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Violence Against Children and Youth in Humanitarian Settings

FINDINGS FROM A 2022 SURVEY OF ALL REFUGEE SETTLEMENTS IN UGANDA

AUGUST 2024







MEDICAL





African Population and Health Research Center



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RESCUE







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The 2022 Uganda Humanitarian Violence Against Children And Youth Survey

In collaboration with the Office of the Prime Minister, Department of Refugees in Uganda: the United Nations High Commissioner for Refugees (UNHCR) Regional Bureau for the East and Horn Africa and the Great Lakes; and UNHCR Uganda and its implementing partners, the Baobab Research Programme Consortium (RPC) (comprising the Population Council, Inc.; Population Council, Kenya; and the African Population and Health Research Center) conducted the 2022 Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), with funding provided by the United Kingdom (UK) Government. Technical guidance for the implementation of this survey was provided by the U.S. Centers for Disease Control and Prevention (CDC) and Together for Girls (TfG).

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This report was borne out of a collaboration between the Government of Uganda's Office of the Prime Minister (Department of Refugees), the UNHCR Regional Bureau for the East and Horn of Africa and the Great Lakes, and the Baobab Research Programme Consortium, with support from the U.S. Centers for Disease Control and Prevention, Atlanta, Georgia, USA, and Together for Girls (TfG). The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of these institutions.

Staff of the Baobab RPC and the Office of the Prime Minister, Department of Refugees, Uganda, co-authored this report. Baobab RPC authors conducted weighting and analysis of the data in support of this report and consulted with the CDC on weighting and analysis. They also consulted with the Office of the Prime Minister, Department of Refugees; the Ministry of Gender, Labour and Social Development; the UNHCR Regional Bureau for the East and Horn of Africa and Great Lakes; UNHCR Uganda; and member organisations of both the Child Protection Sub-Working Group and the National Refugee Protection Working Group in Uganda on evidence-based strategies to prevent and respond to violence against children and youth in refugee settings.

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This report was copyedited by Joyce Altman.

Additional information on the survey can be obtained from the Baobab Research Programme Consortium, Population Council, P.O. Box 17643-00500, Nairobi, Kenya; Phone: +254 20 5134700; Email: fonyango@popcouncil.org

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FOREWORD

Violence against children (VAC) is a pressing global issue. Uganda is not immune to its existence and attendant consequences. The Government of Uganda's commitment toward the response to, and prevention of, all forms of VAC is strongly evidenced by the country being a signatory to the United Nations Convention on the Rights of the Child, the African Charter on the Rights and Welfare of the Child, and the Sustainable Development Goals (SDGs). Notably, Uganda has gone beyond signing onto global instruments alone to produce a National Child Policy (2020) and a National Child Policy Implementation Plan (2020/2021 to 2024/2025). The latter was informed by data from Uganda's first Violence Against Children and Youth Survey (VACS), generated in 2015 and published in 2018.

In its efforts to ensure that its response to violence against all children in Uganda is informed by robust evidence, and in keeping with its pathfinding country status under the Global Partnership to End Violence Against Children, the Government of Uganda has moved a step further, collaborating with partners to carry out the world's first-ever VACS conducted exclusively in refugee contexts. Referred to as the 2022 Uganda Humanitarian Violence Against Children and Youth Survey (HVACS) (or "Uganda HVACS, 2022"), this landmark study covered all refugee settlements in Uganda and establishes the magnitude, nature, and consequences of VAC in these settings.

I introduce this survey with great pleasure and pride, noting that the findings provide a rigorous baseline against which progress can be measured, and will be used to support planning for evidence-informed programming and resource allocation/mobilisation to address VAC in the country's refugee settlements. Further, the results will be harnessed to inform policy formulation and revision in the humanitarian sector in the future. Ultimately, the survey findings and stakeholders' utilisation of the same will ensure that all of Uganda's children, from refugee and host communities alike, enjoy a healthy childhood.

Uganda's Office of the Prime Minister, Department of Refugees, reaffirms its commitment to using strong evidence to appropriately attend to the issue of violence against children. We urge partners to use the Uganda HVACS findings for the same purpose, and hereby release this report to facilitate this process.

Douglas Asiimwe Acting Commissioner for Refugees Department of Refugees Office of the Prime Minister July 5, 2024

EXECUTIVE SUMMARY

The following summary highlights key findings from the 2022 Uganda Humanitarian Violence Against Children and Youth Survey (HVACS). Violence Against Children and Youth Surveys (VACS) have hitherto been carried out exclusively in development contexts, with the exception of one VACS in a development setting that also sampled from humanitarian areas. This survey is the first-ever VACS conducted exclusively in a humanitarian setting – specifically, refugee settlements in Uganda. The survey measures the prevalence, nature, and consequences of physical, emotional, and sexual violence against children and youth in refugee settlings. The survey enhances implementing partners' capacity to design, implement, and evaluate violence prevention programmes and build successful child protection systems in humanitarian settings. The survey results include several notable findings that provide critical insights into the experiences of children and youth in refugee settings in Uganda.

Key findings

Prevalence of Violence Against Children (VAC)/Violence Experienced in Childhood (18-24-yearolds)

- Nearly half of females (42.6%) and males (49.6%) in refugee settlements in Uganda experienced violence during their childhood years.
- Among the 19.4% of females who experienced sexual violence in childhood, nearly two-thirds (62.7%) experienced multiple incidents before age 18.
- Physical violence is the most common type of violence experienced in childhood in refugee settlements in Uganda. Nearly one out of four females (27.6%) and 40.9% of males experienced physical violence in childhood.

Perpetrators of VAC/Violence Experienced in Childhood (18-24-year-olds)

- For females, intimate partners are the most common perpetrators of sexual violence in childhood, comprising 30.5% of first incidents.
- Physical violence in childhood perpetrated by parents, caregivers, and adult relatives is common, affecting 23.3% of females and 41.2% of males.
- Emotional violence in childhood perpetrated by parents, caregivers, and adult relatives is also common, affecting 14.2% of females and 22.5% of males.

Disclosure of Violence (18-24-year-olds)

- Only 17.1% of females and 30.6% of males who experienced sexual violence in childhood told someone about an incident of sexual violence.
- Only 6.3% of females and 9.0% of males who experienced physical violence in childhood told someone about an incident of physical violence.

Service-seeking for Violence (18-24-year-olds)

- More than half of females (54.8%) and 73.0% of males who experienced sexual violence knew where to go for services for sexual violence, but very few sought services: only 5.1% of females and 17.2% of males sought services for sexual violence.
- About half (51.7%) of females who had experienced physical violence in childhood knew where to go for services, but only 3.4% sought services for an incident of physical violence.
- Nearly three out of four (70.2%) males who experienced physical violence in childhood knew where to go for services, but only 1.0% sought services for an incident of physical violence.

HIV Testing Behaviour (15-24-year-olds)

- Slightly more females than males had ever been tested for HIV (females 45.1%, males 40.7%).
- Among females who experienced sexual violence in the past 12 months, 55.1% had ever been tested for HIV.
- Among males who experienced sexual violence in the past 12 months, 67.1% had ever been tested for HIV.

Consequences of VAC/Violence Experienced in Childhood (18-24-year-olds)

- Sexual risk-taking behaviour. About two out of three females (67.3%) and males (62.4%) had ever had sex. Males who had ever had sex are more likely than females to have had multiple sex partners in the past year (females 2.7%; males 31.0%).
- Mental health problems. Females who experienced sexual violence in childhood are more likely to experience mental distress (81.6%) and suicidal ideation (14.5%) compared to females who did not experience sexual violence in childhood (mental distress 70.4%; suicidal ideation 7.4%).
- Violence perpetration. Experiencing physical violence in childhood was significantly associated with physical violence perpetration among females (12.5% among survivors; 5.0% among those who did not experience physical violence in childhood).

VII

Risk Factors Associated with Violence (13-24-year-olds)

- Witnessing violence at home. Females ages 13-17 who witnessed violence in their home were significantly more likely to have experienced sexual or physical violence in the past 12 months compared to those who had not witnessed violence in the home (53.9% versus 15.2%). Males ages 13-17 who witnessed violence in their homes were significantly more likely to have experienced sexual or physical violence in the past 12 months compared to those who had not witnessed violence in their homes were significantly more likely to have experienced sexual or physical violence in the past 12 months compared to those who had not witnessed violence in the past 12 months compared to those who had not witnessed violence in the past 12 months compared to those who had not witnessed violence in the home (60.2% versus 21.3%).
- Disability. Females ages 18-24 who had any form of disability were more likely to experience sexual and physical violence in the past 12 months compared to females ages 18-24 who had no form of disability (34.7% versus 27.5%). Males ages 18-24 who had any form of disability were significantly more likely to experience sexual and physical violence in the past 12 months compared to males who did not have any form of disability (62.6% versus 31.1%).

Informed by the 2022 HVACS findings, key stakeholders from different sectors came together at a Data-to-Action workshop to review and interpret the results and identify sector-specific priorities for preventing or responding to violence against children with a focus on humanitarian settings, as well as strategies for implementing interventions¹. The recommendations from the Data-to-Action workshop are being used to inform programme directions and resource mobilisation for effective prevention and response to violence against children in refugee settings in the country².

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1. INTRODUCTION AND BACKGROUND

1.1. Introduction to Uganda

Uganda, located in East Africa, borders Kenya, Tanzania, South Sudan, Democratic Republic of Congo, and Rwanda. In the 2014 census, Uganda had a population size of 34.6 million people³. This was projected to have reached 49 million by 2024⁴. Life expectancy has improved over the years, with the average life expectancy at 62 and 66 years in 2023 for males and females, respectively⁵. According to the World Bank, Uganda's economy experienced 5.3% growth in its gross domestic product in 2023, compared to 4.7% in 2022⁶. Economic growth occurred in the agriculture, industry, and service sectors. This growth is expected to accelerate to 6% in the near future as the government eases monetary policy and cuts spending⁷.

1.2. Background

Violence against children (VAC) is a global human rights violation that spans every country worldwide and affects an estimated 1 billion children each year⁸. According to the World Health Organisation, VAC "includes all forms of violence against people under 18 years old, whether perpetrated by parents or other caregivers, peers, romantic partners, or strangers," with most VAC involving at least one of the following interpersonal violence forms: maltreatment (entailing physical, sexual and psychological/emotional violence and neglect by authority figures), bullying, youth violence, intimate partner violence, sexual violence, and emotional or psychological violence⁹.

The Violence Against Children and Youth Surveys (VACS) have been conducted across several countries and demonstrate a high regional prevalence of violence against children. For example, the prevalence of sexual violence in childhood across seven countries in the region ranges from 25% to 38% for females and from 9% to 18% for males¹⁰.

Children experience different types of interpersonal violence that tend to occur at different stages of their development. These can include direct experiences of physical, sexual, and emotional abuse, as well as indirect experiences such as witnessing violence in homes, schools, and communities.

Violence has severe consequences for the health and well-being of children. The impact of violence against children goes far beyond the initial incident, and those who have experienced emotional, physical, and sexual violence may

experience severe short- to long-term health and social consequences¹¹. Neurobiological and behavioural research indicates that early childhood exposure to violence can affect brain development and thereby increase the child's susceptibility to a range of mental and physical health problems. These health problems can span into adulthood including anxiety or depressive disorders, cardiovascular problems, and diabetes.^{12,13,14}.,, health Children's exposure to family violence can result in perpetuating cycles of violence with intergenerational impact. Children exposed to violence have a higher likelihood of normalising violence and becoming perpetrators or victims of violence themselves in adulthood. All these various forms of violence can also play a role in increasing child survivors' risks of injury, HIV, other sexually transmitted infections, mental health problems, reproductive health problems, and noncommunicable diseases, including cardiovascular disease, cancer, chronic lung disease, and diabetes¹⁵. Given the serious and lasting impact on children, it is critical to understand the magnitude and nature of violence against children in order to develop effective prevention and response strategies. In sub-Saharan Africa, scientific research on the prevalence and incidence of violence and exploitation of children, adolescents, and young adults is still in its nascent stages in most countries, including Uganda. However, the quest for quality population-level data has tremendous potential to inform appropriate, strategic resource allocation and public health strategies to prevent violence.

At the global level, progress has been made in strengthening policies and standards that aim to improve the quality of services that are offered to children who experience violence. In 2016, the World Health Organisation (WHO) released INSPIRE: Seven Strategies for Ending Violence Against Children, a technical package that includes evidence-based strategies with demonstrated success in preventing and responding to violence in childhood¹⁶. seven INSPIRE strategies include: The Implementation and enforcement of laws, Norms and values, Safe environments, Parent and caregiver support, Income and economic strengthening, Response and support services, and Education and life skills. These strategies aim to create the safe, nurturing environments and relationships that allow children and youth to thrive. In 2017, WHO released guidelines for responding to children and adolescents who have been sexually abused¹⁷. Further, UNICEF offered Six Strategies for Action for ending violence against children¹⁸. Subsequently, multiple countries have committed to adapting and implementing these various guidelines with the aim of preventing violence against children and strengthening response services for child survivors.

1.3. Uganda Humanitarian Context

Uganda had the largest share (31%) of refugees in the East and Horn of Africa and Great Lakes (EHA-GL) Region as of March 2023¹⁹. There were slightly over 1.5 million refugees and asylum seekers in the country in 13 settlements and one urban setting in the country²⁰. Females comprised 52% while children below the age of 18 years made up 56% of the refugee population in the country. The country also had the highest number of unaccompanied refugee children, estimated at over 50,000 in 2022²¹. These children may be exposed to various forms of violence due to the disruption in the protective social structures.

Although there is precedent for understanding the extent of VAC from the perspectives of adolescents and pre-adolescent children, interest in systematic documentation of similar experiences of children in humanitarian settings is just emerging, following the development of guidance for the implementation of VACS in such contexts²². VAC surveys have documented physical, psychological and sexual violence against children in over 20 lowand middle-income countries, with a view to informing national prevention and response programmes²³. However, the surveys have largely focused on children in the general population. Understanding VAC in humanitarian settings is important for informing prevention and response programmes in such settings.

Uganda's refugee policy is considered the most progressive in the world as it grants refugees the right to work and significant freedom of movement²⁴. The country's refugee policy is guided by the Refugees Act of 2006 that considers granting of refugee status as a peaceful and humanitarian action aimed at upholding the human rights of affected

individuals²⁵. The Act aligns with the 1951 Geneva Convention on the Status of Refugees, the 1979 United Nations Convention on the Elimination of All Forms of Discrimination Against Women, the 1981 Africa Charter on Human and People's Rights, the 1989 United Nations Convention on the Rights of the Child, and the 1990 Africa Charter on the Rights and Welfare of the Child. The country developed Refugees Regulations 2010 to guide the implementation of the Act²⁶. In 2018, the country revised its national action plan to incorporate the commitments of the Global Compact on Refugees to share the burden and responsibility of supporting refugees²⁷.

1.4. Leadership and Key Partners

The survey was planned and implemented as a partnership between the Department of Refugees in the Office of the Prime Minister- Uganda, the United Nations High Commissioner for Refugees (UNHCR) Regional Bureau for the East, Horn of Africa, and Great Lakes Region, UNHCR- Uganda, UNHCR Implementing Partners in Uganda (Danish Refugee Council, Humanitarian Assistance and Development Services, International Rescue Committee, Lutheran World Federation, and Medical Teams International), and the Baobab RPC, comprising Population Council Inc., Population Council- Kenya, and the African Population and Health Research Center (APHRC). Field implementation activities were guided by the Department of Refugees in the Office of the Prime Minister- Uganda, the

Baobab Research Programme Consortium, and UNHCR implementing partners.

The U.S. Centers for Disease Control and Prevention (CDC) and Together for Girls (TfG) provided technical guidance for planning and implementation of the survey. CDC developed the original study protocols, tools, and training materials that were adapted for the Uganda HVACS. CDC further provided technical guidance for electronic data collection and analysis for the Uganda HVACS.

TfG is a global partnership among national governments, United Nations (UN) agencies, and private sector organisations, working at the intersection of violence against children and youth and violence against women. Through data, nationally led action, and advocacy, the partnership works to raise awareness, promote evidence-based solutions, and galvanise coordinated responses across sectors to end violence against boys and girls, with a special focus on sexual violence against girls. The partnership was founded in 2009, following the groundbreaking, first-ever VACS that was conducted in Eswatini (previously known as Swaziland)²⁸. Since then, the partnership has grown to over 20 countries. The TfG partnership envisions a world where every child, adolescent, and young person is safe, protected, and thriving, and supports countries to undertake research, programme, and policy response, and raise awareness to contribute to this vision. In addition to providing guidance for survey implementation, TfG provided technical assistance for research uptake.

To end violence against children and youth around the world, a unique public-private partnership of major stakeholder groups came together in 2015 to focus their efforts with the objective of holding themselves accountable and working together to prevent and respond to violence. The Global Partnership to End Violence Against Children ("End Violence") includes governments, UN agencies, international organisations, civil society organizations, faith groups, the private sector, philanthropic foundations, research practitioners, academics, and children themselves. Major partners include the Pan American Health Organisation (PAHO)/World Health Organisation (WHO), CDC, PEPFAR, TfG, UNICEF, the United Nations Office on Drugs and Crime, USAID, and the World Bank.

1.5. Violence against Children in Uganda

Uganda conducted its first-ever nationally representative VAC survey in 2015. Data from the survey showed that 75% of females and 76% of males ages 18-24-years experienced some form of violence in their childhood. About one out three (35%) female youth and 17% of male youth ages 18-24-years experienced sexual violence during their childhood (before age 18). In addition, 25% of girls and 11% of boys ages 13-17 experienced sexual violence in the past year preceding the survey. The prevalence of physical violence was even higher. More than half (59%) of female youth and 68% of male youth ages 18-24 experienced physical violence in their childhood, while 44% of girls and 59% of boys ages 13-17 experienced physical violence

in the year preceding the survey. About one in three youth ages 18-24 (34% of females and 36% of males) experienced emotional violence in their childhood. There was also overlap in the types of violence experienced, with 27% of females and 30% of males ages 18-24 years experiencing two different types of violence in their childhood²⁹.

Data from the survey further showed that the most common perpetrators of violence against children in the country were those close to the survivors. These included neighbours, intimate partners, peers, friends, classmates, and adult caregivers and relatives. There was also low knowledge of where to seek help for violence. Among 18-24-year-old youth who experienced sexual violence in childhood, 32% of females and 41% of males knew of a place to seek help and only 8% of females and 5% males received help. Among 13-17-year-olds, 24% of the girls and 29% of the boys who experienced sexual violence in the past year knew of a place to seek help, and only 6% of the girls and 3% of the boys received help. However, a higher proportion told someone about their experiences. For example, 57% of females and 53% of males who experienced sexual violence in childhood told someone about their experiences, mostly a relative, friend, or neighbour. Similarly, 64% of the girls and 49% of the boys who experienced sexual violence in the past year told someone about their experiences, again mostly a relative, friend, or neighbour. The health consequences of VAC on Uganda's children included mental distress, contemplation of suicide, self-harm, sexually

transmitted infections, unwanted pregnancy (for girls), and injury³⁰.

Although the 2015 Uganda VACS did not cover other vulnerable populations (such as children residing in institutions, residential care, justice systems, the streets, as well as those in humanitarian settings), it provided valuable data to inform the country's efforts to prevent and respond to VAC. Prior to the survey, there were legal and policy initiatives to protect children. The country's 1995 constitution, for example, made provisions for protecting children and other vulnerable groups from any kind of abuse, harassment, or ill-treatment, including social and economic exploitation. The country also ratified and domesticated international protocols aimed at protecting children, including the UN Convention on the Rights of the Child. The country further ratified the African Charter on the Rights and Welfare of the Child. Other initiatives included the enactment of the Children's Act in 2016 that banned corporal punishment in schools and raised the minimum age at marriage to 18 years with no exceptions, the launching of the National Action Plan for Child Well-being (2016-2021), and the launching of the Action Plan of the National Child Policy (2017-2022) that made ending violence against children a national priority. In addition, the Trafficking in Persons Act of 2009, the Domestic Act of 2010, and the Female Genital Mutilation Act of 2010 were legislations aimed at protecting vulnerable groups, including children, against violence.

2. METHODS

The 2022 Uganda HVACS was a cross-sectional household-based survey of youth ages 13 to 24 years. The survey was designed to produce representative estimates of experiences of physical, sexual, and emotional violence in childhood among children and young adults from all 13 refugee settlements in Uganda. The data were analysed to provide: (1) the prevalence of violence against children/violence experienced in childhood (physical, sexual, and emotional), defined as violence occurring before age 18 years among 18-24-year-olds, and (2) the prevalence of violence in the past 12 months among adolescents (ages 13-17) and young adults (ages 18-24).

2.1. Study Design and Sampling

To obtain a representative sample of households in refugee settlements in Uganda, the HVACS used the administrative units as defined and maintained by UNHCR- Uganda. The survey was a representative cross-sectional survey of noninstitutionalised females and males ages 13-24 years living in refugee settlements in the country. The survey used a three-stage cluster sampling design. Separate zones, as defined by UNHCR- Uganda, were randomly selected for females and males. In the first stage, 56 zones (28 female zones and 28 male zones) were randomly sampled from the 109 zones provided by UNHCR-Uganda. In the second stage, a fixed number of households (193 in female zones and 134 in male zones) were randomly selected, and in the third stage one eligible 13-24-year-old participant was selected. Additional design and sampling details are included in Appendix C: Supplementary Sampling Methods.

The Uganda HVACS used a split sample approach, such that the survey for females was conducted in different communities than the survey for males. This approach was to protect the confidentiality of participants by eliminating the chance that opposite sex perpetrators and survivors will be interviewed in the same community, discover the purpose of the study, and possibly retaliate against participants.

2.2. Survey Questionnaire

The Uganda HVACS included a core questionnaire for the head of household as well as participant questionnaires (both a male and a female version) that were adapted for humanitarian settings. The core HVACS questionnaire was adapted based on guidance for implementing Humanitarian Violence Against Children and Youth Surveys

developed in 2020 by Together for Girls, CDC, and the International Rescue Committee, along with other partners.23 The questionnaire comprised two modules, a household module administered to heads of households and an individual questionnaire administered to an eligible 13-24-year-old participant. The head of household questionnaire assessed the socioeconomic conditions of the household and basic demographic information. The participant questionnaire covered the following topics: demographics; parental relationships; education; general connectedness to family, friends, and community; endorsement of traditional gender norms; perceptions of safety; witnessing violence in the home or community; sexual history and risk-taking behaviour; experiences of physical, sexual, and emotional violence; violence perpetration; pregnancy; health outcomes and risk behaviours; violence disclosure, service-seeking and utilisation of services; and HIV/AIDS service history. In addition, the questionnaire included questions on whether each type of violence experienced (sexual, physical, or emotional) occurred before or after arriving in the refugee settlement, and knowledge and experience of female genital mutilation/cutting (FGM/C) as well as on disability status based on indicators developed by the Washington Group on Disability Statistics. The questionnaire has extensive skip patterns to improve accuracy and ask relevant follow-up questions to participants based on their prior answers to stem questions. This approach served to minimise the amount of time participants had to give for the survey.

All participants were asked about ever experiencing VAC/violence in childhood in addition to experiences of violence in the past 12 months. However, for analysis purposes, prevalence estimates of VAC were based on responses from participants ages 18 to 24 reporting on their experiences prior to age 18 whereas the estimates of current VAC were based on responses from both participants ages 13-17 and 18-24-years reporting on experiences occurring in the 12 months preceding the survey. This allowed for the examination of current patterns and contexts of VAC in refugee settings in Uganda.

2.3. Eligibility Criteria

Households were included if there was at least one eligible member of the household who was age 13 to 24. Males and females younger than 13 years were excluded because they may not have the maturity to answer some of the complex survey questions. Males and females older than 24 years were also excluded because of a desire to focus on understanding violence against children and youth, and the fact that the ability to accurately recall events in the past related to childhood experiences is diminished with the passing of time.

Inclusion criteria for this study included males and females 13-24 years of age who resided in selected households in refugee settlements in Uganda and spoke one of the following languages: English, Kinyabwisha, Kiswahili, Acholi, and Juba Arabic. Persons who did not have the capacity to understand or respond to the survey questions due to cognitive impairment or significant physical disability (e.g., severe hearing or speech impairment) were ineligible to participate. Persons living or residing in hospitals, prisons, nursing homes, and other similar institutions were not included in the survey because the HVACS was a household-based survey.

2.4. Data Collection

Data collection was done electronically using the Open Data Kit (ODK) programme installed on data collection tablets running on the Android operating system. Data collection was conducted in face-to-face computer assisted personal interviews (CAPI) by trained interviewers with selected eligible participants using a structured questionnaire. Before data collection began, a field pre-test was conducted. To ensure privacy during the study, interviewers were trained to ensure that interviews were conducted in safe and secure locations to maximise disclosure and ensure confidentiality. If a participant's privacy could not be ensured, interviewers were instructed to reschedule the interview. The initial visit record form of the survey tool had a section that allowed the survey team to track incomplete interviews as well as interviews that needed to be rescheduled. Field teams were trained to make three attempts to reach every sampled household. Data collection was conducted between March and April 2022.

2.5. Ethical Considerations

The Uganda HVACS adhered to WHO recommendations on ethics and safety in studies of violence against women. The survey protocol was independently reviewed and approved by the Mildmay Uganda Research Ethics Committee and the Population Council institutional review board to ensure appropriate protections for the rights and welfare of human research participants. The research was also granted regulatory approval by the Uganda National Council for Science and Technology (UNCST).

2.5.1. Referrals

The study envisaged the possibility that during interviews some participants could recall frightening, humiliating, or painful experiences that could elicit a strong emotional response. Participants could also have recently experienced violence and desired immediate assistance or counselling. Therefore, to respond to the needs of participants, the study team identified UNHCR implementing partners in charge of child protection and genderbased violence service provision in each settlement, and caseworkers affiliated with these organisations (who regularly provided psychosocial support to young survivors) were incorporated into each data collection team. Each data collection team included at least one caseworker who accompanied the team throughout the fieldwork period, and provided immediate counselling to study participants that required it, in addition to referrals for further

care, when necessary. General psychosocial support was also offered to any member of the household from which the respondent was recruited. Additionally, a directory of services specific to each settlement was made available to survivors identified through the survey. These directories were a collation of community services offered by government and nongovernmental humanitarian agency services in each settlement, along with the contact information of the focal points concerned. A deliberate effort was made to include a range of available services in various sectors to ensure that the directories were not seen as referral information for violence. This strategy was geared toward ensuring that the focus of the study was known only to the participant. Interviewers were trained to highlight VAC-related services in the directory for participants at the end of the interview. For more details regarding the Response Plan, see Appendix B.

2.5.2. Survey Informed Consent

The first step in the informed consent process was to seek consent from the head of household for their own participation in answering the household questionnaire. Next, for selected eligible participants under 18 years old, the parent or guardian provided consent for their dependent to participate. Participants ages 18 or older, emancipated persons under age 18, and minors who were married provided their own consent to participate in the survey. For minors who were dependents, after the parent or guardian provided consent, the participant was then asked for their assent to participate. To ensure safety and confidentiality of both participants and interviewers, when seeking consent from the head of household and/or parents or guardians, the survey was introduced as an "an opportunity to learn more about young people's health, educational, and life experiences" to avoid potential risk of negative consequences to survey participants if other household members heard about the full, sensitive content of the survey. This is consistent with WHO ethical and safety recommendations regarding obtaining informed consent for participation in surveys that contain questions on domestic violence to define those surveys in terms other than violence.

During the consent/assent process, participants were informed that their participation in the survey was voluntary, that information provided was confidential and anonymous, and that if they chose to participate, questions about their sexual activity, and their experiences with physical, sexual, and emotional violence would be asked. They were also informed that they could skip any question they did not feel comfortable answering or end their participation at any time and for any reason. At the conclusion of the consent process, an informed consent statement was read to each participant and they indicated verbal consent, which was documented in the tablets by the interviewer. Verbal consent was considered the best approach to ensure wide participation by allowing illiterate participants the opportunity to participate and also to avoid collecting signatures that could be identified, given the sensitive nature of the study.

2.6. Response Rates and Data Analysis

Given the split sample design of the 2022 Uganda HVACS, response rates, including household response rates, are tabulated separately for males and females. The overall response rate for females was 46.6%; response rate at the household level was 53.3%, and the individual response rate was 87.5%. For males, the overall response rate was 50.6%; the household response rate was 56.1%, and the individual response rate was 90.1%. In the female sample, 5,087 households were surveyed, and 1,338 females completed the individual questionnaire. For the male sample, 3,556 households were surveyed, and 927 males completed the individual questionnaire.

Table 1: Response rate (%)

Data were analysed separately for participants ages 13-17 and 18-24 years given differences in how VAC/violence experienced in childhood was defined in these two age groups. Data from 13-17-year-

	HOUSEHOLD RESPONSE RATE	INDIVIDUAL RESPONSE RATE	OVERALL RESPONSE RATE
Males	56.1%	90.1%	50.6%
Females	53.3%	87.5%	46.6%

olds generated estimates for the prevalence of violence experienced in the past 12 months among adolescents (i.e., VAC). Data from 18-24-year-olds generated estimates of prevalence of violence experienced before age 18 (i.e., VAC) and in the past 12 months among young adults. Although the analyses distinguished results by sex and age group, all HVACS participants responded to the same questions, except questions about pregnancy and female genital mutilation/cutting, which only applied to females. STATA® statistical software (version 14.0) was used for data management and analysis to produce weighted point estimates and their associated standard errors. Sample weights were applied to all results to yield estimates that are representative of the refugee settlements. When calculating the estimates for measures included in this report, missing values were excluded from the analysis.

