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COLLEGE OF HUMANITIES

YOUNG MALES' COERCED SEXUAL DEBUT IN SOUTHEASTERN GHANA BY FEMALE PERPETRATORS: A CASE STUDY OF AGORMANYA AND JUAPONG

BY

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THIS THESIS IS SUBMITTED TO THE UNIVERSITY OF GHANA, LEGON IN PARTIAL FULFILLMENT OF THE REQUIREMENT FOR THE AWARD OF PHD POPULATION STUDIES DEGREE.

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ACCEPTANCE

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DECLARATION

I hereby declare that this work is the result of my own research undertaken under supervision except for references made to other people's work and which have been duly acknowledged. Also, this work has neither in part nor whole been presented for another degree elsewhere.

SIGNED .....

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Thanks to God Almighty who has been the source of my strength throughout the years.

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ABSTRACT

The first sexual encounter of every individual and the circumstances under which it occurs plays a significant role in their future behaviour. The literature is replete with studies of the context of girls' first sexual encounters, including where they are forced and pressured. Consequently, the adverse implications on girls' futures are also widely appreciated. Despite this wealth of information, little effort has been made to understand whether and how similar power dynamics may shape the sexual initiation and subsequent relationships for boys.

To understand these nuances, this thesis set out to examine the context of young males' sexual debut using data from Agormanya and Juapong in southeastern Ghana. The data for this study came from the three waves of the National Institutes of Health (NIH) funded longitudinal panel study (LPS), the Gendered Social Context of Adolescent HIV Risk Behaviour. Using a mixed-methods approach integrating in-depth interviews (IDIs) with survey data (LPS), 215 male youth were sampled for analyses. Eighteen (18) in-depth interviews were synthesised qualitatively.

The results reveal that early age at first sexual intercourse was a common occurrence among the young male respondents. More than half of these youth had sexual intercourse before reaching age 16. A high prevalence of coercion at sexual debut was recorded, with almost a third of the boys having been either forced or pressured into sexual intercourse. Specifically, of all first sexual intercourse, 18.6% reported being pressured and 9.3% reported being forced. In 42% of these cases, there was evidence that older females had coerced the boys. Vulnerability to coercion at sexual debut was significantly predicted by age at sexual debut, religion, relationship to caregiver, locality of residence, household wealth status, age difference between respondent and first sexual partner, and respondent's alcohol consumption at sexual debut. Respondents' accounts from the qualitative data suggested that

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pressure and non-physical force were the most common forms of the coercion experienced at sexual debut. Of the eighteen narratives, there were three rape cases involving physical force. Perpetrators employed diverse coercive tactics on their victims including verbal insistence, baiting with gifts, use of threats, fondling, emotional manipulation, taking advantage when victim was intoxicated with alcohol, etc. Victims felt a range of negative psychosocial effects after their encounter including shame, guilt, fear of STIs, regret and animosity towards females. Victims tended not to report their experiences; the reasons for not reporting included fear of sanctions, or of being branded as deviant. They narrated several coping strategies including avoiding settings they perceived as risky.

This study has notable findings and implications. In summary, there is empirical evidence that shows males are coerced at sexual debut and a substantial proportion (42% of coerced cases) are coerced into sex by older females. Sanctions for boys victimised by older women are very strict as a result of constrains posed by norms of masculinity, and unacceptable deviation from gendered sexual scripts. The fact that boys can be physically stimulated or aroused to get a penile erection does not conventionally mean they desire to have sex. The presence of an erection should not discount the absence of consent.

The study highlights the need for definitional clarity on sexual intercourse, and its implication for data quality. Findings from this study have relevance in their contribution to the literature on young males‘ transition into unwanted first sexual intercourse. It also has relevance for the advancement of a framework within which related studies can be adapted to.

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CHAPTER ONE

Introduction and Background to the Study

1.0 Introduction

The reproductive health and sexual behaviour of young people has gained considerable traction in both developed and developing countries (Jejeebhoy, Shah, & Thapa, 2005). In sub-Saharan Africa (SSA), there has been a growing body of literature on adolescent sexual and reproductive health (SRH) (Ajuwon, Akin-Jimoh, Olley, & Akintola, 2001; Erulkar, 2004; Jejeebhoy & Bott, 2003). Adolescence is a critical developmental period into adulthood; a period for gender role formation, and a time during which notions of sexuality and understanding of such issues are shaped (Dehne & Riedner, 2001; DiClemente, Santelli, & Crosby, 2009). Early sexual experience, the circumstances under which it occurs, and the environment in which it takes place, can significantly influence later attitudes, behaviour and even risk for certain sexual and reproductive health complications (Lindstrom, Hattori, Belachew, & Tessema, 2012; Mathews et al., 2008).

Early sexual debut is globally considered to be a turning point to adulthood, from being a teenager (Li et al., 2015). As a significant life event, sexual debut has been posited to lay a solid foundation for a subsequent pattern of sexual behaviour, including a set of sexual self-perceptions, such as sexual self-esteem and sexual self-efficacy (Biney & Dodoo, 2015), and these traits are evidenced to have a close relationship with other individual behaviours (Udell, Sandfort, Reitz, Bos, & Dekovic, 2010). Not all sexual experiences are wanted or consensual (Agardh, Odberg-Pettersson, & Östergre, 2011). Indeed, a substantial body of research has shown that sexual debut at younger ages (especially under 15 years or the age of consent) are often non-consensual or coerced (Ajuwon, Olley, Akin-Jimoh, & Akintola, 2001; Awusabo-

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Asare & Biddlecom, 2006; Bakass, Ferrand, & Depledge, 2013; Cáceres, Marín, & Hudes, 2000; Farris, Treat, Viken, & McFall, 2008; Finkelhor, 1991; Holmes & Slap, 1998; Jaya & Hindin, 2007).

Sexual coercion refers to a range of experiences that compel a person to have sex against his or her will (Sano, Sedziafa, & Tenkorang, 2016). These experiences include use of "violence, threats, verbal insistence, deception, cultural expectations or economic circumstances" (Ajuwon et al., 2001) and the consequence is a "lack of choice to pursue other options without severe social or physical consequences" (Heise, Moore, & Toubia, 1995). The outcome of the use of these coercive tactics by perpetrators is primarily sexual intercourse.

Sex, often shorthand for sexual intercourse (coitus), can mean any form of sexual activity. According to several commentators (Finkelhor, 1991; Lerner & Steinberg, 2004; Varga, 2001), there are different views to what constitutes sexual activity. Often, sexual intercourse connotes penile-vaginal penetration. It also commonly connotes penetrative oral or anal sex. Where there is penetration, sex is labelled intercourse while non-penetrative sex is labelled outercourse (Lerner & Steinberg, 2004). Perspectives on what constitutes sex differ across various jurisdictions and are shaped by various purviews i.e. religious, cultural, social, personal and legal. For example, religious views on sex have varied significantly between different religions and even factions of the same religion (Lerner & Steinberg, 2004). Within legal acts of different countries, restrictive laws have been placed on such acts as incest, defilement, prostitution, pre-marital and extra-marital sex (Archampong & Baidoo, 2011). Although these laws are similar for the most part, there exist localised variations across the global landscape, for instance differences in legal age of sexual consent (Bakass, Ferrand & Depledge, 2013). These jurisdictions within legal, religious and cultural frameworks play a significant role in personal decisions about sex, legal, and public policy matters on sex.

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Experiencing sexual coercion has multiple detrimental consequences, especially among adolescents, and the extent of its effect is proposed to be even greater if sexual coercion is experienced at sexual debut (Armour & Haynie, 2007; Awusabo-Asare & Anarfi, 1999; Briere & Elliott, 2003; Easton, 2011; Finkelhor & Browne, 1985; Glover et al., 2003; Harford, 2007).

As with most of SSA, Ghana has a large population of young people, with about 57.5 percent of the estimated 27 million people below the age of 24 years (Ghana Statistical Service, 2013; Population Reference Bureau, 2015). According to the 2016 HIV sentinel report by the Ghana AIDS Commission, HIV prevalence among the young population (15-24 years), a proxy for new infections, remains unchanged at 1.1 % despite national efforts and campaigns against the epidemic. In Ghana, there remains a localised severity of HIV in some communities in southeastern Ghana (Awusabo-Asare & Anarfi, 1999). The severity of the localised epidemic is revealed in data from HIV sentinel surveillance sites (Ghana AIDS Commission, Ministry of Health, & Ghana Health Service, 2013). For instance, the highest prevalence within urban sites was 4.2% in Agormanya located in southeastern Ghana (Ghana AIDS Commission, Ministry of Health, & Ghana Health Service, 2016). The high HIV prevalence adds to the risks associated with early sexual activity for young people in these areas.

The environment in which young people are making decisions related to sexual and reproductive health is rapidly evolving (Biney & Dodoo, 2015; Hindin & Fatusi, 2009). Rates of sexual initiation during young adulthood are rising, while age at first sexual intercourse is decreasing in Ghana. Among Ghanaian youth aged 15-24 years, 10.7 percent of females and 8.7 percent of males had had sexual intercourse before the age of 15 years (Ghana Statistical Service (GSS), Ghana Health Service (GHS), & ICF International, 2015). Early sexual debut

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is an important indicator of Ghanaian youths' ability to negotiate for safe sex, that is to say the autonomy to decide when, how, where and with whom (Lindstrom et al., 2012; Van Decraen, Michielsen, Herbots, Van Rossem, & Temmerman, 2012). Young age at first intercourse has been linked repeatedly to risk of HIV (e.g., Pettifor et al., 2004). Reasons given are that younger adolescents are less likely than older adolescents to use condoms at sexual initiation (Manzini, 2001) or because youth who debut earlier accumulate more sexual partners by the time they marry (Bongaarts, 2008; Ybarra, Bull, Kiwanuka, Bangsberg, & Korchmaros, 2012). In some settings, having sex as an adolescent before reaching physical maturation is often related to engaging in high-risk or harmful behaviours such as non-use of condoms(Hindin, Fatusi, & Fatusi, 2009). Young peoples' early sexual debut may not always be a wanted or consensual decision. They may not have had the chance to opt for their sexual debut at an older age, or the chance to protect themselves.

Researchers and planners recognize the importance of considering developmental and sexual experiential factors in affecting the sexual and reproductive health needs of adolescents in developing country settings, and more especially in the SSA region (Ajuwon, Olley, Akin-Jimoh, & Akintola, 2001; Cáceres, Marín, & Hudes, 2000; Jaya & Hindin, 2007). Unfortunately, that research has been predominantly situated within the context of consensual sex (Andersson et al., 2012; Haile, Kebeta, & Kassie, 2013). Both research and programming conversations have traditionally been dominated by the assumption that sexual and reproductive health issues are primarily female concerns (Jejeebhoy & Bott, 2003). Given that even much less is known about African boys and male adolescents than about older youth and young men (Briere & Elliott, 2003; Erulkar, 2004; Oliver, 2007; Tsopelas, Tsetsou, Ntounas, & Douzenis, 2012), the circumstances surrounding their sexual debut should be considered in attempting to understand their behaviour and SRH needs.

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Generally, less attention has been paid to the social context of adolescent sexual activities, and more so that of males compared to females. Particularly, the literature is limited about the influence that gender relations and power imbalances have on whether and when young people have sex (Holmes & Slap, 1998a; Jejeebhoy & Bott, 2003; Stern, Cooper, & Greenbaum, 2015). Likewise, the issue of non-consensual sexual experiences of young males, although gaining increasing attention within the broader SRH discourse as a sexual health and human rights matter, has been much less discussed compared to that of their female counterparts (Parkinson, 2014; Speizer, Fotso, Davis, Saad, & Otai, 2013).

Many studies on the sexual behaviours of young males have been premised on the assumption that sex is wanted or consensual (Cáceres et al., 2000; Mensch & Lloyd, 1998; Njue, Askew, & Chege, 2005), even if only insinuated (Okigbo, Kabiru, Mumah, Mojola, & Beguy, 2015). The onset of sexual activity for males has mostly been limited to reports of having had sexual intercourse, without going further to interrogate the nature of that experience. This would seem that boys who have ever had sex had a similar experience, although this is not the case. Lumping different contexts of sexual initiation potentially conceals unwanted sexual experiences. Thus far, the few studies focusing on non-consensual sexual experiences of males have shown that its occurrence is not as rare as previously thought (Ott & Pfeiffer, 2009; Stern et al., 2015; Varga, 2001).

With regards to the circumstances of sexual debut or initiation, most studies in SSA on circumstances of non-consensual sex among the younger population are female-centred (Erulkar, 2004; Jewkes, Vundule, Maforah, & Jordaan, 2001). In other words, there is a more substantial literature on females as victims and males as perpetrators (Jewkes et al., 2006, 2001). These studies suggest that, frequently, the first sexual experience of girls occurs under coercive conditions. Generally, in these cases, initiation occurred as a result of deception or

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pressure from a partner, and in fewer cases, of physical force from a partner, person known to the victim, or sometimes even a total stranger (Awusabo-Asare & Anarfi, 1999; Buga, Amoko, & Ncayiyana, 1996; Erulkar, 2004).

As a result of this direction in research, the sexual health of young girls and women is better understood, with a consequent awareness of the existing and potential abuse of girls (Mmari et al., 2013). In contrast, a relative silence about the abuse of young boys exists, and particularly so in sub-Saharan Africa.

There is a fostered belief among researchers, health professionals, legal practitioners and society at large that the sexual abuse of boys by women is uncommon, and that the outcomes are not severe (Ferguson & Meehan, 2005). Implicitly, the lay thinking that boys cannot even be coerced into sex by females is widespread (Hetherton & Beardsall, 1998). Yet, there have been widely publicised stories of boys whose self-destructive acts were propelled, at least in part by their own sexual abuse histories; these include a host of coercive sexual acts involving both physical and non-physical force and other forms of coercion (Oliver, 2007; Smith & Ford, 2010). According to Tsopelas et al. (2012), sexual abuse by females is often hidden behind the women's caretaking role and is estimated to be at a higher rate than the ones reported (Hetherton, 1999; Hetherton & Beardsall, 1998). Anecdotal evidence, crime data and findings from a number of small case studies present a disturbing picture of a broad range of non-consensual sexual experiences among this understudied group of young people, i.e. boys and young men (Barker & Ricardo, 2010; Varga, 2001).

Nonetheless, a few studies show there has been a gradual shift from a predominantly focused attention on females to encompass male references more recently (Green & Kaplan, 1994; Tsopelas et al., 2012). For instance, prior to the 1980s sexual coercion was defined as ~~–~~obtained sexual intercourse with a resistant woman through the use of extreme verbal

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pressure (i.e., false promises, insistent arguments, and threats to end the relationship)" (Koss & Gidycz, 1985). Clearly, the bias against males as victims and not merely as perpetrators is evident even from looking at sexual abuse and related definitions.

Non-consensual sexual experiences have implications for the health and development of young males, and the risks they pose in the transition to adulthood, are often severe and multi-faceted (Cáceres et al., 2000). While experiences of non-consensual sex may occur at any age, young males may be less equipped than adult males to avoid incidents of non-consensual sex and to deal with the negative consequences (Andersson et al., 2012; Holmes & Slap, 1998; Kalichman, Gore-felton, Rompa, & Cage, 2008). Like any form of child abuse perpetrated by males or females, the sexual abuse of young males by females can adversely influence the psychological status of the victim (Finkelhor, 1991; Holmes & Slap, 1998; Oliver, 2007; Tsopelas et al., 2012; Ybarra et al., 2012). Indeed, few interventions have been specifically designed to prevent the female perpetration of non-consensual sex or to protect young males from the physical and psychological risks of such experiences (Tsopelas et al., 2012; Ybarra, Bull, Kiwanuka, Bangsberg, & Korchmaros, 2012).

In this respect, it is important to recognize the importance of males' first sexual experience both in terms of addressing the impacts on them, and as a means towards improving women's health and wellbeing (Awusabo-Asare & Biddlecom, 2006; Letamo, 2015; Mmari et al., 2013).

Greater attention to the sexual coercion of young males and its potential outcomes appears warranted. Information about the circumstances under which first sexual intercourse occurs and the myriad of socioeconomic factors that affect non-consensual sexual debut are both important and required for the design of SRH strategies. It is against this background of the

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scarcity of studies that look to simultaneously examine individual and contextual factors, that the present study was undertaken.

1.1 Statement of the Problem

Sexual abuse of boys is a neglected problem in many developing countries. As a result, its prevalence, contributing factors and circumstances in which sexual abuse occurs are largely unknown (Moore, Madise, & Awusabo-Asare, 2012).

Studies on the sexual abuse and/or coercion of males have been on the rise in the past two to three decades (Davies, 2002; Easton, 2011; Haile et al., 2013; Hetherton & Beardsall, 1998; Holmes & Slap, 1998b; Jejeebhoy, Shah, & Thapa, 2005; Oliver, 2007; Small & Kerns, 1993; Smith & Ford, 2010; Tsopelas et al., 2012). Definitions, methods and findings have varied greatly (Degue & Dilillo, 2004; DeGue & DiLillo, 2005; Varga, 2001). Although few, these studies have mainly focused on specific high-risk populations, such as men who have sex with men (Kalichman et al., 2008; Paul, Catania, Pollack, & Stall, 2001), homeless youth and clinic clients (DeGue & DiLillo, 2005). Even among studies that have used broader samples, most have been school-based (Stern et al., 2015).

But for a few notable exceptions in SSA (Ajuwon, et al., 2001; Awusabo-Asare & Biddlecom, 2006; Varga, 2003; Woog & Kågesten, 2017), the study contexts have mainly been in the United States, Europe and other more developed settings.

The extant literature on adolescent sexual health in sub-Saharan Africa is silent on the phenomenon of older-female-on-younger-male sexual abuse (Varga, 2001, 2003). There has been less interest on the topic of female-perpetrated sexual coercion of young males in the reproductive health literature compared with male-perpetrated abuse, and the sexual abuse of

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females (Tsopelas et al., 2012). Female-perpetrated sexual abuse is believed by many to be less serious because sexual activity involving adult females and underage males is, in many ways, glorified in society (Hetherton, 1999; Varga, 2001, 2003). From one perspective, the abuse of a boy by an older woman, constitutes the fantasy of each boy or/and is experienced as less traumatic than the opposite, i.e. the abuse of a girl by an older man (Hetherton & Beardsall, 1998). Boys in these situations are rarely considered victims and are instead described as willing participants.

Perhaps, the denial and neglect of this issue is in part due to the very definition of sexual coercion and related acts of abuse. Even within the confines of the law that seeks to protect individuals, definitions regarding sexual abuse are gender biased. For instance, many state laws had defined rape as a crime against girls and women until the late 1980s (Heise et al., 1995). Similarly, definitions of coercion by demographers have mostly applied to women: ―an individual woman's lack of choice to pursue other options to avoid sexual interactions without severe social and physical consequence" (Heise et al., 1995).

In Ghana, as in most other countries in the sub-region, ―rape is the carnal knowledge of a female of sixteen years or above without her consent" (The Criminal Offences Act 1960, Act 29 Section 98). Clearly, from this definition, whereby the law explicitly acknowledges the role of females as victims and males as perpetrators, it is understandable that the rape of boys (or men) does not exist or cannot be acknowledged as valid to some.

Cultural sensitivity to this issue has also resulted in drawbacks to the study of sexual coercion among boys. The limitation in the collection of data has been a major hindrance to the study of males on this very topic. Data limitations have been in part due to the lack of interrogation, in the academic scholarship, of what is considered a taboo issue in many settings. This makes it challenging to undertake community based research. Thus, national surveys have not been

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very inquisitive on this front. The same nationally-representative surveys interrogate sexual coercion among female participants, albeit to the neglect of their male counterparts. For instance, in the nationally representative Demographic and Health Surveys (DHS), males are not asked about the more detailed circumstances surrounding their sexual debut and subsequent encounters (including physical force, pressure or trickery; psychological effects; relationship to person initiating into sex; use of drug or other substance at initiation; and where initiation occurred). Therefore, unlike the female modules, questions on males' initiation are limited to age at first sexual intercourse (Ghana Statistical Service (GSS) et al., 2004; Ghana Statistical Service (GSS) et al., 2009; Ghana Statistical Service (GSS) et al., 2015).

The prevalence of sexual coercion of boys has varied widely, which is not only as a result of differences in study definition, design and methods (Haile et al., 2013) but also, due to the poor reporting of cases of sexual coercion of boys. The true extent of the problem is almost certainly much greater. The prevalence fits an _iœberg model' with a large number of unreported (submerged) cases (Soomar, Flisher, & Mathews, 2009). Self-report studies have generally confirmed that the actual percentage of cases involving female perpetrators is larger than the number of cases reported to the authorities (Nathan & Ward, 2001), and in surveys. Becker, Hall, & Stinson (2001) noted that, according to self-report surveys, between 4% and 24% of male child sexual abuse victims reported their perpetrators were female. In Ghana, a prevalence of 13% of sexual coercion of adolescent males has been cited by Moore et al. (2012).

Nevertheless, sexual and reproductive health programmes for adolescents rarely pay attention to the reality of sexual coercion that many young people face, most especially males in the sub-region. Several literature reviews and meta-analyses found that most youth-oriented

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interventions focus on reducing individual sexual risk behaviours (i.e. increasing abstinence, reducing the number of partners, increasing condom use) (Soomar et al., 2009; Tsopelas et al., 2012; Varga, 2001), but rarely deal with sexual coercion, nor with structural and contextual factors that influence adolescents' sexual behaviour (Van Decraen et al., 2012).

Sexual abuse committed by females is less likely to be reported because of the greater taboo surrounding female perpetration (Denov, 2003); norms of masculinity and traditional sexual scripts, and particularly the societal perception of females as sexually passive and innocent, may play an important role in the under-recognition and under-reporting of female sex offending (Lindstrom et al., 2012; Varga, 2001). Women can mask sexual coercion under the guise of caregiving; they may engage in subtler forms of abuse, and some boys may be less likely to report sexual abuse committed by females because of embarrassment and the attendant expectations of a macho personality (Kaplan & Green, 1995; Stern, Cooper & Greenbaum, 2015). The salient issue of age-based power dynamics is also a potential influence on underreporting (Varga, 2001).

To date, there is very little work that examines the sexual coercion of adolescent males using a mix of qualitative and quantitative methods of research. Studies on sexual coercion of young males in SSA have mostly been survey-based, but for a few exceptions (Ajuwon et al., 2001a; Ajuwon et al., 2001b), where qualitative methods were used. Several studies have highlighted the lapses of using a single research method or approach as against combining qualitative and quantitative methodologies (Amaratunga, Baldry, Sarshar, & Newton, 2002; Creswell, 1997; Creswell & Clark, 2011; Driscoll, Appiah-Yeboah, Salib, & Rupert, 2007; Gioia, Corley, & Hamilton, 2013). Alluding to Creswell & Clark (2011), researchers face the potential loss of a deeper and broader understanding of the phenomenon of sexual coercion of young males, where only one approach is utilised.

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Several studies (Bhatasara, Chevo, & Changadeya, 2013; Haile et al., 2013; Heise et al., 1995; Jejeebhoy et al., 2005) have demonstrated the relationships between non-consensual sex and HIV/AIDS, as well as between non-consensual sex and risky behaviours. Inferring from previous literature, albeit mostly female-centred, consequences of sexual abuse of boys could be physical and psychosocial (Bhatasara, Chevo, & Changadeya, 2013; Haile et al., 2013; Heise et al., 1995; Jejeebhoy et al., 2005). The consequence can be immediate, as constraining their educational performance, social isolation, fear, and loss of self-esteem (Kalichman et al., 2008). Experience of sexual abuse in childhood, which may consequently affect their psychological and emotional states, can also propel young people into sexual risk-taking, and inadvertently put them (and their partners) at higher risk of HIV/AIDS and other STIs (Harrison, Cleland, Gouws, & Frohlich, 2005; Hindin et al., 2009).

All these constraints have had an overwhelming impact on the interrogation of the sexual abuse of males as victims of females, especially in sub-Saharan Africa.

1.2 Research Questions

Does the phenomenon of sexual coercion of young males by females exist in southeastern Ghana? If so, then:

1. What is the prevalence of sexual coercion of young males?
2. What are the predictors of sexual coercion of young males?
3. What is the nature of sexual coercion experienced by young males?

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1.3 Research Objectives

The general objective is to understand the sexual debut of young males by females; and particularly experiences associated with sexual coercion by older females, with the aim of gaining a better insight or understanding of the characteristics and context within which this phenomenon occurs.

Specifically, the study will seek to:

1. Determine the level of sexual coercion of young males by females by describing the frequency of the use of physical force, threat of force, and pressure at their sexual debut.
2. Determine the predictors of sexual coercion of young males by testing for the effects of sociocultural and demographic variables, using bivariate and multivariate analyses.
3. Assess the nature of sexual coercion experienced by young males by older female perpetrators by synthesizing qualitative data using a thematic analytical framework.

1.4 Rationale of the Study

The issue of non-consensual sexual experiences of young people, and more so among males, in developing countries is clearly an important yet under-researched subject with considerable gender and public health implications. While there is a fairly well developed literature in the developed world, it is not clear that the lessons from that literature are directly applicable to developing countries, given the wide differences in sociocultural contexts.

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Indeed, the subject is of concern in multiple sectors, including for those working in the areas of domestic and intimate partner violence, adolescent health and development, sexual and reproductive health and HIV/AIDS, as well as gender relations and human rights.

The import of this subject was first manifest on the global platform during the International Conference on Population and Development (ICPD) in Cairo, 1994. The concepts of sexual and reproductive health (SRH), and of reproductive rights were adopted for the first time by governments under the aegis of the United Nations at the conference (Chandra-Mouli et al., 2015). At the ICPD and its 5-year review in 1999, governments recognized that ~~in~~vesting in the health of adolescents is important not only for the well-being of adolescents but also for the current and future well-being of communities and societies" (Chandra-Mouli et al., 2015, p51). One of the key points that dominated discussions was that both developed and developing countries should begin to recognize that being free from sexual coercion is a vital condition for sexual health. As the report stated ~~h~~aving the possibility of pleasurable and safe sexual experiences, free from coercion, discrimination and violence" is essential for both men's and women's health.

Several studies highlight the importance of SRH interventions targeting the early adolescent period to young adulthood years (Harrison, 2014). Policies and programs are addressing more female adolescents and young adults but are generally leaving out their male counterparts. Yet, there is the need to reach all young adolescents and youth because a substantial proportion of this group is already sexually active; some of them experience problems resulting from early, non-consensual and unprotected sexual activity (Mathews et al., 2008). In particular, young people may be less equipped than adults to avoid incidents of non-consensual sex and in reality may have fewer choices available to them when they do experience such incidents (Van Decraen, 2012).

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While experiences of non-consensual sex may occur at any age, the circumstances of young males' lives and the resources at their disposal are quite different from those of adults, thus requiring a special focus on their experiences and needs (Davies et al., 2014; Jejeebhoy & Bott, 2003; Soomar et al., 2009).

More importantly, attitudes and values related to gender equality, sexuality, and health behaviours are established in this significant period of transition into adulthood, with important implications for health and social well-being in later life (Lindstrom et al., 2012; Varga, 2001). Besides, the young segment of the population has the highest HIV incidence rates, and most likely to make uninformed choices regarding sex considering all age groups, thus making them a key group to study for possible interventions and alleviations.

Essentially, the study area of southeastern Ghana presents a unique case of being the country's region with the highest localized HIV prevalence rate. Youth in these areas are already at a higher risk of HIV and AIDS compared to youth in other parts of the country.

The paucity of data has limited the empirical study on sexual abuse of boys by older females in Ghana. Fortunately, the National Institutes of Health (NIH) - funded study, Gendered Social Contexts of Adolescents' HIV Risk Behaviour (GSC), in communities in southeastern Ghana, allows for the interrogation of sexual coercion of young males. Particularly, longitudinal data from the study allow examination of the cross-gender sexual abuse of boys, highlight the effects it has had on them, and permit discussion of the implications for their future relationships. Very few datasets interrogating sexual coercion in-depth, particularly among males, are available, making the GSC data relevant for analyses and discussion.

Furthermore, this study incorporates a mixed methods approach to add context and depth to the study and understanding of males as victims of female-perpetrated sexual coercion. Analyses of the three longitudinal waves of the GSC survey, together with qualitative data

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collected on the same boys, facilitate understanding of the chronological developments associated with this issue. The contextual richness of the data will allow us to distinguish between the use of actual physical force, and other forms of coercion, and thus enhance our ability to conceptualise the process of coercion of boys, as no systematic framework has been developed in the SSA context. Thus, to get at a holistic interpretation of sexual coercion, the study adapted the ecological systems framework by Bronfenbrenner (1979; 1989). This has led to the recognition that determinants of adolescent sexual behaviour are more comprehensively understood by applying a socio-ecological perspective.

The socio-ecological model posits that individual sexual risk behaviours are influenced by contextual factors derived from multiple systems ranging from the level of the family to broader social contexts, such as neighbourhoods and communities (Bronfenbrenner 1979; 1989). The model emphasizes that reciprocal interactions between youth and their family members, intimate partners, and peers, in addition to influences from more distal societal factors, affect youth sexual behaviours (DiClemente et al., 2005; Corliss et al., 2009). Drawing from this model, it is plausible to hypothesize that there may be important differences in the lives of male youth related to family, friendships, and the community that could contribute to their heightened vulnerability to coercion, and consequently other risky sexual behaviours.

1.5 Organisation of Chapters

This study is organised into eight chapters. Chapter One covered the background of the study, statement of the problem, the rationale, objectives and research questions, while in the second chapter, the literature review, and conceptual framework are presented. The focus of the third

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chapter is the methodology which includes information on the source of the data, the profile of the study area, and the methods of analyses.

Chapter Four describes the socioeconomic and demographic characteristics of respondents. In addition, the prevalence of sexual coercion is presented using univariate analyses. These include tables of frequency distributions, graphs, charts and tables of measures of central tendency.

In the fifth chapter, the associations between the independent socio-economic, demographic and other background characteristics of respondents (these being the factors of vulnerability posited in the conceptual model for analyses), and respondents‘ experience of coercion at sexual debut using bivariate analyses are examined. Here also, the first research question is answered by carrying out the first objective of the study outlined in the first chapter. Prevalence of sexual coercion is explored in relation to the factors of vulnerability.

Multivariate analyses which modelled the relationship between the independent variables and the dependent variable, using an ecological systems framework, are assessed in the sixth chapter. This analysis chapter outlines the second objective of the study.

Chapter Seven incorporates the qualitative findings of the in-depth interviews, using a thematic framework analysis to derive codes and themes in relation to coercion at sexual debut. The third and final objective is met here. The summary of findings, conclusions, and recommendations for further studies, are outlined in the final chapter of this study.

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CHAPTER TWO

Literature Review and Conceptual Framework

2.0 Introduction

This chapter reviews non-consensual sexual experiences of boys in the context of the general body of scientific knowledge. The purpose of reviewing the literature is to lay the groundwork for this study, and also to show why this study has value in the larger scheme of adolescent sexual and reproductive health research.

More specifically, this chapter reviews several aspects of sexual coercion (including key constructs, methodologies, empirical findings and theoretical perspectives), sexual debut, and the evolution of research on sexual coercion of adolescent males, with reference to the sub-Saharan African region, and more specifically to Ghana. Several questions can be asked: What is non-consensual sex? How has research into sexual coercion and other non-consensual or unwanted sexual acts been conducted in previous studies over the last few decades? What are the nature, correlates and consequence of sexual coercion, particularly at first sexual intercourse? What are the theoretical perspectives in relation to non-consensual sex? What is the meaning of first sexual intercourse, the circumstances surrounding initiation, and its relation to sexual coercion? What relevant studies have been done in Ghana and in the sub-region? Through such a review, we can identify research gaps and implications for the current study.

This literature review, which includes both qualitative and quantitative empirical studies and published reviews, summarises research on sexual coercion. The method of developing this review started with framing specific questions which encapsulated the population, exposure to, and outcomes of sexual coercion. Next, published research relating to the questions was

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obtained by searching various sources with specific search terminologies. Studies were selected and appraised according to some selection criteria. Studies including sexually active adolescent and young adult heterosexual males were included. For this review, it was necessary to include an assessment of experience of any form of sexual coercion as the exposure or outcome; sexual coercion was interpreted as having been tricked, forced, or pressured to sexual intercourse. Although the time of exposure was any time during the respondents‘ life, of particular interest was coercion at first sexual intercourse.

2.1 Definition of Terms and Historical Overview

2.1.1 Sex without consent; coercion and other non-consensual sexual acts

The experience of sexual coercion and other non-consensual sexual acts in adolescence and young adulthood is in itself sexual risk behaviour albeit of an unwanted kind, where it is often characterized by early age at first sex, unprotected intercourse, and sex under the influence of alcohol (Jeejebhoy & Bott, 2003; Population Council, 2003). This is in line with the very definition of sexual risk behaviour, which according to the WHO (2012) is any behaviour that heightens a person‘s risk of unintended pregnancy, HIV/AIDS and other STIs.

Tsopelas et al. (2012) and many others point out that sexual risk behaviours in adolescence and young adult ages are a cause for concern, not only because they expose youth to poor physical and psychological health outcomes, but also because they have been shown to influence or predict risky sexual behaviours in adulthood (Biglan, et. al., 1995; Koenig et. al., 2004; Agardh, Odberg-Pettersson & Ostergren, 2011; Letamo, 2015).

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2.1.2 Sexual Coercion and Non-Consensual Sexual Experiences: Definitions and Related Concepts

Generally, non-consensual sex or sex without consent relates to a range of experiences that compel an individual to have sexual intercourse against his or her will (DeGue & Dilillo, 2005). These experiences encompass aggressive force or rape, to sexually coercive or subtler tactics to procure sex, often set within age and economic asymmetries as well as cultural restraints (Varga, 2001; Luke, 2003; Stern, Cooper & Greenbaum, 2015), with ensuing social, psychological and physical consequences (Heise, Moore & Toubia, 1995; Agardh, Odberg-Pettersson & Ostergren, 2011; Letamo, 2015).

Non-consensual sex comprises the use of both physical force and pressure or non-physical force to obtain sexual intercourse or sexual contact from an unwilling sexual partner (Jejeebhoy & Bott, 2003; Jejeebhoy, Shah, & Thapa, 2005). It connotes coercion and ultimately, the lack of consent. Coercion in the academic discourse on sexual activity, has been a difficult concept to define. The use of the expression ―sexual coercion" has a fairly long history in sexual violence research (Finkelhor, 1979; 1984; Varga, 2001), but there have been inconsistencies in the operationalization of sexual coercion. As a result, researchers do not have the same definitions for sexual coercion and related concepts such as sexual abuse, victimization, rape and sexual violence.

Existing works have used different approaches in the measurement, definition and operationalization sexual coercion, often resulting in ambiguity in definitions and interpretation (Soomar, Fisher & Mathews, 2009; DeGue & Dilillo, 2005). The term has been defined in various ways; one of the often used definitions, by Heise, Moore & Toubia (1995), is ―the act of forcing (or attempting to force) another individual through violence, threats, verbal insistence, deception, cultural expectations or economic circumstances to engage in

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sexual behaviour against her/his will." The touchstone of sexual coercion has been ~~–an~~ individual's lack of choice to pursue other options without severe social and physical consequence" (Heise et al., 1995).

A review of the extant literature (Alaggia, 2010; Andersson et al., 2012; Awusabo-Asare & Anarfi, 1999; Awusabo-Asare & Biddlecom, 2006; Becker et al., 2001; Cáceres et al., 2000; Davies, 2002; Degue & DiLillo, 2004; Erulkar, 2004; Glover et al., 2003b; Haile et al., 2013; Heise et al., 1995; Hines, 2007) reveals that sexual coercion among the youth comprises a range of experiences, including non-contact coercion such as verbal abuse and forced watching of pornography, as well as unwanted physical contact in the form of fondling, attempted rape and forced penetrative sex (including vaginal, oral, or anal intercourse), sex trafficking, and forced solicitation and prostitution.

Coercive tactics used to obtain sex includes physical force, intimidation, pressure, blackmail, deception, forced alcohol and drug use, and threats of abandonment or of withholding economic support. Studies operationalize coercion within these contexts holistically or per the researcher's definition of coercion as informed by their research aims and objectives.

While most contemporary researchers (Ayhan et al., 2015; Haile et al., 2013; Kennair & Bendixen, 2012; Moore et al., 2012; Parkinson, 2014; Speizer et al., 2013; Stern & Cooper, 2014; Tsopelas et al., 2012; Van Decraen et al., 2012) agree that sexual coercion is a continuum of aggressive behaviour, a critical observation has been how various definitions have evolved over time. This continuum of aggressive acts frequently cited include rape, sexual assault and sexual abuse (Degue & Dilillo, 2004).

