

Gendered differences in the experience and perception 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 remains a significant child protection concern, yet gender differences in children's experiences and perceptions of violence are not always sufficiently examined at localized levels. This study examined gendered differences in the experience and perception of GBV among child survivors in South Mugirango Sub-County, Kisii County, Kenya. Guided by Feminist Theory, the study employed a quantitative explanatory research design. Data were collected using a structured questionnaire from 145 child survivors and analysed using the Statistical Package for the Social Sciences (SPSS). Descriptive statistics, chi-square tests, analysis of variance (ANOVA), binary logistic regression, and exploratory factor analysis were applied. Chi-square results showed significant associations between gender and perceived threats or harm ($\chi^2 = 12.02$, $p = .017$), reported experiences of sexual, physical, or psychological abuse ($\chi^2 = 15.27$, $p = .004$), and awareness of non-reporting or informal handling of GBV incidents ($\chi^2 = 10.62$, $p = .031$). ANOVA further showed significant gender differences in perceptions of GBV prevalence ($p = .013$) and threats or harm ($p = .043$), with girls reporting higher mean scores. Logistic regression indicated that girls had higher odds of perceiving GBV as severe (OR = 1.42, $p = .014$), while low socioeconomic status was also significant (OR = 1.55, $p = .012$). Factor analysis identified two dimensions: prevalence and abuse, and reporting culture. The study concludes that gender and socioeconomic conditions shape children's experiences and perceptions of GBV, underscoring the need for gender-responsive and context-specific child protection interventions. Recommendations include strengthening gender-responsive prevention, reporting, and support mechanisms within schools, households, and community child-protection systems.

Keywords: Child Protection; Child Survivors; Disaster Vulnerability, Gender-Based Violence; Gender Differences; Socioeconomic Status

I. INTRODUCTION

Gender-based violence (GBV) affecting children remains an important concern in child protection research, but understanding its distribution requires more than establishing that violence occurs (Jewkes et al., 2015). Quantitative examination of children's responses can reveal whether exposure, perceptions of risk, recognition of gendered effects, and perceptions of reporting practices vary systematically across groups. Such analysis is particularly important because children do not necessarily encounter or interpret violence in identical ways (WHO, 2020). Differences associated with gender, age, schooling, and household socioeconomic circumstances may shape how children perceive the seriousness and occurrence of violence within their everyday environments.

The quantitative study of GBV among children has increasingly moved towards examining patterns of exposure and factors associated with differential experiences. National and international evidence demonstrates that children are exposed to multiple forms of physical, sexual, and psychological violence, although the distribution of these experiences is not uniform across populations (UNICEF, 2020; WHO, 2020). Gender remains one of the important characteristics considered in such analyses because boys and girls may encounter different forms of violence and may differ in their recognition of threats and harmful experiences. However, aggregate prevalence estimates can conceal important variations within specific communities. Consequently, disaggregated analysis is necessary to establish whether observed differences between boys and girls are statistically meaningful or merely descriptive variations.

Statistical examination of gender-based violence (GBV) provides a basis for distinguishing between children's exposure to violence, their perceptions of its occurrence and severity, and the meanings they attach to such experiences (Creswell & Creswell, 2018). A child may report exposure to violence without necessarily perceiving all forms of violence as equally serious, while awareness of violence within the community may exist independently of direct

personal experience (UNICEF, 2020). These distinctions are important in child protection research because they allow analysis to move beyond aggregate prevalence estimates and examine relationships among exposure, perceived threat, recognition of differential effects, and awareness of reporting practices (WHO, 2020). Quantitative analysis can therefore provide a systematic basis for identifying patterns and associations in how children experience, perceive, and interpret violence within their social environments (Creswell & Creswell, 2018).

Gender is particularly relevant within this analytical framework. Existing research suggests that girls frequently report greater exposure to sexual and emotional forms of violence, whereas boys may experience physical violence and other forms of harmful treatment that are less readily identified as GBV (UNICEF, 2020; Jewkes et al., 2015). However, gender differences should not be assumed solely from descriptive evidence. Statistical tests are necessary to establish whether differences in children's responses are significant and to determine the magnitude of observed relationships. This distinction is especially relevant in settings where cultural expectations concerning femininity and masculinity influence children's interpretation of violence and their responses to threatening situations.

The socioeconomic environment in which children live also warrants quantitative attention. Poverty can influence children's exposure to unsafe environments, household stress, limited access to protective services, and reduced capacity to seek assistance. Cornia and Martorano (2017) argue that socioeconomic deprivation can intensify conditions associated with violence against children, while Derese and Misganaw (2014) associate limited access to social and protective services with delayed identification and intervention. From a statistical perspective, socioeconomic status can therefore be examined alongside gender and other demographic characteristics to establish whether these factors independently contribute to higher perceptions of GBV severity.

Age and school attendance similarly provide important analytical dimensions. Children's understanding of violence may develop with age, while participation in school may influence exposure to information, access to adults outside the household, and awareness of protection mechanisms (Cornia & Martorano, 2017). Nevertheless, the direction and magnitude of such relationships cannot be established through assumptions alone. Quantitative modelling provides a means of determining whether these characteristics significantly predict children's perceptions after other relevant characteristics have been considered (Creswell & Creswell, 2018).

Kenya has developed an extensive legal and institutional framework for child protection, including the Constitution of Kenya (2010) and the Children Act (2022). Despite these measures, national evidence continues to demonstrate substantial exposure of children to violence. The Kenya Violence Against Children Survey reported considerable levels of childhood exposure to physical, emotional, and sexual violence, with differences according to gender and type of violence (Government of Kenya, 2019). Such national findings are valuable for understanding the scale of the problem, but national estimates may conceal variations occurring within particular counties, communities, and social environments.

The importance of localized statistical evidence becomes particularly apparent in rural and semi-rural communities where socioeconomic conditions, household structures, educational participation, and access to child protection services vary considerably (Misati et al., 2021). South Mugirango Sub-County in Kisii County provides an appropriate setting for examining these relationships because children within the area are exposed to diverse household and community circumstances. Previous evidence from the wider area has drawn attention to child protection concerns, socioeconomic pressures, and risks associated with community environments (Misati et al., 2021). However, the availability of contextual information does not in itself establish how gender, socioeconomic status, age, and school attendance statistically relate to children's perceptions and reported experiences of GBV.