2.6.1. Weighted Percentages

Sample weights were created and applied to each individual record to adjust for the probability of selection, differential nonresponse, and calibration to the population in the refugee settlements.

2.6.2. Definition of Unreliable Estimates

Standard errors for estimates were calculated using methods that take the complex survey design into

account. Estimates were considered unreliable based on the corresponding Relative Standard Error (RSE), also commonly referred to as Coefficient of Variation (CV). RSE is calculated by dividing the standard error by the estimate and then multiplying by 100. As such, the RSE is affected by the magnitude of the estimate (i.e., the percentage or proportion) and the sample size. If sample weights are computed, as in HVACS, then estimates are based on the weighted sample size.

In the present report two RSE cutoffs were used to indicate degree of unreliability. Estimates with an RSE greater than 30% but not more than 50% were considered moderately unreliable and marked with one asterisk, with the warning in the footnote that the result should be interpreted with caution. These results were included in the tables but not discussed in the results section. Estimates with an RSE greater than 50% were considered unreliable and were suppressed. When the prevalence of an item is zero percent (0.0%), those results are denoted as <0.1 in the tables and should be interpreted with caution. It should not be assumed that the prevalence of the item in the entire population is an absolute zero.

2.6.3. Technical Note to the Reader

For all point estimates, 95% confidence intervals (CI) were calculated. The 95% CI is a statistical measure that indicates how confident we can be in our point estimates, within a specified margin of error. The CIs are calculated as the Z-score for a normal distribution containing 95% of the values (1.96) multiplied by the standard error of the prevalence estimate. Smaller CIs mean that the estimates are more precise, whereas wider CIs indicate more variation in the sample data.

The range of the 95% CI indicates that, for 95 out of 100 samples completed in the same way as the HVACS, the true population prevalence of violence will lie between the upper and lower CI values. For example, if the expected prevalence of sexual violence in childhood in refugee settlements in Uganda was 30%, with a CI of 26% to 34%, this would mean that if we could survey all youth in the refugee settlements, between 26% and 34% would report having experienced sexual violence in childhood.

2.6.4. Differences Between Estimates

To evaluate whether differences between any groups or subgroups were statistically significant and not due to random variation, the 95% CI for point estimates were compared to determine whether they overlapped or not. The CI overlap method is a conservative method that determines statistical difference by comparing the CI for two estimates — if the CIs do not overlap, then the estimates were considered "statistically different" and not due to random chance.

3. BACKGROUND CHARACTERISTICS OF YOUTH

This section presents selected background characteristics of youth in refugee settlements in Uganda by age, sex, education, orphan status, work experience, marital status, and sexual activity.

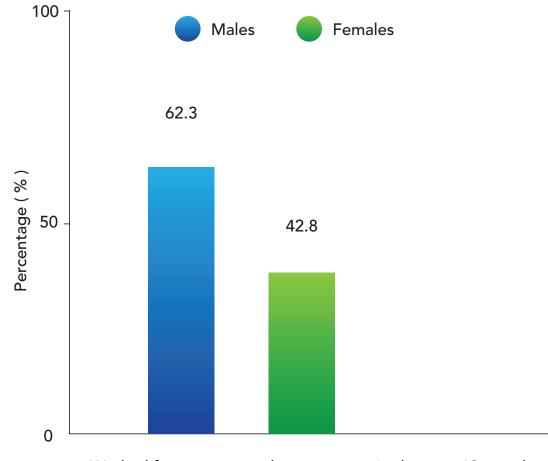
Orphanhood is defined as the loss of one (single orphan) or both (double orphan) parents before age 18. "Married" refers to those who were ever married or ever lived with someone as if married, otherwise known as cohabitation.

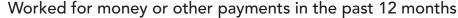
3.1. Characteristics of 18-24-Year-Olds

Tables 3.1.1. through 3.1.3 include background characteristics of 18-24-year-olds. Among females, 9.9% had never attended school, 29.7% had attended but not completed primary school, 39.6% had completed primary school, 18.9% had completed or were attending secondary school, and 0.9% attended higher than secondary school. Among males, 26.7% completed primary school, 38.6 % had completed or were attending secondary school, and 1.7% attended higher than secondary school. About one-in-four of females (23.0%) and males (24.1%) lost one parent before age 18. More males (62.3%) than females (42.8%) worked for money or other payment within the past 12 months (Figure 3.1). This difference was

About one-in-four of females (23.0%) and males (24.1%) lost one parent before age 18.

statistically significant. In terms of location of work, 85.6% of females earned money inside the settlement and 14.4% earned their money outside the settlement. Among males, 81.9% earned their money inside the settlement and 18.1% earned their money outside the settlement. Figure 3.1. Percentage of 18-24-year-olds who worked for money or other payment in the past 12 months – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.



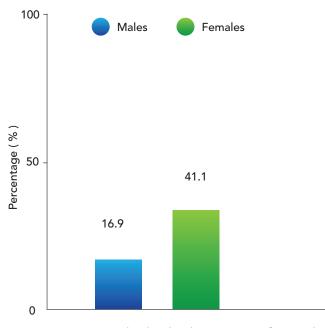


Females were two times (41.1%) more likely than males (16.9%) to have ever been married or lived with someone as if married (Figure 3.2). This difference was statistically significant. Fifteen percent of females were married or lived with someone as if married before the age of 18. Nearly six out of ten females (60.6%) and males (58.9%) had ever had sex. The median age of first sex among those who

had ever had sex was 17 years old for both females and males. Among females, 64.4% of respondents were from South Sudan, 29.1% from Democratic Republic of Congo, 1.9% from Rwanda, and 4.2% from Burundi. Among males, 69.4% were from South Sudan, 21.3% from Democratic Republic of Condo, 4.6% from Rwanda, and 4.7% from Burundi.

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Figure 3.2. Percentage of 18-24-year-olds who had ever been married or lived with someone as if married– Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.



Ever married or lived with someone as if married

About one-in-four of females (23.8%) and 34.6% of males had a form of disability. Among females, 10.6% had a serious difficulty seeing even when wearing glasses, 7.7% had serious difficulty concentrating, remembering, or making decisions, 8.2% had serious difficulty walking or climbing stairs, 7.4% had difficulty dressing or bathing, 10.1% had difficulty doing errands alone, and 6.7% had difficulty 12.0% Among communicating. males, had a serious difficulty seeing even when wearing glasses, 13.5% had serious difficulty remembering, concentrating, or making decisions, 5.3% had serious difficulty walking or climbing stairs, 3.1% had difficulty dressing or bathing, 8.4% had difficulty doing errands alone, and 7.0% had difficulty communicating.

3.2. Characteristics of 13-17-Year-Olds

Tables 3.2.1. through 3.2.3 include background characteristics of 13-17-year-olds. Among females, 3.4% had never attended school, 94.4% had complete primary education or less, and 2.0% had some secondary education or more. Among males, 2.0% had never attended school, 87.9% completed primary education or less, and 6.4% had some secondary education or more. Nearly nine out of ten females (91.9%) and males (93.4%) were currently enrolled in school. The majority of those enrolled in school were attending schools inside the settlements (93.0% of females and 96.5% of males). About one out of five females (19.6%) and 28.8% of males stopped attending school at some point due to the humanitarian crisis. The majority of females (91.4%) who stopped attending school did so for more than one year, while the majority of males (65.0%) stopped attending school for less than six months.

One-in-four of females (24.8%) and males (23.2%) lost one parent. More males (33.6%) than females (19.7%) worked for money or other payment within the past 12 months. In terms of location of work, 92.3% of females earned their money inside the settlement and 7.7% earned their money outside the settlement. Among males, 79.0% earned their money inside the settlement and 21.0% earned their money outside the settlement.

Only 1.8% of females and 0.4% of males had ever been married or lived with someone as if married. About 13% of males (12.8%) and 6.4% females had ever had sex. The median age of first sex among those who had ever had sex was 15 years old for females and 14 years old for males. Among females, 67.7% of respondents were from South Sudan, 27.5% from Democratic Republic of Congo, 2.7% from Rwanda, and 1.7% from Burundi. Among males, 64.3% were from South Sudan, 29.0% from Democratic Republic of Condo, 4.0% from Rwanda, and 1.9% from Burundi.

About one-in-five females (21.5%) and 27.2% of males had a form of disability. Among females, 14.0% had serious difficulty seeing even when wearing glasses, 6.9% had serious difficulty concentrating, remembering, or making decisions, 4.3% had serious difficulty walking or climbing stairs, 0.8% had difficulty dressing or bathing, 3.2% had difficulty doing errands alone, and 2.3% had difficulty communicating. Among males, 5.8% had serious difficulty seeing even when wearing glasses, 11.5% had serious difficulty concentrating, remembering, or making decisions, 6.6% had serious difficulty walking or climbing stairs, 1.8% had difficulty dressing or bathing, 9.4% had difficulty doing errands alone, and 10.5% had difficulty communicating.

4. SEXUAL VIOLENCE

This section describes the prevalence, perpetrators, and context of sexual violence against children in refugee settings in Uganda.

Four types of sexual violence were included: unwanted sexual touching, unwanted attempted sex, pressured sex, and physically forced sex. This section further describes the contexts in which sexual violence occurs as well as service knowledge and utilisation for experiences of sexual violence.

For each type of sexual violence, the prpetrator, context, and location of the first incident is reported among 18-24-year-olds. Due to the structure of the questionnaire where an 18-24-year-old might have reported multiple incidents of sexual violence throughout their lifetime, this allows us to focus on incidents that we know occurred in childhood. On the other hand, for 13-17-year-olds, the most recent incident is reported to provide the most current information about the experiences of adolescents. If a participant experienced multiple forms of sexual violence, such as unwanted sexual touching and unwanted attempted forced sex, she or he was asked about the perpetrator of the first or most recent incident of each form of violence. All findings presented are weighted proportions of those

who experienced sexual violence in childhood (for those ages 18-24) or experienced sexual violence in the past 12 months (for those ages 13-17 and 18-24).

> Sexual violence was experienced by 19.4% of females and 9.5% of males before age 18

4.1. Sexual Violence in Childhood among 18-24-Year-Olds

The prevalence of childhood (before age 18) sexual violence is presented in this section. The prevalence of each of the four types of sexual violence is also described along with age at first experience of sexual violence and experiences of multiple incidents of sexual violence. Multiple incidents include more than one incident of sexual violence, whether the same type or different types. Prevalence of unwanted first sex, including physically forced or pressured sex at sexual debut, is also presented. In some cases, the number of incidents of sexual violence for females and males was too small to generate reliable estimates for certain indicators. Findings of sexual violence in childhood among 18-24-year-olds are presented in Tables 4.1.1 through 4.1.4 and and 4.1.7 through 4.1.8.

Sexual violence was experienced by 19.4% of females and 9.5% of males before age

18 (Figure 4.1). Among females, 13.0% experienced unwanted sexual touching, 10.5% experienced unwanted attempted sex, 10.8% experienced pressured sex, and 8.1% experienced physically forced sex in childhood (Figure 4.2). Among males, 7.8% experienced unwanted sexual touching, 5.0% experienced unwanted attempted sex, 1.4% experienced pressured sex, and 2.3% experienced physically forced sex in childhood. The prevalence of experiencing pressured or physically forced sex in childhood among females was 12.0% and among males was 2.8%. The prevalence of experiencing pressured or physically forced sex at first sexual experience among females was 5.6% and among males was 0.2%.

Figure 4.1. Prevalence of different types of sexual violence prior to age 18, among 18-24-year-old females – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.

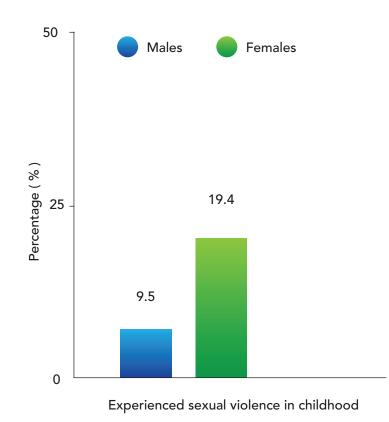
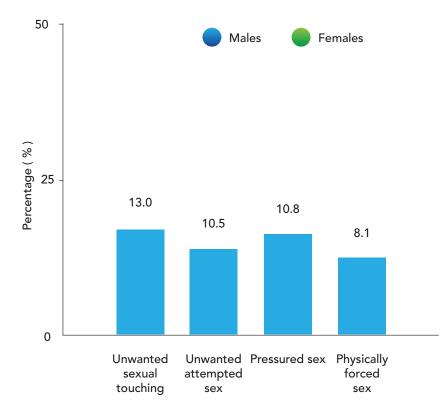


Figure 4.2. Prevalence of sexual violence prior to age 18, among 18-24-year-olds – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.





Among those who experienced any sexual violence in childhood, 37.7% of females experienced the first incident at age 13 or younger, 34.8% between age 14-15, and 27.5% between age 16-17. Among those who experienced any sexual violence in childhood, 8.3% of males experienced the first incident at age 13 or younger, 22.9% between age 14-15, and 68.8% between age 16-17.

Among females who experienced pressured or physically forced sex in childhood, about half (54.5%) experienced the first incident at age 13 or younger, 26.1% between ages 14-15, and 19.4% between ages 16-17. Among males who experienced pressured or physically forced sex in childhood, 82.9% experienced the first incident at age 13 or younger, and 17.1% between ages 16-17.

Among females who experienced sexual violence in childhood, nearly two out of three (62.7%) experienced multiple incidents before age 18. Among males who experienced sexual violence in childhood, 55.5% experienced multiple incidents before age 18.

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4.1.1. Perpetrators of the First Incidents Of Sexual Violence in Childhood among 18-24-Year-Olds

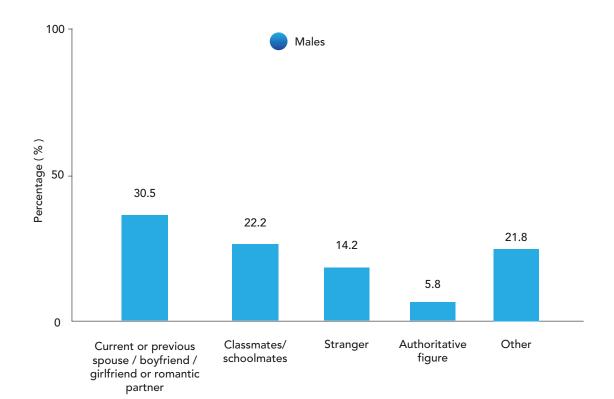
Among females, the most common perpetrator of the first incident of any sexual violence in childhood was a current or previous spouse, boyfriend, girlfriend, or romantic partner (30.5%), followed by a classmate/schoolmate (22.2%; Figure 4.3) and other (21.8%). Among males, the other category (perpetrator) constituted slightly more than half (53.1%), followed by current or previous spouse, boyfriend, girlfriend, or romantic partner (28.7%), and classmate/schoolmate (17.0%).

Among females, the most common perpetrator of the first incident of pressured or physically forced sexual violence in childhood was a current or previous spouse, boyfriend, girlfriend, or romantic partner (66.2%), followed by a stranger (17.7%) and other (8.0%). Among males, the most common perpetrator of the first incident of pressured or physically forced sexual violence in childhood was a current or previous spouse, boyfriend, girlfriend, or romantic partner (90.6%), followed by a classmate/schoolmate (9.4%).

Among females ages 18-24 who experienced any sexual violence in childhood, slightly more than half (54.2%) indicated that the perpetrator of the first incident was at least five years older. Among males ages 18-24 who experienced any sexual violence in childhood, 12.8% indicated that the perpetrator of the first incident was at least five years older. Additionally, 23.0% of females who experienced pressured or physically forced sex before age 18 indicated that the perpetrator of the first incident was at least five years older.

Among females ages 18-24 who experienced sexual violence in childhood, nearly two out of three (63.3%) had more than one perpetrator involved in the first incident of sexual violence in childhood. Among males ages 18-24 who experienced sexual violence in childhood, half (50.0%) had more than one perpetrator involved in the first incident of sexual violence in childhood.





4.1.2. Contexts of the First Incidents of Sexual Violence in Childhood among 18-24-Year-Olds

The most common location of the first incident of sexual violence in childhood for females was an outside location (67.5%) followed by the perpetrator'shome(13.0%) and the respondent's home (11.4%). The most common location of the first incident of sexual violence in childhood for males was an outside location (56.7%) followed by the respondent's home (13.5%) and the perpetrator's home (13.2%). Among females who experienced sexual violence in childhood, 17.9% of the first incidents occurred in the morning, 30.1% in the afternoon, 47.3% in the evening, and 3.7% late at night. Among males who experienced sexual violence, 2.0% of the first incidents occurred in the morning, 38.3% in the afternoon, 46.0% in the evening, and 13.7% late at night. Among females who experienced the first incident of sexual violence in childhood, 21.0% experienced the violence before arriving in the settlement and 73.3% after arriving in the settlement. Among males who experienced the first incident of sexual violence in childhood, 46.8% experienced the violence before arriving in the settlement. and 53.2% after arriving in the settlement.

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4.1.3. Disclosure, Service-Seeking, and Receipt of Services for Sexual Violence in Childhood among 18-24-Year-Olds

Among those who experienced any sexual violence in childhood, 17.1% of females told someone about their experience (Figure 4.4). Among those who experienced any sexual violence in childhood, 30.6% of males told someone about their experience. Females most commonly disclosed to a relative (47.5%) or a friend or neighbour (32.5%). On the other hand, males most commonly disclosed to a friend or neighbour (72.4%) or relative (6.8%).

More than half of females (54.8%) and males

(73.0%) who experienced sexual violence in childhood knew of a place to go for help. One in 20 females (5.1%) who ever experienced sexual violence sought help for any incident of sexual violence, and only 3.4% received help. Among males, only 17.2% sought help and 17.1% received help.

Among those who experienced any incident of pressured or physically forced sex, 16.3% of females and 48.7% of males told someone about the experience. About half (46.4%) of females knew of a place to seek help, 8.9% sought help, and 5.9% received help. Among males, 67.0% knew of a place to seek help, 35.8% sought help, and 35.7% received help.

Figure 4.4. Disclosure, service-seeking, and receipt of help for any incident of sexual violence among 18-24-year-olds who experienced sexual violence in childhood – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.



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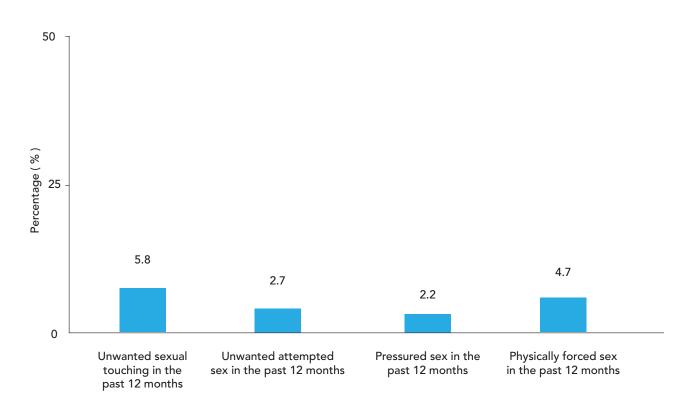
4.2. Sexual Violence in the Past 12 Months among 18-24-Year-Olds

This section describes sexual violence in the past 12 months among young adults. Prevalence, perpetrators, and service-seeking for sexual and physical violence are included for 18-24-year-olds who experienced violence in the past year. The overall prevalence of sexual violence in the past 12 months among young adults is presented. The prevalence of each of the four types of sexual violence is also described.

Findings related to sexual violence in the past 12 months among 18-24-year-olds are

provided in Tables 4.1.5 and 4.1.6. In the past 12 months, 10.6% of females and 16.9% of males experienced sexual violence. Among females, 5.8% experienced unwanted sexual touching, 2.7% experienced unwanted attempted sex, 2.2% experienced pressured sex, and 4.7% experienced physically forced sex (Figure 4.5). Among males, 12.1% experienced unwanted sexual touching, 2.9% experienced unwanted attempted sex, and 2.6% experienced physically forced sex. Among females, 4.7% experienced pressured or physically forced sex in the past 12 months. Among males, 2.6% experienced pressured or physically forced sex in the past 12 months.

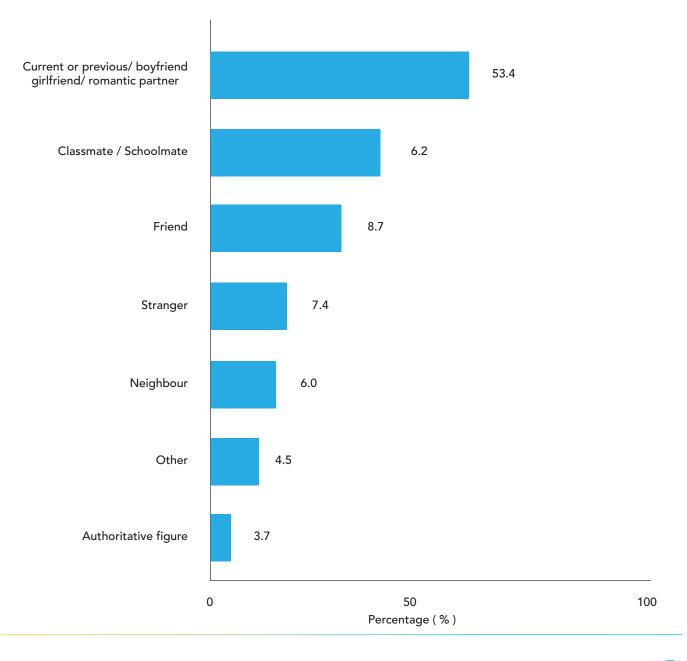
Figure 4.5. Prevalence of different types of sexual violence in the past 12 months, among 18-24-year-old females – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.



Prevalence of different types of sexual violence in the past 12 months, among 18-24-year-old females

The most common perpetrators of the most recent incidents of sexual violence experienced by females in the past 12 months were a current or previous spouse, boyfriend/girlfriend, or romantic partner (53.4%), followed by a classmate/schoolmate (16.2%) and a friend (8.7%) (Figure 4.6). All perpetrators of the most recent incident of sexual violence among females were males. The most common perpetrators of the most recent incidents of sexual violence experienced by males in the past 12 months were a current or previous spouse, boyfriend/girlfriend, or romantic partner (52.3%), followed by a friend (18.4%) and classmate/schoolmate (13.5%). All perpetrators of the most recent incidence among males were females.

Figure 4.6. Perpetrators of the most recent incident of sexual violence, among 18-24-year-old females who experienced sexual violence in the past 12 months – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.



Among females, the perpetrator of the most recent incident of pressured or physically forced sex in the past 12 months was a current or previous spouse/ boyfriend/ girlfriend or romantic partner (36.3%), and classmate/ schoolmate (12.9%). Among males, the perpetrator of the most recent incident of pressured or physically forced sex in the past 12 months was a current or previous spouse/ boyfriend/girlfriend or romantic partner (25.8%), and classmate/ schoolmate (0.8%).

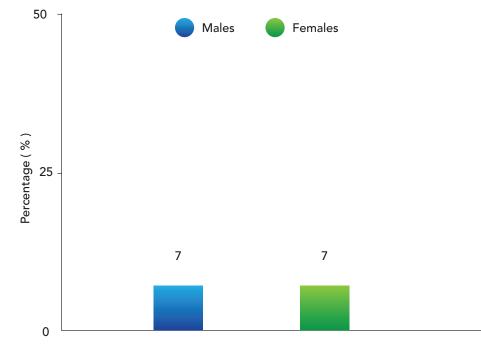
Three in ten 18-24-year-old females (32.7%) who experienced any sexual violence in the past 12 months reported that the perpetrators of the most recent incidents were at least five years older than them. Among males, 3.4% who experienced any sexual violence in the past 12 months reported that the perpetrators of the most recent incidents were at least five years older than them.

Transactional sex was defined as having sex with a person mainly to get things that they need or want such as money, gifts, or other things that are important to them. Among 18-24-year-old females who had ever had sex, 3.3% engaged in transactional sex in the past 12 months. In the past year, 7.0% of females and 7.0% of males ages 13-17 experienced sexual violence

4.3. Sexual Violence in the Past 12 Months among 13-17-Year-Olds

Findings of sexual violence in childhood among 13-17-year-olds are presented in Tables 4.2.1 through 4.2.5. In the past year, 7.0% of females and 7.0% of males ages 13-17 experienced sexual violence (Figure 4.7). Among females, 6.5% experienced unwanted sexual touching, 0.5% experienced unwanted attempted sex in the past 12 months, 0.4% experienced pressured sex, 0.1% experienced physically forced sex. Among males, 6.0% experienced unwanted sexual touching, 0.7% experienced pressured sex, and 1.1% experienced physically forced sex. Only 0.5% of females and 1.1% of males experienced pressured or physically forced sex.





Prevelance of any type of sexual violence in the past 12 months

Among 13-17-year-old females who had ever had sex, 1.0% engaged in transactional sex in the past 12 months. Two percent of females experienced pressured or physically forced sex at first sexual experience among those who had ever had sex. Among males who had ever had sex, 1% experienced pressured or physically forced sex at first sexual experience.

4.3.1. Perpetrators of the Most Recent Incidents of Sexual Violence among 13-17-Year-Olds

Among females ages 13-17 who experienced sexual violence in the past 12 months, the most common perpetrator of the most recent incident was a classmate/schoolmate (41.5%), followed by current or previous spouse, boyfriend/girlfriend (28.8%), stranger (12.6%), neighbour (10.6%), friend (4.6%), and authority (1.9%). All perpetrators of the most recent incident of sexual violence among females were males. Among males, the most common perpetrator of the most recent incident was a friend (57.9%), other (15.4%), current or previous spouse, boyfriend/girlfriend (12.0%), neighbour (6.6%), stranger (5.2%), and classmate/schoolmate (2.9%). All perpetrators of the most recent incident of sexual violence among males were females.

Among females ages 13-17 who experienced any sexual violence in the past 12 months, about a third (30.5%) reported that the perpetrator of the most recent incident was at least five years older than them. Among males ages 13-17 who experienced any sexual violence in the past 12 months, 6.1% reported that the perpetrator of the most recent incident was at least five years older than them.

4.3.2. Context of the Most Recent Incident of Sexual Violence among 13-17-Year-Olds

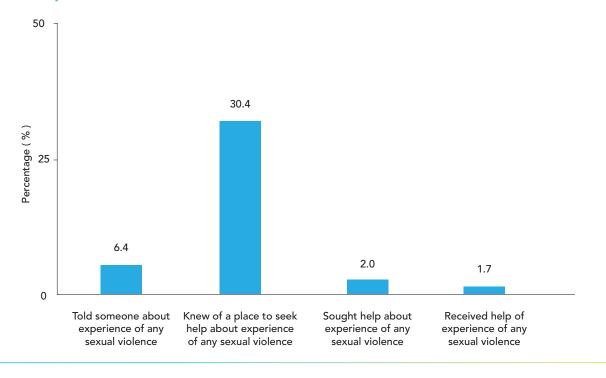
13-17-year-old females who Among experienced sexual violence in the past 12 months, the most common locations of the most recent incident were an outside location (84.6%) followed by the perpetrator's home (6.8%). Among 13-17-year-old males who experienced sexual violence in the past 12 months, the most common locations of the most recent incident were an outside location (71.8%) followed by the respondent's home (17.3%). The most recent incident of sexual 13-17-year-old females violence among

occurred in the afternoon (44.3%) and evening (47.0%). The most recent incident of sexual violence among 13-17-year-old males occurred in the evening (59.2%) and afternoon (32.0%).

4.3.3. Disclosure, Knowledge of Services, and Service-Seeking for Sexual Violence in the Past 12 Months among 13-17-Year-Olds

Six percent of 13-17-year-old females who experienced any incident of sexual violence in the past 12 months told someone about their experience (Figure 4.8). Females disclosed to a relative (94.2%) or a friend or neighbour (5.8%). Three in ten 13-17-year-old females (30.4%) who experienced sexual violence in the past 12 months knew of a place to seek help (Figure 4.8), 2.0% sought help, and 1.7% received help.

Figure 4.8. Disclosure, service-seeking, and receipt of help for any incident of sexual violence, among 13-17-year-old females who experienced sexual violence in the past 12 months – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.



Six percent of 13–17-year-old males who experienced any incident of sexual violence in the past 12 months told someone about their experience. Males disclosed to a friend (82.7%) or a service provider (17.3%). About seven in ten 13-17-year-old males (70.9%) who experienced sexual violence in the past 12 months knew of a place to seek help.

Among females who experienced pressured or physically forced sex in the past 12 months, 8.9% knew of a place to seek help, and 0.5% sought help. Among males who experienced pressured or physically forced sex in the past 12 months, 58.9% knew of a place to seek help. Seven percent of females and 6.1% of males told someone about experiencing pressured or physically forced sex in the past 12 months.

5. PHYSICAL VIOLENCE

This section describes the magnitude and contexts of physical violence against children in refugee settings in Uganda.

The perpetrators of physical violence in childhood, injuries received, disclosure of violence, and knowledge and utilisation of services are also described. Findings include the overall prevalence of physical violence in childhood (before age 18) for 18-24-year-olds and in the past 12 months for 13-17-year-olds.

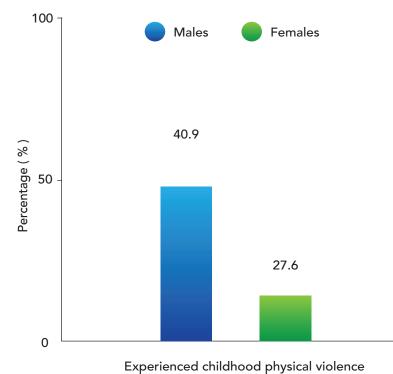
More than one out of four 18-24-year-old females (27.6%) and two out of five 18-24-year-old males (40.9%) experienced physical violence before age 18

Injuries from physical violence are also described. Such injuries include minor bruises, scrapes or scratches, black eyes or other eye injuries, gashes, deep wounds (e.g., from a knife, gun, or other object), broken bones or teeth, or burns.

