

# Using a Violence Against Children Survey to Drive Change: A Case Study of Tanzania

## Executive Summary

In 2008, seeking to catalyze action and change on violence against children — particularly sexual violence against girls — and increase awareness of the problem, the government of Tanzania, UN agencies, the United States government, and civil society worked together to design and implement a Violence Against Children Survey (VACS) in Tanzania. The data on violence against boys and girls and the VACS' multi-sectoral methodology and government-led coordination process catalyzed and shaped long-term, multi-sectoral change. This case study recounts the story of how the data came to be collected and the factors that led to its uptake and impact.

## Context

In late 2008 in Tanzania, political will was growing to address violence against children (VAC) and violence against women (VAW). This was especially true in government ministries that dealt directly with violence, including the Ministry of Community Development, Gender and Children (MoCDGC), Tanzania Commission on AIDS (TACAIDS), and the Tanzanian Police Department, while sectors without traditional investment in child protection and gender were slower to engage on VAC and VAW. Government capacity for response to violence — including gender-based violence (GBV) across the lifespan — was low, suffering from limited funding, low capacity across social service providers, and inadequate data to inform efforts. Recognition of emotional and physical violence against children was limited, and there was a huge amount of stigma around discussions of sexual violence and gender.

Where there was work to address these issues, it was generally siloed within sectors (e.g., agencies charged with addressing VAW, most vulnerable children, and child marriage). Violence in childhood, its impact, and the different experiences of girls and boys was largely left out of such strategies.

## Motivation for the VACS

**Growing political will:** The groundbreaking 2006 UN Study on VAC revealed huge rates of VAC globally and set out a call for countries to act.<sup>1</sup> A year later, in 2007, Eswatini (formerly known as Swaziland) was the first country to undertake the Violence Against Children Survey (VACS),<sup>2</sup> a ground-breaking, nationally representative study on sexual violence against girls. Motivated by both the UN study and the Eswatini VACS, the Government of Tanzania (GoT) began discussions with the US Centers for Disease Control and Prevention (CDC) and UNICEF to replicate and expand the Eswatini model and undertake a VACS). The Eswatini study brought the CDC and UNICEF together with the Government of Eswatini and civil society, with funding from UNICEF and PEPFAR, to conduct the survey and launch a response. The success of this study was demonstrated through uptake by the press,<sup>3</sup> and “the fact that the Eswatini government had elevated the results and had translated them into programmatic action.”<sup>4</sup>

In 2008, the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) Committee noted that there was a “lack of priority given” in Tanzania “to comprehensive legal reform to eliminate sex-discriminatory provisions and to close legislative gaps.”<sup>5</sup> These factors provided additional motivation within the GoT to collect and use data to understand and address gender inequality and experiences of VAC.<sup>6</sup>

## MOTIVATION FOR THE VACS

- 2006 UN Study on VAC revealed high rates of VAC globally.
- 2007 VAC survey in Eswatini demonstrated how this data can be translated into programmatic results.
- 2008 CEDAW spotlight on gender inequalities in Tanzania.
- Existing small-scale studies in Tanzania indicated a major problem with violence against girls.
- High HIV prevalence rates in Tanzania and the link between sexual violence against children.

**Expanding data nationally:** Prior to the Tanzania VACS there was a small amount of national data on VAC, particularly on older adolescent girls — including the WHO Multi-Country Study on Women’s Health and Domestic Violence Against Women and localized studies in Moshi, Dar es Salaam, and a few other locations. These sources were largely focused on sexual violence against girls and indicated a major problem, but there was no data on boys and limited or no sex-disaggregated data on emotional and physical violence. In addition, the surveys on sexual violence against girls rarely used the same definitions and phrasing, limiting comparability.<sup>7</sup>

**Preventing sexual violence to prevent HIV:** In 2008, HIV and AIDS were major public health issues in Tanzania, with prevalence for the general population hovering just below six percent.<sup>8</sup> The links between sexual violence and HIV and AIDS was another driving factor for conducting the VACS<sup>9</sup> and for mobilizing PEPFAR funding, recognizing that “the prevention of sexual violence against children may contribute to the prevention of HIV/AIDS transmission in Tanzania.”<sup>10</sup>

