

Intervention Programmes Implemented by State and Non-State Actors in Reducing Sexual and Gender-Based Violence against Girls and Young women in Abia State, Nigeria

N. C. Thompson¹; C. R. Amadi²; S. A. Egbuchu³; A. I. Adejumo⁴

^{1,2,3} River State University, Port-Harcourt, River State

⁴ Federal University of Allied Health Sciences, Enugu

Publication Date: 2026/02/20

Abstract: Gender-based violence (GBV), specifically violence against women, is a worldwide pandemic. Prevalence is further escalated in low-and-middle-income countries and in humanitarian crises. The high prevalence and gender disparities globally, has led to the development of few interventions for this population. The aim of this study is to evaluate the intervention programmes implemented by state and non-state actors in reducing sexual and gender-based violence against girls and young women in Abia State. 450 girls and young women age 18-35 years across the three senatorial districts of Abia state were selected through simple random sampling. A structure questionnaire titled “State and Non-state Actors Intervention on Sexual and Gender Based Violence Questionnaire (SNAISGBVQ) was used for data collection. The findings reveal a mixed response, with some interventions receiving high levels of agreement while others are largely absent or insufficiently implemented. The results highlight significant gaps in essential support services for survivors, particularly in the areas of shelter, counseling, legal aid, and vocational training, this suggests that both state and non-state actors have made efforts to create awareness about the issue across the three senatorial zones. The study concluded with some recommendations namely: Vocational training and economic empowerment programmes should be expanded to help women and girls gain financial independence, reducing their vulnerability to GBV. Stronger partnerships should be fostered between government agencies, NGOs, religious institutions, and traditional leaders to create a unified response to GBV.

Keywords: Gender-Based Violence, State Actor, Non-State Actors’, Interventions.

How to Cite: N. C. Thompson; C. R. Amadi; S. A. Egbuchu; A. I. Adejumo (2026) Intervention Programmes Implemented by State and Non-State Actors in Reducing Sexual and Gender-Based Violence against Girls and Young women in Abia State, Nigeria. *International Journal of Innovative Science and Research Technology*, 11(2), 971-976.

<https://doi.org/10.38124/ijisrt/26feb392>

I. INTRODUCTION

Sexual and Gender-Based Violence (SGBV) refers to harmful acts forced upon individuals due to social power imbalances and rigid gender roles. This includes any physical, sexual, or psychological harm—or the threat of it—directed at women and girls. Whether in private or public spaces, SGBV represents a fundamental violation of liberty and safety (United Nation Women, 2020). SGBV takes many devastating forms, ranging from physical violations like rape and sexual assault to domestic and intimate partner violence IPV. It further extends to harmful traditional practices like forced marriage and FGM, as well as exploitative crimes such as sexual harassment and

trafficking. SGBV is more than a social issue; it is a critical human rights violation and a public health crisis. It transcends wealth, education, and social status, posing a persistent threat to the health and dignity of women and girls in every corner of society (Mbina et al., 2025; World Health Organisation [WHO], 2021).

The impact of SGBV on girls and young women is multifaceted, spanning physical, psychological, and socio-economic domains. Physically, survivors often face a range of health challenges, from acute injuries and chronic pain to long-term complications such as gastrointestinal and gynecological issues, STIs, and unintended pregnancies (WHO, 2021). The

psychological toll involves several serious conditions, including trauma-related stress, mood disorders, and a sense of social detachment (Krug et al., 2002). Socio-economic consequences include higher healthcare costs and hindered participation in education and the workforce. This is underscored by the fact that intimate partner violence affects approximately one in three women globally (UN Women, 2021). In Africa, the prevalence of sexual and gender-based violence is particularly high, with 45.6% of women reporting experience of intimate partner violence. This statistic significantly exceeds the global average of 30% (Ahinkorah, 2021; Mbina et al., 2025; Muluneh et al., 2020).

Sexual and gender-based violence remains a persistent challenge in Nigeria; according to the NDHS, 31% of women aged 15 to 49 report experiencing physical violence, with nearly one in ten reporting experiences of sexual violence (National Population Commission [NPC], 2019). The onset of the COVID-19 pandemic significantly intensified the problem; during lockdown phases, Nigeria witnessed a staggering 149% surge in documented instances of sexual and gender-based violence (Afolabi, 2024). In a survey of 306 Abia State undergraduates, 51.2% reported intimate partner violence, with emotional abuse (78.9%) being significantly more common than physical (42.0%) or sexual (30.8%) mistreatment. In contrast, broader state-level statistics from the Ministry of Women Affairs and Social Development suggest slightly lower rates among the general female population, at 28% for physical violence and 15% for sexual violence (Olorunfemi, 2023).

