

SEARCHLIGHT 2023 CHILDLIGHT ANNUAL FLAGSHIP REPORT

TECHNICAL NOTES

Project ___

Understanding the Nature of CSEA from Violence Against Children and Youth Surveys

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Technical Note

Survey design

VACS are nationally representative household surveys of adolescents and young people (ages 13 to 24) that generate a wide range of information about violence victimisation during childhood and adolescence. These surveys measure the prevalence and circumstances surrounding sexual, physical and emotional violence in childhood (that is, before turning 18 years old) by collecting the retrospective reports of young men and woman 18 to 24 years old, and the direct reports of children and adolescents 13 to 17 years old. They provide important data on demographics and education, risk factors, protective factors, and consequences of violence as well as access to services for survivors. Participants in the survey are males and females aged 13 to 24. They provide cross-sectional data on: (i) lifetime and recent (within the last 12 months) experiences of violence; (ii) risk and protective factors, and (iii) consequences

(sequelae) of violence. All the implemented VACS are representative at the country level, separately for males and females aged 13 to 24.1

To date, the VACS have been implemented in 26 different countries from Europe, Sub-Saharan Africa, Southeast Asia, and Latin America and the Caribbean. In every country, VACS results have informed plans, policies, and strategies to address violence against children. Some countries choose to integrate violence prevention measures into overall development strategies, improve existing plans and policies related to children or develop stand-alone national plans to prevent and respond to violence against children (Cravero et al., 2022).

Country sample

The tables below present descriptive statistics of the 17 countries included in this study.

¹ The data collection procedure for is described in the country reports, available here: https://www.cdc.gov/violenceprevention/childabuseandneglect/vacs/country-reports.html

Country characteristics: demography, wealth and income distribution

Country	Population	Population ages 0-14 (% of total population)	Population ages 15-19 (% of total population)	Population ages 20-24 (% of total population)	Income Level	GDP per capita, PPP (constant 2017 international \$)	Gini index
Botswana	2,546,402	33.2	9.3	8.7	High income	13,545	53.3
Eswatini	1,180,655	35.4	10.3	9.1	Upper-middle income	8,290	54.6
Kenya	51,985,780	39.0	11.2	9.4	Upper-middle income	4,497	36.2
Malawi	19,377,061	43.7	11.6	9.3	Lower-middle income	1,490	38.5
Nigeria	208,327,405	43.5	10.7	8.7	Upper-middle income	4,865	35.1
Rwanda	13,146,362	39.3	11.0	9.1	Lower-middle income	2,067	43.7
Tanzania	61,704,518	43.9	10.9	8.8	Lower-middle income	2,552	40.5
Uganda	44,404,611	45.7	12.0	10.1	Lower-middle income	2,240	42.7
Zambia	18,927,715	43.7	11.0	9.3	Lower-middle income	3,184	55.9
Zimbabwe	15,669,666	41.2	11.3	9.5	Lower-middle income	1,990	50.3
Cote d'Ivoire	26,811,790	42.1	11.2	9.4	Upper-middle income	5,092	37.2
Lesotho	2,254,100	34.2	10.1	9.6	Lower-middle income	2,285	44.7

Country	Population	Population ages 0-14 (% of total population)	Population ages 15-19 (% of total population)	Population ages 20-24 (% of total population)	Income Level	GDP per capita, PPP (constant 2017 international \$)	Gini index
Namibia	2,489,098	36.2	9.5	9.4	Upper-middle income	9,042	59.1
Mozambique	31,178,239	43.9	10.9	9.3	Lower-middle income	1,233	50.5
Cambodia	16,396,860	29.6	8.8	7.9	Lower-middle income	4,276	50.5
Moldova	2,635,130	19.6	5.4	5.7	Lower-middle income	11,849	26
Colombia	50,930,662	21.9	8.2	8.7	High income	13,358	53.5
El Salvador	6,292,731	26.1	9.6	10.5	Lower-middle income	8,296	38.8
Haiti	11,306,801	32.6	10.1	9.5	Lower-middle income	2,970	n/a
Honduras	10,121,763	31.1	10.6	10.1	Upper-middle income	5,028	48.2
Latin America & Caribbean	650,534,986	23.9	8.2	8.3	High income	14,911	n/a
East Asia & Pacific	2,363,941,755	19.6	6.2	6.4	High income	17,605	n/a
Sub-Saharan Africa	1,151,302,081	42.3	10.7	9.0	Lower-middle income	3,657	n/a
Middle East & North Africa	479,966,649	30.2	8.3	7.9	High income	15,581	n/a
South Asia	1,882,531,620	27.9	9.6	9.1	Lower-middle income	5,937	n/a
Europe & Central Asia	923,104,113	18.0	5.6	5.8	High income	33,484	n/a
Low income	667,053,670	42.3	10.9	9.2	Lower-middle income	1,928	n/a
Middle income	5,883,693,329	25.8	8.3	7.8	Lower-middle income	11,216	n/a
							

Source: World Bank and International Monetary Fund.