The existing literature document how there has been a gradual shift in definitions, from a predominantly focused attention on females to encompass male references more recently. Prior to the 1990's sexual coercion was defined as ~~–o~~btained sexual intercourse with a

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resistant woman through the use of extreme verbal pressure (i.e., false promises, insistent arguments, and threats to end the relationship)" (Finkelhor & Browne, 1985; Koss & Gidycz, 1985; Russell, 1986; Standing & Kisekka, 1989). Thus bias against research on males as victims and not merely as perpetrators is even evident from the evolution of sexual abuse definitions.

The onset of research interest concerning differences in adolescent sexuality across the various world regions, as far back as the 1950s, led to a general consensus that universal definitions of adolescence should, at best, be restricted to describing adolescence as a period of transition, in which _although no longer considered a child, the young person is not yet considered an adult' (Dehne & Reidner, 2001).

The literature on adolescent health is dominated by international organisations, including the United Nations, World Health Organisation, the Commonwealth Youth Programme and FOCUS (funded by the US Agency for International Development). These organisations have variously considered adolescence to occur between the ages of 15-19, 15-24, 10-19 or 10-24. Such differences in the definition of adolescence have also been dependent not only biological markers, but also on legal, social, demographic and behavioural markers. The terms _young people', _young adult' and _youth' are often deemed more appropriate terms to encompass persons falling within these age groups.

This study uses the terms adolescent, young person and youth interchangeably, to encompass males aged 10 to 24 years. Within the broader range, adolescents aged 10 to17 years are referred to as adolescents. Adolescence is an important and critical developmental period, as sexual debut often takes place during this period.

Sexual debut or sexual initiation generally refers to the first sexual intercourse. The terms first sex, sexarche and coitarche have been used synonymously to sexual debut, and adapted

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as related terms in this dissertation. Within the scope of this study, sexual intercourse refers to a penile-vaginal penetrative sex between a male and a female.

2.1.3 The Issue of Sexual Consent: An Act against One's Will

Sexual consent is of central importance in defining sexual coercion. It should be noted that partaking in unwanted sexual activities alone does not constitute sexual coercion (O'Sullivan, 2005). This means that, if both males and females experience considerable ambivalence about their desire to engage in sexual activity, sexual coercion may occur when one of them does not even express their unwillingness explicitly. It is important to acknowledge at what point coercion begins (O'Sullivan, 2005). Struckman-Johnson et al. (2003) define "post-refusal sexual persistence" as the act of pursuing sexual intercourse with an individual after he or she has refused an initial advance. These authors propose that "all acts of post-refusal sexual persistence are sexually coercive in that the receiver has already indicated that he or she does not consent to the action. They go on to elaborate that, while acts such as removing a receiver's clothing or making repeated requests would be considered non-coercive in an initial sexual advance, the same behaviours can be defined as coercive if the person continues to do them after the receiver has said no" (Struckman-Johnson et al., 2003, p.78). Enosh (2008) notes the importance of the interactional context to define sexual coercion, in which one initiates an act, and the other responds; the initiator reacts to the response and if this is contrary to the desire of the other, constitutes coercion.

Recently, there have been several researchers studying the issues of sexual consent (Beres, 2007; Humphreys & Herold, 2007; Peterson & Muehlenhard, 2007). Peterson and Muehlenhard (2007) argue that the traditional dominant model of sexual consent is not adaptable: sex is either wanted and consensual or unwanted and non-consensual.

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In summary, all the above reviewed studies can provide useful input to the current study to define sexual coercion. After a male has indicated his non-consent to another, whether or not he has desire for sex (often misinterpreted as a physical or bodily manifestation such as an erect penis), if his partner continues to pursue sex using any physical or non-physical tactics, constitutes sexual coercion.

2.2 Adolescence: A critical period of sexual transition and passage into adulthood

Today, adolescents‘ sexuality is viewed with considerable ambiguity and scepticism in most parts of the world, and more so in the culturally entrenched setting of sub-Saharan Africa (Stern, Cooper & Greenbaum, 2015). For most decades, the fields of psychology and sociology have situated adolescents‘ sexual behaviour within the framework of deviant behaviour (Varga, 2001). Mainly, theories which have been implicated in adolescents‘ sexual activity posit that experiences are wanted and framed within rational choice. Thus, studies have often applied a decision-making framework, including theories such as the Health Belief Model (Rosenstock, 1990), the Protection Motivation Theory (Rogers, 1975), the Theory of Reasoned Action (Fishbein & Ajzen, 1975), and the Theory of Planned Behaviour (Ajzen, 1991). The implication has been that adolescents have the latitude to make informed decisions at any or all sexual encounters.

Adding to this ambiguity are many generalisations about the extent to which adolescents are sexually active, with moral judgments as to whether and when they should be sexually active or not. A review of the extant literature shows there has been little research interest in what constitutes a normal and healthy sexual development for adolescents (Jejeebhoy, Shah & Thapa, 2005; Koenig et al., 2004), most importantly if youth are being given the choice of opting for a healthy sexual development with respect to how they are initiated or transitioned

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into sexual activity (Varga, 2001). In large part, the context of most of these studies on adolescent and youth sexuality has impressed upon wanted or consensual sexual experiences. The premise of most of these studies on young peoples' experiences especially that of males, has been experimentation owing to curiosity and peer pressure, clearly suggestive of willingness (Erulkar et al., 2004; Okigbo et al., 2015). The aim here is not to downplay on these above-mentioned salient factors, but to create an awareness of a counter situation, where transition into sexual intercourse is unwanted.

Take for instance Okigbo et al's (2015) emphatic assertion that ‗adolescence is characterised by willing experimentation as youth define their values and seek independence, and this drives the youth to engage in risky sexual behaviours'. As with many other authors and organisations, the extant literature largely fails to acknowledge the non-consensual component of this transition into first sexual intercourse. Such an experience may likely be unprotected, unplanned and even under unsuspecting circumstances (Soomar, Fisher & Mathews, 2009); all of which characterize sexual coercion in the form of physical force, pressure, as well as other non-consensual conditions (DeGue & Dilillo, 2005).

In Ghana, as with the rest of sub-Saharan Africa, much less has been done to shed insight on the development of adolescent sexuality. All the same, there has been a recent research focus and growing interest in the sexual and reproductive health of the youth and more so female youth. A look at some ten studies in the SSA region alone, reiterates this point (Erulkar, 2004; Glover et al., 2003; Ademola et al., 2001; Agardh et al., 2011; Mmari et al., 2013; Ybarra et al., 2012; Van Decraen et al., 2012; Haile et al., 2013). Here we find that only few of these studies conclude on both male and female respondents in their studies, although they set out outlining their aims to study both groups. Clearly, a number of these studies have relegated males to the background, thus the literature on young males' sexual experiences

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especially the circumstances surrounding their initiation, the context and its implications have been quite obscured thus far in the academic literature. Again, though many of these studies on youth in the sub-region include both sexes, the focus on females has resulted in suggested interventions and recommendations tailored to suit the latter's need much to the neglect of their male counterparts.

2.3 Adolescent Sexual and Reproductive Health: The Context of Male Sexual Debut

Taking a look at studies done on age at first sex intercourse within SSA region, including reviews and meta-analysis, we find that many studies on the sexual behaviours of young males have assumed or have been premised on sex being wanted or consensual, even if not directly insinuated. In other words, the incidence of sex has been studied along the parallels of having had sex or not, much to the neglect of the context within which it occurred (Tsopelas et al., 2012). Thus far, the few studies focusing on non-consensual sexual experiences of males have shown that its occurrence is not as rare as previously thought (Stern, Cooper & Greenbaum, 2015).

Following from the non-consensual sex literature over the last few years, the evidence suggests that indeed a sizeable proportion of encounters among young people are actually without consent (Tsopelas et al., 2012; Green & Kaplan, 1994). These studies also evince that these non-consensual sexual acts are often depicted as coercive, experienced predominantly by females, and suggestive of males as perpetrators of these acts (Bhatasara et al., 2013; Erulkar, 2004; Finger, 2004; Jewkes et al., 2006).

In most documented studies, reviews and meta-analysis, much of what is known about adolescents' sexual behaviours in SSA come from the Demographic and Health Surveys

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(DHS) and more recently, the AIDS Indicator Surveys (AIS). Few other studies are also premised on localised surveys with a much smaller scope or surveys qualities at specific populations of interest such as school-based surveys, street surveys, etc. (Varga, 2001; Tenkorang & Owusu, 2010). In the surveys, commonly estimated indicators of sexual behaviour are age at sexarche (Halperin et al., 1996; Glover et al., 2003), primary/secondary abstinence, indicators of condom use at first or last sex (Mmari et al., 2013), and indicators of sexual partnerships such as multiple partners, age differences (Tsopelas et al., 2012; Van Decraen et al., 2012), partner characteristics (Ybarra et al., 2012; Smith & Ford, 2010), etc. For many of such indicators collected, adolescents are often not disaggregated, but are lumped together with older adults from 15-24 and beyond (Jejeebhoy, Shah, & Thapa, 2005).

Furthermore, in the extant literature, data on sexual behaviour are often not collected for adolescents younger than 15 years, although an estimated 30 percent of 15 to 19 year-olds in several countries report sex before reaching the age of 15 years (Dixon-Mueller, 2009).

In addition to indicators of sexual behaviour, several other reviews have assessed the patterns and trends in adolescents‘ sexual behaviour in SSA using national data (Gupta & Mahy, 2003; Cleland & Ali, 2006; Wellings et al., 2006; Khan & Mishra 2008; Mishra et al., 2009; Van Decraen et al., 2012). These national data provide evidence of a changing trend over the years, towards later age at first sex, although changes are often limited to subgroups of adolescents (for instance gender bias towards females, urban/rural distinctions that suppress urban poor populations, socio-economic differentials etc.) (Mahy & Gupta, 2002; Zaba et al., 2004; Mensch et al., 2005; Wellings et al., 2006; Slaymaker et al., 2009).

An attempt to generalise adolescent sexual behaviours can be problematic, given the cultural within SSA. Nonetheless, what we can glean from the general body of knowledge in the sub-region allows us to define common features of adolescents‘ sexual behaviours.

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A critical look at studies on adolescents and young adults using data from mostly Demographic and Health Surveys as well as AIDS Indicator surveys, summarise their sexual behaviours primarily into nine indicators of sexual and reproductive health behaviours. A summary of themes from the review of sexual initiation of young people discussed so far included (though not limited to) the following: age at sexual debut (early age at debut mostly pivoted before age of 15 years); early marriage before the age of 15 years; premarital sexual intercourse (being engagement in sexual intercourse among the never-married adolescents); multiple or serial sexual partnerships (mostly in the last 12 months preceding surveys, as well as number of lifetime sexual partnerships); age-disparate sex with older partners, mostly 10 years or more; condom use at last sex (among the never-married adolescents); knowledge of HIV and other STIs, willingness to test, and actual HIV test with known result; pregnancy and birth histories (females only).

Deductions made from reviewing studies on adolescents‘ sexual behaviours in the sub-region unearthed that, while most of studies‘ target samples were females, a minority included both sexes, and much less focused on only males. Hence, in most of the studies, conclusions were drawn for only females following robust analyses. Reasons being that some variables were applicable to females only, were applicable to males but not asked at all, or because male reporting was negligible. We can appreciate why males are hardly interrogated on the circumstances of their sexual debut compared to females. Historically, the global literature on unwanted sexual experiences highlights females as victims and males as perpetrators. This dearth in knowledge on males, being more pronounced within the backdrop of traditional sexual scripts and other cultural norms, posit that unwanted and other sexually coerced experiences is a female problem. It is therefore not surprising that most nationally representative surveys such as the DHS interrogate this phenomenon among female participants much to the neglect of their male counterparts (even within the same survey).

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This limitation in the collection of data has also been a major hindrance to the study of males on this very topic. Males are not interrogated on more detailed circumstances on their sexual debut (including the use of physical force, pressure or trickery; psychological effects, relationship to person initiating adolescent into sex; use of drugs or other substance at initiation; where initiation occurred), except on a single question which asks the age at first sex. On the other hand, the female module of the questionnaire seeks more clarity on circumstances surrounding sexual initiation for girls and women.

From the discussion above, several gaps in the literature are evident. First and foremost, the trajectory in adolescent sexual and reproductive health research has been inclined towards females, owing to the global society's paradigm of risk and vulnerability to sexual exploitation. Second, the literature is silent on age and economic asymmetries between adolescent males and their sexual partners, with emphasis on age of the person who initiated them into sex.

We know from existing studies in the sub-region, as well as from anecdotal evidence about _sugar-daddy' relationships, where older men give money, gifts and attention in exchange for sexual favours with younger females (Nyanzi, Pool & Kinsman, 2000; Meekers & Calves, 1997; Luke, 2005), often under coercive and other unwanted circumstances. This has been associated with age and power imbalances which limits girls' power to negotiate on their sexual behaviours (Luke, 2003; 2005). In, the same vein, there is some anecdotal evidence suggesting that _sugar mummies' also seek out younger male partners for sexual favours in the belief that these younger males may likely glorify such experiences with little or no consequences to them. However, age-disparate sex could also connote some power imbalance and non-consent among young males (Varga, 2001). Despite this knowledge on older women who prey on the younger men, programmatic resources and campaigns have been devoted to

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protect and sensitize younger females of the _sugar daddy trap‘ (Luke, 2003), to the neglect of their male counterparts.

A third observation regards the silence on the nature and context of sexual activities of young males. Although certain key factors influencing the onset of males‘ sexual activity have been explored, including but not limited to individual level characteristics such as educational attainment, age, religion, socio-economic status, gender, alcohol use, peer influences etc., there is a dearth in knowledge with regards to factors associated with young males‘ unwanted sexual debut.

Relatively few analyses have explored pressured, forced or other coercive experiences, and early initiation of sex among adolescent males in the sub-Saharan African region, Ghana being no exception. Often, the commonly studied adverse sexual outcome besides the occurrence of premarital sex, and early age at first sex (often before the legal age of consent), which is 16 years in Ghana and in several other countries in the SSA (Archampong & Baidoo, 2011) has been lack of condom use at sexual debut, which could imply a lack of choice to negotiate safe sex.

It is acknowledged by several authors that there is the need for clarity in the definitions of sexual coercion and other forms of sexual misconduct (DeGue & Dilillo, 2005; Sano, Sedziafa & Tenkorang, 2016). However, there have been irregularities in the literature making comparisons across studies difficult. Discussions on sexual coercion of males, perpetrated by females are culturally not recognized in the sexual misconduct literature. To help clarify the notion of sexual coercion, DeGue & Dilillo (2005) proposed a conceptual model. This model places sexually coercive acts within the broader context of non-consensual sexual misconduct.

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Their model proposed two dimensions which overlap to describe the broader concept of non-consensual sexual misconduct. In the first dimension, various types of sexual contact that occur between individuals are presented. These include the more subtle sexual activities, such as fondling and petting, to more invasive actions, such as sexual intercourse.

For the second dimension the tactics employed by perpetrators to achieve sexual contact are outlined. These include subtle coercive verbal acts at one end of the continuum, to more aggressive tactics involving physical force. Sexual acts on the continuum include behaviours such as forced undressing, genital fondling, and oral sex. Coercive tactics include the use of pressure, bribery, threats of harm, and verbal insistence or persistence.

These dimensions are not mutually exclusive. That is to say, they interact.to form categories of sexual misconduct involving both sexually aggressive physical force and coercive non-physical tactics. In most cases of non-consensual sex, a number of these tactics are employed by perpetrators. Also, sexual misconduct at many coerced episodes is progressive, starting with subtle tactics and resulting in more aggressive acts. At the more aggressive end, forcible rape or sexual assault includes intercourse with a person who is too intoxicated by alcohol or drugs to give consent or resist unwanted advances. Other victims also include physically or mentally disabled persons.

Verbal coercion or manipulation or pressure is also used to obtain unwanted sexual contact. Verbally coercive acts may take the form of lies, false promises, threats, guilt, and power dynamics.

Depending on the type or nature of the sexually coercive act, it is perceived as either problematic or less serious. For instance, the less invasive acts such as unwanted fondling which does not result in sexual intercourse is perceived as a minor offense. On the other

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hand, acts involving the use of physical force, and resulting in sexual intercourse, are considered a matter for legal redress.

In all cases of non-consensual sex, irrespective of the nature of the sexual contact or the coercive tactic employed by the perpetrator, consent is key. Even in the case where consent may be given, it may have been obtained under coercive circumstances. Under coercive circumstances non-consent of the victim may be expressed or not. Expression of non-consent may be clearly communicated in most cases of forced sex. However, lack of expressed non-consent may take the form of neither consenting nor verbally or physically objecting to unwanted advances. It is these behaviours that are less often prosecuted by law. In spite of the dearth of legal action against such acts, researchers have begun to examine the prevalence and significance of this form of sexual misconduct. The circumstances of young males are blurred, and evidence from sexual misconduct literature which propelled this conceptualisation, has revealed this.

The basic reasons for some cultures normalising sexual coercion to such extents that victims fail to perceive or realise it are multiple and complex. They are deeply rooted in inequitable gendered norms, traditional sexual scripts and power dynamics (Stern, Cooper & Greenbaum, 2015). Situations in which women use their influence to have sex with a reluctant young male have received relatively little attention in research. According to Varga (2001), this neglect stems from the fact that female perpetration does not conform to gendered sexual scripts which prescribe explicit socially accepted normative behaviours for females and males (Varga, 2001).

These sexual scripts prescribe that a man should initiate sexual activities and also maintain a constant exploration of sexual opportunities or be in the active role of the predator (Hertherton, 1999; Varga, 2001). Even in disagreement situations where especially a female

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partner is unwilling or non-consenting, it is acceptable and expected for the man to influence the woman by whatever means necessary into engaging in sexual activity, even if he has to resort to the use of coercion or other unwanted sexual advances (Hertherton, 1999; Varga, 2001). However, a woman is expected to show little or no desire for sexual activity. She is expected to control or at least act like she is controlling the amount of sexual contact her partner receives, as this connotes chastity as well as proper upbringing. Some cultures expect females to influence males to avoid having sexual intercourse, and not to encourage it (Harrison, 2005; O'Sullivan, 2005).

However, men and women's behaviours do not always conform to traditional sexual scripts. Attempts to influence individuals to engage in sexual activities they have initially rejected or activities to which they have expressed their non-consent, have received substantial research attention (Harrison, 2005; O'Sullivan, 2005). Largely, researches have examined sexually coercive tactics by men to influence a non-consenting woman into sexual intercourse. Few researchers examine the inverse situation, where a woman influences a non-consenting male especially boys, to have sex (Varga, 2001).

The relative inattention to female' coercion of a reluctant male may be the result of researchers' stereotyped beliefs (O'Sullivan and Byers, 1992). Essentially, if a female is forward in her interest to engage in sex, assumes an active as opposed to a passive role in a sexual encounter (i.e. being the initiator), and employs coercive tactics to engage in sex, she contradicts accepted norms of behaviour for women (Struckman-Johnson et al., 2003). In the same vein, a male's attempts to deny a female sexual access, being a victim of a female, and assuming a passive position, oppose the gendered scripts of behaviour expected of males. Yet, males also reject unwanted sexual advances, and may be as likely as females to do so.

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Although only a handful of studies have directly examined female-perpetrated sexual coercion of younger males, it is clear that women do attempt to influence reluctant males to engage in sexual activity. This insight is especially gleaned from the Western literature which has interrogated the phenomenon of older female-on-younger male sexual activities. Again, acknowledgement of this issue is not new, from a western perspective, though it is now an emerging issue in the sub-Saharan African academic discourse on adolescent males' sexual and reproductive health.

For example, as far back as three decades ago, Muehlenhard and Cook (1988) reported that about 93.5% of the 507 male college students in their study had been pressured by women into non-consensual sexual activity, including students whose first such encounter was at their sexual debut. Unfortunately, the study was not clear on what proportion of these incidents resulted from pressure from a female, and what proportion resulted from pressure from others including peers, or another male. It was also not clear as to whether the victim had expressed his reluctance to the perpetrator.

A few studies (Jaya & Hindin, 2007; Letamo, 2015; Njue et al., 2005; Tsopelas et al., 2012) have consistently alluded that males report more on pressured sexual debut, while females report a higher incidence of forced sexual debut. For example, Struckman-Johnson (1988) compared the narratives of 79 female and 43 male respondents who were asked if they had fallen victim to having forced sexual intercourse. A higher proportion of females than males reported of being physically forced to have sexual intercourse (55% and 10%, respectively). Conversely, more males than females reported on being victimised by use of pressure alone (52% and 16%, respectively) and psychological pressure in addition to force (28% and 19%, respectively) to engage in unwanted sex. Respondents reported on forced sexual intercourse only, without any context on other sexual activities. Unlike most prior studies, this current

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study gives more depth regarding this phenomenon, describing and analysing the circumstances influencing young males to engage in coercive and other non-consensual sexual activities.

O'Sullivan and Byers (1992) have also alluded that deviations from traditional sexual scripts are more likely to occur when there is an age-power imbalance. Their assertion is consistent with the perspective that women adopt alternative behaviours or scripts (Farris, 2008). This occurs when they have evaluated a situation where they may lack certain opportunities to enact their sexual desires outside of certain domains, thus have motive to engage younger boys who are likely in their care and immediate surroundings, and whom they likely see as easy prey. This being a typical scenario of domestic helps engaging their under-age charges in sexual activity (O'Sullivan & Byers, 1992; Farris, 2008).

The academic and policy communities need to start rationalising sex differently – sexual health is not just the absence of a disease, but also the ability to have pleasurable and safe sexual experiences, free from coercion (WHO, 2012). Positive sexual experiences are related to health and well-being throughout the life course (Erulkar, 2004).

A lot has been learned from studies on females on the adverse effects forced sex and other kinds of sexually coercive behaviours may have on youth. Emerging evidence shows that sexual coercion in the formative years has both short term and long term physical, emotional, psychological and social consequences. Unwanted sex can lead to myriad health issues such as STIs, including HIV and sexual dysfunction (Pettifor et al., 2005; Stern & Cooper, 2014).

Young people who experience non-consensual sex are more likely than others who do not to experience emotional distress including anxiety, depression, contemplation of suicide, and post-traumatic stress disorder (Briere & Elliott, 2003; Korn, 2004; Soomar et al., 2009; Tsopelas et al., 2012). Psychological consequences of coercion include feeling powerless,

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loss of self-worth, difficulty in keeping personal boundaries, inability to refuse any unwanted sexual offers or advances; difficulty in trusting other people, feelings of guilt or shame, fear and other psychological distress (Briere & Elliott, 2003; Korn, 2004; Soomar et al., 2009; Tsopelas et al., 2012).

The social consequences of sexual coercion can also be costly, and may include achievement in education, increased school drop-out rate, inability to build or maintain relationships, as well as stigmatisation from friends and upon disclosure of a coerced experience (Sano, Sedzefia and Tenkorang, 2016).

Furthermore, the literature posits that adolescent victims of sexual coercion are more likely to engage in self-destructive or risky behaviours in adulthood, such as practicing unprotected sex i.e. not using of condoms, having multiple or serial sexual partnerships, abuse of alcohol and other substances, and become perpetrators of abuse themselves (Heise et al., 1995; Stewart, Sebastiani, Delgado, & López, 1996). Some other studies also elucidate how sexual abuse in childhood appears to increase the risk of re-victimisation or subsequent sexual abuse (Briere & Elliott, 2003; Korn, 2004; Soomar et al., 2009; Tsopelas et al., 2012).

2.4 Male Sexual Abuse Myths

Male rape myths are prejudicial. This has resulted from the false beliefs about sexual abuse victims who are male, and the perpetrators of such abuse (Struckman-Johnson & Struckman-Johnson, 1992). These myths have stemmed from the traditional belief of masculinity, which stipulates that men should be heterosexual, strong and assertive, and sexually dominant (Garnets, Herek, & Levy, 1990; Lonsway & Fitzgerald, 1995). Male rape myths have

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perpetuated in the fields of medicine, psychology and law, until recent research efforts to clarify some of these issues.

Very little is known about rape myths concerning male victims, and even less is known about victims of female perpetrators. Despite this dearth, previous research have identified these following beliefs: "men are incapable of functioning sexually unless they are sexually aroused" (Smith, Pine, & Hawley, 1988, p. 103), "men cannot be forced to have sex against their will" (Stermac et al., 2004, p. 901), "men are less affected by sexual assault than women" (Stermac et al., 2004, p. 901), "men are in a constant state of readiness to accept any sexual opportunity" (Clements-Schreiber & Rempel, 1995, p. 199), and "a man is expected to be able to defend himself against sexual assault" (Groth & Burgess, 1980, p. 808).

For instance, in Smith et al.'s (1988) study, respondents perceived that male victims of a female-perpetrated sexual abuse were likely to have encouraged the act, even enjoyed the encounter, and experienced little or no trauma. These respondents also blamed victims for not being "man enough" to escape the assault. In their views, they expected male victims to quickly reclaim their 'manhood' by denying the abuse was traumatic.

Struckman-Johnson and Struckman-Johnson (1992) have also endeavoured to measure male rape myths by focusing on three widespread beliefs: male rape does not happen (e.g., "it is impossible to rape a man"), rape is a victim's fault (e.g., "men are to blame for not escaping"), and men cannot be traumatized by rape (e.g., "men do not need any treatment or therapy after being raped"). Struckman-Johnson and Struckman-Johnson (1992) found that their male respondents were more accepting of rape myths than their female respondents. Their experimental evidence suggested that male rape myths operated more strongly when the perpetrator was female (Struckman-Johnson & Struckman-Johnson, 1992). Respondents in their study endorsed these myths to a greater degree when the perpetrator was a female.

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According to Glick and Fiske (1997), just as sexist attitudes towards females can be either positive or negative, there are ambivalent sexist attitudes toward men. For instance, a woman may describe a man as arrogant, sex deprived, and dominant, but then also resourceful and strong.

Consequences of myths surrounding males‘ sexuality have been many. Particularly, the evidence lies in the underreporting, stigmatisation and underestimation of cases the world over. Victims use rape myths as a means to blame themselves for their victimisation. Male victims, before such abuse may have never considered that they could become victims of sexual coercion, and may have trouble even accepting their victimisation as real (Garnets, Herek, & Levy, 1990). Male victims of female-perpetrated sexual abuse may have difficulty their ordeal even happened at all (Garnets, Herek, & Levy, 1990). Male sexual abuse myths in confluence with the strain of traditional gendered sexual norms could place males in a position that makes it difficult for them to conceptualize or understand their experience, or come to terms with its consequences.

Besides, it is evident from both documented and undocumented accounts that men who do report sexual victimisation of any kind, are often not taken seriously by the police (Mezey & King, 1989) and receive blame from friends, relatives and others (Walker,1998).

2.5 Empirical Findings of Sexual Coercion from Previous Studies: Prevalence, Patterns and Correlates

The actual prevalence of sexual coercion of young males in the general population remains unresolved. Some earlier studies (Halpérin et al., 1996; Heise, Ellberg, & Gottemoeller, 1999; Jewkes et al., 2006; Luke, 2005; Russell, 1986) have mostly tended to report the prevalence

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of coercion among females. The few comparative studies have mostly reported a considerably higher prevalence for females compared to males. Other studies have found similar rates for both genders. A notable exception where higher prevalence rate was reported was a multi-country by Andersson et al. (2012); 21.1% of coerced male cases versus 19.6% for females.

Plausible reasons for the variability in prevalence rates are differences in the definition of coercion and related concepts, data collection methods, and the representativeness of the samples in the studies. For example, some measures were specific and defined as coerced sex as the use of force, threats, or pressure. Other studies‘ operationalization of coerced sex were broad or non-specific: foe example, _did not want to have sex‘, _not willing‘, _tricked‘, _sweet-talked‘, etc. It was apparent from the review that the broader the definition of coercion, the higher the prevalence rates. This underpins the need of taking into account the definition of sexual coercion in the assessment of prevalence rates, and therefore, relevance of standardising the measures of coercion.

Considerable controversy, especially for male victimisation rates is evident. Several works suggest that reported rates for males sexually victimised as children are significant underestimates of actual prevalence in the general population (Briere & Elliott, 2003; Easton, 2011; Mendel, 1995; Van Decraen et al., 2012).

Within the developing region, the prevalence rates for experiencing coercion at sexual debut amongst males were very variable. However, more studies reported lifetime experience of sexual coercion (Basile et al., 2006; R Jewkes & Abrahams, 2002; Koenig et al., 2004; Lottes & Weinberg, 1997; Njue et al., 2005; Pettifor et al., 2005), with only a handful of studies on sexual debut (Agardh et al., 2011; Dickson, Paul, Herbison & Silva, 1998; Li et al., 2015; Manzini, 2001; Sano et al., 2016; Tenkorang & Maticka-Tyndale, 2014). Also, these studies

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showed there are clear discrepancies between the sexes, with female prevalence rates ranging from 4% to 48%; rates were higher than male prevalence rates which were found to range from 0.2% to 26.7% (Afenyadu & Goparaju, 2003; Ajuwon et al., 2001; Basile et al., 2006; Erickson & Rapkin, 1991; Halcón et al., 2003; Njue et al., 2005; Pettifor et al., 2005; Upchurch & Kusunoki, 2004).

Focusing on sexual coercion of males by older females, actual prevalence rates cannot be emphasised. In actual fact, one of the earliest and often cited ‗guesstimate' has been Finkelhor and Russell's (1984) study, based on several general population surveys, largely in the United States. They put the proportion of sexual victimisation of adolescent males by older females to be on average 20% (range 14% to 27%). Brian (2007), in his study on prevention of female-perpetrated sexual abuse, stated that prevalence rates ranged between 4% and 24%. The few studies in sub-Saharan Africa have not been clear or conclusive on the characteristics of female perpetrators, therefore delineating prevalence by who the perpetrator was has been lacking.

The literature is replete (especially for males) with the magnitude of sexual coercion in developing countries, although the available data suggests that its incidence may be common. In this sub-Saharan African region also, the few studies on sexual coercion of males have been in southern and eastern Africa; perhaps because of the high HIV prevalence rates compared to all other parts of Africa. Agardh et al., (2003) reported a prevalence of coerced first sex to be 29% among males in their Ugandan study. Ademola et al., (2003) found very high levels (42%) of males who had ever been forced, raped, or threatened, while Erulkar (2004) found that among the sexually experienced respondents in her Kenyan study, about 11% of young males had been subjected to sex under coercive conditions. One study found higher prevalence of male sexual victimization than female victimization. This multi-country

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study by Andersson et al. (2010) found that 19.6% of female students versus 21.1% of their male counterparts had experienced coerced sex.

In Ghana, a nationally representative survey of youth aged 12–19 years, the National Survey of Adolescents (NSA, 2004), found that 13% of adolescent males' sexual debut was coerced (Awusabo-Asare et al., 2006). Biney and Dodoo (2016), in their study of urban poor adolescents, found that of the sexually active males, 13.8% stated they had ever been forced to engage in unwanted sexual acts or raped. Glover et al., (2003) also reported a rape prevalence of 5%, while another 10% of males reported of being pressured to have sex.

Studies on correlates of sexual coercion of males have been few. At the level of individual factors, research has examined a range of factors and their relationships to sexual behaviour. Five of these factors examined in the present study are age at sexual debut, ethnic and religious affiliations of individual, educational level and schooling status.

2.6 Perpetration and Reporting of Violence in Ghana

Violence against women, men and children is an issue that continues to be exceptionally difficult to deal with publicly in Ghana due to cultural, social and legal practices; practices that bury or ignore the problem or consider it a private matter (Ardayfio-Schandorf, 2000; 2005). Existing information, mostly anecdotal from case histories, from legal perspectives and newspaper/media accounts, shows a high incidence of women abused in intimate relationships, child abuse in the family, abuse of elder dependants and sexual harassment at the work place.

The reporting of sexual violence for males continues to remain a problem in the country compared to reporting by females. For instance, the Domestic Violence and Victim Support

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Unit (DOVVSU) formerly known as Women and Juvenile Unit of the Ghana Police Service (WAJU), recorded annual cases of violence against women to have risen steadily over the years. On the other hand, cases of violence against men have been negligible. Similar report rates have been implied by DOVVSU for child abuse cases for females and males respectively.

Violence against children, especially child sexual abuse, remains a significant problem in almost all societies in Ghana (Boakye, 2009) including the southeastern parts of Ghana where this study is situated. According to the Ghana Criminal Code 1960 (Act 554, Section 101(1)) child sexual abuse (child rape/defilement) is ~~"t~~he natural or unnatural carnal knowledge of any child under sixteen years of age." The punishment following this type of offense is a prison term of between seven and twenty-five years.

The Children's Act 1998 (Act 560) defines a child as: ~~"a~~ person below the age of eighteen years." However, in the definition of defilement, the maximum age for defilement is pegged at sixteen years. On the other hand, a ~~"n~~atural carnal knowledge" of a female above age sixteen without her consent is classified under the Sexual Offences Act as adult rape. This is because the legal age for sexual consent in the country is sixteen years. Similarly, any ~~"f~~orcible sexual bodily contact other than natural or unnatural carnal knowledge of a female below sixteen years will not, in all probability, qualify as child rape/defilement"; instead, such offense is treated as indecent assault under Section 103 (Ghana Criminal Code 1960, Act 554) with a six-month minimum sentence on conviction.

In many Ghanaian societies, the open discussion of sex is widely considered a taboo and a topic reserved for adults (Anarfi, 2003). Sex education is not widely embraced in many schools because children are presumed to be sexually innocent or immature to cope with such information on sexual activity (Attah, 2016). In traditional societies, social norms were

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instituted to regulate the onset of sexual activity, especially outside the confines of marriage. Societies had control over the sexual behaviours of children and young adults by way of traditional practices enforced at the onset of puberty; for example Bragoro by Akans, Dipo by Krobos and Nugbeto by Ewes (Nukunya, 2003). The Puberty rite signified the age or period for the onset of sexual reproduction, and was also a way of encouraging adolescents to remain chaste. During this period, adolescents were given lessons in sexuality, birth control and the needed skills for parenthood (Osafo et al, 2013).

These traditional practices of puberty have weakened over time due to the advent of globalisation, urbanisation and other rapid social change. Despite the breakdown of these traditional systems, traditional norms of masculinity and femininity, and gendered sexual scripts continue to dominate the socialisation of children in Ghanaian societies. Cultural factors have been implicated in the high rates of non-disclosure of sexual abuse in Ghana as a result of these gendered sexual scripts (Boakye, 2009; Coker-Appiah and Cusack, 1999; Pappoe & Ardayfio-Schandorf, 1998. In a nation-wide study on violence against women and children conducted by Coker-Appiah and Cusack (1999), it was reported that the major factors of non-disclosure were embarrassment, stigmatisation and fear of reprisal from victim‘s own family. Of all the cases of sexual violence, none of their respondents reported to the police or the Department of Social Welfare.

2.7 Theoretical Framework

The theoretical framework guiding this study integrated two related perspectives: the risk and protective factor framework (Jessor, 1991; Fraser, Galinsky & Richman, 1999) and the ecological perspective (Bronfenbrenner, 1986; 1987). The first framework proposes that various risk and protective factors combine to shape adolescents' behaviour over the course of

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their development (Fatusi & Bloom, 2008). According to Murray (2003), protective factors are factors which increase a person‘s likelihood of practicing positive health behaviours or experiencing better outcomes (e.g., abstinence, late sexual debut, condom use). Protective factors mediate or discourage actions leading to negative health outcomes (Mmari et al., 2013; Murray, 2003). Factors are labelled "risk" if they increase a person‘s likelihood of experiencing negative health outcomes, or avert positive behaviours that might prevent poor health outcomes (Mmari et al., 2013; Murray, 2003).

Mmari et al. (2013) suggest that to understand how risk and protective factors interact to influence an outcome, these have to be viewed within an ecological model. Bronfenbrenner‘s (1979, 1986) formulation of the manner in which social contexts beyond the individual may help shape adolescent functioning provides such a framework. His ecological systems theory of child development acknowledges that every individual functions within a multifaceted network of individual, family, peer, community, and other social and cultural contexts that may compromise their abilities to avoid risk (Bronfenbrenner, 1986; Mmari et al., 2013). These social contexts also serve as the key links between environmental settings and adolescents‘ behaviours (Taylor et al., 2000).

2.7.1 The Ecological Model

An ecological systems‘ framework considers the holistic environment for a person‘s development or transition into different states of being. Applying this model to the experience of sexual coercion suggests that, victimisation could be the result of the complex interactions between factors at the individual, interpersonal, socio-cultural and structural levels. Therefore, to understand adolescent males‘ sexual victimisation, these factors must be considered in terms of their existence at each level, as well as their synergy across all levels.