A further limitation in existing research is the tendency to treat children's perceptions of violence as a single construct. Perceptions concerning the prevalence of violence, threats within everyday environments, differential effects on boys and girls, personal experiences of abuse, and awareness of non-reporting may represent related but distinguishable dimensions (Misati et al., 2021). Examining these indicators statistically can establish whether they cluster into broader dimensions that characterize how children perceive GBV. Factor analysis is particularly useful in this respect because it can identify underlying patterns within multiple observed indicators while assessing the internal consistency of the resulting dimensions.

There is therefore a need for localized quantitative evidence that moves beyond reporting the existence of GBV to examining how children's gender is statistically associated with different perceptions and experiences, which characteristics predict higher perceptions of severity, and whether multiple GBV indicators form identifiable underlying dimensions (Misati et al., 2021). Such evidence is useful to social work and child protection because statistical patterns can assist practitioners and policymakers in identifying groups requiring greater attention and in designing interventions responsive to measurable differences rather than relying solely on generalized assumptions.

The present study addresses this gap by quantitatively examining gender-based differences and associated predictors among child survivors of GBV in South Mugirango Sub-County, Kisii County. Specifically, the analysis considers associations between gender and selected GBV perceptions and experiences, differences between boys and girls in mean responses, demographic and socioeconomic predictors of high perceived severity, and the underlying

dimensions represented by the observed GBV indicators. By integrating descriptive statistics, tests of association, group comparison, regression modelling, and factor analysis, the study provides a statistically grounded account of patterns within children's perceptions and experiences of GBV.

1.1 Statement of the Problem

Gender-based violence (GBV) against children remains a child protection and human rights concern in Kenya, despite constitutional and legislative safeguards, including Article 53 of the Constitution of Kenya (2010), which protects children from abuse, neglect, harmful cultural practices and all forms of violence, and the Children Act (2022), which provides for the protection and welfare of children. However, the existence of these safeguards does not, in itself, establish whether girls and boys experience and perceive GBV in similar or different ways. In South Mugirango Sub-County, limited empirical evidence exists on gender differences in the forms of violence reported by child survivors, their perceptions of threats and harm, and their awareness of reporting practices. This evidence gap limits context-specific understanding of the gendered dimensions of GBV among children. The study therefore examined gender differences in the experiences and perceptions of GBV among child survivors in South Mugirango Sub-County, Kisii County, Kenya.

1.2 Research Objective

To examine gender differences in the experience and perception of gender-based violence among child survivors in South Mugirango Sub-County, Kisii County, Kenya.

1.3 Research Question

What gender differences exist in the experience and perception 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 examines how gender inequality and unequal power relations are produced and maintained through social, cultural, and institutional structures. The theory emphasizes that gender is socially constructed and that expectations associated with femininity and masculinity influence individuals' experiences, behaviour, and exposure to power and violence (Walby, 1990). In relation to GBV, the theory draws attention to the ways in which patriarchal structures and gendered power relations can create conditions that enable violence and shape how survivors experience and interpret it. Although both girls and boys can experience GBV, their experiences may differ because of socially prescribed expectations concerning masculinity, femininity, authority, and acceptable behaviour (Connell, 1995).

In this study, Feminist Theory provides a basis for examining differences in the forms and experiences of GBV reported by girls and boys. Gender expectations may influence the types of violence children encounter and the circumstances in which such violence occurs. For example, girls may experience violence associated with control over their bodies, sexuality, and gendered roles, whereas boys may experience violence associated with expectations of toughness, aggression, emotional restraint, or conformity to dominant forms of masculinity (Jewkes et al., 2015). These differences do not imply that one gender is exclusively vulnerable to particular forms of violence; rather, they demonstrate how gendered social expectations can shape children's exposure to and experience of violence.

The theory also provides a useful lens for understanding differences in children's perceptions of GBV. Children's interpretations of violence may be influenced by the gender norms within their families and communities, including beliefs about authority, discipline, appropriate behaviour, and relationships between males and females. Consequently, similar experiences of violence may be perceived or interpreted differently by girls and boys because they are situated within different gendered expectations and power relations. Feminist Theory therefore allows the study to consider not only whether children experience violence, but also how gender may influence the way they understand and perceive such experiences.

The intersectional dimension of Feminist Theory further recognizes that gender does not operate independently of other social characteristics. Children's experiences of violence may also be shaped by age, socioeconomic circumstances, cultural expectations, and other dimensions of social position (Crenshaw, 1989). This perspective is important in interpreting gendered differences because girls and boys do not constitute homogeneous groups. Their experiences and perceptions may vary according to the social and household contexts in which they live. Feminist Theory therefore provides the conceptual basis for examining gendered differences in both the experience and perception

of GBV among child survivors in South Mugirango Sub-County. By focusing on gendered power relations, social expectations, and unequal positions within families and communities, the theory helps explain why girls and boys may experience, interpret, and respond to GBV differently.

2.2.1 Empirical Review

2.2.2 Gendered Differences in the Experience and Perception of Gender-Based Violence

Gender-based violence (GBV) against children is a global public health and child-protection concern that affects both girls and boys across different social and geographical settings (World Health Organization [WHO], 2020). Violence against children encompasses multiple forms, including physical, sexual, and emotional violence, and the gender dimension of these experiences has received increasing attention in international research and policy (UNICEF, 2021). UNICEF (2021) notes that gender influences children's exposure to violence through socially constructed expectations concerning masculinity and femininity. Gender also shapes the social environments in which violence occurs and the ways in which children's experiences are recognized and responded to (UNICEF, 2021). Consequently, examining GBV among children requires attention not only to the occurrence of violence but also to differences in how girls and boys experience and understand it.

