**Template for Requests for Revisions to the DHS Model Questionnaires, Optional Modules, and Biomarkers for DHS-8 (2018-2023)**

# **Section I. Information about the requesting party**

1. Is this request being submitted on behalf of a group? If so, please provide the name of the group and the participating parties.

WHO and CDC

# **Section II. Indicator definition and rationale**

2. Please define the indicator or indicators you are requesting The DHS Program to incorporate. *Multiple indicators derived from a single set of questions should be included in the same submission.* (Response required)

* Prevalence of intimate partner physical violence victimization
* Prevalence of non-partner physical violence victimization
* Prevalence of intimate partner emotional violence victimization
* Prevalence in intimate partner sexual violence victimization
* Prevalence of non-partner sexual violence victimization
* Prevalence of intimate partner physical violence perpetration
* Prevalence of non-partner physical violence perpetration
* Prevalence of intimate partner emotional violence perpetration
* Prevalence of intimate partner sexual violence perpetration
* Prevalence of non-partner sexual violence perpetration
* Prevalence of witnessing physical violence in the home
* Prevalence of witnessing violence (‘attacks’) in the community
* Prevalence of transactional sex (females)

3. What is the rationale for measuring this indicator (each of these indicators) in DHS surveys? (Response required)

In general, the prevalence of violence is under-studied, yet we know from the scientific literature that violence is associated with a host of short and long-term health consequences. Thus violence prevention can in turn prevent other health issues and disease such as STI/HIV, mental health, gynecological/obstetric, and chronic disease and can contribute to a happier, healthier and more productive society.

The DHS Domestic Violence Module is excellent and has yielded critically important data – often novel, especially at the national level – for many countries. We strongly recommend including violence questions in the modal female and male questionnaires (i.e. required violence questions). There are three overall recommended changes to these questions:

1. Including non-residential partners, rather than restricting to married or cohabitating partners. The language in the proposed new questions has been expanded to include any partners.

Rationale: restricting these questions to only married or cohabitating partners can underestimate the true prevalence of intimate partner violence. This is particularly the case among age groups or in countries where non-cohabitating relationships may be common and more likely to be characterized by violence.

1. Including questions about intimate partner physical, emotional, and sexual violence. This would be consistent with the current module, expanding the question to also include emotional violence and capture both married/cohabitating and non-residential partners (see item #1 above).

Rationale: capturing different forms of violence can fully assess the experiences of victims and capture the overlap among different forms of violence. All forms of violence are strongly related to negative health, social, and economic consequences.

1. Including questions about physical and sexual violence by non-intimate partners.

Rationale: capturing a broader range of experiences of violence, beyond intimate partners, can fully assess violence exposures.

