Endline Assessment of Changes to Community Knowledge, Attitudes, and Practices Regarding the Commercial Sexual Exploitation of Children in Coastal Kenya

Context

As a part of its partnership with the U.S. Department of State’s Office to Monitor and Combat Trafficking in Persons (TIP Office), the Global Fund to End Modern Slavery (GFEMS) launched the “Building A Future” (BAF) project to combat the commercial sexual exploitation of children (CSEC) in Kwale and Kilifi counties of Kenya. Implemented by Terre des Hommes (TdH) from November 2020 to October 2022, BAF focused on implementing community-based prevention methods, formal education for young survivors, vocational skills training, apprenticeships and job skilling for older survivors, and improvement of household livelihoods for the most vulnerable families of survivors of CSEC. Targeting known sex trafficking hotspots in coastal Kenya, the project worked to address both the supply of vulnerable individuals and the enabling environments that allow CSEC to persist.

NORC at the University of Chicago was contracted by GFEMS to lead an independent evaluation to assess whether BAF’s package of community interventions led to measurable change in community knowledge, attitudes, and practices (KAP) vis-à-vis CSEC in coastal Kenya. Specific evaluation questions include:

1. **Knowledge.** To what extent did TdH-BAF increase awareness of CSEC victim identification, reporting channels, and referral mechanisms among community leaders, schools, and households?

2. **Attitudes.** To what extent did TdH-BAF improve beliefs among households around positive social norms that discourage CSEC?

3. **Practices.** To what extent did TdH-BAF improve CSEC reporting, willingness to report/intervene, case monitoring, and use of response and referral pathways among community leaders and schools?
This quantitative performance evaluation employed two approaches to examine changes in community KAP. The first approach is pre-post outcomes assessment, which examines statistical changes in KAP outcomes between baseline (pre-intervention) and endline (post-intervention). The second is multiple regression analysis, which examines statistical relationships between proxies for BAF program exposure and KAP outcomes at endline.

### Key Endline Findings

- **There is evidence of positive impact of the BAF program on community KAP.** Statistical models at endline show a consistent, positive relationship between exposure to CSEC-related advocacy activities and KAP of program participants. Holding all else constant, individuals that participated in CSEC trainings, dialogues, or forums in the past year were 23 percent more likely to be familiar with the term CSEC, 29 percent more likely to watch for signs that children in the household may be subject to CSEC, 7 percent more likely to know about the legal consequences of CSEC, and 2.5 percent more likely to believe local perpetrators should be arrested.

- **Knowledge about reporting channels other than traditional authorities and the police remains low.** At endline, less than 10 percent of households exposed to BAF programming know about the role that Child Protection Committees, the Department of Children's Services, and Childline Kenya play in CSEC reporting and monitoring, and nearly two-thirds of school children still do not know how to report known CSEC cases, according to their Head Teachers. This suggests that further investigation is required into how to improve programming to increase awareness around CSEC victim identification, reporting channels, and referral mechanisms.

- **Respondent knowledge about the negative effects CSEC has on the mental health of victims has improved since baseline.** Survey participants that were exposed to BAF reported being more cognizant of the negative effects related to reproductive health and schooling as well as more likely to acknowledge the negative effects CSEC has on victims’ mental health and self-esteem. Specifically, the proportion of respondents reporting negative effects on mental health and self-esteem increased 13 and 6 percentage reports, respectively, between baseline and endline.
At endline, BAF participants demonstrated a positive shift in attitudes towards CSEC on all fronts, except respondents were more likely now to believe that CSEC victims are free to enter or exit the sex trade whenever they want than a year ago. The reasons for this are unclear. Respondents may be ascribing agency to CSEC victims because they feel doing so could influence more children to leave the sex industry.

With regards to community practices, fewer respondents reported watching for signs that children in the household may be subject to CSEC. In addition, just over 10 percent of endline respondents said they would not report known CSEC cases in their community. When asked why, a large proportion felt that it was either not their business to report it or they feared retaliation by the family of the victim(s).

This lack of change in community practices suggests the need to explore alternate program designs that may be more impactful in positively influencing community practices.

