

Implications

sexual violence against adolescents has significant negative health and social consequences, such as sexually transmitted infections, teen pregnancy and school dropout and if not addressed through appropriate interventions will result in far reaching consequences for not only the individual, but the family, community and society as a whole. Non-reporting of sexual abuse leads to continued impunity of perpetrators.

Conclusions

This report confirms what a number of women and children's rights organizations have known for quite some time, that rates of sexual abuse in schools are at staggering levels and have tremendous consequences for education outcomes, especially for girls. The phenomenon is clearly gendered with girls more likely to experience sexual abuse but it should be noted that boys could also be at risk since a considerable number of male respondents also reported experiencing sexual abuse.

Recommendations

With the high prevalent rate of sexual violence against adolescents in Ghana, it is important that efforts are made and measures put in place to address the situation. A number of recommendations have therefore been made below to guide all stakeholders including educational institutions, parents and civil society in addressing SVAG in Ghana.

A need to have access to medical services and counselling for victims.

Ghana Education Service

- Teaching staff who have been found to have sexually abused any pupil should be reported to the police for the law to take its course, in addition to any administrative punishment that will be taken.
- While recognizing that the curriculum on life skills include reproductive health and rights, it is important to emphasize to pupils that they are not to be blamed for sexual abuse and to encourage them to report and most importantly where and who to report to in such cases.

Civil Society Organizations

- Ignorance about reproductive rights, where to report, and who to report to in cases of abuse indicates the need for increased access to information. Women and children's rights organizations working to promote and protect the rights of children should undertake regular awareness-raising campaigns on youth's sexual and reproductive health rights, to ensure knowledge of their rights to live free of sexual violence and to use contraception in cases where they may be sexually active.
- Social Behavioral Change Communication programmes through the use of radio, television, print material, social media platforms and client-provider interaction can be utilized to enhance positive and healthy knowledge and awareness of sexual and reproductive health.
- Establishment of interactive spaces where the voices of adolescents are documented and data captured to inform policy. Generating this kind of qualitative

information will help to identify shifts in behavioral patterns and assist in constantly adapting to meet a changing population's sexual and reproductive health needs.

- Set up systems and structures where youth can access confidential information and advice such as hotlines.

Parents and Guardians

- Parents and guardians should listen to their children and wards and not blame them when they report cases of sexual abuse, especially by other family members, teachers/principals and other persons in authority. Parents/guardians have a responsibility to protect their children and wards from such perpetrators, no matter who they may be.
- Parents/guardians should speak with their children and wards – both male and female – about sex, sexual harassment, sexual assault, their sexual rights, and their responsibility to treat others with respect. Too many respondents in this survey indicated that they had not been aware that they could report an SBSV perpetrator. Further, given that fully 9% of all female respondents indicated becoming pregnant as a result of rape, it would seem prudent to also ensure that young women and men are educated about contraception and forms of birth control.
- Parents/guardians must provide for their wards in order to reduce the likelihood that they will pursue transactional sexual relations in order to obtain basic needs. Several survey respondents noted that a number of Ghanaian youth (particularly females) pursue transactional sex because their parents or guardians fail to provide them with the resources necessary to stay in school.

References:

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Contact details

Gender Studies and Human Rights Documentation Centre
P. O. Box CT 8163, Cantonments, Accra.
Location: 18 Klotey Crescent, North Labone
Website: www.gendercentreghana.org
Email: info@gendercentreghana.org
Tel: 0302 760687/8



Gender Studies & Human Rights Documentation Centre



AMPLIFYCHANGE

Policy Brief

School Based Sexual Violence in Ghana

Executive Summary

Sexual violence against adolescents is a major human right violation, public health issue, with significant negative health and social consequences. Findings from the Gender Centre (GC) national survey and other studies carried out over the years have shown that school based sexual violence is very prevalent in Ghana and an important area for concern.

The data from the GC national survey for instance showed that 56% of female respondents and 37% of male respondents indicated having experienced sexual violence during their early levels of schooling. Levels of reporting of sexual violence cases were also low, with friends and family members being the most preferred avenue of reporting.

This policy brief highlights the magnitude of school based sexual violence, the need to prevent it, and a call to a commitment by relevant stakeholders to provide associated response services.

Introduction

The 1992 Constitution of Ghana guarantees access to education and for that purpose places an obligation on the state and its agencies and institutions to ensure the substantive enjoyment of this right to all, including girls.