Measures

Main outcome variables

In public health, "prevalence" refers to the proportion or percentage of a specific condition, disease, or health-related characteristic within a particular population at a given point in time. It is a measure used to assess how widespread a particular health issue is within a defined group or population, in a window of time. Prevalence can be calculated for various health conditions or factors, such as the prevalence of a specific disease (e.g., diabetes, HIV), the prevalence of a certain behaviour (e.g., smoking, physical inactivity), or the prevalence of a particular risk factor (e.g., high blood pressure, obesity) within a specific population (Dicker et al., 2006).

To calculate prevalence, you typically count the number of individuals who have the condition or characteristic of interest, in a specific timeframe, and then divide it by the total number of individuals in the population being studied. This provides a snapshot of the extent to which the condition or characteristic is present in that population at a specific moment, allowing public health professionals to better understand the scope of health issues and make informed decisions regarding prevention, intervention, and resource allocation.

We include two definitions of prevalence, according to two different timeframes: lifetime exposure ("have you ever been...") and exposure in the last 12 months ("During the last 12 months, have you been...").

In this study we aim at following the 2016 Luxemburg guidelines (available at: https://ecpat.org/luxembourg-guidelines/) to define the victimising events. Initially, we aimed at constructing indicators of the prevalence of the following six violence events using the VACS data:

- CSA: Child Sexual Abuse
- CSE: Child Sexual Exploitation
- CSAI: Child Sexual Abuse Imagery
- CSEI: Child Sexual Exploitation Imagery
- CSEM: Child Sexual Exploitation Material
- CSAM: Child Sexual Abuse Material

However, few VACS provide information to build specific prevalence indicators of CSE, CSAI, CSEI, CSEM and CSAM. Therefore, we focus on constructing aggregate measures of CSEA.

Lifetime exposure:

"CSE_life" is a dichotomous variable, which takes a value equal to one (1) if the young woman reports having sex with someone because this person provided you with material support or help in any other way DURING HER LIFETIME; or otherwise zero (0). */

"CSAM_life" is a dichotomous variable, which takes a value equal to one (1) if the young woman reports: i) having ever been intimidated, extorted, or blackmailed for having shared photographs or videos with sexual content through internet or social networks, or ii) having ever been forced to share photographs, videos or audio with sexual content through internet or social networks; or otherwise zero (0).

"CSA_life" is a dichotomous variable, which takes a value equal to one (1) if the young woman reports having been a victim DURING HER LIFETIME of unwanted sexual touching, attempts of unwanted sex, physically forced sex, or pressured or coerced sex (sex obtained through verbal persuasion, harassment, threats or trickery); or otherwise zero (0).

"CSEA_life" is a dichotomous variable, which takes a value equal to one (1) if the young woman reports having been a victim DURING HER LIFETIME of child sexual abuse AND child sexual exploitation; or otherwise zero (0).

Box 1 - Stata® code to generate lifetime prevalence measures

```
gen CSE_life = 0 if Q407==1 & Q500==2
replace CSE_life = 1 if Q407==1 & Q500==1 & inrange(Q504,0,17)
replace CSE_life = 0 if Q407==1 & Q500==1 & inrange(Q504,18,97)

gen CSAM_life = 0.
replace CSAM_life = 1 if Q510==1 | Q511==1
replace CSAM_life = 0 if Q510==2 & Q511==2

gen VACS_Sexual_Violence_lifetime = 0 if sv1_only==0 & sv2_only==0 & sv3_only==0 & sv4_only==0
replace VACS_Sexual_Violence_lifetime = . if sv1_only==. & sv2_only==. & sv3_only==. & sv4_only==.
replace VACS_Sexual_Violence_lifetime = 1 if sv1_only==1 | sv2_only==1 | sv3_only==1 |
```

Last year exposure (previous 12 months):

"CSE_year" is a dichotomous variable, which takes a value equal to one (1) if the young woman reports having sex with someone because this person provided you with material support or help in any other way DURING THE LAST 12 MONTHS; or otherwise zero (0).

"CSA_year" is a dichotomous variable, which takes a value equal to one (1) if the young woman reports having been a victim DURING THE LAST 12 MONTHS of unwanted sexual touching, attempts of unwanted sex, physically forced sex, or pressured or coerced sex (sex obtained through verbal persuasion, harassment, threats or trickery); or otherwise zero (0).

"CSEA_year" is a dichotomous variable, which takes a value equal to one (1) if the young woman reports having been a victim DURING THE LAST 12 MONTHS of child sexual abuse AND child sexual exploitation; or otherwise zero (0).

Box 2 - Stata® code to generate last year prevalence measures

Victim characteristics:

"VACS_Physical_Violence" is a dichotomous variable, which takes a value of one (1) if the young woman reports having been slapped, pushed, shaken; had something intentionally thrown at her to hurt her; had been intentionally burned or drowned; had someone use or threaten to hurt her with a knife, firearm or other weapon; or otherwise zero (0).

