

Multivariate analysis of social and contextual drivers of gender-based violence among child survivors in South Mugirango Sub-County, Kisii County, Kenya

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ABSTRACT

Gender-based violence (GBV) against children is shaped by interconnected social, economic, cultural, familial, and institutional conditions. Anchored in Feminist Theory, this study examined the social and contextual drivers of GBV among child survivors in South Mugirango Sub-County, Kisii County, Kenya. A quantitative explanatory research design was employed. Data were collected from 145 child survivors using a structured questionnaire. Descriptive statistics, chi-square tests, independent-samples comparisons, binary logistic regression, and exploratory factor analysis were used to examine patterns, associations, predictors, and underlying dimensions of perceived GBV drivers. The findings showed significant gender differences in children's perceptions of cultural norms and community beliefs as drivers of violence ($\chi^2 = 14.26$, $p = .006$, $V = .27$), poverty and household substance use ($\chi^2 = 16.84$, $p = .002$, $V = .30$), and gendered differences in harm ($\chi^2 = 18.22$, $p = .001$, $V = .32$). Girls reported significantly higher perceptions of cultural and socioeconomic drivers than boys. Logistic regression further showed that gender and socioeconomic status significantly predicted higher perceptions of GBV drivers. Girls had higher odds of reporting high perceived severity (OR = 1.47, 95% CI [1.11, 2.08], $p = .012$), while children from low socioeconomic households had higher odds (OR = 1.62, 95% CI [1.15, 2.30], $p = .008$). Exploratory factor analysis identified structural-cultural and family-context dimensions. The study recommends strengthening gender-responsive child protection, addressing harmful gender norms, and integrating household socioeconomic support and community-based prevention into GBV interventions targeting children.

Keywords: Child Survivors, Cultural Norms, Substance Use, Gender Based Violence, Gender Inequality, Socioeconomic Status, South Mugirango, and Kenya.

I. INTRODUCTION

Gender-based violence (GBV) against children remains a significant child protection and social development concern because its occurrence is shaped by multiple social, economic, family and community conditions. Violence against children does not occur in isolation but within environments characterised by particular gender relations, family practices, socioeconomic circumstances, cultural expectations and institutional conditions. Understanding these factors is therefore important for explaining why some children experience greater exposure to violence than others. Existing literature indicates that cultural beliefs, poverty, educational disadvantage, parenting practices, gender inequality, substance abuse and weaknesses in child protection systems can interact to create conditions that increase children's exposure to GBV (Cornia & Martorano, 2017; Doyle & Cicchetti, 2017; Carter et al., 2023). Examining these factors collectively is particularly important because their effects may not operate independently.

Cultural norms and beliefs constitute an important social context within which violence against children may be accepted, tolerated or concealed. Beliefs concerning gender, authority, obedience and appropriate behaviour can influence how children are treated within families and communities. Practices such as female genital mutilation/cutting (FGM/C) and early or forced marriage demonstrate how harmful practices may become legitimised through beliefs concerning purity, social conformity, family honour and preparation for adulthood (Noah et al., 2022; Yujiro Sano et al., 2021). Traditional gender roles can further reinforce unequal positions between boys and girls, particularly where girls are expected to occupy subordinate positions and demonstrate obedience to adults and males. Such social arrangements may contribute to the acceptance of violence as a means of correction, control or enforcement of expected behaviour (Alden & Parker, 2005).

Economic circumstances may also shape the likelihood of children experiencing violence. Poverty, unemployment, food insecurity and limited household resources can place considerable pressure on families and affect

the manner in which caregivers respond to children. Economic hardship has been associated with increased family stress, weakened family functioning and greater reliance on punitive forms of discipline (Cornia & Martorano, 2017). De Silva (2008) similarly links socioeconomic hardship with circumstances in which children may experience physical, emotional and other forms of harm. Beyond the household, poverty may restrict children's access to education and other protective services, thereby reducing opportunities for children to acquire knowledge about their rights and avenues for seeking assistance (Ermiya, Batu & Teka, 2019). Socioeconomic disadvantage may therefore operate both directly through household stress and indirectly through reduced access to protective resources.

Educational circumstances constitute another important dimension of children's exposure to GBV. Education provides children and families with knowledge concerning rights, gender equality, personal safety and available mechanisms of support. Restricted access to quality education can limit exposure to these protective messages and may allow harmful gender expectations and practices to remain unchallenged (Akareem & Hossain, 2016). Education also has a broader social function because it can challenge attitudes and practices that sustain inequality and violence (Alawattegama, 2020). Children who are excluded from school or experience limited educational opportunities may consequently have fewer opportunities to acquire information and skills that could enable them to recognise harmful practices and seek protection. Girls may be particularly affected where educational disadvantage is accompanied by economic dependence, restricted decision-making and rigid gender expectations (Arends-Kuenning & Vieira, 2015).

Family relationships and parenting practices represent another important social context for understanding GBV against children. Parenting determines, among other things, how authority is exercised, how discipline is administered and how children communicate their concerns. Physical punishment may be regarded as an acceptable method of correcting children, particularly where such practices are reproduced across generations (Belsky et al., 2007). Economic stress can further increase pressure on caregivers and contribute to harsh disciplinary practices, particularly where families have limited access to parenting education and psychosocial support (Doyle & Cicchetti, 2017). Different parenting approaches may therefore have different implications for children's exposure to violence. Authoritarian parenting, for example, may emphasise obedience and strict control while limiting communication between caregivers and children (Schwab, 2022; Chen, Sun & Yang, 2015). Conversely, permissive and neglectful parenting may provide insufficient guidance, supervision and boundaries, potentially leaving children less protected from harmful influences (Adibsereshki et al., 2018; Tyler et al., 2019). Authoritative parenting, characterised by communication, consistent boundaries and emotional responsiveness, has been associated with children's development of respect, autonomy and non-violent approaches to conflict (Kwan et al., 2015; Meoded et al., 2021).

