CHILD PROTECTION BASELINE RESEARCH REPORT

"It takes a community to raise a child"

REPUBLIC OF GHANA

MINISTRY OF GENDER, CHILDREN AND SOCIAL PROTECTION

unicef ✪

Government of Ghana

REPUBLIC OF GHANA

Child Protection Baseline
Research Report

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Foreword

The Child Protection Baseline Study was carried out to inform the development of a new Child Protection Policy framework, gain a deep understanding of the scope and breadth of the protection concerns of children, and contribute to a comprehensive understanding of the factors that affect child rearing practices in the country.

The study provides a rich source of information on problems and achievements in the child protection system. Even though the findings show the weakening role of the extended family system, it also highlights the important role the family still plays in the development of children. The study also sheds light on early marriage and female genital mutilation, child labour as well as children and justice.

I am optimistic that in our effort to formulate policies, these findings will be utilized effectively to guide the implementation of programmes and projects, the Child Protection System will be strengthened.

Finally, I would like to state that protecting children is not a choice but a shared responsibility of the family, community and State.

HON. NANA OYE LITHUR

MINISTER FOR GENDER, CHILDREN AND SOCIAL PROTECTION (MoGCSP)

Preface

UNICEF is proud to be a partner of the Government of Ghana as it leads the transformation of its child protection system. While in the past, this system has generally been oriented towards rescue and removal of children, a new Child and Family Welfare Policy places "working with families" at the heart of a new range of measures to safeguard children.

This new approach honours both the child as an active agent with rights, as well as Ghana's strong cultural heritage of providing a safety net to vulnerable children through family and community structures and traditions.

The national child protection study presented here, was commissioned by the Government of Ghana and UNICEF to provide an evidence-base for the new Child and Family Welfare Policy.

While Ghana has made laudable progress in some areas, such as in combatting female genital mutilation/cutting, the research reveals that this and other violations such as neglect, physical, emotional and sexual abuse, child trafficking, child labour and child marriage, are persistently impacting on children and their potential.

The broad acceptance of physical and corporal punishment remains a challenge. Children in the research also found emotional abuse to be even more harmful than physical abuse in terms of its long term impact.

While the traditional practice of kindship and extended family care offer a valuable support system for vulnerable children, children are often abused and exploited in their new home and denied of education.

Girls (especially adolescent girls) emerge clearly as the most vulnerable group overall due to socio-cultural attitudes and preferences for males.

The research process was crucial to identify and begin building relationships with stakeholders including community and religious leaders, teachers, police and government agencies and children at all levels, so that these concerns are addressed systematically, and build a coalition in support of the strategies identified.

A number of recommendations for addressing the issues are highlighted by the research: Behaviour and social normative change for the protection of children from all forms of violence, abuse and exploitation; Stronger engagement with churches, mosques, traditional leaders and Assembly persons; Clearly defined mandate and roles of all government agencies and departments working in child protection; Urgently addressing gaps in legislation and policy.

We look forward to our continued partnership with the Government of Ghana, which has shown enormous commitment to creating a safer environment for children.

Susan Namondo Ngongi,

Representative, UNICEF Ghana

List of acronyms and abbreviations

A/R	Ashanti Region
BA/R	Brong Ahafo Region
CBO	Community-based organisation
CCPC	Community Child Protection Committee
CHRAJ	Commission on Human Rights and Administrative Justice
C/R	Central Region
CRC	Convention on the Rights of the Child
CREATE	Child Rights Evaluation, Advice & Training Exchange
CSEC	Commercial sexual exploitation of children
DCD	Department of Community Development
DHS	Demographic and Health Survey
DOVVSU	Domestic Violence and Victim Support Unit
DSW	Department of Social Welfare
DSWO	District Social Welfare Officer
E/R	Eastern Region
FGD	Focus group discussion
FGM/C	Female genital mutilation/cutting
GA/R	Greater Accra Region
GES	Ghana Education Service
GOG	Government of Ghana
GSHS	Global School-based Student Health Survey
GSS	Ghana Statistical Service
ILO	International Labour Organisation
ISSER	Institute for Statistical, Social and Economic Research
KII	Key informant interview
LEAP	Livelihood Empowerment Against Poverty
MICS	Multiple Indicator Cluster Survey
MoE	Ministry of Education
NGO	Non-Governmental Organisation
N/R	Northern Region
PDA	Participatory Development Associates
UE/R	Upper East Region
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UW/R	Upper West Region
V/R	Volta Region
WHO	World Health Organisation
W/R	Western Region

Acknowledgements

The compilation of credible and reliable information to gain a deeper understanding of the scope and breadth of the protection concerns of children in the country, for effective management and policy formulation is one of the key objectives of the Ministry of Gender, Children and Social Protection and its partners

We wish to express the gratitude of the Ministry to UNICEF for their financial and technical support to the success of this study.

The technical assistance and input received from the National Advisory Committee members is very much appreciated. The Ministry appreciates the cooperation and collaboration of members in the building of a strong National Child Protection System that serves the needs of all stakeholders and shows the roadmap for the protection and development of children in Ghana.

The Ministry is also grateful to all child protection partners, staff of the Department of Children, and all and sundry who contributed in diverse ways to the success of this exercise.

Executive summary

The Government of Ghana (GOG), with support from UNICEF, initiated in 2012 a comprehensive process of strengthening Ghana's child protection system. This was in order to address shortcomings in the existing system which were identified during the 2010 Mapping and Analysis of Ghana's Child Protection System Study (referred to hereafter as the Mapping and Analysis Study[1]). The 2010 Mapping and Analysis Study identified that Ghana lacks a clear national policy framework for child and family welfare services and that the provisions in the Children's Act for reporting and responding to children in need of protection are not well adapted to Ghanaian culture and context and do not reflect family-focused and consensus-based approaches to decision making.

The aim of this national study on child protection was to build on these findings in order to gain a deeper understanding of the scope and breadth, and contributing factors leading to, child protection concerns in different regions of the country, as well as how different actors at community and government levels contribute to prevention and response. The research sought to provide evidence to further guide the child protection system reform process, moving towards a more appropriate, effective and sustainable system, 'fit' for Ghana. This study also serve as a programme baseline for the situation of child protection in Ghana, and it further contributes to an in-depth understanding of 'drivers' and 'barriers' to change in relation to child protection practices. This knowledge and insight will inform future strategies and design of programme interventions seeking to address the issues.

Both quantitative and qualitative research methodologies were applied to gather data that is sufficiently disaggregated to give a nuanced understanding of child protection in relation to girls and boys of different ages in different family and household contexts. The study therefore included, in both urban and rural areas and in all ten regions, qualitative field work in 20 communities (134 focus group discussions with participants aged from 7 years upwards and 237 key informant interviews) and quantitative household questionnaires with 1,500 adults and 1,500 children aged 14 to 17. The research process also included a desk review of key documents and a series of regional consultation workshops with 323 members of regional networks, groups or individuals working in the field of child protection. Variations in sex, age, ethnicity, and geographic location (region and rural/urban settings) were analyzed in relation to the household survey findings.

The report has four main components: research background and methodology; explanation of the cultural context of child protection in Ghana; detailed research findings; and highlights, conclusions and recommendations.

The research reveals a lot about the Ghanaian cultural context in which children are raised, as well as about the strengths and challenges of the current child protection system in Ghana. The family has a very important role in creating a loving, supportive and protective environment for prevention and in relation to responding to child protection concerns. Parents are generally regarded as the basic unit of child protection across the country and the majority of children live with at least one biological parent. The most important responsibilities of parents are said to be taking care of children's basic needs. The extended family often provides informal foster care arrangements for children who do not live with their biological parents, assisting such children with financial and material support. Children without parental care are only rarely abandoned. The system of informal fostering, however, is open to abuse and can make children vulnerable to exploitation and harm. Evidence suggests that in some cases fostered children are treated differently, subjected to verbal abuse and/or exploited economically or through excessive household chores. Furthermore, findings from this research indicate that the extended

family network, which has long been a key feature of Ghanaian culture, is in some parts weakening due to poverty, migration and family breakdown.

The communal nature of Ghanaian society means that, along with families, the role of communities in preventing and responding to child protection concerns is also hugely important. Actors at the community level including customary Chiefs and Queen Mothers, women's groups and community health workers play an important role for the welfare of children in addition to families.

However, various types of child neglect, and emotional, physical and sexual violence, abuse and exploitation, often exacerbated by gender-based violence and discriminatory traditional cultural beliefs and practices such as child marriage, are present all over the country. In spite of the natural dedication of most caregivers to protect children, awareness of child development and protection is generally limited and the impact of violence, abuse, exploitation and neglect on children is often not recognized.

Girls, children in puberty, children in single parent and re-constructed families, children living in conflict zones, children who have been orphaned, children with disabilities, affected by HIV or from minority groups appear to experience greater vulnerability in some circumstances. Patriarchal societies and socio-cultural attitudes reduce the status of females. This results in much higher rates of sexual abuse and exploitation of girls compared to boys, and gender-based injustice in responding to violence against girls and women. Adolescents between 12-17 years of age become more susceptible to other types of harm (compared to corporal punishment which is experienced more by younger children); with girls this relates more to sexual activity and with boys to engagement in harmful economic activities.

Children are socialized to be submissive, even whilst being expected to take on the responsibilities of adults. This can make them vulnerable to harm and exploitation by adults as their well-being and rights are often disregarded. Discipline is regarded as an important part of child-rearing and there are strong expectations around children's behaviour in terms of obedience and showing respect to their elders.

Physical harm of children is mostly perpetrated under the guise of discipline and occurs widely at home and at school, as well as in the community to a far lesser extent. Corporal punishment is widely accepted as a means of correcting children, even though it is identified as the worst way to discipline children. More children than adults consider corporal punishment as harmful to children. The majority of children's responses to corporal punishment are negative and indicate that children do not appear to be 'learning' anything from it. Female family members – especially mothers - are the main perpetrators of physical punishment at home compared to male family members. Children aged 6-14 are subjected to corporal punishment more than other age groups. Exploitation of children by their teachers for labour was reported in a few regions, sometimes under the guise of punishment. Physical bullying by another child at school is not particularly common but it is likely that the extent of verbal bullying is much higher.

Children's experience of violence is rarely segregated into distinct categories of 'physical', 'emotional' or 'sexual' harm. All types of violence result in often significant and lasting emotional harm. Child survey respondents identify emotional issues much more than physical issues as things which make them not feel safe. Although rates of physical punishment are high and children react negatively, it does not appear to impact their sense of safety nearly as much as emotional harm. Violence prevention in Ghana needs to strongly address positive child rearing and emotional well-being. Parents, guardians and teachers usually react positively when children do something right at home or at school. However, children report verbal, emotional and psychological harm from parents, teachers and other adults in and

around the community and many said that they dread this type of abuse more than physical violence. Children's reactions to verbal abuse are overwhelmingly negative, suggesting that they are not learning anything from this. Excessive insults cause emotional and psychological problems in children, making them passive, reserved and withdrawn. Neglect and lack of parental supervision, often linked to poverty, is mentioned as a cause of harm to children in all regions of the country.

Survey respondents identified transactional sex (children having sex in exchange for food, shelter, clothes and other items) and children watching pornographic images as the most prevalent forms of sexual abuse in their communities and those which they are most concerned about. Cases of sexual abuse and defilement among girls are related to poverty and sexual abuse is most commonly perpetrated by people that are closely associated with the victim/survivor. Sexual abuse by teachers was noted as a particular concern affecting girls.

Specific child protection concerns include child marriage, female genital mutilation/cutting (FGM/C), trafficking for the purposes of child labour and sexual exploitation, child labour in general and separation of children from biological parents. Child marriage was highlighted by mostly male respondents as a mode of protecting girls from fatherless pregnancies, even though it is illegal. There are very strong regional differences in the prevalence of FGM/C.

The majority of survey respondents are aware of the risks relating to cross-border trafficking, although in-country trafficking appears to be more common. Respondents mentioned that children are trafficked mostly into labour in the fishing industry, farming and domestic work. Child work is prevalent, particularly in agriculture. It is considered acceptable and integral to the socialisation of a child, particularly to equip them with life-long skills. However, various types of work encountered in the research are all classified by the ILO as the 'worst forms of child labour'. Children are

usually separated from parents for education and work. However, children are perceived to be safer staying with their biological parents compared to other environments, even extended family placements.

Juvenile justice is highly gendered, with many more boys coming into conflict with the law than girls. Stealing and property-related offences are the most common types of crimes. Girls are 'criminalised' much more than boys for sex-related 'offences' such as 'getting pregnant', adultery, promiscuity etc. and girls cite these issues much more than boys. The most common reasons given why girls and boys commit crimes or do things which are socially unacceptable are bad upbringing and bad influences.

In terms of prevention and response, positive child rearing is considered by children to be the most important way to make children feel safe. Children do not place much emphasis on services, systems and structures in relation to prevention. The behaviour of adults (especially parents and teachers) and the emotional treatment of children rank much more highly. A child's first port of call when hurt appears to be a family member. If resolution is not achieved within the family then the issue is taken to Chiefs for mediation. 'Informal' actions are more popular than 'formal' actions involving government services or structures. However, responses by the family and community might not always be child-centred or appropriate. There is a strong emphasis on preserving community harmony, over and above the welfare of the child. The majority of cases are not reported to government authorities. There is distrust of institutions such as the police, District Assemblies and judiciary.

Lack of resources amongst government agencies and the financial constraints of community members affect their ability to intervene. The vast majority of services which exist in communities to deal with child protection cases are 'general' community structures (such as religious, educational, administrative, health and police bodies)

rather than specialised services for children who have been harmed. Those most in need of such services (children, particularly girls, and women) are less likely to know of their

existence. Many of the most popular services (specialised in child protection) are those which are also the least available. If the child protection system in Ghana wishes to better exploit the most prevalent existing community-level services (like churches, mosques, teachers, traditional leaders and Assembly persons etc.) then significant targeted awareness, sensitisation and capacity building work is needed to improve the confidence of community members to approach them.

In relation to juvenile justice specifically, responses vary significantly, depending on whether the case is serious or minor and whether it was committed by a boy or a girl. 'Formal' responses are much more common in relation to serious rather than minor offences, for both boys and girls. In practice there are many obstacles in the formal system. Given the limitations of the formal system, most communities try to solve cases without them reaching the courts. However, 'informal' processes may be unregulated and not respecting of human and child rights standards and principles. Physical violence (by community members or unofficially by police) is common. There is a sexual element to a few of the punishments for girls which is absent in relation to punishments for boys. Compared to actual responses in practice, survey respondents would prefer for children committing both serious and minor crimes to be dealt with more through 'non-formal' and traditional procedures than through the 'formal' justice system, and more through child-specific rather than through adult-specific procedures.

Children's confidence and knowledge when it comes to speaking out is a key component of children's empowerment in relation to child protection prevention and response. A lot of awareness raising work is needed in the area of sexual abuse, addressing taboos and

enabling greater discussion of such issues within the family. Children in FGDs were more than twice as likely as adults to see a role for themselves in their own protection, particularly relating to prevention. This might imply that adults underestimate the capacity of children to participate in the own protection. When seeking help in situations of actual harm, children aged 14 to 17 still prefer to go to an adult rather than another child for help, even though peer friendships are undoubtedly hugely important for children and there are examples across the country of children lending each other money and offering kind words, advice and practical help to each other.

In terms of community actors, traditional leaders are present in the majority of communities and they play a role in responding to child protection issues. However, their handling of cases is not always satisfactory. Places of worship are the most prevalent 'service' available at the local level and there could be great potential to work more closely with them to develop their roles in relation to child rights-based prevention and response. Examples were identified where religious leaders have had both a positive and a negative impact on child protection. Education and health personnel are identified as potential sources of support and assistance, although in the case of teachers this is emphasised more by adults than children. Traditional healers are mentioned significantly less than doctors, nurses or other health workers as sources of support. In general, civil society institutions are not particular prevalent in the survey communities. The findings regarding Community Child Protection Committees/Teams were mixed: although they were not strongly identified as key actors in child protection in general, in some areas they were said to be very active. The extent of collaboration and cooperation varies from community to community depending on the range of services and relevant mechanisms which exist, the level of engagement by key actors on child protection issues and their willingness to work together.

In terms of state actors, the Department of Social Welfare has primary responsibility for child and family welfare services but its ability to function is severely limited by resource constraints and structural transition. The police are one of the main formal entry points for children and families to access child and family welfare services, in particular DOVVSU. In all regions, however, relations between the police and people in the communities can be strained by inefficiency, abuse of power and corruption. How children are handled in court depends on the discretion of individual magistrates. Very few cases reach court. In the majority of cases, children appear in the Juvenile Court without legal representation. There is some overlap between CHRAJ and DSW, especially in the handling of child maintenance cases. Although CHRAJ appears to be relatively better resourced compared with its civil service counterparts, it still faces obstacles to its work. There are mixed accounts about the Department of Community Development from different research areas and generally their mandate seems to overlap significantly with that of other bodies. The Department of Children received very few mentions in the research and is hampered by severely inadequate financial and human resources. The Department of Women is fairly well resourced compared to other departments. It does not have a specific mandate on children but generally raises awareness of relevant issues through its outreach to women.

Examples of good inter-agency collaboration were reported throughout the country. However, challenges to this include duplicated roles, competition between individual agencies over their mandates, competition for scarce resources from development partners, lack of trust, individualistic rather than collaborative efforts, no clear guidelines for collaboration, and problematic reporting mechanisms. District Assemblies collaborate with line ministries. A range of development partners and CSOs also collaborate with government agencies. Relations between government agencies and communities are relatively limited. Experience of government collaboration with traditional leaders is mixed.

The report presents a number of recommendations for addressing the situation as highlighted in the research report:

Behaviour and social normative change through broad-based engagement with formal (State institutions) and informal stakeholders (traditional leaders, civil society organisations; religious leaders) for the protection of children from all forms of violence, abuse and exploitation sould be promoted. Recognizing the family and community as the base units for children's protection, parenting and care-giving practices should be strengthened in the spirt of protecting children from harm.

The formal service providers need to be better resources (human and financial resources) for activities related to child protection and these resources need to be managed more efficiently and accountably. The mandate and roles of all government agencies and departments working in child protection need to be clearly defined at all levels which is also related to improving systems for data and information collection, analysis and sharing. Gaps in legislation and policy need to be addressed urgently to offer a stronger protective environment for children.

At local level, District Assemblies are encouraged to plan, budget and monitor the child protection situation in their respective district. Community networks and other informal or formal mechanisms at local level should be strengthened to better appreciate child protection and their capacity to prevent and address child protection concerns must be built.

Based on the findings of this research and the subsequent recommendations, it is clear that protection of children from violence, abuse, neglect and exploitation does not rest with one sole agency – it is a shared responsibility for families, communities, informal and formal actors at all levels and a responsibility that also involves children themselves.

1. Introduction

1.1 Context and background to the study

The Government of Ghana (GOG), with technical and financial support from UNICEF Ghana, embarked upon a process of strengthening the child protection system in June 2012. The process seeks to ensure that the system will be appropriate, effective, sustainable and 'fit' for Ghana, and able to prevent, protect and respond to all forms of violence, abuse and exploitation of girls and boys.

The aim of this national study on child protection is to build on the 2010 Mapping and Analysis of Ghana's Child Protection System Study (referred to hereafter as the Mapping and Analysis Study[2]) in order to gain a deeper understanding of the scope and breadth of child protection issues in the country. This research aims to explore the protection concerns of girls and boys of different ages in different regions of the country, the decisions that children, families and communities make regarding the protection of girls and boys, the reasons that underlie these decisions and the current practices that children, families and communities employ. It also explores how these protection practices relate to formal child protection stakeholders, to learn how child protection is working in the country and how this has changed, or not, over time.

Ghana has numerous legislative instruments in place to protect human rights in general and children's rights in particular, including the Children's Act of 1998. Prior to the adoption of the UN Convention on the Rights of the Child (CRC) in 1990, Ghana established the Ghana National Commission on Children in 1989 to see to the general welfare and development of children and co-ordinate all essential services for children in the country. Ghana is also a signatory to various other international conventions that protect the rights of children and, within a sub-continental context, has been at the forefront of instituting legislation against violations such as child marriage and female genital mutilation/cutting (FGM/C). In addition to various governmental agencies and departments promoting the rights of children, Ghana established a specific Ministry of Women and Children's Affairs in 2001, renamed the Ministry of Gender, Children and Social Protection in 2013.

In Ghana, the sense of belonging to family and clan is very strong and establishes rights and obligations for all members, including children. Girls and boys grow up in a closely connected extended family network with strong cultural traditions governing their birth, socialisation and upbringing. In many communities, particularly in rural areas, members of the wider extended family are expected to participate in the upbringing of children[3]. Traditionally this kinship network acts as a complete social welfare system, ensuring that resources are shared across the different levels of the family for the survival of all, strengthening kinship ties in the

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[2] Child Frontiers for UNICEF Ghana, Mapping and Analysis of Ghana's Child Protection System, 2012.

[3] Twum-Danso, A., 'From Central to Marginal? Changing Perceptions of Kinship Fosterage in Ghana', in Journal of Family History, Sage Publications, 2012.

[4] See list of key documents for desk review in Appendix 5.

[5] Ghana Multiple Indicator Cluster Survey with an enhanced Malaria Module and Biomarker 2011: Monitoring the Situation of Children and Women in Ghana (MICS 2011), p. 126, Ghana Statistical Service, p. 219.

process. Informal fostering, whereby a child is sent to live with another relative (typically an aunt or an uncle) is also common. Although this extended family network is said to be weakening due to poverty, rural to urban migration and family breakdown, children experiencing problems are typically cared for by the extended family or clan. In a functioning extended family system it is rare for children to be abandoned.

However, despite the legislation and state machinery dedicated to the protection of children and the important role of the family, statistics from a variety of studies[4] indicate that there are serious types of violence, abuse and exploitation affecting children all over the country. While the severity of violence, its frequency and impact vary, most studies reveal that neglect, as well as physical, emotional and sexual abuse and exploitation are widespread problems, often exacerbated by gender-based violence and discriminatory traditional practices such as child marriage. According to research conducted in 2011, 6% of women overall were married before the age of 15. The regions where a girl is most likely to be married before age 15 are the Western and Volta Regions, closely followed by the Eastern and Brong Ahafo regions.[5] At national level, statistics show that an average of about 4% of Ghanaian girls and women between the ages of 15 and 49 years have undergone FGM/C. However, prevalence is higher in some parts of the country such as the Upper West Region where 60% of women aged 45 to 49 and 16%

of girls aged between 15 and 19 years have undergone FGM/C.[6]

The numbers of children living or working on the streets are relatively large. A 2011 survey in the Greater Accra Region alone identified 61,492 such children, of whom 59% were girls [7]. In Ghana as a whole, 23% of children aged between 5 and 14 are engaged in some form of economic activity[8]. Ghana has been identified as a "source, transit, and destination" country for human trafficking[9]. For the most part, children are trafficked from the poorer regions of the country to urban centres. They are forced into exploitive labour in fishing (mainly affecting boys), agriculture and street vending (both boys and girls), domestic service (mainly girls)[10], illegal mining (known as galamsey, involving boys), head portering (involving girls who are referred to as kayayee), the Trokosi system (ritual servitude/enslavement of girls) and commercial sexual exploitation of girls[11] .

Data from the Demographic and Health Survey indicates that with regard to abuses such as rape and defilement[12], Ghana's statistics are so high that they rank in certain instances with countries that have a recent history of violent conflict like Sierra-Leone and the Democratic Republic of the Congo or with countries in the Middle East with a poor record on women's rights[13]. These findings are startling given Ghana's profile as a peaceful, upwardly-mobile democracy.

Although most parents and caregivers are naturally inclined to protect children,

[6] Government of Ghana official portal, 24 July 2013 quoting UNICEF report - http://www.ghana.gov.gh/index.php/2012-02-08-08-32-47/general-news/2108-female-genital-mutilation-declines-in-ghana-UNICEF-report [accessed 26 August 2014].

[7] Department of Social Welfare, Census on Street Children in the Greater Accra Region, Accra, 2011.

[8] Ghana Statistical Service, Ghana Living Standards Survey 6: First Quarter Labour Report, Government of Ghana, Accra, 2013.

[9] US Department of State, Trafficking in Persons Report, Government of the United States, Washington, DC, 2010.

[10] Ministry of Women and Children's Affairs, Child Trafficking, Sexual Exploitation and Pornography: Ghana's Report, Accra, 2007; International Organisation on Migration (IOM) Ghana, Baseline on Child Trafficking Northern Region: Trafficked Children at Work, 2006; UNICEF, Mid-Term Review Report – Child Protection, Accra, 2008.

[11] Child Frontiers for UNICEF Ghana, Mapping and Analysis of Ghana's Child Protection System, 2012.

[12] Defilement is when sexual intercourse takes place between two individuals, with or without consent, when one is younger than 16 and the other is older than 16. Both boys and girls can be defiled.

[13] Data gathered by UNICEF showing percentage of women aged 15-49 whose first experience of sexual intercourse was forced against their will, by age of first sexual intercourse, in West and Central African countries with available data: Ghana: 25% of girls under the age of 15, 16% aged 15-19 (Demographic and Health Survey (DHS) 2008); Liberia: 14% girls under the age of 15, 9% aged 15-19 (DHS 2007); Democratic Republic of Congo: N/A, 9% aged 15-19 (DHS 2007).

awareness of children's development and protection is generally limited and the impact of violence, abuse, exploitation and neglect on children is often not recognized.

The 2010 Mapping and Analysis Study identified that Ghana lacks a clear national policy framework for child and family welfare services and that the provisions in the Children's Act for reporting and responding to children in need of protection are not well adapted to Ghanaian culture and context and do not reflect family-focused and consensus-based approaches to decision making. Most aspects of the existing system are unregulated and there is a lack of detailed guidelines and protocols to guide Social Welfare Officers, Probation Officers and Child Panels in carrying out their mandates and responsibilities under the Children's Act and the Juvenile Justice Act.

In general, the child protection system has been oriented towards rescue and removal of children, as opposed to working with families to address problems in the home. The police Domestic Violence and Victim Support Unit

(DOVVSU) has become the main entry point for responding to cases of violence, abuse and exploitation of children. However, because the police are mainly concerned with criminal activity, response services have tended to focus only on children who have experienced criminal forms of abuse and exploitation.

The 2010 Mapping and Analysis Study also highlighted that there is also no clear structure for the delivery of social welfare and child justice services at community level. However, there are community actors who, given adequate child rights-based capacity building support, could play a stronger role in prevention and response services. Some of them are already often informally involved in resolving child protection concerns, for example community health workers, women's groups, teachers, family elders, Chiefs, Queen Mothers and religious leaders.

Limited coordination between government ministries was also cited as a challenge, linked to weak leadership and lack of resources, compounded by a weak child protection information management system.

The research presented in this report is based on the context and recommendations presented in the 2010 Mapping and Analysis Study.

1.2 Purpose of the research

As described above, this research study builds on the findings from the 2010 Mapping and Analysis Study which involved field research in two regions of the country. One of the key recommendations was to embark on a process of re-conceptualizing the child protection system to make it more relevant, sustainable and 'fit' for Ghana, by building on the strengths of existing community structures and traditions. In the light of this, the report recommended undertaking consultations with key child protection stakeholders, local communities and community leaders to identify the values and principles that the system should reflect, to discuss the role of formal service providers and their relationship to communities, and to explore opportunities to incorporate existing formal and informal community structures into the child and family welfare system.

The four key objectives of the research are outlined below:

1. Inform the development of a new Child Protection Policy framework (comprising a Child and Family Welfare Policy and a Justice for Children Policy) that clarifies the vision, purpose and overall approach of the child protection system in Ghana. The system should be designed to draw on the strengths of existing positive community structures and traditions that help to protect children from harm. Ultimately, it should be a realistic, sustainable and culturally appropriate system based on a dynamic partnership between the formal system and communities. Complementing the findings from the 2010 Mapping and Analysis Study, the research was thus expected to explore these issues in detail and to allow the policy design process to reflect the voices of community members from a cross-section of the country.

2. Contribute to establishing a baseline for selected indicators of the GOG/ UNICEF Child Protection Programme results framework. Noting the scarcity of information on many child protection issues, it was important to establish solid data on key child protection indicators to allow for measurement of programmatic progress against these indicators in the future. The majority of the indicators investigated in the research process are those associated with knowledge, attitudes, behaviour and practices on child protection issues.

3. Contribute to an in-depth understanding of 'drivers' and 'barriers' to change in relation to child protection practices. This information was essential to the process of developing a new 'communication for social change/development' Strategy for 2013-2016. The Strategy was being finalized as of August 2014.

