experienced physical violence before age 18 had low awareness of places from which they could seek help if they experienced physical violence. Males had a higher level of awareness of where to seek help than females. Among those who experienced physical violence in childhood, 18% of females and 35% of males knew of a place to seek help.

Even lower rates of help seeking were reported amongst those who had experienced physical violence - only 5% of females and males sought help.

Not all children who sought help received it. 4% of females and males received help for an experience of physical violence. Out of the small number that did receive help when they sought it, males were significantly more likely to receive help from a health care worker (94%), compared to any other service provider, followed by teacher (63%), and police (22%). Given the low rates of service provision to females, the service providers cannot be statistically analyzed.

Low Rates of Disclosure and Service-Seeking Behavior for Sexual Violence

Even lower rates of disclosure were reported by those who had experienced sexual violence in childhood; 38% of females and 27% of males told someone about an experience of sexual violence. Among those who spoke out, 57% of females told a friend and 33% told a relative. Similarly, 82% of males told a friend and 25% told a relative. Patterns of knowledge of and utilization of services by children who had experienced sexual violence are similar to those for physical violence. Of females who experienced sexual violence, 16% knew of a place to seek help, 5% sought help, and 4% received help. Among males, 39% knew of a place to seek help, 3% sought help, and 2% received help.

Barriers to Seeking Help

Children can encounter numerous barriers in seeking help following violence. In relation to physical violence, the most common reason those who experienced physical violence in childhood cited for not seeking help was that they did not think that the violence was problematic (46% of females and 45% of males). Females also reported not needing or wanting services (29%), feeling it was their fault (12%), being afraid of getting in trouble (9%), and not being able to afford services (5%). Males reported not needing or wanting services (24%), being afraid of getting in trouble (13%) and feeling like it was their fault (13%). In relation to sexual violence, there were insufficient responses to enable analysis of reasons why females did not seek services. However, among males, 51% cited that the reason they did not seek services for incidents of sexual violence in childhood was because they did not think it was a problem.

2.5 The Consequences of Violence Against Children

- Childhood violence was found to be linked with poor mental and physical health outcomes, including self-harm, thoughts of suicide, and STIs.
- Females and males who experienced physical and sexual violence in childhood were significantly more likely to report perpetrating physical violence against a partner.
- Among females with experience of unwanted completed sex in childhood, 1 in 7 reported pregnancy as a result of the sexual violence
- Around 10% of females and males reported missing school due to an experience of physical or sexual violence.
- Sexually active females with a history of emotional violence in childhood were more likely to have multiple sex partners and practice infrequent condom use than those who did not experience emotional violence; among sexually active males, emotional violence was associated with greater likelihood of infrequent condom use.

The data on health and social outcomes reported by those who experienced sexual, physical, or emotional violence in childhood compared to those who did not experience such violence clearly demonstrates that violence against children in Nigeria is linked to poorer mental and physical health outcomes for females and males. It is also associated with increased risk for subsequent sexual risk-taking behavior and the propensity for children to use violence against their intimate partners both during childhood and adulthood.

Damaging Health Outcomes

Links between physical violence in childhood and poor health: When compared to females and males who had not experienced physical violence, females and males who had experienced physical violence in childhood were significantly more likely to have:

- experienced mental distress in the past 30 days (40% versus 29% for females and 38% versus 24% for males);
- ever contemplated suicide (9% versus 5% for females and 5% versus 2% for males);
- reported symptoms or diagnosis of STIs (15% versus 7% for females); and
- used drugs or misused substances in the past 30 days (6% versus 2% for males).

Links between sexual violence in childhood and poor health: When compared to those who had not experienced sexual violence, those who had experienced sexual violence in childhood were significantly more likely to have:

- experienced mental distress in the past 30 days (42% versus 32% females,
- ever intentionally hurt themselves (11% versus 4% for females, 17% versus 6% for males);
- ever contemplated suicide (13% versus 5% for females); and
- ever had symptoms or diagnosis of STIs (16% versus 9% for females).

Links between emotional violence in childhood and poor health: When compared to females and males who had not experienced emotional violence in childhood, females and males who had experienced emotional violence were significantly more likely to have:

- experienced mental distress in the past 30 days (48% versus 31% for females and 41% versus 28% for males);
- contemplated suicide (16% versus 4% for females); and
- been drunk in the past 30 days (30% versus 21% for males).

Sexual Violence and Pregnancy

Among females who experienced sexual violence in childhood, 15% reported becoming pregnant as a result of unwanted completed sex.