The Nigerian government has demonstrated commitment to addressing sexual and gender-based violence through various legislative and policy frameworks. The Violence Against Persons Prohibition (VAPP) Act of 2015 provides comprehensive legal protection against various forms of violence. The act aims to forbid all forms of violence against persons both in public and private life as well as provide maximum protection and effective remedies for victims of violence and punishments for offenders. In addition, the act provides protections against offenses that affect women disproportionately, including the prohibition of female genital mutilation, forceful ejection from home, forced financial dependence or economic abuse, forced isolation, emotional, verbal, and psychological abuse, harmful widowhood practices, spousal battery amongst others. The act further, criminalises rape of boys as an offence. Nigeria has also ratified international agreements including the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) in 1979, the Maputo Protocol, and committed to achieving Sustainable Development Goal 5 on gender equality. The National Gender Policy, 2006 further reinforces these commitments. However, implementation of these legal frameworks remains weak, particularly at state levels where domestication of national laws varies (Dipo-Salami & Ikoku, 2022).

Sexual and Gender-Based Violence (SGBV) against girls and young women remains a persistent problem in Abia State, despite various government policies and stakeholder interventions. Recent statistics from the Abia State 51.2% out of 306 undergraduate students reported to have experienced intimate partner violence and 30.8% reported to have suffered sexual abuse (Odini et al., 2024). In Abia State a number of activities have been conducted to deal with sexual and gender-based violence both by state actors (government) as well as non-state actors (non-governmental organisations). One activity undertaken by the government was the domestication of the VAPP Act in 2020. Report revealed that the implementation made women to be more aware of their rights and the avenues for redress when their rights are trampled upon in the private or public. Non-governmental organisations and other non-state actors such community leaders, religious institutions, civil society organizations, Women's Rights and Health Project (WRAHP) and Women's Aid Collective (WACOL) have also been involved in the implementation of the VAPP act towards preventing and addressing sexual and gender-based violence. They provide essential services including legal aid, counseling, and shelter for survivors of sexual and gender-based violence. Religious leaders also play important role towards fighting sexual and gender-based violence. They do this through influencing social norms and behaviors from their teachings and community engagement. Community leaders often serve as first responders and mediators in SGBV cases. Civil society organizations contribute through research, policy advocacy, and capacity building.

Although these state and non-state actors have engaged in different activities and programmes towards dealing with gender-based violence, as reported by Dipo-Salami and Ikoku (2022), studies however revealed that there existed some issues in the implementation which include: absence of punishment for people who extort victims; unnecessary delays in the prosecution of perpetrators which wear survivors out, lack of gender-responsive budgeting which poses serious challenges to survivors, inadequacy of penalties for certain offences; lack of information on where survivors could go to report offenders or even how to go about getting justice or seeking redress (Dipo-Salami & Ikoku, 2022).

While previous studies have examined prevalence of sexual and gender-based violence (World Bank, 2019), impact of SGBV (Wanjiru, 2021) and strategies for preventing gender-based violence (St John & Walmsley, 2021), involvement of state and non-state actors in fighting SGBV in Nigeria (Oladebo et al., 2011), there is limited research on the effectiveness of interventions undertaken by state and non-state actors, particularly in Abia State. Existing literature focuses primarily on prevalence rates and victim experiences, leaving gaps in understanding intervention effectiveness and coordination between various actors. This knowledge gap is particularly significant given the recent domestication of the VAPP Act in Abia State and the need to evaluate its implementation

effectiveness. Therefore, this study aims to evaluate the intervention programs carried out by state and non-state actors towards reducing sexual and gender-based violence and the impact of such programmes in reducing SGBV among girls and young women in Abia State.

II. MATERIAL AND PROCEDURE

➤ *Participants*

450 girls and young women age 18-35 years across the three senatorial districts of Abia state were selected through simple random sampling for the study. The rationale behind the use of these set of people is because it is believed that they will better understand the challenges of SBVG intervention programs in the state. To achieve this, survey method was used for collecting data through a questionnaire. The survey research design provided a means of accessing information about a population.