**Gender data breaks stigma:** Dr. Fatma Mrisho, then Executive Chairman of TACAIDS, recalled how just prior to the VACS, TACAIDS conducted a study on the risk factors for sexual abuse among adolescents, which showed that sexual abuse was a risk factor for early sexual debut, indicating higher risk for HIV and other STIs. Discussions around gender and violence remained taboo, and “when you started talking

about gender, everyone had a sheepish smile.” The results of this study were received as “shocking” and made it easier to convince management to focus on adolescents, particularly girls. This experience was instructive about the potential impact of the VACS, which followed soon after.<sup>11</sup>

## The Survey

**Government commitment and relationships:** Early vision and leadership from across the GoT was key to the success of the VACS data: “It wasn’t just one agency, but they envisioned the involvement of multiple agencies in Tanzania and that influenced much of what they did.”<sup>12</sup> The MoCDGC acted as government focal point and convener of the Multi-Sector Task Force (MSTF). The study was coordinated by UNICEF, technical assistance was provided by CDC Atlanta and local research partner Muhimbili University of Health and Sciences (MUHAS), and funding through PEPFAR.<sup>13</sup> Strong relationships across partners, with particular support at the national level from UNICEF as coordinating partner and eventual secretariat for the work, along with the engagement of UNFPA, Tanzania Child Rights Forum (TCRF),<sup>14</sup> and others, proved foundational in moving the process along. This approach served to build knowledge and capacity in VAC across Ministries and to create an environment of partnership before the data was available so that, “when it came we were in a much more fertile ground to be able to take the data, digest, and be able to do something with it.”<sup>15</sup>

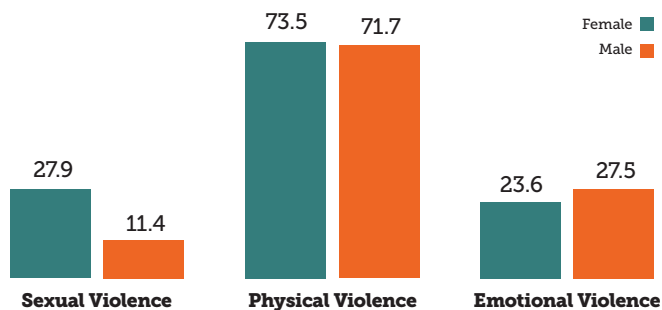
**Shaping the VACS and collection of the data:** The planning process for the Tanzania VACS began in mid-2008. The MSTF formed in September, and included representatives from health, education, social welfare, justice, water, HIV/AIDS, and other ministries, as well as civil society organizations (CSOs), UN, and US Government partners. CDC first met with members of the MSTF in January 2009,<sup>16</sup> and the development of the questionnaire, ethics reviews, adaptation, translation, piloting, and field tools and protocols took nine months.<sup>17</sup> As a result of consultation with the MSTF, due to geographic and cultural differences, a separate sample was designed for Zanzibar,<sup>18</sup> and Zanzibar established an MSTF to oversee the process and response.

**Survey design and data collection:** The questionnaire was designed using previous survey tools including the WHO Multi-Country Study, the Eswatini VACS, the Tanzania DHS, HIV/AIDS/STI Behavioral Health Survey, local studies on supportive norms, and others, and in some cases created new questions where there was no standard.<sup>19</sup> The expertise across sectors represented by the MSTF was crucial in guiding this process, ensuring that the VACS tool was responsive to the country's size and diversity, attentive to differences at the sub-national level, and integrated national perceptions and attitudes about violence. The study had a three-stage cluster survey design, using census enumeration areas for sampling. The study population included males and females aged 13-24. Data collection was conducted from was conducted in 2009 from November 6 to December 5, after which data was cleaned, weighted, and analyzed. The sample included 1,968 females and 1,771 males from mainland Tanzania and 1,060 females and 860 males from Zanzibar.