Impacts on Sexual Risk-Taking Behavior and HIV Testing

The survey examined the link between exposure to violence in childhood and subsequent sexual risk-taking behavior and HIV testing behaviors of males and females who experienced at least one incident of sexual violence. In order to separate the timing of incidents of violence from subsequent risk behaviors, the survey compared those age 19-24 years who had experienced physical, sexual and emotional violence in childhood with those who had not. Among sexually active females and males:

- those who experienced physical violence in childhood were significantly more likely to report infrequent condom use in the past year (35% versus 18% for females and 55% versus 39% for males);
- those who experienced sexual violence in childhood were significantly more likely to report infrequent condom use in the last year (43% versus 20% for females and 57% versus 46% for males); and
- those who had experienced emotional violence were more likely to report infrequent condom use in the past year (42% versus 23% for females and 64% versus 42% for males) and having multiple sex partners in the past year (13% versus 2% for females and 30% versus 24% for males).

A majority of females and males who experienced sexual violence in childhood reported never having been tested for HIV (51% of females and 60% of males).

Links Between Violence in Childhood and Intimate Partner Violence

Individuals who experienced violence in childhood were more likely to report perpetrating intimate partner violence. Compared to those who did not experience physical violence in childhood, females and males who had experienced physical violence in childhood were significantly more likely to use physical violence against a romantic partner, girlfriend or boyfriend, or wife or husband (20% versus 7% for females and 29% versus 10% of males). Likewise, compared to those who did not experience sexual violence in childhood, females and males who experienced sexual violence in childhood were significantly more likely to use physical violence against a romantic partner, girlfriend or boyfriend, or wife or husband (23% versus 10% for females and 38% versus 18% of males).

2.6 Beliefs on Gender and Violence

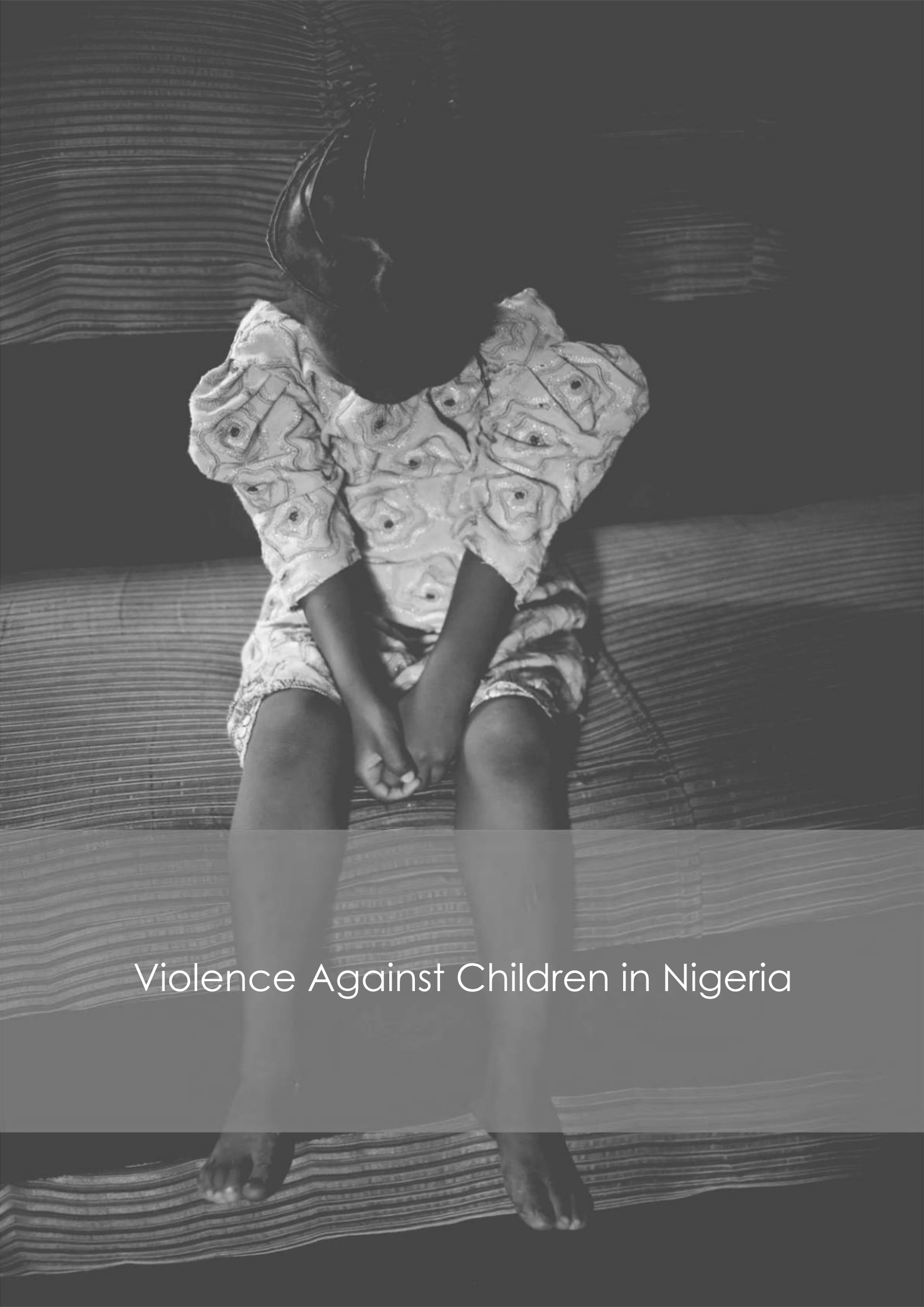
Beliefs on gender and violence shape the way members of a society think and behave. They are often deeply ingrained in the values and practices of a society and provide an indication of acceptable or unacceptable behavior. The survey revealed children and young people's beliefs in Nigeria towards spousal violence, and the role of gender in sexual practices and intimate partner violence.