➤ *Material and Procedures*

A structure questionnaire titled “State and Non-state Actors Intervention on Sexual and Gender Based Violence Questionnaire (SNAISGBVQ) was used for data collection. It

is designed to collect data to ascertain the State and Non-state Actors Intervention on Sexual and Gender Based Violence among girls and young women in Abia State. The Questionnaire items were structured on a four-point rating scale of Strongly Disagree (SD) with a score of 1 to Strong Agree (SA) with a score of 4. Three research assistants (one each from the three senatorial district) were trained on the objectives and methods of the study to helped the researcher in administering the questionnaire. The internal consistency reliability of the instrument was achieved by distributing 20 copies to 20 respondents who are not part of the study but within the population frame of the study. Data obtained from this step was subjected to Cronbach Alpha for internal consistency reliability calculation. This is in compliance with Nwankwo and Macdonald, (2019) submission that Cronbach Alpha is used for reliability calculation when the instrument for a study is in form of a likert scale having more than two option for response. Data analysis was done using both descriptive and inferential statistics. A total of 450 copies of the instrument were administered and a total of 431 with 144 from Abia Central, 146 from Abia North and 141 from Abia South were duly completed, returned and used for analysis

III. RESULTS

Table 1: Intervention Programmes Against SGBV in Abia

S/N	Statement	Abia Central (n=144)			Abia North (n=146)			Abia South (n=141)		
		M	S.D.	RMK	M	S.D.	RMK	M	S.D.	RMK
1	Public awareness campaigns are being conducted to educate people about SGBV.	3.24	0.78	A	3.09	0.91	A	3.06	0.95	A
2	There are safe shelters available for SGBV survivors.	1.65	0.74	D	1.92	0.89	D	1.87	0.97	D
3	Counseling/psychological support services are available for SGBV survivors.	1.74	0.84	D	1.92	0.96	D	1.77	0.93	D
4	Legal aid is provided to SGBV victims by government or NGOs.	1.75	0.80	D	1.82	0.91	D	1.88	0.92	D
5	Vocational training programmes are available for SGBV survivors.	1.74	0.84	D	1.81	0.94	D	1.98	0.99	D
6	Community-based programmes exist to prevent SGBV.	1.71	0.82	D	1.86	1.01	D	1.94	0.98	D
7	School-based programmes promote awareness of SGBV and gender rights.	3.22	0.81	A	3.21	0.88	A	3.15	0.89	A
	Grand Mean	2.15	0.80	D	2.23	0.93	D	2.23	0.95	D

Field Data, 2025

The result in Table 1.0 shows the intervention programmes implemented by state and non-state actors in reducing sexual and gender-based violence against girls and young women in Abia State. The result shows that public awareness campaigns are being conducted to educate people about SGBV which is evident by means of 3.24 for Abia Central, 3.09 for Abia North and 3.06 for Abia South.

Furthermore, School-based programmes are another intervention programmes used to promote awareness of SGBV and gender rights. This is evident by means of 3.22 for Abia Central, 3.21 for Abia North and 3.15 for Abia South. The result indicates that not much intervention programmes have been employed by state and non-state actors in reducing sexual and gender-based violence against girls and young women in Abia

State. This is evident by mean values being less than 2.50 for items 2, 3, 4 and 5 for Abia Central, Abia North and Abia South.

IV. DISCUSSION

The study seeks to evaluate the intervention programmes implemented by state and non-state actors in reducing sexual and gender-based violence against girls and young women in Abia State. The findings reveal a mixed response, with some interventions receiving high levels of agreement while others are largely absent or insufficiently implemented. The results highlight significant gaps in essential support services for survivors, particularly in the areas of shelter, counseling, legal aid, and vocational training. The data indicated that public awareness campaigns are being conducted to educate people about SGBV, with mean scores of 3.24 (Abia Central), 3.09 (Abia North), and 3.06 (Abia South). This suggests that both state and non-state actors have made efforts to create awareness about the issue across the three senatorial zones.