"VACS_Psychological_Violence" is a Dichotomous variable, which takes a value of one (1) if the young woman reports experiences of psychological or emotional violence, such as being told by a caregiver or other adult family member that she was unlovable or undeserving of love, being told that they wished she was dead or had never been born, being ridiculed or belittled, or being threatened that they would get rid of her; or otherwise zero (0).

Perpetrator characteristics

Perpetrator: Identifies the perpetrator of the act of violence. Options included: boyfriend/ partner/housemate/husband; ex-boyfriend/ ex-partner/ex-housemate; father; stepfather; brother; relative (male); school or classmate; teacher (male); police or security officer (male); employer/boss; neighbour; community leader (male); religious leader (male); friend; stranger; member of the armed forces (male); member of an illegal armed group (male); girlfriend/partner/partner; wife; exgirlfriend/ex-partner/ex-partner; mother; stepmother; sister; relative (female); school or classmate; teacher (female); police or security officer (female); employer/boss; neighbour; community leader (female); religious leader

(female); friend; unknown; member of armed forces (female); member of illegal armed group (female). Information collected for sexual and physical violence victims.

Location of the event

This indicator identifies the place where the act of sexual violence occurred. Options included: the young woman's home; the perpetrator's home; someone else's home; on the street/road/trail/sidewalk; in a market/ shop; at school/educational centre; inside a private vehicle; on public transport; at a lake/ river/ stream/other body of water; a field or other natural area; a place where liquor is sold (e.g., restaurant, bar, disco, club, etc.); church/ parish; office/workplace; protection/justice centre; a recreation or sports venue; other; don't know; or no response.

Dataset construction procedure

This section describes the construction process of a "master dataset" that harmonizes and appends data from the Violence Against Children and Youth Surveys (VACS) implemented in 17 countries. Although this survey has been implemented in 22 countries, the data is available for the public only for the subset of 17 countries included in this research study. The resulting 17 country dataset includes only variables to generate prevalence measures of Child Sexual Exploitation and Abuse (CSEA) and variables that describe the nature of these victimizing events in terms of victim's characteristics, perpetrator characteristics, and place and time of occurrence. All the datasets were formally requested through the Together for Girls (TfG) website.

The master dataset construction process consisted of the following 6 stages:

1. Initial VACS item selection

The research team first identified all the CSEA-related items (i.e., survey questions), and the corresponding response option in both female and male questionnaires. To do this, the team used the VACS-Colombia questionnaire. Ninety (90) items from the Colombia VACS questionnaire were selected at this stage, and forty-four (44) of them were used to generate prevalence and nature indicators.

2. Replicating prevalence measures from official VACS reports

To guarantee that all the necessary items to create CSEA prevalence measures from the VACS were correctly identified and included, the team replicated the descriptive statistics in the 2018 Colombia official VACS study reports for these countries: Colombia,

Cote d' Ivoire, Haiti, Namibia, Eswatini and Zimbabwe. This exercise was done using only the subset of items selected in stage 1, the VACS Colombia data provided by TfG, and the Stata® code developed by Harker et al (2022). We found minimum discrepancies across a selected number of descriptive statistics. Table 23 presents the main CSA prevalence statistics presented in the official 2018 Colombia VACS Study report (Panel B) and the statistics produced by the research team (Panel A). We observe very small deviations in the lifetime CSA prevalence indicator constructed from the information reported by both young men and women 18 to 24 years old.

In addition, as an additional revision,
Table 24 presents the prevalence measures
by gender and type of sexual violence
(unwanted sexual touching, unwanted
attempted sex, pressured sex, physically
forced sex), for the same two sources.
In this case, the deviations are minimal.

Country characteristics: demography, wealth and income distribution

	Replicated meas	sures	Colombia VACS Report Panel B						
	N	CSA	N	CSA					
Reported by 13-17 years olds (last year)									
Total	1290	6.1%	1289	6.1%					
Female	665	8.1%	664	8.1%					
Male	625	4.1%	625	4.1%					
	Reported by	y 13-17 years olds (I	ast year)						
Total	1355	11.4%	1414	11.4%					
Female	713	15.8%	740	15.3%					
Male	642	8.1%	674	7.8%					

Table Comparison of estimated prevalence indicators by type of sexual violence event (versus the reported ones in the <u>Colombia</u> VACS Study)

	Replic	Replicated prevalence measures				Colom	colombia VACS Report			
	CSA	1	2	3	4	CSA	1	2	3	4
Reported by 13-17 years olds										
Male	Male									
Last year	4.1%	3.7%	0.5%	0.1%	0.05%	4.1%	3.7%	0.5%	0.1%	0.0%
N	625	625	625	625	625	625	623	622	622	622
Female										
Last year	8.1%	6.8%	2.2%	1.6%	0.05%	8.1%	6.8%	2.2%	0.1%	1.6%
N	665	665	665	665	665	664	663	657	655	657
			Report	ed by 18	-24 yeaı	rs olds				
Male										
Lifetime	8.1%	5.2%	2.7%	0.24%	0.9%	7.8%	5.2%	2.7%	0.2%	0.9%
N	642	637	673	674	674	674	635	673	674	674
Female										
Lifetime	15.8%	10.9%	6.0%	1.85%	3.2%	15.3%	11.1%	6.0%	1.9%	3.2%
N	713	709	738	737	738	740	708	738	737	738

Notes: (1) Unwanted sexual touching, (2) unwanted attempted sex, (3) Pressured sex, (4) Physically forced sex.