5.1. Physical Violence in Childhood among 18-24-Year-Olds

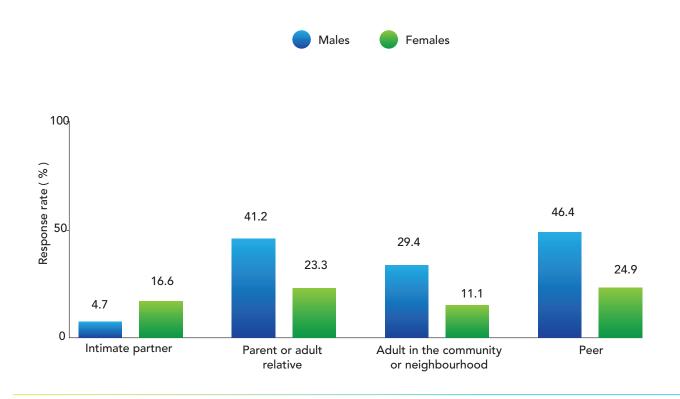
Tables 5.1.1 and 5.1.3 through 5.1.5 include findings related to physical violence in childhood among 18-24-year-olds. More than one out of four 18-24-year-old females (27.6%) and two out of five 18-24-year-old males (40.9%) experienced physical violence before age 18 (Figure 5.1). Nearly one in five females (16.6%) and a third of males (33.5%) experienced physical violence by a parent or other adult relative in childhood (Figure 5.2). Slightly more females experienced violence from an intimate partner in childhood than males (4.4% versus 2.0%). Significantly more males (12.7%) than females (8.0%) experienced physical violence from a peer in childhood. Significantly more males (18.8%) than females (5.4%) experienced physical violence in childhood by an adult from the community or neighbourhood.

Figure 5.1. Prevalence of physical violence prior to age 18, among 18-24-year-olds –Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022



Experienced childhood physical violence

Figure 5.2. Prevalence of physical violence prior to age 18, by perpetrator, among 18-24-year-olds –Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022



Among 18-24-year-old females who experienced physical violence in childhood, nearly four out of five (83.2%) indicated the first incident was at age 12-17, 13.7% by age 6-11, and 3.1% by age 5 or younger. Similarly, for 18-24-year-old males who experienced physical violence in childhood, the first incident occurred most commonly at age 12-17 (81.0%), followed by age 6-11 (18.3%).

For more than two-thirds of 18-24-year-old females (66.6%) and two out of five 18-24-year-old males (43.3%), their first incident of physical violence occurred after arrival in the settlement.

5.1.1. Disclosure, Knowledge of Services, and Service-Seeking for Physical Violence in Childhood among 18-24-Year-Olds

Among 18-24-year-olds who experienced physical violence in childhood, only 6.3% of females and 9.0% of males told someone about their experience. Among 18-24-year-olds female who disclosed, the person they most commonly told was a relative (52.9%), followed by a service provider or authority figure (21.7%), and a friend or neighbour (17.9%). The estimates for 18-24-year-olds males were unreliable due to fewer cases.

Slightly more than half of 18-24-year-old females (51.7%) and seven out of ten males (70.2%) knew of a place to seek help for an experience of physical violence. Only 3.4% of females and 1.0% of males sought help for any experience of physical violence, and 2.1% of females and 1.0% of males received help.

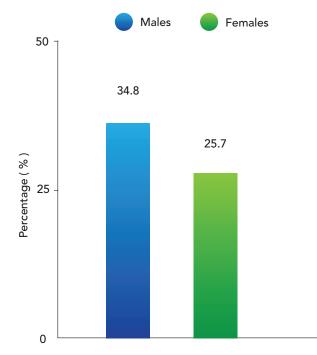
5.2. Physical Violence in the Past 12 Months among 18-24-Year-Olds

Table 5.1.2 includes results of physical violence in the past 12 months among 18-24-year-olds. More than one out of ten females (13.9%) and one in five males (20.2%) experienced physical violence in the past 12 months. Table 5.1.2 also includes results on the sex of the perpetrator of the most recent incident of physical violence. In general, the most recent incident of physical violence was more likely to have been perpetrated by a person of the same sex as the child survivor of such violence, than by an opposite-sex perpetrator.

5.3. Physical Violence in the Past 12 Months among 13-17-Year-Olds

Tables 5.2.1 through 5.2.3 include results of physical violence in the past 12 months among 13-17-year-olds. More than one out of four females (25.7%) and one out of three males (34.8%) experienced physical violence in the past 12 months (Figure 5.3). Table 5.2.1 also includes results on the sex of the perpetrator of physical violence against 13-17-year-olds in the past 12 months. In general, physical violence against this population in the past 12 months was more likely to have been perpetrated by a person of the same sex, than by an oppositesex perpetrator.





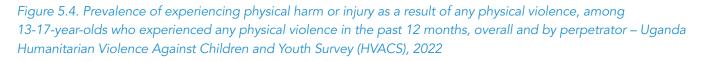


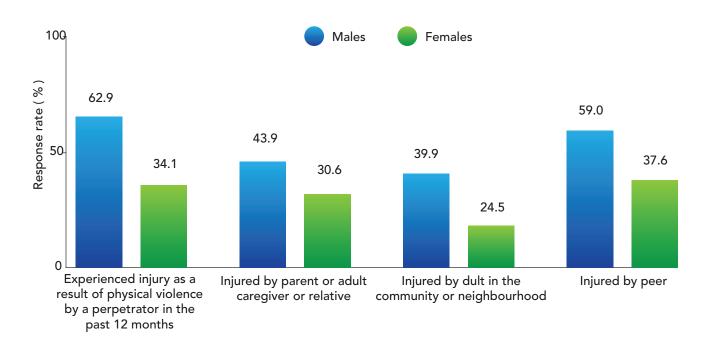
Nearly one out of five 13-17-year-old females (16.1%) and males (18.6%) experienced physical violence by an adult in the neighbourhood or community in the past 12 months. Nearly one out of ten females (6.5%) and one out of five males (16.8%) experienced physical violence by a parent, caregiver, or adult relative in the past 12 months. More than one in ten females (13.9%) and nearly one in five males (15.7%) experienced violence by a peer in the past 12 months. The estimates for both females and males who experienced physical violence by an intimate partner in the past 12 months were not reliable.

13-17-year-old females who Among experienced physical violence in the past 12 months, more than seven out of ten (72.9%) experienced the first incident between ages 12-17, one out four (25.9%) experienced the first incident between ages 6-11, and only 1.2% experienced the first incident at age 5 or younger. For 13-17-year-old males who experienced any physical violence in the past 12 months, the most common age of the first incident of physical violence was between 12-17 years (61.4%), followed by ages 6-11 years (33.1%) and age 5 or younger (5.5%). For the majority of females and males (over 96.0%) who experienced physical violence in the past 12 months, the most recent incident of physical violence happened after arriving in the settlement.

5.3.1. Injuries from Physical Violence among 13-17-Year-Olds

Among 13-17-year-olds who had experienced physical violence in the past 12 months, 34.1% of females and 62.9% of males were injured as a result of the violence (Figure 5.4). Among those who experienced physical violence by a parent, caregiver, or adult relative in the past 12 months, 30.4% of females received an injury, and 43.9% of males received an injury. Among those who experienced physical violence by an adult in the neighbourhood in the past 12 months, one out of four (24.5%) females and almost two out of five (39.9%) males experienced injury. Among those who experienced peer physical violence in the past 12 months, 37.6% of females and three out of five males (59.0%) received an injury.





5.3.2. Disclosure, Knowledge of Services, and Service-Seeking for Physical Violence in the Past 12 Months among 13-17-Year-Olds

Among 13-17-year-olds who experienced any physical violence, only 2.5% of females and 1.0% of males told someone about it. About two out of five females (41.2%) and half of the males (48.9%) who experienced physical violence knew of a place to seek help. Less than 16% of females and males sought help for an experience of physical violence and received help. The estimates for the relationship with the person the survivor told about the incident of physical violence were unreliable.

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5.4. Witnessing Violence in The Home or Community

Witnessing physical violence in the home was defined as seeing or hearing a parent be punched, kicked, or beaten up by another parent or their boyfriend or girlfriend, or seeing or hearing a sibling be punched, kicked, or beaten by a parent. Witnessing physical violence in the community included seeing anyone outside of the home and family environment experience physical violence. Table 5.3.1 includes findings of witnessing violence in the home and in the community among 18-24-year-olds in childhood and 13-17-year-olds in the past 12 months.

One out of three females (33.0%) and 43.9% of males ages 18-24 witnessed violence in the home before age 18. About one out of four females (23.5%) and two out of five males (41.5%) witnessed violence in the community before age 18. Among children ages 13-17, 58.0% of females and 41.5% of males witnessed violence in the home in the past 12 months, and seven out of ten females (70.1%) and three out of five males (61.7%) witnessed violence in the community or neighbourhood in the past 12 months.

6. EMOTIONAL VIOLENCE

This section describes childhood and young adult experiences of emotional violence perpetrated by intimate partners, parents, adult caregivers, or other adult relatives. For 13-17-year-olds, peer emotional violence is also reported.

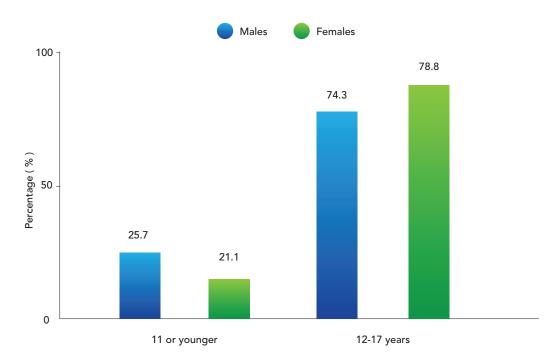
14.2% experienced emotional violence by a parent, adult caregiver, or adult relative before age 18.

6.1. Emotional Violence in Childhood among 18-24-Year-Olds

Table 6.1.1 includes findings of emotional violence in childhood among 18-24-year-olds. Among females, 14.2% experienced emotional violence by a parent, adult caregiver, or adult relative before age 18.

The age at first experience was 12-17 years for 78.8% of females and age 11 or younger for 21.1% of females. The age at first experience was 12-17 years for 74.3% of males and age 11 or younger for 25.7% of males (Figure 6.1).

Among 18-24-year-olds who experienced emotional violence by a parent, adult caregiver, or other adult relative in childhood, 88.6% of females and 42.6% of males experienced the first incident after arriving in the settlement. Figure 6.1. Age at first experience of emotional violence before age 18, among 18-24-year-olds – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.

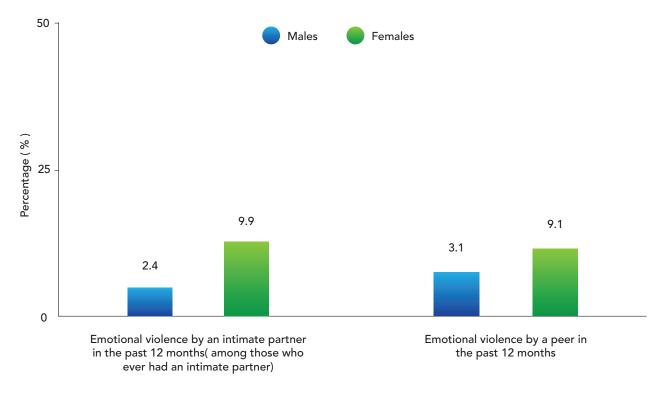


Prevalence of different types of sexual violence prior to age 18, among 18-24-year-old female

6.2. Emotional Violence in the Past 12 Months among 18-24-Year-Olds

Table 6.2.1 and Figure 6.2 include results of emotional violence in the past 12 months among 18-24-year-olds. Among those who had ever had an intimate partner, 9.9% of females and 2.4% of males experienced emotional violence by an intimate partner in the last 12 months. Nearly one in ten females (9.1%) and 3.1% of males experienced emotional violence by peers in the past 12 months.





6.3. Emotional Violence in the Past 12 Months among 13-17-Year-Olds

Tables 6.3.1 through 6.3.2 include findings of emotional violence in the past 12 months among 13-17-year-olds. Among females, 13.8% experienced emotional violence by a parent, caregiver, or adult relative in the past 12 months; the prevalence for males was 10.3%. Among those who experienced emotional violence in the past 12 months, the majority of females (97.6%) and males (94.6%) experienced it after arriving in the settlement. Table 6.3.1 also includes results on the sex of the perpetrator of emotional violence against 13-17-year-olds in the past 12 months. In general, emotional violence against this population in the past 12 months was more likely to have been perpetrated by a person of the same sex, than by an opposite-sex perpetrator.

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7. OVERLAP OF TYPES OF VIOLENCE: SEXUAL, PHYSICAL, AND EMOTIONAL

7.1. Overlap of Types of Violence in Childhood and in the Past 12 Months among 18-24-Year-Olds

Table 7.1 and Figure 7.1 include data on the overlap of different forms of violence among 18-24-year-olds in childhood and in the past 12 months. Nearly half of females (42.6%) and males (49.6%) experienced at least one type of violence before age 18.

Nearly half of females (42.6%) and males (49.6%) experienced at least one type of violence before age 18.

Among females, 7.7% experienced sexual violence only, 13.5% experienced physical violence only, and 2.2% experienced emotional violence only before age 18. Among males,

1.7% experienced sexual violence only, 22.7% experienced physical violence only, and 5.9% experienced emotional violence only before age 18.

There was some overlap in violence experiences in childhood among 18-24-year-old females: 8.3% experienced sexual and physical violence, 4.6% experienced sexual and emotional violence, 9.2% experienced physical and emotional violence, and 3.3% experienced all three types. Among males, 6.9% experienced sexual and physical violence, 5.1% experienced sexual and emotional violence, 16.1% experienced physical and emotional violence, and 4.7% experienced all three types.

About three out of ten females (31.1%) and males (35.2%) ages 18-24 experienced any violence in the past 12 months. Among females, 4.9% experienced sexual violence only, and a similar proportion experienced physical violence only in the past 12 months. Among males, 6.7% experienced sexual violence only, and 8.5% experienced physical violence only in the past 12 months. Among females, 3.4% experienced sexual and physical violence. Among males, 6.1% experienced sexual and physical violence.

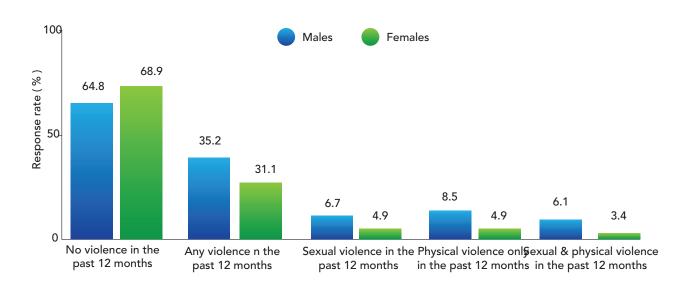


Figure 7.1. Prevalence of any violence and overlap of different types of violence in the past 12 months among 18-24-year-olds – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.

7.2. Overlap of Types of Violence in the Past 12 Months among 13-17-Year-Olds

Table 7.2 includes data on overlap among types of violence in the past 12 months for 13-17-yearolds. About a third of females (32.0%) and four out of ten males (40.0%) ages 13-17 experienced any type of violence in the past 12 months. Among females, 2.1% experienced sexual violence only, 14.5% experienced physical violence only, and 3.5% experienced emotional violence only in the past 12 months. Among males, 2.7% experienced sexual violence only, 24.4% experienced physical violence only, and 1.6% experienced emotional violence only. Among females, 4.2% experienced both sexual and physical violence in the past 12 months, 0.6% experienced sexual and emotional violence, 7.0% experienced physical and emotional violence, and 3.0% experienced all three types. Among males, 3.0% experienced both sexual and physical violence in the past 12 months, 1.0% experienced sexual and emotional violence, 7.0% experienced physical violence, and 0.8% experienced all three types.

8. OTHER FORMS OF VIOLENCE

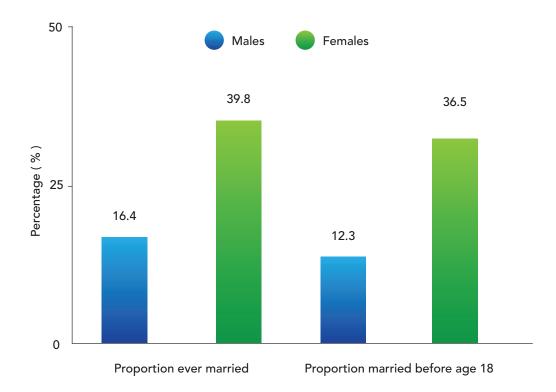
This section describes other forms of violence that children and youth are likely to experience, including abduction, child marriage, and female genital mutilation/cutting.

8.1. Abduction

Table 8.1 presents prevalence of abduction among 13-17 and 18-24-year-olds. Among 18-24-year-olds, more males than females had ever been abducted once (6.5% versus 2.2%) or more than once (3.1% versus 1.4%). Among those who had ever been abducted, about half of females were abducted after arrival in the settlement, while two out of three males (64.1%) were abducted before arrival in the settlement. Among 13-17-year-olds, 4.0% of males and 0.7% of females had been abducted once, while 0.8% of males and 0.2% of females had been abducted multiple times.

8.2. Child Marriage

About four out of ten females (39.8%) and 16.4% of males ages 18-24 years had ever been married. Among females who had ever been married, 1% were married before age 15 while 36.5% were married before age 18 (Figure 8.1). Among ever-married males, 12.3% were married before age 18. For nearly half (48.9%) of ever-married females, their partners were five years or more older than them, while only 1% of ever-married males indicated that their partners were five years or more older than them. Figure 8.1. Prevalence of child marriage among 18-24-year-olds – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.



8.3. Female Genital Mutilation/Cutting

About one out of three females (30%) ages 18-24 years and 13.4% of females ages 13-17 years had ever heard of female genital mutilation/cutting. Among females who had ever heard of female genital mutilation/cutting, 1.6% of those ages 18-24 years and 2.5% of those ages 13-17 years had ever been cut.

9. OUTCOMES AND HEALTH-RELATED CONDITIONS ASSOCIATED WITH SEXUAL, PHYSICAL, AND EMOTIONAL VIOLENCE

This section describes the relationships between outcomes and healthrelated conditions and exposure to violence.

The health-related conditions assessed include mental distress in the past 30 days; alcohol intoxication in the past 30 days; cigarette smoking in the past 30 days; substance use in the past 30 days; self-harm behaviours, suicidal ideation, and suicide attempts; and symptoms or diagnosis of sexually transmitted infections (STIs). Health-related conditions that do not specify "in the past 30 days" may have occurred at any time in the person's life (ever). This section also describes sexual risk-taking behaviours by experience of sexual, physical, or emotional violence, and school absenteeism due to violence. 9.1. Sexual, Physical, and Emotional Violence in Childhood and Mental and Physical Health among 18-24-Year-Olds

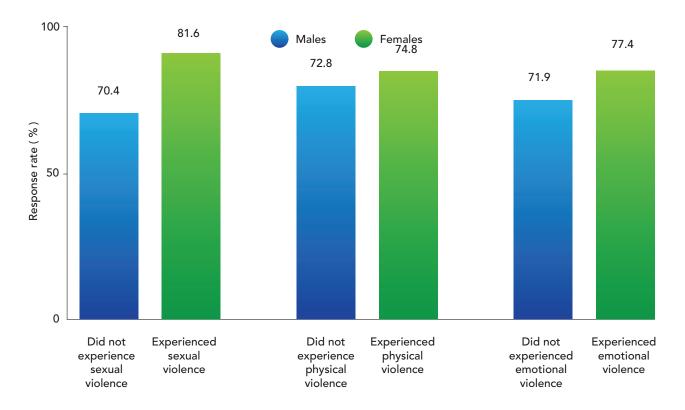
Tables 9.1.1 through 9.1.6 include findings of health conditions and sexual, physical, and emotional VAC among 18-24-year-olds.

9.1.1. Health Conditions and Sexual Violence In Childhood

Females aged 18-24 who experienced sexual violence in childhood were significantly more likely to have mental distress in the past 30 days (81.6% versus 70.4%; Figure 9.1) and to have ever thought of suicide (23.0% versus 7.6%) compared to those who did not experience sexual violence in childhood. The estimates for females who participated in binge drinking in the past 30 days, current smoking, and using drugs in the past 30 days who experienced sexual violence in childhood were not reliable.

Males aged 18-24 who experienced sexual violence in childhood were significantly more likely to have mental distress in the past 30 days (86.2% versus 77.7%) and to have ever thought of suicide (35.5% versus 4.9%) compared to those who did not experience sexual violence in childhood. Males aged 18-24 who experienced sexual violence in childhood were more likely to be current smokers (5.9% versus 3.7%) and to have ever had symptoms or been diagnosed with an STI (51.9% versus 30.5%) compared to those who did not experience sexual violence in childhood.





Prevalence of mental health distress in the past 30 days, by experience of sexual, physical, or emotional violence before age 18, among 18-24-year-old females

9.1.2. Health Conditions and Physical Violence Experienced In Childhood

Females aged 18-24 who experienced physical violence before age 18 were more likely to have mental distress in the past 30 days compared to those who did not experience physical violence in childhood (74.8% versus 72.8%). Females who experienced physical violence in childhood were also more likely to have ever thought of suicide (12.5% versus 8.9%), ever intentionally hurt themselves (10.4% versus 6.5%), or ever attempted suicide (40.3% versus 32.1%) compared to those who did not experience physical violence in childhood. The estimates for binge drinking in the past 30 days, current smoking, and using drugs in the past 30 days among females who experienced physical violence in childhood were unreliable.

Males aged 18-24 who experienced physical violence before age 18 were more likely to have mental distress in the past 30 days compared to those who did not experience physical violence in childhood (83.5% versus 74.1%). Males who experienced physical violence in childhood were also more likely to have ever had thoughts of suicide (13.4% versus 3.8%), ever intentionally hurt themselves (8.2% versus 6.3%) compared to those who did not experience physical violence in childhood. Males aged 18-24 who experienced physical violence were more likely to practice binge drinking in the past 30 days (4.6% versus 0.7%), be a current smoker (8.0% versus 0.8%), use drugs in the past 30 days (2.2% versus 0.6%) and ever had symptoms or a diagnosis of an STI (44.0% versus 23.5%).

9.1.3. Health Conditions and Emotional Violence in Childhood

Females aged 18-24 who experienced emotional violence in childhood were more likely to experience mental distress in the past 30 days (77.4% versus 71.9%) and ever had thoughts of suicide (21.3% versus 8.9%), ever intentionally hurt themselves (20.4% versus 6.5%), or ever attempted suicide (40.8% versus 34.9%) than those who did not experience emotional violence in childhood. The estimates for females for binge drinking the last 30 days, being a current smoker, and using drugs in the past 30 days were unreliable.

Males aged 18-24 who experienced emotional violence in childhood were more likely to experience mental distress in the past 30 days (81.0% versus 77.1%), ever had thoughts of suicide (19.4% versus 3.7%), or ever intentionally hurt themselves (11.2% versus 6.4%) than those who did not experience emotional violence in childhood. Males aged 18-24 who experienced emotional violence in childhood were more likely to practice binge drinking in the past 30 days (4.2% versus 1.9%), or ever had symptoms or diagnosis of an STI (50.5% versus 27.4%) than those who did not experience emotional violence in childhood.

9.2. Sexual, Physical, and Emotional Violence in the Past 12 Months and Mental and Physical Health among 13-17-Year-Olds

Through 9.2.6 include findings related to health conditions and sexual, physical, and emotional violence in the past 12 months among 13-17-year-olds.

9.2.1. Health Conditions and Sexual Violence

Females aged 13-17 who experienced sexual violence in the past 12 months were more likely to have experienced mental distress in the past 30 days compared to those who did not experience sexual violence in the past 12 months (85.9% versus 52.1%; Figure 9.2). Females aged 13-17 who experienced sexual violence in the past 12 months were more likely to ever hurt themselves intentionally (19.0% versus 3.9%), or ever thought about suicide (20.4% versus 3.5%) than those who did not experience sexual violence in the past 12 months. Estimates for females for binge

drinking in the past 30 days, being a current smoker, or use of drugs in the past 30 days were unreliable. Females aged 13-17 who experienced sexual violence in the past 12 months were significantly more likely to have ever had symptoms or diagnosis of an STI (33.6% versus 9.5%) compared to those who did not experience sexual violence in the past 12 months.

Males ages 13-17 who experienced sexual violence in the past 12 months were more likely to have experienced mental distress in the past 30 days (74.9% versus 71.1%), ever intentionally hurt themselves (8.0% versus 4.7%), or ever thought about suicide (8.7% versus 5.6%). Males aged 13-17 who experienced sexual violence in the past 12 months were more likely to have ever had symptoms or diagnosis of an STI (43.6% versus 17.8%) compared to those who did not experience sexual violence in the past 12 months. Estimates about binge drinking in the past 30 days, being a current smoker, or using drugs in the past 30 days by experience of sexual violence in the past 12 months were unreliable.

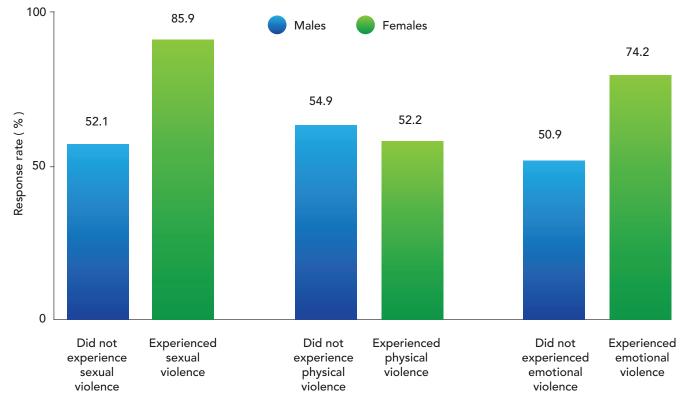


Figure 9.2. Prevalence of mental health distress in the past 30 days, by experience of sexual, physical, or emotional violence in the past 12 months among 13-17-year-old females – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.

9.2.2. Health Conditions and Physical Violence

Females aged 13-17 who experienced physical violence in the past 12 months were more likely to ever intentionally hurt themselves (9.7% versus 3.8%) or have ever thought about suicide (13.5% versus 2.4%) than those who did not experience physical violence in the past 12 months. Females aged 13-17 who experienced physical violence in the past 12 months were more likely to have ever had symptoms or been diagnosed with an STI (18.7% versus 8.5%) than those who did not experience physical

violence in the past 12 months. The estimates for binge drinking in the past 30 days, current smoking, and use of drugs in the past 30 days by experience of physical violence in the past 12 months were unreliable.

Males aged 13-17 who experienced physical violence in the past 12 months were more likely to experience mental distress in the past 30 days (79.6% versus 66.9%), have ever thought about suicide (10.8% versus 2.9%), or ever attempted suicide (90.1% versus 12.3%) than those who did not experience physical violence in the past 12 months. Males aged

Source ~ Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

13-17 who experienced physical violence in the past 12 months were more likely to ever have had symptoms or diagnosis of an STI (26.4% versus 15.6%) than those who did not experience physical violence in the past 12 months. The estimates for binge drinking in the past 30 days, current smoking, and use of drugs in the past 30 days were unreliable.

9.2.3. Health Conditions and Emotional Violence

Females ages 13-17 who experienced emotional violence in the past 12 months were significantly more likely to have mental distress in the past 30 days (74.2% versus 50.9%), ever intentionally hurt themselves (10.2% versus 4.2%), or ever thought of suicide (13.9% versus 3.2%) than those who did not experience emotional violence over the same period. Females aged 13-17 who experienced emotional violence in the past 12 months were significantly more likely to have ever had symptoms or diagnosis of an STI (21.5% versus 9.4%) than those who did not experience emotional violence in the past 12 months. The estimates about binge drinking in the past 30 days, current smoker, and use of drugs in the past 30 days by experience of emotional violence in the past 12 months were unreliable.

Males aged 13-17 who experienced emotional violence in the past 12 months were more likely to experience mental distress in the past 30 days (80.8% versus 70.4%) compared to those who did not experience emotional violence in the past 12 months. The estimates for binge drinking in the past 30 days, current smoking, or use of drugs in the past 30 days were unreliable.

9.3. Missing School Due to Sexual or Physical Violence

Table 9.3.1 includes estimates of missing school due to sexual or physical violence. Among 18-24-year-olds, 18.8% of females and 3.5% males missed school as a result of sexual violence in childhood. Among 13-17-year-olds, 25.9% of females and 58.0% of males missed school as a result of experiencing sexual violence. Among 18-24-year-olds, 33.6% of females and 20.9% of males missed school as a result of physical violence in childhood.

10. SEXUAL RISK-TAKING BEHAVIOURS AND HIV

This section examines the association between exposure to violence in childhood and sexual risk-taking behaviours such as having multiple sexual partners, infrequent condom use, and sexual exploitation in young adulthood.

Having multiple sexual partners is defined as two or more sexual partners in the past 12 months. Infrequent condom use is defined as never or sometimes using condoms if unmarried, or if married and had sex with more than one person and did not use condoms consistently.

The analyses were restricted to youth ages 19-24 to ensure the exposure to violence in childhood and risk-taking behaviours are separated in time. The inclusion of only those age 19 or older ensures that violence in childhood preceded involvement in current sexual risk-taking behaviours.

