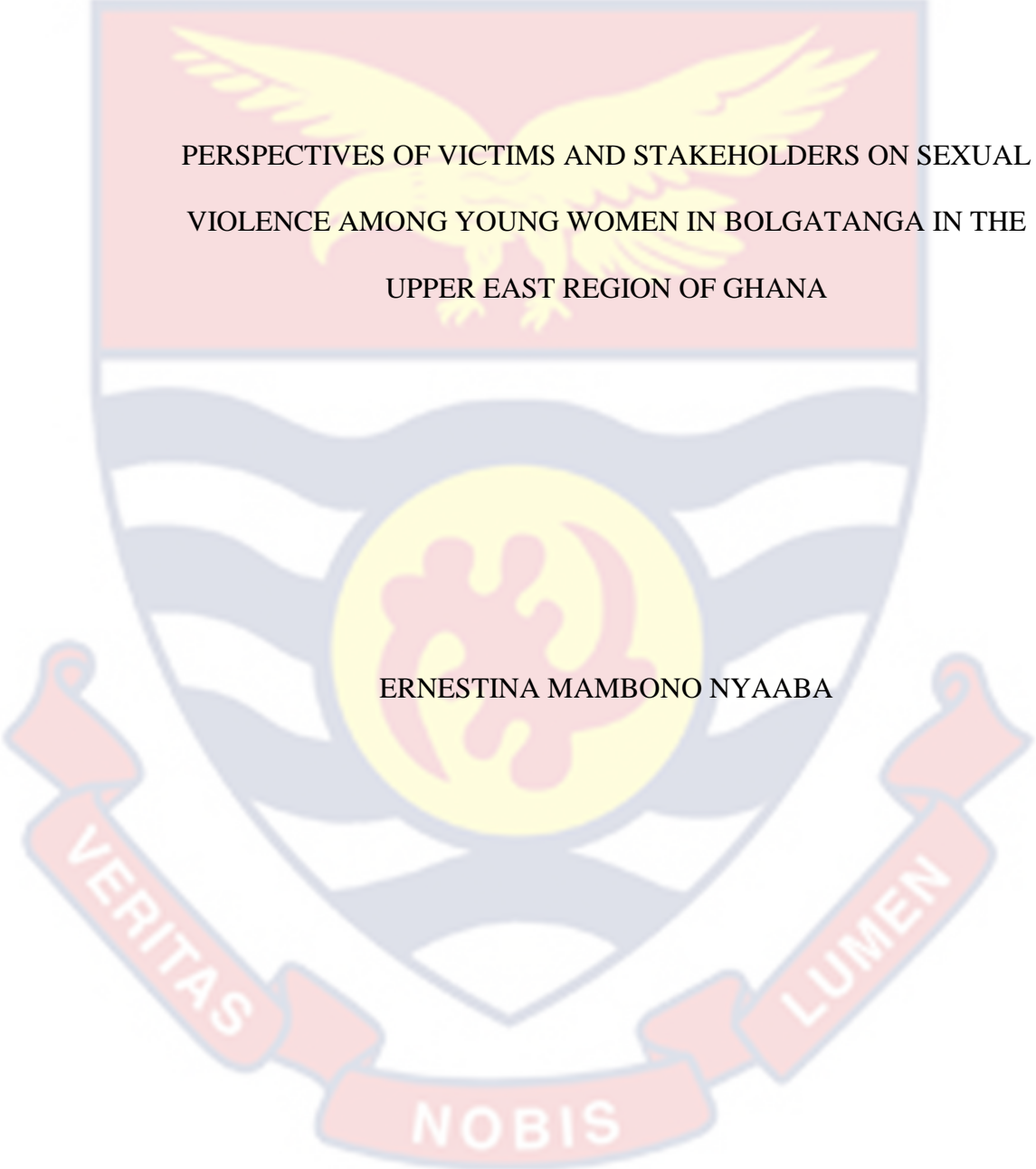


UNIVERSITY OF CAPE COAST



PERSPECTIVES OF VICTIMS AND STAKEHOLDERS ON SEXUAL  
VIOLENCE AMONG YOUNG WOMEN IN BOLGATANGA IN THE  
UPPER EAST REGION OF GHANA

ERNESTINA MAMBONO NYAABA

2023

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UPPER EAST REGION OF GHANA

BY  
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Thesis submitted to the Department of Population and Health of the Faculty of  
Social Sciences, College of Humanities and Legal Studies, University of Cape  
Coast, in partial fulfillment of the requirements for the award of Master of  
Philosophy Degree in Population and Health

AUGUST 2023

## DECLARATION

### Candidate's Declaration

I hereby declare that this thesis is the result of my own original research and that no part of it has been presented for another degree in this university or elsewhere.

Name: Ernestina Mambono Nyaaba

Candidate's Signature: ..... Date: .....

### Supervisor's Declaration

I hereby declare that the preparation and presentation of the thesis was supervised in accordance with the guidelines on supervision of thesis laid down by the University of Cape Coast.

Supervisor's Signature: ..... Date: .....

Name: Prof. Augustine Tanle

## ABSTRACT

It has been observed by studies around the world that sexual violence appears to be prevalent. Women have gone through a number of physical, emotional, or psychological and social challenges as result of sexual violence. Most perpetrators of sexual violence go unpunished. The main objective of the study was to explore the perspectives of victims and key stakeholders on sexual violence. The study adopted the modified social-ecological model and generated a conceptual framework from the model. Through purposive sampling method, the victims and the stakeholders were contacted. The data obtained was analysed thematically. It was realised that sexual violence occurs as a result of factors which were found within the various levels of the model. These factors included; age, poverty, working in some environments like drinking spots, living within a particular family arrangement and lacking care and support from a parent. The consequences that victims faced were medical (contracting a sexually transmitted infection), psychological (trauma, fear, and in-built scars), and social (victim-blaming, discrimination, ridicule and school drop-out). The reasons that prevented victims from reporting cases of sexual violence were as a result of fear of the police, victim-blaming, familiarity with the perpetrator, family settlement of cases of sexual violence, and poverty. The institutions involved in addressing issues of sexual violence work to ensure that victims get justice. However, victims and their families are unable to report their cases or follow through for the appropriate things to be done because of poverty and fear of the police. The conclusion is that sexual violence gets addressed by authorities but due to the reasons stated above justice is hardly served.

**KEY WORDS**

Bolgatanga

Ghana

Stakeholders

Sexual violence

Young women



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## DEDICATION

To my mother; Prudence Bonsu and grandparents; David and Margaret

Nyaaba.



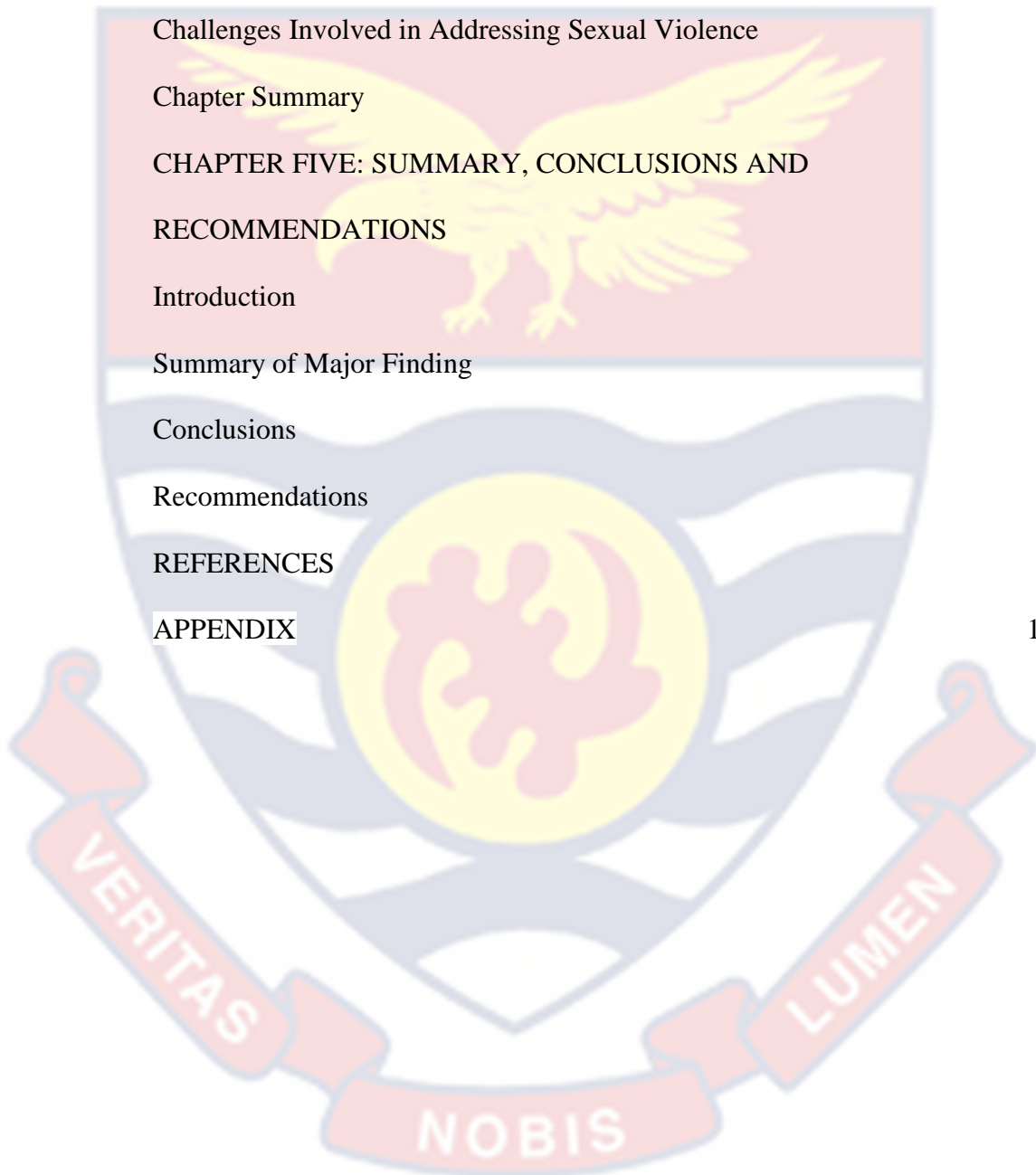
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**LIST OF ACRONYMS**

ACRWC	African Charter on the Rights and Welfare of the Child
AHTU	Antihuman Trafficking Secretariat Unit
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CHRAJ	Commission on Human Rights and Administrative Justice
DANIDA	Danish Development Agency
DOVVSU	Department of Violence and Victims Support Unit
DSW	Department of Social Welfare
DV	Domestic Violence
FIDA	Federation of Women Lawyers
GSS	Ghana Statistical Service
GHS	Ghana Health Service
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
HTS	Human Trafficking Secretariat
INEGI	National Institute of Statistics and Geography
NHIS	National Health Insurance Scheme
NHRIs	National Human Rights Institutions
NGOs	Non-Governmental Organizations
SGBV	Sexual and Gender Based Violence
STIs	Sexually Transmitted Infections
UNICEF	United Nations Children's Fund
UNGA	United Nations General Assembly
UNCRC	United Nations Conventions on the Rights of the Child

USAID United States Agency for International Development

WISE Women's Initiative for Self-Empowerment

UNDP United Nations Development Programme

UN United Nations

WOM Widows and Orphans Movement

WHO World Health Organisation



## CHAPTER ONE

### INTRODUCTION

This chapter of the thesis presents the background to the study, statement of the problem, purpose of the study, research questions and research objectives. It equally includes the significance of the study and how the study is organised.

#### **Background to the Study**

Violence against women (including sexual abuse) is a horrific abuse of their rights as people, a global threat, a general health threat, and a moral outrage. Every woman and girl, regardless of where she lives, her culture, or her community, is entitled to a life devoid of fear (and a decent existence) (Ban-Ki Moon's Statement on Sexual Violence, 2016). Sexual violence is characterized as any coercive sexual act, attempt, or incident against another person's sexuality, no matter the relationship of the victim to the perpetrator (WHO, 2021).

For the purposes of this study, we adopt the World Health Organisation's definition of sexual violence as the conceptualisation of sexual violence. Inappropriate touching or pinching, unwanted pressure for sexual favors with implied threats or job-related consequences for non-cooperation, physical assault, sexual assault, and rape are some examples of these acts. Visual leering and verbal sexual teasing are also included in this definition. According to the World Health Organisation (WHO, 2021), one in every three women has experienced physical and/or sexual violence.

Approximately one-fourth of young women say their first sexual encounter was coerced (WHO, 2021). In Mexico and the United States, an estimated 40-50 percent of young women who have been physically abused by

a spouse have also been sexually abused by that person (World Report on Violence and Health, 2002). Compared to older age groups, young women within the ages of 16 and 19 are 3.5 times more likely to experience rape or an attempted rape (Rennison, 2000). In the Caribbean, a multi-country research revealed that over half of all sexually active young women said their first sex was forced (Sayed et al., 2020). According to the survey, 56 percent of the victims had encountered sexual violence and 68 percent had been stalked (Asian Pacific Institute Fact Sheet on Gender-Based Violence, 2018).

One hundred and ninety-one cases and 353 controls participated in a case-control research on prenatal attendance in a Latin American nation. Of the cases, 31.9 percent and 18.1 percent of the controls, reported forced sexual initiation (WHO, 2010). When questioned on the repercussions of denying intercourse, 77.9 percent of the study cases and 72.1 percent of the controls stated that they dreaded being physically punished (WHO, 2010). Numerous studies, especially those from Sub-Saharan Africa, show that young women's first sexual encounters are frequently unwanted and coerced (WHO, 2010). Physiological and sexual violation of young women is prevalent in South Sudan (Human Rights Council of South Sudan, 2022). The Council asserts that among the myriad types of oppression experienced by women and girls in South Sudan, enslavement, forced marriage, forced childbirth, forced labour, and other forms of sexual violence and injustice are just a few examples.

According to research, there is a significant prevalence of sexual violation of young women in Ghana (Adu-Gyamfi, 2014; Issahaku, 2017; Tenkorang et al., 2013). Nearly one-third of women in Ghana's entire population were directly involved in sexually violent occurrences at some point in their



lifetimes as according to a national dataset (Ministry of Gender, Children and Social Protection, 2016). Approximately 30 percent of females and 23 percent of males, according to the Ministry, have suffered sexual violence at least once in their lifetimes.

Sexual violence can endanger a person's financial security by frequently resulting in homelessness, unemployment, delayed schooling, health, mental health issues, and other daily strains and problems (Blake et al., 2014). The long-term impacts of sexual violence can include unintended pregnancies and an increased risk of reproductive, sexual, and mental health problems. Early adulthood and late adolescence are particularly sensitive to these effects (Hollander et al., 2007). Sexual violence poses a double burden of psychological and physical problems on its victims.

According to the Ministry of Gender, Children, and Social Protection's Ghana Domestic Violence Report 2014, 40.4 percent of women between the ages of 20 and 24 and 38.2 percent of women between the ages of 15 and 19 reported having experienced sexual violence of some kind (Ministry of Gender, Children and Social Protection, 2016). Even though there have been numerous studies on the frequency and incidence of sexual violence, this research aims to contribute to that body of knowledge by considering the perspectives of victims and some important stakeholders on sexual violence in Bolgatanga in the Upper East Region of Ghana.

### **Statement of the Problem**

Studies conducted on sexual violence in Ghana have concentrated on the occurrence of the phenomenon and its possible consequences among women. Boateng (2015) concentrated on victims of sexual violation, specifically, the

experiences of Ghanaian married women on the phenomenon in the Greater Accra Region of Ghana. Through multivariate analysis, it was discovered that type of sexual violence, education, and age were all strongly connected with victims reporting sexual violence to the police.

According to the Domestic Violence and Victim Support Unit of the Ghana Police Service, Bolgatanga, which is the target area for this study, recorded a low trend of sexual violence from 2013 to 2017 (Daniele, 2018). This was because most people have no clue about sexual violence. Thus, the term, sexual violence, is unknown in the dominant local language (Daniele, 2018). Particularly, it appears that popular perceptions of sexual violence's causes, its definition, and notions about its victims and offenders fall behind those of advocates and specialists in the field (McMahon, 2015). Moreover, the occurrence of the cases could be due to a lack of reportage by victims and it is discovered that the most prevalent and underreported violent crime is sexual violence (Boateng, 2015).

Even though there have been studies on sexual violence in Bolgatanga, these studies did not cover the perspectives of victims/survivors and stakeholders. Therefore, the current study examines victim experiences of sexual violence as well as the viewpoints of some stakeholders by answering the questions below;

1. What are the experiences of victims of sexual violence in Bolgatanga?
2. How are victims willing or unwilling to report cases of sexual violence?
3. How is the institutional response addressing sexual violence in Bolgatanga?

## Objectives

The main objective was to examine the perspectives of victims and key stakeholders on sexual violence in Bolgatanga and specifically to explore:

- the experiences of victims of sexual violence in Bolgatanga.
- the willingness or otherwise of victims to report sexual violence.
- the institutional response to sexual violence in Bolgatanga.

## Significance of the Study

This study seeks to explore the perspectives of victims and key stakeholders on sexual violence in Bolgatanga using a qualitative approach. A qualitative approach ensures that detailed information on the phenomenon are obtained. The study seeks to provide information on the encounters of victims of sexual violation. Documenting the experiences of victims could contribute to programmes on sexual violence.

In addition, information will be provided to aid in addressing sexual violence at the institutional level. The information obtained will help in the identification of the areas of intervention that are not being tackled and the necessary measures needed to ensure that such interventions are put in place. The study would equally serve as an addition to the existing knowledge on sexual violence in Bolgatanga.

## Delimitations

The study was conducted in Bolgatanga and it focused on the experiences, tendency of reporting cases and the response of some institutions on sexual violence.

### Limitations

The study is limited by the fact that it involved only few victims/survivors and a quantitative research methodology could have been employed to give a more objective view on sexual violence in the Municipality. Equally, parents are important stakeholders regarding issues related to young people. Therefore, the views of parents of victims/survivors of sexual violence could have been sought in order to understand their perspectives on the phenomenon.

### Definition of Terms

**Sexual violence:** Sexual violence is characterized as any coercive sexual act, attempt, or incident against another person's sexuality, no matter the relationship of the victim to the perpetrator (WHO, 2021).

**Young person:** A young person is defined by the African Youth Charter as any person between the ages of 15 years to 35 years.

**Stakeholder:** Stakeholders are individuals who are noted to have in-depth information on a particular issue.

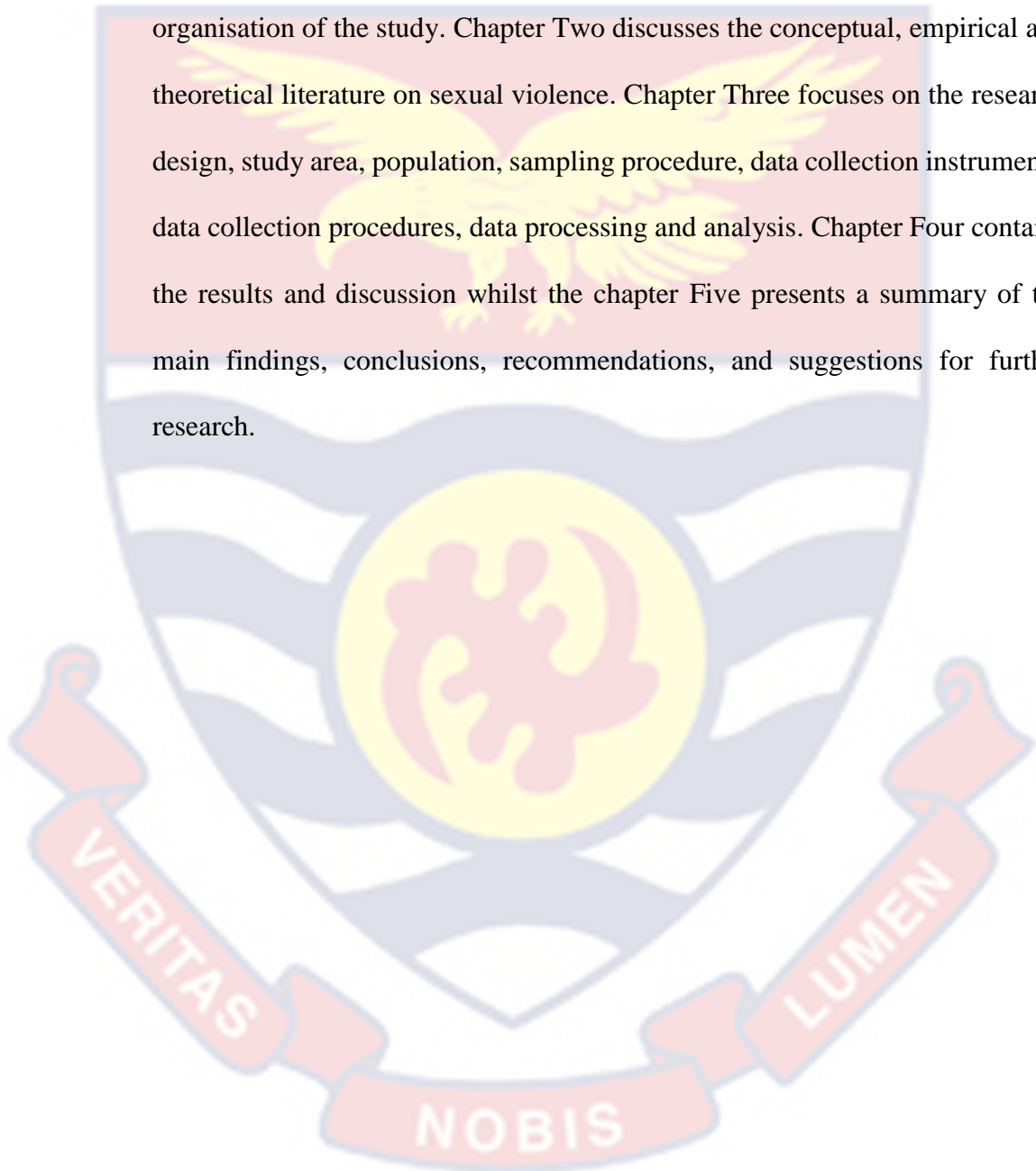
**Victim:** a person who has suffered pain, injury, or death as a result of a criminal act, an accident, or some other circumstance or action, such as "victims of domestic violence".