The obligation of the state and its agencies includes, not only provision of infrastructure, teachers and other resources but also a safe and conducive environment so these children can enjoy the rights guaranteed under the Constitution.

In addition to the state's obligation, parents and guardians as well have the same obligation to ensure their children's access to education which is clearly spelt out under the Children's Act, (Act 732).

The development of a National Adolescent Health and Development Programme (ADHD) in 2001 was also an attempt to meet the needs of adolescents, who comprise one third of the Ghanaian population. In 2009, a seven-year National Adolescent Health and Development Programme Strategic Plan (2009 – 2015) was developed that heralded a multi-sectoral effort to deliver sexual and reproductive health rights to young Ghanaians.

The policy implementation plan sought to achieve a reduction in maternal mortality rates, increase the age at first sexual intercourse, delayed marriage practices and reduce the number of unsafe abortions.

Key Messages

- Parental neglect and failure to provide basic needs of children and wards could lead to transactional sex, and teen pregnancy, which then lead to school dropout.
- Children need to know about sexual health, sexual abuse and harassment. Parents/guardians should teach their children about these issues from an early age and encourage them to report any abuse.
- Parents and guardians should listen to their children/wards when they report cases of abuse, especially by family members and other persons in authority. They have a responsibility to protect the children/wards from abuse by these perpetrators, no matter who they are.
- Children are not to be blamed for sexual abuse. Those perpetrators who misuse their power are the ones to blame and they should be sanctioned as required under the law.

Introduction - Continued

This was to be achieved through comprehensive sexual education that was age-appropriate and culturally sensitive. Additionally, access to health services and critical leadership training and skills would be developed to attend to the evolving needs of young people. Statistically, there have been moderate successes towards achieving this plan, with an increase in the number of women aged 15-19 years who had experienced their first sexual activity by 15 years from 7.3% in 1998 to 11.8% in 2014.

Anecdotal evidence from other women's rights and children's rights organisations indicates that school-based sexual violence is a problem. Unfortunately, such evidence has tended to focus on girls with hardly any information on boys.

It is against this backdrop that the Gender Centre in 2016, conducted a national mobile survey to understand the issue of School Based Sexual Violence with the view of getting the relevant data for advocacy to address the issue.

The survey formed part of activities under its project titled Cell Phones Against Sexual Violence.

Findings

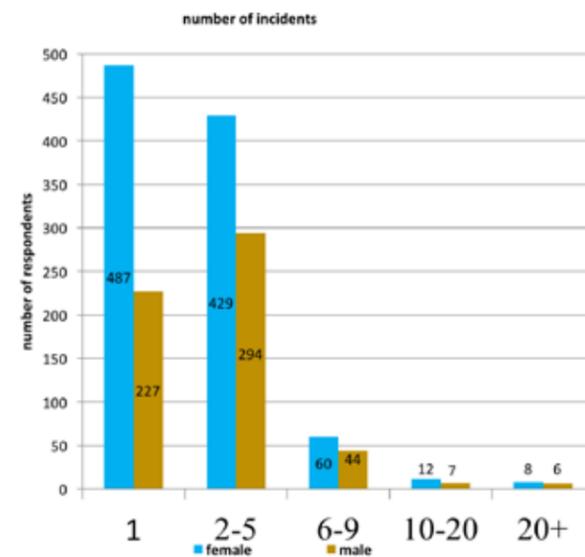
The findings of the Gender Centre's (GC) national online study carried out in 2016 revealed that a disturbingly high number of youth are exposed to school based sexual violence: 56% of female respondents and 37% of male respondents indicated having experienced sexual violence. In over half of these cases 51% and 61% of female and male reported cases, respondents indicated having experienced multiple incidents of sexual violence.

1. Prevalence of SBSV

Table 4: Sexual Violence and School-Based Sexual Violence Frequency by Gender

	Female		Male	
	Number	%	Number	%
Sexual violence	1086	56	633	37
Sexual violence during school	1001	51	578	34
Sexual violence outside of school	85	4	55	3

2. Number of SBSV Incidents Experienced



Also, majority of instances of sexual violence appear to have taken place in early levels of schooling: Over half of all reported cases of school based sexual violence (57%) occurred while youth were in primary or in junior high school.

The study also found that 27% and 36% of female and male respondents respectively indicated that the most frequent perpetrators of school based sexual violence were friends whereas 15% and 25% of female and male respondents indicated their fellow students as perpetrators.