10.1. Sexual Risk-Taking Behaviours in the Past 12 Months among 19-24-Year-Olds

Findings related to sexual risk-taking behaviours, overall and by experience of different types of violence, are included in Tables 10.1.1 to 10.1.2. Overall, 67.3% of females and 62.4% of males ages 19-24 had ever had sex (Figure 10.1). Among 19-24-year-olds who ever had sex, 76.3% of females and 81.2% of males were sexually active in the past 12 months. Among 19-24-year-olds who had sex in the past year, significantly more males than females had two or more sex partners in the past year (males, 31.0%; females, 2.7%). About a third of females (35.1%) reported having engaged in transactional sex in the past 12 months.

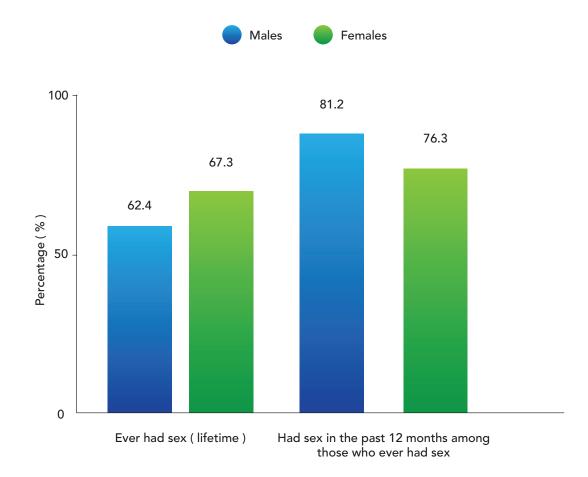


Figure 10.1. Sexual risk-taking behaviours among 19-24-year-olds – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.

Sexual violence and sexual risk-taking behaviour: Among 19-24-year-old females, 57.5% who experienced sexual violence in childhood and 35.2% of those who did not experience sexual violence in childhood had multiple sexual partners in the past 12 months (Figure 10.2). Among 19-24-year-old males, 11.7% who experienced sexual violence in childhood and 88.3% of those who did not experience sexual violence in childhood had multiple sexual violence in childhood and 88.3% of those months.

Physical violence and sexual risk-taking: Among 19-24-year-old females, 53.2% who experienced physical violence in childhood and 46.8% of those who did not experience physical violence in childhood had multiple sexual partners in the past 12 months. Among 19-24-year-old males, 55.2% who experienced physical violence in childhood and 40.4% of those who did not experience physical violence in childhood had multiple sexual partners in the past 12 months.

Emotional violence and sexual risk taking: These estimates were unreliable for both females and males.

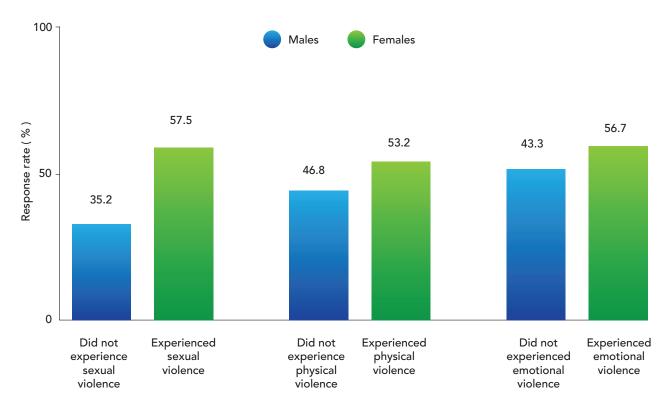


Figure 10.2. Multiple sexual partnerships in the past 12 months among 19-24-year-old females by experience of violence in childhood – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.

Multiple sexual partnerships in the past 12 months among 19-24-year-old females by experience of violence in childhood

10.2. HIV/AIDS Testing Behaviours

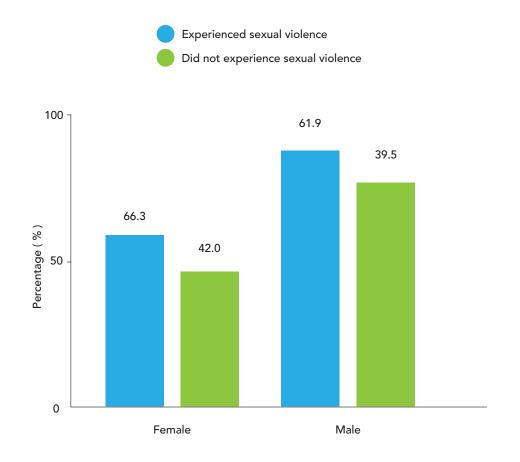
Findings related to HIV testing behaviours among females and males ages 13-24 are included in Tables 10.2.3 and 10.2.4. This section describes HIV testing behaviours among females and males overall and among those who experienced any sexual violence before age 18, compared to those who did not experience sexual violence in childhood. Although unwanted sexual touching and unwanted attempted sexual intercourse are considered low risk for direct HIV transmission, those findings are still presented, as all forms of sexual violence may increase the risk of HIV indirectly, for example through diminished ability to negotiate safer sex and engagement in sexual risk-taking behaviours later in life. Data are presented in a single age range of 13-24 years.

10.2.1. HIV Testing and History by Experience of Sexual Violence

Among 13-24-year-olds, 45.1% of females and 40.7% of males had ever tested for HIV. Two out of three females (66.3%) who experienced sexual violence in childhood ever tested for HIV compared to 42.0% of those who did not experience sexual violence in childhood. Among males, 61.9% of those who experienced sexual violence in childhood had ever tested for HIV compared to 39.5% of those who did not experience sexual violence in childhood (Figure 10.3).

Among females who experienced sexual violence in the past 12 months, 55.1% had ever tested for HIV compared to 44.5% of those who did not experience sexual violence in the past 12 months. Among males who experienced sexual violence in the past 12 months, 67.1% had ever tested for HIV compared to 38.3% of those who did not experience sexual violence in the past 12 months.

Figure 10.3. HIV testing behaviour among 13-24-year-olds by experience of sexual violence – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.



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10.2.2. Reasons for Not Testing for HIV among 13-24-Year-Olds Who Ever Had Sex

The reasons for not testing for HIV varied. Among females, 4.9% did not have knowledge about HIV testing, 1.2% did not know where to get the HIV test, 0.8% indicated that tests cost too much, 0.9% indicated that transport cost was too much, 0.5% indicated that the test site was too far away, 0.4% were afraid of the spouse/partner finding out about the results, 1.5% were afraid of others knowing the test results, 2.6% did not need the test, 3.7% did know if they had HIV, and 0.4% felt that they would not get treatment if they had HIV. Among males, 13.9% did not have knowledge about the HIV test, 2.9% did not know where to get the HIV test, 1.3% indicated that tests cost too much, 1.0% indicated that transport cost was too much, 4.0% indicated that the test site was too far away, 0.2% were afraid of the spouse/partner finding out about the results, 4.5% were afraid of others knowing the test results, 8.2% did not need the test, 2.2% did know if they have HIV, and 0.9% felt that they would not get treatment if they had HIV.

11. BELIEFS AND ATTITUDES ABOUT GENDER AND VIOLENCE AND VIOLENCE PERPETRATION

This section examines attitudes and beliefs related to violence. Questions assessed attitudes justifying the use of physical violence by husbands against their wives.

All participants were asked if it was right for a husband to hit or beat his wife under five different circumstances: if she goes out without telling him, if she does not take care of the children, if she argues with him, if she refuses to have sex with him, or if she is suspected of having an affair.

The survey also examined the endorsement of traditional norms about gender and sexual behaviour and intimate partner violence. These included: men, not women, should decide when to have sex; men need more sex than women; men need to have sex with other women even if they have a good relationship with their wife; women who carry condoms have sex with a lot of men; and a woman should tolerate violence to keep her family together.

11.1. Beliefs About Wife-Beating and Traditional Gender Norms

Findings related to attitudes about domestic violence and traditional gender norms are included in Table 11.1.1 and Figure 11.1. Among females, 58.6% of 13-17-year-olds and 56.8% of 18-24-year-olds indicated it was acceptable for a husband to beat his wife for one or more reasons (Figure 11.1). Among males, 46.8% of 13-17-year-olds and 47.1% of 18-24-year-olds indicated it was acceptable for a husband to beat his wife for one or more reasons. Among 13-17-year-olds, four out of five females (79.0%) and males (83.5%) endorsed one or more traditional belief about gender, sexual behaviour, and intimate partner violence. Among 18-24-yearolds, fewer females (82.0%) than males (90.6%) endorsed one or more traditional beliefs about gender, sexual behaviour, and intimate partner violence, which was statistically significant.

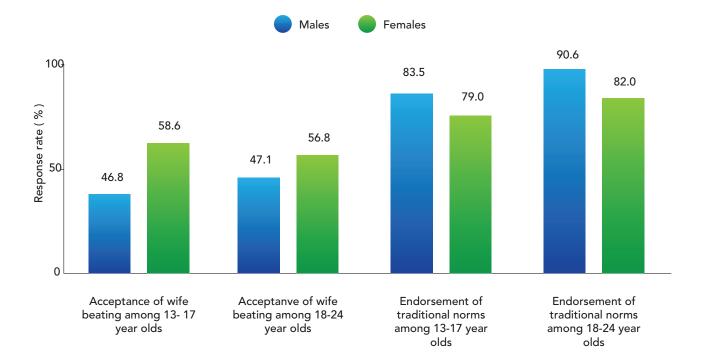


Figure 11.1. Endorsement of traditional norms about gender, sexual behaviour, and intimate partner violence among 13-17- and 18-24-year-olds – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.

11.2. Prevalence of Violence Perpetration

This section presents the prevalence of sexual and physical violence perpetration among 18-24- and 13-17-year-old females and males. Here, violence includes the physical violence measures of slapping, pushing, shoving, shaking, or intentionally throwing something at someone to hurt them; punching, kicking, whipping, or beating with an object; choking, suffocating, trying to drown, or burning intentionally; and using or threatening with a knife, gun, or other weapon. Similarly, sexual violence perpetration was asked about in terms of forcing a current or former intimate partner or someone else to have sex when they did not want to. This section also presents data on perpetration of violence by experiences

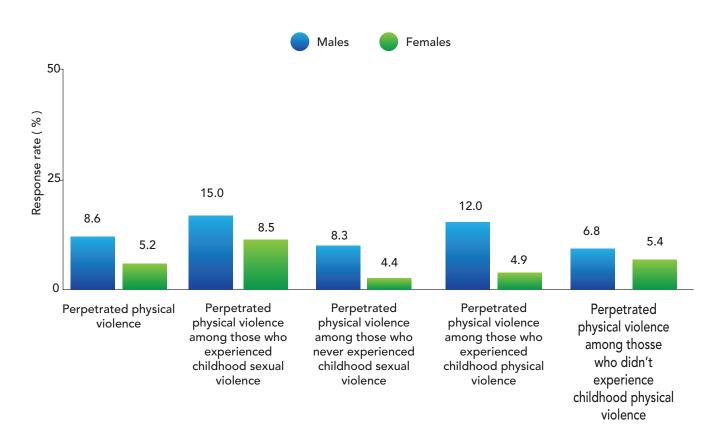
of sexual violence and physical violence victimisation in childhood. Participants were asked if they had ever perpetrated these measures of violence, so it is not possible to determine when the perpetration happened in relation to timing of experiences of violence in childhood. Tables 11.2.1 through 11.2.3 and Figure 11.2 include findings of violence perpetration.

Among 18-24-year-olds, a higher proportion of males (8.6%) than females (5.2%) ever perpetrated physical violence (Figure 11.2). About one out of ten (8.5%) females who experienced sexual violence in childhood and 4.4% who did not experience sexual violence in childhood perpetrated physical violence in their lifetime. Among males, 15.0% who

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experienced sexual violence in childhood and 8.3% of those who did not experience sexual violence in childhood perpetrated physical violence, which is a statistically significant difference. For females, 4.9% who experienced physical violence in childhood and 5.4% who did not experience physical violence in childhood perpetrated physical violence in their lifetime. Among males, about one out of ten (12.0) % who experienced physical violence in childhood and 6.8% of those who did not experience physical violence in childhood perpetrated physical violence in childhood and 6.8% of those who did not experience physical violence in childhood perpetrated physical violence in childhood and 6.8% of those who did not experience physical violence in childhood perpetrated physical violence, which is a statistically significant difference.

Figure 11.2. Physical violence perpetration among 18-24-year-olds – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.



Among 13-17-year-olds, one out of ten females (1.7%) and males (1.3%) perpetrated physical violence. Among females, 6.1% who experienced sexual violence in the past 12 months and 1.4% who did not experience sexual violence in the past 12 months perpetrated lifetime physical violence. Among males, 6.0% who experienced sexual violence in the past 12 months and 1.0% who did not experience sexual violence in the past 12 months perpetrated lifetime physical violence.

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11.3. Prevalence of Intimate Partner Violence Perpetration

Intimate partner violence, or violence perpetration against intimate partners, is described in this section. Intimate partner violence measured in the Uganda HVACS 2022 included both forcing an intimate partner to have sex and/or perpetrating physical violence against an intimate partner. As in previous sections, an intimate partner refers to a current or previous boyfriend, girlfriend, romantic partner, husband, or wife, while ever-partnered refers to someone who has ever had an intimate partner. Intimate partner violence perpetration findings are provided in Table 11.3.1

Among 18-24-year-olds who ever had a partner, males were twice as likely to perpetrate physical intimate partner violence compared to females (10.8% versus 4.7%). This difference was statistically significant. Among 18-24-year-old ever-partnered females, 7.2% of those who experienced sexual violence in childhood perpetrated physical intimate partner violence, while 3.8% of 18-24-year-old ever-partnered females who did not experience sexual violence in childhood perpetrated physical intimate partner violence. For males, 1.7% of those who experienced sexual violence in childhood perpetrated physical intimate partner violence, while 12.3% of 18-24-year-old ever-partnered females who did not experience sexual violence in childhood perpetrated physical intimate partner violence. Among 18-24-year-old ever-partnered males, 12.4% of those who experienced physical violence in childhood perpetrated physical intimate partner violence, while 9.6% of 18-24-year-old ever-partnered males violence in childhood perpetrated physical intimate partner violence, while 9.6% of 18-24-year-old ever-partnered females who did not experience physical violence in childhood perpetrated physical intimate partner violence, while 9.6% of 18-24-year-old ever-partnered females, 3.2% of those who experienced physical intimate partner violence in childhood perpetrated physical intimate partner violence, while 5.0% of 18-24-year-old ever-partnered males who did not experience physical intimate partner violence, while 5.0% of 18-24-year-old ever-partnered males who did not experience physical intimate partner violence in childhood perpetrated physical intimate partner violence, while 5.0% of 18-24-year-old ever-partnered males who did not experience physical intimate partner violence in childhood perpetrated physical intimate partner violence.

12. CHARACTERISTICS ASSOCIATED WITH VIOLENCE

This section presents experiences of violence in the past 12 months by characteristics of youth, including: orphan status, school attendance and completion, employment status, ever witnessing violence at home, marriage or cohabitation status, and disability status.

Although cross-sectional surveys do not allow for statements of causality, evaluating associations between characteristics of youth by violence in the past 12 months allows for a separation in the characteristics (youth) and the violence outcome (recent). As such, this section does not include associations between characteristics of youth and 18-24-year-old violence outcome prior to age 18.

12.1. Characteristics Associated with Violence in the Past 12 Months among 18-24-Year-Olds

Table 12.1 includes findings of characteristics of 18-24-year-olds by experience of violence in the past 12 months. Among 18-24-year-old females, those who witnessed violence in the home before age 18 were significantly more likely to experience physical or sexual violence in the past 12 months (34.3%) compared to those who did not witness violence at home (14.4%; Figure 12.1). Males who witnessed violence in the home before age 18 were significantly more likely to have experienced physical or sexual violence in the past 12 months than those who did not witness violence at home (47.6% versus 17.5%; Figure 12.2).

Among 18-24-year-old females, those with disability were more likely to experience sexual or physical violence in the past 12 months compared to those who did not experience disability (35.6% versus 15.8%; Figure 12.1). Similarly, males who experienced disability were more likely to have experienced sexual or physical violence in the past 12 months compared to those who did not experience disability (37.0% versus 28.3%; Figure 12.2).

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Figure 12.1. Childhood characteristics of 18-24-year-old females by experience of sexual or physical violence in the past 12 months – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.

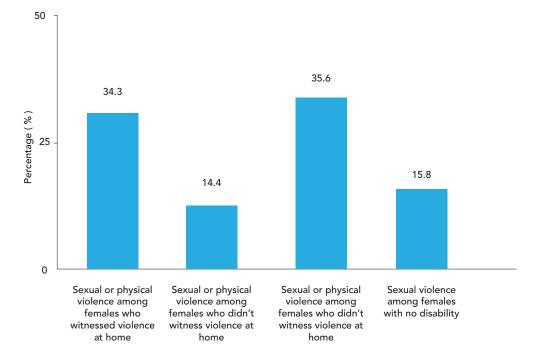
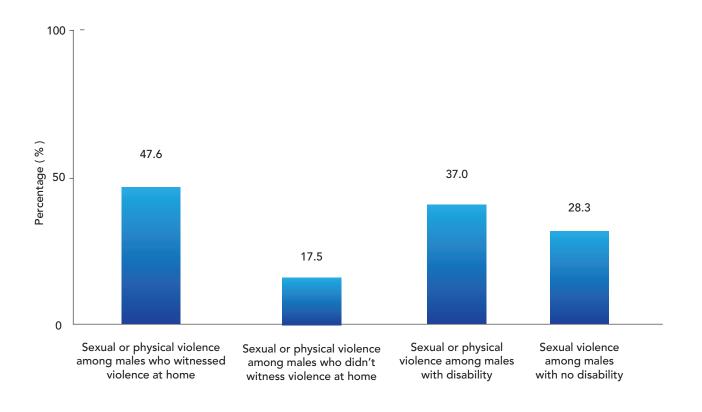


Figure 12.2. Childhood characteristics of 18-24-year-old males by experience of sexual or physical violence in the past 12 months – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.



12.2. Characteristics Associated with Violence in the Past 12 Months among 13-17-Year-Olds

Table 12.2 includes findings of characteristics of 13-17-year-olds by experience of violence in the past 12 months. Among females, those who witnessed violence at home were significantly more likely to have experienced sexual or physical violence in the past 12 months (53.9% versus 15.2%; Figure 12.3). Males who witnessed violence at home were significantly more likely than males who did not to have experienced sexual or physical violence in the past 12 months (60.2% versus 21.3%; Figure 12.4). There were no other statistically significant differences in experience of violence in the past 12 months by characteristic for 13-17-year-old females or males.

Among females, those who experienced disability were significantly more likely than those with no disability to have experienced sexual or physical violence in the past 12 months (34.7% versus 25.7%; Figure 12.3). Males who experienced disability were significantly more likely than males who did not to have experienced sexual or physical violence in the past 12 months (60.2% versus 21.3%; Figure 12.4).

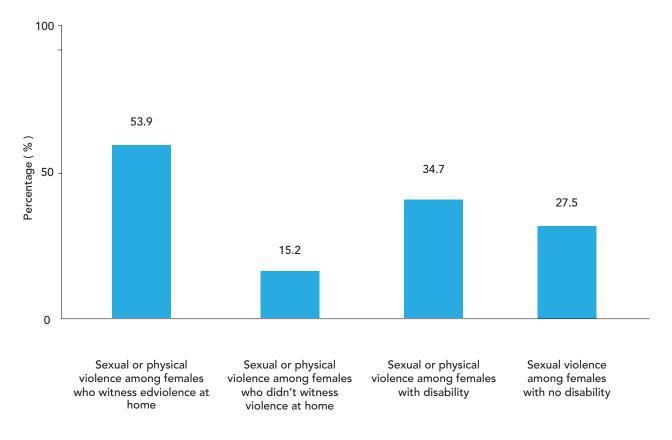


Figure 12.3. Characteristics of 13-17-year-old females by experience of sexual or physical violence in the past 12 months – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.

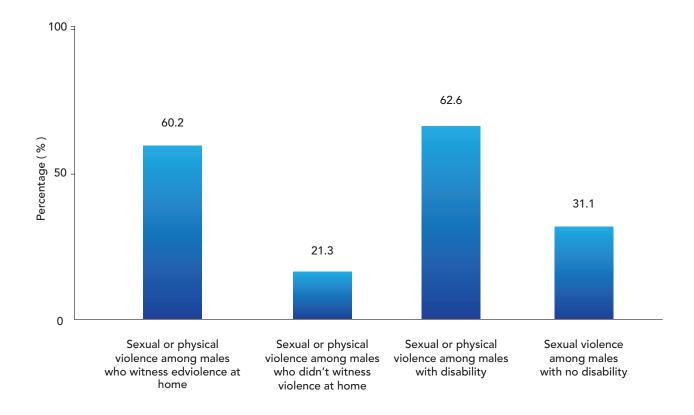


Figure 12.4. Characteristics of 13-17-year-old males by experience of sexual or physical violence in the past 12 months – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022.

13. INSPIRE INDICATORS

In 2016, the Global Partnership to End Violence Against Children released INSPIRE: Seven Strategies for Ending Violence Against Children, a technical package that includes evidence-based strategies with demonstrated success in preventing and responding to violence in childhood³¹. INSPIRE was codeveloped through a collaboration with key partner organisations, including CDC, PEPFAR, USAID, the WHO, UNICEF, the World Bank, and others. It reflects the best-available evidence on effective strategies to prevent violence against children, with a particular focus on programmes and approaches with proven success in lowresource settings. There are seven strategies that INSPIRE encompasses but this section presents indicators for five strategies: Norms and values; Safe environments; Parent and caregiver support; Income and economic strengthening, and Education and life skills. Data on the Response and support services indicators are previously provided in this report in Sections 4 and 5, and include: disclosure, knowledge of services, service-seeking, and receipt of services for sexual and physical violence. Data on the INSPIRE indicators capture key opportunities to inform evidencebased interventions and approaches. They are also aligned with the INSPIRE Indicator Guidance and Results Framework, designed to measure and monitor progress on the implementation and impact of INSPIRE³². Table 13.1 includes findings of INSPIRE indicators among 18-24-year-olds, and Table 13.2 includes findings of INSPIRE indicators among 13-17-year-olds. Findings are reported in this section by INSPIRE strategy and may include data from either or both tables in each section.

13.1. Norms and Values

Among 18-24-year-olds, 19.5% of females and 28.5% of males agreed it was necessary for parents to use corporal punishment to raise children (Figure 13.1). Nearly one out of four females (24.1%) and one out of three males (30.9%) agreed it was necessary for teachers to use corporal punishment. About one in two females (56.8%) and males (47.1%) accepted wife-beating in one or more circumstances. A high proportion of females (82.0%) and males (90.6%) endorsed traditional norms about gender, sexual behaviour, and violence.

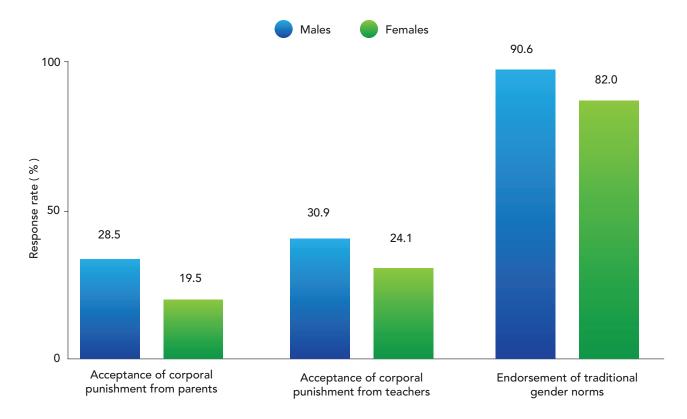


Figure 13.1. Norms and values related to violence among 18-24-year-olds – Uganda Humanitarian Violence Against Children and Youth Survey (HVACS), 2022.

13.2. Safe Environments

Data on the indicator for Safe Environments indicate that 11.2% of females and 14.8% of males ages 13-17 who are enrolled in school missed school or did not leave the home due to fear of violence in the past 12 months.

13.3. Parent and Caregiver Support

Among 13-17-year-olds, 66.8% of females and 52.6% of males said their parents used positive discipline strategies in the past 12 months. In contrast, nearly one out of three females (33.2%) and nearly half of males (47.4%) experienced physical discipline or verbal aggression by a parent in the past 12 months.

More than four out of five females (89.6%) and 87.2% of males said they were close or very close to their mothers, and 83.0% of females and 83.3% of males said it was easy to talk to their mothers about something that was really bothering them. More than three out of four females (77.7%) and 67.6% of males indicated that their parents had high parental monitoring and supervision.

13.4. Income and Economic Strengthening

The survey included questions about work, food insecurity, and who makes economic decisions in the household as indicators of Income and Economic Strengthening. Among 13-17-year-olds, 8.6% of females and 2.1% of males experienced food insecurity. The question about women's economic empowerment assessed to what extent married or cohabitating females indicated that they have a say in how money is spent in the household. Among 18-24-year-old married or cohabitating females who worked for money or other payment in the last 12 months, 42.0% indicated they have a say in how money is spent.

13.5. Education and Life Skills

Indicators of Education and Life Skills assess both engagement and participation in education and risk behaviours. Among 13-17-year-olds, 91.9% of females and 93.4% of males are currently enrolled in school. Binge drinking is rare among adolescents in refugee settings in Uganda; the estimates for both females and males engaged in binge drinking in the past 30 days were below 1%. Seven percent of females and 13.7% of males had been in a physical fight in the past 12 months. Among 18-24-year-olds, 5.5% of females and 7.0% of males had early sexual debut, defined as first sex at or before age 15. Fifteen percent of females and 2.1% of males were married or cohabitated before age 18.

14. DISCUSSION

The 2022 Uganda HVACS was a representative survey on the prevalence and epidemiology of sexual, physical, and emotional violence among female and male children and youth in refugee settlements in Uganda. This report describes the burden, contexts, and consequences for violence against children and youth. It also explores the overlap between sexual, physical, and emotional violence and the services sought and utilised for incidents of sexual violence and physical violence. The wealth of information provided by the survey can guide prevention and response efforts that are uniquely adapted to the humanitarian context in Uganda.

14.1. Priority Findings for National Response

The findings paint a complex and nuanced picture of the experiences of violence among children, its impact and drivers. Several notable findings point to unique aspects of the lives and environments that girls and boys in refugee settlements live in and how violence affects their lives.

Violence in home settings

The prevalence of physical violence against children in the home setting is high. Parents and caregivers who are the primary caregivers and protectors of children often perpetrate physical violence in childhood against both females (23.3%) and males (41.2%) ages 18-24.

In addition, 14.2% of females and 22.5% of males ages 13-17 experienced emotional violence by a parent, adult caregiver, or other adult relative in the past 12 months, having been told that either they were unloved or did not deserve to be loved, that the parent or caregiver wished they were dead or had never been born, or were ridiculed or put down.

The prevalence of violent discipline including corporal punishment and psychological aggression against children is also high. A third of females (33.2%) and almost half of males (47.4%) ages 13-17 experienced physical discipline or verbal aggression by parents or caregivers in the past 12 months.

Children's exposure to violence at home is high. Witnessing violence in the home in childhood is common both among females (33.0%) and males (43.9%) ages 18-24.

Despite these results, one of the encouraging findings involved close relationships that children have with their mothers, which is a key protective factor. Children ages 13-17 had a close relationship with their mothers (89.6% of females and 87.2% of males) and found their mothers easy to talk to (83.0% of females and 83.3% of males). Similarly, parental monitoring and supervision was high among both females (77.7%) and males (67.6%). In addition, about two out of three 13-17-year-old females (66.8%) and more than half of males (52.6%) had parents and caregivers who used positive discipline.

When children disclose incidents of violence. they mostly talk to family members or relatives. Sixteen percent of females ages 18-24 told someone about an experience of sexual violence in childhood. Most of them told a relative (47.5%) or a friend or neighbour (32.5%) about the incident. Similarly, 6.3% of females and 9.0% of males told someone about the experience of any physical violence in childhood. Females (52.9%) most commonly told a relative while estimates for males were unreliable. This is another finding that points to the importance of nurturing children's relationships with parents and family members as a protective factor that can build resilience among youth.

Children's experience of violence in early childhood

Children's exposure to violence starts early in the refugee settlements in Uganda. The HVACS indicates that children's exposure to physical and emotional violence begins young.

For physical violence, 3.1% of females ages 18-24 who experienced physical violence in childhood had their first experience when they were 5 or younger, 13.7% experienced the first incident between ages 6 and 11, and 83.2% experienced their first incident between ages 12 and 17

For emotional violence, 21.2% of females ages 18-24 who experienced emotional violence in childhood had the first experience before age 12, and 78.8% had their first experience when they were 12-17 years old.

Intergenerational cycles of violence

One of the findings of the HVACS is the indication of a cycle of violence affecting children in refugee settlements in Uganda. By being survivors or witnesses of violence, children and youth are at a higher risk of further victimisation or perpetration. Children who experienced violence are at a higher risk of perpetrating violence themselves. Equally, youth who witnessed violence in childhood are at a higher risk of becoming perpetrators in young adulthood, carrying forward the impact of violence they experienced in childhood to their own relationships. Witnessing violence at home in childhood is also significantly associated with victimisation in childhood as well as in young adulthood.

Perpetration: A higher proportion of males ages 18-24 who experienced physical violence in childhood perpetrated physical violence (12.0%) compared to males who did not experience physical violence in childhood (6.8%).

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Victimisation: The HVACS identified a high level of association between witnessing violence at home and experiencing sexual and physical violence victimisation in childhood: 53.9% of females ages 13-17 who witnessed violence at home had experienced sexual or physical violence compared to 15.2% of females who did not witness violence at home. Similarly, 60.2% of males ages 13-17 who witnessed violence at home experienced sexual or physical violence compared to 21.3% of males who did not witness violence at home.