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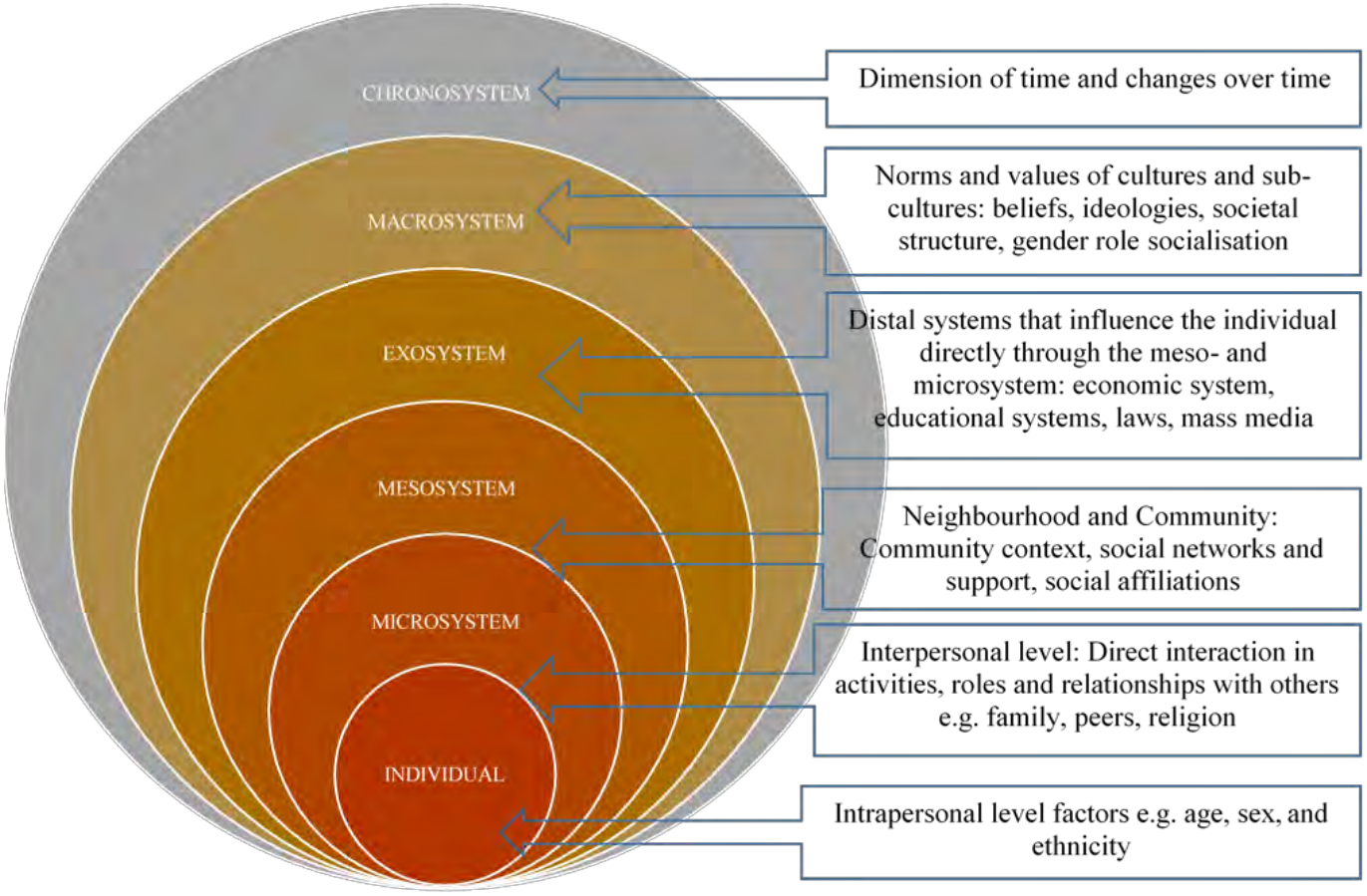
Figure 2. 1 The Ecological System's Theory



Source: Bronfenbrenner Ecological Systems Theory, 1979.

Six levels are embedded in the model, the core of which the individual is situated. The second level is that of the microsystem. The microsystem incorporates the environments proximate to the individual, and the persons with whom the individual interacts, for example, family, school mates and peers. At the third level is the mesosystem, which incorporates the interactions occurring within the microsystem. These interactions include familial relationships, community context, social networks and support systems, and social affiliations. The fourth system, the exosystem, depicts the more distal structures that do not

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directly affect the individual, but exerts influence through laws, policies, economic structures, political climate, educational structures, and other such systems. The macrosystem defines the larger socio-cultural environment under which all the systems exist. This includes, for example, norms, ideologies, gender role socialisation, and the structure of society. Farthest from the core individual is the chronosystem, which depicts the element of time, and the potential influence exposures at the other prior levels could have on an outcome over time.

2.8 Conceptual Framework

Relating this model to the literature discussed so far, possible pathways of interaction among selected background variables at the different ecological levels posited to influence young males' vulnerability to sexual coercion are presented in Figure 2.2. Adapting Bronfenbrenner's ecological systems framework (1979) and the risk and protective factor framework (Jessor, 1991; Fraser, Galinsky and Richman, 1999), this framework includes demographic and socio-economic factors at different levels of interaction. These variables posited to be exposure or enabling factors of sexual coercion, included age at sexual debut, schooling status, educational attainment, parents' characteristics, living arrangement, orphan status, community factors and relational characteristics pertaining to the setting of sexual coercion.

Possible pathways of interactions are presented in the framework. For instance, each of the ecological levels could influence the main outcome directly. Again, these pathways could be mediated by other ecological levels. Finally, a synergistic pathway incorporating all levels of the framework could be determined. This pathway is particularly relevant, especially when the net effect of for example, individual level factors, is to be examined. Controlling for the other background characteristics would be useful in determining this net effect.

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All the factors in the framework conceptualizing sexual coercion of young males were chosen because they have shown a relationship in prior research (Erulkar, 2004; Andersson et al., 2012; Glover et al., 2003; Ademola et al., 2001; Agardh et al., 2011; Mmari et al., 2013; Ybarra et al., 2012; Van Decraen et al., 2012; Haile et al., 2013), may be amenable to intervention, and were available in the survey.

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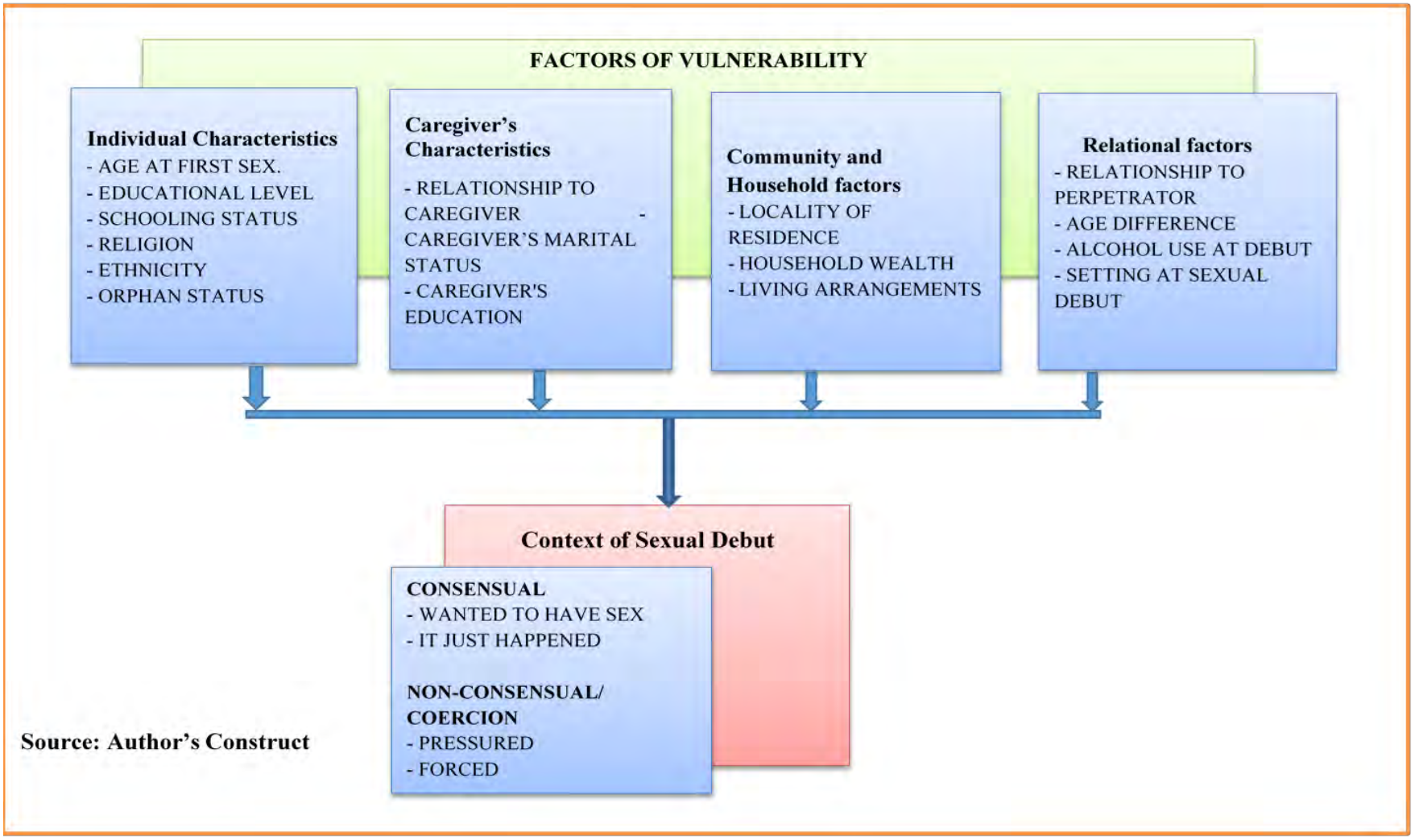
Figure 2. 2 Conceptual Framework for Young Males' Susceptibility to Sexual Coercion at Sexual Debut incorporating an Ecological Systems Approach



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CHAPTER THREE

Description of Study Setting, Sample and Methods of Analyses

3.0 Introduction

The chapter presents information on the socio-demographic background and context of young males' first sexual encounter. The backgrounds of young males and the sociocultural milieu in which they live and grow up, have implications for their choices, which in turn affect aspects of their lives, such as their sexual and reproductive health.

3.1 Study Design

This study draws on qualitative and quantitative secondary datasets, both of which provide unique opportunities to understand the phenomenon of unwanted sexual experiences among young males. The survey data provide information on the prevalence of coercive sexual intercourse at sexual debut, characteristics of the respondent at that point in time, as well as other indicators of exposure to unwanted sexual experiences (coital) including who perpetrated the unwanted experience. The qualitative data include in-depth interviews that provide insight, from the boys' perspectives, into the particular context surrounding sexual experiences at their sexual debut. The power of juxtaposing the qualitative and quantitative data is that it, among other things, can help clarify the sometimes conflicting information presented in respondent narratives, compared to their survey responses. The mixed methods approach serves to further illuminate our understanding of boys' unwanted sexual experiences.

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3.2 Description of Study Site, Sample size and Participant Selection

3.2.1 Study Setting

The data for this study come from two study sites in southeastern Ghana; specifically, Agormanya and Juapong in the Eastern and Volta regions respectively. These are market towns, just 40 kilometres (25 miles) apart on the same paved road that connects the national capital Accra, to the capital of Volta Region.

Manya Krobo in the Eastern region, where Agormanya is located, covers a wide area including government administrative blocks, markets, residences, and various commercial centres. According to oral traditions and historical research, the current site of Agormanya was first settled by the Krobo, one of the Ga-Adangme clans who had migrated from what is now Nigeria in the beginning of the 14th century. Ga oral tradition says that people came by land and by sea from Benin and further east over time (Field, 1943 in Wilson, 1991).

Agormanya is populated largely by farmers and traders, and most of the inhabitants are in the lower socioeconomic class (Abrokwah et al., 2015). As with the nation, farming is the backbone of the local economy of the district. Trading is the minor occupation of the people and those involved are mostly petty traders due to inadequate capital to expand their activities (Abrokwah et al., 2015). Manya Krobo district, within which Agormanya is situated is densely populated, with a population density of about 277 inhabitants per square kilometre (Ghana Statistical Service, 2012). The following are some of the socioeconomic problems associated with the Lower Manya Krobo District: high illiteracy, low awareness of gender mainstreaming, high incidence of child labour and child delinquency (Abrokwah et al., 2015).

Most of the households are single room households within a larger compound house. Most households do not have kitchens, bathrooms, or toilets, and so share the several communal facilities. There are quite a number of primary and junior high schools (JHS) both public and

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private, and four senior high schools (SHS) in the Manya Krobo district, and these are a mix of private and public schools. There is one health facility located in Agormanya that caters to the town and surrounding areas, and also houses one of the busiest mortuaries in the region i.e. the Saint Martin De Porres Hospital (GSS, 2015). The main language is Ga-Adangme, spoken by about 75% of the populace. However, due to substantial influx of internal migrants because the town is a marketing centre, other ethnic representations are also present in the study area (Ghana Districts Report, 2016). These include the Akan and Ewe.

Juapong on the other hand is a town to the east of Agormanya, across the Volta Lake. Oral tradition and historical research places the origin of the Ewes on the Niger River (to the northeast), where they migrated southwest to their present location.

According to the Districts Report (2016), North Tongu district within which Juapong is located, has a population density of about 80.3 inhabitants per square kilometre. People in Juapong are farmers, fishermen and traders. Like Agormanya, most of the households are single room households within a larger compound house, who share communal facilities like bathrooms, and toilets. Of the six senior high schools (SHS) in the North Tongu district, one is situated in Juapong: Dorfor Senior High, a public school. Of the two major markets in the district, one is located in Juapong; this town enjoys wide patronage with traders coming from as far as Accra, Koforidua, Aflao and other places beyond the Region (Ghana Districts Report, 2016).

Inhabitants of Juapong are predominantly Ewe with a few minor representations of other ethnicities such as the Akan, and this has mainly been because of the migrant workers of the textiles factory.

These two towns in southeastern Ghana, Agormanya and Juapong, are similar on many dimensions. Both have similar population sizes; both are regional trading centres surrounded

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by farmland and rural villages; both are dominated by ethnic groups that practice patrilineal descent. Yet these two towns differ markedly in HIV prevalence.

Compared with other sub-Saharan African countries, Ghana as a whole has a low-HIV-prevalence rate. According to the most recent Demographic and Health Survey (DHS) data for Ghana (2014), 0.2 percent and 0.1 percent of sexually active young males 15-19 and 20-24 years, respectively tested HIV positive; and 14.1 percent of sexually active young males in the same age group reported experiencing STI symptoms, including abnormal discharge and genital sores and ulcers (Ghana Statistical Service et al., 2009).

However, the low national prevalence masks sharp local variations. Since the late 1980s or early 1990s, a severe localized HIV epidemic has affected the Krobo districts in Ghana‘s Eastern Region. Agormanya was for many years, considered as the epicentre of the HIV/AIDS pandemic in Ghana.

An antenatal clinic that serves as a sentinel surveillance site in Manya Krobo area has consistently recorded the highest levels of HIV prevalence among all 40 of Ghana‘s sentinel surveillance sites (Bigenheimer & Reed, 2014).

In 2012, HIV prevalence was 10.1 percent at this clinic compared with the national average of just 2.1 percent for all 40 sites (National AIDS/STI Control Programme 2013). The most recent HIV Sentinel Report (2016) indicates that the prevalence rate in Agormanya has reduced significantly over time, but still remains the highest in the entire country (GAC, 2016). At present, it stands at 4.2%, whereas the rate for Juapong remains at a consistent 0.1% (GAC, 2016). Documented accounts suggest that this local HIV epidemic was touched off by circular migration of young Krobo women to Abidjan, Côte d‘Ivoire, where many participated in commercial sex work (Awusabo-Asare, Anarfi, & Agyeman, 1993; Decosas, 1996; Sauvé et al., 2002).

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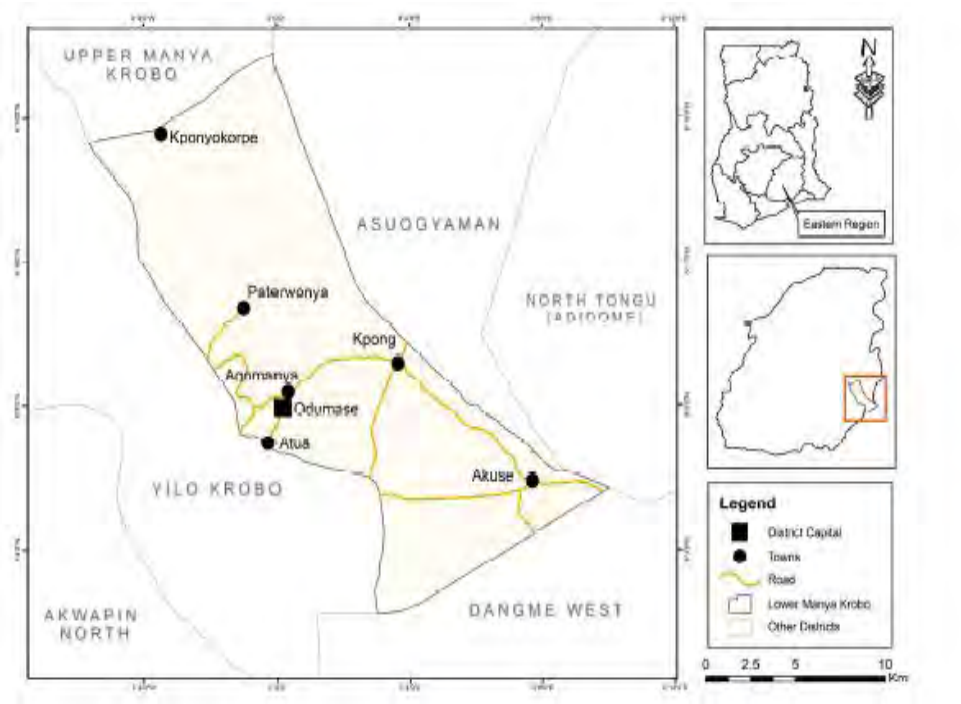
Both towns have rarely been the focus of adolescent sexual and reproductive health research, which generally has focused on rural areas and the largest cities. For the purposes of the Gendered Social Context of Adolescent HIV Risk Behaviour in Ghana (GSC survey), these towns provided a valuable opportunity to examine how circumstances shape emerging trajectories of sexual behaviour among adolescents (who are already at higher HIV risk relative to the rest of the country) within localized epidemiological settings.

Figure 3. 1 Agormanya, in Lower Manya Krobo District of the Eastern Region of Ghana



Source: Ghana Statistical Service, GIS District Analytical Report (2014)

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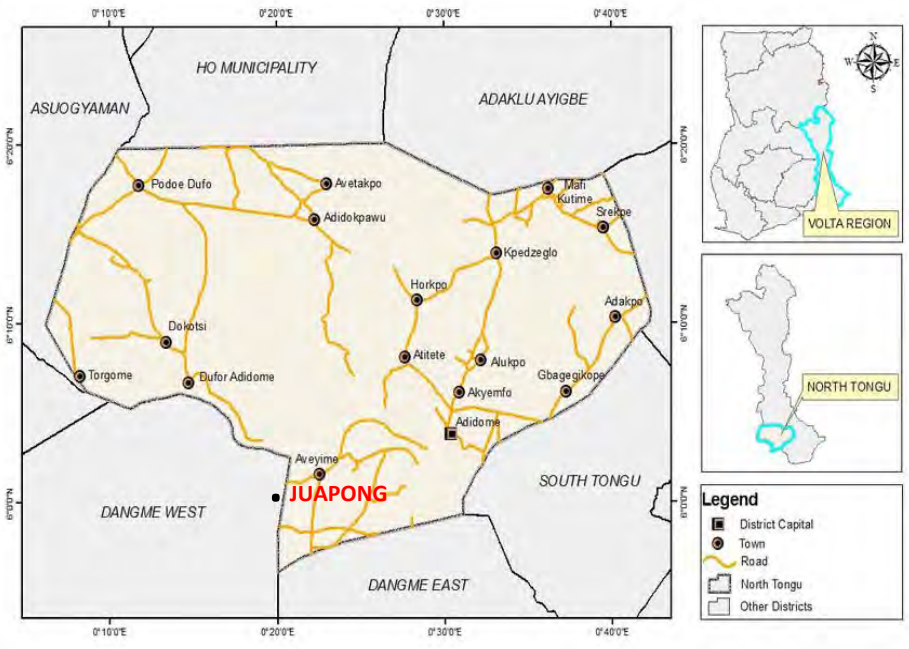
Figure 3. 2 Juapong, in North Tongu District of the Volta Region of Ghana



Source: Source: Ghana Statistical Service, GIS District Analytical Report (2014)

3.2.2 Sampling Design and Participant Selection

The Gendered Social Context of Adolescent HIV Risk Behaviour in Ghana (GSC) survey, is a US National Institutes of Health (NIH) funded study. The study used a mixed-methods investigation that integrated in-depth interviews (IDIs) with a longitudinal panel survey (LPS) of youth and their parents. The aim was to identify the ways in which gendered parenting practices, peer group norms, and other factors shape emerging patterns of sexual behaviour among youth in these communities. The LPS included a younger cohort (aged 13 to 14 years at Wave 1 and 16 to 17 years by Wave 3) and an older cohort (aged 18 to 19 years at Wave 1 and 21 to 22 years by Wave 3). Both females and males were included in the survey.

In July 2010, field teams enumerated all unmarried girls and boys aged 13–14 years (younger cohort) and 18–19 years (older cohort) in these two towns. A simple random sample was

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drawn from this list. A total of 1,275 girls and boys agreed to participate and were interviewed, for a response rate of 75 percent. Twenty months later, field teams conducted Wave 2 interviews with 1,206 of the original participants, with a follow-up rate of 95 percent. The third round of interviews followed up eighteen months later with 1,125 of the original sample, and a follow-up rate of 88 percent.

The qualitative research part of the study also encompassed two waves of in-depth interviews. These were data collected between waves 1 and 2, and waves 2 and 3 of the LPS, in 2013 and 2014 respectively.

Overall, the attrition rate was not high. Due to educational transitions where some respondents had started their senior high school education in different cities and towns across the country, as well as migration to other areas outside of the study sites for economic reasons, not all respondents in the base line survey were available for a follow-up. Other reasons such as change in contact address/ phone number also accounted for attrition. Despite the disadvantage of attrition, longitudinal datasets allow for the study of the chronological sequence of outcomes on a panel or cohort of respondents, unlike cross-sectional data (Caruana et al., 2015). The longitudinal GSC datasets will allow for the examination of the sexual abuse of boys and the immediate and long-term effects the experience has had on them, including implications for their future relationships.

3.3 Study Instruments

3.3.1 Structured Questionnaire (Survey)

The survey used two instruments, including a questionnaire for the youth and one for the parent or guardian. The household roster and personal background instruments were used to

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identify socio-demographic characteristics, such as age, sex, members of - and visitors to - respondent‘s household, relationship of household member to respondent, educational status, marital status, and ethnicity, for the respondent and all the members of respondent‘s household.

The questionnaires collected information on a wide range of issues about the lives of young people under the following sections: personal background, circumstances of the respondent‘s household, beliefs and opinions, relationships with family and friend, religion, future aspirations, social networks, sexual activity, knowledge about HIV and reproductive health, home or family environment, friend or peer influences, and gender role attitudes.

More specifically, this study‘s focus was on the sections of the questionnaire that delved into the experiences of young people regarding awareness of a range of sexual activities and relationships, including the timing of first sexual intercourse, characteristics of the first sexual encounter, as well as its context.

3.3.2 In-depth Interview Guide

Two waves of qualitative data were elicited using in-depth interviews. In-depth interview guides were designed. Interviewers were trained, after which the guide was piloted. An informal conversational approach was used. Most of the questions asked flowed from the immediate context, though the interviewers were directed by the interview guide to make sure that all relevant topics were covered. The interviewer could probe and ask questions deemed interesting to the research. The general interview guide approach is useful as it allows in-depth probing while permitting the interviewer to keep the interview within the parameters traced out by the aim of the study (Patton, 1987). The interview guide focused on first sexual

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encounter, and on issues of consent, nature of the relationship between victim and perpetrator, among others.

3.4 Field Work, Recruitment and Training

The field team was made up of the Principal Investigator (PI), field coordinators, supervisors (including the researcher) and interviewers. Interviewers were generally aged in their twenties and included both females and males. All had at least tertiary education and most had considerable interviewing experience from previous projects. Field supervisors endeavoured, insofar as it was practical, to match the sex of interviewers and respondents. The protocol was approved by Institutional Review Boards at the George Washington University and at the Noguchi Memorial Institute for Medical Research, University of Ghana.

3.5 Quantitative Data and Management

3.5.1 Description and Coding of Variables[1]

3.5.1.1 First Sexual Intercourse

The factors associated with young males' first sexual intercourse, investigated in this study, are first and foremost the context or nature of the intercourse (i.e. the dependent variable). The context was operationalized as sexual debut being a wanted experience, just happening, being pressured, or being forced. Additionally, age at first sexual intercourse, age difference

[1] After initial exploration of data, some variables were recoded to reduce bias in statistical estimates, owing to the sample size retained for analyses. Recoding of answer categories of variables into fewer groups was based on statistical justifications using post-hoc analysis to categorise variables into logical groups. Appendix A (Questionnaire) shows the initial variable categories before recoding.

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between the respondent and the sexual partner, and the relationship to respondent's first sexual partner, characterized first sexual intercourse of respondents.

3.5.2 Dependent Variable

3.5.2.1 Context of Sexual Debut: Consensual and Non-consensual First Sexual Intercourse

Young male respondents were initially asked, "Have you ever in your life had sexual intercourse? By sexual intercourse, I mean a man inserting his penis into a woman's vagina." All respondents who reported they had ever engaged in sexual intercourse were probed further to elicit information about their sexual encounters. Recognizing that sexual intercourse can occur not only through mutual understanding, but also through coercion or force, young people who had had sex were asked to indicate their willingness to have sex at their sexual debut. The question to elicit this information was: "The first time you had sex, would you say that you wanted to have sex, it just happened, you were pressured into doing it, or you were forced to do it?" To this question, these young males were required to think retrospectively and give answers that reflected that they: "wanted to; it just happened; was pressured; was forced". These answer categories were mutually exclusive.

A respondent answering that they wanted to have sex suggested a willingness or consent at the time of that first encounter. Answering the encounter just happened suggested sexual debut was unplanned, unexpected or spontaneous at that time. Answering that first sexual intercourse was as a result of pressure or force was a clear indication of unwillingness or non-consent. Pressure in this context encompasses the use of nonphysical tactics which could include but not limited to the use of trickery, guilt, false promises, continual arguments or verbal insistence, and threats of ending a relationship, or ignoring verbal requests by the

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victim to stop (without using force), deception, cultural expectations or economic circumstances.

Forced sexual debut involves the use of physical force, or even the use of alcohol and drugs, to impair the victim‘s physical ability to resist unwanted sex. Both pressured and forced sex in this study were identified as sexual coercion. It should be noted the study‘s operationalization of sexual coercion is consistent with that of several other researches (Kennair & Bendixen, 2012; Van Decraen et al., 2012; Farris et al., 2007; Jaya & Hindin, 2007; Ajuwon et al., 2001). The above operationalization has sometimes been used interchangeably with rape, sexual assault, verbal coercion, physical coercion, sexual abuse, and sexual violence in reference to both physical and nonphysical tactics for sexual coercion (Haile et al., 2013; Hindin et al., 2009; Tsopelas et al., 2012).

For bivariate and multivariate analyses, a dichotomous categorization of the dependent variable was computed. These categories being ―coerced‖ 1 (Pressured or forced) and ―not coerced‖ 0 (wanted to or just happened).The rationale for recoding the dependent into a binary variable stemmed from data limitations. The least proportions of respondents reported they had either been forced or pressured to have sex as compared to the proportion indicating their debut was consensual. Further, a post-hoc analysis was done to confirm the validity of coding pressured and forced debut into one category to define sexual coercion (results shown in chapter 4). Based on these data and statistical justifications, a binary dependent variable was generated to facilitate analyses.

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3.5.3 Independent Variables

3.5.3.1 Sexual Activity: First Sexual Intercourse

Within the scope of this study, sexual intercourse refers to a penile-vaginal penetrative sex between a male and a female. In the survey, 13 to 22 year-old young males were asked whether they had ever had sexual intercourse and those who had ever had sex were asked a series of questions about their experience. The question asked in the survey was ―Have you ever in your life had sexual intercourse?" To this question, respondents were required to answer ―Yes or No or Can't/Won't answer".

3.5.3.2 Timing of First Sexual Intercourse

In health psychology, age has implications on an individual's changing roles and relationships with family, friends, and other informal supports, productive roles, as well as on their cognitive abilities and adaptive capacity (Hooyman & Kiyak, 2011). Age has been posited to have implications for sexual consent within legal domains, as well as associations to the physical and mental well-being of adolescents who may not really understand the maturity concerning issues of sexual intercourse (Soomar, Flisher & Mathews, 2015). Respondents were asked ―How old were you the first time you ever had sex?" Answers to this question were indicated as discrete numbers, including a ―don't know" option for those who could not tell their age at first sex.

3.5.3.3 Age Difference between Victim and Perpetrator

Insights on sexual coercion can be gained from looking at issues of power dynamics between the victim and perpetrator. A salient indicator of power imbalance in the sexual abuse

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literature is age asymmetry between a victim and perpetrator (Luke, 2005). To draw this information, respondents were asked ―The first time you ever had sex, was your partner five or more years older than you?" Respondents had the option to respond ―Yes or No".

3.5.3.4 Relationship with First Sexual Partner

Another salient indicator of power imbalance in sexual relations is the nature of the relationship between partners. Where a partner may be in a position signifying authority may present as a likely risk factor to the experience of unwanted sexual experiences (Jejeebhoy, Shah & Thapa, 2005). The relationship between the respondent and their first sexual partner was explored with the question asking who their first sexual partner was. Respondents answered it was a girlfriend, a close friend, an acquaintance, a stranger, a teacher, a relative or some other person. Some of the answer categories such as teacher and relative had no cases. The proportion of respondents falling within the other remaining categories was very small. This would have implications on the regression analysis. To overcome this limitation, the categories were recoded into a dichotomy of stranger and non-stranger to respondent.

3.5.3.5 Alcohol use at Sexual Debut

Use of alcohol as a prelude to sex at such young ages of sexual initiation insinuates sexual coercion. In this regard, the use of alcohol could lower the victim's inhibitions or verbal resistance to sexual advances, and in some cases rendering them physically unable to resist. Therefore, to explore this, respondents were asked ―The first time you had sex with this partner (at sex debut), had you been drinking alcohol?" Respondents had the option to answer

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—Yes or No". From this question, we cannot infer if the victim was given alcohol by the perpetrator, some other person or personally acquired it.

3.5.3.6 Setting of Sexual Debut

Several reviews have suggested that a substantial proportion (about two-thirds) of child sexual abuse cases occur within the victim's own social circles or in settings known to the victim (Jejeebhoy, Shah & Thapa, 2005; Tsopelas et al, 2012). This could include the victim's own home, where he is assumed to be most protected, as well as outside of their home where he may be assumed to be at more risk or be at risk of exposure to strangers (Ullman, 2007). The setting or environment within which the adolescents experienced their first sexual debut was explored using answers to the question: —The first time you had sex with this partner, where did this happen?" The range of answers included respondent's house, partner's house, someone else's house, at a school/classroom, in the bush, drinking bar, or other place. These responses were recoded into respondent's house, partner's house, someone else's house, and other, for subsequent analyses.

3.5.3.7 Household Wealth

The wealth quintile is a poverty measure based on ownership of assets and the characteristics of the person's household. Household characteristics in many instances may be considered to be a better or more valid reflection of living standards than monetary income, since they capture long-term wealth and cover both monetary and non-monetary wealth (Rutstein & Johnston 2004).

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Asset listing (variable) in respondents' households included electricity, radio, mobile phone, refrigerator, television, flush toilet, working motorcycle/scooter, and working car or truck based on the DHS asset protocol (DHS Comparative Report, 2004). Principal Components Analysis (PCA) was run to determine the relative importance of each variable to create one summary measure of household wealth (Vyas & Kumaranayake, 2006). The PCA reduced the number of variables by clustering those which behaved in a similar manner into three components. The first principal component accounted for the largest possible variance across the specified variables i.e. 32.6% (see Appendix F). For the computation of the wealth index, the first principal component from the PCA was assumed to represent relative wealth. Based on this first principal component, each variable was given a factor weight. The factor weight represents the relative importance of each variable to the constitution of the first principal component. Wealth index scores were calculated based on these factor weights for each respondent in the survey dataset. The final step was splitting the sample into five categories (quintiles) based on the factor scores.

3.5.3.8 Household Composition and Living Arrangement

Adolescents are mostly dependent on parents or other significant adults. In Ghana there are various living arrangements for young people. These range from living with biological parents, grandparents, and other relations such as uncles, aunts or older siblings, to living with unrelated foster parents. The relationship of the adolescent to their caregiver in the household is one measure of living arrangements. All things being equal, adolescents living with parents or other relatives will have access to more resources than those living with nonrelatives. Living arrangement was determined using the household roster and the parent/guardian questionnaire, as the survey covered not only these young people but their

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guardians as well, who answered the parent/guardian questionnaire. For the analysis, this variable was recoded into a five category variable consisting of parent, step-parent, grandparent, other relative, and non-family.

3.5.3.9 Locality

In recent years, scholars have demonstrated that residential context shapes attitudes and behaviours (Greif and Dodoo, 2010) ranging from sexual behaviour to educational attainment and aspirations, family structure, etc. (Sverdlik, 2011). They have shown that the physical and symbolic characteristics of an individual's place of residence can be a risk factor for negative behavioural outcomes.

The community of residence of each respondent was assigned as Agormanya or Juapong, depending on where they reported to have stayed as usual residents.

3.5.3.10 Ethnicity

Social relationships have been posited to have a positive effect on well-being (McKenzie, 2002), and are reflected in networks such as the ethnic group, the clan and the extended family (Gyekye, 2006). Besides, different identities may reflect differences in normative constraints surrounding sexuality and adolescence; where some ethnicities' norms are restrictive or constraining, others have more liberal attitudes. Respondents were asked: "What ethnicity are you? Akan, Krobo, Ewe, Ga or other?" However, these classifications were recoded into Krobo/Dangbe, Ewe, (since these were the most dominant ethnicities) and other ethnic minorities for the analyses.

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3.5.3.11 Religion

Religious identities have been found to be linked to greater abilities to cope with stressful situations, greater self-esteem and overall happiness (Pargament et al., 1990), and may also lead one to reframe a difficult situation from a religious perspective (Foley 1988). Like ethnic affiliation, religious affiliation has implications on experience and reporting of sexual abuse. Where some religions may be open to discussion on sexuality, others may have more constraining norms on sexual behaviours and related experiences. Respondents were asked: ―What religion are you, Christian, Muslim, something else, or no religion?" With the majority of respondents being Christians, and only one respondent belonging to another religion besides Christianity and Islam, religion was coded as Christian, Muslim/Other.

3.5.3.12 Schooling Status

Respondents were of school-going ages, but not all were currently in school. Being in school has been posited by a few researchers to be protective against such negative experiences as sexual coercion (Andersson et al., 2012). A few others have also found being in school to be a risk factor for experiencing sexual coercion (Van Decraen et al., 2012; Yamanis et al., 2013). A schooling status variable was derived. Respondents were asked: ―Are you currently attending school?" Those who answered ―Yes" were coded as _in school' and the others were also coded as _out of school'.

3.5.3.13 Orphan Status

Orphanhood status in some studies on girls' has been found to be a risk factor of sexual coercion for several reasons including social and economic vulnerability (Moore et al., 2007)

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as well as lack of parental monitoring compared to non-orphaned adolescents (Kumi-Kyereme, Awusabo-Asare, Biddlecom & Tanle, 2007). Respondents were asked whether their biological mothers and fathers were living or not. Those who responded that both parents were alive were coded as _both parents alive‘. Those who responded that either one parent was alive and the other dead were coded as _one parent alive‘. The third category consisted of those who reported that both parents were dead.

3.5.3.14 Parent/Caregiver Education

Parents/caregivers of the surveyed adolescents were also interviewed. Like the adolescents, parents were asked about their socioeconomic and demographic characteristics. This included educational status. Parents were asked whether they had ever attended school, and the highest level of education they had attained. A dichotomous variable for parent/caregiver education was derived; _educated‘ or _not educated‘.

3.5.3.15 Parent/Caregiver Marital Status

Studies have shown how family stability can either be a protective or a risk factor for adolescents‘ development or transition into adulthood. Marital status is one such proxy indicator for family stability. Parents of the surveyed youth were asked what their marital status was, to which they answered as married, co-habiting, widowed, divorced or separated. These answers were recoded into the dichotomy of _in union‘ and _not in union‘.