Sexual violence provides particularly clear evidence of gender differentiation at the global level. UNICEF (2024) estimates that approximately 650 million girls and women alive today experienced sexual violence during childhood. Of these, more than 370 million experienced rape or sexual assault during childhood (UNICEF, 2024). The corresponding estimate for boys and men is between 410 and 530 million who experienced sexual violence during childhood, including approximately 240–310 million who experienced rape or sexual assault (UNICEF, 2024). These estimates demonstrate that girls experience a greater overall burden of childhood sexual violence, while also showing that the number of male survivors is substantial (UNICEF, 2024). UNICEF (2024) further cautions that global estimates are constrained by differences in the availability and quality of country-level data. This limitation is particularly relevant when comparing girls and boys because differences in reporting and disclosure may affect the visibility of male experiences.

Evidence from Africa demonstrates that gender differences vary according to the form of violence and the context in which children live. A population-based study of 833 adolescents aged 13–18 years in two districts of Senegal found that boys in the peri-urban district of Pikine had higher odds of experiencing recent emotional violence than girls (Sikweyiya et al., 2020). The same study found that girls in the rural district of Kolda had approximately twice the odds of experiencing sexual violence compared with boys (Sikweyiya et al., 2020). The findings therefore demonstrate that gender does not produce a uniform pattern across all forms of violence. Instead, girls and boys may face different forms of vulnerability depending on the type of violence and the social environment in which they live (Sikweyiya et al., 2020). This evidence supports the need for gender-disaggregated analysis when examining children's experiences of violence.

Gender norms provide an important mechanism through which differences in children's experiences of violence may arise. In Ethiopia, Murphy et al. (2021) examined the relationship between gender norms and household violence among young adolescents aged 10–12 years. The study found that community-level gender norms were significantly associated with experiences of household violence among both boys and girls (Murphy et al., 2021). The association was particularly evident in rural settings, where community norms were more influential than individual or household attitudes (Murphy et al., 2021). The study also identified norms that condoned violent discipline; promoted masculinities associated with violence, and supported gender inequality as relevant to the persistence of violence (Murphy et al., 2021). These findings indicate that children's experiences of violence are embedded within wider social expectations rather than being determined exclusively by individual or household characteristics.

The influence of gender norms is also relevant to how children interpret experiences of violence. Social norms can shape what is considered acceptable behaviour and can affect whether particular acts are recognized as harmful or abusive (UNICEF, 2021). Gendered expectations may therefore influence children's understanding of violence as well as their responses to it (UNICEF, 2021). Murphy et al. (2021) demonstrate that gender norms operate at community level in ways that are associated with children's experiences of household violence. This suggests that perceptions of violence should be examined alongside reported experiences because children may interpret similar behaviours differently within gendered social environments. For a study concerned with both experience and perception, this distinction is analytically important because reported exposure alone does not establish how children understand the violence they have experienced.

Kenyan evidence demonstrates that violence against children affects both females and males. The 2019 Kenya Violence Against Children Survey found that 45.9% of females and 56.1% of males aged 18–24 years reported experiencing childhood violence (Ministry of Labour and Social Protection et al., 2019). Physical violence was reported by 38.8% of females and 51.9% of males in this age group (Ministry of Labour and Social Protection et al., 2019). The survey also found substantial exposure to sexual and emotional violence among both females and males (Ministry of Labour and Social Protection et al., 2019). These findings challenge approaches that conceptualize GBV against children

primarily as a problem affecting girls. At the same time, the higher proportion of males reporting some forms of childhood violence demonstrates the importance of examining gender differences across multiple forms of violence rather than assuming that girls consistently experience greater exposure.

Evidence from repeated national surveys further indicates that gender differences extend beyond exposure to violence to patterns of help-seeking and service access. Annor et al. (2022) found significant declines in lifetime sexual, physical, and emotional violence between the 2010 and 2019 Kenya Violence Against Children and Youth Surveys among both females and males. The study also found that significantly more females sought and received services for sexual violence in 2019 (Annor et al., 2022). In contrast, significantly more males reported knowing where to seek help for sexual violence in 2019 (Annor et al., 2022). Disclosure patterns provide further evidence of gender differences. In an analysis of the 2010 Kenyan survey, Boudreau et al. (2018) found that 44.6% of girls and women who reported sexual violence before age 18 disclosed the experience, compared with 28.2% of boys and men. The authors further found that the odds of disclosure were lower among male survivors (Boudreau et al., 2018). These findings suggest that gender may influence not only children's exposure to violence but also whether experiences become visible through disclosure and engagement with support services.

Despite this evidence, an important gap remains concerning the relationship between gender, children's experiences, and their perceptions of GBV within specific local settings in Kenya. National surveys have established the scale and forms of violence against children and have identified gender differences in exposure, disclosure, and service-related outcomes (Ministry of Labour and Social Protection et al., 2019). Longitudinal national evidence has also demonstrated changes in violence and associated risk factors over time (Annor et al., 2022). However, national estimates cannot fully explain how children in particular communities experience and interpret violence within their immediate social environments. Evidence from Senegal and Ethiopia further demonstrates that gender differences vary according to the form of violence and the surrounding social context (Sikweyiya et al., 2020). The present study therefore addresses a specific contextual gap by examining gendered differences in both the experience and perception of GBV among child survivors in South Mugirango Sub-County, Kisii County, Kenya.

III. METHODOLOGY

3.1 Research Design

The study employed a quantitative explanatory research design to examine statistical patterns and relationships associated with gender-based violence among child survivors in South Mugirango Sub-County, Kisii County, Kenya. The design was appropriate because the study sought to quantify children's responses and determine whether statistically significant relationships and differences existed across selected demographic and socioeconomic characteristics. The design supported the application of descriptive and inferential statistical procedures to examine gender variations, associations between categorical variables, predictors of perceived severity, and the underlying structure of children's responses to GBV indicators. Unlike a qualitative inquiry concerned primarily with narratives or subjective meanings, the present analysis focused on measurable variables and their statistical relationships.

3.2 Study Area

The study was conducted in South Mugirango Sub-County, Kisii County, Kenya. The area was selected because of documented child protection concerns and the presence of social and economic conditions relevant to the occurrence and interpretation of GBV. The study area provided a defined geographical context within which gender, age, school attendance, and socioeconomic circumstances could be examined in relation to children's reported experiences and perceptions of violence.

