Accepted: 7 December 2023

DOI: 10.1111/chso.12830

Children & Society WILEY

ORIGINAL ARTICLE

Child sexual abuse in Ghana: A multi-methods exploratory study

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Abstract

Using a qualitative multi-methods approach, this study explored the offence, survivor and perpetrator characteristics, and the lived experiences of child and adolescent survivors of child sexual abuse (CSA) in Ghana. We analysed the contents of local media reports of CSA cases from January 2015 to December 2020 in Ghana, after which we conducted semi-structured interviews involving five female child and adolescent survivors of CSA. The media content analysis identified 529 eligible reports involving female ($n = 516$) and male ($n = 13$) survivors aged 11–18 years who knew the perpetrators. The perpetrators were all-male youth and middle-aged adults employed in low-income status occupations. Defilement was the most reported sexual offence; the survivors were more likely to come from single-parent families experiencing poverty and economic hardship. The perpetrators employed multiple methods to coerce and elicit compliance from their victims: confidence approaches, violence (blitz methods) and gifts. Content analysis showed that most of the survivors attributed their victimisation to family poverty and dysfunctional parent–child relationships. These findings underscore a need to develop prevention strategies that empower young females and males to identify, escape or avoid (potential) sexual predators and encourage reporting and disclosure of CSA victimisation to formal support institutions.

KEYWORDS

adolescents, child sexual abuse, Ghana, perpetrators, sexual abuse victimisation, sexual offence

INTRODUCTION

The World Health Organization (WHO) defines child sexual abuse (CSA) as 'the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared, or else that violates the laws or social taboos of society. Children can be sexually abused by both adults and other children who are—by virtue of their age or stage of development—in a position of responsibility, trust or power over the victim' (WHO and International Society for Prevention of Child Abuse and Neglect, 2006, p. 10). The United Nations Children's Emergency Fund (UNICEF, 2014) reports that in one-third of countries across the world, at least 5% of young women reported experiences of childhood sexual violence, but the rates are much lower among men. Some have attributed this relatively high prevalence to the increased likelihood of females to report an incidence of abuse as compared to males (Manyike et al., 2015). It is also evidenced that the majority of perpetrators of CSA are males, and these perpetrators are usually known to the survivor (UNICEF, 2014; WHO and International Society for Prevention of Child Abuse and Neglect, 2006). Evidence abounds to suggest that while survivors of CSA have identified perpetrators as strangers, most perpetrators of CSA have been found to be family members, acquaintances, friends, neighbours, schoolmates/classmates, or other highly trusted persons (Clayton et al., 2018; Quarshie et al., 2018; Reddock et al., 2022; UNICEF, 2014).

The literature shows that certain characteristics of survivors, family, culture and even the perpetrator can put children at an increased risk of CSA (Agu et al., 2018; WHO, 2021). Children from low-income earning families and single-parent families have been found to be at increased risk of CSA (Priebe & Svedin, 2009). In some low- and middle-income income countries, however, poverty remains a major factor associated with increased chances of CSA (Agu et al., 2018). Some protective factors of CSA include financial support, sex education and pro-child protection school policies for children (Agu et al., 2018).

In Ghana, routinely collected reliable national-level data on the prevalence of CSA is unavailable (Ministry of Gender, Children and Social Protection [MOGCSP], and UNICEF, 2015), even though evidence from anecdotal sources suggests that CSA is recognised as a problem of major public concern (Quarshie et al., 2017, 2018, 2022). The latest household survey across 10 regions of Ghana by MOGCSP and UNICEF (2014) estimates the 1-month prevalence of CSA to range between 14% and 55%, with more girls than boys being victims. Similarly, even though not much is known about the key characteristics of perpetrators and survivors of CSA in Ghana, a few studies available indicate that the perpetrators of CSA are predominantly youth aged 20 years and above, while the commonly reported forms of CSA include forced sex, incest, transactional sex and commercial sexual exploitation, and online sexual abuse and exploitation (Tetteh & Markwei, 2018; Markwei & Osei-Hwedie, 2019; MOGCSP & UNICEF, 2014). Within the school context, the common forms of sexual abuse include non-contact sexual abuse which includes, sexual harassment, unwanted sexual phone calls, unwanted sexting or sexual messages, sexual jokes and frequent requests for sexual favours (Agu et al., 2018; Bordoh et al., 2016; Quarshie, 2021).

While some studies have been conducted to assess the prevalence of CSA in Ghana (Quarshie, 2021), the trends of the problem, the lived experiences and what the offence means to

survivors have yet to be explored. The current study adopts a directed qualitative content analysis (Hsieh & Shannon, 2005) approach—a sequential qualitative multi-methods approach to, first, explore the trend, the offence, survivor and perpetrator characteristics of CSA as reported by key local media outlets in Ghana. The evidence drawn from local media content analysis is then supplemented with evidence obtained through qualitative interviews exploring the meanings and lived experiences of survivors of CSA in the Ghanaian context. Potentially, the findings from this study can inform policy guidelines in education, social welfare and health services.

METHODS

In reporting this study, the authors have been guided by the standards for reporting qualitative research (O'Brien et al., 2014).

Study design

Broadly, this is a qualitative study which adopts a sequential qualitative multi-methods approach (Anguera et al., 2018). Specifically, the directed content analysis approach (Hsieh & Shannon, 2005) was adopted. In this approach, there are two qualitative studies in the sequence. We first conducted a content analysis of media reports of CSA in Ghana, then guided (or directed) by the key findings of the analysis of media reports, we conducted semi-structured one-to-one in-depth interviews involving survivors of CSA to supplement and extend the evidence of the prior media content analysis.

