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Where We Live and Learn: Violence against children in Europe and Central Asia

Violence against children regional analysis
Europe and Central Asia

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List of abbreviations and acronyms

CDC	Centers for Disease Control and Prevention (United States)
CRC	Convention on the Rights of the Child
CSEW	Crime Survey for England and Wales
DHS	Demographic and Health Surveys
ECA	Europe and Central Asia
ECARO	Europe and Central Asia Regional Office
ECPAT International	End Child Prostitution, Child Pornography, and the Trafficking of Children for Sexual Purposes
EU	European Union
GBV	Gender-based violence
GBVIMS	Gender-based violence information management system
HBSC	Health behaviour in school-aged children
ICVAC	International classification of violence against children
ILO	International Labour Organization
IMS	Information management system
IOM	International Organization for Migration
MICS	Multiple Indicator Cluster Surveys
NSO	National Statistical Office
OECD	Organization for Economic Cooperation and Development
PISA	Programme for International Student Assessment
SDG	Sustainable Development Goal
TransMonEE	Transformative Monitoring for Enhanced Equity
UN	United Nations
UNECE	United Nations Economic Commission for Europe
UNICEF	United Nations Children's Fund
UNODC	United Nations Office on Drugs and Crime
USAID	United States Agency for International Development
VAC	Violence against children
VACIE	Violence against children in emergencies
VACS	Violence against children survey
VAW	Violence against women
WHO	World Health Organization

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Foreword

Where we live and learn: violence against children in Europe and Central Asia

The Convention on the Rights of the Child makes clear that children have the right to be protected from all forms of violence. In November 2024, government representatives gathered in Bogotá for the First Global Ministerial Conference on Ending Violence Against Children. Together they reaffirmed their commitment to the Convention and to the 2030 Agenda for Sustainable Development – including ending all violence, abuse, exploitation and trafficking of children – and pledged to invest in the systems and services needed to do so.

It is this investment that is so key to ensuring that the intentions shown through these commitments, and the legislation in place to protect children, are upheld and turned into concrete action.

Violence puts a child's immediate safety and well-being at risk and derails long-term development by disrupting their emotional, cognitive and physical growth.

It is often part of a wider cycle of domestic, gender-based, and community violence. It often spans generations. Children who grow up surrounded by violence may come to see it as normal, increasing the likelihood that they too will become victims or perpetrators later. Beyond the human cost – to lives and futures – violence against children costs the global economy more than USD \$7 trillion each year. That is around 8 per cent of global GDP.

Adults who experienced violence in childhood are more likely to get into trouble with the law, to lack stable employment or to use drugs or alcohol; and, in a vicious – but preventable – cycle, experiencing violence in childhood can shape how that child goes on to treat peers, intimate partners, family members and their own children when they are adults.

Violence against children is as pervasive as it is damaging. More than two thirds of children globally

experience violence. Sometimes the consequences are deadly, with around one child dying every four minutes from an act of violence. For half of all children in the Europe and Central Asia region, violence and abuse perpetrated by and between caregivers make homes the most dangerous place of all.

Progress has been made in recent years. Some 38 of 55 countries in Europe and Central Asia have banned corporal punishment of children in all settings, including at home – as sign of recognition of its harm. But without concrete investment in the systems and services that protect children from violence, respond and prevent violence recurring and ensure that no child is left behind, violence will continue to pervade children's homes, classrooms and communities.

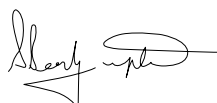
The scale and impact demand that ending violence against children becomes a top political priority, addressed with the same determination and resources as other global emergencies.

Governments must carry forward the Bogotá commitments, keep this issue at the very top of the political agenda, and ensure that the fight against violence never stops. Constant attention, backed by accountability and robust monitoring, is essential to ensure that commitments translate into real, measurable progress for every child. And it must happen now.



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Executive summary

Both experiencing and witnessing violence have a devastating effect on children. From the immediate threat to a child's life and well-being to the long-term – even lifelong – repercussions, it undermines a child's sense of self-worth and disrupts their emotional, cognitive and physical development.

Violence against children is often part of a wider cycle of inter-personal, family and community violence and can span generations. It has strong gender dynamics that shape the risks for boys and girls and how they are affected. Children who grow up surrounded by violence may come to see it as 'normal', increasing the likelihood that they too will become victims or perpetrators in adulthood. Abuse of power, gender inequality, poverty and resulting economic stress, peer pressure and harmful social norms are among the main causes and drivers.

The global community, including the Europe and Central Asia (ECA) region, has committed to end all forms of violence against children (VAC) by 2030. Yet without having a clear understanding of the extent, cause, and nature of acts of violence against children, this is an exceedingly difficult challenge to meet. Indeed, the region, like the rest of the world, is **not on track to keep this promise to children.**

In this new report, UNICEF has conducted both a mapping of indicators and a new analysis of data on VAC prevalence and incidence across the region (second part of this report). The purpose of this analysis is twofold:

- to better understand which VAC indicators countries and territories in ECA use to report VAC prevalence and incidence, and
- to analyse the data on VAC in the region, which will help determine where to direct investments.

The structure of the indicator and data analysis in this report follows the main categories of VAC defined by the International Classification of Violence Against Children (ICVAC) – including physical, sexual and psychological VAC, as well as neglect and violent killing. Selected indicators capturing various forms of VAC, such as “bullying” (physical, psychological, and sexual violence), have also been analysed for countries and territories in the region with available data, as well as so-called “composite phenomena”, such as “child marriage”.

Drawing from the indicator map, databases, national administrative records, and international and national surveys, this analysis, conducted between July 2024 and May 2025, has revealed that, **despite progress, violence against children across the ECA region remains widespread.** Available data indicate that:

- **For many children, the most dangerous place is home.** Nearly 1 in 3 children experience physical punishment at home by caregivers, in 15 countries and territories with available data across the region. The prevalence of psychological aggression against children by caregivers is even higher, ranging from 40 to 69 per cent in these countries and territories. Children as young as 1-2 years old were reportedly exposed to physical punishment and psychological aggression.
- **Many caregivers are not parenting in the way they would like.** In 14 countries with available data, most caregivers believe physical punishment and psychological aggression are not necessary for raising children – but many are resorting to it regardless. For instance, in Tajikistan's 2023 Demographic and Health Survey, only 4 per cent of adults stated that physical punishment is necessary to raise/educate children, while 34 per cent of children reportedly experienced physical punishment by caregivers in the past month of the survey. Further investigation is needed to determine which factors are preventing parents from interacting with their children the way they want, whether that is stress, a lack of awareness of alternative parenting strategies, or other causes. In families where intimate partner violence takes place, the use of physical punishment or psychological aggression against children is also more likely.
- **Sexual violence is one of the most underreported forms of violence in the region.** Across 19 member states of the European Union (EU), between 1 and 14 per cent of women reported having experienced sexual violence during childhood. But due to various reasons, which may include societal stigma, victim-blaming and a lack of effective mechanisms and processes for detecting, assessing, accurately recording and appropriately responding to incidents, the actual number is likely far higher. According to global estimates, for instance, around 37 million women and girls experienced rape and sexual assault before age 18 in Europe alone.

- **Peer violence is pervasive in the region.** On average in 42 countries and territories, around 7 per cent of children recently have bullied others, 11 per cent have been bullied and 10 per cent engaged in physical fights.
- **Digital technology is opening new venues for violence.** An even higher proportion of children in the 42 countries and territories in the region report experiencing this behaviour online, including an average of 12 per cent who report cyberbullying others and 15 per cent who are cyberbullied.
- While the estimated rate of **intentional homicide** in the general population has steadily decreased since 2016, this progress is not mirrored for children. Instead, in the child population, the homicide rate has remained relatively stable. More than 1,000 children were registered as killed intentionally in this period in ECA.
- **Neglect is prevalent in the region**, but data required to conduct a comparative analysis are lacking. This may be due to resource constraints, systems failing to define neglect as a type of VAC, and the absence of international standardized indicators for neglect, among other reasons.
- **Gender, age, and intersecting vulnerabilities**, such as disability status, being in alternative care, or being affected by migration and humanitarian crises all contribute to which children are more likely to face violence, as well as to be identified and supported.

The analysis identified almost 1,500 VAC prevalence and incidence indicators used by countries and territories in the region that could be matched with the main ICVAC categories. The **VAC indicator repository** compiled based on the analysis is not exhaustive, given both accessibility issues and budget and time constraints. However, it provides a strong foundation.

While many countries and territories in the region collect and report VAC data, using these data for a regional comparative analysis was challenging due to **issues with data quality and comparability, insufficient data coverage and lack of disaggregated data, among other reasons.**

For instance, most of the VAC data that were used in the report's analysis were produced by only a few countries and territories in the region. This means that countries and territories without available or comparable data had to be omitted from the analysis, which can give a misleading account of the regional VAC data landscape.

Many countries and territories in the region are also failing to collect data on certain types of violence at all, especially neglect and psychological violence.

Few countries and territories systematically disaggregate the VAC indicators they use by variables deemed "indispensable" or "minimum" by the ICVAC, such as the age and sex of the child victim and the perpetrator, though this information is crucial for planning and implementing an effective VAC response.

Most countries and territories in the region use surveys and administrative registers to collect VAC data – essential VAC data sources. However, while some countries and territories in the region use standardized international surveys or survey modules – enabling comparative data analysis despite some country-specific variations – not all do. There are also differences among standardized international surveys and survey modules used by different sub-regions, hampering comparability across the region and leading to limited data coverage. For example, various countries and territories in Central and Eastern Europe and Central Asia use Multiple Indicator Cluster surveys (MICS) or Demographic and Health Surveys (DHS) to collect data on specific forms of VAC. These are not used in Western European countries and territories. Moreover, the EU has recently started collecting data on violence against women (VAW) including violence experienced during childhood using a gender-based violence survey (EU GBV), which differs in survey design and methodology from the MICS and DHS modules on VAC.

National statistics in the region, which are based on data from administrative registers and databases, are even harder to compare than survey-based data. This is due to considerable variations in concepts and definitions of the different forms of VAC and of many disaggregation variables (such as age group, disability and migration status, etc.) used across and within countries and territories in the region, particularly when there is more than one sector producing and reporting VAC data.

Even when comparable data are available for analysis, global evidence and the findings of this report show that both survey and administrative data underreport VAC prevalence and incidence. Surveys rarely cover all forms of VAC and all sub-categories of one form of VAC, for example. Administrative registers are hindered by low levels of disclosure and help-seeking from formal sources by the children affected. These challenges often are coupled with the lack of systematic detection, registration and reporting of VAC incidents by systems including social services, health, education, justice and law enforcement. They are further hampered by the lack of systematic production and publication of VAC statistics by many countries and territories.

What governments and other stakeholders must do

The following recommendations are based on a large – and growing – evidence base regarding VAC data gaps and what works in violence prevention and response. Many of these are already being implemented by governments in the region and around the world. Yet, all too often, implementation is too slow to help the children who need protection *now*.

To make an impact, they must be scaled quickly.

① Ensure a protective environment for all children.

- Invest in quality parenting and family support interventions and services and ensure that they are readily available for all parents and caregivers, and promote gender equality.
- Ensure schools are safe and inclusive spaces where children feel safe to learn and express themselves, free from violence by peers and teachers, by implementing whole-school approaches to prevent peer violence and bullying, build socio-emotional skills, and provide effective referral and response mechanisms.
- Integrate online risks into violence prevention strategies, and ensure that children's rights are placed at the forefront of digital governance. This includes updating legislation, regulating tech companies and online platforms, and reforming child protection systems for the digital age.
- Support schools to build teacher and staff capacity through training so they can address sensitive issues, challenge harmful gender and social norms, and guide children to services.
- Provide specialized support for children who show harmful behaviours, including tailored psychosocial interventions, restorative justice approaches, and age-appropriate, trauma-informed therapeutic support for children exhibiting harmful sexual behaviours.

② Respond and prevent recurrence.

- Invest in hiring and training an adequate number of social workers who can respond to the needs of children and families – including in sudden onset emergencies and in the context of migration and displacement – and equip the wider social service workforce with the skills, tools, attitudes and resources to prevent and respond to VAC.
- Reform justice systems and services to ensure that they are child-sensitive, restorative and trauma-informed.
- Establish and strengthen multidisciplinary and interagency services (such as Barnahus-type models) to prevent re-traumatization and ensure coordinated support to child victims and witnesses.
- Establish clear, structured mechanisms for collaboration and coordination among child protection services, law enforcement, the judiciary and health services to ensure efficient case management and safeguard the child's best interests while balancing confidentiality and interagency collaboration, and also promoting coordination with VAW response mechanisms.

③ Leave no child behind.

- Accelerate childcare reform to prevent family separation, end institutionalization, and ensure every child grows up in a safe and nurturing family environment – including in emergency responses.
- Prioritize investments in early intervention and family support services, expand quality family- and community-based care alternatives, and set clear time-bound targets for deinstitutionalization.
- Consider the gender dynamics of VAC, and safeguard the needs of children with disabilities, infants and young children, and those in migration and displacement contexts.

4 Improve VAC data collection and monitoring.

- Invest in VAC data improvement and bridge the VAC data gap.
- Support and fund country-specific, regional and subregional initiatives to strengthen data and information management systems on VAC.
- Adopt ICVAC and existing guidance on VAC statistics, and apply lessons from prior and ongoing data-improvement projects.
- Conduct a systematic review and assessment of the VAC data landscape and ecosystem to identify what exists, what is missing, what works (or not), and where targeted improvements are needed to build a comprehensive cross-sectoral national VAC data collection and monitoring system.
- Stay engaged with UNICEF's ICVAC implementation and the Steering Group on Statistics on Children under the Conference of European Statisticians,

and participate in expert consultations, technical working groups and knowledge-sharing forums to align practices and mobilize technical support.

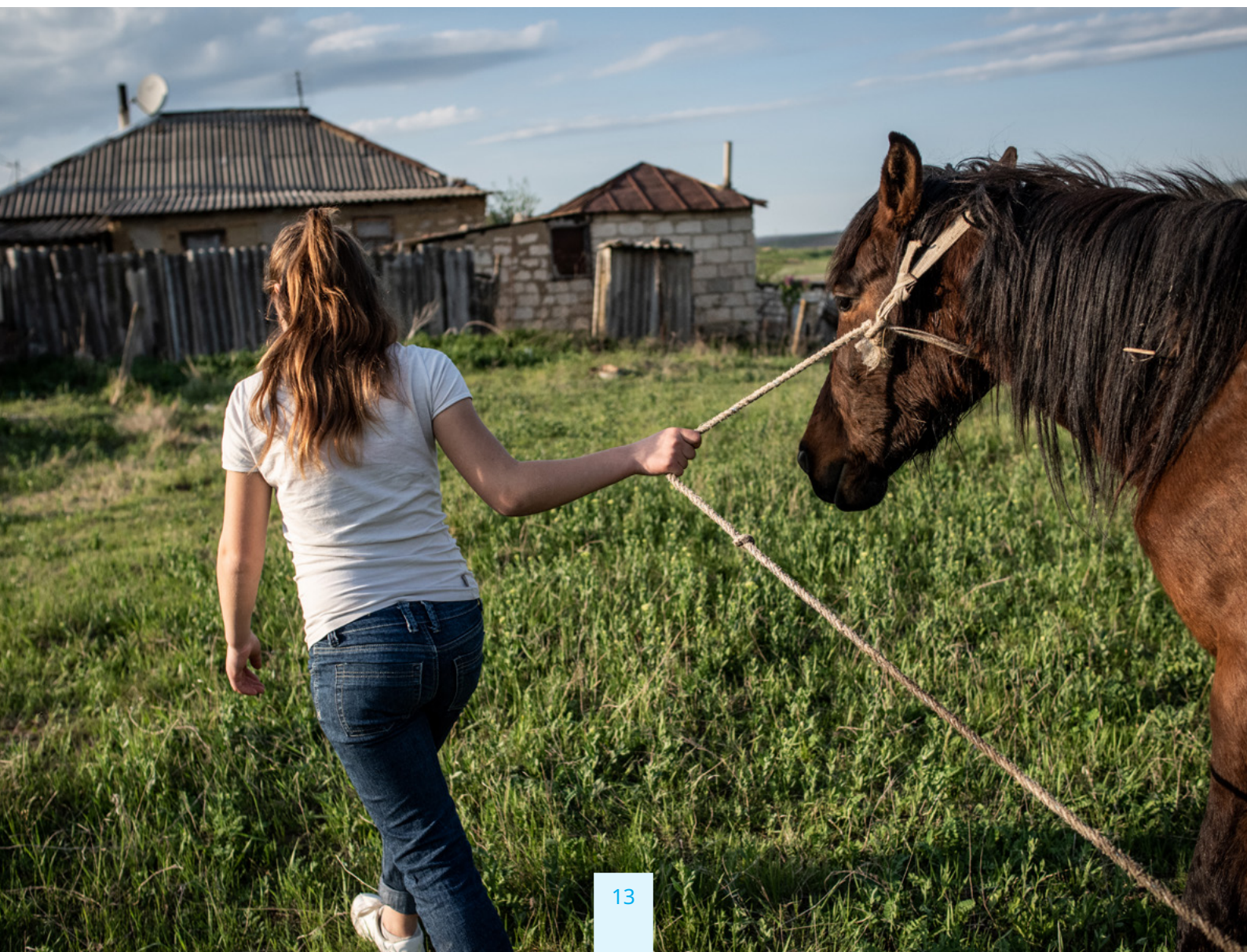
- Integrate VAC modules in regular national household survey programmes to facilitate collection of trend data and reporting against violence-related SDGs.

Unless ending violence against children is prioritized across sectors, systems, services and budgets, even the most well-intentioned policies and promises will fall far short of protecting children. When it comes to being protected, children experiencing violence don't have another minute to lose – and neither do we.

Below: © UNICEF/UN0214420/Babajanyan VII Photo

Liza, 12, gets ready to walk her family's horse to her house in her village in Moldova in April 2018.

After being sexually abused by her step father, Liza was helped by a UNICEF-supported shelter in Chisinau. Liza was given medical, social and psychological assistance, at the shelter. "I want to be an anatomist, or a physical training teacher, or something related to helping children," Liza says.



Introduction

Violence against children: International frameworks and global extent

The United Nations Convention on the Rights of the Child (CRC), along with its optional protocols and other international treaties and standards, guarantees children's protection from all forms of violence. In line with Article 1 of the CRC, "a child means every human being below the age of eighteen years unless under the law applicable to the child, majority is attained earlier".²

The CRC provision does not serve the purpose of a statistical definition or classification, and the varied nature of VAC complicates its measurement and monitoring. The Committee on the Rights of the Child emphasized the need for monitoring in its 2003 General Comment No. 5, which called for countries and territories to "develop nationally applicable indicators and collect, analyse, publish and use sufficient, reliable and disaggregated data on children up to the age of 18 years".⁶ This call was reinforced in 2006 by the United Nations Secretary-General's Study on violence against children, which recommends that countries and territories "systematically develop and implement national VAC data collection and research efforts and use national indicators on VAC based on internationally agreed standards".⁷

BOX 1

The CRC states:

Article 19 (1): "States Parties shall take all appropriate legislative, administrative, social and educational measures to **protect all children from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse**, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child."³

Article 28 (2): "States Parties shall take all appropriate measures to ensure that school discipline is administered in a manner consistent with the child's human dignity and in conformity with the present Convention."⁴

Article 37: "States Parties shall ensure that:
(a) No child shall be subjected to torture or other cruel, inhuman or degrading treatment or punishment."⁵

To help countries and territories create standardized, internationally comparable VAC statistics, the International Classification on Violence against Children (ICVAC) was developed and formally adopted by the UN Statistical Commission in March 2023.⁸ The ICVAC provides standardized definitions and categorizations of VAC for statistical purposes. UNICEF, the custodian of the ICVAC, is leading its implementation world-wide.

The ICVAC groups individual violent acts in homogeneous categories and aggregates them at two different hierarchical levels. The six Level 1 categories shown below reflect the different nature of the violent acts or of the harm such acts cause and cover all acts that constitute VAC within the scope of the ICVAC. Level 2 categories represent sub-categories of Level 1 acts of the same nature.¹⁰

BOX 2

According to the ICVAC's statistical definition:

*"VAC refers to any deliberate, unwanted and non-essential act, threatened or actual, against a child or against multiple children that results in or has a high likelihood of resulting in death, injury or other forms of physical and psychological suffering. An act refers to the process of doing or performing something. This includes acts of omission, which refer to the failure to perform an act. Such acts can be of different natures, i.e., physical, verbal, non-verbal or sexual."*⁹

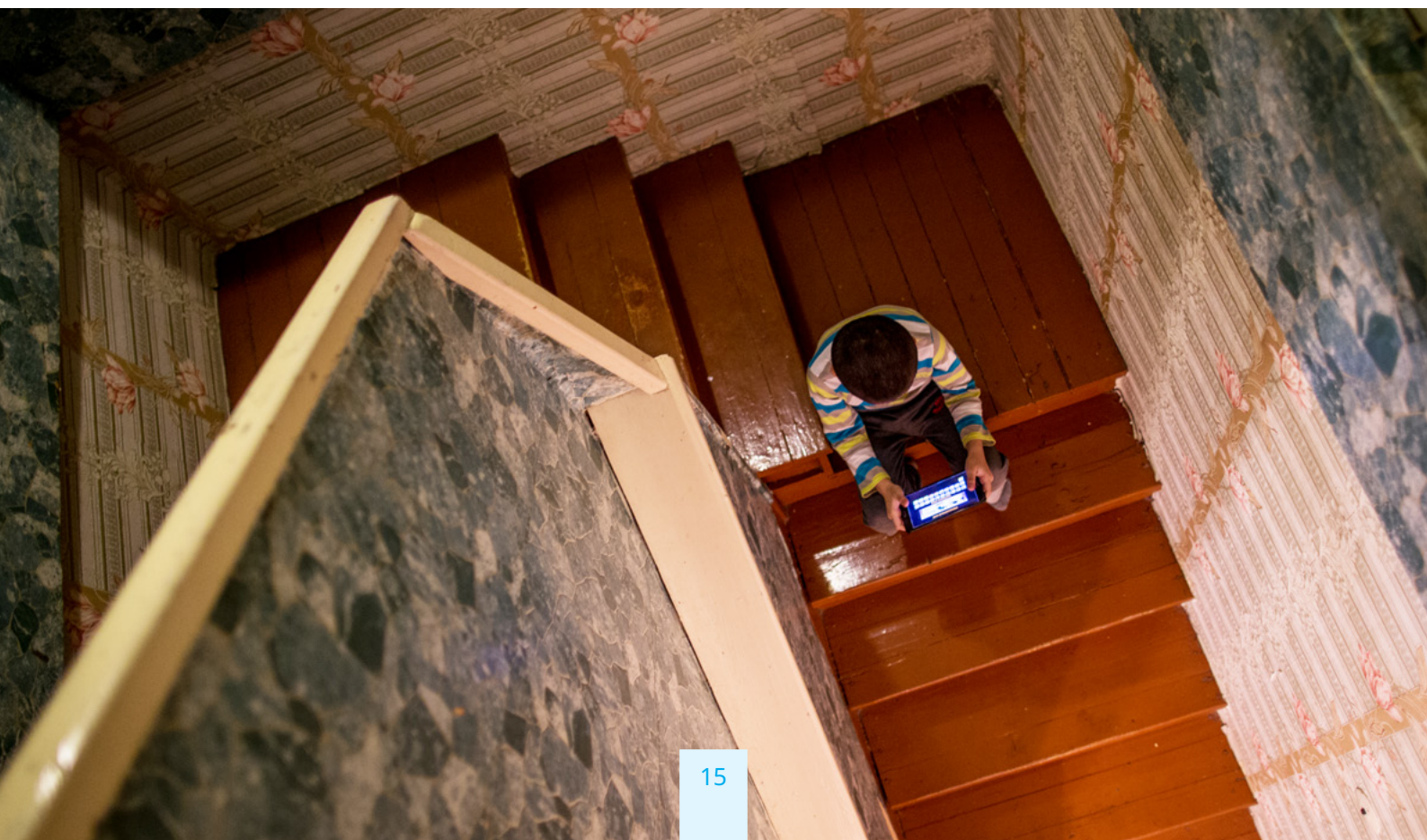
Below: © UNICEF/UN0214639/Babajanyan VII Photo

Alazhan, age 10, plays on a smartphone in his aunt's house in Aktau, Kazakhstan, on 15 March 2018. Together with their mother, Alazhan and his sisters moved in with their mother's relatives after she experienced domestic violence and divorced her husband.

BOX 3

ICVAC Level 1 categories of VAC:

- **Category 1:** Violent killing of a child
- **Category 2:** Physical violence against a child
- **Category 3:** Sexual violence against a child
- **Category 4:** Psychological violence against a child
- **Category 5:** Neglect of a child
- **Category 9:** Other acts of violence against a child not elsewhere classified.¹¹



The latest available global data confirm that children experience violence wherever they live, that VAC intersects with violence against women, and that children's risk of VAC increases in emergency contexts.¹²

According to global data:

Every

4 minutes

somewhere in the world, a child is killed by an act of violence.¹³

- Violence kills about 130,000 children and adolescents under the age of 20 each year, on average.¹⁴
- The risk of dying from violence rises sharply in late adolescence: 7 in 10 children who died from violence were between the ages of 15 and 19, most of them boys.¹⁵

An estimated

1.6 billion

children (two in three) regularly face violent punishment at home; more than two thirds are subjected to both physical punishment and psychological aggression.¹⁶

- Close to 550 million children (around one in four) live with mothers who are victims of intimate partner violence.¹⁷

About

90 million

children have experienced sexual violence.¹⁸

- An estimated 650 million girls and women (one in five) have been subjected to sexual violence as children, including more than 370 million (one in eight) who experienced rape or sexual assault.¹⁹
- In fragile settings, risk is even greater, with slightly more than one in four experiencing rape and sexual assault in childhood.²⁰
- Nearly 50 million adolescent girls aged 15-19 (1 in 6) have been victims of physical or sexual violence by their husbands or partners in the past year.²¹
- An estimated 410 to 530 million boys and men (around 1 in 7) experienced sexual violence in childhood, including 240 to 310 million (around 1 in 11) who were raped or sexually assaulted.²²

VAC occurs in homes, alternative care arrangements (such as foster care and residential care), schools, community services, law enforcement and judiciary services (including custodial settings), and online, among other settings.²³ The age and gender of a child are key determinants of vulnerability, influencing both the forms of violence they may experience and their ability to access support. Adolescent girls, for example, face heightened risks of sexual violence

and exploitation.²⁴ VAC can be perpetrated by different individuals or groups and facilitated by technology.²⁵ It also inflicts both an immediate and long-term impact on the emotional, physical, cognitive and social development of both child victims and witnesses of violence. It can have lifelong, even transgenerational, consequences, heightening the risk of experiencing or perpetrating violence later in life – with far-reaching consequences for society.²⁶

BOX 5

The intersection between VAC and VAW

A recent series of UNICEF evidence and action briefs, based on the available research on physical and psychological VAC by caregivers ('violent discipline') and on intimate partner violence (IPV) against women, highlights the following intersections between VAC and VAW.

- Children in homes with IPV are more likely to experience violent discipline by caregivers.²⁷
- The consequences of children's exposure to IPV can be similar to children who directly experience violent discipline, such as negative impacts on their development and health.²⁸
- A child's risk of violence over the life course can increase when the child grows up in a violent home, as early experiences of VAC can result in future victimization or perpetration of different forms of violence.²⁹
- VAC and VAW share several social and behavioural risk and protective factors at the individual and societal level. Shared risk factors include, for example, poverty and resulting economic stress and high levels of gender inequality and men's dominance in the family.³⁰
- Once children reach adolescence, they face a heightened risk of multiple forms of violence, especially gendered forms of violence, including sexual violence.³¹
- In line with the action briefs, the evidence on these intersections stresses the importance of VAC prevention from the very start, and access to specialized services that can reduce the consequences of violence.³² A more detailed analysis of the intersections and the available evidence are available from UNICEF Innocenti – Global Office of Research and Foresight.³³

Abuse of power is a root cause of VAC. Children's dependency on adults, peer pressure, their developing capabilities, and their ongoing socialization at home, in school and in the wider local community means they are uniquely vulnerable. However, other multiple, mutually reinforcing risk factors also operate at individual, family and societal levels. These include harmful gender and social norms that legitimize violent discipline, victim-blaming and gender-based violence (GBV).³⁴ Other drivers of VAC include structural and systemic factors such as weak legal frameworks, inadequate public policies and child protection systems, unemployment, poverty, social exclusion, armed conflict and humanitarian crises.³⁵

The evidence also indicates that certain circumstances can increase children's risk of violence. For example, they are at greater risk when unaccompanied and separated from family or when living on the streets.³⁶ In recent years, the COVID-19 pandemic and associated public restrictions, lockdowns and school closures have exacerbated the risk of VAC across ECA.³⁷

At the same time, protective factors – such as a nurturing family atmosphere, safe school environment and supportive community – and particular strategies have been found to effectively reduce VAC.³⁸

BOX 6

Violence against children brings an economic cost, such as increased public spending on welfare, psychological services for survivors, and even victims' reduced productivity. It is estimated to cost USD \$7 trillion globally, equivalent to about 8 per cent of annual global gross domestic product.³⁹

Below: © UNICEF/UN0220712/Babajanyan VII Photo

Children participate in activities at a drop-in centre run by ARSIS in Tirana, Albania in June 2018. ARSIS, a NGO supported by UNICEF, provides various programmes for women and children, including those who have experienced violence.



Global and regional commitments to end VAC

By adopting the Sustainable Development Goals (SDGs) in 2015, the global community has committed to ending all forms of VAC by 2030 and has established specific targets and indicators to track progress. Annex 1 provides an overview of SDG goals 16 (Peace, justice and strong institutions), 5 (Gender equality) and 4 (Quality education) covering VAC, including corresponding SDG targets and indicators.⁴⁰

At the regional level, the EU prioritizes child protection through various initiatives, such as the EU Strategy on the Rights of the Child, which is closely linked to the Council of Europe Strategy for the Rights of the Child, the EU Strategy to Fight Child Sexual Abuse, and the 2024 European Commission Recommendation on integrated child protection systems.⁴¹ Many in the region have also ratified the Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse (“Lanzarote Convention”) and its Convention on Preventing and Combating Violence Against Women and Domestic Violence (“Istanbul Convention”), which includes several articles pertaining to the protection of children who experience or witness violence.⁴²

At the national level, governments across ECA are strengthening legislative and policy frameworks, as well as developing and improving VAC prevention and response services.⁴³

In November 2024, government representatives and other delegates gathered in Bogotá in Colombia for the First Global Ministerial Conference on Ending VAC and, in their ‘Call to Action’, reaffirmed their commitment to the 2030 Agenda for Sustainable Development –

including ending all violence, abuse, exploitation and trafficking of children. They further committed to investing in evidence-based approaches. Twenty-six ECA governments also made a pledge to end VAC; seven pledged specifically to strengthen VAC monitoring and data.⁴⁴

UNICEF pledged at Bogotá to support governments over the next five years to reach 30 million children at risk or experiencing violence with specialized social welfare or justices services, 142 million children with safe and enabling school environments, 70 million families with parent and caregiver support programmes, and to provide technical and financial assistance to at least 50 countries and territories worldwide to support the collection of high-quality, internationally comparable prevalence data on VAC.⁴⁵

Some of these governments are members of Transformative Monitoring for Enhanced Equity (TransMonEE), a three-decade-old network which compiles and disseminates data on child rights and well-being in 55 countries and territories in ECA.⁴⁶ The TransMonEE database aggregates more than 900 child-related indicators from data sourced from both national statistical offices (NSOs) and line ministries, such as the data on selected VAC indicators, and various international databases.

During its annual meeting in March 2024, held alongside the UNECE/UNICEF Expert Meeting on Statistics on Children, members agreed that the next TransMonEE analytical series report would focus on VAC, following the 2024 TransMonEE report, which focused on alternative care for children.⁴⁷

Purpose, objectives and scope of the report

The report builds on the momentum from Bogotá and the SDG commitments by helping governments identify areas for data investment and improvement. Reliable data on VAC is critical to uncover hidden incidents, to effectively mobilize resources, and to monitor the implementation and impact of policies, reforms and interventions. However, the availability, quality and comparability of data on VAC across countries and territories remains fragmented, for example due to differences in VAC definitions, measurement, protection age and type of reporting.⁴⁸ A recent discussion paper found, for example, that almost 67 per cent of all countries and territories reported less than two data points for SDG Goal 5 and 75 per cent for Goal 16, highlighting pervasive gaps and inconsistencies in VAC data worldwide.⁴⁹ This is mirrored by an analysis of data for SDGs in ECA and by the latest Committee on the Rights of the Child's recommendations to countries and territories in the region.⁵⁰

Since 2013, the Committee has issued 763 recommendations on the topic of VAC to 54 countries and territories in ECA including 51 recommendations to 35 countries and territories on improving VAC data and evidence generation. An analysis of these recommendations reveals common challenges across countries and territories in the region. For instance, 12 out of the 35 countries and territories received the recommendation to strengthen their national database on all cases of VAC or specific forms of violence (e.g., GBV), 15 countries and territories were recommended to assess or undertake a study on the extent, cause and nature of different forms of VAC, and several countries and territories received the recommendation to collect data on violence against specific sub-sets of the child population (e.g., children with disabilities), to disaggregate the data they collect, to better coordinate and harmonize data collection across administrative units and sectors, and to close data gaps on sexual violence and GBV, among others.⁵¹

A 2021 United Nations Economic Commission for Europe (UNECE) survey of NSOs in the region of the Conference of European Statisticians found that the availability, quality and comparability of data on VAC are constrained by differences in definitions used and data collection methodologies, ethical and cost concerns, multisectoral involvement without correspondingly interoperable information management systems, a lack of data sharing and coordination across sectors, political constraints, and inconsistent international data collection standards. Additionally, there is unequal resourcing of statistical ecosystems across the region that produce data on VAC. The survey also revealed that many VAC statistics rely on administrative registers, and that 17 out of the 35 surveyed countries and territories use survey data, primarily from household and school-based surveys, to produce VAC statistics, or a combination of administrative and survey data. The countries and territories using survey data produce far more VAC indicators than those that rely on administrative sources.⁵²

BOX 7

In response to these challenges and considering existing entry points for data improvement, UNICEF's Europe and Central Asia Regional Office (ECARO), through its Child Protection and Programme, Planning and Data sections, conducted this regional analysis of indicators and data on VAC prevalence and incidence in the region and identified areas for improving data availability, quality and international comparability, as well as good data practices.⁵³

This report maps the availability of prevalence and incidence indicators and data from different sources: international databases, representative international and national surveys, national administrative registers, and other relevant data streams. It aims to:

- Identify geographic and thematic gaps in VAC prevalence and incidence indicators and data.
- Match identified indicators used in the region with the ICVAC for the first time and explore the level of alignment.
- Conduct a comparative and, where possible, temporal trend analysis of available data for selected VAC indicators.
- Present good practices from selected countries and territories that have implemented particularly effective, efficient or interesting data streams on VAC.
- Make recommendations to governments including NSOs and other VAC data producers, to address data gaps, improve data quality and international comparability, and enhance data use – in line with pledges made at the First Global Ministerial Conference, SDG reporting requirements and the ICVAC.⁵⁴

- Inform policymakers, child protection experts, and other relevant stakeholders, support evidence-based decision-making, and reinforce efforts to protect children across ECA.

The report is divided into three distinct parts:

1. **Indicator analysis:** analyses the availability of VAC prevalence and incidence indicators in the region and the alignment of these indicators with the ICVAC, and identifies data gaps.
2. **Regional data analysis:** presents and discusses age- and sex-disaggregated results for key VAC indicators, which are aligned with the main ICVAC categories, along with some other commonly used indicators in the region, which cannot be reduced to a single act of VAC and were thus included into an additional category.⁵⁵
3. **Recommendations:** makes recommendations to strengthen national VAC monitoring systems and improve the availability, quality, and international comparability of VAC statistics in ECA countries and territories, and highlights policy priorities for an effective national VAC response.

Scope and limitations of the report

There are several limitations to the analyses conducted and the analytical findings presented in this report.

The VAC indicator repository compiled for the region, while extensive, is not exhaustive, given accessibility issues, as well as budget, language and time limitations.⁵⁶

Many of the VAC data used in this report have been produced by only a few countries in ECA region. This means that countries and territories without available or comparable data are omitted from the analysis and can distort the picture of the regional VAC data landscape. Consequently, not all findings are representative of the entire region, which needs to be kept in mind when using the data presented in this report.

The analysis of selected VAC indicators also has been restricted by the limited comparability of data collected by countries and territories through their national VAC surveys and administrative registers. Key reasons include

differences in VAC definitions used, in survey design and in methodology, sometimes even when countries and territories are using standardized survey modules. The differences across countries highlighted by this report may therefore reflect methodological variations rather than actual differences in prevalence or incidence of VAC. An in-depth discussion about the different data sources and their strengths and weaknesses was beyond the scope of this analysis.⁵⁷

BOX 8

The report touches upon but does not present and analyse indicators and data on VAC risk and protective factors, as well as on the consequences of VAC for the children concerned, as this was beyond the scope, timeframe and budget of this exercise.

Methodological framework

A comprehensive analysis of indicators and data on VAC prevalence and incidence in the region was conducted, based on relevant policy frameworks and international statistical and child protection guidelines and standards. The indicator and data analysis and reporting took place between July 2024 and May 2025. Figure 1 shows the four-step approach taken.

Annex 2 provides details on each step of the methodological approach, including limitations. Annex 3 lists the main data sources used in the analysis of the indicators and data in this report, including databases that aggregate data from one or more country sources. Annex 4 sets out the parameters applied for tagging mapped indicators and standardizing the data for analysis (steps 2 and 3).

Figure 1 **Comprehensive VAC indicator and data analysis for Europe and Central Asia**

Step 1



- Mapping of VAC indicators and data sources in the region
- Desk and literature review

Step 2



- Matching mapped VAC indicators with ICVAC Level 1 categories:
 - Category 1: Violent killing of a child
 - Category 2: Physical violence against a child
 - Category 3: Sexual violence against a child
 - Category 4: Psychological violence against a child
 - Category 5: Neglect of a child
 - Category 9: Other acts of violence against a child not elsewhere classified
- Handling of “aggregated indicators” on VAC and indicators on “composite phenomena”
- Creation of an indicator repository and indicator analysis

Step 3



- Selection of mapped and matched indicators for regional data analysis based on the following criteria:
 - Comparability
 - Coverage
 - Coherence to international principles and standards of data quality
 - Consideration of well-known data limitations
 - Alignment with the ICVAC
 - Policy relevance

Step 4

- Data analysis, validation, interpretation and reporting



Key findings of the indicator analysis

This section of the report provides an overview of the results of the analysis of the mapped VAC indicators from 52 out of 55 countries and territories in the region, which could be matched with the ICVAC Level 1 categories, including the main sources.⁵⁸ Data sources comprise two main sources – administrative registers and surveys.

In addition to the ICVAC Level 1 categories, an additional indicator category (Category 10) was established for the purpose of the analysis. Category 10 includes:

- **Aggregated VAC indicators**, which aggregate individual-level data on different acts of VAC in different settings, such as indicators capturing the “total number of child victims of VAC”. Most countries and territories reporting data on aggregated VAC indicators specify in the indicator definition the single violent acts that these indicators aggregate. However, the limited time available for the indicator analysis did not allow an in-depth review of the definitions of all aggregated indicators identified in the region and a breakdown of each aggregate indicator by individual violent act to tag them to the relevant ICVAC categories.
- **Indicators capturing various forms of VAC**, for example indicators on “bullying”, which can be reduced to single acts of VAC, although such acts

can take various forms (i.e. physical, psychological and sexual violence).

- **Indicators measuring “composite phenomena”**, such as indicators on “child marriage”, “child labour” and “trafficking in children”, which are captured differently in the ICVAC, as these phenomena cannot be statistically reduced to a single violent act. However, the individual violent acts that occur as part of “composite phenomena” are captured by the ICVAC. For instance, the physical, sexual and/or psychological violence that children who are trafficked may experience at the hands of different perpetrators, such as parents or caregivers selling off their children to traffickers, the traffickers, and those who receive the trafficked children.⁵⁹

Category 10 indicators comprise commonly used indicators in ECA region, as many are SDG indicators that were established before the publication of the ICVAC.⁶⁰

Above: © UNICEF/UN0220684/Babajanyan VII Photo

Jeta, 24, prepares her daughter Fabliona, age 4, for kindergarten outside they share in Tirana, Albania on 7 June 2018. Jeta was physically and mentally abused by her husband, who became violent after discovering that Jeta was pregnant with a girl. After Jeta gave birth to Fabliona, he continued the abuse, extending it towards his daughter.