Similar patterns are observed for youth ages 18-24: 34.3% of females and 47.6% of males who witnessed violence at home in childhood were survivors of either physical or sexual violence in the past one year, compared to 14.4% of females and 17.5% of males who did not witness violence at home in childhood.

Violence in school settings

Children spend most of their waking hours in pre-school and school. When children are exposed to violence at school, they are not only denied their right to protection but also to education.

Children in refugee settlements in Uganda are exposed to violence in school settings. For nearly one in five females (22.2%) ages 18-24 who experienced sexual violence in childhood, the perpetrator of the first incident was a classmate or schoolmate.

In addition, there is a high level of acceptance of corporal punishment by teachers. About

one out of four females (24.1%) and one out of three males (30.9%) ages 18-24 agreed that corporal punishment by teachers is necessary.

Positive findings in school settings are that more than half of children ages 13-17 have been taught some life skills in school. For example, 65.0% of females and 60.4% of males have been taught anger management in school. In addition, 80.7% of females and 88.7% of males have been taught how to avoid physical fights and violence in school. Over half of 13-17-yearolds (60.4% of females and 71.3% of males) have been taught how to avoid bullying in school.

Violence by peers

Children are also exposed to violence from their peers, which include people of the same age not including a boyfriend/girlfriend, spouse, or romantic partner.

For females 13-17 years who experienced sexual violence in the past 12 months, the perpetrators of the most recent incidents were often classmates (41.5%) or friends (4.6%).

Among 13-17-year-olds, 13.9% of females and 15.7% of males experienced physical violence by a peer in the past 12 months. Among those who experienced peer physical violence in the past 12 months, 37.6% of females and 59.0% of males suffered from an injury, indicating the serious nature of the violence.

Violence by boyfriends, girlfriends, and romantic partners

Violence perpetrated by romantic partners is equally noteworthy. Among 18-24-year-olds who experienced sexual violence in childhood, 30.5% of females and 28.7% of males first experienced sexual violence by their current or previous spouses, boyfriends and girlfriends, or romantic partners.

Attitudes, values, and social norms

High level of acceptance and normalisation of violence against children and women by adolescents and young people was also revealed. Among 18-24-year-olds, 19.5% of females and 28.5% of males agreed that corporal punishment by parents is necessary; about half (56.8% of females and 47.1% of males) justified wife beating by a husband. Furthermore, the majority (82.0% of females and 90.6% of males) endorsed traditional norms and beliefs about gender, sexuality, and violence.

Differences between boys and girls in disclosure and service-seeking for violence

Females are less likely to disclose and seek services, especially when they suffer from sexual violence. While more than half of females (54.8%) and nearly three out of four males (73.0%) ages 18-24 who experienced sexual violence in childhood knew of a place to seek help for sexual violence, a higher percentage of males (17.2%) compared to females (5.1%) sought help. As for physical violence, 51.7% of 18-24-year-old females and 70.2% of males who experienced physical violence knew of a place to seek help for physical violence, while 6.3% of females and 9.0% of males sought help for an incident of physical violence.

Linkages between disability and violence

The Uganda HVACS results confirmed an association between disability and experiences of violence; 35.6% of females and 37.0% of males ages 18-24 who had any form of disability experienced sexual or physical violence in the past 12 months, compared to 15.8% of females and 28.3% of males who did not have any form of disability.

Poly-victimisation: children experience overlapping forms of violence in multiple settings including home, school, and communities.

Out of 18-24-year-old females who experienced any form of VAC/violence in childhood (42.6%), 8.3% of females experienced both sexual and physical violence in childhood, and 9.2% experienced both physical and emotional violence in childhood. Only 3.3% of 18-24-yearold females experienced all three types, sexual, physical, and emotional violence, in childhood. Children also experienced violence in multiple settings including home, school, and community.

14.2. Strengths and Limitations

The 2022 Uganda HVACS is the first representative household study on the burden of sexual, physical, and emotional

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violence against children and youth in refugee settlements in the country. There are important strengths and limitations to consider when interpreting the data. The sampling strategy ensured the data are representative of households in refugee settlements, and random sampling using a stratified three-stage cluster design allowed for calculation of weighted estimates. Another benefit of the survey is the level of detail obtained on the context of violence. The rich, contextualised data in the Uganda HVACS can inform programmatic and policy strategies to address violence against children and youth in humanitarian settings. Another strength of the HVACS is that it relies on a core questionnaire that has been adapted from VACS conducted in several countries and informed by global guidance on conducting such surveys in humanitarian settings. Most importantly, the process of planning the HVACS - thorough engagement with the stakeholders, including the Department of Refugees in the Office of the Prime Minister, and UNHCR and its implementing partners can bolster ownership of the data and results, encouraging efforts to use the data to prevent and respond to violence against children and youth in humanitarian settings.

There are also limitations that must be considered. Because the HVACS involved a household survey, other vulnerable populations (such as children residing in institutions, residential care, or justice systems, as well as those living on the street), have been excluded or missed. Similarly, children and youth who are away from home to attend school or for other reasons for an extended period of time would not have been available to participate in the survey. Children were also excluded from the study if they had a disability that prevented them from understanding or responding to the interview questions or from being interviewed in private. Children residing outside of the home in vulnerable settings, or living with disabilities, could be at higher risk for violence. Future studies should address the burden of violence among these special populations.

An additional limitation is that the survey only collected contextual information on the first and most recent episodes of each type of violence, when individuals reported multiple instances of a form of violence. This potentially results in missing important contextual detail on certain violent events affecting participants. The HVACS is also vulnerable to recall bias. The study does not include participants over the age of 24 years old to maximise participants' ability to recall events from childhood. However, there is still a chance that participants do not accurately recall the details of their experiences, particularly those very early in childhood.

Another possible limitation is that some participants may not have been comfortable disclosing personal and sensitive life experiences with strangers, thus providing an underestimate of the prevalence of violence. The survey was only conducted if interviewers could ensure privacy and reduce the risk of retaliation for participation in the survey.

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Interviewers underwent extensive training on how to maximise rapport with participants. Finally, the survey moved through sensitive questions in a graduated manner to help comfort participants and facilitate trust-building with their interviewer. These strategies were in place to facilitate disclosure.

Important to mention also are the limitations around the comparability between the magnitude of violence against children in Uganda's refugee settings and that of the national context. Direct comparisons in this regard cannot be made for various reasons: While data on VAC prevalence in Uganda are available from the 2015 National VACS, this survey and the 2022 Uganda HVACS rely on different sampling frames. In particular, the sampling frame for the national survey was based on the 2014 Uganda population and housing census (comprising Ugandans, primarily), while the sampling frame for the HVACS was based on the 2022 refugee population (composed primarily of South Sudanese in addition to others displaced from their countries of origin). Furthermore, the two surveys were conducted almost seven years apart, and any differences in the magnitude of violence could be due to temporal variations in the prevalence of violence in response to the intensity of interventions to address VAC, or the lack thereof. Additionally, the humanitarian crisis due to displacement places refugees at a greater risk of violence and, therefore, requires emergency responses that might mitigate some of the risks of violence compared to national settings.

Nonetheless, some Uganda HVACS findings do indicate that the prevalence of VAC in refugee settings is high, particularly in comparison to the prevalence of this phenomenon before the children under study relocated to refugee contexts. For instance, and as mentioned previously in this report, the majority of females and a considerable proportion of males in the 18-24-year-old age range experienced their first incident of sexual, physical, or emotional violence after arriving in a refugee settlement.

14.3. Implications for Prevention and Response

The key findings from the 2022 Uganda HVACS have important implications for the government and stakeholders working in humanitarian settings to accelerate efforts to prevent and effectively respond to violence against children and youth. These are outlined below.

Parenting education to promote positive parenting and to prevent all forms of violence at home can benefit from meaningful male engagement. The survey results indicate that home is not safe for many children in refugee settlements, where they directly experience physical and emotional violence and are violently disciplined. At the same time, children are witnessing domestic violence at alarming rates. Children are forming norms that accept violent discipline against them as well as wife beating by a husband and traditional gender norms. There is an urgent need to sensitise parents and other caregivers to positive parenting and to prevention and response resources on violence against children and other forms of violence within a family, including violence against women. Addressing all forms of violence in family environments is critical for meaningful impact on the safety and security of children. In addition, parenting programmes that ensure meaningful male engagement can promote fathers' involvement in positive parenting and violence prevention at home.

of violence children Patterns against indicate and violence against women intergenerational effects, fuelling cycles of violence. From the policy level to service provision on the ground, efforts to prevent and respond to violence against children and those to address violence against women and gender-based violence could be coordinated to take into consideration their co-occurrence, shared risk factors, and common consequences. For example, research has shown children in families where the mother is abused are more likely to experience violent discipline themselves. In addition, partner violence and violence against children can take place in the same households, given shared risk factors such as harmful use of alcohol and drugs and male dominance in the household. Frontline workers responsible for supporting domestic violence and gender-based violence survivors can work closely with those responsible for child protection to provide children who witness domestic violence with psychosocial and other necessary support. Children exposed to domestic violence are at a higher risk of directly experiencing violence against themselves and becoming perpetrators. Both female survivors of gender-based violence and their children should be supported to denormalise acceptance of violence.

Children require age-appropriate life skills to protect themselves from experiencing and perpetrating violence from an early age. Children need to be empowered with life skills to protect themselves from both experiencing and perpetrating all forms of violence. Children need to be equipped with knowledge to protect themselves from violence perpetrated by parents, relatives, teachers, and other adults in different settings. At the same time, given a high level of perpetration of violence by intimate partners, children and adolescents need to have knowledge and skills to prevent and respond to intimate partner violence, dating violence, peer violence, and bullying including online violence. Life-skills programmes designed in an age-appropriate manner and those that start early have the greatest potential for success, given that many sexual violence survivors suffered the first experience at the age of 15 or younger. In addition, programmes that are contextualised can address the high levels of acceptance of the existing harmful attitudes and social norms around violence against children (corporal punishment), violence against women (wifebeating by husband), and gender inequality. To the extent possible, the content of life skills for children and adolescents should be aligned to the content of parenting education so that both children and adults learn consistent messages.

Psychosocial support and mental health services for survivors of violence are critical. Mental distress and suicidal ideation are alarmingly high among survivors of all forms of violence. While emotional violence is often not visible, the HVACS revealed the severe impact of emotional violence on the mental health condition of child survivors. Children and adolescents who suffer from emotional violence can benefit from psychosocial support and mental health interventions. At the same time, efforts to educate social workers and child protection workers who directly support child survivors of violence about the impact of violence on mental health can improve the services they provide. Such efforts can relate how to be caring and sensitive to survivors throughout the process of case management and to ensure that they have access to appropriate psychosocial support and mental health treatment.

Both demand- and supply-side impediments to service-seeking and receipt of services need to be addressed. Service-seeking behaviour for violence is low among children despite knowledge of where to seek help. This was, for example, true of sexual violence in childhood, where only 5.1% of females and 17.2% of males sought help for such violence, although 54.8% of females and 73.0% of males knew of a place to seek help. Children and adolescents need to be given information on where to contact and seek support in cases of violence, and serviceseeking for violence should be encouraged and normalised. Efforts to reach parents are also important, given findings that child survivors who tell anyone about incidents of violence most often confide in their family, friends, and peers. At the same time, service providers in relevant sectors (such as education, health, judicial, law enforcement, and social protection) can benefit from strategies to strengthen knowledge and skills for early identification, reporting, and referral.

Attitudes, values, and social norms that condone violence against children and women need to be addressed at different levels children, parents/caregivers, and community. Acceptance of corporal punishment, wife beating, and traditional gender norms was high among children and young adults. Normalisation and acceptance of violence also affect nonreporting and service-seeking as well as future violence perpetration and victimisation. Age-appropriate programmes for young children can target norms that are formed at an early age. Children in early adolescence can also be targeted through social media platforms and in youth-friendly settings, such as at school. At the same time, parents and caregivers could be sensitised to the existence and negative impact of some social norms. Community-wide interventions to address acceptance of violence, harmful attitudes, and social norms are needed at the community or societal level. Community dialogues that encourage self-reflection and critical analysis among community members by trained facilitators can be impactful, especially when combined with other appropriate mass

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media interventions. Efforts should be made that address both violence against children and violence against women in the context of harmful gender norms.

Violence prevention programmes would benefit from understanding and preventing children's experience of violence in early childhood. Early childhood is a time of tremendous physical, cognitive, and socio-emotional development. Violence hampers healthy child development. Advances in neuroscience have revealed severe impacts of toxic stress, especially on early brain development. The first year of life is a vulnerable period for not only infectious diseases but also due to violence, abuse, and neglect. Furthermore, normalisation of violence starts in early years. Prevention, early identification, response, and referral of violence against young children can be mainstreamed in an existing platform, especially health services, which has access to parents and caregivers of young children. Equipping the child protection workforce with knowledge of the special vulnerability of young children to violence as well as prevention and response strategies working with multi-sector stakeholders can promote well-being and health.

A gender-sensitive approach is needed to address specific vulnerability of both boys and girls. Boys are less likely to disclose and seek services when they suffer from sexual violence. Traditional social norms that endorse masculinity, which tend to expect boys to be strong and not show emotion, use violence as an acceptable strategy in peer, partner, and parenting interactions, and need to be addressed. Life-skills training for boys can address boys' rights to protection and the importance of discussing and seeking support when they encounter challenges including violence. Distinct vulnerability of girls can also continue to be prioritised.

Special attention should be given to children with disability. The survey findings confirmed an association between disability and exposure to violence in childhood. This implies the value of special attention to children who have disability. These efforts should consider the unique needs of children affected by humanitarian situations, such as internally displaced persons and refugees as well as children in streets, institutions, and labour situations.

Violence prevention efforts need to include primary, secondary, tertiary prevention. A comprehensive prevention response must approach the problem from multiple levels in order to mitigate the severe consequences of violence. As shown in the HVACS results, violence affects children's mental health, school attendance, acceptance and normalisation of violence, and perpetration and victimisation at later stages. In addition to primary prevention, secondary and tertiary prevention can address the consequences of violence that last into adolescence and adulthood by mitigating its effects. Secondary prevention refers to early identification and management of violence against children so as to break the

progress of the problem. Tertiary prevention refers to efforts to respond to, protect, and rehabilitate child survivors. Tertiary prevention is often referred to as response; it is critical to remember its importance as part of prevention of the reoccurrence of violence not only against the same survivor but also their normalisation of violence and further victimisation or future perpetration At the same time, care should be taken so as not to stigmatise child survivors or witnesses of violence as not all of them become victims of other forms of violence and perpetrators in the future.

While the 2022 Uganda HVACS data did not capture situations of children in refugee settlements not residing in households, it is important to remember the specific vulnerabilities that these children face and prioritise vulnerable populations for research, prevention, and response efforts.

Children in residential care institutions including Charitable Children's Institutions and statutory institutions such as remand homes and correction centres are known to be at high risk of violence. Development and implementation of child protection policies in residential care institutions as well as training of caregivers is necessary in addition to monitoring of the minimum standard of care. It is equally important to ensure children are protected from violence in all family-based alternative care as well as the home that they will be reintegrated into. Biological parents, relatives, and caregivers of children with protection concerns can be included in parenting programmes to teach positive parenting skills and prevention of violence in family settings.

14.4. Prevention and Response Priorities

Key stakeholders came together in a data-toaction workshop at the end of the survey to review and interpret the 2022 Uganda HVACS results and to identify sector-specific priorities for preventing or responding to violence against children with a focus on humanitarian settings as well as strategies for implementing interventions. The stakeholders included the Department of Refugees under the Office of the Prime Minister, Uganda Ministries of Gender, Health, and Education, and UNHCR Uganda implementing partners. In addition to the INSPIRE Framework, the priorities and strategies for implementation were informed by the Minimum Standards for Child Protection, which aim to strengthen child protection in humanitarian settings³³. The recommendations from the data-to-action workshop³⁴ were developed to inform programme directions and resource mobilisation for effective prevention and response to violence against children in refugee settings in the country.

15. APPENDIX A: UGANDA 2022 HVACS DATA TABLES

SECTION 3: Background Characteristics

Background Characteristics of 18-24-Year-Olds

Table 3.1.1. Background characteristics of 18-24-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females	Males
	Weighted % (95% CI)	Weighted % (95% CI)
Education status	Females (n=622)	Males (n= 395)
Never attended school	9.9 (5.7-16.7)	3.6 (2.0-6.5)
Less than or attending primary school	29.7 (24.3-35.6)	27.4 (20.9-35.0)
Completed primary school	39.6 (30.0-50.0)	26.7 (20.2-43.4)
Completed or attending secondary school	18.9 (14.6-24.0)	38.6 (29.0-49.2)
Higher than secondary school	0.9 (0.3-2.8)	1.7 (0.5-5.5)
Orphan status before age 18	Females (n= 622)	Males (n= 395)
Not an orphan before age 18	55.2 (49.5-60.8)	59.7 (53.0-66.0)
Lost one parent before age 18	23.0 (18.0-28.9)	24.1 (16.4-33.9)
Lost both parents before age 18	5.8 (3.7-8.9)	5.8 (3.0-11.0)
Socioeconomic conditions	Females (n= 618)	Males (n= 391)
Worked for money or other payment in the past 12 months	42.8 (37.2-48.6)	62.3 (49.2-73.95)
	Females (n= 617)	Males (n= 392)
Experienced food insecurity in the past month	2.8 (1.2-6.3)	1.8 (0.6-5.0)
Relationship status	Females (n= 606)	Males (n= 384)
Ever been married or lived with someone as if married	41.1 (32.4-50.4)	16.9 (10.1-27.0)

	Females (n= 606)	Males (n= 384)
Married or lived with someone as if married before age 18	15.0 (10.9-20.2)	2.1 (0.9-4.9)
Current marital status	Females (n= 622)	Males (n= 395)
Never married	56.3 (47.3-65.0)	80.7 (71.8-87.2)
Married or cohabiting	23.6 (18.6-29.5)	13.5 (7.2-23.7)
Divorced/ separated	15.4 (9.7-23.6)	1.8 (0.5-6.3)
Widowed	0.5 (0.2-1.4)	(-)
Sexual history	Females (n= 619)	Males (n= 392)
Ever had sex [1]	60.6 (50.4-70.0)	58.9 (42.7-73.3)
	Females (n= 622)	Males (n= 395)
Had first sex before age 16	10.7 (5.9-18.5)	10.4 (5.2-19.8)
	Females (n= 403)	Males (n= 234)
Median age at first sex (among those who ever had sex)	17 (17-18)	17 (17-18)
Country of origin (household head)	Females (n= 621)	Males (n= 395)
South Sudan	64.4 (38.5-83.9)	69.4 (42.6-87.4)
Democratic Republic of Congo	29.1 (14.4-50.0)	21.3 (10.5-38.4)
Rwanda	1.9 (0.5-6.7)	4.6 (1.3-15.0)
Burundi	4.2 (0.9-18.0)	4.7 (1.3-15.4)
Other	0.5 (0.1-2.2)	(-)
	Females (n= 619)	Males (n= 395)
Median duration of stay in settlement (household head)	6 (6-6)	6 (6-6)

Source ~ Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = Confidence interval. (-) = No estimates. [1] Sex includes vaginal, oral, or anal intercourse.

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Table 3.1.2. Location of work among 18-24-year-olds who have worked in the past year – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females		Males	
	n§	Weighted % (95% CI)	n§	Weighted % (95% CI)
Earned money inside settlement	237	85.6 (78.2-90.8)	212	81.9 (69.2-90.1)
Earned money outside settlement	36	14.4 (9.2-21.8)	35	18.1 (9.9-30.8)

Source ~ Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = Confidence interval.

n§ represents numerator.

Table 3.1.3. Disability status of 18-24-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females	Males
	Weighted % (95% Cl)	Weighted % (95% CI)
Disability status	Females (n= 622)	Males (n= 395)
Blind or has serious difficulty seeing even when wearing glasses	10.6 (7.1-15.6)	12.0 (6.3-21.7)
Serious difficulty concentrating, remembering, or making decisions	7.7 (4.4-13.3)	13.5 (5.9-27.9)
Serious difficulty walking or climbing stairs	8.2 (5.1-12.8)	5.3 (3.5-8.0)
Difficulty dressing or bathing	7.4 (3.6-14.5)	3.1 (1.0-8.9)
Difficulty doing errands alone	10.1 (5.5-18.0)	8.4 (6.1-11.5)
Difficulty communicating (understanding or being understood)	6.7 (3.7-12.0)	7.0 (2.8-16.4)
Any of the above forms of disability	23.8 (18.9-29.5)	34.6 (23.1-48.2)

Source ~ Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = Confidence interval. Background Characteristics Of 13-17-Year-Olds

Table 3.2.1. Background characteristics of 13-17-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females	Males
	Weighted % (95% CI)	Weighted % (95% Cl)
Education status	Females (n= 716)	Males (n= 532)
Never attended school	3.4 (1.7-6.4)	2.0 (1.0-4.2)
Completed primary education or less	94.4 (91.3-96.5)	87.9 (76.7-94.2)
Some secondary education or more	2.0 (0.9-4.3)	6.4 (3.2-12.4)
Current school enrolment status	Females (n= 690)	Males (n= 511)
Currently enrolled in school	91.9 (87.5-94.8)	93.4 (88.7-96.3)
Location of school attending	Females (n= 615)	Males (n= 463)
In settlement	93.0 (87.5-96.1)	96.5 (90.0-98.8)
Outside settlement	7.0 (3.9-12.5)	3.5 (1.2-10.0)
Disruption of schooling	Females (n= 98)	Males (n= 60)
Stopped attending school due to humanitarian crisis	19.6 (6.8-44.7)	28.8 (14.4-49.2)
Duration of disruption of schooling	Females (n= 15)	Males (n= 16)
Less than 6 months	3.9 (0.3-34.2)	65.0 (35.3-86.3)
6-12 months	4.6 (0.4-38.0)	(-)
More than 1 year	91.4 (57.4-98.8)	35.0 (13.7-64.7)
Orphan status	Females (n= 716)	Males (n= 532)
Not an orphan	63.1 (56.9-68.9)	62.1 (51.7-71.6)
Lost one parent	24.8 (18.8-32.0)	23.2 (17.1-30.8)
Lost both parents	6.6 (3.6-11.9)	8.2 (5.0-13.3)
Socioeconomic conditions	Females (n= 713)	Males (n= 523)
Worked for money or other payment in the past 12 months	19.7 (12.3-30.0)	33.6 (23.6-45.3)
	Females (n= 712)	Males (n= 523)
Experienced food insecurity in the past month	8.6 (5.5-13.2)	2.1 (0.8-5.1)

Relationship and sexual history		
	Females (n= 703)	Males (n= 520)
Ever been married or lived with someone as if married	1.8 (0.9-3.8)	0.4 (0.1-2.9)
	Females (n= 713)	Males (n= 523)
Ever had sex [1]	6.4 (4.2-9.6)	12.8 (6.6-23.6)
	Females (n= 57)	Males (n= 65)
Median age at first sex (among those who ever had sex)	15 (14-16)	14 (13-14)
Country of origin (Household Head)	Females (n= 716)	Males (n= 531)
South Sudan	67.7 (42.7-85.5)	64.3 (42.4-81.5)
Democratic Republic of Congo	27.5 (13.2-48.6)	29.0 (16.5-45.9)
Rwanda	2.7 (0.8-8.8)	4.0 (1.1-13.6)
Burundi	1.7 (0.3-10.4)	1.9 (0.4-9.2)
Other	0.5 (0.1-2.6)	0.9 (0.2-4.4)
	Females (n= 712)	Males (n= 532)
Median duration of stay in settlement (Household Head)	6 (6-6)	6 (5-6)

Source ~ Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.* (-) *No estimates.*

[1] Sex includes vaginal, oral, or anal intercourse.

Table 3.2.2. Location of work among 13-17-year-olds who have worked in the past year – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females		Males	
	n§	Weighted % (95% CI)	n§	Weighted % (95% CI)
Earned money inside settlement	138	92.3 (84.5-96.3)	118	79.0 (77.1-89.2)
Earned money outside settlement	12	7.7 (3.7-15.5)	25	21.0 (13.1-31.7)

Note: CI = *Confidence interval.*

n§ represents numerator.

Table 3.2.3. Disability status of 13-17-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females	Males
	Weighted % (95% CI)	Weighted % (95% Cl)
Disability status	Females (n= 716)	Males (n= 532)
Blind or has serious difficulty seeing even when wearing glasses	14.0 (9.5-20.3)	5.8 (3.6-9.1)
Serious difficulty concentrating, remembering, or making decisions	6.9 (4.1-11.2)	11.5 (5.9-21.2)
Serious difficulty walking or climbing stairs	4.3 (2.7-6.8)	6.6 (3.2-12.9)
Difficulty dressing or bathing	0.8 (0.2-2.8)	1.8 (0.8-3.7)
Difficulty doing errands alone	3.2 (1.8-5.7)	9.4 (5.5-15.6)
Difficulty communicating (understanding or being understood)	2.3 (1.0-5.4)	10.5 (5.3-19.9)
Any of the above forms of disability	21.5 (16.9-26.8)	27.2 (18.9-37.4)

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = Confidence interval.

SECTION 4: SEXUAL VIOLENCE

Sexual violence in childhood among 18-24-year-olds

Table 4.1.1. Prevalence of different types of sexual violence [1] before age 18, among18-24-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females	Males
	Weighted % (95% CI)	Weighted % (95% CI)
	Females (n= 622)	Males (n= 395)
Any type of sexual violence in childhood	19.4 (9.5-35.7)	9.5 (5.9-15.2)
	Females (n= 622)	Males (n= 395)
Unwanted sexual touching in childhood	13.0 (4.8-30.8)	7.8 (4.9-12.4)
	Females (n= 622)	Males (n= 395)
Unwanted attempted sex in childhood	10.5 (5.1-20.7)	5.0 (2.6-9.4)
	Females (n=622)	Males (n=395)
Pressured sex [2] in childhood	10.8 (6.4-17.6)	1.4 (0.5-3.7)
	Females (n=622)	Males (n=395)
Physically forced sex in childhood	8.1 (5.6-11.5)	2.3 (1.0-5.2)
	Females (n= 622)	Males (n=395)
Pressured or physically forced sex in childhood	12.0 (7.2-19.5)	2.8 (1.4-5.8)
	Females (n= 622)	Males (n=395)
Pressured or physically forced sex at first sexual experience [3]	5.6 (3.8-8.2)	0.2 (0.0-0.6)

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.*

[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured sex (through harassment or threats).
[2] Pressured sex includes harassment or threats.

[2] Pressured sex includes parassment or threats.

[3] Among 18-24-year-olds who had sex before age 18.

Table 4.1.2. Characteristics of survivors at the first experience of sexual violence [1], among 18-24-year-olds who experienced any sexual violence before age 18 – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 112)	Males (n= 45)
	Weighted % (95% CI)	Weighted % (95% CI)
Age at first experience of sexu	al violence in childhood	
13 or younger	37.7 (20.8-58.2)	8.3 (2.8-22.5)
14-15	34.8 (21.5-51.1)	22.9 (13.2-36.5)
16-17	27.5 (19.9-36.6)	68.8 (53.3-81.0)
Age at first experience of pres pressured or physically forced	sured or physically forced sex in childhoo sex in childhood)	d (among those who experienced
	Females (n= 54)	Males (n= 8)
13 or younger	54.5 (34.1-73.5)	82.9 (34.1-97.9)
14-15	26.1 (9.0-55.8)	(-)
16-17	19.4 (8.0-40.1)	17.1 (2.1-65.9)
	Females (n=112)	Males (n= 45)
Experienced multiple incidents of sexual violence in childhood	62.7 (53.9-70.7)	55.5 (41.0-69.0)

Source ~ Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = Confidence interval. (-) = No estimates.

[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (through harassment or threats) sex.

*Unreliable estimate (RSE is greater than 30% but less than or equal to 50%), result should be interpreted with caution. **Unreliable estimate (RSE is greater than50%), estimate is suppressed.

Table 4.1.3. Characteristics of perpetrators of the first experience of sexual violence [1], among 18-24-year-olds who experienced any sexual violence before age 18 – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 112)	Males (n=45)		
	Weighted % (95% CI)	Weighted % (95% CI)		
Perpetrators of first incident of any sexual violence in childhood				
Current or previous spouse /boyfriend/ girlfriend or romantic partner	30.5 (11.5-59.6)	28.7 (15.2-47.6)		
Classmate/schoolmate	22.2 (10.6-40.7)	17.0 (8.4-31.3)		
Stranger	14.2 (8.8-22.1)	**		
Authority figure [2]	5.8 (2.8-11.5)	**		
Other [3]	21.8 (10.1-40.9)	53.1 (32.3-72.8)		
Perpetrators of first incident of pressured o	r physically forced sexual violence in	childhood		
	Females (n= 53)	Males (n= 5)		
Current or previous spouse/boyfriend/ girlfriend or romantic partner	66.2 (47.6-80.8)	90.6 (37.4-99.4)		
Classmate/schoolmate/friend/neighbour	0.9 (0.1-9.5)	9.4 (0.6-62.6)		

 Stranger
 17.7 (9.5-30.6)
 **

 Other [4]
 8.0 (1.6-32.0)
 **

Perpetrators of first incident of sexual violence in childhood who were 5 or more years older than the survivor

	Females (n= 112)	Males (n= 45)
Perpetrator 5 or more years older at first incident of any sexual violence in childhood	54.2 (32.7-74.3)	12.8 (3.5-37.4)
	Females (n= 112)	Males (n= 45)
Perpetrator 5 or more years older at first incident of pressured or physically forced sex in childhood	23.0 (14.9-33.7)	(-)
	Females (n= 112)	Males (n= 45)
More than one perpetrator at first incident of sexual violence in childhood	63.3 (52.2-73.1)	50.0 (32.0-68.0)

Note: CI = *Confidence interval.* (-) = *No estimates.*

[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured sex (through threats, harassment, or tricking).