Gender inequality provides a further social explanation for the occurrence of GBV. Unequal access to education, healthcare, economic resources and decision-making can create differences in power between males and females, with girls often experiencing greater restrictions and disadvantages (Carter et al., 2023). In many African contexts, traditional expectations continue to assign different levels of authority and freedom to boys and girls. In Kenya, patriarchal attitudes and traditional expectations may contribute to unequal gender relations and tolerance of practices such as FGM/C and early marriage (Kakal et al. 2023). Fernandes (2020) further notes that economic hardship, limited education and low female representation in decision-making can reinforce gender inequality. These conditions are relevant to child protection because unequal power relations may influence both the likelihood of violence occurring and the ability of children to resist, report or obtain assistance.

Alcohol and substance abuse may further intensify conditions associated with violence within families and communities. Substance misuse, particularly alcohol misuse, can affect behaviour, judgement and emotional regulation among caregivers and other adults, creating circumstances in which children may be exposed to physical, emotional or sexual abuse (Akanbi et al., 2015). Exposure to violence in households affected by substance misuse may also influence children's perceptions of interpersonal relationships and acceptable behaviour (Derese & Misganaw, 2014). Where substance misuse occurs alongside patriarchal gender relations and weak family support systems, the risks associated with violence may become more pronounced (Abar et al., 2012; Loke & Mak, 2013).

The broader institutional environment also influences children's protection from GBV. The existence of laws and policies does not necessarily guarantee effective protection where reporting, investigation and enforcement mechanisms remain weak. Gaps in legal protection or inconsistent enforcement can create circumstances in which perpetrators perceive limited risk of accountability (Biribawa et al., 2020; Kawaguchi, 2020). Weak enforcement may also discourage reporting when children, families and witnesses lack confidence in formal protection and justice systems (Odwe, Undie & Obare, 2018). Consequently, legal and institutional conditions may interact with household and community factors to shape children's exposure to violence and the likelihood that cases will be identified and addressed.

GBV against children is influenced by a combination of social and contextual conditions rather than by a single factor. Cultural beliefs, socioeconomic circumstances, educational access, parenting practices, gender inequality, substance misuse and the functioning of protection systems may operate simultaneously and may reinforce one another. However, examining these factors individually may not adequately explain their combined contribution to children's exposure to GBV. A multivariate approach is therefore useful because it allows the relative contribution of several

factors to be examined while accounting for their simultaneous presence. In South Mugirango Sub-County, where children's experiences of violence occur within particular family, cultural, socioeconomic and institutional circumstances, such an analysis can provide evidence on the social and contextual factors that are most strongly associated with GBV among child survivors.

1.1 Statement of the Problem

Gender-based violence (GBV) against children remains a child protection concern in Kenya despite the existence of legal and policy frameworks, including the Children Act (2022) and national plans for preventing and responding to violence. In Kisii County, reported sexual and gender-based violence cases among adolescents aged 10–17 increased from 461 in 2020 to 1,052 in 2023 (National Syndemic Diseases Control Council [NSDCC], 2024). This trend highlights the persistence of reported violence and the need to establish the social and contextual conditions associated with its occurrence. In South Mugirango Sub-County, cultural norms, gender expectations, household economic circumstances, parenting practices and family dynamics may shape children's vulnerability to GBV. However, the extent to which these factors contribute to violence among child survivors in this setting requires empirical investigation.

Existing studies identify cultural norms, gender inequality, poverty, parenting practices and substance misuse as factors associated with violence against children. However, limited context-specific evidence establishes the relative contribution of these factors when considered simultaneously in South Mugirango Sub-County. Examining individual factors separately may not adequately explain their interrelationships or establish which factors have stronger associations with GBV. This evidence gap limits understanding of the social and contextual conditions most strongly associated with violence among child survivors in the study area. The study therefore employs multivariate analysis to assess the relative contribution of social, cultural, household and socioeconomic factors to gender-based violence among child survivors in South Mugirango Sub-County, Kisii County, Kenya.

1.2 Research Objective

To assess the relative contribution of social, cultural, household, and socioeconomic factors to the occurrence of gender-based violence among child survivors in South Mugirango Sub-County, Kisii County, Kenya.

II. LITERATURE REVIEW

2.1 Theoretical Review

2.1.1 Feminist Theory

Feminist Theory focuses on understanding how power inequalities based on socially constructed roles contribute to violence and discrimination in society. It recognizes that both girls and boys experience gender-based violence (GBV), but often in different ways shaped by social expectations of masculinity and femininity (Walby, 1990). The theory challenges the unequal power relations that exist between genders; particularly those reinforced by patriarchal systems, and explain how these relations create environments where violence against children is more likely to occur (Connell, 1995). In this study, Feminist Theory was used to understand the nature and extent of GBV against children by analyzing how gender roles influence the forms of violence boys and girls face. Boys may experience violence aimed at enforcing dominant masculine behaviors, such as aggression or emotional suppression, while girls may face violence related to control over their bodies and sexuality (Jewkes, Flood, & Lang, 2015). Feminist Theory highlights that both genders are vulnerable, though in ways shaped by social norms and expectations.

Feminist Theory guided the exploration of the drivers of GBV by showing how gender inequality interacts with other social factors like age, culture, and economic status to increase children's risk of violence (Crenshaw, 1989). For example, boys from low-income families may face harsher disciplinary violence due to expectations of toughness, while girls may be more exposed to sexual violence due to patriarchal control. This intersectional approach helped identify not just individual causes but the broader social structures that allow violence to persist. Feminist Theory directs attention to power dynamics in homes, schools, and communities—highlighting how these settings reinforce harmful gender norms that perpetuate violence against all children (Heise, 1998). It supports a social work approach that focuses on changing these unequal power relations through education, community engagement, and policy reform. Feminist Theory explained the root causes of GBV by highlighting how unequal gender relations enable violence against children.

2.2 Empirical Review

2.2.1 Factors Contributing to Gender-Based Violence Against Children

Gender-based violence (GBV) against children is influenced by multiple and interrelated social, economic, familial, cultural, and institutional conditions. The literature suggests that children's vulnerability to violence is shaped not only by individual behaviour but also by the social environments in which children are raised and protected. Cultural beliefs, socioeconomic disadvantage, educational exclusion, parenting practices, gender inequality, substance abuse, and weaknesses in legal enforcement therefore constitute important conditions through which children may become exposed to violence. Cultural norms and belief systems are among the factors that sustain violence against children.