Occurrences of mapped and matched VAC indicators in the region per country

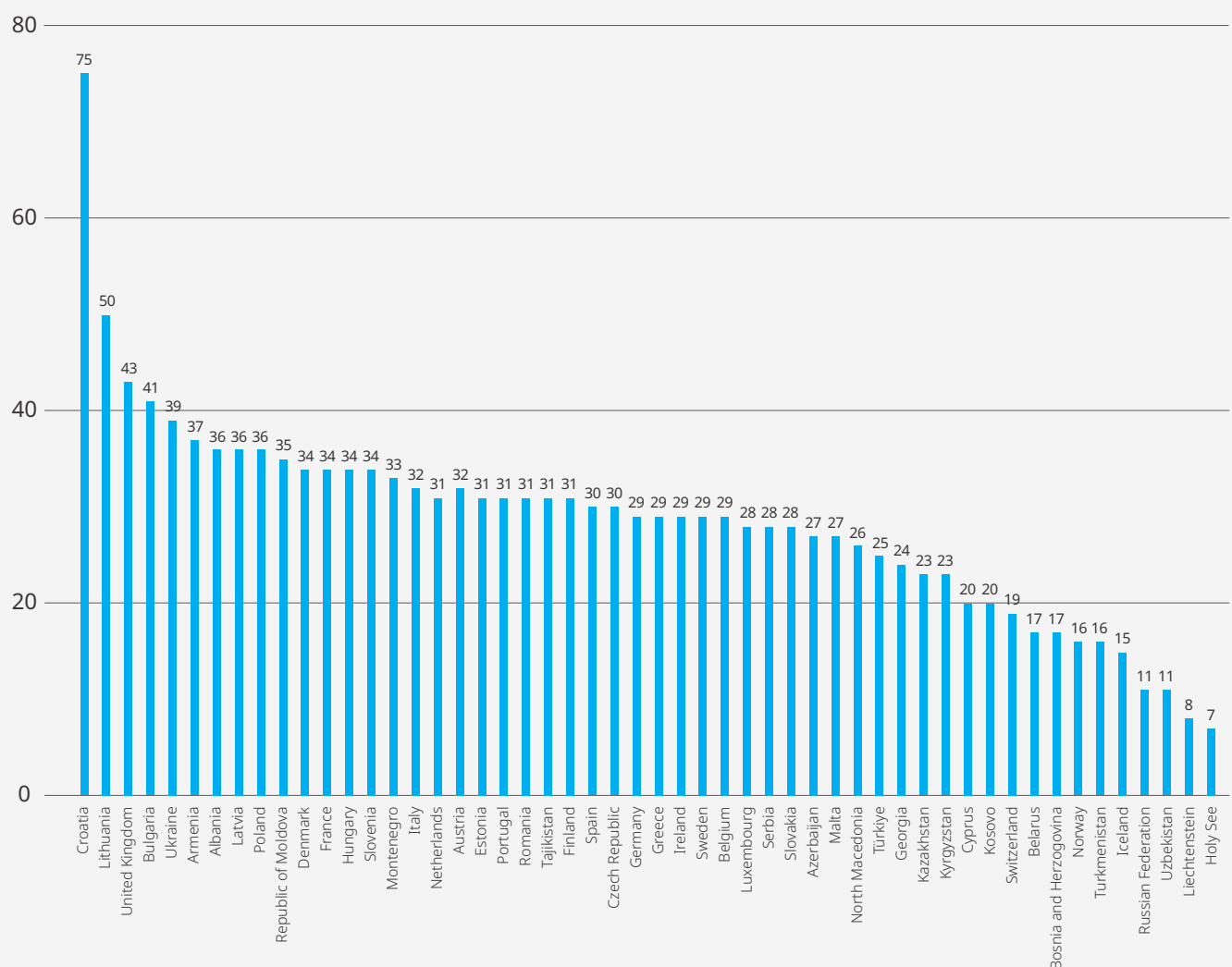
The section provides an overview of countries and territories with high, medium or low occurrences of mapped VAC prevalence and incidence indicators, which could be matched with the ICVAC or Category 10.⁶¹

A total of 1,488 VAC indicators from 52 out of 55 countries and territories in ECA were mapped and matched.

A detailed overview of these indicators by country and ICVAC categories/Category 10 is forthcoming.

The number of mapped VAC indicators per country that could be matched with the ICVAC or Category 10 is shown in Figure 2 and provides an insight into the geographic distribution of these indicators across ECA.

Figure 2 **Number of mapped and matched VAC prevalence and incidence indicators per country in Europe and Central Asia**



Source: UNICEF ECARO 2024 indicator analysis, data from 52 out of 55 countries and territories in the region (total =1,488 indicators)

Main findings:

There are considerable differences in the availability of mapped and matched VAC prevalence and incidence indicators across the region.

Croatia had the highest number of indicator occurrences (75 indicators) in 2024, followed by Lithuania (50) and the United Kingdom of Great Britain and Northern Ireland (UK) (43), as Figure 2 shows. Countries and territories with the lowest occurrences included the Russian Federation and Uzbekistan (both with 11 indicators), Liechtenstein (8) and the sovereign juridical entity of the Holy See (7).

The differences in the availability and accessibility of VAC prevalence and incidence indicators in ECA region may be linked to variations in the existence, comprehensiveness and functioning of national VAC monitoring and reporting frameworks and systems, data dissemination strategies, and political agendas and priorities.

Below: © UNICEF/UN0214613/Babajanyan VII Photo

Aliya, age 13, walks to a store with her classmates before school in Aktau, Kazakhstan in March 2018. Aliya and her siblings were supported by the UNICEF-backed crisis center, Meirim, after the family experienced domestic violence, and her mother divorced her father. Aliya likes physics and lab experiments. She also likes Korean soap operas, K-pop bands and spending time on VK, a social network.

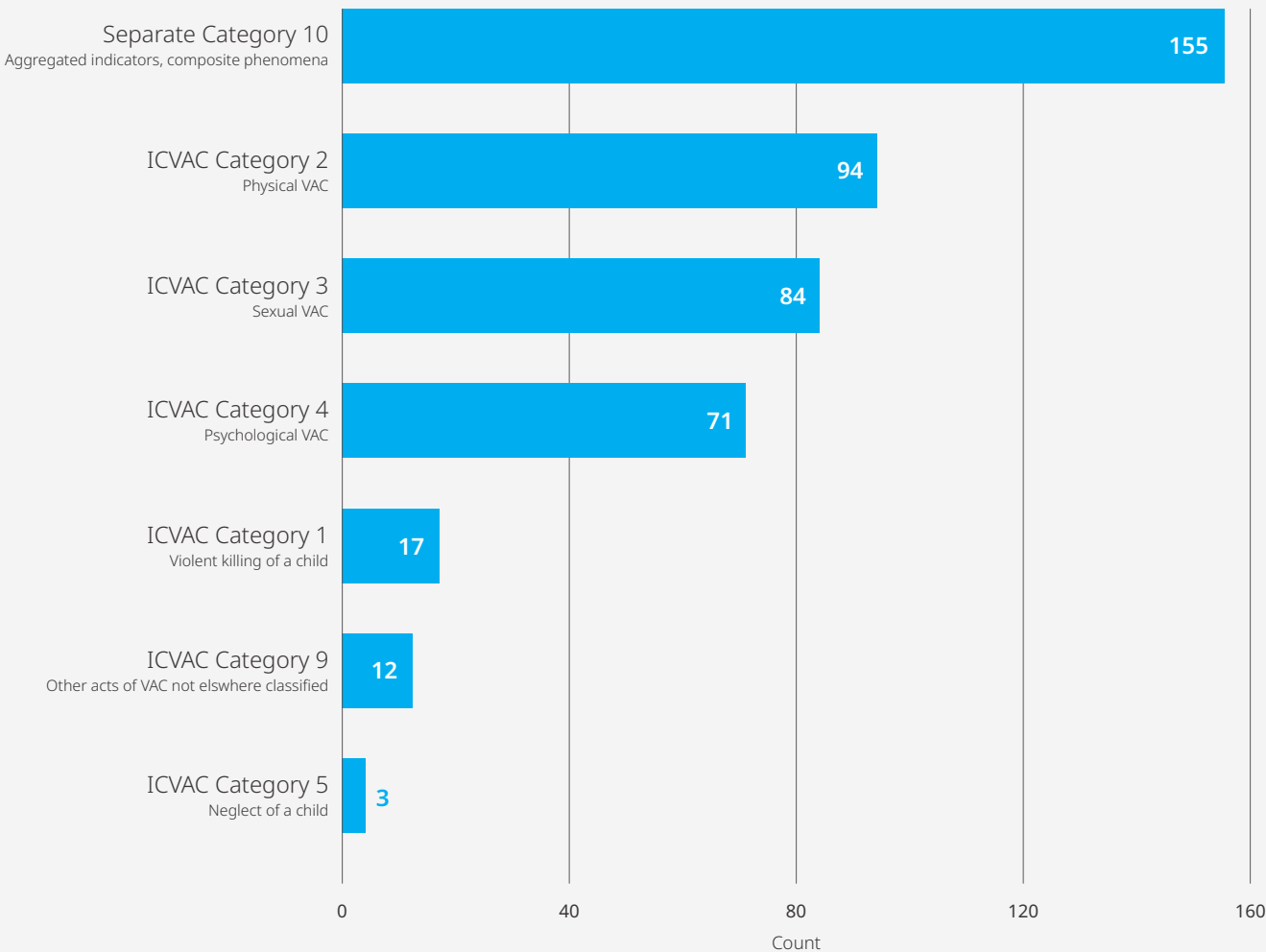


Occurrences of mapped and matched VAC indicators in the region by category

Figure 3 shows the number of mapped VAC prevalence and incidence indicators in ECA matching one or more of the ICVAC Level 1 categories or falling into Category 10. The total number of 1,488 indicators was cleaned and reduced for this analysis to 436 indicators to avoid

double-counting, as almost one third of the total number of mapped VAC indicators used by countries and territories in the region to measure VAC prevalence or incidence are the same or very similar in name and definition.⁶²

Figure 3 **Number of mapped and matched VAC prevalence and incidence indicators in Europe and Central Asia by category (ICVAC, Category 10)**



Source: UNICEF ECARO 2024 indicator analysis, data from 52 out of 55 countries and territories (clean indicator set with a total of 436 indicators)

Main findings

Consistent with the 2022 UNECE guidance document on statistics on children, countries and territories should ideally collect data on all types of VAC (physical, sexual, psychological and neglect).⁶³ The indicator landscape in ECA shows a large gap in indicators on neglect, which may result from the lack of internationally standardized metrics, the chronic and multifaceted nature of neglect (which complicates case identification and evidence gathering), the variability in national child protection monitoring systems, and to what extent a country legally recognizes neglect as VAC.⁶⁴

The fewer reported indicators of violent child killing may stem from international reporting norms that emphasize intentional homicide; the reliance on aggregated administrative crime data (which may subsume child-specific offences); issues related to the ability of systems to accurately and reliably establish and register cause of death as violence, particularly violent deaths of young children; and the relatively low incidence of such events, compared to other forms of violence.⁶⁵

Many countries and territories in the region use indicators falling under Category 10 (“aggregated indicators” and indicators capturing “composite phenomena”). One reason is that certain indicators, such as “child marriage”, “child labour” and “trafficking in children”, are mandatory SDG reporting measures.⁶⁶ They are an important presence in the data landscape in ECA, and the single acts of VAC that occur within these broader

contexts (e.g., physical, psychological and sexual VAC as part of trafficking in children) align with ICVAC Level 1 categories 1-5. Whether countries and territories in the region register and report the single acts of VAC related to these phenomena under available national indicators, which fall into ICVAC Level 1 categories 1-5, could not be established during the analysis. Where this is not the case, it will lead to underreporting of individual acts of VAC.

Many countries and territories in the region use ‘aggregated indicators’. They are often found in annual statistical reports to highlight overall VAC prevalence in a country. Their usefulness for policymaking, planning and programming is limited, especially when they cannot be disaggregated by type of VAC.

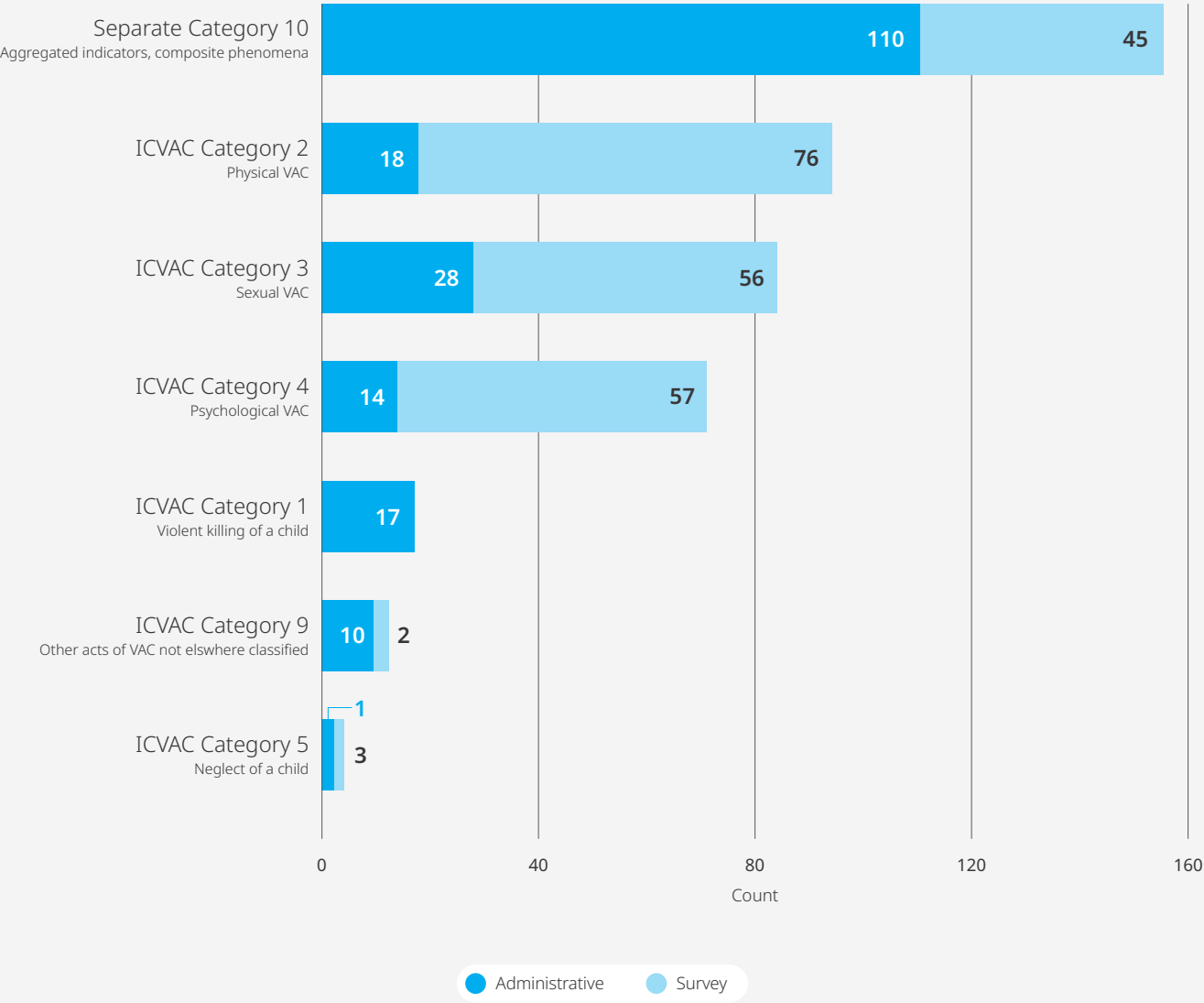
Fewer indicators on psychological violence were mapped and matched in 2024 compared with physical or sexual VAC, in part because it is harder for child protection and other systems (e.g., health, education) to detect, assess and record this form of VAC. Psychological violence also remains culturally accepted in many settings, even in countries and territories that have formally prohibited “corporal punishment”, which includes *“any punishment in which physical force is used and intended to cause some degree of pain or discomfort, however light, as well as non-physical forms of punishment that are cruel and degrading”* (i.e. psychological VAC).⁶⁷ Often dubbed the ‘invisible’ form of VAC, psychological violence remains likely to be substantially underreported in the region.⁶⁸

Mapped and matched VAC indicators in the region by data source

Figure 4 provides an overview of the data sources for the 436 mapped and matched VAC prevalence and incidence indicators used by countries and territories across the region.

The sources are broken down by the seven VAC categories (ICVAC Categories 1-5 and 9, additional Category 10) against which the indicators were matched in this analysis.

Figure 4 **Distribution of the 436 mapped and matched VAC prevalence and incidence indicators in Europe and Central Asia, by data source**



Source: UNICEF ECARO 2024 indicator analysis, data from 52 out of 55 countries and territories (clean indicator set)

Main findings

Administrative records and surveys are the main data sources for the indicators on VAC in ECA that could be matched with the ICVAC Level 1 categories or subsumed under Category 10. None of the countries and territories collected data on all elements of VAC.

Many countries and territories in the region use both administrative registers and survey-based data to monitor the prevalence and incidence of VAC. Surveys are being primarily used to collect data on the prevalence of physical, sexual and/or psychological VAC (ICVAC Level 1 Categories 2-4) and on certain indicators falling under Category 10, such as “bullying”, “child labour” and “child marriage”, while administrative data are commonly used to report on the incidence of “child homicide” (ICVAC Level 1 Category 1) or “trafficking in children” (Category 10), and some other forms of VAC reported to the police and registered by child protection services and authorities.

The analysis of indicators by data source also shows that countries and territories collecting data on

standard global and/or regional indicators, such as SDG and TransMonEE indicators, use the recommended data source set out in the metadata of the corresponding indicator framework.⁷³

The surveys most used in ECA to collect data on VAC include household surveys, namely the Multiple Indicator Cluster Surveys (MICS), the Demographic and Health Surveys (DHS) and as of late the EU gender-based violence against women surveys (EU-GBV) – which are standardized, internationally recognized household survey programmes. Countries and territories in ECA also use school-based surveys (primarily the Health Behaviour in School-aged Children surveys (HBSC), and dedicated surveys, for example, the violence against children surveys (VACS) and national surveys, some of which include VAC modules and questionnaires aligned with those included in international survey programmes.⁷⁴

Most countries and territories in the region produce a higher number of indicators from the surveys than from administrative sources, which confirms the findings of the 2021 UNECE NSO survey.⁷⁵

BOX 9

Administrative data reflect the number of VAC incidents reported, identified and registered by authorities and service providers from different sectors (such as social welfare, social services, child protection, health, education, the police, prosecutors and courts), and the number of child victims of VAC who access services and the justice system.⁶⁹ Administrative data undercount VAC incidence due to low levels of reporting and help-seeking coupled with other limitations of administrative registers.⁷⁰ These limitations are described in detail in the 2022 UNECE guidance document on statistics on children.⁷¹

Survey data measure the prevalence and nature of VAC, reflect factors that determine and contribute to it, and can provide information on the characteristics of child victims, perpetrators,

and the circumstances of the violent act, among other topics. Representative surveys produce results that can be generalized to the overall child population. However, survey data are usually collected only every three to five years, so do not provide ‘real-time’ data. Moreover, not all household surveys, including VAC modules, cover institutional households, such as residential alternative care facilities for children, reception centres for refugee and migrant families, or detention centres for children. The way in which questions are formulated and definitions applied in surveys also affect what prevalence data is produced, e.g., surveys restricting questions to only the severest forms of VAC have been shown to produce lower prevalence estimates than surveys using a more comprehensive VAC definition.⁷²

BOX 10

Few countries and territories in the region, specifically Italy and North Macedonia, could be identified during the mapping and matching that systematically collect VAC incident data from sources, such as ombudspersons and national helplines, in addition to administrative records of governmental organizations. While the former sources do not provide a measurement of the magnitude of VAC in the country or community, they can provide insights into the numbers and characteristics of child victims of violence who are seeking help, which can inform service planning and improvement.⁷⁶

GOOD DATA PRACTICE

Example 1:

In Europe, as part of the Ukraine emergency and refugee response, Child Helpline International and its members in Ukraine, Poland, Hungary, Slovakia and Romania are monitoring and reporting contacts of Ukrainian-speaking service users including reported incidents of VAC and the demographics of the callers and child victims of VAC with a view to amplify the voices of the child victims, highlight their changing needs, inform service planning and programming, and demonstrate the importance of child helplines as a critical entry point into the national child protection system.⁷⁷

Below: © UNICEF/UN0214473/Babajanyan VII Photo

Liza, 12, swings at a playground in her village in Moldova, in April 2018.

Liza was sexually abused by her stepfather. She was helped by a UNICEF-supported shelter. Liza was given medical, social and psychological assistance.

"My dreams are to be successful at school, to have strong health and be happy," Liza says.



Commonly used disaggregating variables for VAC indicators in the region

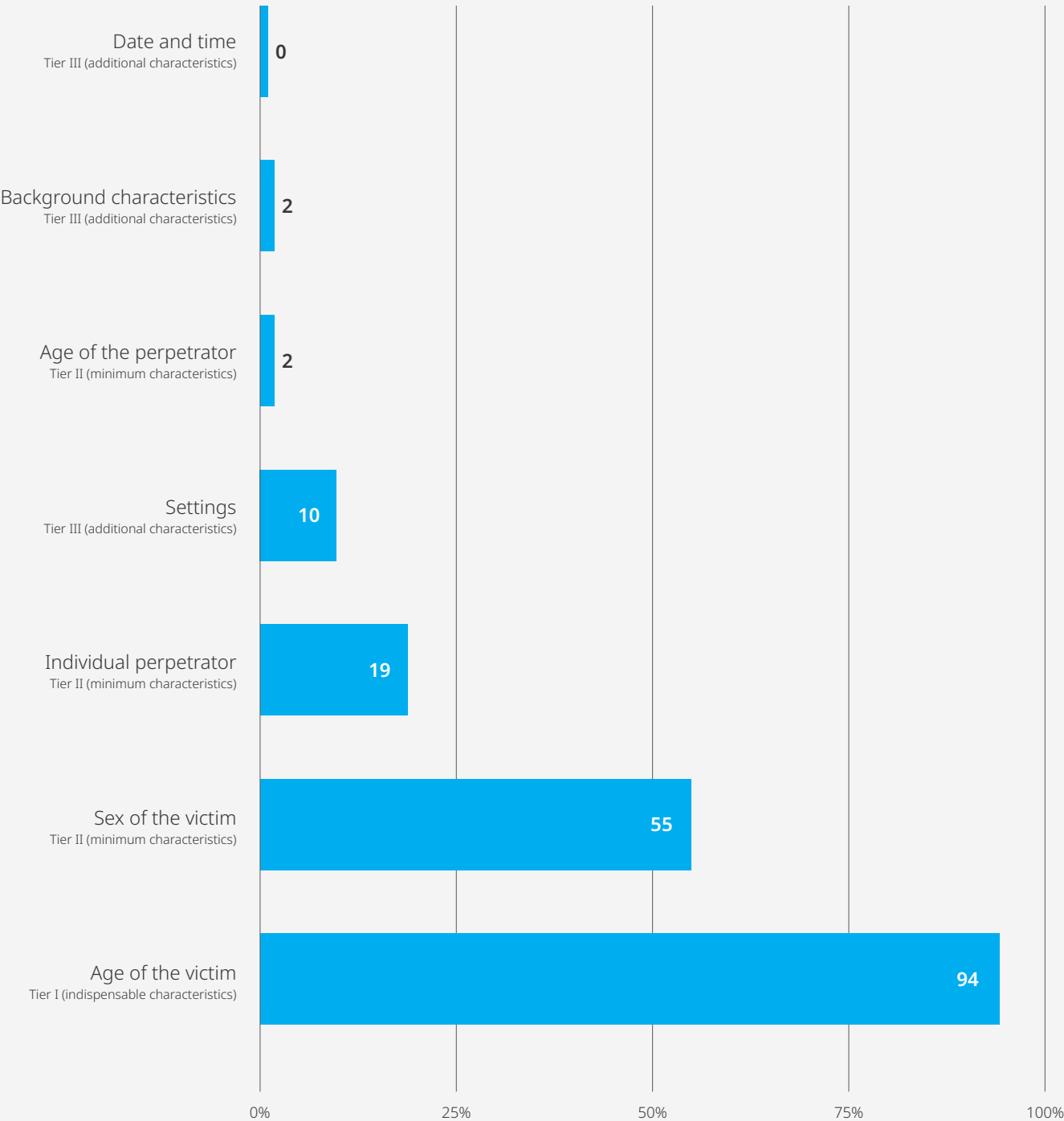
The ICVAC includes disaggregation variables (Table 1), which are organized at three levels (Tier I-III).⁷⁸

Table 1 **Overview of the ICVAC disaggregating variables: Tier I (“indispensable characteristics”), Tier II (“minimum characteristics”) and Tier III (“additional characteristics”)**

Victim	Perpetrator	Circumstances of the act
Age (I)	Age (II)	Settings (III)
Sex (II)	Sex (II)	Geographic location (III)
Gender identity (III)	Individual perpetrator (II)	Date and time (III)
Sexual orientation (III)	Group perpetrator (II)	Armed-conflict context (III)
Previous victimization history (III)	Previous history of violence/ recidivism (III)	
Concurrent victimization (III)	Institutional linkages (III)	
Background characteristics (III)		

This section explores the main variables used by countries and territories in the region to break down the mapped and matched VAC prevalence and incidence indicators and matches them with the relevant ICVAC disaggregation variables Tier I-III (Figure 5).

Figure 5 **Percentage distribution of the main ICVAC Tier I-III disaggregating variables used by countries and territories in Europe and Central Asia to break down the mapped and matched VAC prevalence and incidence indicators**



Source: UNICEF ECARO 2024 indicator analysis, data from 52 out of 55 countries and territories (clean indicator set)

Main findings

The most used variables by countries and territories for disaggregating the matched and mapped VAC prevalence and incidence indicators is the age of the victim (94 per cent) followed by sex of the victim (55 per cent). Other variables used for disaggregation include “individual perpetrator” (19 per cent of the matched indicators) and “settings” (10 per cent of the indicators).⁷⁹ Less than 3 per cent use variables considering additional background characteristics of the victim, the age of the perpetrator, and the specific date and time of the incident. Reasons may include difficulties of service providers and local authorities in systematically collecting and reporting this type of data and ethical and data protection considerations, among others.

The analysis of the matched indicators by ICVAC Tier I, II and III variables for disaggregation also revealed

that the variables used in ECA vary across countries and territories impacting data comparability. In some instances, there is no systematic disaggregation of VAC indicators for both sexes. Several of the matched and mapped indicators differentiate girls from women but provide no further breakdown by age.

The lack of systematic disaggregation of the matched and mapped indicators by the “indispensable” (Tier 1) and “minimum” recommended ICVAC disaggregation variables (Tier 2) and the considerable gaps in disaggregation of the indicators in ECA region restrict data analysis and limit the information required for VAC policymaking, planning and programming, such as gaining a full picture of the profile of the victim and perpetrator, of the circumstances of the violent act, and of groups of children who may be at higher risk than others, such as refugee and migrant children or children with disabilities.

GOOD DATA PRACTICE

Example 2:

The UK collects data on crime against households and people aged 16 years and over, using data from the Crime Survey for England and Wales (CSEW), which was implemented by UK's Office for National Statistics (ONS) and police-recorded crime. Since 2009, data also have been collected through the CSEW from children aged 10 to 15. Indicators calculated from the CSEW include prevalence of lifetime childhood violence (sexual, emotional, physical) and the prevalence and nature of (non-sexual) violence against children (aged 10 to 15) in the past year including the victim's perception of the incident and to whom they

reported the incident.⁸⁰ Police crime records provide data on VAC incidents (number, rate). Data from both sources are disaggregated by type of crime and violence in line with legal definitions. The annual CSEW data from children aged 10 to 15 further breaks down the data by when and where incidents happened and type of perpetrator.⁸¹ Given the recognized limitations of the CSEW data (for example, the survey does not cover children in institutions or capture violence experienced at age 16 and 17), the ONS is conducting a feasibility study to decide whether a new national VAC survey is needed.⁸²

Data analysis for selected indicators

Based on a review of the indicators matched and mapped, 13 indicators were selected for regional data analysis. The selection considered data availability and comparability, as well as policy relevance of the indicator.

This section provides a snapshot of selected forms of VAC in the region. Whenever available and comparable, sex and age-disaggregated data are included to provide insight into the profile of the child victims. In some cases, it was also possible to present data by the victim's relationship with the perpetrator and data comparing experiences of VAC by children in the general population and in Roma settlements.

BOX 11

Considering the high prevalence of physical and psychological VAC ("violent discipline") by parents or caregivers in the region, a more in-depth analysis (cross-tabulation) of this indicator by sex and age was conducted for selected countries and territories. Recent global and regional analytical reports are available for specific indicators such as "child marriage" and "child labour". Links are provided to these resources and only the key findings are highlighted here.

In instances where data coverage for specific forms of VAC (such as neglect) was low and data were difficult to compare across the region, examples of selected good data collection and reporting practices are showcased in this report.

Some of the indicators selected for data analysis differ from ICVAC Level 1 categories in how they are defined, disaggregated or presented by international sources. ICVAC was recently adopted, and international agencies and countries and territories are slowly starting to review and implement them.

BOX 12

The indicators in this section align with the ICVAC Level 1 categories except for the indicators falling into Category 10. Also, no indicators were analysed for ICVAC Category 9, which includes "acts of violence against a child which are not elsewhere classified in the ICVAC" because the indicator analysis revealed only a few VAC indicators for this category.⁸³

ICVAC Category 1:

Violent killing of a child

The indicator used for the regional analysis is the rate of intentional homicide (SDG indicator 16.1.1).⁸⁴ Intentional homicide of a child falls under ICVAC Category 1 and is defined as “death inflicted upon a child with the intent to cause death or serious injury”.⁸⁵

The data source for this indicator is the United Nations Office on Drugs and Crime (UNODC) database.⁸⁶ UNODC collects data from national authorities in ECA for this indicator through the annual United Nations Survey of Crime Trends and Operations of Criminal Justice Systems (UN-CTS).⁸⁷ Data are presented in this section as the rate for the population aged 0-17 compared with the rate of the total population.⁸⁸

BOX 13

As the most extreme form of violence, intentional homicide data can provide governments with insight into the level of security in their country and into the overall magnitude of VAC to develop effective preventive and family support measures.

Main findings:

- Globally, ECA has the lowest estimated regional rate of intentional homicide in the general population.⁸⁹
- While there has been a steady decrease in the estimated rate of intentional homicide in the general population since 2016 in ECA, this is not the case for the rate in the child population, which has remained relatively stable over this period.⁹⁰
- Between 2016 and 2023, more than 1,000 children have been intentionally killed in 39 countries and territories in ECA. The majority were boys and children aged 0-9 years. While global sex patterns are similar, global age patterns differ and tend to be higher among adolescents.⁹¹

BOX 14

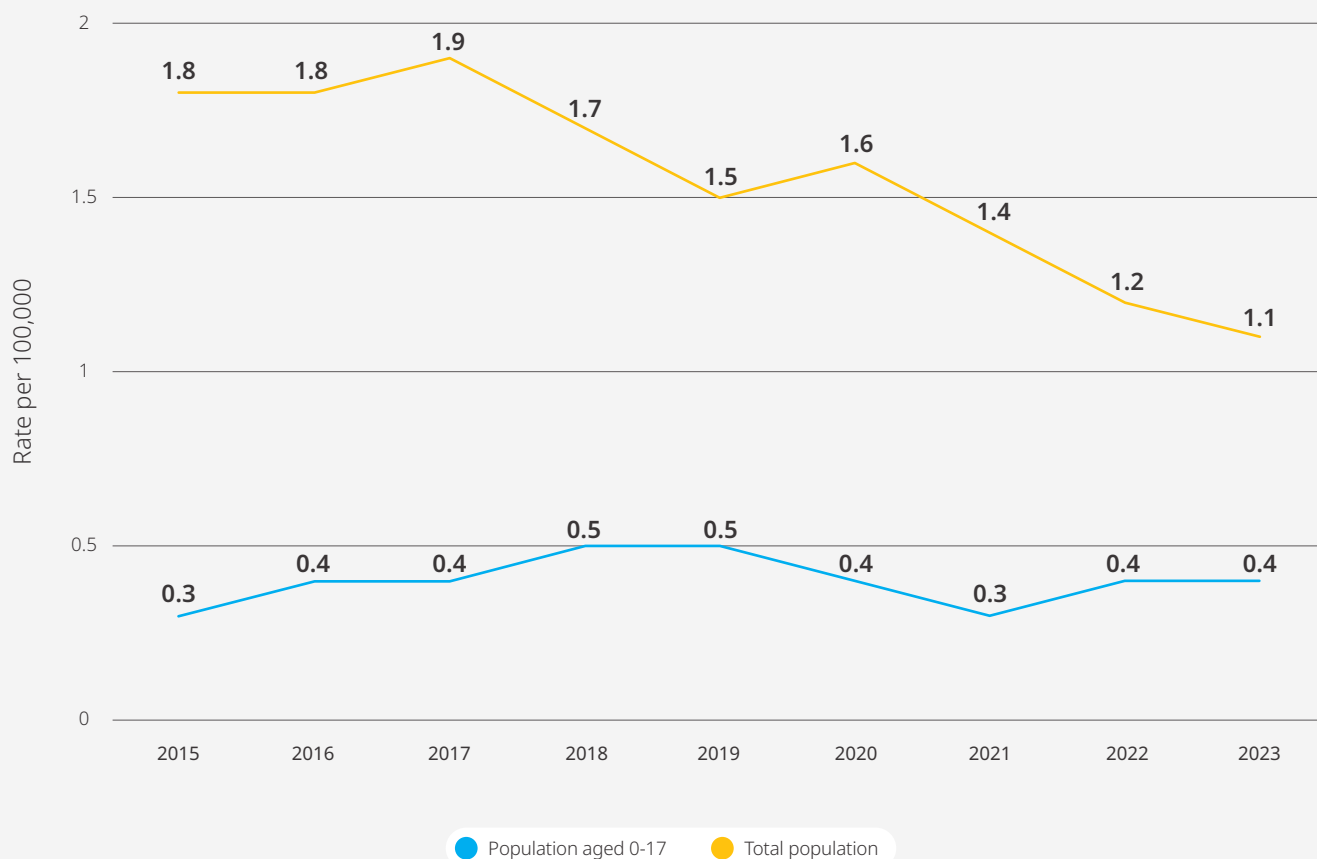
While most homicides worldwide are committed against men and boys (80 per cent in 2022 according to the 2023 Global Homicide Study), women and girls are disproportionately affected by homicidal violence in the home.⁹² Gender-related killings of women and girls are also called “femicide/feminicide”.⁹³

The analysis of available UNODC data for 39 out of 55 countries and territories in ECA reveals that there were 1,016 child victims of intentional homicide, as reported by national authorities in the region from 2016-2023. This included 592 boys (58 per cent) and 424 girls (42 per cent), though sex distribution varies across countries and territories in the region.

In terms of age, the highest number of child homicide victims were between 0-9 years old (522 children, 51 per cent), followed by 15-17 years old (333 children, 33 per cent) and ages 10-14 (161 children, 16 per cent).⁹⁴ Age distribution varies across countries and territories in the region.⁹⁵ There is a notable difference between the age patterns revealed by this analysis and global age patterns. Globally, the risk of violent death increases with age and is higher among adolescents than children under 10.⁹⁶ The discrepancy between the global and regional age patterns may need further investigation.

Among ECA countries and territories, Uzbekistan had the highest rate of intentional child homicide victims (2.5 child victims per 100,000 children aged 0-17 in 2018) followed by Albania (rate of 1.9 in 2018) and North Macedonia (1.86 in 2023).⁹⁷ In contrast, the rates of intentional child homicide victims were lowest in Ireland, Norway and Spain, all of which had a rate of less than 1 child victim per 100,000 in 2023.

Figure 6 **Regional estimated rates of intentional homicide of the general population and the population aged 0 to 17 (per 100,000)**



Source: UNODC database, latest available data (2015 to 2023)

Figure 6 shows the trends in the estimated regional rates of intentional homicide for the general population compared with the child population per 100,000 population of the same age range.⁹⁸ The regional average rate for the child population has been calculated using the available data from the average of 29 countries and territories between 2015 to 2023, and an average of 43 countries and territories for the general population.⁹⁹

At the regional level, the findings reveal a steady decrease in the overall estimated regional rate of victims of intentional homicide per 100,000 population as of 2017 with one uptick in 2020.¹⁰⁰ In contrast, the rate of intentional child homicide victims in ECA remains relatively stable with an upward trend between 2015 and 2019 as shown in Figure 6.

Changes in the rate of child homicide over time may indicate where and whether prevention policies are working, especially in the context

of “interpersonal homicide”, which is the predominant homicide type in Europe according to the 2023 Global Study on Homicide.¹⁰¹

BOX 15

The number and rate of intentional homicide of children does not reflect the children killed in conflicts in the region. A separate SDG indicator 16.1.2 (“Conflict-related deaths per 100,000 population, by sex, age and cause”) captures the toll of conflicts on children.¹⁰² Reliable data for this indicator are hard to come by in ongoing conflicts, such as Ukraine.¹⁰³ According to official United Nations data about 600 children have been killed and more than 1,350 have been injured in attacks since the war in Ukraine escalated in 2022. The true number of children’s lives lost is likely considerably higher.

Conclusions

The discrepancy between the homicide rate and trend in the general population compared with the child population in ECA needs further investigation.¹⁰⁴

While most countries and territories in the region collect and report data on child victims of intentional homicide using administrative registers, the analysis revealed data gaps for this indicator in the UNODC database, as not all countries and territories report data on this indicator or do not report data consistently on an annual basis. There are also gaps in disaggregated data by age group, though age is an “indispensable” disaggregation variable according to the ICVAC for this indicator, and disaggregation of the age groups by sex.

Disaggregated data by relationship with perpetrators for children is missing, too, which is a “minimum” disaggregation variable, according to the ICVAC.¹⁰⁵ The categories that UNODC uses for the relationship

between the victim and the perpetrator differ from the categories recommended by the ICVAC.¹⁰⁶ The same goes for the age groups UNODC uses, namely categories 0-9 years, 10-14 years and 15-17 years, while the ICVAC recommends a further breakdown of the UNODC category 0-9 years to 0-4 and 5-9 years given the differences in risks of children under the age of 5 as compared to children over 5 years old. UNODC also does not use the ICVAC-recommended separate category of “age not known”, which was established in the ICVAC to reflect the challenges of countries and territories in registering homicides of young children.¹⁰⁷

Below: © UNICEF/UN0214471/Babajanyan VII Photo

Liza, 12, at her home in Moldova, in April 2018.

After being sexually abused by her Stepfather, Liza was helped by a UNICEF-supported shelter, where she was given medical, social and psychological assistance. “At 5:15 I got a call from Liza telling me ‘Mom come home quickly, now come home.’ I then asked the neighbour what was going on and the neighbour said, ‘your daughter has been raped,’” says Liza’s mother Silvia.



ICVAC Category 2:

Physical violence against a child

Physical violence against a child is defined by the ICVAC as “any deliberate, unwanted and non-essential act that uses physical force against the body of a child and that results in or has a high likelihood of resulting in injury, pain or psychological suffering”.¹⁰⁸

Two indicators were chosen for regional data analysis: SDG indicator 16.2.1, which measures the proportion of children (aged 1-17 years) who experienced any physical punishment and/or psychological aggression by caregivers and the percentage of adults who think that physical punishment is necessary to raise/educate children.¹⁰⁹

BOX 16

Given the focus of ICVAC Category 2 on acts of physical VAC, the analysis in this section concentrates on physical punishment of children reported under SDG indicator 16.2.1, and on the subset of children aged 1 to 14 because comparable data are not available for the entire child population.

To ensure the highest level of data comparability across countries and territories in the region for both indicators, data are sourced primarily from MICS, but also from DHS and comparable national surveys.¹¹⁰ As there are variations across countries and territories in coverage of age groups for the indicator on physical punishment of children, data are presented as totals by sex and – wherever available – for Roma settlements (Serbia, Montenegro, North Macedonia and Kosovo) to highlight possible inequities.¹¹¹

Data on attitudes of adults towards physical punishment of children are presented by totals and compared with the prevalence data to reveal existing discrepancies.

BOX 17

Physical violence against children by parents and other caregivers is a common form of VAC worldwide.¹¹² It can be severe or minor assault and can mean that a child is being isolated.¹¹³ It intersects with psychological VAC by parents and other caregivers.¹¹⁴

There are no upsides to physical and psychological discipline of children, but there is sufficient evidence that it harms them.¹¹⁵ Besides immediate effects, such as physical harm and increased antisocial behaviour and aggression, it increases the risk that children may internalize violence as a legitimate way of resolving conflict, become perpetrators themselves in later years, and/or experience mental health disorders and developmental delays, among other consequences.¹¹⁶

Violent discipline intersects with IPV (see Box 5), and governments and practitioners must take this into account when designing and implementing laws, policies, strategies and services.

In line with the Nurturing Care Framework, children require five components of nurturing care to reach their full potential – good health, adequate nutrition, safety and security, responsive caregiving and opportunities for learning.¹¹⁷ It is therefore crucial that ECA governments monitor physical and psychological VAC by parents and other caregivers – not only in the family environment but also in other relevant settings, such as alternative care arrangements, custodial facilities and communal living for refugees and migrants, among other settings where children reside with caregivers.

Main findings

The following findings are based on available data from 15 out of 55 countries and territories in ECA and may therefore not be representative for the entire region.