3. All country VACS item identification

The third stage of the master dataset production process was the identification of all the CSEA-related items and corresponding response options, in both the female and male questionnaires, for the remaining countries. To systematize this process, the research team designed a matrix to compare the items across the 17 countries. This tool helped the identification of both the questions and the response options, across countries. Additionally, the matrix facilitated the harmonization of response options by organizing and producing a unified codification for the response options across countries.

For example:

Item Q608 in the Colombia VACS male questionnaire ("How old was this person? Please give your best guess.") had the following response options:

- a) X years old
- b) Don't know
- c) Declined

For the remaining 7 of the other 16 countries, the VACS questionnaire proposed an identical Q608 item and set of response options. For 9 countries there was an alteration both in the item and the response options:

Item: Was the person older than you, younger than you, or about the same age?

Response option: older, younger, about the same age, don't know/declined.

Table 25 presents some the most frequent differences between items and/or sets of response options across countries. Most of the differences between items and/or sets of response options across countries were found in items that describe the nature of the events

such as perpetrators' age and relationship to the respondent, and place of occurrence. The final matrix presents 90 items and their corresponding response options. This matrix is available by request to the authors.

Differences across VACS questionnaires

Colombia VACS qu	uestionnaire	Other countries qu	estionnaire	
Item	Set of response	Item	Set of response	
How old was this person?	X years old Don't know Declined	Was the person older than you, younger than you, or about the same age?	Older Younger About the same age Don't know/ declined	
		Would you say this person was more than 10 years older than you, 5-10 years older or less than 5 years older?	More than ten years older 5-10 years older Less than five years older	
Who were the people whom you had sex with because they provided you with material support or help? (Choose all responses that apply)	Boyfriend/Girlfriend/Romantic partner. Ex-boyfriend/girlfriend/romantic partner. Father/Mother. Step father/Step Mother. Brother/Sister. Male/Female relative. Male/Female classmate/schoolmate. Male/Female bolice/security person. Male/Female employer. Male/Female neighbor. Male/Female religious leader. Male/Female religious leader. Male/Female stranger. Male/Female member or armed forces. Male/Female member of an illegal armed group. Don't know. Declined.	Was the person who did this a boyfriend, romantic partner, husband, or somebody else?	Boyfriend/ Girlfriend/ Romantic partner. Husband/Wife. Somebody else. Doesn't know. Declined.	

Colombia VACS qu	uestionnaire	Other countries questionnaire			
Item	Set of response	Item	Set of response		
		Who did this to you?	Father/Mother. Brother/Sister. Cousin. Uncle/Aunt. Brother/Sister in law. Other relative. Man/Boy/ Women/ Girl from neighborhood. Recent acquaintance/ just met. Teacher. Religious leader. Elder/ Community leader. Police. Soldier. Employer. Stranger. Another person. Doesn't know. Declined.		
		How old was this person?	Some countries do not include responses such as "Male/ Female member of an illegal armed group" or included different ones such as: House help, health professionals, and political leaders.		

4. Creating harmonized datasets for each country

Having all items and response options selected and organized, the research team then created a dataset for each country with harmonized homogenized items and response options. The VACS Colombia was used as a reference. At this stage, the research team defined labels for all the subset items and response options, and generated CSEA

prevalence measures for all the 17 countries. Additionally, the team identified and correctly labelled and homogenized the stratification, cluster, and sample weight variables across countries, which are critical when estimating measures and descriptive statistics that are representative at the country level. The table below presents the final sample size for each country dataset, and the year in which the VACS was implemented (i.e., the year the data was collected).

VACS sample size

Country	Year	Female	Male
Botswana	2015	2490	1226
Eswatini	2007	1244	0
Kenya	2019	1344	788
Malawi	2013	1029	1133
Nigeria	2014	1766	2437
Rwanda	2015	1032	1180
Tanzania	2009	1060	880
Uganda	2015	3159	2645
Zambia	2014	891	928
Zimbabwe	2011	7912	803
Cote d'Ivoire	2018	1200	1208

Country	Year	Female	Male
Lesotho	2018	7101	1467
Namibia	2019	4211	4571
Mozambique	2019	2129	878
Cambodia	2013	1121	1255
Moldova	2019	1021	978
Colombia	2018	1406	1299
El Salvador	2017	1056	1380
Haiti	2012	1457	1459
Honduras	2017	2537	2659
Total		45166	29174

Source: Countries VACS reports

5. Append individual country datasets to generate the multi-country master dataset

Using the "append" function in Stata®, the research team finally created the master dataset with the 17 harmonized country datasets. In this process, the team decided to replace all missing values with a zero value (0). Then, the research team collapsed the dataset at a country level, resulting in a dataset with 17 countries, 7 prevalence indicators, and dummy variables for sex and age groups (13-17 and 18-24).