Specific justification for each proposed question

* Prevalence of intimate partner physical violence victimization
  + Rationale: intimate partner physical violence is highly prevalent and can have detrimental and long-lasting health outcomes. Questions on intimate partners as perpetrators should be asked specifically and separately from other perpetrators because otherwise it could be under-reported, particularly when partner abuse is socially acceptable.
* Prevalence of non-partner physical violence victimization
  + Rationale: non-partner physical violence is highly prevalent and can have detrimental and long-lasting health outcomes.
* Prevalence of intimate partner emotional violence victimization
  + Rationale: intimate partner emotional violence is highly prevalent and can have detrimental and long-lasting health outcomes. Questions on intimate partners as perpetrators should be asked specifically and separately from other perpetrators because otherwise it could be under-reported, particularly when partner abuse is socially acceptable.
* Prevalence in intimate partner sexual violence victimization
  + Rationale: intimate partner sexual violence is highly prevalent and can have detrimental and long-lasting health outcomes. Questions on intimate partners as perpetrators should be asked specifically and separately from other perpetrators because otherwise it could be under-reported, particularly when partner abuse is socially acceptable.
* Prevalence of non-partner sexual violence victimization
  + Rationale: non-partner sexual violence is highly prevalent and can have detrimental and long-lasting health outcomes. Questions on intimate partners as perpetrators should be asked specifically and separately from other perpetrators because otherwise it could be under-reported, particularly when partner abuse is socially acceptable.
* Prevalence of intimate partner physical violence perpetration
  + Recent research has demonstrated that respondents are willing to disclose perpetration behavior. Perpetration of intimate partner physical violence is highly prevalent and is associated with a history of violence victimization. Understanding more about perpetrators can also help with prevention efforts. As with violence victimization, intimate partners should be asked about specifically and separately from other victims.
* Prevalence of non-partner physical violence perpetration
  + Recent research has demonstrated that respondents are willing to disclose perpetration behavior. Perpetration of intimate partner physical violence is highly prevalent and is associated with a history of violence victimization. Understanding more about perpetrators can also help with prevention efforts.
* Prevalence of intimate partner emotional violence perpetration
  + Recent research has demonstrated that respondents are willing to disclose perpetration behavior. Perpetration of intimate partner emotional violence is highly prevalent and is associated with a history of violence victimization. Understanding more about perpetrators can also help with prevention efforts. As with violence victimization, intimate partners should be asked about specifically and separately from other victims.
* Prevalence of intimate partner sexual violence perpetration
  + Recent research has demonstrated that respondents are willing to disclose perpetration behavior. Perpetration of intimate partner sexual violence is highly prevalent and is associated with a history of violence victimization. Understanding more about perpetrators can also help with prevention efforts. As with violence victimization, intimate partners should be asked about specifically and separately from other victims.
* Prevalence of non-partner sexual violence perpetration
  + Recent research has demonstrated that respondents are willing to disclose perpetration behavior. Perpetration of intimate partner sexual violence is highly prevalent and is associated with a history of violence victimization.
* Prevalence of witnessing physical violence in the home
  + Witnessing violence in the home is associated with violence victimization, perpetration and host of other poor health outcomes.
* Prevalence of witnessing violence (‘attacks’) in the community
  + While not researched as much as witnessing violence in the home, witnessing violence in the community is also associated with violence victimization, perpetration and a host of other poor health outcomes, particularly for boys and young men.
* Prevalence of transactional sex
  + While transactional sex is not violence, it is exploitative in nature and associated with violence and with other poor health outcomes. It has been theorized and studies as a driver of HIV, particularly in the geographic context of sub-Saharan Africa. A group or researchers have been studying how to measure transactional sex, conducting cognitive tests. Their paper recently published in the Journal of the International AIDS Society makes a strong case for specific wording. The CDC has used this wording on their Violence Against Children Surveys (VACS) and have found significantly higher prevalence in the countries that have used the new wording, suggesting the new wording is a better measure of the phenomenon.

# **Section III. Proposed additions/revisions to the questionnaires or biomarkers**

4. Please describe the requested addition or revision.

*If the requested change is the addition of new questions to the DHS questionnaires or modules, complete questions 4.1 and 4.1.1. If the requested change is a revision to existing questions, complete question 4.2. If the change relates to anthropometry or a biomarker, please complete question 4.3.*

4.1. **For additions**: If you have developed a question or set of questions to measure the indicator(s), please provide them in the space below or in a separate file attached with your submission.

Please find the questions in a separate document. Due to formatting, it would not easily paste into this space.

4.1.1 If requesting multiple questions, please specify the relative priority of each new question.

Priority #1- questions on victimization

Priority # 2- questions on perpetration

Priority #3- question on witnessing violence in the home

Priority #4- question on witnessing violence in the community

Priority #5- questions on transactional sex

4.2. **For revisions to existing questions**: Please specify the DHS-7 question number, the proposed revision to the question, and the rationale.