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3.6 Data Analyses

3.6.1 Quantitative Data Analysis

The methods of analyses included frequency distributions, measures of central tendency, bivariate tests of associations, and multivariate regression.

3.6.1.1 Univariate Analysis

The background characteristics were described using frequency distributions. This was shown graphically with bar and pie charts, as well as tables. The mean, median and standard deviation, were used as summary measures for discrete and/or continuous variables.

3.6.1.2 Bivariate Analysis

After describing respondents‘ characteristics, bivariate tests of associations between the dependent variable and the other variables were carried out. The bivariate analyses were based on Chi Square tests, correlations and post-hoc analysis which are presented in tables below. The Chi Square test was performed on the nominal or categorical socioeconomic and demographic characteristics and allowed the examination of the association between these variables and the context of sexual debut. This was to establish whether membership in groups have occurred on the basis of chance. Further to this, the Pearson Chi square test was carried out to test for independence between the groups at significance levels of 0.01, 0.05 and 0.10.

For associations between the continuous variables such as age at sexual debut and current age of respondent, spearman‘s rho and correlation coefficients were used.

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To test for differences across the categories of consensual and non-consensual sex indicators, which is _sex at debut was wanted/consensual versus _forced and pressured sex debut' with respect to hypothesised vulnerability factors (individual, interpersonal and community level factors) of sexual coercion, post-hoc multiple comparisons analysis was employed.

3.6.1.3 Multivariate Analysis[2]

Logistic regression is useful for situations in which subjects are classified based on the values of a set of predictor variables (Hoffman, 2010). Logistic regression was carried out to evaluate the influence of the independent variables on the context of sexual debut.

Owing to the categorical nature of the dependent variable, the study employed a binary logistic regression model. The binary logistic regression models were interpreted using regression parameters, where β is the slope of the regression line or the coefficient corresponding to the predictor (x). It indicates the change in y (predicted) per unit change in x (predictor) (Agresti & Finlay, 2009).

Exponent β is the estimated odds ratio for respondents who are a unit apart on x when all other predictors are held constant, usually at their mean values. Therefore, a unit difference in x is the difference between membership in a category of x and membership in the reference category of x. (Agresti & Finlay, 2009).

[2] To satisfy assumptions of logistic regression, variables were tested for collinearity. The ethnicity variable was excluded from the model. This was mainly because of a collinear relationship with locality of residence. A cross-tabulation of these two variables showed they were not significantly different from each other, thus in meeting the right regression parameters, one had to be removed from the model. Owing to the relative impact of the various levels of the ecological framework, locality was retained in the model, while using ethnicity of the local contexts to discuss results pertaining to locality of residence.

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3.7 Qualitative Data and Management

In-depth interviews were conducted in the language preferred by the respondents. Because of the private and sensitive nature of the topic, the respondents were paired with same-sex trained and qualified interviewers. These in-depth narratives lasted between 1 and 1.5 hours and were designed to elicit stories, which were beneficial for probing personal experiences. According to Bauer & Gaskell (2000), a narrative approach also avoids asking participants to summarize their experiences into close-ended categories, which can oversimplify the range of emotions they may have about their sexual experiences, particularly coercive experiences.

Interviews began with accounts of early knowledge of sex and sexual experimentation, and explored the range of sexual relationships and experiences through to the present. While participants were not asked in particular for experiences of sexual coercion, they came up naturally as a result of asking them about their previous sexual relationships and particularly sexual debut experiences. This may have minimized respondent bias around sexual coercion. When participants provided information about their sexual experiences, the interviewers asked them to elaborate on the circumstance in which such experiences occurred.

Of the 55 in-depth interviews of males, 18 of these identified as narratives of sexual coercion at first sexual intercourse. A thematic analysis was conducted to extract key themes, allowing for a detailed account of the data (Attride-Stirling, 2001). Data were then analysed for content using Atlas.ti qualitative data management software. Text segments were assigned basic codes, and these codes were then organised into major trends and cross-cutting themes.

Thematic Analysis: Drawing from Attride-Stirling‘s (2001) conceptualisation, a thematic analysis systemises the extraction of text from a larger textual data. These extractions are grouped at three main levels to summarize abstract principles. The principles are then presented in web-like maps that depict salient themes at each of the levels, and illustrate the

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relationship between them. Thematic network analysis is widely used in qualitative research and analysis as a technique for breaking up text and finding rationalisations and significant meanings within textual data. The three levels of themes are:

Basic themes: This is the lowest order theme. They are simples premises characteristic of the data and make little sense beyond its immediate meaning.

Organising theme: In order for the basic themes to make more meaning, they have to be clustered together on similar issues. Organising themes are middle-order themes that summarise the assumptions of a group of basic themes. They are more revealing of what is going on in the texts.

Global themes: A group of organising themes grouped together constitute a global theme. These represent the main assumptions underlying a broader meaning that is especially significant in the text as a whole. As such global themes are the macro-level themes that tell us what the texts as a whole are about within the context of a given analysis.

Coding was regularly discussed among the team of researchers to achieve inter-rater reliability, for the sake of conceptual alignment on existing and emerging codes in the data (Attride-Stirling, 2001; Cresswell, 2014). An overall interpretation of the findings of the study was formulated in response to the study question of interest on sexual coercion. Illustrative quotes relevant to each theme were extracted from the raw data: these reflect sexual debut experiences that emerged from similarities and differences in study participants' narratives. All illustrative quotes include demographic details of the participants (see Appendix I); names used in the text were pseudonyms.

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3.7.1 Epistemological Foundation: The Inductive Approach

Inductive analysis refers to an approach that primarily uses detailed readings of raw data to derive concepts, themes, or a model through interpretations made from the raw data by an evaluator or researcher (Strauss & Corbin, 1998). In this study, the understanding of inductive analysis or approach is consistent with Strauss and Corbin's (1998, p.12) description: "The researcher begins with an area of study and allows the theory to emerge from the data".

The primary purpose of the inductive approach is to allow research findings to emerge from the frequent, dominant, or significant themes inherent in raw data, without the restraints imposed by structured methodologies. This was the case in the collection and findings of the qualitative data obtained from the in-depth interviews with youth in south eastern Ghana, in the larger scheme of the GSC study, under which this study was subsumed. Initially, the project did not set out to investigate this phenomenon of sexual coercion among young males, but the generation of this very topic being studied was inspired by detailed readings of raw data in the initial phase of data collection to derive concepts and, subsequently, a model in a bid to investigate the phenomenon of sexual coercion at young males' sexual initiation.

3.8 Study Limitations

This study is not without limitations. First, the study relied on retrospective self-report measures of sexual behaviour provided by the victims. The results are therefore dependent on the accuracy of memories and participants' willingness to disclose sensitive information in a truthful manner. Unfortunately, few alternatives to retrospective self-report measures are available, except in rare instances in which police documentation or other records can be used

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to confirm sexual misconduct. However, due to the underreporting of these types of offenses, even these methods may not provide a representative picture of sexual coercion in general. Thus, self-report measures continue to be the most effective means of assessment available to researchers in this area.

There is potential for misclassification of some respondents who may view their first sexual experience in a positive light due to issues of protecting their image of masculinity, even though that first encounter was coerced.

The study also recognizes that some important information that could potentially modify non-consensual sexual experiences in the survey may be missing because the main objective of the parent study was to identify the ways in which gendered parenting practices, peer group norms, and other factors shape emerging patterns of sexual behaviour among youth in two communities in southeastern Ghana.

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CHAPTER FOUR

Description of Background Characteristics of Survey Respondents

4.0 Introduction

This chapter briefly describes selected demographic and socioeconomic characteristics of survey respondents. The chapter addresses the second objective of this study, which is to determine the level of sexual coercion of young males by describing the frequency of forced and pressured sexual debut.

4.1 Descriptive Analysis of the Data

The data set was corrected for missing observations and outliers and hence a total of 215 observations were retained for the analysis. The purpose of this section is to summarize data using tables and graphs that describe the variables by showing the number of times various outcomes occurred. Quantitative variables are also described numerically using measures of central tendency, that is, the centre and variability of the data.

Figures illustrate young males‘ trajectory of first sex and prevalence of sexual coercion, and tables show distributions of some selected demographic and socioeconomic characteristics of survey respondents.

4.1.1 Transition to First Sexual Intercourse

Figure 4.1 shows that the majority of boys in the study areas are initiated into sexual activity at the younger adolescent ages. Of the 215 males aged 13 to 24, across the three waves of

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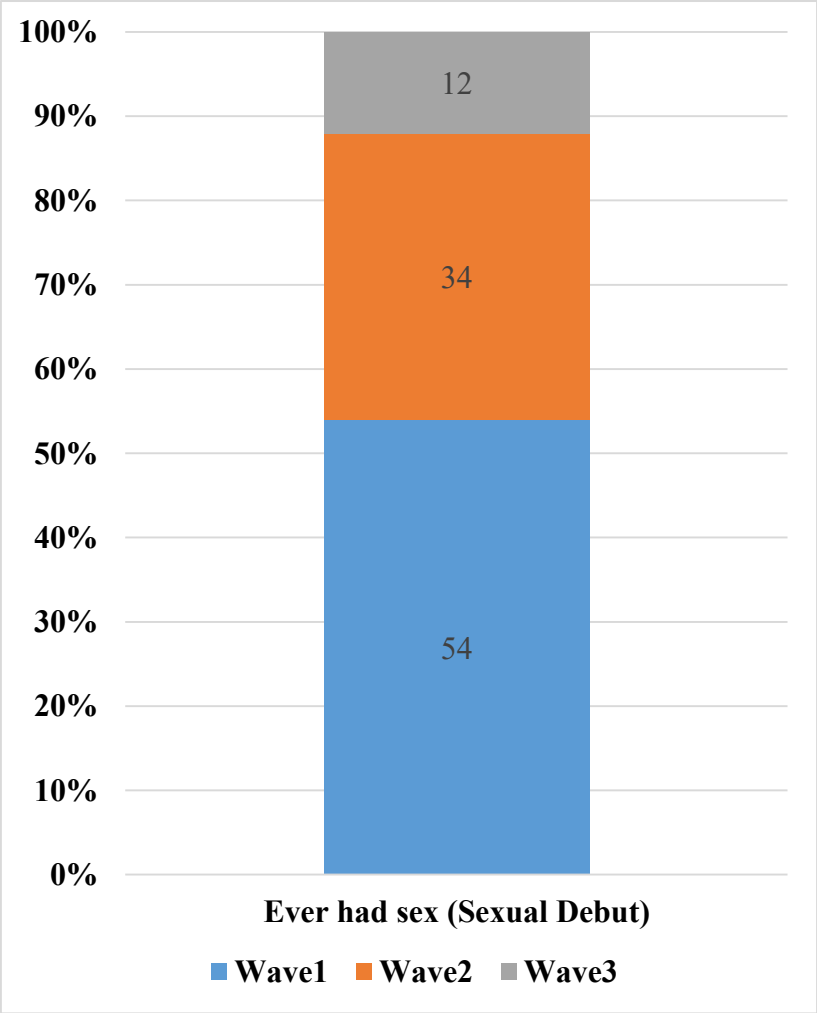
survey data, more than a half had had sex by the first wave of data collection. An additional third (34%) was initiated by the second wave of data collection, about a year apart from the first. The rest of the boys (12% and least proportion) were initiated into sex by the third wave of data collection. This result highlights that these boys were initiated into sex at much younger ages, hence early sexual debut, which in itself is a risky sexual behaviour which portends adverse health and developmental outcomes.

Figure 4. 1 Trajectory of First Sexual Intercourse



Source: Computed from GSC survey data, 2010, 2012, 2014

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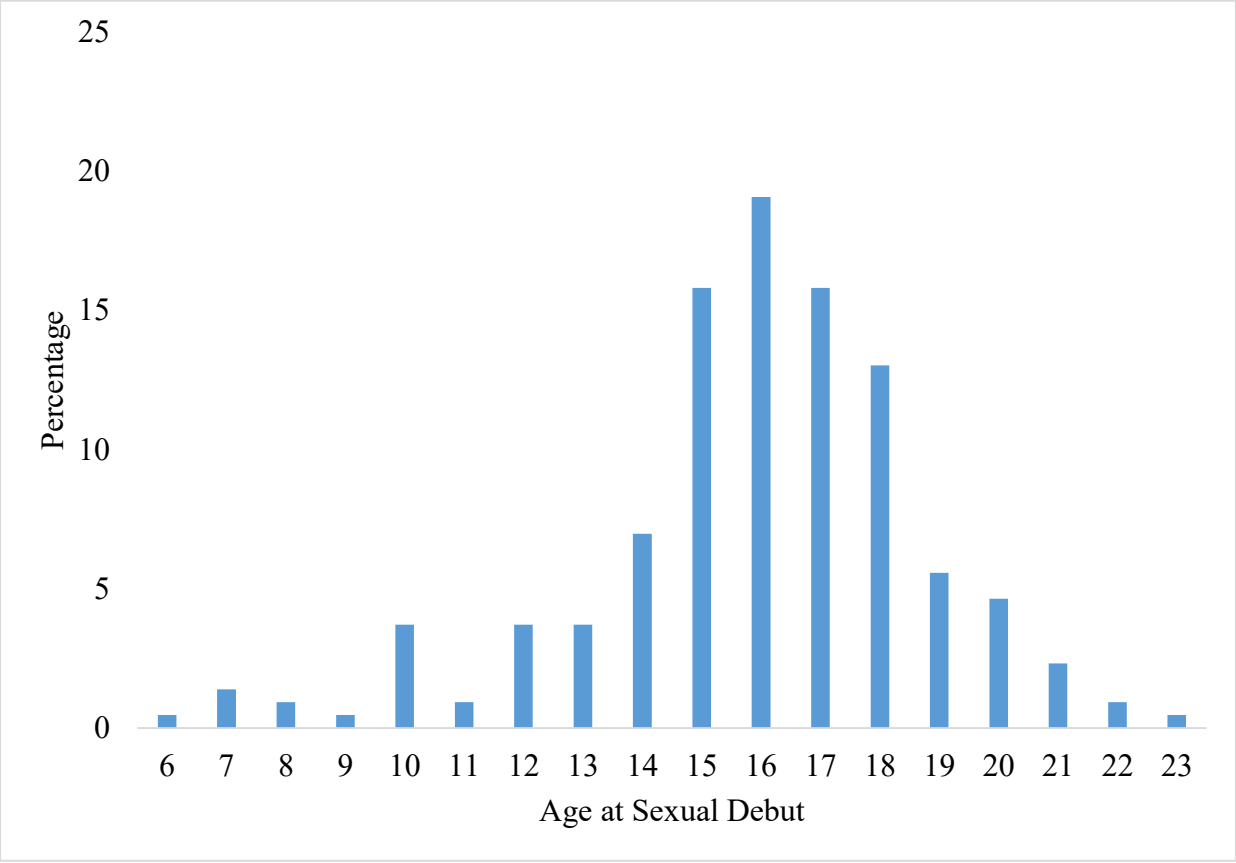
4.1.2 Age Trajectory at First Sexual Intercourse

The legal age for sexual intercourse in Ghana is 16 years for both males and females, like most other countries in the sub-region (Letamo, 2015). Early age at sexual debut can be operationalized here as having sexual intercourse before the legal age of 16 years. Consistent with the literature on age at sexual debut, we find that adolescents in the study area initiated sex at very young ages (Heise et al., 1995; Tsopelas et al., 2012). The earliest age reported was 6 years old (Fig. 4.2).

Figure 4. 2 Transition to First Sexual Intercourse by Age



Source: Computed from GSC survey data, 2010-2014

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4.1.3 Measures of Central Tendency

By age 16, more than half of the adolescent boys had had sexual intercourse. The timing of first sex is a salient indicator of the onset of exposure to risk of HIV/AIDS and other STIs (Kotchick, Shaffer, Forehand, & Miller, 2001). Age has been found to have a strong association to adolescents' knowledge of risks and means of protection, as well as to their ability to seek and obtain information and relevant services. In this sense, older adolescents are likely to be better equipped than younger ones to deal with problems of sexuality when first intercourse occurs (Letamo, 2015). But this assertion is likely in the case of consensual sex for older adolescents; on the contrary, younger adolescents may likely be at high risk of being forced or pressured into having sex, against their will.

Table 4. 1 Measures of Central Tendency for Age at First Sexual Intercourse and Current Age

Background Characteristic	Number	Minimum	Maximum	Mean	Median	Std. Deviation
Age of Respondent	215	13	24.00	18.80	19.00	1.92
Age at First Sex	215	6.00	23.00	15.06	16.00	2.86

Source: Computed from GSC survey data, 2010, 2012, 2014

4.1.4 Prevalence of Sexual Coercion

Acknowledging that not all sexual experiences are wanted or consensual, exploring the context of first sexual intercourse is relevant. This distinction has been absent in many studies on sexual activity on males in the sub-region. Of all the 215 adolescents who had ever had sex or were sexually active, a third (33.5%) reported they were willing participants at their first sexual intercourse. The highest proportion, being a little over one third of the boys,

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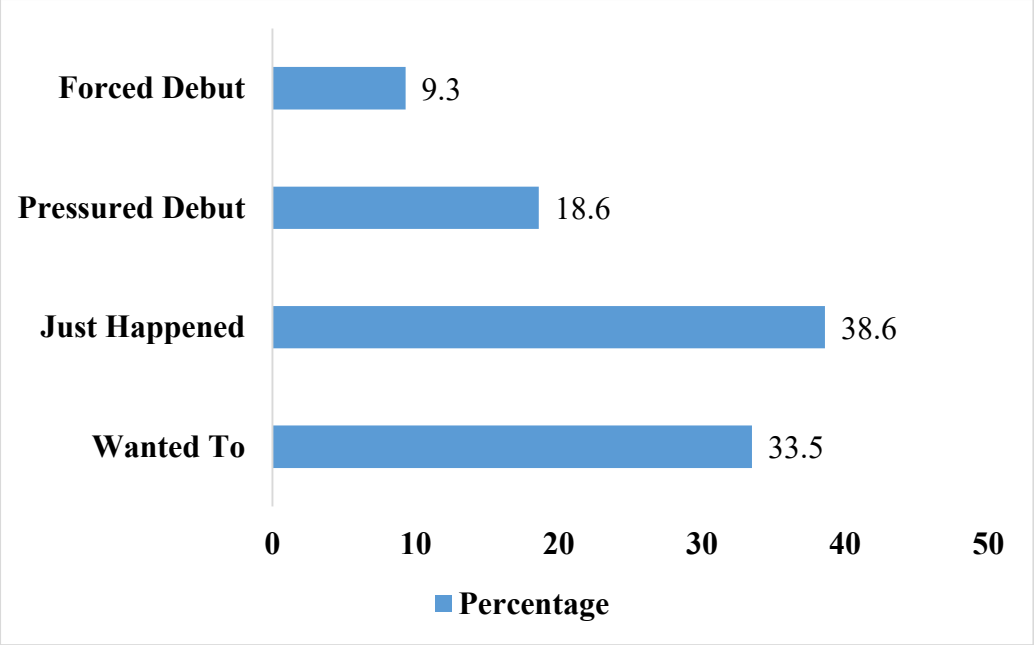
reported that the experience just happened. Overall, the prevalence of sexual coercion at sexual debut was reported to be about three in ten of sexually experienced young male respondents. Coerced sex accounted for the remaining 27.9%, where 18.6% reported being pressured and 9.3% reported being forced into their first sexual intercourse.

Figure 4. 3 Prevalence of Sexual Coercion at First Sexual Intercourse



Source: Computed from GSC survey data, 2010-2014

As mentioned earlier in prevalence studies on boys, research findings in the sub-region have found sexual coercion to range between 4 to 24 percent (Becker et al., 2001; Erulkar, 2004; Haile et al., 2013; Kazaura & Masatu, 2009). This broad range has been due to the different measures and methodologies used by various studies to assess sexual coercion. Indeed, most studies comparing males to females have always found higher prevalence rates for females (Agardh et al., 2011; Hines, 2007; Varga, 2003).

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Here, we find that the prevalence of 27% is higher compared to studies using non-institutional data. As mentioned earlier, variations may likely be as a result of different operationalization of sexual coercion in these other studies. Another thing worth mentioning is the inability of most studies on sexual coercion to delineate between the different operationalization and contexts of sexual coercion. For instance, Varga's (2001) review on sexual and reproductive health of young males, cites that most studies did not differentiate between forced and pressured coercion.

Also, most studies one-dimensional measure of coercion could likely result in the smaller prevalence rates. That is to say, operational definitions of coercion used in most studies allowed the measure of either forced sex or pressured sex, but very rarely both. Then again, the higher prevalence is not surprising with reference to the study areas which includes a high HIV endemic area. Studies especially in South African localities where HIV prevalence is very high, and comparable to one of this study's areas, also yielded high prevalence of sexual coercion compared to all other areas, or areas with a lower HIV prevalence rate (Kharsany & Karim, 2016; Soomar et al., 2009; Stern & Cooper, 2014; Woog & Kågesten, 2017).

4.1.5 Emotional State after First Sexual Intercourse

Although it might appear as if the majority of the boys did not express adverse experience at first sexual intercourse, the highest proportion indicated _it just happened', suggesting no prior planning. In order to get at the nuances of this response, a qualitative look at this answer in line with subsequent questions on how respondent felt after the experience, yielded the following results in Figure 4.4. This was done to substantiate what is known in the extant literature on difficulty of young males expressing their actual experience in surveys, thus leading to under-reporting of such sensitive issues.

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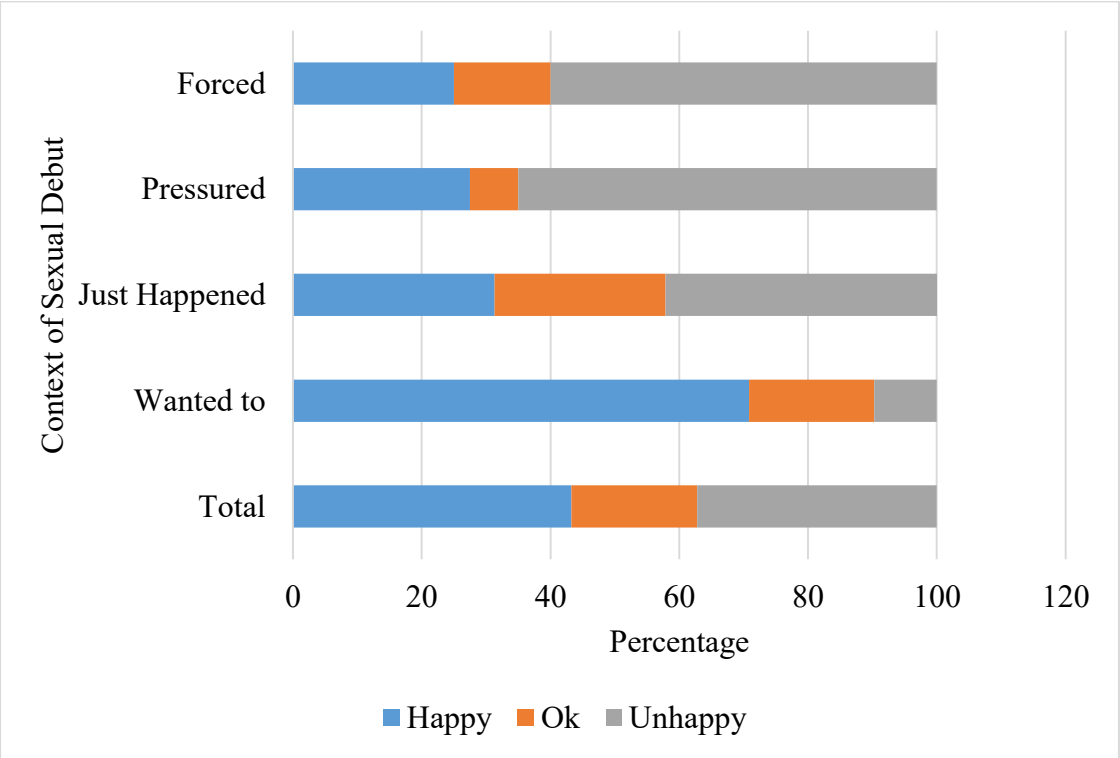
Figure 4. 4 Context of Sexual Debut with reference to Feelings Subsequent to Experience



Source: Computed from GSC survey data, 2010- 2014

The results in Figure 4.4 above lend credence to the issue of misreporting on such sensitive matters such as coercion at sexual debut. This may especially be so considering how in the African setting boys would likely find it more difficult to report their experiences due to traditional expectations of a macho personality which place constraints on the reporting of abuse for boys (Barker & Ricardo, 2010; Bhatasara et al., 2013; Easton, 2011; Stern et al., 2015).

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4.2 Characteristics of Survey Youth: Individual Level

All respondents in this study were unmarried males in the adolescent ages of 13 to 24, according to WHO classifications of adolescence (Dehne & Riedner, 2001). All respondents had ever had sexual intercourse. More than half of the respondents were Krobo and Dangbe, about a third were Ewes, with the remaining 13% being Akan and other ethnic minorities in the study area.

With regard to education, all the respondents had achieved at least primary school education or higher. None of these adolescent males had any tertiary education yet. The highest proportion of boys had attained at least middle or junior high school education (45.58%), whilst the least proportion (23.72%) had attained senior high school education. Drop-out rate of approximately 37% was quite high, where close to a third had dropped out of school. The remaining two thirds were currently in school or had completed a level of educational attainment. This included boys who had finished high school waiting to continue to the next level or had a certificate for completing a phase in the educational ladder, i.e. high school.

Christianity was almost near universal, with only 6% of respondents being non-Christians; being affiliated to Islam or without any religion. There were however no reports of traditionalists or people of any western religious affiliation. Approximately three-quarters (74.88%) of the respondents‘ parents were alive; the remaining quarter of respondents were orphans and had lost either a parent or both; the least proportion (4.19%) having lost both parents.

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Table 4. 2 Distribution of Respondents' Background Characteristics

Background Characteristic	Category	Frequency (N)	Percent (%)
Individual Level			
Age	Early Adolescence (13-14 years)	10	4.65
	Late Adolescence (15-17 years)	19	8.84
	Young Adult (18-24)	186	86.51
Religion	Christian	202	93.95
	Non-Christian	13	6.05
Ethnicity	Krobo/Dangbe	117	54.42
	Ewe	70	32.56
	Other Minority	28	13.02
Schooling Status	In School	136	63.26
	School Dropout	79	36.74
Highest Level of Education	Primary	66	30.70
	Middle/Junior High	98	45.58
	Senior High	51	23.72
Orphan Status	Both Parents Alive	161	74.88
	One Parent Alive	45	20.93
	Both Parents Dead	9	4.19

Source: Computed from GSC survey data, 2010- 2014

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4.3 Parent / Caregiver Characteristics: Interpersonal Level

Youth are generally dependent on parents and other significant adults in their lives. In Ghana there are various living arrangements for the youth. These range from living with biological parents, grandparents and other relations such as uncles, aunts or older siblings, to living with unrelated members of the household such as house helps.

All of the sampled male youth lived with an adult figure. Of these adolescents, fewer than half lived with both biological parents (about 47%) and another 8.9% of males lived with a step-parent (Table 4.4). About one out of three males were fostered; 11.63% lived as grandchildren and about 23.3% lived with other relatives. Only 9.3% were otherwise unrelated to their guardian. These observations point to the general pattern among various ethnic groups in the country whereby young people live not only with their parents, but are fostered by others.

Results shown in Table 4.3 show that the majority (54%) of parents or guardians were not married or not in union. The majority (70.7%) of parents were also educated and had attained at least primary school education.

Table 4. 3 Distribution of Respondents' Parent/Caregiver's Characteristics

Background Characteristic	Category	Frequency (N)	Percent (%)
Interpersonal Level			
Relationship To Caregiver	Biological Parent	101	46.98
	Step-Parent	19	8.84
	Grandparent	25	11.63
	Other Relative	50	23.25
	Non-Family	20	9.30
Marital Status of Caregiver	In Union	98	45.58
	Not In Union	117	54.42
Educational Status of Caregiver	Educated	152	70.70
	Not Educated	63	29.30

Source: Computed from GSC survey data, 2010- 2014

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4.4 Household/Community Factors surrounding Sexual Debut

Almost three-fifths of respondents were from Agormanya, the remaining two-fifths from Juapong. The highest proportion of respondents were poor; falling within the poorest to poorer wealth quintiles, and the least proportion of 16.7% were within the richest wealth quintile (Table 4.4). The wealth quintile distribution reflects that reported for the Eastern and Volta regions in the recent Ghana Demographic and Health Survey (DHS) report (2014), where the highest proportion of residents were poor.

Table 4. 4 Distribution of Household/Community Characteristics

Background Characteristic	Category	Frequency (N)	Percent (%)
Household/Community Factors			
Locality	Agormanya	128	59.53
	Juapong	87	40.47
Wealth Status	Poorest	55	25.58
	Poorer	38	17.67
	Middle	39	20.47
	Richer	43	20.00
	Richest	35	16.28

Source: Computed from GSC survey data, 2010- 2014

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4.5 Relational Factors surrounding Sexual Debut

Most studies (Erulkar, 2004; Harrison, Cleland, Gouws & Frohlich, 2005; Moore et al., 2007) looking at the characteristics of the partners at first sexual intercourse, as well as perpetrators of child sexual abuse, have mostly reported that they were people known to the victim. Results in Table 4.5 show that the majority of partners at sexual debut were known by the young male.

About one in five respondents reported having had sexual intercourse with an older female. The highest proportion of first sexual intercourse occurred in the victim's house, and this may be suggestive adolescents being most vulnerable even in their own homes, which would otherwise have indicated protection from abuse. Very few of these young males reported that they had consumed alcohol at the time of their first sexual intercourse.

Table 4. 5 Distribution of Relational factors of Sexual Debut

Background Characteristic	Category	Frequency (N)	Percent (%)
Relational Factors			
Relationship To Partner	Non-Stranger	172	80.00
	Stranger	43	20.00
Age-Based Power	Partner 5 years or more younger	177	82.33
	Partner 5 years or more older	38	17.67
Setting of Sex Debut	Respondent's House	90	41.86
	Partner's House	26	12.09
	Someone's House	45	20.93
	Other Place	54	25.12
Alcohol Use At Sex Debut	No	183	85.12
	Yes	32	14.88

Source: Computed from GSC survey data, 2010- 2014

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CHAPTER FIVE

Examination of Associations between Socio-Ecological Factors and Sexual Coercion

5.0 Introduction

This chapter investigates the bivariate associations between socio-demographic and other background characteristics, and coercion of young males at sexual debut.

5.1 Examination of the Relationship between Independent Variables and the Context of Sexual Debut

In previous chapters, the socio-demographic characteristics of subjects that are posited as vulnerability or risk factors of sexual coercion, were described. In this chapter, the significant associations, if any, that exist between these background characteristics of respondents, and the context or circumstance within which they experienced their first sexual intercourse, is examined using bivariate distributions and chi-square tests of associations.

5.2 Post-Hoc Analyses: Multiple Comparisons within the Context of Sexual Debut

This section justifies the operationalization of forced and pressured debut as sexual coercion. To answer the question of whether there are differences across the categories of consensual and non-consensual sex indicators, which is _sex at debut was wanted/consensual versus _forced and pressured sex debut‘ with respect to hypothesised vulnerability factors

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(individual, interpersonal and community level factors) of sexual coercion, post-hoc multiple comparisons analysis was employed.

From Table 5.1, young male respondents who reported they wanted to have sex at their debut were found to be significantly different from all other groups ($p<0.05$), with regards to their feelings about their actions. Conceptually, forced and pressured sexual encounters have been said to be on a continuum of sexual coercion (DeGue & DiLillo, 2005). Empirically, this was confirmed, and depicted in Table 5.1. There was no significant difference between forced and pressured sex debut, when these victims of coercion expressed how they had felt. There was only a marginal mean difference of 0.125 and a p-value of almost 1.00.

Interestingly, those respondents who said their sexual debut just happened were not significantly different from those who said they had been forced or pressured. This similarity to coerced instances, could suggest the passivity in willingness for those who said for them, their first sex encounter just happened. It can be inferred that, whereas those who stated emphatically to have wanted sex were consensual and willing participants, those who said sex just happened were consensual but not as willing.

Besides, two people may go through more similar ordeals, yet process their experiences differently and this could also have different manifestations subsequently. On a continuum, such respondents may not have been forced or pressured, but neither were they ready or looking forward to that first experience. Thus, feelings after the act may likely be more negative than positive. But then again, this was with respect to an outcome subsequent to their experience.

Elsewhere (Appendix H), it is shown how this group of boys who said sex just happened were similar to those who said they had wanted their first sexual intercourse with respect to an exposure variable – i.e. age at sexual debut. It was those who debuted at older ages who

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reported a willingness or consent (for both wanted and just happened categories). In this regard also, it was observed that forced and pressured sexual debut remained consistent in their similarity, where those who reported coerced sex debuted at the younger ages.

It is also not surprising that boys who said for them, sex just happened mostly reported negative feelings just like those who were coerced. The issue of male victims of sexual coercion has always been shrouded in male rape myths stemming from traditional view of masculinity. This group of young males who reported that their first sexual intercourse just happened also corroborate findings from several reviews stating that males, before their assault may have never considered that they could become victims of sexual assault, and are likely not to deem such experience as abuse.

As Garnets, Herek, and Levy (1990) put it _Bœcause most men have internalized the societal belief that the sexual assault of men is beyond the realm of possibility . . . men may have trouble accepting their rape experience as real, not only because it happened to them, but that it happened at all‘ (Garnets et al., 1990).

Struckman-Johnson & Struckman-Johnson‘s (1992) work examining male rape myths suggests these myths are worse, and subscribed to strongly in female-perpetrated male rape. These circumstances may impinge on male victims‘ coping, where they possibly might, find it difficult to conceptualise their abuse as a sexual assault and to come to terms with its impacts. Therefore, this peculiar group of boys, likely reported sex just happened as opposed to reporting they had actually been pressured or even forced sexually, due these circumstances discussed.

Taking cognisance of the fact that there were few cases or the least proportion of cases in the forced sex category (9.3%), which could potentially confound subsequent multivariate regression analysis, these findings also justified dichotomising the initial four category

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variable – context of sexual debut – into ‗non-coerced sexual debut' (comprised of wanted and just happened categories) and ‗coerced sexual debut' (comprised of pressured and forced categories). This dichotomy was therefore used for all other analyses.

Table 5. 1 Multiple Comparisons – Tukey's HSD (Honestly Significant Difference) Test

Pairwise Comparison (i vs. j)	Group Means (i, j)		Difference (i-j)	HSD-Test	95% Confidence Interval	
Wanted vs. Just happened	1.986	3.159	1.173	6.0465*	0.661	1.684
Wanted vs. Pressured	1.986	3.525	1.539	7.9361*	0.915	2.163
Wanted vs. Forced	1.986	3.650	1.664	8.5807*	0.865	2.463
Just happened vs. Pressured	3.159	3.525	0.367	1.890	-0.242	0 .975
Just happened vs. Forced	3.159	3.650	0.492	2.534	-0.296	1.279
Pressured vs. Forced	3.525	3.650	0.125	0.645	-0.739	0.989

Tukey's Honestly Significant Difference (HSD) Test, *The mean difference is significant at the 0.05 level.

5.3 Sexual Debut by Socioeconomic, Demographic and other Background Characteristics

As shown in Table 5.2, the Chi Square tests show a significant association between indicators for the context of sexual debut and some of the selected respondent, parent/caregiver and community characteristics. These are schooling status, ethnicity, age at sexual debut, locality of residence, wealth status, relationship to person who initiated respondent into first sexual intercourse, age differential between respondent and his first sexual partner, relationship to that person, setting of sexual debut, and alcohol use by respondent at first sexual intercourse.

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Exceptions in this regard were respondent‘s religion, highest level of educational attainment, and all interpersonal parent/caregiver characteristics; i.e. parent/caregiver‘s marital status, educational background, and relationship to respondent, for which no significant associations with adolescent‘s context of sexual debut was observed.

Two out of the four individual or personal level factors of vulnerability was found to have significant association with young males‘ experience of sexual coercion. The Chi square test at the 95% confidence level showed that there was a significant association between ethnicity and sexual coercion. Results in Table 5.2 show that for all categories of ethnicity, the majority did not experience sexual coercion at their debut. However, we find that the proportion of Ewes who had experienced coercion was about twice that of Krobo/Dangbes who experienced sexual coercion, having been pressured or forced into sexual intercourse.

There was evidence of significant residential disparities in boys‘ experience of sexual coercion in the two localities of residence. It is true, and the empirical evidence available has shown that sexual coercion is a risk factor for HIV and other STIs. Sexual coercion is prevalent in both high and low HIV prevalence areas. Results in Table 5.2 reveal that for both Agormanya and Juapong, the majority did not experience sexual coercion at their debut. However, we find that the proportion of young males in Juapong who had experienced coercion was about twice that of boys in Agormanya. This result quite mirrors ethnic disparities in sexual coercion among the respondents, since Agormanya is predominantly Krobo/Dangbe, whereas Juapong is predominantly Ewe.