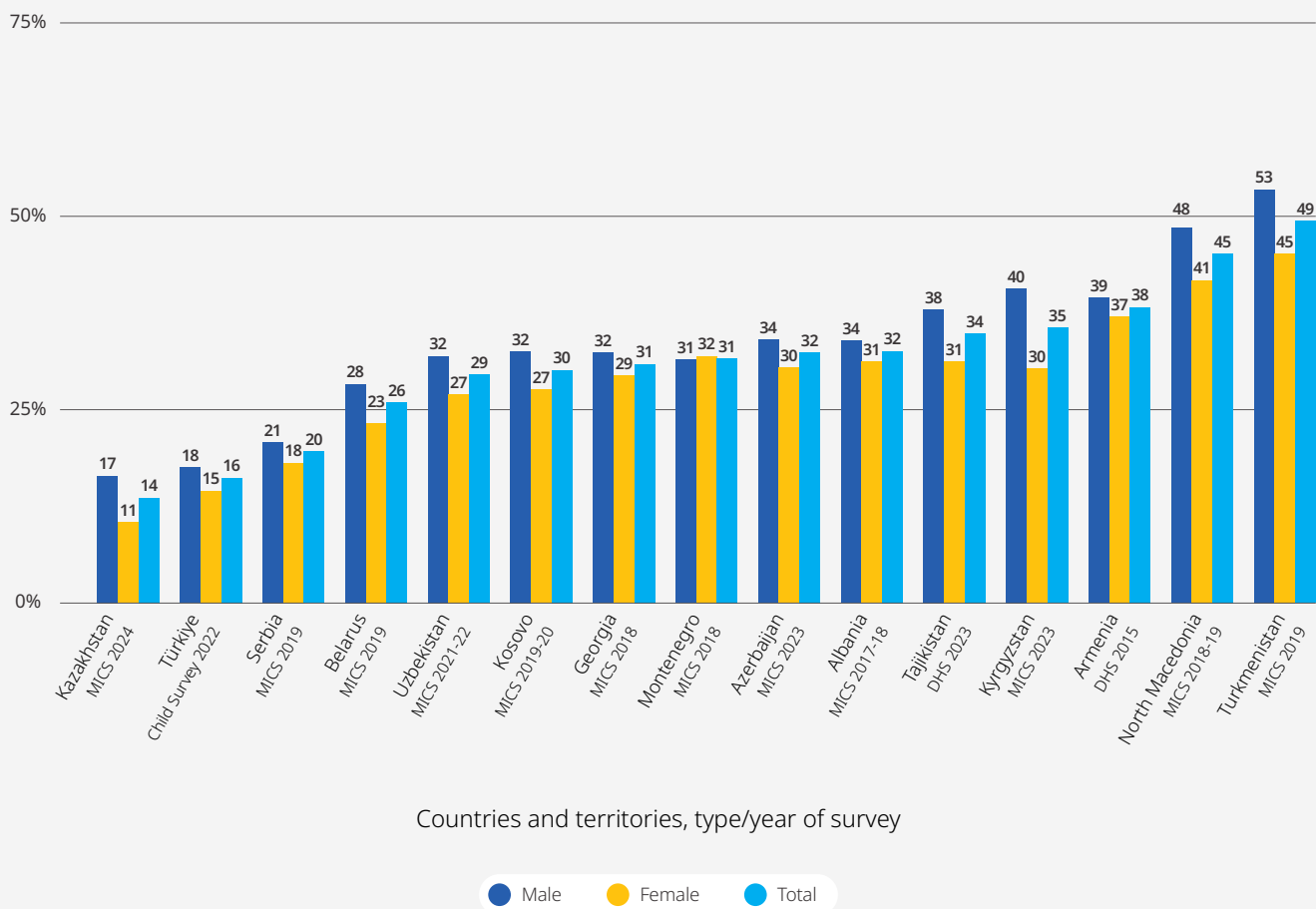
- Globally, physical violence against children by caregivers is widespread.¹¹⁸ The same holds true for the 15 countries and territories in ECA where average prevalence exceeds 30 per cent.
- Gender differences in recent experience of physical violence by caregivers are small in the 15 countries and territories – an average of 28 per cent of girls versus 33 per cent of boys are affected.
- Prevalence by age groups differed across the 15 countries and territories, though the risk

of physical punishment by caregivers decreases after children become adolescents.

- There is a discrepancy between the percentage of adults who believe physical punishment is necessary to raise and educate children, and the proportion of children who have experienced physical violence by caregivers.
- As of September 2025, 38 out of 55 ECA countries and territories have banned the corporal punishment of children.¹¹⁹

Figures 7 and 8 below show the percentage of children aged 1 to 14 who experienced any violent physical discipline by caregivers in the past month disaggregated by sex and age group using the latest available data from 15 ECA countries and territories.¹²⁰

Figure 7 **Percentage of children aged 1 to 14 who experienced any physical punishment by caregivers in the past month in 15 countries and territories of Europe and Central Asia, by sex**



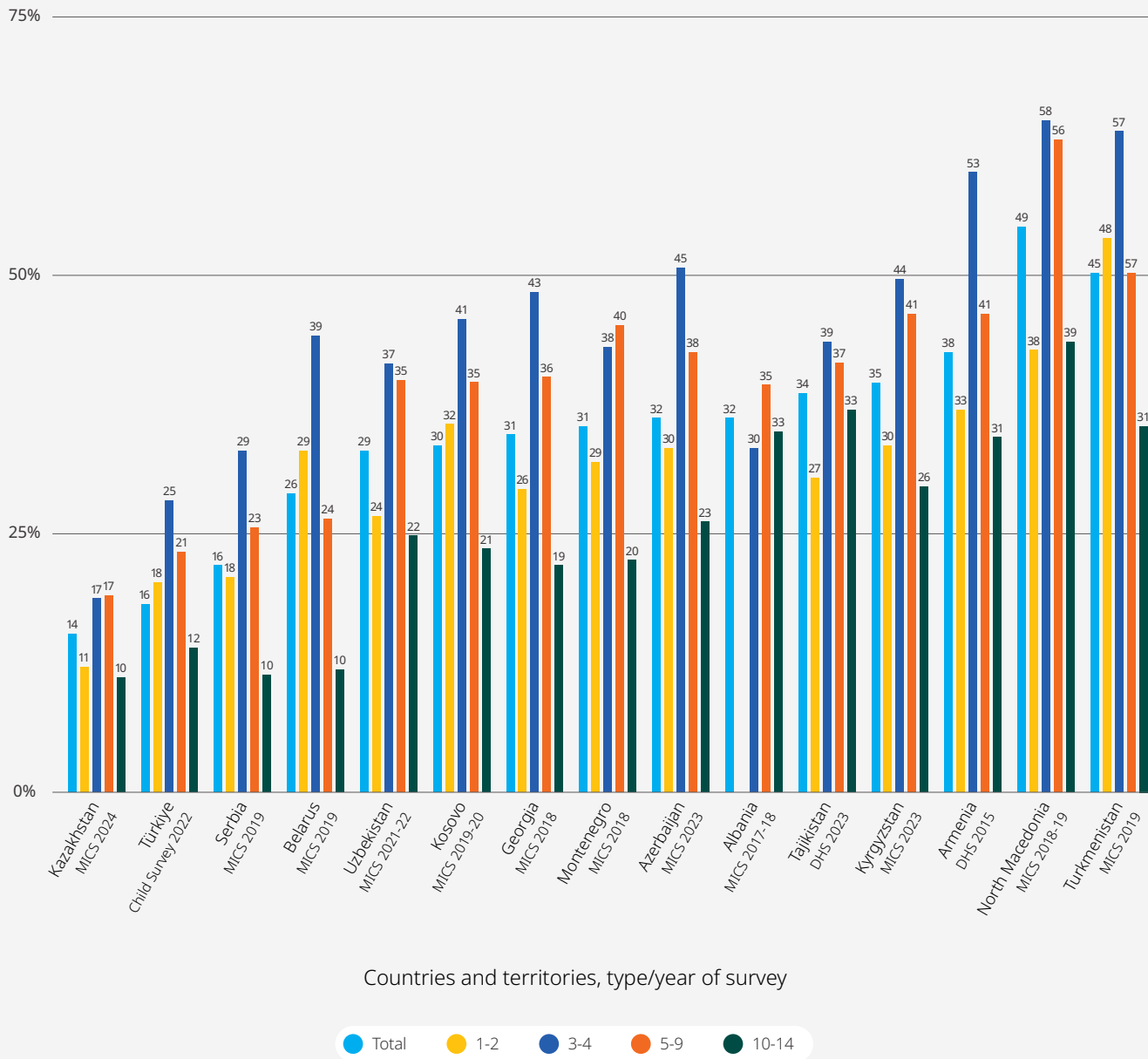
Source: TransMonEE database 2025, MICS/DHS and national representative survey data from 2015 to 2024.
NB: Data from the Kazakhstan MICS 2024 survey have not yet been published

As Figure 7 reveals, the countries and territories reporting the highest prevalence of violent physical discipline of children by caregivers are Turkmenistan with 49 per cent (MICS, 2019), North Macedonia with 45 per cent (MICS, 2018-19) and Armenia with 38 per cent (DHS, 2015). Countries with the lowest reported prevalence are Kazakhstan with 14 per cent (MICS, 2024) followed by Türkiye with 16 per cent (Child Survey, 2022), and Serbia with 20 per cent (MICS, 2019). The different years in which

the surveys were conducted may partly explain these variations.

On average, 33 per cent of boys and 28 per cent of girls in the 15 countries and territories experience physical discipline. Figure 7 shows that in most countries and territories compared to girls, boys aged 1 to 14 are at higher risk of experiencing physical discipline by caregivers. The prevalence of physical discipline among boys ranges from 17 to 53 per cent, and between 11 to 45 per cent among girls.

Figure 8 **Percentage of children aged 1 to 14 who experienced any physical punishment by caregivers in the past month in 15 countries and territories in Europe and Central Asia, by age group**



Source: TransMonEE database 2025, MICS/DHS and national representative survey data from 2015 to 2024.
NB: Data from the Kazakhstan MICS 2024 survey have not yet been published

Though prevalence by age group differs across the 15 countries and territories in ECA, patterns reflect global age patterns - meaning prevalence was highest in most countries and territories among children aged 3-4 and decreased after children became adolescents. Children as young as 1-2 years old experienced physical punishment by caregivers. In some countries and territories, such as North Macedonia and Belarus, they were even more likely to experience physical punishment compared with children aged 5-14.¹²¹

An analysis of regional trends over time is not possible as there are not enough data points for the 15 countries and territories. Table 2 shows rounded data on any physical punishment and/or psychological aggression by caregivers for Kazakhstan, which has implemented four MICS surveys since 2006 allowing trend analysis. The data show a decrease of “violent discipline” in the period from 2015 to 2024, which suggests that prevention efforts made by the Government and its partners may have an effect.

Table 2 Percentage of children aged 1 to 14 who experienced any physical punishment and/or psychological aggression by caregivers in the past month in Kazakhstan in the period 2006-2024			
MICS 2006	MICS 2010/11	MICS 2015	MICS 2024
Any: 52 per cent	Any: 49 per cent	Any: 53 per cent	Any: 38 per cent
Physical: 23 per cent	Physical: 29 per cent	Physical: 26 per cent	Physical: 14 per cent
Psychological: 48 per cent	Psychological: 43 per cent	Psychological: 47 per cent	Psychological: 36 per cent

Source: MICS Microdata Database, accessible at: Surveys | UNICEF MICS.
NB: Data from the Kazakhstan MICS 2024 survey have not yet been published

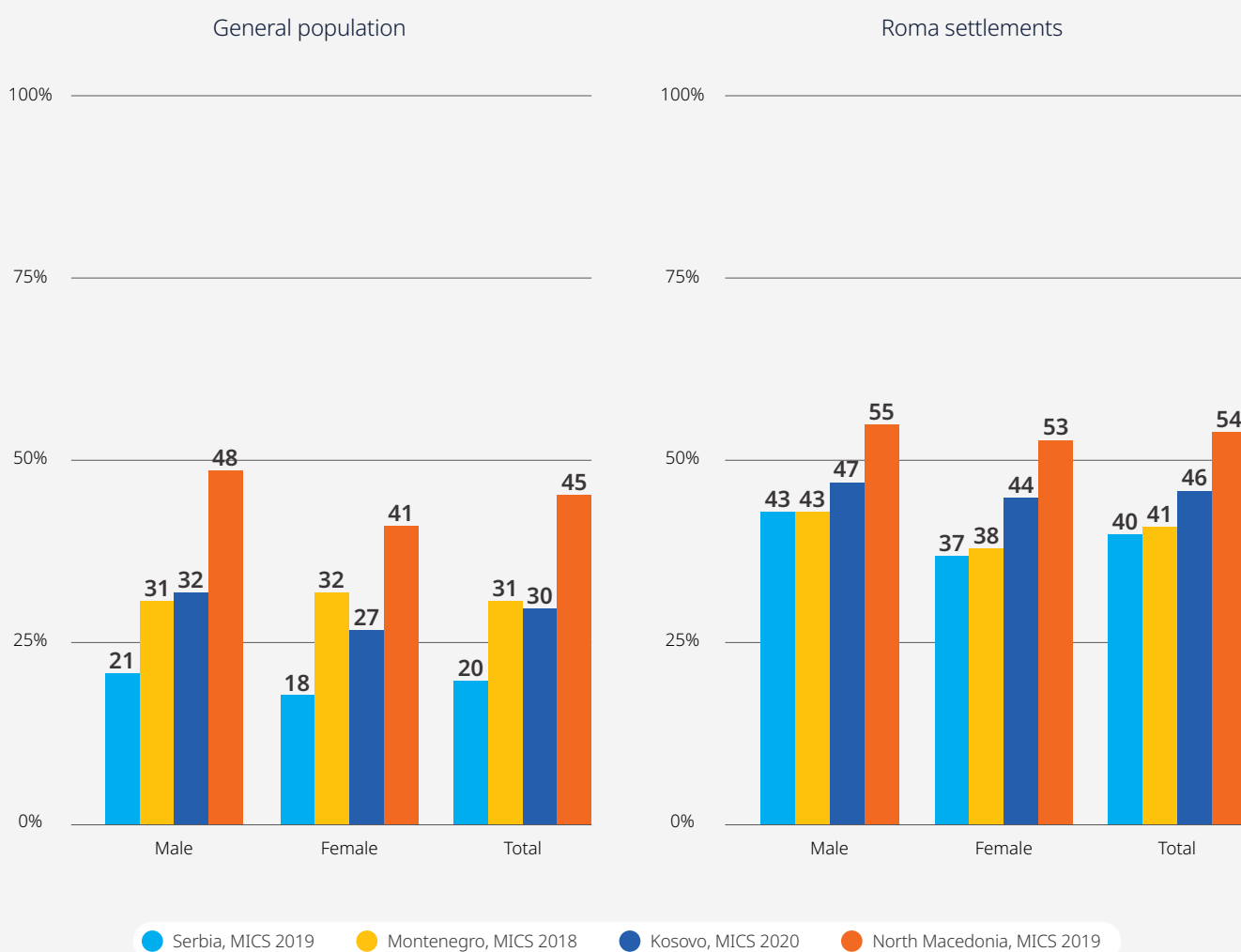
A recent descriptive study of trends in 11 high-income countries and territories, including eight in ECA, revealed that prevalence of “violent discipline” decreased in all countries and territories in the period 1970 to 2020.¹²²

Annex 6 includes an analysis of the MICS data on “violent discipline” for 10 countries and territories in the region – disaggregated by sex and age group – and includes data on Roma settlements for countries and territories with available MICS surveys in these locations. This provides a more nuanced picture of differences in the three variables across these countries and territories and underlines the importance of country-specific

analysis and cross-tabulation of data on different variables.¹²³

This is also why this report compares data on the prevalence of physical punishment of children aged 1-14 in Roma settlements with the data for children in the general population in four countries and territories, namely Serbia, Montenegro, Kosovo and North Macedonia (Figure 9).¹²⁴ While the findings are not representative for ECA, they point to inequities that can only be revealed through disaggregation of VAC data by the circumstances of the act including settings, and by characteristics of the child victim and the perpetrator.¹²⁵

Figure 9 **Percentage of children aged 1 to 14 in the general population and in Roma settlements who experienced any physical punishment by caregivers in the past month**



Source: TransMonEE database 2025, MICS survey data 2018-2020

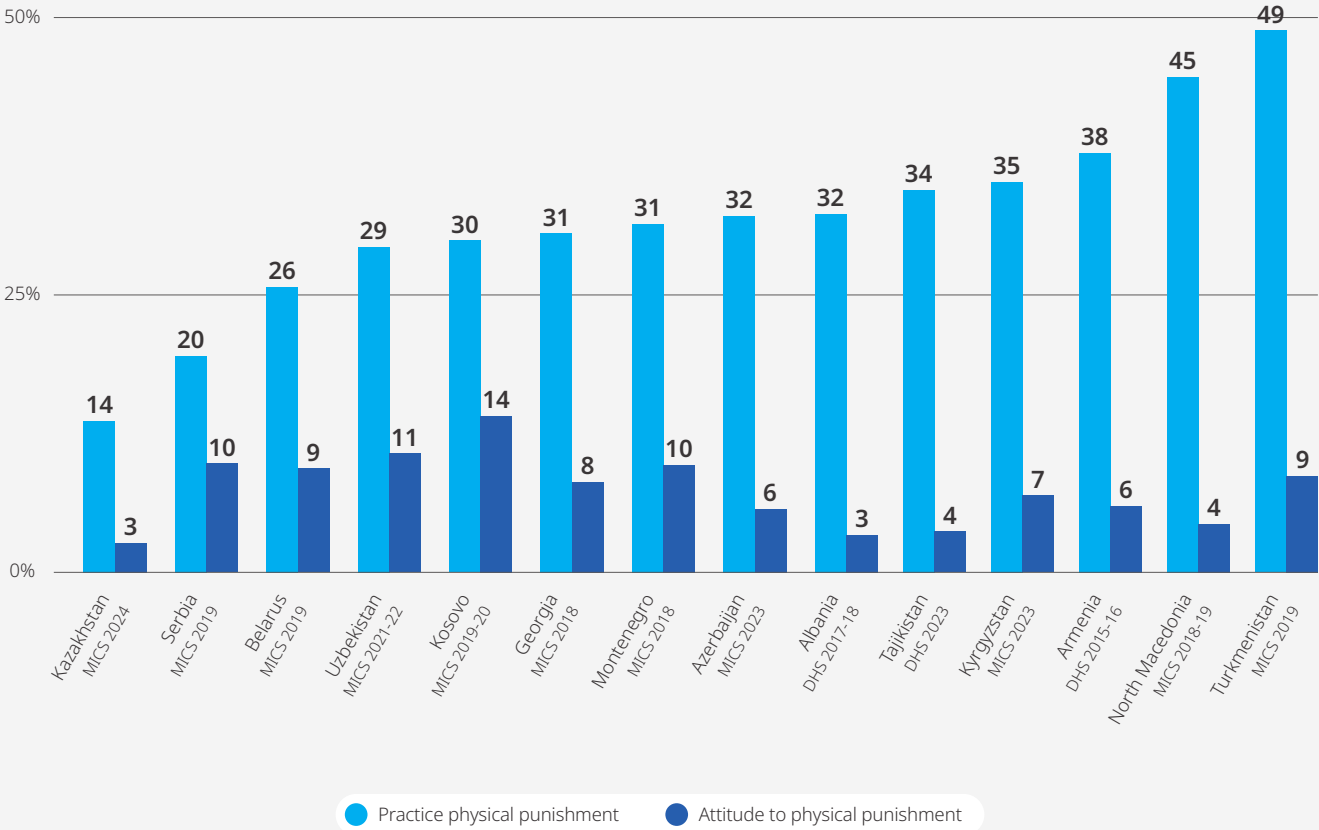
Children living in Roma settlements are at higher risk of physical punishment by caregivers than children from the general population across the four countries and territories (Figure 9). Between 40 to 54 per cent of children in Roma settlements were subjected to physical punishment by caregivers, compared to 20 to 45 per cent of other children.

There is a discrepancy between beliefs among adults about the necessity of physical punishment and physical punishment experienced by children by caregivers in the 14 countries and territories for which data could be analysed (Figure 10).

BOX 18

Countries and territories with emergencies resulting in displacement of population groups may want to collect data in their surveys on “violent discipline” in the context of displacement status to inform prevention and response services for displaced children and their families. The analysis of MICS 2018 data from Georgia by displacement status revealed a significant difference among the prevalence of physical punishment of children from the general population (31 per cent) compared with the prevalence of internally displaced children (37 per cent).

Figure 10 **Percentage of adults who think that physical punishment is necessary to raise/educate children compared with percentage of children aged 1 to 14 who experienced any physical punishment by caregivers in the past month**



Source: TransMonEE database 2025, MICS/DHS and national survey data 2015-2024
 NB: Data from the Kazakhstan MICS 2024 survey have not yet been published

The reasons for the discrepancy between attitudes and practice are likely manifold, including social norms related to physical punishment of children; intergenerational violence, with caregivers who experienced violence in childhood reproducing the same practices, even if they disagree with them in principle; stress due to economic hardship, conflict, displacement or other reasons; a lack of knowledge and exposure to positive parenting techniques; and a lack of understanding that even an assault against a child that does not result in immediate physical injury can have consequences such as psychological suffering.¹²⁶

Conclusions

Prevalence of physical violence against children by caregivers is high in ECA, despite indications

of a downward trend in some countries and territories in the region, and although a small proportion of adults in ECA believed using physical punishment is necessary to raise/educate children.

Data coverage is limited, and historical data are often lacking, hampering comparable and trend analyses. This data gap may reflect the persistence of entrenched harmful social norms, limited awareness of alternatives to violent physical and psychological discipline among caregivers, and/or weak enforcement of legal bans of “corporal punishment”. Moreover, household stress factors and intergenerational transmission of violent practices can perpetuate violent, physical and psychological discipline despite widespread recognition of its harm.¹²⁷

Example 3:

In ECA, the Republic of Moldova is the only country that has conducted a VAC survey (VACS) covering children and young people aged 13 to 24.¹²⁸ The VACS are led by the Centers for Disease Control and Prevention (CDC) as part of the Together for Girls partnership.¹²⁹ The VACS are nationally representative household surveys that collect data on different forms of violence, including physical, and on perpetrators (including parents, caregivers and other relatives).

In the Republic of Moldova, the VACS was implemented by the national government in collaboration with the International Organisation for Migration (IOM), IMAS (implementing organization), the United States Agency for International Development (USAID) and the CDC. The VACS

measures both lifetime prevalence and prevalence over the past 12 months. It also collects information about the circumstances surrounding physical, sexual and emotional violence in childhood and young adulthood (before age 24) including the context of violence (e.g. location), demographics, socioeconomic status and education, risks and protective factors (e.g. gender attitudes), and consequences (e.g. health outcomes), as well as disclosure, service seeking and utilization after experiencing violence.

Findings from the VACS have been published by countries and territories and the Together for Girls partnership. Policy makers have leveraged these results to develop evidence-based national action plans and policies, and design targeted interventions to allocate resources to improve child protection efforts.¹³⁰

ICVAC Category 3:

Sexual violence against a child

In line with the ICVAC, sexual violence against a child refers to “any deliberate, unwanted and non-essential act of a sexual nature, either completed or attempted, that is perpetrated against a child, including for exploitative purposes, and that results in or has a high likelihood of resulting in injury, pain or psychological suffering”.¹³¹

Global estimates of sexual VAC published by UNICEF indicate that one in five (around 650 million) girls and women, and one in seven (or between 410 and 530 million) boys and men, have experienced sexual violence in childhood.¹³²

In Europe, an estimated 37 million girls and women experienced rape and sexual assault before they turned 18.¹³³ An estimate for Central Asia is not available due to issues of data availability and quality, common challenges in measuring the scope of sexual VAC.¹³⁴

The following two indicators were selected for the analysis of data on sexual VAC for this report:

1. Percentage of women (aged 18-74) who experienced sexual violence during childhood.

The data source is the 2021 EU-GBV.¹³⁵ Data are collected and published by Eurostat and disaggregated in this report by type of perpetrator.¹³⁶ This indicator serves as a proxy for SDG indicator 16.2.3 “Proportion of young women and men aged 18–29 years who experienced sexual violence by age 18”. Data are only collected for childhood experience of sexual violence before the age of 15 in the EU-GBV.

2. Percentage of women (aged 18-74) who experienced sexual violence during childhood, by person/support service to whom violence was reported. Same data source as above.¹³⁷

Sexual VAC can take many forms, including via information and communication technologies (ICTs), and can occur in any setting. A child can experience sexual violence from a caregiver at home or in an alternative care arrangement; from a person who is in a position of trust, like a teacher, a coach or a religious leader; or from an individual or a gang. They can be exploited for sex in exchange for cash, food, or favours; trafficked for sexual exploitation; sexually harassed including via ICTs; or groomed online or offline and lured into sex acts.

Both gender and age can increase the risk of sexual violence – adolescent girls are, for instance, disproportionately affected.¹³⁸ Other characteristics and circumstances of the child, such as disability or migration status or living in alternative care, can also increase the risk of sexual violence, and of not being identified, registered and adequately supported.

The risk of sexual violence increases significantly in emergency contexts such as armed conflict, natural disasters and other humanitarian emergencies.¹³⁹ This includes conflict-related sexual violence, trafficking for sexual exploitation and IPV. Sexual VAC is one of the six grave violations identified and condemned by the United Nations Security Council and can be used as

a tactic of war designed to humiliate a population or to force displacement.¹⁴⁰

Sexual violence results in severe physical, psychological and social harm. Child victims experience an increased risk of sexually transmitted infections, unwanted pregnancy, pain, illness, social isolation and psychological trauma.¹⁴¹ One of the biggest challenges is that sexual VAC is highly stigmatized and underpinned by harmful social norms that support gender inequality.¹⁴² Children who experience sexual violence often feel guilt, shame and confusion.¹⁴³ Afraid, for example, of retribution and incrimination, they often do not know where to turn for help.¹⁴⁴ And even if they have the knowledge, they may struggle to access safe reporting channels and child-friendly services with adequately trained staff and standardized operating procedures for cases of VAC.¹⁴⁵ This leads to many children not disclosing their experience and not seeking help.¹⁴⁶ It is therefore paramount that countries and territories monitor sexual VAC, as well as levels of reporting and help-seeking including which factors are hampering or promoting these behaviours, measuring service access and awareness, and assessing the quality of the services provided.¹⁴⁷

Main findings

- **The availability of comparable and comprehensive sexual VAC data is very limited in the region. The following findings are therefore not representative for all ECA countries and territories.**
- **Reliable data from 19 EU countries and territories on experience of childhood sexual violence of women before the age of 15 suggest:**
 - Among women who experienced sexual violence in childhood, between 27 and 70 per cent reported the incident or sought help, according to self-reported data from the 19 countries and territories.
 - The most likely perpetrators of sexual violence in childhood reported by women were men that the women knew as children, such as a family member. Reliable data for this indicator are only available from 17 EU countries and territories.¹⁴⁸
- Prevalence ranging from 1 per cent up to 14 per cent in the 19 countries and territories.

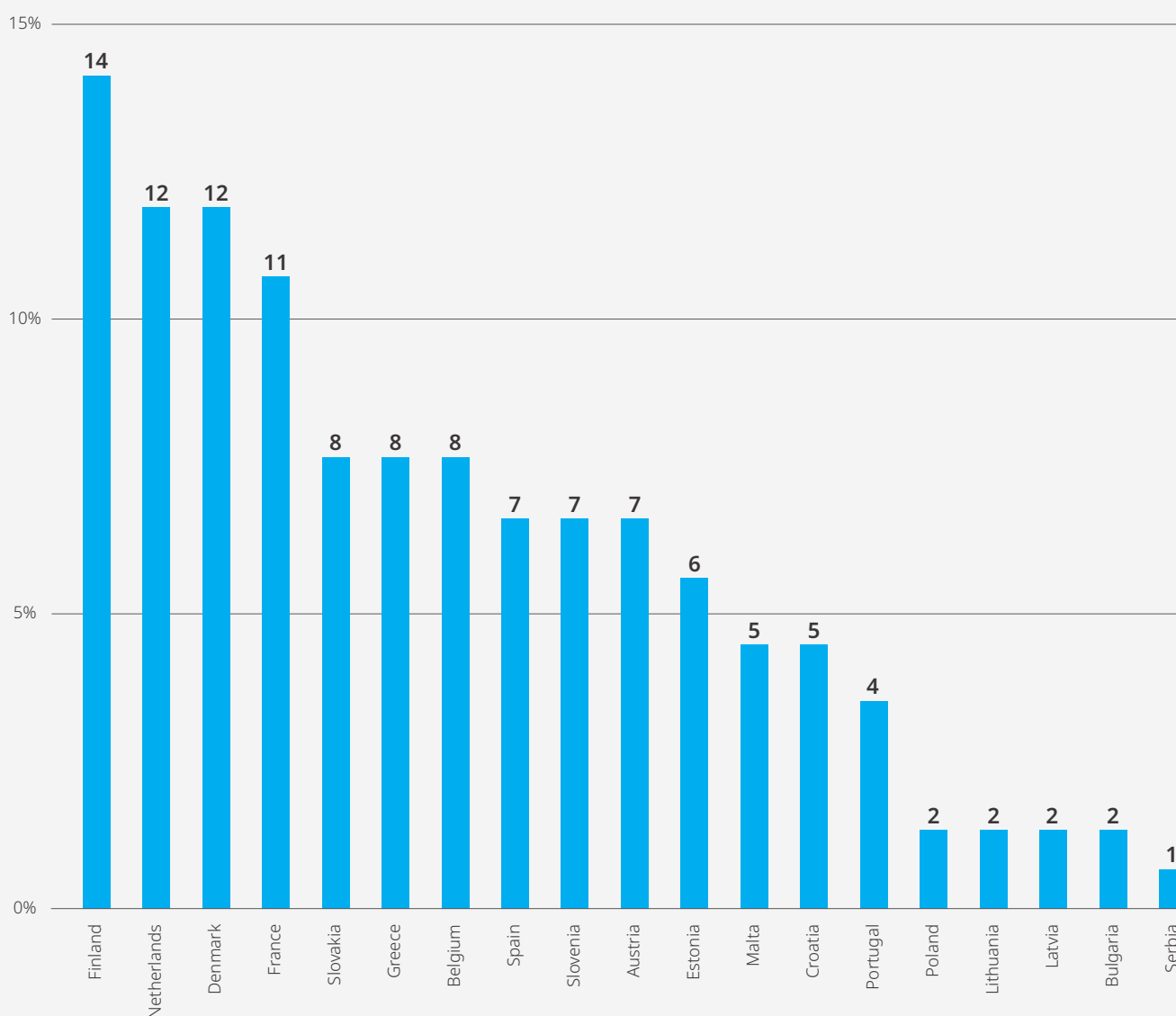
1. Analysis of the percentage of women (aged 18-74) who experienced sexual violence during childhood in Europe

Figure 11 provides an overview of women aged 18 to 74 who experienced sexual violence during childhood in 19 EU countries.¹⁴⁹

Figure 11 shows considerable variations in the prevalence of sexual violence during childhood reported by women aged 18 to 74 across 19 EU countries, ranging from less than 1 to 14 per cent.

Considering the sensitivities around the topic and the presumed large numbers of girls and women who do not seek formal support or report their experiences of sexual violence during childhood, these percentages may mask the actual magnitude of the issue in the 19 countries.¹⁵⁰ There are many reasons for underreporting, such as stigma and social and cultural norms related to sexual violence, lack of child victim-friendly support, and concerns of the child victim over safety, as many perpetrators are known or even present in the home or other setting where the child resides.¹⁵¹

Figure 11 **Percentage of women aged 18 to 74 who experienced sexual violence during childhood in 19 EU countries**

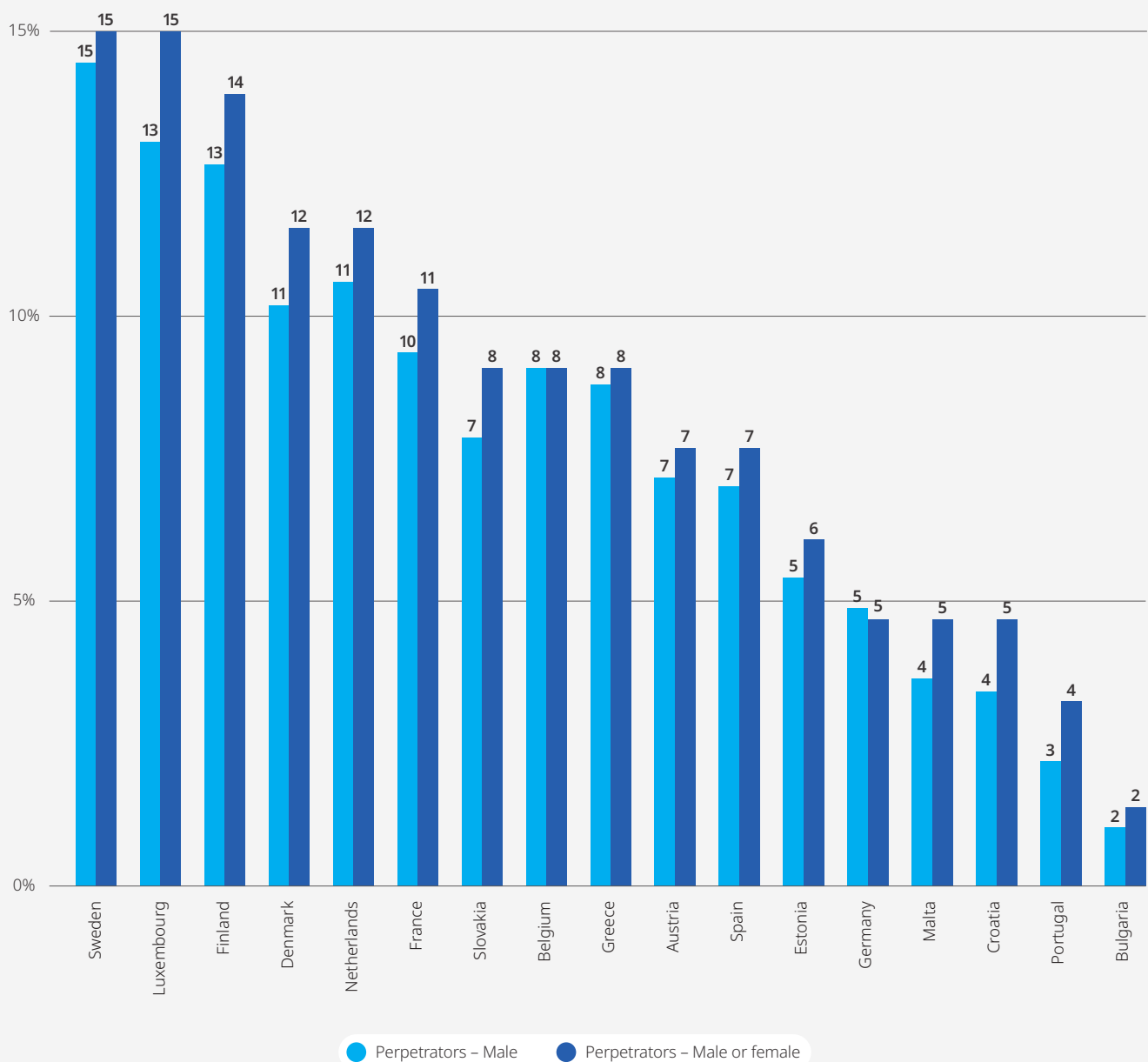


Source: Eurostat database, EU-GBV survey 2021

Moreover, women and girls in countries with strong protection and support systems including safe reporting channels may be more likely to report violence than women and girls in countries with weaker systems.

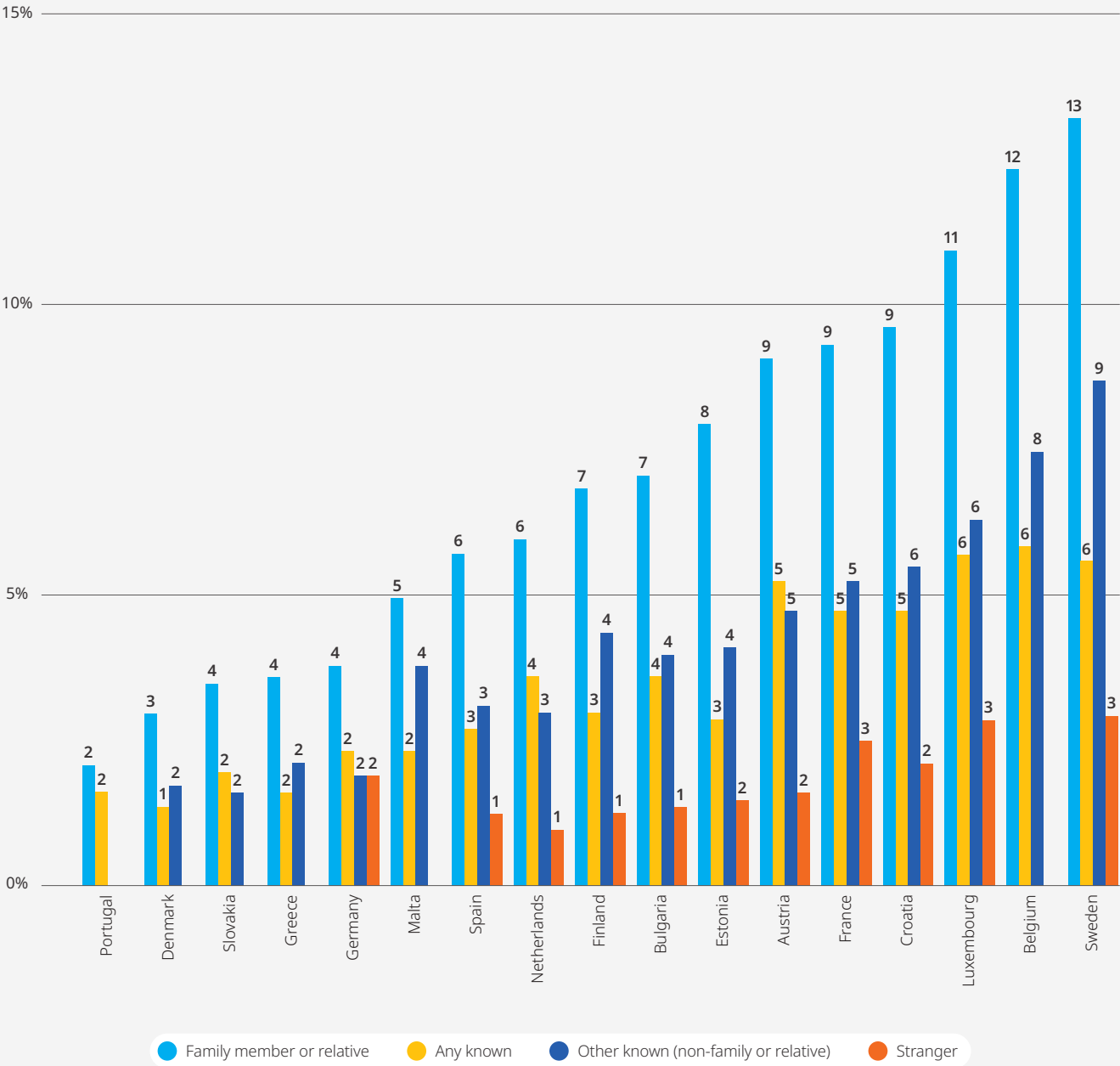
Figure 12 presents the percentage of women aged 18 to 74 who ever experienced sexual violence during childhood by sex of perpetrator and Figure 13 by type/relationship of perpetrator for 17 EU countries.

Figure 12 **Percentage of women aged 18 to 74 who experienced sexual violence during childhood in 17 EU countries, by sex of perpetrator**



Source: Eurostat database, EU-GBV survey 2021

Figure 13 **Percentage of women aged 18 to 74 who experienced sexual violence during childhood in 17 EU countries, by type of/relationship with perpetrator**



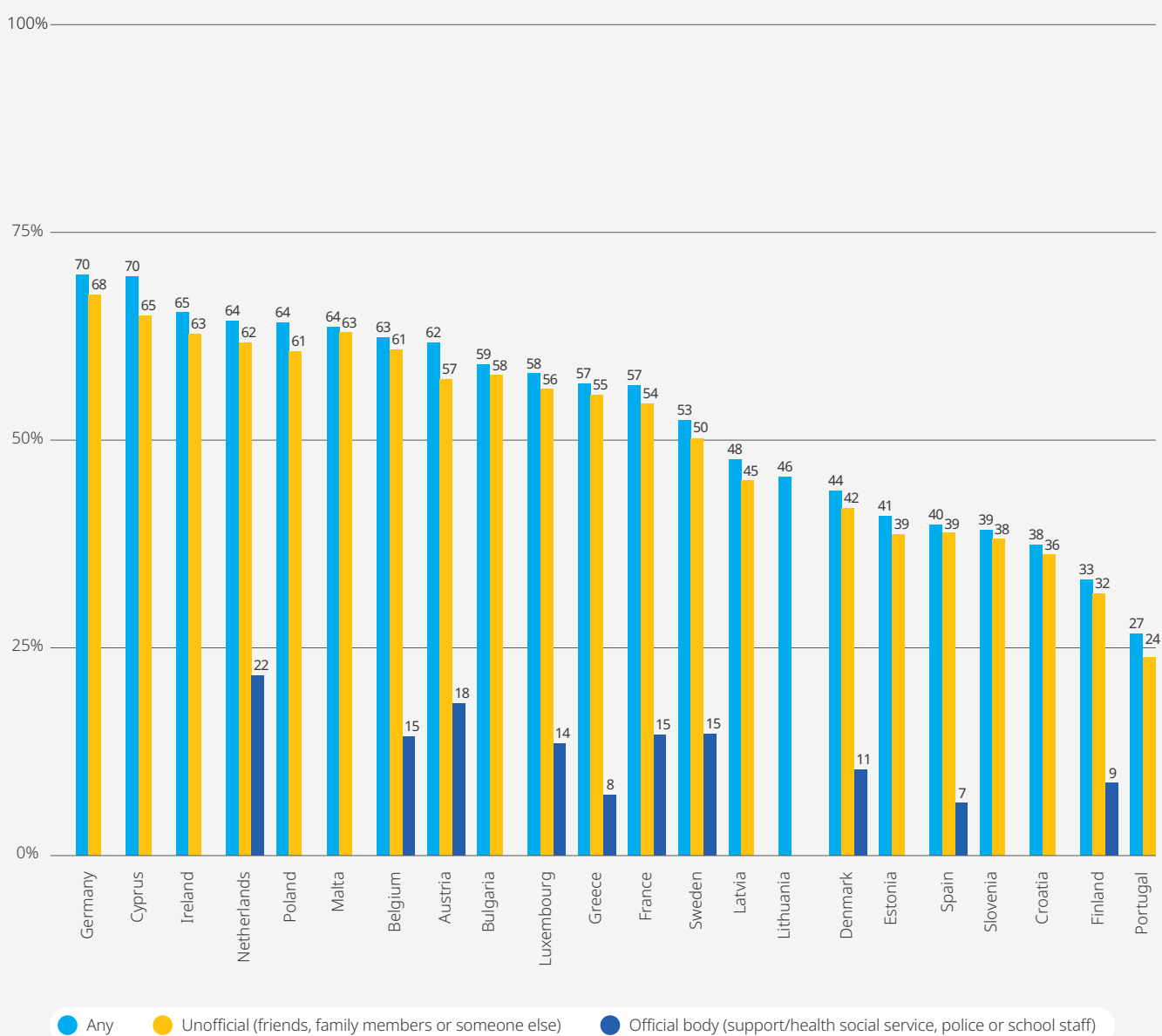
Source: Eurostat database, EU-GBV survey 2021

The findings reveal most perpetrators of childhood sexual violence were male and known to their victims, including family members, relatives and other acquaintances. In contrast, few women reported experiencing childhood sexual violence by strangers.