**Ethical and gender considerations:** Same-sex interviewers were recruited and trained to ensure that boys could be interviewed by men and girls by women. Only girls or boys were interviewed in each site, to reduce risk of interviewing both the survivor and the perpetrator of the same incident. Ahead of the survey, providers for support services were identified for those who disclosed experiencing violence. Due to the sparse availability of post-violence care providers, a hotline was established and a cadre of social workers was made available from the national level to link to data collection locations. For some respondents, this meant that disclosing violence during the survey was also the first time they were able access care. These ethical practices, building on WHO guidance, became a standard of the VACS process as it expanded to more countries.

## VACS RESULTS

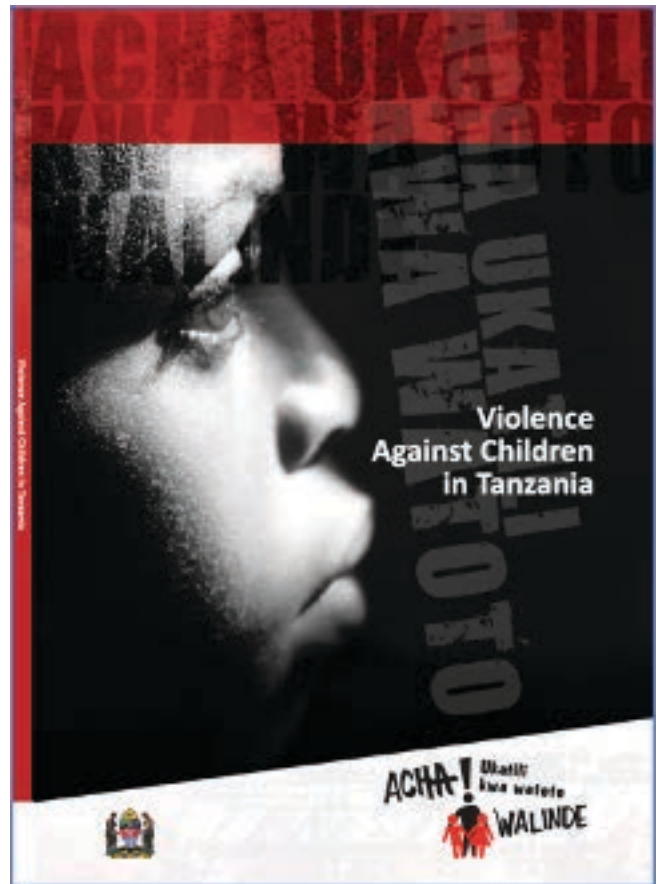
For the first time, Tanzania had nationally representative sex-disaggregated data on violence in childhood that included emotional and physical violence. The data showed the **heightened vulnerability of girls to sexual violence and for the first time presented data on boys**, revealing that they were also vulnerable to sexual violence. Detailed sex-and age-disaggregated information on physical and emotional violence, reporting and service use, risk and protective factors, circumstances, and short- and long-term consequences of violence to health and well-being were also available.



**Figure 1.** Types of violence before age 18, among males and females aged 13-24 (%).



**Figure 2.** Disclosure and service usage by individuals who experienced childhood sexual violence, as reported by 13 to 24 year olds.



## Publication and Dissemination of the VACS

The full VACS report was published and publicly launched in August 2011 at a major event in which Ministers from across 11 ministries and CSO representatives responded to the data, publicly declaring commitments to respond to VAC and gender inequality. “The government declared war on VAC...[the] Ministry of Education, Ministry of Justice, CSOs; [all] declared they will fight against VAC.”<sup>20</sup> The level and breadth of commitment was unusual and received wide media attention, supporting greater dissemination of results through media channels and increasing public awareness. As Ministers took the stage and made promises to respond to the data, the MSTF declared that “the single most important outcome of this research is the evidence it produces to stimulate action.”<sup>21</sup> These Priority Responses<sup>22</sup> announced with the VACS were the foundation, first for a one-year plan, and then for the National Plan of Action to Prevent and Respond to Violence Against Children 2013-2016 (NPA-VAC).<sup>23</sup> The NPA-VAC details “specific interventions across government

sectors, with support from civil society and faith-based organizations, **to address the child protection concerns raised by the VAC report.**”<sup>24</sup> The data made the need for action “painfully visible,”<sup>25</sup> and showed that social norms tolerating violence, gender inequality, and limited service access work together to encourage violence and discourage access to consistent and high quality care.<sup>26</sup> The age disaggregation put a spotlight on the particular vulnerability of adolescent girls.