**Survivor:** is someone who continues to suffice in spite of experiencing some level of disaster or misfortune.

**Note:** The use of victim/survivor and only victim or survivor interchangeably does not change the focus of the study.

## Organisation of the Study

The study is organised into five chapters. Chapter One covers the background to the study, statement of the problem, research questions, objectives of the study, significance of the study, definition of terms, a note and organisation of the study. Chapter Two discusses the conceptual, empirical and theoretical literature on sexual violence. Chapter Three focuses on the research design, study area, population, sampling procedure, data collection instruments, data collection procedures, data processing and analysis. Chapter Four contains the results and discussion whilst the chapter Five presents a summary of the main findings, conclusions, recommendations, and suggestions for further research.



## CHAPTER TWO

### LITERATURE REVIEW

#### Introduction

This chapter focuses on providing the empirical evidence to sexual violence. It begins with looking at the concept of sexual violence, experiences on sexual violence, willingness to report cases, the international conventions on sexual violence, and institutions in charge of sexual violence. Heise's (2011) Social-Ecological Model was the theory adapted for this work and a conceptual framework was carved out to present an understanding on sexual violence.

#### Concept of Sexual Violence

Numerous women face the possibility of sexual violence by a current or past intimate partner (WHO, 2014). Literature reveals that about one in four women is likely to suffer sexual violence by her intimate partner throughout her life (Hakimi et al., 2001). More than one-third of pubescent girls suffer forced sexual initiation, while in other places, one-third of women report experiencing sexual violence (Hakimi et al., 2001). The concept of violence and sexual violence have seen variations by different organisations and institutions. These variations have been clearly spelt out in the following paragraphs hence giving a depth of understanding regarding violence and sexual violence.

The World Health Organization defines violence as the deliberate application of physical force or authority, whether imperiled or against someone, a group of people, or a community, with the intention of inflicting damage, death, emotional trauma, abnormal growth, or destitution (WHO, 2015). The Organisation's definition links intentionality to the act of doing it, regardless of the result it yields. By integrating the concepts of power and the

use of physical force, violence is understood to encompass more than just acts that are the direct outcome of a power imbalance, such as intimidation and threats. The WHO's interpretation includes a wide range of effects, such as psychological suffering, poverty, and underdevelopment. This shows that researchers and practitioners are becoming more aware of the need to include violence that often does not cause harm or demise but nevertheless serves a severe threat to individuals, families, communities, and health care systems around the globe. A vast range of violence against women can cause social and psychological issues without causing harm, disability, or death.

The types of violence are categorised into three: self-directed, interpersonal, and collective (WHO, 2015). The two types of self-directed violence are self-abuse and suicidal behavior. Suicidal behavior includes thoughts of suicide as well as deliberate self-injury or parasuicide attempts. Self-abuse refers to self-mutilation, which means any intentional injury to one's own body (Bhandari, 2022). Family and intimate relationship violence and community violence are the two subcategories under interpersonal violence. Family and intimate partner violence is a type of violence that primarily affects family members and intimate partners, typically but not always occurring at home. Examples of this kind of violence include assaults on children, intimate partners, and older adults. Interpersonal violence that occurs in a community occurs between strangers who may or may not know one another. It generally takes place outside the home.

Early life violence, arbitrary actions of violence, ravishment or sexual violation by strangers, and violence in institutional settings including schools, workplaces, jails, and nursing homes are all examples of community-level violence. The other main form of violence is collective violence, which includes social, political, and economic forms of violence. This kind of violence raises the question of why larger groups of people or states might engage in violence. The social form of violence is the kind that is used to forward a specific social objective, such as organized hate crimes, terrorism, and mob violence. Political violence involves acts committed by bigger groups and includes war and other violent conflicts, as well as state violence. Attacks carried out by larger groups with a financial benefit, such as those meant to stifle commerce, bar access to necessities, or sow economic discord, are considered economic violence.

Sexual violence, on the other hand, has seen different meanings over time (O'Neil & Morgan, 2010). Initial elaborations on sexual violation focused exclusively on ravishment, which is defined as forcing a woman, who is not one's spouse, to have intercourse without her approval (Spohn & Horney, 1992). In the 1970s, sexual violence was understood by most people to be referred to exclusively as vaginal penetration (McMahon et al., 2011). Communities, at-large, retain a narrow understanding of sexual violence as being vaginal penetration. The relationship between less evident behaviors and more overt forms of sexual abuse may not be understood by community members in particular (McMahon et al., 2011).



On the other side, community members frequently overlook the connection between wider cultural elements like sexism and sexual violence, viewing it as an instance of sexual violence at the personal level, basically the result of moral failure or a lack of self-protection (O'Neil & Morgan, 2010).

Community norms have a great impact on attitudes, beliefs, as well as behaviors connected to sexual violence, so interventions must be tailored to these particular contexts. These contexts may be influenced by particular ethnicities, religions, socioeconomic status, disabilities, and several important factors that neighbourhoods apply in organizing and identifying with one another (McMahon & Banyard, 2011). When it comes to matters like sexuality, marriage, and gender roles, cultural meanings and expectations may have an impact on how some behaviors are interpreted as sexual violence (McMahon & Baker, 2011).

Studies have shown that, in addition to rape, women also reported experiencing a wide variety of other coercive and forced sex activities (Gavey, 2005). By promoting legal changes and a broader understanding of sexual violence, advocates and feminists have questioned the restrictive definitions of sexual violence (McMahon & Baker, 2011). Right from the 1970s, state laws in countries around the world have broadened their definitions to include several acts (Hersch & Shinall, 2015). According to McMahon and Baker (2011), a range of behaviors are now included in sexual violence as it broadens over time. The laws have changed throughout the years to reflect a definition of what constitutes sexual violence that is more considerate of the needs of victims as a result of feminist advocacy (Hersch & Shinall, 2015).

A wide range of behaviors to encourage sexual violence have been proposed over the years by experts in the field (McMahon & Baker, 2011). Advocates and educators claim that a continuum of sexual violence has been defined, suggesting a spectrum of interconnected behaviors (McMahon & Baker, 2011). Acts such as rape are recognised as crimes in our societies. They are subject to harsher judgments, legal repercussions, and penalties (Hirschi & Gottfredson, 2018) whereas certain obvious acts such as coercive sexual contacts, unhealthy comments, leering, etc. are really not given much attention. To make the definition of sexual violence more inclusive and more victim-sensitive, there has been different definitions proposed by varied organisations and institutions. For example, the United States Centre for Disease Control (2009) refers to sexual violence as a spectrum offense to include a completed non-consensual sexual act, an attempted non-consensual sexual act, abusive sexual contact, and non-contact sexual abuse (i.e., threatened sexual violence, exhibitionism, and verbal sexual harassment).

Contrarily, the United Nations (2020) defines sexual violence as any form of gender-based violence that causes or is likely to cause physical, sexual, or mental harm or pain to women, including threats of such acts, coercion, or arbitrarily denying them of their freedom. This definition applies to both public and private situations. The meaning refers to a broad range of harmful acts directed toward women and not only rape as described in or before the 1970s. The focus on gender-based violence emphasizes the fact that much of it results from an unequal gender social structure (Heise et al., 1999). One of the most blatant examples of patriarchal cultural values, norms, and traditions that enable

men to think they have the right to control women's bodies and sexualities is sexual violation of girls and women (Hadi, 2017).

Any sexual activity, a bid to obtain a sexual desire, unwelcome remarks or advances, acts of trade, or other actions against a person's sexual orientation using manipulation, by any person devoid of the relationship to the victim, in any setting, including but not limited to the lack of residence or workplace, are all considered sexual violence by the WHO (Jewkes et al., 2011). According to the WHO, coercion in sexual violence refers to a broad notion that encompasses psychological intimidation and threats of harm in addition to physical force. Taking a cue from the definition by the UN and the WHO, sexual violence includes a broad range of acts. These behaviors include coerced or attempted sexual contact, unwanted sexual contact, and forcing a woman or young child to engage in a sexual act against their will.

Other examples include forced sexual initiation, forced prostitution, unwelcome sexual comments, sexual violence, sexual molestation of children, genital cutting, and sexual harassment (UN Secretary-General's Statement on Sexual Violence, 2016). The US National Sexual Violence Resource Centre defines sexual violence as the act of forcing someone else into an unwelcome sexual interaction without their consent. The Centre defines the following actions as instances of sexual violence: a sexual offense, child molestation and incest, intimate partner sexual violence, unwanted sexual contact or touching, sexual harassment, sexual exploitation, exposing one's genitalia or naked body to another without consent, masturbating in public, and secretly watching someone perform a private activity.

According to the Hague Principle on Sexual Violence Civil Society Declaration (2019), "sexual violence involves lone, multiple, intermittent acts that, depending on the situation, are perceived as sexual in nature by the victim, the perpetrator, and/or their communities." It defines the following behaviours as sexual violence: behaviours carried out "forcibly," behaviours brought on by psychological or physical coercion, duress, detention, or abuse of power against any person or individuals. They also involve acting against someone who cannot or will not grant true, voluntary, specific, or continuous consent by taking advantage of a coercive setting. A person who suffers from a natural, induced, or age-related impairment may be unable to give pertinent consent.

Other elements that could influence someone's ability to give real consent include literacy, informational availability, and linguistic, educational, and financial standing. It is incorrect to assume that physiological responses indicate consent or that the situation was not coercive. The overall elaborations on the concept of sexual violence gives a clear understanding of what constitutes sexual violence. These definitions help to create an impression on the focus of the study which is not on rape as the only form of sexual violence but on the very many aspects of the subject matter.

### **Experiences on Sexual Violence**

There is strong evidence that sexual violence is pervasive throughout the world. About 7-36 percent of women around the world have experienced some type of sexual abuse in their childhood (Dartnall & Jewkes, 2013). In the most extreme situations, intimate partners are responsible for around 38 percent of all homicides, which represents a third of all women who have ever experienced sexual violence (Teshome et al., 2020). Studies suggest that sexual violence is

widespread in Latin American countries (Equality Now, 2021). About 40-52 percent of women from the United States and Mexico have been sexually coerced by their partners (Basile et al., 2019). According to population-based surveys conducted in those areas, the proportion of women who report being forced to have sex by an intimate partner ranges from 5 to 47 percent, and the proportion who report having been forced to have sex in the previous year ranges from 2 to 23 percent (Conteras et al., 2010). These figures are contrary to what was reported by the World Health Organisation (WHO), Brazil, Peru, and the National Institute of Statistics and Geography (INEGI) survey from Mexico. In the United States, nearly 1 in 5 women (18.3 percent) and 1 in 71 men (1.4 percent) have experienced a rape at some point in their lives, whether it was a successful forced penetration, an unsuccessful forced penetration, a sexual attempt, or a successful forced penetration made possible by drink or drugs (Black et al., 2010). More than half (51.1 percent) of female victims of rape reported being raped by an intimate partner and 40.8 percent by an acquaintance (Black et al., 2010).

Nearly one in ten women (9.4 percent) in the United States have been sexually assaulted by an intimate partner at some point in their lives, while 16.9 percent of women and 8.0 percent of men are thought to have experienced sexual violence other than rape by an intimate partner (Black et al., 2010). Worldwide, about 30 percent of all women who have been in a relationship have experienced physical or sexual violence at the hands of an intimate partner (WHO, 2010). Comparatively, 38 percent of women have suffered intimate partner violence, as opposed to the non-victimized group and they are 16 percent more likely to give birth to a baby that is underweight, more than twice as likely to have an

abortion, nearly twice as likely to experience depression, and in some regions, 1.5 times more likely to contract HIV (WHO, 2010).

Some studies on sexual violence indicate that women who have experienced sexual violence have been violated by people who are not related to them, thus, non-partners. For instance, in a WHO multi-country research, between 0.3 and 12 percent of women said they had been compelled after the age of 15 to engage in sexual activities or commit a sexual act with someone other than a romantic partner. In that study, it was discovered that the prevalence of sexual assault against children under the age of 15 committed by a person other than an intimate partner ranged from 1 percent in Bangladesh to over 21 percent in Namibia's urban areas. More than one in five men, mostly in South Africa, admitted to having raped a woman who was not a partner (a stranger, an acquaintance, or a family member), and one in seven admitted to having raped a current or past partner (Jewkes et al., 2010).

According to Wado et al. (2021), the percentage of young women reporting sexual violence in the year before national surveys in Comoros ranged from 6.5 percent to 43.3 percent in Gabon. Comparatively, levels of violence are higher in countries in the Central Africa region than other sub-regions. Over 40 percent of women have suffered physical or sexual violence throughout their lifetime thus according to the Kenya Demographic and Health Survey (KDHS) (Dolphine Kwamboka, gender specialist, World Vision 2022). According to a community-based survey conducted in South Africa with 3,515 adolescents between the ages of 10 and 17 years old, 31.2 percent of adolescent girls had ever suffered physical violence, with 8.4 percent reporting sexual assault or rape.

In Ghana, about 1,345 cases of sexual violence and 15, 000 cases of violence against women were recorded in 2020 and 2021 (DOVVSU, 2022). It has been reported by the Ghana Education Service that there was a young woman in class three who was raped by a 50-year-old man (Youth Harvest Documentary on Sexual Violence, 2022). Media outlets have indicated that sexual violence cases are prevalent in the country (Boateng, 2015). According to the 2008 Ghana Demographic and Health Survey, 38.7 percent of women aged 15 to 49 have ever been the victims of intimate partner violence, including sexual assault (Ghana Statistical Service, Ghana Health Service, & ICF Macro, 2009).

Poverty and misogynistic culture with unequal gender roles have been seen as some of the key vulnerabilities that lead to sexual victimisation (Jewkes et al., 2010). Sexual violence has resulted from widespread misogynistic culture and unequal gender-related roles of males and females where males are usually deemed superior to females (Jewkes et al., 2010). Poor persons are equally more likely to be assaulted or abused and are also more likely to have their sexual rights violated (Jules et al., 2010; Jolly & Hawkins, 2010). Most of the time, women, children, and people living in poverty, those unlikely to report, and those who lack power in society are usually targets of perpetrators of sexual violence (Greco & Dawgert, 2007). As much as ignorance and mediocrity can instigate sexual violence, poverty is equally a reason for sexual violence. Poverty may make a person more susceptible to sexual crime on an individual basis.

Experiencing sexual violence has serious consequences on the individual, the family, the entire community or society, and the country at large. It has adverse effects on the physical, mental or psychological, and social wellbeing of the individual and, in most cases, there is an effect on the economic stability of the family and the country at large. Research in recent times has indicated that many women victims of violence have been faced with many consequences such as physical, psychological and mental trauma, economic cost, and death (Jina & Thomas, 2013). In most instances, sexual violence is associated with certain sexually transmitted diseases such as HIV and AIDS (Decker et al., 2005).

The victim of rape may also contract a sexually transmitted disease (STD) through the act or while pregnant. According to Decker et al., (2014), STD infection rates ranged from 5 to 15 percent, depending on the type of test performed and the diseases that were screened, and up to 43 percent of rape victims had STD infection. As part of the consequences, studies indicate that about 5 percent of pregnancies result from sexual violence. According to Chamdimba et al. (2023), sexual violence is a particular reason for unintended pregnancies among young women. Rape victims exhibit higher signs of physical and mental illness than non-victims of rape (Zinzow et al., 2012). Sexual violence victims frequently report having greater physical and mental health symptoms than non-victimised women, according to self-report and interview-administered symptom checklists (Stathopoulos, 2014).

Sexual victimization has been linked to a number of chronic conditions and symptoms, such as premenstrual syndrome, gastrointestinal problems, and a number of chronic pain conditions, including headache, back pain, and facial



pain (Walsh et al., 2012). According to Narvaez et al. (2019), individuals with significant drug-related difficulties and high-risk sexual behaviours also had a higher prevalence of sexual victimization. With regard to psychological effects, victims of violence and rape frequently display a variety of emotional states, including shock, denial, disbelief, dread, perplexity, and retreat (Capri, 2013, Spies, 2017). Studies indicate that experiencing more and continuous violence has serious effects on the psychological well-being of the victim. Socially, sexual violence experiences damage gender equity for young women by instilling a sense of unworthiness in them and by limiting their participation in education, employment, and general social mobility due to safety concerns (Bruce, 2012; Decker et al., 2014).

### **Willingness to Report Sexual Violence**

Sexual violence is very heinous crime which warrants that victims report to the right authorities. According to some studies on sexual violence, victims typically report violence because they want the perpetrators to pay for their actions, want to prevent the occurrence from happening again, believe the assault to be a crime that has to be reported, or want to be protected from further assaults (Bachman, 1993, Felson et al., 2002; Wolitzky-Taylor et al., 2011).

On the other hand, several studies on sexual violence have found several factors affecting the decisions of victims of sexual violence to either report or not report the incidence. Despite reports that 1 in 3 women experience sexual violence in the lifetime (Breiding et al., 2014), most survivors/victims do not report the issue to law enforcement agencies (Felson & Paré, 2005). Estimates of actual reporting ranged from 10 percent (Fisher et al., 2003) to 37 percent (Rennison & Rand, 2003). These studies have demonstrated that the relationship

between the victim and the offender significantly affects whether or not people report crimes to the police (Russell & Bolen, 2000). According to certain research, women who were raped by strangers were more likely to report the crime to the police than women who were raped by persons they knew (Fisher et al., 2003; Russell & Bolen, 2000; Felson & Paré, 2005).

Studies have also shown how the sort of sexual assault affects whether or not the crime is reported. According to Golding et al. (1989), rape-related sexual violence was more likely to be reported than attempted rapes, touching, or fondling. Bachman (1993), Russell and Bolen (2000), and other studies lend credence to this conclusion. Additionally, the likelihood that victims will report is increased if they were hurt and if the attacker used a weapon (Fisher et al., 2003; Russell & Bolen, 2000). The factors that determine whether sexual violence is reported include the wounds received and the weapons employed.

According to several research (Fisher et al., 2003; Russell & Bolen, 2000), the likelihood that a victim will report an incident increases if they have been injured and the perpetrator used a weapon. Other studies have shown the level of inconsistencies in the level of education of the victim and the tendency of reporting by the victim. While some research suggested that educated women were more likely to report crimes (Clay-Warner & Burt, 2005; Jackson & Mustillo, 2001; Nagel et al., 2005), other studies have shown that educated women were less likely to report incidents of sexual violence to the authorities (Wolitzky-Taylor et al., 2011).