4. Contribute to forming a 'coalition of support' for strengthening the child protection system in Ghana. Through the participatory and consultative research methodology, it was expected that the research process would assist in raising awareness of issues, and galvanize and mobilize support for system change and action at all levels. This final research report and the evidence gathered is expected to be used for advocacy in support of the system change necessary to make the child protection system a better 'fit' for Ghana.

1.3 Structure of the report

The report has four main components. Firstly the introduction sets out the background and methodology of the research. Secondly the cultural context of child protection in Ghana is explained, to ensure that readers have a framework in which to situate the detailed research findings - which make up the third component of the report and which respond to the overall research questions. Fourthly, the report highlights conclusions and recommendations based on these findings. This structure is summarised in the table below.

Overview		Chapters	Link to overall key research questions
Background and introduction	1.	Introduction: outlines the context, background, purpose and structure of the report.	
	2.	Methodology: describes the methodology undertaken for both the qualitative and quantitative research components.	
Child protection context in Ghana	3.	'It takes a community to raise a child' – current child care practices in Ghana: summarises current child care practices in Ghana, outlining the strengths and weaknesses of traditional cultural attitudes and practices.	
Detailed findings	4.	Child protection concerns in Ghana – issues and contributing factors: describes the detailed research findings in relation to the extent and experience of particular child protection concerns: physical violence and abuse; emotional violence, abuse and neglect; sexual abuse and exploitation; specific child protection concerns (separation of children from their biological parents, child marriage, FGM/C, trafficking and child labour); and children and justice (specifically children in conflict with the law). This chapter also explores factors that render children more vulnerable to protection abuses.	1. What puts children in harm's way? 2. Which children need to be protected from harm? When and why?
	5.	Preventing and responding to child protection concerns – the role of the child, family, community and State: examines different roles in preventing and responding to child protection concerns.	3. Who are the different people who protect children from harm? 4. How do the different actors at the community and government levels relate to each other or not?
Conclusions and recommen-dations	6.	Summary and conclusions: summarises the report findings.	
	7.	Recommendations: outlines recommendations based on the research findings.	

2. Methodology

2.1 Overview

To fulfil the research objectives outlined in section 1.2, both quantitative and qualitative research methodologies were designed. The aim was to gather data that was sufficiently disaggregated to give a nuanced understanding of child protection as it applies to and affects the circumstances of boys and girls of different ages in different family and household contexts, for example in urban and rural areas and across different regions. The report highlights sex disaggregation of findings throughout, and includes a selection of data broken down by region and rural/ urban differences. Additional information can be found on the accompanying CD. The overall research questions below were intended to provide the necessary framework for obtaining this information.[14]

Overall key research questions:

1. What puts children in harm's way? (with a particular focus on: general knowledge and attitudes of adults and children regarding child-rearing; separation of children from their biological parents; violence against children at home, at school and in the community; sexual abuse and exploitation; child marriage; FGM/C; justice for children)

2. Which children need to be protected from harm? When and why? (with a particular focus on vulnerable groups)

3. Who are the different people who protect children from harm? (with a particular focus on prevention and responding to abuse)

4. How do the different actors at the community and government levels relate to each other or not?

These questions guided the design of both the qualitative and quantitative methodologies. The Advisory Committee, chaired by GOG, was given the opportunity to input into the methodology design.

The research employed the following strategies:

i) A desk review of available documentary sources published in approximately the last 10 years - NGO and donor assessments, government reports and records, academic studies, legal instruments, evaluations and other relevant material.

ii) A household questionnaire administered to 1500 adults aged 18-65 (921 women and 579 men) and 1500 children aged 14-17 (755 girls and 745 boys). All the 10 regions of Ghana were covered in proportion to the population sizes of the regions as per the 2010 census.

iii) Focus group discussions (FGDs) in 20 communities, one rural and one urban site in each region of the country. A total of 134 FGDs [15] were held. Each FGD involved about 8 to 12 respondents. This amounted to 1362 participants in total (719 children and 643 adults). There were 77 FGDs with children and 57 FGDs with adults. These were undertaken separately with 7-10 year-old girls, 7-10 year-old boys, 13-17 year-old girls, 13-17 year-old boys, women likely to be parents of children under 18 (aged 25-40 years), men likely to be parents (aged 25-40 years), and men and women over 50, using Participatory Rapid Appraisal techniques where appropriate.

iv) Two rounds of regional consultation workshops with members of regional networks/groups/individuals that work in the field of child protection (total of 323 participants; approximately one third of these were women). These consultations were conducted in two phases: in

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[14] A more detailed breakdown of these questions and the methods used for data collection is outlined in two Researchers' Handbooks (one qualitative and one quantitative).

[15] The intention was to conduct 14 FGDs in each region. In practice, 14 FGDs were held in five regions, 13 FGDs in four regions and 12 in the Ashanti Region.

February and March 2013, prior to the field research, in order to gain an overview of the child protection issues in the region, the processes for addressing these issues and the opportunities and challenges for strengthening them.

Participants were also able to feed in to the proposed methodology for the qualitative field research and the workshop served to engage participants in supporting and facilitating contact with relevant key informants in their regions. Following the qualitative field research, in April 2013, a second round of regional workshops were convened in order to share and reflect on the initial findings and continue to engage regional stakeholders in the design and implementation of a child protection system.

v) Key informant interviews (KIIs) - semi-structured interviews (237 in total, 124 in urban areas and 113 in rural areas) with key informants at the national, regional and district levels plus additional informal discussions conducted during fieldwork. This included relevant sector ministries at the regional and district levels, representatives of District Assemblies, health workers, teachers, police, community leaders, Community Child Protection Committee (CCPC) members (where these existed), and other members of the local community.

vi) Interviews with individual children for case studies - ten girls aged 8 to 17 were interviewed (including one girl whose age was not recorded) along with eight boys and young men aged 12 to 20.

vii) Observation of community and family interactions - this involved guided walks in the communities, visits to different service providers and home visits for case studies.

A mixture of quantitative and qualitative methodologies allows for statistical findings, which give an idea of the scope of situations, to be explored in more depth and illustrated with detailed examples.

Note on interpreting the quantitative data

As with many surveys of this type, although purposive sampling was applied, the findings only reflect the experience of the questionnaire respondents interviewed. Although the findings provide a useful insight, they cannot be extrapolated to apply to all adults and all 14-17 year-olds in Ghana. The commentary on the quantitative data in this report therefore uses the terms 'adults' and 'children' as a shorthand to refer to 'adult and child household questionnaire respondents' and not to all adults and children in Ghana.

Child questionnaire respondents are aged 14-17. The findings may therefore not be relevant for younger children.

When referring to percentages in the narrative, the actual number of respondents or responses is given in brackets in the form of 'n=123' in order to give an accurate picture of the extent or significance of a finding. For example, 50% of 1000 (n=500) is much more significant that 50% of 10 (n=5).

Some tables and charts refer to 'respondents', i.e. when the original question allows for only one response per person (such as agree / disagree / don't know questions). Other tables and charts refer to 'responses' when the original question allows for 'multiple options possible'.

Not all questions were answered by all respondents. The total number of respondents may therefore not add up to 1500 children or 1500 adults in all cases. This is because some questions are dependent on previous responses given by the person being interviewed. For example, a respondent is only asked detailed questions about their experience of physical discipline if they have already stated that this is something they have experienced. If not, then the follow-up question are 'skipped'. In this way the narrative sometimes refers to 'relevant respondents', i.e. those for whom the question was relevant.

Note on interpreting the quantitative data (cont'd)

In cases where the child and adult household question are the same or very similar, the data is shown side by side for better comparison of results. However, it should be noted that – for child protection reasons – child and adult household questionnaires were not conducted in the same households. The data from the child and adult household questionnaires is therefore not directly comparable. The juxtaposition nevertheless provides a useful anecdotal comparison.

Graphs and charts compare percentages of respondents or responses, not actual numbers. This is because the total number of respondents from each category is not the same. For example, the total number of respondents interviewed is 755 girls, 745 boys, 921 women and 579 men. The percentage of girls' responses is therefore analysed against the percentage of boys' responses etc. to allow for a more equitable comparison. The commentary accompanying the tables and graphs therefore often states that 'proportionally' more girls than boys...etc. This means a higher percentage of girls' responses compared to a higher percentage of boys' responses.

All percentages are rounded up to one decimal place for a compromise between accuracy and readability.

As with all surveys dealing with sensitive issues around violence, in spite of efforts to build trust and minimise bias, there may be under-reporting of the extent of violence encountered and over-reporting of 'positive' behaviour perceived by respondents to show themselves in a good light to the researchers.

2.2 Sampling and research sites

2.2.1 Qualitative data

The study included qualitative field work in 20 communities (one urban and one rural) in all the ten regions of Ghana.

Criteria for site selection

The following criteria were used to guide the selection of research sites, ensuring a mix of communities with different profiles:

- Geography - an urban and a rural site in each region
- Patrilineal and matrilineal kinship patterns
- 'New' areas, i.e. areas that don't seem to have been researched a lot in the past (avoidance of 'research fatigue')
- Existence of Community Child Protection Committees/Teams
- UNICEF Convergence Districts (where other UNICEF Programmes are operating such as health, education, water, sanitation and hygiene.

These are also Districts that have embraced the concept of 'child-friendly schools')

- CommonTargeting Mechanism pilot districts for social protection, including Livelihood Empowerment Against Poverty (LEAP) - the GOG cash transfer programme
- Districts where institutional care facilities are present
- Newly created and well-established districts to reflect differences in local government capacity
- Proximity to services (close/remote)
- Presence of 'spontaneous' fostering (extended family care without state intervention)
- Districts with known child protection issues, including: worst forms of child labour (e.g. artisanal mining); high levels of inward and/or outward migration; conflict areas; areas known for trafficking and harmful cultural practices/beliefs (child marriage, FGM/C, Trokosi,witchcraft, prayer camps[16]); and other potential risk factors.

[16] Prayer camps are controversial in Ghana as some religious figures use them to 'treat' serious illnesses, including mental health issues, as opposed to seeking professional medical assistance.

Table 1: Communities selected for the qualitative research

Region	District	Locality Name	Type
Ashanti	Atwima Mponua	Akomfore	Rural
Ashanti	Kumasi Metropolitan	Kaase	Urban
Brong Ahafo	Dorma East	Adiembra	Rural
Brong Ahafo	Techiman	Mamprusi Line	Urban
Central	Twifo Heman Lower Denkyira	Baakondzidzi	Rural
Central	Komenda Edina Eguafo Abirem Municipal	Elmina	Urban
Eastern	Kwahu North	Amankwa-Tornu	Rural
Eastern	Lower Manya Krobo	Agormanya	Urban
Greater Accra	Ada West	Anyamam	Rural
Greater Accra	Ashaiman Municipal	Ashaiman	Urban
Northern	Tolon	Adunbiliyili	Rural
Northern	Nanumba North	Masaka	Urban
Upper East	Builsa South	Kanjarga & Fumbisi	Rural
Upper East	Bawku Municipal	Gingande & Zongo	Urban
Upper West	Lambussie Karni	Piina	Rural
Upper West	Wa Municipal	Wa Nayiri	Urban
Volta	South Tongu	Agave Afedome	Rural
Volta	Hohoe Municipal	Gbi Bla Zongo	Urban
Western	Bia	Camp 15	Rural
Western	Wassa Amenfi East	Bawdie	Urban

Selection of research participants

FGD participants were selected by community mobilizers. Mobilizers were identified on the basis of their knowledge of the people in the community, ability to mobilise and likely to be objective in their selection. They were provided with the key characteristics of each focus group such as age, gender, experience and knowledge and asked to find representatives within the time constraints. The case studies generally included a sample of most affected persons, which were identified through the FGDs, while the key informants included 'well informed persons'.

2.2.2 Quantitative data

The quantitative data was collected using a cluster survey methodology based on population sampling.

Criteria for site selection

With assistance from Ghana Statistical Service (GSS), 100 enumeration areas were identified (see Appendix 2), distributed in line with the proportion of population size in the 10 regions as determined by the census of 2010.

Selection of research participants

In each enumeration area, 15 adults (male and female) and 15 children (male and female) were interviewed by applying a screening questionnaire to identify eligible respondents within households which were selected at random. If more than one eligible respondent was available in the selected household, the individual respondent was identified randomly.

The adult household questionnaire was only administered to individuals who were 18-65 years old living in households where there were

children under 18 (biological or otherwise). This was in order to try and target adults who are likely to have experience of child-rearing. The child household questionnaire was only administered to children who were aged 14-17 years. This is because the child questionnaire was relatively complex, sensitive and lengthy, requiring a certain level of concentration and developmental maturity on the part of the respondent. It was thus deemed not to be an inappropriate methodology for younger children whose views were instead sought through more age-appropriate FGDs.

For child protection purposes, child and adult respondents did not come from within the same household. This was to avoid any possible 'retribution' against a child when, following the questionnaires, an adult might interrogate a child about the answers they gave regarding, for example, violence within the household.

2.3 Research ethics

The research covered sensitive issues including abuse, neglect and exploitation, hence ethical considerations were a key element of the design of the methodology and research tools. Time was taken at the outset to ensure that the researchers were clear about the following:

- The motives behind the research
- The research objectives
- The intended use of the data
- The intended audience for the data
- The feasibility of future interventions to address identified needs and concerns

An ethical framework was developed to guide the research. This included sections on research ethics, community ethics, child protection ethics, and a Statement of Commitment for all researchers to sign. In addition to agreeing to these ethical codes of conduct, researchers received training on how to respond in cases of suspected or

reported violence against children. For the adult and child questionnaires, researchers were provided with contact details of the local District Departments of Social Welfare to share with any respondents who might be concerned about their own safety or that of others.

In both the adult and child household questionnaires, researchers completed a section to record any child protection concerns and any action taken to respond to these. Out of a total of 1500 child respondents, the researchers noted 38 separate cases of concern (2.5% of the total number of respondents). Of these, 26 involved girls (68.4%) and 12 involved boys (31.6%). Eight girls and three boys disclosed abuse; two girls asked for help regarding their safety; ten girls and seven boys said something that worried the interviewer; and in the case of six girls and two boys, the interviewer witnessed something worrying. Out of the total of 1500 adult respondents, the researchers noted 22 separate cases of concern (1.5% of the total number of respondents). Of these 22 cases, 11 involve women (50.0%) and 11 involve men (50.0%). Three women and seven men disclosed abuse; seven women and three men said something that worried the interviewer; and in the case of one woman and one man the interviewer witnessed something worrying.[17]

For the qualitative research, all researchers were given the names and contact details of the DSWOs in their research communities. Researchers made participants aware of the role of DSWOs and provided contact details where necessary.

2.4 Logistics

An Advisory Committee, chaired by GOG, was established in January 2013 to lead the process of child protection system strengthening in Ghana. Select members of this committee served as a reference group which met regularly to support the

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[17] For reasons of confidentiality, the details of the cases are not included here.

design and implementation of this research and to monitor its progress. PDA undertook both the qualitative and quantitative parts of the research, with technical support from GOG, UNICEF, GSS, CREATE and Child Frontiers Ltd. - the latter simultaneously guiding the process of policy development. The quantitative data entry and processing was undertaken by ISSER. Technical support for coding, tabulation and analysis of the questionnaire results was provided by CREATE.

2.5 Timeframe

The research process took place over a one year period beginning in December 2012. After a desk-based review of key documents, the research design process began in December 2012 with researcher orientation in February 2013 prior to the qualitative fieldwork in March 2013. In March 2013 there were regional workshops with key child protection stakeholders in each region. The qualitative data was collected in 20 communities in 10 districts in all of Ghana's 10 regions over a six week period from February to March 2013. In April 2013, regional workshops were again convened to share the initial findings from the qualitative research.

The quantitative survey design, administration and data-entry took place between April and July 2013. Data cleaning, analysis and tabulation was completed by the end of November 2013 and a detailed report on the quantitative findings was completed in February 2014. National data synthesis, analysis and writing of initial drafts took place between June and December 2013. Further analysis and writing to integrate the qualitative and quantitative findings took place in 2014.

'It takes a community to raise a child'
– current child care practices in Ghana

3. 'It takes a community to raise a child' – current child care practices in Ghana

3.1 The role of the family

Summary

- **Parents are seen as the base unit of child protection across the country.** In survey households, the majority of children live with at least one biological parent. In cases where children are not able to live with their biological parents, informal foster care by the extended family continues to be an important strategy.

- **The most important responsibilities of parents when caring for children are identified as 'practical provision' aspects of childcare** - much more so than protection, preparation for the future, and the emotional, social and moral aspects of parenting (although parents do play an important role in protection)

- **Mothers have the strongest role in child-rearing,** followed by grandmothers. Where only one biological parent is present in child survey households, it is almost five times more likely to be the mother than the father. However, fathers have an active role in financial provision for children and supervising older children.

- **Aunts and uncles sometimes assist** children and parents outside of the fostering system through the provision of financial and material support.

- Older siblings, particularly girls, play an important role in the raising of younger children.

- **Step-mothers often play a supportive role in the care of children** in polygamous households. Data from this research does not indicate whether step-parents are more or less likely than biological parents to harm children.

The research found that parents are seen as the base unit of child protection across the country, especially mothers. In Ghana, an individual's identity is shaped and defined by his or her belonging to a family or clan; an individual cannot be considered in isolation. The family is a central unit and is largely considered irreplaceable.

In households which took part in the quantitative survey, the majority of children live with at least one biological parent. For example, according to the adult household survey respondents, 85.4% of the 4873 children aged 0-17 living in these 1500 households live with at least one biological parent. This compares to 79.7% (n=1195) of all child respondents, aged 14-17, who state they live with at least one biological parent.

Almost half of the girls (47.2%) and boys (48.2%) interviewed directly (total n=1500) live with both their mother and father

We go to our parents for protection and for comfort. We feel most comfortable when we are with our parents at home or in church. (Girls in urban community, A/R)

The most important responsibilities of parents when caring for children are identified as 'practical provision' aspects of childcare like feeding and clothing children, sending them to school, giving them shelter and keeping them healthy. Other elements of parenting such as emotional, social and moral aspects (including discipline), protection and preparation for the future account for far fewer survey

responses. Further information on this can be found in section 5.4.2. Out of 75 child FGDs, 74 (98.7%) mentioned mother, father, or parents as people who protect children from harm. Parents are said to provide the basic necessities of life like food, clothing, shelter and healthcare, to finance educational expenses, and to provide supervision and guidance in the raising of children.

Our mothers will take us to the pharmacy to buy us medicine when we are sick. (Children in both rural and urban communities, E/R)

In addition to general child-rearing, parents were also found to play an important role in defending their children. Children in FGDs across the country mention that they report children and adults who beat them to their parents. Children in the household survey state that if they were badly hurt by someone, either physically or sexually, they would first and foremost talk to a family member (see sections 5.1.2 and 5.4.1 for more details). 61.0% (n=915) of adult survey respondents state they have intervened to stop another adult beating a child and furthermore, of those respondents who have not yet intervened in

practice, the majority (81.4%, n=476) state that they would intervene in theory. In the Western Region, various FGD respondents revealed that parents, especially mothers, in both rural and urban communities sometimes confront and verbally reprimand teachers for punishing their children.

Generally, throughout the country, mothers have a more hands-on role in child-rearing. In the household survey 26.5% (n=398) of child respondents live with 'mother only', compared to only 5.5% (n=82) who live with 'father only'. This implies that where only one biological parent is present, it is almost five times more likely to be the mother. Even in families with both parents present the bulk of the parenting role in every respect is very much attributed to mothers and then to other female relatives, especially grandmothers and aunts. In the Eastern and Volta Regions (this may be relevant in other regions but was not mentioned spontaneously in FGDs elsewhere), girls mention that their mothers protect and defend them by sleeping in the same rooms with them, observing changes in them and confronting people who harass them.

My mother is my all-in-all. (11 year-old girl, urban community, UW/R)

When it comes to financial provision for children and supervising older children, fathers are generally reported to have an active role. Children in their upper teenage years are said to sometimes challenge the authority of their mothers and are more likely to fall into line when their fathers step in. On the whole, fathers are seen as the figure of authority and the provider of financial needs. In the three northern regions, where society is very male-dominated, findings indicate that some fathers provide clothing, money for food, school expenses, solve family problems, name children, stipulate the do's and don'ts of the family, and provide general security as well as spiritual protection - for example by bathing children with herbs to protect them from evil.

Fathers provide the monetary needs of children – they pay their school fees and provide money for food and clothing. When children fall sick, they either provide the money for someone else (mothers or older siblings) to buy medicine or buy the medicine themselves. Fathers also sometimes take their children to the hospital in the absence of the mothers. (FGD with women aged 25-40, rural community, W/R)

However, due to polygamy, some women support their children financially in part or in full, although they still refer to their husbands as the main provider and head of the household. One woman described the men in the community as "one day gentle man per year" which means sometimes fathers stay at home once in a long while for just one day to take care of the children, but most of the time they are out working for money.

Fathers also play a role with children but it is very little. Most of the time they do not stay at home to take care of the children but they provide money for the children's upkeep. (FGD with women aged 25-40, urban, V/R)

Gender-specific parenting roles are articulated in some communities in detail. From an early age girls and boys receive different treatment and are assigned different roles and responsibilities. For example, in the remote, rural fishing community in the Eastern Region, the individual roles of the father and the mother in protecting children are separate. Girls spend time with their mothers and boys with their fathers. There is not much interaction between mothers and their sons after they reach the age of six, nor between fathers and their daughters.

The fathers only pay school fees and hospital bills and handle other financial responsibilities but the mother has to see to the upkeep of the daughter. (Woman aged 25-40, rural community, E/R)

Next to mothers, grandmothers are the most significant 'hands-on' carers of children. Children in FGDs in the Western Region say they go to their grandparents, and particularly grandmothers, for advice and that their grandmothers correct them when they do something wrong.

When I go to my dad or mum and they don't give me money, I go to my grandmother.

I pick a car [i.e. get transport] with my own money and go to my grandmother for advice. I go to my grandmother even though she stays far. (Children, W/R. A few children also mention that they go to their grandfathers when they need advice).

In certain communities it is reported that children are raised by their grandparents due to the death or migration of parents[18] , including death from AIDS-related illnesses: "There is a large number of orphans living with their grandparents for this reason" [19] .

In the absence of parents as a result of death or migration, grandmothers become the main care providers to children. (FGD with women aged over 50, urban community, BA/R)

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[18] Fostering by grandparents is mentioned in FGDs in the A/R rural community, BA/R urban community, and both E/R communities. The UE/R, N/R and UW/R reports mention grandmothers caring for orphaned children. In the rural V/R community, many children are reported by the researchers as living with their grandmothers, including those who are orphaned.

[19] Interview with a secondary school head teacher, urban community (E/R).

Some single mothers dump their children on their mother to look for greener pastures elsewhere, thus grandparents assume the role of the parent. Some children have their parents here in the community but most of them are out of town. Children between the ages of 8 and 12 fend for themselves. They sell bread, pure water and "abolo"[20] at the toll booth, though some of these children are staying with their grandmothers. (Ghana Education Service, Guidance and Counselling Coordinator, V/R)

In cases where children are not able to live with their biological parents, informal foster care by the extended family continues to be an important strategy. The kinship fostering tradition means that paternal aunts often assume full parental responsibility for their nieces who come and live in their households. From the qualitative research, this was evident in the three northern regions and especially in the Northern Region itself. This means that aunts and their husbands become the 'parents' of such girls. To a lesser extent, uncles also take in their nephews in these regions. There are instances revealed in the research in general, when informal fostering reportedly takes on abusive dimensions. At times it may mean little more than food and shelter in exchange for child labour, with no provision made for attending school.[21] Informal foster care is discussed in further detail in Section 3.2 below.

Aunts and uncles sometimes assist children and parents outside of the fostering system through the provision of financial and material support, and may help protect children especially when they live together in extended families or in close proximity. In FGDs with children aged 7 to 17, aunts and uncles were mentioned in all regions as people who provide food, money and school supplies for children when parents are unable or unwilling to do so.

[20] Local Ghanaian food made by steaming or baking ground, soaked corn flour in leaves.
[21] Ministry of Women and Children, Children in Ghana, GOG, Accra, 2009.

Our parents and aunties are the people we go to when we need clothes, food, money, school items and when we are not feeling well. (Girls aged 7-10, rural, N/R)

Uncles and aunts also provide moral support and advice for children and defend them, for example in the Western Region. Similarly, in the Upper West Region, most paternal aunts are said to be providing support in the form of paying fees, buying books and pens for children, accommodating and caring for their brothers' children, especially girls, and protecting their well-being.

Older siblings, particularly girls, play an important role in the raising of younger children. 15 (20%) of the 75 FGDs with girls and boys mention siblings as protecting them from harm and 12 groups (16%) cited siblings as responding to or supporting children who have been harmed. According to the FGDs, girls usually assist in the hands-on care of their younger siblings. They protect younger children from external aggression, defend them against peer beatings, help support them financially, act as 'substitute mothers', discipline them, take them to school, tell them about the 'facts of life' (sexual and reproductive information), and teach them how to defend themselves and take care of livestock. For example, the researchers who facilitated the FGDs in the Ashanti Region highlight that "siblings act as 'mini parents'. They provide moral support, encouragement and pay school fees. They provide childcare and protection from outsiders like bullies or physical danger. They are a source of information and are confidants." In cases where there are large age gaps between siblings, some take over full financial responsibility for their younger siblings and, in the event of parental death, assume full care for them. For example, in the Eastern Region some children work in the market in order to earn money to provide food for their younger siblings as well as themselves. Older siblings were mentioned more frequently than anyone else in FGDs when children were asked who would defend them in a fight or dispute with other children.

Older siblings protect younger siblings when they are beaten or bullied by peers or adults by confronting and fighting the offenders/ perpetrators. (Children aged 7-10, BA/R)

It should be pointed out, however, that despite their protective and supportive roles, bullying is also meted out by older siblings. This was noted by researchers in relation to the behaviour of children attending FGDs, with their infant siblings in tow.

In polygamous households, step-mothers often play a supportive role in the care of children. In the Upper East Region, for example, it was reported that they provide care for the child when the mother is not around. A step-mother may take over the care of the children of her husband's other wives in cases of divorce when departing wives are compelled to leave their children behind. It is also traditional in some polygamous households for wives who are unable to bear children to be given a child from another wife. In non-polygamous households, step-mothers may also 'inherit' the children of divorced mothers, especially since among patrilineal ethnic groups it is easy for men to take children away from women when marriages end. In the same way, but less commonly, in matrilineal ethnic groups step-fathers may 'inherit' the children of their wives from previous marriages. In relation to the adult and child household survey respondents who report physical harm of children by adults in the household within the past month, only 1.3% (n=10) of responses state that this harm was caused by a step-mother or step-father, compared to 64.2% (n=499) of responses stating this harm was caused by a mother or father. However, this likely reflects that the majority of children are living with biological parents rather than step-parents. Data from this research does not indicate whether step-parents are more or less likely than biological parents to harm children.

3.2 Informal fostering as a cultural practice

Summary

- **The extended family system remains an integral part of society and child protection, despite its perceived weakening.** Only 2.0% (n=30) of all 1500 child survey respondents are not living with any family members whatsoever and 89.9% (n=222) of biological children of adult survey respondents living away from home are nonetheless living with other relatives.

- **Fostering may be long term or shorter term**, for example during term time to attend school or vocational training.

- **The system of informal fostering is open to abuse** and can make children vulnerable to exploitation and harm, even though the objectives may be positive, or at least practical. Evidence suggests that in some cases fostered children are treated differently, subjected to verbal abuse and/or exploited economically or through excessive household chores.

- **Children living away from biological parents are perceived to be less safe** than those living with parents.

The research found that despite the perceived weakening of the extended family system (see section 3.5), it still remains an integral part of society and child protection. Where children are living away from their biological parents, the vast majority are nonetheless still living with extended family members. For example, of the 305 child household survey respondents that do not currently live with a biological parent (which accounts for 20.3% of all 1500 child respondents), 90.2% (n=275) are nonetheless living with extended family or people with whom they have kinship ties. Only 2.0% (n=30) of all 1500 child respondents are not living with any family members whatsoever.

Furthermore, of the 140 girls and 109 boys who are biological children of adult household survey respondents living away from home, the vast majority - 89.9% (n=222) - are living with other relatives in urban and rural areas (almost twice as many in urban compared to rural areas). This accounts for 97.1% (n=134) of girls living away from home and 80.7% (n=88) of boys living away from home in relation to these adult survey households[22]. The reasons given as to why these children are living away from their biological parents mostly relate to attending school (43.0%, n=107 responses), although other responses include 'they will be better cared for there', to work, to fulfil family obligations, to have better opportunities, 'I can't look after them' and 'they were invited to live there'. This reliance on extended family is further reflected in other findings from the quantitative data. For example, adults in the household survey were asked what happens in their community to a child if his or her parents die. Sending children to live with relatives, both inside and outside the community, accounts for 82.8% (n= 1933) of all responses (see section 5.4.3 for more details). In FGD discussions, examples were given of some children who have been sent to school by their uncles, aunts and other family relations and some who have even been taken out of their parents' homes from situations that are less than desirable[23].