3.3 Study Population

The analytical population comprised child survivors of gender-based violence (GBV) in South Mugirango Sub-County, Kisii County, Kenya. The sampling frame consisted of 1,534 officially recorded child GBV cases reported between January 2022 and March 2025 across the six wards: Tabaka (280), Bogetenga (270), Chitago-Borabu (265), Getenga (260), Boikang'a (230), and Moticho (229). The present analysis was restricted to children because all study variables were derived from child-reported data.

3.4 Sampling and Eligibility

A probability sampling approach using stratified random sampling was employed. The six wards constituted the sampling strata, and participants were allocated proportionately according to the number of recorded child GBV cases in each ward. Within each stratum, eligible children were randomly selected from the administrative case records. Eligible participants were children aged 8–15 years who were recorded as GBV survivors within the sampling frame and who obtained the required parental or guardian consent and provided assent. Children who did not meet the

eligibility criteria or whose questionnaires lacked sufficient information for the planned analyses were excluded. Selected children were identified from official GBV case records and approached through the relevant administrative and child-protection structures. Participation followed the approved ethical procedures, including parental or guardian consent and child assent, before administration of the structured questionnaire

3.5 Sample Size and Analytical Sample

A target sample of 154 child survivors was obtained by applying a 10% sampling fraction to the 1,534 recorded cases, with proportional allocation across the six wards. The ward-specific sample was calculated as $n_i = N_i \times 0.10$, where n_i denotes the number targeted in ward i and N_i denotes the recorded cases in that ward. This yielded 28 participants from Tabaka, 27 from Bogetenga, 27 from Chitago-Borabu, 26 from Getenga, 23 from Boikang'a, and 23 from Moticho.

Of the 154 children targeted for participation, 145 completed and returned the questionnaires, yielding a questionnaire completion rate of 94.2%. The remaining nine targeted children did not return completed questionnaires and were therefore not included in the analysis. Consequently, the final analytical sample comprised 145 child respondents. Because data were not obtained from the nine non-responding children, their characteristics could not be compared with those of the respondents, and no inference was made regarding potential differences between respondents and non-respondents.

3.6 Sampling Procedure and Sample Size

The broader study determined its sample using an appropriate sampling procedure for the identified population of child survivors. A target sample of 154 child survivors was initially established. Following data collection and data-quality screening, 145 completed child responses were available for analysis, representing a 94% response rate. Only valid and sufficiently complete child responses were retained for the statistical analyses reported in this article. The analytical sample therefore consisted of 145 observations.

3.7 Data Collection Instrument

Data were collected using a structured questionnaire administered to the child respondents. The questionnaire generated standardized responses that could be coded numerically and subjected to statistical analysis. The relevant items for this article measured children's perceptions and reported experiences relating to: perceived prevalence of GBV within the community; perceived threats or harm at home, school, and during commuting; perceptions regarding differences in the effects of GBV on boys and girls; reported experiences of sexual, physical, or psychological abuse; and awareness of non-reporting or informal handling of GBV incidents. Responses to the perception items were measured using Likert-type response categories and subsequently coded for statistical analysis. The resulting variables were used in descriptive, association, group-comparison, regression, and factor analyses.

3.7 Data Processing and Analysis

Completed questionnaires were checked for completeness, coded, and entered into the Statistical Package for the Social Sciences (SPSS) for analysis. Data cleaning was undertaken before statistical procedures were performed to identify inconsistencies, missing values, and coding errors. The analysis was conducted at several levels.

3.7.1 Descriptive Analysis

Frequencies, percentages, means, and standard deviations were used to summarize the characteristics of the respondents and their responses to the selected GBV indicators. Descriptive statistics provided the initial distribution of responses and allowed patterns between boys and girls to be identified.

3.7.2 Chi-Square Analysis

Chi-square tests of independence were used to examine associations between gender and selected categorical GBV experiences and perceptions. The analysis assessed whether gender was statistically associated with perceptions of GBV prevalence, perceived threats or harm, recognition of differential effects, reported experiences of abuse, and awareness of non-reporting or informal handling of incidents. The strength of statistically observed associations was assessed using Cramer's V. Statistical significance was evaluated at the 0.05 level. Analysis of Gender Differences: Differences between boys and girls in selected continuous or composite GBV perception measures were examined using one-way analysis of variance (ANOVA). Mean scores and standard deviations were calculated for each gender group. The F-statistic and associated p-value were used to determine whether observed differences between the two groups were statistically significant. Cohen's d was used to estimate the magnitude of the observed gender differences. This analysis enabled the study to distinguish between numerical differences in mean responses and differences that were statistically meaningful.

3.7.3 Logistic Regression Analysis

Binary logistic regression was employed to determine the extent to which selected demographic and socioeconomic characteristics predicted high perceived severity of GBV. The predictor variables included: gender; age; school attendance; and socioeconomic status. The results were expressed using odds ratios (ORs) with corresponding 95% confidence intervals and p-values. The model was used to determine the likelihood of high perceived GBV severity associated with each predictor while accounting for the other variables included in the model.

3.7.4 Factor Analysis

Exploratory factor analysis was conducted to examine whether the observed GBV perception indicators represented broader underlying dimensions. The procedure assessed the pattern of relationships among the observed items and identified indicators that clustered together. Factor loadings were examined to determine the contribution of individual items to the extracted dimensions. Internal consistency of the identified multi-item dimension was assessed using Cronbach's alpha. The analysis provided an empirical basis for determining whether children's perceptions of GBV could be represented by broader dimensions rather than being treated only as individual indicators.

3.7.5 Statistical Significance

For inferential analyses, statistical significance was assessed at $p < 0.05$. The interpretation of results considered both statistical significance and effect size where applicable. This approach was adopted to avoid relying solely on p-values and to provide an indication of the practical magnitude of observed relationships and differences.

3.8 Validity and Reliability

The questionnaire was subjected to pretesting before the main data collection to assess the clarity, appropriateness, and consistency of the items. Items were reviewed to ensure that they adequately represented the constructs under investigation and could generate responses suitable for quantitative analysis. Reliability was assessed using internal consistency measures where multiple items were combined into scales or dimensions. In the factor analysis, Cronbach's alpha was used to assess the reliability of the identified multi-item factor. The factor structure and item loadings were also examined to establish whether the indicators coherently represented the dimensions identified in the statistical analysis.