Study context and setting

The setting for this study was Ghana, a West African country located along the coast of the Gulf of Guinea. Like many sub-Saharan African countries, Ghana is multi-ethnic with eight main ethnic groups subdivided into about 100 smaller ethnic groups with cultural and linguistic differences (Salm & Falola, 2002). It is predominantly patriarchal, yet both patrilineal and matrilineal inheritance systems are practised (Nukunya, 2003). Therefore, men hold primary power and social control in the society. Ghana is also considered a strongly religious nation with 71.2% of the population professing to be Christians, 17.6% Muslims, 5.2% Traditionalists and 5.2% without any religious affiliations (Ghana Statistical Service, 2020). Specifically, this study was conducted within the Ledzokuku Municipality (also known as Teshie) in the Greater Accra Region of Ghana. Teshie is the one of key traditional Ga indigenous communities in Southern Ghana. It is heavily populated, with high levels of poverty and poor infrastructure. Recent evidence suggests that the community records a relatively high incidence of CSA in the region (Tetteh & Markwei, 2018).

Procedure

Broadly, we followed a two-phase procedure to conduct two qualitative component studies in a sequential multi-methods approach. In the first phase, we performed a content analysis of media reports of CSA in Ghana, then we conducted semi-structured one-to-one in-depth interviews involving survivors of CSA – in the second phase.

Phase 1 – Qualitative study I: Media content analysis

The media content analysis phase was modelled after recent studies from Ghana (e.g. Adzimah-Alade et al., 2020; Quarshie et al., 2015, 2021), to examine the trends, survivor and perpetrator characteristics of CSA as reported in local media outlets (with broad coverage in Ghana). All written media reports in Ghana are in the English language. For this study, we elected to access media reports on CSA in Ghana from the online portals of four local media outlets present in Ghana: GhanaWeb (www.ghanaweb.com), Joy FM (www.myjoyonline.com), Daily Graphic (www.graphic.com.gh) and TV3 Ghana (www.3news.com/tv3). Besides the criteria of having wider coverage (in terms of listenership and/or readership) and a strong online presence in Ghana, we selected these four media outlets because they have searchable, organised archival systems. We searched the portals of the selected media outlets using common terms and keywords, including 'sexual abuse', 'defilement', 'rape', 'indecent assault', 'sexual harassment' and 'gang rape'. The search covered 6 years (January 2015–December 2020). The final set of eligible media reports was drawn across the 16 regions of Ghana.

Eligibility criteria

Media reports on CSA involving survivors (victims) aged 19 years and younger—regardless of the perpetrator's age—were considered for inclusion. However, international reports, news editorials, opinion pieces and media reports on CSA involving survivors aged 20 years and older were excluded. Figure 1 shows the record selection and screening process followed to obtain the final set of eligible media reports included in the qualitative content analysis of media reports phase of the study.

Phase 2 – Qualitative study II: Semi-structured interviews

Sampling

The interview phase of the study employed both purposive and convenience sampling techniques to select five (all-female) participants from the Department of Social Welfare affiliated shelters and a hospital in the Teshie community of Southern Ghana.

Table 1 shows the key demographic characteristics of the interview participants.

At the Department of Social Welfare affiliated shelters, with assistance from the facility manager, we approached potential participants as and when they came in or were referred to the shelter for the first time. At the hospitals, a nurse designated to assist with participant recruitment for this study helped the research team in identifying and approaching potential participants from patients/hospital records and at the outpatient unit. In the protocol guiding this study, we planned to sample a minimum of 15 participants (comprising both boys and girls) for the interview phase; however, even though we approached and invited 21 potential participants for the study, only five girls agreed and were willing and available to grant an interview for the study. Eligible participants must be aged between 6 and 19 years and should be a survivor of sexual abuse. Ineligible participants fell outside the 6–19 age band. Potential participants with mental retardation or experiencing other forms of mental problems or cognitive impairments that could interfere with their ability to provide coherent personal accounts or narratives of the abuse were also excluded.

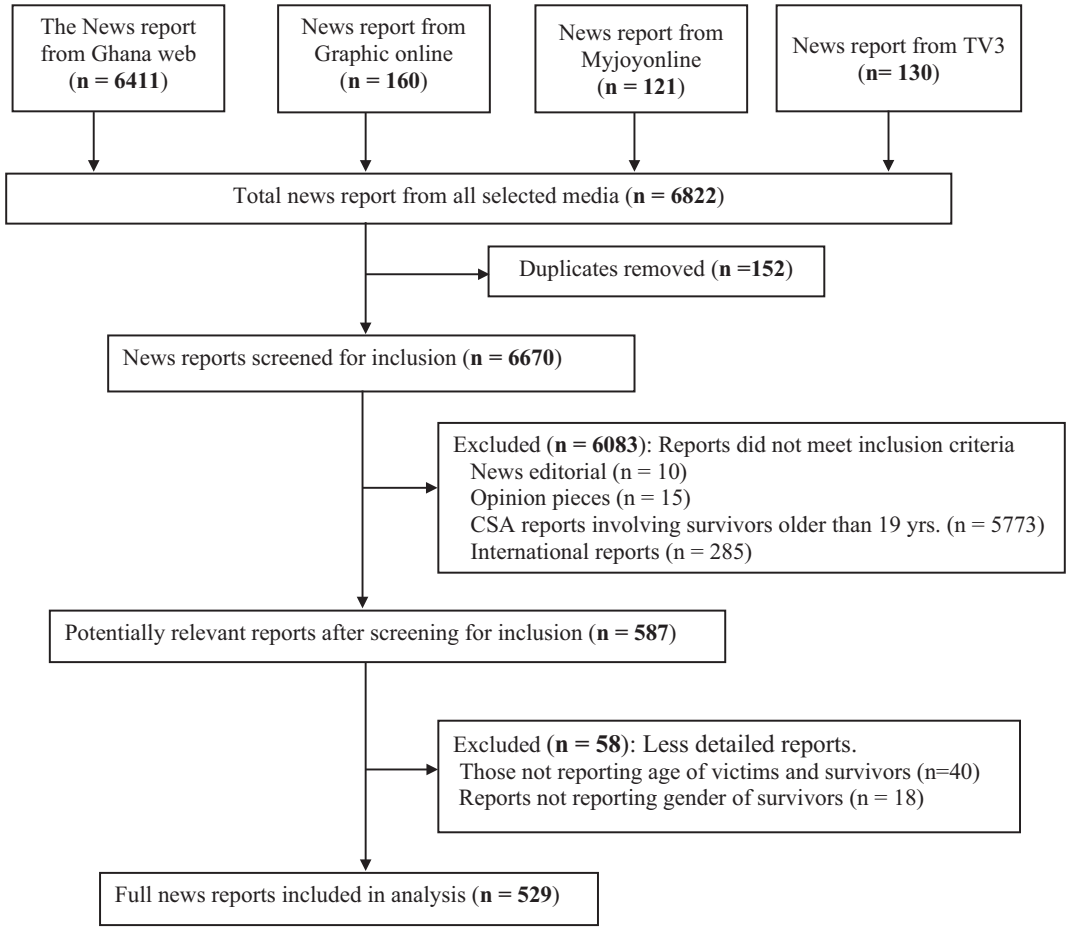

FIGURE 1 Flow chart of news reports search and extraction process.