The reason that could explain this situation is the fear of the victims losing their social dignity, status, and respect once the issue becomes public. Other studies have indicated a relationship between age and sexual assault

reporting. Older women were less likely than younger women to report sexual victimisation to the police, largely because they were more prone to believe rape myths and place the blame for such acts on themselves (Acierno et al., 2001). Contrarily, several researches have discovered that reporting of sexual assault is unrelated to age (Clay-Warner & Burt, 2005; Fisher et al., 2003; Wolitzky-Taylor et al., 2011). According to Fisher et al. (2003), there are four reasons why college women who have been sexually assaulted choose not to report the incident to the police. These reasons include the police's lack of interest in the matter, their perception that it is not a serious offense, their fear of hostile police treatment, their fear of hostile lawyers and other members of the criminal justice system.

Dolev-Cohen et al. (2020) found that reasons for not reporting occurrences of sexual violence were proximity to the attacker, self-blame, not expecting to be believed, minimisation and repression of the experience. Internal reactions, expectations of negative reactions from others, perpetrator factors, myths and knowledge, actual negative reactions from others, protection of others, and a perceived lack of sufficient evidence are additional similar reasons why sexual violence is not reported (Reich et al., 2022). Additionally, sexual violence is not reported due to various unfavorable social expectations such as victimization, severing of social relationships, job loss, sanctions, and lack of confidence in the police or judicial system (Dolev-Cohen et al., 2020; Reich et al., 2022). The reporting of sexual violence is clearly a complicated endeavour in which survivors/victims weigh several societal, contextual, interpersonal and personal factors before deciding to report (Reich et al., 2022).

## International Conventions on Sexual Violence

Living a life free from violence is a human right (Amnesty International, 2010). The United Nations Charter of 1981 emphasizes the organization's belief in basic human rights, in the worth and dignity of each individual, and in the equality of men and women in terms of their rights. The Universal Declaration of Human Rights declares that all people are free, equal, and entitled to all the rights and freedoms stated in it, without distinction of any kind, including distinction based on sex. It also upholds the principle that discrimination is not acceptable. Equal rights for men and women, as well as their enjoyment of all economic, social, cultural, civil, and political rights, shall be guaranteed by State Parties to the International Covenants on Human Rights, according to the Declaration. In order to ensure the actual realization of this concept, States Parties integrate the principle of equality of men and women into their national constitutions or other suitable legislation if it has not already been done.

International conventions on sexual violence include the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), which is a women's convention that entered into force in 1981. According to the Convention, discrimination against women that seriously hinders their ability to exercise their rights and freedoms on an equal footing with men includes violence against women. In 1999, the General Assembly of the United Nations adopted the Optional Protocol to the Convention on the Elimination of all Forms of Discrimination against Women. The Optional Protocol created two procedures to monitor compliance with CEDAW. After exhausting domestic remedies in their home countries, it first developed a communications system for individuals or groups of women to file claims of abuse.

The committee can look into instances of serious or repeated abuses of women's rights thanks to an investigation procedure established by the second Optional Protocol. In addition to measures at the international level to address issues of sexual violence was the establishment of the National Human Rights Institutions (NHRIs). According to Matsheka (2002), the NHRIs are a group of independent organizations with the exclusive responsibility of advancing and defending both individual and collective human rights. In addition to that, the United Nations embraced the Paris Principle in 1993 which is the yardstick for all human rights institutions.

The human rights institutions are supposed to adhere to the mandate of the Paris Principles. In Africa, there was the adoption of the Protocol on the Rights of Women which is equally referred to as the Protocol to the African Charter on Human and People's Rights. Equally in Africa, are the Maputo Protocol (2016-2039) and Banjul Charter which seek to promote and protect women's Sexual and Reproductive Health and Rights (SRHR), Reproductive Rights and end violence against women and girls (EVAWG) (The African Women's Development and Communication Network's Training Implementation Manual, 2023). In circumstances of sexual violence, incest, and where the victim's life or health is in danger, the protocol guarantees the right to access and control reproductive health information and services as well as the right to safe abortion services.

### **Institutional Response to Sexual Violence**

Some institutions such as educational institutions, health institutions, media institutions, security institutions, and civil and government institutions are all to curb the occurrence of sexual violence in every way possible. Media

institutions have embarked on several campaigns to serve as a mitigating strategy to curb the occurrence of sexual violence. Victims/survivors have used media platforms such as social media, ambassadors of sexual violence prevention, and other individuals to push the agenda of sexual violence mitigation. Some social media campaigns responding to sexual violence include the hashtags #MeToo, #BeenRapedNeverReported, #YesAllWomen, and #WhyIDidntReport which were used to propagate the message of sexual violence prevention.

Ghana's overall institutional and legal structures include some procedures for dealing with sexual offenses and defending people's rights. According to the 1992 Constitution of the Republic of Ghana, equal rights are guaranteed to men, women, children, the vulnerable, and other disadvantaged groups. In addition to that, in Chapter 6 of Ghana's Criminal Offences Act (Act 29), specifically Section 97, it is spelt out that rape is a first-degree felony, and being charged with it is liable on conviction to a term of imprisonment of not less than five years and not more than twenty-five years. According to Section 98, rape is defined as having carnal knowledge of a female who is at least sixteen years old without her consent.

A child under the age of 16 may be defiled under Act 29's Section 101, with or without the child's agreement. Any person who commits this crime faces a sentence of not less than seven years in jail and not more than 25 years in prison upon summary conviction. Additionally, Ghana has ratified important international treaties, and protocols concerning sexual crimes, such as the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW), which was signed in 1981, and the Beijing Platform for Action

(BfA). Subsequently, several laws related to sexual offences have been passed. Notable among them are the Domestic Violence Act, 2007 (Act 732); Juvenile Justice Act, 2003; and Human Trafficking Act, 2005 (Archampong, 2010; Ghana CEDAW Report, 2012). At the national, regional, district, and municipal levels, Ghana has a number of governmental and non-governmental entities that deal with sexual offenses.

In order to ensure the general welfare of individuals, especially women, children, and other vulnerable groups, the Ministry of Gender and Social Protection (previously the Ministry of Women and Children's Affairs) was founded in 2001 and is led by a cabinet-level minister. Since the Domestic Violence Act, 2007 (Act 722) was passed, the Ministry has organized several public awareness-building campaigns regarding the Act's provisions for sexual offences and has set up a secretariat to oversee its implementation. In order to support the Act's implementation, a National Policy and Plan of Action covering a ten-year period from 2009 to 2019 has also been established.

In order to aid in the fight against domestic and gender-based violence, the Ministry established the BOAME App and the Orange Support Center in 2021 in partnership with the United Nations Population Fund (UNFPA). While the Orange Support Center is a cell center with counseling units for survivors of violence to call for help and talk to a resource person for advice, the BOAME App is an innovative platform that supports survivors of domestic and gender-based violence to talk to relevant resource persons ([graphic.com.gh](http://graphic.com.gh)). Since most victims are unable to speak up and thus pass away from suffering, the center's goal is to eliminate domestic and gender-based violence.

The Department of Violence and Victim Support Unit (DOVVSU) is another institutional framework for handling sexual offenses on a national basis. In line with the Paris Principles, DOVVSU was created to respond to issues of violence in Ghana. By DOVVSU's core mandate, it falls under the NHRIs. As an institution, it is expected to adhere to the demands of the Paris Principles and to ensure the protection of persons against all acts of violence. The Unit, which was established in 1998, is a specialised division with the primary responsibility of looking into and managing cases of domestic violence, child abuse, criminal mischief, and juvenile offenses. Additionally, according to the Immigration and Refugee Board of Canada (2006), it is mandated to prosecute all such cases and carry out any other tasks as ordered by the Inspector General of Police. However, the unit faces difficulties like a growing caseload, insufficient victim support services, and a lack of resources for forensic or psychosocial analysis. In order to overcome some of these obstacles, it works with a few organizations that support women's rights (Ghana CEDAW Report, 2012; Immigration and Refugee Board of Canada, 2006).

Act 732 also established a Domestic Violence Support Fund, which will be used to locate the families of victims of domestic violence, provide basic material support for victims, and deal with any other issues relating to the rescue, rehabilitation, and reintegration of victims of domestic violence. It is anticipated that private businesses, organizations, and people will make voluntary donations to the fund. An amount of money from the government for the fund must be approved by Parliament and the Finance Ministry (Archampong, 2010). However, the fund is non-existent due to government's



lack of prioritisation in allocating funds making it difficult for victims/survivors to receive the necessary interventions.

One of the judicial and administrative bodies having the authority to address sexual offenses as well as other human rights concerns is the Commission on Human Rights and Administrative Justice (CHRAJ). Its mission is to defend and advance all fundamental freedoms, particularly those recognized by Ghana's ratification of international human rights treaties and the 1992 Constitution (Ghana CEDAW Report, 2012). Individuals can also receive legal aid via the State Legal Aid, however due to financial limitations, it is essentially inactive (MOGSCP, 2009). However, there are private legal aid programs that offer some services to women, like the Federation of Women Lawyers (FIDA), Legal Resources Centre, Ark Foundation, and Women's Initiative for Self-Empowerment (WISE).

Since 2016, the provincial governments in Ontario, Quebec, British Columbia, Prince Edward Island, and Manitoba have passed legislation requiring post-secondary institutions to develop specific sexual violence policies (Shen, 2017). The governments of Alberta and Nova Scotia have released statements urging their post-secondary institutions to follow suit (Shen, 2017). According to the WHO, there are measures that governments can employ to ensure that sexual violence is curtailed. They include providing comprehensive healthcare and medico-legal services including emergency contraception, STI treatment and prophylaxis, information on safe abortions, psychological support (and referrals for mental health care if necessary), emergency contraception, and forensic examinations (if a woman decides to pursue prosecution).

Regarding the legal side, victims/survivors require access to knowledgeable and sensitive professionals that can help them with case prosecution. The National Gender Policy, 2015 has specified some strategic measures to address sexual violence in Ghana. Among the strategic measures is to facilitate funding support for the Domestic Violence (DV) Secretariat and the DOVVSU to ensure that much attention by these institutions is drawn to addressing the phenomenon. Another measure supports the implementation of the national policy and plan of action of the Domestic Violence Act. In addition to that is the establishment of shelters for victims/survivors of domestic and gender-based violence.

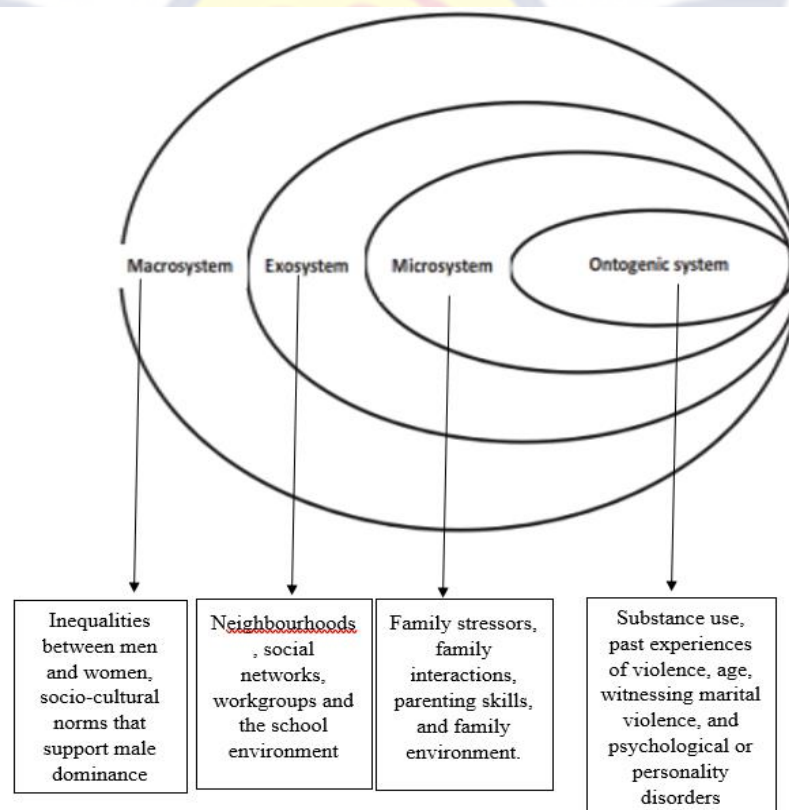
Additionally, steps have been taken to strengthen and better equip organizations like the Department of Social Welfare (DSW), the Ghana Police Service's Anti Human Trafficking Unit (AHTU), the Human Trafficking Secretariat (HTS), and the Gender-based Courts/Human Rights Courts to effectively combat gender-based violence, violations of women's rights, and trafficking in women and children. The DSW is a government statutory Agency under the Ministry of Gender, Children and Social Protection (MoGCSP). The department's mandate is to assume the initiative in integrating the marginalized, at-risk, disabled, and excluded into society at large (MoGCSP Website, 2022). The vulnerable here refers to women, girls and children. The department is faced with several challenges in addressing issues of violence. Agbitor (2012) asserts that many people lack basic knowledge of their legal rights. As a result, asking for help from human rights organizations becomes a significant obstacle that prevents people from getting medical care and legal representation.

## Theoretical Framework

The social ecological model created by Heise (1998) and refined by Heise, 2011 served as the theoretical foundation for this investigation. There have been several studies that have used the theory to explain male-partner violence including sexual violence (Fulu & Miedema, 2015; Janes, 2012; Kelmendi, 2015; Mulrenan et al., 2015; Pun et al., 2016; Terry, 2014). The model provides a theoretical framework for comprehending the complex and interrelated influences of individual and environmental factors on behavior (Center for Disease Control and Prevention, 2014). The theory was first advanced by Urie Bronfenbrenner in the late 1970s. According to this theory (University of Minnesota School of Public Health, 2015), people are both impacted by and have a variety of complex social effects and nested environmental interactions. The theory states that an individual's development and general well-being are influenced within the context of a system of relationships within an environment. The main objective of Bronfenbrenner's theory was to comprehend the interaction between the developing person, the environment which is known as the biosocial environment.

According to Brofenbrenner (1979), a complete examination of the entire social and ecological system in which growth takes place is necessary to understand human development. He thought of the social-ecological framework as a collection of several strata or systems that influence the growth of people. The microsystem, mesosystem, exosystem, and macrosystems are among the systems. The framework emphasises the interactions between each system. The model is intended to consist of a number of nested structures (Bronfenbrenner, 1979).

In the 1990s, Heise adapted the social-ecological model by Bronfenbrenner to study domestic abuse and violence (Heise, 2012). The application of the framework to explain violence towards women was widely welcomed, as it provided a theoretical lens to view that particular violence. It must be stated that before this framework, single-factor theories were used to explain violence (Heise, 1998; Lawson, 2012). For example, some psychologists have suggested that male-partner violence is influenced by individual qualities such as psychopathological and personality disorders (Lawson, 2012). Feminists have rejected the idea that individual traits play a role in the incidence of violence and instead place a strong emphasis on gender and the family as the unit of study, even though comprehending male aggression is crucial (Sabbah et al., 2017).



*Figure 1: Ecological Model of Gender-Based Violence (Heise, 2011). (A modified version of Heise, 1998).*

The four important layers of analysis that make up Heise's social-ecological framework can best be compared to concentric rings (see Figure 1). Each circle represents a layer of variables that affect people's behavior and raise the possibility that they will suffer violence or inflict it on others. These layers help to understand the occurrence of sexual violence which is the focus of this study.

The innermost ring depicts individual-level or ontogenic elements that have an impact on a person's behavior and raise the likelihood that they may experience violence either as a victim or a perpetrator. Substance abuse, prior violent experiences, age, having witnessed marital violence, and psychiatric or personality issues are a few of the often-listed factors in this layer. Individual-level characteristics like substance use, age, education, and prior violent experiences in childhood have been linked to higher rates of intimate partner violence (Abrahams & Jewkes, 2005; Garcia-Moreno et al., 2003; Vyas & Watts, 2008).

Interpersonal or microsystem factors are represented by the second circle. This layer includes the immediate surroundings where abuse takes place as well as the impact of ties to family and friends. Family pressures, family interactions, parental abilities, and family environment are a few examples of the elements in this cycle. One key issue that might influence a family's ability to function and care for its children, for instance, is family stress, which is linked to both long-term poverty and unemployment. So, according to Ackerson & Subramanian (2008) and Jewkes (2002), socioeconomic troubles are linked to stress and tension, which in turn are linked to the commission of violent acts.

The community-level or exosystem components make up the third layer. This stratum includes venues like churches, schools, neighborhoods, and workplaces since it is where social interactions take place. Peer groups, families, social networks, the legal system, and the accessibility of community services are a few of the elements that could encourage the use of violence in this layer. For instance, being a woman in a low-income area may make her more susceptible to intimate partner and sexual assault (Cunradi et al., 2000; Gage, 2005).

The final layer consists of macro-system or societal-level variables. These include sexism, male supremacy, contempt for women's rights, gender inequity, and popular acceptance of violence. These elements are put into three major categories: the gender regime, other socio-cultural elements, and macro-economic elements like globalization, modernization, and economic development. Sexual violence may be influenced by sociocultural norms, economic and social policies that encourage male domination over women, and the acceptance of violence as a manner of resolving dispute.

### **Conceptual Framework**

The conceptual framework for this study is developed from the Social Ecological Model. The framework depicts the influence of some factors at the individual level, interpersonal level, community level and institutional level which influence the occurrence of sexual violence. These levels of the model influence certain intermediary factors such as the general perceptions, experiences on sexual violence and tendency of reporting cases influence sexual violence. Experiences of sexual violence can lead to psychological, social and medical consequences.

The individual level factors such as age and love for the perpetrator influence the subjection of an individual to sexual violence. This section of the framework creates an understanding of the role that individual characteristics like age plays in the understanding, experiences and occurrence of sexual violence. For example, considering age, being younger has an impact on the possibility of being sexually violated (Blake et al. 2014) since a younger individual is vulnerable and has less control over his/her decision making (Ningsih & Handayaani, 2021). The majority of sexual assault victims are believed to be children and young adults, with 8 to 10 percent of males and 12 to 25 percent of girls under the age of 18 being victims, respectively (Sapp & Vandeven, 2005). Equally, age influences the tendency of reporting cases of sexual violence which is mostly not possible because of the individual's lack of maturity to report. Equally, the love for the perpetrator has an influence in subjecting an individual to sexual violence in the sense that she may be in an abusive relationship and stick to that toxic relationship because she loves him. In addition, a victim who loves her perpetrator is very less likely to report to the right authorities. These issues at this level therefore influence general perceptions and experiences of sexual violence as well as tendency of reporting.

The interpersonal level, which include familiarity with perpetrator, lack of parental care and support, family arrangement and poverty have significant influence on the occurrence of sexual violence. This part of the framework refers to the influence of families and the occurrence of sexual violence. Families play an integral role in the occurrence, prevention and reportage of sexual violence. In some cultures, within the Ghanaian setting, sensitive issues such as sexual violence tend to be settled at the family level since most families are familiar

with each other and are always trying to shield their image. The settlement of these issues at the family level (Russell & Bolen 2000) tend to give an impetus and a lee way to perpetrators to continuously commit such heinous crimes in communities. In addition to that, the lack of parental care and support subjects most children to acts of violence since their parents are basically clueless about what is happening to such children and basically less desirous of seeking justice for their victimised children (Breiding et al., 2013).

Equally, the family arrangement which is the type of relation that exists between children and parents or guardians. For instance, a situation where a child stays with people who are not directly related to her (step-parents, friends of parents et cetera). In such families, children have a higher propensity of being subjected to violence especially sexual violence (Claxton-Oldfield & Whitt, 2004). Poverty in the family equally influences the occurrence of sexual violence. Young people from poor families have high likelihood of being coerced into sexual activities since they are in positions of economic vulnerability (Chamdimba et al. 2023). In addition to that is the less probability of reporting a case of violence by an individual from a poor financial background to the right authorities due to the inability to finance the whole process. This level therefore equally leads to the intermediary factors which serve to influence general perceptions on sexual violence, the occurrence of sexual violence and the tendency of reporting sexual violence.

The other level that has an influence on sexual violence is the community level, which comprises the beliefs and practices that endorse shaming of victims and the type of work or living environment. Strict cultural values and norms that abhor indecent behaviour and immorality will debunk any act of sexual violence



(MacPherson et al. 2012). In such a society, individuals who abuse others sexually will in most instances be punished for their acts. Within such a society, there is a likelihood of reportage of sexual violence and deterrence to engage in such activity since there is a higher probability of being punished for such a crime. However, in such communities where topics regarding sex and all manner of indecency is expected not to be spoken about or heard of, most victims who publicise their victimisation are most likely vilified and victim-blamed (Karim & Baxter, 2016).