Within categories of schooling status, the majority of respondents both in school as well as out of school, did not experience coercion at their sexual debut. This significant observation was quite unexpected since the status of being in school is suggestive of decreasing the adolescent‘s risk of being sexually coerced. Active schooling status has been found by Sano,

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Sedziafa and Tenkorang (2016) and Mmari et al. (2013) to mitigate vulnerability to sexual coercion.

A spearman correlation was computed between the age of respondent and sexual coercion (Table 5.3). A negative association was found at $p<0.05$. We can infer that older adolescents were likely to report their experiences of sexual coercion than younger ones. Though this may indicate more openness or willingness to report any sexual experience out of maturity, it does not downplay the negative consequence an adverse sexual experience may already have had on the respondent, especially when the experience was likely several years ago. In other words, the harm may have already been done. This is evident, looking at the test of association between age of respondent and the age at their sexual debut (Table 5.3). The positive and strong correlation suggests that older adolescents who experienced their first sexual intercourse at older ages may likely report their experience compared to males experiencing their first sex at much younger ages. This may especially be the case especially when vulnerability to being coerced sexually is highest at younger ages as has been posited by several studies within the sub-region for females (e.g. Jewkes et al., 2006; Luke, 2005; Mmari et al., 2013; Njue et al., 2005).

Likewise, a test of the association between age at first sexual intercourse (very different from current age of the respondent as at the time of reporting on the survey), and sexual coercion showed a positive association. This association was clearly significant ($p<0.01$) and indicates plausible vulnerability of adolescent males at younger ages, to coercion at sexual debut; in other words, males who initiated sexual intercourse at younger ages are likely the victims of coercion. However, specific categorisations of age shown in Table 5.2 indicate no significant differences across groups. Needless to say, vulnerability cuts across all age categories across the transition from boyhood to young adulthood.

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For those respondents whose first sexual intercourse was with a stranger, the majority of cases were under coercive circumstances. Almost three out of five circumstances with a stranger were coerced episodes.

Similarly, quite a high proportion of boys who were initiated into sex with an older female were under coerced circumstances compared to those who were initiated by females of same age or younger (42% versus 24%). This significant finding ($p<0.05$) begins to challenge traditional and widely accepted notions or myths about sexual activity involving adult females and underage males. In this case, coercion of boys to have sex is believed to be impossible, and in many ways, perceived to be a glorified experience by males (Hetherton, 1999), with boys rarely described as victims, but rather willing participants.

Table 5. 2 Context of Sexual Debut (Levels of Non-Consensual Sex) by Socioeconomic, Demographic and other Background Characteristics

Background Characteristic	Category	Coerced Sexarche (%)	Non-Coerced Sexarche (%)	Chi-square (P-value)	Number(n) (N=215)
Individual Level					
Religion	Christian	27.23	72.77	0.76	202
	Non-Christian	38.46	61.54		13
Ethnicity	Krobo/Dangbe	19.66	80.34	10.32***	117
	Ewe	41.43	58.57		70
	Other Minority	28.57	71.43		28
Schooling Status	In School	34.29	65.71	4.15**	136
	School Dropout	21.82	78.18		79
Highest level of Education	Primary	28.79	71.21	2.37	66
	Middle/JHS	23.47	76.53		98
	Secondary/SHS	35.29	64.71		51
Orphan Status	Both Parents Alive	29.81	70.19	1.82	161
	One Parent Alive	24.44	75.56		45
	Both Parents Dead	11.11	88.89		9

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Table 5. 3 continued: Context of Sexual Debut (Levels of Non-Consensual Sex) by Socioeconomic, Demographic and other Background Characteristics

Background Characteristic	Category	Coerced Sexarche (%)	Non-Coerced Sexarche (%)	Chi-square (P-value)	Number(n) (N=215)
	Both Parents Dead	11.11	88.89		9
Interpersonal Level					
Relationship To Caregiver	Biological Parent	29.70	70.30	1.57	101
	Step-Parent	36.84	63.16		19
	Grandparent	24.00	76.00		25
	Other Relative	24.00	76.00		50
	Non-Family	25.00	75.00		20
Marital Status of Caregiver	Not In Union	27.35	72.65	0.04	98
	In Union	28.57	71.43		117
Educational Status of Caregiver	Educated	27.63	72.37	0.02	152
	Not Educated	28.57	71.43		63
Household/Community Factors					
Locality	Juapong	39.08	60.92	9.07***	87
	Agormanya	20.31	79.69		128
Wealth Status	Poorest	34.04	65.96	8.89*	55
	Poorer	23.26	76.74		38
	Middle	26.19	73.81		39
	Richer	17.31	82.69		43
	Richest	45.16	54.84		35
Relational Factors					
Relationship To Partner	Non-Stranger	24.50	75.50	11.71***	172
	Stranger	73.33	26.67		43
Age-Based Power/Differential (5+yrs older)	Yes	42.11	57.89	4.63**	38
	No	24.86	75.14		177
Setting of Sex Debut	Respondent‘s House	18.89	81.11	19.14***	90
	Partner‘s House	30.77	69.23		26
	Someone‘s House	17.78	82.22		45
	Other Place	50.00	50.00		54
Alcohol Use At Sex Debut	No	18.03	81.97	59.58***	183
	Yes	84.38	15.63		32

Source: Computed from GSC survey data, 2010- 2014.

Note: ***, ** and * refer to 1 percent, 5 percent and 10 percent significance levels respectively.

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5.4 Associations between Age of Respondent, Age at First Sexual Intercourse and the Context of Sexual Debut

For these quantitative variables (i.e. age of respondent and age at first sexual intercourse), the correlation described the strength of the association between linear independent variables and the experience of sexual coercion. These correlations with values between -1 and +1 indicate the direction and magnitude of the association between variables. Tests were carried out at $p<0.05$.

Table 5. 4 Correlations between Age of Respondent, Age at sexual debut and Context of Sexual Debut

			Age of Sexual Debut	Context of Sexual Debut
Spearman's rho	**Age of Respondent**	**Correlation Coefficient**	0.5648	-0.1353
		Significance	0.0000***	0.0475**
		Number	215	215
	Age at Sexual Debut	**Correlation Coefficient**	1.0000	-0.1851
		Significance	.	0.0065***.
		Number	215	215

Source: Computed from GSC survey data, 2010- 2014

Note: ***, ** and * refer to 1 percent, 5 percent and 10 percent significance levels respectively

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5.5 Prevalence across Categories of Factors of Vulnerability to Risk of Sexual Coercion for Young Males

This helps us to determine the prevalence of sexual coercion, especially for certain characteristics which may render adolescents at higher risk of coercion. We can also infer as to characteristics of adolescents and young males which may place them at higher risk, thus helping to identify key targets or ‗at risk' populations, for the needed attention and intervention.

Particular attention is placed on those who were coerced into their first sexual encounter, in other words, male youth who were non-consenting or unwilling at their sexual debut. Variables that presented as significant vulnerability or risk factors for sexual coercion of first sexual intercourse (for both forced and pressured sexual intercourse) (were ethnicity, schooling status, community of residence, household wealth, age differential, setting, and alcohol use. Results in this section show the distribution of respondents who experienced coercion across various categories of significant factors.

The significant chi-square shows that these distributions were not due to chance, but really those who experienced sexual coercion are different from their other sexually experienced counterparts who did not experience coercion at their first sex, based on the selected characteristics. Respondents who fell within certain categories of significant predictor variables therefore infer some vulnerability at that level.

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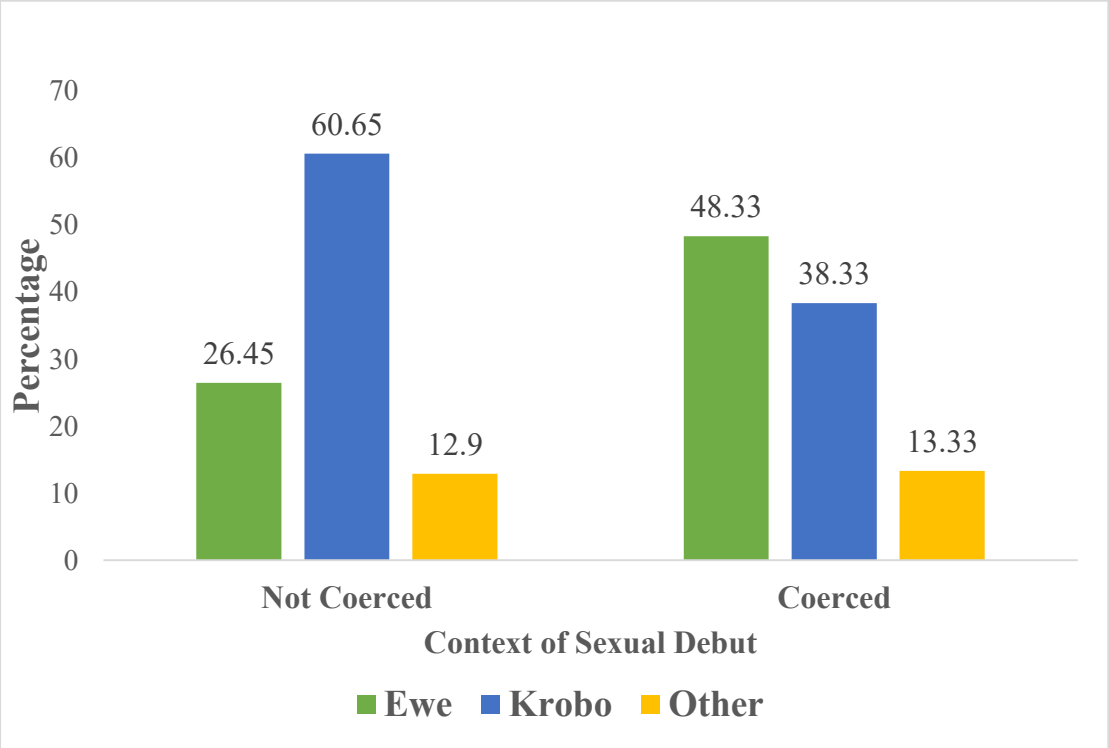
Figure 5.1 shows that Ewe youth were significantly different from other Krobo/Dangbe youth and other ethnic minorities regarding their initiation into sexual intercourse. Ewe males constituted the highest proportion of boys who had been coerced. Ewe males were therefore more vulnerable than their Krobo/Dangbe counterparts, as well as other minorities.

Figure 5. 1 Ethnicity and Context of Sexual Debut



Source: Computed from GSC survey data, 2010- 2014

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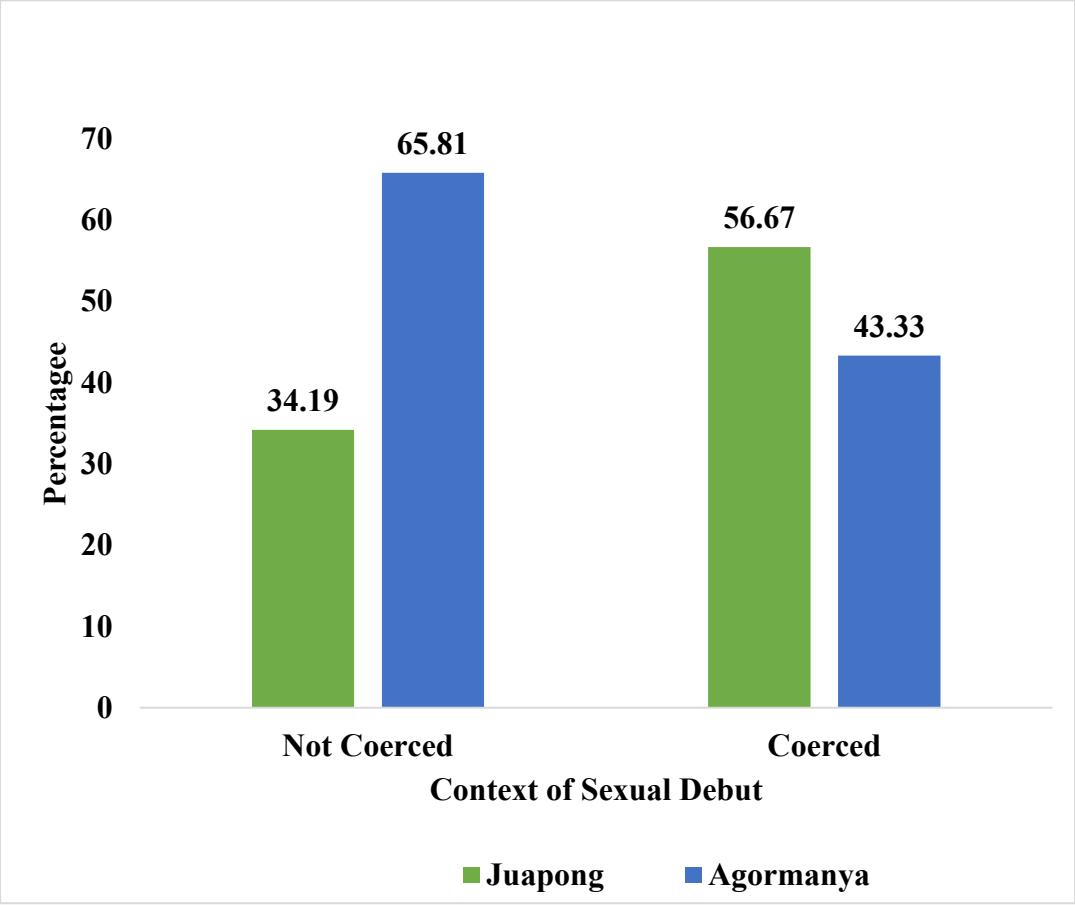
Figure 5.2 shows that male youth in Juapong were significantly different from their counterparts in Agormanya with respect to their initiation into sexual intercourse. Both communities are more or less homogenous in ethnicities, and therefore similar to the ethnic differences discussed earlier, males in Juapong (also predominantly Ewes) constituted the highest proportion of boys who had been coerced.

Figure 5. 2 Locality of Residence and Context of Sexual Debut



Source: Computed from GSC survey data, 2010- 2014

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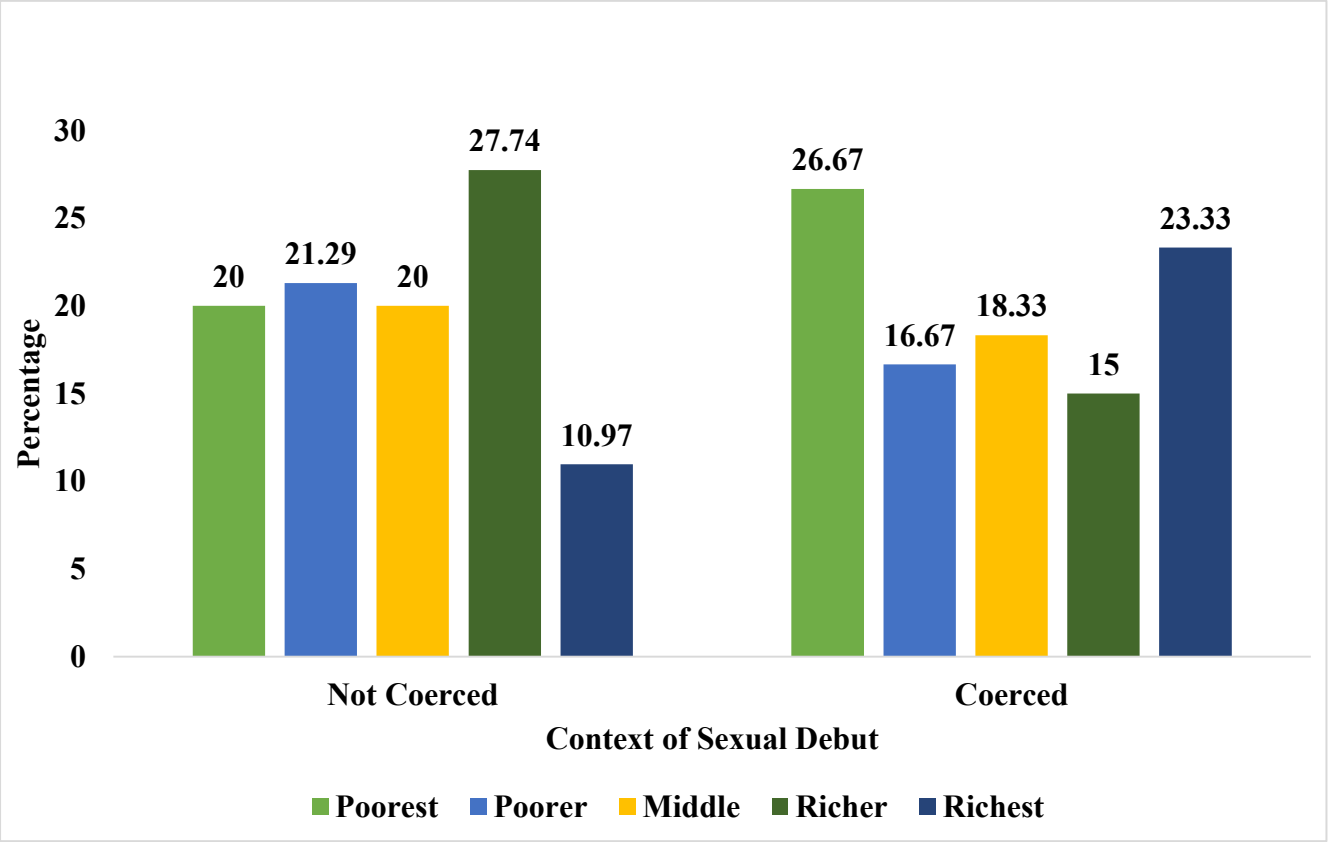
Figure 5.3 illustrates wealth categories as a function of sexual coercion. The highest proportions of males reporting coercion at sex debut fall in the two extremes of the wealth quintile; the poorest and the richest. There seemed to be no clear pattern of this relationship between household wealth and sexual coercion, inferring that males' vulnerability to sexual coercion at sexual debut may likely be cross-cutting across all wealth statuses.

Figure 5. 3 Wealth Status and Context of Sexual Debut



Source: Computed from GSC survey data, 2010- 2014

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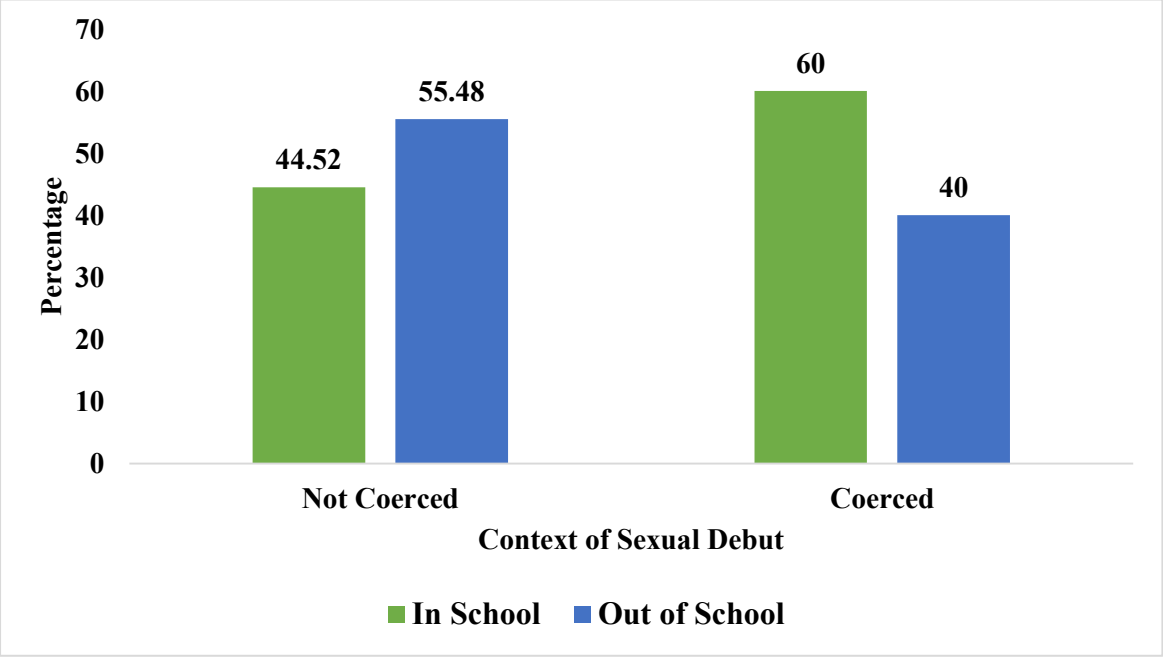
Figure 5.4 illustrates that schooling status portends significant vulnerability to young males' experience of non-consensual sexual debut. Sixty percent of those who reported sexual coercion also reported they were currently in school. This result was unexpected and contrary to studies which have included this factor. Owing to the fact that other extraneous factors had not been accounted for in this relationship, this could be attributed to the sub-sample of older respondents who may have completed some level of education and were not currently in school. Thus, a cross-tabulation of schooling status against age at sexual debut (Appendix G), confirmed this hypothesis, where a higher proportion of males out of school were in the older age categories. Older youth have been shown to be in a better position to negotiate or decide when, how and whom to have sex with. This was further explored in a subsequent section (multivariate analyses in Chapter 6).

Figure 5. 4 Schooling Status and Context of Sexual Debut



Source: Computed from GSC survey data, 2010- 2014

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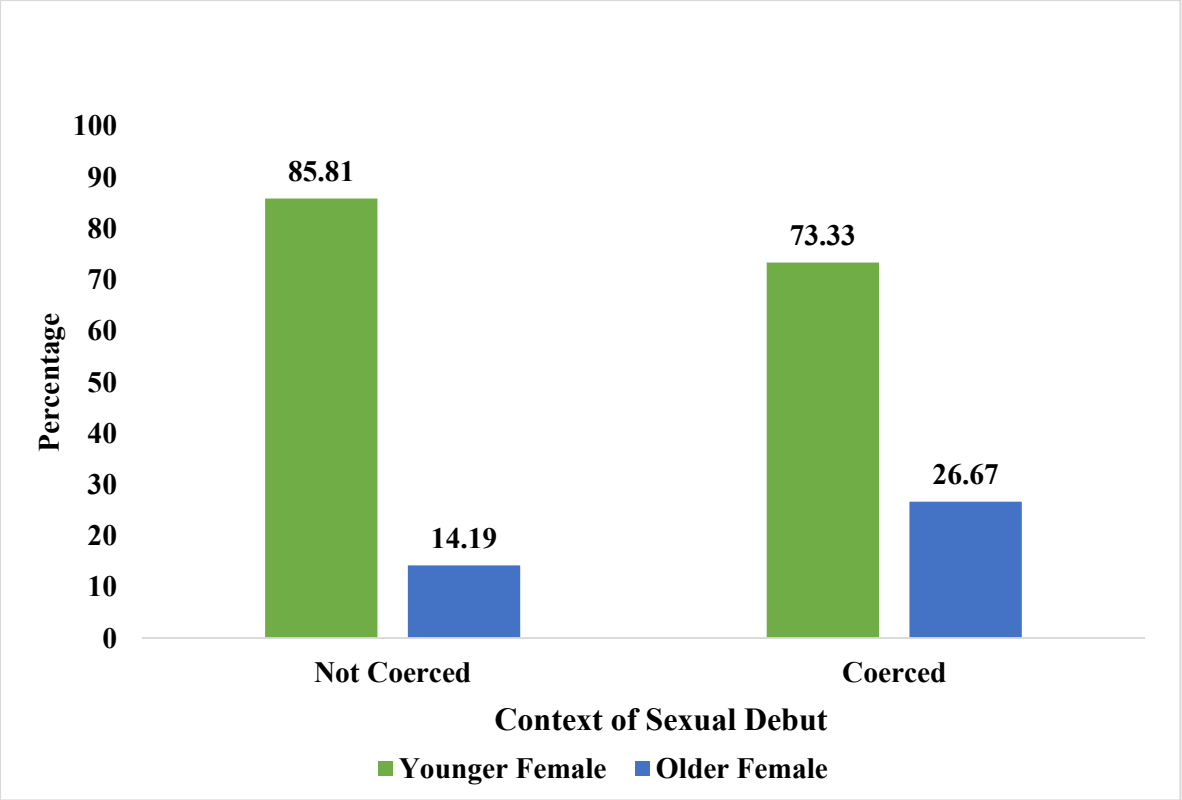
The highest proportions for both consensual and non-consensual sex debut occurred with female partners who were same age or younger than respondent (Figure 5.5). However, a significant increase was observed where almost twice the proportion (26.7%) of older female partners coerced their younger male victims into non-consensual sex, and for that matter into engaging in sexual intercourse the first time ever ($p<0.01$).

Figure 5. 5 Age Differential and Context of Sexual Debut



Source: Computed from GSC survey data, 2010- 2014

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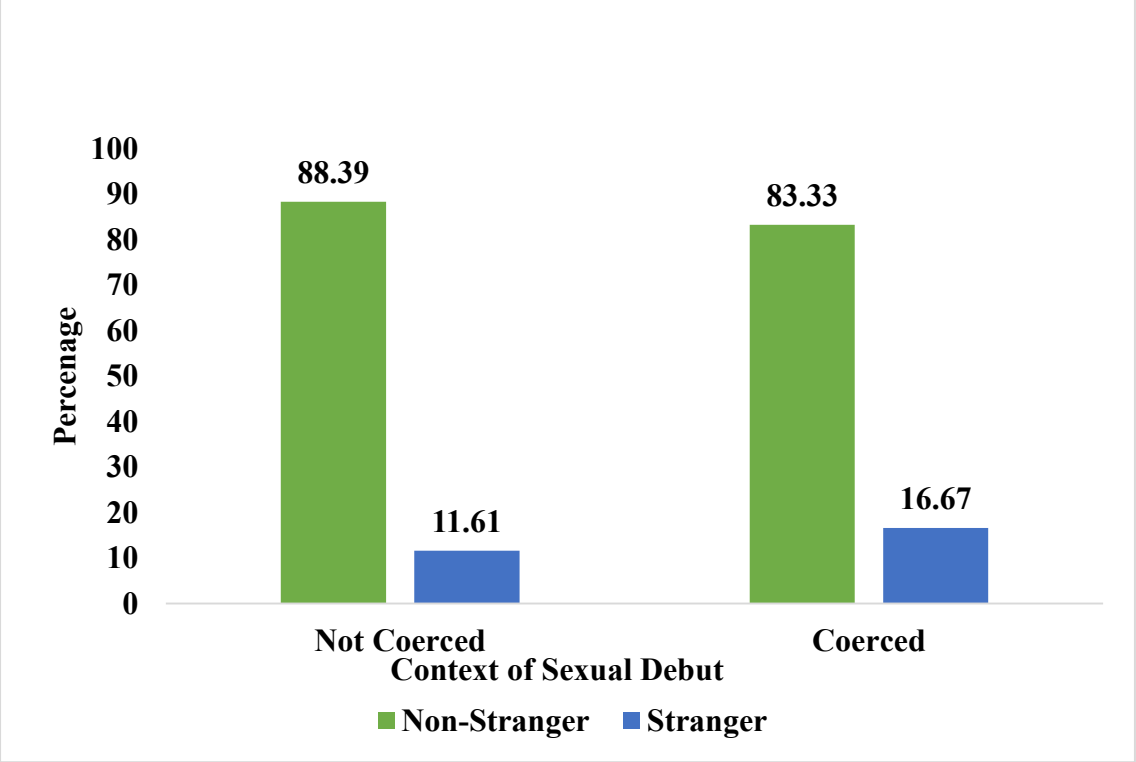
As expected, the majority of boys had their first sexual intercourse with people known to them. Of significant difference, however, was the proportion of partners who were strangers to these young males at their sexual debut. From Figure 5.6, a higher proportion, that is about 17% of coerced sex episodes were perpetrated by strangers compared to about 12% of consensual sex episodes involving strangers.

Figure 5. 6 Relationship to Sexual Partner and Context of Sex Debut



Source: Computed from GSC survey data, 2010- 2014

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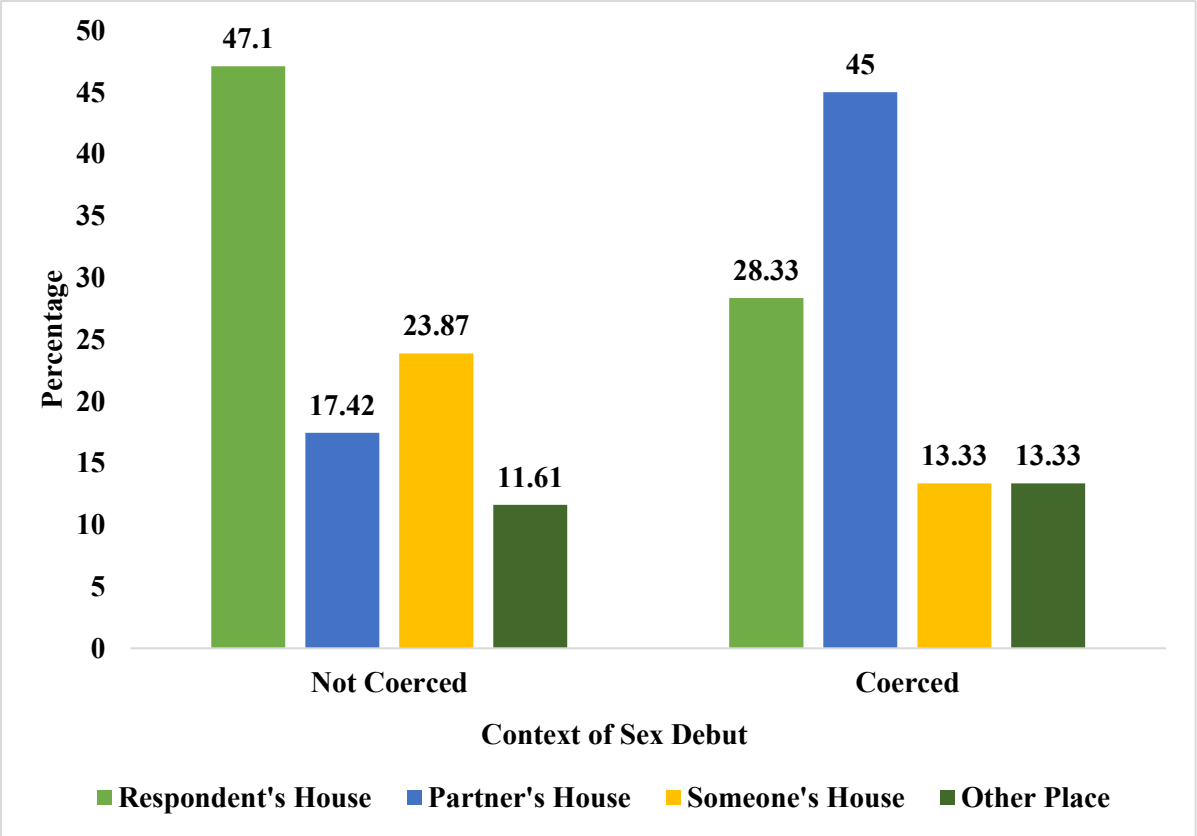
Boys who were coerced mostly encountered this experience at the perpetrators‘ house (Figure 5.7). A little more than a quarter experienced this phenomenon at their own house. On the contrary, males reporting their experience as consensual also reported their experience happened in their own house, and much less at their partner‘s. This may infer a readiness or some expectation of their first sexual intercourse, and even perhaps indicate they could be the initiators of such act.

Figure 5. 7 Setting of Sex Debut and the Context of Sexual Coercion



Source: Computed from GSC survey data, 2010- 2014

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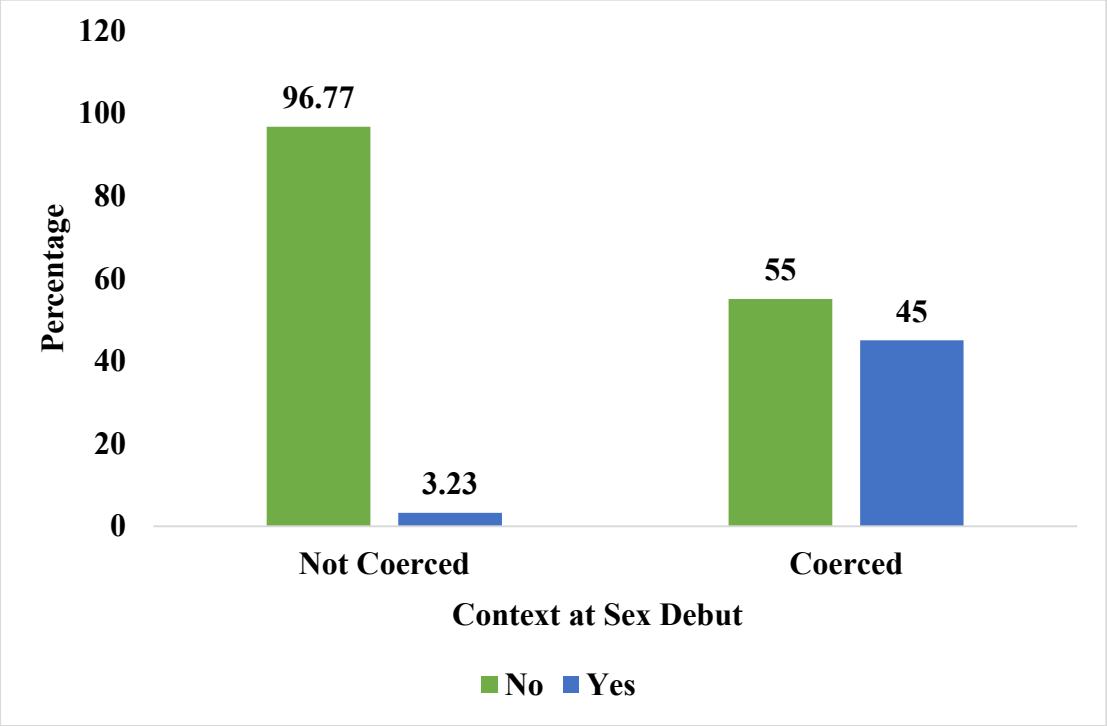
The non-use of alcohol at sexual debut was near universal (96.8%) for consensual sex encounters, meaning that almost all the boys who reported consensual sex at debut had not taken any alcohol then. On the other hand, almost a half of non-consensual sex cases involved the use of alcohol (Figure 5.8). The significant difference in alcohol use on account of sexual debut was clearly illustrated. This was also indicative of the negative implications of alcohol use and its potential risk to young males' experience of sexual coercion.

Figure 5. 8 Alcohol Use and Context of Sexual Debut



Source: Computed from GSC survey data, 2010- 2014

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In summary, certain factors present not only as vulnerability to young males‘ descent into sexual behaviour, but more importantly sexual behaviour of an unwanted kind. Although a myriad of factors play an important role, this chapter begins to shed light by illustrating some indicators at different ecological levels which place adolescent males at risk of being forced or pressured into having sex the very first time. Here, distributions show not only the correlates of vulnerability, but also the specific sub-populations who may be at higher risk. For, instance ethnic affiliation was found to be of significant influence on the experience of sexual coercion at first sex. But more specifically, Ewes compared to Krobo/Dangbe youth were more vulnerable. Likewise, boys in school, the poorest, boys residing in Juapong, boys whose first sex was with an older woman, those who had imbibed alcohol at their sex debut, and who had sex at the partner‘s house were more vulnerable to coercion.

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CHAPTER SIX

Socio-Ecological Perspective Examining the Context of Young Males' Sexual Debut

6.0 Introduction

This chapter investigates the independent effects of socio-ecological factors including individual background characteristics, familial, relational and community factors on the outcome of respondents' coitarche. To meet the study's second objective, i.e. to examine the factors that influence sexual coercion of young boys, multivariate analyses using regression modelling were carried out to test for effects of sociocultural and demographic variables, within an ecological framework.

In the logistic regression analysis, results are shown as odd ratios or, in this context, odds of sexual coercion associated with each variable. In the logistic regression model, the log of odds ratio (which in this study is the ratio of sexually active young males who had coerced premarital sexual debut) is expressed as a function of the various independent variables (predictors). Mathematically it is expressed as follows (Halli & Rao, 1992):-

$$\text{In } (p/1\text{-}p) = \beta_0 + \beta_1X_1+\beta_2X_2+\beta_3X_3+...+\beta nXn$$

where: βi is the logistic coefficient, i=0, ...n;

Xi is the explanatory variable, i=0, …n; and

p = probability of success (coerced sexual debut).