Some arrangements involve children being fostered in long-term placements, or at least until marriage. However, some fostering arrangements are shorter term. In the Ashanti Region, for example, researchers were told that fostering can be both short-term/cyclical and long term/permanent. In the rural site, the short term/cyclical type involves children who have to stay with relations or friends of parents to attend senior high school or learn a vocation in towns such as Nyinahin, Bibiani, Nkawie or Kumasi. These children go

back to their parents during vacations. The longer term type, which is more common in the urban research site, involves children who are sent to stay and learn a vocation in the bigger towns and cities.

The field research reveals the history and context of some of these informal kinship fostering arrangements.

For example, in the Brong Ahafo urban community fostering is described as:

A common practice …mainly among relatives and close friends and is usually a mutual agreement between the biological parents and foster parents that a child will assist with basic household chores in exchange for education

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[22] The few remaining girls are living with family friends/non-relatives in urban areas, in a boarding school or with relatives abroad. The remaining 19.3% (n=21) of boys are in boarding school (7.3%, n=8), living with relatives abroad (4.6%, n=5), living with family friends/non-relatives (2.7%, n=3), in a care home (0.9%, n=1) or other (not specified) (3.7%, n=4).
[23] This was noted, for example, in both the rural and urban sites in Ashanti Region.

and the provision of basic necessities… with the intent to give children prospects of a better life, often in the 'city.' (DSWO, Techiman Municipal Assembly and Assistant Head Teacher at the Islamic Mission School)

In the Northern Region it is a tradition for a father to give at least one of his children (mainly daughters) to his sisters to take care of:

The 'mpraba' system is meant to strengthen the bonds between families. But most of the children are not given the necessary attention they need. They become like house workers. They do anything the aunty asks them to do like sweeping, washing, cooking and fetching of firewood. The fostered child is not allowed to attend school, or they absent themselves

on a regular basis or usually go to school late without money or food. Such children are starved, insulted, and beaten with anything that the aunty can lay her hands on. As the

tradition continues adults who were victims of the system also tend to transfer the maltreatment they received to the children of their brothers brought under their care. (Community Development Officer, Tolon, N/R, corroborated by the District Coordinating Director from the same site)

Although the objectives of the informal fostering tradition may to some extent be positive, or at least practical, evidence suggests that the system is open to abuse and can make children vulnerable to exploitation and harm. For example, just over half of all adult and child household survey respondents (55.6%, n=1667) think that a 5-year-old orphan sent to live with a family cousin is not safe, compared to only 16.2% (n=486) who think that he or she is safe. The perception of separated children's safety improves as children get older, but the concern is still significant, e.g. 35.6% (n=1067) think that an 11-year-old staying with extended family in a different town to attend school is not safe compared to 32.5% (n=973) who think that he or she is safe. Both girls and boys in the household survey had much more to say about the worst things that could happen to a child who lives away from their mother or father compared to the best things that could happen: 3,066 responses related to the worst things, compared to 2304 responses regarding the best things. Of the 'worst things' that could happen, physical and sexual harm account for 40.5% of responses, emotional harm for 29.0%, poor living conditions for 18.0% and other issues account for 9.3% of responses (total n=3,066 responses). Proportionally more girls than boys mention 'not enough care and supervision', 'girls getting pregnant' and 'sexual harassment / abuse and exploitation'.

Further findings from the field research suggest that many children who are fostered in different regions of the country are vulnerable to abuse. For example, the DSWO and 13-17 year-old boys and girls in FGDs in the Brong Ahafo urban community mention that fostered children are very vulnerable compared to biological children; they are treated differently and subjected to verbal abuse and excessive

household chores such as pounding of fufu and fetching of water.

Biological children are often given gifts of new clothes whilst fostered children walk around in tattered clothes. (13-17 year-old boys and girl, urban, BA/R)

This was confirmed by two children who had migrated to continue their education who say they are told things by their foster carers such as "You don't know how your mother begged me to take you in." They are verbally insulted, particularly when they are unable to complete tasks assigned to them or they show signs of tiredness. The girls cited instances whereby fostered children are accused and beaten for missing items in the home. Elsewhere feedback was mixed:

In most instances, fostering a child in need of protection is very positive but it can have its challenges too. Some of the children are better taken care of by foster families than with their parents, but there are some cases where the child is harmed by fostering. (Social Welfare Officer, urban, V/R)

3.3 Expected behaviour of children

Findings from other recent studies also highlight this concern, such as the 2011 Situation Analysis of Ghanaian Children and Women which indicates that children sent to live with members of their extended families are often exploited by being forced into economic activity. In some cases families in deprived areas give up their children for 'fostering' by distant relatives who may be unable or unwilling to care for them properly or to see to their education, and may be more inclined to exploit their labour.[24] Further information on the risks faced by children who are separated from their biological parents can be found in section 4.4.5.

Aside from the pros and cons of extended family fostering explored here, it is important to note that the extended family system is fading - according to some research respondents in the Eastern, Volta and Western Regions. FGDs and KIIs note increasing reliance on the nuclear family system which hitherto was hardly known in these region. This change in family systems is said by respondents to be largely driven by economic factors since nowadays most people are less financially capable of taking care of children not biologically their own.

Summary

- **Children are trained from an early age in often gender-specific roles and responsibilities** and take them up as early as possible in order to contribute to their families and communities.

- **It is also the cultural norm that children are expected to be submissive,** even whilst taking on responsibilities. This can make children vulnerable to harm and to exploitation by adults. Furthermore, their well-being and rights in relation to the handling of child abuse cases are often disregarded.

- **In some areas adults complain of what they see as 'rebellious' and 'delinquent' behaviour** on the part of children, attributed to the negative influence of peers or the Internet, lack of parental supervision, sanctions on the caning of children in school and the concept of children's rights and child protection.

Early on in their lives children are considered active members of society who have to be trained in their roles and responsibilities and take them up as early as possible in order to contribute to **their families and communities.** Several of the girls consulted during FGDs talked about taking on household work, sometimes excessive, and boys talked about agricultural and fishing activities. Girls also care for

[24] UNICEF and Ministry of Women and Children's Affairs, A Situation Analysis of Ghanaian Children and Women: A Call for Reducing Disparities and Improving Equity, Ghana, October 2011, p. 94.

siblings from an early age. For example in the Eastern Region, FGD participants explained that by the time boys are 15 years old they are fully able to handle the canoes and can go fishing without their fathers. In the urban site, girls as young as 10 sell goods such as local ice cream, 'koose' (locally made bean cake), salad and sachet water at the market and by the roadside.

Alongside this expectation for children to take on responsibilities, it is the cultural norm that children are expected to be submissive. Whilst being assured of a family and community support network, children are expected to respect their parents and elders and not to question their authority. However, it was found during this research that boys' and girls' obedience to authority is often abused by adults. For example, children are supposed to accept being sent on errands by any adult in the community, anywhere they choose to send them, irrespective of the destination or time of day. This is revealed to put some children at risk such as those sent to bars or to distant places in rural areas.

We are exposed to danger when we go places far from home and not in the community because we know nobody there. (Girls aged 7-10, urban, N/R)

Children's submissiveness is also reflected in a disregard for their well-being and rights in relation to the handling of child abuse cases. There appears to be a tendency to maintain family and community harmony by not reporting cases, prioritizing this over the best interests of the child. For example, when a child is badly hurt by someone, either physically or sexually, adults in the household survey appear to be more concerned with confronting the perpetrator than, e.g., getting medical help, reporting it to the police, asking the child what happened or treating or comforting the child (see section 5.1.2 for more details). In addition, there appears in some cases to be a simple disregard of the rights, feelings and welfare of the child. In the Upper West Region parents and children refer to a culture of impunity

among people who sexually abuse children, stemming from the fact that most offenders are not adequately punished. They give the example that when teachers defile and impregnate school girls, these teachers are only transferred to another school or left unpunished. In the Greater Accra Region, one DOVVSU officer said:

Parents sometimes hire 'contractors' who bargain on their behalf to procure settlements from culprits in cases where children are physically or sexually abused. In this way, parents undermine the rights of the child by seeking monetary compensation while disregarding the need for justice or for recovery of the child.

In some areas adults complain of what they see as 'rebellious' and 'delinquent' behaviour on the part of children. Some attribute this to the negative influence of peers or access to the Internet and many respondents from all age groups cite the lack of parental supervision of children. Ghana Education Service (GES) sanctions on the caning of children in school were criticized by a number of FGD participants. Similarly, many adults were critical of the concept of children's rights and child protection:

At first the children used to respect their parents no matter what. Nowadays, I don't know if it is the orthodox medicine that we are giving them, it makes them too smart so they always outsmart us and they do whatever they like and we can't even control them. (Men and women over 50, rural, W/R)

It's mostly because of these child rights and child labour laws that the children have so much freedom. (Chiefs and Elders, rural, W/R)

We are afraid to discipline children nowadays for fear of being arrested (Adults, rural and urban, V/R).

We submitted a petition to the school, requesting that teachers be given the authority to cane children. (Parents, urban, E/R)

The issue of children in conflict with the law is further explored in section 4.5

3.4 Disciplining children

Summary

- **Discipline is seen to be an important part of child-rearing** and there are strong expectations around children's behaviour in terms of obedience and showing respect to their elders.

- **The 'best ways to discipline children' are through 'positive' discipline techniques** according to adult and child survey respondents (58.3%, n=3165 of all responses). 'Negative' discipline techniques, including corporal punishment, make up only 36.9% (n=2005) of all responses.

- **In practice, however, corporal punishment is widely accepted** as a means of 'correcting' children, in spite of this theoretical preference for positive discipline techniques.

- **Parents are normally the ones carrying out corporal punishment.** Some send their children to teachers or the police to be advised or disciplined.

- **There is concern in some areas that levels of all forms of discipline, not just limited to corporal punishment, have declined over time**, due in some cases to a perceived decline in community spirit whereby it is no longer as acceptable to discipline someone else's child.

- **Discipline at home and in schools** is explored in detail in sections 4.1 and 4.2

There are strong expectations around children's behaviour in terms of obedience and showing respect to their elders. Traditionally parents are used to exercising high levels of 'discipline', both positive and negative, and this was borne out by findings from the all the research communities. When asked their opinion on child protection, several respondents in FGDs and KIIs cited the need for children to be raised with strong discipline, hard work and a sense of responsibility. Adult and child household survey respondents were asked about the 'best ways to discipline children'. It is encouraging that 'positive' discipline techniques make up 58.3% (n=3165) of all responses (communicate well, make sure they know what they did was wrong, explain rules, show them a good example, reward good behaviour). 'Negative' discipline techniques make up 36.9% (n=2005) of all responses (hit them, punish them, tell them off, make them kneel down, not let them do things they enjoy, deprive them of food, twist ears/pinch, extra work and other physical punishment). More detailed findings from the household survey on attitudes to discipline are included in Sections 4.1 and 4.2.

In spite of the theoretical preference for positive discipline techniques revealed in the household survey, corporal punishment is generally seen as an acceptable way of correcting and protecting children. According to the older FGD groups, it is appropriate for children aged 2 to 12 to be corrected through corporal punishment at home. Some adults spoke of the threat of the cane being used as a 'scare tactic' and at other times the cane is used as a punishment:

Some of them, we just scare them with the cane and they change, but some of them are too stubborn so we cane them. (Elderly father, rural, W/R)

It has already been seen that some adults will confront teachers who beat children and will intervene to stop another adult beating a child (as shown in section 3.1 in relation to the protective role of parents). However, according to three FGDs in the Western Region and one in the Volta Region, other parents nonetheless send their children to the barrier police[25] to be caned or 'drilled' for 'offences' committed at home. In the Eastern Region, community members of different ages made the observation - also applicable to the other regions – that in general not much is done to stop physical abuse or help a child who is being physically abused because corporal punishment, even to abusive levels, is widely accepted as a means of 'correcting' children, and

parents are normally the ones meting out such measures or sending their children to teachers or the police to be advised or disciplined.

Some participants in the field research felt that levels of discipline have declined over time, highlighting that parents cannot discipline their neighbours' children since the communal spirit that characterized communities is no longer present. As a result, children allegedly misbehave in the presence of an elderly person without being disciplined, as this is now left to the nuclear family (discipline here is not restricted to corporal punishment).[26] It is difficult to compare this assertion regarding 'nuclear versus extended family disciplining' directly with findings from the survey, but it does appear that physical punishment in the home is mostly perpetrated by mothers and fathers rather than anyone else: 64.2% (n=499) of responses from adult and child survey respondents who report physical harm of children by adults in the household within the past month state this harm was caused by a mother or father. Furthermore, very few adult and child survey respondents report beatings by adults in the community, outside of home and school settings - only 6.3%, of all respondents (n=189).

See sections 4.1 and 4.2 for further discussion regarding the complexities of attitudes surrounding discipline in general and corporal punishment more specifically.

3.5 Keeping children safe

Summary

- **Some felt that the ability of families to keep children safe in general is decreasing,** particularly due to urban migration, even though families are the primary unit for the care and protection of children, and although the extended family informal fostering system is still widespread.

- **Actors at the community level play an important role for the welfare of children,** in addition to families. This includes customary Chiefs and Queen Mothers, women's groups and community health workers. This is explored further in section 5.5.

- **Spiritual, as well as physical, protection was highlighted** in the field research.

- **Child marriage** is highlighted by (mostly male) respondents as a mode of protecting girls from fatherless pregnancies, even though it is illegal.

[25] Police officers who are stationed at checkpoint barriers on major roads. They monitor and inspect incoming and outgoing vehicles for illegal items and deal with armed robbery operations at night.
[26] Participants in regional workshops in Greater Accra and Ashanti Region.

As shown in section 3.1, families strive to provide for their children's needs such as food, shelter, clothing, health and education. They also provide moral support, skills training, defend them from other people, guide and correct them and prevent them from getting into trouble. Child survey respondents prioritized 'positive prevention' behavioural responses as the best ways of keeping children safe, such as love and care for children, praise and encourage them, send them to school, provide for their wants and needs, encourage them to speak out and treat all children equally. These accounted for a much greater percentage of responses than 'negative' behavioural responses such as do not hit or humiliate children, call them bad names or send them away from home. More detail on these findings can be found in section 5.4.1.

Spiritual protection was highlighted in the field research. For example, in the Northern Region the researchers found that some fathers provide spiritual protection for their children and bathe them with herbs to protect them from evil. This is just one example of many forms of spiritual protection that people employ to protect their children. The chief priest at Agave-Afedome in the Volta Region said:

I invoke the Gods to protect the children in the community and also perform spiritual healing when I am called upon to do so by community members.

In the Ashanti, Eastern and Central Regions, church leaders interviewed said that they provide support to children and young people through their activities and prayer groups. There were examples in different regions of various religious bodies providing advice, counselling, moral and financial support to children.

Some felt that the ability of families to keep children safe in general is decreasing, beyond the role of disciplining children. In many of the regions, FGD and workshop participants highlighted the breakdown of the extended family system as a threat to families' abilities to protect children. In the Brong Ahafo Region, for example, it was observed that migration precipitates shifts in family patterns as settler families tend to be more 'nuclear'. Protecting children therefore becomes limited to the mother, father and older siblings, as opposed to the whole community. There are mixed views, however, about the care of orphans. On the one hand:

In the Dagbon tradition, there is nothing like a child without anybody because somebody in the family would always take care of an orphan. (Man aged 25-40, rural, N/R)

On the other hand, some of the women and adolescents in the urban community asserted that orphans need to be protected since they do not get the needed attention from immediate family members and they therefore need to be protected by society.

In addition to families, actors at the community level, such as customary Chiefs and Queen Mothers, women's groups and community health workers, play an important role for the welfare of children. For example, in the Upper East urban community the Queen Mother, who also happens to be a health officer, is said to enforce customary laws regarding women and children, serve as a foster mother to needy children, impose fines on people who abuse children, serve as a role model to young girls, raise the concerns of children at traditional council meetings, advocate against harmful traditional practices, and advise women on how to protect children. The Queen Mothers in the Eastern urban community have formed an association for the care and protection of orphans and children affected by HIV in their community.

Further information on the role of community structures in preventing and responding to harm can be found in section 5.5.

Although it is illegal, child marriage is highlighted by numerous respondents in the qualitative research (mainly male respondents), as a mode of child protection.

Child marriage is mentioned in the Ashanti, Brong Ahafo and three northern regions as a positive means of protecting girls. In the Ashanti Region, Muslim respondents mention that they consider the attitude of the girl and, if they suspect that she is likely to become sexually active at what they believe to be an early age, they put her in a marital union with a man. This may be well-intentioned, with a view to protecting girls from fatherless pregnancies. However, the practice is a breach of the national law and the spirit of the UN Convention on the Rights of the Child which has been ratified by Ghana. The girls usually have little or no say in these arranged marriages and are often married to older men who may already have several wives. Such girls are not likely to complete their education once married. In the Upper East Region, girls given in child marriage are considered to be in 'safe hands'. See section 4.4.1 for more information on child marriage.

3.6 Learning about child-rearing

Summary

- **Person-to-person communication and personal experience** are the best ways to learn about keeping children safe from harm according to adult survey respondents. This accounts for more than twice the number of responses relating to 'indirect' forms of communication.

- **Learning 'from parents'** was the single most popular response and this is more than twice as popular as learning from 'religious leaders'. Learning from 'community leaders' is ten times less popular than learning from religious leaders.

- **Only 1.7% of responses cited printed media** like newspapers, posters and leaflets being the best way to learn.

Adult survey respondents were asked what they think are the best ways to learn about keeping children safe from harm. Women gave more responses than men (1611 compared to 1023; total responses n=2634).

By far the most popular response from both women and men is 'from parents', indicating the importance of inter-generational transfer of knowledge, attitudes, behaviour and practices. This accounts for 34.5% of responses overall. 'Religious leaders' are cited far more often than 'community leaders (Chiefs, Queen Mothers)' – 16.0% of total responses compared to 1.6% respectively.

In total, person-to-person communication and personal experience[27] accounts for 66.4% of responses compared to 29.3% of responses which relate to indirect forms of communication[28]. Other responses make up 2.7% and 'don't know' 1.6%.

Printed media features very low amongst the level of responses[29] with newspapers, magazines, posters, pictures, visual displays, leaflets and written information accounting jointly for only 1.7% of responses. This may either reflect the lack of exposure of respondents to such information, or it may indicate that these forms of communication are ineffective.

Within the overall context of current child care practices in Ghana as set out in Chapter 3, this chapter examines specific child protection issues in more detail along with factors that make children more vulnerable to harm.

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[27] From parents; Religious leaders; Community meetings / discussions; Talks by influential people; Friends, neighbours, older people and other family members; Community leaders (Chiefs, Queen mothers); Personal experience.

[28] School curricula; Radio; TV; Internet; Newspaper/magazine; Posters / pictures / visual displays; Leaflets / written information.

[29] Other; drama / music.

4. Child protection concerns in Ghana – issues and contributing factors

4.1 Factors that render children more vulnerable to protection abuses

Summary

- **Poverty** negatively impacts on life choices for families and children which can in turn impact negatively on protection issues. However, there are no conclusive survey findings linking household income to physical punishment or verbal humiliation of children by adults at home, or to inappropriate touching of children. Proportionally more adult respondents from 'very poor' compared to 'somewhat or very rich' households state they have a biological child or children living away from home, but this is not confirmed by child survey findings.

- The household surveys did not reveal a strong correlation between **religion** and physical harm of children at home, or between the **education levels** of adult respondents and physical punishment or verbal humiliation of children by adults at home. The relationship between ethnicity and separation of children from kinties reveals a mixed picture.

- **Girls (especially adolescent girls)** emerge clearly as the most vulnerable group overall. Patriarchal   societies and socio-cultural attitudes give males a higher social status and more power than females. This results in higher domestic labour demands on girls, lower priority given to their education, higher standards on how they should behave, inadequate female representation in both formal and traditional governance mechanisms, much higher rates of sexual abuse and exploitation, and gender-based injustice in responding to violence against girls and women.

- **Children in puberty:** With the exception of physical punishment in the name of discipline, adolescents aged 12-17 become more susceptible to other types of harm, especially girls, because they are going through puberty at the same time as they acquire greater independence. With girls this relates more to sexual activity and with boys to engagement in harmful economic activities.

- **Children from single parent** and re-constructed families can sometimes, but not always, face increased vulnerability. Parental divorce, separation and death can result in children being placed in the care of step-parents or foster parents where they may have an inferior status to the biological children of the household and be given excessive workloads. Economic pressure and time constraints on single parents, mostly mothers, can impact negatively on child-rearing.

- **Children living in conflict zones**: Children living in the Northern, Upper East, Upper West, Volta and Western Regions are vulnerable to insecurity, disrupted education, violence, injury and death from conflicts.

- **Other vulnerable groups:** Children who have been orphaned and taken in by relatives or foster families are commonly said to be less well cared for than biological children; although the research did not elicit sufficient data to provide a national overview, children with physical and learning disabilities are said to be stigmatised, misunderstood, isolated, and vulnerable to harmful spiritual practices; children living with HIV and children with parents living with HIV are said in some regions to be vulnerable to a series of social, economic and personal hardships; there were a few examples of the heightened vulnerability of children belonging to ethnic groups that are in the minority in the particular communities in which they live.

This study reveals that harm is not experienced equally by all children in all circumstances: particular qualities, circumstances and events make some children more vulnerable than others to harm and abuse. Factors which increase the vulnerability of children include age, gender, poverty, parental neglect, and children spending significant amounts of time alone or without parental supervision. Younger children are more at risk of physical harm in the form of corporal punishment compared to older adolescents. In general, girls are more vulnerable to harm than boys, particularly those who have reached the age of puberty. Particular groups of children identified as vulnerable in the research include migrants, children who have been trafficked, those involved in harmful forms of child labour, those who have resorted to crimes, children affected by family breakdown, fostered children, children who have been orphaned, children affected by HIV, children with disabilities and those who are victims/survivors of discriminatory social norms and harmful practices.

4.1.1 Poverty, rural/urban location, religion, ethnicity and education

Poverty negatively impacts on life choices for families and children which can in turn impact negatively on protection issues (in relation to children having no choice but to engage in harmful child labour, for example). However, according to the household survey findings, poverty is not necessarily a determinant in relation to violence in the home. According to adult survey findings, there is no discernible trend linking household income level to physical punishment of children by adults at home. The child survey findings are more complex, but nonetheless still inconclusive. For example, child survey findings show proportionally more reports of adult beatings at home of children aged 2 to 14 years in poorer compared to richer households: reports rise steadily from 44.4% of child respondents from 'very rich' households saying they were beaten either 'all the time' or 'sometimes' between the ages of 2 and 14 to 61.7% of child respondents from 'very poor' households. However, proportionally more child respondents from 'very rich' households (28.8%) state they have been beaten by an adult at home in the past month compared to 15.4% of child respondents from 'very poor' households. The findings are therefore not conclusive. Furthermore, according to both adult and child survey findings there is no discernible trend linking household income level to either inappropriate touching of children or to verbal humiliation of children by adults at home. According to the child survey findings there is also no discernible trend linking household income level to whether or not children are separated from biological parents or other kin ties. However, proportionally more adult respondents from 'very poor' (17.1%) compared to 'somewhat rich' (6.2%) or 'very rich' (7.1%) households state they have a biological child or children of their own living away from home.

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The adult and child household surveys did not reveal a strong relation between religion and physical harm of children at home.

Religion of adult and child respondents who indicate physical harm to children by adults at home (respondents n=658; n=356; n=218)

- Adults who state they physically punish the children in their household
- Adults who state that a child in their household has been beaten by an adult at home in the past month
- Children who state they have been beaten by an adult at home in the past month
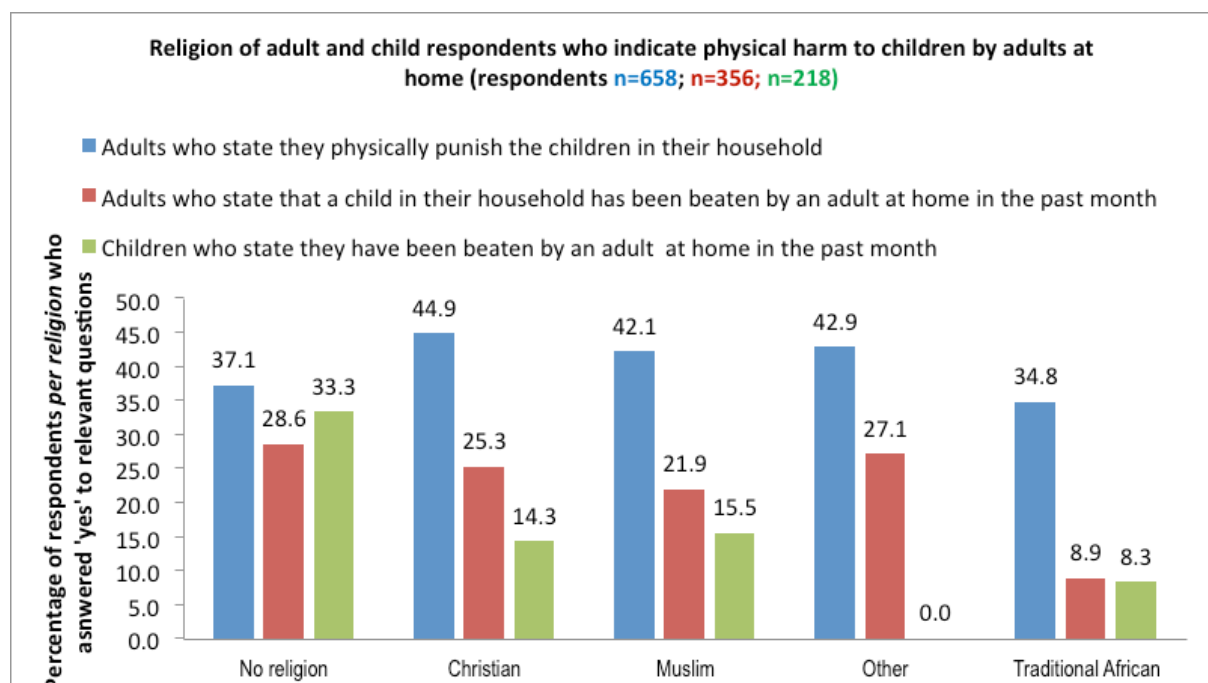
Regarding the relationship between ethnicity and separation of children from kin ties, the household surveys reveal a mixed picture. 80.0% of Gurma child respondents live with both their mother and father compared to only 34.7% of Ewe child respondents (see chart below). Half of the 30 child respondents with no kin ties where they are living are Akan, seven are Ewe, five are Mole-Dagbon, two are 'other' and one is Ga-Dangme. Of the 203 adult respondents who state they have biological children living away from home, proportionally more are Grusi: 27.6% of Grusi adult respondents have children living away compared to 18.7 of Ewe adult respondents, 15.7% of Ga-Dangme, 14.1% of Mole-Dagbon, 13.6% of Gurma, 13.0% of 'other' ethnicity, 11.7% of Akan and 7.1% of Guan adult respondents.