People within such communities tend to speak ill of the victim and blame her for her predicament. The environment within which an individual works or lives (neighbourhoods) can therefore have an influence on being subjected to sexual violence. For instance, working environments like drinking spots as well as violent neighbourhoods can greatly subject people to acts of sexual violence because within such environments violent people have a sense of entitlement to commit sexual violence (Quigg et al. 2020). There is equally an abnormality attached to reporting acts of sexual violence within such environments because those acts are expected to occur within those settings hence less tendency of victims reporting cases of violence (Worke et al., 2022). All these factors at this level can equally influence the general perceptions on sexual violence, experiences and tendency of reporting cases.

The institutional level refers to the institutions in charge of addressing sexual violence which have been considered in the study. These institutions are the Department of Social Welfare and the Gender Unit of the Regional Coordinating Council (RCC). The Department of Social Welfare is a subsidiary of the Ministry of Gender, Children and Social Protection. The Department

takes charge of ensuring the general welfare of all individuals and to address issues of violence at the district levels. The Gender Unit of the Regional Coordinating Council is equally in charge of addressing gender issues in the region. The ability of these institutions to address sexual violence cases have an influence on the general knowledge of the phenomenon, the experiences and the tendency of reporting.

These institutions are to ensure that awareness creation is done on sexual violence in all communities and once this is not done, the general perception on sexual violence maybe that it is normal, there is no need to report and this can exacerbate the occurrence of sexual violence. In addition, the processes involved in addressing sexual violence cases maybe stringent and lengthy (bureaucratic) which may serve to discourage the reporting of sexual violence and its continuous occurrence.

Once sexual violence occurs, victims/survivors experience certain consequences which have been categorised into psychological, social and medical. The psychological consequences are the traumatic and in-built scars that victims/survivors tend to live with for the rest of their lives (Apatinga, 2019). The social effects are the victim-blaming and school drop-out (Josse, 2010). Victims/survivors who experience sexual violence tend to be publicly shamed and ridiculed for their experiences which can sometimes lead to low-self-esteem with suicidal thoughts. In addition to that is school drop-out which usually occurs as a result of victims/survivors trying to avoid being shamed and ridiculed. The medical effects are the contraction of Sexual Transmitted Infections (STIs) as result of sexual violence and unplanned pregnancies. Some STIs include; hepatitis, genital warts, gonorrhoea et cetera.

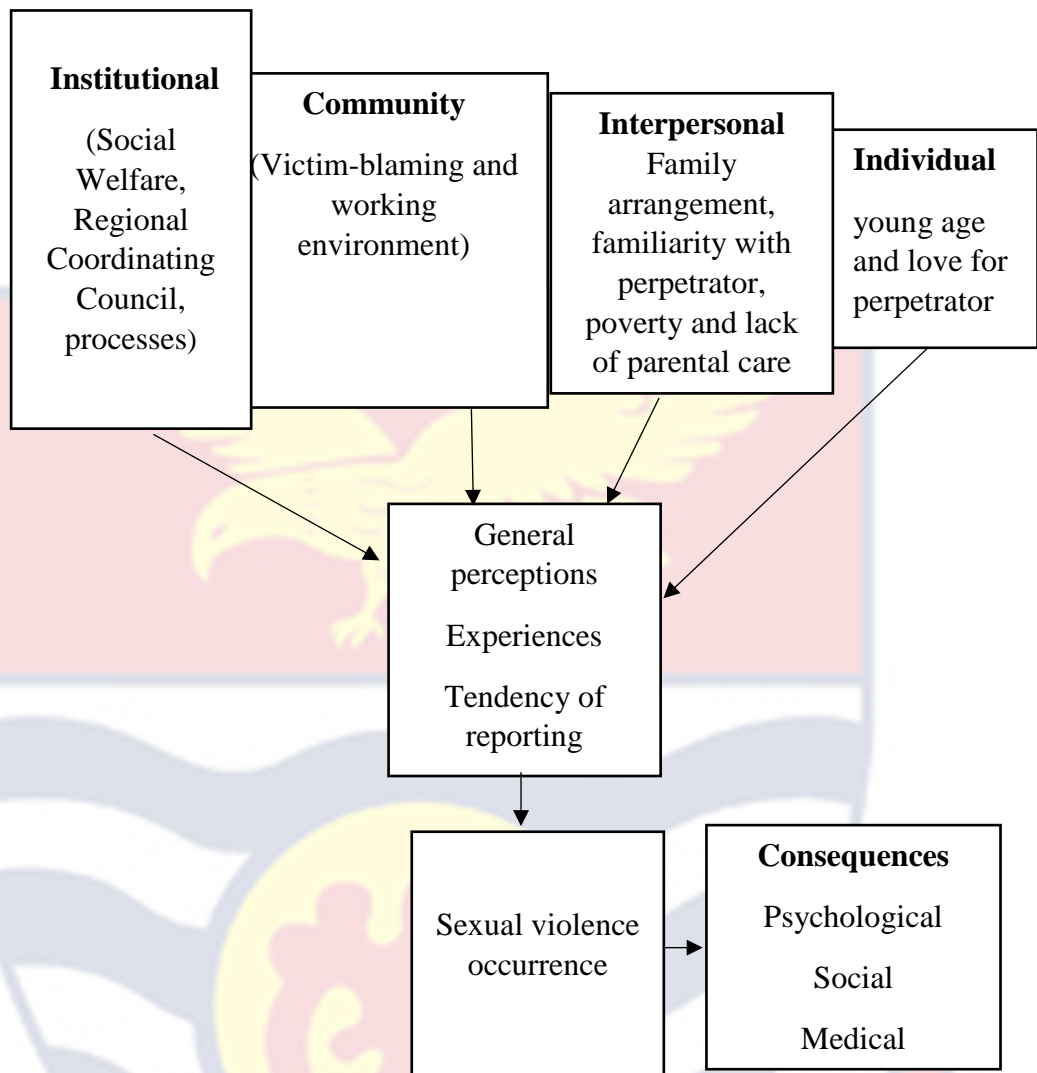


Figure 2: Conceptual Framework

Source: Heise Social Ecological Model (2011).

### Chapter Summary

The chapter included the concept of sexual violence, experiences of sexual violence, willingness and unwillingness of victims to report cases of sexual violence. The international and institutional mechanisms addressing sexual violence were also well elaborated in this chapter. The social ecological model for studying gender-based violence was adapted as the theoretical framework for the study and a conceptual framework derived from the theoretical framework which included the various levels influencing some

intermediary factors which inform the occurrence of sexual violence leading to some consequent effects on victims/survivors.



## CHAPTER THREE

### METHODS AND METHODOLOGY

#### Introduction

This chapter of the study focuses on the research methods. It explains the study area, study design, sources of data, target population, sampling procedure, data collection instrument, data analysis, and ethical considerations in the study.

#### Research Philosophy and Design

The philosophy for the study was the interpretivist philosophy. Interpretivist philosophy refers to theories on how we gain knowledge in the world and how meanings are attached to human actions. The philosophy considers people as active participants in society. Understanding and interpreting the meanings that people give to their actions are the main goals of this philosophy. Phenomenology is a type of design classified under the interpretivist philosophy. With the use of the participants' descriptions, it analyses human experiences (Donalek, 2005). These encounters are referred to as real-life experiences. To describe the significance that experiences have for each person is the aim of phenomenological investigations.

When attempting to comprehend how people live within their setting while considering the significance that those experiences have for them, phenomenology is a recommended method (Speziale & Carpenter, 2003). Participants are asked to explain their experiences in phenomenological research according to how they understand them. The study design is cross-sectional as the study was done within a single point in time or interval. This is different

from a longitudinal design in which the study is carried on for a longer period of time.

### Study Area

The study area is Bolgatanga in the Upper East Region of Ghana. The area, which is the capital of the Upper East Region of Ghana, lies east of the Kasena Nankana District, north of the Bongo District, west of the Talensi-Nabdan and South to Mamprusi West District (Ghana Statistical Service [GSS], 2021). According to the 2021 Ghana Population and Housing Census, Bolgatanga's total population was 139, 864 (48 percent male and 52 percent female). The average household size in Bolgatanga is 5 persons (Feed the Future Ghana District Profile, 2017). In terms of religious affiliations, Christianity represented 57.6 percent, followed by Traditional religion (22.3 percent), and Islam (17.1 percent). The major economic activities are the making and selling of leather works, straw baskets, and smocks.

Approximately 36 percent of the population have not had any kind of formal schooling and most (about 40.7 percent) have only attained basic school education (GSS, 2014). The language spoken in Bolgatanga is Gurune. In Ghana, there were 1354 sexual violence cases and 15 000 cases of violence against women in Ghana (DOVVSU, 2022). From the Domestic Violence Report, 2016 by the MOGCSP, sexual violence is lower in the Regions in the Northern territory of Ghana. These regions are noted as the poorest in the country with 69.4 percent, 45.9 percent and 44.2 percent poverty head count in Upper West, East and Northern regions respectively (Poverty and Inequality Report; UNICEF, 2016). Poverty is seen as a risk factor for sexual violence.

Being impoverished is a major factor influencing sexual violence and other types of abuse against women (Jewkes, 2002; Jewkes et al., 2011; WHO, 2010).

Other contributory factors are patriarchy and stereotypes which are very severe in these regions and a higher likelihood for the occurrence of sexual violence. It is very important to note that, sexual violence could be high in these parts of the country but due to peculiar reasons, it appears low. There is therefore the need to look at sexual violence as an issue in the Upper East Region because the current statistics indicate that sexual violence is prevalent in the region.

Domestic Violence and Victim Support Unit reports that between 2020 and 2021 there were 22 reported cases of sexual violence in Bolgatanga and most victims who are not captured failed to report hence one would imagine the number of unreported cases. Bolgatanga was selected because the levels of enlightenment, lower poverty levels and higher educational levels as compared to the other districts (Poverty and Inequality Report, UNICEF, 2016) may serve to inform the occurrence of sexual violence and the tendency of reporting of cases hence the need to investigate to really understand the situation at hand. There is therefore the need to understand the phenomenon through the perspectives of victims and key stakeholders in Bolgatanga.

### **Target Population**

In accordance with Hulley et al. (2007), a target population is chosen on the grounds that it will produce the necessary data for a subject under investigation. The study focused on sexual violence among young women aged 15 and 35 years who have been victims. The study focused on young women because it considers them very vulnerable (Decker et al., 2018). Young women

are at high risk for gender-based violence (GBV). Research goals for young women's sexual and reproductive health in low- and middle-income (LMIC) countries emphasize GBV prevention. The relative inexperience of young women in relationships might limit their influence and expose them to risk, especially when dating older partners. Young women who experience violence may go on to experience future violence and sexual violence (Decker et al., 2018).

### **Sampling Procedure**

Homogenous and the expert purposive sampling techniques were used for the study. The homogenous sampling was used in order to focus on young women who have experienced sexual violence whereas the expert purposive sampling focused on the stakeholders since they have expert knowledge on the topic. Therefore, officials from the Department of Social Welfare (DSW) and the Gender unit of the Regional Coordinating Council (RCC) were contacted. These units were selected as key-informants since they deal directly with matters on sexual violence. A list of 35 people which dates back to 2019 was provided by the RCC and only ten were able to give a full interview. All ten victims were recruited through consultations with the help of a Social Welfare Official. The rest of the list had ten contacts being unreachable, five refusing to be interviewed and ten that could not continue with the interviews.

### **Data Collection Instrument**

The study used an in-depth interview guide for the collection of the data in order to obtain a detailed information about the thoughts of victims and key stakeholders on sexual violence. This method of data collection offers a complete picture of sexual violence as compared to questionnaire. The interview



guide had a section on informed consent which had the general information about the research and a portion for the endorsement by the participant. The remainder of the interview guide concentrated on the participants' socio-demographic characteristics, general understanding of sexual violence, personal experiences with sexual violence, readiness to report it as well as institutional responses to sexual violence. The University of Cape Coast's Institutional Review Board examined and approved the data collection tool.

### **Data Collection Procedure**

The purpose of the study was explained to each victim during the interviews to help them gain a clearer understanding of the study and to voluntarily participate. All ten participants (victims) and two key stakeholders were given an informed consent form which was read thoroughly to them. Participants who consented to the study signed the consent form before being interviewed. The interviews were conducted at places convenient for the participants.

The method of interview used was a face-to-face in-depth interview, which offered a comfortable setting for the interviewers and the respondents to discuss concerns related to sexual violence. Boyce and Neale (2006) state that the face-to-face strategy entails conducting in-depth interviews with a small group of participants to discover their perspectives on a particular event, concept, or circumstance. According to Creswell (2005), this technique for gathering data in qualitative research is helpful when a researcher wants to gather in-depth details about participants' ideas and behaviours or investigate brand-new concerns.

## **Data Processing and Analysis**

The Braun and Clarke approach of theme analysis was used to analyse the data after the interviews' transcriptions. According to Merriam (2002), thematic analysis has been shown to be a useful method for analysing qualitative data. This procedure is a strategy for finding, analysing, and reporting patterns (themes) in data (Braun & Clarke, 2006) and there are six stages in thematic analysis. The six stages involved in the thematic analysis procedure which are familiarisation with the data, coding of the data, generation of themes in the data, reviewing of the themes, defining and naming of the themes and final write-up of the findings (Braun & Clarke, 2006) were employed in the analysis study.

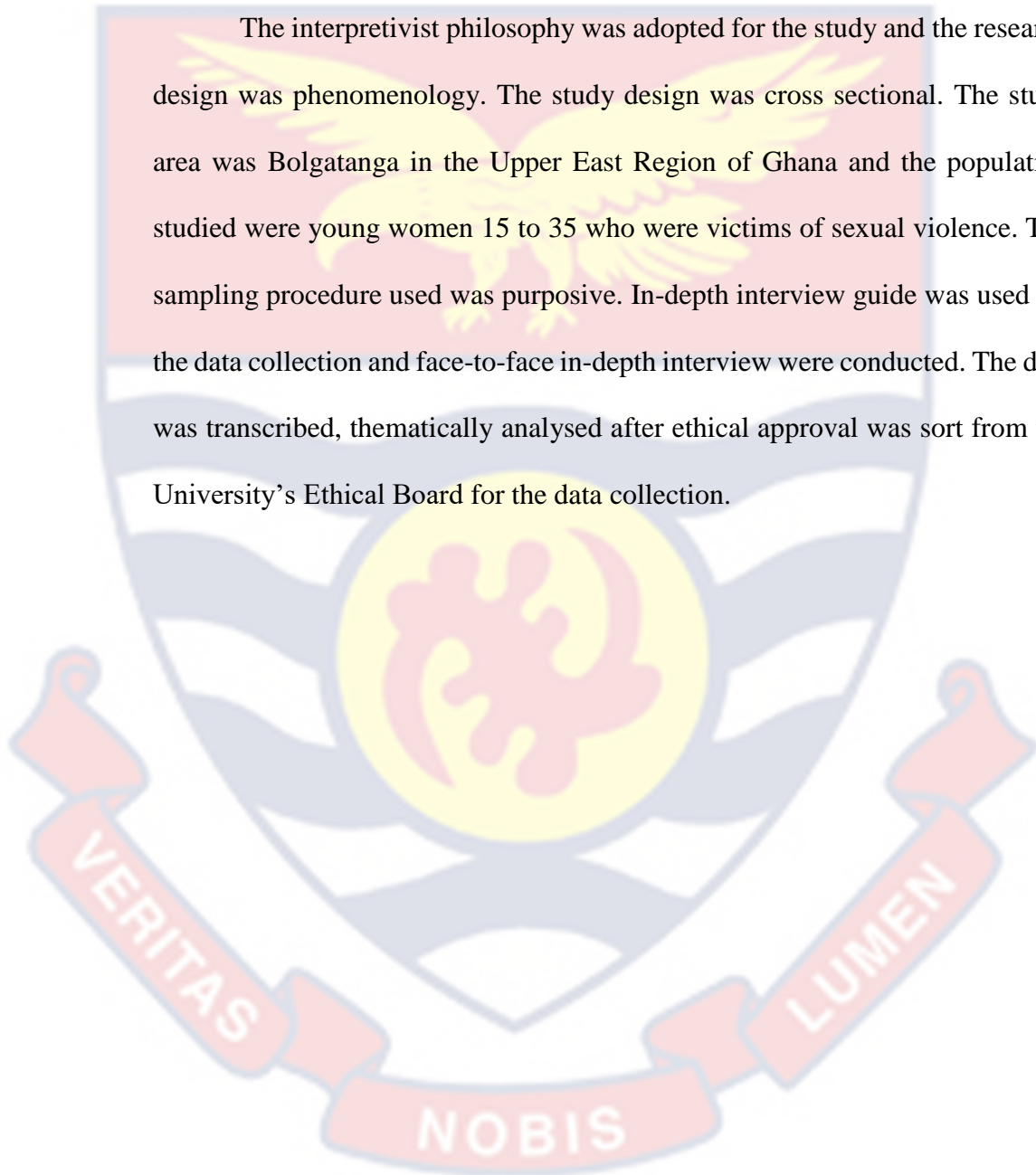
## **Ethical Considerations**

The WHO (2001) states that ethical considerations are made in order to prevent the rights of human subjects from being infringed and to reduce hazards when conducting research. An informed consent form was made accessible to the participants, allowing them to continue the study or withdraw at any moment, in accordance with WHO guidelines to guarantee that participants' rights. Participants were informed that they might inquire about the study at any time and that taking part in it, whether before, during, or after, was entirely up to them. They were also made to understand that their dignities, rights, and identities would be protected. The ethical issues also assured the confidentiality and anonymity of participants. The assurance of anonymity ensured that participants would have their identities protected as they were given pseudonyms instead of their actual names. Participants equally had the right to

choose when and where would be comfortable for the interviews. The study obtained ethical approval from the Institutional Review Board (IRB) of the University of Cape Coast (UCCIRB/CHLS/2022/46).

### Chapter Summary

The interpretivist philosophy was adopted for the study and the research design was phenomenology. The study design was cross sectional. The study area was Bolgatanga in the Upper East Region of Ghana and the population studied were young women 15 to 35 who were victims of sexual violence. The sampling procedure used was purposive. In-depth interview guide was used for the data collection and face-to-face in-depth interview were conducted. The data was transcribed, thematically analysed after ethical approval was sort from the University's Ethical Board for the data collection.



## CHAPTER FOUR

## RESULTS AND DISCUSSION

## Introduction

This study was to explore the perspectives of victims/survivors and key stakeholders on sexual violence in Bolgatanga of the Upper East Region of Ghana. This chapter of the study presents the sociodemographic characteristics of the participants as well as experiences on sexual violence. The effects of sexual violence, the reasons for reporting sexual violence and the institutional response on sexual violence are equally well presented. The socio-demographic characteristics of the participants are shown below;

Table 1.

**Table 1: Socio-demographic characteristics of participants**

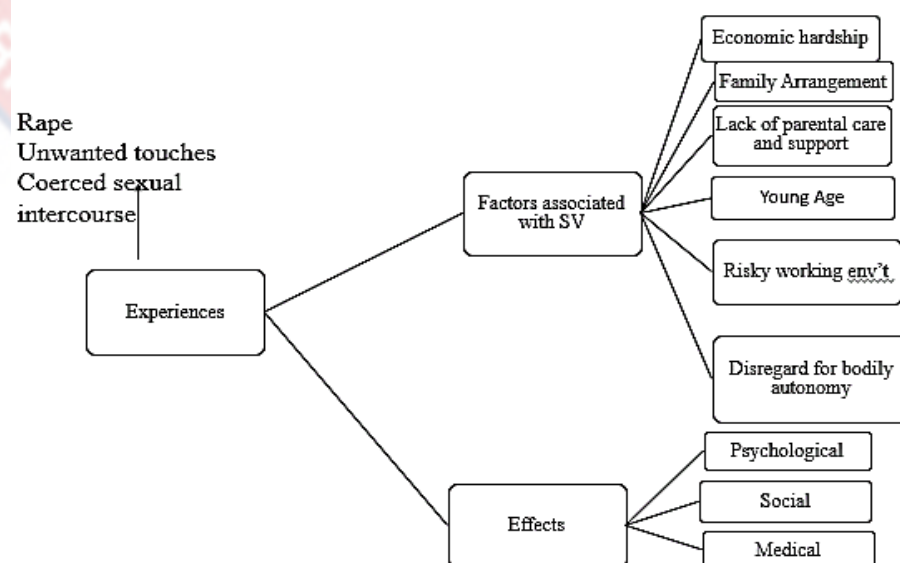
Pseudonyms	Age	Education	Economic status
Participant 1	21	Primary	A weaver
Participant 2	25	JHS	Not working
Participant 3	22	SHS	Food-vendor
Participant 4	24	JHS	A shop-owner
Participant 5	23	Primary	Learning a trade
Participant 6	29	Tertiary	A teacher
Participant 7	24	Primary	Not working
Participant 8	24	SHS	A weaver
Participant 9	19	SHS	Shop-attendant
Participant 10	24	Primary	A seamstress

Source: Field data, 2022

The ages of the participants ranged from 19 to 45 years. In terms of marital status, all victims/survivors were single with only the two key informants being married. In general, all respondents had attained some formal education; five had attended up to primary school level, two completed Junior High School (JHS) education, three had Senior High School (SHS) education and one had attained tertiary education. The educational attainment among victims/survivors as depicted by the results was very low. In terms of economic activity, all participants were either learning a trade, economically engaged with the exception of two who were not economically engaged.