6. Comparing country VACS study reports to our data

Finally, to evaluate if the harmonization process did not affect the quality of the VACS data, the team produced country-level statistics that were compared to some of the results presented in the official VACS study reports published by TfG and the CDC. Table 27 presents the estimated prevalence child sexual abuse (CSA) indicators for the 17 countries, using the sample weights for each country, using the master dataset the team

produced. This table includes estimates of victimization reported for two different time frames (lifetime and last 12 months), by sex (female and male) and age group (13-17 and 18-24). The tables below presents the same estimates extracted from the official VACS study reports (available in the TfG website).

As you can see, we do not see important differences, and we find minor differences (of less than a percentage point) for Cambodia, Eswatini and Tanzania.

Cross-country distribution of CSA prevalence rates, by gender and reporting age group

Country	CSA lifet	ime	CSA last	year	CSA lifet	ime	CSA last	year	
	Female	Male Male	Female	Male	Female	Male	Female	Male Male	
	Rep	orted by 1	3-17 years	olds	Reported by 18-24 years olds				
Cambodia	_	_	3.6%	0.3%	_	_	3.3%	1.1%	
Colombia	15.7%	8.4%	8.1%	4.1%	15.2%	7.8%	6.6%	7.1%	
Cote d' Ivoire	24.3%	10.7%	16.1%	7.3%	19.4%	11.6%	16.4%	15.7%	
El Salvador	8.5%	3.9%	6.6%	2.7%	13.4%	2.4%	4.8%	1.6%	
Haiti	29.2%	20.2%	19.0%	10.9%	25.70%	21.2%	25.1%	18.5%	
Honduras	12.9%	7.1%	6.2%	4.9%	16.1%	9.5%	6.2%	8.2%	
Kenya	18.9%	7.7%	13.5%	2.4%	15.6%	6.4%	14.4%	8.2%	
Lesotho	10.5%	2.8%	7.3%	1.5%	14.3%	4.9%	9.9%	4.8%	
Malawi	27.3%	13.2%	22.8%	12.7%	21.7%	14.5%	14.3%	11.8%	
Moldova	11.7%	5.3%	7.5%	5.4%	14.3%	5.3%	8.4%	8.2%	
Mozambique	16.9%	8.8%	11.7%	5.8%	14.1%	8.4%	9.5%	8.3%	
Namibia	12.2%	8.1%	9.6%	5.1%	11.9%	7.4%	10.7%	6.9%	
Nigeria	26.1%	12.4%	16.3%	8.2%	24.8%	10.7%	14.3%	11.1%	
Eswatini	29.9%	_	17.8%	_	37.6%	_	23.9%	_	
Tanzania	26.3%	14.5%	14.8%	6.1%	25.2%	11.4%	14.1%	11.6%	
Zambia	25.4%	10.1%	16.5%	5.5%	20.1%	9.7%	10.5%	12.8%	
Zimbabwe	6.8%	0.5%	4.1%	0.3%	9.8%	1.1%	5.3%	0.7%	
Total	16.9%	7.8 %	10.6%	4.5%	17.6%	8.3%	11.1%	8.1%	

Cross-country distribution of CSA prevalence rates, by gender and reporting age group (official VACS reports)

Country	CSA lifet	ime	CSA last	year	CSA lifet	ime	CSA last	year	
	Female	Male	Female	Male	Female	Male	Female	Male	
	Rep	orted by 1	3-17 years	olds	Reported by 18-24 years olds				
Cambodia	6.45%	5.20%	3.0%	0.1%	4.4%	5.60%	_	-	
Colombia	_	_	8.10%	4.10%	15.30%	7.80%	_	_	
Cote d' Ivoire	_	_	16.1%	7.3%	19.20%	11.4%	_	_	
El Salvador	_	_	6.6%	2.70%	13.50%	2.50%	_	_	
Haiti	_	_	19.00%	10.90%	25.70%	21.20%	_	-	
Honduras	_	_	6.20%	4.90%	16.20%	9.90%	_	_	
Kenya	_	_	13.50%	2.40%	15.60%	6.40%	_	_	
Lesotho	_	_	7.50%	_	14.50%	5.00%	_	-	
Malawi	_	_	22.80%	12.70%	21.80%	14.80%	_	-	
Moldova	_	_	7.60%	5.40%	14.40%	5.30%	_	-	
Mozambique	_	_	11.70%	5.80%	14.30%	8.40%	_	-	
Namibia	_	_	9.80%	5.10%	11.80%	7.30%	_	_	
Nigeria	_		16.4%	8.4%	24.80%	10.80%			
Eswatini	28.00%	_	16.00%	_	37.8%	_	24.40%	-	
Tanzania	_	_	14.0%	5.9%	_	_	_	_	
Zambia	_	_	16.6%	5.6%	20.30%	10.0%	_	-	
Zimbabwe	_	_	4.1%	0.3%	9.1%	1.1%	_	_	

Limitations of the study

The cross-country analysis we develop has several methodological limitations, some already highlighted by Chiang et al. (2016):

i. The VACS is as a household survey, and thus potentially generate data that has important biases in terms of sub-reporting of issues that are socially disapproved or illegal (such as CSEA) that happen in the household or are related to the family members. Also, because of the same reason, the VACS does not collect data on children living outside of family care.