[2] Authority figure includes teacher, security officer, employer, community/religious leader, aid/government worker, or medical professional.

[3] Other includes family member, relative, neighbour, and friend.

[4] Other includes family member, relative, neighbour, and friend.

**Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Table 4.1.4. Location and time of day of first incident of sexual violence [1], among 18-24-year-olds who experienced sexual violence before age 18 – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 112)	Males (n= 45)
	Weighted % (95% CI)	Weighted % (95% CI)
Location of first incident of se	xual violence in childhood	
Respondent's home	11.4 (5.1-23.4)	13.5 (5.7-28.8)
Perpetrator's home	13.0 (4.6-31.9)	13.2 (1.9-54.8)
Someone else's home	2.0 (0.3-10.8)	2.4 (0.5-9.7)
Outside location [2]	67.5 (44.1-84.5)	56.7 (27.1-82.2)
Other [3]	3.2 (1.5-6.6)	13.0 (2.5-46.6)
Time of day [4] of first incider	t of sexual violence in childhood	
Morning	17.9 (8.6-33.7)	2.0 (0.4-10.0)
Afternoon	30.1 (18.8-44.6)	38.3 (17.1-65.1)
Evening	47.3 (30.3-65.0)	46.0 (23.8-69.9)
Late at night	3.7 (0.7-16.3)	13.7 (3.4-41.7)
	Females (n= 64)	Males (n=19)
Whether the first incident of s	exual violence in childhood happened	before/after arriving in the settlement
Before	21.0 (10.4-37.8)	46.8 (17.6-78.4)
After	73.3 (56.2-85.4)	53.2 (21.6-82.4)

Note: CI = *Confidence interval.*

[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured sex (through harassment or threats).

[2] Outside location includes road/street, market/shop, school, lake/river or other body of water, and field/other natural area.

[3] Other includes inside a car/bus, alcohol outlet (e.g., restaurant, bar, disco, club, etc.), religious institutions, and office.

[4] Morning refers to sunrise-noon, afternoon refers to noon-sunset, evening refers to sunset-midnight, and late at night refers to midnight-sunrise.

Note: Percentages may sum to >100% because some survivors may have experienced multiple forms of sexual violence that may have occurred at different locations or at different times of the day.

Sexual violence in the past 12 months among 18-24-year-olds

Table 4.1.5. Prevalence of different types of sexual violence [1] in the past 12 months, among 18-24-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 619)	Males (n= 392)
	Weighted % (95% CI)	Weighted % (95% CI)
Any type of sexual violence in the past 12 months	10.6 (7.1-15.5)	16.9 (6.6-37.0)
	Females (n= 622)	Males (n= 395)
Unwanted sexual touching in the past 12 months	5.8 (2.5-12.9)	12.1 (6.2-22.2)
	Females (n= 622)	Males (n= 395)
Unwanted attempted sex in the past 12 months	2.7 (1.5-4.9)	2.9 (0.6-12.6)
	Females (n= 622)	Males (n= 395)
Pressured sex [2] in the past 12 months	2.2 (1.2-4.0)	**
	Females (n= 622)	Males (n= 395)
Physically forced sex in the past 12 months	4.7 (2.4-8.7)	2.6 (0.4-13.7)
	Females (n= 622)	Males (n= 395)
Pressured or physically forced sex in the past 12 months	4.7 (2.5-8.7)	2.6 (0.4-13.7
	Females (n= 622)	Males (n= 395)
Transactional sex [3] in the past 12 months	3.3 (1.6-6.6)	**

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.*

[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Pressured sex includes threats, harassment, or tricking.

[3] Transactional sex includes receiving money, gifts, food, or favours in exchange for sex.

**Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Table 4.1.6. Characteristics of perpetrators of the most recent incident of sexual violence [1], among 18-24-year-olds who experienced sexual violence in the past 12 months – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 59)	Males (n= 53)
	Weighted % (95% CI)	Weighted % (95% CI)
Perpetrators of the most recent incident	of sexual violence in the past 12	months
Current or previous spouse/boyfriend/ girlfriend or romantic partner	53.4 (21.2-83.0)	52.3 (28.8-74.9)
Authority figure [2]	3.7 (0.7-17.3)	3.0 (0.3-24.6)
Neighbour	6.0 (1.7-19.0)	11.1 (2.7-36.0)
Classmate/schoolmate	16.2 (5.5-39.3)	13.5 (7.2-23.8)
Friend	8.7 (2.1-29.9)	18.4 (11.9-27.2)
Stranger	7.4 (2.0-23.3)	0.4 (0.0-3.9)
Other	4.5 (1.2-16.0)	1.3 (0.2-8.3)
Perpetrators of the most recent incident	of pressured or physically forced	sex in the past 12 months
	Females (n= 59)	Males (n= 53)
Current or previous spouse/boyfriend/ girlfriend or romantic partner	36.3 (13.6-67.3)	25.8 (9.0-54.9)
Classmate/schoolmate/friend/ neighbour	12.9 (5.1-29.0)	0.8 (0.1-5.3)
Perpetrators of most recent incident of s	exual violence who were 5 or mo	re years older than the survivor
	Females (n= 59)	Males (n= 53)
Perpetrator was 5 or more years older at the most recent incident of any sexual violence in the past 12 months	32.7 (15.7-56.0)	3.4 (0.4-21.5)
Sex of the perpetrator of the most recen	t incident of sexual violence	
	Females (n= 59)	Males (n= 53)
Female	**	100.0
Male	100.0	**

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes unwanted sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Authority figure includes teacher, security officer, employer, community/religious leader, aid worker, or medical professional.

Note: **Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Table 4.1.7. Disclosure, service-seeking, and receipt of services for any incident of sexual violence [1] among 18-24-year-olds who have experienced any sexual violence or pressured or physically forced sex – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Disclosure, service-seeking, and receipt of services for any incident of sexual violence Females (n = 196)Males (n = 101)Weighted % (95% CI) Weighted % (95% CI) Told someone about an experience of any 17.1 (11.8-24.0) 30.6 (18.0-46.9) sexual violence Females (n = 196)Males (n = 101)Knew of a place to seek help for any 54.8 (36.0-72.3) 73.0 (59.6-83.2) experience of sexual violence Sought help for any experience of sexual 5.1 (1.8-14.0) 17.2 (5.6-42.1) violence Received help for any experience of sexual 3.4 (1.2-9.5) 17.1 (5.5-42.2) violence

Disclosure, service-seeking, and receipt of services for any incident of sexual violence among those who have experienced any pressured or physically forced sex

1 91 19	, , , , , , , , , , , , , , , , , , ,	
	Females (n= 124)	Males (n= 34)
	Weighted % (95% CI)	Weighted % (95% CI)
Told someone about experience of any sexual violence	16.3 (8.8-28.3)	48.7 (35.3-62.3)
Knew of a place to seek help for an experience of any sexual violence	46.4 (27.7-66.3)	67.0 (59.2-74.0)
Sought help for experience of any sexual violence	8.9 (3.2-22.5)	35.8 (14.5-64.8)
Received help for experience of any sexual violence	5.9 (2.2-15.1)	35.7 (14.3-64.8)

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.*

[1] Sexual violence includes unwanted sexual touching, attempted sex, physically forced sex, and pressured sex (through threats, harassment, or tricking).

Table 4.1.8. Relationship with the person the survivor told about any incident of sexual violence [1], among 18-24-year-olds who experienced any sexual violence and who told someone – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Person the survivor told about	Females (n= 40)	Males (n= 23)
sexual violence	Weighted % (95% CI)	Weighted % (95% Cl)
Relative [2]	47.5 (18.6-78.1)	6.8 (1.4-28.0)
Friend or neighbour	32.5 (8.3-71.9)	72.4 (51.0-86.9)
Service provider or authority figure [3]	6.5 (1.9-20.3)	0.2 (0.0-2.1)

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.*

[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured sex (through harassment or threats).

[2] Relative includes mother, father, brother, sister, and other relatives.

[3] Service provider or authority figure includes traditional healer, NGO worker, teacher, employer, community leader, religious leader, children's officer. Sexual violence in the past 12 months among 13-17-year-olds

Table 4.2.1. Prevalence of different types of sexual violence [1] in the past 12 months, among 13-17-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 713)	Males (n= 522)
	Weighted % (95% CI)	Weighted % (95% Cl)
Any type of sexual violence in the past 12 months	7.0 (3.8-12.5)	7.0 (3.8-12.3)
	Females (n= 716)	Males (n= 532)
Unwanted sexual touching in the past 12 months	6.5 (3.3-12.3)	6.0 (3.5-10.2)
	Females (n= 716)	Males (n= 532)
Unwanted attempted sex in the past 12 months	0.5 (0.1-1.9)	**
	Females (n= 716)	Males (n= 532)
Pressured sex in the past 12 months	0.4 (0.1-2.1)	0.7 (0.1-4.9)
	Females (n= 716)	Males (n= 532)
Physically forced sex in the past 12 months	0.1 (0.0-0.6)	1.1 (0.3-4.5)
	Females (n= 716)	Males (n= 532)
Pressured or physically forced sex in the past 12 months	0.5 (0.1-1.9)	1.1 (0.3-4.5)
	Females (n= 716)	Males (n= 532)
Transactional sex in the past 12 months [2]	1.0 (0.4-2.3)	**
	Females (n= 716)	Males (n= 532)
Pressured or physically forced sex at first sexual experience among those who have ever had sex	1.9 (1.0-3.6)	0.9 (0.2-4.2)

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.*

[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured sex (through harassment or threats).

[2] Transactional sex includes receiving money, gifts, food, or favours in exchange for sex.

**Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Table 4.2.2. Characteristics of perpetrators of the most recent experience of sexual violence [1], among 13-17-year-olds who experienced any sexual violence in the past 12 months – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 36)	Males (n= 33)
	Weighted % (95% CI)	Weighted % (95% CI)
Perpetrators of the most recent incident of s	exual violence in the past 12 m	onths
Current or previous spouse/boyfriend/ girlfriend or romantic partner	28.8 (9.4-61.3)	12.0 (3.2-36.1)
Authority	1.9 (0.2-15.1)	**
Neighbour	10.6 (4.5-23.2)	6.6 (1.5-25.1)
Classmate/schoolmate	41.5 (19.0-68.3)	2.9 (0.6-12.7)
Friend	4.6 (1.0-18.7)	57.9 (32.7-79.6)
Stranger	12.6 (3.3-37.8)	5.2 (0.9-25.5)
Other	**	15.4 (4.6-40.9)
Perpetrators of pressured or physically force	d sexual violence in the past 12	2 months
	Female (n=36)	Male (n=33)
Current or previous spouse/boyfriend/ girlfriend or romantic partner	5.8 (0.9-29.9)	6.0 (0.7-36.0)
Classmate/schoolmate	1.3 (0.2-9.4)	11.8 (2.3-43.1)
Other	92.9 (72.0-98.5)	82.2 (54.0-94.8)
Perpetrators of the most recent incident of s than the survivor	exual violence in the past 12 m	onths who were 5 or more years older
	Females (n= 36)	Males (n= 33)
Perpetrator 5 or more years older at the most recent incident of any sexual violence in the past 12 months	30.5 (14.0-54.2)	6.1 (0.8-35.5)
Sex of the perpetrator of the most recent inc	cident of sexual violence	
	Females (n= 36)	Males (n= 33)
Female	**	100.0
Male	100.0	**

Table 4.2.3. Location and time of day of the most recent incident of sexual violence [1], among 13-17-year-olds who experienced sexual violence in the past 12 months – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 36)	Males (n= 33)
	Weighted % (95% CI)	Weighted % (95% CI)
Location of the most recent	t incident of sexual violence in the p	past 12 months
Respondent's home	5.9 (1.4-21.4)	17.3 (6.6-38.2)
Perpetrator's home	6.8 (1.3-28.2)	5.9 (1.2-24.1)
Someone else's home	**	1.3 (0.2-9.8)
Outside location [2]	84.6 (62.7-94.8)	71.8 (49.5-86.8)
Other [3]	0.9 (0.1-7.4)	3.7 (0.4-25.9)
	Females (n= 36)	Males (n= 33)
Time of day [4] of most inci	dents of sexual violence in the past	12 months
Morning	8.1 (1.8-30.5)	**
Afternoon	44.3 (24.0-66.6)	32.0 (9.0-69.2)
Evening	47.0 (32.0-62.7)	59.2 (29.1-83.8)
Late at night	0.5 (0.1-4.8)	8.8 (1.8-34.1)
Whether the most recent in settlement	icident of sexual violence in the pas	t 12 months happened before/after arriving in the
	Females (n= 36)	Males (n= 33)
Before	8.2 (2.9-21.2)	4.6 (0.5-30.1)
After	91.8 (78.8-97.1)	95.4 (69.9-99.5)

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.*

[1] Sexual violence includes unwanted sexual touching, attempted sex, physically forced sex, and pressured sex (through threats, harassment, or tricking).

[2] Outside location includes road/street, market/shop, school, lake/river or other body of water, and field/other natural area.

[3] Other includes inside a car/bus, field or other natural area, bar/restaurant/disco club, and other.

[4] Morning refers to sunrise-noon, afternoon refers to noon-sunset, evening refers to sunset-midnight, and late at night refers to midnight-sunrise.

**Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Table 4.2.4. Disclosure, service-seeking, and receipt of services for any incident of sexual violence [1], among 13-17-year-olds who experienced any sexual violence or pressured or physically forced sex in the past 12 months – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 36)	Males (n= 33)
	Weighted % (95% CI)	Weighted % (95% Cl)
Told someone about experience of any sexual violence	6.4 (1.5-22.8)	5.7 (0.9-27.8)
	Females (n= 36)	Males (n= 33)
Knew of a place to seek help for experience of any sexual violence	30.4 (12.9-56.2)	70.9 (50.2-85.5)
Sought help for experience of any sexual violence	2.0 (0.3-13.2)	**
Received help for experience of any sexual violence	1.7 (0.2-14.2)	**
Disclosure, service-seeking, and receipt of services f pressured or physically forced sex in the past 12 mo	-	ng those who experienced
÷ .	-	ng those who experienced Males (n= 4)
÷ .	onths	 _
÷ .	Females (n= 8)	Males (n= 4)
pressured or physically forced sex in the past 12 mo	Females (n= 8) Weighted % (95% Cl)	Males (n= 4) Weighted % (95% CI)
pressured or physically forced sex in the past 12 mo Told someone about experience of any sexual violence Knew of a place to seek help for experience of any	Females (n= 8) Weighted % (95% Cl) 6.5 (0.4-54.3)	Males (n= 4) Weighted % (95% Cl) 6.1 (0.3-58.8)

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.*

[1] Sexual violence includes unwanted sexual touching, attempted sex, physically forced sex, and pressured sex (through threats, harassment, or tricking).

**Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Table 4.2.5. Relationship with the person the survivor told about any incident of sexual violence [1], among 13-17-year-olds who experienced any sexual violence in the past 12 months and who told someone – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Person the survivor told about sexual	Females (n= 4)	Males (n= 4)
violence	Weighted % (95% Cl)	Weighted % (95% Cl)
Relative	94.2 (38.0-99.8)	**
Friend or neighbour	5.8 (0.2-62.0)	82.7 (5.2-99.8)
Service provider	**	17.3 (0.2-94.8)

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.*

[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured sex (through harassment or threats).

**Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

SECTION 5: PHYSICAL VIOLENCE

Physical violence in childhood among 18-24-year-olds

Table 5.1.1. Prevalence and age of first experience of physical violence [1] before age 18, among 18-24-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 622)	Males (n= 395)
	Weighted % (95% CI)	Weighted % (95% CI)
Physical violence in childhood, any perpetrator	27.6 (22.2 - 33.8)	40.9 (31.4 - 51.3)
Perpetrators of first incident of PV		
	Females (n= 472)	Males (n= 249)
Physical intimate partner violence [2]	4.4 (1.8 - 10.2)	2.0 (0.5 - 7.5)
	Females (n= 622)	Males (n= 395)
Parent or adult relative physical violence	16.6 (13.3 - 20.5)	33.5 (22.5 - 46.5)
	Females (n= 622)	Males (n= 395)
Adult in the community or neighbourhood physical violence	5.4 (2.9 - 18.8)	18.8 (12.8 - 26.8)
	Females (n= 622)	Males (n= 395)
Peer physical violence	8.0 (5.4 - 11.5)	12.7 (8.3 - 19.0)
Age of first experience of physical violence, a	mong those who experienced	d physical violence before age 18
	Females (n= 158)	Males (n= 127)
5 or younger	3.1 (0.9 – 10.0)	0.7 (0.2 – 2.1)
6-11	13.7 (6.7 – 25.7)	18.3 (8.0 – 36.8)
12-17	83.2 (68.6 – 91.9)	81.0 (62.7 – 91.6)
First incident of physical violence in childhood	happened before/after arriv	ing in the settlement
	Females (n= 116)	Males (n= 107)
Before	30.9 (18.8 – 46.4)	56.3 (44.0 – 67.9)
After	66.6 (49.8 – 80.0)	43.3 (31.8 – 55.7)

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.*

[1] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon.

[2] Among those who have an intimate partner.

Physical violence in the past 12 months among 18-24-year-olds

Table 5.1.2. Prevalence of physical violence [1] in the past 12 months, among 18-24-yearolds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 622)	Males (n= 395)
	Weighted % (95% CI)	Weighted % (95% CI)
Physical violence in the past 12 months	13.9 (9.3 – 20.2)	20.2 (13.3 – 29.7)
	Females (n= 472)	Males (n= 249)
Physical intimate partner violence [2]	6.5 (3.8 – 11.0)	0.4 (0.1 – 1.9)
	Females (n= 622)	Males (n= 395)
Adult in the community or neighbourhood physical violence	2.7 (1.2 – 6.0)	8.0 (4.4 – 14.1)
	Females (n= 622)	Males (n= 395)
Peer physical violence	6.9 (3.8 – 12.3)	13.6 (8.9 – 20.2)
	Females (n= 622)	Males (n= 395)
Parent/adult caregivers and other relatives	5.2 (3.0 – 8.6)	3.8 (2.0 – 7.1)
	Females (n= 97)	Males (n= 72)
Prevalence of experiencing harm or injury as a result of physical violence, among those who experienced physical violence in the past 12 months	65.8 (52.1 – 77.3)	79.2 (68.2 – 87.0)
Sex of the perpetrator of the most recent incident o	of physical violence	
Parent/adult caregivers and other relatives	Females (n= 104)	Males (n= 86)
Male	46.0 (29.1 – 63.9)	91.4 (75.0 – 97.4)
Female	49.7 (33.4 – 65.9)	8.6 (2.6 – 25.0)
Adult in the community or neighbourhood physical violence	Females (n= 27)	Males (n= 56)
Male	47.9 (18.9 – 78.4)	89.4 (57.9 – 98.1)
Female	27.8 (9.1 – 59.7)	10.6 (1.9 – 42.1)
Peer physical violence	Females (n= 66)	Males (n= 107)
Male	47.0 (31.2 – 63.5)	96.3 (92.8 – 98.1)
Female	51.5 (34.9 – 67.8)	3.7 (1.9 – 7.2)

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.*

[1] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon.

[2] Among those who have an intimate partner.

Table 5.1.3. Prevalence of experiencing physical harm or injury as a result of physical violence [1], among 18-24-year-olds who experienced any physical violence before age 18, by perpetrator – Uganda Violence Against Children Survey (HVACS), 2016

	Females (n=158)	Males (n= 127)
	Weighted % (95% Cl)	Weighted % (95% CI)
Experienced injury as a result of physical violence by any perpetrator	30.0 (18.0 – 45.6)	62.9 (53.5 – 71.3)
	Females (n=19)	Males (n= 4)
Injured by intimate partner [2]	48.4 (17.3 – 80.8)	1.5 (0.1 – 21.4)
	Females (n= 112)	Males (n= 92)
Injured by parent or caregiver or adult relative	26.7 (12.6 – 47.9)	43.0 (33.0 – 53.5)
	Females (n= 30)	Males (n= 50)
Injured by adult in the community or neighbourhood	26.4 (9.6 – 54.9)	38.3 (23.8 – 55.3)
	Females (n= 32)	Males (n= 45)
Injured by peer	3.2 (0.8 – 12.1)	58.4 (34.1 – 79.3)

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.*

[1] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon.

[2] Among those who have an intimate partner.

Table 5.1.4. Service-seeking and receipt for any incident of physical violence [1], among 18-24-year-olds who experienced physical violence before 18 – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 158)	Males (n= 127)
	Weighted % (95% CI)	Weighted % (95% CI)
Told someone about experience of any physical violence	6.3 (2.5 – 15.2)	9.0 (3.4 – 21.5)
	Females (n= 133)	Males (n= 119)
Knew of a place to seek help for any experience of physical violence	51.7 (29.2 – 73.6)	70.2 (58.3 – 79.9)
	Females (n= 158)	Males (n= 127)
Sought help for any experience of physical violence	3.4 (1.3 – 8.7)	1.0(0.2 – 6.0)
Received help for any experience of physical violence	2.1 (0.8 – 5.3)	1.0 (0.2 – 6.0)

Source ~Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Note: CI = *Confidence interval.*

[1] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon.

Table 5.1.5. Relationship with the person the survivor told about any incident of physical violence [1], among 18-24-year-olds who experienced any physical violence before age 18 and who told someone – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Power the summary told shout physical violence	Females (n= 18)	Males (n= 8)
Person the survivor told about physical violence	Weighted % (95% CI)	Weighted % (95% CI)
Relative	52.9 (29.5 – 75.0)	**
Friend/neighbour	17.9 (5.6 – 44.6)	**
Service provider or authority figure [2]	21.7 (12.5 – 34.8)	**
Other	7.6 (0.5 – 57.9)	**

Notes: CI = Confidence interval.

Note:[1] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon.

[2] Service provider or authority figure includes: Traditional healer, NGO worker, teacher, employer, community leader, religious leader, children's officer.

**Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Note:Percentages may sum to >100% because some survivors may have experienced physical violence multiple times and may have told multiple people.

Physical violence in the past 12 months among 13-17-year-olds

Table 5.2.1. Prevalence and age at first experience of physical violence [1] in the past 12 months, among 13-17-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 716)	Males (n= 532)
	Weighted % (95% CI)	Weighted % (95% CI)
Physical violence in the past 12 months, any perpetrator	25.7 (18.2 – 35.0)	34.8 (24.3 – 47.0)
	Females (n= 110)	Males (n= 86)
Physical intimate partner violence [2]	0.5 (0.1 – 3.6)	2.5 (0.3 – 16.3)
	Females (n= 716)	Males (n= 532)
Parent or adult relative physical violence	6.5 (3.5 – 11.6)	16.8 (11.5 – 23.8)
	Females (n= 716)	Males (n= 532)
Adult in the community or neighbourhood physical violence	16.1 (10.5 – 24.0)	18.6 (11.6 – 28.4)
	Females (n= 716)	Males (n= 532)
Peer physical violence	13.9 (8.7 – 21.4)	15.7 (10.1 – 23.8)
Age at first experience of physical violence, among months	g those who experienced phys	ical violence in the past 12
	Females (n= 205)	Males (n= 216)
5 or younger	1.2 (0.3 – 4.8)	5.5 (2.1 – 13.8)
6-11	25.9 (17.0 – 37.2)	33.1 (23.6 – 44.1)
12-17	72.9 (62.0 – 81.6)	61.4 (51.7 – 70.4)
Most recent incident of physical violence happene	d before/after arriving in the s	ettlement
	Females (n= 176)	Males (n= 156)
Before	2.4 (0.8 – 6.9)	1.2 (0.3 – 5.1)
Before After	2.4 (0.8 – 6.9) 96.3 (92.5- 98.3)	
	96.3 (92.5- 98.3)	1.2 (0.3 – 5.1)
After	96.3 (92.5- 98.3)	1.2 (0.3 – 5.1)
After Sex of the perpetrator of the most recent incident	96.3 (92.5- 98.3) of physical violence	1.2 (0.3 – 5.1) 96.5 (88.4 – 99.0)

Female	46.3 (33.3 – 59.8)	27.5 (20.8 – 35.3)
Adult in the community or neighbourhood physical violence	Females (n= 38)	Males (n= 70)
Male	58.8 (38.7 – 76.4)	96.3 (82.1 – 99.3)
Female	38.0 (19.5 – 60.7)	3.7 (0.7 – 17.9)
Peer physical violence	Females (n= 85)	Males (n= 116)
Male	44.9 (28.4 – 62.6)	98.3 (95.2 – 99.4)
Female	55.1 (37.4 – 71.6)	1.7 (0.6 – 4.8)

Note: Note: CI = *Confidence interval.*

Note:[2] Among those who have an intimate partner.

Note:[1] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon.

Table 5.2.2. Prevalence of experiencing physical harm or injury as a result of any physical violence [1], among 13-17-year-olds who experienced any physical violence in the past 12 months, by perpetrator – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 176)	Males (n= 156)
	Weighted % (95% CI)	Weighted % (95% CI)
Experienced injury as a result of physical violence by any perpetrator in the past 12 months	34.1 (24.0 – 45.8)	62.9 (38.9 – 81.8)
	Females (n= 107)	Males (n= 103)
Injured by parent or caregiver or adult relative	30.6 (17.4 – 48.1)	43.9 (27.8 – 61.4)
	Females (n= 53)	Males (n= 69)
Injured by adult in the community or neighbourhood	24.5 (11.5 – 44.7)	39.9 (17.0 – 68.3)
	Females (n= 110)	Males (n= 130)
Injured by peer	37.6 (26.3 – 50.5)	59.0 (38.9 – 76.5)

Note: Notes: CI = Confidence interval. Percentages may sum to >100% as youth may experience violence from more than one person.

Note:[1] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon.

[2] Among those who have an intimate partner.

Table 5.2.3. Disclosure, service-seeking, and receipt for any incident of physical violence [1], among 13-17-year-olds who experienced physical violence in the past 12 months – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 176)	Males (n= 156)
	Weighted % (95% CI)	Weighted % (95% CI)
Told someone about an experience of any physical violence	2.5 (0.9 – 6.7)	0.9 (0.1- 6.3)
	Females (n= 139)	Males (n= 149)
Knew of a place to seek help for an experience of any physical violence	41.2 (31.2 – 52.0)	48.7 (31.9 – 65.9)
	Females (n= 176)	Males (n= 156)
Sought help for experience of any physical violence	0.6 (0.1 – 3.4)	0.4 (0.1 – 3.2)
Received help for experience of any physical violence	0.5 (0.1 – 3.7)	0.4 (0.1 – 3.2)

Note:[1] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon.

Table 5.3.1. Prevalence of witnessing physical violence in the home [1] and in the neighbourhood [2], among 18-24-year-olds before age 18 and among 13-17-year-olds in the past 12 months – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 622)	Males (n= 395)		
	Weighted % (95% CI)	Weighted % (95% CI)		
In the home	33.0 (27.7 – 38.7)	43.9 (32.8 – 55.6)		
In the neighbourhood	23.5 (18.1 – 30.0)	41.5 (31.8 – 51.9)		
Witnessed physical violence in the past 12 months (among 13-17-year-olds)				
Witnessed physical violence in				
Witnessed physical violence in	the past 12 months (among 13-17-year- Females (n= 213) Weighted % (95% Cl)	olds) Males (n= 189) Weighted % (95% CI)		
Witnessed physical violence in the home	Females (n= 213)	Males (n= 189)		
	Females (n= 213) Weighted % (95% Cl)	Males (n= 189) Weighted % (95% Cl)		

- *Note:*[1] Witnessing physical violence in the home includes hearing or seeing a parent punch, kick, or beat your other parent, their boyfriend or girlfriend, or your brothers or sisters.
- Note:[2] Witnessing physical violence in the neighbourhood includes seeing someone get attacked outside of your home and family environment.

SECTION 6: EMOTIONAL VIOLENCE

Emotional violence in childhood among 18-24-year-olds

Table 6.1.1. Prevalence and age at first experience of emotional violence [1] before age18, among 18-24-year-olds – Uganda Humanitarian Violence Against Children Survey(HVACS), 2022

	Females (n= 622)	Males (n= 395)
	Weighted % (95% CI)	Weighted % (95% CI)
Emotional violence by a parent, adult caregiver, or other adult relative in childhood	14.2 (9.6 – 20.5)	22.5 (17.7 – 28.2)
Age at first experience of emotional violence		
	Females (n= 71)	Males (n= 85)
11 or younger	21.2 (10.0 – 39.3)	25.7 (14.5 – 41.3)
12-17	78.8 (60.7 – 90.0)	74.3 (58.7 – 85.5)
First incident of emotional violence in childhood happened before/after arriving in the settlement	Females (n= 32)	Males (n= 31)
Before	9.6 (2.9 – 27.0)	53.6 (24.4 – 80.4)
After	88.6 (73.4 – 95.6)	42.6 (16.5 – 73.7)

Note:[1] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted by a parent, adult caregiver, or other adult relative. Emotional violence in the past 12 months among 18-24-year-olds

Table 6.2.1. Prevalence of emotional violence [1] in the past 12 months, among18-24-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 474)	Males (n= 249)
	Weighted % (95% CI)	Weighted % (95% CI)
Emotional violence by an intimate partner [2] in the past 12 months (among those who ever had an intimate partner)	9.9 (6.8 – 14.3)	2.4 (0.8 – 6.6)
	Females (n= 622)	Males (n= 395)
Emotional violence by a peer [3] in the past 12 months	9.1 (5.5 – 14.5)	3.1 (1.4 – 6.5)

Note: Note: CI = *Confidence interval.*

- Note:[1] Emotional violence includes any emotional violence by a parent, adult caregiver, or adult relative, or by an intimate partner or a peer.
- Note:[2] Emotional violence by an intimate partner includes being insulted, humiliated, or made fun of in front of others; keeping you from having your own money; tried to keep you from seeing or talking to family or friends; keeping track of you by demanding to know where you were and what you were doing; made threats to physically harm you.
- Note:[3] Emotional violence by a peer in the past 12 months includes: a) made you get scared or feel really bad because they were calling you names, saying mean things to you, or saying they did not want you around; b) told lies or spread rumours about you, or tried to make others dislike you; c) kept you out of things on purpose, excluded you from their group of friends or completely ignored you.