3.9 Ethical Considerations

Ethical approval for the study was obtained from the National Commission for Science, Technology and Innovation (NACOSTI) under permit number NACOSTI/P/25/4178473. Because the research involved children, particular attention was given to informed consent, child assent, confidentiality, privacy, and protection from potential harm. Permission and informed consent were obtained from the appropriate parents or legal guardians, while assent was obtained from participating children using age-appropriate explanations of the study. Participation was voluntary, and respondents were informed of their right to decline participation or withdraw without penalty. Personal identifiers were excluded from the analytical dataset to protect respondent confidentiality. Data were securely stored and used exclusively for research purposes. Data collection was conducted in a manner designed to protect children's privacy and dignity, particularly given the sensitive subject matter of GBV.

IV. FINDINGS & DISCUSSION

4.1 Findings

4.1.1 Associations between Children Survivor's Gender and Selected GBV Experiences/Perceptions

In trying to establish the relationship between children survivors' gender and their experiences and perceptions of gender-based violence, the study examined selected indicators related to exposure to abuse, perceived threats, recognition of gendered impacts, and awareness of reporting practices. The analysis sought to determine whether boys and girls differ in how they encounter and interpret violence within home, school, and community environments. To allow meaningful comparison, responses to Likert-type statements were grouped into broader categories representing lower and higher levels of perception or experience. Measures of association were then applied to assess the strength of the relationships between gender and the selected variables. The results presented in Table 4.6 provide insight into how gender influences children's exposure to violence, perception of risk, and awareness of reporting practices.

Table 1*Associations between Children Survivor's Gender and Selected GBV Experiences/Perceptions*

Association Tested	χ^2 (df)	p-value	Cramer's V	Interpretation
Gender vs perception that GBV is common in the community	7.85 (1)	0.097	0.17	Weak association; slightly more girls perceive GBV as common
Gender vs perception of threats or harm at school, home, or commuting	12.02 (1)	0.017	0.25	Moderate association; girls report higher perceived threats
Gender vs belief that GBV affects boys and girls differently	9.34 (1)	0.054	0.20	Borderline association; girls more likely to recognize differential impacts
Gender vs experience of sexual, physical, or psychological abuse	15.27 (1)	0.004	0.28	Strong association; girls report higher experiences of abuse
Gender vs awareness of non-reporting or	10.62 (1)	0.031	0.22	Moderate association; girls more aware of non-reporting patterns

The Chi-square analysis revealed varying degrees of association between gender and specific dimensions of GBV. Gender was weakly associated with perceptions that GBV is common in the community ($\chi^2 = 7.85$, $df = 1$, $p = 0.097$, Cramer's $V = 0.17$), with girls slightly more likely to perceive GBV as prevalent. Perceptions of threats or harm at school, home, or during commuting demonstrated a moderate association with gender ($\chi^2 = 12.02$, $df = 1$, $p = 0.017$, Cramer's $V = 0.25$), indicating that girls reported higher awareness of potential harm or threats. Similarly, the belief that GBV affects boys and girls differently showed a borderline association ($\chi^2 = 9.34$, $df = 1$, $p = 0.054$, Cramer's $V = 0.20$), with girls more likely to recognize these differential impacts. Stronger associations were observed for experiences of sexual, physical, or psychological abuse ($\chi^2 = 15.27$, $df = 1$, $p = 0.004$, Cramer's $V = 0.28$), with girls reporting higher levels of abuse, and for awareness of non-reporting or informal handling of GBV incidents ($\chi^2 = 10.62$, $df = 1$, $p = 0.031$, Cramer's $V = 0.22$), in which girls demonstrated greater awareness of under-reporting practices (Researcher, 2025).

Other perceptions of GBV, including the prevalence in the community, the differential impacts on boys and girls, and the frequency of threats or harm, were described using descriptive statistics rather than formal Chi-square testing because their ordinal nature makes categorical analysis less appropriate. Descriptive trends revealed that girls were more likely than boys to perceive GBV as prevalent, to recognize that boys and girls face different forms of mistreatment, and to report higher awareness of threats or harm at school, home, or during commuting. Open-ended responses further highlighted gendered differences in experiences, coping strategies, fear, perceived safety, and awareness of reporting mechanisms.

From a theoretical perspective, these findings align closely with Feminist Theory, which asserts that socially constructed gender roles and patriarchal norms fundamentally shape susceptibility to violence (Connell, 1995; Jewkes et al., 2015). Patriarchal structures create contexts in which girls are disproportionately subjected to sexual, emotional, and psychological violence, while boys often encounter physical and emotional abuse linked to societal expectations of dominance, stoicism, and aggression. These patterns illustrate how power imbalances within families and communities influence both the occurrence and perception of abuse, shaping children's understanding of acceptable behaviour and their willingness to disclose harm. Observed non-reporting behaviors among children survivors reflect internalized fear, shame, and socialized compliance with gendered norms, highlighting how patriarchal expectations perpetuate cycles of violence and constrain access to protective mechanisms.

National-level research on child GBV, including studies by Otieno and Wambua (2021) and the National Council for Children's Rights (2019), confirms that exposure to physical and sexual violence is widespread. However, such surveys often overlook localized, gender-disaggregated patterns, obscuring the subtle variations in risk and experience across different communities. This study fills that gap by providing detailed sub-county evidence, showing that household inequalities, cultural norms, and entrenched patriarchal practices intersect to shape not only the forms of GBV children encounter but also their perceptions, coping strategies, and help-seeking behaviour. The findings underscore the need for context-sensitive interventions that address both structural and cultural drivers of gendered susceptibility, ensuring that policies and protective services respond to the specific experiences of boys and girls in rural settings.