Interviews

The interviews involved the use of a semi-structured interview guide with items exploring the participants' first-hand accounts of their sexual abuse victimisation experiences. In addition to drawing on lessons from our clinical and community experiences in working on CSA-related matters in Ghana, we formulated the interview questions based also on the descriptive qualitative numerical evidence and patterns of the media reports included in the content analysis of media reports in phase 1 of this study. Some questions on the interview guide were '*I understand that something happened to you, could you tell me more about it from beginning to the end?*'; '*Did the incidence happen one time or more than one time?*' '*Tell me about the time you remember the most*'; and '*Can you tell me more about the person who did what you just described?*' The interviews were conducted in English, Twi or the Ga language, and at convenient locations of participants. Averagely, each interview lasted between 20 and 30 min. Younger children were engaged in sketching and colouring, prior to interviewing them, to make them feel more relaxed and comfortable. Also, for each participant aged 10 years or younger, an adult primary caregiver—considered as 'knowing the child best'—was present during the interview to report on the child's mental health status and to complement the interviewer's efforts in making the interview questions more comprehensible to the child. All

TABLE 1 Demographic characteristics of interview participants.

Name[a]	Gender	Current age (in complete years)	Educational level[b]	Living arrangement at the time of abuse (living with…)	Age at abuse (in years)	Site of abuse	Perpetrator relationship to survivor
Akorfa	Female	14	Primary school	Father only	13	Home of perpetrator	Father
Lariba	Female	18	Senior high school	Mother only	17	Home of perpetrator	Family benefactor
Ameley	Female	6	Primary school	Both parents	5	Home of perpetrator	Neighbour
Esi	Female	16	Senior high school	Both Parents	15	Home of perpetrator	Friend
Lakshmi	Female	18	Junior high school	Father only	15	Home of another relative	Boyfriend

[a]All names are pseudonyms to protect the identity of participants.

[b]Primary = UK primary education; Junior High School = UK secondary education; Senior High School = UK A-level.

the interviews were conducted by the first author, who is a clinical psychologist with several clinical and research experiences related to CSA in Ghana. The interviewer has an excellent proficiency in working with English, Twi and the Ga language. We arranged for a clinical psychologist to be on standby to provide counselling and professional support to participants who might experience emotional breakdown during the interview. The service of the clinical psychologist was optional and free of charge; however, no participant felt the need for this arranged professional support.

Ethics

The Ethics Committee of Humanities (ECH) at the University of Ghana approved this study (reference №: ECH 166/18-1). Permission to approach participants and access data was obtained from the Domestic Violence and Victim Support Unit of the Ghana Police Service, and the Department of Social Welfare, under the Ministry of Gender, Children and Social Protection, Accra. Parents of underage interview participants provided written consent, while their wards aged 17 years or younger assented to participate in the study. Participants aged 18 and 19 also provided written consent prior to participation. The purpose of the study was explained as well as discussions on ethical issues of ensuring confidentiality and voluntary participation were held with participants in their preferred language prior to the start of each interview. The interviews were audio-recorded and transcribed verbatim by the first author and audited for accuracy check by the co-authors. In order to protect the identities of the participants, we used pseudo-names to refer to the interview excerpts and extracts to elucidate the themes developed during the analysis.

Data analysis

Generally, we applied qualitative content analysis techniques to the data. For the media content data drawn from phase 1 (qualitative study I: media content analysis), the summative content analysis approach was applied by following the approach recommended by Hsieh and Shannon (2005). A qualitative summative content analysis involves 'counting and comparisons, usually of keywords or content, followed by the interpretation of the underlying context' (Hsieh & Shannon, 2005, p. 1277). We read each eligible news report independently; at research meetings, we generated and agreed on a list of relevant key features of the abuse, survivor and perpetrator characteristics indicated in the eligible news reports (e.g. gender, age, form of abuse, living arrangement, educational level, occupation). Next, we re-read the eligible news reports closely to identify, extract and collate counts of the absence or presence of the pre-specified characteristics of each included news report. The extracted relevant characteristics were assigned numerical codes (absent = 0, or present = 1) and entered into the Statistical Package for Social Sciences (SPSS version 26.0) for the computation of frequencies and percentages.

We applied the directed content analysis approach (Hsieh & Shannon, 2005) to the interview data drawn from phase 2 (qualitative study II: interview study). Directed content analysis is applied when prior research about a phenomenon would benefit from further description; the purpose is to support, supplement and/or extend the evidence of the prior research or theory (Hsieh & Shannon, 2005). In the current study, the first phase (the media content analysis of CSA in Ghana) is taken as the prior research, which is then followed by a directed content analysis of semi-structured interviews involving survivors of CSA. In other words, the major findings of the media content analysis in

phase 1 'directed' the content analysis of the interview data in phase 2. As recommended by Hsieh and Shannon (2005), we began coding the interview data immediately with the predetermined categories drawn from the summative content analysis of the media reports on CSA. As shown in the results section, we present the findings by showing exemplars and descriptive evidence alongside the categories generated from the summative content analysis of the media reports.

Following Creswell and Miller (2000) recommendation on improving the validity of qualitative research, we made attempts to capture exactly what participants intended (participant validation) by obtaining feedback from them during the interview process. This was achieved through summarising what participants said, in order to validate their views. Further, each stage of the analysis intensely engaged co-authors discussing initial categories until we reached consensus. Such cross-validation and group interpretation are useful in increasing intersubjective comprehension, analytic rigour and validity of the interpretations of the findings (Steinke, 2004; Whittemore et al., 2001).