- ii. The VACS collect contextual data on only the first and most recent incidents of violence, and thus ignores the context and complete experience of whom lived more than one event.
- iii. Given that the VACS relies on self-reports, it potentially underestimates the prevalence of CSEA if the respondent does not feel comfortable disclosing his or her experiences.
- iv. Cross country comparisons are limited by variations in cultural contexts and social norms, even if the survey protocol includes an adaptation process to sensitise the study to

local cultural and linguistic contexts. Chiang et al (2016) highlight that the success of the survey varies across countries, sometimes confounding lower prevalence rates with lower disclosure rates resulting in greater stigma against CSEA victims.

v. Our analysis includes data that was collected at different points in time: while the survey was implemented in Eswatini in 2007, it was implemented in Moldova in 2019. This is a very important factor when comparing the results.

vi. When exploring the nature of CSEA, our analysis is limited by the information provided by a limited sample of persons that reported being CSEA victims.

Technical note references

Dicker, Richard C. et al. (2006). Principles of epidemiology in public health practice; an introduction to applied epidemiology and biostatistics. 3rd ed. Retrieved from: https://stacks.cdc.gov/view/cdc/6914

Meinhart M, Seff I, Villaveces A, Harker Roa A, L Stark. (2022). Violence Exposure Among Adolescent Boys and Young Men in Colombia With a Lifetime History of Transactional Sex, Journal of Adolescent Health, Volume 71, Issue 6, Pages 696-704, ISSN 1054-139X, https://doi.org/10.1016/j.jadohealth.2022.07.008.

Lindsay S, Meinhart M, Seff I, Gillespie A, Harker Roa A, Villaveces A. (2023). Associations between conflict violence, community violence, and household violence exposures among females in Colombia, Child Abuse & Neglect, 2023, 106341, ISSN 0145-2134, https://doi.org/10.1016/j.chiabu.2023.106341.

Seff I, Meinhart M, Harker Roa A, Stark L & A Villaveces. (2022). Predicting adolescent boys' and young men's perpetration of youth violence in Colombia, International Journal of Injury Control and Safety Promotion, 29:1, 123-131, DOI: 10.1080/17457300.2021.2009519

Vahedi L, Seff I, Meinhart M, Roa AH, Villaveces A, Stark L. The association between youth violence and mental health outcomes in Colombia: A cross sectional analysis. Child Abuse Negl. 2023 Jul 11:106336. doi: 10.1016/j. chiabu.2023.106336. Epub ahead of print. PMID: 37442669.

Government of Colombia, Ministry of Health and Social Protection. (2019). Colombia: Violence against children and youth survey. IOM. https://reliefweb.int/sites/reliefweb.int/files/resources/2020-3-17_Colombia-VACS-Final-Report-English.pdf

Centers for Disease Control and Prevention, Interuniversity Institute for Research and Development, & Comité de Coordination. (2014). Violence against Children in Haiti: Findings from a National Survey, 2012. https://files.mutualcdn.com/tfg/assets/files/ Haiti-VACS-Report-2014.pdf

Cravero, K., Whittaker, S., & Ski, S. (2023).
Using Data to Inform National Efforts to
End Violence Against Children: Country
Experiences and Lessons following Violence
against Children and Youth Surveys. United
States Agency for International Development.
https://files.mutualcdn.com/tfg/assets/files/
The-Power-of-Data-to-Action-full-report.pdf

Government of Colombia, Ministry of Health and Social protection. (2019). Colombia, Violence Against Children and Youth Survey, 2018. https://files.mutualcdn.com/tfg/assets/files/Colombia-VACS-Report.pdf

Government of El Salvador, Ministry of Justice and Public Security. (2019). El Salvador Violence Against Children Survey, 2017. https://files.mutualcdn.com/tfg/assets/files/El-Salvador-VACS-Report-2019.pdf

Government of Honduras, Sub-Secretariat of Security in Prevention, Secretariat of Security. (2019). Honduras Violence Against Children Survey, 2017. https://files.mutualcdn.com/tfg/assets/files/Honduras-VACS-Report-2019.pdf

Government of Malawi, Ministry of Gender, Children, Disability and Social Welfare of the Republic of Malawi, United Nations Children's Fund, The Center for Social Research at the University of Malawi, & Centers for Disease Control and Prevention. (2014). Violence against Children and Young Women in Malawi: Findings from a National Survey, 2013. https://files.mutualcdn.com/tfg/assets/files/Malawi-VACS-report.pdf