Ethnicity of child respondents: Does your mother or father live here with you in this household? I mean do they usually sleep here? (respondents n=711; n=305; n=397; n=82)

- Both mother and father
- No mother or father
- Mother only
- Father only
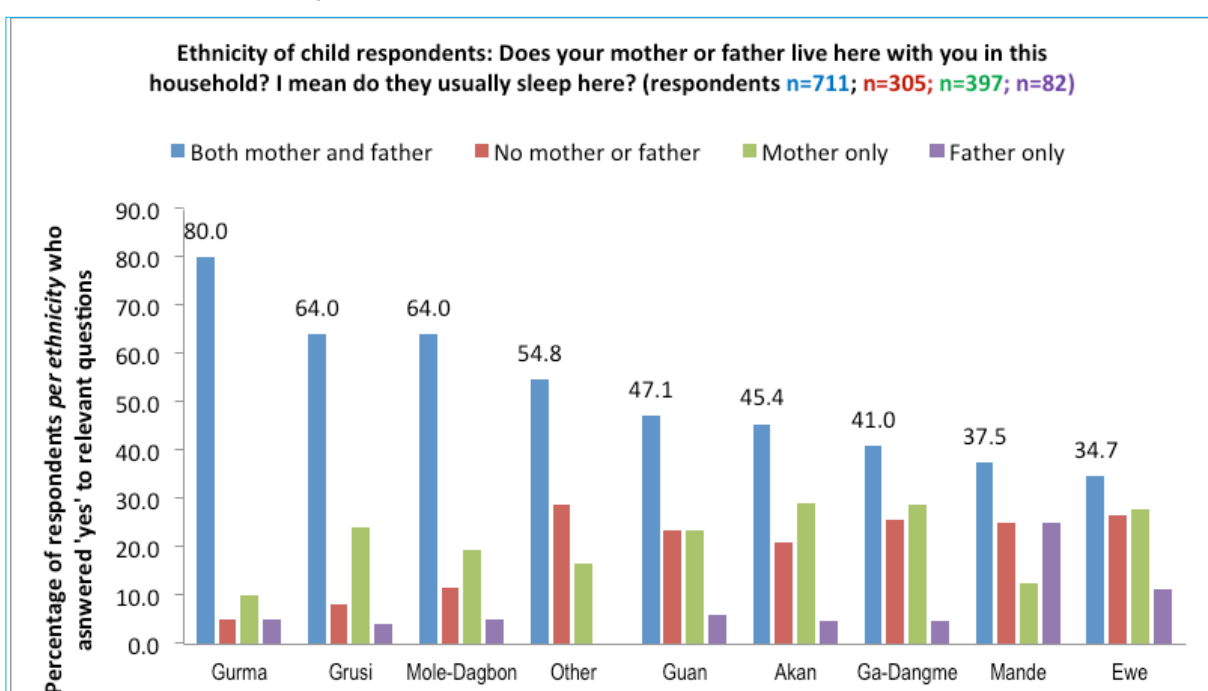
According to adult household survey findings, there is no discernible trend linking the education level of adult respondents to physical punishment or verbal humiliation of children by adults at home.

4.1.2 Greater vulnerability of girls

In a comparison of vulnerability, based on the nature and volume of information gathered from respondents in the qualitative study, girls (especially adolescent girls) emerge clearly as the most vulnerable group overall. Indeed, the harm and abuses faced by girls were found to be one of the most significant child protection issues of all in this research. In the first place, it is clear from the findings that girls are less privileged in terms of resources for their development. Compared with boys, the domestic labour demands on them are higher while the priority given to their education is lower. They have access to far fewer mentors and role models than boys and they are more likely to have their education curtailed by pregnancy or child marriage. In addition to this, sexual abuse of girls was reported throughout the study sites much more than for boys.

Some peculiar challenges faced by girls in the congregation compared to boys include lack of education and child labour (working as porters) among others. Parents tend to educate boys and leave girls to work and assist in supporting the family. In some instances the elders encourage and sensitize parents to educate both genders and stop child labour but mostly they ignore gender disparity within the congregation. (Muslim religious leader, urban community, C/R)

Socio-cultural attitudes prevalent in most of the research sites give males a higher social status and more power than females. Views of how girls and women should behave, their role in upholding family honour and inequitable gender patterns are established from an early age.

Most of the girls in the community are at home helping their mothers with chores or out fetching water while the boys are at two local hangouts playing draughts and cards. (Chief, rural, C/R)

In the Brong Ahafo Region the views of some of the male FGD participants and a Muslim Youth leader are that girls are to blame for being sexually abused. In the urban site in the Volta Region, an informal voluntary Zongo committee made up of youth leaders goes round in the evenings to make sure every child is at home by 8pm. Their duties include beating girls who are seen late at night with men 'in a compromising manner'; it is notable that it is only the girls who are beaten for this, not the men. In other communities (both Muslim and Christian), it is reported that girls who become pregnant are beaten and sometimes rejected by their families who consider them to have brought disgrace upon the family:

In some cases she is disowned altogether leaving her on the streets. (FGD respondents, C/R)

At the core of patriarchal[30] societies and the gender inequities inherent in them is the inadequacy of female representation in leadership and governance. Ghana's low female representation in national government is reflected throughout the system right down to the community level, both within the federal government system and in traditional leadership structures. While there are Queen Mothers, in practice the male Chiefs often curtail their power.[31] In the research communities, the most common scenario was either an absence or scarcity of female leadership or a token effort to include women that did not ultimately translate into meaningful

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[30] The Ashanti region is generally matrilineal. However, it should be noted that matrilineal societies are usually patriarchal, the difference being which males have authority and decision making roles (for example, the mother's brothers versus the father and father's brothers in patrilineal communities).

[31] An example of this is the following extract from a workshop held for female traditional leaders in the Western Region by USAID's Local Governance and Decentralization Programme: "Queenmothers feel that their chiefs do not adequately include them in governance issues and are not transparent with them. They complain that they have no say in such matters as arbitration and leasing of lands and are not invited to meetings of the traditional council, Regional and National Houses of Chiefs, let alone District Assemblies." Strengthening the participation of Traditional Leaders in Local Governance: Workshop for Female Chiefs and Queenmothers, 28th February – 1st March 2011. Workshop report, p.14.

female representation. The logical result of inadequate female leadership is that female interests are inadequately represented, which translates into increased vulnerability of women and girls.

Reports from some of the research communities indicate that young boys take advantage of gender-based social inequities and chauvinistic attitudes by being abusive towards girls. In the urban community in the Northern Region for example, it was noted that school boys harass school girls, sexually abuse them and are violent towards them when they decline sexual advances. Similarly, it came out in discussions with girls aged 13-17 that girls become particularly vulnerable when they reject boys' sexual propositions (for example in the Ashanti urban community).

Information from DOVVSU confirms that women and children are frequent victims/ survivors of all forms of abuse. They suffer from various forms of violence and isolation, some of which are rooted in negative cultural values. There are serious gender biases in cultural practices which disproportionately expose girls to abuse including child marriage, sexual violence, denial of education and domestic servitude.[32]

We dress decently in order not to 'provoke' the men into defiling us. (FGD with girls, W/R)

Sexual abuse and exploitation of girls was reported in every region. However, the boundaries between consensual relationships and abuse are not always easy to discern. This is because respondents attribute this in many instances to girls seeking financial support through sexual involvement with men. Such 'transactional sex' may be forced, coerced or consensual – albeit that the latter needs to be seen within the context of girls often having limited or even no other choices regarding their survival and advancement. This phenomenon is reflected in other research on this topic. A 2006 study on sexual exploitation of children in Accra found that, "[m]ost of the respondents indicate that once there is a relationship or 'understanding' between a girl and a boy then sexual intercourse within this relationship is acceptable at any time… Sex is understood more as a service that females provide to males than an act for mutual pleasure."[33] In spite of this ambiguity regarding consent, a number of reports in the research sites indicate that sexual abuse of girls is a significant concern. As documented in section 4.4, in the Central Region, for example, boys aged 13 to 17 in an FGD mentioned that sometimes when their female

[32] Ministry of Employment and Social Welfare (MESW) Ghana Social Protection Strategy (GH-GNSPS): Investing in People for a Better Ghana, January 2012, pp. 26-28.
[33] Children and Sexual Exploitation in Accra (Summary) Adomako Ampofo et al. 2006; p. viii

peers are in need of food or money, family members like uncles sexually abuse them before assisting them with their needs. During the Western Regional Validation Workshop, the Ghana Health Service representative told researchers for this study:

Defilement is taken for granted all over here (Western Region), not just in the sites that you visited.

The notion of sexual abuse being 'taken for granted' is also echoed by the 2006 study on sexual exploitation of children in Accra, which found that even the victims/survivors of sexual

The notion of sexual abuse being 'taken for granted' is also echoed by the 2006 study on sexual exploitation of children in Accra, which found that even the victims/survivors of sexual exploitation did not necessarily recognize it as abuse[34]. See also section 4.4 in relation to girls' vulnerability to commercial sexual exploitation.

Gender-based injustice in responding to violence against girls and women: It was clear from qualitative research respondents that male solidarity frequently comes into play when girls' and women's rights are violated. Given that both the perpetrators of such violations (be it shirking paternal responsibilities, defilement or rape) and most of the people they are supposed to answer to[35] are male, this common gender bias is said to override the interests of the female victims/survivors and influence the actions of leaders or duty-bearers in favour of male perpetrators. For example, in the Upper West Region a case was cited in which a girl was 'camped' - abducted by a group of boys and used as a sex slave for several days. When her father found her, he reported the case to the DOVVSU office. While there, he overhead one of the staff saying to the family members of the main perpetrator:

Go home and don't worry; your brother will be freed, this case will not go anywhere.

In the Ashanti Region, DOVVSU staff interviewed expressed the need for more staff and, interestingly, said they would prefer them to be male. This is because, according to them, perpetrators of crimes against women do not take female police officers seriously:

They show attitudes, condescension maybe, to the female DOVVSU staff, thinking that it is a fait accompli that they will sympathize with the female victims.

Such opinions from male police demonstrate that women officers, by virtue of their gender, do not have the force of their profession behind them in the eyes of both their male colleagues and of male criminals.

See sections 4.4 for further information on sexual abuse and exploitation, section 4.5.1 on child marriage and 4.5.2 on FGM/C which are also particularly relevant to girls.

4.1.3 Children in puberty

While it has been shown that younger children rather than older adolescents are more at risk of physical punishment in the name of discipline, according to FGD and KII respondents in all regions, adolescents aged 12-17 become more susceptible to other types of harm, especially girls, because they are going through puberty at the same time as they acquire greater independence.

When asked who 'the most vulnerable' children are, the majority of both male and female respondents of different ages mentioned girls - and especially teenage girls:

All children need protection but girls in their teens need more protection than boys because female children are the most vulnerable in the community and should be protected. (Men aged 25-40, urban N/R)

Cases of abuse of sexually immature girls were reported during the research. However,

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[34] Children and Sexual Exploitation in Accra (Summary) Adomako Ampofo et al. 2006; p. xi
[35] i.e. people in leadership positions or in positions of authority in the community, social welfare, the security agencies and the judiciary.

it appears that girls' vulnerability to sexual abuse increases significantly once they have gone through puberty. The changes in girls' bodies attract male attention and make them far more prone to sexual abuse.

Although the vulnerability that comes with reaching puberty affects girls more in relation to sexual abuse, pubescent boys are also susceptible to harm. The concerns raised about the harm they face at this age had less to do with sexual relations, however, and more to do with the types of economic activities that they engage in. At Elmina, in the Central Region for instance, boys of this age are reportedly at risk because they become strong enough to work and are thus able to engage in child labour. Some of these boys consequently drop out of school and those who get involved in fishing risk drowning. Similarly, in Bawdie, Western Region, adolescent boys start getting involved in galamsey (mining) activities and – as seen in section 4.4.5 - are not only exposed to mercury poisoning, but may fall into uncovered mining pits, risking injury or death. Boys are also more likely than girls to come into conflict with the law during puberty, as explored in section 4.5. For example, in the Volta, Greater Accra and Western Regions it was specifically mentioned in the qualitative research that male adolescents are reportedly more likely to steal, gamble and fight than girls.

The boys go out to play video games and they gamble there so they steal our money. If they do not get money they steal anything they can get and they do not even stay at home. (A father, rural, W/R)

4.1.4 Children in single parent and re-constructed families

Accounts from some regions suggest that the separation and divorce of parents can sometimes result in negative consequences for children. This is in instances when changes in living conditions heighten children's vulnerability, although it was noted in one region that some children may be given a fresh start through being taken away from actual or potential sources of abuse.

Among patrilineal ethnic groups, customary practices dictate that the children of divorced parents stay with their fathers, thus such children effectively lose their mothers and may come under the care of step-mothers or 'rival' wives in the case of polygamous households. However, this issue was only discussed in two regions (Upper East and Upper West). In Brong Ahafo women explained that polygamy means that women in the urban community become the sole carers of children whilst men take no responsibility, and as a consequence sometimes their children have to engage in child labour to help contribute to household needs.

In some cases, fathers give children, especially girls, to be fostered after their divorced mothers have left the home.

My daughter was 10 years old when my husband and I divorced and he took her away and sent her to live with someone where she really suffered. She walked to school barefoot; she had only one (pair of) underwear and even with that one she had to tie it before she could wear it. The woman wasn't even giving her food so when someone came to tell me about the situation I went there to pick my daughter without her father's consent. When I saw the situation my daughter was in, I wept. I brought her back here. (Divorced mother, rural, W/R)

Single parents are women in the vast majority of cases and their children are more vulnerable because of the limited level of financial support women can give, coupled with the constraints on their time and attention due to their work demands. Single parenting can be a consequence of polygamy, weak conjugal arrangements, divorce, separation or death. It is exacerbated by a cultural environment that makes it easy for men to evade their parental responsibilities as well as by the limitations of judicial recourse, especially in rural areas. In the Ashanti, Eastern, and Volta Regions, children of single parents were noted to be more likely to get involved in stealing, gambling, smoking and substance abuse, whilst in the Central

Region it was observed they are likely to engage in harmful forms of child labour. Girls were mentioned to follow boys and older men for money, leaving them vulnerable to sexual abuse. Children from single parent homes may also be more likely to be sent to live with extended family members or to migrate for work purposes, situations which could result in greater vulnerability.

Children under the care of step-parents or foster parents, may have an inferior status to the biological children of the household and may be given excessive workloads. In the Northern Region, a school head teacher said that some children had become 'enslaved' by step-parents to the extent that it sometimes puts an end to their education. Abuse from step-parents was spoken about by key informants in the Northern, Volta and Western Regions. Separation of children from biological parents is discussed in more detail in section 4.5.5.

4.1.5 Children living in conflict zones

Overall Ghana is a peaceful country. Nevertheless, due to the diversity of Ghana's population occasional civil conflict stemming from ethnic, religious or chieftaincy clashes erupt. Qualitative research findings suggest that children living in the Northern, Upper East, Upper West, Volta and Western Regions are vulnerable to violence, injury and death from conflicts. Indeed some children interviewed for this study expressed that they lived in a state of constant tension over unpredictable violence, instability and social discord created by conflicts.

Experiences of some children in conflict zones

Northern Region: The DOVVSU Officer confirms that conflicts relating to land, ethnicity and chieftaincy in the community have had a negative impact mostly on women and children who are directly affected by hostilities. The breeding of enmity among children of different ethnic tribes sometimes causes them to fight among themselves. It also has implications for children's education, not only due to the disruption but also because, as he points out, "If there is no peace in the district, teachers will not accept postings to schools in the district."

Whenever there is a clash and there is curfew, we go to school late but we close early and it makes our schooling difficult. We suffer a lot during that period. We fear going to school and some children just stop coming to school. Some of us even stop talking to each other and fight among ourselves too. (Girls aged 13-17, urban, N/R)

Upper East Region: In the urban municipality, there is ethnic conflict between Kusasis and Mamprusis and it is reported that violent clashes erupt between the two factions, especially during festive seasons. When this occurs during school hours, children are at risk of being hit by stray bullets or being injured. They are not able to concentrate in school because they do not know when the next conflict might erupt or how they will get home. The conflict has led to the establishment of groups of young people organized along ethnic lines which the children say are always at the core of violence in the municipality. Children aged 7-10 say their mothers usually hide them in big fertilizer bags to prevent them from being hit by stray bullets. This practice is known as 'Geri yayi zaafi'- meaning, 'the town is hot.' They said it is extremely uncomfortable and dangerous as it sometimes results in suffocation.

Upper West Region: In the urban community, children and women respondents explain that the community has been plagued with a recurrent chieftaincy dispute over a number of decades which has repeatedly created a state of insecurity, fear and panic amongst children in the community whenever it erupts. Moreover, there are places within the community that children are afraid to go, because of the continual military presence in the area.

4.1.6 Other vulnerable groups

• **Children who have been orphaned and taken in by relatives or foster families are commonly less well cared for than biological children.** Whenever children who have been orphaned were discussed during the qualitative research, they were associated with neglect and lack of proper care. They often have to find ways to provide for their own needs which makes them more likely to engage in child labour and consequently drop out of school. Children who have been orphaned, even when they live with guardians, are sometimes subjected to sexual (particularly in the case of girls), physical and emotional abuse. See section 4.5.5 for information from the quantitative survey regarding this issue. Institutional care for orphaned children is limited and mostly private. According to Social Welfare Officers across the country, GOG is working towards eliminating illegal orphanages in the country. See section 4.5.5 for information from the quantitative survey regarding perceptions of institutional child care.

● **Children with physical and learning disabilities:** although the research did not elicit sufficient data to provide a national overview of the child protection issues particular to children with disabilities, FGDs and KIIs indicated that there is a stigma attached to physical and learning disabilities that makes parents tend to keep children with disabilities indoors and hidden from view. Therefore children with disabilities sometimes miss out on educational opportunities and the chance to integrate into society. Those who attend school encounter a range of challenges because there are no special facilities for them and in regular schools, where inclusive and rights-respecting approaches have not been prioritized, they face discrimination and abuse from both teachers and other pupils. In the Central Region it was revealed that most children with visual and hearing impairments are not sent to the special schools that do exist because their parents and guardians are not aware of the existence of these institutions or cannot afford to travel there to enrol their children. There is little understanding of the concept of learning difficulties and such children are seen as 'stupid' or 'stubborn' and are punished for it. In various regions it was mentioned that children with learning disabilities are sometimes referred to as 'witches' or seen as suffering from 'spiritual ailment', requiring harsh treatments to 'cleanse them'. In the Ashanti, Central, Greater Accra and three northern regions respondents reported that children with disabilities are sometimes killed or abandoned at birth because they are perceived as 'evil spirits'.

Many of them [children with disabilities] are kept at home so that no one sees them. And those at the prayer camps are subjected to very inhumane treatment. They are chained up and treated harshly all in the name of trying to get rid of the spirit or curse that's supposedly causing their problem. It all boils down to education. (Head of Clinic in the urban site and respondents in the rural site, W/R)

● **Children living with HIV and children with parents living with HIV are vulnerable to a series of social, economic and personal hardships.** As with disability,

the research did not elicit sufficient data to provide a national overview of these issues although they were raised during discussions in the Eastern and Western Regions. In the Eastern Region, where HIV prevalence is high compared to other regions, the Queen Mothers of the urban site act as foster mothers to approximately 200 children in their care whose parents have died of AIDS-related illnesses or who are vulnerable in other ways. The association supports the children the form of food, school fees, school uniforms and educational materials provided by donor organisations. Staff at the St. Martin de Porres Hospital at Agormanya spoke about children living with HIV in the district as suffering from stigmatization, with some not wanting to go to school as a result, leading to missed opportunities. Additionally, children with parents living with HIV are said to be vulnerable because they are at higher risk of being infected themselves, they are at risk of being orphaned and they may suffer from parental neglect, becoming malnourished, depressed and stigmatized. If parents cannot work the children may be forced to engage in child labour.

Some adults who have contracted HIV go to prayer camps and stop taking their anti-retroviral drugs with the belief that the faith healers can solve their problem entirely. Their conditions inevitably worsen and they are sometimes not brought back to the hospital until it is too late. There are even a few times when the members of the prayer camps have dumped corpses in the clinic and left. (Head of clinic, urban, W/R)

- Children of minority groups: There were a few examples in the qualitative research of the heightened vulnerability of children belonging to ethnic groups that are in the minority in the particular communities in which they live. In Hohoe Gbi-Bla Zongo in the Volta Region, the land rights of migrant groups have been curtailed as a result of religious conflict, thus increasing children's vulnerability because they will have no access to their own land when they grow up. In the Upper West Region, it was reported that Fulani children are marginalized and discriminated against - denied access to education and basic services which, coupled with their nomadic and pastoralist life styles, increases their vulnerability. In the Brong Ahafo Region, the multi-ethnic settlement of the urban research site has 11 Chiefs representing different ethnic groups but some of the smaller minority groups such as Dagartis and Mossis have no representative. This means that they have no one to approach directly for assistance in the case of problems, including child protection issues. Given the low status afforded to women, females from these ethnic groups have little voice within the community. With mothers being the first line of defence for children, this multiple lack of representation is likely to increase the vulnerability of the children in these minority groups. In the FGD with 13-17 year-old girls in the community, when allocating scores out of 10 for child protection, the group initially scored the role of the chiefs as zero but later on said *"let's give them two"*. Another added: *"they don't do anything for us!"*

4.2 Physical violence and abuse

Summary

- **Physical harm of children is mostly perpetrated under the guise of discipline** and occurs in both the home and school and to a far lesser extent in the community. Exploitation of children by their teachers for labour was reported in a few regions, sometimes under the guise of punishment.

- **Corporal punishment** is common in all 10 regions of the country, which contradicts what the majority of survey respondents perceive to be the best ways of disciplining children, which they cite as being positive discipline techniques. Overall, various forms of physical punishment account for 70.9% (n=3333) of all responses for the worst ways to discipline children. More children than adults consider corporal punishment as harmful to children.

- **Children aged** 6-14 are subjected to corporal punishment more than other age groups.

- **Extent:** 43.9% (n=658) of adult survey respondents said they physically punish children in their household. 14.5% (n=218) of child survey respondents aged 14 to 17 state that they have been beaten by an adult at home in the past month compared to 33.8% (n=504) who state that they have been beaten by a teacher at school in the same period. 24.4% (n=365) of adult survey respondents state that a child in their household has been beaten by an adult at home in the previous month compared to 15.8% (n=237) who state that a child has been hurt by a teacher in the same period. Only 6.3% (n=189) of adult and child respondents report that either they, or a child in their household, has been beaten by an adult in the community in the past month, outside of home and school settings. 12.1% (n=361) of child and adult survey respondents indicate that a child in the community has been beaten to the point of visible injury in the past month.

- **Regional and other disparities:** Brong Ahafo, Greater Accra and Central Regions report above average levels of physical violence both at home and at school. No particular trends for violence in the home were noted based on household income or respondents' education level or religion.

- **Perpetrators:** Overall, female family members – especially mothers - are the main perpetrators of physical punishment at home compared to male family members.

- **Objects used to beat children:** the cane, stick and hand are the most common at home and at school 92.0% (n=486) of relevant child survey responses indicate that teachers use a stick or a cane.

- **Reactions to corporal punishment:** Over 80% of relevant child survey responses indicate negative reactions to experiencing physical harm in the past month either by an adult at home or by a teacher at school, such as feeling sad, angry, scared, helpless, pain and 'I didn't deserve it'. This suggests they are not learning anything from it. It causes some children to lose interest in schooling.

- **Reasons why adults do not physically harm children:** 55.9% (n=838) of adult survey respondents state they do not physically hurt children, citing moral beliefs, it not being effective and children's vulnerability. Only 1.9% (n=19) of responses specifically mention child rights and only 3.2% (n=31) indicate that they don't hurt children as a result of information received from another party. This would indicate that there is a lot more work that could be done on proactive awareness-raising

- **Bullying:** Physical harm by another child at school within the past month is reported by only 12.2% (n=352) of child and adult survey respondents overall but it is likely that the extent of verbal bullying is much higher, as indicated by WHO research.

4.2.1 Attitudes in general

The survey reveals some interesting discrepancies between what adults and children perceive in theory to be the best ways to discipline children and what is actually happening in practice. For example, although corporal punishment is generally widespread, both adult and child survey respondents in general believe 'positive' discipline techniques to be the best ways to discipline and 'negative' techniques, especially involving physical punishment, to be the worst ways to discipline children.

Adult and child survey respondents identify positive' discipline techniques as the best ways to discipline children. This accounts for the majority of all responses (58.3%, n=3165) and includes: communicate well, make sure they know what they did was wrong, explain rules, show them a good example and reward good behaviour. 'Communicate well with them / speak wisely to them / listen to their worries' is the single

most popular response for each group of respondents, girls, boys, women and men alike, accounting for 31.2% (n=1695) of all total responses. In comparison, 'negative' discipline techniques such as hit them, punish them, tell them off, make them kneel down, not let them do things they enjoy, deprive them of food, twist ears/pinch, extra work and other physical punishment, make up only 36.9% (n=2005) of all responses. Overall, various forms of physical punishment - including hit/beat them, make them kneel down, deprive them of food, twist ears/ pinch, extra work and other physical punishment - account for 23.1% (n=1252) of all responses. Although the numbers are very small, it is nonetheless alarming that a few children and adults cite practices such as 'cutting children with sharp objects' and 'insert pepper and hot substances [into private parts]' as the best ways to discipline children. See graph below for a more detailed gender breakdown of responses regarding the best ways to discipline children.

According to CHHQ and AHHQ respondents: In your view, what are the **best** ways to discipline children? (Total responses n=1324 girls, 1755 women, 1266 boys, 1082 men)
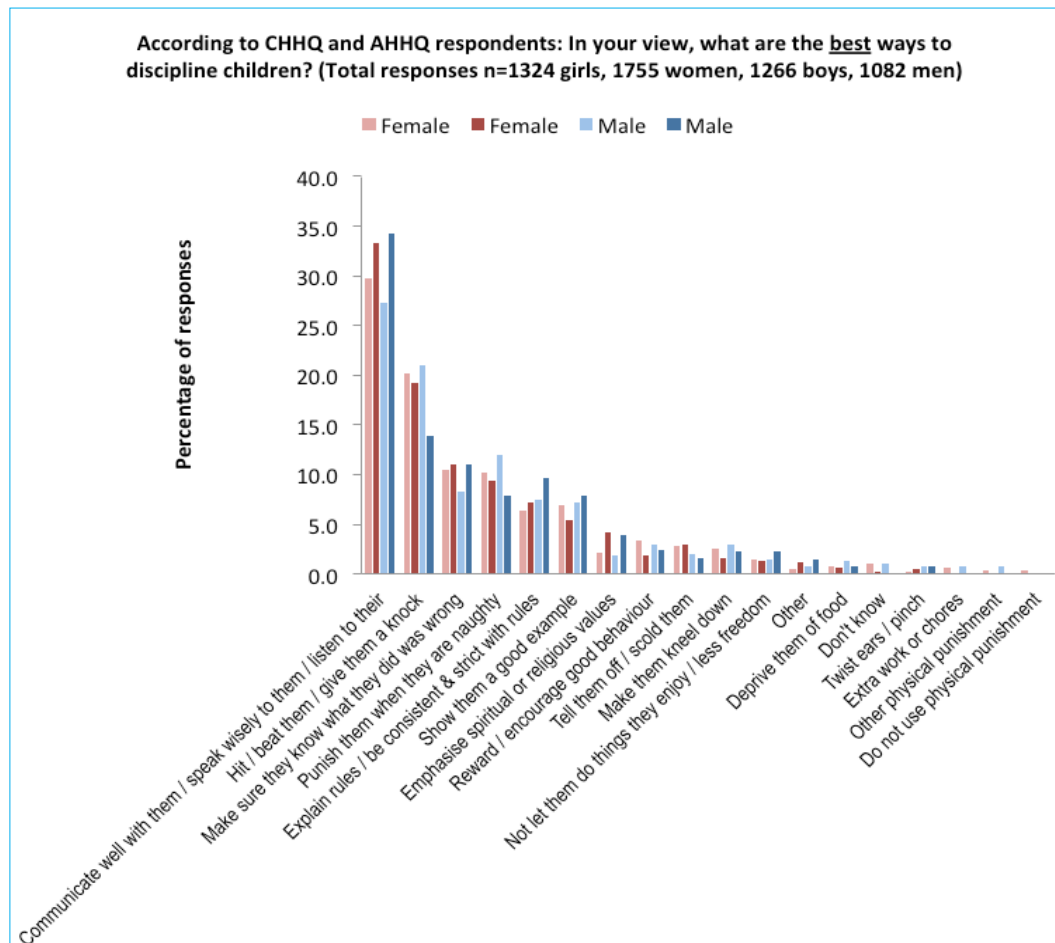
Adult and child survey respondents identify 'hit / beat them / give them a knock' as the single most common response for the worst ways to discipline children, accounting for 35.3% (n=1660) of all responses. However, it was also the second most popular response for each respondent group in relation to the best ways to discipline, accounting for 18.8% (n=102) of all total responses to that question. Some possible reasons for physical punishment appearing as both the 'best' and 'worst' ways to discipline children include: it may be cited by completely different respondents for each question; children and adults may be so used to physical punishment as part of everyday life that they automatically cite it as a good discipline technique, even though they later question this when encouraged to think about it in more detail.

'Negative' discipline techniques make up an overwhelming 85.6% (n=4027) of all responses about the worst ways to discipline (hit them, punish them, tell them off, burn them with hot things, ignore or neglect the child, make them kneel down, disown child/throw them out, not let them do things they enjoy, humiliate them, deprive them of food, twist ears/pinch, and other physical punishment). 'Positive' discipline techniques make up only 2.3% (n=108) of all responses (communicate well, make sure they know what they did was wrong, explain rules, show them a good example, reward good behaviour). Overall, various forms of physical punishment account for 70.9% (n=3333) of all responses for the worst ways to discipline (hit/beat them, make them kneel down, deprive them of food, twist ears / pinch, extra work and other physical punishment).

