



Contents lists available at [ScienceDirect](#)

Child Abuse & Neglect



Research article

The relationship between parental presence and child sexual violence: Evidence from thirteen countries in sub-Saharan Africa[☆]

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ARTICLE INFO

Article history:

Received 13 August 2015

Received in revised form 21 October 2015

Accepted 24 October 2015

Available online xxx

Keywords:

Orphans

Sub-Saharan Africa

Child sexual abuse

HIV/AIDS

Adolescents

ABSTRACT

There are compelling reasons to believe that orphans – many millions due to the AIDS epidemic – are more likely to be sexually victimized during childhood. Few studies have empirically investigated sexual violence disparities, and those that do suffer from methodological limitations and limited geographic scope. We used nationally representative data on female adolescents (15–17 years) from 13 countries in sub-Saharan Africa. We built multilevel logistic models to test for an association between the dependent variables (orphanhood and parental absence) and sexual violence, both within countries and pooled across all countries. Approximately 10% of adolescent girls reported past experiences of sexual violence; a third of those victimized were 14 years or younger at the time of their first forced encounter. Paternal orphaning (OR 1.36, $p \leq 0.01$), double orphaning (OR 1.47, $p \leq 0.05$), and paternal absence (OR 1.28; $p \leq 0.05$) were significantly associated with experiencing sexual violence in pooled analyses. Fewer findings reached significance within individual countries. Our findings suggest that the lack of a father in the home (due to death or absence) places girls at heightened risk for childhood sexual abuse; further research identifying pathways of vulnerability and resilience specific to this population is needed. Our findings also indicate that abuse often starts at an early age; thus promising programs should be adapted for younger age groups and rigorously tested.

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Introduction

As of 2012, there were approximately 56 million children who had been orphaned in sub-Saharan Africa, 13.4 million due to HIV/AIDS (UNICEF, 2013). The illness and/or loss of a parent is a traumatic experience, with economic, social, and psychological consequences that echo across the life course (Heymann, Sherr, & Kidman, 2012). As orphans reach adolescence, there is mounting concern that this cumulative disadvantage may manifest in heightened levels of sexual victimization.

Adolescents in sub-Saharan Africa are highly vulnerable to adverse sexual health outcomes (Reza et al., 2009; UNICEF et al., 2011). Studies in Malawi, Swaziland and Tanzania indicate that one-third will experience sexual violence before their

[☆] Research reported in this publication was supported by the Eunice Kennedy Shriver National Institute of Child Health & Human Development of the National Institutes of Health under Award Number R03HD082475.

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18th birthday (Ministry of Gender Children Disability and Social Welfare of the Republic of Malawi, United Nations Children's Fund, The Center for Social Research at the University of Malawi, & Centers for Disease Control and Prevention, 2014; Pereda, Guilera, Forns, & Gómez-Benito, 2009; UNICEF Swaziland and CDC, 2007; UNICEF Tanzania, CDC, & Muhimbili University of Health and Allied Sciences, 2011). Moreover, a recent review of the evidence suggests that rates of childhood sexual violence are generally higher in sub-Saharan Africa than in many other parts of the world (UNICEF, 2014). Importantly, there are compelling reasons to believe that orphans may be even more vulnerable with respect to these outcomes: the loss of a parent exacerbates established risk factors (e.g., school drop-out) for sexual violence while creating additional risk factors (e.g., lack of parental supervision). For example, identified risk factors for sexual violence – including social isolation, residential instability, being out of school, poverty, and food insecurity (Breiding, Mercy, Gulaid, Reza, & Hleta-Nkambule, 2013; Breiding et al., 2011; Bruce & Hallman, 2008; Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002) – are all more prevalent among orphans (Ainsworth & Filmer, 2002; Bechu, 1996; Bicego, Rutstein, & Johnson, 2003; Case & Ardington, 2006; Case, Paxson, & Ableidinger, 2004; Deininger, Garcia, & Subbarao, 2003; Evans & Miguel, 2005; Ford & Hosegood, 2005; Jaramillo & Tietjen, 2001; Loewenson & Whiteside, 2001; Miller, Gruskin, Subramanian, Rajaraman, & Heymann, 2006; Miller, Gruskin, Subramanian, & Heymann, 2007; Monasch & Boerma, 2004; Palamuleni, Kambewa, & Kadzandira, 2003; Ssewamala & Curley, 2006; Ueyama, 2006). Sexual abuse frequently occurs in the home (Reza et al., 2009). Consistent with this, the physical absence of a biological parent and the presence of a stepfather have also been linked to sexual victimization (Madu, 2003). Finally, orphans may not have an adult in their lives to whom they feel comfortable disclosing abuse, and thus may be at risk for re-victimization.