2. Analysis of the percentage of women (aged 18-74) who experienced sexual violence during childhood, by person/support service to whom violence was reported

An analysis of the EU-GBV data on incident reporting and help-seeking of women aged 18 to 74 who experienced sexual violence during childhood shows that of the 22 countries with sufficiently reliable data for this indicator, Cyprus and Germany reported the highest levels of incident reporting and help-seeking with 70 per cent followed by Ireland with 65 per cent. The lowest levels were observed in Portugal with 27 per cent, followed by Finland with 33 per cent and Croatia with 38 per cent (Figure 14).¹⁵²

Figure 14 **Percentage of women aged 18 to 74 who experienced sexual violence during childhood in 22 EU countries, by person/support services to whom violence was reported**



Source: Eurostat database, EU-GBV survey 2021

Most women who reported sexual violence and sought help when they were under 15 years old turned to informal supports such as friends, family members or someone else rather than formal supports such as social or healthcare services, the police or school staff.

Germany had the highest percentage of women who disclosed their experiences to informal sources (68 per cent), followed by Cyprus and Ireland (65 per cent and 63 per cent, respectively). Conversely, Portugal had the lowest percentage of women who disclosed sexual violence during childhood to informal supports (24 per

cent), followed by Finland with 32 per cent and Croatia with 36 per cent.

The Netherlands recorded the highest official reporting at 22 per cent, with Austria second at 18 per cent, and Belgium, France and Sweden tied at 15 per cent. The lowest prevalence was found in Spain, where only 7 per cent of women who experienced sexual violence in childhood reported the incident to an official body when they were girls under the age of 15. This was followed by Greece with 8 per cent and Finland with 9 per cent.¹⁵³

Conclusions

The available data from some countries and territories in the region combined with the latest global estimate for girls and women subjected to rape and sexual assault in Europe suggest that the prevalence of sexual VAC is considerable, though it varies across countries and territories in ECA.

Data on the prevalence of sexual VAC are, however, extremely limited in the region. For example, an analysis of data from ECA countries and territories for SDG indicators covering sexual violence in childhood, such as 16.2.3 (“Proportion of young women and men aged 18–29 years who experienced sexual violence by age 18”), 5.2.1 (“Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age”), and 5.2.2 (“Proportion of

women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence”) could not be conducted for this report due to the lack of available and comparable data, and the lack of disaggregated data for age and form of violence.

The data analysis and desk/literature review further revealed that data on sexual violence against boys are rare in ECA, likely connected with an overall lack of prioritization and investment in data collection on, and the continued stigma around, this topic. Further factors could include limited cultural and societal awareness of this form of VAC, and the global evidence indicating a higher prevalence among females than males, which is reflected in the SDG and other international indicator frameworks on VAC.¹⁵⁴

All of this hampers a more in-depth analysis of sexual VAC at regional level at this point in time.

GOOD DATA PRACTICE

Example 4:

The National Statistics Portal of Latvia provides data on “Acts of sexual nature with a person before the age of 16” (Criminal Law, Section 161).¹⁵⁵ The use of ‘violent act’ as a statistical unit is in line with the ICVAC.¹⁵⁶ The available data on sexual VAC in Latvia are disaggregated by sex (girls, boys), and age groups (total, 13 years and less, 17 years and less). Data for this indicator has been collected since 2016 allowing for future in-depth analyses.

ICVAC Category 4:

Psychological violence against a child

According to the ICVAC, psychological violence against a child is “any deliberate, unwanted and non-essential act, verbal and non-verbal that harms or has a high likelihood of harming the development of a child, including long-term physiological harm and mental health consequences”.¹⁵⁷

SDG indicator 16.1.2 “Percentage of children (1-17 years) who experienced any physical violence and/or psychological aggression by caregivers” was selected for regional data analysis of this category.

Data are drawn from MICS, DHS and comparable national representative surveys.¹⁵⁸ As there are variations across countries and territories in coverage of age groups, data for this indicator are presented as totals, by sex and – wherever available – for differences of children living in Roma settlements (Serbia, Montenegro, North Macedonia and Kosovo).

BOX 19

Given the focus of ICVAC Category 4 on psychological VAC, the analysis in this section concentrates on psychological aggression against children by caregivers and on a subset of children (aged 1 to 14 years) because comparable data are not available for the entire child population.

BOX 20

Psychological violence, which is also often referred to as “emotional violence”, includes “terrorizing a child, harassing, spurning and humiliating a child, exposure of a child to intimate partner violence in the home environment, or to other violent experiences resulting in or with a high likelihood of resulting in psychological, social, emotional and behavioural problems”.¹⁵⁹ Psychological violence when used as a manner of discipline is a type of “corporal punishment” of children (including also physical punishment) and other forms of degrading treatment of children that should be banned by law.

Children who experience psychological violence repeatedly often blame and find fault within themselves.¹⁶⁰ Emerging evidence indicates that psychological VAC is associated with health risk behaviours and mental disorders, and as highlighted before, can also lead to children experiencing developmental delays, and

becoming aggressive themselves, among other consequences.¹⁶¹

Because it has psychological consequences, witnessing IPV in the home environment as a child also is violent for the child. Systematic reviews show that these children are at great risk of a range of psychological, mental and behavioral complications, which may be moderate or severe and can be long-lasting.¹⁶² Exposure to IPV may result in poorer academic and social abilities. Other complications include internalization problems, post-traumatic stress disorder symptoms, depression and aggressive behaviours, among others.¹⁶³

It is therefore important that countries and territories pay close attention and monitor psychological VAC – which is often more difficult to detect than other forms of violence as it usually occurs in private or domestic settings, hidden from outside view.¹⁶⁴

Main findings

The following findings are based on available comparable data from 15 out of 55 countries and territories in ECA and may therefore not be representative for the entire region.

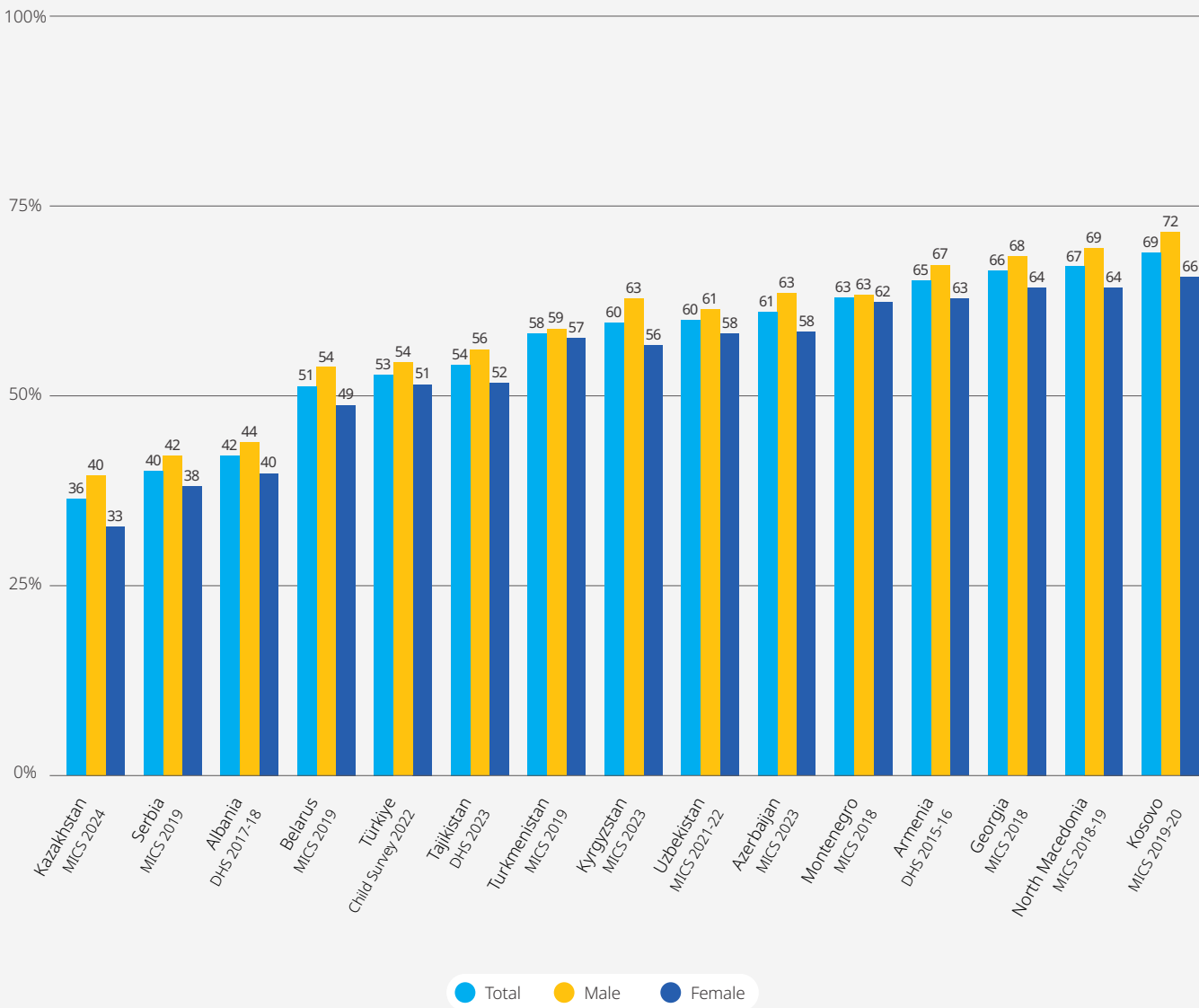
- Prevalence of psychological violence against children by caregivers is high globally and in the 15 countries and territories with comparable data, ranging from 46 to 69 per cent.¹⁶⁵
- Gender differences in recent experience of psychological violence by caregivers are small

in the 15 countries and territories – an average of 54 per cent of girls versus 58 per cent of boys are affected.

- Children of all ages were exposed to psychological aggression across the 15 countries and territories though age patterns differed considerably by country.

The prevalence of psychological aggression against children aged 1 to 14 by caregivers in the past month is shown for 15 countries and territories, disaggregated by sex, in Figure 15 and by age group in Figure 16.

Figure 15 **Percentage of children aged 1 to 14 who experienced any psychological aggression by caregivers in the past month in 15 countries and territories in Europe and Central Asia, by sex**

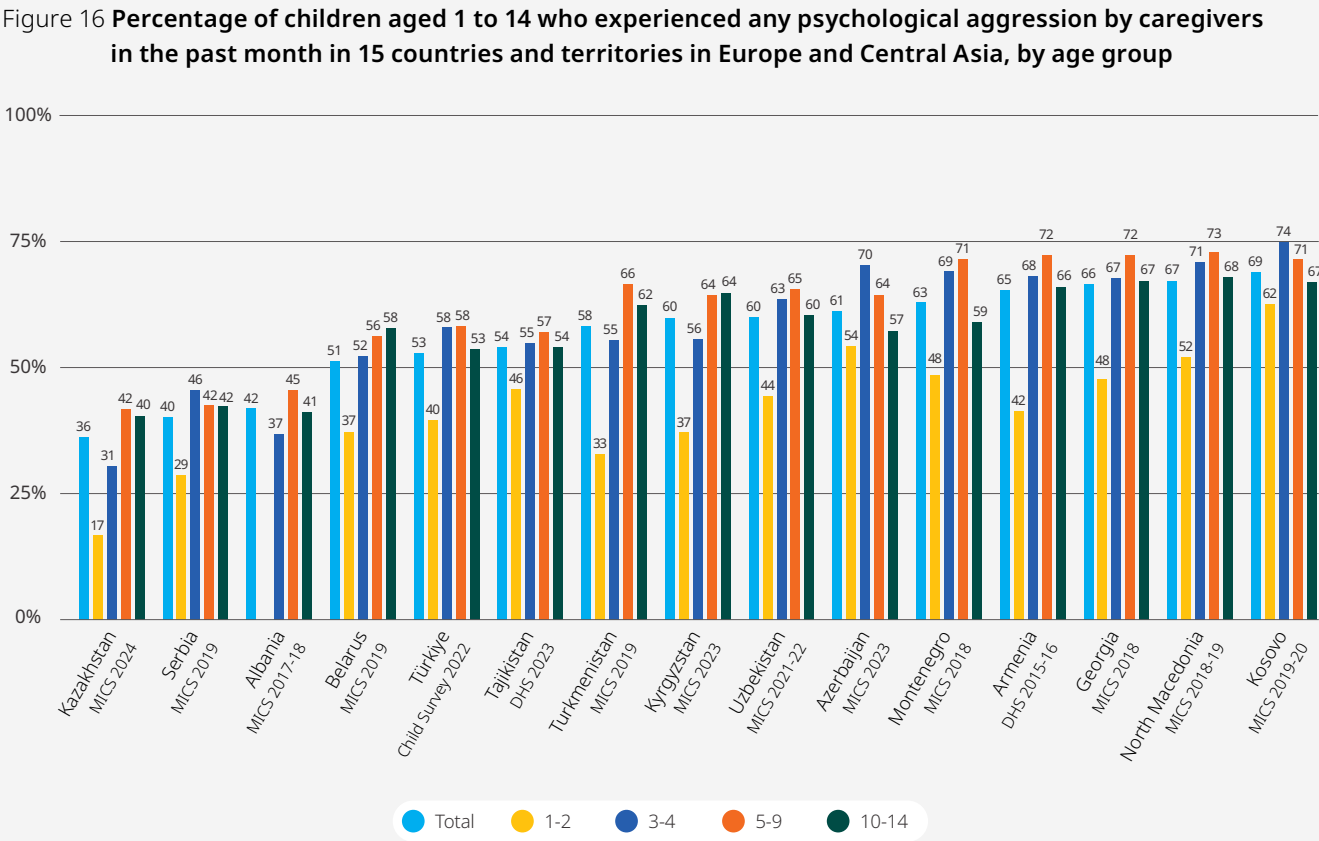


Source: TransMonEE database 2025, MICS/DHS and national representative surveys 2015-2024
NB: Data from the Kazakhstan MICS 2024 survey have not yet been published

Prevalence of psychological aggression against children in the region is high. Among the 15 countries and territories examined, Kosovo shows the highest proportion of psychological aggression against children by caregivers at 69 per cent (MICS, 2019-20), followed closely by North Macedonia at 67 per cent (MICS, 2018-19) and Georgia at 66 per cent (MICS, 2018). In contrast, Kazakhstan reported the lowest proportion at 36

percent (MICS, 2024), with Serbia at 40 per cent (MICS, 2019) and Albania at 42 per cent (DHS, 2017-18).

The sex distribution shows a similar pattern across the 15 countries and territories. A slightly higher proportion of boys experienced psychological aggression by caregivers in the past month than girls, with an average of 58 per cent of boys and 54 per cent of girls.



Source: TransMonEE database 2025, MICS/DHS and national representative surveys 2015-2024
 NB: Data from the Kazakhstan MICS 2024 survey have not yet been published

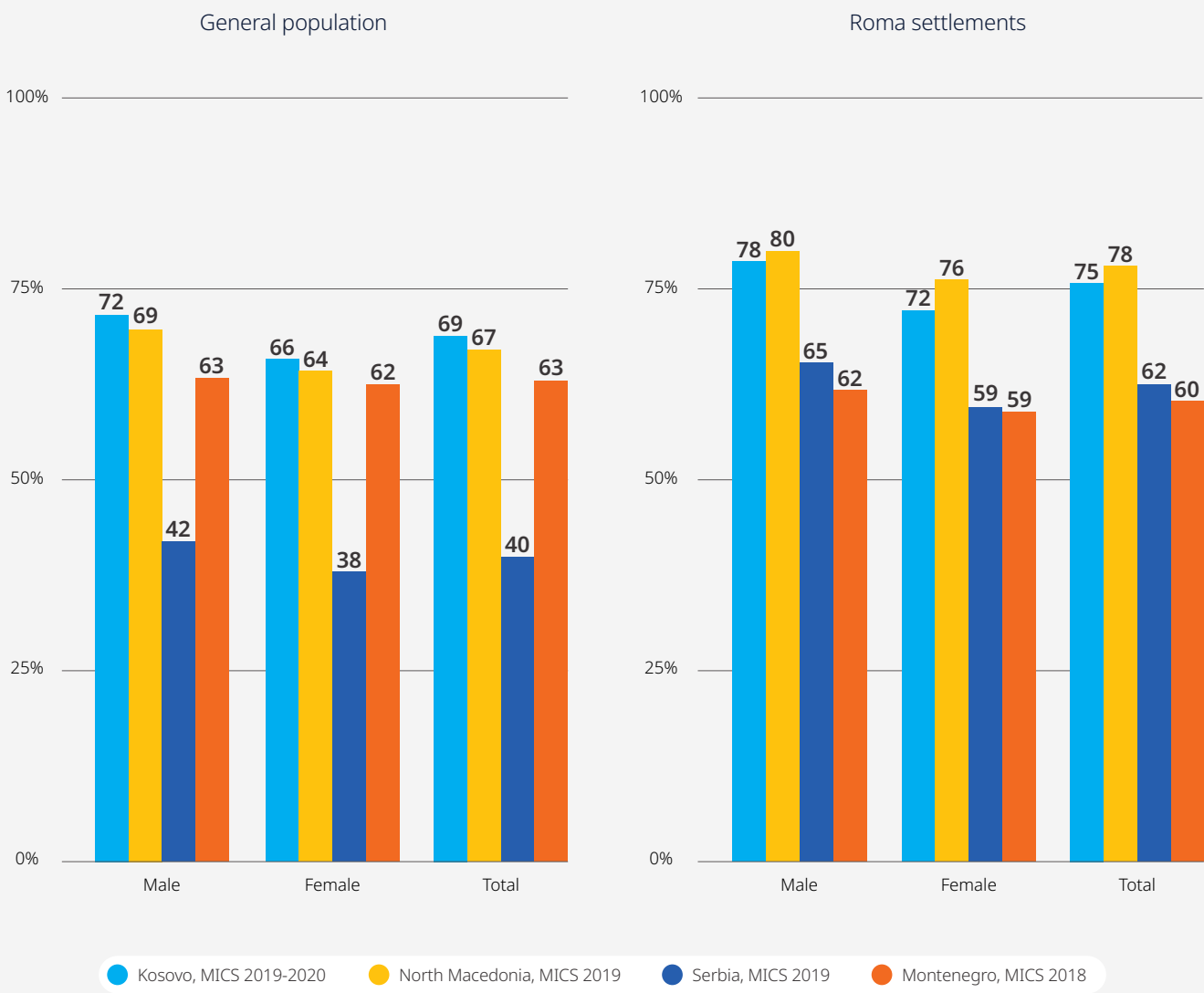
There is no clear age pattern – prevalence varies across the countries and territories (Figure 16). Children of all ages were reportedly exposed to psychological aggression, including children as young as 1 year old – though their risk is lower in the 15 countries and territories with a prevalence of 17 to 62 per cent compared to children aged 3-14 (prevalence ranging from 31 to 74 per cent).

An analysis of regional trends over various time periods is not possible for this indicator, as there are not enough data points for the 15 countries and territories. A recent descriptive study of trends in 11 high-income countries

and territories including 8 in ECA revealed that prevalence of “violent discipline” (i.e. physical and psychological VAC by caregivers) decreased in all countries and territories in the period 1970 to 2020.¹⁶⁶ However, the findings are not representative for all ECA countries and territories.

A few countries and territories in the region have conducted MICS surveys in Roma settlements, namely Serbia, Montenegro, Kosovo and North Macedonia. Figure 17 compares the prevalence of psychological aggression against children by caregivers in these settlements with children in the general population to highlight possible differences.

Figure 17 **Percentage of children aged 1 to 14 in the general population and in Roma settlements who experienced any psychological aggression by caregivers in the past month**



Source: TransMonEE database 2025, MICS surveys 2018-2020

In three out of four countries and territories, a greater proportion of children living in Roma settlements experienced psychological aggression by caregivers than children from the general population.

A breakdown of the data shows that sex distribution is the same for children in Roma settlements and other children, and differences between prevalence among girls and boys are small.

Annex 6 includes an analysis of the MICS data for 10 countries and territories in the region. The data are disaggregated by sex and age group. It also includes countries and territories where MICS surveys have been carried out in Roma settlements.¹⁶⁷

Conclusions

The combined findings of the analysis of the available data from 15 countries and territories and the literature review suggest that prevalence of psychological VAC by caregivers is high in ECA, but varies across countries and territories.

While comparable data on psychological aggression towards children is available for the region through the MICS, DHS and national surveys, the data do not cover the entire region and historical data are lacking, hampering trend analysis.

ICVAC Category 5: Neglect of a child

According to the ICVAC, neglect of a child is “the deliberate, unwanted and non-essential failure to meet a child’s physical or psychological needs, protect a child from danger, or obtain medical, educational or other services when those responsible for the child’s

care have the means, knowledge and access to services to do so”.¹⁶⁸ Sub-categories include “physical neglect, psychological neglect, neglect of a child’s physical or mental health, educational neglect of a child and abandonment of a child”, among others.¹⁶⁹

BOX 21

Rarely just one incident, child neglect tends to be chronic or episodic.¹⁷⁰ It can happen at any age – even before a child is born, such as through the misuse of alcohol and substances during pregnancy – and often coexists with other forms of violence. It can be rooted in poverty and inequalities or in disregard for children’s needs and well-being. Various signs can indicate that a child may be neglected, such as irregular school attendance, untreated medical or dental issues, or emotional detachment.

However, the complex nature of neglect means it can be more difficult to identify and often must reach

a crisis point before it is noticed and reported. Effective reporting relies on the awareness, knowledge and skills of people within local communities and public services that encounter the child.¹⁷¹

Long-term consequences of neglect can include mental health problems such as depression, post-traumatic stress disorder and panic disorders.¹⁷² In the UK, neglect is the only form of VAC (along with psychological violence) that has not decreased over the last decade. Yet neglect receives far less research and policy attention than other types of VAC.¹⁷³

Main findings

The analysis of indicators and data in the region on neglect reveals a critical gap in current and comparative administrative and survey-based data for ECA, and no set of reliable comparable data on neglect could be identified and analysed for this report.

The lack of comparable data may be linked to the lack of international standardized indicators for neglect.¹⁷⁴ Resource constraints also contribute to administrative data gaps: Identifying neglect requires resource-intensive, case-based investigations, yet in certain countries and territories in ECA, especially in Central Asia, the social service workforce and case management systems are still in development including the digitalization of child protection information management systems. This makes systematic detection, reporting and the production of national statistics a challenge.¹⁷⁵ Underreporting of neglect may also stem from national legal frameworks failing to explicitly include and define neglect as a type of VAC, or because

broad reporting categories – such as subsuming neglect under “psychological violence” – mask its true magnitude, as the results of the indicator analysis confirmed. Social norms may also play a role, as certain behaviours that constitute neglect under international standards may be considered private family issue, or overlooked within extended kinship care traditions, further contributing to underreporting.¹⁷⁶

There are some data on neglect in the region, as indicated by the studies on neglect listed on WHO’s child maltreatment website.¹⁷⁷ Many of these surveys are outdated and have limitations, such as primarily focusing on the nature of neglect or frequency rather than severity. They also differ in methodologies and definitions used, impacting on data comparability. This includes the VACS that only measure specific components of neglect, such as food insecurity and whether the respondents were told they were loved by their parents or caregivers.¹⁷⁸ Despite the limitations, these surveys may serve as a starting point to improve data collection on neglect in the region.

Example 5:

In Northern Ireland, child neglect is the single largest cause of a child being placed on the country's child protection register.¹⁷⁹ Northern Ireland documents child neglect systematically and produces national statistics which are accessible to both policymakers and the public. Child protection statistics are published quarterly presenting information on the number of children on the register at the end of each quarter by age, gender, category of violence (including neglect as a separate category), legal status and duration on the register, as well as the number of child protection referrals received during each quarter by source of referral.

The quarterly statistics are brought together in an annual statistical report. A Quality Report for Child Order Statistical Publications 2021 describes how these official statistical publications comply with the pillars and principles (such as trustworthiness and quality) contained in the United Kingdom Code of Practice for Statistics.¹⁸⁰ The country also has a confidential child protection register listing all children in the locality who have been identified at a child protection conference as being at significant risk of harm.¹⁸¹ The data produced are clear, accessible and quality assured, and can be used to conduct trend analysis for relevant geographic areas and complement survey-based data.¹⁸²

Separate Category 10

Aggregated VAC indicators

Three aggregated VAC indicators were selected for analysis for this sub-category of Category 10:

1. Child victims of violence registered by child/social welfare authorities and services.
2. Child victims of violence registered by education authorities and services.
3. Bullying and cyber-bullying.

The first two are sourced from national administrative registers and the third from the HBSC 2021/22 survey.

Child victims of violence registered by selected authorities and services

Despite the limitation of aggregated indicators described earlier in this report, the regional TransMonEE network decided in 2019 to start collecting data for child victims of violence registered by child/social welfare, education and healthcare authorities and services, among other child protection data. These are useful for governments in monitoring VAC reported, identified and registered by authorities and services, the geographical distribution of cases to support service planning, the implementation of planned activities aimed at improving early identification, and the quality of child protection authorities' registration systems.¹⁸³ They also can enable the early identification of emerging trends, so that appropriate actions can be taken to explore and address issues in a timely manner.¹⁸⁴ Moreover, countries and territories with

case management information systems that collate administrative data on VAC from different sectors can track how well referral pathways are working, and identify gaps, needs, and trends within and across sectors.¹⁸⁵ A functioning national case management information system is an important element of coordinating and monitoring multi-sectoral actions on VAC.¹⁸⁶

What follows showcases disaggregated data on registered child victims of violence from administrative registers from two countries and territories, Albania and North Macedonia. While many more TransMonEE member NSOs are reporting data for the selected indicators, regional analysis is hampered by inconsistent reporting resulting in many gaps in data years, the lack of disaggregated data being collected by countries and territories, and comparability issues due to deviations from standard TransMonEE definitions.

BOX 22

In addition to collecting data on child victims of violence, the TransMonEE network is trying to close the gap in data in the region on child witnesses. However, data collection is even more challenging for this group of children and only three countries and territories (Armenia, Bosnia and Herzegovina and Kosovo) are currently reporting data on this indicator to TransMonEE.¹⁸⁷

The new EU-GBV includes an indicator on the percentage of "Women who have witnessed violence between parents during childhood, by type of perpetrator".¹⁸⁸ While the survey currently covers only EU countries and territories, the data produced will help close the data gap, which is critical considering the consequences of witnessing violence in childhood.¹⁸⁹

Main findings

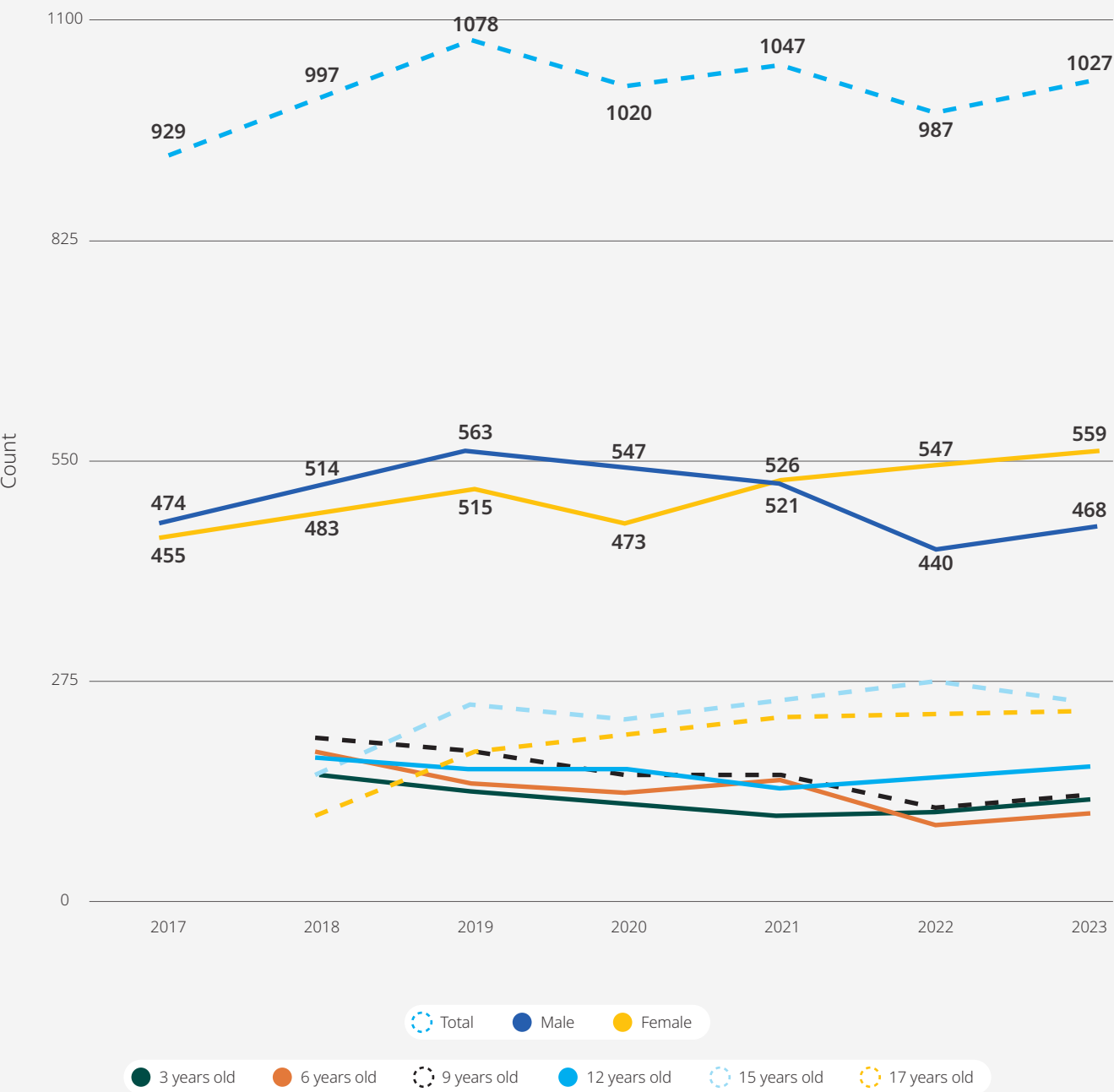
- The region's child victims of violence are not systematically registered and reported by authorities working in child protection, social welfare, health, education or justice.
- Disaggregated data on child victims of violence are particularly scarce, especially data on children at risk of social exclusion, such as child victims of violence with disabilities or living with HIV.¹⁹⁰
- The comparability of administrative data on VAC is hampered by inconsistencies among definitions of violence used by ECA countries and territories, differences in data collection

methods, issues related to data completeness and coverage, and the risk of 'double counting' due to the lack of interoperability of sectoral systems.

- Despite the usefulness of VAC administrative data, few countries and territories in the region work systematically on data improvement, have conducted comprehensive assessments of the quality of their administrative VAC data systems and have costed and budgeted actions necessary to effectively address issues identified.

Figures 18 and 19 showcase disaggregated data collected by Albania and North Macedonia for the first two selected aggregated indicators.¹⁹¹

Figure 18 **Number of child victims of violence aged 0 to 17 registered by child/social welfare authorities during the year in Albania from 2017 to 2023, by sex and age group**

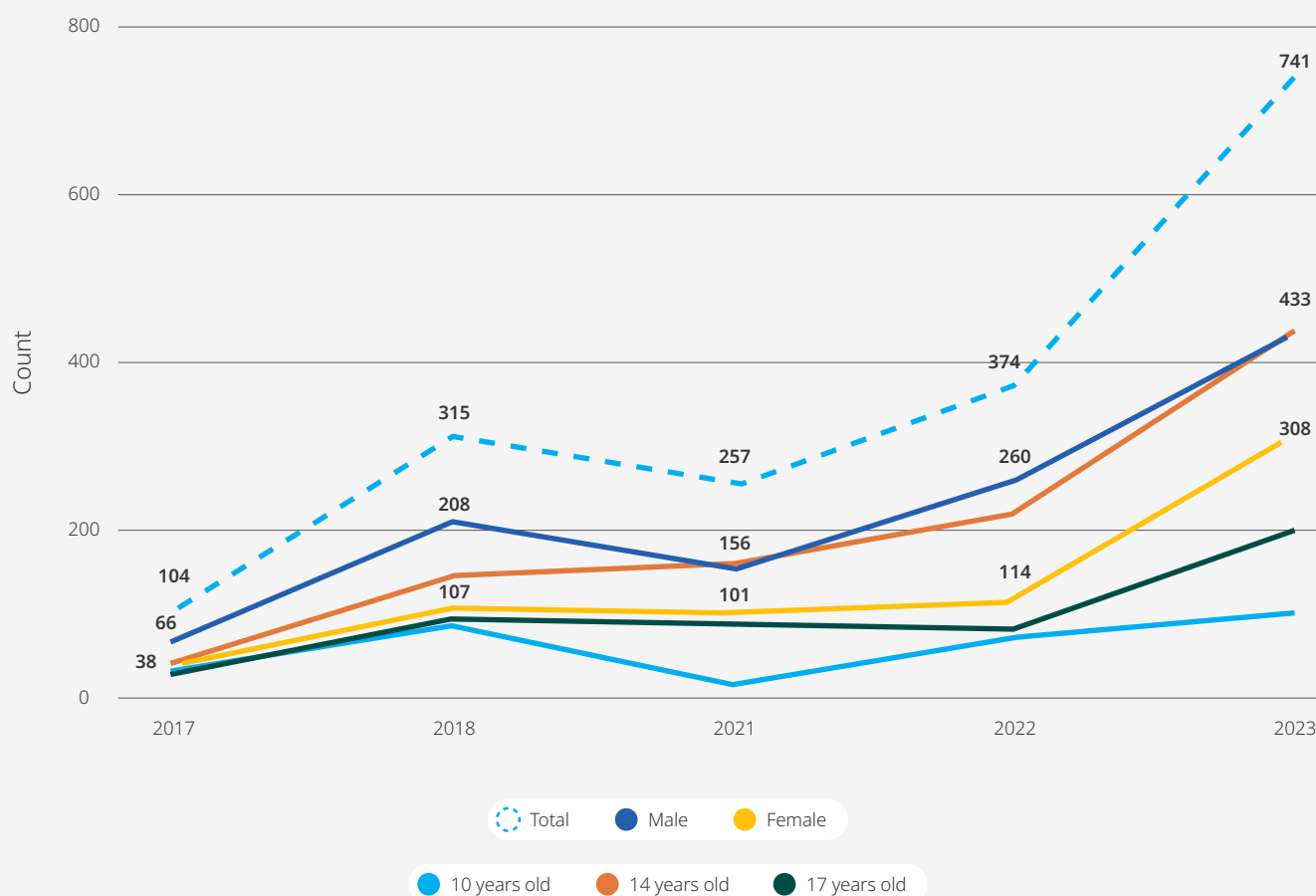


Source: TransMonEE database 2025

Figure 18 shows that, between 2017 and 2023, there has been an increase in the number of children registered by local child protection units in Albania. These units are mandated by law to manage cases of children who are at risk of or have experienced violence including those identified by the health and education sector and referred to these units. The sex disaggregated data for 2017 to 2023 indicate that in 2021 there has been a cross-over in the number of male and female child victims of violence

aged 0 to 17 – from a higher number of male victims registered in the system before 2021 to a higher number of female victims registered starting from the same year. Understanding the causes requires further investigation. The age disaggregated data for Albania suggest that since 2019, most child victims of violence registered by the child protection units were aged 15 and 17, and that there was a considerable increase in the number of child victims aged 15 and 17 from 2018 to 2023.¹⁹²

Figure 19 **Number of child victims of violence aged 0 to 17 registered by education authorities during the year in North Macedonia from 2017 to 2023, by sex and age group**



Source: TransMonEE 2025 Database

In 2023, North Macedonia had more than six times the number of child victims of violence registered by education authorities than in 2017. This finding may reflect an increase in VAC or changes made to the violence registration and data collection system of the education sector and/or other reasons. The findings reveal more male child victims of violence reported by the education sector compared with females (1,123 boys versus 668 girls). There are also notable differences among the three age groups. Most child victims registered by education authorities in 2023 were 14 years old. The trend data indicate that this has not changed since 2017.

Conclusions

Comparable and disaggregated data from administrative records on child victims and child witnesses of violence are scarce in ECA, despite the details and timeliness that these data can offer.

The potential of administrative data to help child victims and witnesses of violence, including with their access to services and systems, hinges on the quality of registration and data systems. Recent UNICEF-supported efforts to strengthen these systems show that few countries and territories in ECA are working systematically on improving their VAC administrative data systems or have costed and budgeted the actions needed to address identified deficiencies. At the same time, barriers that authorities and services face when it comes to data collection on children must be acknowledged. These include, for example, legal restrictions and ethical concerns about data collection and the production and dissemination of statistics on children rendered vulnerable by their circumstances (e.g., some countries and territories in the region prohibit the collection of data on ethnicity or disability status), limited resources and capacity for data collection, management and reporting among service providers and authorities, to name just a few.¹⁹³

Example 6:

UNICEF and the TransMonEE network are working together on improving administrative child protection data across the region which has resulted, for example, in the increased availability, quality and comparability of alternative care data in selected countries and territories.¹⁹⁴ The network's efforts are linked to other regional and global initiatives, such as the work under the umbrella of the Conference of European Statisticians, which is producing strategic and methodological guidance for statistics on children including VAC.¹⁹⁵ UNICEF and partners work at the global level on statistical classifications, and on producing guidance and tools for countries and territories to strengthen administrative data systems.¹⁹⁶

Example 7:

Primero is an open-source information management system developed by UNICEF

to support case management and incident monitoring in protection sectors, including child protection, GBV, and family tracing and reunification. It can be used in humanitarian and development contexts. It provides intuitive digital forms and clear workflows to assist with documenting case management processes, from identification and registration, to assessment, case planning, referrals and transfers, and case closure. With strong supervision features, notifications, and tasking tools, Primero is a complete digital case management solution complying with the highest data protection and ethical standards. When it comes to incident reporting, Primero allows users to document events and incidents, as well as risk factors, link individual survivors of violence to the services they need, and monitor the implementation of prevention measures to mitigate future risks. Powerful reporting, analysis and new visualization tools ensure that data is actionable. Primero implementations are currently live in Italy, Hungary, Republic of Moldova, Romania and Ukraine.¹⁹⁷

Bullying including cyber-bullying

Bullying can include different acts of violence: “physical bullying” (ICVAC Level 1 Category 2, Sub-category 202: “Minor assault against a child”), “sexual bullying” (ICVAC Level 1 Category 3, Sub-category 303: “Non-contact sexual violence against a child”), and “psychological bullying of a child” (ICVAC Level 1 Category 4, Sub-category 402: “Harassing, spurning and humiliating a child”).¹⁹⁸

The following indicators were selected for the analysis of data on bullying in ECA: the percentage of children reporting that (a) they had bullied others at least two or three times a month in the past couple of months and/or (b) cyber-bullied others, (c) they were being bullied at least two or three times a month in the past couple of months and/or (d) cyber-bullied, or (e) they were involved in physical fights at least three times in the past 12 months. The source of the data is the 2021/2022 HBSC survey, which is collecting comparable data from children attending school aged 11, 13 and 15.¹⁹⁹

BOX 23

In 2024, the World Health Organization Regional Office for Europe (WHO Europe) published a regional analytical report using data from the 2021/2022 HBSC survey conducted in countries and territories in Europe, Central Asia and Canada, which focuses on adolescent peer violence and bullying.²⁰⁰ The data were reanalysed, exclusively focusing on countries and territories in ECA for this report.

Bullying can occur at school, in other community settings and online, but available data suggest that bullying by schoolmates is the most common form.²⁰¹ It is a pattern of behaviour, rather than an isolated incident. Cyberbullying includes the use of digital technologies, such as social media, messaging and gaming platforms, and mobile phones.²⁰² All forms of bullying can impact children's development, participation, learning, relationships and inclusion.²⁰³ Effective monitoring of bullying, including cyberbullying, is essential for gauging

its prevalence and informing policies to create safer, more supportive environments for children. Because bullying can be a sensitive issue for children, families and professionals, systems must empower victims and caregivers to report incidents confidently, ensure reports are taken seriously, and apply a consistent, transparent response protocol.²⁰⁴ Service providers and local authorities must accurately record all bullying reports and routinely aggregate and analyse the data to inform decision-making.