Community member reports of CSEC cases loosely approximate true CSEC prevalence rates. The perceived rate of prevalence of CSEC reported by survey respondents dropped from 4.4 percent at baseline to 1 percent at endline, which is roughly in line with the CSEC prevalence study conducted by NORC, which showed an overall prevalence rate of 1.7 percent in 2021 and 0.81 percent in 2022 (the baseline estimate of 4.4 percent falls outside the prevalence study’s 95 percent confidence interval, however). This suggests that future household surveys may be a broadly accurate indicator of trends in prevalence rates over time.

Methodological Approach

The study was originally designed as a quasi-experimental impact evaluation, the goal of which was to measure changes in KAP that could be attributed to BAF. This would be accomplished by comparing survey responses from those that participated in BAF to those that did not. However, the BAF implementation sites changed and many sampled comparison sites received the intervention, rendering the original evaluation study design unfeasible. In consultation with GFEMS, the evaluation team re-classified the survey sample into exposed and unexposed groups of individuals (or households) based on their response to questions assessing exposure to BAF programming.

The target endline sample was 1,168 households distributed across 146 census enumeration areas (EAs) in Kilifi and Kwale counties. For the household sample, 99.7 percent of the target was achieved for the sampling frame. The survey enumerator randomly selected one eligible adult member from each household to complete the KAP survey, which totaled 1,155 individuals. For the community leader survey, a total of 103 interviews were conducted, which accounts for 70.5 percent of the target sample. In this case, the desired target sample was not achieved due to the fact that multiple selected EAs shared one village elder or community leader. A total of 45 interviews were conducted with Head
Teachers, which accounts for only 30.8 percent of the target sample. However, this is entirely due to the fact that for the majority of EAs, the closest primary school had already been enumerated since it was attached to another EA in the sample.

**Limitations**

The validity of pre-post analysis relies on the assumption that baseline and endline samples are comparable in terms of key demographics. If respondents move in or out of the program areas between baseline and endline, for example, the samples may no longer be the demographically equivalent. To help mitigate this risk, the research team evaluated whether pre-post changes in KAP outcomes were influenced by time-invariant respondent and household level characteristics, and found no evidence of the same.

**Recommendations**

**Continue supporting CSEC-related advocacy and awareness raising activities, but work to ensure higher community saturation.** While this evaluation finds a positive relationship between program exposure and KAP outcomes, the reach of the program was limited. At endline, only 16 percent of all surveyed households reported exposure to CSEC-related advocacy messages and just over 5 percent of households reported participating in trainings, dialogues, sensitization forums, or advocacy sessions related to CSEC. It is possible that in order to achieve the critical mass needed for systemic change, future programs should ensure higher intensity and reach of community-based advocacy efforts, as well as a longer period of implementation. Options for increasing saturation include the use of radio and print media in addition to face-to-face community dialogues.

**Help community members see CSEC victims/survivors as children needing care and protection rather than criminals.** While recognition of the negative psycho-social effects CSEC has on victims has improved since baseline, community members are more likely to believe that CSEC victims are free to enter or exit the sex trade whenever they want. In addition, over 80 percent of community members still believe that CSEC victims are behaving immorally and 90 percent believe victims should be arrested. Ascribing agency to CSEC victims is inconsistent with Kenyan law and may negatively impact community support for victim protection programming.

**Improve knowledge of reporting channels other than traditional authorities and the police, and motivate community members to utilize them.** Qualitative findings from project level research in the area strongly indicate that fewer people are willing to report known cases of CSEC for the fear of retaliation, not considering it their responsibility, and low confidence in authorities to act. One option for overcoming these barriers is to widely promote the use of Childline Kenya, where anonymous reports of child abuse can be made to the Department of Children’s Services via a toll-free number.

**Continue to monitor CSEC prevalence by incorporating CSEC-related modules into existing household surveys.** While imperfect, the ability of household-level reporting to provide a crude estimate of CSEC prevalence may allow stakeholders to monitor major fluctuations in CSEC over time. This could involve integrating a simple module into existing regular and/or ad hoc surveys such as the Demographic and Health Survey (DHS).

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*Global Fund to End Modern Slavery*

This research was funded by a grant from the United States Department of State. The opinions, findings and conclusions stated herein are those of the author(s) and do not necessarily reflect those of the United States Department of State.