|  |  |  |  |
| --- | --- | --- | --- |
| **DHS-7 question number** | **DHS-7 question text** | **Proposed new question** | **Rationale** |
| 726 (female) | In the past 12 months have you had sex or been sexually involved with anyone because he gave you or told you he would give you gifts, cash, or anything else? | In the past 12 months did you enter into a sexual relationship with a man mainly in order to get things that you need, money, gifts or other things that are important to you? | This wording has been carefully researched and cognitively tested by researchers involved in the STRYVE London School group, focused on understanding transactional sex, including how to best measure it. |
| 421 (male) | In the past 12 months have you given any gifts or other goods in order to have sex or to become sexually involved with anyone? | In the past 12 months have you given a woman who is not your wife and also not a sex worker money, gifts or helped her to pay for things mainly in order to start or continue a sexual relationship with her? | This wording has been carefully researched and cognitively tested by researchers involved in the STRYVE London School group, focused on understanding transactional sex, including how to best measure it. |

4.3. **For anthropometry and biomarkers**: Please describe the measurement procedures or specimen collection procedures, point-of-care or laboratory testing procedures (as relevant), and any recommendations for return of results.

Not applicable

5. Can any related questions be deleted from the questionnaire to make room for the proposed new content? If so please specify which questions using the DHS-7 question numbers.

The Domestic Violence Module (currently optional) can be drastically shortened if these questions are added to the modal female and male questionnaires.

6. What are the implications of these requested changes on measurement of trends using DHS data?

Since these violence questions are suggested new questions for the modal questionnaire, the only implication for trend data is the ability to have violence estimates across all DHS countries going forward.

The transactional sex questions are changes to existing measures and could lead to higher disclosure of transactional sex due to respondents having a clearer understanding of what is being asked of them. Further, for the males, the suggested revision specifically asks about transactional sex outside of their marriage. These could lead to some flux in the data, but we would argue that the new wording is a better measure and therefore worth some potential flux and resultant implication for trend data.

# **Section IV. Indicator calculation**

7. Indicate how to calculate the indicator(s). Include detailed definitions of the numerator and denominator of each individual indicator. If you have developed a tabulation plan for the indicator(s), please attach a file including the suggested table(s) with your submission.

|  |  |  |
| --- | --- | --- |
|  | Numerator | Denominator |
| Prevalence of intimate partner physical violence victimization | # of females/males who respond yes to intimate partner physical violence victimization | Total # of females/males who ever had a partner |
| Prevalence on non-partner physical violence victimization | # of females/males who respond yes to non-partner physical violence victimization | Total # of females/males |
| Prevalence of intimate partner emotional violence victimization | # of females/males who respond yes to intimate partner emotional violence victimization | Total # of females/males who ever had a partner |
| Prevalence of intimate partner sexual violence victimization | # of females/males who respond yes to intimate partner sexual violence victimization | Total # of females/males |
| Prevalence of non-partner physical violence victimization | # of females/males who respond yes to non-partner sexual violence victimization | Total # of females/males |
| Prevalence of intimate partner physical violence perpetration | # of females/males who respond yes to intimate partner physical violence perpetration | Total # of females/males who ever had a partner |
| Prevalence of non-partner physical violence perpetration | # of females/males who respond yes to non-partner physical violence perpetration | Total # of females/males |
| Prevalence of intimate partner emotional violence perpetration | # of females/males who respond yes to intimate partner emotional violence perpetration | Total # of females/males who ever had a partner |
| Prevalence of intimate partner sexual violence perpetration | # of females/males who respond yes to intimate partner sexual violence perpetration | Total # of females/males who ever had a partner |
| Prevalence of non-partner physical violence perpetration | # of females/males who respond yes to non-partner sexual violence perpetration | Total # of females/males |
| Prevalence of witnessing physical violence in the home | # of females/males who respond yes to witnessing physical violence in the home | Total # of females/males |
| Prevalence of witnessing physical violence (‘attacks’) in the community | # of females/males who respond yes to witnessing physical violence in the community | Total # of females/males |
| Prevalence of transactional sex | Total # of females who have ever had transactional sex | Total # of females/males who have ever had sex |

8. Is the indicator useful when measured at the national level, or is it useful only when disaggregated to specific subnational areas, such as endemicity zones or project intervention regions?