Main findings

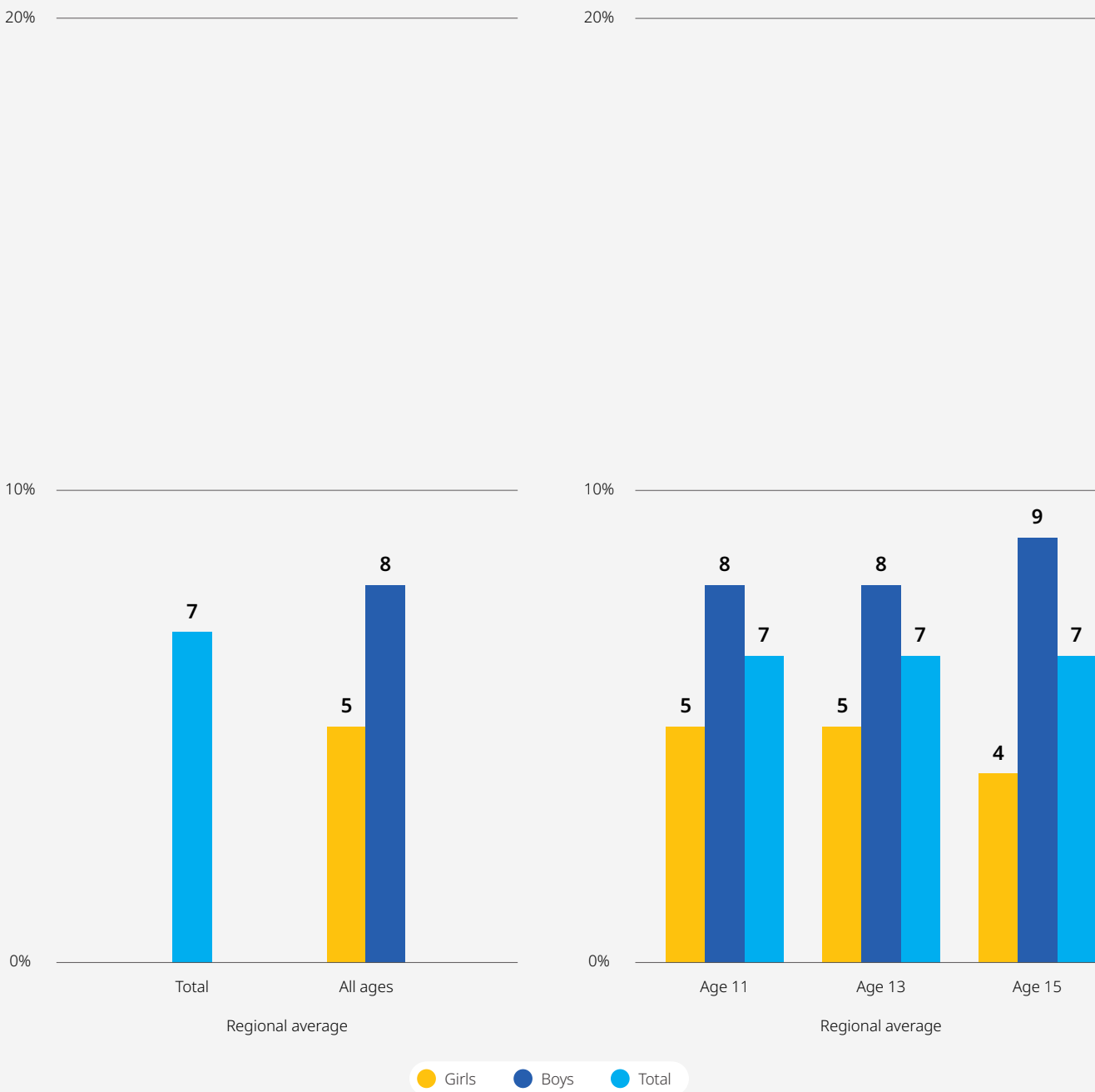
- ECA countries and territories differ substantially in prevalence of bullying, physical fighting and cyberbullying.
- On average in 2021/22, around 7 per cent of children bullied others, around 11 per cent of children were bullied, around 10 per cent engaged in physical fights, about 12 per cent reported cyberbullying others, and around 15 per cent were cyberbullied.
- There have been no significant changes since 2014 in the prevalence of bullying others, being bullied or physical fights. Temporal trend analysis of HBSC data is not yet possible for cyberbullying due to limited data.
- Sex and age differences exist and are considerable in some countries and territories and across countries and territories.
- Boys are more likely to bully and cyberbully others than are girls in the region.
- There are age-specific variations in being bullied in the region, which is higher for boys aged 11 and 15 than girls of the same age. For age 13, it is higher for girls than boys.
- A greater proportion of girls were cyberbullied in many countries and territories in ECA than boys, though not consistently across all countries and territories in the region.
- The levels of physical fighting are consistently higher among boys than girls in the region. Data suggest that prevalence decreases with age.

Bullying: Bullying others

Data were collected by asking children aged 11, 13 and 15 in the HBSC 2021/2022 survey how often they bullied other children in the past couple of months. Results presented in Figure 20 show that on average across the 42 countries and territories, around 7 per cent of children in ECA reported having bullied others at least two or three times a month in the past couple of months.²⁰⁵ Across ECA, the prevalence of bullying others ranged between 1 and 24 per cent. Boys were the main perpetrators (8 per

cent boys compared with 5 per cent girls) – independent of their age. The analysis by country shows that there are large differences between the sexes in some countries and territories. For example, Bulgaria reported that 9 per cent of girls versus 24 per cent of boys were perpetrators at age 15. According to the findings of the 2024 WHO Europe HBSC report, there was a small downtick in the prevalence of male perpetrators between 2014 and 2018. The prevalence of female and male perpetrators aged 11, 13 and 15 remained stable since 2014.²⁰⁶ Clear age-related patterns could not be observed.

Figure 20 **Average percentage of children in Europe and Central Asia who bullied others at least two to three times a month in the past couple of months, by sex and age**



Source: HBSC Data, HBSC 2021/22 survey

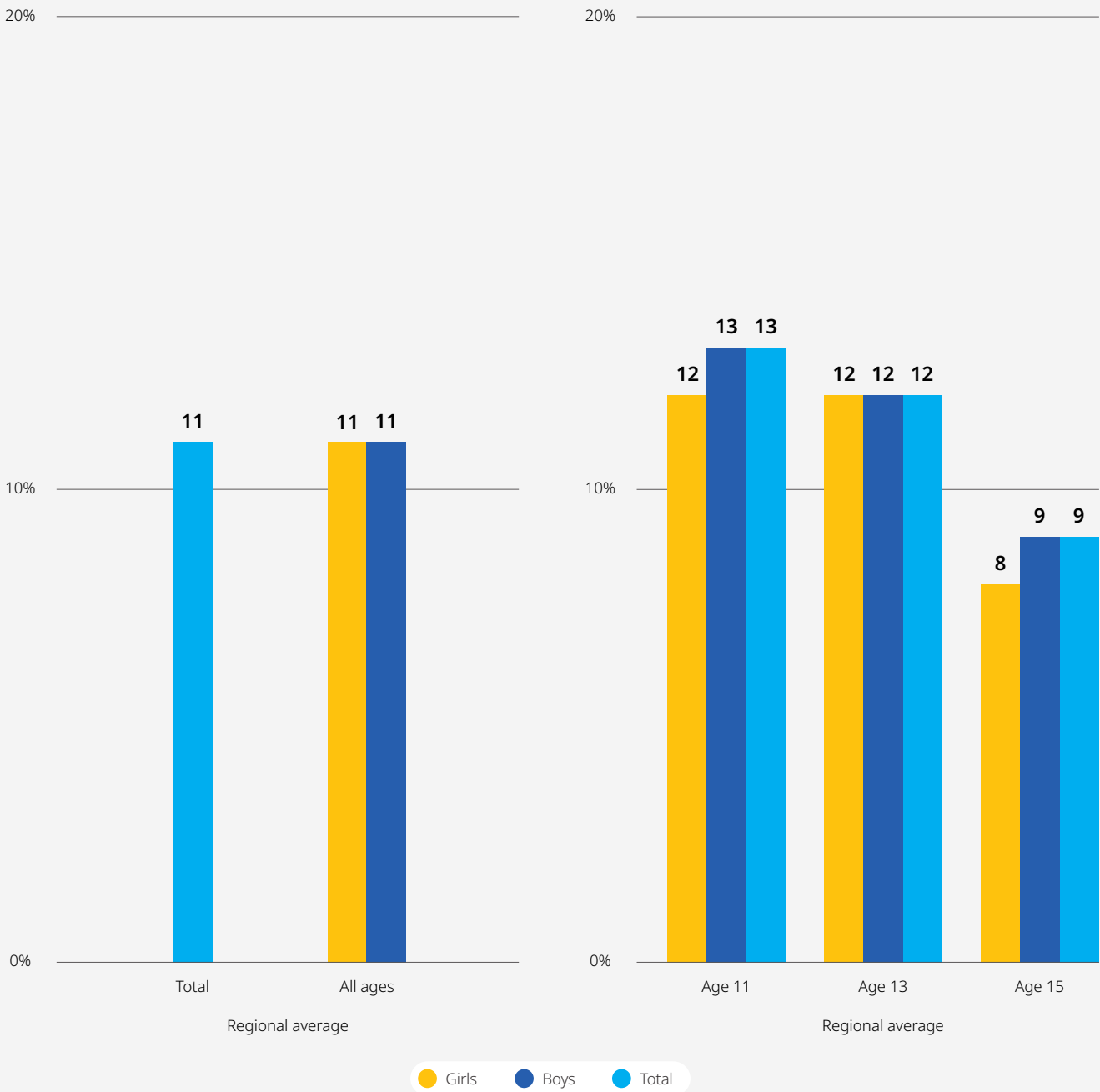
Bullying: Being bullied

On average, 11 per cent of the surveyed children in 42 countries and territories in ECA reported experiencing bullying at least two or three times a month in the past couple of months (Figure 21).

Reported prevalence varies considerably across ECA, ranging from as low as 2 per cent to as high as 34 per cent. The data suggest a lower prevalence of being bullied among children

aged 15 compared with children aged 11 and 13. The 2024 WHO HBSC report indicates the average prevalence of experiencing bullying has been stable from 2014 to 2022, though the report notes a slight increase in younger girls being bullied since 2018.²⁰⁷

Figure 21 **Average percentage of children in Europe and Central Asia who were bullied at least two to three times a month in the past couple of months, by sex and age**

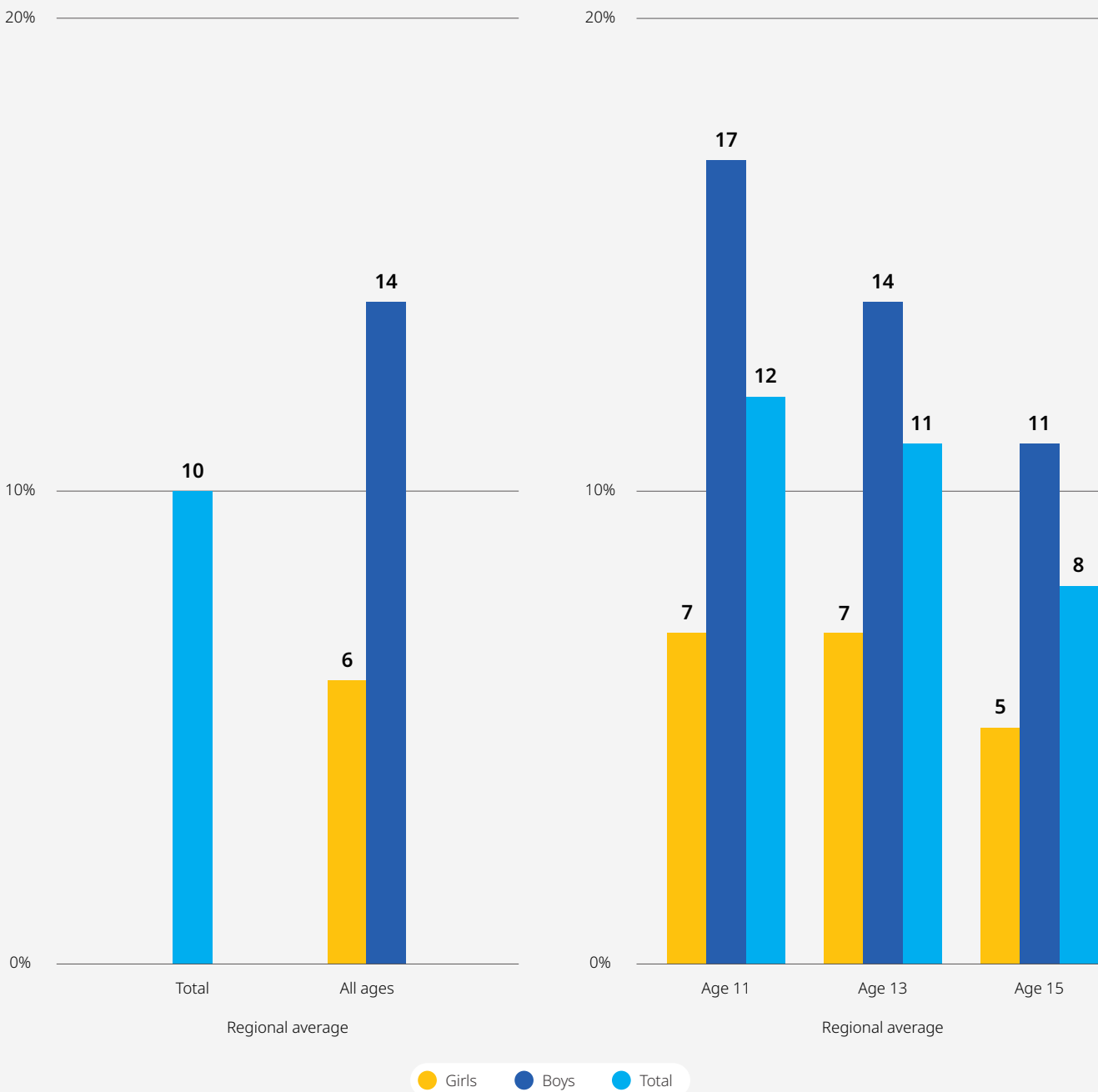


Physical fights

Consistent with the data presented in Figure 22, 10 per cent of children on average have been involved in a physical fight at least three times in the past 12 months in 43 countries and territories in the region. WHO Europe’s 2024 HBSC report found the prevalence has been stable since 2014.²⁰⁸ As is the case for bullying, the reported prevalence varies greatly across countries and territories in ECA from as low as 1 per cent to as high as 35 per cent.

Boys reported higher engagement in physical fights than girls in the region – an average of 14 per cent as compared with 6 per cent. The findings of the analysis further suggest that the prevalence of physical fighting is highest among children aged 11 across all countries and territories and decreases with age.

Figure 22 **Average percentage of children in Europe and Central Asia who were engaged in a physical fight at least three times in the past 12 months, by sex and age**

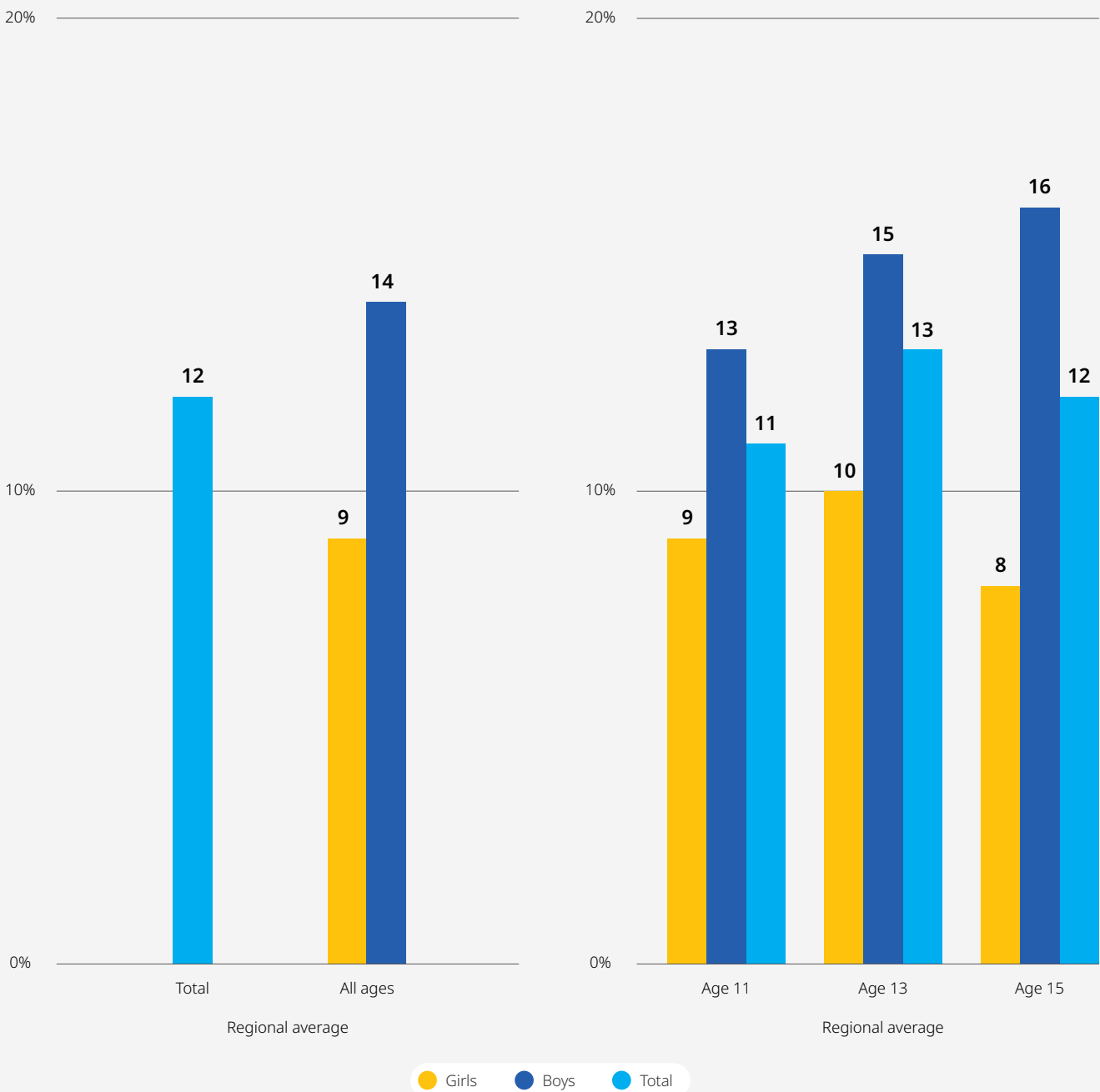


Cyberbullying: Bullying others

On average, the prevalence of cyber bullying others at least once or twice in the past couple of months is 12 per cent for children in 42 countries and territories in ECA (Figure 23). The highest average prevalence of cyberbullying others recorded in the region was around 40 per cent and the lowest 2 per cent. As there were only two HBSC survey cycles for cyberbullying (2018 and 2022), a temporal trend could not be established.²⁰⁹

The main perpetrators of cyberbullying others were boys, in almost all countries and territories and across all age groups. There is no clear age-related pattern for either sex.

Figure 23 **Average percentage of children in Europe and Central Asia who cyberbullied others at least once or twice in the past couple of months, by sex and age**



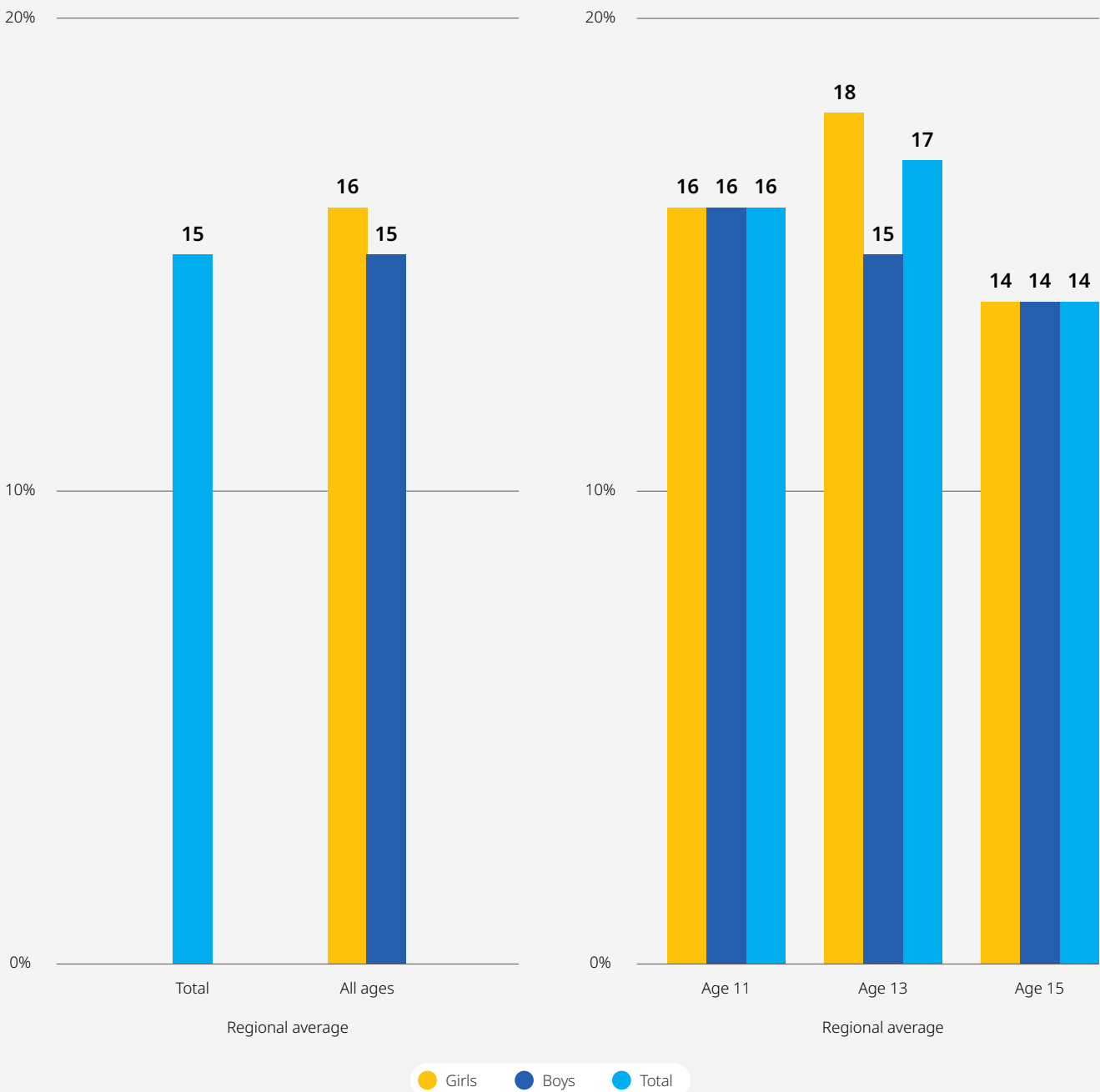
Cyberbullying: Being bullied

The regional average percentage of children who reported being cyberbullied at least once or twice in the past couple of months was 15 per cent in the 42 countries and territories in ECA (Figure 24). The average prevalence ranged across countries and territories from 33 per cent (highest) to 3 per cent (lowest). Similar to cyberbullying others, a temporal trend could not be established for the indicator on cyberbullying victimization, because data is only

available from two HBSC survey cycles (2018 and 2022).

Differences in prevalence by age and sex were observed across countries and territories. In many countries and territories, more girls reported that they were cyberbullied than boys though not consistently across all countries and territories.²¹⁰ Across countries and territories age differences across ages were substantial.²¹¹

Figure 24 **Average percentage of children in Europe and Central Asia who were cyberbullied at least once or twice in the past couple of months, by sex and age**



Conclusions

Bullying, physical fighting and cyberbullying are prevalent in all ECA countries and territories. Variations in prevalence between countries and territories exist, as well as differences in prevalence by sex and age. Boys are the main perpetrators for bullying and cyberbullying others and are also more engaged in physical fighting than girls.

The 2021/2022 HBSC survey – a standardized, international representative school-based survey – provides comparable data for over 40 countries and territories in ECA. As such, it offers a tool for monitoring and reporting on the selected indicators on (cyber-) bullying and physical fighting and provides starting points for countries and territories to

identify needs and risk patterns, and inform prevention and response measures in schools.

While most studies across the world on the prevalence of cyberbullying have been conducted using school samples given ease of access and to inform school-based prevention programmes, there is a growing body of evidence on technology-facilitated VAC using population-based surveys which enable the collection of a greater quantity of more consistent information to inform prevention and response programmes for the target population.²¹² A recent systematic review and meta-analysis of cyberbullying and associated factors in countries and territories in the EU using data from such representative population samples suggest that cyberbullying's prevalence has increased in the last 10 to 15 years.²¹³

BOX 26

Technology-facilitated violence against children

Information and communication technologies can both facilitate violence against children and provide platforms where such violence occurs.²¹⁴ Given the rapidly changing technological environment and the rapid growth of access to the internet and digital technologies, more children are facing ever-evolving new risks of violence.²¹⁵ Governments in ECA have started to invest in generating evidence to inform an effective national response using standardized international research tools.²¹⁶ These tools include the Global Kids Online research toolkit, which has been used in five ECA countries and territories to date and helps countries and territories collect evidence on children's online rights, opportunities and risks.²¹⁷

Global Kids Online is affiliated with the EU Kids Online network and with the Disrupting Harm research network. The EU Kids Online network has conducted several comparative surveys in EU countries and territories since 2006 (first wave) on children and online risks and opportunities.²¹⁸ Launched in 2019, the Disrupting Harm project, funded by Safe Online and jointly implemented by UNICEF Innocenti, ECPAT International and Interpol, aims to generate high quality evidence on sexual exploitation and abuse of children to inform child protection legislative and policy changes and national-level interventions. Studies have been completed in 25 countries and territories across six regions, including four countries and territories in ECA.²¹⁹ A regional analytical report is forthcoming.

Composite phenomena

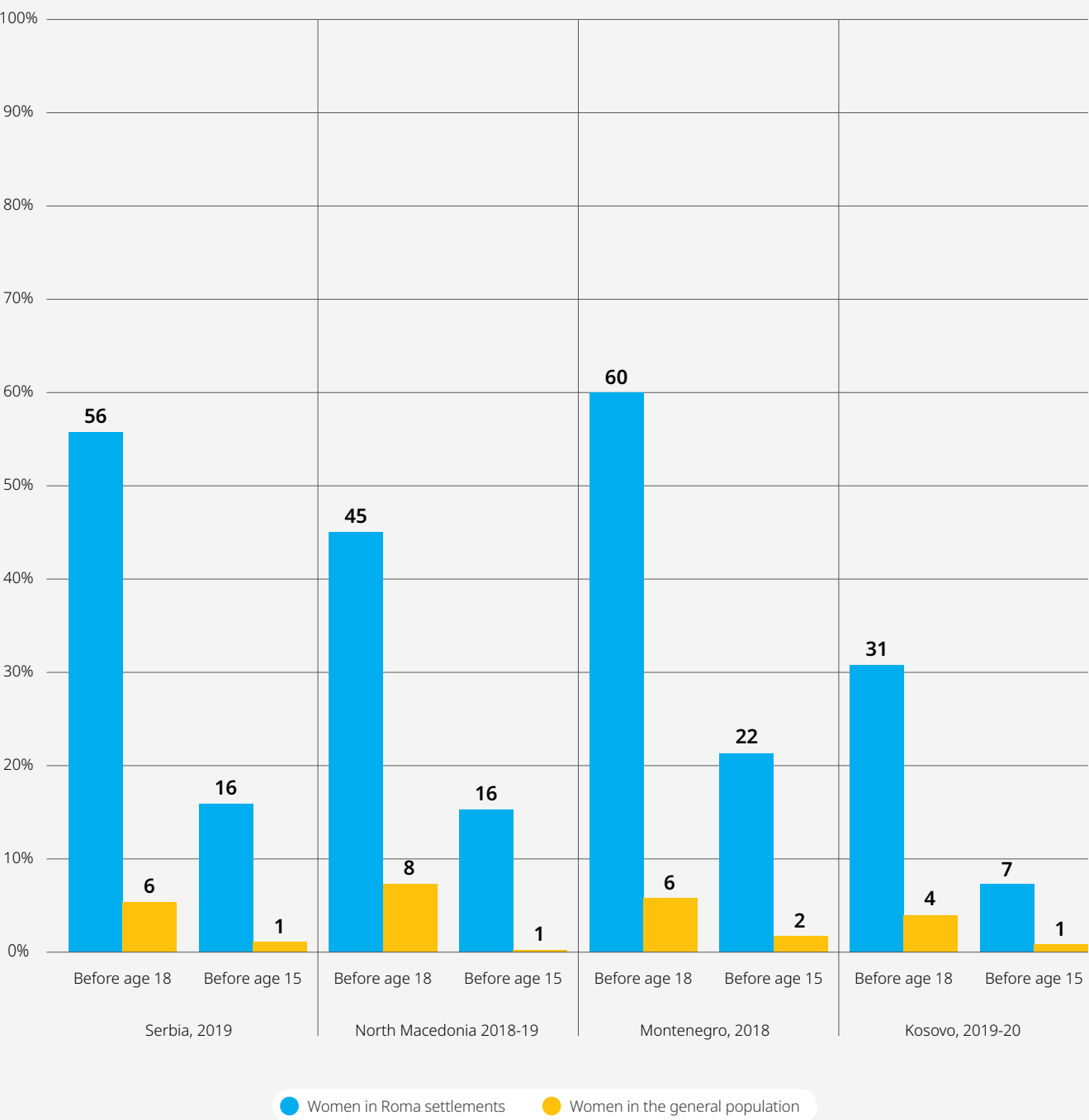
Recently, three major global analytical reports were released on three “composite phenomena”, which are included in the SDG framework: “child marriage”, “child labour”, and “trafficking of persons” (including child trafficking). To avoid duplication, this report summarizes key findings given that these are commonly used VAC indicators in the region.

Child marriage

UNICEF has recently updated global and regional estimates on child marriage and published an analytical report on this topic. Based on findings from this report, Eastern ECA has the lowest rates of child marriage globally.²²⁰ However, approximately 20 million girls in Eastern ECA were married or in union before age 18.²²¹ Between 1997 and 2022, the number of child marriages

has declined globally. The number of child marriages has been stagnant for Eastern ECA and data suggest that particularly girls from poor families are at increased risk of child marriage – a risk that evidence shows increases during humanitarian crisis.²²² As the report does not specifically focus on child marriage in Roma settlements, Figure 25 compares child marriage in the general population and in Roma settlements for selected ECA countries and territories based on latest MICS data.

Figure 25 **Percentage of women aged 20 to 24 who were married before age 15/18**



Source: HBSC 2021/22 survey

The rate of child marriages is high in Roma settlements. The largest proportion are in Montenegro (MICS 2018), with 60 per cent of women in settlements married or in union before age 18 and 22 per cent before age 15, compared with 6 per cent of women in the general population married before age 18 and 2 per cent before age 15 (Figure 25).

Child labour

The International Labour Organization (ILO) and UNICEF have recently updated the global and regional estimates of child labour for their latest report.²²⁷

Findings from this report show approximately 3 per cent of children in ECA aged 5 to 17 are involved in child labour (about 4.9 million), and 1 per cent are doing hazardous work (about 2.1 million).²²⁸ However, prevalence of child labour in ECA is among the lowest in the world with only North America (less than 1 per cent) and South Asia (around 3 per cent) reporting lower percentages. Hazardous work in ECA is the second lowest with around 1 per cent, after North America (less than 1 per cent). The region has benefited from recent progress against child labour, which is linked to the downward trend in the child populations in many of the countries and territories in the region. Trend data on child labour suggest a decrease from around 6 per cent of children aged 5 to 17 years in child labour in 2020 down to about 3 per cent in 2024, and for hazardous work, a decrease from around 6 per cent to about 1 per cent in the same period.²²⁹ Despite progress made, child labour remains a serious violation of children's rights and a major protection issue in countries and territories where it is prevalent.

BOX 25

According to the 2018 Türkiye Demographic and Health Survey (TDHS), almost 15 per cent of women aged 20-24 had married before age 18, while 2 per cent had married before age 15.²²³ This has not changed much since 2013.²²⁴ According to the 2018 TDHS Syrian Migrant sample, the proportion of women from Syria aged 20-24 married before age 18 was around 45 per cent, and about 9 per cent before age 15.²²⁵ Among the Roma population in Türkiye, prevalence of child marriage before age 18 among women aged 20-24 was around 48 per cent, and 9 per cent before age 15.²²⁶

Trafficking in children

According to UNODC's 2024 report, the number of child victims of human trafficking globally increased by 31 per cent between 2019 and 2022. The highest increase was recorded for girls (38 per cent). In both Central and South-Eastern Europe and Eastern ECA, the prevalence of girls being trafficked is increasing, with the majority trafficked for sexual exploitation. In Western and Southern Europe there was also an increase in the number of trafficked boys who were primarily trafficked for forced labour and other forms of exploitation (e.g., forced criminality). This was detected in areas with increasing numbers of unaccompanied and separated children, especially at the borders of Europe.²³⁰ More details can be found in the report.²³¹

Violence against children in humanitarian settings

This report stresses the applicability of the ICVAC in humanitarian contexts and highlights the increased risk of VAC in emergencies (VACiE) including the intersections with GBV in emergencies. A robust GBV information management system (GBVIMS) was launched in 2006 and has been implemented in more than 20 countries and territories over the past decade to inform the humanitarian response to GBV.²³² VAC in humanitarian settings goes beyond the scope of this report. Therefore, UNICEF commissioned a rapid review of data and evidence on VAC in humanitarian settings in 2025.²³³ The objectives were to identify and analyse risks and protective factors related to VACiE, using the ICVAC as a guiding framework; compare how these factors differ between emergency and non-emergency contexts; examine how emergencies shape trends in VAC (e.g., changes in types of violence or affected child populations) and intersect with GBV; and explore how data have been and should be used to inform programming. The VACiE review complements this analytical report and is forthcoming.²³⁴

“Humanitarian crises driven by conflict, fragility, climate change, and forced displacement

are becoming more frequent, complex, and prolonged, exposing children to significant risks of exploitation, abuse, and neglect,” according to The Alliance for Child Protection in Humanitarian Action. “One in five children worldwide lives in or is fleeing conflict, with millions more uprooted by climate disasters or forced to migrate through dangerous routes.” Children affected by such crises face highly escalated risks of violence, including gender-based violence (GBV). Across ECA, the COVID-19 pandemic and related restrictions, lockdowns and school closures further increased risks of violence against children. Meanwhile, in Ukraine, the full-scale war since 2022 has caused mass displacement, widespread distress, and fractured child protection systems. In Türkiye, hosting over 3 million refugees and recovering from the 2023 earthquakes has created a protracted emergency with shifting risks for vulnerable children. In Italy, continued arrivals of refugees and migrants through the Central Mediterranean and Balkan routes have raised protection concerns, particularly for unaccompanied and separated children. Across contexts, the breakdown of protective environments and reduced access to services heighten children’s exposure to multiple, intersecting forms of violence.²³

Recommendations

The call for high-quality data on VAC disaggregated by sex and age is not new, as outlined in the introduction to this report.²³⁶ Almost two decades later – and despite efforts by many countries, territories, organizations and regional bodies to improve VAC data and the underlying data systems in ECA – substantial issues persist related to availability, accessibility, comparability, disaggregation and quality of VAC data. Those must be addressed, as only data can tell where countries and territories stand in terms of their progress against VAC, as well as where to allocate budget, services and other resources to have the biggest impact.

What follows summarizes existing recommendations on VAC data improvement from international guidance relevant for the region, unpacks these in the context of the findings of this report, and highlights the policy changes required and supported by the available data and evidence for ECA.

The recommendations should be considered in light of each country's capacities, resources, priorities and data needs, as well as any pledge made at the first global Ministerial Conference on ending VAC in Bogotá.²³⁷ The addressees for these recommendations are governments and their partners.

Bridge the VAC data gap in ECA and jointly address common challenges

As highlighted in the introduction to this report, the Committee on the Rights of the Child has issued more than 50 recommendations to 35 countries and territories in the region on improving VAC data and evidence generation since 2013. An analysis of these recommendations and the findings of this report reveal common challenges across countries and territories in ECA, including common data gaps and the need for better coordinated, harmonized and comprehensive collection and management of data on all forms of VAC in all settings where VAC occurs from administrative records and surveys, and – where relevant – from other sources (e.g., helplines, ombudspersons). There is also a noticeable geographic divide in the availability of VAC data and the maturity of national VAC monitoring and data systems, as highlighted in this report. UNICEF therefore encourages governments in collaboration with their partners to work together to:

Recommendation 1

Support and invest in country-specific and (sub-) regional initiatives to improve VAC data and information management systems

Countries and territories may want to use this report and the interactive dashboard of the most recent recommendations of the Committee on the Rights of the Child on VAC data and evidence generation to identify other countries and territories in the region facing similar challenges and discuss collaboration to entering strategic data partnerships, pool resources (where feasible), and build a strong investment case for improving VAC data.²³⁸ Dedicated and sustainable budget allocations for building strong VAC monitoring systems are needed including solid accountability frameworks to ensure regular monitoring of progress and use of funds.

Recommendation 2

Use the ICVAC, existing guidance on VAC statistics, and the results and lessons learned from former and ongoing data improvement initiatives and projects in the efforts to improve VAC data and information management systems.²³⁹

The 2022 Guidance on Statistics on Children includes several recommendations to improve the availability, quality and comparability of VAC indicators and data.²⁴⁰ Countries and territories can use them as a checklist if they want to invest in better VAC data and **build a comprehensive and cross-sectoral national VAC data collection and monitoring system**. Such a system requires, according to the 2022 Guidance:

- **"A mandated and adequately resourced mechanism or designated body for national coordination** to ensure a holistic and cross-sectoral approach and long-term planning for systematic data collection, analysis, interpretation, use, and dissemination."
- **"A mandate and adequate resources for data management and quality assurance** for the producers of national statistics on VAC (usually national statistical offices and line ministries)."
- **"Investments of resources** by national governments and their partners into the implementation of **periodic surveys** on VAC

(different forms, risk and protective factors, and consequences of VAC) or the integration of modules on VAC into multi-topic surveys, and in **strengthening administrative data systems** on VAC, which may include making these systems interoperable with other administrative data systems (depending on system maturity)."

- **"Identification of national indicators to monitor all forms of VAC** (with the relevant SDG indicators as a starting point) and **develop plans for the systematic collection and compilation, analysis, and dissemination of quality disaggregated data,** using internationally available and recommended data collection tools and statistical classifications and **rigorous methodological and ethical standards and protocols** to produce internationally comparable indicators."

In addition, countries and territories may want to:

Stay informed about the ongoing work of UNICEF to support the implementation of the ICVAC and of the Steering group on statistics on children, which is in the process of developing a recommendation for specific VAC indicators that build on the SDG VAC indicators and extend to countries and territories with more advanced data collection systems.²⁴¹

Engage and contribute to expert discussions and meetings, such as to the upcoming 2026 UNECE/ UNICEF Expert meeting on statistics on children, with questions, country experience, good practices and lessons learned. Consider joining the TransMonEE network, contributing child protection data to the TransMonEE database on an annual basis, and engaging in the next review of TransMonEE's child protection indicators and metadata aimed at updating and aligning them with the latest statistical guidance and classifications, such as the ICVAC, and changing the indicator set, as needed.

Monitor and report on progress made in implementing pledges made at Bogotá to improve VAC data collection and monitoring, and request support, if needed, from the organizations which have pledged to support countries and territories in this area, including UNICEF.²⁴²

Recommendation 3

Before investing in further data collection or investing resources to strengthen data systems, conduct a review and assessment of the VAC data landscape and ecosystem in the country to better understand what is available, missing, working (or not),

and what can realistically be changed and improved considering the country's capacities, resources, data needs and priorities. The focus of such reviews and assessments is generally on relevant national/ sectoral monitoring frameworks and plans (if available), indicator sets and metadata, data governance and management systems including data management capacity, data partnerships and data flow processes, roles and responsibilities, and systems for data quality management, and how the system and mechanisms work in practice (e.g., whether data is complete and collected in line with agreed standards and methodologies) and whether data is used to inform decision-making (looking particularly at data visualization and dissemination, including processes and partnerships that help translate the data into knowledge and capacities of data users).²⁴³

In the planning of the review and assessment – considering the findings of this report – pay particular attention to:

- the level of **harmonization of processes for collection and compilation of administrative data** on VAC from different sectors and sources including definitions and data collection methods used to increase comparability, and the feasibility to harmonize the data with the ICVAC;
- the **feasibility to harmonize disaggregation variables** across sectors (e.g., definitions of perpetrators and disability status), align them with the ICVAC, and include additional disaggregation variables into existing data sources (e.g., during the planning and design phase of relevant national surveys or a comprehensive review of administrative data quality) including variables to capture specific sub-sets of the child population who have an increased risk of VAC;²⁴⁴
- the quality and level of **digitalization and interoperability of VAC case management information systems** using good practices as a benchmark;²⁴⁵
- the feasibility to **harmonize existing survey questions and categories used to record acts of VAC with the ICVAC;**
- the level and feasibility of integration of national monitoring systems and the survey methods on **VAC and VAW;**²⁴⁶
- mapping and matching existing national statistical definitions with the ICVAC and identifying implementation gaps and needs as a first step

in the **integration of the ICVAC into the national statistical system**,²⁴⁷

- the level of meaningful **child participation** in the development and strengthening of VAC monitoring systems and throughout the entire data lifecycle – from identifying relevant indicators to designing data collection methods and interpreting results;²⁴⁸
- **emerging priorities and specific settings in which VAC occurs**, as outlined in this report, such as technology-facilitated VAC, bullying (including cyber-bullying), VAC in residential alternative care facilities and other institutions for children, and VAC in emergencies; and
- **feedback loops**, so that VAC data is fed back systematically into VAC prevention and response systems, creating feedback loops between data providers (e.g., governmental and non-governmental services and the children from whom data is collected), data managers (e.g., statistical units of ministries, NSOs) and data users (e.g., governments and their partners, research institutions). This helps ensure that evidence informs policies and practice.

Recommendation 4

Make the necessary policy changes. While it is vital to improve VAC monitoring and data collection to know where one stands in terms of progress against VAC and where to allocate budget, services and other resources to make the biggest impact, governments and stakeholders need to take other critical steps to make a difference. Banning all types of VAC, including corporal punishment, is one of them. Other national, regional and local commitments to protect children also are key. At the same time, the evidence is clear: Unless ending VAC is prioritized across sectors, services and budgets, even the most well-intentioned policies and promises will fall far short of protecting children. All too often, implementation of evidence-based VAC prevention and response measures is too slow to help the children who need protection now. To make an impact, they must be scaled quickly.

Above all, every level of society, from the professionals who regularly come into contact with children to the caregivers who raise/educate them, must be aware of not just what constitutes VAC, but of its short- and long-term impacts, and gender dynamics – and of how to spot it when it happens, provide adequate support, and prevent it before it occurs.

Governments and other key stakeholders must therefore:

Ensure a protective environment for all children

- Invest in quality parenting and family support interventions and services and ensure that they are readily available for all parents and caregivers, and promote gender equality.
- Ensure schools are safe and inclusive spaces where children feel safe to learn and express themselves, free from violence by peers and teachers, by implementing whole-school approaches to prevent peer violence and bullying, build socio-emotional skills, and provide effective referral and response mechanisms.
- Integrate online risks into violence prevention strategies, and ensure that children's rights are placed at the forefront of digital governance. This includes updating legislation, regulating tech companies and online platforms, and reforming child protection systems for the digital age.
- Support schools to build teacher and staff capacity through training so they can address sensitive issues, challenge harmful gender and social norms, and guide children to services.
- Provide specialized support for children who show harmful behaviours, including tailored psychosocial interventions, restorative justice approaches, and age-appropriate, trauma-informed therapeutic support for children exhibiting harmful sexual behaviours.