A number of alarmingly violent and abusive practices are listed under 'other physical punishments' and these are mentioned by significantly more children than adults. Although these are listed as the 'worst' forms of discipline,[36] and although some are mentioned by only very few respondents, representing only a very small minority of practices, the level of detail provided in the description might indicate that these respondents have either personally experienced or at least heard about such techniques being used to discipline children.

More boys and girls than adults consider corporal punishment as harmful to children: 27 out of 68 children's FGDs [37] across the 10 regions of Ghana (that is 39.7% of children's FGDs) mention corporal punishment as being harmful to them. This includes corporal punishment at home, in school, and where the location is unspecified. This is in contrast to only 10 out of 56 adult FGDs for which information is available (17.9% of adult FGDs). Of the total mentions of corporal punishment across all 124 relevant FGDs, mentions by children's groups constitute 77.0% of the total number of mentions (total n= 57). Girls aged 7-10 in both the rural and urban sites in the Northern Region speak about constant beatings at home which leave bruises and cuts on their bodies. Children from other regions likewise give specific examples of the violence they experience.

My father beats me, sometimes with a club and shouts at me whenever I do something bad. Once when I accidentally splashed water on my father's shoes, my father slapped and kicked me. (Boy aged 13-17, A/R)

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[36] 'Other physical punishments' mentioned by child respondents: burn with fire / hot iron/ hot objects / hot water / put hand in fire x 60 responses; cutting child with sharp objects/threaten with a knife x39; work on farm /weeding/make them do hard work x 21; throwing things at them x20; kill the child/beating to death/poison the child/burn child to death x15; kick in the stomach/kick them x8; kneel down while carrying heavy load / carrying heavy loads x8; chaining child to a tree x7; hit children with firewood objects x7; using ginger in their private parts x6; putting pepper in their eyes x6; make child stand in the sun/ rain x4; asking kids to crawl on stones x2; making the child hold hot sand x1; use head to hit wall x1; putting stone on their hands x1; push head in barrel of water x1; squatting while holding ears x1; torture with needles x1; putting children's hands in faeces x1; scrubbing the bath house x1; handicapping them x1; locked up in room x1.
'Other physical punishments' mentioned by adult respondents: cutting them with blade x 35; throw things at them x12; tying up the child x5; look at the sun x3; enema x1; making child walk naked x1.

[37] Information is not available for all 77 of the FGDs with children.

4.2.2 Experience in general

Children aged 6-14 are subjected to corporal punishment more than other age groups. According to the FGDs, children are less likely to be beaten when they are under 5 or between the ages of 15 and 18. 56.7% (n=17) of FGDs[38] with children aged 7 to 10 mention corporal punishment as something that puts them in harm's way, whereas only 31.6% (n=12) of FGDs[39] held with older children aged 13 to 17 mention corporal punishment as being harmful. This is consistent with the survey data that shows that 6-14 year olds are the age group most likely to experience regular physical harm by adults: this was stated by 52.9% (n=792) of child survey respondents. This was followed by children under 5 (33.2%, n=497 of child respondents), then children aged 15-18 (24.6%, n=368 of child respondents). Furthermore, 57.5% (n=859) of child survey respondents state they were beaten by adults 'sometimes' or 'all the time' between the ages of 2 and 14 (see chart below). This rises to 84.1% (n=1256) when including 'rarely'. Only 10.2% (n=152) of child respondents state that they were never beaten when younger, indicating a generally high prevalence of corporal punishment. Findings in relation to this last point are similar for both boys and girls. One possible interpretation is that children aged 15-18 are less likely to be beaten because they are physically bigger (and might possibly hit back) and/or that by that age they are perceived as generally in need of less 'discipline' and 'punishment' and/or the older they get, the less this form of discipline is effective. The higher percentage in relation to 6-14 year-olds might relate to school-going age and might refer to beatings by teachers at school as well as by adults at home. As many as one third of child survey respondents state that even very young children under the age of 5 are hit 'sometimes' or 'all the time'.

According to CHHQ respondents: when you were younger, for example when you were between the ages of 2 and 14, how often were you beaten by adults? (n=753 girls, 741 boys)
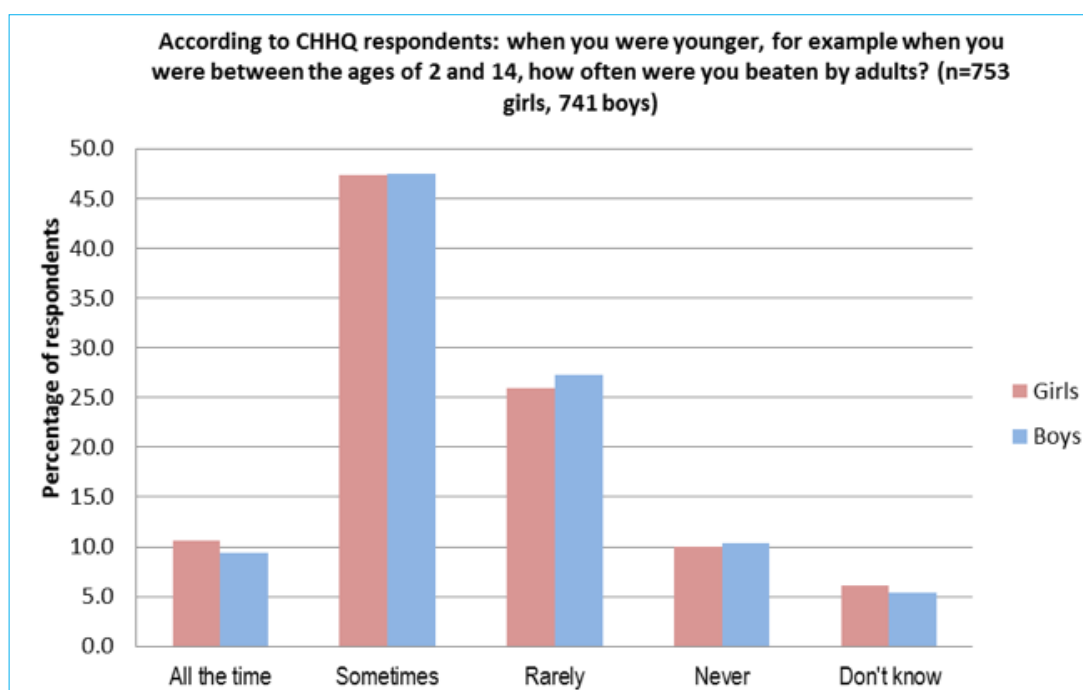
12.1% (n=361) of child and adult survey respondents indicate that in general – i.e. not limited to themselves or to a child in their particular household - a child in the community has been beaten to the point of visible injury in the past month, e.g. resulting in blood, swelling or bruises showing. This is reported by proportionally more children than adults. These serious cases may be as a result of beatings either at home and/or at school and/or in the community.

[38] Information is not available for 10 FGDs on this question.
[39] Information is not available for 2 FGDs on this question.

Overall, very few child and adult survey respondents (6.3%, n=189) report that either they, or a child in their household, has been beaten by an adult in the community in the past month, outside of home and school settings. Of the 189 relevant respondents, the majority of responses indicate that this was either by a male neighbour (34.7%, n=77 responses), a female neighbour (15.8%, n=39 responses), a male relative (15.3%, n=34 responses) or a female relative (also 15.3%, n=34 responses).

In addition to teachers at school, the FGDs reveal that some children are taken to other people in the community for punishment such as the barrier police (mentioned mainly in the Western Region), the elders, Chief and the Unit Committee[40]. The barrier police are occasionally called upon by disgruntled parents to 'raid' games centres and arrest everyone in order to deter children who spend more time there than at school. In addition, parents said:

We sometimes take our children to the barrier station to be beaten and/ or advised when the children do something wrong.

4.2.3 Experience at home

A comparison by region, based on four key household survey questions, shows that **four of the ten regions (Volta, Brong Ahafo, Greater Accra and Central) report above average levels of physical violence at home.** Greater Accra was the only region where responses were above average for each of the four questions individually. Volta and Central Regions showed above average responses for three out of the four questions. The regions reporting the least levels of physical violence at home were Northern followed by Western, Upper West, Eastern, Ashanti and Upper East, all of which were reported below average levels. See chart below for details. There were no clear differences found between urban and rural settings regarding physical violence at home; physical violence is equally present in both settings.
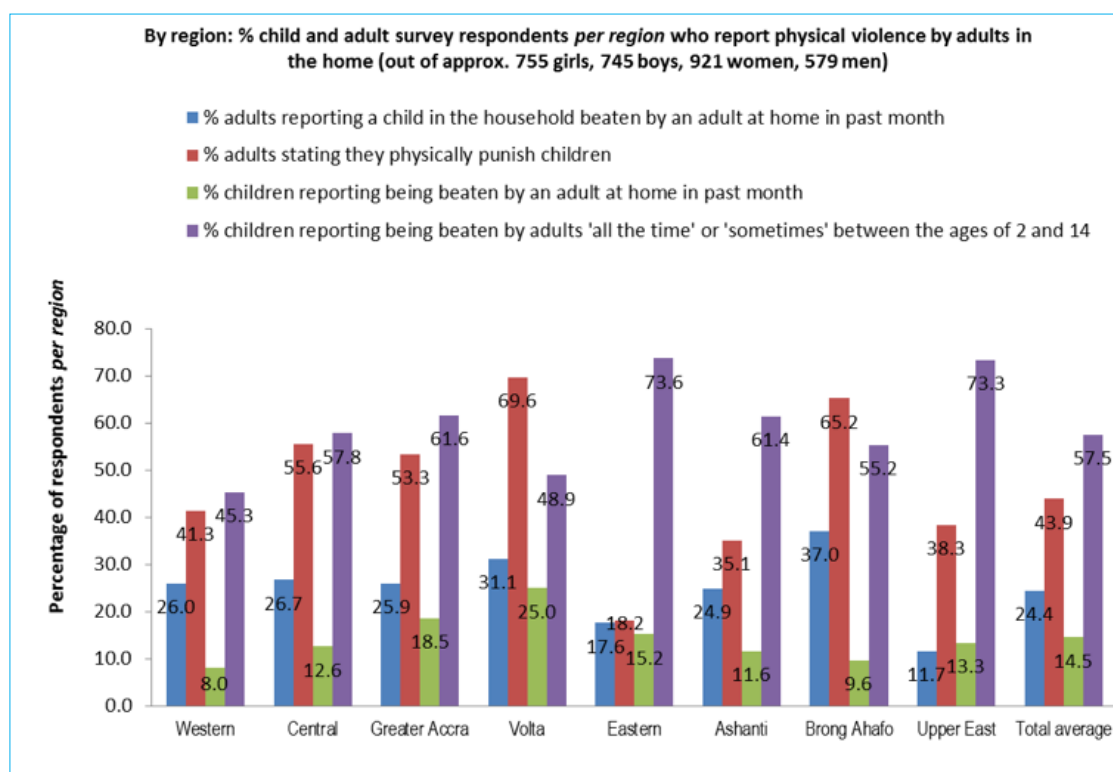
By region: % child and adult survey respondents *per region* who report physical violence by adults in the home (out of approx. 755 girls, 745 boys, 921 women, 579 men)

- % adults reporting a child in the household beaten by an adult at home in past month
- % adults stating they physically punish children
- % children reporting being beaten by an adult at home in past month
- % children reporting being beaten by adults 'all the time' or 'sometimes' between the ages of 2 and 14

No particular trends were noted for these four key questions based on household income or respondents' education level or religion.

43.9% (n=658) of adult survey respondents said they physically punish children in their household although only 24.4% (n=365) state that, in the previous month, a child in their household has been beaten by an adult at home. This might indicate that physical harm of children at home is more prevalent than the number of actual reported incidents in the past month (i.e. under-reporting of incidents). Alternatively it might indicate that although many adults physically punish children, it may not happen every month. The figure of 24.4% here is compatible with the 25.1% (n=589) of child survey responses which indicate that when they do something wrong at home, like being naughty or lazy, their parent or guardian usually causes them physical harm.

Furthermore, 14.5% (n=218) of child survey respondents aged 14 to 17 state that they have been beaten by an adult at home in the past month. Proportionally more boys than girls said they experienced corporal punishment at home. This is less than half of those who experienced beatings from teachers in the same period. Taking into account the age range of child respondents

for the quantitative study (14 to 17), it is consistent with previous findings that older children experience less physical punishment in general compared to younger children.

These findings are supported by other research findings. **At least one FGD in each region mentions corporal punishment in the home as harmful to children.** 13 FGDs (both adult and child) mention that corporal punishment takes place in homes specifically and 17 groups mention physical punishment without specifying where this takes place. For example, in the Central Region, 13 to 17-year-old girls at the rural location and 7-10 year-old boys at the urban site informed the research team that many times their parents wait until they are asleep before beating them or pouring water on them for something they have done or failed to do during the day.

Even though respondents identify it as the worst way to discipline (see section 4.2.1), the main reason given for using corporal punishment is for 'discipline'. In the quantitative survey, when asked why corporal punishment is administered, 'discipline' accounts for 82.0% of total responses from adults who admit to physically punishing children and from children who state they have been physically hurt by adults at home in the past month. 8.6% (n=105) of responses

indicate that the physical punishment is a result of the adult losing her/his temper. Interestingly, proportionally more children than adults state this.

Overall, female family members – especially mothers - appear to be the main perpetrators of physical harm against children compared to male family members. According to adult and child survey respondents who report physical harm by an adult at home within the past month, female family members account for 55.0% (n=427) of responses and male family members account for 41.4% (n=322) of responses. Specifically, mothers account for 39.6% (n=308) of responses and fathers for 24.6% (n=191) of responses. Furthermore, proportionally, more women than men admit to physically punishing children (49.1%, n=452 of women survey respondents compared to 35.6%, n= 206 of men). Also, more women than men state that hitting or beating children is the best form of discipline. It may be that women are more frequently the ones who end up disciplining children in practice because they more actively engaged in child-rearing than men, and where only one biological parent is present this is much more likely to be the mother than the father. The quantitative data revealed a possible tendency overall for girls to be physically disciplined by female adults and boys by male adults.

Of the objects used to beat children, the cane, stick and hand are the most common. The majority of adult respondents who physically punish children do this by beating the child with an object or open hand – i.e. a slap. Together these account for 89.8% (n=591) of their responses as to how they usually physically punish children. When asked in more detail about the types of implements used, adults who physically punish children and children who reported being hurt at home by an adult within the past month mostly cite cane/stick (accounting for 58.2%, n=552 of total responses) and open hand (32.2%, n=306 responses). Women state more responses for 'open hand' than

men, whereas men state more responses for 'cane/stick' than women. Proportionally more children than adults cite other implements such as a belt and wooden spoon although these numbers are far less significant. Participants from the various regional FGDs mentioned other objects that are used to beat children. In fishing communities in the Eastern Region, children and adults mentioned that oars are sometimes used to beat boys while fishing. In the Brong Ahafo Region, bicycle chains were cited as being used. In the Upper East Region, fan belts from cars are sometimes employed. Children reported cane marks, bruises, swellings and bodily pains after experiencing corporal punishment.

Other than beatings by parents and carers which were reported in all regions, some forms of corporal punishment were reported that constitute gross human rights violations. In the Upper West Region, children in FGDs reported that they had been brutally beaten by parents and care-givers, denied food and had pepper and ginger inserted into their private parts, all in the name of discipline. These incidents were, however, very rare. Withholding food is also reported in a few of the research areas in the Eastern and Upper East Regions. Parents and guardians are said to withhold food from children for a period of up to 24 hours. Another abusive practice is to send children away from the family home as a form of punishment or sending them to sleep outside the home. It is said by respondents that sometimes such children are driven to steal or to seek help from other people in the hope they will give them food or shelter. As shown in section 4.2.1, the survey data also reveals a small number of extremely violent practices identified as the worst ways to discipline children in general, not just within the home.

Boys and girls above the age of 13 years are lashed with canes that have been soaked in water for a number of days. The intention is to make the cane much heavier such that it will inflict more pain. Sometimes water is poured on children before they are beaten. (13-17 year-old boys, urban, BA/R)

For child survey respondents who experienced physical harm by an adult at home in the past month, the majority of reactions to this are negative. 85.4% (n=269) of their reported feelings are negative and 8.9% (n=28) are neutral. Although the differences are not huge, proportionally more girls than boys state feeling sad, angry, scared and 'I didn't deserve it'. More boys than girls report feeling pain, 'I deserved it', 'it didn't bother me', 'helpless' and 'I'm used to it'. Only 4.1% (n=13) of responses state 'I deserved it'. Comments such as this one from the FGDs would therefore appear to be in the small minority:

When I do something bad and you beat me, I know I am being corrected and so then I am happy. (Teenage girl, rural, E/R)

Given that corporal punishment at home, the same as at school, is intended as a form of discipline, it is not clear that children are learning anything from it.

55.9% (n=838) of adult survey respondents state they do not physically hurt children, giving a range of reasons why. 43.5% (n=428) of responses relate to moral beliefs including it is wrong, someone explained to me that it is wrong and it is against child rights. Slightly more men than women responded in this way. 30.4% (n=299) of responses relate to it not being effective: there are better ways and it teaches them to hit others (slightly more women than men). Responses relating to children's vulnerability (it hurts them, children are vulnerable / weak / small) make up 20.7% (n=203) of responses. Only 1.9% (n=19) of responses specifically mention child rights and only 3.2% (n=31) indicate that they don't hurt children as a result of information received from another party: 'someone explained it is wrong', 'I learned about it during a workshop' and 'I saw information about not hitting children'. This would indicate that there is a lot more work that could be done on proactive awareness-raising.

4.2.4 Experience in school

"The Ghana Education Code of Discipline for second cycle schools[41] provides for corporal punishment in very rare cases where the head of the school must authorise or administer it" the 2011 Multiple Indicator Cluster Survey (MICS) points out. The MICS report also notes that "the National Child-Friendly School Standards document […] drafted by the Ghana Education Service, […] states that schools should be free from any form of abuse, including corporal punishment. However, punishment such as caning and whipping is still widely practiced at home and school. Although the Government is currently coping with the issue, there are no mechanisms in place that can effectively monitor the practice."[42] Overall, the research revealed that this is indeed the case: corporal punishment, especially caning, is widespread and unsupervised in schools despite GES regulations and is carried out to sometimes excessive levels, inflicting serious physical and psychological damage on children. This causes some children to lose interest in schooling.

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[41] Senior High Schools (SHS), formerly known as 'Senior Secondary Schools'.

[42] GOG, GSS et al, Ghana Multiple Indicator Cluster Survey 2011, p.216.

The majority of child survey responses when asked the repercussions for doing something wrong at school were 'negative responses' (such as hit/beat/kneel down/ etc.) as opposed to 'positive responses' (such as communicate well with them/ explain rules/etc.). 74.4% (n=1520) of responses involved physical harm by a teacher or someone else, physical work, humiliation, shouting and suspension or exclusion from class. Only 20.7% (n=422) of responses were 'positive', encouraging children to learn from their mistakes by explaining what the child did wrong and getting them to do it again. These results are from children aged 14-17 and may or may not be comparable to the experiences of younger children. Overall, corporal punishment at school is relatively common as a form of punishment and discipline and is administered in response to particular actions of the child. The experiences of girls and boys, as well as children in rural and urban areas, are largely similar. See chart below.

According to CHHQ respondents: when you do something <u>wrong</u> at school - like getting an answer wrong or not doing your homework - what does your teacher usually do? (total reponses n=1032 girls, 1010 boys)
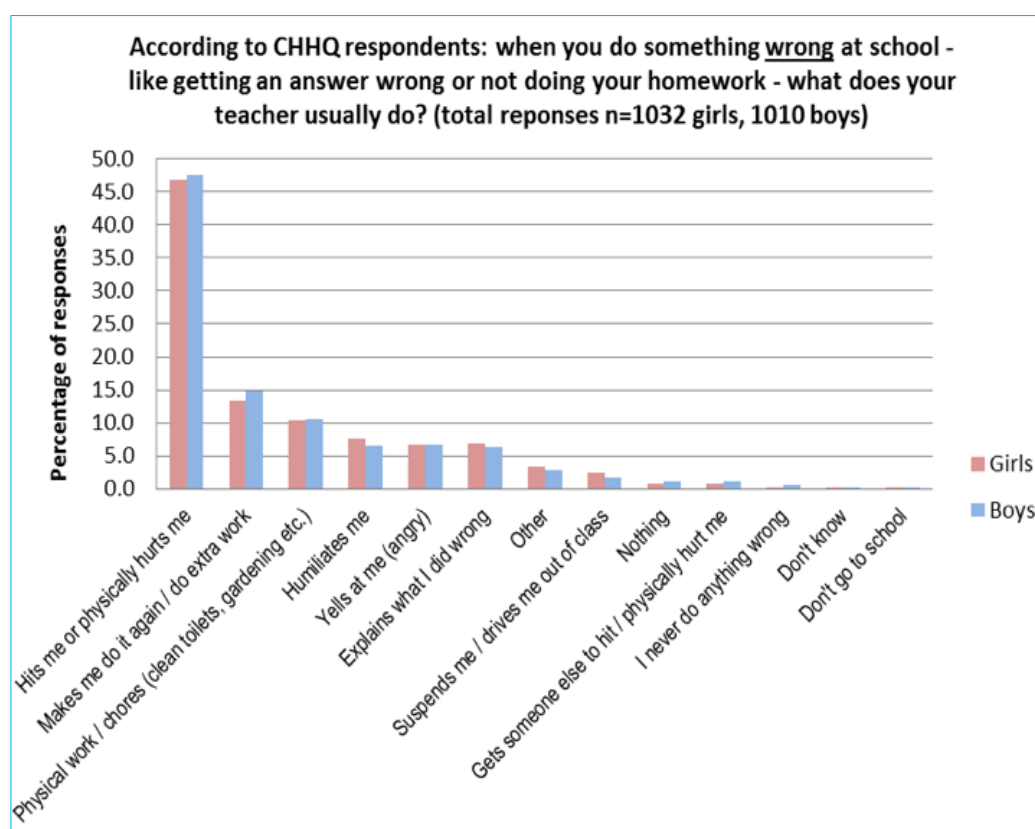
Across religions and in all ethnic groups, with the exception of the Grusi, physical punishment is the most common form of punishment practiced by teachers, according to child survey respondents. However, among the Grusi, explaining what was done wrong (20.9% of children's responses, n=9) is more common than in other ethnic groups. Physical punishment is more common among Christians (49.4%, n=893) than Muslims (37.0%, n= 104), whereas verbal humiliation (9.6%, n=27 responses in total) and repeating the work (18.5, n=52 responses in total) is more common among Muslims than Christians (6.4%, n=116/12.8%, n=231 respectively).

A comparison by region, based on three key household survey questions, shows **that five of the ten regions (Brong Ahafo, Upper East, Ashanti, Central and Greater Accra) report above average levels of physical punishment at school.** In the Upper East, Ashanti and Central Regions responses were above average for each of the three questions individually. Brong Ahafo showed above average responses for two out of the

three questions. The regions reporting the least levels of physical punishment at school were Northern (significantly lower) followed by Upper West, Western, Eastern then Volta, all of which reported below average levels. See chart below for details. Central, Greater Accra and Brong Ahafo regions report above average levels of physical punishment both at home and at school whereas Western, Eastern, Northern and Upper West report below average levels of physical punishment both at home and at school.

By region: % child and adult survey respondents *per region* who report physical violence by teachers / head teachers at school (out of approx. 755 girls, 745 boys, 921 women, 579 men)

■ % adults reporting a child in the household beaten by a teacher / head teacher at school in past month

■ % children reporting another child in the household beaten by a teacher / head teacher at school in past month

■ % children reporting being beaten by a teacher / head teacher at school in past month

Extent of physical punishment in school in general: 33.8% (n=504) of the child survey respondents, aged 14-17, state that they have been beaten by a teacher or head teacher at school in the past month[43], urban children reporting slightly higher prevalence (36.9%, n=287) in comparison to rural children (30.4%, n=217). 20.6% (n=306) of child survey respondents state that another child in the household has been hurt by a teacher or head teacher in the past month. The level of self-reporting amongst child respondents is therefore higher compared to the reporting on 'other' children in the household. Only 15.8% (n=237) of adult survey respondents state knowledge of a child in their household being hurt by a teacher in the past month. Proportionally this is less than half the percentage of child respondents who experienced this. Possible interpretations for this discrepancy might include: adults are not fully aware of children's experiences at school; adults are unwilling to report to researchers that teachers hit children; and/or children younger than 14 experience less corporal punishment at school than children of the survey age (14-17) – although this would be contrary to findings regarding the most common age for corporal punishment in the home which tends to affect younger children more. Corporal punishment in schools was also mentioned by 19 of the children's FGDs (out of the 68 for which data was recorded on types of harm affecting children). It was also reported in some regions that for parents wanting to discipline their children for misdemeanours committed at home, they take them to teachers to be caned.

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[43] In theory only the head teacher has the authority to administer corporal punishment, but s/he can delegate this to another teacher to carry out.

When children disrespect their parents, they complain to the teachers so they can take disciplinary action. The parents want us to give the child corporal punishment or let them weed. At the end, the parents are happy but the children are not happy. (Head Teacher, rural primary school, E/R)

If they play stubborn at home, I report them to the teacher for punishment and this deters them from doing bad things. (Woman, rural, A/R)

Frequency of physical punishment in school: Of the 504 child survey respondents who were physically hurt by a teacher in the past month, the majority (72.8%, n=367) state that, rather than happening on a regular basis, this depends on the child's behaviour. Proportionally slightly more boys than girls state this, and slightly more girls than boys state this happens once per week, every day or 'when the teacher feels like it'.

Implements used to administer physical punishment in school: The overwhelming majority of responses (92.0%, n=486 with a slight emphasis on girls) indicate that teachers use a stick or a cane to beat children at school. Other implements such as hands, fists, rulers, belts and blackboard dusters appear to be used far less frequently. This finding was corroborated by other field research findings.

According to child survey respondents, justifications for physical harm by teachers and head teachers at school vary but are mostly related to discipline and punishment. 80.9% (n=671) of responses from children who have experienced physical harm by a teacher or head teacher in the past month relate to punishment - for being late or absent, making mistakes or being disobedient etc. Hardly any children thought it was because the teacher gets angry. This might be because in theory corporal punishment has to be sanctioned by the head teacher leading to a delay in it being administered. This might reduce incidents of children being beaten 'in the heat of the moment' by frustrated or angry teachers (which is the

experience in some other countries). The FGDs also found that corporal punishment is by far the most common teacher response when a child does something wrong at school and the experiences of girls and boys are largely similar. According to FGDs, children are often caned for reasons over which they may have little or no control such as lateness, absenteeism or being tired in class (mostly due to parental demands on the child's time to undertake household or agricultural work), or academic performance, including not understanding what is being taught and not being able to answer a question, not doing homework, or making mistakes. Several school children interviewed in FGDs mention that they were caned at school with a few showing researchers recent cane stroke marks on their arms.

[After working in the market] *we get to school tired and late and end up dozing in class, for which we are beaten. We feel embarrassed about being called out for dozing and asked to repeat what was said; this discourages us to go to school. (Boys and girls aged 7-10 and 13-17, urban, BA/R)*

For child survey respondents who experienced physical harm by a teacher or head teacher at school in the past month, the majority of reactions to this are negative. 82.5% (n=561) of their reported feelings are negative and 12.1% (n=82) are neutral. Although the differences are not huge, proportionally more girls than boys state feeling pain, scared, helpless, 'I deserved it' and 'I didn't deserve it'. More boys than girls report feeling sad, 'it didn't bother me' and 'I'm used to it'. This might reflect the fact that girls in many cultures talk more openly about their feelings whereas boys are socialised to 'put a brave face on things'. Only 6.8% (n=46) of responses state 'I deserved it'. As with children's experiences at home, given that corporal punishment at school is intended as a form of discipline, it is apparent from these reactions that children do not appear to be 'learning' anything from it. This finding that corporal punishment is counter-productive to learning is supported by other research findings. For example, 7-10 year-old girls interviewed in the Ashanti Region say excessive corporal punishment makes them sad and likely to be absent from school. They describe in various ways the manner in which they are punished:

- *Caning plus asked to 'dua mako' (you bend and point the forefinger to the ground while you stretch one of your legs up and backward).*

- *Caning plus water poured on you leading to your peers teasing you.*

- *Using cane or ruler to hit the back of your out-stretched fingers or tips of your fingers.*

Exploitation of school children by their teachers for labour purposes was reported in a few regions, sometimes under the guise of punishment. The research indicates that this is usually carried out without justification and disregarding instructional time. Children mention fetching water in buckets to fill 'polytanks,' carrying stones and other building materials for construction, collecting 'pure water' sachets from the school grounds, weeding and cutting branches from the trees. Other forms of punishment mentioned by school children in FGDs include making them kneel down for prolonged periods under the sun with their hands raised up, and scrubbing toilets etc. In the Eastern Region, the head teachers and teachers interviewed said they routinely used corporal punishment for absenteeism and when students did not do their homework. Other forms of punishment they administer are very similar to the experiences reported directly by children: scrubbing the toilets, fetching water into the 'polytank' water tank, weeding and cutting branches from trees.