Government of the Republic of Namibia, Ministry of Gender Equality, Poverty Eradication and Social Welfare, Namibia Statistics Agency and International Training, & Education Center for Health at the University of Washington. (2020). Violence Against Children and Youth in Namibia: Findings from the Violence Against Children and Youth Survey, 2019. https://files.mutualcdn.com/tfg/assets/files/Namibia-VACS-report.pdf

Instituto Nacional de Saúde, Ministry of Health, Ministry of Gender, Child and Social Action, Instituto Nacional de Estatística, & Centers for Disease Control and Prevention. (2022). Violence Against Children and Youth survey in Mozambique, (VACS 2019). https://files.mutualcdn.com/tfg/assets/files/Mozambique-VACS-report.pdf

Ministry of Labour and Social Protection of Kenya, & Department of Children's Services. (2019). Violence against Children in Kenya: Findings from a National Survey, 2019. https://files.mutualcdn.com/tfg/assets/files/ Kenya-VACS-Report-2020.pdf

Ministry of Social Development of Lesotho, ICAP, & Centers for Disease Control and Prevention. (2020). Violence Against Children and Youth Survey, 2018. https://files.mutualcdn.com/tfg/assets/files/Lesotho-VACS-Report-2020.pdf

Ministry of Women, Family and Children of Côte d'Ivoire, National Program for the Care of Orphans and Other Children made Vulnerable by HIV/AIDS, National Institute of Statistics, & Centers for Disease Control and Prevention. (2019). Violence against Children and Youth in Côte d'Ivoire: Findings from a National Survey, 2018. https://files.mutualcdn.com/tfg/assets/files/Co%CC%82te-dIvoire-VACS-Report-2020.pdf

Ministry of Youth, Sport and Child Development, Ministry of Community Development and Social Services, University of Zambia, United Nations Children's Fund, Save the Children International, & Centers for Disease Control and Prevention. (2018). Violence against Children in Zambia: Findings from a national survey, 2014. https://files. mutualcdn.com/tfg/assets/files/Zambia-VACS-Report-2014.pdf

National Population Commission of Nigeria, UNICEF Nigeria, & Centers for Disease Control and Prevention. (2016). Violence Against Children in Nigeria: Findings from a National Survey, 2014. https://files.mutualcdn.com/tfg/ assets/files/Nigeria-VACS-Report-2014.pdf

Reza, A., Breiding, M., Blanton, C., Mercy, J., Dahlberg L., Anderson, M., & Bamrah, S. (2007). A national study on violence against children and young women in Eswatini. UNICEF. https://files.mutualcdn.com/tfg/assets/files/Eswatini-VACS-Report-2007.pdf

The International Organization for Migration (IOM) and IMAS, & Centers for Disease Control and Prevention. (2019). Violence Against Children and Youth in the Republic of Moldova: Findings from a National Survey, 2019. https://files.mutualcdn.com/tfg/assets/files/Moldova-VACS-report-2020.pdf

UNICEF Tanzania, Division of Violence Prevention, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, & Muhimbili University of Health and Allied Sciences. (2011). Violence against Children in Tanzania: Findings from a National Survey, 2009. https://files.mutualcdn.com/tfg/assets/files/ Tanzania-VACS-Report-2011.pdf Ministry of Women's Affairs, UNICEF Cambodia, & Centers for Disease Control and Prevention. (2014). Findings from Cambodia's Violence Against Children Survey 2013. https://files.mutualcdn.com/tfg/assets/files/ Cambodia-VACS-2013.pdf

Zimbabwe Ministry of Health and Child Care. (2019). Young Adult Survey of Zimbabwe: A Violence Against Children Survey, 2017. Elizabeth Glaser Pediatric AIDS Foundation. https://files.mutualcdn.com/tfg/assets/files/Zimbabwe-VACS-report-2019.pdf

Technical note Appendix

Comparison of estimated prevalence indicators by type of sexual violence event versus the reported ones in the Cote d' Ivoire VACS Study

	Replica	ated pre	valence	measur	es	Cote d'Ivoire VACS Report				
	CSA	1	2	3	4	CSA	1	2	3	4
Reported by	/ 13-17 ye	ars olds								
Male										
Last year	7.3%	5.9%	2.7%	0.0%	0.3%	7.3%	5.9%	2.7%	0.3%	0.0%
N	591	591	591	591	591	591	590	589	589	589
Female										
Last year	16.1%	10.3%	5.7%	1.2%	1.8%	16.1%	10.3%	5.7%	1.8%	1.2%
N	497	494	497	497	497	497	495	495	497	497
Reported by	/ 18-24 ye	ears olds								
Male										
Last year	11.6%	7.8%	2.9%	1.4%	2.4%	11.4%	7.9%	3.0%	1.4%	2.3%
N	615	615	616	616	616	616	610	606	612	612
Female										
Last year	19.4%	7.7%	7.6%	5.0%	8.2%	19.2%	7.7%	7.6%	5.1%	8.2%
N	695	697	702	701	700	703	691	700	692	696

Notes: (1) Unwanted sexual touching, (2) unwanted attempted sex, (3) Pressured sex, (4) Physically forced sex.