Oliver and Carolyn (2021) observe that cultural constructions of gender, authority, and acceptable behaviour can legitimize practices that undermine children's rights and wellbeing. Female genital mutilation/cutting (FGM/C), for example, may be sustained through beliefs concerning purity, social conformity, ritual identity, and preparation for adulthood. Noah et al. (2022) further indicate that the persistence of such practices is reinforced by expectations relating to identity, honour, and community cohesion. Consequently, challenging harmful practices may carry social consequences for families and children who resist established expectations (Noah et al., 2022). Early and forced marriage similarly reflects cultural expectations concerning family honour and economic security, with consequences for girls' education, health, and wellbeing (Yujiro Sano et al., 2021). Traditional gender roles may also position girls in subordinate social positions and normalize unequal expectations between boys and girls (Alden & Parker, 2005). Such inequalities can make violence appear acceptable as a mechanism of discipline, control, or enforcement of gendered behaviour (Alden & Parker, 2005).

Poverty and socioeconomic inequality constitute another important driver of children's vulnerability to GBV. Economic insecurity, unemployment, and inadequate household resources can generate persistent stress among caregivers and undermine family functioning (Cornia & Martorano, 2017). De Silva (2008) associates socioeconomic hardship with circumstances in which children may experience physical, emotional, and psychological harm within the household. Poverty also affects children beyond the immediate household environment. Ermiya et al., (2019) indicate that children in disadvantaged environments may have limited access to quality education and may consequently have fewer opportunities to acquire knowledge concerning their rights and protection from violence. Inadequate healthcare in poor settings can further expose children to inappropriate responses to health and behavioural difficulties (Khatun, 2015). Poverty therefore operates not only through material deprivation but also through reduced access to protective social services.

Education has an important protective function in addressing conditions that sustain GBV. Akareem and Hossain (2016) associate limited educational access with reduced awareness of children's rights and gender equality. Alawattegama (2020) argues that education can contribute to social transformation by developing knowledge, values, and critical awareness that enable individuals to question harmful social practices. Where educational opportunities are limited, harmful practices such as child marriage, FGM/C, and physical punishment may remain insufficiently challenged (Arends-Kuenning & Vieira, 2015). Girls are particularly vulnerable where educational participation is restricted because limited schooling can contribute to economic dependence and reduced decision-making capacity (Arends-Kuenning & Vieira, 2015). Education is therefore relevant not only to academic development but also to children's capacity to recognize violence and challenge discriminatory practices.

Parenting practices constitute a further pathway through which violence may be reproduced within households. Belsky et al. (2007) note that physical punishment may be transmitted across generations when caregivers reproduce disciplinary practices experienced during their own childhoods. Economic stress can further increase the likelihood of harsh disciplinary practices by reducing caregivers' emotional resources and capacity to respond patiently to children's behaviour (Doyle & Cicchetti, 2017). Doyle & Cicchetti, (2017) associate physical punishment with adverse outcomes including aggression, anxiety, reduced self-esteem, and weakened parent-child relationships. Parenting practices may also shape children's understanding of gender, authority, and acceptable interpersonal behaviour.

The different forms of parenting have distinct implications for children's vulnerability. Authoritarian parenting is characterized by strict control and limited emotional engagement, which can reinforce hierarchical relationships and rigid gender expectations (Schwab, 2022). Chenn et al., (2015) indicate that limited communication in such households can restrict children's opportunities to question or report harmful behaviour. Permissive parenting, in contrast, may provide inadequate boundaries and guidance, leaving children more exposed to harmful social messages and gender stereotypes (Adibsereshki et al., 2018). Hinnant et al. (2016) further suggest that limited parental intervention may allow harmful gender-related messages from peers and wider society to remain unchallenged. Neglectful parenting may expose children to a different form of vulnerability because emotional detachment and inadequate supervision can weaken children's capacity to recognize and resist harmful situations (Tyler et al., 2019). Pinquart and Gerke (2019) associate inadequate emotional support with diminished self-worth, which may further constrain children's ability to assert their rights. Conversely, authoritative parenting promotes communication, consistent boundaries, mutual respect, and children's participation in decision-making (Kwan et al., 2015). Meoded et al. (2021) similarly associate this

parenting approach with the development of empathy, agency, and non-violent interpersonal relationships. Such characteristics can strengthen children's capacity to identify harmful behaviour and seek assistance (Lam et al., 2018).

Weak legal frameworks and ineffective enforcement may further contribute to the persistence of GBV. Biribawa et al. (2020) argue that inadequate child protection legislation can create opportunities for perpetrators to avoid accountability. Kawaguchi (2020) similarly observes that ambiguity or inadequacy within legal provisions may create gaps in the protection of children. However, the existence of legislation alone does not guarantee effective protection. Piedalue and Gilbertson (2020) indicate that weak implementation can undermine the effectiveness of legal protections against GBV. Difficulties in reporting, investigation, and prosecution may also discourage victims and witnesses from approaching formal justice institutions (Odwe Undie & Obare, 2018). Where communities perceive that perpetrators are unlikely to face consequences, silence and informal resolution may become more attractive than formal reporting (Piedalue & Gilbertson, 2020).

Gender inequality provides a broader structural context within which these forms of violence occur. Kelkar et al. (2022) identify unequal access to education, healthcare, economic resources, and decision-making as manifestations of gendered power inequalities that can increase vulnerability to violence. Carter et al. (2023) further identify gender inequality as a significant structural driver of GBV affecting both girls and boys. In East African contexts, traditional gender expectations may provide boys with greater privileges while restricting girls' autonomy and participation in decision-making. Such inequalities can reinforce practices including FGM/C and early marriage where these practices are embedded within prevailing cultural expectations (Kakal et al. 2023). In Kenya, Fernandes (2020) notes that patriarchal attitudes can persist despite the existence of legal and policy measures intended to address gender-based violence.