Physical harm by another child at school within the past month is reported by only 12.2% (n=352) of child and adult survey respondents overall. However, proportionally a lot more adults than children report this (6.7% of children, n=100, compared to 18.2% of adults, n=252). This might be linked to the age of children: child respondents are aged 14-17 whereas adult respondents are replying on behalf of any age of school-going children within their households. In other words, peer physical bullying might possibly be more prevalent amongst younger children. Slightly more boys than girls report experiencing physical bullying by other children at school. This data refers only to physical bullying. It is likely that the extent of verbal bullying is higher, as indicated by the World Health Organisation (WHO) Global School-based Student Health Survey (GSHS), based on surveys conducted in 66 developing countries between 2003 and 2011. For Ghana, the GSHS dataset shows 57% of school-aged girls of a similar age range (aged 13-17 years) reporting being subjected to verbal or physical bullying over the previous 30 days[44] .

Frequency of physical bullying at school: Of the 100 child survey respondents who did experience physical bullying at school

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44   WHO GSHS datasets available: http://www.who.int/chp/gshs/datasets/en/ [accessed 26 August 2014].

in the past month, it does not seem to have happened very regularly. Only 8.0% (n=8) state it happened daily, weekly or even fortnightly (proportionally more boys than girls). 22.0% (n=22) state it happened once per month. The majority state it 'depends on what I did' (57.0%, n=57) or 'don't know' (13.0%, n=13 – more girls than boys). Bullying was only mentioned by five of the FGDs with children out of a total of 68 children's FGDs (one group in the Central Region and four in the Northern Region).

When we are in school and a colleague threatens to beat us, we report to the teacher so that he will warn him to stop beating us. (Boys aged 13-17, rural, N/R)

At school we report those children bullying us to our teachers and they are punished. (Girls aged 7-10, rural and urban, N/R)

In the Central Region, some of the KIIs mention excessive bullying in boarding schools.

4.3 Emotional violence, abuse and neglect

Summary

- **Children's experience of violence** is rarely segregated into distinct categories of 'physical', 'emotional' or 'sexual' harm. All types of violence result in often significant and lasting emotional harm.

- **Children report verbal, emotional and psychological harm** from parents, teachers and other adults in and around the community and many said that they dread this type of abuse more than physical violence.

- **Children's reactions** to verbal abuse are overwhelmingly negative, suggesting that they are not learning anything from this. Excessive insults cause emotional and psychological problems in children, making them passive, reserved and withdrawn.

- **Extent:** One third of child and adult survey respondents indicate that verbal humiliation took place at home within the past month, more than twice the rate compared to verbal humiliation by teachers at school. According to the 2011 MICS report nearly 9 out of 10 children (89%) had experienced some form of psychological aggression. According to WHO research, 57% of school-aged girls aged 13-17 years report being subjected to verbal or physical bullying in the previous month.

- **Three of the ten regions** (Upper West, Eastern and Greater Accra) report above average levels of verbal humiliation both at home and at school.

- **Neglect and lack of parental supervision,** often linked to poverty is cited as a cause of harm to children in all regions of the country.

- **Parents, guardians and teachers usually react positively** when children do something right at home or at school.

4.3.1 Attitudes in general

Children's experience of violence is rarely segregated into distinct categories of 'physical', 'emotional' or 'sexual' harm. All types of violence result in often significant and lasting emotional harm, as seen in the section above relating to children's negative emotional reactions to corporal punishment at home and in school. Almost all children participating in the qualitative research expressed fear and anxiety about the violence they experienced or expected to experience in their lives as children. However, in addition to the emotional impact of physical and sexual violence, this section examines the extent and experience of direct emotional harm to children in different settings.

Child participants in FGDs report verbal, emotional and psychological harm from parents, teachers and other adults in the

community. Many said that they dread this type of abuse more than physical violence. Verbal harm was reported more in Brong Ahafo and Greater Accra than in other regions. In the Greater Accra Region children named insults as putting them in harm's way and in Brong Ahafo urban girls aged 13-17 and men and women mentioned harm from insults. In the Upper East and Greater Accra Regions, it was also noted that verbal abuse of children by adults with the use of derogatory words, remarks or comments reduces their confidence and self-esteem.

My mother said I am eating her food for nothing because I have not performed well in the exams. She said my younger brother is better than me and because of that he does not respect me in the house. This makes me worried and always thinking. [45] (Girl, aged 10, UE/R)

These findings are consistent with those of other research such as the 2011 MICS report[46] which classifies this type of abuse as psychological aggression and reports that nearly 9 out of 10 children (89%), in their survey, had experienced some form of it.

Excessive insults were seen in the research to cause emotional and psychological problems in children, making them passive, reserved and withdrawn. Emotional harm was reported in FGDs in 8 out of 10 regions. Groups who are particularly vulnerable are said to be children in foster care, girls who have been sexually abused and children with disabilities. For example, it was noted in the Central Region that children with learning disabilities are not understood by teachers and are often verbally abused by parents and teachers. There was an example of a teacher in the Central Region referring to students with learning disabilities as 'witches'. (See also section 4.1.6).

Children with disabilities still suffer some level of discrimination and stigma in the communities. Some parents still hide disabled children in their rooms and other obscure corners of their homes. (Women, rural, UE/R)

Further detail is included in the sections below in relation to children's experiences at home, in school and in the community.

4.3.2 Experience at home

When children do something right at home, like doing what they're told or helping someone, their parents or guardians usually react positively. For example, according to child survey respondents their parent or guardian praises them verbally (51.7%, n=1091 responses), gives them a reward (25.6%, n=540 responses), is proud of them or tells others (8.3%, n=176 responses) or gives them physical affection like a hug, kiss or pat (3.3% n=69 responses). Together these positive reactions account for 88.9% (n=1876) of all responses.

Only 4.7% (n=99) of responses indicate that parents or guardians do 'nothing' to reward good behaviour.

One third of child and adult survey respondents indicate that verbal humiliation took place at home within the past month,

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[45] The expression 'always thinking' is indicative of depression in this context.

[46] GOG, GSS et al, Ghana Multiple Indicator Cluster Survey 2011, Final Report, 2011. [Insert page reference].

more than twice the rate compared to verbal humiliation by teachers at school: When child survey respondents do something wrong at home, like being lazy or naughty, the most common parental reaction is yelling or getting angry which accounts for 25.3% (n=594) of total responses. This is even though 'positive' techniques were identified as being the best ways to discipline children (see section 4.2.1). 'Humiliation' is the third most common response (after physical punishment), accounting for a further 16.5% (n=387) of responses. Depending on the nature of parents 'yelling or getting angry', and whether this is humiliating or otherwise abusive, this might indicate that up to 41.8%

(n=981) of responses in total refer to emotional harm. If, for example, only half of the 'yelling or getting angry' is abusive then, combined with 'humiliation' this would account for nearly 30% of responses referring to emotional harm. This is closer to the 33.0% (n=984) of child and adult survey respondents who report actual verbal humiliation by an adult at home within the past month. Girls and boys have similar results to each other, with only a very slight emphasis on girls. See chart below. The extent of verbal humiliation by an adult at home is more than twice the rate compared to verbal humiliation by teachers at school which is reported by only 13.8% (n=414) of child and adult respondents
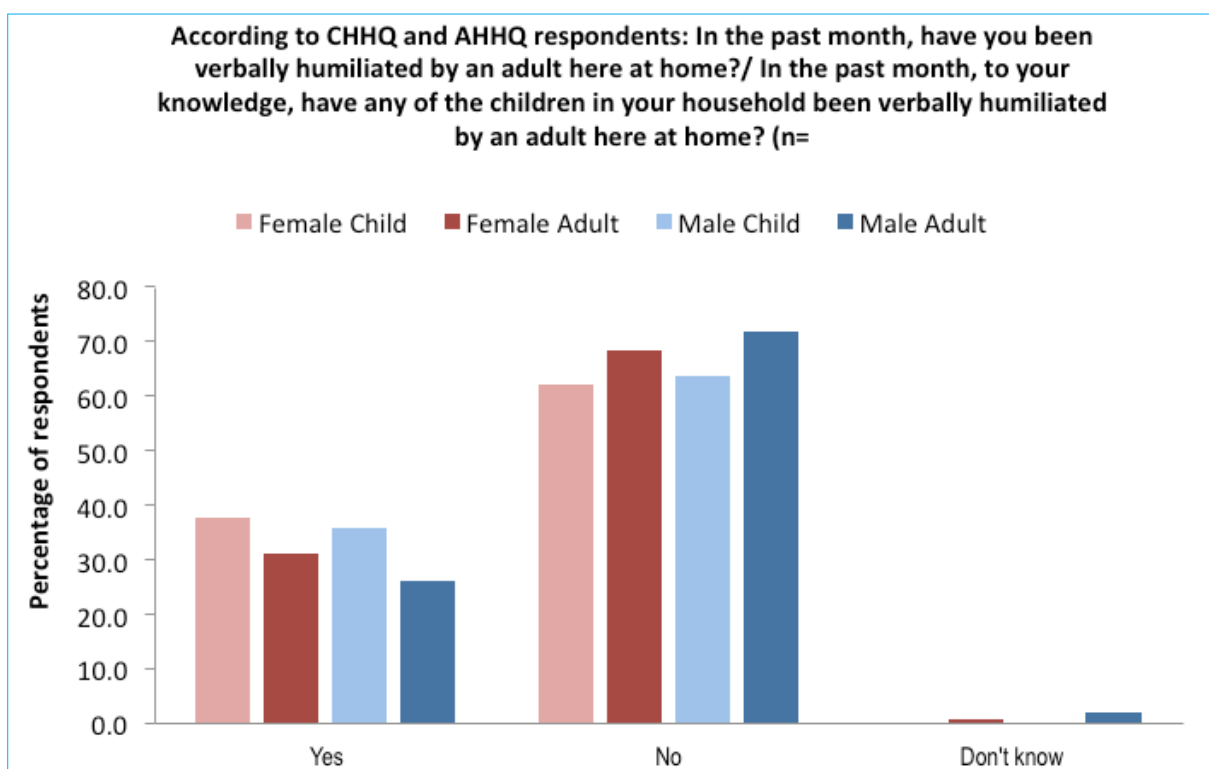
A comparison by region, based on two key household survey questions, shows that five of the ten regions (Upper West, Eastern, Volta, Greater Accra and Ashanti) report above average levels of verbal humiliation at home. The regions reporting the least levels of verbal humiliation at home were Upper East followed by Western, Central, Brong Ahafo and Northern, all of which were reported below

average levels. See chart below for details. No clear trends were noted for these two key questions based on household income or respondents' education level, whereas according to child respondents, verbal humiliation at home is slightly more common in urban areas (38.6% n=298 respondents) in comparison to rural areas (34.9% n=249 respondents).

By region: % child and adult survey respondents *per region* who report verbal insults / humiliation by an adult at home in the past month (out of approx. 755 girls, 745 boys, 921 women, 579 men)

■ % adults reporting a child in the household being verbally insulted at home in past month

■ % children reporting being verbally humilated at home in past month

Region	% adults	% children
Western	19.3	29.3
Central	29.6	29.6
Greater Accra	32.9	42.7
Volta	39.3	38.5
Eastern	29.7	48.2
Ashanti	28.1	38.6
Brong Ahafo	32.6	27.6
Northern	27.3	34.8
Upper East	10.0	25.0
Upper West	35.6	44.4
Total average	29.1	36.8

The issue of neglect by mothers and fathers or parental irresponsibility was raised by at least one FGD in all regions except for Brong Ahafo and this was often linked to poverty and parents' inability to provide for their children. Similarly, a number of groups also mentioned lack of parental supervision as being a cause of harm to children, which is often linked to children being exposed to unsafe objects, activities or places. In fact, access or exposure to unsafe places or activities is the most frequently mentioned cause of harm to children in FGDs in 5 out of the 10 regions. The types of activities cited in relation to lack of parental supervision include many child labour activities such as fishing, illegal mining, carrying heavy loads, accidents and injuries incurred whilst hawking on the streets, collecting firewood, fetching water, undertaking agricultural work or preparing food and cooking in the home. See section 4.5.4 for more detail on child labour. Examples were also given of children being asked to run errands to bars or gambling dens, and attending funerals unsupervised, where boys and girls are exposed to alcohol and girls in particular are at risk from the unwanted sexual attentions of older men.

One of the main things that happens at these funerals and wake keepings is casual sex which leads to teenage pregnancy. (Unit Committee member, rural, E/R)

The dam in our community is far away and sometimes we have to travel this long distance to fetch water and one can easily fall into the water. Once I went to the dam to fetch water and I fell inside but I was lucky that it was not deep at that point and I was able to come out. (Boys aged 13-17, rural, N/R)

4.3.3 Experience in school

When children do something right at school, like getting an answer right or doing their homework well, their teachers usually react positively. According to child survey respondents, positive reactions from teachers such as verbal praise, rewards, being proud, physical affection and telling others about the child account for 84.6% (n=1726) of all responses. Only 3.0% (n=61) of responses indicated that teachers do 'nothing' to reward good behaviour.

Verbal humiliation by teachers does not seem particularly common amongst the 14-

17 year-old respondents enrolled in school. As seen previously in section 4.2.4, when child survey respondents do something wrong at school, like getting an answer wrong or not doing their homework, the most common reaction is physical abuse: teachers yelling, getting angry and humiliating children accounts for only 13.7% (n=279) of responses. Furthermore, verbal humiliation by a teacher at school within the past month is reported by only 13.8% (n=414) of child and adult survey respondents overall. However, proportionally more children than adults report this. There is no particular gender difference in these findings, whereas according to child respondents, verbal humiliation at school seems to be slightly more common in urban areas (21.6% n=167 respondents) than rural areas (17.7% n=127 respondents). Verbal abuse by teachers at school is mentioned only infrequently in other research findings such as FGDs. A comparison by region, based on two key household survey questions, **shows that four of the ten regions (Northern, Eastern, Upper West and Greater Accra) report above average levels of verbal humiliation by teachers at school.** The regions reporting the least levels of verbal humiliation at school were Upper East followed by Brong Ahafo, Volta, Western, Central and Ashanti, all of which were reported below average levels. See chart below for details.

By region: % child and adult survey respondents who report verbal insults / humiliation a teacher at school in the past month (out of approx. 755 girls, 745 boys, 921 women, 579 men)

- % adults reporting a child in the household being verbally insulted by a teacher at school in past month
- % children reporting being verbally humilated by a teacher at school in past month
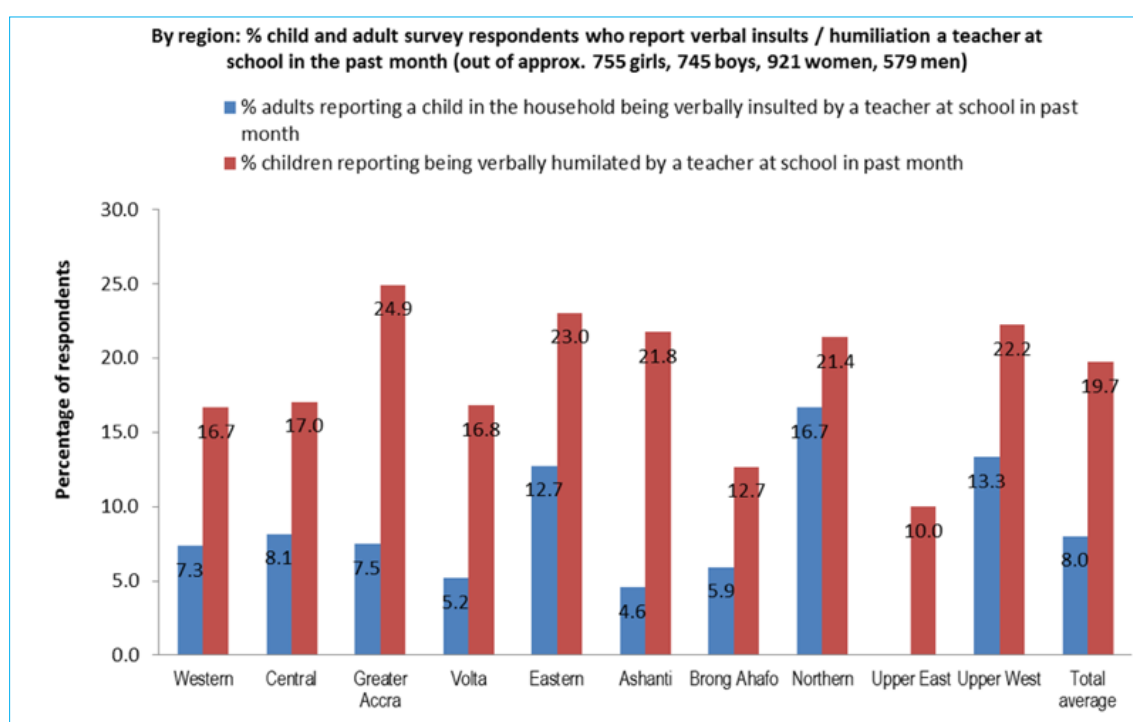
Children do not appear to be 'learning' anything from verbal abuse. Nearly all of children's reactions to verbal humiliation, whether at home or at school, are negative, accounting for 87.0% (n=913) of responses from those who have experienced it in the last month. This includes feeling sad, upset, embarrassed, helpless, scared, angry, uncomfortable and 'I didn't deserve it'. Only 2.3% (n=24) of responses state 'I deserved it'. In Greater Accra Region, all the children's FGDs say they dislike verbal insults more than being caned because the pain of the cane does not last like the loss of self-esteem, which, they say, "disturbs their mood for longer hours." As with corporal punishment, if verbal humiliation is intended as a form of discipline, either at home or at school, it is apparent from these reactions that children do not appear to be 'learning' anything from the experience, a finding that is backed up by other global research. Notable is a traditional practice among the Dangme people in the Greater Accra Region which emerged in the

qualitative research. The practice, rooted in spiritual beliefs, involves naming children with derogatory or offensive words in order to protect them from being taken away by spirits. The practice of giving children these 'ahama' names is now discouraged because they attract teasing at school and during play, and at times are considered as curses.

Verbal bullying by peers at school: Although the research did not focus on this topic, as already stated in section 4.2.4, according to the WHO GSHS, 57% of school-aged girls aged 13-17 years report being subjected to verbal or physical bullying over the previous 30 days[47].

4.4 Sexual abuse and exploitation

Summary

- Transactional sex and children watching pornographic images are considered by survey respondents to be the most prevalent forms of sexual abuse in their communities and those which they are most concerned about. Six of the ten regions (Volta, Upper West, Upper East, Ashanti, Western and Brong Ahafo) featured above average reporting of transactional sex.

- **Extent**: 5.8% (n=259) of child and adult survey responses indicate incidents of 'inappropriate touching' in the past month. 11.0% (n=83) of girls compared to 5.9% (n=44) of boys report inappropriate touching of themselves in the past month. According to the 2008 DHS, 16.5% of girls aged 15-19 had ever experienced sexual violence and 14.9% of women aged 15-49 who have ever had sex said their first sexual experience was forced against their will. Incidents of sexual abuse are commonly under-reported.

- **The inability of families to provide for their children** is said to be directly related to cases of sexual abuse and defilement, especially girls.

- **Sexual abuse is most commonly perpetrated by people that the victim/survivor knows,** and happens more frequently in the victim's/survivor's home and neighbourhood than in any other place. Inappropriate touching by adults far outweighs that by other children.

- **Sexual abuse** by teachers was noted as a particular concern affecting girls.

4.4.1 Perceived extent and level of concern

The household survey explored the perceived extent of six different forms of sexual abuse and exploitation: children engaging in transactional sex, children watching pornographic images, commercial sexual exploitation of children, children being trafficked into the sex trade, online sexual abuse and exploitation, and sexual abuse and exploitation of children through images. It also identified the level of concern attached to these different forms of sexual abuse.

Children engaging in transactional sex (i.e. having sex for money or other things they need like shelter, food and clothes):

This was said to 'happen all the time' or 'sometimes happen' in the community by 54.9%, (n=1645) of adult and child survey respondents. Proportionally more women than men and more girls than boys state this happens 'all the time' whereas more men than women and more boys than girls state this 'never happens'. A higher percentage of child respondents from urban settings report transactional sex as happening 'all the time' (29.9%, n=233 respondents) compared to child respondents from rural settings (21.8%, n=157 respondents). The same trend can be seen from among adult respondents (30.3%, n=230 adult urban respondents compared to 19.8%, n=147 adult rural respondents).Of the six situations of sexual abuse and exploitation

included in this section, this one was ranked the highest in terms of which situation respondents are most concerned about. A number of participants in FGDs and KIIs suggested that young girls voluntarily sleep with older men in order to get money or other basic necessities, whereas others said that they are lured or exploited by older men who offer them the items they need. The following differing views from groups in the Northern Region are typical of those expressed in many regions.

Girls now decide to undertake family planning and therefore engage in sexual acts with older men knowing that they will not become pregnant. The family planning used to be for adults but now all children are educated on the use of family planning and so they don't fear any pregnancy. (Men over 50, urban, N/R)

Teenage girls are normally sexually abused in schools and at home by their peers or older adults. They become pregnant and subsequently drop out of school and some of those who try getting rid of the pregnancy sometimes die in the process. (Women over 50, rural, N/R)

Six of the ten regions (Volta, Upper West, Upper East, Ashanti, Western and Brong Ahafo) featured above average reporting of this issue. The regions reporting the least levels were Northern followed by Eastern, Greater Accra and Central, all of which reported below average levels.

See chart below for details.

By region: % child and adult respondents who state that children having sex for money or other things they need happens 'all the time' or 'sometimes' in their community (out of approx. 755 girls, 745 boys, 921 women, 579 men)
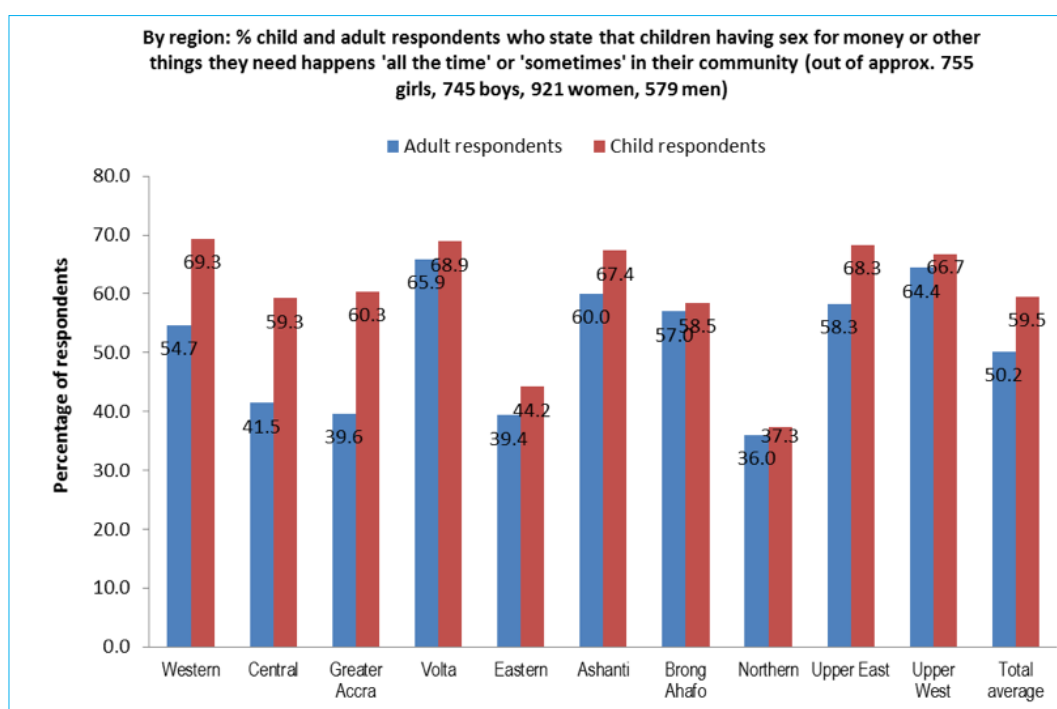
Children watching pornographic images: A relatively large percentage of adult and child survey respondents (50.0%, n=1494) state that this happens 'all the time' or 'sometimes' in their community. Proportionally more children than adults state this happens 'all the time' or 'sometimes' (particularly boys) whereas more adults than children state this 'rarely' or 'never happens' or 'don't know'. It may be that boys have more personal experience of this situation. Of the six situations of sexual abuse and exploitation included in this section, this one was ranked second in terms of which situation respondents are most concerned about (after transactional sex). Also, FGD respondents all over the country complained bitterly about games centres. It was repeated from community to community and from region to region that as a result of their unregulated presence in the

Modernity has exposed the children to a lot of dangers. Children watching pornographic materials and violent films, especially on televisions and phones, makes them blatantly copy such behaviours and end up not respecting adults who then leave them to their fate. [In other words, because of children's disrespectful behaviour towards adults, they are allowed to do whatever they please without restrictions and regardless of the consequences]. (Chief Imam, urban, N/R)

Commercial sexual exploitation of children (CSEC) (i.e. children being forced by someone to have sex with someone else so that the 'first' person can take the money the child earns):

18.1% (n=542) of adult and child survey respondents state that this happens 'all the time' or 'sometimes' in their community (proportionally more girls). The majority (61.5%, n=1843) state this 'never happens'. A higher percentage of child respondents from urban areas report CSEC as happening 'sometimes' or 'all the time' (24.4%, n=190) compared to child respondents in rural areas (13.9%, n=100). The same trend can be seen for adult respondents, where 53.5% (n=406) of adults in urban areas report it "never happens", compared to 72.1% (n=534) of adult respondents in rural areas. CSEC is reported proportionally more in the Upper West Region. 60% (n=27) of adult respondents in the Upper West Region and 56.8% (n=25) of child respondents in the same region report CSEC happening "all the time" or "sometimes", whereas in other regions the respective percentage is under 30. It is reported a happening 'all the time' or 'sometimes' by proportionally more Grusi respondents than those from other ethnic groups (58.3% of Grusi child respondents (n=14) and 48.2% of Grusi adult respondents (n=14) compared to less than 30% of respondents from other ethnic groups). However, as the sample numbers are very small, these trends should be interpreted very carefully.

Of the six situations of sexual abuse and exploitation included in this section, this one

communities, children are becoming gaming addicts, losing interest in their studies, playing truant from school, learning to gamble, stealing money for both gaming and gambling and getting involved in fights - mostly due to disagreements whilst gambling. The watching of violent and pornographic films by children is another problem FGD respondents associate with these games centres. Children also access pornographic films and images on mobile phones. In the Central and Greater Accra Regions, children in both rural and urban areas, especially boys, said that they frequented internet cafes, movie centres and game centres, especially at night. They stated that they often watch pornographic and action movies and play video games in which violence is glorified. Community members feel that exposure to such films predisposes children to promiscuity and violence and makes them disrespectful.

was ranked third in terms of which situation respondents are most concerned about. A 2011 study by the Ark Foundation on CSEC in Accra notes that: "Generally, the majority (80%) of the girls interviewed were in commercial sex work as a result of economic hardship combined with the lack of parental care and control…."[48] In the present study, it was mainly in urban communities of the Central and Greater Accra Regions that CSEC is reported. In the urban site in the Central Region, a popular tourist resort, the research team heard several accounts from adult FGD participants of CSEC going on in the town, including claims that children as young as six are involved. In the urban community, Greater Accra Region, it was reported that there are two forms of CSEC practiced: adults engaging children, and children engaging younger children in the business. A recent case was cited of a 17-year-old boy who brought a 15-year-old girl from the Anglo area in the Volta Region to the urban community in Greater Accra to engage her in CSEC as a pretext for letting her trade in oranges. The adults suspected to be engaging children in this business carry out their operations in secret. The DSWO told researchers that even the Municipal Assembly shies away from the issue with the excuse that it is 'beyond them' and they are not well enough resourced to tackle it. The provision of sex by young girls in exchange for money at informal mining sites is also highlighted by some respondents. In a similar vein, some girls working as head porters ('kayayee') in the large city markets are reported to supplement their income through CSEC

Trafficking of children for sexual purposes (i.e. children being tricked into leaving home, thinking they will get a good job or education, but instead being forced to have sex for money): 18.3% (n=547) of respondents state that this happens 'all the time' or 'sometimes' in their community. The majority (59.6%, n=1785) state this 'never happens'. This was ranked fourth in terms of which of the six situation respondents are most concerned about.