*For each indicator, select one of the three options by clicking in the appropriate box.*

|  |  |  |  |
| --- | --- | --- | --- |
| Indicator | Useful only for subnational endemicity zones or project intervention regions. A single estimate at the national level is not meaningful. | Useful at both national and subnational regions, as sample size allows. | Useful only at the national level. Subnational estimates are not needed. |
| Prevalence of intimate partner physical violence victimization |  |  |  |
| Prevalence on non-partner physical violence victimization |  |  |  |
| Prevalence of intimate partner emotional violence victimization |  |  |  |
| Prevalence of intimate partner sexual violence victimization |  |  |  |
| Prevalence of non-partner physical violence victimization |  |  |  |
| Prevalence of intimate partner physical violence perpetration |  |  |  |
| Prevalence of non-partner physical violence perpetration |  |  |  |
| Prevalence of intimate partner emotional violence perpetration |  |  |  |
| Prevalence of intimate partner sexual violence perpetration |  |  |  |
| Prevalence of non-partner physical violence perpetration |  |  |  |
| Prevalence of witnessing physical violence in the home |  |  |  |
| Prevalence of witnessing physical violence (‘attacks’) in the community |  |  |  |
| Prevalence of transactional sex |  |  |  |

# **Section V. Prior testing of the proposed question(s)**

9. Have the proposed questions undergone any formal validation; i.e., have the questions been tested against a “gold standard” to assess their accuracy? If yes, please describe how well or poorly the questions performed and/or provide a publication or report of the validation exercise (or a link).

Most of the questions we propose use wording from the DHS Domestic Violence Module (currently optional). Some of the questions are from the Violence Against Children Survey (VACS), e.g. the questions on perpetration and witnessing violence. The questions on transactional sex have been cognitively tested in Uganda and Tanzania.

10. Have the questions undergone any other kind of testing; e.g., cognitive testing, pilot testing. If so, please describe the results of the testing and/or provide a publication or report of the findings (or a link).

The Violence Against Children Survey has been cognitively tested in Malawi, Philippines and Colombia.

The transactional sex questions have been cognitively tested in Uganda and Tanzania.

The VACS questionnaire can be found here: <https://www.togetherforgirls.org/violence-children-surveys/>

The recent transactional sex measurement publication can be found here: <https://journals.lww.com/jaids/pages/articleviewer.aspx?year=2019&issue=04010&article=00001&type=Fulltext>

# **Section VI. Other considerations**

11. Please provide information relevant to the kinds of questions below, and/or anything else you wish to share with us about this indicator (these indicators).

* Describe how the data for this indicator are being used (or will be used).
  + Are the data produced by this indicator actionable?

Yes, there is significant public health research on prevention and response programming and policy. The WHO INSPIRE Technical Package (<https://www.who.int/violence_injury_prevention/violence/inspire/en/>) is meant to provide countries with a menu of prevention and response programs that are evidence-based for combatting violence against children. However, as with any public health prevention efforts, baseline data is critical for understanding the scope of the problem and ensuring proper resources are invested into the response programming. Violence data is often limited, particularly at the national level.

* + Who will use the data?

Governments (particularly those mandated to represent children, women and other gender minorities as well as those mandated with justice, criminal justice and health), NGOs, multilaterals, and donor countries.

* + What kinds of decisions will be made using these data?

How to prevent and respond to violence across the ecological scale.

* For what kinds of countries would the indicator(s) be most useful?

Global surveys that study violence as a topic area (especially the Violence Against Children Survey and the WHO Violence Against Women Survey) have found that while there is geographic differences in the rates of violence, it is a major public health problem throughout the globe. All countries should benefit from these data. However, given that violence may be a driver of HIV, these data may be particularly useful in countries with a generalized HIV epidemic.

* Does the DHS survey offer any particular advantage over other available data sources for measuring this indicator? If so, what?

Given that the DHS has operationalized the optional Domestic Violence module for several years, it is well-placed to include violence questions on the modal female and male questionnaires. DHS has an understanding of the ethical and safety considerations that need to be in place for violence surveys to be safely asked in the context of a household survey. Further, DHS partners are already invested in understanding the public health impact that violence has on societies and its association with other public health issues.