Alcohol and substance abuse represents another household-level factor associated with children's exposure to violence. Akanbi et al. (2015) report that alcohol misuse can contribute to impaired judgement, behavioural disinhibition, and aggressive conduct among caregivers. Children living in households where substance misuse and violence coexist may therefore experience unstable and threatening environments (Derese & Misganaw, 2014). Abar et al. (2012) further suggest that exposure to violence within such environments may contribute to the reproduction of aggressive behaviours across generations. Loke and Mak (2013) indicate that these dynamics can be particularly problematic where patriarchal expectations require girls to remain compliant and silent. Addressing substance-related GBV therefore requires interventions that extend beyond individual perpetrators to include families, schools, community structures, and substance-use support systems (Abar et al., 2012).

Taken together, the reviewed literature demonstrates that children's susceptibility to GBV is produced through the interaction of structural and immediate risk factors. Cultural norms influence what communities regard as acceptable behaviour, while poverty can increase household stress and restrict access to protective services (Cornia & Martorano, 2017). Educational disadvantage can limit children's awareness and agency (Akareem & Hossain, 2016), while parenting practices shape children's exposure to discipline, control, and gendered power relations (Belsky et al., 2007). Weak enforcement can reduce accountability (Piedalue & Gilbertson, 2020), while gender inequality and substance misuse can further intensify children's vulnerability (Carter et al., 2023; Akanbi et al., 2015). The evidence therefore supports a multidimensional understanding of GBV against children in which prevention requires simultaneous attention to household conditions, gender relations, cultural norms, education, parenting, substance use, and the effectiveness of child protection and justice systems.

III. METHODOLOGY

3.1 Research Design

The study employed a quantitative explanatory research design to examine the relationship between selected social and contextual characteristics and gender-based violence (GBV) among child survivors in South Mugirango Sub-County, Kisii County, Kenya. The design was appropriate because the study sought to determine whether demographic and socioeconomic characteristics were statistically associated with children's perceptions and experiences of GBV.

The analysis focused on measurable variables and proceeded from descriptive statistics to bivariate and multivariate analyses. Chi-square tests were used to assess associations between categorical variables, analysis of variance (ANOVA) was used to examine group differences in selected perception measures, binary logistic regression was used to identify predictors of high perceived severity of GBV, and exploratory factor analysis was used to examine the underlying structure of related GBV perception indicators.

3.2 Study Area

The study was conducted in South Mugirango Sub-County, Kisii County, Kenya. The area was selected because it provided a relevant social and community context for examining GBV among children. The study considered the experiences of children within their household, school and wider community environments.

3.3 Study Population

The analytical population comprised child survivors of GBV who participated in the broader study. Although the broader study involved parents or guardians and other key informants, this article was restricted to child survivors because the variables subjected to statistical analysis were derived from children's responses. The final analytical dataset comprised 145 child respondents.

3.4 Sampling and Sample Size

The broader study established a target sample of 154 child survivors using Cochran's formula. A total of 145 sufficiently complete questionnaires were available after data collection and data-quality screening, representing a 94% response rate. The 145 child respondents therefore constituted the analytical sample for this article.

3.5 Data Collection Instrument

Data were collected using a structured questionnaire administered to the child respondents. The questionnaire contained closed-ended and Likert-type items that generated responses suitable for quantitative analysis.

The variables relevant to this article included gender, age, school attendance, socioeconomic status, perceived prevalence of GBV, perceived threats or harm in different settings, perceived differences in the effects of GBV on boys and girls, reported experiences of sexual, physical and psychological abuse, and awareness of cases that were not formally reported or were handled informally.

3.6 Measurement of Variables

The dependent variable for the logistic regression analysis was perceived severity of GBV, categorized into high and lower perceived severity. The explanatory variables were gender, age, school attendance and socioeconomic status. These variables were selected to examine whether children's demographic and socioeconomic circumstances were associated with the likelihood of reporting high perceived severity of GBV. Other GBV indicators were analyzed separately through descriptive, chi-square, ANOVA and factor analyses.

3.7 Data Analysis

Data were coded, entered and analyzed using the Statistical Package for the Social Sciences (SPSS). Data cleaning was undertaken before analysis to identify missing values, inconsistent responses and coding errors. Descriptive Statistics: Frequencies and percentages were used to summarize categorical variables, while means and standard deviations were used for continuous or composite measures. The descriptive analysis established the distribution of children's characteristics, experiences and perceptions of GBV. Chi-Square Test: Chi-square tests of independence were used to determine whether gender was significantly associated with selected categorical GBV indicators. These included perceived prevalence of GBV, perceived threats or harm, perceived differential effects on boys and girls, reported experiences of abuse, and awareness of non-reporting or informal handling of cases.

Statistical significance was assessed at $p < 0.05$. Cramer's V was used to assess the strength of significant categorical associations. Analysis of Gender Differences: One-way ANOVA was used to determine whether mean scores on selected GBV perception measures differed significantly between boys and girls. Mean scores and standard deviations were reported for each group. The F-statistic and p-value were used to determine statistical significance, while Cohen's d was used to indicate the magnitude of group differences where applicable.

Binary Logistic Regression: Binary logistic regression was used to determine whether gender, age, school attendance and socioeconomic status predicted high perceived severity of GBV.

The model estimated the odds of a child reporting high perceived severity of GBV while controlling for the other variables included in the model. Results were reported using odds ratios (OR), 95% confidence intervals and p-values. Statistical significance was determined at $p < 0.05$. Exploratory Factor Analysis: Exploratory factor analysis was conducted to determine whether the selected GBV perception items clustered into broader underlying dimensions. Factor loadings were examined to establish the contribution of individual items to the extracted dimensions. Items loading together were interpreted according to their substantive content. Internal consistency of multi-item dimensions was assessed using Cronbach's alpha.

3.8 Validity and Reliability

The questionnaire was pretested before the main data collection to assess clarity, relevance and consistency of the items. Content validity was enhanced through the use of multiple indicators for the constructs examined.

For multi-item measures, internal consistency was assessed using Cronbach's alpha. The factor structure and item loadings were also examined to determine whether the indicators coherently represented the identified dimensions.