Reports of sexual abuse among orphans abound in qualitative research (Cluver & Gardner, 2007; Foster, Makufa, Drew, Mashumba, & Kambeu, 1997; Lindsey, Hirschfeld, Tlou, & Ncube, 2003; Morantz et al., 2013; Oleke, Blystad, Moland, Rekdal, & Heggenhougen, 2006). However, few studies have empirically investigated sexual violence disparities, and those that do suffer from methodological limitations. As a result, there is a lack of consistency in these findings. A recently published review found eight studies (from Zimbabwe, South Africa and Uganda) that measured sexual abuse among orphans and non-orphans (Nichols et al., 2014). Only one study reported that orphans were more likely to be sexually abused (Nyamukapa et al., 2008). Only two of the eight studies reported that orphans were more likely to have experienced forced sexual debut (Pascoc et al., 2010; Thurman, Brown, Richter, Maharaj, & Magnani, 2006). When studies were pooled in a meta-analysis, the authors concluded that orphanhood was not a significant risk factor for sexual violence. However, the authors noted that both because their findings contradict qualitative findings and “because of inconsistent quality of data and reporting, these findings should be interpreted with caution” (p. 304, Nichols et al., 2014). This leaves the relationship between orphanhood and sexual violence equivocal. Moreover, the meta-analysis did not disaggregate by type of orphan, despite findings from past studies demonstrating differential impacts of maternal and paternal orphaning on reproductive outcomes (Beegle & Krutikova, 2007; Gregson et al., 2005; Palermo & Peterman, 2009). Similarly, many non-orphaned children live apart from their parents, but none of the above studies accounted for parental absence.

Child sexual violence has serious physical, psychological, and reproductive consequences that may persist through adulthood (Johnson, 2004). More definitive evidence is urgently needed to guide our response. To our knowledge, this is the first to estimate orphan disparities in sexual violence using nationally representative data from across sub-Saharan Africa. We hypothesized that adolescents who were orphaned or whose parents were absent would be more vulnerable to sexual violence.

Methods

Data and Sample

Data were drawn from 15 Demographic and Health Surveys and two AIDS Impact Surveys (AIS), representing 13 countries (countries are listed in Table 1). These surveys were implemented by host countries, with funding from USAID and technical assistance from ICF International (Corsi, Neuman, Finlay, & Subramanian, 2012). While standardized surveys were provided, countries were free to tailor module implementation to their individual needs. The surveys were cross-sectional and nationally representative. Households were selected through stratified, two-stage sampling. Face-to-face interviews were conducted with individual residents. Surveys were selected for inclusion if they represented a sub-Saharan African country; were conducted in 2005 or later; and were publically available at the time of analyses. Included surveys also had to contain parental survival data (this information was generally provided on children through age 17 years) and information on sexual violence for adolescents. If a country had multiple surveys meeting these criteria, all survey rounds were included. We analyzed information on female adolescents aged 15–17 years old, the only age group with both parental survival and sexual violence data.

Primary measures

Sexual violence. Countries typically collected data on the experiences and consequences of sexual violence in two ways: (1) an optional domestic violence module administered to one randomly selected woman per household or (2) through a set of questions administered to all women in the core questionnaire. The domestic violence module was based on valid and reliable measures of sexual violence (Hindin, Kishor, & Ansara, 2008), including a modified version of the conflict tactics scale

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