Public sensitization plays a crucial role in changing societal attitudes, encouraging victims to report cases, and reducing stigma. However, awareness alone is insufficient if it is not complemented by effective support structures for survivors. Similarly, school-based programmes aimed at promoting awareness of SGBV and gender rights received strong agreement, with mean ratings of 3.22 (Abia Central), 3.21 (Abia North), and 3.15 (Abia South). This indicates that educational institutions are being utilized as platforms to foster awareness among young people. The inclusion of gender rights in school curricula can contribute to long-term behavioral change and promote a culture of gender equity. Educational institutions represent both potential sites of violence and critical intervention points. In line with UNESCO (2019) there is need to create safer school environments, including clear anti-harassment policies, designated safe spaces, confidential reporting mechanisms, and gender-sensitive sanitation facilities. These physical and policy interventions complement educational components in addressing gender norms and healthy relationships.

A concerning finding from the study is the lack of key intervention services that are essential for the rehabilitation and protection of SGBV survivors. The availability of safe shelters for survivors was rated very low, with mean scores of 1.65 (Abia Central), 1.92 (Abia North), and 1.87 (Abia South), indicating a widespread absence of refuge centers where victims can seek protection. Without such facilities, survivors remain vulnerable to further violence, economic hardship, and social ostracization. Similarly, counseling and psychological support services were found to be largely unavailable, with mean scores of 1.74 (Abia Central), 1.92 (Abia North), and 1.77 (Abia South). The lack of mental health and trauma recovery services means that survivors are left to deal with the psychological consequences of abuse without professional assistance, which could lead to long-term emotional distress and reduced quality of life. This is in tandem with the findings

of WHO (2017) guidelines for health sector responses to violence against women which emphasize the importance of private consultation spaces, clear referral pathways, and the need to provide trauma-informed care services to victims of GBV.

Findings of the study reveals that both state and non-state actors' interventions have had a demonstrable positive effect on reducing gender-based violence against girls and young women in Abia State. The evidence shows that respondents across all three senatorial zones acknowledge the beneficial impact of various intervention strategies, including government policies, law enforcement responses, awareness campaigns, legal actions, NGO support services, religious and community leadership involvement, and civil society advocacy efforts. This collective recognition suggests that multi-sectoral approaches to addressing gender-based violence are being implemented and are having some measurable impact on the ground. However, the study also concludes that there are significant regional variations in how these interventions are perceived and experienced. The consistent pattern of lower ratings from respondents in Abia North compared to those in Abia Central and Abia South indicates that intervention efforts may not be uniformly distributed or equally effective across all areas of the state. This geographical disparity suggests that targeted, zone-specific approaches may be necessary to ensure equitable protection and support for all girls and young women in Abia State. This is in line with view of Dipo-Salami and Ikoku (2022), who in their study opines that although state and non-state actors have engaged in different activities and programmes towards dealing with gender-based violence, there existed some issues in the implementation.

Furthermore, the study finds that current intervention programs may not be adequately designed to meet the specific needs and contexts of girls and young women in Abia State. The consistently low effectiveness ratings across different types of interventions suggest systemic challenges in program design, implementation, monitoring, and evaluation. This points to the need for more evidence-based, culturally appropriate, and contextually relevant intervention strategies. On human right, the study reveals that awareness levels regarding human rights and gender issues are higher than expected in the study area, as evidenced by respondents' disagreement with the notion that lack of awareness contributes to gender-based violence. This finding suggests that interventions should move beyond basic awareness-raising to focus on more sophisticated approaches such as behavior change, norm transformation, and structural reforms. This aligns with view of St John and Walmsley (2021), who in their study posits that female mental health interventions should be tailored to meet the peculiar needs of victims of SGBV depending on location, religion and beliefs as well as the adoption of technology especially in areas women are more exposed to SGBV like in refugee camps.

Legal aid for SGBV victims was also found to be inadequate, with mean ratings of 1.75 (Abia Central), 1.82

(Abia North), and 1.88 (Abia South). Access to justice is a fundamental aspect of addressing SGBV, yet the data suggest that many victims do not receive legal representation or support in seeking redress. This lack of legal aid may discourage survivors from reporting cases and contribute to the culture of impunity among perpetrators. Vocational training programmes for survivors, which could provide economic empowerment and reduce dependency on abusive partners or families, were also rated poorly, with mean scores of 1.74 (Abia Central), 1.81 (Abia North), and 1.98 (Abia South). Economic empowerment is a crucial aspect of rehabilitation, as financial independence enables survivors to rebuild their lives and reduces the likelihood of remaining in abusive situations. The absence of such programmes suggests that many survivors may struggle to gain financial stability after experiencing abuse. This is in tandem with the findings of Heise (2011), who posits that economic empowerment initiatives can provide the resources necessary for populations at risk, thereby reducing vulnerabilities to violence. Psychological intervention programs that offer support to survivors and educate community members on the SGBV ramifications are also crucial to promoting health focused on the issue.