**“Violence against girls and boys is a significant threat to the Nation’s health and well-being.”**

2009 Tanzania VACS Report

## Ensuring Data Use

Tanzania had begun planning for the VACS with the specific intention of using the results to make “informed programmatic and policy decisions” and “develop effective prevention strategies.”<sup>27</sup> The VACS data “blew the roof off the subject. You couldn’t find it in any of the national development plans...violence against children wasn’t really well known.”<sup>28</sup> Anna

Maembe, Permanent Secretary at the MoCDGC during the VACS and action process, knew that the “VACS study was a real eye opener...for high-level decision makers,”<sup>29</sup> while implementers recalled how it “provided clarity, all the way down to everyday people, including health professionals.”<sup>30</sup> Though some of the data was less surprising to policy makers familiar with VAC, all of it was impactful.

- **High rates of sexual violence against girls** drove home the huge problem of gender-based vulnerability.
- **Data on boys** showed for the first time that they needed attention too, and there “wasn’t a lot of thought about that before.”<sup>31</sup> Boys’ vulnerability brought gender discussion into a holistic context.
- Some were surprised by the **negative impacts of physical and emotional violence**, which were often considered normative; for example, corporal punishment in schools led to poor education outcomes.<sup>32</sup>
- **Gender-specific data on the context and outcomes from violence** helped policy makers ground the impact in individual stories. They “understood what was happening, not just statistics but the experiences of people.”<sup>33</sup> Context data illustrated how the different experiences of boys and girls meant that categories of violence required a gender lens and response.

In order **to translate the data into national actions with measurable results**, CDC and MUHAS presented the findings to the MSTF long before the launch.<sup>34</sup> Meanwhile, working with partners, UNICEF developed sectoral briefs for individual ministries and conducted meetings to walk through results and work together to craft commitments to action that responded directly to the findings.<sup>35</sup> The production and communication of the data were very impactful with sectors less traditionally involved in VAC and VAW work, such as education and water.<sup>36</sup> Kathryn Leslie, the UNICEF specialist who held these meetings, remembered how “when we broke out the data to how it impacted different issues and sectors, the data was so rich that it opened up doors to other sectors in particular that hadn’t been on board with the work UNICEF was doing with the government.”<sup>37</sup> Stakeholders and leaders from the global and

national levels remembered how the “gender data... placed the issues of women and girls solidly in the context of violence and violence prevention as well,”<sup>38</sup> and that when data was presented “there was that “aha!” [moment] that was very obvious,”<sup>39</sup> demonstrating “the power of reliable data for communicating the problem and drawing national ownership and accountability.”<sup>40</sup>

#### KEYS TO UPTAKE OF VACS FINDINGS

- Early vision and leadership from across sectors in the Tanzanian government.
- Partnerships across key actors on violence prevention and response prior to the survey to ensure buy-in and openness to the results.
- Strong dissemination plan for results, involving cross-sectoral partners.
- National and international media attention for launch event and results.

Membership of the MSTF intentionally recruited from across sectors, including social welfare, police, education, HIV/AIDS, health, and others. This collective process “engendered a naturally multi-sectoral way of thinking, realizing that violence against children is everyone’s business and that protecting children should be mainstreamed and incorporated through every sector.”<sup>41</sup> The process of developing and implementing the survey and then reviewing and understanding the findings built the capacity of each ministry as well as cross-sector relationships, producing a cadre of committed advocates empowered with sex- and age-disaggregated data.