The Heise ecological model provides a theoretical lens to explain sexual violence against young women and states that some experiences of sexual violence could be categorised into various levels. These levels, which are the individual/ontogenic level, microsystem, exosystem and the macrosystem, have been applied to discuss the experiences of victims on sexual violence. The willingness of victims to report cases and the institutional response to sexual violence were equally considered and discussed with literature.

### Themes and Sub-themes on Objective One



### Sexual violence experiences

When questioned about the types of sexual violence experienced, victims/survivors indicated that what they experienced included successful penetration, unwelcome touches, and coerced sexual intercourse. Out of the ten, only one had someone touch her inappropriately; six were victims of rape, and the rest were coerced into having sexual intercourse. The quotations are as follows:

*My experience was penetrative sex by own step-father. It happened because he does not see me as his child. (Participant 5, 23 years, learning a trade).*

*I was raped by a pastor who had offered to take care of me because I lost my father. (Participant 10, 24 years, a seamstress).*

### Sexual violence at the individual level

The model's personal qualities, such as an individual's past experiences, drug or alcohol usage, age, having witnessed domestic abuse, and psychological or personality issues, all affect sexual violence experiences at the individual level. Considering individual personal characteristics, there is a relationship between these personal characteristics and an individual's personal experiences and the tendency of experiencing sexual violence. It was realised from the study that the young women that experienced sexual violence had a specific personal characteristic such as being young. A victim reported that she first experienced sexual violence at a very young. She recounts when she was raped at the age of 13 in the quotation below;

*I was 13 years old, very young. I was taken care of by my extended family since I am an orphan. At that time, I was in primary and I loved working a lot. There was an officer of the law whom I go to help in washing his clothes, cleaning his room and cooking for him. In that process, the man ended up sleeping with me and I became pregnant. When I became pregnant, my family handled the case as a family matter (Participant 1, 21 years, a weaver).*

Ningsih and Handayani (2021) state that many perpetrators violate victims who are very young because it is easier to trick them into doing what the perpetrator wants. According to them, the perpetrator takes the approach of establishing a relationship with the victim and then goes ahead to commit the act. According to Blake et al. (2014), adolescents are the most common victims of sexual assault, and it is generally believed that 12 to 25 percent of females and 8 to 10 percent of boys under the age of 18 will experience sexual assault.

According to Kennedy et al. (2014), 8.3 percent of Malaysian students reported experiencing sexual abuse as children. A high prevalence of intimate partner violence was linked to a higher risk of HIV infections, low socioeconomic position, younger ages of women, and use of alcohol and illegal drugs by the victim's spouse in a comprehensive analysis of African research from 2000 to 2010. Equally Wrigley-Asante et al (2016) adds that girls as young as 2-13 years have fallen victims of sexual violence. Age serves as a form of vulnerability to sexual violence.

## **Sexual violence at the microsystem**

### **Lack of parental care and support**

The microsystem of the model includes the family environment, family stressors, family interactions, poverty and parenting skills (lack of parental care and support) (Heise, 2011). The family forms part of the individual's immediate environment in which he/she may experience or exert violence. Lack of parental care and support due to improper parenting skills is observed as one contributory factor of one's exposure to sexual violence in the study. As realised from the study, a young woman who lacked the needed parental care and support was sexually violated. This is expressed in the quotation below;

*If my parents were fulfilling their responsibilities, I would not have experienced sexual violence. I say this because I had no one to guide me. I was friends with a particular boy who at some point abused me sexually. I got pregnant and I am now struggling to fend for the child (Participant 4, 24 years, a shop attendant).*

According to some studies, there are compelling reasons to believe that people who lacked parental supervision were more likely to be sexually violated. Breiding et al (2013) identified risk factors such as lack of parental care and support, residential instability, being out of school, poverty and food insecurity as factors subjecting people to sexual violence as equally observed in the study.

### **Family arrangement**

An individual's family could serve as a significant determinant of being subjected to sexual violence or exerting abuse on others. Living and family arrangements should be such that they protect their members especially, young



people from abuse and harm. However, this protection is compromised when the family experiences some stressors like breakages/separation in unions hence a complete restructuring of the family to include completely new individuals (step-parents, half brothers and sisters et cetera). There is therefore the tendency of some level of exposure of the vulnerable members of the family to some degrees of abuse. Instances could include a young woman living with her mother and her step-father. It is very likely that the step-father may be abusing the young girl. A stepchild is more likely to be abused than a child who is genetically related, according to Hilton et al. (2015). It is confirmed from the study that a young woman had suffered sexual violence at the hands of her mother and step-father. Gil (2019) discovered that roughly one-third of a sizable sample of American children who had been abused had been mistreated by stepfathers or other father figures (such as moms' boyfriends). The findings of this study are consistent with that found by Gil and other studies as expressed in the following quotation;

*I was staying with my mother and step-father. The man was having sex with me whenever my mother went to work or travelled. I was suffering in silence until one day I decided to inform my mother about what her husband was doing to me. She shouted at me that I was a liar who wanted to destroy her marriage (Participant 5, 23 years, learning a trade).*

Among 930 adult San Francisco-based women chosen at a random, Kenner observed that 17 percent of the women who had step-fathers as a principal father figures in their childhood years had been sexually violated by them as compared to 5 percent women who had biological fathers (Kenner, 2007). Claxton-

Oldfield and Whitt (2004) claim that the rates of physical abuse or murder committed by stepparents, especially stepfathers, are significantly greater than those in biological families.

The tendency of a stepchild going through abuse, especially sexual violence, can be explained using the theoretical evolutionary point of view. According to the evolutionary theory, stepchildren are more likely to experience abuse because a stepparent will devote less time, attention, and effort to raising a child who is not related to them (a genetic stranger) than to raising his or her biological child (Smallbone et al., 2013). For instance, in Ghana, teenagers who lived with male relatives or stepfathers were claimed to have experienced sexual abuse, according to a study by Addae and Tang (2021).

According to Claxton-Oldfield et al. (2004), children who live with a stepfather are more likely to experience maltreatment than children who are raised by both of their original parents. Young women in step-father families are more likely to be abused by their step-fathers because they are not the biological children of such fathers. Additionally, a notion that stepchildren are more likely than native children to experience physical and sexual abuse is supported by the social-evolutionary (social-biological) approach. The argument makes the case that parents will invest more in one's biological child than they will in other children in order to increase that child's chances of survival and, consequently, reproductive success (Berger, 2009). This means that a parent who invests so much into a biological child is most unlikely to abuse such a child because the investment may tend to become useless in the end.

According to these findings, stepparents are more prone to physically mistreat non-biological children because they have less invested in them and because they do not pass on their genes (Berger, 2009). This is especially true when resources are limited. These claims are strongly confirmed from the study that a similar case was experienced by a young woman whose widowed mother had to re-marry to take care of her.

### **Economic Hardship**

The financial conditions of their families put young women in compromised situations of exploitation and victimisation. Out of the ten, about six were subjected to sexual violence due to poverty. The quotation below gives clearer elaboration on the above statement:

*My widowed mother did not have the resources to support me in my schooling and I was made to live with a pastor and his wife. One day, the wife of the pastor left for some studies somewhere and he raped me and I got pregnant. I do not blame it on anybody than poverty (Participant 10, 24 years, a seamstress).*

Sexual violence is more prevalent among young women from poor homes and as realised from the study findings majority of such sexual violence cases are not prosecuted. According to research, those who are poor and powerless financially are more susceptible to sexual assault (Greco & Dawgert, 2007). Young women who are poor are more likely to be sexually violated and are also more exposed to having their sexual rights violated (Jolly & Hawkins, 2010). For instance, in Lesotho, daughters who are employed as domestic helpers in

the homes of wealthy extended families experience various sorts of abuse, including rape (Wrigley-Asante, 2016).

Therefore, there is a connection between poverty and sexual violence regardless of your age, race, religion, or degree of education. This demonstrates how victims of sexual abuse frequently have certain vulnerabilities. Thus, one of these vulnerabilities has been identified as poverty. Equally, some victims are forced into sexual intercourse because they need certain essential items like sanitary pads, soaps, clothes, uniforms, sandals et cetera as expressed by one of the victims below;

*I was coerced by a 30-year-old man into having sex with him because I needed money to buy a sanitary pad. I gave in to the sex and got pregnant. I gave birth to the child and I am now struggling to take care of the child... (Participant 2, 25 years, not working)*

This is clearly demonstrated in this study where a perpetrator established a relationship with the victim/survivor by luring her with the needed form of support which led to her being sexually violated. Young women from poor backgrounds struggle every day to meet their basic requirements, which include clothing, food, housing, and transportation. To meet such necessities of life, some exchange sex for essential goods (WHO, 2002). The victim in the above quotation had to exchange sex for as little as GHC 20.00 in order to buy a sanitary pad. Thus, dependency on others is a daily reality for those living in poverty. This can necessitate high-risk survival lifestyle such as less ability to control one's own sexuality or to consent to sex, demand for safer sex and being at risk of being sexually violated and contracting STIs (Greco & Dawgert, 2007;

WHO, 2002). Children from lower socioeconomic backgrounds may also be at risk because they may receive less parental supervision (from women who may not be able to afford childcare or parents who may not have the best parenting abilities). This is observed in the study as a victim's mother lacked money to afford childcare and the said victim had to stay with a man who ended up abusing her.

### **Sexual violence experiences in the exosystem**

#### **Risky working environments**

An individual's work place could expose her to sexual violence. Sexual violence can occur in public places such as bars and restaurants, and when it does, victims are expected to tolerate it. According to the following quotation, participant nine faced sexual violence because she worked in a drinking spot;

*There was a time in this drinking spot when a man came here, he acted as if he was drunk and he hit my buttocks. I told him I didn't like it and he hit it again. When I turned and looked at him he said, "who am I that he touched me and I am bluffing". My tears just started flowing and when I told my mother she said so long as I am selling, I have to understand. I was just angry that day because he was an adult (Participant 9, 19 years, shop-attendant).*

The workplace may pose as a threat to an individual's safety hence subjecting her to experiences of sexual violence. Environments that serve as threat to experiences of sexual violence are drinking spots and young women working within such areas are more of the time subject to such activities (Quigg et al. 2020). It was realised from the study that the victim/survivor experienced sexual

violence as her buttocks was touched inappropriately because of the particular environment she worked. This is in line with the literature evaluation that found nightclubs, pubs, and bars to be hotspots for sexual violence, with an increasing corpus of research indicating these places as such (Quigg et al., 2020). These violent behaviors may result from erroneous views, such as when someone believes that they are sexually attracted to someone else or that a sexual act is appropriate to them.

These environments may seem as great opportunities for someone to touch another person inappropriately (Sanchez et al., 2019). It is, therefore, understandable to make a claim that young women who are found in such environments as workers are vulnerable to sexual violence. In the hospitality and tourism sectors, one in four female workers reported experiencing sexual misconduct (Worke et al., 2022). According to Worke et al. (2022) over 20 percent of Ethiopian waitresses who work in hotels and restaurants have been sexually violated. Therefore, at the microsystem level, the factors that predisposed young women to sexual violence were the kind of family environment, family settlement, poverty, and work environment.

We equally consider the justice system, community services, and other institutions which are equally exosystem factors. The Social Welfare under the Ministry of Gender, Children and Social Protection addresses domestic violence cases, especially sexual violence cases. However, the challenges that remain persistent are that there are the capacity and other logistical constraints faced by the institution (Mitchell, 2011). The lack of specific support services, such as counselling, emergency shelters, legal assistance, medical services, and the absence of a vehicle for convenient transportation of victims, as well as the

victims' and their families' lack of cooperation and the courts' slow pace, are additional difficulties.

The incentives systems, privacy terms, referral systems, and parental consent regulations constitute the institutional mechanisms addressing sexual violence in communities and neighbourhoods. The incentives are the available mechanisms addressing issues of sexual violence, especially with regard to prosecution and punishment meted out on perpetrators of sexual violence. The premise that raping a lady or defiling a young child would be more expensive than the gain connected with such a heinous crime led to the establishment of punishments for those found guilty of sexual violence (Boateng, 2015). Any person convicted of rape is subject to a minimum sentence of 5 years and a maximum sentence of 25 years (with hard labor) under section 98 of the 1960 Ghana Criminal Code (ACT 29). This type of punishment is intended to deter future victimization of innocent women and children (Boateng, 2015).

When there is no functional justice system available to address issues of sexual violence, then the possible outcome is an increase in sexual violence. The privacy terms are the mechanisms put in place to ensure that the privacy of victims is ensured and that they can confidently rely on others to protect them especially the institutions. It is observed in the study that right institutional mechanisms needed to ensure justice are limited hence the need for more efforts to be put in place for functional institutions to address sexual violence. About trust and confidence in the institutions, Boateng (2015) discovered that most victims of sexual violence lack trust and confidence in some institutions like the Police to protect them and this is consistent with this current study. There is the

urgent need for trust and confidence to be built in the justice system through proper investigations devoid of corruption.

### **Sexual violence at the macrosystem level**

The macrosystem of the model considers sexism, male domination, gender inequity, contempt for women's bodily autonomy, and social/cultural norms. The lives of people and their families are greatly influenced by social and cultural standards. Women's vulnerability, especially young women, may intensify if they belong to a cultural environment that disregards the rights of women and does not see anything wrong with heinous crimes against women like that of sexual violence and considers the practice normal. The social acceptance of gender inequality and discrimination is the core cause of gender-based violence (GBV), particularly sexual violence against women, which is why it is tolerated (Karim & Baxter, 2016).

### **Disregard for the bodily autonomy of women as associated with sexual violence experiences**

The study observed that the disregard for women's rights was associated with sexual violence experiences among the victims/survivors in the study. Victims/survivors admitted that their experiences of sexual violence could be attributed to the inability of some community members and leaders to give a high level of respect and regard for their rights. This is expressed in the quotation below:

*I can say that my experience of sexual violence and that of all other girls are as a result of the inability of community members to respect our rights as young women. I say this because when a girl is raped and is still blamed for her predicament in the*



*community, it shows that nobody really cares about what happens to girls (Participant 3, 22 years, food vendor).*

As expressed above, the blaming of victims/survivors for their predicament is a clear indication of the disregard for the bodily integrity and the rights of young women which therefore explains the continuous occurrence of sexual violence. Numerous myths concerning sexual assault have been discovered in a variety of cultural contexts (Collings 2003; Jewkes 2004). The most widely held misconception is that males naturally struggle to restrain their sexual appetites. Child abusers must have a particular, severe sort of psychological disorder, sexual or mental aberration, or both (Collings, 2003; Jewkes, 2004). This is in consonance with the blame mechanisms placed on the victims/survivors with the preconceived notion that some of the victims/survivors are already “bad girls” who lurk around men, thereby arousing the interest of men who everyone knows “cannot control their sexual desires” as expressed below;

*Even if it is rape, they can say you are bad girl who wanted it because if you did not want it how can the person just rape you like that (Participant 9, 19 years, shop-attendant).*

This means that in a highly patriarchal society like Bolgatanga, certain sexual beliefs and ideologies are likely to flourish, and men get the opportunity to abuse women sexually and are not punished for their actions as observed in the study. In Ghana, research on rape myth revealed a greater rate among participants (Boakye, 2009). This finding confirms the admittance by some of the research participants who acknowledged that some residents of Bolgatanga had preconceived notions about rape and rape victims. Boakye (2009) further states that Ghanaians’ acceptance of the rape myth pattern has the ability to

cause people to denigrate and normalise the crime and make them less receptive to the idea that sexual violence is on the rise.

The opinions of community members, traditional and religious leaders, neighbours, work groups, and other local social groupings and networks are likely to influence individual and family attitudes, including acceptance or tolerance of sexual violence. The norms are equally that of the abnormality to report cases to the authorities since it is believed that such issues within patriarchal communities are not regarded as really important. It is equally important to note that gender unequal roles place most women in positions where their subjection to sexual violence is justifiable on the basis that they belong to subordinate groups within patriarchal societies (Boakye, 2009). The subordination of women therefore gives an explainable situation where victims were even victim-blamed for their predicaments.

Globally held generalizations and attitudes are shaped by social and political settings. These larger political or economic institutions received little consideration in the initial social-ecological model that was used to study domestic violence. A further study by Jewkes et al. (2002) demonstrated the ways in which political and social institutions participate in and reproduce domestic violence as well as the ways in which people's experiences of domestic violence are impacted by economic inequality. The police, courts, legal aid, and health and social assistance organisations are important political and social institutions. At the wider societal and political level, cases of sexual violence are unreported and, in other cases, perpetrators of sexual violence are not prosecuted. These people within institutions also think that the victims/survivor

could have prevented the incident if they had changed their behaviour in some way (Boateng, 2015).

### **Effects of Sexual Violence**

Sexual violence bears a wide range of consequences such as medical, physical, psychological, social, and economic on its victims/survivor. These consequences tend to complicate the general wellbeing of the individuals and make their lives somewhat unbearable. The accompanying consequences post sexual violence experiences which can undermine a victim's/survivor's ability to adapt to her social environment and stigmatisation and discrimination, can jeopardise her mental health (Josse, 2010) and basically her overall wellbeing.

### **Psychological Effects**

Sexual violence has a multitude of psychological ramifications that majority of victims/survivors must deal with for the rest of their lives. Internal scars that remain unhealed with victims/survivors living with such scars for the entirety of their lives have a significant psychological impact, as indicated below;

*Having been raped in the past, I tell myself that what happened is past but I must say it still affects and haunts me (Participant 1, 21 years, a weaver).*

Kilpatrick and colleagues (2007) found that sexual violence victims and survivors frequently struggle with mental health issues, such as depression, eating disorders, sleep disturbances, anxiety, and suicidal ideation (Apatinga, 2019). The psychological consequences of sexual violence as discovered in the study are the mental identities created in the minds of victims/survivors of sexual violence. These mental identities lead to a radical change in the image

that the victim/survivor has about herself (Josse, 2010). Psychological and social effects are closely related, as an individual who gets victimised is already traumatised through the act and equally through the fact that she has to adapt to her social environment, such as stigmatisation and/or discrimination (Josse, 2010). This is observed in the study, as a victim was ridiculed and shamed in her social environment for being victimised sexually. Psychologically, a victim/survivor has an internal trauma which she feels may not heal at any time as realised in the study.

A woman may also be prevented from participating actively and constructively in her daily life by a psychological disease like mental trauma or psychosis (Amone-P'Olak, 2015). Victims/survivor of sexual violence as observed from the study, due to psychological imbalance, are equally very likely to engage in risky sexual behaviours and alcohol abuse. The experience puts victims in a situation of going through somatic effects such as increased psychological disorders like depression, anxiety, posttraumatic stress disorder, and poor academic performance (Ajayi et al., 2021). As there are children involved in the sexual violence incidents in the study, seeing the children who are as a result of rape/coerced sexual intercourse steers up more psychological trauma and unrest as expressed below;

*After giving birth as a result of rape, whenever I see the child,  
I feel so much hurt and pain because she reminds me of the  
experience (Participant 10, 24 years, a seamstress).*

We gain a clear knowledge that the psychological impacts of sexual violence experienced by victims are internal scars that might stay with them for

the rest of their lives and since a child is involved, seeing the youngster every day reminds them of their predicament.