The analytical approach used in the regression modelling was step-wise and reflects a multi-layered approach. The aim of situating the study within an ecological model was to explore

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the independent effects of factors at each level i.e. individual, interpersonal, community/household and relational. Subsequent to this, the contribution of all these levels in a synergistic model was explored to emphasise a holistic picture and in so doing, bridging a relevant gap in the literature where emphasis has previously been on looking at only one of these ecological levels at a time without accounting for other contextual factors within an individual's environment (Table 6.1).

6.1 Correlates and Factors of Vulnerability to Sexual Coercion at First Sexual Intercourse: Incorporating a Socio-ecological Framework

Four models are shown in table 6.1 in line with the socio-ecological model. Drawing on Bronfenbrenner's theory, the first of the four models investigates how personal level factors pose vulnerability to young males' experience of sexual coercion at sexual debut. The second model goes on to test how interpersonal factors such as caregiver or parental factors could buffer young males' descent into coerced first sexual intercourse. Consequently, to explore how personal, interpersonal, and community factors co-vary to influence risk of sexual coercion, a third model examined community level correlates of vulnerability to sexual coercion.

A full model was generated incorporating all levels of the socio-ecological model. To investigate how individual, interpersonal, community/household, and relational factors co-vary to influence risk of sexual coercion, the model incorporated all variables conceptualised to adduce effects on young males' risk of experiencing sexual coercion. The result shown in Table 6.1 clarified how these factors synergistically predict sexual coercion among young males.

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From Table 6.1, we find that vulnerability to coercion at sexual debut was significantly predicted by age at sexual debut, religion, relationship to caregiver, locality of residence, wealth status, age difference between respondent and first sexual partner, and respondent's alcohol use at sexual debut. Orphan status showed marginal association at 10% significance level. Respondent's schooling status, their parent/caregiver's educational status, and setting of sex debut were found not to be significant predictors of sexual coercion.

As age increases, the odds of experiencing coerced first sex were 0.166 (1.000-0.834) times lower amongst sexually active male youth. Thus, younger age at sexual debut presents as a risk factor to experiencing sexual coercion. While evidence from developing countries is relatively sparse, that from settings such as the US and Europe suggests that the earlier the sexual initiation among adolescents, the more likely it is to have been coerced (Heise, Ellberg, & Gottemoeller, 1999; Jejeebhoy & Bott, 2003). Consistent with these studies, the findings from this study show that vulnerability to sexual coercion is heightened with decreasing age at sexual debut. Thus, if adolescents transitioned into sexual debut at younger ages, the more likely it was non-consensual.

A plausible explanation could be that youth at older ages are better equipped to make informed choices than their younger counterparts. This is because older adolescents are likely to be more knowledgeable than younger ones to deal with problems of sexuality prior to or when first intercourse occurs (Holmes & Slap, 1998; Kabiru, Beguy, Undie, Msiyaphazi, & Alex, 2014). In most cases, age is related to knowledge of risks and means of protection, as well as the ability to seek and obtain information and services (Tenkorang & Maticka-Tyndale, 2014). Therefore, a younger age at first sexual intercourse in this study, as in several others, portends risk of non-consensual circumstances; and this is relevant to young males'

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sexual and reproductive health as timing of first intercourse is an indicator of the onset of exposure to risk of HIV and other STIs (Awusabo-Asare & Biddlecom, 2006).

Compared to Christians, non-Christians (comprising predominantly of Muslims) were at much higher risk of experiencing sexual coercion; having about seven times greater odds of experiencing coercion at sexual debut. Religion is becoming an important and highly present factor in the lives of many adolescents and young adults in Ghana (Anderson, 2013). According to (Anarfi & Owusu, 2011), different religions have different codes of sexual morality which regulate sexual activity or assign normative values to certain sexually-charged actions or thoughts. Similarly, many cultures and religions have adopted strong moral norms of sexual behaviour, and consider actions outside of the boundaries set by those norms to be immoral or wrong.

In addition, some religions have promoted the dissemination of clearer standards and objectives, as well as punitive sanctions, with respect to many aspects of their younger followers‘ lives, including their sexual behaviour (Verona, 2011). Religious norms can lead to unequal gender relations, given that they emphasize patriarchal norms that often provide an acceptable basis for women‘s passivity and unchallenged availability to male partners (Heise et al., 1999; Minkah-Premo, 2001). Religious teachings can provide unacceptable grounds for engaging in early sexual intercourse whether or not it is consensual (Ellison, 1991). Some religious groups enforce stricter sanctions than others on deviant behaviours within the confines of religion (Osafo, Asampong, Langmagne, & Ahiedeke, 2013).

The non-Christian respondents in the study were mostly Muslims, and it was these young males who were at significantly higher odds of experiencing sexual coercion. In a study done by Ajuwon, Olaleye, Faromoju, & Ladipo (2006) in Nigeria, Muslim youth were found to be at higher risk of sexual coercion compared to Christians. Therefore, the notion of deviance

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from normative behaviours proscribed by Islam may place young males at higher risk to sexual coercion.

Interestingly when the youth is an orphan he is less likely to have been coerced compared to those who are not orphans. Young males who had lost both parents, were only 0.10 times as likely as youth whose parents were both alive, to experience sexual coercion, but this was of marginal significance. Further interrogation by cross-tabulating orphan's status with caregiver characteristics, suggests these orphans stay with their grandparents, and this living arrangements has been documented by a few studies in South Africa, where children are especially fostered by other family, notably grandparents. Therefore, we see that respondents who are living with their grandparents were less likely to experience sexual coercion.

Family dynamics and relationships are posited to be important correlates of sexual coercion of young males. As a salient family context, family structure affects the timing of sexual intercourse (Biney & Dodoo, 2015; Okigbo et al., 2015). In their study of family contexts and adolescent sexual behaviours, Moore & Chase-Lansdale (2001) observed that young people residing with biological parents had the most protective effect when compared with adolescents residing in all other family structures.

Results in this study was contrary to some previous findings (Amoateng & Kalule-Sabiti, 2016; Young, 2012). Of significant protection for the male respondents against this phenomenon are grandparents (Table 6.1). Children whose primary caregivers are either grandparents or other biological family are less vulnerable to sexual coercion than are children residing with either a step-parent or non-biological guardian. This finding is well situated within the extant literature on family dynamics. According to the Family Systems Theory, in the context of older carer- child relationship, care roles are established normally and naturally by grandparents (Rutakumwa, Mbonye, Kiwanuka, Bagiire, & Seeley, 2015).

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This is especially the case for grandparents who foster orphaned children, especially where parents were lost to the HIV epidemic. In this study, a cross-tabulation of orphan status and locality of residence showed that of the 55 young males who had been orphaned, 44 were residents of Agormanya, currently the worst hit HIV endemic area in the country (GAC, 2016).

The added responsibility of grandparents to protect their grandchildren from the fate of their parents is heightened, where they even tend to be overprotective of their wards; a phenomenon several studies have conceptualised as circular causality. According to Rutakumwa et al. (2015), –circular causality holds that interactions among family or household members trigger a cycle of behavioural responses; that the behaviour of each member influences and is in turn influenced by that of the other members; and that these mutual influences can be positive or negative, and repeatedly reinforce the behaviour of family or household members".

Several studies in South Africa and Uganda have explored caregiving to orphans by grandparents especially in high HIV prevalence areas, confirming the heightened protection by grandparents. For instance, Joslin & Harrison (1998) and Van Dyk (2001) showed how anxious grandparents were that their grandchildren might die if the parent died of AIDS related illnesses. Therefore, they made efforts to look strong for the sake of their grandchildren, providing a secure and loving environment that helped children to socialise, and even denying their own wellbeing for their wards' sake. It is therefore not surprising that caregiving by grandparents had a significant attenuating effect on vulnerability to sexual coercion at sexual debut.

Young males whose parents or guardians were in married or in union were less vulnerable to coercion at sexual debut. They were 0.66 (1.00-0.34) times less likely than males whose

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caregivers were biological parents. Family stability is of importance in its relationship and prediction of sexual coercion among young males. Marital status of parents or guardians have been implicated in studies of parental involvement in child development, hence a proxy indicator implying parental monitoring, communication, etc. These factors are deemed dependent on stability in marriages i.e. where there are broken homes or otherwise. The importance of parental involvement is often underscored in risk-reduction efforts targeted towards adolescents. Thus, alluding to Waldron, Hughes, & Brooks (1996) marital protection hypothesis, parent or caregiver in union connotes protection or reduced risk to young males' experience of sexual coercion.

The odds of being sexually coerced were significantly lower for respondents from Agormanya compared to Juapong. Thus, youth from Juapong were more vulnerable to coercion. Nwabunike & Tenkorang (2017) found significant variations in the incidence of sexual violence in different localities in Nigeria, and attributed their findings to differences in ethno-cultural norms that create an enabling environment for abuse.

Ethno-cultural norms are considered influential to sexual coercion. This may be due to the fact that some ethno-cultural norms can be linked to the expression of masculinity, which is considered a root cause of men's vulnerability (Price, 2005; Vandello & Cohen, 2003). Although the dominant view often cited in the literature purports that norms of masculinity influence males' perpetration of sexual abuse against females (Sano et al., 2016), the findings of this study begin to hint at a masculinity double standard where the same ideology can make males vulnerable to victimisation by females.

In the Ghanaian context, expression of masculine ideals is highly prized among some ethnic groups. According to the Ghana Statistical Service reports for North Tongu and Lower Manya Krobo (districts where Juapong and Agormanya are located respectively), these areas

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are predominantly Ewe and Krobo/Dangbe ethnicities respectively. For example, masculinity is considered to be traditionally expressed through sexual dominance over women in the Ewe culture, as in many other patrilineal societies (Abotchie, 1997; Tamale, 2017), while interpersonal sexual relations in traditional Krobo and Dangbe society often involve a more liberal dynamic (Awusabo-Asare, Anarfi, & Agyeman, 1993). According to anecdotal accounts and ethnographies, Krobo women are known to be sexually liberal compared to women of other ethnicities.

What may largely constitute deviant sexual behaviour among other ethnicities such as the Ewe will likely not be so among the Krobos. In this regard, women from the more traditionally restrictive Ewe community of Juapong may lack certain opportunities to enact their sexuality, and perhaps prey on younger boys who are also restricted by these same gendered sexual scripts. Besides, Krobo and Dangbe youth, owing to their more liberal sexual socialisation may be more willing when presented with an opportunity to engage in sex. This is further substantiated by cross-tabulations of ethnicity and sexual coercion in a previous chapter, where the highest proportion reporting consensual sexual debut were Krobo male youth (in chapter 5).

The hazard of coerced first sex was significantly lower for all wealth status compared to the richest status. On the contrary, previous studies, using wealth status as proxies for socioeconomic status (SES), found significant differences in the sexual experiences of females with higher SES compared to those with low SES (Jejeebhoy et al., 2005b; Koenig et al., 2004; Moore, Awusabo-Asare, Madise, John-Langba, & Kumi-Kyereme, 2007). In South Africa, McGrath, Nyirenda, Hosegood, & Newell (2009) found that the hazard of coerced first sex was significantly higher for both females and males of low SES.

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Differences in the ages of partners, or age-disparate relationships have been frequently cited as one source of the power differential in adolescent relationships. The eight-fold risk of experiencing sexual coercion has been implied in several studies. Consistent with studies on females, the chances of the sexual encounter being coerced is higher when there is at least a five-year age interval between a girl and her partner. Similar results are found in this study on males (Table 6.1).

Previous assertions (often without empirical evidence) as well as anecdotal evidence have cited that a similar situation encountered by males is likely a wanted situation, and unlikely to be coercive. If anything at all, males' experience with an older woman is a feat. The empirical results from this study however, begin to dispel this notion. Boys whose first sexual intercourse was with an older female are mostly coerced into it, and these have implications for their subsequent sexual behaviours.

Traditionally, males are expected to be older than their sexual partners. Furthermore, males (and not females) are expected to initiate sex according to our traditional sexual scripts. An older woman or female engaging in sexual intercourse with a younger man is generally not acceptable and is frowned upon. Higher age difference here, is suggestive of an age-power imbalance, and borders on young males' inability to exert or enact their sexual autonomy or preference. In other words, such a power play may likely diminish their ability to say no to unwanted sexual advances, especially in our part of the world where age signifies authority.

Studies have suggested that the location of the forced incident can further limit an individual's ability to negotiate (Jejeebhoy & Bott, 2003; Marston & King, 2006). Results in this study suggest no significant differences between the physical location or setting, and vulnerability to sexual coercion at debut. One way of looking at it is that irrespective of a

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youth‘s physical setting be it at his partner‘s house, friend‘s house or any other location at sexual debut, he is as vulnerable to coercion as he is at home.

Alcohol consumption prior to first sexual intercourse is shown to pose substantial risk to sexual coercion. Young males who reported they had consumed alcohol at their sexual debut were three times more likely to experience coercion than those who had not taken alcohol. In Uganda, Agardh, Odberg-Pettersson, & Östergren (2011) found alcohol consumption mediated the association between having experienced sexual coercion and early sexual debut. Similar to findings by Erulkar (2004), result suggests that other risk-taking behaviours such as alcohol consumption among young people may increase their risk of experiencing sexual coercion.

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Table 6. 1 Correlates of Sexual Coercion at Sexual Debut

Variable	Individual vs. Coercion	Interpersonal vs. Coercion	Community vs. Coercion	Relational vs. Coercion	Full Model
Individual factors					
Age at debut	0.82 (0.467)***				0.83 (0.062)**
Religion *(Christian)*					
Muslim	1.56 (1.220)				6.91 (5.210)**
Ethnicity *(Krobo/Dangbe)*					
Ewe	2.96 (1.099)***				(a)[3]
Other minority	1.43 (0.863)				
Schooling status *(In school)*					
School dropout	0.94 (0.329)				1.34 (0.614)
Orphan status *(Both alive)*					
One parent alive	0.91 (0.396)				0.93 (0.479)
Both parents dead	0.30 (0.234)				0.10 (0.125)*
Interpersonal factors					
Relationship to caregiver *(Parent)*					
Step-parent		1.38 (0.854)			1.15 (0.897)
Grandparent		0.75 (0.415)			0.77 (0.598)**
Other relative		0.75 (0.320)			0.40 (0.220)*
Non-family		0.79 (0.471)			0.44 (0.312)
Caregiver marital status *(Not in union)*					
In union		1.02 (0.360)			0.34 (0.185)**
Educational status *(Educated)*					
Not educated		1.01 (0.395)			1.41 (0.699)
Household/community factors					
Locality *(Juapong)*					
Agormanya			0.43 (0.138) ***		0.26 (0.125)***

[3] The ethnicity variable was excluded from the full or adjusted model. This was mainly because of a collinear relationship with locality of residence. A cross-tabulation of these two variables showed they were not significantly different from each other, thus in meeting the right regression parameters, one had to be removed from the model (See appendix)

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Table 6. 2 continued: Correlates of Sexual Coercion at Sexual Debut

Variable	Individual vs. Coercion	Interpersonal vs. Coercion	Community vs. Coercion	Relational vs. Coercion	Full Model
Wealth status (Richest)					
Poorest			0.46 (0.243)		0.29 (0.220)
Poorer			0.52 (0.267)		0.27 (0.200)*
Middle			0.28 (0.148) **		0.13 (0.101)***
Richer			0.43 (0.138) ***		0.11 (0.090)***
Relational factors					
Relationship to partner *(Non-stranger)*					
Stranger				1.53 (0.810)	2.77 (1.790)
Age-difference *(<=5yrs)*					
>5 years age difference				8.46 (6.461)**	5.86 (3.414)**
Setting of sex debut *(Other)*					
Respondent's house				0.79 (0.504)	0.53 (0.356)
Partner's house				0.77 (0.567)	1.14 (0.859)
Someone's house				0.52 (0.420)	0.41 (0.336)
Alcohol use at sex debut *(No)*					
Yes				3.90 (1.901)***	3.05 (2.470)***
	$R^2 = 0.095$	$R^2 = 0.006$	$R^2 = 0.062$	$R^2 = 0.151$	$R^2 = 0.353$

Source: Computed from GSC survey data, 2010- 2014

Note: ***, ** and * refer to 1 percent, 5 percent and 10 percent significance levels respectively. Reference categories of variables in model are italicised in parentheses

In summary, the chapter examined the factors that influence sexual coercion of young males within an ecological framework and found individual, community or household and situational or relational level factors to have import in young males' risk of experiencing coerced first sexual intercourse.

The study finds that a socio-ecological lens to the phenomenon under study is warranted. Indeed, regression modelling of correlates that portend vulnerability to non-consensual sex operates at different levels of significance. The various models presented in the ecological

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framework are seen to work synergistically. Here, we see how some effects are dampened or mitigated after incorporating other factors at different levels of the ecological model. Other effects, like that of religion, are also heightened only when the effects of confounders are accounted for.

Findings from the quantitative analyses in this chapter have relevance in its contribution to the literature on predictors of male sexual coercion, developmental pathways to adolescents' transition into wanted and unwanted sexual first sexual intercourse, and advancement towards creating a framework within which related studies can be situated or adapted to.

Following from this chapter, the next incorporates qualitative accounts of male victims own sexually coercive experiences, thus providing insights to this phenomenon, as well as clarifying and further illuminating understanding of the quantitative results in this chapter.

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CHAPTER SEVEN

Qualitative Synthesis of Young Males' Coerced Sexual Debut

7.0 Introduction

This chapter presents findings from the qualitative data collected through in-depth interviews with young males (who were selected purposefully from the panel GSC survey). Specifically, the chapter covers the context within which young males experienced their first sexual intercourse. As mentioned in previous chapters, the sociocultural milieu in which these young males live and grow within, have implications for their choices, which in turn affect aspects of their lives, such as sexual and reproductive health. With a focus on first sexual intercourse, issues of sexual consent, nature of the relationship between victim and perpetrator, disclosure of abuse, meanings ascribed to sex, among other themes were explored and presented.

7.1 Young Males' Coerced Sexual Debut Experiences

The young male participants retrospectively reflected on their early sexual experiences, the setting, admission of preparedness or unpreparedness of their sex debut, feelings about that first experience, and reasons for not reporting to an adult. They also discussed meanings given to their sexual debut.

Themes derived from the textual data are structured and illustrated at four different levels: these are the global theme, organising theme, basic and sub-basic themes. The lowest order premises evident in the text are the basic (and sub-basic) themes. These basic themes are grouped together into similar clusters to form organising themes. The global theme filters

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organizing themes into one insight that summarizes the comprehensive issue of sexual coercion at sex debut.

The circumstances surrounding adolescent males‘ coerced sexual debut are context-specific, and better understood holistically considering how they were coerced, through what means, if safe sex was practiced, as well as the aftermath of their encounter. Surrounding the global theme, sexual coercion at first sex, are eight organising themes, and their related basic themes (Figure 7.1). For instance, insights on sexual coercion can be gained from looking at issues of power dynamics between the victim and perpetrator. Power imbalance, as an organising theme, was constructed putting together three basic themes: age-disparate relations, economic-disparate relations, and relationship between victim and perpetrator.

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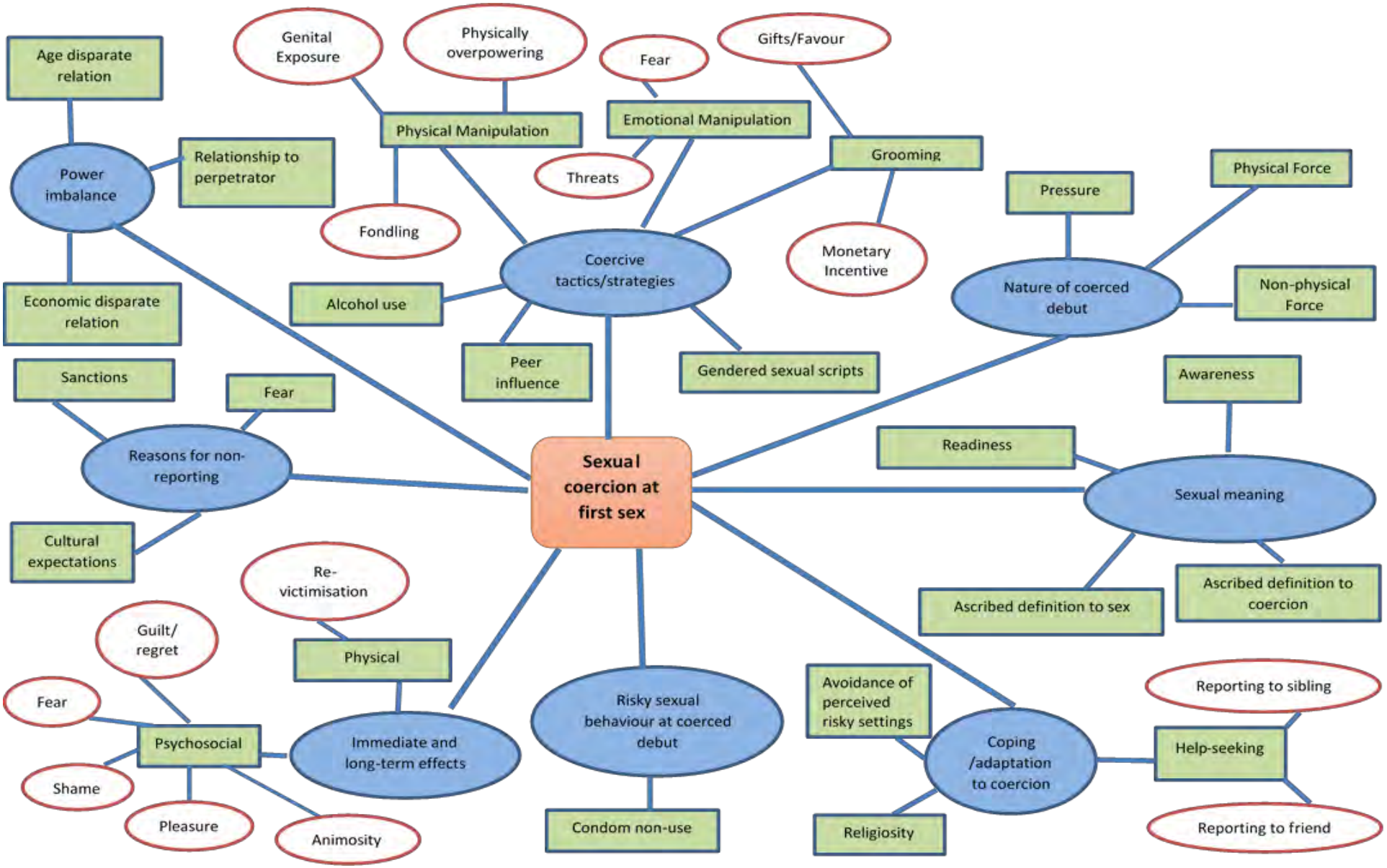
Figure 7. 1 Thematic Network for Sexual Coercion at First Sex



Source: Author's Construct from Textual Data

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7.1.1 Sexual Debut Experiences and Meaning among Young Male Victims of Coercion

The in-depth interviews provided some insight into the boys‘ perspectives into the particular context surrounding experiences at their sexual debut. There was conflicting information presented in the narratives as compared to the responses from the survey. The respondents ascribed their own meanings to what sexuality was, from their own lived experience.

For the first organising theme of sexual meaning (Figure 7.1), four basic themes were derived from the text. These were sexual awareness, sexual readiness, ascribed definition to sexual intercourse, and ascribed definition to female-perpetrated sexual coercion. These themes together defined boys‘ acknowledgement of their transition into premarital sex. In other words, male victims‘ acceptance and reporting of ever having sex was a construct of these four basic themes.

Sexual awareness, described the state of knowing or being aware of the act of sexual intercourse. This initial realisation of what sex entailed seemed to influence some respondents answer to the question about whether they had ever had sex. For instance, a respondent initially reported he was a virgin. Upon probing by the interviewer, he admitted he had had sexual intercourse although he had not known what was going on due to the coercive circumstances at his sexual debut.

“I wasn’t aware that what she asked me to do was bad and besides she knew my sister was sleeping right there I don’t know, she asked me to do it so I did it. I never told anyone about it too….why?...[4]*.I don’t know at the time I didn’t see anything wrong with what happened”. (20 years, first sex at 9 years)*

[4] Some of the sample quotes presented this chapter omits some dialogue in the original transcript for space concerns, because it was not directly relevant to the key theme being considered in the analysis.

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Sexual readiness, described respondents‘ view on their preparedness for sex, whether sex is problematic, the rewards sex brings and health concerns, gender norms, and choice to opt for sex without force or pressure, love, age differences, and aspiration.

The respondents generally expressed a lack of readiness, which also reflected in their answers to the question about whether they had ever had sex. Similar to the lack of sexual awareness, some respondents who expressed a lack of readiness also denied ever having sex until probing. For example, this victim of coerced sex expressed gender norms or expectations as an underlying factor of sexual readiness.

“I believe that if you want to have sex then you should be ready to have children and take very good care of them. I know some people do it for pleasure, but I have never tried it so I can’t tell”.
(18 years, first sex at 13 years)

Expression of love as a sign of readiness also featured in respondents‘ understanding of sexual readiness. So did expression of age difference and lack of choice to pursue other options.

“I told her if she claims she loves me then fine but as for me I don’t love her because I have not achieved my dream yet and also she’s old enough to be my mother, I can be either her first or second born of her children”.
(18 year old, first sex at 15 years)

“Had it not been for Ama…I would have never had sex till today; but it has already happened, so I have to move on”.
(20 years, first sex at 15 years)

Also, future aspirations, and financial stability were also ascribed to sexual readiness. This was expressed by most of the respondents. To illustrate below:

“They say that having pre-marital sex is a sin; you should only have sex when you get married. Having sex as an adolescent is very bad. You see, you cannot do anything with a J.H.S. Certificate, you cannot do anything that would pay something substantial but with a secondary school certificate you can get a relatively good job…You would have problems if

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you don't have a good job and you are in a relationship. For instance, if you get her pregnant and you have a child, how would you take care of the child?".
(18 years, first sex at 13 years)

Furthermore, respondents' ascribed meaning to sexual intercourse and sexual coercion was also portrayed in their unwillingness to admit they had experienced premarital sex, and much worse of an unwanted kind. Respondents' accounts in the qualitative narratives suggest a disconnect between their answers in the survey to the question of whether they had ever had sex on the one hand, and their own accounts of their sexual experience in the follow-up in-depth interviews. For instance, a 16-year-old did not perceive his first sexual intercourse as such. Even when interviewed in-depth, he initially claimed he had never had sex, until the interviewer had probed. For this respondent and several others, age was a defining factor in experiencing sexual intercourse. Due to his young age at debut, he could not perceive he had had sex at that time.

"(Have you had sex before?)…No….(Don't feel shy, this is confidential so feel free and tell me. Have you had sex before?)…Not really…(what do you mean by not really?)…It happened when we were kids….I was about 5 years old".
(16 years, first sex at 5 years)

It was also observed that when questions were asked in the conventional sense of _ever had sex', some respondents answered in the negative. Interestingly, when the question was asked to connote an unwanted situation, the very same respondents replied in the affirmative.

"(Have you had sex before?).....No, I haven't. Have you mistakenly had sex with a girl? Yes. It happened before, but long ago".
(16 years, first sex at 10 years)

For some of the respondents, gender norms of sexuality and scripts of masculinity could be a plausible explanation to define sexual intercourse within the confines of consent or wanting to or being the instigator, as opposed to being coerced into the situation. To illustrate:

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"Have you ever had sex?....not that I remember but I told your friends who came earlier that when I was younger I remember that our house help did something of that sort to me…How old were you at the time?.....I think I was about 9 or10 years old".
(20 years, first sex at 9 years)

Of particular interest was the spiritual connotation attached to what constitutes sexual coercion of an underage male by an older female. Although it has been found in this study and elsewhere by other researchers that this phenomenon is perceived as deviant behaviour (Dehne & Riedner, 2001; Holmes & Slap, 1998), the ascribed meaning to sexual coercion with respect to spiritual rituals emerged as a local surprise. To illustrate, one respondent shared his understanding of what female-perpetrated sexual coercion was.

"I think that it is because of money…(What do you think about being in that kind of relationship?)...I think it's a bad thing, because my grandmother told me that sometimes the women can use you for rituals to get money".
(20 years, first sex at 14 years)

A number of studies (Curtis & Sutherland, 2004; Mensch, Hewett, & Erulkar, 2003; Nnko, Boerma, Urassa, Mwaluko, & Zaba, 2004) have questioned the quality of data concerning premarital sex in survey results from developing countries. Analyses indicate that underreporting appears to be widespread among girls. Buvé et al. (2001) go as far as to prove this assertion by revealing the presence of ~~"v~~irgin" infections, that is, positive tests for STIs among young women who claim never to have had sex in some surveys which include biomarkers. Albeit, acknowledging that not all HIV transmissions are via sexual intercourse. On the contrary, for male cohorts, no systematic study as yet has gone further to question the quality of data concerning unwanted or non-consensual sex in surveys from the developing countries.

Acknowledging how recommendations and target populations for interventions, policies, and further research are based on key findings of research studies, it could even be argued that lapses or failures of some SRH programmes could be due to inaccuracy of data and findings.

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Evidence from this study showed how some respondents answered they were virgins but upon probing, gave insights as to how they had engaged in a sexual activity. Their accounts suggest that meanings and perceptions of an encounter relate to how one defines sexual intercourse, especially in the context of awareness, readiness and understanding of what defines sexual intercourse and coercion. Even for those victims of coercion who admitted they had ever had sex, their ascribed meaning to sexual intercourse influences their acknowledgement of their coerced debut. Indeed, there is a large body of research in the US on the views of adolescent and child sexual abuse (Jejeebhoy et al., 2005). Very few studies have explored victims‘ own definitions and meanings of sex without consent. A notable qualitative study was done by (Ajuwon et al., 2001) in Ibadan, Nigeria which explored young peoples‘ perceptions on the issue, but failed to situate young males as victims. Therefore, lessons learnt included young males‘ meanings of perpetration and females‘ meanings of victimisation. In Ghana, Moore, Madise, and Awusabo-Asare (2012), examined the prevalence of unwanted sexual experiences at sexual debut among young men aged 12–19 years old in Burkina Faso, Ghana, Malawi and Uganda. From their respondents‘ narratives, they concluded that the contexts within which unwanted sexual experiences occurred for males, looks extremely different from that of females, and thus the need to improve measures of sexual coercion among men.

Conventional sexual and reproductive health literature has alluded much to Ruth Dixon-Mueller‘s sexual connectivity and reproductive health framework. She proposes a broader framework for understanding sexuality in a gendered context, and suggests a number of connections between sexuality, gender, and reproductive health (Dixon-Mueller, 1993). The sexuality framework consists of four dimensions namely sexual partnerships, sexual acts, sexual meaning, and sexual drives and enjoyment. The framework aims to cover sexuality holistically, and as an improvement over prior models (Standing & Kisekka, 1989),

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acknowledges unwanted sexual acts (Dixon-Mueller, 1993). In this widely utilised framework, sexual meaning has been lost on non-consensual sex where males are victims. Besides, sexual meaning was limited to societal definitions of the appropriateness or inappropriateness of sexual intercourse at adolescent ages, and within marriage. Ascribed meanings to sexuality at the individual level were lacking. In filling this gap, the narratives suggest that individuals' ascribed meanings to sexuality are influential in their sexual and reproductive health. Therefore, sexual readiness, awareness, ascribed meanings to intercourse and contexts of consensual versus non-consensual sex are beneficial to the sexuality connection to reproductive health.

7.1.2 Type and Nature of coercion at sexual debut

Three forms of sexual coercion were identified from the narratives. They spanned pressured, physically forced, and non-physically forced sexual debut. These respondents spoke of debuting sexually, not primarily because they were ready, had planned it, or of their own sexual desire, but in response to pressure including partner and peer pressure, physical and non-physical force. While documented accounts (Jewkes et al., 2006; Okigbo et al., 2015) opine that it is much less common for men to experience pressure or coercion at sexual debut, respondents recalled situations where mostly older and more sexually experienced women initiated their first sex, where they either felt unready or were uninterested in the woman sexually.

"What do you think about your first time, did you want to do it?...I wouldn't have done it but because she was so persistent, I started to oblige with her and it happened....Why do you think she was persistent?...It is because she had a craving for it and since she saw me as a prey, she went for it".
(20 years, first sex at 11 years)

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Forced sexual debut was also narrated by respondents. In these instances, their female perpetrators employed the use of physical force, until their younger male victims gave in to their advances to have sexual intercourse.

"It was not my intention, it was kind of a force, and I didn't even know she would do that to me. She just held my head strongly and started kissing me; so I also kissed her back and then we had sex".
(18 years, first sex at 13 years)

There were also narrations of attempted rape, using physical force to dominate boys into awkward positions.

"(When did she force you?)…It's been a while, when I was in school…… Our TV was spoilt so we were watching it at their place. One day my friends and I were watching TV at their place then they left the room. When they left she removed all her clothes and told me to have sex with her but I refused because at that time she was going out with my brother…… She had a cloth strapped around her; their room was a chamber and hall. I was in the hall and she was in the inside. Then she called me to come inside and have a look at something. When I entered the room, she was standing behind the door and she shut the door and removed the cloth…… I saw her breast and her vagina… (You said she was forcing you)…. Yes, she was trying to push me unto the bed but I refused to fall on it, and then her brother came and knocked on the door and she stopped and went to open it for him……. She held my hands and was trying to push me unto the bed".
(22 years, first sex at 13 years)

Other forms of sexual coercion were non-physical force, and involved the perpetrator taking advantage of her victim's naiveté.

"….she was asleep, I was also asleep but she woke me up. She removed my shorts and started touching my penis. She then asked me to sleep on her and put my penis into her vagina and move up and down"
(20 years, first sex at 9 years)

7.1.3 Coercive Tactics/Strategies

Six basic codes emerged from the narratives. These tactics employed by perpetrators to obtain the sexual contact were physical and emotional manipulation, alcohol use, peer influence, cultural expectations and grooming.

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Sexual intercourse obtained when the victim was under the influence of alcohol was narrated by one adolescent from Agormanya. In this case, the perpetrator had not given the young male alcohol, but took advantage of his intoxication. This boy was made to feel he was to blame for what happened and had been brooding over that experience. The perpetrator took advantage of his feelings of guilt to re-victimise him a second and third time. As a result, he became attached to her emotionally. Interestingly, the second time the sexual act happened, he had drunk alcohol, though he admitted _his mind was clearer than before'. Synthesis of the qualitative data corroborates results from the regression modelling where young males who at their sexual debut had drank alcohol, were significantly more likely to have been coerced at their debut.

"She took me home while so drunk that the only thing I saw was the next day and realised something happened, so I asked her and she said it wasn't her fault. I felt so shy and ashamed because we were not on that terms…., I only found myself and her naked the next day in my room, so I can't tell which one of us took the first step but I am sure she did because I was drunk…I only found myself laying in a different place and she also in a different place but in the same room. After seeing am not in clothes and she also not in clothes, I knew something had happened and when I asked her she said something happened. I couldn't ask her much questions because I know I was drunk and could be my fault".
(18 years, first sex at 14 years)

The influence of cultural expectations of sex was framed by the victim's peers as a signifier of manhood and status, and an opportunity that should not be resisted. For instance, one youth recalled his first sexual experience with an older partner. He recounted how the lady would cook for him, appeal to his seniors or other authoritative figure in his school, to persuade him to give in to her propositions. He reflected on his worries about how wrong he thought it was, and his physical displeasure during their encounters. From his own narration, he deduced how the pressure from his peers to be sexually responsive to the lady in order to be recognized, seemingly overrode his emotional worries and physical discomfort.

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Eventually, he gave in, and was re-victimized by the same perpetrator several times after that first experience.

"One day, I was in school when she walked into one of our classes and sort permission from our teacher so she could talk to me. All my friends figured out that she was my girlfriend because she came to my school. She actually went to talk to our sports prefect about our relationship and the sports prefect came to talk to me. So after sometime I was not shy anymore, because my friends started teasing me and saying I was shy of my own girlfriend. I had to prove to them that I was not....."
(20 years, first sex at 15 years)

In a few cases, physical manipulation was employed as a coercive tactic, where perpetrators physically overpowered their victims with their bodies, barricaded exits, and exposed their genitals.

"She had a cloth strap around her; their room was a chamber and hall. I was in the hall and she was in the inside then she called me to come inside and have a look at something. When I entered the room, she was standing behind the door and she shut the door and removed the cloth….What did you see?.. I saw her breast and her vagina". (20 years, Ewe, first sex at 15 years)

In most accounts, the use of various coercive tactics was not mutually exclusive. If anything at all, they connoted a progression of activities from subtle pressure to more aggressive forms; a typical case of _if persuasion fails, force is applied'. DeGue & DiLillo (2005) conceptualised sexual coercion on a continuum, where different tactics used by perpetrators intersect. Here, we find evidence that coercion may not always be an isolated case at a point in time, but a range of activities, leading ultimately to forced or pressured sex.