3.9 Ethical Considerations

Ethical approval was obtained from the National Commission for Science, Technology and Innovation (NACOSTI) under permit number NACOSTI/P/25/4178473. Because the study involved children and addressed GBV, informed consent was obtained from parents or legal guardians and assent was obtained from participating children using age-appropriate explanations. Participation was voluntary, and respondents could decline participation or withdraw without penalty. Confidentiality and privacy were maintained throughout the research process. Personal identifiers were excluded from the analytical dataset, and the data were securely stored and used exclusively for research purposes.

IV. FINDINGS & DISCUSSIONS

4.1 Finding

4.1.1 Associations Between Child Survivors' Gender and Perceptions of GBV Drivers

The study investigated whether children's gender was associated with their perceptions of the drivers of gender-based violence (GBV). To ensure rigorous analysis, only variables suitable for categorical assessment were examined using Chi-square tests of independence, while other ordinal responses were summarized descriptively. Responses to Likert-type statements were grouped into two categories: low agreement or perception ("Strongly Disagree," "Disagree," "Neutral") and high agreement or perception ("Agree" and "Strongly Agree"). Cramer's V was calculated to quantify the strength of association between gender and each statement. This analysis provides insight into whether gendered socialization, household conditions, and community norms shape children's perceptions of GBV, distinguishing between statistically significant associations and descriptive trends.

Table 1

Chi-Square Test of Association

Association Tested	χ^2 (df)	p-value	Cramer's V	Interpretation
Gender vs perception that cultural beliefs and community norms cause gender-differentiated treatment leading to violence	14.26 (1)	0.006	0.27	Strong association; girls more likely to recognize the influence of cultural norms
Gender vs perception that poverty or substance use increases risk of violence	16.84 (1)	0.002	0.30	Strong association; girls more likely to perceive higher risk in affected households
Gender vs perception that GBV is often handled informally	9.41 (1)	0.052	0.20	Borderline association; girls slightly more aware of informal handling practices
Gender vs perception that parental alcohol or drug use increases likelihood of child harm	12.03 (1)	0.017	0.25	Moderate association; girls report higher perceived risk
Gender vs perception of gendered harm differences	18.22 (1)	0.001	0.32	Strong association; girls more likely to perceive differential impacts on boys and girls

The Chi-square analysis indicated statistically significant associations for several drivers of GBV. Children's gender was strongly associated with recognition of cultural norms and beliefs as contributors to GBV ($\chi^2 = 14.26$, $p = 0.006$, $V = 0.27$), as well as with perceptions that poverty and household substance use elevate risk ($\chi^2 = 16.84$, $p = 0.002$, $V = 0.30$). Gendered differences in harm were also strongly associated with children's gender ($\chi^2 = 18.22$, $p = 0.001$, $V = 0.32$), reflecting that girls were more likely than boys to perceive that the types or reasons for violence differ by gender. Moderate association was observed for perceptions of parental alcohol or drug use increasing exposure to violence ($\chi^2 = 12.03$, $p = 0.017$, $V = 0.25$). Informal handling of GBV showed a borderline association ($\chi^2 = 9.41$, $p = 0.052$), suggesting that girls were slightly more aware of cases being resolved outside formal channels.

These findings demonstrate that children's exposure to GBV is influenced by interplay of socio-cultural norms and household-level conditions, indicating that violence is codified in structural and normative contexts rather than occurring randomly. Recognition of the role of cultural beliefs and norms aligns with prior studies highlighting that patriarchal practices institutionalize gendered vulnerabilities and normalize abusive behaviors (Yujiro Sano et al., 2021; Cornia & Martorano, 2017). Gendered differences in harm correspond to evidence showing that girls are disproportionately subjected to psychological and sexual abuse, whereas boys more frequently experience physical punishment, consistent with socially constructed expectations of gender roles and power dynamics (Kelkar et al., 2022).

Poverty and household substance use increase the likelihood that children will experience violence or harmful treatment. Research shows that children living in poor households or in homes where parents consume alcohol or use drugs face higher risks because supervision is often limited, and family stress is heightened (Derese & Misganaw, 2014).

Alden and Parker (2005) note that substance use by caregivers can directly contribute to abusive behavior and create chaotic household environments, which make children more vulnerable to physical, emotional, or psychological harm. From a Feminist Theory perspective, these patterns highlight how social norms and unequal power relationships within families and communities influence children's exposure to violence (Connell, 1995; Jewkes et al., 2015). The combination of economic hardship, household dysfunction, and social expectations shapes the everyday experiences of children and demonstrates the need for interventions that address both the immediate family environment and the wider social context that allows abuse to continue (Cornia & Martorano, 2017;).

4.2 Gender Variations in Children's Perceptions of GBV Drivers

To examine whether boys and girls differ in their perceptions of the drivers of gender-based violence (GBV) against children, the study compared mean responses across several key dimensions. These dimensions included perceptions of cultural beliefs and community norms that lead to gender-differentiated treatment, the risks associated with living in households affected by poverty or caregiver substance use, the tendency for GBV to be handled informally by families or communities, and the differential impact of GBV on boys and girls. Independent-samples t-tests were employed to compare mean scores between male and female participants. Assumptions of independence, approximate normality, and homogeneity of variances were verified prior to analysis. Cohen's *d* was calculated to provide measures of effect size, indicating the practical significance of observed differences. This approach allows evaluation of whether gender influences children's understanding of GBV drivers and the magnitude of these differences. The results are presented in Table 2.