Note: Emotional violence in the past 12 months among 13-17-year-olds

Table 6.3.1. Prevalence of emotional violence in the past 12 months, among 13-17-yearolds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 716)	Males (n= 532)		
	Weighted % (95% CI)	Weighted % (95% CI)		
Emotional violence by a parent, adult caregiver, or other adult relative [1] in the past 12 months	13.8 (8.7 – 21.3)	10.3 (6.5 – 16.0)		
	Females (n= 110)	Males (n= 86)		
Emotional violence by an intimate partner [2] in the past 12 months (among those who ever had an intimate partner)	0.8 (0.1 – 6.5)	**		
	Females (n= 716)	Males (n= 532)		
Emotional violence by a peer [3] in the past 12 months	0.4 (0.1 – 1.5)	**		
Emotional violence in the past 12 months happened before/after arriving in the settlement	Females (n= 32)	Males (n= 31)		
Before	2.4 (0.4 – 11.8)	5.4 (2.1 – 13.0)		
After	97.6 (88.3 – 99.5)	94.6 (87.0 – 97.9)		
Sex of the perpetrator of the most recent inci	dent of emotional violence			
Emotional violence by a parent, adult caregiver, or other adult relative [1] in the past 12 months	Females (n= 105)	Males (n= 76)		
Male	41.5 (24.0 – 61.4)	51.7 (36.9- 66.2)		
Female	54.7 (36.1 – 72.0)	45.0 (29.4 – 61.7)		

- Note:[1] Emotional violence by parent, adult caregiver, or other adult relative includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.
- Note:[2] Emotional violence by an intimate partner includes being insulted, humiliated, or made fun of in front of others; keeping you from having your own money; tried to keep you from seeing or talking to family or friends; keeping track of you by demanding to know where you were and what you were doing; made threats to physically harm you.
- Note:[3] Emotional violence by a peer in the past 12 months includes: a) made you get scared or feel really bad because they were calling you names, saying mean things to you, or saying they didn't want you around; b) told lies or spread rumours about you, or tried to make others dislike you; c) kept you out of things on purpose, excluded you from their group of friends or completely ignored you.
- Note: ** Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Table 6.3.2. Age at first experience of emotional violence [1] by a parent, adult caregiver, or adult relative, among 13-17-year-olds who experienced emotional violence in the past 12 months – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Female (n= 25)	Male (n= 17)	
	Weighted % (95% CI)	Weighted % (95% CI)	
11 or younger	**	**	
12-17	97.6 (76.6 – 99.8)	100.0	

Note: Note: CI = *Confidence interval.*

Note: **Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Note:[1] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.

SECTION 7: OVERLAP AMONG SEXUAL, PHYSICAL, AND EMOTIONAL VIOLENCE

Overlap among different forms of violence among 18-24-year-olds

Table 7.1. Prevalence and overlap of different types of violence experienced in childhood among 18-24-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Female (n= 622)	Male (n= 395)	
Any violence	Weighted % (95% CI)	Weighted % (95% CI)	
No violence	57.4 (45.1-68.9)	50.4 (43.4-57.3)	
Any violence	42.6 (31.1-54.9)	49.6 (42.7-56.6)	
	Female (n= 622)	Male (n= 395)	
One type of violence only	Weighted % (95% CI)	Weighted % (95% CI)	
Sexual violence [1] only	7.7 (4.2-13.7)	1.7 (0.8-3.8)	
Physical violence [2] only	13.5 (9.2-19.5)	22.7 (15.5-31.9)	
Emotional violence [3] only	2.2 (1.1-4.3)	5.9 (3.0-11.1)	
Multiple types of violence	Female (n= 622)	Male (n= 395)	
Multiple types of violence	Weighted % (95% CI)	Weighted % (95% CI)	
Sexual and physical violence	8.3 (4.5-14.8)	6.9 (3.7-12.6)	
Sexual and emotional violence	4.6 (1.9-10.5)	5.1 (2.2-11.3)	
Physical and emotional violence	9.2 (6.3-13.2)	16.1 (10.6-23.6)	
Sexual, physical, and emotional violence	3.3 (1.5-7.4)	4.7 (1.9-11.2)	

Overlap among different types of violence in the past 12 months

Any violence	Female (n= 622)	Male (n= 395)	
	Weighted % (95% CI)	Weighted % (95% CI)	
No violence	68.9 (59.7-76.8)	64.8 (50.1-77.2)	
Any violence in the past 12 months	31.1 (23.2-40.3)	35.2 (22.8-49.9)	
	Female (n= 622)	Male (n= 395)	
One type of violence only	Weighted % (95% Cl)	Weighted % (95% CI)	
Sexual Violence [1] only in the past 12 months	4.9 (3.0-7.8)	6.7 (3.6-12.1)	

Physical violence [2] only in the past 12 months	4.9 (3.0-8.0)	8.5 (4.1-17.0)	
Two types of violence	Female (n= 622)	Male (n= 395)	
	Weighted % (95% Cl)	Weighted % (95% CI)	
Sexual violence and physical violence	3.4 (2.2-5.3)	6.1 (1.9-18.1)	

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.
[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted by a parent, adult caregiver, or other adult relative.

Note: ***Unreliable estimate (RSE is greater than 50%), estimate is suppressed.*

Overlap among different forms of violence among 13-17-year-olds

Table 7.2. Prevalence and overlap of different types of violence experienced in the past 12 months, among 13-17-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Female (n= 716)	Male (n= 532)
Any violence	Weighted % (95% CI)	Weighted % (95% CI)
No violence	68.0 (56.8-77.5)	60.0 (49.0-70.1)
Any violence	32.0 (22.5-43.2)	40.0 (29.9-51.0)
One type of vielence only	Female (n= 716)	Male (n= 532)
One type of violence only	Weighted % (95% CI)	Weighted % (95% CI)
Sexual violence [1] only	2.1 (1.2-3.8)	2.7 (1.0-7.2)
Physical violence [2] only	14.5 (10.2-20.1)	24.4 (16.7-34.1)
Emotional violence [3] only	3.5 (1.6-7.6)	1.6 (0.6-3.9)
	Female (n= 716)	Male (n= 532)
Multiple types of violence	Weighted % (95% CI)	Weighted % (95% CI)
Sexual and physical violence	4.2 (2.1-8.3)	3.0 (1.4-6.6)
Sexual and emotional violence	0.6 (0.2-2.4)	1.0 (0.3-3.3)
Physical and emotional violence	7.0 (4.7-10.3)	7.0 (3.7-12.8)
Sexual violence and physical and emotional violence	3.0 (1.4-6.3)	0.8 (0.2-2.3)

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.

Note:[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted by a parent, adult caregiver, or other adult relative.

Note: ***Unreliable estimate (RSE is greater than 50%), estimate is suppressed.*

SECTION 8: OTHER FORMS OF VIOLENCE AGAINST CHILDREN

Prevalence of abduction among 13-24-year-olds

Table 8.1. Prevalence of abduction among 18-24-year-olds and among 13-17-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Experiences of abduction among 18-24-year-olds				
Abduction	Female (n= 603)	Male (n= 380)		
Abduction	Weighted % (95% CI)	Weighted % (95% CI)		
Never abducted	96.0 (92.3 - 98.0)	88.7 (82.2 - 93.1)		
Abducted once	2.2 (1.0 - 4.9)	6.5 (3.5 - 11.9)		
Abducted multiple times	1.4 (0.6 - 3.1)	3.1 (1.2 - 7.7)		
Abduction before or ofter arriving	Female (n= 14)	Male (n= 19)		
Abduction before or after arriving	Weighted % (95% CI)	Weighted % (95% CI)		
Before	37.9 (7.9 - 81.3)	64.1 (27.7 - 89.3)		
After	51.0 (13.5 - 87.4)	28.9 (6.3 - 71.1)		
Before and after	4.7 (0.7 - 24.6)	**		
Do not know/declined	6.3 (0.6 - 42.5)	7.0 (0.7 - 43.6)		
Experiences of abduction among 13-1	7-year-olds			
Abduction	Female (n= 701)	Male (n= 519)		
Abduction	Weighted % (95% CI)	Weighted % (95% CI)		
Never abducted	98.5 (96.9 - 99.2)	92.5 (87.2 - 95.8)		
Abducted once	0.7 (0.2 - 2.3)	4.0 (1.0 - 9.6)		
Abducted multiple times	0.2 (0.0 - 0.8) 0.8 (0.2 - 2.9)			

Note: Note: CI = *Confidence interval.*

Note: ** Unreliable estimate (RSE is greater than 50%), estimate is suppressed. Prevalence of child marriage among 18-24-year-olds

Table 8.2. Prevalence of child marriage among 18-24-year-olds and 20-24-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

40.04	Female (n= 622)	Male (n= 395)	
18-24 years	Weighted % (95% CI)	Weighted % (95% CI)	
Proportion ever married	39.8 (31.3 - 49.1)	16.4 (9.7 - 26.5)	
	Female (n=295)	Male (n=76)	
Proportion married before age 15	0.9 (0.3 - 2.9)	**	
Proportion married before age 18	36.5 (28.5 - 45.3)	12.3 (4.8 - 28.1)	
Age difference 5 years or more	48.9 (35.6 - 62.4)	0.9 (0.1 - 5.7)	
20.24 марта	Female (n= 412)	Male (n= 276)	
20-24 years	Weighted % (95% CI)	Weighted % (95% Cl)	
Proportion ever married	54.5 (44.6 - 64.1)	21.5 (11.6 - 36.3)	
	Female (n=257)	Male (n=71)	
Proportion married before age 15	0.9 (0.3 - 2.2)	**	
Proportion married before age 18	34.1 (25.3 - 44.2)	2.7 (0.8 - 8.5)	
Age difference 5 years or more	49.3 (34.7 - 64.0) 0.9 (0.1 - 6.4)		

Note: Note: CI = *Confidence interval.*

Note: **Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

 $\it Note: Knowledge \ and \ prevalence \ of \ female \ genital \ mutilation/cutting \ (FGM/C) \ among \ 13-24-year-olds$

Table 8.3. Knowledge and prevalence of FGM/C among females 18-24 years old and 13-17 years old – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	18-24 years (n= 563)	13-17 years (n= 528)	
	Weighted % (95% CI)	Weighted % (95% CI)	
Ever heard of FGM/C	30.0 (19.6 - 43.0)	13.4 (8.8 - 19.7)	
	18-24 years (n=121)	13-17 years (n=58)	
Ever been circumcised	1.6 (0.2 - 10.0)	2.5 (0.3 - 19.0)	

SECTION 9: HEALTH CONDITIONS ASSOCIATED WITH VIOLENCE

Table 9.1.1. Mental health conditions by experience of sexual [1], physical [2], or emotional [3] violence before age 18, among 18-24-year-old females – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Mental distress in the past 30 days	Ever intentionally hurt themselves	Ever thought of suicide	Ever attempted suicide [4]	
	Weighted % (95% Cl)	Weighted % (95% Cl)	Weighted % (95% Cl)	Weighted % (95% Cl)	
Sexual violence in childhood					
Experienced sexual violence n [¥]	81.6 (58.1- 93.4)	14.5 (10.1- 20.4)	23.0 (16.5, 31.2)	36.7 (17.3- 61.5)	
No sexual violence n [¥]	70.4 (62.2-77.5)	7.4 (3.1-16.4)	7.6 (4.6-12.4)	35.1 (19.3-55.0)	
Physical violence in childhood					
Experienced physical violence n [¥]	74.8 (63.6-83.4)	10.4 (4.0-24.3)	12.5 (5.2-27.5)	40.3 (24.9-57.9)	
No physical violence n [¥]	72.8 (64.4-79.8)	6.5 (2.8-14.5)	8.9 (5.2-14.7)	32.1 (15.2-55.4)	
Emotional violence in childhood					
Experienced emotional violence n [¥]	77.4 (53.1-91.2)	20.4 (11.6-33.3)	21.3 (9.5-41.0)	40.8 (19.8-65.7)	
No emotional violence n [¥]	71.9 (61.1- 80.7)	6.5 (2.8-14.4)	8.9 (5.4-14.2)	34.9 (19.8-53.7)	

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.
[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.

[4] Among those who experienced thoughts of suicide.

n¥ represents the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

Table 9.1.2. Mental health conditions by experience of sexual [1], physical [2], or emotional [3] violence before age 18, among 18-24-year-old males – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Mental distress in the past 30 days	Ever intentionally hurt themselves	Ever thought of suicide	Ever attempted suicide [4]	
	Weighted % (95% Cl)	Weighted % (95% CI)	Weighted % (95% Cl)	Weighted % (95% CI)	
Sexual violence in childhood					
Experienced sexual violence n [¥]	86.2 (72.4- 93.4)	25.0 (7.5-57.9)	35.5 (18.5-57.2)	**	
No sexual violence n [¥]	77.7 (60.8-88.7)	4.1 (1.9-8.3)	4.9 (2.1-11.1)	**	
Physical violence in childhood					
Experienced physical violence n [¥]	83.5 (66.4- 92.8)	8.2 (3.7-17.5)	13.4 (6.0-27.6)	**	
No physical violence n [¥]	74.1 (54.7-85.9]	6.3 (2.6-14.2]	3.8 (1.3-10.4]	**	
Emotional violence in childhood					
Experienced emotional violence n [¥]	81.0 (53.2-94.1]	11.2 (3.4-31.4]	19.4 (9.1-36.6]	**	
No emotional violence n [¥]	77.1 (63.1-86.9]	6.4 (1.9-19.6]	3.7 (1.4-9.1]	**	

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.
[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you

were dead or had never been born, or being ridiculed, put down, or insulted. [4] Among those who experienced thoughts of suicide.

n¥ represents the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

*Note:****Unreliable estimate (RSE is greater than 50%), estimate is suppressed.*

Table 9.1.3. Sexual risk-taking behaviours by experience of sexual [1], physical [2], or emotional [3] violence before age 18, among 18-24-year-old females – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Multiple sexual partners in the past 12 months	Transactional sex in the past 12 months	Ever tested for HIV	
	Weighted % (95% CI)	Weighted % (95% CI)	Weighted % (95% CI)	
Sexual violence in childhood				
Experienced sexual violence n [¥]	5.8 (2.6-12.5)	9.0 (4.2-18.6)	88.2 (75.3-94.8)	
No sexual violence n [¥]	0.9 (0.3-2.8)	4.3 (1.9-9.4)	68.5 (57.5-77.8)	
Physical violence in childhood				
Experienced physical violence n [¥]	4.9 (1.9-12.5)	7.4 (3.0-17.1)	68 (51.9-80.7)	
No physical violence n [¥]	1.4 (0.3-6.1)	4.4 (1.6-11.7)	73.5(63.3-81.7)	
Emotional violence in childhood	b			
Experienced emotional violence n [¥]	5.9 (2.4-14.0)	8.4 (2.0-29.2)	70.7(50.5-85.1)	
No emotional violence n [¥]	1.4 (0.4-5.1)	4.9 (2.5-9.3)	72.7 (62.7-80.9)	

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Physical violence includes: slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.
[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.

n¥ represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

Table 9.1.4. Sexual risk-taking behaviours by experience of sexual [1], physical [2], or emotional [3] violence before age 18, among 18-24-year-old males – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Multiple sexual partners in the past 12 months	Ever tested for HIV
	Weighted % (95% CI)	Weighted % (95% CI)
Sexual violence in childhood		
Experienced sexual violence n [¥]	18.8 (7.8-39.0)	75.5 (43.7-92.6)
No sexual violence n [¥]	26.0 (12.0-47.4)	62.0 (49.2-73.3)
Physical violence in childhoo	d	
Experienced physical violence n [¥]	31.3 (13.8-56.6)	65.1 (45.1-80.9)
No physical violence n [¥]	19.9 (9.8-36.4)	61.8 (48.1-73.9)
Emotional violence in childho	bod	
Experienced emotional violence n [¥]	26.1 (15.0-41.5)	74.0 (57.4-85.8)
No emotional violence n [¥]	24.5 (9.0-51.4)	58.5 [42.8-72.6)

Table 9.1.5. Substance misuse and STI history by experience of sexual [1], physical [2], or emotional [3] violence before age 18, among 18-24-year-old females – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Binge drinking (5) in the past 30 days	Current smoker	Drug use in the past 30 days	Ever had symptoms or diagnosis of STI (4)		
	Weighted % (95% CI)	Weighted % (95% Cl)	Weighted % (95% CI)	Weighted % (95% CI)		
Sexual violence in childhood	l					
Experienced sexual violence n [¥]	**	**	**	44.1 (34.5-54.1)		
No sexual violence n [¥]	**	**	**	21.2 (14.2-30.3)		
Physical violence in childhoo	d					
Experienced physical violence n [¥]	**	**	**	31.7 (23.8-40.9)		
No physical violence n [¥]	**	**	**	20.7 (11.7-33.9)		
	Emotional violence in childhood					
Experienced emotional violence n [¥]	**	**	**	25.0 (16.6-36.0)		
No emotional violence n [¥]	**	**	**	25.4 (14.7-40.2)		

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood or peer.
[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.

Note: [4] STI (Sexually Transmitted Infection) symptoms include genital sore/ulcer.

Note: [5] Binge drinking included drinking 4 or more drinks on one occasion.

Note:nY represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

Note: ** Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Table 9.1.6. Substance misuse and STI history by experience of sexual [1], physical [2], or emotional [3] violence before age 18, among 18-24-year-old males – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Binge drinking (4) in the past 30 days	Current smoker	Drug use in the past 30 days	Ever had symptoms or diagnosis of STI (5)		
	Weighted % (95% Cl)	Weighted % (95% CI)	Weighted % (95% Cl)	Weighted % (95% CI)		
Sexual violence in child	nood					
Experienced sexual violence n [¥]	1.5 (0.4-6.0)	5.9 (1.4-22.0)	0.8 (0.1-6.7)	51.9 (25.1-77.6)		
No sexual violence n [¥]	2.7 (1.2-6.1)	3.7 (0.8-15.3)	1.3 (0.4-4.0)	30.5 (20.5-42.8)		
Physical violence in child	hood					
Experienced physical violence n [¥]	4.6 (1.9-10.5)	8.0 (2.3-24.6)	2.2 (0.6-7.8)	44.0 (31.3-57.6)		
No physical violence n [¥]	0.7 (0.3-1.6)	0.8 (0.2-2.7)	0.6 (0.2-2.0)	23.5 (14.6-35.6)		
Emotional violence in ch	Emotional violence in childhood					
Experienced emotional violence n [¥]	4.2 (0.9-16.7)	1.6 (0.3-9.7)	1.7 (0.3-9.4)	50.5 (28.7-72.0)		
No emotional violence n [¥]	1.9 (0.6-5.7)	4.6 (1.1-17.2)	1.1 (0.2-4.3)	27.4 (17.7-39.8)		

Note: Note: CI = *Confidence interval.*

Note: [5] STI (Sexually Transmitted Infection) symptoms include genital sore/ulcer.

Note:n¥ represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.z

Note:[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

^[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.
[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.
[4] Binge drinking included drinking 4 or more drinks on one occasion.

Table 9.2.1. Mental health conditions by experience of sexual [1], physical [2], or emotional [3] violence in the past 12 months, among 13-17-year-old females – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	1		1	1
	Mental distress in the past 30 days	Ever intentionally hurt themselves	Ever thought of suicide	Ever attempted suicide [4]
	Weighted % (95% Cl)	Weighted % (95% Cl)	Weighted % (95% CI)	Weighted % (95% CI)
Sexual violence in th	e past 12 months			
Experienced sexual violence n [¥]	85.9 (72.8- 93.5)	19.0 (6.3-44.9)	20.4 (6.6- 48.1)	30.6 (5.4-77.4)
No sexual violence n [¥]	52.1 (41.5-62.6)	3.9 (2.0- 7.4)	3.5 (1.8-6.5)	68.3 (30.2-91.4)
Physical violence in t	he past 12 months			
Experienced physical violence n [¥]	52.2 (33.5-70.3)	9.7 (3.8-22.7)	13.5 (5.2-30.4)	32.4 (10.4-66.4)
No physical violence n [¥]	54.9 (43.5-65.8)	3.8 (1.9-7.4)	2.4 (1.3-4.2)	92.4 (61.7-98.9)
Emotional violence in	n the past 12 months			
Experienced emotional violence n [¥]	74.2 (47.1-90.3)	10.2 (2.7-31.6)	13.9 (4.7-34.7)	25.6 (4.8-70.0)
No emotional violence n [¥]	50.9 (41.9-59.9)	4.2 (2.4-7.3)	3.2 (2.0-5.1)	79.0 (47.4-94.0)

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.
[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.
[4] Among those who experienced thoughts of suicide.

Note:n¥ represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

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Table 9.2.2. Mental health conditions by experience of sexual [1], physical [2], or emotional [3] violence in the past 12 months, among 13-17-year-old males – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Mental distress in the past 30 days	Ever intentionally hurt themselves	Ever thought of suicide	Ever attempted suicide [4]
	Weighted % (95% CI)	Weighted % (95% CI)	Weighted % (95% Cl)	Weighted % (95% Cl)
Sexual violence in the past	12 months			
Experienced sexual violence n [¥]	74.9 (47.2-90.8)	8.0 (2.1-26.3)	8.7 (2.0-30.4)	**
No sexual violence n [¥]	71.1 (55.0-83.3)	4.7 (1.8-11.6)	5.6 (1.7-17.2)	**
Physical violence in the past	t 12 months			
Experienced physical violence n [¥]	79.6 (63.6-89.7)	3.6 (0.8-14.1)	10.8 (1.8-44.4)	**
No physical violence n [¥]	66.9 (51.3-79.5)	5.6 (2.3-13.4)	2.9 (1.1-7.1)	**
Emotional violence in the pa	ast 12 months			·
Experienced emotional violence n [¥]	80.8 (58.1-92.7)	2.7 (0.3-19.0)	5.1 (2.9-8.9)	**
No emotional violence n [¥]	70.4 (54.9-82.3)	5.2 (1.9-13.5)	5.8 (1.9-16.9)	**

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.
[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.

[4] Among those who experienced thoughts of suicide.

Note:n¥ represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

Note: ** Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Table 9.2.3. Sexual risk-taking behaviours by experience of sexual [1], physical [2], or emotional [3] violence in the past 12 months, among 13-17-year-old females – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Multiple sexual partners in the past 12 months	Transactional sex in the past 12 months	Ever tested for HIV	
	Weighted % (95% CI)	Weighted % (95% CI)	Weighted % (95% CI)	
Sexual violence in the past 12	months			
Experienced sexual violence n [¥]	**	25.9 (6.8-62.8)	11.4 (2.8-36.6)	
No sexual violence n [¥]	**	11.2 (4.3-25.8)	20.9 (13.8-30.3)	
Physical violence in past 12 months				
Experienced physical violence n [¥]	**	10.0 (3.5-25.3)	15.2 (7.3-29.0)	
No physical violence n [¥]	**	29.0 (4.4-78.3)	21.8 (14.0-32.3)	
Emotional violence in the past	12 months			
Experienced emotional violence n [¥]	**	20.6 (4.5-58.4)	22.5 (12.0-38.2)	
No emotional violence n [¥]	**	12.3 (4.7-28.4)	19.7 (13.3-28.1)	

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.
[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.

n¥ represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

Note: **Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Table 9.2.4. Sexual risk-taking behaviours by experience of sexual [1], physical [2], or emotional [3] violence in the past 12 months, among 13-17-year-old males – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Multiple sexual partners in the past 12 months	Ever tested for HIV		
	Weighted % (95% CI)	Weighted % (95% CI)		
Sexual violence in the past 12 month	s			
Experienced sexual violence n [¥]	46.8 (7.8-90.1)	54.2 (27.9-78.3)		
No sexual violence n [¥]	6.6 (2.6-15.9)	16.4 (10.9-23.9)		
Physical violence in the past 12 mont	hs			
Experienced physical violence n [¥]	12.0 (3.7-32.6)	20.6 (8.3-42.6)		
No physical violence n [¥]	21.7 (10.2-40.1)	18.6 (12.7-26.4)		
Emotional violence in the past 12 months				
Experienced emotional violence n [¥]	15.7 (5.9-35.7)	10.4 (4.4-22.4)		
No emotional violence n [¥]	19.8 (8.4-39.7)	20.4 (14.1-28.7)		

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.
[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.

n¥ represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

Table 9.2.5. Substance misuse and STI history by experience of sexual [1], physical [2], or emotional [3] violence in the past 12 months, among 13-17-year-old females – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Binge drinking (4) in the past 30 days	Current smoker	Drug use in the past 30 days	Ever had symptoms or diagnosis of STI (5)	
	Weighted % (95%	Weighted %	Weighted %	Weighted % (95%	
	CI)	(95% CI)	(95% CI)	CI)	
Sexual violence in the past 1	2 months				
Experienced sexual violence n [¥]	**	**	**	33.6 (11.6-66.0)	
No sexual violence n [¥]	**	**	**	9.5 (6.1-14.7)	
Physical violence in the past	12 months				
Experienced physical violence n [¥]	**	**	**	18.7 (9.9-32.5)	
No physical violence n [¥]	**	**	**	8.5 (5.1-13.9)	
Emotional violence in the past 12 months					
Experienced emotional violence n [¥]	**	**	**	21.5 (10.9-38.0)	
No emotional violence n [¥]	**	**	**	9.4 (5.7-15.9)	

Note: Note: CI = *Confidence interval.*

[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.

Note:[1] Sexual violence includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.

Note:[4] Binge drinking included drinking 4 or more drinks on one occasion.

Note: [5] STI (Sexually Transmitted Infection) symptoms include genital sore/ulcer.

Note:nY represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

Note: ** Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Table 9.2.6. Substance misuse and STI history by experience of sexual [1], physical [2], or emotional [3] violence in the past 12 months, among 13-17-year-old males – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Binge drinking (4) in the past 30 days	Current smoker	Drug use in the past 30 days	Ever had symptoms or diagnosis of STI (5)	
	Weighted % (95% Cl)	Weighted % (95% Cl)	Weighted % (95% CI)	Weighted % (95% Cl)	
Sexual violence in the past	: 12 months				
Experienced sexual violence n [¥]	1.7 (0.1-17.7)	**	**	17.8 (10.6-28.3)	
No sexual violence n [¥]	0.2 (0.1-1.0)	**	**	43.6 (18.6-72.3)	
Physical violence in the pa	st 12 months				
Experienced physical violence n [¥]	0.3 (0.0-2.5)	**	**	26.4 (12.7-47.0)	
No physical violence n [¥]	0.3 (0.1-1.6)	**	**	15.6 (9.1-25.5)	
Emotional violence in the	Emotional violence in the past 12 months				
Experienced emotional violence n [¥]	1.0 (0.1-8.3)	**	**	18.9 (10.5-31.6)	
No emotional violence n [¥]	0.2 (0.0-8.3)	**	**	19.6 (10.7-33.1)	

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes: unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.
[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.

[4] Binge drinking included drinking 4 or more drinks on one occasion.

Note: [5] STI (Sexually Transmitted Infection) symptoms include genital sore/ulcer.

Note:n¥ represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

Note: **Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

Table 9.3.1. Missing school as a result of any sexual [1] or physical [2] violence – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

Missed school due to any experience of	Females (n= 33)	Males (n= 17)	
sexual violence	Weighted % (95% CI)	Weighted % (95% CI)	
18-24-year-olds who experienced any sexual violence in childhood	18.8 (12.9-26.6)	3.5 (0.4-26.6)	
	Females (n= 13)	Males (n= 11)	
13-17-year-olds who experienced any sexual violence	25.9 (5.1-69.3)*	58.0 (10.7-94.1)*	
Missed school due to any experience of	Females (n= 5)	Males (n= 2)	
physical violence	Weighted % (95% CI)	Weighted % (95% CI)	
18-24-year-olds who experienced any physical violence in childhood	33.6 (0.4-98.6)*	20.9 (0.1-99.1)*	
	Females (n= 0)	Males (n= 0)	
13-17-year-olds who experienced any physical violence	(-)	(-)	

Note: CI = Confidence interval.

Note:(-) No estimates.

- Note:[1] Sexual violence includes unwanted sexual touching, attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.
- Note:[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon.

Note:*Unreliable estimate (RSE is greater than 30% but less than or equal to 50%), result should be interpreted with caution.