Respond and prevent recurrence

- Invest in hiring and training an adequate number of social workers who can respond to the needs of children and families – including in sudden onset emergencies and in the context of migration and displacement – and equip the wider social service workforce with the skills, tools, attitudes and resources to prevent and respond to violence against children.
- Reform justice systems and services to ensure that they are child-sensitive, restorative and trauma-informed.
- Establish and strengthen multidisciplinary and interagency services (such as Barnahus-type models) to prevent re-traumatization and ensure coordinated support to child victims and witnesses.

- Establish clear, structured mechanisms for collaboration and coordination among child protection services, law enforcement, the judiciary and health services to ensure efficient case management and safeguard the child's best interests while balancing confidentiality and inter-agency collaboration and also promoting coordination with violence against women response mechanisms.
- Prioritize investments in early intervention and family support services, expand quality family- and community-based care alternatives, and set clear time-bound targets for deinstitutionalization.
- Safeguard the needs of children with disabilities, infants and young children, and those in migration and displacement contexts.

Leave no child behind

- Accelerate childcare reform to prevent family separation, end institutionalization, and ensure every child grows up in a safe and nurturing family environment – including in emergency responses.

Below: © UNICEF/UNI164589/Noorani

Mother Maqsuda*, 30, holds her 1-year-old son Jovaid as she looks out from a window in her home in Dushanbe, Tajikistan. December 2024.

*All names changed to protect privacy.



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Annexes

Annex 1: SDG goals, targets and indicators related to violence



“Goal 16. Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

Target 16.1: Significantly reduce all forms of violence and related death rates everywhere.

Indicator 16.1.2: Conflict-related deaths per 100,000 population, by sex, age and cause.

Indicator 16.1.3: Proportion of population subjected to (a) physical violence, (b) psychological violence and (c) sexual violence in the previous 12 months.

Indicator 16.1.4: Proportion of population that feel safe walking alone around the area they live after dark.

Target 16.2: End abuse, exploitation, trafficking and all forms of violence against and torture of children.

Indicator 16.2.1: Proportion of children aged 1–17 years who experienced any physical punishment and/or psychological aggression by caregivers in the past month.

Indicator 16.2.2: Number of victims of human trafficking per 100,000 population, by sex, age and form of exploitation.

Indicator 16.2.3: Proportion of young women and men aged 18–29 years who experienced sexual violence by age 18.

Target 16.3: Promote the rule of law at the national and international levels and ensure equal access to justice for all.

Indicator 16.3.1: Proportion of victims of (a) physical, (b) psychological and/or (c) sexual violence in the previous 12 months who reported their victimization to competent authorities or other officially recognized conflict resolution mechanisms.

Indicator 16.3.2: Unsentenced detainees as a proportion of overall prison population.

Indicator 16.3.3: Proportion of the population who have experienced a dispute in the past two years and who accessed a formal or informal dispute resolution mechanism, by type of mechanism.



Goal 5. Achieve gender equality and empower all women and girls.

Target 5.1: End all forms of discrimination against all women and girls everywhere.

Indicator 5.1.1: Whether or not legal frameworks are in place to promote, enforce and monitor equality and nondiscrimination on the basis of sex.

Target 5.2: Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation.

Indicator 5.2.1: Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age.

Indicator 5.2.2: Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence.

Target 5.3: Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation.

Indicator 5.3.1: Proportion of women aged 20–24 years who were married or in a union before age 15 and before age 18.

Indicator 5.3.2: Proportion of girls and women aged 15–49 years who have undergone female genital mutilation, by age.



Goal 4. Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all.

Target 4.a: Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all.

Indicator 4.a.2: Percentage of students experiencing bullying in the last 12 months in a) primary, and b) lower secondary education.

Indicator 4.a.3: Number of attacks on students, personnel, and institutions.”

Annex 2: The four-step approach to conducting a comprehensive VAC indicator and data analysis for ECA

Step 1: Mapping of indicators and data sources

The initial phase of the analysis involved a mapping of indicators and data sources available in the region including validation with UNICEF country offices of the indicators and sources identified. This was followed by an in-depth review of the results and a comprehensive desk review of VAC indicators and data sources in ECA, which yielded a repository of relevant national and supranational data sources and indicators on VAC prevalence and incidence. Indicators and data from globally recognized sources were prioritized to ensure data consistency and comparability, and NSO websites were consulted to identify country-specific indicators and data and ensure inclusion of national indicators and data where relevant (for more details on the primary and secondary sources used, see Annex 3). Each identified indicator was tagged against a list of parameters (see Annex 4) to standardize the data and provide a coherent framework for the subsequent analysis.

Step 2: Establishing principles for matching indicators with the ICVAC

The following principles were established for matching the mapped indicators with the ICVAC:

- **Using ICVAC Level 1 categories**

The mapped indicators were matched with ICVAC Level 1 categories (Category 1: Violent killing of a child, Category 2: Physical violence against a child, Category 3: Sexual violence against a child, Category 4: Psychological violence against a child, Category 5: Neglect of a child, and Category 9: Other acts of violence against a child not elsewhere classified). ICVAC Level 2 sub-categories of the six Level 1 categories could not be applied in the analysis, as too few of the indicators that matched Level 1 categories, could be tagged with Level 2 sub-categories. For instance, the indicator “Child victims of homicide” identified and included into the ECA repository of VAC indicators could be tagged to ICVAC Category 1: Violent killing of a child. However, as it is not disaggregated by any sub-category, it could not be tagged to any of the four ICVAC Level 2 sub-categories of Category 1 including Intentional homicide of a child, Attempted intentional homicide of a child, Non-intentional homicide of a child and Other acts leading to death of a child not elsewhere classified.

- **Handling of aggregated VAC indicators**

These are indicators aggregating individual-level data on different acts of VAC in different settings. For example, indicators capturing the “total number of child victims of VAC” or the “percentage of children aged 1 to 14 who experienced any physical punishment and/or psychological aggression by caregivers”. Most countries and territories reporting data on aggregated VAC indicators specify in the indicator definition the single violent acts that these indicators aggregate. However, the limited time available for the indicator analysis did not allow an in-depth review of the definitions of all aggregated indicators identified in the region and a breakdown of each aggregate indicator by individual violent act to tag them to the relevant ICVAC categories. Therefore, all aggregated VAC indicators identified and mapped for this analysis were subsumed under an additional Category 10 (which is not an ICVAC category) for the purpose of this analysis, as the single acts of VAC that occur as part of Category 10 are captured by the ICVAC.

- **Handling of indicators capturing various forms of VAC**

This includes, for example, indicators on “bullying”, such as “Percentage of 15-year-old students who report experiencing bullying at school at least a few times a month”, which can be reduced to single acts of VAC, although such acts can take various forms (i.e. physical, psychological and sexual violence). These indicators were also incorporated into the additional Category 10, as disaggregated data by type of violent act of bullying were not accessible for all such indicators that could be identified during the ECA indicator mapping process.

- **Handling of composite phenomena**

Many of the indicators used in the region that were identified through the mapping refer to “composite phenomena”, such as child labour, child marriage, and trafficking in children, which statistically cannot be reduced to a single violent act. Violent acts that occur as part of these phenomena are captured by the ICVAC (e.g., physical, psychological or sexual violence that married girls may experience at the hands of different perpetrators, such as their husband, or family members of their husband). To be able to include these indicators in the analysis, which intersect multiple ICVAC categories, and which are commonly used in the region, they were subsumed under the additional Category 10 as well.

- **Handling of VAC indicators specifying two or three acts of VAC**

Some of the mapped indicators specify two or three acts of VAC, such as “Percentage of children (aged 1-17 years) who experienced any physical punishment and/or psychological aggression by caregivers” (SDG 16.2.1). In this case, the disaggregated data by form of VAC were tagged to corresponding ICVAC Level 1 categories. In the case of SDG 16.2.1, for example, “physical punishment” was counted under ICVAC Level 1 Category 2 (Physical VAC) and “psychological aggression” under ICVAC Level 1 Category 4 (Psychological VAC).

Step 3: Criteria for indicator selection for analysis

Following the initial mapping and compilation of a repository of relevant VAC prevalence and incidence indicators for countries and territories in the region, indicators were selected for the regional data analysis using the following criteria:

- **Comparability**

Indicators and data were chosen depending on their comparability across countries and territories considering a variety of characteristics, such as statistical unit, disaggregation variables, and data collection methodology. In the case in which an indicator used by a country and included in the analysis was not fully comparable with the indicators under the same category used by other countries and territories, the limitations were documented to maintain the validity of the analysis and provide clarity on the potential constraints.

- **Coverage**

A critical mass of countries and territories should be covered by each indicator to ensure that the data are representative at the regional level. Where data coverage is rather low for indicators included into the analysis, the lack of data representativeness at the regional level is acknowledged in this report. In case an indicator or a source is highly informative but limited in geographic scope, the indicator or source was considered for inclusion as a case-study in the report.

- **Adherence to international principles and standards of data quality**

Indicators and data sourced from UN agencies and regional or national statistical offices should, in principle, adhere to international and/or national data quality principles and standards, e.g., be based on robust and validated data collection and reporting methodologies and procedures including

sound data quality assurance systems. The analysis relied on this given its scope and time limits.

- **Consideration of well-known data limitations**

The well-known limitation of underreporting of both survey and administrative data on VAC, is acknowledged. Possible implications are highlighted in the analysis to prevent misinterpretation.

- **Alignment with the ICVAC**

Indicators identified were matched with ICVAC Level 1 categories and classification criteria to ensure alignment and comparability, and enable data integration across different data sources.

- **Policy relevance**

The indicators selected should be useful for policymaking, planning and programming by governments and their partners in the region. The selected indicators are in line with relevant global and regional policy and reporting frameworks and international guidelines, such as the CRC, the SDGs, the EU Strategy on the Rights of the Child, and the 2022 UNECE Guidance on statistics on children.

For example, the indicator on “intentional homicide of children” was selected for regional data analysis, because – in line with the selection criteria set out above – the indicator is: “policy-relevant” (SDG indicator 16.1.1); “aligned with the ICVAC” Level 1 Category 1 “Violent killing of a child”; uses data from administrative registers “considering well-known data limitations” (e.g., the ability of administrative data systems to accurately and reliably establish and register cause of death of violence, particularly violent deaths of young children, is acknowledged in this report); “adheres to international standards of data quality” (in this case to the SDG metadata for indicator 16.1.1) and is sourced from an international database (UNODC) compiling internationally “comparable” data, and it has enough data points from countries and territories in the region to conduct a comparative analysis (i.e. “data coverage is sufficient”).

Step 4: Analysis methodology

After the mapping, matching and validation of the indicators, the actual data were extracted for each indicator, cleaned and analysed. Given the volume and complexity of the selected dataset, the following analytical methods were applied:

- Extraction of the data on the relevant age group and age group comparisons to identify patterns and disparities across different age cohorts.

- Country comparative analysis using latest available data and the ‘top three method’ that highlights the top three countries and territories with the highest or lowest values for specific indicators to draw attention to potential outliers and points of concern or progress within the region, where relevant.
- Analysis of sex disaggregated data to better understand the sex distribution among children who have been subjected to violent acts.
- Trend analysis for countries and territories with at least five consecutive reporting years in the most recent consecutive data series. Countries and territories with shorter periods or data series with data breaks were excluded to ensure data stability and comparability.

Based on the nature of the indicator, different statistical techniques were applied to analyse the data (dispersion analysis, regression techniques, among others). The combination of these methods ensures a comprehensive and nuanced understanding of the selected indicators on VAC in the region within the limitations of the analysis.

Limitations of the indicator analysis

To analyse the mapped indicators and match them with the ICVAC, the indicators had to be harmonized first. This process revealed the following data limitations:

- Some sources use indicators that add up different data points (e.g., different types of harmful acts against a child) under one ‘aggregated’ indicator. Efforts were made to unpack these indicators (by act of violence). In some cases, this was not possible due to the lack of disaggregated data.
- Various sources use the same indicator differently, e.g., in the indicator definition and/or method of data collection. This created comparability issues and hindered the inclusion of some indicators into the dataset for the regional analysis.
- For some indicators mapped and matched with the ICVAC, data are missing or incomplete. This limited the analysis of data for these indicators but revealed patterns in data availability, including obstacles faced in collecting and reporting VAC data consistently across the region such as varying quality of data collection systems.

Despite these limitations, the mapped and ICVAC-matched indicators provide a foundational understanding of some types of VAC in the region.

They highlight where further efforts must be made to fill data and information gaps and improve data quality and international comparability. Thus, the indicator analysis contributes to the broader goal of supporting evidence-based decision-making and policy development at both regional and national levels.

Annex 3: International data sources and databases used

The following international primary data sources and databases aggregating data from one or more country sources were used in the analysis of the indicators and data – they are listed in alphabetical order:

- DHS (Demographic and Health Surveys) STATcompiler: [The DHS Program – STATcompiler](#)
- European Institute for Gender Equality (EIGE): [Gender-based violence | Gender Statistics Database | European Institute for Gender Equality](#)
- EUROSTAT (EU GBV – European Union survey on gender-based violence against women): [Database – Gender-based violence – Eurostat](#)
- HBSC (Health Behavior in School-aged Children) surveys: [Data | HBSC study](#)
- ILO database: [Data tools to find and download labour statistics – ILOSTAT](#)
- IOM database: [Migration data | International Organization for Migration](#) and [Migration Data Portal](#)
- MICS (Multiple Indicator Cluster Surveys): [Surveys | UNICEF MICS](#)
- OECD database: [Datasets | OECD](#), in particular [OECD Family Database | OECD](#)
- PISA (Programme for International Student Assessment): [PISA dataset – Search](#)
- TransMonEE database: [TransMonEE Database Explorer | UNICEF TransMonEE](#)
- UNECE database: [Data Portal – United Nations Economic Commission for Europe](#)
- UNICEF database: [Violence Against Children – UNICEF Data](#)

- UNODC database: [dataUNODC](#)
- UN Women database: [Homepage | UN Women Data Hub](#)
- WHO database: [Data at WHO](#)

Annex 4: Parameters for indicator tagging and data standardization

Parameters for tagging mapped indicators and standardizing the data for analysis:

Data provider: The organization or agency responsible for collecting or reporting the data for the indicators identified (e.g., NSO, line ministry, international organization).

Source name: The specific survey, administrative record or database from which the data originates.

Link to the data source: Links to the data source were recorded for transparency and future reference.

Year(s): The period or specific year(s) for which the data are available.

Statistical unit: The unit of measurement (e.g., case, child).

Data type: The nature of the data, categorized as either:

- Survey-based (e.g., MICS, HBSC)
- Administrative records (e.g., police reports, judicial data)
- Ombudsperson reports
- Hotline/helpline data.

Age disaggregation: Availability of data disaggregated by age in years or age group.

Sex disaggregation: Availability of data disaggregated by sex (male, female).

ICVAC Category (Level 1): Mapping against the standardized ICVAC Level 1 categories of VAC including Category 1: Violent killing of a child, Category 2:

Physical violence against a child, Category 3: Sexual violence against a child, Category 4: Psychological violence against a child, Category 5: Neglect of a child, and Category 9: Other acts of violence against a child not elsewhere classified.

Tier I, Tier II, and Tier III disaggregating Variables:

More granular disaggregation following the ICVAC, accounting for factors such as details on the victim, perpetrator, or circumstances of the act.

Category 10: Mapping against an additional category capturing “aggregated indicators” (e.g., number of child victims of VAC) and “composite phenomena” (e.g., child marriage).

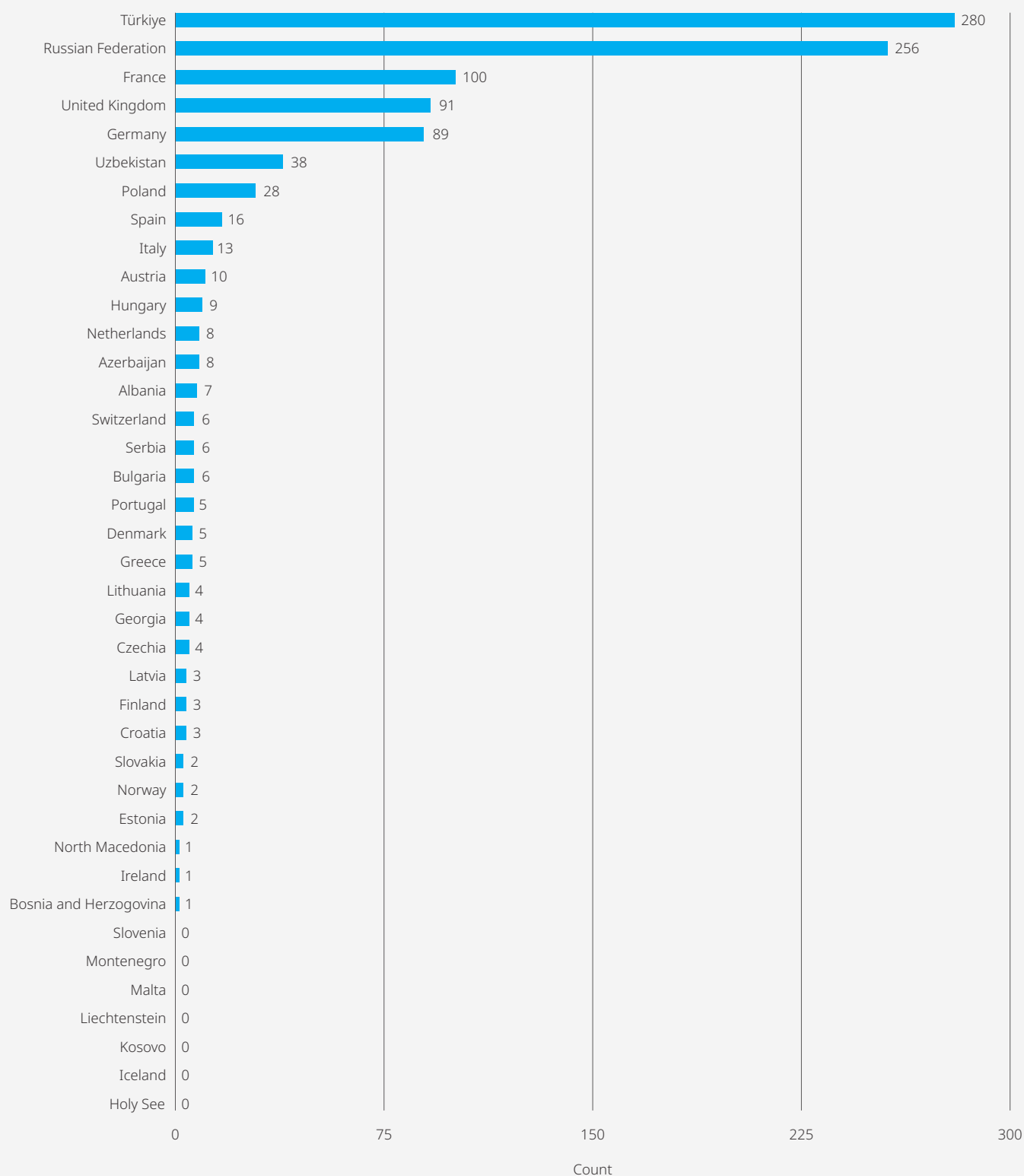
Countries and territories: The list of countries and territories for which the data are available.

Availability formats: The format in which the data are available (e.g., raw datasets, reports, dashboards).

Annex 5: Number and rate of child victims of intentional homicide

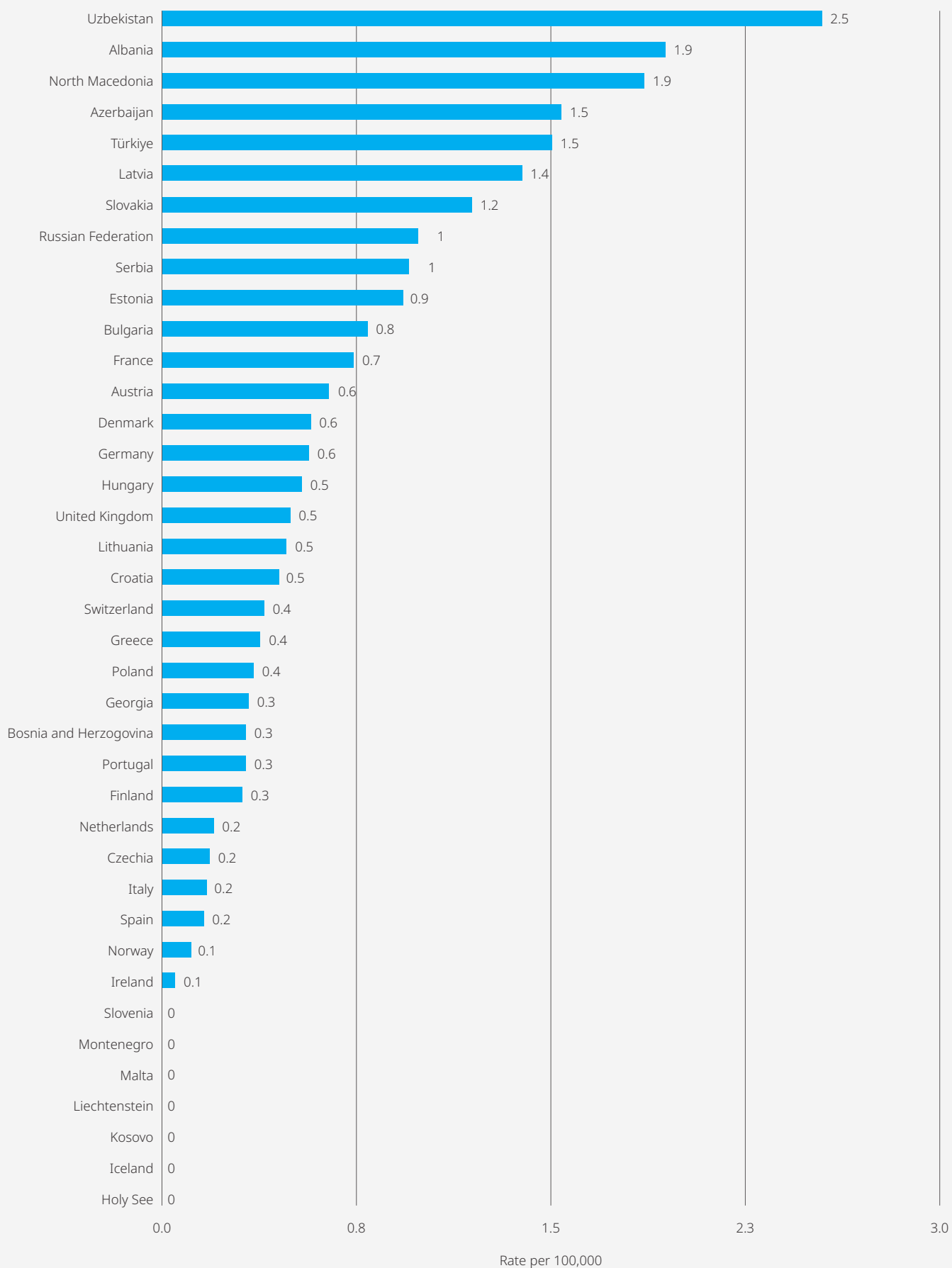
Figure 26 shows the number of victims of intentional homicide aged 0 to 17 registered by national authorities in 39 countries and territories in the region and Figure 27 shows the rate.²⁵⁸

Figure 26 **Number of victims of intentional homicide aged 0 to 17, by country**



Source: UNODC database, data for 2016-2023 from 39 countries and territories in Europe and Central Asia

Figure 27 **Rate of victims of intentional homicide aged 0 to 17, by country**

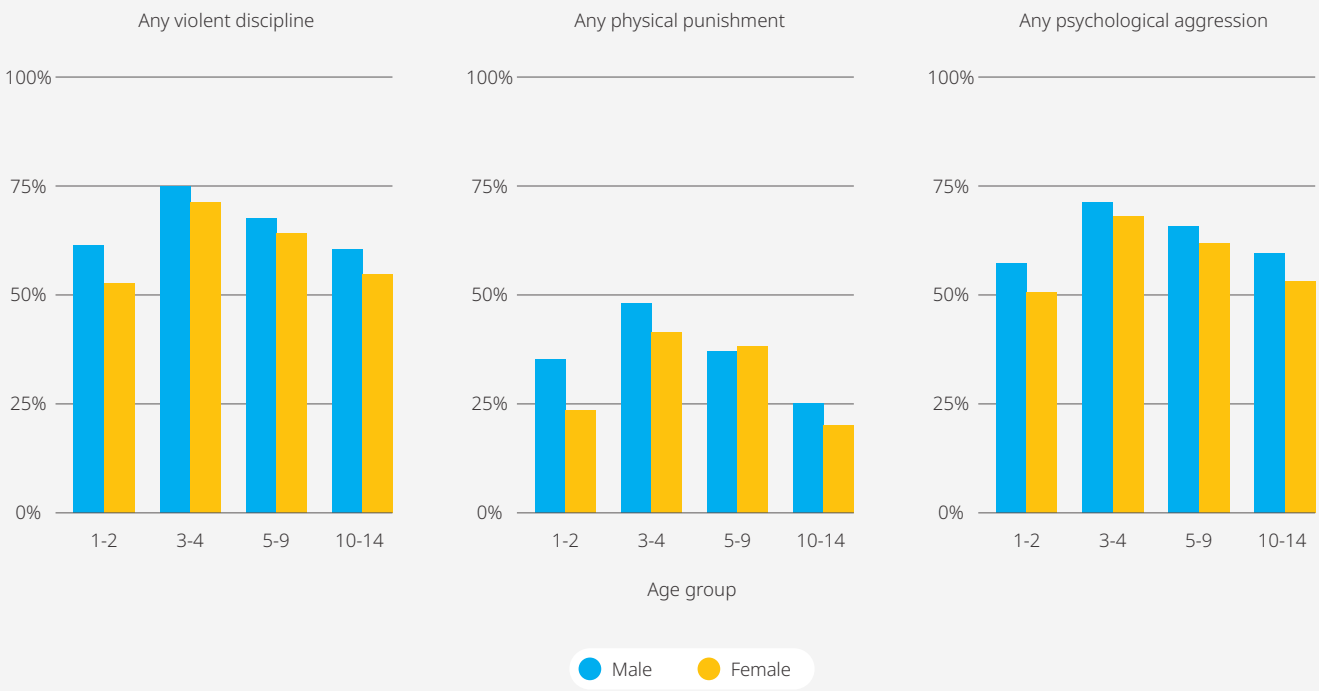


Source: UNODC database, data for 2016-2023 from 39 countries and territories in Europe and Central Asia

Annex 6: In-depth analysis of violent discipline in 10 countries and territories

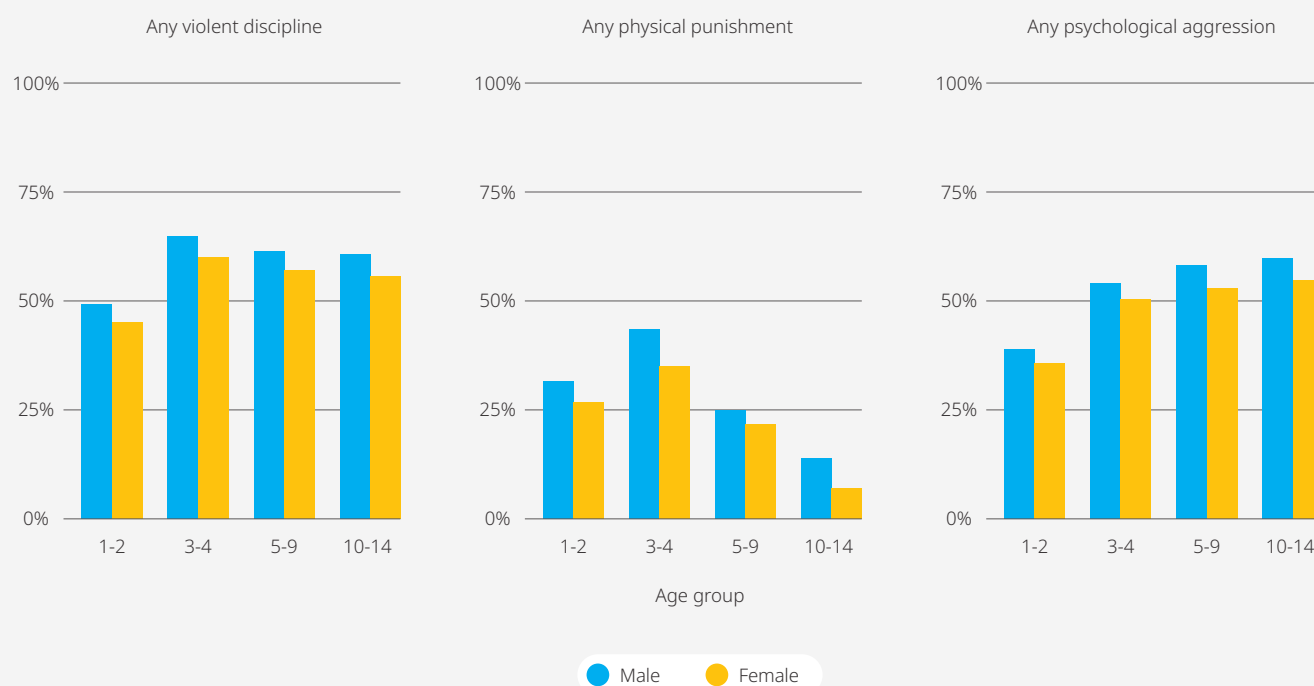
Figures 28 to 41 break down the data on violent discipline for 10 countries and territories in the region (Azerbaijan, Belarus, Georgia, Kosovo, Kyrgyzstan, Montenegro, North Macedonia, Serbia, Turkmenistan and Uzbekistan) by age and sex, and where available, by Roma settlements.²⁴⁹

Figure 28 **Percentage of children aged 1 to 14 in Azerbaijan who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



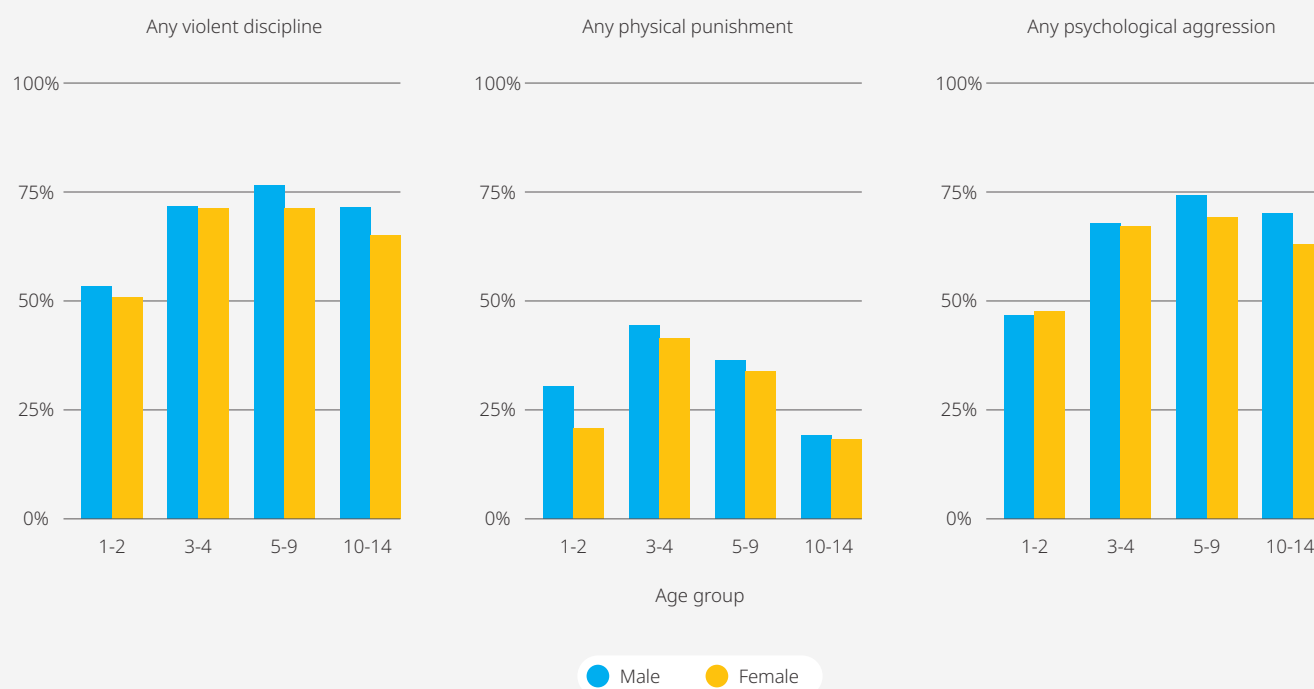
Source: MICS 2025 dataset, MICS survey 2023

Figure 29 **Percentage of children aged 1 to 14 in Belarus who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



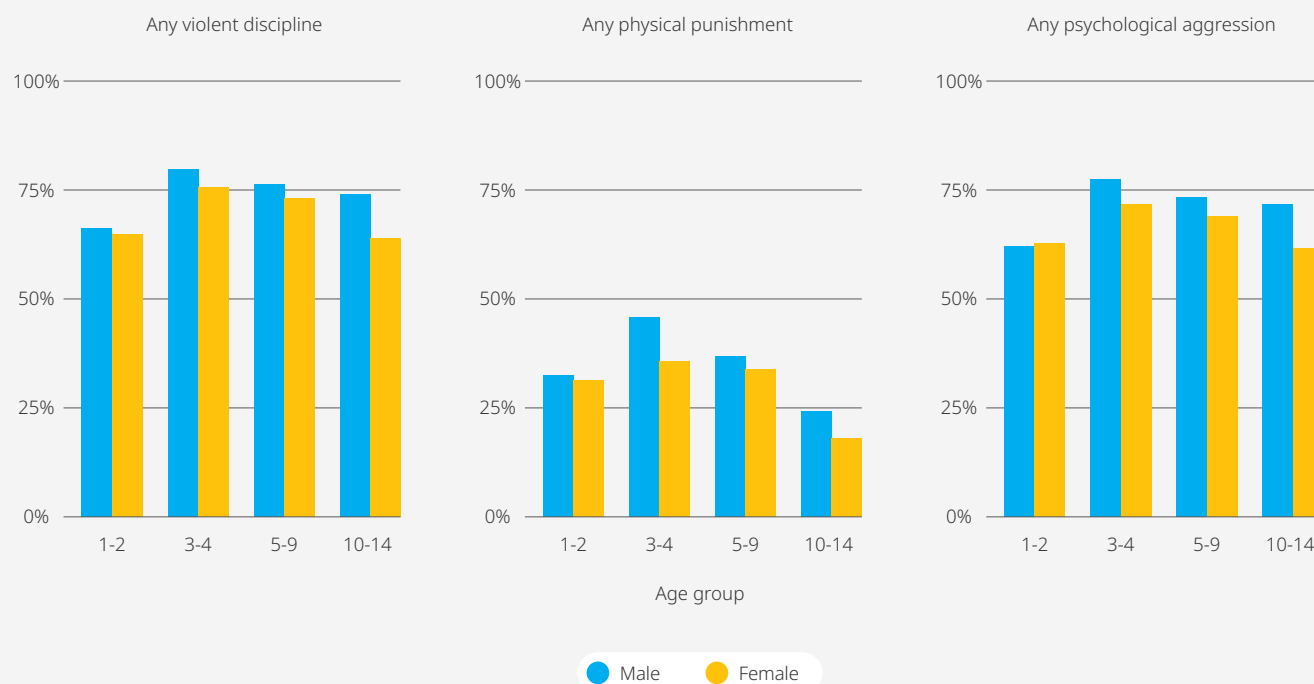
Source: MICS 2025 dataset, MICS survey 2019

Figure 30 **Percentage of children aged 1 to 14 in Georgia who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



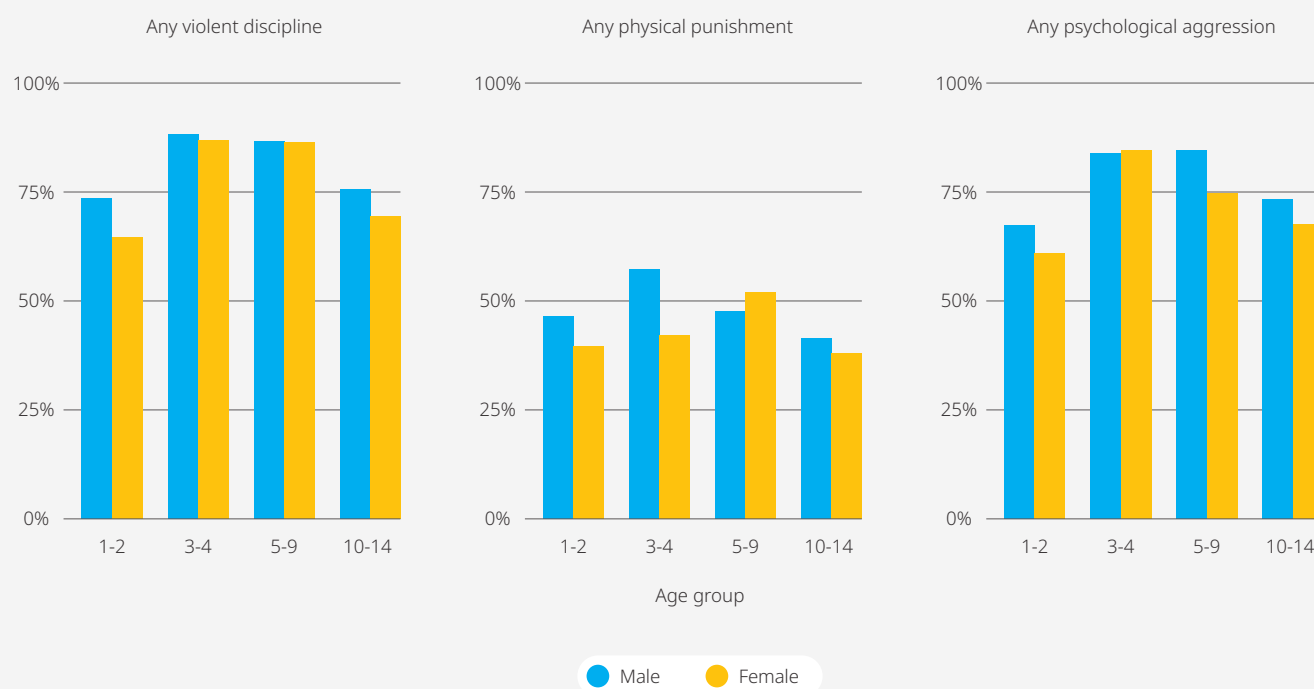
Source: MICS 2025 dataset, MICS survey 2018

Figure 31 **Percentage of children aged 1 to 14 in Kosovo who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



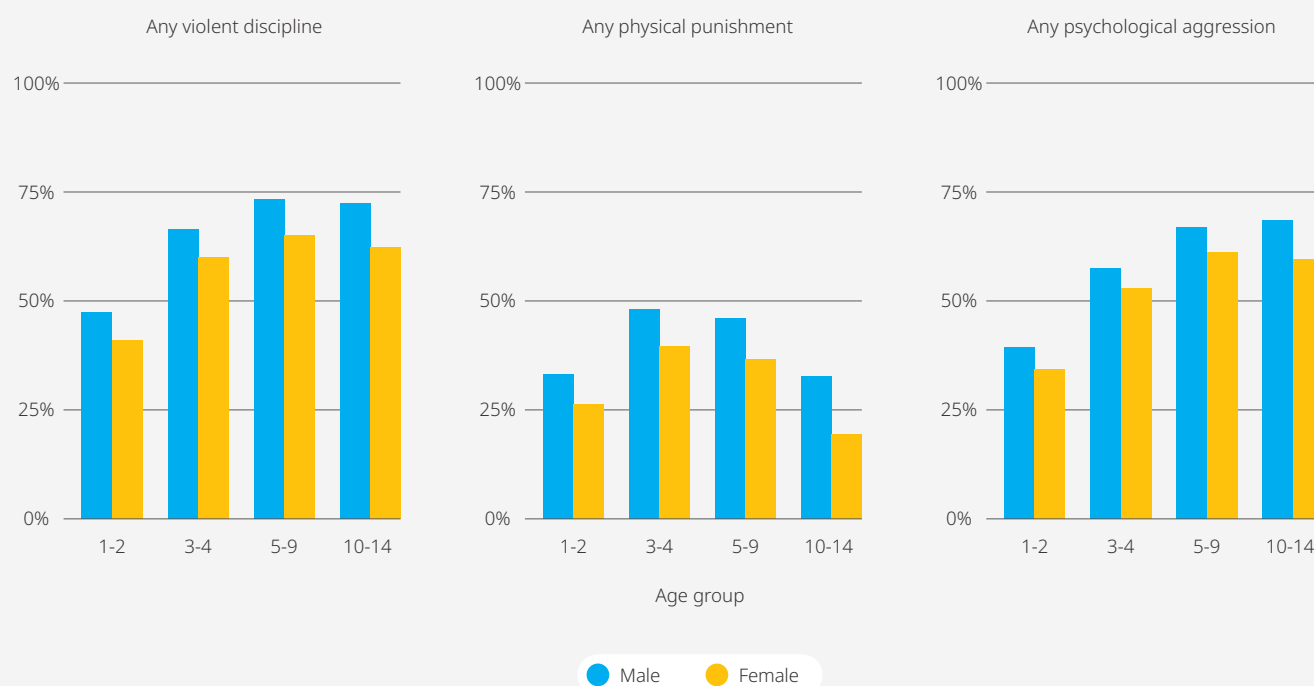
Source: MICS 2025 dataset, MICS survey 2020

Figure 32 **Percentage of children aged 1 to 14 in Roma settlements in Kosovo who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



Source: MICS 2025 dataset, MICS settlement survey 2020

Figure 33 **Percentage of children aged 1 to 14 in Kyrgyzstan who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