**“The methodology through which the study was conducted necessitated the participation of all key ministries.”**

*Report of the Evaluation of the National Plan of Action for the Prevention and Response to Violence against Children (2013 – 2016)*

## Impact of the Data

At the time of the VACS, Tanzania was in the process of passing the Law of the Child Act and creating regulations for its dissemination across sectors, building a powerful legal framework for child

protection and violence prevention and response. The VACS provided a strong evidence base for the work, helping to centralize and connect actions across sectors around a national plan of action. The data created momentum to build and scale up programs and fuel investment. The NPA-VAC, which included an annual workplan, targets, and costs, served as a framework to hold partners accountable for performance and results. The data brought new partners to the table, as well as bringing gender and child protection actors together, with early wins and strong political will attracting ongoing and new donors as well as domestic resource investment, thus creating unusually strong infrastructure for gender-sensitive child protection, as well as a culture of using data and evidence to guide investments and advocacy.

**“I look at the 2009 VACS as a masterpiece; it helped mobilize much needed action.”**

*Anna Maembe, Permanent Secretary, MoCDGC at the time of the VACS process*

Highlights of the VACS impact include:

**1. Research and the power of gender data:** The credibility of the VACS data was extremely powerful.<sup>42</sup> The study was foundational to a culture of using data for action in the areas of child protection and violence prevention and response, and “created clear and specific definitions of sexual, physical and emotional violence,” ensuring these terms were “not ambiguous anymore...a bit uncomfortable but somehow necessary in order to communicate the subject.”<sup>43</sup> This context helped enable and contextualize additional research, including:

- A sub-national study on violence against children aged 0-8 conducted by MUHAS as a baseline for work supported by Bernard Van Leer Foundation;<sup>44</sup>
- The Drivers of Violence Against Children Study, conducted in 2014 and 2015;<sup>45</sup>
- The IMAGES study on gender and masculinity among adolescents and adults<sup>46</sup> and;
- The T-Watoto Survey on VAC in Zanzibar in 2017.<sup>47</sup>

**2. The VACS promoted a culture of data-based advocacy** that empowered community actors.

Members of the CSO network TCRF committed to “integrate the violence against children research findings into our advocacy strategies,”<sup>48</sup> which has been actualized in their ongoing work. For example, the Children Education Society (CHESO) conducted a baseline survey on education issues for out of school children in 2014<sup>49</sup> which included gender and violence concerns and was used to target hotspots for sexual exploitation of girls and other violence against children and gender-based vulnerability. CSOs “use [the VACS] for advocacy, it is the starting line...it helped bring more research in and catalyze research prioritization.”<sup>50</sup>

**“On the back of the survey we have put in place child protection systems that are being piloted in three districts. We intend to scale up and replicate the pilots elsewhere.”**

*Jeanne Ndyetabura, Assistant Commissioner for Social Welfare in the Ministry of Health*

### **3. Improved reporting and gender-responsive services:**

In response to the data on low rates of reporting and service access, along with the reasons boys and girls gave for their reluctance to come forward, the MSTF made commitments to both prevent and respond to violence. These were directly linked to measurable, costed activities in the NPA-VAC, with clear indicators and annual milestones in the Results Framework. Select highlights of performance and outcomes include:

- **Police commitment to increase Police Gender and Children’s Desks (PGCDs) and integration with other service providers:** The NPA-VAC set a goal of rehabilitating 24 PGCDs by 2016. At the end of the plan, 22 had been rehabilitated<sup>51</sup> with more planned. The PGCDs are supported by the government, UNICEF, PEPFAR, and others, and collect sex- and age-disaggregated data to track cases. Police focal points work with protection teams to improve referral processes and support comprehensive care for women and children who report violence. Stakeholders observed that where desks are established, reporting of violence against women and children immediately increases.<sup>52</sup> Due to the popularity of PGCDs, police are able to locally fundraise to establish them.<sup>53</sup>

- **Health and social welfare commitment to scale up local child protection systems and ensure health and psychosocial service access:** The NPA-VAC established a goal to scale up local child protection systems to 30 Local Government Authorities (LGAs) by 2016, including growing the social welfare workforce. As of 2017, multi-sectoral child protection teams were established at the district level in 47 LGAs. One-stop centers (OSCs) to provide post-violence services, housing health, police, and social welfare in the same location, were established in 10 healthcare centers in different regions and Zanzibar established one in every district hospital. Pre-service training for police, social workers, and health care providers; and in-service trainings reached an estimated 6,411 frontline workers in child protection, and these workers have reached over 700,000 boys and girls.<sup>54</sup>
- **Gender transformative, school-based prevention:** The education sector committed to establish programs in schools to empower children, especially girls, and encourage violence reporting. The government of Tanzania, with collaboration from UNICEF, World Vision, and other implementing partners, integrated school-based rights education and empowerment clubs.<sup>55</sup> By 2017, a total of 415 Tuseme clubs had been trained in child protection.<sup>56</sup> An evaluation of the clubs “found that they have been effective at empowering girls to speak up and take action to address problems.”<sup>57</sup>