RESULTS

For ease of interpretation and readability, the results and discussion of both media content analysis and interview phases of this study have been integrated into this section.

Trend of CSA

The trend of CSA reported in local media from January 2015 through December 2020 is shown in Figure 2. Overall, 529 eligible cases of CSA were included in this study. This indicates that across the 6-year period, an average of approximately 88 cases of CSA were reported each year. Although the highest number of CSA cases was reported in the year 2015 ($n = 110$; 20.7%), there appears to be an

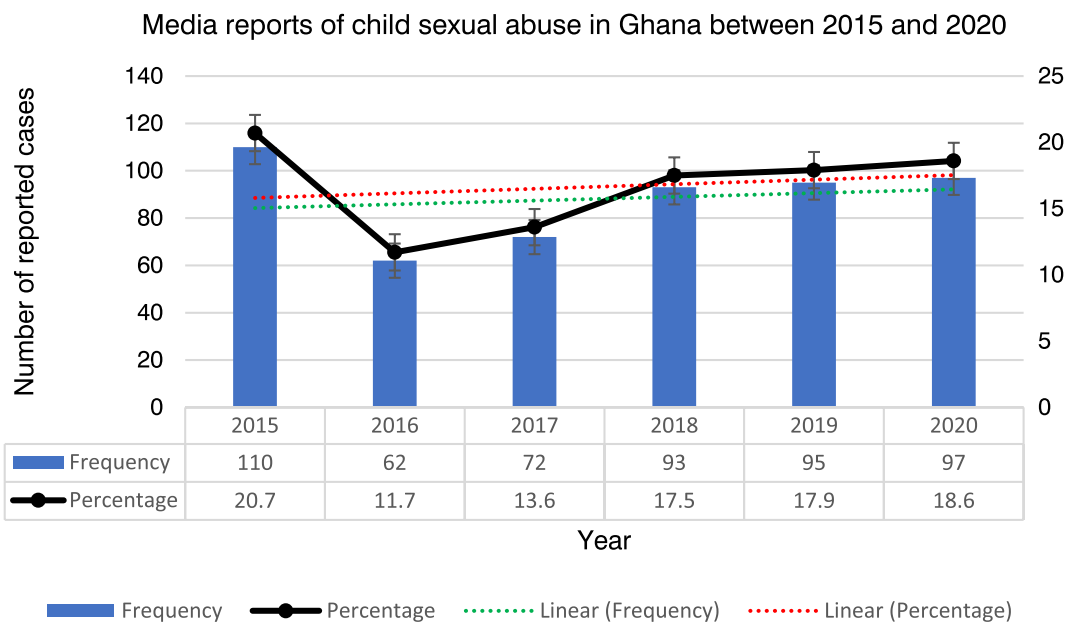

FIGURE 2 Graph of media reports of child sexual abuse in Ghana between 2015 and 2020.

upward trend in cases reported in the media from 2016 ($n = 62$; 11.7%) through 2020 ($n = 97$; 18.6%). Notably, more than half of the cases ($n = 285$; 53.9%) were reported during the last 3 years, while 3 out of 4 of the cases in 2020 ($n = 72$; 74.2%) were reported between 12 March 2020 and 31 December 2020—during the 1st and 2nd waves of the COVID-19 pandemic in Ghana.

Survivor characteristics

Survivor characteristics of CSA are presented in Table 2. Out of the reported total cases of 529, most of the survivors were females ($n = 516$; 97.5%) with only a few reports involving male survivors ($n = 13$; 2.5%). Among the female survivors, the commonest reported offence was defilement ($n = 455$; 88.2%). In Ghana, defilement is natural or unnatural carnal knowledge of a child under 16 years of age. Among the male survivors, defilement ($n = 7$; 53.8%) and sodomy ($n = 6$; 46.2%) were the most reported offence types. Within the age groups, a large number of reported cases involved young adolescents aged 11–15 years ($n = 338$; 66.1%); defilement was the most reported CSA involving children aged 10 years and younger ($n = 104$; 91.5%) and young adolescents ($n = 307$; 90.8%).

We also observed that most of the survivors ($n = 175$; 43%) were living with single parents, while 30% ($n = 122$) and 27% ($n = 110$) were living *with* both parents and *without* any first-degree parents respectively. In the interviews, one of the survivors, Akorfa, who was living with only her father (at the time of the abuse) recounted how her father sexually abused her. She described how living with her father alone—without the presence of other family members—made it possible for her father to sexually abuse her.

> We were at home one day and my father wanted to have sex with me. I didn't want to do it, so I ran away from the house. Unknown to me, he was also running after me. I went to a neighbour's house. My father came for me and beat me up. He pulled me back home and told me that he wanted to do it for me [have sex with me] but I was resisting [...]. (Akorfa, 14 years)

In the media reports, defilement was the commonest CSA offence reported by both survivors living with both parents ($n = 104$; 95.1%) and those living with a single parent (85.7%; $n = 150$). Also, more than half of the survivors ($n = 85$; 52.1%) had primary school education and about a quarter ($n = 37$; 22.7%) of the survivors had Junior High School (JHS) education. Defilement was found to be the commonest reported offence among survivors in primary school ($n = 78$; 91.8%) and JHS ($n = 31$; 83.8%). Some of these findings were collaborated by the interview findings.

We observed in the analysis of the interviews that prior to the offence of CSA, there were two main factors which might have increased the risk for the offence: *financial challenges*, and *poor parent–child relationship*. In the case of Lariba, for instance, the desperate state of her family's finances (where her father was also absent) made her mother to rely on a 'stranger' for support to meet their needs. Thus, in an effort for her mother to help her (Lariba) secure her future, Lariba becomes a victim of CSA. She indicated thus:

> [...] the man [supposed benefactor and perpetrator] said he would take care of my mother. We ran out of money and did not have anywhere to go [for help]. So even if we were hungry, we went to the man [supposed benefactor and perpetrator] for money. So, one day my mum asked me if I wanted to learn dressmaking. I told her

TABLE 2 Crosstabulation of survivor characteristics and offence types.

