The Government of the Republic of Namibia in 2019 completed a nationally-representative Violence Against Children and Youth Survey (VACS). This survey interviewed 5,191 children and youth 13-24 years old about their experiences of physical, sexual, and emotional violence. Results showed that both boys and girls experience unacceptably high rates of physical, sexual, and emotional violence. Many victims do not receive services for violence.

**FINDINGS**

Only about half of the children and youth who experience physical violence tell someone about what is happening to them. When they do tell someone, they usually disclose to a friend or family member. Among victims of sexual violence, females are more likely than males to report sexual violence. Those children and youth who did seek help were able to receive services. But few children seek help when they are abused.

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

- Among children who experienced sexual violence in the previous 12 months, significantly more females (66.0%) than males (27.2%) told someone about their experience.
- Only about one in three females (32.0%) and males (35.2%) knew of a place to go for help.
  > When girls seek help, most receive services (16.8% of girls sought services for sexual violence and 15.5% received services).

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

- Among children who experienced physical violence in the previous 12 months, over half of females (55.3%) and males (52.0%) told someone about their experience.
  > Among girls and boys who told someone about physical violence, they were most likely to report it to a doctor, nurse, or other healthcare worker (69.2% and 80.4%).
- Fewer than half of females (44.6%) and males (46.0%) knew of a place to go for help.
  > When children sought help, however, they received services (15.1% of girls and 17.2% of boys sought services for physical violence and 11.0% of girls and 14.7% of boys received services).

**CONCLUSION**

Children and youth who are victims of violence are not likely to report their experience and seek help. Fortunately, when children do report experiences of violence, they receive help. We must ensure children and youth know where and how they can report violence, that they will be helped, and that the violence will be stopped.
**RECOMMENDATIONS**

Findings from the VACS in Namibia highlight that children and youth need to know they can report violence, and that they will be helped. These services need to be easily accessible, welcoming, and supportive.

**Ministry of Gender Equality, Poverty Eradication and Social Welfare:**
- Continue with multi-media messaging to the public about how survivors of violence can get help, with particular focus on the preparation of child- and youth-friendly messaging.

**Ministry of Health and Social Services (MoHSS):**
- Identify a focal person for child- and youth-friendly services in all healthcare facilities and provide training for primary healthcare (PHC) workers on how to approach and manage cases of child abuse.
- Training materials are available from the Ministry of Health and the Ministry of Gender Equality, Poverty Eradication and Social Welfare.
- Ensure healthcare facilities increase the visibility of child-friendly services in the community and that children are aware that cases of violence can be reported and addressed at the healthcare facility.\(^5\)
- For anyone accessing HIV testing services, including children and young adults, health assistants communicate information about violence prevention, how to report cases of violence, and appropriately refer cases for post-violence care.\(^6\)
- Training provided to health care workers and community healthcare workers at primary health care (PHC) facilities on how to identify cases of violence, how to provide appropriate first-line care, and what to do if a child reports they are experiencing violence.

**Ministry of Education, Arts and Culture:**
- Create safe spaces in schools such as a separate room for Lifekills teachers and counsellors to use where children feel free and safe to report VAC cases and have confidential discussions, including access to a phone where children can call Lifeline/Childline and the presence of a suggestion box as a reporting and grievance mechanism, to be opened daily in the presence of a teacher, parent, or learner.

**All stakeholders:**
- Ensure the tollfree LifeLine GBV helpline, 116, is advertised throughout Namibia.
- Ensure contact information about where to report cases of violence is available in the community.

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Together we will end violence against children and youth in Namibia.

Your support can make a difference.

For additional information, please contact:

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NOTES


2 Physical violence includes slapping, pushing, shoving, shaking, intentionally throwing something to hurt, punching, kicking, whipping, beating with an object, strangling, smothering, trying to drown, burning intentionally, or using or threatening with a knife, panga, gun, or other weapon.

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

4 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 or put down by a parent, caregiver, or adult relative.

5 Among 18-24 year olds who ever sought help for any incident of sexual violence, just 57.3% of females sought help from a healthcare provider. The data were unreliable for males. A similar trend is seen with physical violence, as just 55.8% of females and 78.3% of males sought help from a healthcare provider.

6 Among children aged 14-24, 95.0% of females and 93.6% of males aged 14-24 knew where to go for an HIV test.