### **Social Effects**

#### *Shame*

Sexual violence has social ramifications such as shame on victims/survivors. Sexual violence exposes victims to stigmatisation and discrimination which can jeopardise their positions in society (Josse, 2010). When sexual violence occurs in a typical African culture, the victim/survivor bears the brunt of the shame, as she is sometimes blamed for her condition. Sexual violence victims and survivors frequently face discrimination that results in their being ignored, having their rights violated, and being denied access to products and services. Sexual violence victims and survivors are made to feel ashamed and shunned everywhere they go and in everything they do, whether by their families and communities, schools, workplaces, places of worship, legal institutions, or medical facilities. This is true whether there is war or peace, and victims and survivors are typically "buried alive" by society (Josse, 2010). According to Josse (2010), victims/survivors are frequently discouraged from speaking out, rejected by their spouses, barred from getting married, and prohibited from engaging in certain activities like cooking and serving food, cultivating and harvesting crops, or caring for infants. They are even frequently demonized by their own parents as expressed below;

*The relationship between I and my mother has become sour because of what I told her about her husband. She still shames me all the time over it and I am virtually suffering within. She even accused me of throwing myself at her husband. I thought of*

*leaving the house or ending my life on several occasions because I could not believe my mother could subject me to such a treatment (Participant 5, 23 years, learning a trade).*

Sexual violence victims and survivors face responsibility for their circumstances in many communities. This is observed from the study, as a victim/survivor was blamed and stigmatised for her predicament. The victim's status as a disgrace to the community is justified using conventional ideas and prejudices (Josse, 2010). The victims/survivors are thought to be receiving divine retribution for purported sins, such as provocative attire or conduct that allegedly inspired the offender to carry out the violent act. Additionally, discrimination against victims and survivors results in their exclusion, deprivation of rights, and denial of access to goods and services (Josse, 2010). The worst of all shameful situations is becoming pregnant and everyone considering the pregnant victim/survivor as most likely a girl who was not given sufficient moral training and hence jumped from one man to the next, resulting in her current situation. This has been expressed by some of the victims/survivors in the following quotations;

*When I was sexually violated, I was blamed and shamed in addition. My parents were also blamed for not giving me proper moral training. The moment you are raped and you talk about it, people tend to shame you. It would have been better I kept quiet (Participant 3, 22 years, food vendor).*

Victims/survivors equally experience the effects of unintended pregnancy, the shame accompanied with it and the struggles of childbirth. Young people who are raped are less likely to use condoms, and because adolescent girls and

young women (AGYW) are less knowledgeable about emergency contraceptives, they are more likely to become pregnant unintentionally (Ajayi & Ezegbe, 2020). Krebs et al. (2016) add that the underuse of contraceptives, underreporting of sexual violence incidents, and lack of appropriate care to address the potential consequences of sexual violence, including unintended pregnancy, are additional pathways through which sexual violence may result in unintended pregnancies. The issue of becoming pregnant abruptly as a result of sexual violence is expressed by one of the participants below;

*I got pregnant when I did not plan it and so I had to deal with shame and ridicule because many people who did not know the whole story perceived me as a “bad girl”. I could even hear some whispering to themselves whenever I passed by (Participant 10, 24 years, a seamstress).*

In addition to the fact that victims/survivors of sexual violence rarely disclose their issues of sexual violence, the risk of an unintended pregnancy is high because victims/survivors are rarely going to prevent pregnancy (Ajayi & Ezegbe, 2020). In addition to becoming pregnant is the fact that in most societies over the world, a young person who is seen to be pregnant without marriage is regarded as someone without proper moral upbringing.

#### ***School delay or drop-out***

Experiencing sexual violence leads to the educational disruption of victims/survivors. Victims/survivors of sexual violence, as observed from the study, stopped or delayed school because of the fear of being ridiculed, shamed, or mocked by their colleagues who may have heard their stories. One participant account reveals that she was an orphan whose schooling was cut short due to

sexual violence. According to her, she was sexually violated because she approached her perpetrator to give him household assistance such as washing his clothes and cleaning his house. This landed her into teenage pregnancy which led to an abortion and school drop out. Another victim/survivor had to delay school because of pregnancy as a result of sexual violence. The issue of school delay and drop-out is expressed in the quotations below;

*When I got raped, I stopped school but went on to acquire a skill in weaving of which I have now passed out (Participant 1, 21 years, a weaver).*

*Because of being shamed in my community for talking about my story of rape, I had to drop out of school because whenever I went to school, my friends and even teachers ridiculed me (Participant 8, 24 years, a weaver).*

*Whilst my friends were in school studying, I had to delay school because of the pregnancy (Participant 10, 24 years, a seamstress)*

According to Josse (2010) victims/survivors are often excluded from school and work as a result of their experience of sexual violence. Josse continues by saying that raped girls are frequently viewed as poor role models and are thus either directly or indirectly dismissed from school, particularly if they are pregnant. Apart from shame and ridicule, poor academic performance as a result of lack of concentration in school could be explained as one of the reasons for school drop-out. According to Stemac et al. (2018), the kind of unwelcome and forceful behaviors encountered by students affected their capacity to focus on their schoolwork. Based on their interviews with students



who had been subjected to sexual coercion, the authors discovered that female students who had been subjected to sexual assault reported changes in attendance and educational aspirations, as well as a decrease in academic motivation and attention. (Stemac et al., 2020). According to a survey of female college students in the United States, those who had experienced sexual violence at some point in their lives were much more likely to drop out than those who had not (Baker et al., 2016). Equally, victimization can impair academic performance and advancement, endangering women's future participation in the political, commercial, and economic spheres (Decker et al., 2018).

### **Medical Effects**

Some victims/survivors go through certain medical effects such as the contraction of Sexually Transmitted Infections leading to some psychological traumas. Globally, an estimated one in three women experience physical or sexual violence (Decker et al., 2018). Physical, sexual, and mental health morbidities resulting from gender-based violence are well characterised, including unintended pregnancies and STIs including HIV (Decker et al., 2018). It was realised from the study that victims/survivors had contracted gonorrhoea and hepatitis which are all STIs. According to Brechtel (2010), young women in the United States who have been sexually abused have higher rates of gonorrhoea. Aside from being humiliated, victims/survivors reported having to deal with medical effects like infections. Three of the respondents indicated that they acquired Sexually Transmitted Infections. The following quotation elaborates on some of the medical effects of sexual abuse experienced by some of the victims/survivors;

*After I was coerced to have sex, I developed some horrible itches around my private part. I went to the hospital and they told me I had contracted STI. I was put on medication (Participant 7, 24 years, not working).*

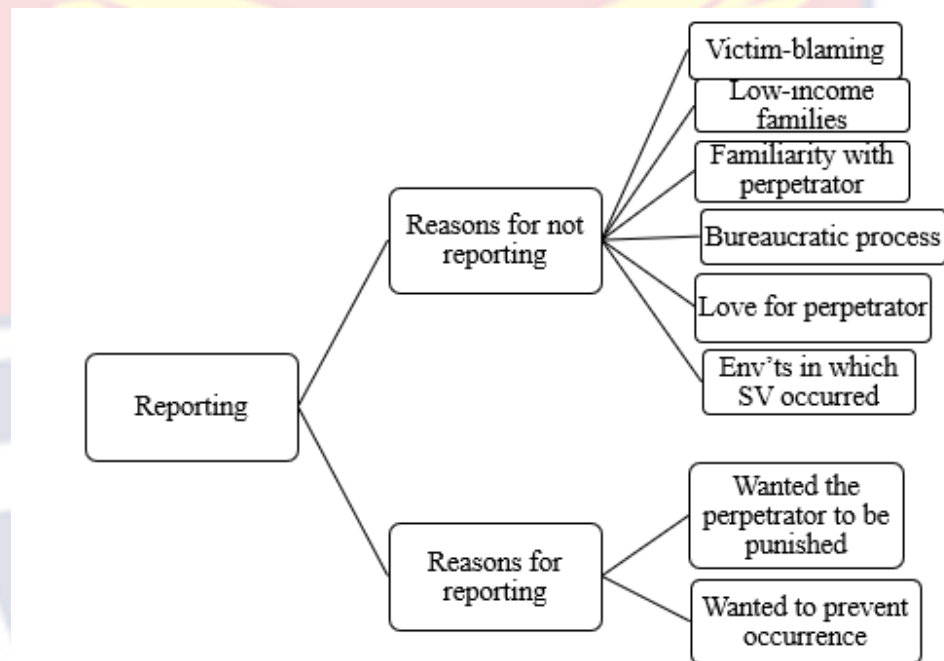
*Sincerely speaking, whenever I remember that experience, I begin to weep. The reason is that, I contracted hepatitis B after I was raped and went to the hospital for a check-up (Participant 3, 22 years, sells food).*

The study also revealed that a victim/survivor had faced a medical consequence of an unintended pregnancy as a result of being sexually violated. This seeks to explain the point that victims/survivors are faced with the challenge of becoming pregnant without any plan. The WHO revealed that women who report forced sexual intercourse by any perpetrator appear to be at greater risk of unintended or unwanted pregnancy than women with no history of abuse which can have serious health complications (WHO, 2013). Young women who become pregnant as a result of rape are associated with high rates of negative consequences for the pregnant mother and the baby (Yazdkhasti M et al., 2015).

The pregnant woman or girl is more exposed to suicide (Afshar et al., 2004) and a higher depression rate, poor nutrition for the baby during gestation (Fourn et al., 1999), mental health issues, risk of miscarriage or low birth weight infants (Sereshti et al., 2005) and a delayed onset of prenatal care (Karacam et al., 2011). Pregnancy rates after non-partner rape have been observed in studies, and they range from 5 percent among women in the USA to 17 percent among young Ethiopian women and 15–18 percent among women and girls seeking assistance

at rape crisis centers in Mexico (WHO, 2012). The quotations above focussed on some of the medical effects of sexual abuse experienced by victims/survivors. The victims/survivors suffered illnesses such as vaginal discharges and hepatitis B.

### Themes and Sub-themes on Objective Two



### Willingness to Report Sexual Violence

Victims/survivors of sexual violence who reported their cases to the police or other authorities did so because they wanted the perpetrators to be punished and to prevent the future reoccurrence of such incidents thereby protecting other girls from suffering the same predicament. These reasons for reporting are consistent with the findings of Boateng, 2015 and others like Wolitzky-Taylor et al., 2001. According to Boateng, 2015, the desire to report sexual violent crimes demonstrates the willingness of Ghanaian women to see to it that offenders of such heinous crimes are punished and deterred from committing similar crimes again. Two or three elements contributed to victims'

ability to report their experiences. Victims/survivors reported sexual violence instances because they wanted the perpetrator punished (Boateng, 2015) and to prevent similar incidents from happening to other females (Wolitzky-Taylor et al., 2001). According to the quotation, participant six reported because she wanted the criminal to be punished.

*People of that nature should be punished because they are a threat to human survival. I reported because I wanted him to be punished (Participant 6, 29 years, teacher).*

Victims/survivors equally reported their cases because they want to prevent a future occurrence of the incident specially to protect other girls (Felson et al., 2002; Wolitzky-Taylor et al., 2001 cited in Boateng 2015)

*My case was reported and taken seriously by the Youth Harvest Foundation because they wanted to seek justice for me and to equally protect other girls (Participant 1, 21 years, a weaver).*

Punishing the perpetrator helps to put some level of relief on the victim/survivor by giving them the assurance that indeed what happened to them is highly abhorred by society. This gives other victims/survivors the opportunity to report their cases. In addition to that, punishing the perpetrators deters other perpetrators and for that matter other young women are protected from being victimised. The punishments will not only deter the offenders but others who are likely to commit such crimes. Consistently, we observed that a victim/survivor indicated that she wanted the perpetrator to be severely punished which informed her report. Equally, a victim/survivor was supported by a Non-Governmental Organisation to report her case of sexual violence because per the Organisation's mission, it is to protect girls from experiencing sexual

violence hence assisting the said victim/survivor to seek justice will help in the achievement of their mission.

### **Reasons for not reporting**

The desire of individuals not to report cases of sexual violence is dependent on a number of factors. As discovered from the study, some of the reasons which prevented reporting by victims/survivors included victim-blaming, the type and environment of sexual violence committed, poverty, familiarity with the perpetrator hence family settlement of cases, bureaucratic process in reporting and love for the perpetrator. The type of sexual violence encountered explained the tendency of reporting sexual violence. It was realised that most victims/survivors of sexual violence tend to ignore the tendency of reporting cases of sexual violence because they seemed not to see the relevance of reporting such cases. Studies have shown that the nature of sexual assault influences the tendency of reporting. As observed in study, Muehlenhard et al., (2017) found that total rape was more likely to result in a complaint of sexual assault than attempted rape, touching, or fondling.

### **Blame Associated with Reporting**

Offences, when committed, often have two sets of individuals: those on the side of the victim/survivor and those on the side of the offender or perpetrator. When such offences such as rape, abuse, insults, murder, or any form of injustice occur, there are usually causative factors that serve to influence the act or the offence in the first place. Most often, the normal phenomenon which everyone should resort to is to blame the perpetrator who caused the act in the first place. However, pathetically enough, most individuals and people within our societies, including family members and friends, tend to blame the

victim/survivor over his/her predicament based on certain claims. These claims are backed by certain sociocultural norms and rape myths which are well elaborated in the subsequent paragraphs. Victims/survivors who experienced sexual violence were unable to talk about it because of blame and how people will perceive them. Almost all victims/survivors indicated that they failed to report because of the fear of being blamed as expressed below;

*Everyone kept blaming me and I did not even have the courage to report since nobody not even my parents were ready to support me (Participant 8, 24 years, a weaver).*

*My mother, who was supposed to support me was blaming me for what happened because she thought I was trying to destroy her marriage. If I had gone to report to the police, it would have worsened the whole issue, destroyed the relationship between me and my mother and make life unbearable for me (Participant 5, 23 years, learning a trade).*

The act of blaming the victim/survivor is termed as victim-blaming. For instance, in the case of a female who got sexually abused, accusers and blame-makers tend to blame her by making comments such as “what was she doing there in the first place?”, “she called for it, just look at what she wore”, what did she expect going out dressed like that? “she is not even a decent girl; it suits her”, “why didn’t she fight back?”, “Why did she get so drunk?”, etc. The above constitutes a few of the many cruel and heart-breaking comments from people to a girl or woman who has suffered serious brutality and inhumanity in the form of sexual violence. The last thing victims/survivors should be hearing is being blamed for their woes.

The patriarchal system gives a clearer understanding to the issue of blame experienced by victims/survivor. The system claims that males are regarded as the dominants within every society whereas females are within the subordinate group. This system is strongly believed and practised in the study area such that people have been oriented to believe in the dominance of males and the subordination of females. It has made it such that females tend to look down on themselves and trust the males rather than believe their fellow females. This endorses the reason why females blame their fellow females for their predicament of sexual violence. In their study of women's views about violence, Okenwa-Emegwa et al. (2016) discovered that because of societal norms, women occasionally condone men's use of violence against them.

In relation to patriarchy and the acceptance of rape, victims/survivors are sometimes even blamed by the police as according to Awosusi and Ogundana (2015), women may not benefit from reporting rape since they risk being victimized again by Nigeria's patriarchal criminal justice system due to the acceptance of rape myths in that country. Equally, the attitudes of the police in Ghana toward rape investigations reflect the common preconceptions Ghanaians have about rape and rape victims/survivors (Boakye, 2009). Some police officers try to place the blame for the incident's occurrence on the victim in an effort to deflect attention from the offender (Boateng, 2015). This, therefore, explains the resistance of some victims on reporting to the police.

The issue of victim-blaming prevents reporting in the first place because majority of the time when victims/survivors report, they are shamed and ridiculed, as realised from the study. Women are less likely to disclose violent events because of real or imagined feelings of shame, stigma, and discrimination

(WHO, 2016 as cited in Karim and Baxter, 2016). We observe from the study that a victim/survivor was ridiculed by both family and friends for trying to tarnish the image of a man of great repute in the community. Wolitzky-Taylor et al. (2011) found that rape victims/survivor did not report the incidents to the police for fear of reprisal. Victim-blaming is such that it turns attention from the perpetrator to the victim/survivor, especially through comments or reports made by journalists or some reporters on the matter. In the United States (US), sexual violence is the most underreported crime and survivors and victims who disclose their victimisation to either the law enforcement or family and friends often encounter more adversity than support.

For example, a study conducted in 2016 in the US on crime scenarios found that, when a girl experiences sexual violence, a grammatical expression like “Lisa was approached by Dan at a party. Lisa was given a drink spiked with Rohypnol. Later that night, Lisa was assaulted by Dan” turns the blame from the perpetrator to the victim/survivor because in that sentence, the focus is on the victim/survivor and the minds of people are usually tuned towards the victim/survivor. This means that in situations where people want to report cases of sexual violence, the first use of the name of the victim/survivor in the sentences and grammatical expressions turn the focus from the perpetrator to the victim/survivor. Hence, the perpetrator hardly gets punished for his crime and attention is drawn towards the victim/survivor with hands pointing at her for being the reason for her predicament.

The solutions to victim-blaming are definitely many. Therefore, there is the need for people to understand that sexual violence or abuse is a conscious choice by another individual that could have been prevented. There is then a



need to deconstruct the mindset that sexual violence should be blamed on its victims/survivors. It is rather unfortunate that such are the experiences of young women after being abused. The best form of support is the provision of both physical and psychological needs to enable victims/survivors get rid of the hurt.

People, especially family members, must be willing to offer the best form of support to the victim/survivor and ensure that the perpetrator is punished.

### **Victims from Low-Income Families**

Most victims/survivor from low-income families equally tend to ignore cases of sexual violence and are unwilling to pursue such cases to the highest level because they do not have the financial resources. Sexual violence is more prevalent in situations where there is no reportage of cases of sexual violence mainly because majority of the victims/survivors are from economically challenging backgrounds. Victims/survivors from economically challenging backgrounds lack the needed resources to report cases to the police for further processes hence a continuous victimisation and occurrence. About six of the victims/survivors indicated that since they are from low-income families, they failed to report their cases because they did not have the money for forensic tests and all the other things involved as expressed by one below;

*I just did not see the need to report because the money to get a test and to pay a doctor to testify for me was not just available*

*(Participant 8, 24 years, a weaver)*

The aspect that makes it even more difficult to follow the due processes is the monetary obligations needed to ensure that the right thing is done. Most victims/survivors from poor families who can barely fend for themselves do not report cases of sexual violence to the police or any authority because of the

financial demands involved. They see the entire process as putting themselves in a position of serious financial troubles. In most instances, victims/survivors who are unable to pay money to get through the process had their issues not solved. Victims/survivors overburden themselves with police cases and money issues when they decide to report. In order to avoid the financial burden, most victims/survivors from poor families make matters rest and abandon the case as depicted below;

*The situation is such that when you report to the police and you know very well that you do not have the money to follow the due processes then the case becomes useless (Participant 6, 29 years, a teacher)*

The above quotation confirms the situation where most young women from low-income families were unable to report their cases to the police because they believe they will be stressing their families financially. Most often, the money to follow through the entire process is unavailable. This means that no matter the level of pain as a victim/survivor, every sexual abuse or violence would be settled within families without involving the police because of poverty.

#### **Familiarity with the perpetrator leading to family settlement of issues**

The unwillingness to report cases of sexual violence is also dependent on confiding in family members instead of the authorities in order to avoid shame and disgrace from befalling the family as observed from the study results. Victims/survivors of sexual violence tend to report their issues to their family members and friends because they see them as their first point of contact. Studies have supported the findings of this study, showing that sexual violence

victims/survivors preferred to confide in informal social support networks, including spouses, parents, and other family members and friends over official organisations like the police (Starzynski et al., 2005).

According to Winters et al., (2020), victims/survivors opted to handle their circumstances informally through their informal networks of friends and family. The finding of Starzynski et al. (2005) that over 98 percent of women confessed their assault experiences to unofficial support providers rather than reporting to the Chicago police is also consistent with this finding. The family system is extremely important and plays a vital role in the lives of its members both in Ghana and, to a greater extent, throughout the African continent. The victims/survivors of abuse feel a sense of belonging and may think of the family as the first place to turn to when they are in trouble.