Table 2

Group Differences in Perceptions of GBV Drivers (t-test/ANOVA)

Association Tested	Boys (M±SD)	Girls (M±SD)	t(df)	p-value	Cohen's d
Gender vs perception that cultural beliefs and community norms cause boys and girls to be treated differently, leading to violence	3.98±0.70	4.15±0.68	-2.01 (143)	0.046	0.33
Gender vs perception that children from poor families or households affected by alcohol/drug use face more violence	4.05±0.67	4.23±0.69	-2.23 (143)	0.028	0.37
Gender vs perception that GBV is often handled informally by families/community	3.77±0.72	3.87±0.74	-1.05 (143)	0.296	0.17
Gender vs perception that parental alcohol or drug use increases likelihood of violence	3.70±0.73	3.82±0.75	-1.15 (143)	0.252	0.19
Gender vs perception that boys and girls experience GBV differently in form or reasons for harm	4.16±0.65	4.34±0.67	-2.10 (143)	0.037	0.35

The results show that girls consistently reported higher mean scores than boys across most GBV driver measures, suggesting greater awareness of structural, socio-cultural, and household factors influencing violence. Significant gender differences were observed for perceptions of cultural norms and beliefs ($t = -2.01$, $p = 0.046$, $d = 0.33$), poverty and parental alcohol/drug use ($t = -2.23$, $p = 0.028$, $d = 0.37$), and differential harm by gender ($t = -2.10$, $p = 0.037$, $d = 0.35$). These small-to-moderate effect sizes indicate heightened sensitivity among girls to environmental and social factors contributing to GBV. No statistically significant gender differences were observed for informal handling ($t = -1.05$, $p = 0.296$, $d = 0.17$) or parental substance use ($t = -1.15$, $p = 0.252$, $d = 0.19$), indicating that both boys and girls recognize these household-level risk factors similarly.

The finding that girls reported higher awareness of cultural norms, poverty-related stressors, and gendered harm indicates that female children are more perceptive of the social and structural conditions that increase susceptibility to GBV. This observation is consistent with Bamidele (2016), who found that girls often internalize perceptions of risk as a result of gendered socialization and repeated exposure to restrictive norms. Fang Chen (2020) also noted that girls' heightened sense of susceptibility shapes how they interpret threats and assess protective mechanisms within their environments. The present findings further reflect the arguments advanced by Oliver (2021), who emphasized that children's understanding of violence is closely tied to factors that directly affect their safety and everyday well-being. In contrast to Kelkar et al. (2022), who emphasized children's general sensitivity to harmful social conditions, this study demonstrates that such awareness is not uniform across genders, with girls showing greater sensitivity to the role of poverty and socio-cultural expectations in shaping experiences of harm.

From an ecological perspective, these findings highlight the complex and interconnected nature of children's experiences with gender-based violence (GBV). Individual experiences at the microsystem level, such as daily interactions within the family and personal exposure to risk, are shaped by the immediate social environment, including parenting practices, sibling relationships, and peer influence. These microsystem factors are closely linked with mesosystem processes, such as the interactions between family members, schools, and community groups, which

collectively influence how children perceive, respond to, and are protected from violence. Exosystem factors, including the presence of local institutions, legal frameworks, and community organizations, further mediate children's access to protection and support, even if children do not engage with these structures directly. Macrosystem influences, such as prevailing cultural norms, social expectations, and gendered beliefs, create overarching conditions that either exacerbate susceptibility or facilitate protective practices. This layered ecological understanding demonstrates that children's perceptions and experiences of GBV are not isolated; they are integrated within a network of relational, social, and cultural dynamics that operate simultaneously across multiple levels of their environment (Bronfenbrenner, 1979).

In practical terms, these results suggest that interventions aimed at preventing and responding to GBV must be multifaceted, contextually grounded, and sensitive to gendered experiences. Programs should target the household level by providing economic support, psycho-social assistance, and parental guidance initiatives that reduce risk factors for violence while enhancing children's emotional and physical safety. At the community level, culturally appropriate education, mentorship programs, and child protection services can strengthen protective networks and promote awareness of available support mechanisms. Initiatives should address broader societal and cultural norms that perpetuate gendered vulnerabilities, including discriminatory practices, patriarchal beliefs, and expectations that normalize violence. By integrating strategies across individual, family, community, and societal levels, interventions can effectively reduce children's exposure to GBV, foster environments that encourage safe disclosure, and ensure that the specific experiences and needs of both boys and girls are recognized and addressed. This comprehensive approach emphasizes not only the provision of services but also the transformation of social norms and structures that influence risk and resilience, ultimately promoting sustainable protection for children in diverse ecological contexts.

4.1.2 Predictors of Children's Awareness of GBV Drivers

To examine the factors shaping children's perceptions of key drivers of gender-based violence (GBV), the study assessed the influence of selected demographic and socio-economic characteristics. The analysis evaluated whether children's gender, age, school attendance, and household socio-economic status predict higher awareness of GBV drivers. Logistic regression was used to estimate the probability that children would report high levels of perceived drivers, controlling for multiple predictors. Associations were quantified using odds ratios (ORs) with 95% confidence intervals (CIs), and statistical significance was determined using p-values. This analysis provides a clear understanding of how structural, demographic, and economic factors influence children's recognition of GBV risk. The results, summarized in Table 3 highlight the relative contribution of each predictor to children's awareness of the drivers of gender-based violence.

Table 3

Logistic Regression Predicting High GBV Driver Perception

Predictor	Odds Ratio (OR)	95% CI	p-value	Interpretation
Gender (Girls vs Boys)	1.47	[1.11–2.08]	0.012	Girls more likely
Age (12–17 vs 9–11)	1.21	[0.89–1.63]	0.212	Not significant
School attendance	0.79	[0.55–1.10]	0.085	Borderline effect
SES (Low vs Mid/High)	1.62	[1.15–2.30]	0.008	Poverty increases risk

Logistic regression results indicate that gender and socio-economic status significantly predict perceptions of GBV drivers. The analysis demonstrates that children's gender and socio-economic status (SES) are significant predictors of heightened perception of key drivers of gender-based violence (GBV). Specifically, girls exhibited 1.47 times higher odds of perceiving GBV drivers as severe compared to boys (OR = 1.47, 95% CI [1.11–2.08], $p = 0.012$), whereas children survivors from low-SES households had 1.62 times higher odds relative to those from mid- or high-SES backgrounds (OR = 1.62, 95% CI [1.15–2.30], $p = 0.008$). In contrast, age did not significantly predict perceptions (OR = 1.21, 95% CI [0.89–1.63], $p = 0.212$), and school attendance demonstrated a marginal effect (OR = 0.79, 95% CI [0.55–1.10], $p = 0.085$), suggesting a limited association between regular school participation and the likelihood of perceiving GBV drivers as severe.