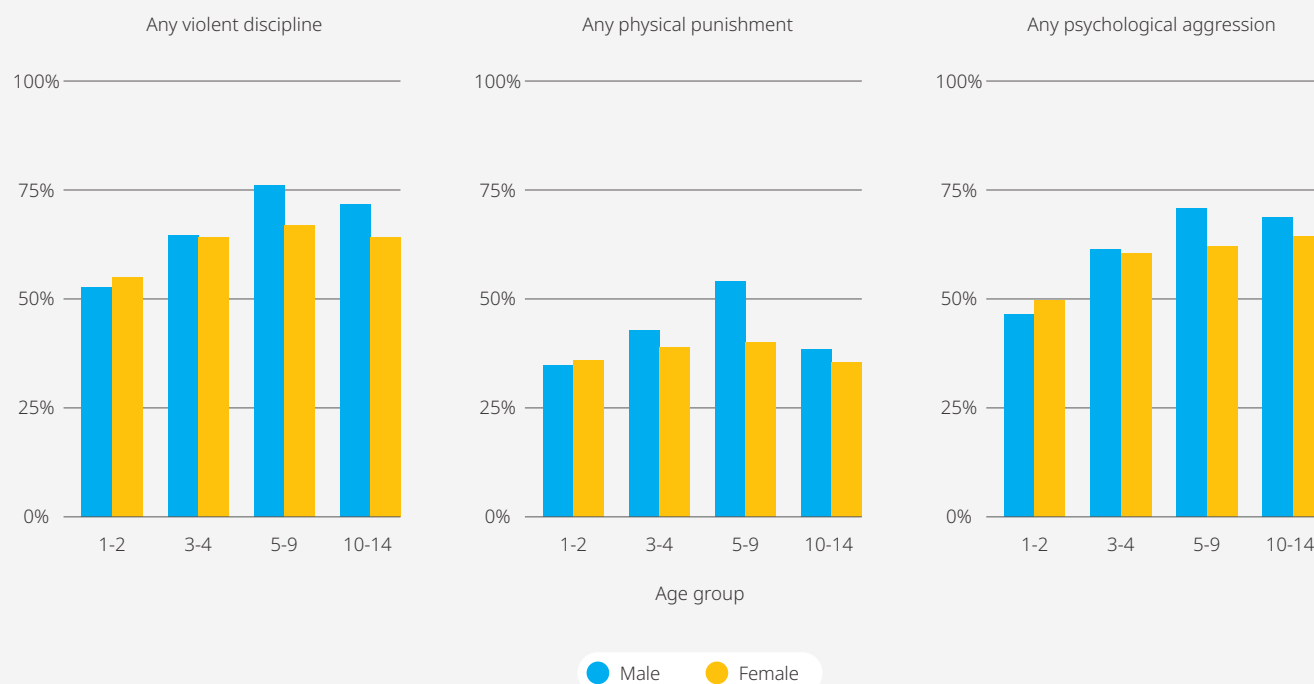
Source: MICS 2025 dataset, MICS survey 2023

Figure 34 **Percentage of children aged 1 to 14 in Montenegro who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



Source: MICS 2025 dataset, MICS survey 2018

Figure 35 **Percentage of children aged 1 to 14 in Roma settlements in Montenegro who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



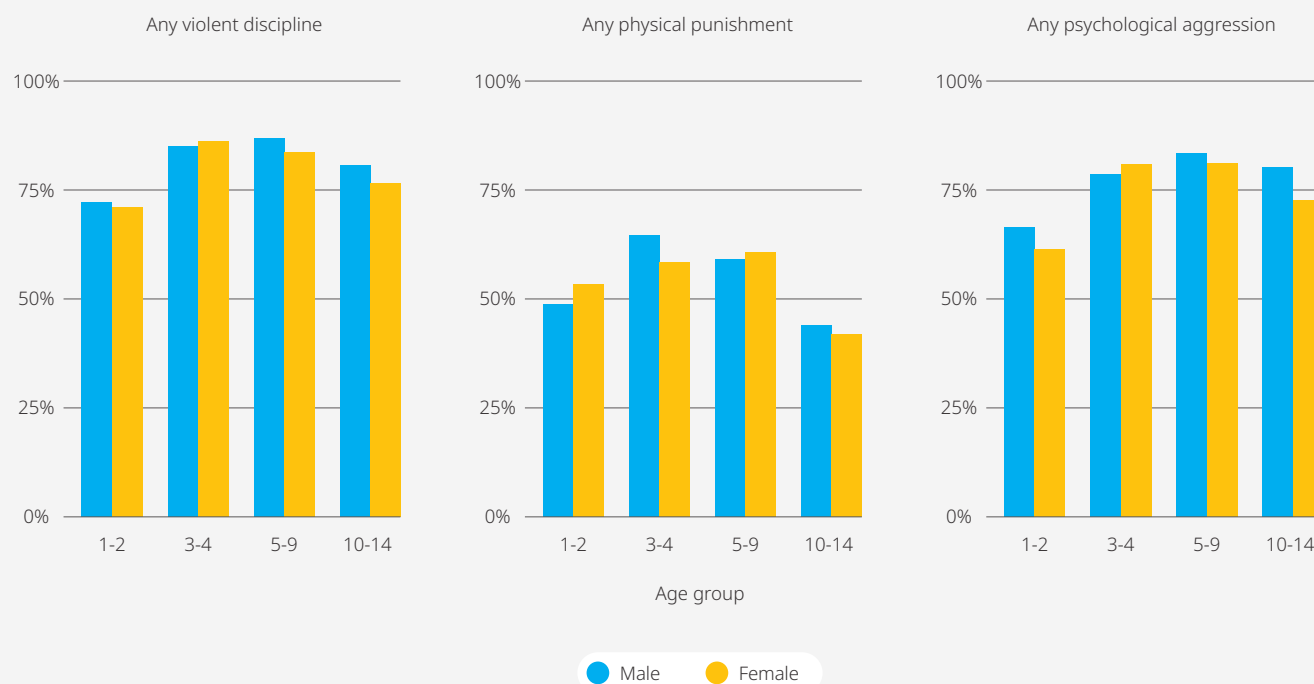
Source: MICS 2025 dataset, MICS settlement survey 2018

Figure 36 **Percentage of children aged 1 to 14 in North Macedonia who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



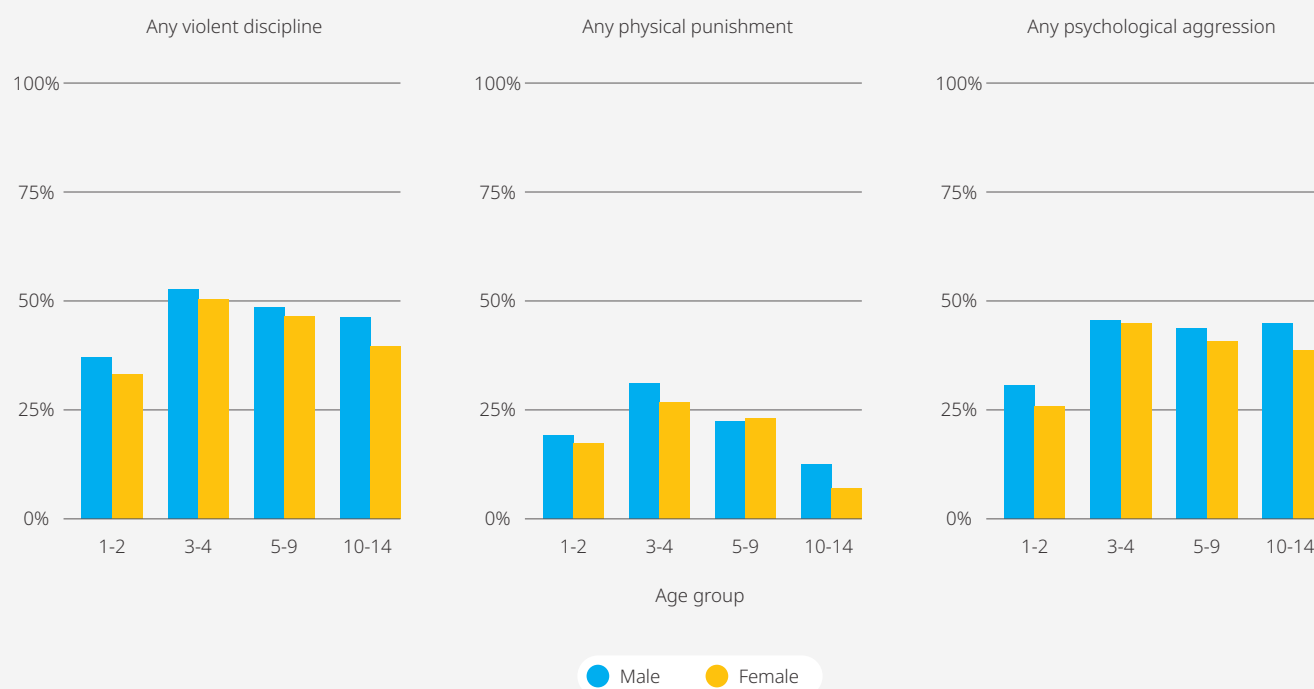
Source: MICS 2025 dataset, MICS survey 2019

Figure 37 **Percentage of children aged 1 to 14 in Roma settlements in North Macedonia who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



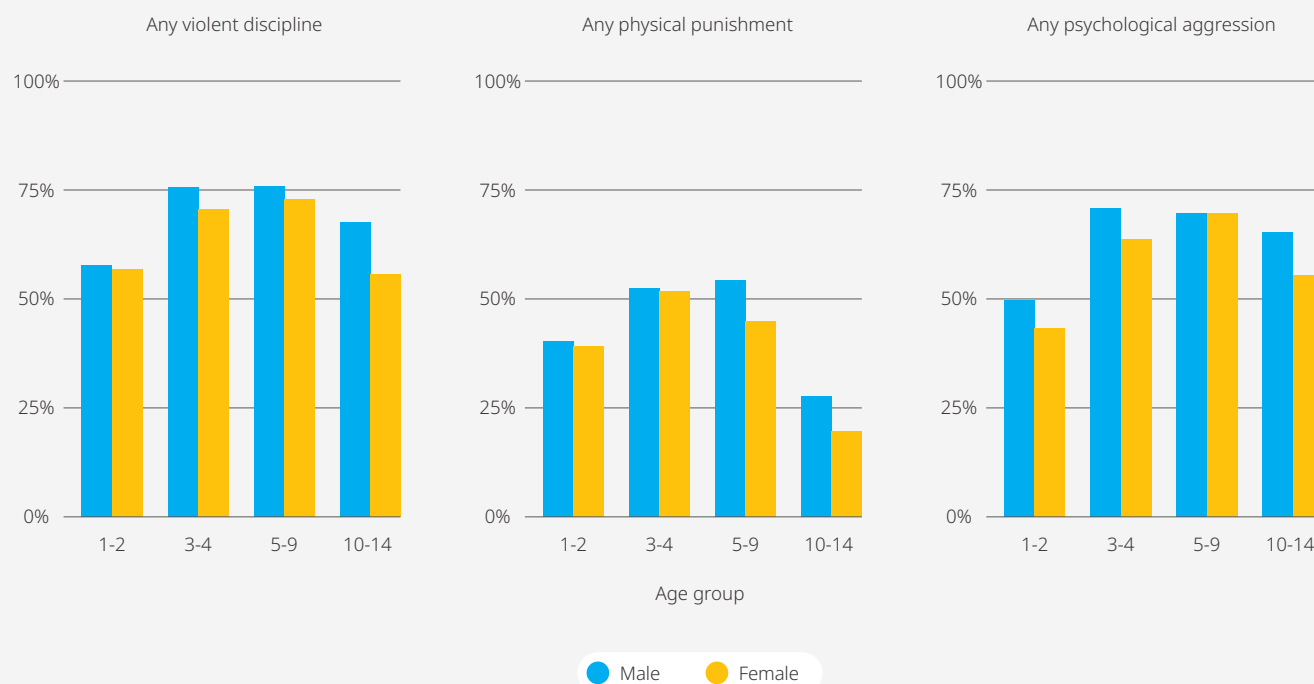
Source: MICS 2025 dataset, MICS settlement survey 2019

Figure 38 **Percentage of children aged 1 to 14 in Serbia who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



Source: MICS 2025 dataset, MICS survey 2019

Figure 39 **Percentage of children aged 1 to 14 in Roma settlements in Serbia who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



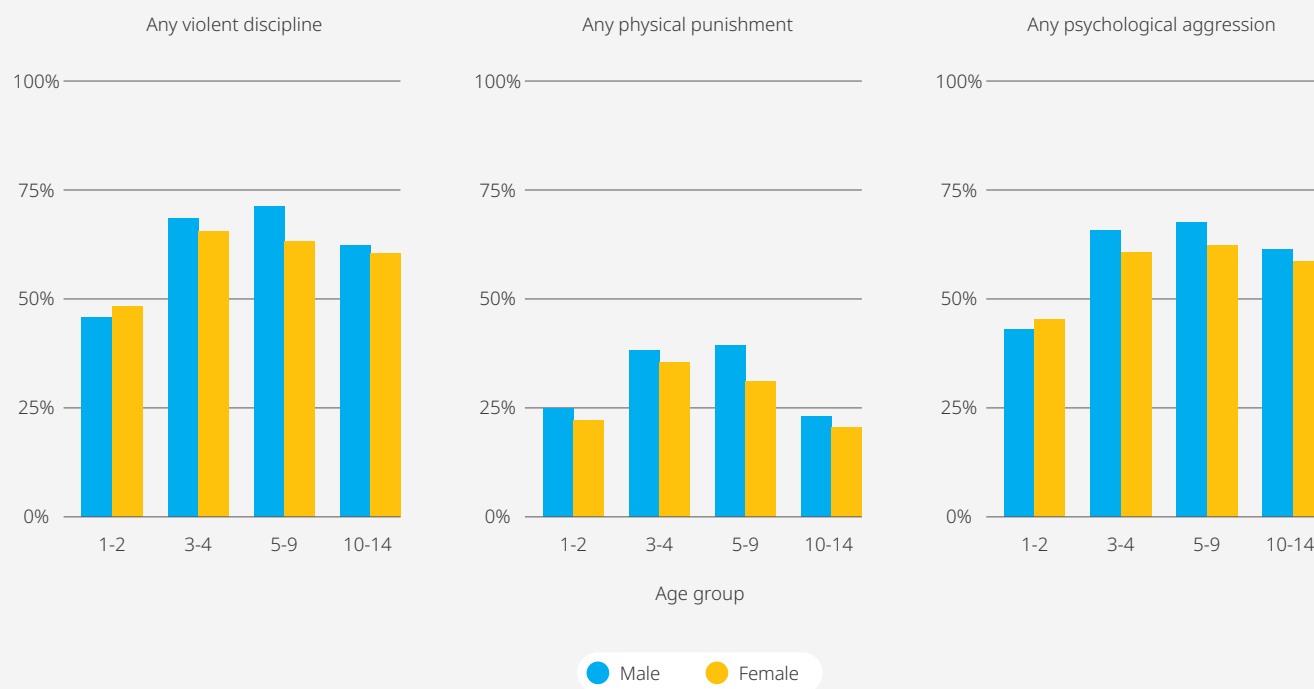
Source: MICS 2025 dataset, MICS settlement survey 2019

Figure 40 **Percentage of children aged 1 to 14 in Turkmenistan who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



Source: MICS 2025 dataset, MICS survey 2019

Figure 41 **Percentage of children aged 1 to 14 in Uzbekistan who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by age and sex**



Source: MICS 2025 dataset, MICS survey 2022

Endnotes

¹ All references to Kosovo should be understood in reference to the United Nations Security Council Resolution 1244 (1999)

² Ibid. Definitions of Level 1 categories are provided in a later chapter of this report. The 1993 United Nations Declaration on the Elimination of Violence Against Women defines 'Violence against women' as: "any act of gender-based violence that results in, or is likely to result in, physical, sexual, or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life". Source: United Nations, Declaration on the Elimination of Violence Against Women, United Nations, New York, 1993, article 1, <<https://www.ohchr.org/sites/default/files/eliminationvaw.pdf>>, accessed 15 September 2025. United Nations Children's Fund, Ten Facts about Violence against Children, Factsheet, 2024.

³ United Nations General Assembly, Convention on the Rights of the Child, G.A. Res. 44/25, 20 November 1989, United Nations, Treaty Series, vol. 1577, p. 3, art. 1; Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography, A/RES/54/263, 25 May 2000; Optional Protocol to the Convention on the Rights of the Child on a communications procedure, A/RES/66/138, 19 December 2011.

⁴ Convention on the Rights of the Child, art. 1 (1989), p. 5.

⁵ Ibid., p. 8.

⁶ Ibid., p. 10.

⁷ United Nations Committee on the Rights of the Child, *General Comment No. 5 (2003), General measures of implementation of the Convention on the Rights of the Child* (arts. 4, 42 and 44, para. 6), CRC/GC/2003/5, thirty-fourth session, 19 September–3 October 2003, 27 November 2003.

⁸ United Nations, *Report of the independent expert for the United Nations study on violence against children*, General Assembly, Sixty-first session, Item 62(a) of the provisional agenda, Promotion and protection of the rights of children, A/61/299, New York, 29 August 2006.

⁹ United Nations Children's Fund, *International Classification of Violence against Children*, UNICEF, New York, 2023.

¹⁰ Ibid., p. 13.

¹¹ Ibid., pp. 26-37. For instance, Level 1 category "sexual VAC" includes Level 2 categories, such as "Rape of a child" and "Sexual assault of a child", among others.

¹² The 1993 UN Declaration on the Elimination of Violence Against Women defines 'Violence against women' as: "any act of gender-based violence that results in, or is likely to result in, physical, sexual, or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life". Source: United Nations, Declaration on the Elimination of Violence Against Women, United Nations, New York, 1993, article 1, <<https://www.ohchr.org/sites/default/files/eliminationvaw.pdf>>, accessed 15 September 2025.

¹³ United Nations Children's Fund, *Ten Facts about Violence against Children*, Factsheet, 2024.

¹⁴ Ibid. Note that there is no universally accepted definition of adolescence, but the United Nations understands adolescents to include persons aged 10 to 19 (for statistical purposes). Source: World Health Organization, *The adolescent health indicators recommended by the Global Action for Measurement of Adolescent Health: guidance for monitoring adolescent health at country, regional and global levels*, World Health Organization, Geneva, 2024, Licence: CC BY-NC-SA 3.0 IGO, p. 2.

¹⁵ *Ten Facts about Violence against Children*, Factsheet, 2024. The estimate was recalculated by United Nations Children's Fund on the basis of the *Global Health Estimates 2021: Deaths by Cause, Age, Sex, by Country and by Region, 2000–2021*, World Health Organization, Geneva, 2024.

¹⁶ Ibid. The estimate has been produced by UNICEF on the basis of the latest available globally comparable data compiled in UNICEF global databases.

¹⁷ Ibid. Intimate partner violence includes any physical, sexual or psychological violence perpetrated by a current or former partner within the context of marriage, cohabitation or any other formal or informal union.

¹⁸ Ibid.

¹⁹ United Nations Children's Fund, *When Numbers Demand Action: Confronting the global scale of sexual violence against children*, United Nations Children's Fund, New York, 2024, p. 9.

²⁰ Ibid., p. 12. Note that United Nations Children's Fund defines fragile settings and contexts as: "settings and contexts where there is an accumulation and combination of risks as a result of context-specific underlying causes combined with insufficient coping capacity of the state, system and/or communities to manage, absorb or mitigate those risks". This definition also includes countries affected by violent conflict. Source: United Nations Children's Fund, *Integrating humanitarian response and development: Programme framework for fragile contexts. Enhancing programme and operational support in fragile contexts*, United Nations Children's Fund, New York, April 2018, p. 12.

²¹ *Ten Facts about Violence against Children*. The estimate has been produced by UNICEF on the basis of the latest available globally comparable data compiled in UNICEF global databases.

²² *When Numbers Demand Action*, p. 14.

²³ United Nations Children's Fund, 'In Focus: Ending violence against children. Violence is one of the greatest threats to children worldwide – including in Europe and Central Asia', Policy brief, United Nations Children's Fund Europe and Central Asia Regional Office, Geneva, October 2024. Note that UNICEF is currently leading a process to develop a new international classification on alternative care for children that will help countries create standardized, internationally comparable alternative care for children statistics. See: Meeting of the United Nations Committee of Experts on International Statistical Classifications – Programme, Day 3, Session 11 (New York, 6 December 2023).

²⁴ Intimate partner violence against adolescent girls: regional and national prevalence estimates and associated country-level factors LynnMarie Sardinha, Ilknur Yüksel-Kaptanoğlu, Mathieu Maheu-Giroux, Claudia García-Moreno, *Lancet Child Adolesc Health* 2024; 8: 636–46 Published Online July 29, 2024 <[https://doi.org/10.1016/S2352-4642\(24\)00145-7](https://doi.org/10.1016/S2352-4642(24)00145-7)>

²⁵ According to the ICVAC: "A crime is considered by the International Classification of Crime for Statistical Purposes to be the "punishable contravention or violation of the limits on human behaviour as imposed by national criminal legislation. Each criminal offence has a perpetrator – person, corporation or institution – which is liable for the criminal behaviour in question." See: *International Classification of Crime for Statistical Purposes (ICCS)*, p. 11. The ICVAC defines "group perpetrators" as "those perpetrating acts of collective violence" as per the following definition: "The instrumental use of violence by people who identify themselves as members of a group – whether this group is transitory or has a more permanent identity – against another group or set of individuals, in order to achieve political, economic, or social objectives. See: *World Report on*

Violence and Health, p. 215. Source: United Nations Children's Fund, *International Classification of Violence against Children*, UNICEF, New York, 2023, pp. 12 (definition of perpetrator) and 40 (perpetrator disaggregations). For more details on measuring technology-facilitated VAC, see: United Nations Children's Fund, *Measuring Technology-facilitated VAC in Line with the International Classification of Violence against Children*, United Nations Children's Fund, New York, 2025.

²⁶ United Nations Children's Fund, *Child Protection Advocacy Briefing. Violence Against Children*, Advocacy brief, United Nations Children's Fund, New York, 2021; United Nations Children's Fund, *Working at the Intersections of Violence against Children and Violence Against Women*, United Nations Children's Fund, New York, October 2024; United Nations Children's Fund, *Making the Connection: Intimate Partner Violence and Violence against Children in Eastern ECA*, United Nations Children's Fund, New York, 2018.

²⁷ United Nations Children's Fund, *Gender Dimensions of Violence Against Children and Adolescents*, UNICEF, New York, 2020; Pearson, Isabelle, et al., 'The Co-Occurrence of Intimate Partner Violence and Violence Against Children: A systematic review on associated factors in low- and middle-income countries', *Trauma Violence Abuse*, vol. 24, no. 4, 2023, pp. 2097–2114, <<https://doi.org/10.1177/15248380221082943>>; Bott, Sarah, et al., 'Co-Occurring Violent Discipline of Children and Intimate Partner Violence Against Women in Latin America and the Caribbean: A systematic search and secondary analysis of national datasets', *BMJ Global Health*, vol. 6, no. 12, 2021, e007063, <<https://doi.org/10.1136/bmjgh-2021-007063>>.

²⁸ End Violence Against Children, 'Corporal Punishment of Children: Review of research on its impact and associations – Full working paper', 2021, <<https://endcorporalpunishment.org/wp-content/uploads/2021/09/Research-effects-full-working-paper-2021.pdf>>, accessed 15 September 2025; Holmes, Megan R., et al., 'Nearly 50 Years of Child Exposure to Intimate Partner Violence Empirical Research: Evidence mapping, overarching themes, and future directions', *Journal of Family Violence*, vol. 37, no. 8, 2022, pp. 1207–1219, <<https://doi.org/10.1007/s10896-021-00349-3>>; Bick, Johanna, and Charles A. Nelson, 'Early Adverse Experiences and the Developing Brain', *Neuropsychopharmacology*, vol. 41, no. 1, 2016, pp. 177–96, <<https://doi.org/10.1038/npp.2015.252>>.

²⁹ United Nations Children's Fund, Prevention Collaborative and Equimundo, 'Parenting Programmes to Reduce Violence Against Children and Women: Why it is important', Brief 1, UNICEF Innocenti – Global Office of Research and Foresight, Florence, 2023; Guedes, Alessandra, et al., 'Bridging the Gaps: A global review of intersections of violence against women and violence against children', *Global Health Action*, vol. 9, no. 1, 2016, 31516, <<https://doi.org/10.3402/gha.v9.31516>>; United Nations Children's Fund, *Gender Dimensions of Violence Against Children and Adolescents*, UNICEF, New York, 2020, <[Child-Protection-Gender-Dimensions-of-VACAG-2021.pdf](#)>, accessed 15 September 2025; Pearson, Isabelle, et al., 'The Co-Occurrence of Intimate Partner Violence and Violence Against Children: A systematic review on associated factors in low- and middle-income countries', *Trauma Violence Abuse*, vol. 24, no. 4, 2023, pp. 2097; Fulu, Emma, Sarah McCook and Kathryn Falb, *What Works Evidence Review: Intersections of violence against women and violence against children*, What Works to Prevent Violence, 2017, <<https://www.whatworks.co.za/documents/publications/116-vac-vaw-evidence-brief-new-crop-1/file>>, accessed 15 September 2025.

³⁰ Guedes, Alessandra, et al., 'Bridging the Gaps: A global review of intersections of violence against women and violence against children', *Global Health Action*, vol. 9, no. 1, 2016, 31516, <<https://doi.org/10.3402/gha.v9.31516>>; Carlson, Catherine, et al., 'Violence Against Children and Intimate Partner Violence Against Women: Overlap and common contributing factors among caregiver-adolescent dyads', *BMC Public Health*, vol. 20, no. 1, 2020, pp. 1–13, <<https://doi.org/10.1186/s12889-019-8115-0>>.

³¹ Ibid.

³² UNICEF Innocenti – Global Office of Research and Foresight, *Working at the Intersections of Violence Against Children and Violence Against Women: Why it matters for children's protection and well-being*, UNICEF Innocenti, Florence, October 2024, p. 7.

³³ The action briefs and infographics are accessible at: <<https://www.unicef.org/innocenti/reports/working-intersections-violence-against-children-and-violence-against-women>>.

³⁴ European Institute for Gender Equality, 'Forms of violence', European Institute for Gender Equality, 2025, <<https://eige.europa.eu/gender-based-violence/what-is-gender-based-violence/forms-of-violence>>, accessed 24 July 2025; European Union Agency for Fundamental Rights, *Violence against Women: An EU-wide Survey*, Publications Office of the European Union, Luxembourg, 2015. "GBV comprises any harm or threat of harm inflicted on a person because of male-female power imbalances entrenched within a society. Sexual violence, intimate partner violence, female genital mutilation, child marriage, sex trafficking and femicide are all forms of GBV, which can be physical, sexual, mental or economic in nature. While GBV is inflicted on men and boys too, women and girls face the greatest threat". Source: United Nations Population Fund, *The Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming*, 2019, p. V.

³⁵ Maternowska, M. Catherine, and Deborah Fry, 'The Multi-Country Study on the Drivers of Violence Affecting Children: An overview', *Vulnerable Children and Youth Studies*, vol. 13, no. S1, 2018, pp. 12–25.

³⁶ United Nations Special Representative of the Secretary-General on Violence against Children, *Violence against Children on the Move: From a Continuum of Violence to a Continuum of Protection*, United Nations, New York, 2020; Edalati, Hanie, and Tonia L. Nicholls, 'Childhood Maltreatment and the Risk for Criminal Justice Involvement and Victimization among Homeless Individuals', *Trauma, Violence & Abuse*, vol. 20, no. 3, July 2019, pp. 315–330.

³⁷ Niu, Li, et al., 'Global prevalence of violence against children and adolescents during COVID-19: A metaanalysis', *Child Abuse & Neglect*, vol. 154, August 2024, art. no. 10687; United Nations Children's Fund, Division of Data, Analytics, Planning and Monitoring, *Protecting Children from Violence in the Time of COVID19: Disruptions in Prevention and Response Services*, United Nations Children's Fund, New York, August 2020.

³⁸ See, for example: World Health Organization, *INSPIRE: Seven Strategies for Ending Violence against Children*, WHO, Geneva, 2016; United Nations Children's Fund, *Child Protection Systems Strengthening: Approach; Benchmarks; Interventions*, United Nations Children's Fund, New York, 2021; United Nations Children's Fund, *Regional Report Multicountry Programme Evaluation Synthesis Report of the Childcare and Deinstitutionalisation Reforms (2009–2022)*, Coram International, United Nations Children's Fund Europe and Central Asia, Geneva, 2024; United Nations Children's Fund, 'Introduction to the Five Advocacy Briefs on Child Justice & Child Friendly Justice', United Nations Children's Fund Regional Office for Europe and Central Asia, November 2022.

³⁹ Overseas Development Institute, *The costs and economic impact of violence against children*, London, 2014.

⁴⁰ United Nations Statistics Division, 'Home - SDG Indicators', *United Nations Statistics Division website*, New York, 2025, <<https://unstats.un.org/sdgs/>>, accessed 24 July 2025.

⁴¹ European Commission, *EU Strategy on the Rights of the Child*, Communication COM/2021/142 final, Brussels, 24 March 2021; Council of Europe, *Strategy for the Rights of the Child (2022–2027): Children's Rights in Action*, Strasbourg, March 2022; European Commission, *EU Strategy for a More Effective Fight against Child Sexual Abuse*, COM/2020/607 final, Brussels, 24 July 2020;

European Commission, *Commission Recommendation on Integrated Child Protection Systems*, Legislative Train 06.2025, Brussels, Q1 2024.

⁴² Lanzarote Convention (Council of Europe Treaty Office) and Istanbul Convention (CETS No. 210 — Council of Europe). While focused on women, the Istanbul Convention underlines the need to protect and support children who witness intimate partner violence, criminalizes forced child marriage, female genital mutilation affecting girls, and prohibits forced abortion and sterilization, relevant for adolescent girls.

⁴³ 'In Focus: Ending violence against children', Policy brief, October 2024.

⁴⁴ The 26 countries in ECA that made pledges are Albania, Andorra, Armenia, Austria, Belgium, Bulgaria, Czech Republic, Estonia, France, Hungary, Iceland, Kazakhstan, Kyrgyzstan, Luxembourg, Montenegro, Poland, Portugal, Republic of Moldova, Romania, Spain, Sweden, Tajikistan, Türkiye, Ukraine, United Kingdom of Great Britain and Northern Ireland and Uzbekistan. Pledges were made specifically on "Data collection and monitoring" by the following Austria, Bulgaria, Poland, Portugal, Romania, Spain and Uzbekistan. Most of the country pledges are available on the website of the Conference, <<https://endviolenceagainstchildrenconference.org/pledges/>>, accessed 20 August 2025 while some have not yet been uploaded but have been shared by governments with UNICEF country offices. 'Call to action' available at *Call to action — Every Child Protected* (accessed 14 August 2025). 'Call to action' is available at <<https://endviolenceagainstchildrenconference.org/call-to-action/>>, accessed 14 August 2025.

⁴⁵ The UNICEF pledge is available at <<https://bogota.endviolenceagainstchildrenconference.org/organizations-pledges/>>, accessed 14 August 2025.

⁴⁶ TransMonEE network and database: *Monitoring the situation of children's rights and inequities | United Nations Children's Fund TransMonEE*.

⁴⁷ United Nations Children's Fund Regional Office for Europe and Central Asia, *TransMonEE analytical series: Pathways to Better Protection — Taking stock of the situation of children in alternative care in Europe and Central Asia*, United Nations Children's Fund, Geneva, 2024. For March 2024 Expert meeting: *UNECE/UNICEF Expert Meeting on Statistics on Children | UNECE*.

⁴⁸ Reporting types include self-reported surveys, police-reported data and administrative data from child/social welfare, education or healthcare authorities.

⁴⁹ Landau, Jütting and MacFeeley (2025), *How the SDGs Increased Data Production and What This Means for Policy Making*, PARIS21 Discussion Paper 18, p. 26. See: <www.paris21.org/knowledge-base>.

⁵⁰ United Nations Children's Fund, TransMonEE interactive dashboard — availability and recency of data for child-related SDG indicators, <<https://www.transmonee.org/availability-and-recency-data-child-related-sdg-indicators>>. TransMonEE interactive dashboard — Recommendations of the Committee on the Rights of the Child, <<https://www.transmonee.org/recommendations-committee-rights-child>>, accessed 02 August 2025.

⁵¹ United Nations Children's Fund TransMonEE interactive dashboard on recommendations of the Committee of the Rights of the Child, <<https://www.transmonee.org/recommendations-committee-rights-child>>, accessed 02 August 2025.

⁵² United Nations Economic Commission for Europe, *Statistics on Children — Spotlight on children exposed to violence, in alternative care and with disabilities*, Prepared by the Conference of European Statisticians Task Force on Statistics on Children, Adolescents and Youth, Geneva, 2022, pp. 21–37. This guidance document provides a detailed analysis of the availability, quality and comparability of VAC indicators in the United Nations Economic Commission for Europe's region reported by NSOs that participated in the survey

conducted by the Commission in 2021 to inform the development of the guidance on statistics on children. The mapping of the indicators for this report builds on the indicators identified by the 2021 NSO survey. More information on the Conference of European Statisticians and its members can be found at <<https://unece.org/statistics/ces/about-conference-european-statisticians-ces>>, accessed 11 September 2025.

⁵³ Prevalence: the number of child victims of violence in a defined population (such as the general child population or among a sub-set of the child population) at a specified point in time. Incidence: the number of newly registered child victims of violence arising in a given period (for example, during one year) in a specified population. World Health Organization, *Basic epidemiology*, Geneva, 1993, p. 13.

⁵⁴ Other VAC data producers may include, for instance, research institutions, non-governmental organizations, ombudspersons, helplines, among others. For more on the First Global Conference on ending VAC, see: First Global Ministerial Conference on Ending Violence Against Children, <<https://bogota.endviolenceagainstchildrenconference.org/>>, accessed 11 September 2025. The SDG indicators website is accessible at <<https://unstats.un.org/sdgs/>>, accessed 11 September 2025. Recently, UNICEF published a technical brief to support countries in measuring technology-facilitated VAC in line with the ICVAC: United Nations Children's Fund, *Measuring Technology-facilitated Violence against Children in Line with the International Classification of Violence against Children*, UNICEF, New York, 2025. A toolkit for supporting countries in implementing the ICVAC is forthcoming.

⁵⁵ A single "violent act committed against a child or multiple children" is the unit of classification of the ICVAC. It "refers to the process of doing or performing something. This includes acts of omission, which refer to the failure to perform an act. Such acts can be of different natures, i.e., physical, verbal, non-verbal or sexual". Source: United Nations Children's Fund, *International Classification of Violence against Children*, UNICEF, New York, 2023, pp. 13 and 15.

⁵⁶ This repository includes all the mapped VAC prevalence and incidence indicators, which could be matched with the ICVAC or with the additional category. The indicator mapping and desk review have revealed that accessibility of indicators and data is limited in certain countries in ECA, because some of these countries publish only a limited set of core VAC indicators, others do not publish any VAC indicators on official websites, and there are also countries that publish VAC data but not from all sectors that collect data on VAC.

⁵⁷ For a discussion of population-based data sources to study VAC, see, e.g.: Bader, D.; Frank, K.; Kohen, D., 'Taking Stock of Canadian Population Based Data Sources to Study Child Maltreatment: What's Available, What Should Researchers Know, and What are the Gaps?', *Child Indicators Research* 16, 2511–2544 (2023).

⁵⁸ Level 2 sub-categories could not be applied in the analysis, as too few of the indicators that matched Level 1 categories, could be tagged with Level 2 sub-categories. For an overview of Level 2 sub-categories, see United Nations Children's Fund, *International Classification of Violence against Children*, pp. 26–47.

⁵⁹ According to the International Classification of Crime for Statistical Purposes (ICCS), "a perpetrator is a person, corporation or institution which is liable for the criminal behaviour in question" (in this case: VAC). United Nations Office on Drugs and Crime, *International Classification of Crime for Statistical Purposes*, Version 1.0, pp. 11.

⁶⁰ United Nations Children's Fund, *International Classification of Violence against Children*, p. 22; see Annex 2 of this report for more details on the handling of Category 10 indicators.

⁶¹ "Occurrence" in statistics refers to the frequency with which a particular event or value appears within a given dataset. Differences in indicator occurrences identified across the region have been informed by the analysis of qualitative data

collected from the TransMonEE network through the annual child protection data collection exercise (see United Nations Children's Fund, TransMonEE — Data-collection toolkit, <<https://www.transmonee.org/data-collection-toolkit/>>; TransMonEE — Events and meetings, <<https://www.transmonee.org/events/>>, by the analysis of the 2021 UNECE NSO survey, and by discussions held at regional expert meetings (for example, UNECE/UNICEF Expert Meeting on Statistics on Children, Geneva, 4–6 March 2024, <<https://unece.org/statistics/events/meeting/children2024>>, accessed 11 September 2025).

⁶² For example, countries and territories participating in international standardized survey programmes are usually using the same set of indicators to collect data on VAC through this survey.

⁶³ United Nations Economic Commission for Europe, *Statistics on Children — Spotlight...*, p. 29.

⁶⁴ Ibid., p. 35.

⁶⁵ Ibid., pp. 32–33.

⁶⁶ For instance, SDG Goal 5: is “Achieve gender equality and empower all women and girls”, which includes Target 5.3: “Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation”, and Indicator 5.3.1: “Proportion of women aged 20–24 years who were married or in a union before age 15 and before age 18”. More information on the SDG indicator framework can be found at: SDG Indicators — SDG Indicators, <<https://unstats.un.org/sdgs/metadata/>>, accessed 11 September 2025.

⁶⁷ The definition of corporal punishment is taken from: Home - End Corporal Punishment of Children, <<https://endcorporalpunishment.org/>>, accessed 27 August 2025.

⁶⁸ Mathews, Ben; Dube, S., ‘Childhood emotional abuse is becoming a public health priority’, *Child Protection and Practice* 4 (2025) 100093.

⁶⁹ United Nations Children's Fund, *Strengthening Administrative Data on Violence against Children: Challenges and promising practices from a review of country experiences*, UNICEF, New York, 2020., p. 6.

⁷⁰ Pereira et al., ‘Disclosure, reporting and help seeking among child survivors of violence: a crosscountry analysis’, *BMC Public Health* (2020) 20:1051.

⁷¹ United Nations Economic Commission for Europe, *Statistics on Children — Spotlight...*, pp. 21–27.

⁷² Pereda, Noemí, et al., ‘The International Epidemiology of Child Sexual Abuse: A continuation of Finkelhor (1994)’, *Child Abuse & Neglect*, vol. 33, no. 6, 2009, pp. 331–342; Collin-Vézina, Delphine, Isabelle Daigneault and Martine Hébert, ‘Lessons Learned from Child Sexual Abuse Research: Prevalence, outcomes, and preventive strategies’, *Child and Adolescent Psychiatry and Mental Health*, vol. 7, no. 22, 2013, pp. 1–9.

⁷³ Metadata provide informational aspects of other data. Metadata for indicators include definitions, data sources, methodologies and classifications. Metadata serve as an essential resource for researchers, policymakers and advocates seeking to understand and leverage the data. The metadata for the SDG indicators are part of the global SDG indicator framework, which was developed by the Inter-Agency and Expert Group on SDG Indicators and agreed upon at the 48th session of the United Nations Statistical Commission held in March 2017. For more, see: *SDG Indicators*, <<https://unstats.un.org/sdgs/indicators/indicators-list/>>. The TransMonEE NSO network revised the set of child protection indicators for which the NSOs are collecting data on an annual basis back in 2019 including the metadata, which are part of the country data compilation toolkit and can be found at *TransMonEE Country Data Compilation*, <<https://www.transmonee.org/europe-central-asia-child-rights-database-explorer>>.

⁷⁴ As of August 2025, 18 countries and territories in ECA have

completed one or more MICS surveys (Surveys — UNICEF MICS, <<https://mics.unicef.org/surveys>>, accessed 08 August 2025); 11 countries have completed one or more DHS surveys (The DHS Program — Country List, <<https://www.dhsprogram.com/Countries/Country-List.cfm>>, accessed 08 August 2025); 47 countries have completed one or more HBSC surveys (Countries — HBSC study, <<https://hbsc.org/network/countries/>>, accessed 08 August 2025); all EU countries implemented the new EU-GBV survey between 2020 and 2024 (Eurostat — Gender-based violence against women (GBV), <https://ec.europa.eu/eurostat/cache/metadata/en/gbv_sims.htm>, accessed 08 August 2025); and one country (Republic of Moldova) conducted the Violence Against Children and Youth Survey (VACS), a programme led by the U.S. Centers for Disease Control and Prevention as part of the Together for Girls partnership (Violence Against Children and Youth Surveys — Together for Girls, <<https://www.togetherforgirls.org/en/about-the-vacs>>, accessed 08 August 2025). An example of a national survey using VAC modules aligned with international programmes is Türkiye's 2022 Child Survey (Türkiye Child Survey 2022 — UNICEF Türkiye, <<https://www.unicef.org/turkiye/en/reports/t%C3%BCrkiye-child-survey-2022>>, accessed 08 August 2025).

⁷⁵ United Nations Economic Commission for Europe, *Statistics on Children — Spotlight...*, p. 116.

⁷⁶ Some of the challenges using data sources like registers of helplines and ombudsperson to monitor VAC include, for example, limitations of the amount of disaggregated data that these sources can collect because of confidentiality, restrictions of the data collection system, among others. For instance, in a 2020 study during the COVID-19 pandemic, which collected data from child helplines across the world, the helplines could not report on “new” and “repeat” callers. Petrowski, N.; Cappa, C.; Pereira, A.; Mason, H.; Daban, R. A., ‘Violence against children during COVID19: Assessing and understanding change in use of helplines’, *Child Abuse & Neglect* 116 (2021) 104757. More on responsible use of data for children from different sources can be found at Responsible Data for Children, <<https://rd4c.org/>>, accessed 11 September 2025.

⁷⁷ Child Helpline International members in the five countries engaged in this exercise include: Ukraine (La Strada), Poland (FDDS), Hungary (Kék Vonal), Slovakia (Linka Detskej Istoty), and Romania (Asociația Telefonul Copilului). Child Helpline International, *Children and young people affected by the war in Ukraine. Child Helpline Data*, in partnership with Terre des Hommes Netherlands, January 2025. For other good data practices, see: United Nations Children's Fund, *Strengthening Administrative Data on Violence against Children: Challenges and promising practices from a review of country experiences*, United Nations Children's Fund, New York, 2020.