Survivor characteristics	Total *n* (%)	Lone rape *n* (%)	Incest *n* (%)	Defilement *n* (%)	Indecent assault *n* (%)	Sodomy *n* (%)	Multiple perpetrator rape *n* (%)
Sex	529 (100)						
Female	516 (97.5)	12 (2.3)	23 (4.5)	455 (88.2)	5 (1.0)	8 (1.6)	12 (2.6)
Male	13 (2.5)	0	0	7 (53.8)	0	6 (46.2)	0
Age (in years)							
Pre-adolescent (≤10)	142 (27.8)	1 (0.7)	6 (4.2)	104 (91.5)	2 (1.4)	3 (2.1)	0
Younger adolescent (11–15)	338 (66.1)	2 (0.6)	13 (3.8)	307 (90.8)	2 (0.6)	7 (2.1)	6 (1.8)
Older adolescent (16–19)	31 (6.1)	7 (22.6)	4 (12.9)	11 (35.5)	1 (3.2)	2 (6.5)	6 (19.4)
NR	18 (3.4)						
Living arrangement							
With both parents	122 (30.0)	2 (1.6)	4 (3.3)	104 (95.1)	0	0	0
With one parent	175 (43.0)	4 (2.3)	12 (6.9)	150 (85.7)	1 (0.6)	5 (2.9)	3 (1.7)
Without parent	110 (27.0)	3 (2.7)	3 (2.7)	96 (87.3)	1 (0.9)	4 (3.6)	3 (2.7)
NR	122 (23.1)						
Educational level							
Preschool	13 (8.0)	0	1 (7.7)	12 (92.3)	0	0	0
Primary	85 (52.1)	1 (1.2)	2 (2.4)	78 (91.8)	2 (2.4)	1 (1.2)	1 (1.2)
JHS	37 (22.7)	3 (8.1)	1 (2.7)	31 (83.8)	0	0	2 (5.4)
SHS	16 (9.8)	4 (25)	0	7 (43.8)	0	2 (12.5)	3 (18.8)
Tertiary/vocational	1 (0.6)	0	0	0	0	0	1 (100)
Out-of-school	11 (6.7)	0	0	11 (100)	0	0	0
NR	328 (69.2)						

Abbreviations: JHS, Junior High School; NR, not reported; SHS, Senior High School.

> yes. So, she told me that she had no money or a job to buy a sewing machine for me. So then if I finish learning the work, he would marry me. The first time she said this, I refused, but I realized that her behaviour had changed. You know the man was feeding and doing everything for us. So, the man [the perpetrator] said he would buy a sewing machine for me to learn dressmaking. When my mother said it, I thought that even if I got pregnant, I would still be able to do some work to take care of the child. So, I agreed and then the man went ahead to buy the machine. My mum said he should not marry me yet because I was not 18. He forced me [to have sex with him]. (Lariba, 18 years)

Poor parent–child relationship was mostly related to communication challenges and fear of talking to parents (about personal challenges). For example, Lakshmi indicated how she feared talking to her father despite her need to share her emotional problems with a significant other. She compares how situations would have been different if her mother was alive. She revealed that her father made no time for conversations with her, making her feel emotionally distant and unable to share her concerns with him. Thus, she attributed her sexual abuse victimisation to the disengaged relationship with her father

> The way my dad is makes me very afraid of him. I was also afraid that my dad will be told about it [experience of sexual abuse victimisation]. If my mum was alive, I will chat with her, but with my dad, he does not even have time for conversation, so it makes me scared to approach him, even when something is worrying me. (Lakshmi, 18 years)

Perpetrator characteristics

As shown in Table 3, most of the perpetrators were early adults (19–35 years) ($n = 224$; 55.3%) and middle adults (aged 36–60 years) ($n = 106$; 26.2%). Most of the perpetrators were employed ($n = 366$; 85.7%). Furthermore, about 1 out of 5 ($n = 77$; 19.4%) of the perpetrators had an occupation in the field of construction, while approximately 1 out of 10 perpetrators were teachers.

Offence characteristics

The offence characteristics based on perpetration-survivor relationship and compliance techniques are presented in Table 4. The commonly reported perpetrator-survivor relationships were neighbour ($n = 220$; 43.9%), and other relationships (e.g. congregant, other family relations, family friend and employee constituting; $n = 109$; 21.8%). Again, defilement was the commonly reported form of CSA within the perpetrator-survivor relationships. Many of these findings were corroborated by the evidence from our interview analysis.

We observed that neighbourhood, friendship and boyfriend-girlfriend relationships were found in the interview accounts of the participants. For example, Esi indicated that:

> Oh, just for a visitation then... a friend ... We [survivor and perpetrator] went to their house, switched on the laptop. We [survivor and perpetrator] were watching a movie. All of a sudden, he [perpetrator] just came up. (Esi, 15 years)

TABLE 3 Crosstabulation of perpetrator characteristics and offence types.