#### KEY IMPACT OF THE VACS

- Created clear understanding of the magnitude of violence against children at a national level and a common language to discuss it.
- Elevated the effort to develop a coordinated strategy for addressing violence against children to the office of the Prime Minister
- Built knowledge and capacity for VACS across Ministries and regional and district authorities.
- Significantly expanded the types and quality of services to prevent and respond to violence against children.
- Catalyzed additional research on the topic.

- Empowered advocates with key statistics on the reality of violence against children in Tanzania.
- Spurred additional investment by donors to address the problem.

**4. Data to inform investment:** The VACS and the resultant NPA-VAC provided a platform to leverage government and donor funding. Propelled by the data, the Together for Girls partnership was able to catalyze funding for work aligned with the response to VAWC. In 2010, PEPFAR selected Tanzania as one of the countries for its GBV initiative because they had both a VACS and a DHS, providing data on gender-based violence across the lifecourse.<sup>58</sup> PEPFAR funded a coordinator seconded to the government for the data-to-action process, and used the data to inform their first ever GBV initiative in four regions, including the scale up of OSCs and PGCDs. Other donors, including private foundations, the European Union and the Government of Canada, also used the NPA-VAC to guide investments. Notably, the GoT used the NPA-VAC as a funding platform; the Ministry of Finance collaborated with social welfare and the Prime Minister’s office to develop budget guidelines for LGAs.<sup>59</sup> LGAs “were required to contribute their own funds for child protection,”<sup>60</sup> a goal that 30 districts achieved by the end of the NPA-VAC.<sup>61</sup>

## Challenges

Challenges in moving from the data phase to actionable policy and program implementation included:

- **Funding:** Major funding gaps slowed or limited full-scale up in many sectors and impacted the translation of structures and accountability frameworks to the care level. The work of district, ward, and village teams to manage cases is largely unfunded.<sup>62</sup> Reach to rural areas remains limited,<sup>63</sup> underscoring the desire for data to better drive programming, advocacy, and investment in a resource-constrained setting.
- **Geographic scope:** The VACS did not provide sub-national data, which numerous stakeholders expressed a desire for, particularly given the

complexity of the country and the size of the rural population.<sup>64</sup> Some VAWC issues such as child marriage require very localized understanding; Tanzania addressed this need with the 2017 National Survey on the Drivers and Consequences of Child Marriage in Tanzania.<sup>65</sup>

- **Duplication of efforts:** At the time of the VACS, a number of pre-existing strategies, plans, and committees were in place for VAW, vulnerable children and other issues. While the same people provided care to survivors and attended committee meetings, mechanisms for coordination and funding were siloed. The new national strategy, which brings together VAC and VAW under one national plan, is an important step in addressing some of these issues.
- **Change takes time:** Norms around violence and gender are deeply rooted, and changes are influenced by a myriad of factors, including political will. Some of the data-based changes have been slow or stalled. For example, the commitment to ban corporal punishment in schools was not fulfilled. Additionally, while VACS respondents reported high rates of sexual violence by partners, sexual violence in adolescent relationships is rarely reported to service providers, highlighting the importance of continuing to use data to amplify the voices and needs of adolescent girls and drive prevention and social norms change.