The study also found that community-based programmes aimed at preventing SGBV were largely lacking in the study area. This was evident by mean scores of 1.71 (Abia Central), 1.86 (Abia North), and 1.94 (Abia South). Given the role of community leaders, religious institutions, and civil society organizations in shaping local attitudes toward gender-based violence, the absence of structured community interventions suggests a missed opportunity to address SGBV at the grassroots level. Strengthening community engagement could foster collective action in preventing and responding to SGBV cases. The result corroborates that of St John and Walmsley (2021) who found cognitive behavioral therapy among the treatment strategies for victims of gender-based violence. The result further agrees with the recommendation by Grace (2021) that providing legal support, creating awareness and education could help in dealing with gender-based violence in Africa.

V. CONCLUSIONS

The aim of the study was to investigate the Intervention Programs implemented by State and Non-state Actors on Gender Based Violence against Girls and Young Women in Abia State. The result of the study showed that the respondents in all three areas of Abia State believe that government and non-government organizations are working together to reduce violence against girls. The result also revealed respondents across all three senatorial zones agreed that government programmes help empower young women to resist and report violence, that police adequately protect them, that media campaigns raise awareness, and that legal frameworks protect their rights. The result of the study further revealed a generally lower ratings about the effectiveness of the programmes on girls and young women.

An important conclusion of this study is the identification of a significant gap between intervention presence and intervention effectiveness. While respondents acknowledge that various programmes and initiatives exist and have some positive impact, they consistently rate the actual effectiveness of these programs as low. This inconsistency reveals that simply having interventions in place is insufficient; the quality, implementation, and sustainability of these programmes require substantial improvement. The study concludes that collaboration between state and non-state actors, while recognized as beneficial, is not yet reaching its full potential in terms of effectiveness. The low ratings for collaborative efforts suggest that coordination mechanisms, resource sharing, and joint programming approaches need strengthening. This finding is particularly important considering the fact that gender-based violence is a complex issue that requires coordinated responses from multiple sectors including government, civil society, religious institutions, and community organizations.

Finally, the research indicates that addressing gender-based violence in Abia State requires a comprehensive, multi-level approach that simultaneously tackles immediate protection needs and underlying structural causes. The persistence of violence despite existing interventions indicates that current efforts, while valuable, are not sufficient in scope, scale, or effectiveness. There is a clear need for increased investment, improved coordination, enhanced monitoring and evaluation systems, and more innovative approaches that can address the complex interplay of factors contributing to gender-based violence. The study provides valuable insights for policymakers, practitioners, and stakeholders working to create a safer environment for girls and young women in the state. The findings of this study implies that government should prioritize the implementation of comprehensive intervention strategies, particularly in areas with high vulnerability. Law enforcement agencies, including the police and judiciary, must take proactive steps to improve the handling of GBV cases, ensuring timely justice for victims.

RECOMMENDATIONS

Based on the findings, the following recommendations are made:

- Community education campaigns challenging harmful gender norms should be organized by relevant authorities such as NGOs and community leaders.
- The government should ensure stricter enforcement of existing laws against sexual and gender-based violence.
- The police and judicial system should be more proactive in handling GBV cases to ensure justice for survivors.
- Stiffer penalties should be imposed on perpetrators to serve as a deterrent.
- Government and NGOs should establish more safe shelters for GBV survivors across all senatorial zones.

- School-based GBV education should be integrated into the curriculum to promote gender equality and respect for women's rights.
- Vocational training and economic empowerment programmes should be expanded to help women and girls gain financial independence, reducing their vulnerability to GBV.
- Stronger partnerships should be fostered between government agencies, NGOs, religious institutions, and traditional leaders to create a unified response to GBV.
- Government agencies should establish a framework to regularly assess the effectiveness of intervention programmes.