The survey asked respondents if a husband was justified in hitting or beating his wife in five different circumstances. These included if she went out without telling him; if she neglected the children; if she argued with him; if she refused to have sex with him; or if she burnt the food. At least one in four females and males aged 18-24 years believed it was justified under one or more of the circumstances. Females were significantly more likely than males to justify a husband beating his wife (39% versus 28%). Neglecting the children was the most commonly accepted justification for a husband to beat his wife among both females and males. The second most common reason among females was if she went out without telling him. For males, the second most common reason was if she refused to have sex with him.

The survey also examined beliefs towards 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; and that a woman should not complain to anyone when she is beaten or otherwise abused by her man in order to keep the peace in the family. The same percentage (86%) of females and males endorsed one or more of these beliefs. Among males, the most commonly cited gender beliefs towards sexual practice and intimate partner violence was the belief that women who carry condoms have sex with a lot of men. Additionally, around half of all females and males believed that women should tolerate violence to keep a family together and should not complain to anyone when beaten or abused by her partner.





Violence Against Children in Nigeria

Violence Against Children in Nigeria | Summary Report



Responding to the Findings of the Nigeria Violence Against Children Survey

FINDINGS FROM A NATIONAL SURVEY 2014

Responding to the Findings of the Nigeria Violence Against Children Survey

Effective programming to prevent and respond to violence against children must be rooted in robust data and evidence. The Nigeria VACS 2014 represents an important step – for the first time Nigeria has comprehensive information on the prevalence, characteristics, location, perpetrators and impact of violence against children, providing findings that are critical for strategy development and programming for Ministries, Departments and Agencies (MDAs), NGOs, Faith Based Organisations (FBOs) and development partners in Nigeria.

Based on the findings of the Nigeria VACS, priority actions were developed through a consultative and participatory approach by the Technical Working Group on Violence Against Children (TWG), chaired by the Federal Ministry of Women Affairs and Social Development.

The TWG developed a comprehensive, holistic, and multi-sectoral response, which focused on:

- adopting and implementing laws and policies that prevent and respond to violence;
- enhancing and scaling up efforts to prevent violence through:
 - o creating a protective environment for children;
 - o changing perceptions of violence;
 - o empowering children and young people;
- enhancing the response to violence through:
 - o encouraging children to speak out and enhancing access to services;
 - o improving availability and quality of services and enhancing the capacity of professionals working with children;
 - o strengthening efforts to hold perpetrators accountable;
- increasing investment in child protection;
- strengthening research, monitoring and evaluation on violence against children,

identifying the priorities for each Ministry/Sector and for civil society and religious groups.

The priority actions are also designed to provide a framework for States to develop their own priority actions based on their State specific context.

The priority actions are set out in the publication 'Ending Violence Against Children In Nigeria: Priority Actions – A multi-sectoral response to the 2014 Nigeria Violence Against Children Survey' (2015).

#EndViolenceAgainstChildrenNigeria



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