4.1.2 Gender Variations in Children's Experiences and Perceptions of GBV

In examining whether boys and girls differ in their perceptions and reported experiences of gender-based violence, the study compared the average responses of male and female participants across several dimensions of abuse and awareness. These dimensions included perceptions of the prevalence of physical or emotional violence against children in the community, exposure to threats or harm at school, home, or during commuting, recognition that gender-based violence affects boys and girls differently, reported experiences of sexual, physical, or psychological abuse, and awareness that incidents of violence are often not reported or are handled informally. Mean scores for boys and girls were compared in order to determine whether gender is associated with meaningful differences in children's experiences and understanding of violence. Measures of statistical significance and effect size were used to evaluate both the presence and the magnitude of these differences. The results of these comparisons are presented in Table 2.

Table 2
Group Differences in Perceptions and Experiences of GBV (ANOVA)

Association Tested	Boys (M±SD)	Girls (M±SD)	F (df1, df2)	p-value	Cohen's d	Interpretation
Gender vs perception that gender-based violence (GBV) is common in the community	3.65±0.71	3.94±0.68	6.35 (1,143)	0.013	0.42	Girls report higher perception of GBV prevalence
Gender vs perception that children face threats or harm at school, home, or during commuting	3.52±0.75	3.77±0.66	4.16 (1,143)	0.043	0.34	Girls report higher awareness of threats/harm
Gender vs perception that GBV affects boys and girls differently, with variations in type or severity of harm	3.88±0.70	4.01±0.68	1.30 (1,143)	0.258	0.19	No significant difference
Gender vs reported experiences of sexual, physical, or psychological abuse	3.92±0.72	4.06±0.67	1.47 (1,143)	0.229	0.20	No significant difference
Gender vs perception that GBV is often not reported or handled informally	3.58±0.78	3.74±0.75	1.30 (1,143)	0.256	0.19	No significant difference

Table 2 presents the means, standard deviations, ANOVA statistics, effect sizes, and trends for boys and girls on each GBV dimension. Significant gender differences were observed in perceptions of GBV prevalence and threats at school or home. Girls reported higher mean scores for the prevalence of GBV ($F(1,143) = 6.35, p = 0.013, d = 0.42$) and threats at school or home ($F(1,143) = 4.16, p = 0.043, d = 0.34$), indicating that they are more likely than boys to perceive or experience violence in their daily environments. The remaining items, including the perception that GBV affects boys and girls differently, reported experiences of abuse, and awareness of non-reporting or informal handling, did not show statistically significant differences between boys and girls, although descriptive trends suggest slightly higher mean scores for girls. This finding is consistent with studies by Otieno and Wambua (2021) and the National Council for Children's Rights (NCRC, 2019), which also observed that while girls often report higher sensitivity or awareness of GBV-related issues, the differences between boys and girls are not always statistically significant, implying that both genders are exposed to and recognize forms of GBV, albeit in varying degrees.

The findings show clear gendered differences in how children experience and interpret gender-based violence within their everyday environments. Girls reported heightened awareness of risk and greater exposure to sexual, emotional, and physical forms of violence, while boys more frequently experienced physical punishment and labor-related abuse that was rarely identified as violence. These differences reflect socially constructed gender roles within households and communities, where girls' bodies and behavior are subject to greater control, and boys are expected to tolerate harsh discipline without complaint. Such patterns mirror the gendered socialization processes described by Jewkes et al. (2015), where power, control, and silence shape children's susceptibility to abuse, and Connell's (1995) theory of gender relations, which explains how dominant norms normalize harm while discouraging disclosure.

This pattern is consistent with evidence from rural Kenyan settings, where household power relations, corporal punishment, and early marriage shape children's exposure to violence in gendered ways. UNICEF (2020) shows that these practices structure daily family and community interactions, increasing girls' susceptibility to sexual and emotional abuse while making boys' experiences of violence less visible, as such acts are often normalized as discipline or character development. This aligns with MacLeod (2022), who highlights that community norms influence how violent acts are perceived, frequently framing harm as acceptable correction rather than abuse. As a result, gender affects not only

the likelihood of experiencing violence but also whether such experiences are acknowledged, reported, or ignored within local social and cultural contexts.

Socioeconomic and structural conditions reinforce these gendered patterns of violence. This is consistent with Cornia and Martorano (2017), who demonstrate that poverty and household stress increase the use of coercive discipline and force children into survival- related labor, exposing both girls and boys to greater risk. Similarly, Derese and Misganaw (2014) show that limited access to child protection and psychosocial services reduces timely identification and intervention, particularly in rural areas. These findings align to explain why gender-based violence continues across households and communities despite the presence of legal and policy frameworks intended to prevent it.

These findings imply that gender-based violence among children cannot be understood solely as a matter of individual susceptibility. Instead, exposure, awareness, and reporting are shaped through interconnected cultural expectations, household power relations, and structural constraints. Effective interventions therefore require gender-responsive approaches that address girls' heightened exposure to sexual and emotional abuse while also confronting the normalization and under-reporting of violence against boys. Without engaging these deeper social and structural determinants, protective efforts remain partial and uneven in their impact.

4.1.3 Determinants of Children's Perceived Severity of Gender-Based Violence

In order to identify factors associated with children's perception of the severity of gender- based violence, the study examined the influence of selected demographic and socio- economic characteristics. The analysis assessed whether children's gender, age, school attendance, and socio-economic status are associated with higher perceptions of gender- based violence within their communities and daily environments. The analysis estimated the likelihood that children would report high levels of perceived violence while accounting for the simultaneous influence of multiple predictors. Measures of association were calculated to determine the magnitude and direction of these relationships, alongside statistical tests used to evaluate their significance. This approach allows for a clearer understanding of how structural and demographic conditions shape children's awareness and interpretation of gender-based violence. The results of this analysis are presented in Table 3.