REFERENCES

- [1]. Afolabi, A. A. (2024). Impact of pandemics on the rights of women and girls: COVID-19 as a sampler. *Pplrunlaw Review*, 3(1), 1-12.
- [2]. Ahinkorah, B. O. (2021). Intimate partner violence against adolescent girls and young women and its association with miscarriages, stillbirths and induced abortions in sub-Saharan Africa: Evidence from demographic and health surveys. *SSM-Population Health*, 13, 100730.
- [3]. Dipo-Salami, B., & Ikoku, M. (2022). *Policy brief: Overcoming the limitations to the implementation of the Abia State Violence Against Persons Prohibition Law*. Westminster Foundation for Democracy (WFD) and Foreign, Commonwealth & Development Office.
- [4]. Grace, O. T. (2021). Addressing gender-based violence in Africa (Nigeria and Botswana). *Saudi Journal of Humanities and Social Sciences*, 6(10), 405-413.
- [5]. Heise, L. (2011). *What works to prevent partner violence? An evidence overview*. https://researchonline.lshtm.ac.uk/id/eprint/21062/1/Heise_Partner_Violence_evidence_overview.pdf
- [6]. Krug, E. G., Mercy, J. A., Dahlberg, L. L., & Zwi, A. B. (2002). The world report on violence and health. *The Lancet*, 360(9339), 1083-1088.
- [7]. Mbina, I. A., Adejumo, A. I., Emezie, D. M., Omoja, F. O., Atere, A. O., & Emaimo, J. (2025). *Impact of Intimate Partner Violence on Female Students Academic Performance: What can Social Workers Do?*. DOI: 10.58806/ijissh.2025.v2i9n01
- [8]. Muluneh, M. D., Francis, L., Agho, K., & Stulz, V. (2021). A systematic review and meta-analysis of associated factors of gender-based violence against women in sub-Saharan Africa. *International Journal of Environmental Research and Public Health*, 18(11), 5882.
- [9]. National Population Commission (2019). *Nigeria demographic and health survey 2018—final report. NPC and ICF*. <http://dhsprogram.com/pubs/pdf/FR359/FR359.pdf>
- [10]. Nwankwo, C. A., & Macdonald, I. K. (2019). Market orientation and survival of small and medium enterprises in Nigeria. *Foundations of Management*, 11(1)
- [11]. Odini, F., Amuzie, C., Kalu, K. U., Nwamoh, U., Emma-Ukaegbu, U., Izuka, M., ... & Ezepue, C. (2024). Prevalence, pattern and predictors of intimate partner violence amongst female undergraduates in Abia State, Nigeria; public health implications. *BMC women's health*, 24(1), 259.
- [12]. Olorunfemi, O. S. (2023). *Burnout among Nurses in the Intensive Care Unit: A Systematic Literature Review*. https://www.theseus.fi/bitstream/handle/10024/816410/0/luwaseun_Sunday_Olorunfemi.pdf?sequence=2
- [13]. Phumzile Mlambo-Ngcuka, Executive Director of UN-Women. <https://www.unwomen.org/en/news/stories/2020/4/state-ment-ed-phumzile-violence-against-women-during-pandemic>
- [14]. St. John, L., & Walmsley, R. (2021). The latest treatment interventions improving mental health outcomes for women, following gender-based violence in low-and-middle-income countries: A mini review. *Frontiers in global women's health*, 2, 792399.
- [15]. UN Women (2021). Impact of COVID-19 on violence against women and girls and service provision: UN Women rapid assessment and findings.
- [16]. UN Women (2020). *Violence against women and girls: the shadow pandemic* (Statement by Phumzile Mlambo-Ngcuka, Executive Director of UN Women).
- [17]. UNESCO (2019). *Ready to learn and thrive: school health and nutrition around the world; highlights*. <https://unesdoc.unesco.org/ark:/48223/pf0000381965>
- [18]. Wanjiru, S. W. (2021). *Efficacy of Strategies That Mitigate Challenges Faced by Women Infected With HIV/AIDS in Majengo Urban Informal Settlement, Nyeri County, Kenya* (Doctoral dissertation, (PhD Dissertation, Kenyatta University).
- [19]. World Bank. (2019). *Gender-based violence: An analysis of the implications for the Nigeria for Women Project*. <https://openknowledge.worldbank.org/server/api/core/bitstreams/5ce7c6b6-c9d9-5073-a4c2-915387b632e0/content>
- [20]. World Health Organization. (2017a). Responding to children and adolescents who have been sexually abused: *WHO clinical guidelines*. World Health Organization.
- [21]. World Health Organization. (2021). *Violence against women prevalence estimates, 2018: Global, regional and national prevalence estimates for intimate partner violence against women and global and regional prevalence estimates for non-partner sexual violence against women*. World Health Organization.