These findings show how gendered socialization and economic disadvantage shape children's awareness of the structural, socio cultural, and household factors that contribute to gender based violence. The higher levels of recognition among female respondents reflect social and cultural constructions of susceptibility that position girls as more exposed to both direct and indirect forms of violence. From an early age, girls are often socialized to anticipate risk, regulate behaviour, and navigate unequal power relations within families and communities, which heightens their awareness of abusive practices and harmful norms (). This pattern aligns with arguments by Kelkar et al. (2022) that gender inequality is sustained through everyday socialization processes that normalize control and silence, particularly for girls, thereby shaping how violence is perceived and understood.

Higher awareness among children survivors from economically disadvantaged households reflects the influence of material deprivation on lived experience. Poverty frequently intensifies household stress, limits access to protective resources, and increases exposure to unsafe environments, making the drivers of violence more visible in daily life. Cornia and Martorano (2017) observe that economic hardship weakens caregiving capacity and increases the likelihood of neglect and abuse within households. In such settings, children are more likely to interpret violence as a recurring condition shaped by family and community circumstances rather than as isolated incidents, reinforcing their recognition of the broader determinants of gender based violence.

The observed patterns suggest that effective interventions must integrate considerations of both gender and socio-economic disparities. Policies and programs aimed at mitigating GBV should account for differentiated experiences of boys and girls, particularly in contexts where economic deprivation exacerbates susceptibility. Strategies that enhance awareness strengthen protective mechanisms, and address structural and household-level risk factors are essential for reducing children's exposure to GBV and supporting resilience in affected populations.

4.1.3 Underlying Dimensions of Children Survivors Perceptions of GBV Drivers

To explore the underlying structure of children survivor perceptions of the drivers of gender-based violence (GBV), the study analyzed patterns among survey items measuring household, community, and cultural influences on susceptibility. The analysis aimed to determine whether these observed responses reflect broader latent dimensions that shape how children understand and interpret the risk factors contributing to GBV. Exploratory factor analysis (EFA) was employed to identify clusters of related items and reduce data complexity, revealing coherent groupings that represent distinct conceptual constructs. Factor loadings were examined to assess the contribution of each item to the emerging dimensions, and internal consistency of the scales was evaluated using Cronbach's alpha to ensure reliability. This approach allows for a systematic interpretation of structural, social, and familial factors influencing children's perceptions of GBV, highlighting the key patterns through which multiple indicators collectively represent broader risk frameworks. The results of this analysis are summarized in Table 5.

Table 5

Factor Analysis of GBV Drivers

Factor	Items	Loadings	Cronbach's α
Factor 1: Structural & Cultural Drivers	1,2,3,5	0.70–0.85	0.85
Factor 2: Family Context Drivers	4	0.74	—

Exploratory factor analysis of children's perceptions of gender based violence drivers revealed a two dimensional structure, suggesting that these drivers operate across multiple ecological levels rather than in isolation. The first factor, labeled Structural and Cultural Drivers, comprised items related to community norms, poverty, and gendered differences in harm, with strong factor loadings ranging from 0.70 to 0.85 and high internal consistency ($\alpha = 0.85$). This clustering indicates that children survivors recognize violence as codified within broader social and economic systems that shape everyday experiences and opportunities. Community expectations, material deprivation, and gendered power relations appear to be perceived as interconnected forces that influence both the occurrence and normalization of GBV. Ermiya, Batu and Teka (2019) similarly demonstrate that structural inequalities and community level norms play a central role in sustaining environments where violence against children is tolerated or overlooked. The coherence of this factor suggests that children do not view these drivers as separate influences, but rather as mutually reinforcing conditions that define susceptibility within their social context.

From a feminist theoretical perspective, the composition of the Structural and Cultural Drivers factor validates how patriarchal norms and socially constructed gender roles institutionalize unequal power relations within communities. Gendered differences in harm reflect long standing expectations regarding obedience, authority, and control, which disproportionately affect girls while also constraining boys within rigid norms of masculinity. Bamidele (2016) argues that such norms legitimize violence by framing it as corrective or disciplinary, particularly in contexts marked by economic hardship. Fang Chen (2020) further notes that cultural expectations often intersect with poverty to intensify dependence and silence, limiting children's capacity to resist or report abuse. The strong loading of gendered harm within this factor highlights children's awareness that violence is not only a personal experience but also a reflection of deeply rooted social arrangements.

The second factor, labeled Family Context Drivers, consisted of a single item relating to parental alcohol use, with a factor loading of 0.74. Although narrower in scope, this factor captures a critical household level condition that heightens children's exposure to GBV. Parental alcohol use is widely associated with impaired judgment, increased aggression, and weakened supervision, all of which create conditions conducive to abuse. Fang Chen (2020) identifies caregiver substance use as a key proximal determinant of violence against children, particularly in households already

strained by economic and social pressures. Bamidele (2016) similarly emphasizes that dysfunctional family environments often act as immediate settings where broader structural and cultural influences are enacted. The emergence of this factor highlights that while GBV is shaped by societal forces, it is frequently experienced within the intimate space of the household, where caregiver behavior directly affects children's safety and well-being.

The validation of these two factors demonstrates that children survivors perceive GBV drivers as both societal and familial in nature. Structural and cultural influences establish the broader environment in which violence occurs, while family-level factors create immediate contexts that can either mitigate or amplify risk. Integrating these findings with Feminist Theory provides a framework to interpret how power hierarchies, gendered socialization, and socioeconomic inequalities collectively mediate children's exposure to GBV.

This multidimensional understanding reinforces the necessity of interventions that simultaneously target community norms and household risk factors. Effective strategies should incorporate culturally informed approaches to challenge harmful societal practices, alongside family-focused measures that address parental behaviors, substance abuse, and household dysfunction, thereby creating protective environments that reduce children's susceptibility to GBV.

4.1.4 Weighted Mean Scores of Children's Perceived Drivers of Gender-Based Violence (N = 145)

To provide a clear comparative understanding of the factors driving gender-based violence (GBV) against children in South Mugirango Sub-County, the study calculated weighted mean scores for each identified driver based on children survivors' responses to a 5-point Likert scale (1 = Strongly Disagree, 5 = Strongly Agree). This approach enables the identification of the relative significance of social, economic, cultural, household, and structural influences on children's susceptibility to GBV.