Online sexual abuse of children (i.e. children being tricked on the Internet into doing something sexual, or doing something sexual through the Internet that they might later regret): 15.1% (n=450) of respondents state that this happens 'all the time' or 'sometimes' in their community. The majority (62.8%, n=1875) state this 'never happens'. This received the highest percentage of 'don't know' responses of any of the six situations which might reflect a general unfamiliarity with the Internet and/or online abuse and exploitation. This was ranked fifth in terms of which of the six situation respondents are most concerned about.

Sexual abuse and exploitation of children through images (i.e. children being made to take part in sexual photos or videos): 13.6% (n=406) of respondents state that this happens 'all the time' or 'sometimes' in their community. The majority (68.2%, n=2038) state this 'never happens'. Proportionally more children than adults state this happens 'all the time', 'sometimes' or 'rarely' whereas more adults than children state this 'never happens' or 'don't know'. This might indicate that children are more aware of these risks than adults. Of all the six situations presented here, this received the highest percentage of responses for 'never happens'. This was ranked last in terms of which of the six situation respondents are most concerned about.

In summary, taking all respondents' answers together and comparing these total responses across all six situations, there is a clear differentiation between the two situations which are seen to be more prevalent in respondents' communities (transactional sex and children watching pornographic images) and the other situations which are seen to be much less relevant and therefore to elicit much less concern.

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[48] Draft report on survey conducted in Accra on the exploitation of girls in commercial sex work in Ghana. The Ark Foundation, August 2011, p.4.

See chart below.

CHHQ and AHHQ respondents: how common are these situations in your community - comparison of totals

Legend: ■ Happens all the time ■ Happens sometimes ■ Rarely happens ■ Never happens ■ Don't know

Y-axis: Percentage of respondents (0.0 to 80.0)

Categories: Children having sex for money or other things they need (like shelter, food and clothes); Children watching pornographic images; Children being forced by someone to have sex with someone else (so that the 'first' person can take the money the child earns); Children being tricked into leaving home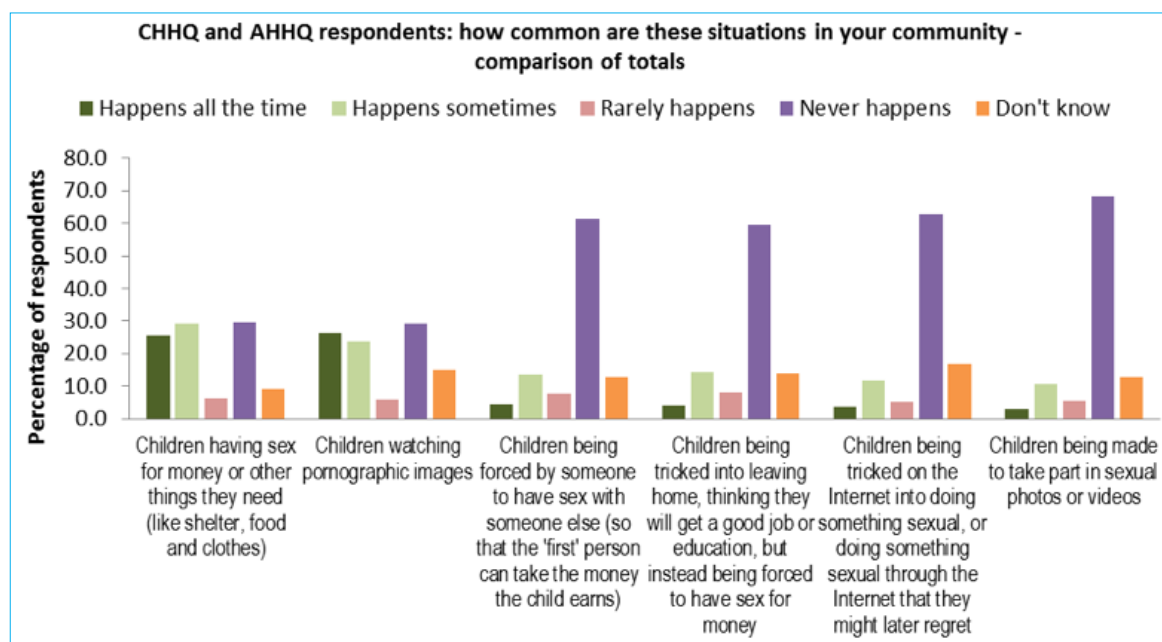, thinking they will get a good job or education, but instead being forced to have sex for money; Children being tricked on the Internet into doing something sexual, or doing something sexual through the Internet that they might later regret; Children being made to take part in sexual photos or videos

4.4.2 Actual extent and experience

As with all surveys of this kind, respondents are highly likely to under-report incidences of sexual abuse. The data here should therefore be considered in this light.

In total 5.8% (n=259) of child and adult survey responses indicate incidents of 'inappropriate touching' in the past month (i.e. being touched in a way that made the child feel uncomfortable). This includes child respondents talking about their own experience and that of other children in their household, and adult respondents referring to the experience of any children in their household. To give an idea of how this compares to other forms of abuse, this low percentage of 5.8% compares to 33.0% for verbal humiliation by an adult at home, 23.4% for corporal punishment by teachers, 19.4% for physical harm by adults at home, 13.8% for verbal humiliation at school, 12.2% for physical bullying by other children at school, and 6.3% for physical harm by another adult in the community. However, as noted above, it should be remembered that questions around sexual issues are always subject to under-reporting, and this statistic refers only to incidents in the past month. To put this in context, according to the 2008 DHS, 16.5% of girls aged 15-19 had ever experienced sexual violence (i.e. not just in the past month) and 14.9% of women aged 15-49 who have ever had sex said their first sexual experience was forced against their will.[49]

[49] GDHS, 2008, pp. 307 and 305 respectively.

CHHQ: In the past month, have you ['self'] (or any other child in this household ['other']) been touched in a way that made you/them feel uncomfortable? AHHQ: In the past month, to your knowledge, have any of the children in your house been touched in a way that made them feel uncomfortable?														
	Girls-self		Boys-self		Girls-other		Boys-other		Women		Men		Total	
Number (#) and percentage (%) of respondents	#	%	#	%	#	%	#	%	#	%	#	%	#	%
No other children in household	0	0.0	0	0.0	51	6.8	67	9.0	0	0.0	0	0.0	118	2.6
Yes	83	11.0	44	5.9	54	7.2	38	5.1	21	2.3	19	3.3	259	5.8
No	670	88.9	698	93.7	605	80.2	601	80.9	886	96.2	545	94.1	4005	89.1
Don't know	1	0.1	3	0.4	44	5.8	37	5.0	14	1.5	15	2.6	114	2.5
TOTAL	754	100.0	745	100.0	754	100.0	743	100.0	921	100.0	579	100.0	4496	100.0

Proportionally more children than adults and more girls than boys report incidents, involving both themselves and other children in the household: 11.0% (n=83) of girls compared to 5.9% (n=44) of boys report inappropriate touching of themselves in the past month; 7.2% (n=54) of girls compared to 5.1% (n=38) of boys report inappropriate touching of another child in the household; 2.3% (n=21) of women and 3.3% (n=19) of men report inappropriate touching of a child in the household. Some possible interpretations for this are that: adults may be less aware of what is happening to children in their households; adult respondents might themselves be perpetrators and would therefore not report incidents; and children may not disclose such incidents to adult caregivers (they may disclose more to other female children in the household). Consistent with findings on vulnerability in general (section 4.1.2), girls experience more inappropriate touching than boys.

Cases of sexual abuse and defilement were said to be directly related to the inability of families to provide for their children, most especially girls. Girls are primarily the victims/survivors of sexual abuse and defilement, with cases involving boys mentioned rarely by research participants. Sexual abuse and exploitation of girls, including CSEC (referred to locally as 'prostitution'), was raised as a concern in all ten regions. In FGDs overall it was the fourth most mentioned form of harm to children across all regions, constituting 7.0% of total mentions of harm (total n=420), after access and exposure to unsafe places or activities (16.0%), child labour (15.0%) and corporal punishment (14.0%). Adults mentioned it more than children, with 79.0% of total mentions attributed to adult FGDs. It was particularly mentioned in FGDs in the three northern regions. It was seen as even more significant by respondents in KIIs where it constituted 15.0% of total mentions (total n=54), second only to child labour (16.0% of mentions).

Sexual abuse of both boys and girls is common on illegal mining (galamsey) sites in this area, exposing them to sexually transmitted infections and other sicknesses. (DOVVSU District Coordinator, rural, C/R)

School environments cannot completely be considered a safe place for girls since they may be vulnerable to sexual abuse by teachers. In a senior high school a teacher recently defiled a

girl. The case was reported to the police and an investigation is currently ongoing. (Municipal Social Welfare Officer, UW/R

Inappropriate touching by adults far outweighs that by other children. Of the reported incidents in the household survey, inappropriate touching by adults in the community, at home or at school accounts for 60.1% (n=167) of responses relating to who did the touching and where it took place. Inappropriate touching by other children at school, in the community or at home accounts for 36.7% (n=102) of responses. The fact that 259 respondents reported incidents, yet there are 278 responses given, indicates that at least 19 children involved in incidents experienced inappropriate touching by more than one perpetrator, or in more than one location. Proportionally, when talking about their own personal experience, girls reported more incidents than boys perpetrated by adults (in the community, at home and at school). Boys reported more incidents than girls perpetrated by other children (at school, in the community and at home). One possible interpretation is that, whereas girls are more likely to be inappropriately touched by adults, boys experience proportionally more 'sexual teasing' by peers.

Sexual abuse is most commonly perpetrated in communities by people that the victim/survivor knows, and happens more frequently in the victim's/survivor's home and neighbourhood than in any other place. The majority of respondents in FGDs and KIIs who talked about the occurrence of sexual abuse during the qualitative research suggest that Perpetrators are usually people who are either a part of, or are known to, the family of the victim/survivor and may even live in the same house. There were accounts of fathers, step-fathers, uncles and co-tenants being responsible for sexual abuse of girls at home, although reports of biological fathers sexually abusing their children were very rare.

Some of these accounts are included in the box below.

Examples from different regions of cases of sexual abuse and harassment where the alleged perpetrator is known to the victim/survivor

Brong Ahafo Region: A 26-year-old coach from an urban area was reported for having persistently sodomised a 14 yea- old boy in his football team (the child is currently in hospital and is paralysed below the waist). The perpetrator is alleged to have inflicted similar abuse on other members of the team. Several boys who were members of this team lived with the coach in his house.

Central Region: In the rural community defilement and rape which results in teenage pregnancy is said to be on the rise. 5 years ago there were 3 to 4 cases per year whereas, in the past 2 years this has increased to between 8 and 10 cases per year. One example is given of a man who defiled his sister-in-law's 5-year-old daughter. Other cases are mentioned of family members who sexually abuse children. The 13 to 17-year-old boys in the rural FGDs mention that sometimes when their female peers are in need of food or money or other basic needs, family members such as uncles sexually abuse them before assisting them.

Eastern Region: A Director of Social Welfare in an urban location estimates that 12 child sexual abuse cases were reported to him in 2012. The DOVVSU personnel interviewed speaks of a case whereby a 17-year-old boy in senior high school defiled four young children. They lived in the same house and the offender's father and the victims'/survivors' grandparents are siblings.

Western Region: A young girl living with her uncle and his wife report that she was sexually abused by her uncle several times. When his wife finally found out, the girl was taken back to live with her mother.

Northern Region: The girls aged 13-17 in the urban FGD say sexual abuse is common in the area and older women in the same location say teenage girls are sexually abused in schools and at home by their peers or older adults. Girls also speak of harassment by boys and teachers for refusing to accept their proposals or to have sex with them.

There were also reports in seven of the ten regions that indicate sexual abuse of children by teachers at school. In the Northern, Ashanti, Upper West, Central, Greater Accra, Volta and Western Regions the researchers were told of instances of teachers sexually abusing, and in some cases, impregnating female students. In the Upper West Region, a cross-section of respondents from both the KIIs and FGDs highlighted that in most schools in the communities, school teachers usually instruct girls to fetch water for them, cook their food, wash their clothes and sweep their rooms. The girls comply with these instructions out of respect for their teachers. They say that these kinds of errands often result in the girls being defiled by teachers and they gave examples of girls who became pregnant as a result. It was reported by men aged 25-40 in the Western Region rural site that girls' risk of being sexually abused by teachers is increased during exam periods[50] when candidates have to travel to a nearby community where the examination centre is located and stay there for the 5-day duration of their exams. The girls have to share rooms and it becomes easy for the young male teachers, who are there to play a supervisory role, to sexually abuse the girls:

Some of the teachers come to pick girls, sleep with them and then take them back. There is nothing that the parents can do because they are not there with them at that point. (Men aged 25-40, rural, W/R)

The poor quality of teachers and the small age difference between young teachers and students was said by some to be a contributory factor to the occurrence of sexual abuse in schools (mentioned in the Ashanti and Western Region). In the Ashanti urban community, cases of child sexual abuse have been reported in private schools and this has been attributed to the quest for cheap labour by the owners of these schools. According to respondents, they employ staff to teach without conducting background checks:

They pick 'certain characters' to teach without background checks; most of these are untrained and have no experience in handling children. (Assistant Superintendent of Police, urban site, A/R)

[50] This is noted particularly for the Basic Education Certificate Examination (BECE) which is a nationwide examination for final year Junior High School students and is required for entry into Senior High School.

4.5 Specific child protection concerns

Summary

- **Child marriage** is illegal in Ghana, but according to MICS (2011) the proportions of women aged 15-49 years married before the age of 15 and 18 are respectively 6% and 27% (compared to only 1% of men aged 15-59 years married before age 15, and 5% before age 18). A significant proportion (although not a majority) of children and adults in the current research think that marriage under the age of 18, for both girls and boys (particularly girls), is acceptable. Approximately half (52.1%, n=1563) of survey respondents think that at least some children in their respective communities get married under the age of 18 (see chart below). Furthermore, of these respondents, 51.3% (n=801) think that at least some of these children get married under the age of 15. Child and adult survey respondents identified poverty and economic reasons as the major causes of child marriage under the age of 15.

- **FGM/C:** Only 3.6% (n=109) of child and adult survey respondents overall state that FGM/C occurs in their communities, consistent with data from other sources which indicates 4% of girls and women in Ghana aged 15 to 49 have undergone FGM/C. However, there are strong regional differences with much higher prevalence rates in the Upper West and Upper East Regions specifically (41% and 28% of women respectively according to 201 MICS data). FGM/C is difficult to research accurately due to the secrecy surrounding it, not least because it is against the law.[51] 26.2% (n=785) of survey respondents have heard someone speak out against FGM/C in the past year. The handling of FGM/C cases in the best interests of the child is very complex.

- **Trafficking**: Only 18.3% (n=547) of survey respondents state that trafficking of children for sexual purposes happens 'all the time' or 'sometimes' in their community and this was ranked relatively low in terms of situations that respondents are concerned about. In comparison, 29.2% (n=877) indicate that trafficking for child labour happens 'all the time' or 'sometimes'. Common activities include trafficking into the fishing industry, farming, working in local food establishments and domestic work. The majority, but certainly not all, of the survey respondents are aware of the risks relating to cross-border trafficking.

- **Child labour**: Child work is prevalent, particularly in agriculture. It is considered acceptable and integral to the socialisation of a child, particularly to equip them with life-long skills. However, various types of work encountered in the research are all classified by the ILO as the 'worst forms of child labour'. Both boys and girls work in the commercial and industrial, as well as agricultural sectors. Children are exposed to a large number of hazards, especially accidents and injuries but also hunger, exhaustion, neglect, illness, and verbal and physical abuse by caregivers and employers. Child labour disrupts children's education in numerous ways. Survey respondents consider child migration for labour 'usually not safe' or 'never safe' for both boys and girls.

- **Separation of children from biological parents**: About 20% of child survey respondents and 15% of children aged 0-17 living in the adult survey households are separated from both biological parents. 13.5% (n=203) of all adult respondents have biological children of their own under 18 who do not currently live with them. Over 90% of children separated from their biological parents are nonetheless living with extended family or those with whom they have kinship ties. Girls in the survey areas are proportionally more likely than boys to be living away from both their biological parents and other kin ties. Children are usually separated from parents for education and work. 90.0% (n=180) of adult survey respondents with children under 18 living away state that their children are safe there, based more on trust in the 'hosts' rather than direct feedback from the children themselves. However, in general children are perceived to be safer staying with their biological parents compared to other environments, even extended family placements. A substantial proportion of survey respondents think children separated from parents might 'usually' or 'never' be safe, even though this is a relatively common practice.

[51] All forms of FGM/C are illegal in Ghana under the Criminal Code Amendment Act of 2003 (ACT 646).
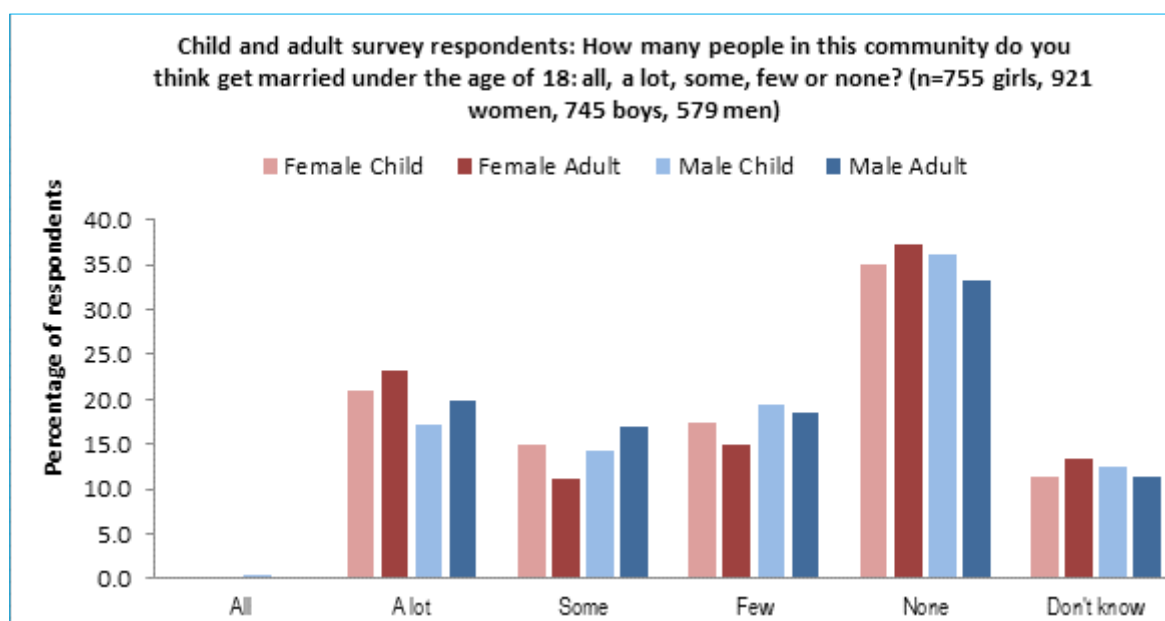
4.5.1 Child marriage

Child marriage is illegal in Ghana, where the 1992 Constitution and Children's Act states the legal age for marriage at 18 for both girls and boys. The MICS data (2011) show that the proportion of women aged 15-49 years married before the age of 15 and 18 are respectively 6% and 27%. Marriages before age 15 are higher in rural areas (8%) than in urban areas (4%). The regions where a woman is most likely to be married before age 15 are the Western and Volta Regions with about 8%. The two are closely followed by the Eastern and Brong Ahafo regions, with about 7%, each. The lowest proportion (3%) is recorded in Greater Accra. In contrast, for men aged 15-59 years, only 1% were married before age 15, and 5% before age 18.[52]

A significant proportion (although not a majority) of children and adults appear to think that marriage under the age of 18, for both girls and boys (particularly girls), is acceptable. 22.4% (n=673) of all adult and child survey respondents think it is acceptable for boys under 18 to get married compared to 31.2% (n=936) who think it is acceptable for girls under 18 to get married. Furthermore, 9.0% (n=270) of all adult and child respondents think it is acceptable for boys aged 15 and under to get married and 13.5% (n=406) think the same for girls. Across all respondent groups it is deemed more acceptable for girls than boys to get married under age 18 and under age 15. Proportionally more children than adults think that it is acceptable for both boys and girls under 18 to get married.

Approximately half (52.1%, n=1563) of survey respondents think that at least some children in their respective communities get married under the age of 18 (see chart below). Furthermore, of these respondents, 51.3% (n=801) think that at least some of these children get married under the age of 15. More adults were of this opinion than children. 11.7% (n=184) think that 'all' or 'a lot' of children get married under 15.

Child and adult survey respondents: How many people in this community do you think get married under the age of 18: all, a lot, some, few or none? (n=755 girls, 921 women, 745 boys, 579 men)

Child and adult survey respondents identified poverty and economic reasons as the major causes of child marriage under the age of 15: these account for 39.1% (n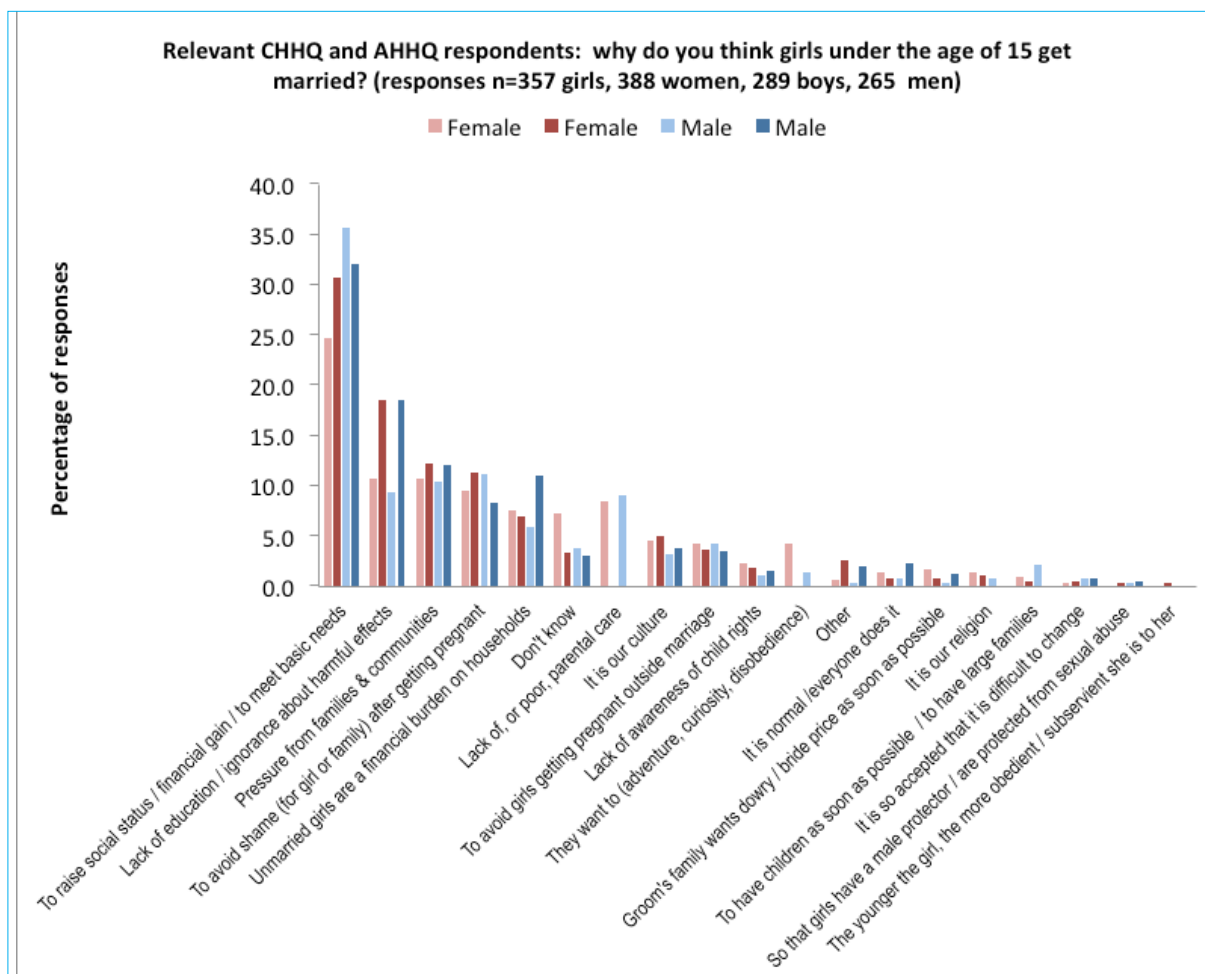=508) of responses and include – to raise social status; for financial gain; to meet basic needs of the individuals and their respective households; unmarried girls are a financial burden on households; and the groom's family wants dowry or bride price as

[52] GOG, GSS et al, Ghana Multiple Indicator Cluster Survey 2011, Final Report, 2011. [Insert page reference].

soon as possible. In total, lack of education, awareness and parental care represent 20.3% (n=264) of all responses. Cultural and religious reasons account for 18.1% (n=235) of all responses, for example: pressure from families and communities; it is our culture; it is normal /everyone does it; it is our religion; and it is so accepted that it is difficult to change. Reasons relating to pregnancy and sexual activity account for 15.1% (n=196) of responses, for example: to avoid shame (for girl or family) after getting pregnant; to avoid girls getting pregnant outside marriage; to have children as soon as possible / to have large families; and so that girls have a male protector / are protected from sexual abuse.

The detailed responses are included in the chart below.

Relevant CHHQ and AHHQ respondents: why do you think girls under the age of 15 get married? (responses n=357 girls, 388 women, 289 boys, 265 men)

In some areas FGD respondents mentioned child marriage as a child protection measure, for example in the Ashanti, Brong Ahafo and the three northern regions:

I gave my daughter into marriage at the age of 13 to prevent her from sleeping around with irresponsible men. It is also to get others (the future husband) to contribute in bringing up the child into a good woman. Some of the young girls don't have interest in education, so in order to stop them from engaging in reckless lifestyles, it is better to marry them off to men and be assured that they are in safe hands. (Man over 50, rural UE/R)
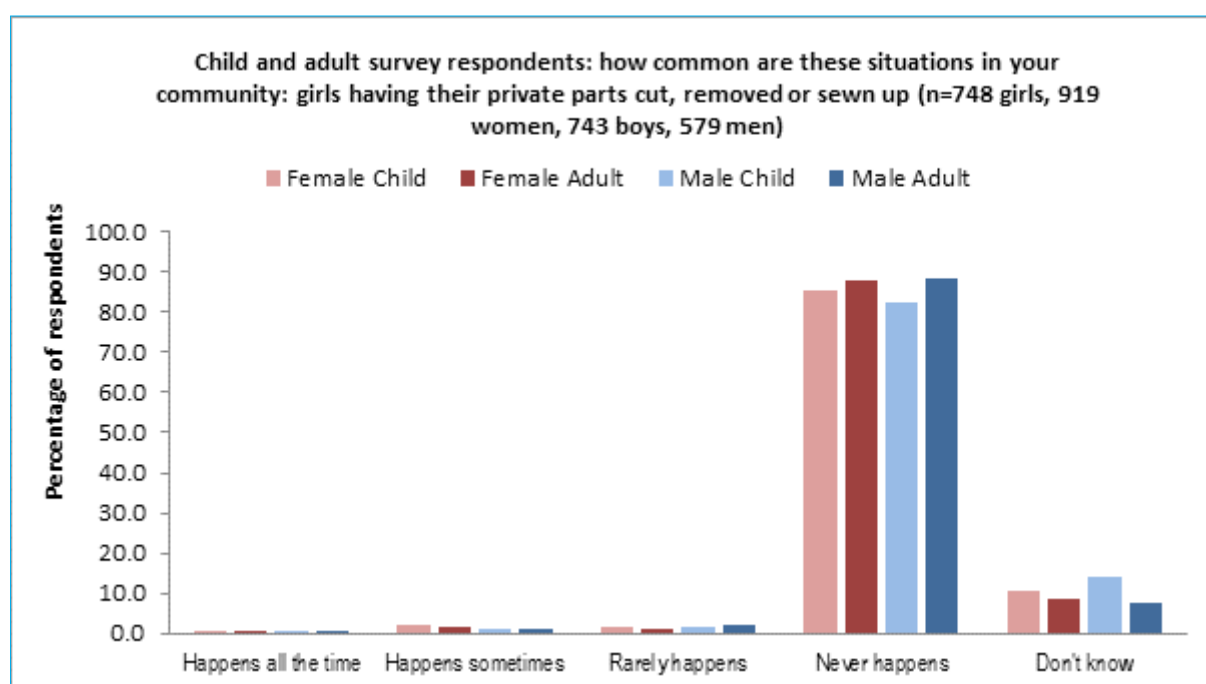
Girls between the ages of 13 and 17 are given for marriage when they become pregnant or when their parents, especially fathers, realise that they are in sexual relationships with boys. If marriage does not take place, a pregnant girl will still be sent to the family home of the man responsible for the pregnancy. (Midwife, urban, BA/R)

Most often the marrying of girls who become pregnant is reported to happen in the north and the girl can only return home if she leaves the child behind with the husband's family. Similarly, in the Ashanti Region, discussions with religious leaders and elders in the research communities indicates that in cases of teenage pregnancy, churches encourage the parties to come together to agree to marry the pregnant girl so that the conceived child can be cared for. However, the affected parties are often kept out of the negotiations and in some instances parents have received money and other inducements from the boy's family and gone ahead to arrange the marriage without consulting the girl. Police respondents and a magistrate in the Ashanti Region observed that the foundations of such marriages are weak and break within a few years, creating problems regarding childcare and maintenance. The magistrate reported that many cases of child maintenance and custody have come to his court because marriages are not properly contracted.