Perpetrator characteristics	Total *n* (%)	Lone rape *n* (%)	Incest *n* (%)	Defilement *n* (%)	Indecent assault *n* (%)	Sodomy *n* (%)	MRP *n* (%)
Perpetrator age							
Adolescents	59 (14.6)	0	1 (1.7)	54 (91.5)	0	2 (3.4)	2 (3.4)
Early adults	224 (55.3)	5 (2.2)	5 (2.2)	205 (91.5)	1 (0.4)	4 (1.8)	3 (1.3)
Middle adults	106 (26.2)	1 (0.9)	10 (9.4)	93 (87.7)	0	2 (1.9)	0
Late adults	16 (4.0)	0	0	15 (93.8)	0	1 (6.3)	0
NR	124 (23.4)						
Employment status							
Unemployed	34 (8)	0	0	32 (94.1)	1 (2.9)	1 (2.9)	0
Employed	366 (85.7)	6 (1.9)	12 (3.3)	335 (91.5)	2 (0.5)	10 (2.7)	1 (0.3)
Student	27 (6.3)	2 (7.4)	0	20 (74.1)	0	1 (3.7)	4 (14.8)
NR	102 (19.3)						
Perpetrator occupation							
Students	33 (8.3)	2 (6.1)	0	24 (72.7)	0	3 (9.1)	4 (12.1)
Trader	47 (11.8)	0	2 (4.3)	43 (91.5)	1 (2.1)	1 (2.1)	0
Teacher	37 (9.3)	2 (5.4)	0	32 (86.5)	2 (5.4)	1 (2.7)	0
Security	17 (4.3)	1 (5.9)	2 (11.8)	13 (76.5)	0	1 (5.9)	0
Religious leaders	17 (4.3)	2 (11.8)	0	13 (76.5)	1 (5.9)	1 (5.9)	0
Performing artists and sports	7 (1.8)	0	0	7 (100)	0	0	0
Transport & machine operation	61 (15.4)	0	2 (3.3)	58 (95.1)	0	1 (1.6)	0
Construction	77 (19.4)	0	2 (2.6)	73 (94.8)	0	2 (2.6)	1 (2.1)
Agriculture and Extraction	48 (12.1)	0	3 (6.3)	44 (91.7)	0	0	0
Artisan	32 (8.1)	0	0	32 (100)	0	0	0
Others	21 (5.3)	1 (4.8)	0	18 (85.7)	0	2 (9.5)	0
NR	132 (25)						

Abbreviations: MRP, multiple perpetrator rape; NR, not reported.

TABLE 4 Crosstabulations of offence characteristics and offence types.

Offence characteristics	Total *n* (%)	Lone rape *n* (%)	Incest *n* (%)	Defilement *n* (%)	Indecent assault *n* (%)	Sodomy *n* (%)	Multiple perpetrator rape *n* (%)
Perpetrator-survivor relationship							
Parent–child	43 (8.6)	1 (2.3)	19 (44.7)	23 (53.5)	0	0	0
Boyfriend-girlfriend	28 (5.6)	0	0	26 (92)	0	1 (3.6)	1 (3.6)
Teacher-student	41 (8.2)	3 (7.3)	0	35 (85.4)	2 (4.6)	0	2 (4.9)
Stranger	60 (12)	4 (6.7)	0	49 (81.7)	0	2 (3.3)	5 (8.3)
Neighbour	220 (43.9)	1 (0.5)	0	211 (95.5)	1 (0.5)	5 (2.3)	1 (0.5)
Others	109 (21.8)	3 (2.8)	4 (3.7)	92 (84.4)	3 (2.8)	6 (5.5)	1 (0.9)
NR	28 (5.3)						
Compliance technique							
Drugging	11 (2.1)	1 (9.1)	1 (9.1)	9 (81.8)	0	0	0
Blitz approach	124 (23.4)	6 (4.8)	9 (7.3)	96 (77.4)	1(0.8)	2 (1.6)	10 (8.1)
Gift enticement	50 (9.5)	0	1 (2.0)	45 (90.0)	0	4 (8.0)	0
Money enticement	18 (3.4)	0	0	18 (100)	0	0	0
Confidence approach	146 (27.6)	3 (2.1)	8 (5.5)	130 (89.0)	1 (0.7)	4 (2.7)	0
Multiple technique	18 (3.4)	1 (5.6)	0	17 (94.4)	0	0	0
NR	162 (30.6)						

Note: Parent–child relationship—(biological parent and step-parent).

Abbreviation: NR, not reported.

For the participant's narrative, the perpetrator was a friend in her neighbourhood. She indicated that he was a friend. He was someone known to the family since he came to visit her at home. This showed that the perpetrator planned the abuse by requesting her to visit him at his home. One of the participants had a romantic relationship with the perpetrator; the perpetrator supported her financially and emotionally.

> [...] since he was my friend, whenever I wanted something, he gave me, and when there was something bothering me, I told him about it and he listened and helped me [...] When he became my boyfriend, I was with him for over a year without anything [sexual intercourse] happening between us. (Lakshmi, 18 years)

> Lakshmi's revealed that she trusted her boyfriend and relied on him to meet many of her needs. She also added that for more than a year of dating, there was no sexual encounter with him till the incidence of abuse.

Compliance techniques

We found that the most reported compliance techniques used by the perpetrators were the *confidence approach* to lure their victims ($n = 146$; 27.6%), and *blitz approach*—which involves the use of violence in the form of threatening with a weapon or physical attacks, like, gagging, muffling, or hitting ($n = 124$; 23.4%). Other approaches included enticement with gifts ($n = 50$; 9.5%) or money ($n = 18$; 3.4%), drugging ($n = 11$; 2.1%) and the use of multiple techniques ($n = 18$; 3.4%). Evidence of the interviews supported these descriptive summative findings. The confidence a person has in an individual makes them trust the people not to bring harm to them. Esi shared how the perpetrator invited her to visit him at home.

> He [perpetrator] came to our place - he [perpetrator] used to come to our place. So, he said I should come to visit him. So, we all went home together... All my concentration was on the laptop, my concentration was not on him at all. I trusted him and never expected him to harm me. He used force and he did what he wanted to do to me. (Esi, 15 years)

DISCUSSION

The study explored the trend in CSA reported via the online portals of popular local media outlets in Ghana, and supplemented with qualitative evidence of survivors' lived experiences. In summary, the media reports showed an increasing pattern of CSA—an indication of a possible frequent occurrence of CSA in Ghana. We also observed that the majority of child and adolescent survivors of CSA in Ghana were young adolescent females (aged 11–15 years) who knew the male perpetrators. Furthermore, it was also found that children and adolescents experiencing social adversities and family dysfunctions, such as single parenting and family poverty, were more likely to report CSA. Defilement was the most reported form of CSA, and the perpetrators were mainly early, and middle-aged adult males employed in low-income status occupation; they used confidence approaches, violence (blitz approach) and enticements involving gifts as means of coercing or eliciting compliance from their victims.