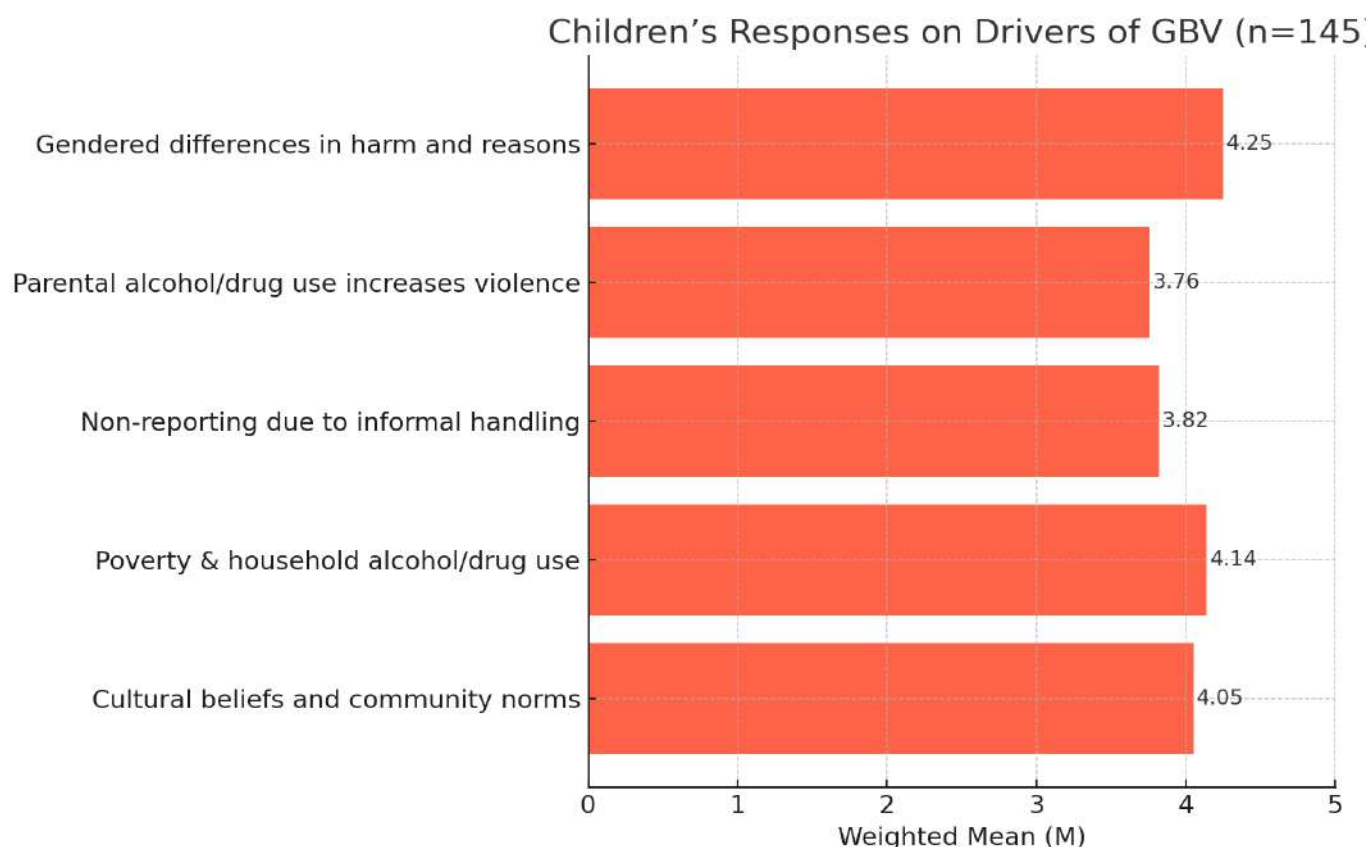


Figure 1

Weighted Mean Scores of Children's Perceived Drivers of Gender-Based Violence

Figure above shows children have weighted mean responses on GBV drivers. The weighted mean responses of children survivors regarding the drivers of gender-based violence (GBV) are presented in Figure 5.1 The highest-rated driver was gendered differences in harm and associated reasons ($M = 4.25$), indicating that children survivors recognize societal norms and expectations related to gender as the primary contributors to GBV. This finding aligns with existing research highlighting how rigid gender roles and patriarchal norms legitimize differential exposure to violence and reinforce power imbalances between boys and girls (UNICEF, 2022).

Poverty and household alcohol or drug use were identified as the second most influential drivers ($M = 4.14$), reflecting the role of socioeconomic stressors in increasing susceptibility to violence. Children's responses suggest that

financial strain and caregiver substance misuse create environments that exacerbate the risk of GBV, corroborating literature linking economic hardship and substance abuse to domestic and household violence (World Health Organization, 2021). Other significant drivers included entrenched cultural beliefs and community norms ($M = 4.05$), parental alcohol or drug use ($M = 3.82$), and non-reporting due to informal handling of abuse ($M = 3.76$). These findings indicate that, beyond societal and household-level influences, structural limitations such as weak formal reporting mechanisms further perpetuate GBV exposure.

V. CONCLUSION & RECOMMENDATIONS

5.1 Conclusion

The study concludes that GBV among child survivors in South Mugirango Sub-County is influenced by gender, cultural norms, household conditions, and socioeconomic status. Girls reported higher perceptions of cultural norms, poverty, substance use, and gender-differentiated harm. Gender and low socioeconomic status significantly predicted higher perceptions of GBV drivers. The study demonstrates that GBV is a multidimensional child-protection concern requiring attention to both household and wider social conditions.

5.2 Recommendations

The study recommends strengthening implementation of gender-responsive GBV and child-protection policies, improving confidential reporting, referral and case-follow-up systems, and expanding social protection and parenting programmes for economically vulnerable households. Schools and communities should strengthen child-rights education and accessible reporting mechanisms. County and national agencies should improve coordination among children's services, schools, health facilities, law-enforcement agencies, and community structures to ensure timely identification, reporting, referral, and follow-up of GBV cases.

Declaration of Interest

The authors declare that they do not have any known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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