Table 3

Logistic Regression Predicting High GBV Perception

Predictor	Odds Ratio (OR)	95 % CI	p-value	Interpretation
Gender (Girls vs Boys)	1.42	[1.08–1.96]	0.014	Girls more likely
Age (12–15 vs 9–11)	1.18	[0.91–1.53]	0.212	Not significant
School attendance	0.74	[0.53–1.02]	0.067	Borderline effect
SES (Low vs Mid/High)	1.55	[1.10–2.21]	0.012	Poverty increases risk

The logistic regression analysis shows that gender significantly predicts children's perceptions of the severity of gender-based violence, with girls 1.42 times more likely than boys to perceive GBV as serious ($p = 0.014$). This difference reflects socially constructed vulnerabilities codified in patriarchal norms, where cultural expectations of female submission and restricted bodily autonomy increase girls' risk of sexual, emotional, and physical abuse (Oliver and Carolyn, 2021). Girls' heightened perception of GBV is further influenced by societal norms that reinforce control over female behavior and limit agency, shaping how they recognize and respond to violence. Descriptive and t-test results confirm that girls report higher exposure to GBV within school and household contexts, demonstrating that gendered socialization affects both lived experiences and awareness of harm (MacLeod, 2022). These patterns align with evidence showing that entrenched cultural and social practices make girls' experiences of GBV more visible while boys' victimization often remains underreported or overlooked (Kelkar et al., 2022).

Socio-economic status also emerged as a significant predictor, with children survivors from low-SES households exhibiting 1.55 times higher odds of perceiving GBV as severe compared to peers from mid- or high-SES households ($p = 0.012$). Poverty exacerbates susceptibility by increasing household stress, limiting access to protective resources, and perpetuating conditions in which abuse and neglect are more likely to occur (Cornia & Martorano, 2017; Derese & Misganaw, 2014). Low-SES children survivors may therefore experience multiple, intersecting forms of violence, reinforcing their awareness of GBV severity. These dynamics illustrate how gender and economic inequality intersect, creating compounded vulnerabilities that are consistent with a Feminist theoretical lens, which emphasizes the structural roots of power imbalances and the social organization of susceptibility.

The lack of a statistically significant effect for age ($p = 0.212$) and the borderline influence of school attendance ($p = 0.067$) suggest that structural and socio-economic factors exert a stronger influence on children's perceptions of gender-based violence than developmental stage or school participation alone. As noted by Oliver and Carolyn (2021), gender norms and social expectations interact with material deprivation to shape children's awareness and experiences of GBV. Cornia and Martorano (2017) further highlight that poverty, limited access to protective services, and household

stress amplify susceptibility, particularly among girls. These findings demonstrate that interventions must be gender-responsive and socio-economically informed, addressing cultural practices that reinforce female susceptibility while mitigating poverty-related risks across all children.

4.1.4 Underlying Dimensions of Children's Perceptions of Gender-Based Violence

In order to examine the underlying structure of children's perceptions of gender-based violence, the study analyzed patterns among survey items measuring exposure to abuse, recognition of violence, and awareness of reporting practices. The aim was to determine whether these observed responses reflect broader conceptual dimensions that organize how children understand and experience gender-based violence in their daily lives. Identifying such dimensions helps clarify how different aspects of violence such as direct exposure and reporting constraints relate to one another within children's perceptions. The analysis examined how strongly individual items were associated with emerging dimensions and assessed the internal consistency of the resulting groupings to ensure reliability. This approach provides insight into the broader patterns that shape children's awareness of gender-based violence and the social contexts in which abuse is experienced and interpreted. The results are presented in Table 4.

Table 4

Factor Analysis of GBV Perceptions

Factor	Items	Loadings	Cronbach's α
Factor 1: Prevalence & Abuse	1,2,3,4	0.71–0.84	0.83
Factor 2: Reporting Culture	5	0.77	—

Factor analysis of children's perceptions of GBV revealed a two-dimensional structure, indicating that their experiences and understanding of violence are multidimensional. Factor 1, labeled Prevalence & Abuse, incorporated items reflecting direct exposure to physical, emotional, and sexual abuse, with loadings between 0.71 and 0.84 and high internal consistency ($\alpha = 0.83$). This finding confirms that children survivors are acutely aware of the frequency and severity of violence in their environments, consistent with prior studies highlighting high prevalence rates of child abuse in rural communities (Bamidele, 2016; Gupta et al., 2021). From a Feminist theoretical perspective, these experiences are codified within structural gendered inequalities, which shape both the forms of violence children survivors' encounter and the differential vulnerabilities of boys and girls. The loadings suggest that children survivors internalize these patterns of abuse, recognizing the ways in which societal norms around gender roles mediate exposure.

Factor 2, labeled Reporting Culture, and consisted of a single item on non-reporting, with a loading of 0.77, capturing the socio-cultural and institutional barriers that impede disclosure. This reflects findings from previous literature indicating that stigma, fear of retaliation, and weak enforcement mechanisms constrain help-seeking behavior (Odwe, Undie & Obare, 2018; Biribawa et al., 2020). From a Feminist theoretical lens, the reluctance or inability to report abuse illustrates how power relations within households, schools, and communities perpetuate silence, particularly for girls, and reinforce structural control over their bodies and autonomy. The identification of this factor validates the intersection of individual experience with broader social and cultural constraints, highlighting that susceptibility to GBV is not solely determined by direct exposure but also by the capacity to act against it.

The empirical validation of these two factors emphasizes that perceptions of GBV are both experiential and socially mediated. Children's recognition of abuse (Factor 1) is inseparable from the structural and cultural barriers that govern reporting and response (Factor 2). Integrating these findings with Feminist Theory provides a framework to interpret how unequal power dynamics and patriarchal norm's structure both exposure to violence and the silencing of victims. This multidimensional understanding reinforces that interventions must address not only prevention of abuse but also transformation of social norms and reporting mechanisms, creating environments where children survivors can safely acknowledge and seek redress for GBV.