SECTION 10: SEXUAL RISK-TAKING BEHAVIOURS AND HIV

Table 10.1.1. Sexual risk-taking behaviours among 19-24-year-olds who had sexual intercourse in the past 12 months – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 500)	Males (n= 323)
	Weighted % (95% CI)	Weighted % (95% CI)
Ever had sex (lifetime)	67.3 (57.7-75.7)	62.4 (44.3-77.7)
	Females (n= 371)	Males (n= 209)
Had sex in the past 12 months among those who ever had sex	76.3 (66.2-84.2)	81.2 (65.2-90.9)
Number of sexual partners in the past 12 months, among those who had sex in the past 12 months	Females (n=301)	Males (n= 162)
One	96.6 (92.9-98.4)	68.4 (49.4-82.8)
More than one	2.7 (1.1-6.4)	31.0 (16.6-50.4)
	Females (n= 52)	Males (n= 0)
Transactional sex in the past 12 months [1]	35.1 (25.8-45.6)	(-)

Table 10.1.2. Prevalence of having multiple sexual partners in the past 12 months by experience of sexual [1], physical [2], or emotional [3] violence before age 18, among 19-24-year-olds who had sexual intercourse in the past 12 months – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females	Males
	Multiple sex partners in the past 12 months	Multiple sex partners in the past 12 months
	Weighted % (95% CI)	Weighted % (95% Cl)
	Females (n= 371)	Males (n= 209)
Sexual violence in childhood		
Experienced sexual violence n [¥]	57.5 (21.6-86.9)	11.7 (6.7-19.6)
No sexual violence n [¥]	35.2 (10.8-71.1)	88.3 (80.4-93.3)
Physical violence in childhoo	d	
Experienced physical violence n [¥]	53.2 (12.1-90.4)	55.2 (37.0-72.1)
No physical violence n [¥]	46.8 (9.6-87.9)	40.4 (27.6-54.6)
Emotional violence in childho	bod	
Experienced emotional violence n [¥]	43.3 (8.1-86.9)	23.3 (8.5-49.9)
No emotional violence n [¥]	56.7 (13.1-91.9)	76.2 (49.3-91.4)

Note: Note: CI = *Confidence interval.*

Note:[1] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

[2] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun, or other weapon by intimate partner, parent/adult relative, adult in the community or neighbourhood, or peer.
[3] Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed, put down, or insulted.

Note:n¥ represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

Table 10.2.1. HIV testing behaviour among 13-24-year-olds [1] by experience of sexual violence – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females		Males	
	n¥	Weighted % (95% CI)	n [¥]	Weighted % (95% CI)
Ever tested for HIV	1338	45.1 (38.0-52.3)	927	40.7 (31.0- 51.1)
Ever tested for HIV by	Females		Males	
experience of sexual violence in childhood [2]	n¥	Weighted % (95% CI)	n¥	Weighted % (95% CI)
Experienced sexual violence	110	66.3 (55.4-75.7)	55	61.9 (42.0- 78.5)
No sexual violence	467	42.0 (33.0-51.6)	301	39.5 (30.4- 49.4)
	1			
Ever tested for HIV by	Females		Males	
experience of sexual violence in the past 12 months [2]	n¥	Weighted % (95% CI)	n¥	Weighted % (95% Cl)
Experienced sexual violence	53	55.1 (42.8-66.8)	47	67.1 (36.9- 87.7)
No sexual violence	524	44.5 (37.2-52.1)	309	38.3 (31.6- 45.4)

Note: Note: CI = *Confidence interval.*

Note:[1] Age of consent for HIV testing in Uganda is 12.

Note:[2] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex.

Note:n Y represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

Table 10.2.2. Reasons for not getting tested for HIV, among 13-24-year-olds who ever had sex but were never tested for HIV – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 463)	Males (n= 299)	
Reasons for not testing for HIV	Weighted % (95% CI)	Weighted % (95% CI)	
No knowledge about HIV test	4.9 (2.3-10.2)	13.9 (9.2-20.5)	
Do not know where to get HIV test	1.2 (0.5-2.9)	2.9 (1.0-8.5)	
Tests costs too much	0.8 (0.2-2.9)	1.3 (0.4-4.1)	
Transport to test site costs too much	0.9 (0.3-3.3)	1.0 (0.2-4.1)	
Test site too far away	0.5 (0.1-3.2)	4.0 (0.9-15.6)	
Afraid husband/partner will know about test/ test results	0.4 (0.1-1.5)	0.2 (0.0-1.5)	
Afraid others will know about test/test results	1.5 (0.6-3.8)	4.5 (2.6-7.7)	
Do not need test/low risk	2.6 (1.0-6.6)	8.2 (3.7-17.4)	
Do not want to know if I have HIV	3.7 (1.8-7.5)	2.2 (1.0-5.0)	
Cannot get treatment if I have HIV	0.4 (0.1-2.7)	0.9 (0.2-4.5)	
Other	2.9 (1.1-7.4)	3.5 (1.4-8.4)	

Note: Note: CI = *Confidence interval.*

SECTION 11: ATTITUDES AND BELIEFS RELATED TO GENDER AND VIOLENCE, AND VIOLENCE PERPETRATION

Table 11.1.1. Attitudes and beliefs related to gender and violence among 13-17-yearolds and 18-24-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females	Males			
	Weighted % (95% CI)	Weighted % (95% CI)			
Acceptance of one or more reasons for wife beating [1], by age group					
	Females (n=716)	Males (n=532)			
Acceptance of wife beating among 13-17-year- olds	58.6 (50.4 – 66.3)	46.8 (31.0 – 63.3)			
	Females (n=622)	Males (n=395)			
Acceptance of wife beating among 18-24-year- olds	56.8 (44.6 – 68.3)	47.1 (34.9 – 59.6)			
Endorsement of one or more harmful beliefs a [2], by age group	bout gender, sexual behaviou	ur, and intimate partner violence			
	Females (n=716)	Males (n=532)			
Endorsement of traditional norms among 13-17-year-olds	79.0 (70.6 – 85.5)	83.5 (68.1 – 92.3)			
	Females (n=622)	Males (n=395)			
Endorsement of traditional norms among 18-24-year-olds	82.0 (73.1 – 88.4)	90.6 (83.0 – 95.0)			

Note: Note: CI = *Confidence interval.*

Note:[1] Includes respondents who endorsed one or more of the following: it is acceptable for a husband to beat his wife if she: goes out without telling him; neglects the children; argues with him; refuses to have sex with him; is suspected of having an affair.

Note:[2] Includes respondents who endorsed one or more of the following: men decide when to have sex; men need more sex than women; men need other women; women who carry condoms are "loose;" women should tolerate violence to keep the family together.

Table 11.2.1. Physical violence [1] perpetration among 18-24-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n=622)	Males (n=395)		
	Weighted % (95% CI)	Weighted % (95% CI)		
Perpetrated physical violence ever	5.2 (2.9 – 9.2)	8.6 (4.9 – 14.7)		
	·			
Physical violence perpetration (ever) by	Females (n = 112)	Males (n = 45)		
experience of sexual violence in childhood	Weighted % (95% CI)	Weighted % (95% CI)		
Experienced sexual violence in childhood	8.5 (5.2 – 13.6)	15.0 (6.4 – 31.1)		
	Females (n = 502)	Males (n = 343)		
No sexual violence in childhood	4.4 (1.8 – 10.4)	8.3 (4.1 – 16.2)		
Physical violence perpetration (ever) by	Females (n = 158)	Males (n = 127)		
experience of physical violence in childhood	Weighted % (95% CI)	Weighted % (95% CI)		
Experienced physical violence in childhood	4.9 (1.8 – 13.0)	12.0 (5.6 – 23.9)		
	Females (n = 426)	Males (n = 226)		
No physical violence in childhood	5.4 (2.8 – 10.1)	6.8 (2.2 – 19.0)		

Table 11.2.2. Physical violence [1] perpetration among 13-17-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n=716)	Males (n=532)
	Weighted % (95% CI)	Weighted % (95% CI)
Perpetrated physical violence ever	1.7 (0.9 – 3.4)	1.3 (0.6 – 2.9)
Physical violence perpetration (ever) by	Females (n = 36)	Males (n = 33)
experience of sexual violence in the past 12 months	Weighted % (95% CI)	Weighted % (95% CI)
Experienced sexual violence	6.1 (1.4 – 23.0)	6.0 (0.7 – 36.9)
	Females (n = 667)	Males (n = 486)
No sexual violence	1.4 (0.6 – 3.5)	1.0 (0.5 – 1.7)
Physical violence perpetration (ever) by	Females (n = 176)	Males (n =156)
experience of physical violence in the past 12 months	Weighted % (95% Cl)	Weighted % (95% CI)
Experienced physical violence	(-)	1.1 (0.2 – 7.5)
	Females (n = 537)	Males (n = 367)
No physical violence	2.3 (1.0 – 5.1)	1.4 (0.8 – 2.4)

Note: Note: CI = *Confidence interval.*

Note:(-) No estimates.

Note: [1] Violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun or other weapon, or forcing another person to have sex when they did not want to; Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured (threats, harassment, or tricking) sex; Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun or other weapon. Table 11.3.1. Physical intimate partner [1] violence perpetration [2] by experience of sexual violence [3] or physical violence [4] before age 18, among 18-24-year-olds who ever had a partner – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females (n= 427)	Males (n= 249)
	Weighted % (95% CI)	Weighted % (95% Cl)
Perpetrated physical intimate partner violence	4.7 (2.4 – 9.1)	10.8 (6.3 – 17.9)
Intimate partner violence perpetration	Females (n = 101)	Males (n = 39)
(ever) by experience of sexual violence in childhood [3]	Weighted % (95% CI)	Weighted % (95% CI)
Experienced sexual violence in childhood	7.2 (3.3 – 14.8)	1.7 (0.2 – 16.6)
	Females (n = 370)	Males (n = 210)
No sexual violence in childhood	3.8 (1.3 – 10.8)	12.3 (6.3 – 22.5)
Intimate partner violence perpetration	Females (n= 118)	Males (n= 85)
(ever) by experience of physical violence in childhood [4]	Weighted % (95% CI)	Weighted % (95% CI)
Experienced physical violence in childhood	3.2 (1.1 – 10.6)	12.4 (3.5 – 35.4)
	Females (n= 331)	Males (n= 137)
No physical violence in childhood	5.0 (2.3 – 10.6)	9.6 (3.0 – 27.0)

Note: Note: CI = *Confidence interval.*

- Note:[1] Intimate partner includes: current or previous boyfriend, girlfriend, romantic partner, husband or wife.
 [2] Violence includes: slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun or other weapon, or forcing another person to have sex when they did not want to.
- Note:[3] Sexual violence includes unwanted sexual touching, unwanted attempted sex, physically forced sex, and pressured sex (through harassment or threats).
- Note:[4] Physical violence includes slapping, pushing, shoving, or intentionally thrown something at to hurt, punching, kicking, whipping, or beaten with an object, choking, suffocating, tried to drown or burn intentionally, using or threatened with a knife, gun or other weapon.

SECTION 12: CHARACTERISTICS ASSOCIATED WITH VIOLENCE

Characteristics associated with violence among 18-24-year-olds

Table 12.1. Characteristics of 18-24-year-olds by experience of sexual or physical violence in the past 12 months – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females	Females			
	n¥	Weighted % (95% CI)	n¥	Weighted % (95% Cl)	
Orphan status (lost one or both parents in childhood)					
Orphan	185	17.8 (10.0 – 29.6)	117	38.8 (14.5 – 70.3)	
Non-orphan	336	19.8 (14.2 – 26.9)	232	29.3 (19.6 – 41.4)	
School attendance					
Completed primary school or less	495	21.8 (15.6 – 29.5)	253	37.6 (21.0 – 57.8)	
Completed secondary school or more	122	16.2 (11.8 – 21.7)	139	22.2 (12.2 – 37.1)	
Working for money or other payment i	n the past year				
Worked	273	21.0 (12.9 – 32.2)	247	37.8 (25.9 – 51.5)	
Did not work	345	20.5 (15.7 – 26.2)	144	20.6 (8.4 – 42.3)	
Witnessed violence at home					
Witnessed violence at home	209	34.3 (26.1 – 43.6)	153	47.6 (33.2 – 62.3)	
Did not witness violence at home	413	14.4 (10.3 – 19.7)	242	17.5 (7.5 – 35.8)	
Marriage or cohabitation					
Married or cohabiting	189	27.4 (19.2 – 37.5)	64	52.7 (34.4 – 70.3)	
Unmarried and not cohabiting	410	18.1 (12.8 – 25.0)	318	26.9 (14.2 – 45.1)	
Food or material insecurity	·				
Experienced food insecurity	24	6.2 (1.3 – 25.7)	10	33.5 (5.2 – 82.3)	
Did not experience food insecurity	591	21.2 (15.9 – 27.6)	282	31.3 (18.2 – 48.2)	

Disability status				
Has any form of disability	153	35.6 (24.0 – 49.3)	110	37.0 (19.9 – 58.2)
Has no form of disability	459	15.8 (10.4 – 23.4)	279	28.3 (15.7 – 45.5)

Note: Note: CI = *Confidence interval.*

 $Note: n^{\gamma}$ represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

CHARACTERISTICS ASSOCIATED WITH VIOLENCE AMONG 13-17-YEAR-OLDS

Table 12.2. Characteristics of 13-17-year-olds by experience of sexual or physical violence in the past 12 months – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females		Males			
	n [¥]	Weighted % (95% CI)	n [¥]	Weighted % (95% CI)		
Orphan status (lost one or both parents in childhood)						
Orphan	156	27.3 (19.8 – 36.4)	114	34.7 (19.6 – 53.6)		
Non-orphan	439	26.8 (19.2 – 36.2)	320	43.4 (31.5 – 56.1)		
School attendance						
Not attending school	75	24.6 (14.1 – 39.2)	48	31.1 (17.4 – 49.1)		
Attending school	615	29.3 (20.5 – 40.0)	463	40.7 (28.7 – 53.9)		
Working for money or	other payment in	the past year				
Worked	150	30.0 (23.7 – 56.8)	143	56.7 (43.4 – 69.1)		
Did not work	562	26.0 (18.8 – 34.7)	380	31.4 (19.5 – 46.4)		
Witnessed violence at	home					
Witnessed violence at home	213	53.9 (42.1 – 65.4)	189	60.2 (51.7 – 68.1)		
Did not witness violence at home	503	15.2 (11.8 – 19.5)	343	21.3 (99.8 – 40.3)		
Marriage or cohabitati	on					
Married or cohabiting	6	12.7 (0.9 – 69.4)		**		
Unmarried and not cohabiting	691	28.0 (19.2 – 39.0)	516	39.9 (29.3 – 51.5)		
Food or material insec	urity					
Experienced food insecurity	51	31.1 (12.6 – 58.5)	13	56.9 (19.6 – 87.7)		
Did not experience food insecurity	658	27.9 (18.3 – 40.1)	507	39.6 (29.0 – 51.2)		

Disability status				
Has any form of disability	158	34.7 (23.7 – 47.7)	146	62.6 (39.6 – 81.1)
Has no form of disability	541	27.5 (17.8 – 39.9)	371	31.1 (22.0 – 41.8)

Note: Note: CI = *Confidence interval.*

Note:n Y represent the denominator of the subgroup for which the analyses was run, such as those who experienced sexual violence.

Note: ** Unreliable estimate (RSE is greater than 50%), estimate is suppressed.

SECTION 13: INSPIRE INDICATORS

INSPIRE indicators among 18-24-year-olds

Table 13.1. INSPIRE indicators among 18-24-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females	Males
Norms and values	Weighted % (95% CI)	Weighted % (95% CI)
	Females (n= 603)	Males (n= 382)
Agreement with the necessity of corporal punishment by parents	19.5 (14.7 - 25.4)	28.5 (18.3 - 41.6)
	Females (n= 603)	Males (n= 382)
Agreement with the necessity of corporal punishment by teachers	24.1 (17.3 - 32.5)	30.9 (18.2 - 47.4)
	Females (n= 622)	Males (n= 395)
Acceptance of wife beating [1]	56.8 (44.6 - 68.3)	47.1 (34.9 - 59.6)
	Females (n= 622)	Males (n= 395)
Endorsement of traditional norms and beliefs about gender, sexuality, and violence [2]	82.0 (73.1 - 88.4)	90.6 (83.0 - 95.0)
Income and economic strengthening		
	Females (n= 189)	(-)
Married or cohabitating females who had some responsibility for how money was spent	42.0 (34.8 - 49.6)	(-)
Education and life skills		
	Females (n= 406)	Males (n= 234)
Early sexual debut: first sex at or before age 15	5.5 (2.7 - 10.9)	7.0 (3.5 - 13.5)
	Females (n= 606)	Males (n= 384)
Child marriage: married or cohabitating before age 18	15.0 (10.9 - 20.2)	2.1 (0.9 - 4.9)
	Females (n= 189)	Males (n= 188)
Ever been taught anger management in school	73.5 (61.5 - 82.8)	70.0 (55.4 - 81.4)

	Females (n= 189)	Males (n= 188)
Ever been taught how to avoid physical fights and violence in school	87.3 (79.3 - 92.6)	84.4 (73.9 - 91.2)
	Females (n= 189)	Males (n= 187)
Ever been taught how to avoid bullying in school	82.7 (71.4 - 90.2)	75.5 (62.8 - 85.0)

INSPIRE INDICATORS AMONG 13-17-YEAR-OLDS

Table 13.2. INSPIRE indicators among 13-17-year-olds – Uganda Humanitarian Violence Against Children Survey (HVACS), 2022

	Females	Males
	Weighted % (95% CI)	Weighted % (95% Cl)
Safe environments		
	Females (n= 696)	Males (n= 518)
Missing school or not leaving home due to fear of violence or safety problems in the past 12 months	11.2 (5.8 - 20.4)	14.8 (7.1 - 28.4)
	Females (n= 716)	Males (n= 532)
Witnessed violence in the neighbourhood in the past 12 months	14.8 (9.2 - 22.9)	39.7 (29.3 - 51.1)
Parent and caregiver support		
	Females (n= 716)	Males (n= 532)
Parents' use of positive parental discipline in the past 12 months	66.8 (55.3 - 76.5)	52.6 (39.8 - 65.2)
	Females (n= 694)	Males (n= 506)
Close relationship with mother	89.6 (84.7 - 93.0)	87.2 (77.8 - 93.0)
	Females (n= 641)	Males (n= 494)
Close relationship with father	61.5 (53.0 - 69.4)	69.3 (57.2 - 79.1)
	Females (n= 703)	Males (n= 521)
Easy to talk to mother	83.0 (75.0 - 88.9)	83.3 (73.4 - 90.0)
	Females (n= 703)	Males (n= 520)
Easy to talk to father	83.0 (75.0 - 88.9)	68.6 (57.0 - 78.2)
	Females (n= 716)	Males (n= 532)
High parental monitoring and supervision	77.7 (69.1 - 84.4)	67.6 (54.8 - 78.2)

	Females (n= 716)	Males (n= 532)
Parents' use of physical discipline or verbal aggression in the past 12 months	33.2 (23.5 - 44.7)	47.4 (34.8 - 60.2)
Income and economic strengthening		
	Females (n= 712)	Males (n= 523)
Experiencing food insecurity	8.6 (5.5 - 13.2)	2.1 (0.8 - 5.1)
Education and life skills		
	Females (n= 690)	Males (n= 511)
Currently enrolled in school	91.9 (87.5 - 94.8)	93.4 (88.7 - 96.3)
	Females (n= 675)	Males (n= 509)
Binge drinking [1] in the past 30 days	0.2 (0.0 - 1.1)	0.3 (0.1 - 1.0)
	Females (n= 442)	Males (n= 261)
In a physical fight in the past 12 months	6.6 (3.7 - 11.5)	13.7 (6.0 - 28.4)
	Females (n= 614)	Males (n= 462)
Ever been taught anger management in school	65.0 (57.4 - 71.9)	60.4 (45.9 - 73.3)
	Females (n= 615)	Males (n= 462)
Ever been taught how to avoid physical fights and violence in school	80.7 (73.0 - 86.6)	88.7 (82.9 - 92.7)
	Females (n= 614)	Males (n= 462)
Ever been taught how to avoid bullying in school	60.4 (52.1 - 68.1)	71.3 (59.2 - 81.0)

Norms and values for 13-17 years				
	Females (n= 701)	Males (n= 519)		
Agreement with the necessity of corporal punishment by parents	18.5 (15.0 - 22.6)	21.4 (12.9 - 33.5)		
	Females (n= 701)	Males (n= 519)		
Agreement with the necessity of corporal punishment by teachers	21.7 (15.5 - 29.5)	37.4 (25.1 - 51.7)		

Note: Note: CI = *Confidence interval.*

Note: [1] Binge drinking included drinking 4 or more drinks on one occasion.

16. APPENDIX B: 2022 UGANDA HVACS RESPONSE PLAN FOR PARTICIPANTS

In conducting any Violence Against Children Survey (VACS), it is anticipated that there will be participants who have experienced violence and will need intervention. The intervention is either to immediately remove children from danger, or help them contend with the consequences of violence. All VACS include a detailed and specific protocol response plan to provide referrals to participants and address needs that may arise. The Uganda HVACS response plan was based on existing CDC and UNICEF VACS response plan guidance, as well as service provision protocols by UNHCR and its implementing partners. The response plan included development of criteria for offering referrals, establishment of protocols for providing referrals, and the identification of potential danger to the participants.

B.1. Referrals for Participants and Services

Caseworkers affiliated with UNHCR implementing partners in charge of child protection and gender-based violence service provision in each settlement were identified and incorporated into each data collection team.

Each data collection team was accompanied by at least one caseworker throughout the fieldwork period, and provided immediate counselling to study participants that required it, in addition to referrals for further care, when necessary. Any member of the household from which the respondent was recruited was also offered general psychosocial support not focused on violence but on any issue that the household head felt was relevant at the time. In addition, a directory of services specific to each settlement was made available to survivors identified through the survey. These directories were a collation of community services offered by government and nongovernmental humanitarian agency services in each settlement, along with the contact information of the focal points concerned. A deliberate effort was made to include a range of available services in various sectors to ensure that the directories did not appear to have been developed for a study on violence. Interviewers were trained to highlight VAC-related services in the directory for participants at the end of the interview.

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B.2. Direct Referral Criteria and Procedures

During the interview, participants who met any one or more of the following criteria were offered a referral to the caseworker:

The participant becomes upset during the interview (for example, tearful, angry, sad, shaking, difficulty breathing).

The participant shares at any point during the interview that he or she does not feel safe in his or her current living situation, including in his or her home or community due to violence.

The participant has experienced violence in the past 12 months.

The participant is under the age of 18 and traded sex for money or goods in the past 12 months (i.e., sex trafficking of minors).

The participant reports that he or she is in immediate danger.

The participant asks for help for violence, regardless of what they may or may not have disclosed during the interview.

If the participant indicated that he or she wanted a direct referral, the interviewer obtained their consent and referred them to the caseworker who was part of the survey team. The caseworker gave first-line support. If a respondent needed more support, the caseworker referred him or her for further care. It is important to note that the interviewers did not give any of the information shared during the interview to the caseworker unless the participant requested that they do so.

B.3. Managing Acute Cases

An acute case refers to cases where:

The participant shared at any point during the interview that he or she does not feel safe in his or her current living situation, including in his or her home or community due to violence; or

The participant reported that he or she was in immediate danger.

If an acute case was identified, the interviewers followed the response plan: The interviewer (via mobile phone) immediately alerted the team leader and the caseworker to the fact that an acute case had been identified. With the participant's consent, the caseworker offered initial counselling followed by a referral for further care or other services for those participants who needed such help. If the participant declined the referral, then their wishes were respected and they were reminded to make use of the information in the directory of services if they ever changed their minds.

During data collection, 241 participants were eligible for the response plan referral and all 241 of them agreed to be referred to the caseworker. The caseworker provided firstline support and referred 164 participants who required further care/support.

Service Cascade	Males	Females
Eligible for referral	46	195
Agreed to referral	46	195
Received first-line support *	46	195
Referred for other services	16	148

* Caseworkers were part of the survey team and were to provide first-line support to all consenting participants if they accepted the offer of support services.

The development and implementation of the 2022 Uganda HVACS was led by the Baobab Research Program Consortium in collaboration with the Department of Refugees in the Office of the Prime Minister, the UNHCR Regional Bureau, and UNHCR-Uganda and its implementing partners with technical support from the CDC in Atlanta and Together for Girls. The 2022 Uganda HVACS methodology follows the VACS conducted in several lowand middle-income countries and builds on guidance on conducting VACS in humanitarian settings developed in 2020 by Together for Girls, CDC, International Rescue Committee, along with other partners. The survey was implemented between March and April 2022 in all 13 refugee settlements in Uganda.

C.1. Sampling Frame and Sample Size Selection

The sampling frame for the 2022 Uganda HVACS included all zones – as defined by UNHCR – in all the 13 refugee settlements in the country. The settlements included Adjumani in

Adjumani district, Bidibidi in Yumbe district, Imvepi in Terego district, Kiryandongo in Kiryandongo district, Kyaka II in Kyegegwa district, Kyangwali in Kikuube district, Lobule in Koboko district, Nakivale in Isingiro district, Oruchinga in Isingiro district, Palabek in Lamwo district, Palorinya in Moyo district, Rhino in Madi-Okollo/Terego districts, and Rwamwanja in Kamwenge district. The sample size was determined from a standard cluster sample formula where an estimated prevalence of 35% sexual violence in childhood for females and 17% sexual violence in childhood for males based on 2015 Uganda VACS results were used.

A three-stage cluster sampling method was used in the 2022 Uganda HVACS. In the first stage of selection, 56 zones were randomly selected from the list of 109 zones provided by UNHCR and the Department of Refugees in the Office of the Prime Minister. In the second stage, a fixed number of households were selected by equal probability systematic sampling. In the third stage, one eligible respondent (male or female, depending on the zone) was randomly selected from among all eligible respondents ages 13-24 in each household for the interview questionnaire.

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The Uganda HVACS used a split sample approach, such that the survey for females was conducted in different zones than the survey for males. This approach was to protect the confidentiality of participants by eliminating the chance that perpetrators and survivors of violence would be interviewed in the same community, and that perpetrators would discover the purpose of the study and possibly retaliate against participants.

C.2. Inclusion Criteria and Selection of Households and Participants

This survey included females and males living in selected households in refugee settlements in Uganda who were between the ages of 13 and 24 at the time of the survey, and who spoke one of the survey languages: English, Kinyabwisha, Kiswahili, Acholi, and Juba Arabic. Survey teams, to the extent possible, clarified questions when asked by a respondent with lesser proficiency in one of the survey languages. Females and males with mental disabilities who did not have the capacity to understand the questions and those with significant physical disabilities (e.g., hearing and speech impairment) were excluded from the study. Females and males living in institutions such as hospitals, prisons, nursing homes, and other such institutions were not included in the survey.

C.3. Sample Weights

Weighting is a method used to obtain parameters from the dataset resulting from sampling in order to represent the total population. The HVACS used a three-step weighting procedure: (Step 1) computation of base weight for each sample participant; (Step 2) adjustment of the base weights for differential nonresponse in the sample; and (Step 3) poststratification calibration adjustment of weights to known population totals. Sample weighting provides representative parameter estimates from survey data. The Baobab research team weighted the data with technical support from the CDC to obtain parameters that represented the total population of adolescents and young adults ages 13-24 in refugee settlements in Uganda. A three-step weighting procedure was applied:

Step 1 – computation of base weight for each sample respondent.

Step 2 – adjustment of the base weights for differential nonresponse in the sample.

Step 3 – calibration of the adjusted weights to known population totals.

The base weight of a respondent in any probability sample is one divided by the overall probability of selection for the respondent given the steps completed in selecting the respondent (Step 1). Included in the calculations of the base weight were the probabilities of selection of zones, selection of households, gender specification, and selection of eligible individuals. In Step 2, base weights were adjusted to account for the losses in the sample outcome due to differential nonresponse. In this step, nonresponse adjustments were made for nonresponding households, and nonresponding respondents. The householdlevel nonresponse adjustment was performed by using weighted data at the settlement level. For the person-level nonresponse adjustment, weighting cells were formed taking into account age group (13-17 or 18-24) and sex. In the final stage of the weighting process (Step 3), calibration adjustment was done to adjust weights to conform with 2022 data on the population of adolescents and youth in refugee settlements distributed by age group (13-17 or 18-24) and gender. These variables were used to form weighting cells. The final weights assigned to each responding unit were computed as the product of the base weights, the nonresponse adjustment factors, and post-stratification calibration adjustment factors. The Baobab research team produced weighted point estimates and 95% confidence intervals using Stata statistical software (version 14.0) with technical support from the CDC. The Baobab research team produced a complete description of the findings, including reporting frequencies and percentages on the principal variables of interest. Charts and diagrams were used to display data. Tables were created to illustrate distributions of characteristics associated with sexual behaviour and practices; physical, emotional, and sexual violence; and utilisation of health care services, counselling services, and other services by respondents.

C.4. Response Rates

A total of 8,643 households were sampled (5,087 for females and 3,556 for males) and 4,707 visited during the study (2,711 for females and 1,996 for males). The household response rates were 53.3% for females and 56.1% for males. Within all visited households, a household members' listing was completed, from which one eligible respondent residing in the household was identified and interviewed. As a result, a total of 2,265 individuals ages 13-24 participated in the 2022 Uganda HVACS. This included 1,338 females and 927 males who completed the individual questionnaire, yielding an individual response rate of 87.5% for females and 90.1% for males respectively. The combined household and individual response rates provide an overall response rate for females of 46.6% and for males of 50.6%.

C.5. Weighted Percentages and Confidence Intervals

The HVACS results are based on a sample of the population in refugee settlements rather than a census, therefore there is a degree of uncertainty and error associated with the point estimates. Survey weights were created and applied to each individual record to adjust for the probability of selection, differential nonresponse, and calibration to the 2022 population in refugee settlements. The estimates in the 2022 Uganda HVACS are accompanied by a 95% confidence interval. This range indicates that, for 95 in 100 samples completed in the same way as the HVACS, the true population prevalence of violence will be between the upper and lower confidence interval values. For example, if the expected sexual violence prevalence in the refugee settlements in Uganda is 30%, with a confidence interval of 4%, this means that, if we could survey all children in the refugee settlements at the same time, the HVACS data estimate that between 26% and 34% of the total child population in the settlements have experienced sexual violence. In short, the confidence interval helps determine how effectively prevalence is measured and how to make inferences about the population in the refugee settlements.

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