## Next Steps

In 2016, Tanzania launched the National Plan of Action to Prevent and Respond to Violence Against Women and Children 2017-2020 (NPA-VAWC), bringing together nine plans, strategies, and policies into one platform<sup>66</sup> to better integrate work and minimize duplication. The growth in awareness and increased political will is evident in the fact that oversight of the plan now sits in the Prime Minister's Office. The NPA-VAWC is organized across eight strategies to prevent and respond to violence (based on the INSPIRE model),<sup>67</sup> including a specific thematic focus on monitoring and evaluation. This includes the full roll-out of the Child Protection Information Management System (CPIMS), which has been successfully piloted in four districts and will enable centralized, comprehensive, sex- and age-disaggregated reporting at the district level. And although financial and political commitment to implementing all aspects of the new plan persist, there are signs of ongoing progress. For example, in 2016 Tanzania became one of the first Pathfinder countries in the Global Partnership to End Violence Against Children. Looking both back and forward, it's clear that data and evidence must continue to play a critical role in informing policies and in tracking progress in Tanzania.

*This case study was prepared by Together for Girls in partnership with Data2X.*



## REFERENCES INCLUDE:

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- Studies including: VAC among boys and girls aged 0-8 (for use by Bernard Van Leer Foundation), Drivers of Child Marriage, Drivers of VAC (draft), IMAGES study (draft), T-Watoto study
- Presentations from UNICEF, PACT, PEPFAR and other actors
- Government reports including: Government evaluation of the 2013-2015 NPA VAC plan Internal reports from the Temeke Police Gender and Child Desk and others
- Strategic plans including: 2011 Tanzania Commitments to Prevent and Respond to VAC; 2013-2016 National Plan of Action to Prevent and Respond to VAC (NPA-VAC); 2016-2020 NPA to Prevent and Respond to Violence Against Women and Children (NPA-VAWC); Zanzibar 2016-2020 NPA to Prevent and Respond to Violence Against Women and Children (ZNP-VAWC)
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58. Ligiero, Daniela. (2018, September 19). Email interview with RG.
59. Endnote 23.
60. Endnote 51, pp 20.
61. Ibid.
62. Temeke District Protection Team (2018, July 13). Group meeting with JF and RG; Dodoma Ward Protection Teams roundtable (2018, July 17). Ground meeting with RG.
63. Interviews and meetings including: TCRF CSO roundtable (2018, July 27). Roundtable discussion with RG; National Protection Committee (2018, July 13). Group meeting with JF and RG.
64. While the VACS does not collect data on specific geographic location for ethical protection, more recent VACS have integrated measures to compare urban and rural vulnerability, or oversample in high HIV-burden areas, for example.
65. MoHCDGEC. (February 2017)
66. MoHCDGEC. (2016) National Plan of Action to Prevent and Respond to Violence Against Women and Children 2017-2020.
67. INSPIRE: seven strategies for ending violence against children, is a package of global, evidence-based guidance on preventing and responding to violence against children and gender-based violence in childhood across thematic areas. It is intended to be implemented in a multi-sectoral context, with strong monitoring and evaluation frameworks. The package, led by WHO with technical guidance from numerous Together for Girls partners and the partnership secretariat, World Bank, Global Partnership to End VAC and others, brings together the best evidence and promising practices for long term VAC prevention and response.

## About Together for Girls

Together for Girls is a global public-private partnership that works to end violence against boys and girls, with a special focus on ending sexual violence against girls. Founded in 2009, the Together for Girls partnership brings together national governments, UN entities and private sector organizations to prevent and respond to violence. To do this, the partnership uses a three-pronged model: data, action, and advocacy to promote evidence-based solutions, galvanize coordinated response across sectors, and raise awareness. Currently, Together for Girls works with more than 20 countries around the world. To learn more, visit [www.togetherforgirls.org](http://www.togetherforgirls.org).

## About Data2X

Data2X is a collaborative technical and advocacy program working through partnerships to improve the quality, availability, and use of gender data to make a practical difference in the lives of women and girls world-wide. Through our research, advocacy, and communications, we build the case and mobilize action for gender data to make it central in global efforts to achieve gender equality. Additionally, we strengthen the production and use of gender data by working with data producers and users to ensure that data collection methods are unbiased, policy-relevant, and gender sensitive. We believe these are necessary steps toward building a more equal world. Data2X is housed at the United Nations Foundation and supported by the Bill & Melinda Gates Foundation and the William and Flora Hewlett Foundation.

data2x<sup>o</sup>



**Together  
for girls**

STRENGTH IN NUMBERS