Comparison of estimated prevalence indicators by type of sexual violence event versus the reported ones in the Haiti VACS Study

	Replica	ated pre	valence	measur	es	Haiti V	ACS Rep	ort		
	CSA	1	2	3	4	CSA	1	2	3	4
Reported by	13-17 ye	ars olds								
Male										
Last year	10.9%	8.2%	3.4%	1.8%	1.8%	10.9%	8.4%	3.4%	1.8%	1.8%
N	758	756	758	758	758	758	744	746	758	755
Female										
Last year	19.0%	15.6%	7.2%	3.4%	1.9%	19.0%	15.7%	7.3%	3.4%	1.9%
N	636	634	636	636	636	636	629	632	635	631
Reported by	18-24 ye	ears olds	•							
Male										
Last year	21.2%	16.0%	10.6%	6.3%	1.4%	21.2%	16.1%	10.1%	6.5%	1.9%
N	701	661	673	698	694	701	658	673	682	688
Female										
Last year	25.7%	16.9%	13.3%	4.8%	6.2%	25.7%	17.0%	13.3%	4.9%	6.3%
N	821	797	802	820	813	820	792	801	810	809

Notes: (1) Unwanted sexual touching, (2) unwanted attempted sex, (3) Pressured sex, (4) Physically forced sex.

Comparison of estimated prevalence indicators by type of sexual violence event versus the reported ones in the Namibia VACS Study

	Replicated prevalence measures						Namibia VACS Report					
	CSA	1	2	3	4	CSA	- 1	2	3	4		
Reported by	13-17 yea	ars olds										
Male												
Last year	5.1%	4.8%	0.5%	0.0%	0.3%	5.1%	4.9%	*	<0.1%	*		
N	415	415	415	415	415	411	409	408	411	410		
Female												
Last year	9.6%	7.4%	2.1%	0.1%	1.4%	9.8%	7.5%	2.8%	0.1%	*		
N	1777	1777	1777	1777	1777	1770	1766	1764	1765	1768		

Comparison of estimated prevalence indicators by type of sexual violence event versus the reported ones in the Namibia VACS Study

	Replica	Namibia VACS Report								
	CSA	1	2	3	4	CSA	- 1	2	3	4
Reported by	/ 18-24 ye	ars olds	•							
Male										
Last year	7.4%	4.2%	2.3%	0.8%	2.2%	7.3%	4.2%	2.3%	0.8%	2.2%
N	557	563	558	563	561	564	559	558	563	561
Female										
Last year	11.9%	6.4%	4.5%	2.4%	2.8%	11.8%	6.6%	4.5%	2.4%	2.8%
N	2389	2422	2407	2409	2411	2420	2383	2407	2409	2411

Notes: (1) Unwanted sexual touching, (2) unwanted attempted sex, (3) Pressured sex, (4) Physically forced sex.

Comparison of estimated prevalence indicators by type of sexual violence event versus the reported ones in the Eswatini VACS Study

	Replicated prevalence measures					Eswatini VACS Report				
	CSA	- 1	2	3	4	CSA	- 1	2	3	4
Reported by	13-17 ye	ars olds								
Female										
Last year	17.8%	8.1%	9.1%	3.3%	1.4%	16.0%	7.4%	8.0%	3.3%	1.0%
N	570	569	569	570	570	573	573	573	573	573
Reported by	18-24 ye	ears olds	3							
Female										
Last year	37.6%	14.0%	20.1%	11.6%	7.3%	37.8%	14.1%	20.5%	12.1%	7.2%
N	647	646	649	649	650	669	669	669	669	669

Notes: (1) Unwanted sexual touching, (2) unwanted attempted sex, (3) Pressured sex, (4) Physically forced sex.

Comparison of estimated prevalence indicators by type of sexual violence event versus the reported ones in the Zimbabwe VACS Study

	Replicated prevalence measures					Zimbabwe VACS Report				
	CSA	1	2	3	4	CSA	1	2	3	4
Reported by	13-17 ye	ars olds								
Male										
Last year	0.3%	0.1%	0.1%	0.0%	0.0%	0.3%	0.1%	0.1%	0.0%	0.0%
N	392	392	392	392	392	391	391	391	391	391
Female										
Last year	4.1%	1.8%	2.3%	0.5%	0.8%	4.1%	1.8%	2.3%	0.5%	0.8%
N	3401	3401	3396	3401	3401	3397	3394	3395	3396	3395
Reported by	18-24 ye	ars olds								
Male										
Last year	1.1%	0.9%	0.8%	0.0%	0.0%	1.1%	0.9%	0.8%	0.%	0.%
N	409	410	410	411	411	411	410	410	411	411
Female										
Last year	9.8%	3.1%	3.6%	2.1%	4.6%	9.1%	3.1%	3.7%	2.1%	3.9%
N	4488	4492	4508	4503	4505	4511	4492	4496	4495	4493

Notes: (1) Unwanted sexual touching, (2) unwanted attempted sex, (3) Pressured sex, (4) Physically forced sex.