Therefore victims/survivors failed to report their cases because they identified with the perpetrator. The head of the gender unit within the Regional Coordinating Council admitted that some victims/survivors failed to report to the police because they identified the perpetrator as a family member or an acquaintance. He equally added that their family saw the issue as something that can be settled between families. There were a number of the victims/survivors who expressed this issue of familiarity as the reason for their inability to report. This is observed in the following excerpt;

*When I was raped, I was so eager to ensure that I have the perpetrator punished by the right authorities. However, I got disappointed and disheartened that after I reported to my parents, my parents decided to settle it as a family issue. Their reason was that, since my family and that of the person that raped me identify*

*as one, we should just settle it the family way and let matters rest*

*(Participant 4, 24 years, a shop-owner).*

This indicates that victims/survivors from families who identify with that of the family of the perpetrator are most likely not to report their cases to the police. In a country like Ghana, where there is a higher degree of interdependence and interrelatedness among family members (Ahuvia, 2002; Osafo et al., 2011), shame and honour are frequently seen as both personal and familial qualities that are shared with other family members. It means that the stigma and labels attached to victims/survivors may seriously impede the social lives of other family members, ultimately having the negative effect of social isolation. In Ghana, families prefer honour to disgrace and will go any length to avoid bringing dishonour upon themselves. This, therefore, means that victims/survivors of sexual violence will be prevented from making the issue public in order to protect the image and the integrity of the family as observed in the study.

#### **Bureaucratic processes involved in reporting**

Reporting of sexual violence by victims/survivors is seen to be very stressful because of its bureaucratic nature as it is a great burden on most people, especially the victims/survivors and their families. Reporting of sexual violence cases and following the due processes to ensure that the perpetrators are punished is often a rigorous process that involves a lot of time, dedication, and monetary obligations to ensure that the necessary procedures are done to make sure the perpetrator is duly punished and prosecuted. The long and rigorous process usually makes it difficult for victims/survivors and their families to follow the necessary processes. This thoroughness in reporting sexual violence

is similar with Perreault's (2014) study on criminal victimisation in Canada, where it was revealed that about 45 percent of victims/survivors did not want to report cases of sexual violence because they wanted to avoid the hassle of dealing with the police.

Some of the victims/survivors indicated that the reason why they failed to report was because of the stressful bureaucratic processes involved in reporting cases. According to one of the victims/survivors, she saw how she and her parents went to the police station to report her case of sexual violence but after they got there, they found it difficult to follow the due processes to ensure that the perpetrator is punished. According to her, when they got to the police station, they were told to come back after a week for some processes which was very stressful as expressed below;

*The processes involved at the police department were so stressful. I remember when we went there to report my case and how the whole process was so tedious. I was told there was the need to engage in court proceedings of which to me were very stressful (Participant 6, 29 years, a teacher).*

The bureaucracy and stress involved in reporting cases makes it difficult for some people to report cases of sexual violence. From the above statement, the respondent subsequently indicated that even though she had gone through the experience, in order to avoid the stress, she would choose not to report any future issue to the police. According to her, the processes involved would discourage her from reporting to the police because of the stress involved. She gave the following explanation as to why she will not go through any stress to report any case;

*If I am to report a similar case, it will be the case where I know that I have more time to go through the process, for the right thing to be done. I will go ahead and report but if I see that I would not get the time, like let me say I will be somehow busy then I will not get that time to report. When you even report and they are calling you to the office, for some questions and answers, maybe you would not get that time to give them the information they need. Why should you report when you know that you would not be able to give them the information they need... (Participant 6, 29 years, teacher).*

The above quotation indicates that reporting will only be done when there is no stress in all the processes of reporting. The participant in the above quotation equally added in the quotation below that she will not pursue the case even if she contracts a disease. She will only treat herself and put the matter to rest;

*If I encounter some health problems and I know I can treat myself, I will not see the need to report (Participant 6, 29 years, a teacher).*

### **Love for the Perpetrator**

Sexual violence occurring in unions is usually not reported since victims/survivors think that it is a matter of the family instead of the law. The most underreported kind of sexual assault in Ghana is union rape, often known as marital or intimate partner rape (Adinkrah, 2011). Victims/survivors of sexual violence in unions only tend to report cases of sexual violence when they feel they do not love their partner anymore. In instances where love exists for their

partner, they do not report even when the partner is on the verge of killing them. The lack of reporting of crimes is consistent with other research that demonstrate that victims and survivors would frequently withhold information about the abuse if the abuser is a friend or family member of the victim or survivors, or if the crime takes place in a family environment (Terry & Tallon, 2013). An instance where a victim may or may not report sexual violence is when there is no longer love for the perpetrator. Even if the sexual offense is grave enough to justify reporting and the victim loves the perpetrator, she is less likely to report to the authorities. The quotation below gives a clearer elaboration to the above statement;

*The person that raped me is someone I love and so I did not want to report him because if I did, he may be jailed (Participant 7, 24 years, not working).*

The above confirms the case where most victims choose to suffer in their predicament once there is that level of love for their perpetrators hence the less possibility of reporting.

### **Environment in which the violence occurred**

There is an understanding from the above statement that sexual violence can occur in places such as drinking spots, eateries, night clubs, etc. Victims at such places can be oriented to accept and come to terms with the fact that such experiences are bound to happen. The victim/survivor further indicated below that majority of sexual offences that occur in such places are not taken as anything important or serious. Certain offences like the touching of the breast, buttocks, unhealthy comments, and even rape within certain environments like

drinking spots, restaurants, night clubs, etc. may not be reported, as expressed in the statement below:

*I did not see the need to report because what my mother told me was that so long as I am serving in the drinking spot, that's how it is going to be and so I should just forget about it since it was just torching of my buttocks. If I am going to report, it will destroy my mother's business (Participant 9, 19 years, spot attendant).*

These findings are equally supported by other researchers (Boateng, 2015, Bolen & Russell, 2000). In other instances, the level of seriousness attached to the sexual crime, even if it was rape, informed the decision to either report or not report. The study found that some parents of victims deemed the plight of their daughters as unimportant due to the fact that they saw the crime as nothing to be taken seriously. According to Fisher et al. (2003), incident-related factors such as failing to consider the victimisation to be serious enough to report to the police were the most frequent reasons for not reporting. In terms of the general reportage of sexual violence in Bolgatanga, some victims admitted that they found it difficult to report to the right authorities because of shaming, victim-blaming, poverty, the particular environment it occurred and the need for family settlement. Some of the victims/survivors had their issues settled at the family level even when an initial report was done.

### **Institutional Response to Sexual Violence**

Institutional structures dealing with sexual violence are basically the police departments, specifically DOVVSU, the Department of Social Welfare, CHRAJ, Ghana Health Service (GHS), and some non-governmental



organisations. For this study, we considered representatives from Regional Coordinating Council and the Department of Social Welfare as key informants on the institutional response on sexual violence in Bolgatanga. The institutional response to the study considered the seriousness attached to responding sexual violence and the challenges that both departments considered in the study faced in addressing sexual violence.

### **Seriousness in Addressing Sexual Violence**

It was generally realised that institutional mechanisms, specifically, that of the police, were actually effective in responding to cases of sexual violence. According to the representative of Social Welfare, the police did respond to cases of sexual violence in Bolgatanga. The response from the police indicates that there were rigorous and stringent processes involved in prosecuting a perpetrator of sexual violence which explains why most victims/survivors failed not to report any of their cases to the police. According to the Director of the Gender Unit at the Regional Coordinating Council they conduct regular outreaches in the communities hence reporting has improved as he expressed in the quotation below;

*We have regular outreach in the communities on the need for them to report the cases to the police. I think the advocacy has made reporting increase (Director of Gender, RCC).*

The above as reported by the director was the direct opposite of what was expressed by some of the victims/survivors. The institutional response to sexual violence in Bolgatanga was acknowledged by the official of DSW. According to her, issues of sexual violence were of great interest to them as an institution. She made it clear that once cases are reported or they notice any case,

measures are put in place to ensure that justice is served and perpetrators are punished for their actions.

*The department gets a number of cases in a month. When the cases get here we try our best to ensure that victims/survivors are supported and encouraged to take up their cases to the highest level (Social Welfare Official).*

The above quotation clarifies that indeed, the social welfare department takes such matters seriously when they are reported because they see the need to find measures to address sexual violence.

### **Challenges Involved in Addressing Sexual Violence**

The official at social welfare expressed how challenging it is to prosecute issues of sexual violence. The reason was that the families of victims/survivors do not help them do their work assiduously to ensure justice. According to this official, families fail to provide authentic information on sexual violence cases, which makes it difficult for them to follow the cases to the highest level. In addition to that, a vehicle to aid in easy movement of the victim/survivors seeking for justice was lacking. This is expressed in the quotation below:

*The issue is that as a department, we are ever ready to take up a case to the highest level but the problem is from the families of the victim/survivors. These families sometimes find it difficult to provide us with the needed information to enable us do our job and as a department we lack a vehicle to aid in easy movement (Social Welfare official).*

The official at social welfare made it clear that they are ever ready to take victims to DOVVSU for the necessary process to be put in place to ensure that justice is served. However, victims and their families are usually afraid of the police and the demands at the police station. As a result of this, they tend to confide in the Assemblymen of their communities. Once the issues get to the Assemblymen, they are forgotten as expressed below;

*We have been facing challenges with the families of the victims/survivors. When they report to us and we encourage them that we are going to bring in the police, some of them are always afraid. The issue is that people fear the police. As a result of the fear of the police, victims/survivors and their families turn to the assemblymen who tend to shield the perpetrators. We urge them that, if they cannot go to the police, then, they should come straight to social welfare and we will take them to the police (Social Welfare Official).*

As indicated by her above, the rather unfortunate part of the whole issue of helping victims is that the processes involved are very strenuous in terms of commitments, both financially and time availability. Family members are unwilling to carry through with any further investigation and interrogations due to poverty and time being unavailable. The stressful nature of the entire process makes it difficult for some of the victims/survivors and their parents to follow through the due processes. According to the official, even though there is a fund for forensic tests and payment of lawyers which is provided by a Non-Governmental Organisation called Widows and Orphans, most victims and their

families lack the needed resources to push cases to the highest level because of transportation challenges as indicated in the following quotation;

*The challenge has also been that most victims/survivors from poor families find it difficult to visit the office regularly because of the distance and lack of money for transportation and other demands (Social Welfare Official).*

According to the official at Social Welfare concerning the processes, a victim/survivor who reports a case is expected to provide evidence of the issue, be it rape or something else to the Police. The commonest issue is rape where an evidence like a forensic test is conducted at a health facility, with the test provided for further investigation by the department. According to her, the process as described below discourages people from reporting, especially the aspect involving the conduct of medical tests;

*The process is such that, you should not bath when it happens. You get to the department, we ask that test are conducted and the man's sperms are checked. The test I must admit are sometimes expensive for victims/survivors of which some are always unable to get the test done. For instance, some doctors demand close to GHS 800.00 to conduct a test or to testify on behalf of the victim/survivor. The money involved discourages some people from reporting their cases. When they even report and all the demands start, they tend to ignore their cases (Social Welfare Official).*

The test as she stated usually comes with a huge cost, as doctors demand close to GHS 600.00 to GHS 800.00 for a forensic test. In addition to that, the United Nations Children's Emergency Fund (UNICEF) Ghana and its partners conducted a study in 2020 on sexual violence in Accra and Kumasi Metropolitan areas. The average cost incurred by a child or a woman who survived sexual and gender-based violence was assessed to be at least GHS 900.00 based on an examination of over 100 cases of sexual abuse against girls, boys, and women. This implies that seeking justice as a victim/survivor comes at a very high cost, especially for victims/survivors from poor backgrounds.

According to UNICEF, having an active National Health Insurance Scheme (NHIS) card is the only dependable way to receive support when a survivor or victim cannot afford to pay for medical care. However, only a few medications and sometimes consultation expenses are covered. The expense of medical reports, which can range from GHS 300 to GHS 1000 depending on the circumstances, is not covered by the NHIS. The doctor will not testify in court and the case will be dismissed if the victims or survivors cannot afford it. Social workers assigned to certain hospitals may be able to help the victim or survivor create an active NHIS, but the procedure might take days or even weeks and run the danger of taking longer than the 48 to 72 hours needed for forensic evidence.

The 2007 Domestic Violence Act (Act 732) also mandates the establishment of a support fund to offer funding for domestic violence-related issues. The assistance fund's purpose is to help DOVVSU with rehabilitation-related issues and give victims/survivors the required support, including forensic examinations. The Domestic Violence Act (ACT 732) makes it similarly explicit in section 8 that "a victim/survivor of domestic violence who

is assisted by the police to obtain medical treatment under subsection (1) (c) is entitled to free medical treatment from the State" (it must be emphasized). This free medical treatment includes forensic test, which, unfortunately, government has not apportioned any funds in that regard and victims/survivors are made to pay for such services.

Equally, in the Hospital Fees Act, 1971 (Act 387) under section 3 subsection 2, it is specified that no costs will be charged to anyone obtaining medical care in a hospital for any related medical reports. According to Section 65 subsection 2 of the Courts Act, 1993 (Act 459), a person may not object to appearing as a witness or refusing to provide testimony when ordered to do so by the court on the grounds that their expenses have not yet been covered. Unfortunately, due to a lack of funding, the aforementioned key legal provisions intended to guarantee medical and legal help for SGBV victims and survivors are not being put into effect. According to the Congregational Relief Service, \$559 million was appropriated for Violence Against Women Act programs in the United States and that of Ghana to the Ministry of Gender, Children and Social Protection for dealing with violence cases was GHS 2.1 million (UNICEF, 2021). This amount is way too small to be used to solve the issue of violence, especially sexual violence in Ghana.

This gives a clear picture of how the lack of money and the strenuous processes done at the departments make it difficult for some victims/survivors to report cases of sexual violence. Cases of Sexual violence receive some attention from the institutions in charge of tackling such cases. However, the challenge has been the inability of victims/survivors to provide the necessary information to assist in the processes involved because families tend to settle

such cases at the family level, and poverty as a prohibiting factor to ensuring that justice is served.

### **Chapter Summary**

The chapter presented the socio-demographic characteristics of the victims/survivors. It also presented the findings and discussions on the major themes. The experience of sexual violence included rape, unwanted touches and coerced sexual intercourse and the themes discovered as factors resulting in the experiences of sexual violence included economic hardship, family arrangement, lack of parental care and support, young age, risky working environment and disregard for bodily autonomy. The effects of sexual violence included psychological, social and medical. Regarding willingness to report, victims/survivors reported because they wanted the perpetrator punished and to prevent future occurrence of the phenomenon. The reasons that prevented victims/survivors from reporting their issues to the right authorities included victim-blaming, low-income families, familiarity with perpetrator, bureaucratic processes, love for the perpetrator and environments within which sexual violence occurred. The institutions in charge of addressing sexual violence which were included in the study were the department of Social Welfare and the Gender Unit of the Regional Coordinating Council. These institutions provided the needed measures to address issues of sexual violence but were however saddled with some challenges such as families unwilling to pursue cases to the highest level due to the stressful nature of the processes and poverty discouraging families from pursuing cases to the highest level of judicial processes, families being unable to provide the needed evidence and families' fear of the police. The other institutional challenges identified by the social

welfare official were lack of a vehicle for easy movement and lack of capacity building avenues for its staff.





## CHAPTER FIVE

### SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

#### Introduction

This study explored perspectives of victims of sexual violence and key stakeholders in Bolgatanga in the Upper East Region of Ghana. This chapter of the study presents the summary on the major findings, conclusions, and recommendations.

#### Summary of Major Finding

The participants were aged between 19 to 45 years, victims/survivors of sexual violence were all unmarried with the exception of the key stakeholders, had all attained formal education and were economically engaged. The sexual violence experiences included rape, unwanted touches and coerced sexual violence. The individual factor observed in the study that subjected victims/survivors to sexual violence was the age of the victim/survivor. A microsystem factor which influenced experiences of sexual violence was the lack of parental care and support thus individuals who lacked the needed care and support were subjected to sexual violence. The other microsystem factor was the family arrangement in which it was realised that the family of the individual influenced her vulnerability of being subjected to sexual violence. In addition to that economic hardship which made it difficult for some victims/survivors to acquire certain essential items subjected them to sexual violence.

The exosystem factors associated with sexual violence was the work environment. The environment an individual worked equally subjected her to sexual violence. Victims/survivors who worked within risky environments such

as drinking spots were subjected to sexual violence. The last section of the model used for the study considers the macrosystem which included factors which were the disregard for women's rights and general acceptance of violence. The study realised how women's rights were not prioritised and the image of the family being regarded more important than the safety of individuals especially women and girls. Experiencing sexual violence was accompanied with a number of consequences which can be categorised as psychological (trauma), social (shame and school drop-out) and medical (sexually transmitted infections)

Even though few of the victims/survivors did report their cases based on their desire to ensure that the perpetrator is punished and to prevent a reoccurrence of the issue, reporting of sexual violence in Bolgatanga is generally not very rampant. It was realised that several factors prevented most of the victims/survivors from reporting their experiences of sexual violence. These factors included victim-blaming, belonging to a low-income family, familiarity with perpetrator, bureaucratic processes, love for the perpetrator and environments within which sexual violence occurred.

Sexual violence, in most instances, occur with a perpetrator or a victim/survivor initiating the whole process leading to its occurrence. In most cases of sexual violence, perpetrators tend to subject victim/survivors to a great ordeal which demands that the perpetrators are blamed. However, in a patriarchal environment like that of Bolgatanga, mostly female victims/survivors tend to be blamed for their predicament. The blame usually spans from a claim that they dress inappropriately leading them into their current situation. There are equally instances where families are blamed for the woes of

most victims/survivors. Families tend to shield their image rather than protecting the dignity and rights of victims/survivors, which demands that they follow the due processes to prosecute the perpetrator.

These influences spanned from the fact that families wanted to protect their images by preventing the shame that accompanied reporting cases of sexual violence. In addition to the influence of the family on the victim/survivor, her tendency of reporting and the likely subjection to sexual violence was the issue of familiarity with perpetrators of sexual violence. Families felt the need to settle issues of sexual violence at the family level since they identify with each other. This issue of families identifying as one reinforced sexual violence and has the potential to increase its prevalence.

The other factors that will inform reporting of sexual violence cases are the family's financial capability and support. The ability of the victim/survivor to fund herself financially through the whole process is one way of ensuring that cases are reported. The financial capability equally includes the ability of the family to support the victim/survivor throughout the whole process. Once there is no financial capability and family support, then reporting becomes impossible. The financial issue therefore served as a hindrance for most victims/survivors to report their cases.

The time to follow through with the bureaucratic processes necessary to prosecute perpetrators is very important in determining whether victims/survivors will report cases of sexual violence or not. Reporting is only possible when there is enough time to spare. The stringent and thorough nature of the processes involved equally made it difficult to report. The processes

involved are usually very lengthy and rigorous, which deter victims/survivors from reporting.

The other factor that will inform reporting of sexual violence is the love for the perpetrator by the victim. It must be admitted that love tends to greatly influence the ability and desire of victims/survivors reporting cases of sexual violence. When the love for the perpetrator fades away, the victims/survivors see every need to report for him to be punished, but once there is still some love in the victim. Equally, the environment in which the violent crime informed the decision to report. It is was realised that a sexual violence against a young woman which occurred in a drinking spot was ignored by the victim/survivor and was deemed as not necessary for reporting.

Responses from the official of Social Welfare indicated that measures were put in place to ensure justice for victims/survivors. On reporting of sexual violence, the head of the Gender Unit at the Regional Coordinating Council admitted that reporting has improved due to their regular advocacy on the need for victims to report. However, victims/survivors and their families failed to provide the necessary information to aid in the prosecution process. It was equally realised from the study that victims/survivors and their families feared to report their cases to the police because of the fear they had towards the police. Victims/survivors and their families rather confided in the assemblymen of their communities. These assemblymen, at the end of the day, failed to take the issues on. The official of Social Welfare Department, therefore, gave an assurance on the availability of the department to help victims/survivors by taking their matters on to the highest level. The institutional challenges which however made

work difficult identified by the social welfare official were lack of a vehicle and lack of capacity building for staff.

### **Conclusions**

The study concludes that there are a number of cases of sexual violence in Bolgatanga of which some victims/survivors did report their cases to the police whereas others were unable to report due to a number of reasons stated in study. The issue of non-reporting can be explained more explicitly using the blame associated with reporting which spans from the highly patriarchal believes, male dominance, stereotypes and sexism which are very rampant in the study area. It is very imperative that cognisance of these issues of discrimination against women are really considered in terms of measures in addressing sexual violence. The study has expressed the varied issues instigating sexual violence and the factors preventing reporting of the cases thereby helping to contribute to literature.