Trend of CSA

Analysis of media reports showed an increasing pattern of CSA in Ghana: a fairly discernible upward spiral was seen in reported cases from 2018 to 2020. This is an indication that CSA continues to be a challenge in the society but the increase in media report could also be due to a possible fact that more people are coming out to report such incidence to the appropriate authorities as found in recent studies (Agu et al., 2018; Gqgabi & Smit, 2019; Wager, 2015).

It must be acknowledged, though, that the seeming increasing trend in CSA could also be pointing to the possibility that local media outlets are now paying attention to CSA than before. Another troubling observation was that 3 out of every 4 cases of CSA reported in 2020 occurred between March and December 2020—during the first and second waves of the COVID-19 pandemic in Ghana. At some point within the period of the pandemic, schools were closed and other stay-at-home restrictions and strict containment measures were enforced in the country. Although further evidence is needed from Ghana to establish the direct connection between CSA and the lockdowns and school closures during the pandemic, the current preliminary finding could be consistent with recent evidence from Uganda, in East Africa – where a worrying rise in the incidence of both physical and sexual abuse of children was recorded during the pandemic (Sserwanja et al., 2021).

Survivor characteristics

As reported in several other studies (Dako-Gyeke, 2019; David et al., 2018; Markwei & Osei-Hwedie, 2019), we found that over 90% of the survivors of CSA reported in the media were females, with all the perpetrators being males. This supports the global observation that sexual abuse and sex-related offences are often committed by boys and men against girls and women (WHO, 2021). Within the sub-Saharan African context (e.g. in Burkina Faso, Ghana, Malawi and Uganda), male sexual abuse victimisations typically go unreported due to cultural issues of shame, masculinity, inadequate physical evidence of male sexual abuse and the myth that males enjoy sexual intercourse with or without consent (Adjei & Saewyc, 2017; Boakye, 2009a; Collings, 2005; Quarshie, 2021). Some of these contextual and cultural issues may sometimes put females at risk of sexual abuse victimisation and non-disclosure (Boateng, 2015). Evidence suggests that the CSA myth that projects the male sexuality as almost unstoppable once aroused, requiring the need to be met with the nearest available person of the opposite gender is rife in many African countries, including Ghana, Zambia, Zimbabwe, South Africa (Boakye, 2009a, 2009b; Bowman & Brundige, 2014; Tetteh & Markwei, 2018). Many men and women subscribe to this belief, which in turn guides their attitudes towards CSA such that survivors may be afraid to report because of the dominating position of men and the culture of silence and shame surrounding CSA and sex-related topics (Boakye, 2009a, 2009b; Markwei & Osei-Hwedie, 2019). It has also been observed that the vulnerable state of females, children and young adolescents in society makes them a target, particularly for perpetrators of sexual abuse (Wrigley-Asante et al., 2016). We also found that the majority of the survivors of CSA were young adolescents, which confirms results from other studies that young adolescents are more likely to be sexually abused than other age groups (Markwei & Osei-Hwedie, 2019; Priebe & Svedin, 2009; Quarshie et al., 2022).

The lived experiences shared by the participants in the interview phase of this study showed that survivors of CSA were more likely to have been in vulnerable family situations such as single parenting and family poverty (i.e. low socioeconomic backgrounds). This corroborates findings

from previous studies that sexual abuse has been associated with adverse family environments such as economic instability and dysfunctional family bonds (e.g. Badoe, 2017; Banwari, 2011; Nlewem & Amodu, 2017). Within the scientific discourse, single parental absence and absence of both parents are associated with the experience of sexual violence victimisation in adolescent girls (Kidman & Palermo, 2016; Muridzo & Chikadzi, 2020). When the absent parent is paternal, challenges related to family poverty, financial difficulties and food supply are pronounced. However, maternally related absence is usually linked with a loss of nurturing, support and companion for the children (Kidman & Palermo, 2016). Research has shown a strong relationship between poverty and sexual crimes (Banwari, 2011; Muridzo & Chikadzi, 2020). Families experiencing poverty are likely to live in a deprived community, and children and adolescents who find themselves in such situations experience less parental supervision, lack of financial support and are at an elevated risk of involvement in child labour (Wrigley-Asante et al., 2016). When females are in such a vulnerable situation, they may resort to other forms of risky and unhealthy partnerships with men (e.g. in transactional romantic relationships) who may in turn take advantage of their vulnerability.

Perpetrator and offence characteristics

The findings further revealed that perpetrators of sexual abuse were mostly early adults and middle-aged adults. This observation is supported by other studies from Ghana (Quarshie et al., 2017, 2018). Also, most of the perpetrators were employed, with a few reported to be unemployed. However, most of the perpetrators who were employed had jobs with low-income statuses such as construction labourers, traders and artisans. This supports previous findings from Ghana and elsewhere that most sexual abuse offenders were found to be either unemployed or involved in poorly paid and low-status jobs (Brown et al., 2007; Quarshie et al., 2017, 2018).

We observed with worry the involvement of teachers (11.8%) and religious leaders (4.3%) as perpetrators, which also confirms previous evidence (e.g. Knoll, 2010; Magwa & Nigara, 2015; Quarshie et al., 2022). Teachers are role models and mentors to children and young people, and their position is a respectable one as it exudes a lot of trust and social power and influence (Magwa & Nigara, 2015). Similarly, in a highly religious context like Ghana, religious leaders typically represent the first port of call for congregants and supplicants, including families, women and children experiencing any form of social discomfort, adversity or personal crises. Perhaps, some religious leaders and teachers are more likely to sexually abuse followers and students and they capitalised on the trust reposed in them by their unsuspecting young victims. While some teachers have been found to target pupils in poverty situation and trade in sexual favours (Magwa & Nigara, 2015; Quarshie, 2021), some religious leaders, particularly in Christian and Muslim congregations have been found to capitalise on the vulnerability of their members presenting with health, social, economic, emotional and spiritual needs and abuse their members (Chowdhury et al., 2022; Quarshie et al., 2022).