"She kept on inviting me to her house but I declined her invitations. She persisted, she never stopped; she sent gifts to me through my friends".
(20 years, first sex at 15 years)

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Not all coercive tactics involved the perpetrator directly. For instance, peer influence to engage in an unwanted sexual activity was mentioned by a few respondents.

"There was one guy there, he is called Issah, and he told me that when she comes, I should allow her so that he sees what she wants and I allowed it. She came there and she started touching my body, yeah and we were playing and then it got to that. That thing, I can say it's not sex but I don't know how to put it…. I told him that this was what happened. I regretted it but as for him, he was laughing… But what I came to realize is that, that guy, he used to play with the girls a lot. He is like a womanizer…(Which guy?)…That Issah guy; that is what I came to realize later…I thought about that, like he fooled me".
(22 years, first sex at 14 years)

Also attached to this peer push factor, were connotations of cultural expectations of a macho personality.

"She started rubbing her hands all over my body while I was sleeping and before I woke up she was naked and I asked her why. She said don't I know what men and women do in a room when they are sleeping and I said no, what was the meaning of that? I felt she was just tempting me so I went back to sleep but she started again so I got out of the room but it was late and I had nowhere to go to because I didn't want my friends to know about it for it to be like I am disgracing her so I stayed out for a while and I went back to the room. While sleeping, she started again and I fell for it so I did it".
(18 years, first sex at 13 years)

7.1.4 Power Imbalance between Victim and Perpetrator

Age- and economic-disparate Relations: Differences in the ages of partners, or age-disparate relationships have been frequently cited as one source of power differential. The risk of experiencing sexual coercion and age and economic asymmetries, has been implicated in several studies (Luke, 2003). Consistent with studies on females, the chances of the sexual encounter being coerced is higher when there is at least a five-year age interval between a girl and her partner. Few studies have hinted on males' experience (Bhatasara et al., 2013; Erulkar, 2004; Haile et al., 2013; Varga, 2001). Not only was age disparate relationships symbolic of power imbalance, other disparities in socioeconomic status such as educational attainment was indicative of means boys perceived older partners used to coerce them into

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having sex. Prior analysis has showed that age difference between victim and perpetrator, where female perpetrators were older than their victims, was a significant correlate of sexual coercion. In their in-depth accounts, older age was symbolic of respect and authority.

"She is also there with me but she has kids and her husband is dead. The kids are not too old some will be around 10 years, when I go there and they are watching movies I play with the kids. They are just like my brothers and sisters…. (How old was the woman by then?)….She will be around 35 years by then….. Oh, when I was going there she was very good to me so I was thinking she was going to help me in the future, because when I go there she cooks for me to eat and when I am leaving she gives me money so I was just thinking she will help me in future. When I need to buy a book at school and I tell her she gives me the money to go and buy it so I just thought she would help me in future before that happened…… you see I respect her a lot so when I told her to leave my cloth she thought I was enjoying what she was doing…."
(17 years, first sex at 10 years)

One male youth recalled a sexual debut experience with an older partner, while also stressing on other indicators of power imbalance. This is indicative of how disparities in demographic and socio-economic statuses hindered boys' agency around sexual decision-making regarding condom use. Another interviewee recalled the manipulation and deception he experienced by a partner to have sex, also stressing some form of power-imbalance.

"She noticed I didn't really like having sex. So it continued that way till she went to the University; then she started misbehaving; she wanted to be controlling me because I was in the Secondary School and she was ahead of me".
(20 years, first sex at 15 years).

Relationship to Perpetrator: A salient factor with regards to males' inability to negotiate condom use or practice safe sex stems from power dynamics of the type of relationship they have with the perpetrator. With the exception of only two respondents who were forced to have sex by a stranger, all other accounts suggested an older acquaintance was the perpetrator of their unwanted sexual encounter. A striking observation was how females who were trusted to take care of these young males took advantage of them sexually. Significant culprits were house-helps and _aunty figures'. This account was given by a youth who was

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coerced into having sex by a sexually experienced house maid when he was very young. He had no idea of what was happening, much less any knowledge of condom use.

"(Have you ever had sex?)... Not that I remember but I told your friends who came earlier that when I was younger I remember that our house help did something of that sort to me….I think I was about 9 or 10 years old…, I was also asleep but she woke me up she removed my shorts and started touching my penis, she then asked me to sleep on her and put my penis into her vagina and move up and down".
(20 years, first sex at 9 years.

Konde-Lule, Sewankambo, & Morris (1997) for instance, had also found in Uganda that, although young males reported their sexual experience was mostly with younger female partners, where there was age-mixing or with an older partner, it was with a house maid.

Fostering and child care are common practices in the sociocultural context of all Ghanaian communities. Employing house-helps and leaving children in the unsupervised care of neighbours and other mother figures are a common practice. This is often as a result of the absence of parents who may be engaging in economic activities, traveling or engaged in other activities that require their time away from home.

Often, children are left in the care of friends or other trusted acquaintance believed to keep children safe at all times. Anecdotal evidence suggests how house maids' movements are under stricter supervision, where they have little chance of enacting their own decisions, including their sexual agency. These females are often young adults, and may be sexually mature and experienced. In such settings, these house maids may be monitored under strict working conditions, and unable to engage in sexual intercourse outside of the home, thus their young male wards fall prey. Similarly, friends of parents or neighbours may also be lacking in some regard, where for instance one respondent was forced to have unprotected sexual intercourse by an older woman whose husband was dead. Against this background, we can begin to infer that unfulfilled needs or desires may likely be the motive that spurred

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perpetrator‘s actions, and the opportunity and means to do so presented under the guise of caretaking.

Women are naturally constructed as nurturing and caring (Hetherton, 1999; Oliver, 2007). This allows some of their actions such as caressing a child or sleeping on the same bed with a child, to be perceived as something other than victimization. Turner and Turner (1994) (cited in Oliver (2007)) have highlighted how some therapists interpreted stories of female abuse as ―distorted nurturing.” In addition, the way males are traditionally socialized to believe all heterosexual contact with females is supposed to be beneficial is also problematic (Becker et al., 2001; Hetherton, 1999). Besides, the fear of sanctions, and fear of nonconformity, culturally expected normative behaviours for males positions them at the disadvantage of not reporting their unwanted sexual encounters with older females. These indicators have led to the conclusion that sexual coercion of young males and actual numbers of female offenders may be higher than reported in retrospective, self-report studies.

7.1.5 Risky Sexual Debut

In Ghana, adolescents and young adults have a high risk of acquiring STIs as compared to those above the age of 24 years (Ghana AIDS Commission et al., 2013). Considering that the study setting included a high HIV prevalent context, coupled with risky sexual behaviour at their sexual debut, young male respondents may face a relatively higher HIV risk than their counterparts elsewhere.

Prior research (Barker & Ricardo, 2010; Davies et al., 2014; Kotchick et al., 2001) has mainly focused on the determinants of risky sexual behaviour, but rarely on risk at sexual debut. As a result, research has mostly applied a decision-making framework, including theories such as the Health Belief Model (Rosenstock, 1990), the Protection Motivation

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Theory (Rogers, 1975), the Theory of Reasoned Action (Fishbein & Ajzen, 1975), and the Theory of Planned Behaviour (Ajzen, 1991). The implication has been that adolescents have the latitude to make informed decisions at any or all sexual encounters. Against the backdrop that young people's sexual encounters are often unplanned (Kalichman, Sikkema, Kelly, & Bulto, 1995), and especially so when coerced into having sexual intercourse, there would always be a substantial gap between the intention to have safe sex and the actual use of condoms (de Visser & Smith, 2004). Abraham, Sheeran, & Orbell (1998) found that only approximately 19% of the variance in condom use is explained by intentions. Similarly, Gebhardt, Kuyper, & Dusseldorp (2006) also found significant differences where about 73% of female adolescents with intention to use a condom had actually used compared to the 43% who had no intention but had used a condom during their last sexual encounter.

It would only be logical for one to have intentions to use a condom and actually prepare to do so only if one plans to have sex. Respondents' accounts show an almost universal non-use of condoms at their first sexual intercourse, giving reasons as to how they were not prepared and unwilling to have sex as at the time it happened.

"Did you use a condom?....No…Why?...Because I didn't know something like that would happen".
(20 years, first sex at 11 years)

Some respondents also attributed their lack of condom use to their ignorance of what a condom was and even what it was used for.

"(Did you use a condom?) No. I didn't know what a condom was by then… My dad found out and he said when I do it again I will die so I didn't try it, but now I know that when you want to have sex you must use a condom".
(20 years, first sex at 15 years)

One of the reasons why young people may fail to act on their intentions and use condoms is their lack of planning. Clearly, the use of condoms is a complex and multifaceted behaviour.

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It needs to be repeated over time to be effective and involves multiple preparatory actions, including the purchasing, discussing, and correct handling of condoms (Abraham et al., 1998; Fisher et al., 2002). In particular, planning for negotiating the use of condoms appeared to be of importance. Thus, thinking of preparations for condom use before having sex appears to enhance safer sexual behaviour, that is, only if the adolescent finds himself in a position to do so. Apparently, being pressured or forced into first sexual intercourse appears to leave these males without a choice to practice safe sex, even where they had prior knowledge of condom use and its implications.

"(Did you use a condom during your first sex?) Hmm, that was what got me really scared because first you have to use a condom whenever you want to have sex so that you can save yourself from two things which are HIV and pregnancy. Those who have been using condoms, they already know what they are going to do so they are always ready for it but for me I didn't know anything".
(16 years, first sex at 10 years)

From a theoretical perspective, findings here would suggest gaps in the application of mostly cognitive decision-making theories in accounting for risky sexual behaviour such as non-condom use at sexual debut. The decision-making frameworks that have mostly been applied to adolescents' practice of safe or unsafe sexual behaviours (Ajzen, 1991; Fishbein & Ajzen, 1975; Rogers, 1975; Rosenstock, 1990) assume that individuals will be motivated to use condoms, once they are convinced that the benefits of doing so outweigh the drawbacks, and that they are able to perform the behaviour. Subsequently, the strength of the motivation or intention to use condoms is considered to be the most proximal determinant of having protected sex (Gebhardt et al., 2006). Yet, when the actual context of the sexual encounter is interrogated to be non-consensual, we realise the lack of choice to enact intentions even when the adolescent may have been able to, given that he was well informed about condoms and its uses. Such a person, according to condom use decision-making theories, should have logically not practiced unsafe sex. Researchers will therefore have to begin to consider this

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aspect of sexual context (unwanted circumstances) in theorising adolescent males' apparent risky sexual behaviour, as established theoretical underpinnings would explain a _controlled' situation, but fail to distinguish the _uncontrolled'.

Only one respondent affirmed condom use. Even in that instance, condom use was instigated by the perpetrator, showing her preparedness and planning in contradiction to her victims' lack of choice. This apparent preparation on the part of the perpetrator signifies some power dynamics. This young boy at that time, was aware of condoms and STIs, but his knowledge was inaccurate. This suggested that, in the case where the perpetrator had not used a condom, chances that he would have opted for the use would have been lower.

"She came with the condom…She said she bought it from a pharmacy. (You said you used a condom, how were you able to use it since that was your first time?)…All my friends, I mean almost all my friends are older than me, so we talk about things like these…(Which things do they tell you?)….A lot of things, for instance sometimes we talk about relationships, and they told me that as a man you need to be financially sound before you get yourself into any relationship. They also said that when you have sex with a girl, you are releasing your energy and nutrients in you into the woman, hence you need to eat a lot of fruits to regain the lost nutrients. If after sex you don't have money to buy these fruits to eat, then gradually your strength would be fading away and you would have problems in the future. They also told me about gonorrhoea. They said when a lady shaves her pubic hair and you have sex with her, you can get infected with gonorrhoea if your penis touches her shaved hair…(Do you think it is true?)….Yes, I believe them because I do not know anything so I believe whatever they tell me".
(17 years, first sex at 13 years)

7.1.6 Reasons for Non-reporting of Coerced Sexual Encounters

In almost all the cases, there was the issue of non-reporting of respondents' experience to a significant older person such as a parent/guardian or opinion leader in the society who could actually seek redress for the victim. Lack of reporting or non-disclosure also included reports to the police or other formal agency. This theme emphasises not just non-reporting of such

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issues, but also non-reporting to a person who was in a position to protect the child against victimisation or re-victimisation (for example persons other than siblings or peers). Respondents tended not to report their unwanted sexual experience to anyone for several reasons including fear of sanctions, being labelled as a deviant, guilt, shame, embarrassment, and hegemonic masculinity norms. To illustrate, a respondent spoke of his fear of sanctions even though he was the victim.

"I was scared to tell my parents because they might get angry with the lady. When we were younger; anytime a child did that, they would beat and apply pepper to your genitals; so I was scared to tell my parents. I told only my sister about it".
(20 years, first sex at 10 or 11 years)

Another victim of sexual coercion also narrated his reasons for not reporting.

"(Why haven't you told anyone?) I'm ashamed of myself....(Why?)..... Because of the way people know I behave, people would be very disappointed to know I had done something like that".
(16 years, first sex at 10 years)

Several studies have cited that cases of sexual abuse of young males that is not reported to the authorities is much higher, especially for those involving female offenders than for cases involving male offenders (Nathan & Ward, 2001). Several possible reasons have been given that have tried to explain why few cases of female sexual abuse are reported to the authorities. One possibility is that sexual abuse committed by females is less likely to be reported because it is seen as relatively harmless compared to sexual abuse committed by males (Becker et al., 2001; Denov, 2003; Hetherton, 1999).

Reasons why some believe that female-perpetrated sexual abuse is less serious than male-perpetrated sexual abuse are due to myths of male victimisation (Hetherton, 1999); for example, the belief that sexual activity involving adult females and underage males is, in many ways, glorified by the males as a feat, without any dire consequences (Hetherton, 1999). Interestingly, none of the boys reported feeling honoured or privileged to have had

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such an experience. If anything at all, their accounts suggested they felt emasculated. All these myths have been shrouded in hegemonic masculinity and gender roles, and the evidence from the works done by Frost & Dodoo (2006) recognise the entrenched nature of gender attitudes among Ghanaian girls and boys. They found that despite boys' youthful age and lack of sexual experience, they articulated a clear anticipation of dominance over their future wives and girlfriends.

A couple of respondents' accounts suggested how they viewed an older woman's sexual proposition to be unexpected and disconcerting.

"When she told me I felt someway because it was so strange to me how a lady will be interested in a guy and not the other way round (laughing). So I felt bad a little bit…. Hmm, myself I don't like those thing and actually I have never seen a girl telling a guy that she's interested in him so it sounded different to me….. No I was not happy at all….(Why?) Because I should be the one telling her I like her".
(18 years, first sex at 12 years)

Gendered socialisation could even lead to male victims of sexual coercion self-blaming for their experiences. How people perceive their role to be in a situation and how they attribute blame for that situation would influence the actions they take regarding that very situation; either a positive or negative action or inaction. Possibly, in these adolescents' cases, their situational or dispositional attributions influenced their decisions to report or not to report for help or redress.

Though victims, some boys blamed themselves for what happened and were apologetic. They never reported their experiences to anyone.

"I felt sorry….I didn't intend to….: It wasn't our intention for the first one to even happen".
(20 years, first sex at 11 years)

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7.1.7 Effects of Sexual Coercion

Two basic themes of the effects or feelings of respondents after their unwanted sexual debut were derived. The range of feelings can be classified under psychosocial and physical effects. Under psychosocial, boys reported they felt guilt, regret, shame, animosity towards females, fear of diseases, etc. Males who are coerced may experience disruption of sexual scripts (Harrison, 2005; Stern et al., 2015). Being a victim of sexual coercion is not compatible with the idea of always being willing to have sex. This inconsistency may result in emotional distress for young male victims (Varga, 2003).

This respondent for instance, recalls how he had felt guilty after his coerced sexual debut by an older acquaintance.

"I didn't allow her to get close to me again because I didn't want it to happen again. Because after it happened, I felt very guilty because I have promised myself not to do that (have sex) and besides, I didn't really like her too; I never proposed to her".
(17 years, first sex at 13 years)

There was also mention of fear of HIV/AIDS. Plausibly, their encounter with older and sexually experienced females caused their fears. This respondent from Agormanya, where HIV prevalence rate is high expressed his fears.

"I was scared I might get sick because I became very weak afterwards…What else were you scared of?...I was scared she might be sick…What kind of sickness?...HIV/AIDS".
(20 years, first sex at 15 years)

Strong negative sentiments were also expressed by respondents. For instance, hatred for perpetrator and a general animosity towards females were conveyed in some narratives.

"Through the incident that happened between us, it really made me hate her so much because she made me do something that I was not ready to do. Apart from forcing me to have sex with her that I didn't want to do, I hate that kind of Ashawo life and she showed me that she can force a man at any time and that tells me she is an Ashawo".
(17 years, first sex at 13 years)

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Others had also normalised their experience, although they stated they were not happy with their experience. Due to this acceptance, they did not report the incident or seek for help.

"After I had my first sex I wasn't happy but I just saw or took it as normal".
(18 years, first sex at 12 years)

Although few studies place re-victimisation within the confines of early consensual sex, a more critical look at the issue is warranted. A respondent who was raped under the influence of alcohol, recounted his second encounter with the perpetrator. He gave in to the pressure to have sex the second time because he had grown attached to his perpetrator. This was coupled with use of alcohol and an apparent lack of choice, only to please the perpetrator for fear he would lose her. In his narrative, he admits that his perpetrator asked for sex, but this time he decided to give in suggesting his consent. Even though consent is suggested here, a critical look reveals his unwillingness to have sex without consequences. This is a situation consistent with the definition of sexual coercion. Elsewhere, similar accounts have been captured as early consensual subsequent sex resulting from a non-consensual debut.

"(The second encounter)…… Oh it was similar, I got drunk a little but was very clear, I did not drink much, she came to me and we talked, and she said we should forget the past and move on. But I told her I was ashamed…..she said the first one that happened she enjoyed it and now she is no more with her boyfriend. So if I can do it again she will be very happy. At first I told her I won't, because thinking of me being a Christian and it's of no importance to do it. So I decided not to do it, but she kept pressuring me and finally we did it because I was thinking if I don't do it and she goes, she will never come back again, I really like her……. it was a festival, that day the rain beat us so we were very cold, and when we got home I went and bathed with hot water…..she came and asked for sex and I decided to do it since it was not the first time".
(18 years, first sex at 14 years)

Re-victimisation in some cases was not a one-time occurrence. For some, it happened two or three times shortly after their unwanted debut, and for a couple, it happened over a longer period of time. For instance, this adolescent disclosed how a house help had engaged him in

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sexual intercourse three times, and this was exacerbated by his not reporting the initial encounter to any adult.

"How many times did she do it?....she did it about three times".
(20 years, first sex at 9 years)

Russell (1986) documented the tendency of victims of childhood sexual abuse to be re-victimised over the lifespan. She found that 68% of incest victims were later the victims of rape or attempted rape, versus 36% of women who had no history of incest. According to Russell (1986), adolescents who have been traumatized by prior sexual abuse may have difficulty setting boundaries regarding sexual limits and they may feel powerless to stop re-victimisation. Walsh, Fortier, & Dilillo (2010) have examined some of the difficulties experienced by survivors of incest. They include difficulties in setting boundaries, confusion regarding normal dating and sexual behaviour, and an inability to act on their own fears.

Though experiences may be similar for some boys, the reactions to these experiences may vary. Whereas most of these boys succumbed to the pressured advances, a few others were able to escape sexual victimisation at the hands of the older females. For instance, the following narrative discloses how through a young apprentice's assertiveness, he was able to resist the advances of an older woman.

"I have never had any experience with any woman except one day when a woman requested for a glass door from our shop. After we had finished the door, my master sent me to go to the woman's house to fix the door for her. After a week she came and proposed to me, she said she loved me but I refused because I don't have the time for that…… I answered her, woman, I don't love you, I won't love you and I don't know what I am going to be doing with you, or what am going to tell my friend's about you so please leave me alone. I told her she should respect herself…..A few days later she came to report to my master that I was insulting her the last time. When my master asked, I explained what the woman said to me. He (master) gave her a warning not to do that again because I was a small boy....my master said things to make her feel bad…..She will be around 40 years…… I told her if she claims she loves me, then fine but as for me I don't love her because I have not achieved my dream yet, and also she's old enough to be my mother".
(18 years, first sex at 15 years)

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Of all these victims of sexual coercion, only one respondent expressed feelings of pleasure after his coercive experience. This respondent was a 12-year-old orphan, and the perpetrator was his older girlfriend.

"She asked if I had a girlfriend and I said no, and a whole lot of other questions. She then started to touch me….I was happy and we did it…What did you do?....We had sex..So how were you able to do it since you were a rookie?....She did almost everything and I followed".
(23 years, first sex at 16 years)

The age difference was less compared to other age disparate coercive relations. Although coercion was experienced by each respondent, the dynamics varied for each in relation to force versus pressured sex, power imbalance, among other things. Possibly, the intensity of power imbalance, and the tactics of coercion employed, and the intensity of the coercive act on the victim, influenced the degree of psychosocial or physical outcome resulting from the experience.

7.1.8 Coping and Adaptation to Coerced Sexual Debut

Respondents had adapted to their coerced sexual debut and had found ways to cope or overcome their experience. This was to prevent them from experiencing another coerced sexual encounter.

Victims' coping draws on different levels of the ecological framework. Their help seeking behaviours included reporting to a sibling or a friend. There was no account of reporting to a parent or guardian or reporting to the authorities. This was related to the fear of sanctions, and fear of non-conformity to culturally expected normative behaviours.

"How many people know about you and her?....Two people…What exactly did they say about it?....One is a God fearing person so he advised me not to do it again but my other friend said it doesn't matter so I should continue".
(20 years, first sex at 11 years)

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From their accounts, it was realized that reporting to friends or siblings did not yield any progressive results. Boys normalised and accepted their coerced sexual encounter.

"I told some of them (friends) but they didn't say anything beneficial to me, they just laughed at me".
(20 years, first sex at 11 years)

Respondents also described coping by avoiding situations they perceived to be risky or similar to their initial coerced experience. A respondent narrated as follows:

"Because I decided I was not going to her place any more. If I don't go there that thing won't happen, it was because I was going there that was why it happened that way, so if I don't go there nothing will happen".
(17 years, first sex at 10 years)

Other respondents also drew on their religiosity for spiritual support.

"Not long after it happened I got into contact with the people of God and I changed….I chose the first one because I realized that the second advice might bring an end to my education and my walk with God. This is because I might not concentrate, also the girls might demand a lot and when I don't have and they pressure me, I might use other means to get it for them which might bring me problems".
(20 years, first sex at 11 years)

In summary, boys' experience force or pressure to engage in sexual intercourse. Pressure for boys to engage in sex is not only limited to pressure from peers. Being forced by an older female is not a myth, and not a situation glorified by victims as has been the popular notion in society. Young males unwanted sexual debut could be pressured, physically or non-physically forced, where perpetrators employ various tactics including physical and psychological tactics, social or economic pressures, and cultural expectations. Their subsequent feelings after their coerced sexual debut are anything but positive, from feelings of guilt to acceptance and normalising of such behaviour.

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Gender norms that encourage dominance and toughness among males are not a disadvantage for only females in experiencing forced or coerced sex by male perpetrators. It does not portray a holistic picture. If anything, males face a double jeopardy, where norms of masculinity can also leave them vulnerable to being victims of sexual coercion by older females.

In keeping with culturally expected behaviour of hegemonic masculinity, it is believed boys will least likely to report their victimisation for redress. This is further exacerbated by the power imbalance where older female perpetrators have the advantage of using their age difference and caregiving roles to coerce their young wards into sexual intercourse.

Of relevance to victims seeking help is their ascribed meanings to their sexual encounter due to the non-consensual circumstances. Coerced sexual intercourse occurred more at younger ages, reducing as age increased in the adolescent ages. Research suggests that among young males, sexual coercion occurs more among younger males than younger females, but in the adolescent ages from about 15 to 19 years, it is higher among females (Erulkar, 2004; Haile et al., 2013; Jejeebhoy et al., 2005a).

Boys‘ first sexual intercourse is often not safe. Given that sexual coercion is not volitional, boys‘ self-efficacy prior to sexual debut may not ensure their ability to practice safe sex or opt for condom use.

Synthesis of quantitative and qualitative data added depth to the discussion on older female-perpetrated sexual coercion of adolescent males in Ghana. The mix of quantitative and qualitative approaches has helped to offset the weakness of using a single approach, while drawing on the strength of a second (Creswell, 1997; Driscoll et al., 2007). For instance, quantitative methods used in this study enabled generalisation of findings to the study

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population, inferring magnitude and direction of the relationship between factors, and prediction and control of parameters(Creswell & Clark, 2011).

Quantitative methods helped to answer questions of _when', _how', _what' or _which'. This approach was, however, weak in answering _why', or getting at the nuanced interpretations of sexual coercion. A review of the extant literature on sexual coercion (where for the most part studies have relied on survey data) highlights this weakness. Results have mostly centred on prevalence rates and correlates, without exploring respondents' lived experience in-depth (Jejeebhoy & Bott, 2003; Jejeebhoy et al., 2005a; Letamo, 2015).

Synthesis of qualitative data for this study corroborates findings from the quantitative data, going further to explain several outcomes, and adding new insights to our understanding of sexual coercion of adolescent males.

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CHAPTER EIGHT

Summary of Findings, Conclusion and Contribution, Limitations and Recommendations

8.0 Summary

Societies have forms of sexual victimisation that are socially proscribed and others that are tolerated, or in fact encouraged, by custom and norms. Most societies condemn sex between adults and children, and forced sexual intercourse with the unmarried. A male being initiated into sex by an older and sexually experienced woman, amid age and economic asymmetries is believed to be glorified by males. Amazingly absent from most cultural definitions of abuse are the volition, perceptions and feelings of the boy or young male. Often, the context of an act (who did it to whom and under what circumstances) is more important in defining its moral and social acceptability than the act itself or its impact on the young male victim.

To understand these nuances, this thesis set out to examine the context of young males' coerced sexual debut using data from two communities in southeastern Ghana. The data for this study came from Waves 1, 2 and 3 of the US National Institutes of Health (NIH) funded longitudinal panel study (LPS), the Gendered Social Context of Adolescent HIV Risk Behaviour in Ghana (GSC survey) conducted in two towns in southeastern Ghana; Agormanya in the Eastern region and Juapong in the Volta region. Using a mixed-methods approach integrating in-depth interviews (IDIs) with survey data (LPS), 215 male youth were sampled for analyses.

Sampled males were unmarried, and had all reported of a first sexual intercourse. The majority were Krobo/Dangbe, about a third were Ewes, with the rest being other ethnic minorities including Akan. Respondents' age ranged from 13 to 24 years, with a mean sample

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age of 18.8 years. All the boys had achieved at least primary to senior high school education, the highest proportion (45.58%) attaining junior high school education. Drop-out rate of approximately 37% was quite high. Characteristic of the study area, almost all the boys were Christians. Approximately three-quarters of the respondents' parents were alive; the remaining quarter of respondents were orphans and had lost either a parent or both.

The three study objectives were achieved. First, was to determine the level of sexual coercion of young males by describing the frequency of the use of force and pressured sexual debut. The findings showed that early age at sexual intercourse was a common occurrence among the 215 young male respondents. More than half of these youth had transitioned before they turned 16 years old. A high prevalence of coercion at sexual debut was recorded, where almost a third of the boys had been either forced or pressured into sexual intercourse. Specifically, of all first sexual intercourse, 18.6% reported being pressured and 9.3% reported being forced. Of the 27.9% of non-consensual sex cases, the prevalence of older female perpetrated sexual coercion against adolescent males was 42%. Age mixing was found to have significant import on males' experience of coerced first sex ($p<0.05$).

The second objective was to determine the predictors of sexual coercion of young males by testing for the effects of socio-demographic variables, using bivariate and multivariate analyses. Several factors were found to have significant associations with sexual coercion. Using Bronfenbrenner's socioecological framework (1987), regression modelling of correlates that portend vulnerability to non-consensual sex were individual, community or household, and situational or relational level factors. Factors at these four levels were found to have import on young males' risk of experiencing coerced first sexual intercourse. Vulnerability to coercion at sexual debut was significantly predicted by age at sexual debut, religion, relationship to caregiver, locality of residence, wealth status, age difference between

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respondent and first sexual partner, and respondent's alcohol consumption at sexual debut. For example, younger age at sexual debut, a biological parent being the primary caregiver, residence in Juapong, consumption of alcohol, and first sexual partner being an older female were characteristic of increased vulnerability to sexual coercion at first sexual intercourse. Orphan status showed marginal association at 10% significance level. Respondent's schooling status, their parent/caregiver's educational status, and setting of sex debut were found not to be significant predictors of sexual coercion.

The third objective was to assess the nature of sexual coercion experienced by young males by synthesizing qualitative data using a thematic analytical framework. At the centre of the thematic network was sexual coercion of young males at sexual debut by older female perpetrators. Eight organising themes were identified to provide context to this unwanted experience. Respondents' accounts suggested that pressure and non-physical force were the most common forms of sexual coercion experienced at their debut. Of the eighteen narratives, there were three rape cases using physical force. Perpetrators employed diverse coercive tactics on their victims including verbal insistence, baiting with gifts, use of threats, fondling, emotional manipulation, taking advantage when victim was intoxicated with alcohol, etc. Victims felt a range of negative psychosocial effects after their encounter including shame, guilt, fear of STIs, regret and animosity towards females. With the exception of one case, all transitions to first sex were risky, where condoms were not used with a sexually experienced older female. These young male victims tended not to report their experience; the few who did recounted to either a friend or a sibling, but none to a parent or guardian. Their reasons for not reporting spanned fear of sanctions, or being branded a deviant. When asked how they were dealing with their experience, they recounted several coping strategies including avoiding settings they perceived to be risky and resorting to religion. Finally, accounts of their current behaviours suggests high sexual risk-taking among these male youths, including

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multiple and serial sexual partnerships even at such young ages and non-condom use. On the other hand, respondents admitted how their experience had precipitated sexual abstinence.

8.1 Conclusion and Contribution

This study has notable findings and implications. First and foremost, we have empirical evidence that shows that:

- Males are coerced at sexual debut.
- They are coerced into sex by older females.
- Sanctions for boys victimised by older women are very strict. This could be as a result of constrains posed by norms of masculinity, and unacceptable deviation from gendered sexual scripts.
- The fact that boys can be physically stimulated or aroused to get a penile erection, does not conventionally mean they desire to have sex. The presence of an erection should not discount the absence of consent.

We can begin to query notions that boys cannot be raped by women.

Similar to studies which show evidence of ―virgin" infections among females, and what it portends for data quality, this study provides insight for the case of males. Results showed that young males who had experienced sexual coercion prescribed meanings to what sexual intercourse was, and were likely to report they had never had sex because of the context of their experience. Besides, traditional norms of male sexuality prescribe males to be pursuant in sexual relations, therefore any other script is seen as a deviation. No systematic study as yet showing evidence of the quality of data on adolescents' transition into unwanted or non-consensual sex in surveys from the developing countries. The accounts from this study begin

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to question conventional measure of ‗ever had sex' without considering contexts and meanings of what sexual intercourse is to the respondent. This has implications for the quality of data and resulting conclusions for policy and interventions.

In addition, qualitative methodology in this study adds context and allows us to capture more accurate information on adolescents' transition into sexual intercourse, which was otherwise elusive in the survey. This was therefore an advantage over using only quantitative methodology. Some adolescents reported as virgins in the surveys but their in-depth narratives, revealed that they were not. This is because of the unwanted circumstances of their initial sexual encounter. The mixed method is therefore a potential control of misreporting.

Findings from the quantitative analyses have relevance in their contribution to the literature on determinants of young males' transition into wanted and unwanted first sexual intercourse. It also has relevance for the advancement of a framework within which related studies can be situated or adapted to.

The study results also find relevance in their contribution to theory. First, they have implications for theory revision in the study of adolescent males' unsafe sexual practices. Findings here would suggest gaps in the application of mostly cognitive decision-making theories in accounting for risky sexual behaviour such as condom non-use at sexual debut. The decision-making frameworks that have mostly been applied to adolescents' practice of safe or unsafe sexual behaviours (Ajzen, 1991; Fishbein & Ajzen, 1975; Rogers, 1975; Rosenstock, 1990) assume that individuals will be motivated to use condoms, once they are convinced that the benefits of doing so outweigh the drawbacks. The general ‗one cup fits all' perspective alluding to rational choice in opting for safe sex does not fit coercive circumstances where adolescent males unknowingly fall prey to unwanted sexual encounters.

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Their vulnerability to negotiate safe sex is heightened by relational power imbalance (age and economic asymmetries, and type of relations to partner). We can therefore begin to appreciate that safe sex may not always be an option available to all males who transition into sexual activity, and dire implications on subsequent behaviours warrants a critical examination of situating adolescents non-use of condoms under deviant behaviour and reasoned action models.

Not only do power dynamics strip young males of their sexual agency, it affects their subsequent actions especially their decision to report their encounter or seek for help. Power dynamics also have implications on how male victims may even perceive their sexual experience as coerced or if they had been taken advantage of, and whether they normalize such experience. For instance, age imbalance was found to be a significant determinant of young males' unwanted sexual debut, superseding other socioeconomic disparities. The cultural association of age with respect and authority by adolescents creates that power imbalance which leaves them vulnerable to sexual coercion at the hands of caregivers especially house maids and other mother figures. Besides the influence of power dynamics, the inability of adolescent males to give consent legally prior to the age of 16 years, makes all such cases of sexual intercourse with older females, rape.

Second, the study finds relevance in Ruth Dixon-Mueller's (2003) sexuality and reproductive health connection framework (modified by Varga, 2001) which has five dimensions. This study proposes the dimension of power dynamics, and the inclusion of sexual meaning beyond the dichotomy of homo- and heterosexuality. In so doing, the framework is more inclusive of non-consensual sex of males and victimisation.

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8.2 Recommendations

The data and findings using GSC data has provided and strengthened the evidentiary basis for studying unwanted sexual experiences of boys in southeastern Ghana, which has been a difficult endeavour due to the paucity of data. These data and findings are important in enabling programme managers to know who is being forced to have sex, and the enabling factors, so that programmes and interventions can be appropriately targeted.

There is the need for definitional clarity on sexual intercourse. First, to get at the actual prevalence of sexual coercion of males, and aim at bridging the gap in high non-disclosure of this phenomenon, we can begin to acknowledge meanings and interpretations victims of coercion give to their experience. The question of sexual intercourse against one's will should be put to all persons in the survey (not only as a follow-up for respondents who have ever had sex) in order to ensure that respondents have not erroneously reported never having sex because they were not including forced or pressured sex in their replies.

For future interventions, the results from this study can provide sensitisation to the perpetration of sexual coercion by females, thereby acknowledging male victimisation. Moreover, academics, health professionals and stakeholders in adolescent SRH can better assess for sexually coercive experiences and potential psychosocial and behavioural consequences, as well as negative educational outcomes. Educators can also use results from this study to add on to sexuality education for young males about sexual coercion awareness and identifying consensual versus coerced sexual experiences. Intervening at an early age while attitudes to gender and sex are developing among girls and boys could empower young people and help them to develop healthy relationships, free from coercion.

Engaging in culturally specific interventions that intersect with gender is particularly important. One such way to do this would be to openly discuss cultural considerations of

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male sexuality within Ghanaian communities. This can potentially support greater disclosure of sexual coercion experiences.

For Ghanaian youth, challenging notions of masculinity through critical media literacy would be another recommendation for the prevention of sexual coercion. Furthermore, much of the research that describes sexually coercive experiences of males could potentially be normalized, as many of the experiences males in our study described are part of common sexual scripts. As such, future research on male coercive experiences may consider examining masculinity and sex roles as moderating components.

Parents should be vigilant of the caregiving their wards receive, as they leave children in the care of housemaids and other maternal figures; who have not only the means, but the opportunity to coerce the children into unwanted sexual activity. This also has implication for the scarce parent-child sexual communication studies, which have usually focused on condom use, risky behaviours and abstinence. Subsequent research in this domain should interrogate parental communication on sexual coercion with their wards, and the vulnerabilities thereof.

Findings from the study revealed that alcohol consumption was a significant risk factor to young males‘ experience of coercion at sexual debut. Advertisement of alcoholic beverages may appeal to underage males who may consume without much knowledge of their detrimental effects. The availability and access to alcoholic beverages should be monitored by adolescents‘ guardians and appropriate regulatory bodies to curtail the incidence of sexual coercion.

Empirical findings from the study show that the consequences for males may not be different from that of females. If the same issue among females has been acknowledged as a public health concern, and warranted investigation in most nationally representative surveys on

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adolescents, then it is recommended that a similar research focus be given to males. Demographic and Health Surveys should move beyond asking about age at sexual debut only for males. Salient issues on the context under which they experienced their transition into first sexual intercourse should be included. This could go a long way to improve data quality and allow data gathered across different contexts to be measured in a more consistent way so as to increase comparability.