### **Recommendations**

A number of issues have been identified in this study to be the compelling factors leading to the continuous victimisation of victims/survivors of sexual violence. The following are some recommendations that could help address the issue of sexual violence in Bolgatanga. We must ensure that the necessary mechanisms are put in place to address issues of sexual violence. The institutional systems must be tightened to ensure the protection of rights of women and girls.

The police department must be equipped with the necessary tools and resources such as forensic tests to respond to sexual violence. Forensic tests are often seen as a hindrance to most victims/survivors and their families reporting

cases of sexual violence. The government needs to make the test free for all victims/survivors to enable them easily report and follow the due processes for justice. There is equally the need to ensure that victims/survivors and their families do not have to go through long and stringent processes to solve their issue. The process should be made easier and quicker for victims/survivors to report cases of sexual violence.

A broader sphere of sexual violence which is instigated by the patriarchal system that has less regard for females should be dealt with seriously. Communities and their leaders must be re-oriented on the role of the female which is not just limited to the family level but goes beyond leading up to all spheres of life. There is, therefore, the need for a complete overhauling of the stereotypes that exist in societies through a thorough re-orientation of inhabitants on the status of women in society. Community leaders and opinion leaders should take it up as their mantle to lead in the re-orientation process of teaching current and future generations on the status of women which is not just limited to the kitchen, servicing of men and producing babies but that which goes to the highest level of educational pursuit as well as higher political, social and economic leadership aspirations.

Families must be made to understand that when they report cases of sexual violence to the police, they are protecting their children and others from going through the same experiences. Through organisational engagements, families must be made aware that the consequences of sexual violence are not just felt by the victim/survivor but the entire family as a whole, and this requires their collective effort to solve it. The orientation of family members should

include letting them understand the need to avoid accepting monies from perpetrators in exchange for non-disclosure of the matter to the police.

There is the need to strengthen the country's social welfare system to ensure that women and children are protected. The social welfare system must be up and running. It must be very effective to ensure that all officials in the department are awake to the plight of victims/survivors, majority of which are children who are so innocent. The government must equally take it up to ensure that a vehicle is provided for the department for easy attendance to the cases of victims/survivors of sexual violence and government should equally consider organising a capacity building for staff of institutions dealing with sexual violence.

There is also the need to ensure that individuals who report cases of sexual violence have the correct knowledge on how to report such cases. Reporters and journalists must learn to report cases of sexual violence by focusing attention on the perpetrator and not the victim/survivor. This will help make individuals develop different mindsets on approaching sexual violence cases. Individuals will turn their attention from the victim/survivors to the perpetrator. This move will help solve the issue of victim-blaming on victims/survivors who have already tasted intense brutality and inhumanity.

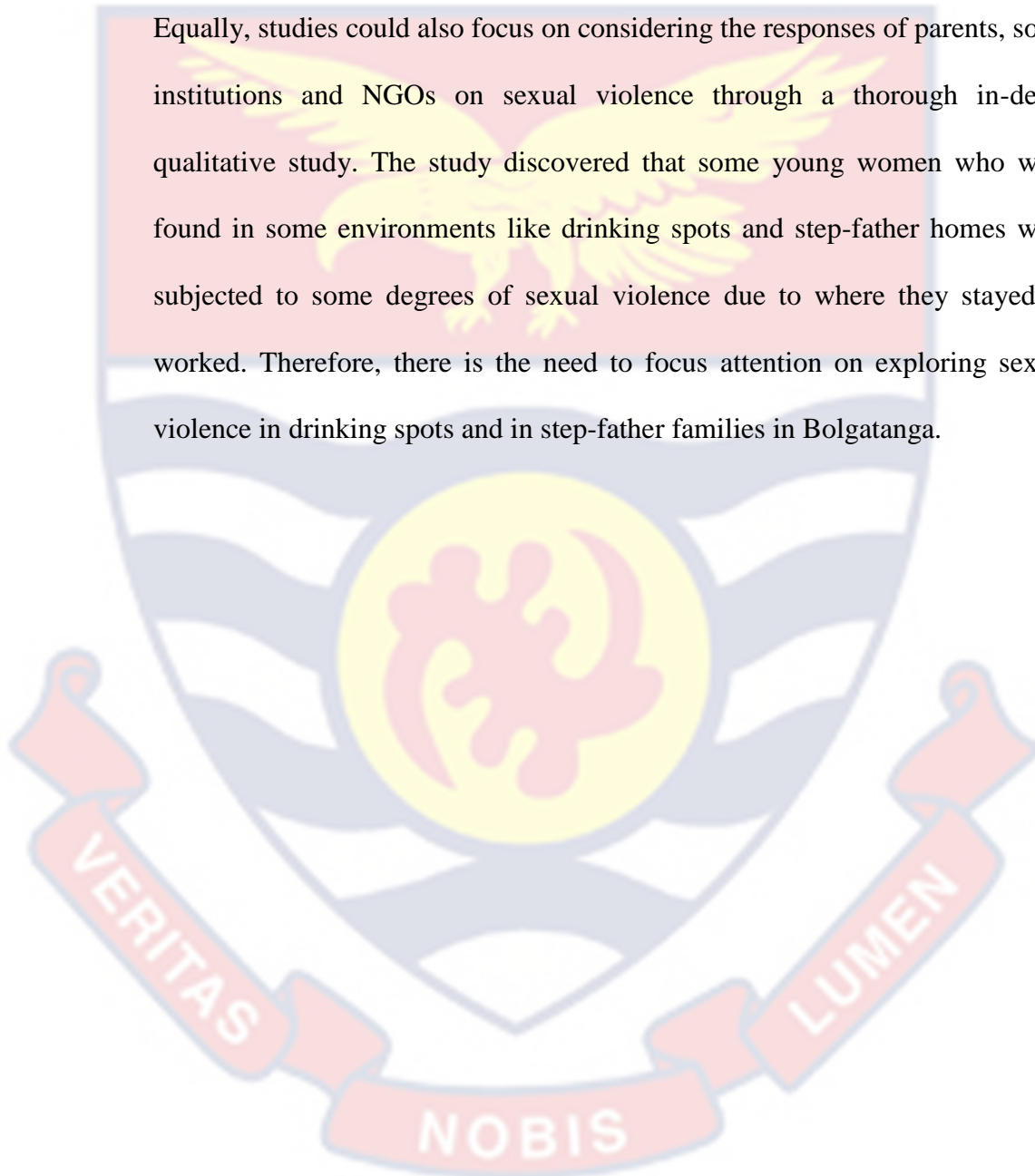
### **Suggestions for Further Research**

The limitation to this study is that it considered a fewer number of victims/survivors. Thus, the views were not very representative enough for the entire Bolgatanga and the stakeholders involved could have included Parents of victims/survivors, CHRAJ and other NGOs like the Widows and Orphans

Movement (WOM), Ghana, a movement that is equally involved in matters of sexual violence.

Studies could also focus on applying a quantitative approach to measure the level of sexual violence in Bolgatanga through the views of all young people.

Equally, studies could also focus on considering the responses of parents, some institutions and NGOs on sexual violence through a thorough in-depth qualitative study. The study discovered that some young women who were found in some environments like drinking spots and step-father homes were subjected to some degrees of sexual violence due to where they stayed or worked. Therefore, there is the need to focus attention on exploring sexual violence in drinking spots and in step-father families in Bolgatanga.





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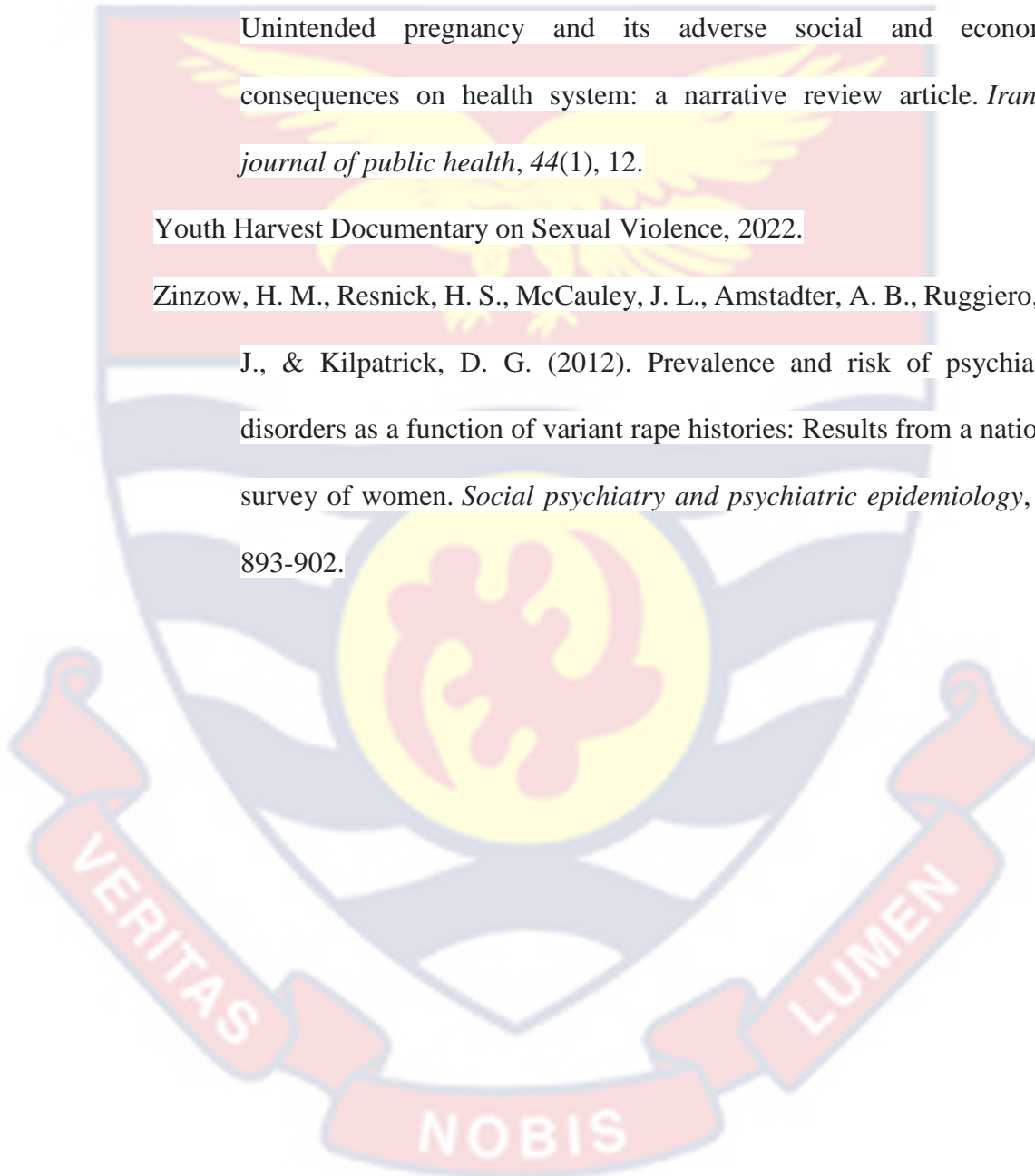
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**APPENDIX****PERSPECTIVES OF VICTIMS AND STAKEHOLDERS ON SEXUAL  
VIOLENCE AGAINST YOUNG WOMEN IN BOLGATANGA  
OF THE UPPER EAST REGION OF GHANA  
IN-DEPTH INTERVIEW GUIDE FOR VICTIMS****Introduction**

The purpose of the study is to examine sexual violence among young women in Bolgatanga of the Upper East Region of Ghana through the perspectives of young women 15 to 35 years old who have been victims of sexual violence and some key stakeholders. The study is primarily for academic purposes, and you are assured of confidentiality and anonymity with the information you provide. I am interested in learning from you about all your experiences and opinions on this topic. I need your comments both positive and negative and there are no right or wrong answers. To enable in the tracking of the interviews, I will like to use a tape recorder for the recording of the interviews. However, if you uncomfortable about the tape recording, I will use a field note to write the responses.

**General warm up**

As an individual, you have the right to live free of any form of violence or abuse. However, individuals such as young women often go through certain experiences such as sexual violence. This discussion is going to center on obtaining your views on sexual violence.

**Socio-Demographic Characteristics of victims**

1. How old are you?
2. What is your religious affiliation?
3. What is your level of education?
4. Are you married?
5. Are you employed? If yes, what work do you do?
6. Whom do you live with? (probe for relationship with person living with)
7. What is the marital status of the people you are living with? (married, divorced, single etc)

**Understanding on sexual violence**

1. What are your views about sexual violence?

2. What are the types of sexual violence encountered?
3. What do people think about someone who was abused?
4. How do people in Bolgatanga treat someone who was sexually abused?

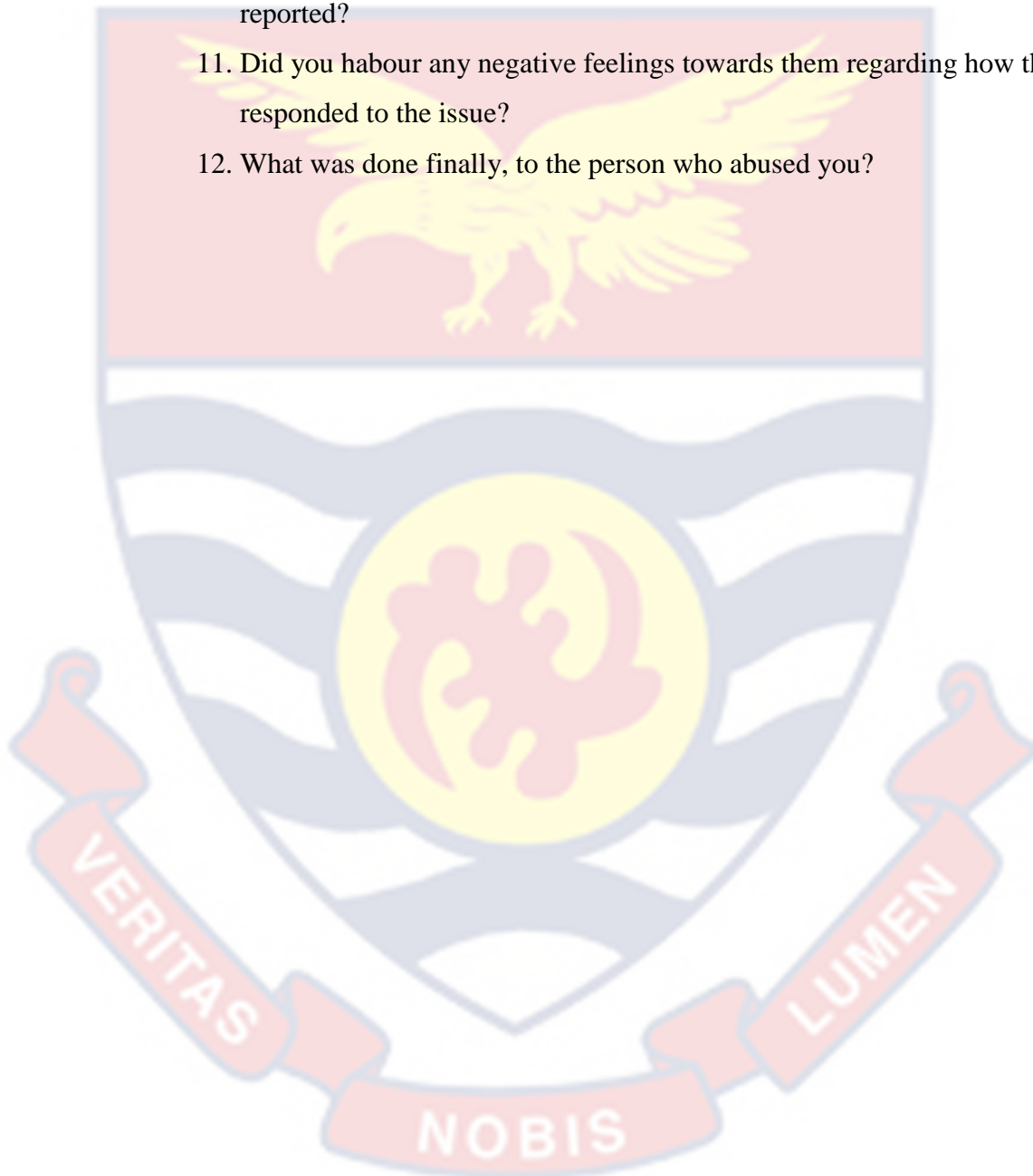
### **Experiences on sexual violence**

1. Can you tell me about what happened?
  - What type of sexual violence did you experience?
  - When did it happen? (date and time)
  - Where did it happen?
  - Who did it to you?
  - What is your relationship with the person who abused you?
  - What was the relationship between you and the one who abused you after the experience?
  - What was done to the person who abused you?
  - Tell me about how this affected you? (psychologically and emotionally)
  - How did you feel after the incident? (probe for stigma -thoughts that everyone knows and feels sorry for them, feeling dirty), emotions (feelings of sadness and anxiety), feelings of revenge and self-blame).
  - Tell me about some possible effects like bodily pain, sensational feelings, physical hurt etc. (probe for degree of physical hurt)
  - Tell me about your behaviour immediately after the abuse?

### **Willingness to report cases of sexual violence**

1. Let's look at reporting, as you stated above, were you willing to report to the right authorities? If yes, why? If No, why?
2. If yes, whom did you report to?
3. What explains the reason why you chose to report to that particular person?
4. What instigated your decision to report? (probe for the time lapse between time of incident and time of report); ask for eventual reporting where there was a time lapse.
5. What was done after you reported?
6. How easy was it for you to report?

7. What happened when you failed to report? (only ask if ques. 1 is No)
8. Please tell me about the reaction of your parents or guardians when it happened?
9. How did your parents or guardians react to the issue?
10. What about community members, how were you treated when you reported?
11. Did you harbour any negative feelings towards them regarding how they responded to the issue?
12. What was done finally, to the person who abused you?



**PERSPECTIVES OF VICTIMS AND STAKEHOLDERS ON SEXUAL  
VIOLENCE AGAINST YOUNG WOMEN IN BOLGATANGA  
OF THE UPPER EAST REGION OF GHANA  
IN-DEPTH INTERVIEW GUIDE FOR KEY STAKEHOLDERS**

**Introduction**

The purpose of the study is to examine sexual violence among young women in Bolgatanga of the Upper East Region of Ghana through the perspectives of young women 15 to 35 years old who have been victims of sexual violence and some key stakeholders. The study is primarily for academic purposes, and you are assured of confidentiality and anonymity with the information you provide. I am interested in learning from you about all your experiences and opinions on this topic. I need your comments both positive and negative and there are no right or wrong answers. To enable in the tracking of the interviews, I will like to use a tape recorder for the recording of the interviews. However, if you are uncomfortable about the tape recording, I will use a field note to write the responses.

**General warm up**

An individual has the right to live free of any form of violence or abuse. However, individuals such as young women often go through certain experiences such as sexual violence. This discussion is going to center on obtaining your views on sexual violence and the measures put in place by your institution to address issues of sexual violence.

**Socio-Demographic Characteristics of victims**

1. How old are you?
2. What is your religious affiliation?
3. What is your level of education?
4. Are you married?
5. Role and position?

**Understanding on sexual violence**

1. What are your thoughts about sexual violence?
2. What do people think about sexual violence?
3. When it happens, what are some of the comments you often hear from people in Bolgatanga?

4. Do you think the families of victims are often aware of the available interventions protecting women and girls against sexual violence?

#### **Experience on sexual violence**

1. Please tell me about when someone reported a case of sexual violence to you?
2. What was the average age of a victim?
3. What was the average age of a perpetrator?
4. When it happened, how did community members respond to the issue?
5. What were the reactions of family members regarding disclosure of the issue

#### **Willingness to report**

1. What are the attitudes of people in Bolgatanga on reporting of cases?
2. Do you get people reporting cases of sexual violence to you on a regular basis?
3. Approximately how many cases do you get on a daily basis?
4. What are some of the reasons why people fail to report?
5. When they report the cases, are they usually willing to follow-up?
6. What processes do you take the victims through?
7. Are you aware of the challenges people face in reporting cases?

#### **Institutional response to sexual violence**

1. What are some of the processes involved in tackling issues of sexual violence?
2. How are the services at the police departments with regards to addressing issues of sexual violence?
3. What are some of the punitive measures put in place to tackle the case of sexual violence?
4. Do you have an idea on the types of policies addressing sexual violence?