⁷⁸ United Nations Children's Fund, *International Classification of Violence against Children*, p. 42.

⁷⁹ “An individual perpetrator can be a family member, a non-family household member, an intimate partner, a peer or schoolmate, as well as a person with formal authority, an employer, a clergy, sports coach or training staff, staff of non-governmental organizations, UN staff, a procurer/pimp, a stranger or another perpetrator.” See: United Nations Children's Fund, *International Classification of Violence against Children*, p. 40.

⁸⁰ “Capturing lifetime experience of sexual violence and past year experience are both important VAC prevalence measures, as evidence shows that disclosure rates of sexual violence increase with age and measuring both enables also age group comparisons.” See: United Nations Economic Commission for Europe, *Statistics on Children — Spotlight...*, p. 32.

⁸¹ The UK has released several statistical reports over the past years based on the CSEW data that explore specific aspects of VAC, such as childhood victimization and negative behaviours of children aged 10 to 15 living in a household with an adult who reported experiencing domestic abuse, substance misuse

and mental ill-health, among others. See: Office for National Statistics (United Kingdom), Centre for Crime Statistics, 'Guide to finding crime statistics — Statistics about crimes experienced by children', Last revised 28 July 2025.

⁸² United Nations Economic Commission for Europe and United Nations Children's Fund, *Improving ONS statistics on violence against children*, Note by the Office for National Statistics, Expert meeting on statistics on children, Geneva, 4–6 March 2024, Working paper 19, Geneva, 7 February 2024.

⁸³ United Nations Children's Fund, *International Classification of Violence against Children*, p. 37.

⁸⁴ SDG 16.1.1 metadata: *Metadata160101.pdf*. <<https://unstats.un.org/sdgs/metadata/?Goal=16&Target=16.1>>

⁸⁵ United Nations Children's Fund, *International Classification of Violence against Children*, pp. 26–27. Conflict-related deaths (SDG indicator 16.1.2) are not covered by this report as these are beyond the intended scope.

⁸⁶ United Nations Office on Drugs and Crime SDG database, <<https://dataunodc.un.org/dp-sdg-16-1-1>>, accessed 11 September 2025.

⁸⁷ When national data are unavailable, modelled estimates are used; see *United Nations Surveys on Crime Trends and the Operations of Criminal Justice Systems*, <<https://www.unodc.org/unodc/en/data-and-analysis/United-Nations-Surveys-on-Crime-Trends-and-the-Operations-of-Criminal-Justice-Systems.html>>.

⁸⁸ Availability of disaggregated data for the age group 0–17 is limited. For example, the variable 'relationship with the perpetrator' is not available for this age group, as many countries and territories do not collect this data systematically.

⁸⁹ United Nations Children's Fund, *UNICEF Data: Monitoring the situation of children and women — Violent deaths*, <<https://data.unicef.org/topic/child-protection/violence/violent-deaths/>> accessed 14 August 2025.

⁹⁰ Regional estimate calculated by UNODC, DP-Intentional-Homicide-Victims Data UNODC, <<https://dataunodc.un.org/dp-intentional-homicide-victims>>, accessed 14 August 2025.

⁹¹ United Nations Office on Drugs and Crime, *Global Study on Homicide 2023*, Vienna, 2023, pp. 57–58.

⁹² United Nations Office on Drugs and Crime, *Gender-related killings of women and girls (femicide/feminicide). Global estimates of female intimate partner/family-related homicides in 2022*, Vienna, 2023, p. 3.

⁹³ Ibid.

⁹⁴ Note that a further analysis of the age group-specific data by sex could not be conducted due to data limitations. Global evidence suggests that the overall homicide rate increases with age, with the difference in sex increasing distinctly after the age of 14. United Nations Office on Drugs and Crime, *Global Study on Homicide 2019*, Booklet VI, *Killing of Children and Young Adults*, United Nations publication, 2019.

⁹⁵ Annex 5, Figure 26: child victims of intentional homicide across ECA for 39 countries and territories (data from DP-Intentional-Homicide-Victims Data UNODC), <<https://dataunodc.un.org/dp-intentional-homicide-victims>>, accessed 10 August 2025.

⁹⁶ *Global Study on Homicide 2023*, pp. 57–58.

⁹⁷ Annex 5, Figure 27: estimated rate of child victims of intentional homicide across ECA (data from DP-Intentional-Homicide-Victims Data UNODC), <<https://dataunodc.un.org/dp-intentional-homicide-victims>>, accessed 10 August 2025.

⁹⁸ Regional estimates sourced from UNODC (see note 90).

⁹⁹ Number of countries and territories reporting for population aged 0–17 varied from 21 to 32 per year (2015–2023).

¹⁰⁰ Data extracted from UNODC, DP-Intentional-Homicide-Victims Data UNODC <<https://dataunodc.un.org/dp-intentional-homicide-victims>> (accessed 10 August 2025).

¹⁰¹ "Interpersonal homicide manifests itself in the context of violent interactions between people, be they intimate partners, family members, acquaintances or even strangers. The defining characteristic of interpersonal homicide is that the intentional killing of another person is a means of resolving conflict and/or punishing the victim...". "Interpersonal homicide within the family has a clear gender dimension...the available data show that women and girls are disproportionately affected by homicidal violence within the family, perpetrated by intimate partners or other family members", United Nations Office on Drugs and Crime, *Global Study on Homicide 2023*, pp. 58–59 and pp. 101–102.

¹⁰² SDG 16.1.2 metadata: *SDG Indicators — SDG Indicators*, <<https://unstats.un.org/sdgs/indicators/indicators-list/>>.

¹⁰³ United Nations, 'Ukraine war: UNICEF highlights 40 per cent rise in children killed this year', *UN News*, 26 April 2024.

¹⁰⁴ *Global Study on Homicide 2023*, New York, 2023, pp. 58–59.

¹⁰⁵ United Nations Children's Fund, *International Classification of Violence against Children*, UNICEF, New York, 2023, p. 19.

¹⁰⁶ UNODC uses "family member, intimate partner, other perpetrator known to the victim, perpetrator to victim relationship unknown, perpetrator unknown to the victim", UNODC database. ICVAC distinguishes between "individual perpetrator" and "group perpetrator". The former includes: "family member, non-family household member, intimate partner, peer or schoolmate, people with formal authority, employer (formal or informal) or co-worker, clergy (including priest, nun, pastor, imam), sports coach or training staff, staff of non-governmental organisations, UN staff, procurer/pimp, other perpetrator, stranger, perpetrator not known". Source: United Nations Children's Fund, *International Classification of Violence against Children*, p. 40.

¹⁰⁷ United Nations Children's Fund, *International Classification of Violence against Children*, p. 39.

¹⁰⁸ Ibid., p. 28.

¹⁰⁹ SDG indicator 16.2.1 metadata: *SDG Indicators — SDG Indicators*, <<https://unstats.un.org/sdgs/metadata/>>.

¹¹⁰ MICS data obtained from United Nations Children's Fund MICS staff; DHS data extracted from DHS STATcompiler <<https://www.dhsprogram.com/data/statcompiler.cfm>>; national survey data from Türkiye's 2022 Child Survey (*Türkiye Child Survey 2022 | United Nations Children's Fund Türkiye*) <<https://www.unicef.org/turkiye/en/reports/t%C3%BCrkiye-child-survey-2022>>. Despite the reliability of their data, the MICS and DHS have limitations. Like most household surveys, they are repeated only every three to five years, sometimes more. As a result, not enough data points are available for all countries and territories with MICS or DHS data to conduct a regional trend analysis. While the MICS and DHS have a standard methodology, variations and deviations have been identified across countries and territories implementing these survey programmes (e.g., age groups covered and respondents providing information). The "Child discipline module" in the MICS and DHS surveys captures how children aged 1–14 are disciplined by their parents or caregivers. One child per household is randomly selected, and a knowledgeable adult is asked about disciplinary practices used in the past month. The methods are grouped into four categories: (a) nonviolent discipline: includes constructive approaches such as explaining why behavior was wrong, assigning an alternative task, or restricting privileges (e.g., not allowing the child to go out or forbidding something the child liked); (b) psychological aggression: involves verbal methods intended to control or correct behavior, such as shouting, yelling, or calling the child names like "lazy" or "dumb"; (c) physical punishment: covers actions like spanking, slapping, or hitting with a hand or object (e.g., belt or stick), as well as shaking the child or hitting them on

various body parts; and (d) severe physical punishment: a subset of physical punishment, including hitting the child on the head, face, or ears, or beating them repeatedly as hard as possible. Note that data from the EU-GBV survey on childhood experience of physical violence by parents could not be included into the analysis of MICS/DHS survey data due to the differences in survey design and methodology including target population.

¹¹¹ All references to Kosovo should be understood to be in the context of United Nations Security Council resolution (UNSCR) 1244 (1999). For Kosovo, “Roma settlements” include Roma, as well as Ashkali and Egyptian communities.

¹¹² World Health Organization, *Corporal punishment of children: The public health impact*, Geneva, 2025.

¹¹³ See the ICVAC definitions and illustrative examples of physical VAC sub-categories 201 (severe assault), 202 (minor assault), 203 (Isolating a child) and 209 (other acts of physical violence against a child not elsewhere classified). United Nations Children’s Fund, *International Classification of Violence against Children*, pp. 28–29.

¹¹⁴ For more details, see the section on ICVAC Category 4: Psychological violence against children.

¹¹⁵ World Health Organization, *Corporal punishment of children: The public health impact*, pp. 8–10.

¹¹⁶ Ibid., pp. 9–10.

¹¹⁷ Nurturing Care framework: *What is Nurturing Care?*, <<https://nurturing-care.org/what-is-nurturing-care?>>, accessed 11 September 2025. Nurturing care does not mean that parents and caregivers should not teach children to learn self-control and acceptable behaviour.

¹¹⁸ World Health Organization, *Corporal punishment of children: the public health impact*, Geneva, 2025, pp. 4–7.

¹¹⁹ End Corporal Punishment, *Progress towards prohibiting all corporal punishment in Europe and Central Asia*, Last updated August 2024, pp. 1–2. In addition to the countries and territories listed in the “Legality table”, the Government of the Czech Republic approved on 12 June 2024, by Resolution No. 377, an amendment to the draft law amending Act No. 89/2012 Coll., Section 858 of the Civil Code. This Section defines the scope of parental responsibility and has been amended to explicitly prohibit all forms of corporal punishment and other degrading practices in child-rearing. This change will come into effect as of 1 January 2026.

¹²⁰ The data presented are the latest available survey data from 15 countries and territories in the region that are using the “child discipline module” (MICS, DHS). The data has been rounded. Note the following deviations: Albania 2017–18 DHS covers children aged 2–14 years and the Türkiye 2022 Child Survey children aged 1–17 years. Data from countries and territories that recently conducted a MICS or DHS were only included into this report with permission of the respective government.

¹²¹ World Health Organization, *Corporal punishment of children: the public health impact*, p. 5.

¹²² Global Partnership to End Violence against Children, *The positive impact of prohibition of corporal punishment on children’s lives: Messages from research*, Global Partnership to End Violence against Children, New York, 2023. Countries in ECA included: Austria, Denmark, Finland, Germany, Poland, Romania, Sweden and Wales. The study used MICS data on “child discipline”.

¹²³ The 10 countries and territories include: Azerbaijan (MICS 2023), Belarus (MICS 2019), Georgia (MICS 2018), Kosovo (MICS 2020), Kyrgyzstan (MICS 2023), Montenegro (MICS 2018), North Macedonia (MICS 2019), Serbia (MICS 2019), Turkmenistan (MICS 2019) and Uzbekistan (MICS 2022). Age groups include children aged 1–2, 3–4, 5–9 and 10–14. The MICS datasets also allow an analysis by other important variables, such as urban/rural, wealth quintile, child functional difficulties, accessible at <<https://mics.unicef.org/surveys>>.

¹²⁴ The survey data used are extracted from the UNICEF’s ECA Child Equity Database, which includes the ECA Child Inequity Dashboard | UNICEF TransMonEE, <<https://www.transmonee.org/eca-child-inequity-dashboard>>, accessed 11 September 2025.

¹²⁵ United Nations Children’s Fund, *International Classification of Violence against Children*, p. 18.

¹²⁶ World Health Organization, *Corporal punishment of children: The public health impact*, Geneva, 2025, pp. 13–15; United Nations Children’s Fund, *International Classification of Violence against Children*, p. 28.

¹²⁷ World Health Organization, *Corporal punishment of children: The public health impact*.

¹²⁸ International Organization for Migration, IMAS — Institute for Marketing and Sociological Studies, and the Centers for Disease Control and Prevention, *Violence Against Children and Youth in the Republic of Moldova: Findings from a National Survey*, Chişinău: Ministry of Health, Labour and Social Protection, 2019. Note that the data collected through the VACS are not comparable with those collected by MICS, DHS or the EU-GBV due to differences in design and methodology.

¹²⁹ Together for Girls is “a global partnership working to end violence against children and adolescents, with special attention to sexual violence. Through data and advocacy, our global partnership drives action to break cycles of violence and ensure prevention, healing and justice”. Together for Girls, <<https://www.togetherforgirls.org/en>>, accessed 11 September 2025.

¹³⁰ Massetti, G. M.; Chiang, L.; Mercy, J.; Fernandez, B.; Ligiero, D.; Hart, C.; Centers for Disease Control and Prevention, *Linking Violence Against Children and Youth Surveys to Coordinated and Effective Action: CDC and the Together for Girls Partnership*, 2020.

¹³¹ United Nations Children’s Fund, *International Classification of Violence against Children*, p. 30.

¹³² United Nations Children’s Fund, *When Numbers Demand Action*.

¹³³ The estimate for Europe alone was not published in UNICEF’s 2024 report ‘When Numbers Demand Action’ (see footnote 91 for the reference), as the report used the SDG geographic groupings of regions (see: Regional groupings – SDG Indicators). <<https://unstats.un.org/sdgs/indicators/regional-groups/>> UNICEF calculated the Europe estimate using the same data and methodology as the 2024 report.

¹³⁴ United Nations Children’s Fund, *When Numbers Demand Action*, p. 1.

¹³⁵ The concept of childhood used in the EU-GBV refers to the period in the respondent’s life before the age of 15. According to the EU-GBV Methodological manual: “Violence experienced in childhood covers, first, violence perpetrated by parents, such as belittling or humiliating a child verbally or serious physical violence (intentional hitting, kicking, beating with an object like a stick or a belt, burning or stabbing). Second, it covers sexual violence perpetrated against any person before the age of 15” and “Sexual violence in childhood refers to rape, unwanted touching of private parts, being forced/made to pose in front of a person or in front of camera or being forced/ made to touch someone’s private parts, where such abuse is experienced before the age of 15.” Source: European Union, *Methodological manual for the EU survey on gender-based violence against women and other forms of inter-personal violence (EU-GBV)*, 2021 edition, Eurostat manuals and guidelines, Publications Office of the European Union, Luxembourg, 2021, pp. 21–22.

¹³⁶ The Eurostat GBV database is accessible at Database - Gender-based violence - Eurostat, <<https://ec.europa.eu/eurostat/web/gender-based-violence/database>>, accessed 11 September 2025. Eurostat acts as coordinator for the national surveys, which are administered by Member States through their National Statistical Offices. Given that the survey programme started in 2021, no

trend analysis is possible at this point. Data for males are not collected in the EU-GBV.

¹³⁷ For more details on the indicator and related concepts, definitions and survey questions, see: European Union, *Methodological manual for the EU survey on gender-based violence against women and other forms of inter-personal violence (EU-GBV)*, 2021 edition, Eurostat manuals and guidelines, Publications Office of the European Union, Luxembourg, 2021.

¹³⁸ Timmerman, M., Schreuder, P., Sexual abuse of children and youth in residential care: An international review, *Aggression and Violent Behavior*, Volume 19, Issue 6, 2014, pages 715-720, ISSN 1359-1789, <https://doi.org/10.1016/j.avb.2014.09.001>.

¹³⁹ Office of the Special Representative on Sexual Violence in Conflict, 'Conflict-related sexual violence — Report of the United Nations Secretary-General', S/2024/292, April 2024.

¹⁴⁰ Office of the Special Representative for Children and Armed Conflict, *The Six Grave Violations*.

¹⁴¹ Cagney, J.; Spencer, C.; Flor, L.; Herbert, M.; Khalil, M.; O'Connell, E.; Mullany, E.; Bustreo, F.; Chandan, J. S.; Metheny, N.; Knaul, F.; Gakidou, E., 'Prevalence of sexual violence against children and age at first exposure: a global analysis (1990–2023)', *Lancet* 2025; 405: 1817–1836.

¹⁴² United Nations Children's Fund, *When Numbers Demand Action*.

¹⁴³ Pereira et al., *BMC Public Health* (2020) 20:1051.

¹⁴⁴ Chiang, L.; Miedema, S.; Saul, J.; Mercy, J.; Brooks, A.; Butchart, A.; et al., 'Successful child sexual violence prevention efforts start with data: how the Violence Against Children and Youth Survey helped curb the tide of child sexual violence in 20 countries', *BMJ Paediatrics Open* 2024; 8:e002497.

¹⁴⁵ Ibid.

¹⁴⁶ Vera-Gray, F. (2023), *Key Messages from Research on the Impacts of Child Sexual Abuse*, Barking: Centre of Expertise on Child Sexual Abuse.

¹⁴⁷ World Health Organization, INSPIRE — *Seven Strategies for Ending Violence Against Children*, Geneva, 2016, ch. "Response and support services".

¹⁴⁸ Eurostat EUGBV data analysis and findings, see *Database — Gender-based violence — Eurostat*. <https://ec.europa.eu/eurostat/web/gender-based-violence/database>

¹⁴⁹ While data are available for 27 out of the 29 EU countries, only 19 EU countries have reliable data according to the Eurostat DataBrowser.

¹⁵⁰ United Nations Children's Fund, *When Numbers Demand Action*, p. 3.

¹⁵¹ Ibid.

¹⁵² Country-specific data have been extracted from the Eurostat DataBrowser, accessed 25 July 2025.

¹⁵³ Note that only 10 countries in the Eurostat EU-GBV database had disaggregated data for official reporting.

¹⁵⁴ United Nations Children's Fund, 'UNICEF Data: Monitoring the situation of children and women — Sexual violence', *United Nations Children's Fund Data*.

¹⁵⁴ National Statistics Portal of Latvia.

¹⁵⁵ United Nations Children's Fund, *International Classification of Violence against Children*, p. 11.

¹⁵⁶ Ibid., p. 32.

¹⁵⁷ MICS data from United Nations Children's Fund MICS staff; DHS data from DHS STATcompiler; national survey data from Türkiye's 2022 Child Survey.

¹⁵⁸ United Nations Children's Fund, *International Classification of Violence against Children*, p. 32.

¹⁵⁹ World Health Organization, *Corporal punishment of children: The public health impact*, pp. 9-10.

¹⁶⁰ Ibid.

¹⁶¹ Doroudchi, A.; Zarenezhad, M.; Hosseinezhad, H.; et al., 'Psychological complications of children exposed to domestic violence: a systematic review', *Egyptian Journal of Forensic Sciences* (2023) 13:26.

¹⁶² Ibid.

¹⁶³ United Nations Population Fund, *Harmful Practices and Violence Against Women and Girls*, United Nations Population Fund, New York, 2020.

¹⁶⁴ World Health Organization, *Corporal punishment of children: The public health impact*, pp. 5-7.

¹⁶⁵ Global Partnership to End Violence against Children, *The positive impact of prohibition of corporal punishment on children's lives: messages from research*, New York, 2023. Countries in ECA included: Austria, Denmark, Finland, Germany, Poland, Romania, Sweden and Wales. The study used MICS data on "child discipline".

¹⁶⁶ The ten countries include: Azerbaijan (MICS 2023), Belarus (MICS 2019), Georgia (MICS 2018), Kosovo (MICS 2020), Kyrgyzstan (MICS 2023), Montenegro (MICS 2018), North Macedonia (MICS 2019), Serbia (MICS 2019), Turkmenistan (MICS 2019) and Uzbekistan (MICS 2022).

¹⁶⁷ United Nations Children's Fund, *International Classification of Violence against Children*, p. 35.

¹⁶⁸ Ibid., pp. 35-36.

¹⁶⁹ Ibid., p. 35.

¹⁷⁰ NSPCC, Protecting children from neglect, <https://learning.nspcc.org.uk/child-abuse-and-neglect/neglect>, accessed 11 September 2025.

¹⁷¹ World Health Organization, *Corporal punishment of children: The public health impact*.

¹⁷² NSPCC; ONS child neglect statistics (United Kingdom), <https://learning.nspcc.org.uk/research-resources/statistics-briefings/child-neglect> accessed 15 August 2025.

¹⁷³ For instance, neglect is not covered by the SDG indicators or other international monitoring and reporting frameworks that comprise VAC.

¹⁷⁴ Haworth, S.; Schaub, J.; Kidney E.; Montgomer, P., 'A Systematic Review of Measures of Child Neglect', *Research on Social Work Practice* 2024, Vol. 34(1) 17–40, <https://journals.sagepub.com/doi/pdf/10.1177/10497315221138066>, accessed 17 September 2025.

¹⁷⁵ Gibbs, J.; Coughlan B.; Morgan, T.; Mikushnica, A.; Phippard, S.; Crozier-Roche, F.; Drayak, T.; Graham, D.; Smith, J.; Duschinsky, R., 'Social Workers' Perceptions of the Nature of Child Neglect: A Systematic Literature Review', *British Journal of Social Work* (2024) 54, 3619–3637, <https://doi.org/10.1093/bjsw/bcae102>, accessed 17 September 2025.

¹⁷⁶ World Health Organization, *Violence Info — Child maltreatment*, <https://apps.who.int/violence-info/child-maltreatment/>, accessed 11 September 2025.

¹⁷⁷ International Organization for Migration; Institute for Marketing and Sociological Studies; Centers for Disease Control and Prevention, *Violence Against Children and Youth in the Republic of Moldova: Findings from a National Survey*, Chişinău: Ministry of Health, Labour and Social Protection, 2019.

¹⁷⁸ Department of Health Northern Ireland, NISRA, *Children's Social Care Statistics for Northern Ireland 2023/24*, Belfast, 2024, p. 19.

¹⁷⁹ Community Information Branch, Information Analysis Directorate, *Background Quality Report: 'Children's Social Care Statistics for Northern Ireland' and 'Quarterly Child Protection Statistics for Northern Ireland'*, Department of Health Northern Ireland, August 2021. UK Code of Practice for Statistics: About the Code — Code of Practice for Statistics, <<https://code.statisticsauthority.gov.uk/>>.

¹⁸⁰ To learn more about the child protection register, see Child Protection Register, <<https://www.health-ni.gov.uk/articles/child-protection-register>>, accessed 11 September 2025.

¹⁸¹ Pacella, R.; Monks, C.; Mathews, B.; Meinck, F., 'Prevalence of violence against children in the United Kingdom: A systematic review and metaanalysis', *Child Abuse & Neglect* 146 (2023) 106518.

¹⁸² Cosma, A.; Molcho, M.; Pickett, W., *A focus on adolescent peer violence and bullying in Europe, Central Asia and Canada*, HBSC international report, Vol. 2, WHO Regional Office for Europe, Copenhagen, 2024, p. 3.

¹⁸³ TransMonEE meeting reports are accessible at Meetings and webinars | UNICEF TransMonEE, <<https://www.transmonee.org/meetings-and-webinars>>, accessed 11 September 2025. An overview of the VAC indicators for which the TransMonEE network is collecting data including the "aggregate indicators" is available on the TransMonEE data explorer, Child Rights Monitoring Framework | UNICEF TransMonEE, <<https://www.transmonee.org/child-rights-monitoring-framework>>, accessed 11 September 2025.

¹⁸⁴ Administrative data on child victims of violence can further be used to monitor the number of child victims who access services and systems (e.g., justice) and in evaluating the quality and estimating the costs of services. For more on strengthening administrative data on VAC; see United Nations Children's Fund, *Strengthening Administrative Data on VAC*, 2020.

¹⁸⁵ As highlighted earlier in the report, there are limitations to using administrative data to understand the actual incidence of VAC given the low levels of disclosure and reporting of incidents. Consequently, these data are likely to undercount the actual number of children experiencing violence.

¹⁸⁶ World Health Organization, *INSPIRE*, pp. 74–81.

¹⁸⁷ TransMonEE Database Explorer: *TransMonEE Database Explorer* | United Nations Children's Fund TransMonEE, <<https://www.transmonee.org/europe-central-asia-child-rights-database-explorer>>, accessed 11 September 2025.

¹⁸⁸ The data from the EU-GBV for this indicator are accessible at: Women who have witnessed violence between parents during childhood, by type of perpetrator, <https://ec.europa.eu/eurostat/databrowser/view/gbv_ch_vbp/default/table?lang=en&category=livcon.gbv.gbv_ch>, accessed 11 September 2025.

¹⁸⁹ Mueller, I.; Tronick, E. 'Early Life Exposure to Violence: Developmental Consequences on Brain and Behavior'. *Front Behav Neurosci*. 2019 Jul 9;13:156, <<https://pmc.ncbi.nlm.nih.gov/articles/PMC6629780>>, accessed 11 September 2025.

¹⁹⁰ Children with disabilities are at higher risk of violence in all contexts, and less likely to report incidents, than children without disabilities. Fang, Z.; CernaTuroff, I.; Zhang, C.; Lu, M.; et al., 'Global estimates of violence against children with disabilities: an updated systematic review and metaanalysis', *The Lancet Child & Adolescent Health*, Volume 6, Issue 5, May 2022, pp. 313–323. Collecting and reporting disaggregated data on this group of children is part of countries' reporting duties to the Committee on the Rights of the Child and the Committee on the Rights of Persons with Disabilities. High rates of sexual violence (around 17 per cent) and intimate partner violence (about 30 per cent) were discovered among adolescents living with HIV in a prospective cohort study in South Africa, which explored associations with anti-retroviral treatment adherence and found that global evidence on these topics is limited. Cluver, L.D.; Zhou, S.; Orkin, M.;

Rudgard, W.; Meinck, F.; Langwenya, N.; et al. 'Impacts of intimate partner violence and sexual abuse on antiretroviral adherence among adolescents living with HIV in South Africa', *AIDS*. 2023 Mar 1;37(3):503–51, <<https://pmc.ncbi.nlm.nih.gov/articles/PMC9894135>>, accessed 17 September 2025.

¹⁹¹ Data for this indicator are collected and reported by the municipal Child Protection Units and the State Agency for Child Rights and Protection of Albania.

¹⁹² Age-disaggregated data are not available for 2017.

¹⁹³ United Nations Economic Commission for Europe, *Statistics on Children — Spotlight...*, p. 35.

¹⁹⁴ Improvement of Data on Children in Alternative Care | United Nations Children's Fund TransMonEE. <<https://www.transmonee.org/improvement-data-children-alternative-care>>

¹⁹⁵ United Nations Economic Commission for Europe, Conference of European Statisticians, *Terms of Reference for the Steering Group on Statistics on Children*, ECE/CES/BUR/2024/OCT/6 (approved 20 September 2024), Meeting of the 2023/2025 Bureau, Warsaw, Poland, 9–10 October 2024.

¹⁹⁶ See for example that United Nations Children's Fund 'ADaMM – Administrative data maturity model', which is a framework developed by UNICEF to guide and support countries in assessing the maturity level of countries or organizations in effectively managing and utilizing administrative data. UNICEF - Administrative Data Maturity Model, <<https://adamm.unicef.org/>>, accessed 11 September 2025.

¹⁹⁷ Primero: *Primero Information Management System and The CPIMS+*, <primero.org>, accessed 11 September 2025.

¹⁹⁸ ICVAC definitions of (a) physical bullying: "when a person or group repeatedly demonstrates aggressive physical behaviour against a child who cannot easily defend him or herself"; (b) sexual bullying: "refers to instances when a person or group repeatedly taunts, teases, threatens or harasses an individual in a sexual way and the victim cannot easily defend him or herself", (c) psychological bullying: "refers to repeated non-physical behaviour aimed at harassing, threatening or targeting a child who cannot easily defend him or herself", and (d) cyber-bullying: "refers to instances of bullying through electronic forms of communication. As with in-person bullying, the behaviour has to be aggressive, intentional, repeated (either through multiple acts over time or a single act with wide reach, remaining online indefinitely or being shared and posted by a number of people) and when the victim cannot easily defend him or herself". United Nations Children's Fund, *International Classification of Violence against Children*, pp. 28–33.

¹⁹⁹ HBSC study data browser: *Homepage — HBSC* (Topic: Bullying and violence), <<https://data-browser.hbsc.org/>>, accessed 11 September 2025. Some caution needs to be exercised when interpreting the HBSC survey findings given the survey's methodological constraints. For example, its age range prevents insights into the experiences of younger or older children, and the school-based sampling excludes children who dropped out of school and non-consenting students. Data collection occurs only every four years, limiting responsiveness to emerging trends, and self-administered questionnaires come with risks, such as misinterpretation of questions, recall error, and social desirability bias, among others. Finally, variations in question wording and operational definitions across countries can further compromise comparability.

²⁰⁰ Cosma, A.; Molcho, M.; Pickett, W., *HBSC Volume 2* (2024).

²⁰¹ United Nations Children's Fund, 'Bullying', UNICEF Data: Monitoring the situation of children and women, <<https://data.unicef.org/topic/child-protection/violence/bullying/>>, accessed 11 September 2025.

²⁰² United Nations Children's Fund, 'Bullying', UNICEF Parenting, <<https://www.unicef.org/parenting/child-care/bullying>>, accessed 11 September 2025.

²⁰³ Abregú-Crespo, R.; Garriz-Luis, A.; Ayora, M.; Martín-Martínez, N.; Cavone, V.; Ángel Carrasco, M. et al., School bullying in children and adolescents with neurodevelopmental and psychiatric conditions: a systematic review and meta-analysis, *The Lancet Child & Adolescent Health*, Volume 8, Issue 2, 122 – 134, <[https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642\(23\)00289-4/abstract](https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(23)00289-4/abstract)>, accessed 17 September 2025.

²⁰⁴ United Nations Children's Fund, 'Bullying', UNICEF Parenting, <<https://www.unicef.org/parenting/child-care/bullying>>, accessed 11 September 2025.

²⁰⁵ The HBSC dataset compiles and reports disaggregated data for some countries, such as the UK (data are available for three of the four nations, namely England, Scotland and Wales), Belgium (Flemish, France) and Denmark (including Greenland). Health Behaviour in School-aged Children (HBSC) study, Data Browser, <<https://data-browser.hbsc.org/>>, accessed 17 August 2025.

²⁰⁶ Cosma et al., *HBSC Volume 2*, p. 3.

²⁰⁷ Ibid., pp. 4-5.

²⁰⁸ Ibid., pp. 10-11.

²⁰⁹ Meaning the general direction in which data points evolve over time indicating patterns of increase or decrease in the HBSC dataset.

²¹⁰ For instance, in 30 out of 42 countries and territories, more girls aged 13 reported cyberbullying victimization than boys of the same age. For girls and boys at age 11 and 15, 23 countries and territories showed higher levels for girls than boys.

²¹¹ For the detailed analysis of data by country by sex and age, see Cosma et al., *HBSC Volume 2*.

²¹² Zhu, C.; Huang, S.; Evans, R.; Zhang, W., 'Cyberbullying Among Adolescents and Children: A Comprehensive Review of the Global Situation, Risk Factors, and Preventive Measures', *Frontiers in Public Health* 2021, 9:634909. Questions to measure bullying of any type (physical or psychological/relational including technology-facilitated) are being developed for the upcoming rounds of MICS building on the HBSC and the Global School-based Student Health Survey (GSHS). The GSHS is a school-based survey that uses a self-administered questionnaire to obtain data from adolescents aged 13 to 17 on behavioural risk factors and protective factors related to the leading causes of morbidity and mortality among children and adults worldwide. More information on the GSHS is available at Noncommunicable Disease Surveillance, Monitoring and Reporting, <<https://www.who.int/teams/noncommunicable-diseases/surveillance/systems-tools/global-school-based-student-health-survey>>, accessed 11 September 2025.

²¹³ Henares Montiel, J.; Benítez Hidalgo, V.; Ruiz Pérez, I.; Pastor Moreno, G.; Rodríguez Barranco, M., 'Cyberbullying and Associated Factors in Member Countries of the European Union: A Systematic Review and Meta-Analysis of Studies with Representative Population Samples', *Int. J. Environ. Res. Public Health* 2022, 19:7364.

²¹⁴ "ICTs encompass all technical means used to handle information and facilitate communication. These include radio, television, cellular phones, computer and network hardware and software, satellite systems, and the various services and applications associated with them, including emerging technologies such as generative artificial intelligence. Examples of other technological tools include stand-alone GPS tracking devices, drones or recording devices that are not connected to the Internet." United Nations Children's Fund, *Measuring Technology facilitated VAC*, 2025, p. 5.

²¹⁵ Henares-Montiel et al., 'Cyberbullying and Associated Factors.'

²¹⁶ The EU has, for instance, adopted numerous regulations and directives that contain articles aiming to protect children online, and thematic area 3 of the EU strategy on the Rights of the Child EU sets out actions to protect children from violence including online violence. European Parliament, 'Protecting children online: Selected EU, national and regional laws and initiatives', Briefing, 2025; European Commission, *EU Strategy on the Rights of the Child*, Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions, COM/2021/142 final, European Commission, Brussels, 24 March 2021. Measuring technology-facilitated VAC (also called online violence) has specific challenges. The following publication describes them and how to effectively address them in accordance with the ICVAC: United Nations Children's Fund, *Measuring Technology-facilitated Violence against Children in Line with the International Classification of Violence against Children*, UNICEF, New York, 2025.

²¹⁷ Research using this toolkit was conducted in Albania, Bulgaria, Kazakhstan, Montenegro and Serbia. Global Kids Online, 'Participating countries', <<http://globalkidsonline.net/countries/>>, accessed 11 September 2025.

²¹⁸ Research findings are published in short reports and thematic reports and data are included in a European database. More information on EU Kids Online can be accessed at: Global Kids Online, 'EU Kids Online', <<http://globalkidsonline.net/eu-kids-online/>>, accessed 11 September 2025.

²¹⁹ Studies were implemented in Armenia, Montenegro, North Macedonia and Serbia. Disrupting Harm research includes a household survey of children and parents and interviews with young survivors, justice professionals, frontline workers, and law enforcement officials, and an analysis of national legislation and policies. More information on the Disrupting Harm research can be found at United Nations Children's Fund Innocenti, 'Disrupting Harm — Research activities', UNICEF Innocenti project page, <<https://www.unicef.org/innocenti/projects/disrupting-harm>>, accessed 11 September 2025.

²²⁰ Child labour: ILO & United Nations Children's Fund, *Child Labour: Global estimates 2024*, trends and the road forward, ILO & United Nations Children's Fund, New York, 2025. License: CC BY 4.0. Child marriage: United Nations Children's Fund, *Is an End to Child Marriage within Reach? Latest trends and future prospects — 2023 update*, United Nations Children's Fund, New York, 2023.

²²¹ United Nations Children's Fund, *Is an End to Child Marriage within Reach?*

²²² Estimates have not been calculated for Western Europe. United Nations Children's Fund, *Is an End to Child Marriage within Reach?*

²²³ Girls Not Brides — The Global Partnership to End Child Marriage, 'Child marriage in conflict- and crisis-affected settings: Evidence and practice', October 2024, <<https://www.girlsnotbrides.org/learning-resources/child-marriage-and-humanitarian-contexts/>>, accessed 11 September 2025.

²²⁴ Hacettepe University Institute of Population Studies, 2018 *Turkey Demographic and Health Survey*. Hacettepe University Institute of Population Studies, T.R. Presidency of Turkey Directorate of Strategy and Budget and TÜBİTAK, Ankara, Turkey, 2019, p. 46.

²²⁵ Hacettepe University Institute of Population Studies, 2013 *Turkey Demographic and Health Survey*, Hacettepe University Institute of Population Studies, T.R. Ministry of Development and TÜBİTAK, Ankara, Turkey, 2013, p. 107.

²²⁶ United Nations Population Fund, *Child, Early and Forced Marriage in Turkey, Data Analysis of Turkey Demographic and Health Surveys 1993-2018*, December 2020, Ankara, Turkey, p. 26.

²²⁷ See Table 1: <<https://www.romaar.com/cocouk-evlilikleri.html>>, accessed 17 September 2025.

²²⁸ ILO & United Nations Children's Fund, *Child Labour: Global estimates 2024*.

²²⁹ According to the ILO, "hazardous child labour is work that is performed by children in dangerous and unhealthy conditions that can lead to a child being killed, injured or made ill as a result of poor safety and health standards or employment conditions". *Hazardous Child Labour | International Labour Organization* <https://rshiny.ilo.org/dataexplorer52/?lang=en&segment=indicator&id=CLD_XHAZ_SEX_AGE_NB_A> (accessed 11 September 2025).

²³⁰ Ibid., pp. 54–58.

²³¹ United Nations Office on Drugs and Crime, *Global Report on Trafficking in Persons 2024*, United Nations publication, Sales no.: E.24.XI.11, p. 25.

²³² Ibid.

²³³ GenderBased Violence Information Management System (GBVIMS), <<https://www.gbvims.com/>>, accessed 11 September 2025.

²³⁴ Tsunagu network, 'Tsunagu — Stronger together to transform the future', <<https://tsunagu.network/>>, accessed 11 September 2025.

²³⁵ The VAC in humanitarian settings review will be published in November 2025.

²³⁶ Alliance for Child Protection in Humanitarian Action, A Defining Moment: Bringing children living in humanitarian contexts into the global fold, EVAC Ministerial Conference statement, October 2024, <<https://alliancecpa.org/en/statement-defining-moment-children-living-humanitarian-contexts>>, accessed 8 September 2025; United Nations Children's Fund, Violence against Children in Humanitarian Settings in Europe and Central Asia: A Brief, United Nations Children's Fund Europe and Central Asia Regional Office, forthcoming November 2025.

²³⁷ The Committee on the Elimination of Discrimination against Women (CEDAW) in its General Recommendation 9 on Statistical data concerning the situation of women also stresses the need for governments to collect and utilize comprehensive, sex-disaggregated data to inform policies and programmes aimed at achieving gender equality. CEDAW General Recommendation 9 on statistical data concerning women: UN GAOR, 1989, Doc. No. A/44/38.

²³⁸ First Global Ministerial Conference on Ending Violence Against Children, 'Pledges — Data collection and monitoring', <<https://endviolenceagainstchildrenconference.org/pledges/?topic=data-collection-and-monitoring>>, accessed 14 August 2025.

²³⁹ United Nations Children's Fund, TransMonEE interactive dashboard — Recommendations of the Committee on the Rights of the Child, <<https://www.transmonee.org/recommendations-committee-rights-child>>, accessed 11 September 2025.

²⁴⁰ 'International Classification of Violence against Children' (ICVAC); 'Statistics on Children — Spotlight on children exposed to violence, in alternative care, and with disabilities' (UNECE Spotlight); 'ADaMM: Administrative Data Maturity Model'; 'Strengthening Administrative Data on Violence against Children'; Child Protection Monitoring and Evaluation Reference Group, *Measuring Violence against Children: Inventory and assessment of quantitative studies*, Division of Data, Research and Policy, United Nations Children's Fund, New York, 2014, <<https://data.unicef.org/wp-content/uploads/2014/11/Measuring-Violence-against-Children-%E2%80%93-Inventory-and-assessment-of-quantitative-studies.pdf>>, accessed 11 September 2025; United Nations Children's Fund, Europe and Central Asia — publications and project pages, <<https://www.unicef.org/eca/research-and-reports/publications>>, accessed 11 September 2025. For more information about similar projects funded by the European Union and supported by UNICEF, see UNICEF ECA

Technical Support Instrument, <<https://www.unicef.org/eca/technical-support-instrument>>, accessed 15 September 2025 and European Child Guarantee, <<https://www.unicef.org/eca/european-child-guarantee>>, accessed 15 September 2025.

²⁴¹ United Nations Economic Commission, *Guidance on Statistics on Children: Spotlight on children exposed to violence, in alternative care, and with a disability*, ECE/CES/STAT/2022/5, Geneva, 2022, pp. 37–38.

²⁴² Steering group ToR: *Statistics on Children SG ToR*, <<https://unece.org/statistics/documents/2024/10/working-documents/terms-reference-steering-group-statistics-children>>.

²⁴³ WHO has pledged that "a secretariat of specialists housed at WHO will design and deliver the Childhoods Without Violence initiative, which will subsume the following commitments: (a) measuring national, regional, and global prevalence rates; (b) monitoring implementation progress; (c) developing workforce capacity; (d) supporting in-country scale up, and (e) advancing global advocacy efforts". UNICEF has pledged that the organization "will provide technical and financial assistance to at least 50 countries and territories to support the collection of high-quality, international comparable prevalence data on VAC over the next five years". WHO & United Nations Children's Fund pledges (Childhoods Without Violence; technical and financial assistance to 50 countries) — *Organizations pledges — First Global Ministerial Conference on Ending Violence Against Children*, <<https://bogota.endviolenceagainstchildrenconference.org/organizations-pledges>>, accessed 15 August 2025.

²⁴⁴ Guidance and tools for country reviews: United Nations Children's Fund ADaMM and Strengthening Administrative Data on VAC, 2020.

²⁴⁵ Vulnerable groups include children with disabilities, refugee and migrant children, children in alternative residential care, homeless children, children deprived of liberty and children from ethnic minority groups, among other groups.

²⁴⁶ See the good practice example on Primero in this report.

²⁴⁷ See, for instance, the OSCE-led survey, <<https://www.osce.org/projects/survey-on-the-well-being-and-safety-of-women>>, accessed 15 September 2025.

²⁴⁸ A toolkit supporting ICVAC implementation is forthcoming.

²⁴⁹ Useful guidance on child participation from Save the Children, *Children and Participation* (2002); United Nations Children's Fund, *Guidance Note: Adolescent participation in UNICEF monitoring and evaluation*, October 2019.

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