More qualitative research is also recommended to add context to males' non-consensual sexual experiences in the sub region. It will also be relevant in employing this approach in conceptualising the profiles of female perpetrators of sexual coercion.

There is further need to advance conceptualisation of sexual coercion of males. In the hope of formalising a framework in which to study sexual coercion of young males, greater research attention should be paid to this phenomenon. Future studies will also aim to study the link between coerced initiation and subsequent risky sexual behaviours. Also, coercion from the perpetrator's perspective could be included in future studies on this issue since there is a link between being a victim of unwanted sexual contact and being a perpetrator. In this way, addressing sexual coercion of young males is critical to ending the cycle of abuse by older females.

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APPENDICES

Appendix A

Gendered Social Contexts in Ghana Project

Wave 1 Household Roster and Personal Background Instrument: Youth Participants

DATE: | | | / | | | / | | | | | **INTERVIEWER ID:** | | | **SAMPLED YOUTH (SY) ID:** | | | | | | |
D D M M Y Y Y Y # # # # # # # # #

Thank you very much for the time and information you are contributing to this research study. This interview should take us about 2 hours. To begin, I would like to find out a little bit about the people who usually live in your household or who stayed in your household last night: their names, ages, and some other background information about them. So, please think about all of the people who usually live in your household, or who stayed in your household last night.

	A. FULL NAME	B. SEX	C. AGE	D. RELATIONSHIP TO SY	E. MARITAL STATUS	F. USUAL	G. LAST NIGHT
	Beginning with yourself, please give me the names of everyone who usually lives in your household or who stayed in your household last night. PROBE: Any others?	Is [NAME] male or female? M = Male F = Female	How old is [NAME]? (in years) DK = Don't know	How is [NAME] related to you? (see codes below)	What is [NAME'S] marital status? Is he/she: 1 = never married 2 = currently married 3 = consensual union 4 = divorced/separated 5 = widowed	Does [NAME] usually live here? 1 = Yes 2 = No	Did [NAME] stay here last night? 1 = Yes 2 = No 3 = Don't know
Z1							
Z2							
Z3							
Z4							
Z5							
Z6							
	CODES FOR RELATIONSHIP TO SY: 1 = SY/Self 2 = Mother/Father, 3 = Step-Mother/Step-Father, 4 = Sister/Brother, 5 = Aunt/Uncle, 6 = Grandmother/Grandfather, 7 = Cousin, 8 = Nephew/Niece, 9 = Half-Sibling, 10 = Wife/Husband, 11 = Mother/Father-in-Law, 12 = Sister/Brother-in-Law, 13 = SY's Child, 14 = Girlfriend/Boyfriend, 15 = Friend, 16 = Other						

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Now I would like to find out a few things about your personal background. Let's begin.		
Z26 **CIRCLE CODE FOR SEX OF RESPONDENT**	Male…… 1 Female…….. 2	
Z27 **In what month and year were you born?**	Month…… ___ ___ (Don't know month = 99) Year…… ___ ___ ___ ___ (Don't know year = 9999)	
Z28 **How old are you?**	Age in completed years….. ___ ___	
Z29 **How long have you been living here in this area?**	Whole life…….. 1 More than 5 years…… 2 Between 1 and 5 years…… 3 Less than 1 year……... 4 Don't know…… 5	
Z30 **What ethnicity are you?**	Ewe…….. 1 Krobo…….. 2 Other Dangme…….. 3 Ashanti……... 4 Other Akan…… 5 Ga……... 6 Other…….. 7	
Z31 **Is your biological mother still living?**	Yes…….. 1 No…… 2 Don't know…….. 3	**→Continue** **→Skip to Z34** **→Skip to Z35**
Z32 **Do you live in her household?**	Yes…….. 1 No…… 2	**→Skip to Z35** **→Continue**
Z33 **Where does she live now?**	Same town/village…… 1 Same district…….. 2 Same country…… 3 Different country……... 4 Don't know…… 5	**Skip to Z35** **Skip to Z35** **Skip to Z35** **Skip to Z35** **Skip to Z35**
Z34 **In what year did she die?**	Year…… ___ ___ ___ ___ (Don't know year = 9999)	

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Z35	**Is your biological father still living?**	Yes…….. 1 No…… 2 Don‘t know…… 3	**→Continue** **→Skip to Z38** **→Skip to Z39**
Z36	**Do you live in his household?**	Yes…….. 1 No…… 2	**→Skip to Z39** **→Continue**
Z37	**Where does he live now?**	Same town/village…… 1 Same district…… 2 Same country…… 3 Different country…….. 4 Don‘t know…… 5	**Skip to Z39** **Skip to Z39** **Skip to Z39** **Skip to Z39** **Skip to Z39**
Z38	**In what month and year did he die?**	Year…… ___ ___ ___ ___ (Don‘t know year = 9999)	
Now I will ask some questions to find out about the circumstances of your household.			
Z39	**Compared to other households around here, would you say that the household you live in is wealthier than most, fairly typical in terms of wealth, or poorer than most?**	Wealthier than most……. 1 Fairly typical…….. 2 Poorer than most…….. 3 Don‘t know…… 4	
Z40	**Does your household have electricity?**	Yes…… 1 No…… 2	
Z41	**Does your household have a radio?**	Yes…… 1 No…… 2	
Z42	**Does your household have a television?**	Yes…… 1 No…… 2	
Z43	**Does anyone in your household have a mobile phone?**	Yes…… 1 No…… 2	
Z44	**Does your household have a refrigerator?**	Yes…… 1 No…… 2	
Z45	**Does your household have a flush toilet?**	Yes…… 1 No…… 2	
Z46	**Does anyone in your household have a working motorcycle or scooter?**	Yes…… 1 No…… 2	
Z47	**Does anyone in your household have a working car or truck?**	Yes…… 1 No…… 2	

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Next I'd like to ask some questions to find out how much schooling you have had.		
Z48	**Have you ever attended primary school?**	Yes…… 1 **→Continue** No…….. 2 **→Skip to Z64**
Z48	**How old were you when you first started attending school? (completed years)**	WRITE IN AGE……. ____ ____ (Don't know age = 99)
Z50	**What is the highest level of school you have attended: Primary, Middle/JSS, Secondary/SSS, or higher?**	Primary…….. 1 Middle/JSS…… 2 Senior/SSS…… 3 Higher…… 4
Z51	**What is the highest grade you completed at that level?**	WRITE IN GRADE…… ____ ____
Z52	**Are you currently attending school?**	Yes…… 1 **→Continue** No…… 2 **→Skip to Z54**
Z53	**What level and grade are you attending?**	Primary…….. 1 **→Skip to Z58** Middle/JSS…… 2 **→Skip to Z58** Senior/SSS…… 3 **→Skip to Z58** Higher…… 4 **→Skip to Z58** WRITE IN GRADE…… ____ ____
Z54	**During the current school year, did you attend school at any time?**	Yes…… 1 **→Continue** No…… 2 **→Skip to Z56**
Z55	**During the current school year, what level and grade were you attending?**	Primary…….. 1 **→Skip to Z58** Middle/JSS…… 2 **→Skip to Z58** Senior/SSS…… 3 **→Skip to Z58** Higher…… 4 **→Skip to Z58** WRITE IN GRADE…… ____ ____
Z56	**During the previous school year, did you attend school at any time?**	Yes…… 1 **→Continue** No…… 2 **→Skip to Z62**
Z57	**During the previous school year, what level and grade are/were you attending?**	Primary…….. 1 Middle/JSS…… 2 Senior/SSS…… 3 Higher…… 4

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		WRITE IN GRADE…… ____ ____
Z58	**Is/was your school for both girls and boys, or only for girls/boys?**	Boys and Girls…….. 1 Only Girls……... 2 Only Boys…….. 3
Z59	**Is/was your school a public non-religious school, a public religious school, a private non-religious school, or a private religious school?**	Public nonreligious…… 1 Public religious…….. 2 Private nonreligious……. 3 Private religious…… 4
Z60	**Are/were you a day pupil or a boarder at the school?**	Day Pupil…… 1 Boarder…….. 2
Z61	**At your school, how often do/did teachers keep an eye on pupils to make sure that they were not getting into trouble? Was it almost always, sometimes, or almost never?**	Almost always…….. 1 Sometimes…… 2 Almost never……. 3 Don‘t know…… 4
Z62	**CHECK Z39. IF RESONDENT IS CURRENTLY IN SCHOOL, SKIP TO Z52. IF RESPONDENT IS NOT IN SCHOOL, ASK:** **What was the main reason you stopped attending school?**	Could not pay fees……... 1 Lack of school materials…. 2 Completed……. 3 Got pregnant……. 4 Got married…… 5 Illness……. 6 Work at home…… 7 Not interested…… 8 Not a good student…….. 9 Got a job…… 10 Other…….. 11 Don‘t know…… 12
Z63	**How old were you when you stopped attending school? (completed years)**	WRITE IN AGE……. ____ ____ (Don‘t know age = 99)
Z64	**Do you think you will attend school at any time in the future?**	Yes…….. 1 **→Continue** No……. 2 **→Skip to Z66** Don‘t know……. 3 **→Skip to Z66**
Z65	**What is the highest level of school you think you will complete?**	None…….. 1 Primary……... 2 Middle/JSS…… 3 Senior/SSS…… 4 Higher……. 5
Z66	**Have you ever received any vocational training or had an apprenticeship?**	Yes……. 1 No……. 2

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Z67	**What church, mosque, or religious denomination, if any, are you affiliated with?**	Catholic…… Anglican…… Methodist……... Presbyterian…… Pentecostal…… Charismatic…….. Seventh Day Adventist…… Church of Jesus Christ…… Jehovah's Witness……... Other Christian…….. Muslim…… Traditional/Spiritualist…….. No Religion (Atheist)…… Other……...	1 2 3 4 5 6 7 8 9 10 11 12 13 14	

Okay, the next several questions deal with sexual behaviors and pregnancy. For some people, these topics are private matters and can be embarrassing to discuss. I appreciate any information you may be willing to share with me on these topics. I also want to remind you that you are free to skip any question that you do not want to answer. In fact, for our research, we would rather have you skip a question than give inaccurate information. So please, if you do not want to answer a question or feel that you cannot answer it honestly, please just ask me to skip ahead to the next question and I will be happy to do so. Let's begin.

A104	**Have you ever had a GIRLFRIEND/BOYFRIEND?**	Yes…….. No…….....	1 2	**→Continue** **→To A108**
A105	**Is that relationship ongoing, or has it ended**	Ongoing……. Ended…….	1 2	**→To A107** **→To A106**
A106	**How long did that relationship last?**	Less than one week……. Between 1 week and 1 month…… Between 1 and 3 months…… Between 3 and 6 months…… Between 6 months and 1 year…… More than one year……..	1 2 3 4 5 6	**→To A108** **→To A108** **→To A108** **→To A108** **→To A108** **→To A108**
A107	**And how long have you been in this relationship**	Less than one week……. Between 1 week and 1 month…… Between 1 and 3 months…… Between 3 and 6 months…… Between 6 months and 1 year…… More than one year……..	1 2 3 4 5 6	**→Continue** **→Continue** **→Continue** **→Continue** **→Continue** **→Continue**
A108	**Have you ever in your life had sexual intercourse? By sexual intercourse, I mean a man inserting his penis into a woman's vagina.**	Yes…….. No……..... Can't/Won't answer……..	1 2 3	**→Continue** **→To A127** **→To A127**
A109	**How old were you the first time you ever had sex?**	WRITE IN AGE……. (Don't know = 99)	____ ____	

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A110	**The first time you had sex, would you say that you wanted to have sex, it just happened, you were pressured into doing it, or you were forced to do it?**	Wanted to have sex…….....	1	
		It just happened……	2	
		Pressured into doing it….....	3	
		Forced to do it……...	4	
A111	**The first time you had sex with this partner, how did you feel about it? Would you say you felt…**	Very happy……	1	
		Happy……	2	
		OK……	3	
		Unhappy……	4	
		Very unhappy…..……	5	
		Other……	6	
		Don‘t know…….	7	
A112	**The first time you ever had sex, was your partner five or more years older than you?**	Yes……...	1	**→To A114**
		No…….....	2	**→Continue**
		Don‘t know……...	3	
A113	**The first time you ever had sex, was your partner five or more years younger than you?**	Yes……..	1	
		No…….....	2	
		Don‘t know……...	3	
A114	**How would you describe your relationship to that person at the time you first had sex? Would you say that he was**	Your girlfriend/boyfriend……..	1	
		An ordinary friend……	2	
		A casual acquaintance….....	3	
		A stranger……...	4	
		A teacher…….....	5	
		An employer……...	6	
		A relative…….....	7	
		Someone else……..	8	
		Don‘t remember…….....	9	
A115	**The first time you had sex, did you or your partner use a condom?**	Yes……	1	
		No…….....	2	
A116	**The first time you had sex, was any other form of birth control used?**	Yes…….	1	**→To A118**
		No…….....	2	
A117	**What method or methods did you and your partner use the first time you had sex?**	Pill……	1	
		IUD…….	2	
		Norplant…….	3	
		Diaphragm……	4	
		Vaginal spermicide……..	5	
		Emergency contraception……	6	
		Withdrawal…….	7	
		Other……	8	
		Don‘t remember…….....	9	
		Don‘t know…….	10	
A118	**The first time you had sex with this partner, had you been drinking alcohol?**	Yes……..	1	
		No…….....	2	
		Don‘t know…….	3	

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A119	**The first time you had sex with this partner, had your partner been drinking alcohol?**	Yes…….. 1 No……..... 2 Don‘t know…….. 3
A120	**The first time you had sex with this partner, where did this happen?**	At your house……..... 1 At your partner‘s house……..... 2 At someone else‘s house..... 3 School compound or classroom… 4 In the bush……. 5 A drinking bar or club…….. 6 Other…….. 7 (Specify: _____)

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Appendix B In-depth Interview Guide 1

FOCUSED ON FIRST SEX

n=10 members of the younger cohort who experienced coerced sexual debut

1. What kind of experience do you have with friendships with the opposite sex? What about romantic relationships?
2. Interviewer: solicit a detailed account of first sexual experience.
    a. INTERVIEWER probe on
        i. Consent
        ii. Condom use & contraception
        iii. The relationship that preceded it and what happened subsequently.
3. What about the relationships you have had since that first experience? Can you tell me more about those? Sexual and romantic ones that have not been sexual.
4. How do you think your first experience with sex has informed how you think about and manage sex and relationships since then, now, and into the future?
5. How have these experiences inform how you think about the relationships you might have in the future?
6. What kinds of factors (parental, peers, religious, community) have influenced how you think about sex and relationships?
7. What is your perception about your risk to HIV/AIDS and other STIs?
8. What actions do you take to reduce this risk?
9. How different from or similar to [parents….peers] are your own ideas about sex and relationships? What about your own behaviours?
10. Please think about your ideal sex life and describe to me how you think it will be.
11. How do/will you go about attaining these personal ideals?
12. What aspects of these ideals might unattainable or difficult to attain?

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Appendix C In-depth Interview Guide 2

FOCUSED ON SEXUALLY INEXPERIENCED RESPONDENTS

n=10 members of the older cohort who remained sexual inexperienced

1. What kind of experience do you have with friendships with the opposite sex?
2. What about romantic relationships?
3. What kinds of factors (parental, peers, religious, community) have influenced how you think about sex and relationships?
4. What types of social pressures (parental, peer, and community) have you experienced in your life so far?
5. How have you navigated these?
6. What aspects of these relationships (friendships and romances) do you find are within your ability to control?
7. Which have been more difficult to manage?
8. What have been the positive and negative aspects of these relationships?
9. How have these experiences inform how you think about the relationships you might have in the future?
10. What is your perception about your risk to HIV/AIDS and other STIs?
11. What actions do you take to reduce this risk?
12. How different from or similar to [parents….peers] are your own ideas about sex and relationships? What about your own behaviours?
13. Please think about your ideal sex life and describe to me how you think it will be.
14. How do/will you go about attaining these personal ideals?
15. What aspects of these ideals might be unattainable or difficult to attain?

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Appendix D In-depth Interview Guide 3

FOCUSED ON CONDOM USE

n=10 members of the younger cohort who reported condom use at sexual debut;

1. What kind of experience do you have with friendships with the opposite sex?
2. What about romantic relationships?
3. What kinds of factors (parental, peers, religious, community) have influenced how you think about sex and relationships?
4. What types of social pressures (parental, peer, and community) have you experienced in your life so far?
5. How have you navigated these?
6. What aspects of these relationships (friendships and romances) do you find are within your ability to control?
7. Which have been more difficult to manage?
8. What have been the positive and negative aspects of these relationships?
9. How have these experiences inform how you think about the relationships you might have in the future?
10. What is your perception about your risk to HIV/AIDS and other STIs?
11. What actions do you take to reduce this risk?
    a. INTERVIEWER PROBE ON
        i. Partner selection
        ii. Contraception & condom use
12. How different from or similar to [parents….peers] are your own ideas about sex and relationships? What about your own behaviours?
13. Please think about your ideal sex life and describe to me how you think it will be.
14. How do/will you go about attaining these personal ideals?
15. What aspects of these ideals might unattainable or difficult to attain?

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Appendix E Distributions of Background Characteristics across Categories of the Dependent Variable

Background Characteristic	Category	Forced Sexarche N (%)	Pressured Sexarche N (%)	Wanted Sexarche N (%)	Just happened N (%)	Total
Individual Level						
Religion	Christian	98.61	91/57	92.50	90.00	93.95
	Muslim	1.39	7.23	5.00	10.00	5.12
	Other	0	1.20	2.50	0	0.93
Ethnicity	Krobo/Dangbe	62.50	59.04	37.50	40.00	54.42
	Ewe	26.39	26.51	50.00	45.00	32.56
	Other Minority	11.11	14.46	12.50	15.00	13.02
Schooling Status	In School	40.28	48.19	62.50	55.00	48.84
	School Dropout	59.72	51.81	37.50	45.00	51.16
Education	Primary	29.17	31.33	27.50	40.00	30.70
	Middle/JHS	51.39	45.78	40.00	35.00	45.58
	Senior/SSS	19.44	22.89	32.50	25.00	23.72
Orphan Status	Both Parents Alive	68.06	77.11	90.00	60.00	74.88
	One Parent Alive	25.00	19.28	7.50	40.00	20.93
	Both Parents Dead	6.94	3.61	2.50	0.00	4.19
Interpersonal Level						
Relationship To Caregiver	Biological Parent	38.89	51.81	57.50	35.00	46.98
	Step-Parent	9.72	6.02	10.00	15.00	8.84

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	Grandparent	12.50	12.05	10.00	10.00	11.63
	Other Relative	25.00	24.10	20.00	20.00	23.26
	Non-Family	13.89	6.02	2.50	20.00	9.30
Marital Status of Caregiver	Not In Union	62.50	48.19	55.00	50.00	54.42
	In Union	37.50	51.81	45.00	50.00	45.58
Educational Status of Caregiver	Educated	36.11	22.89	20.00	50.00	29.30
	Not Educated	63.89	77.11	80.00	50.00	70.70
Household/Community Factors						
Locality	Low HIV Locality	33.33	39.94	57.50	55.00	40.47
	High HIV Locality	63.67	65.06	42.50	45.00	59.53
Wealth Status	Poorest	16.67	22.89	25.00	30.00	21.86
	Poorer	23.61	19.28	15.00	20.00	20.00
	Middle	19.44	20.48	17.50	20.00	19.53
	Richer	31.94	24.10	17.50	10.00	24.19
	Richest	8.33	13.25	25.00	20.00	14.42
Relational Factors						
Relationship To Partner	Non-Stranger	93.06	84.34	77.50	95.00	86.98

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	Stranger	6.94	15.66	22.50	5.00	13.02
	Total					
Age-Based Power	<5 years Age Difference	2.78	24.10	17.50	45.00	17.67
	>5 years Age Difference	97.22	75.90	82.50	55.00	82.33
Setting of Sex Debut	Respondent‘s House	45.43	48.19	30.00	25.00	41.86
	Partner‘s House	16.67	18.07	47.50	40.00	25.12
	Someone‘s House	29.17	19.28	12.50	15.00	20.93
	Other Place	8.33	14.46	10.00	20.00	12.09
Alcohol Use At Sex Debut	No	98.61	95.18	55.00	55.00	85.12
	Yes	1.35	4.82	45.00	45.00	14.88

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Appendix F Principal Components Analysis (PCA) for Wealth Index

Total Variance Explained

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	2.609	32.610	32.610	2.609	32.610	32.610	2.202	27.526	27.526
2	1.094	13.680	46.290	1.094	13.680	46.290	1.425	17.812	45.339
3	1.048	13.095	59.385	1.048	13.095	59.385	1.124	14.046	59.385
4	0.903	11.282	70.667						
5	0.752	9.404	80.071						
6	0.677	8.459	88.530						
7	0.494	6.174	94.704						
8	0.424	5.296	100.000						

Extraction Method: Principal Component Analysis.

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Component Matrix[a]

	Component		
	1	2	3
Does your household have electricity?	0.614	-0.347	0.248
Does your household have a radio?	0.608	-0.246	-0.384
Does your household have a television?	0.797	0.046	-0.061
Does anyone in your household have a mobile phone?	0.567	-0.196	-0.346
Does your household have a refrigerator?	0.736	-0.060	0.145
Does your household have a flush toilet?	0.429	0.605	0.284
Does anyone in your household have a working motorcycle or scooter?	0.246	0.694	-0.472
Does anyone in your household have a working car or truck?	0.342	0.145	0.625

Extraction Method: Principal Component Analysis.
a. 3 components extracted.

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Appendix G Age at Sexual Debut and Schooling Status

Context of Sexual Debut	Schooling Status		
	Not Schooling	Schooling	Total (N)
Less than 14 Years	19.05	11.82	15.35
14 – 17 Years	61.90	53.64	57.67
18 and Above	19.05	34.55	26.98
Total	100	100	100

Source: Computed from GSC survey data, 2010- 2014

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Appendix H Multiple Comparisons – Tukey's HSD (Honestly Significant Difference) Test

Pairwise Comparison (i vs. j)	Group Means (i, j)		Difference (i-j)	HSD-Test	P-Value	95% Confidence Interval	
Wanted vs. Just happened	16.611	16.000	0.611	1.366	0.534	-1.785	0.564
Wanted vs. Pressured	16.611	15.250	1.361	3.042	0.071	-2.799	0.077
Wanted vs. Forced	16.611	13.900	2.711	6.059*	0.001	-4.555	-0.867
Just happened vs. Pressured	16.000	15.250	0.750	1.676	0.511	-2.154	0.654
Just happened vs. Forced	16.000	13.900	2.100	4.693*	0.016	-3.917	-0.283
Pressured vs. Forced	15.250	13.900	1.350	3.017	0.301	-3.347	0.647

Source: Computed from GSC survey data, 2010- 2014

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Appendix I Characteristics of In-depth Interview Respondents

Respondent	Locality of Residence	Age	Age at sex debut	Ethnicity	In/Out of School	Relationship to perpetrator
R1	Juapong	20	9	Ewe	Out	House help
R2	Agormanya	18	15	Krobo/Dangbe	Out	Neighbour
R3	Juapong	17	13	Krobo/Dangbe	Out	Neighbour
R4	Juapong	20	15	Ewe	In	Older acquaintance
R5	Juapong	16	5	Ewe	In	House help
R6	Juapong	16	10	Ewe	In	Older acquaintance
R7	Agormanya	20	14	Krobo/Dangbe	In	Older girlfriend
R8	Agormanya	23	16	Krobo/Dangbe	out	Older girlfriend
R9	Juapong	20	11	Ewe	In	Stranger
R10	Agormanya	17	10	Krobo/Dangbe	In	Neighbour
R11	Juapong	22	13	Ewe	out	Older acquaintance
R12	Juapong	19	12	Krobo/Dangbe	In	Older girlfriend
R13	Juapong	18	12	Ewe	In	Older acquaintance
R14	Agormanya	18	13	Krobo/Dangbe	out	House help
R15	Juapong	20	10 or 11	Ewe	out	Older acquaintance
R16	Agormanya	20	15	Krobo/Dangbe	out	Older acquaintance
R17	Agormanya	22	14	Krobo/Dangbe	out	Neighbour
R18	Juapong	18	13	Ewe	In	Stranger

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Appendix J
Themes and Quotes

Organising Theme	Basic Theme	Sub-basic Theme	Sample Quotes
Sexual Meaning	Awareness	State of knowing/understanding	*"I was not scared because I wasn't aware that what she asked me to do was bad and besides she knew my sister was sleeping right there"* *(20 years, Ewe, Juapong, first sex at 9 years)*
	Readiness		*"I believe that if you want to have sex then you should be ready to have children and take very good care of them. I know some people do it for pleasure, but I have never tried it so I can't tell"* *"Had it not been for Ama…I would have never had sex till today; but it has already happened so I have to move on"* *(20 years, Ewe, Juapong, 15 years)* *"I told her if she claims she loves me then fine but as for me I don't love her because I have not achieved my dream yet and also she's old enough to be my mother, I can be either her first or second born of her children"*
	Definition		*"She came to talk to me; she walked up to me and told me she likes me, so she wants to be my girlfriend. I: How did you feel about it? R: Oh; you know, that day I actually told her that, girls are not supposed to ask boys out and that is should be the other way round. She told me not to say that, and that, that's how some people do it, so I told her ok. I: So, how did things continue?* *R: She would buy things and send them to me. I told her to stop because if her money gets finished and she ever asked me for money, I would not be in a position to help her. She told me not worry about*

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	Ascribed meaning to coercion	Ritual	*money at all" (19 years, Juapong, first sex at 12)* *"...they told me that as a man you need to be financially sound before you get yourself into any relationship. They also said that when you have sex with a girl, you are releasing your energy and nutrients in you into the woman (girl), hence you need to eat a lot of fruits to regain the lost nutrients. If after sex you don't have money to buy these fruits to eat, then gradually your strength would be fading away and you would have problems in the future"* *(Ewe, Juapong, first sex at 13 years)* *"Have you had sex before?...No...don't feel shy, this is confidential so feel free and tell me. Have you had sex before?....Not really ....what do you mean by not really?...It happened when we were kids....how old were you then? ....About 5 years old"* *"Have you ever had sex?....not that I remember but I told your friends who came earlier that when I was younger I remember that our house help did something of that sort me.* *how old were you at the time?.....I think I was about 9 or10 years old"* *"Have you had sex before?.... I haven't....Why?...Nothing....Have you mistakenly slept with a girl?...It happened before but long ago"* *"I think that it is because of money...What do you think about being in that kind of relationship?...I think it's a bad thing, because my grandmother told me that sometimes the women can use you for rituals to get money"*

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Type/Nature of Coercion into First Sexual Intercourse	Pressure		*"What do you think about your first time, did you want to do it?...I wouldn't have done it but because she was so persistent, I started to oblige with her and it happened….Why do you think she was persistent?...It is because she had a craving for it and since she saw me as a prey, she went for it"*
	Physical force		*"When she was forcing you, did she hold any part of your body?.. She held my hands and was trying to push me unto the bed"* *"It was not my intention, it was kind of a force, and I didn't even know she would do that to me. She just held my head strongly and started kissing me; so I also kissed her back and then we had sex"* *"When you say she started doing that mistake what do you mean?... She caused it because I wasn't ready to do that thing but she forced me so it's a mistake…How did she force you?.. I don't really know what got into her mind, I will say it was a mistake"*
	Non-physical force		*"….she was asleep, I was also asleep but she woke me up. She removed my shorts and started touching my penis. She then asked me to sleep on her and put my penis into her vagina and move up and down"*
Coercive Tactics/ Strategies	Grooming	Baiting using monetary incentives Baiting using gifts and other favours	*"Oh, when I was going there she was very good to me so I was thinking she was going to help me in the future, because when I go there she cooks for me to eat and when I am leaving she gives me money so I was just thinking she will help me in future. When I need to buy a book at school and I tell her she gives me the money to go*

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			and buy it so I just thought she would help me in future before that happened"
			"She kept on inviting me to her house but I declined her invitations. She persisted, she never stopped; she sent gifts to me through my friends"
	Emotional Manipulation	Threats to end relationship	*"At first I told her I won't, because thinking of me being a Christian and it's of no importance to do it. So I decided not to do it, but she kept pressuring me and finally we did it because I was thinking if I don't do it and she goes, she will never come back again, I really like her"*
		Fear of abandonment	
	Physical Manipulation	Exposure of genital area and breasts	*"She had a cloth strapped around her; their room was a chamber and hall. I was in the hall and she was in the inside then she called me to come inside and have a look at something. When I entered the room, she was standing behind the door and she shut the door and removed the cloth….What did you see?.. I saw her breast and her vagina"*
		Fondling	
		Use of body to trap victim	*"She started rubbing her hands all over my body while I was sleeping and before I woke up she was naked and I asked her why. She said don't I know what men and women do in a room when they are sleeping and I said no what was the meaning of that. I felt she was just tempting me so I went back to sleep but she started again"*
	Alcohol Use		*"She took me home while so drunk that the only thing I saw was the next day and realised something happened, so I asked her and she said it wasn't her fault. I felt so shy and ashamed because we were not in that terms……., I only found myself and her naked the next day in my room, so I can't tell which one of us took the first step but*

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	Peer Influence Gendered Sexual Scripts (cultural expectations)		*am sure she did because I was drunk……I only found myself lying in a different place and she also in a different place but in the same room, after seeing am not in clothes and she also not in clothes, I knew something had happened and when I ask her she said something happened. I couldn't ask her much questions because I know I was drunk and could be my fault"* *"There was one guy there, he is called Issah, and he told me that when she comes, I should allow her so that he sees what she wants and I allowed it. She came there and she started touching my body, yeah and we were playing and then it got to that. That thing, I can say it's not sex but I don't know how to put it…. I told him that this was what happened. I regretted it but as for him, he was laughing… But what I came to realize is that, that guy, he used to play with the girls a lot. He is like a womanizer… (Which guy?)…That Issah guy; that is what I came to realize later…I thought about that, like he fooled me"* *"She started rubbing her hands all over my body while I was sleeping and before I woke up she was naked and I asked her why. She said don't I know what men and women do in a room when they are sleeping and I said no what was the meaning of that. I felt she was just tempting me so I went back to sleep but she started again so I got out of the room but it was late and I had nowhere to go to because I didn't want my friends to know about it for it to be like I am disgracing her. So I stayed out for a while and I went back to the room. While sleeping, she started again and I fell for it so I did it"* *"One day, I was in school when she walked into one of our classes; and sort permission from our teacher so she could talk to me. All my friends figured out that she was my girlfriend because she came to my school. She actually went to talk to our sports prefect about our*

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			relationship and the sports prefect came to talk to me, so after sometime I was not shy anymore; because my friends started teasing me and saying I was shy of my own girlfriend. I had to prove to them that I was not" *"When she told me I felt someway because it was so strange to me how a lady will be interested in a guy and not the other way round (laughing). So I felt bad a little bit… Hmm, myself I don't like those things and actually I have never seen a girl telling a guy that she's interested in him so it sounded different to me…But weren't you happy when you heard that?.....No I was not happy at all…..Because I should be the one telling her I like her"*
Power Imbalance	Age Disparate Relations Socio-economic Disparate Relations		*"she's old enough to be my mother, I can be either the first or second born of her children"* *"When I got there she told me that was not the reason why she called and that she loves me….but she has kids and her husband is dead. The kids are not too old some will be around 10 years, when I go there and they are watching movies I play with the kids. They are just like my brothers and sisters… How old was the woman by then?....She would be around 35 years by then"* *"Please how old were you when you had your first sex?.. By that time I was 13 years…How old are you now?...I am 22 years…How old was the girl when you had sex with her first?...She was 21 years"* *"She noticed I didn't really like having sex. So it continued that way till she went to the University; then she started misbehaving; she*

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	Type of relationship e.g. Caregiver, house help, mother figure, neighbour		*wanted to be controlling me because I was in the Secondary School and she was ahead of me"* *"When I was a child I had sex with someone…Emm... I can't really remember, it has been a long time…I was about 10 or 11 years when it happened…who did you do it with?.. a certain lady, who was ahead of me; she was older than me and was ahead of me in education"* *"My mum and dad went to work; I was the only child staying with my parents at that time. So when they left for work she came to our house. Sometimes when my mum is doing something at home; she would come to help… so your parents knew her?...yes they did, sometimes when she comes to help my mum and it's late, she would sleep over and leave the next day. So she became like a relative to us"* *"I told your friends who came earlier that when I was younger I remember that our house help did something of that sort me"* *"….you see I respect her a lot so when I told her to leave my cloth she thought I was enjoying what she was doing…"*

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Reasons for Non-reporting	Sanctions	Beating	*"We were told by our parents not to do that, most people's parent spank them when they are caught doing it…Were you able to tell someone about it?...No…not even your friends?...No…why?...I don't trust them about something like this"*
		Inserting pepper in genital	*"Did you ever tell your parents about what happened?...No, I only told my sister. I was scared to tell my parents because they might get angry with the lady. When we were younger; anytime a child did that, they would beat and apply pepper to your genitals; so I was scared to tell my parents. I told only my sister about it"*
	Gendered Sexual Scripts	Labelled as a deviant	*"Have you ever been able to tell anyone about it?...No, apart from you people….Why haven't you told anyone?...I'm ashamed of myself…Why?... Because of the way people know I behave, people would be very disappointed to know I had done something like that"*
Immediate and Long-Term Effects	Psychosocial Effects	Guilt (-)	*"I didn't allow her to get close to me again because I didn't want it to happen again. Because after it happened, I felt very guilty because I have promised myself not to do that (have sex) and besides, I didn't really like her too; I never proposed to her"*
		Shame (-)	
		Regret (-)	*"Were you scared afterwards?...I was…because I thought she might get pregnant"*
		Fear of pregnancy (-)	
		Fear of disease (-)	*"I was scared I might get sick because I became very weak afterwards…What else were you scared of?...I was scared she might be sick…What kind of sickness?...HIV/AIDS"*
		Animosity towards females (-)	*"…that was the reason why I've refused to have anything to do with girls"* *"Through the incident that happened between the girl and I, it really made me hate the girl so much because she made me do something*

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			that I was not ready to do. Apart from forcing me to have sex with her that I didn't want to do, I hate that kind of Ashawo life and she showed me that she can force a man at any time and that tells me she is an Ashawo"
	Spiritual	Punishment from God (-)	*"I felt very sad…Yes. I was afraid God would punish me…I was afraid of what my parents would do to me if they found out"* *"After I had my first sex I wasn't happy but I just saw or took it as normal"*
	Physical Effects	Re-victimisation	*"how many times did she do it?....she did it about three times"*
Risky Sexual Behaviours at Coerced Debut	Condom Non-Use		*"Did you use a condom?....No…Why?...Because I didn't know something like that would happen"* *"To be frank with you I did not protect myself the first time because I was drunk"* *"No I did not use a condom during my first sex; you see it all happened fast so it never occurred to me to use a condom. I never even went to town or the pharmacy to buy it"*
Coping and Adaptation to Coerced Sexual Debut	Help-Seeking Behaviour	Reporting to a sibling	*"I told only my sister about it"* *"It took me some months before I was able to tell anyone about it. One day I was with a friend watching a movie and we were discussing how the movie was going and I told him this has ever happened to me before, and he asked when so I told him about it. He was the only person I told about it, but now if any lady wants to disturb me I tell her this is all they know, that is the only thing they can do and they don't have sense so that is all they can do….What*

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			did your friend tell you after you told him what happened?....He told me I should just forget about it and move on with life. He also said I should stop thinking about the girl getting HIV and concentrate on my life. But all the same he was really surprised about the whole story"
		Reporting to a friend	*"How many people know about you and the her?....Two people…What exactly did they say about it?....One is a God fearing person so he advised me not to do it again but my other friend said it doesn't matter so I should continue"*
			"I told some of them (friends) but they didn't say anything beneficial to me, they just laughed at me"
	Avoidance of settings victim perceives as risk		*"Because I decided I was not going to her place any more. If I don't go there that thing won't happen, it was because I was going there that was why it happened that way, so if I don't go there nothing will happen"*
			"The first one has already happened and I don't want it to happen again. I have learned from that…Yeah, for the first one I saw it as an accident…..Why do you say it was an accident?...You see the first one was her fault because I told her to go home and she refused before she started doing that thing to me. So when the girls say they want to come and wash my clothes for me I see that, that thing will happen again."
	Religion	Religious activities	*"…The things I have been hearing from church are what I am acting on now"*
			"Not long after it happened I got into contact with the people of God and I changed….I chose the first one because I realized that the

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			second advice might bring an end to my education and my walk with God. This is because I might not concentrate, also the girls might demand a lot and when I don't have and they pressure me, I might use other means to get it for them which might bring me problems" *"Also I started taking the advice of my parents to lead a good life…."*