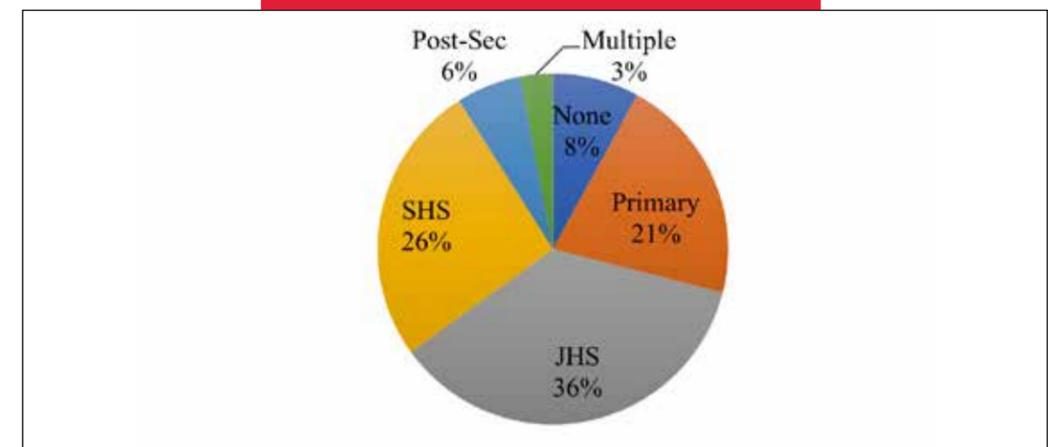
Nine per cent (9%) of female respondents and 3% of male respondents reported experiencing sexual violence at the hands of a teacher or principal, suggesting that on average, one out of every 11.5 girls and one out of 30 boys in Ghana experience sexual violence at the hands of a school authority.

Levels of reporting by victims of sexual violence have generally been found to be low. The study findings revealed that majority of respondents who had experienced SBSV did not report these incidents to anyone. 62% of females who had experienced SBSV said that they had not reported their experience of sexual violence to anyone.

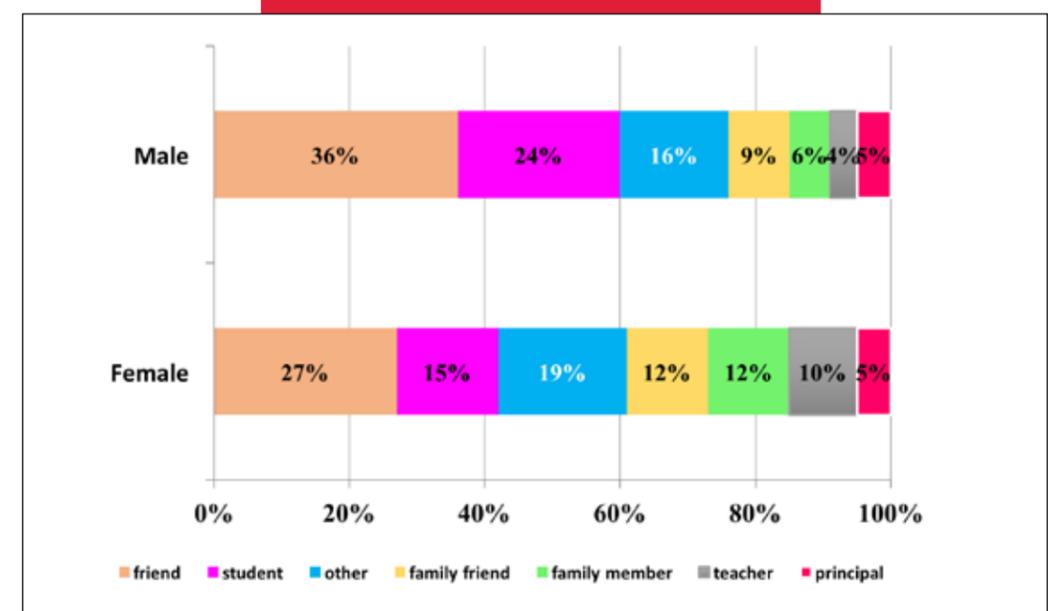
Additionally, the findings further revealed that of the 657 female respondents who had experienced rape, 185 (28%) indicated that they had become pregnant as a result.

These findings however show clearly that there is the need for measures to be put in place to address the situation.

3. Levels of Schooling at Time of SV (Proportional)



4. Identity of SBSV Perpetrators



5. Levels of Reporting