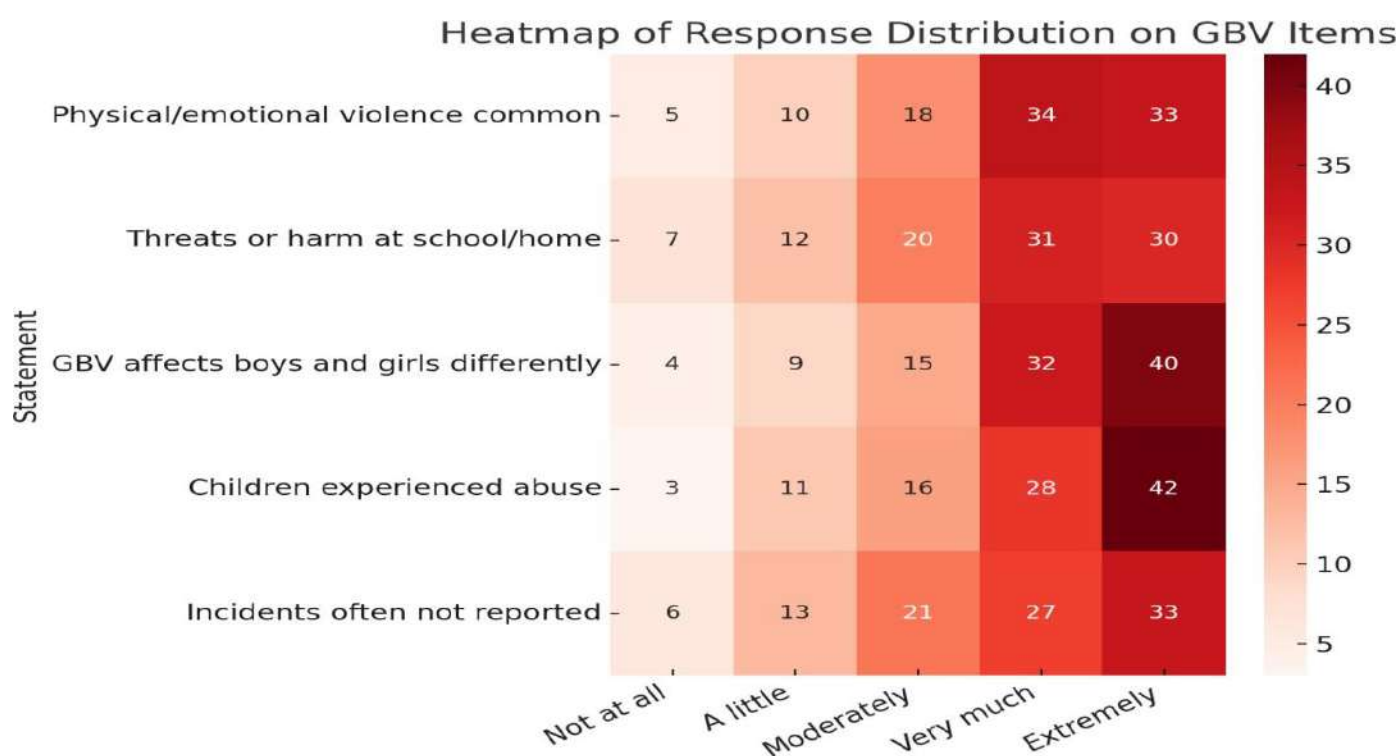


Figure 1
Heatmap of Response Intensities

The heatmap provides a distributional visualization of children's responses across multiple GBV indicators, revealing clear intensity gradients that correspond to differential exposure and perception patterns. Strong clustering of responses in the upper severity categories ("Very much" and "Extremely") is observed for items related to violence prevalence, threats within school and home environments, and direct experiences of abuse. This concentration indicates that GBV is not perceived as episodic but as a recurrent and normalized feature of children's everyday social environments. Such patterns are consistent with empirical evidence demonstrating that entrenched cultural practices and patriarchal norms normalize violence within domestic and community spaces, particularly in rural contexts (Oliver & Carolyn, 2021; Yujiro Sano et al., 2021). The visualization thus statistically reinforces the interpretation that GBV exposure is structurally codified within children's immediate environments rather than arising from isolated incidents.

The findings indicate pronounced gender-differentiated patterns in experiences of gender-based violence, with respondents recognizing that boys and girls are affected in distinct ways and at varying levels of severity. This observation is consistent with Kelkar et al., 2022, who link gender inequality and patriarchal power asymmetries to increased susceptibility among girls, particularly within household, educational, and cultural settings. Carter et al., 2023, further demonstrate how systemic power imbalances shape exposure and perception of violence, reinforcing differences in how boys and girls experience abuse.

The high prevalence of abuse-related responses aligns with Cornia & Martorano, 2017, who identify poverty as a compounding factor that intensifies risk, while Ermiya et al., 2019, highlight how limited access to education further reduces protective opportunities for children. Similarly, Akareem and Hossain, 2016, report that weak social services increase susceptibility by limiting early detection and intervention, indicating that structural and socio-economic factors interact to shape children's exposure to violence. Analysis of the visualization reveals substantial clustering around non-reporting indicators, reflecting a systemic issue of under-reporting. This pattern corresponds with Biribawa et al., 2020, who note that fear of reprisal and social stigma discourage disclosure, while Odwe et al., 2018, show that weak legal enforcement and low community trust in justice mechanisms further restrict accountability.

V. CONCLUSION & RECOMMENDATIONS

5.1 Conclusion

The study concludes that gender-based violence (GBV) among child survivors in South Mugirango Sub-County is gendered, with girls reporting higher perceptions of GBV prevalence and threats than boys. Gender significantly predicted higher perceived severity of GBV, while low socioeconomic status also increased the likelihood of high



perceived severity. The findings further show that children's perceptions of GBV are reflected in two dimensions: prevalence and abuse, and reporting culture. These findings demonstrate the need for policy responses that address gender differences, socioeconomic disadvantage, and barriers to reporting.

5.2 Recommendations

The study recommends: The Ministry of Labour and Social Protection should strengthen implementation of the Children Act (2022) through clear, gender-responsive child protection and mandatory reporting mechanisms at sub-county level; County governments should integrate GBV prevention and response into county child protection policies, with specific measures targeting children from low-socioeconomic-status households; The National Gender and Equality Commission and relevant government agencies should strengthen gender-responsive policies addressing the different forms of violence experienced by girls and boys; Child protection policies should require accessible, confidential, and child-friendly reporting and referral mechanisms in schools and communities; and County and national child protection authorities should strengthen inter-agency policy coordination among social workers, schools, police, health services, and child protection actors to improve timely identification, reporting, referral, and response to GBV cases.

Declaration of Interest

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