Another interesting finding is many survivors of CSA knew the perpetrators. Most of the perpetrators were family members, neighbours, teachers and family friends. This is similar to what is recorded in the literature (Murray et al., 2014; Pratesi et al., 2012; Quarshie et al., 2017, 2018). Again, considering that most of the perpetrators were older than their victims, this finding could be pointing towards the possibility that the perpetrators (by virtue of being older) wielded some level of social power and influence to 'compel' their victim. In Ghana and generally across Africa, children and young people are taught to be humble and obedient to the will of their elders

(including anyone older), so they can obtain favour from their elders (Gyekye, 2003). This exhortation could account for the seeming naivety and innocence shown in many cases by the victims; even where there are clear signs of potential abuse by the older person, the victims took no preventive action. Perhaps, this evidence suggests that children and young people – particularly, girls – should be educated and encouraged to be measured and precautious in their level of trust reposed in significant other males, especially, under compromising circumstances. Families and children and adolescents should be encouraged that it is helpful to report any sexual predatory behaviours to the police. All acts of CSA are offences of first-degree felony in Ghana. Therefore, it must be reported to the police and not settled in communities or at home – which often tends to protect family ties and social image but leaves the psycho-emotional needs of the survivor unaddressed.

Implications for practice and future research

The findings bring to light the observation that sexual abuse victimisation often begins at an early age; therefore, interventions should be developed for younger age groups and evaluated for broader prevention of CSA in Ghana. This can be done by the integration of lessons on responsible, sensitive sexual education activities in school and out-of-school groups to equip children and young people with knowledge and skills on how to protect themselves and how to notice potential sexual predators, places and times. Education should also include knowledge of support available to children and young people and a reporting system for CSA. Other specific guidelines including teaching children and young people about touches that are okay and those that are not okay, and teaching them to recognise and flag up intentions and tactics of sexual predators in order to protect children and young people from CSA victimisation.

Significant other adults (including parents, teachers and childcare workers) living or working with children and young people have key roles to play in safeguarding young people (particularly, girls) against CSA. Non-disclosure often reinforces the perpetration of CSA, but a timely disclosure of the CSA that is properly responded to has a lower potential for future sexual abuse/revictimisation, and to reduce the exploitation of victims by perpetrators. To this end, competent and trusted significant other adults in children's lives, particularly parents, caregivers and teachers need to learn how to encourage their children to report CSA victimisation, and take relevant, helpful steps to handling it. This knowledge is also beneficial for healthcare workers and researchers who work with survivors of CSA. Related to the importance of disclosure and reporting of CSA, parents must ensure open parent–child communication about sexuality and sexual abuse, know the warning signs of CSA and generally improve their knowledge about available community support resources for CSA survivors and prevention of the phenomenon (Del Campo et al., 2023). Besides open parent–child communication, parents must spend meaningful time and be involved with their children, and know who else their children are spending time with, including other young people and adults (Kamukama et al., 2022).

Clearly, further evidence on CSA in Ghana is still needed using robust research designs, including longitudinal studies, to increase our contextual knowledge about trajectories of the effects of CSA on young survivors. Also, carefully designed qualitative studies involving incarcerated perpetrators of CSA may be useful in improving our understanding of the tactics, motivations and therapeutic needs of perpetrators. To date, the meaning of CSA from the perspective of perpetrators is still unexplored, but lessons drawn from the views of perpetrators can be potentially useful in designing holistic prevention programmes and intervention efforts.

Limitations

The use of content analysis to examine social constructs and problems comes with some limitations that can influence the interpretation and conclusions drawn from the current study. The use of online media content analysis posed a challenge as there were several instances of underreporting. As identified by earlier studies (e.g. Quarshie et al., 2017, 2018, 2022), this may underrate the true extent of CSA in Ghana. Also, there was a significant number of missing data and non-reporting of key information. The focus on survivors' narration of the sexual abuse experience may lead to failure to capture more details on the psychological experiences, perpetrator information and offence characteristics. There may be reports of non-factual stories by the media during the reporting of sexual abuse, and not all cases of CSA attract media attention. The implication is that the findings of the secondary analysis of the media reports on CSA may not be generalisable across Ghana; but we believe that the inclusion of primary data accessed through interviews with CSA survivors adds to the strength of the evidence of this study.

CONCLUSION

This paper has provided some useful descriptive insights into the state of CSA in Ghana over the last 6 years, drawing on qualitative analysis of media reports and lived experiences of survivors accessed through interviews. The findings indicate that CSA is still a common problem in Ghana, with girls and young women being more at risk than boys and young men. The most common offence reported was defilement, and the perpetrators of the abuse were all males employed in low-income status occupations. Among other measures, the findings underscore the need to develop prevention strategies that empower young females and males to identify, escape or avoid (potential) sexual predators and encourage reporting and disclosure of CSA victimisation to formal support institutions.

AUTHOR CONTRIBUTIONS

Garnet Linda Naa Adukwei Acquaye conceptualised the study, with input from Emmanuel Nii-Boye Quarshie, Joana Salifu Yendork and Kwaku Oppong Asante. Garnet Linda Naa Adukwei Acquaye collected the data. Garnet Linda Naa Adukwei Acquaye and Emmanuel Nii-Boye Quarshie analysed the data with input from Kwaku Oppong Asante. Garnet Linda Naa Adukwei Acquaye drafted the manuscript and Emmanuel Nii-Boye Quarshie, Joana Salifu Yendork and Kwaku Oppong Asante critically reviewed and edited the manuscript. All authors approved of the final version of the manuscript.

ACKNOWLEDGEMENTS

The authors wish to thank the various institutions that gave us the person to access the participants and the individuals who participated in the study.

FUNDING INFORMATION

None.

CONFLICT OF INTEREST STATEMENT

None declared.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available based on a reasonable request from the corresponding author.

ETHICS STATEMENT

Our research received an IRB approval from the Ethics Committee of Humanities (ECH) of the University of Ghana (Reference: ECH 166/18-1).

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How to cite this article: Acquaye, G. L. N. A., Quarshie, E.-B., Salifu Yendork, J., & Oppong Asante, K. (2023). Child sexual abuse in Ghana: A multi-methods exploratory study. *Children & Society*, *00*, 1–22. https://doi.org/10.1111/chso.12830