4.5.2 Female genital mutilation / cutting (FGM/C)

Only 3.6% (n=109) of child and adult survey respondents overall state that FGM/C occurs in their communities (taking 'all the time', 'sometimes' and 'rarely' responses together). The vast majority (86.0%, n=2572) state that it never happens. See chart below for details. This is consistent with the 2013 UNICEF FGM/C Report[53] which reports a low national prevalence rate: 4% of girls and women in Ghana aged 15 to 49 have undergone FGM/C[54].

Child and adult survey respondents: how common are these situations in your community: girls having their private parts cut, removed or sewn up (n=748 girls, 919 women, 743 boys, 579 men)

However, there are strong regional differences in prevalence rates of FGM/C. For example, the 2011 MICS confirms that in the Upper West and Upper East Regions specifically, where FGM/C is a traditional practice, about 41% and 28% of women respectively have had one form or another of FGM/C[55]. The MICS also reported FGM/C as being practiced by migrants from other West African countries and is thus encountered in the ghettos or 'zongos' of large towns where migrants are living. In the current research, a DOVVSU representative says that this practice still occurs in the Eastern Region among certain Zongo communities. A Chief from the region reports:

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[53] UNICEF, Female genital mutilation/cutting: A statistical overview and exploration of the dynamics of change, July 2013.
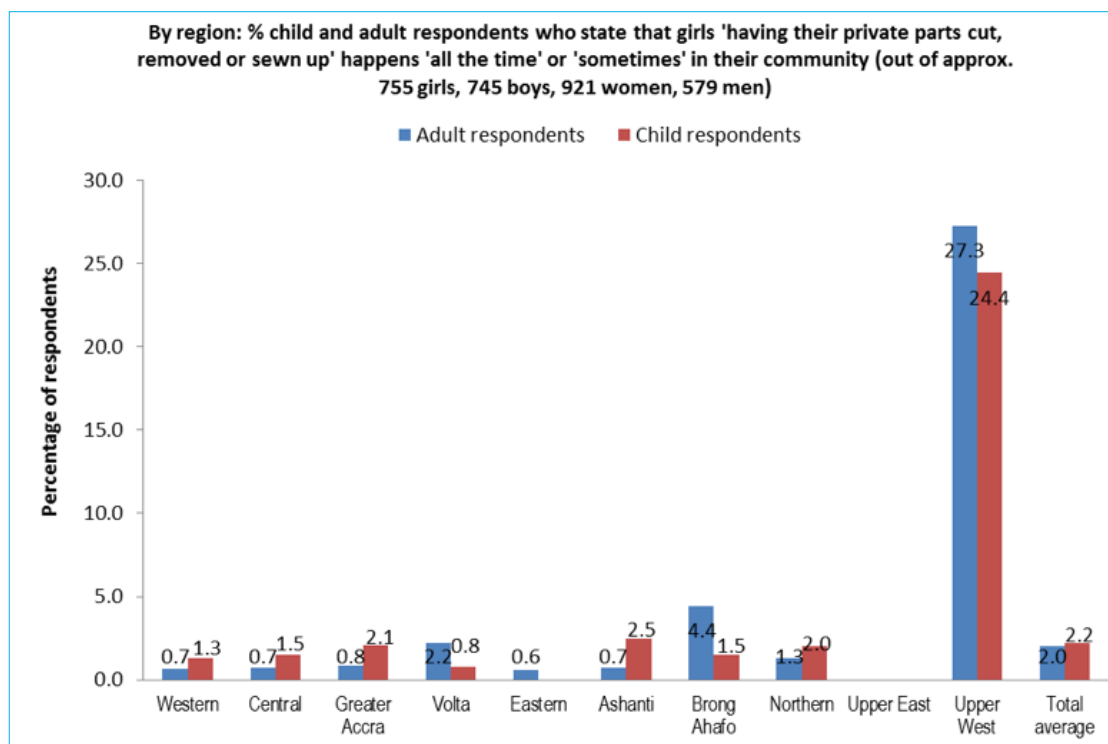[54] Sources: DHS, MICS and SHHS, 1997-2012, in Female genital mutilation/cutting: A statistical overview and exploration of the dynamics of change, UNICEF, July 2013.
[55] GOG, GSS et al, Ghana Multiple Indicator Cluster Survey 2011. [Insert page reference]

There are Islamic migrant communities in all eleven traditional areas of the Eastern Region. Members of these communities, commonly known as 'zongos,' have lived in the region for years and in some cases, for generations, but still practice their own rituals and traditions.

The chart below shows the regional breakdown of responses from the household survey and it is clear that the majority of respondents who report that it happens 'all the time' or 'sometimes' are from the Upper West Region, although interestingly none are from the Upper East Region. It is important to note, however, that the actual numbers of respondents here are very low: 23 respondents in the Upper West and only one respondent in the Eastern Region.

By region: % child and adult respondents who state that girls 'having their private parts cut, removed or sewn up' happens 'all the time' or 'sometimes' in their community (out of approx. 755 girls, 745 boys, 921 women, 579 men)

Although it was not reported in the Upper East Region via the household survey, the urban **Community Development Officer there nonetheless identified FGM/C as being amongst the most common cases involving children reported to his office**, along with child trafficking and migration, usually reported via the child clubs. With regards to FGM/C, he explained that they follow up these cases but it is difficult to find out the extent of the practice. He mentioned research conducted by a local NGO BEWDA and ActionAid Ghana in 2012 which he said revealed evidence of FGM/C in communities along the borders between the municipality and Togo. The key finding from this research, quoted in various media articles in Ghana, is that 50% of girls under the age of 15 have been subjected to FGM/C in the Bawku municipality[56]. In the urban community in Brong Ahafo, women (aged 25-50 and 50+) explained that because of the advent of Islam and Christianity, FGM/C does not occur at all in the community but that due to the presence of different ethnic groups in the community and in the district [it is not specified which ones], some community residents take their daughters to their hometowns to have the procedure performed. **FGM/C is difficult to research accurately due to the secrecy surrounding it, not least because it is against the law**.[57]

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[57] All forms of FGM/C are illegal in Ghana under the Criminal Code Amendment Act of 2003 (ACT 646).

The UNICEF's FGM/C Report also highlights a longitudinal study in Ghana which afforded a unique opportunity to assess the consistency of women's self-reports of FGM/C status over repeat surveys.[58] The data showed that a substantial number of adolescent girls who initially reported having undergone FGM/C later denied being cut. The authors concluded that denial of having undergone the procedure is influenced by exposure to anti-FGM/C interventions and by passage of a law banning FGM/C. It is important to consider this context in Ghana when interpreting the findings from the current research.

It is known to be illegal so it is carried out when girls are as young as one month old. People who do this do not send their female children to the hospital when they are sick for fear of the mutilation being detected. Thus the procedure is doubly harmful to the child because it means that she is denied medical attention when she needs it.
(DOVVSU representative, E/R)

Traditional leaders are aware of the practice going on in their communities, they have not been able to do anything about it because it is carried out in secret (Chief, E/R).

Though FGM is not allowed, some people still hide and do it and many girls are still suffering from it and because they are not reported nobody hears of them and action is not taken. Even in the one case that may be reported they will take it to the police and they will not do anything (Member of Child Protection Network, UW/R)

The household survey revealed that only 26.2% (n=785) of child and adult survey respondents have heard someone speak out against FGM/C in the past year. However, given the very low stated prevalence of FGM/C in the communities surveyed, this would appear to be a relatively high percentage of respondents. The messages were mostly heard by adults via radio or TV, as opposed to in the community. Proportionally more children than adults state they heard messages in the community, although boys

are the least likely to have heard messages. Of the anti-FGM/C messages that were heard, the largest proportion came from 'government leaders' and 'TV or radio' (together accounting for 38.3%, n=321 of responses from relevant child and adult respondents regarding who they heard speak about FGM/C). Religious and traditional leaders together make up only 12.5% (n=105) of these responses. Only children heard messages from education representatives, presumably in school.

A DOVVSU investigator points out the complexities of handling FGM/C cases:
The doctor who examines defiled girl children reported that many are circumcised. He didn't understand why we didn't want to follow up. We were busy with the defilement cases. If we prosecute the parents is it in the best interests of the child? There is no home to take care of children if you imprison their parents. Some of these laws are not practicable, they are 'copy and paste'. The structures are not there to support them, so we have to interpret how to apply them. We are given discretionary powers, which we use. Instead of condemning FGM/C, we need to do a lot of education on it. As soon as you condemn it, people go underground with it. The most important thing is to help the victims. Victims are stigmatized, even in hospital. Nurses speak to them without respect. Our system is not so friendly to issues like that. If you are not careful, you end up not helping the victim. We need to offer a support system to the victims.

4.5.3 Trafficking

As seen in section 4.4.1, **only 18.3% (n=547) of child and adult survey respondents state that trafficking of children for sexual purposes happens 'all the time' or 'sometimes' in their community** and this was ranked relatively low in terms of situations that respondents are concerned about.

In comparison, 29.2% (n=877) of child and adult survey respondents indicate that trafficking for child labour happens 'all the time' or 'sometimes' (i.e. children being tricked into leaving home, thinking they will

[58] Jackson, E. F., et al., 'Inconsistent Reporting of Female Genital Cutting Status in Northern Ghana: Explanatory factors and analytical consequences', in Studies in Family Planning, vol. 34, no. 3, 2003, pp. 200–210.

get a good job or education, but instead being forced to work too hard for little or no money - often in bad conditions).

Of the eight situations listed below which were presented to respondents, trafficking for child labour was ranked third in terms of which situation respondents are most concerned about. It received 11.5% (n=727)

See the chart below.

of all responses. The eight situations are: 1. transactional sex (children having sex for money or other things they need); 2. children watching pornographic images; 3. **trafficking for child labour;** 4. CSEC; 5. FGM/C; 6. child trafficking for sexual purposes; 7. online sexual abuse / exploitation; 8. child sexual abuse / exploitation through images.
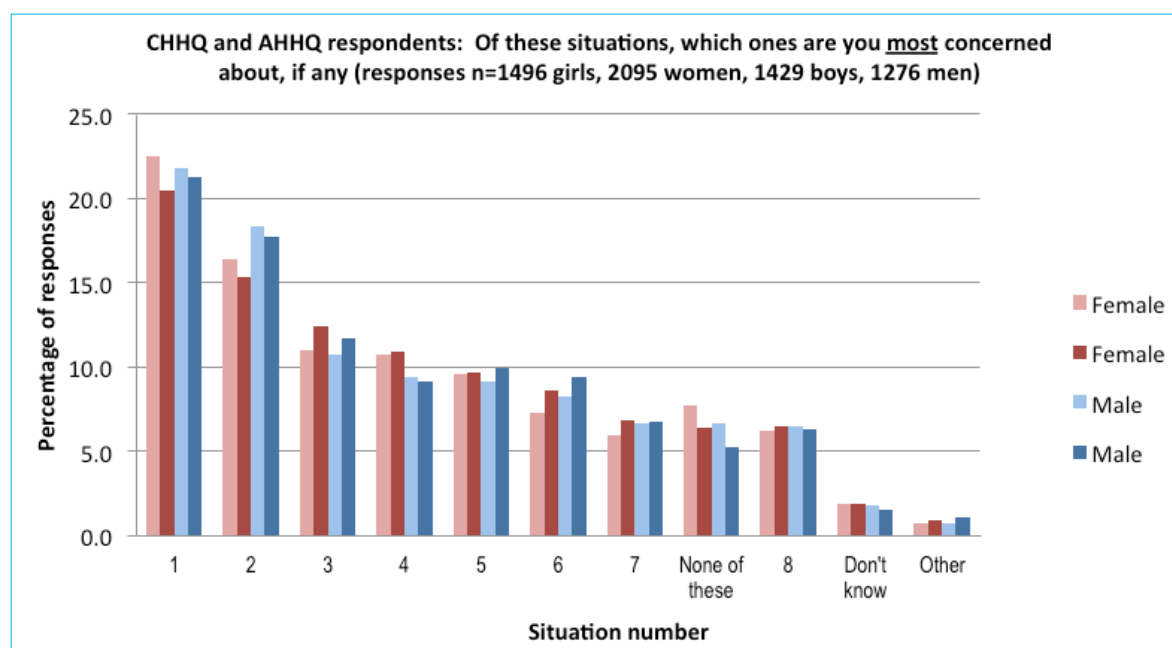
Trafficking for child labour was encountered in five regions during the research, namely Volta, Eastern, Greater Accra, Western and Upper East. In the first three, it is mainly mentioned in connection with children working in the fishing industry (mostly boys, through girls are involved in smoking and selling fish). Most of this fishing goes on in the Volta Lake but some children are sent further afield.

Children are sent to people in Akosombo, and Togo to fish sometimes during the year. The parents of the children are given an amount of money for their children's service, depending on the child's age. (Women aged 25-40, rural, GA/R)

In the Western and Upper East regions, trafficking of boys and girls was spoken of in relation to farming and working in

local restaurants or 'chop bars' (informal fast food establishments). According to anecdotal information, money earned through child labour is often taken by adults, including trafficking agents, and in some circumstances their parents. Whether or not children are paid directly, their income is almost always far below what they deserve for the amount of work they do and many children are paid nothing at all. Trafficked children often receive nothing more than their food and board and those tend to be of a poor standard.

Parents 'loan' their children to so-called 'relatives' (friends with no blood ties who are sometimes termed as relatives) who take them to Yeji [59]. Most of these children do not come back. Every week there is a bus load of children who go from Tongu (rural area) to Yeji. (Social Welfare Director, V/R)

[59] A town on the shores of Lake Volta.

Further examples of trafficking for child labour include the following. In the rural district of Greater Accra, child trafficking is mentioned not only by adults in FGDs but also by representatives from the Commission on Human Rights and Administrative Justice (CHRAJ), DOVVSU, the District Court, DSWOs and a community radio station, indicating it is a serious concern in the area. The general view by these respondents is that trafficking is condoned by parents as a response to poverty. Some parents appear to see it as an old practice of establishing friendship with other families, or traditional fostering of children which has become corrupted from generation to generation. In the rural research community of the Greater Accra Region, parents take what they term 'alabas' (a financial advance) in exchange for the child, usually a boy, who goes and works for his new guardian for two years or more in exchange for an agreed amount paid by the guardian to the parents. In the Upper East Region, girls between the ages of 7 and 18 were said by some respondents to be the most trafficked children in the rural district. These girls are mostly promised good lives in the big cities but when they are taken there they end up as domestic servants and do not attend school. Such trafficking apparently peaks during the dry season when parents give out their daughters to friends and relatives because they are unable to support them.

In relation to trafficking situations where the purpose is ambiguous (i.e. it could either be for sexual purposes or for child labour), adult and child survey respondents were asked about the perceived safety of sending teenage girls across the border with potential traffickers. The majority of respondents (87.1%, n=2612) stated that girls in the following situation are 'usually not safe or never safe': "A friend of a friend comes with his wife to the community and offers to find good jobs for teenage girls who are willing to work hard across the border. Three local families send their daughters, aged 12-16, with the couple." Although the majority of respondents state this is not safe, it is of concern that there are nonetheless 108 children and 66 adults who think this situation poses no risk. A further 98 children and 87 adults think it 'depends on the case'. Taken together these account for 12.0% (n=359) of all respondents. Proportionally more children than adults, and more boys than girls think this situation is safe.

4.5.4 Child labour[60]

In Ghana, child work is prevalent, particularly in agriculture. It is considered acceptable and integral to the socialisation of a child, particularly to equip them with life-long skills. According to the 2011 Situation Analysis of Ghanaian Children and Women, the majority of working children (71%) are found in the agriculture sector (including fishing and forestry), followed by services (22.6%) and manufacturing (5.8 %), the majority of them being unpaid family workers.[61] The current research also found children to be actively involved in agriculture, assisting their parents on their farms both in domestic food production and in cash cropping. In rural sites of Ashanti and Brong Ahafo children were observed by researchers to be working on cocoa, oil palm, cotton and vegetable farms particularly on the weekends and holidays. Boys' involvement in cattle herding is highlighted in FGDs in the Northern, Upper East, Upper West and Greater Accra Regions. Commercial and domestic fishing activities are noted by respondents in the Eastern, Greater Accra, Volta and Western Region, also performed by boys.

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[60]Child labour is defined as work that deprives children of their childhood, their potential and their dignity, and that is harmful to physical and mental development. Children's or adolescents' participation in work that does not affect their health and personal development or interfere with their schooling, is generally regarded as being something positive as it contributes to children's development and to the welfare of their families; provide them with skills and experience, and help to prepare them to be productive members of society during their adult life. Whether or not particular forms of "work" can be called "child labour" depends on the child's age, the type and hours of work performed, the conditions under which it is performed and the objectives pursued by individual countries. The answer varies from country to country, as well as among sectors within countries. (ILO http://www.ilo.org/ipec/facts/lang--en/index.htm).

[61]UNICEF and Ministry of Women & Children's Affairs, A Situation Analysis of Ghanaian Children and Women: A Call for Reducing Disparities and Improving Equity, Ghana, October 2011, p.93

Worst forms of child labour: Whilst children working may not necessarily be a bad experience, in addition to the experiences of children trafficked for child labour (see section 4.5.3), various types of work encountered in this study are all classified by the International Labour Organisation (ILO) as the 'worst forms of child labour': fishing, mining, quarrying, child domestic servitude, porterage of heavy loads, street hawking, begging and agricultural labour (cocoa production, cattle herding, oil palm, cotton, crop and vegetable farming). From children's own perspectives of which types of work are 'harmful' to children, girls in the FGDs highlight the following: selling in the market and on the streets, fetching firewood in rural areas, excessive household chores, fishing, working on farms and running errands. Boys in the FGDs also cite fishing, working on farms and running errands as putting children in harm's way along with hunting, cattle herding, fetching water, street hawking, engaging in galamsey and working on cocoa farms. It is interesting to note that, whilst there is some overlap between the ILO's and the children's lists, the children also identify tasks such as 'running errands' which may be considered by adults as acceptable but which, according to some children, puts them in harm's way.

Findings from the present study suggest that involvement of children in labour continues to be high in all regions. It is highlighted as a concern by child and adult FGDs in all regions, in particular child labour outside the home (which was mentioned in FGDs as a form of 'harm' for children approximately six times more frequently than household work). 41% of children's FGDs (total n=68) talk about child labour as a form of harm and 41% (total n=56) of adult FGDs mention child labour both inside and outside the home. In the rural FGDs child labour was the most commonly mentioned form of harm, constituting 23% of total mentions (total n=199) as compared to the urban FGDs where it was the second most commonly mentioned form of harm, constituting 12% of mentions (total n=221). Child labour was also identified in some children's FGDs as an important strategy for protecting themselves from harm i.e. enabling them to buy food, medicines and school items, which is further explored in Section 5.3.1.

Both boys and girls work in the commercial and industrial, as well as agricultural sectors. This is evident from the research in the Brong Ahafo, Central, Eastern, Northern, Upper East and Western Regions where children in the study sites were reported by FGDs and KIIs to be working in places as diverse as abattoirs, saw mills, stone quarries, shallow mines, building sites, marketplaces, rivers and lakes. At these sites, children carry rocks, bricks, concrete, water, sawdust and timber. In the Ashanti, Western, Central, Upper East, Upper West and Volta Regions children are involved in the informal mining sector. In the Central and Greater Accra children are engaged in stone quarrying.

Children engage in 'kawuro or wele' production (processing hide and skin of animals killed at the abattoir) even when they have to be in class learning. They therefore have access to money and are able to participate in negative activities such as gambling (tsatsa), wee smoking and video games. (Adult FGDs, urban, A/R)

At Akomfore, the booming business of galamsey (koofunkum) by the Chinese operators has led to many growing children aged 10-17 stopping their schooling and apprenticeship training. The galamsey business is fit for the youth because they have the strength and courage to engage in this laborious work. (Adult FGDs, rural, A/R)

Children's involvement in street hawking is mentioned as being very common in every region in both rural and urban settings, but more so in urban areas where commercial opportunities are greater. Both boys and girls in all urban research communities were observed engaged in this type of work. In general it includes both in- and out-of-school children, with many school children found to be hawking before, during and after school hours.

We sell items such as water, sogbolo[62] and ice cream before school (some of the children attend afternoon school) and on the weekends we also sell. (Five girls aged 7-10, urban, BA/R) One girl added: I am happy when I sell all my water.

In the Northern and Upper East Regions, street work also includes begging. For instance, in the Upper East Region, boys taken to Mallams to be trained in Islamic teachings are sometimes used as beggars or 'Almazeeri,' begging on the street for alms towards their upkeep and that of their master. In the Northern Region respondents mentioned that children with disabilities are sometimes made to go begging in the community. Children in the three northern regions are also noted by FGD and KII respondents to migrate to markets in the southern part of the country to work as head porters.

Paid child domestic work was reported in the Greater Accra, Western and Upper East Regions. Such children, especially girls, report sexual abuse by men in the households in which they work.

Exploitation of school children by their teachers for labour purposes is reported in

a number of regions, sometimes under the guise of punishment, as discussed in 4.2.4. In the rural community in the Brong Ahafo Region, it was observed by the research team that schoolgirls aged 10-15 carried pans of water, firewood and foodstuffs to school in order to prepare food for teachers in the morning. The girls arrived at school before the cook in charge of preparing the meals for the school feeding project had arrived. Although the girls appeared to enjoy this task, it took place during school hours, meaning that they were missing lessons in order to work for the teachers and it is a clear example of gender discrimination.

Children are exposed to a large number of occupational hazards in the course of their work, especially accidents and injuries. The research reveals that the most frequent form of harm mentioned by a total of 114 FGDs (60 child and 54 adult FGDs) was 'accidents or injuries' which received 24% of total mentions (n=420). Work-related accidents and injuries result from snake and scorpion bites in and around the farm, carrying excessive loads, working without protective clothing and/or with dangerous implements like cutlasses and knives. The latter was particularly evident in all rural research sites.

When I wake up in the morning, I go to farm with my mother. I don't like going to the farm because I weed a lot, carry a lot of heavy things and some plants and sometimes the cutlass also cuts me. This sore on my right leg is from a cutlass that cut me, I fell down on my way to the farm and the cutlass cut me. (Boy aged 13, W/R)

Children engaged in street hawking and petty trading report being vulnerable to road accidents and sexual abuse. Some accounts highlight the dangers of fishing, evident in the Eastern, Greater Accra, Volta and Western Regions.

From as early as 10 years old, boys begin to fish for oysters which they sell to fend for themselves. We have to dive deep into the river to get the oysters and we are afraid of

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[62] Local beverage made from boiling hibiscus leaves.

drowning, because there have been incidents of children having drowned in the river. (Boys aged 13-17, V/R)

In addition to accidents and injury, the research indicates a range of other harsh conditions and abuse that accompany child labour, including hunger, exhaustion, neglect, illness, and verbal and physical abuse by caregivers and employers. The researchers heard accounts of some trafficked children being made to work throughout the day, with little or insufficient break periods, even when ill. Some children reported being mistreated by mistresses or masters whose justification is usually that their services have been pre-paid for ('alabaa') and therefore, they are entitled to treat the children as they please (see section 4.5.3 above for more detail on trafficking for child labour). In the Western, Upper East and Ashanti Regions the high level of galamsey (illegal small scale mining) exposes many children to a wide range of dangers including respiratory tract infections, mercury poisoning and fatalities through accidents.

When burning the mercury covering on mined gold the smoke gives off poisonous gas. (Boys aged 13-17, urban, W/R)

Not only are the working children at risk, but other children in the community may fall into abandoned mining pits while walking to farms and there was mention of drowning in such pits which fill with water when it rains.

In relation to domestic work, there are accounts from KIIs in all regions of children suffering at the hands of foster carers in different ways such as through excessive work, lack of food and clothing, being subjected to corporal punishment and verbal abuse and, in some cases, sexual abuse.

I used to stay with my uncle and his wife. My uncle used to come to my room and sleep with me every evening when his wife was not around. I warned him every time that I will tell his wife but he kept doing it and I was also scared and shy to tell anyone about it. I kept

everything to myself till one day when I just couldn't take it anymore. He came to my room to have sex with me as usual because he thought the wife was not at home. This time, I gathered courage and started screaming on top of my voice, with all my strength and my Auntie came and saw everything for herself. My uncle couldn't say anything; he was only standing there ashamed. The next day, my auntie brought me back to my mother. We never spoke about that issue again because it brings back painful memories. (Girl, W/R)

Child labour disrupts children's education in numerous different ways. Many children engaged in both domestic and commercial work do not attend school regularly or they come to school late due to the demands of their work and are often tired during the school day. Reports from Brong Ahafo and Eastern Regions highlight that children engaged in varied forms of commercial work wake up at dawn to start work and as a result arrive at school exhausted and sometimes late. Caning and other punishments meted out by teachers in reaction to tardiness, irregular attendance and dozing in class lead to truancy from school. Eventually the children fall behind, lose interest and drop out of school. The lure of earning their own money is another common reason why children's education is disrupted by child labour.

From Wednesdays to Fridays the majority of children are absent from school because they are working. (Assistant Head Teacher in the Islamic Mission School, urban, BA/R)

Child migration for labour occurs in five of the country's ten regions: Brong Ahafo, Northern, Upper East, Upper West and Volta. The trend is mainly from rural to urban areas. Both boys and girls migrate with the intent to seek employment (more girls than boys in the three northern regions). Both adult and child FGDs in the Northern, Upper East and Upper West Regions indicate that girls usually migrate to Kumasi and Accra after Junior High School to work as head porters. They try to earn money to prepare for their secondary education since their parents

Furthermore, the vast majority of adult and child survey respondents were of the view that it is not always good for 14-year-old girls or boys to migrate to cities to make money, with a slightly stronger response in relation to 14-year-old girls. Finally, 70.3% (n=2106) of adult and child survey respondents disagree that 'the benefits of children under 16 years moving from rural to urban areas always outweigh the risks they face'.

4.5.5 Separation of children from biological parents

The cultural practice of informal fostering has already been examined in section 3.2. More details on separation from biological parents is provided here.
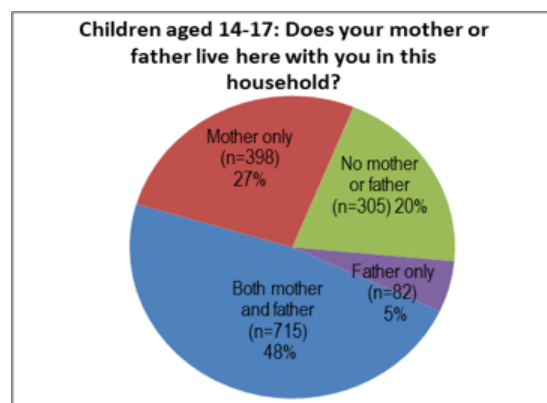

cannot meet their needs. However, their migrant status and the nature of their work make them vulnerable and many become pregnant or return home with sexually transmitted infections. Children in the three northern regions are more vulnerable to migration during the dry season (i.e. July to September) when families are unable to adequately feed their children.

The household survey reveals that both adults and children consider child migration for labour 'usually not safe' or 'never safe' for both boys and girls. This is in response to the question "In general, how safe and protected do you think children are in each of these situations?" to two hypothetical scenarios: 'Parents send their 13-year-old daughter outside the community for housework in an employer's house (on condition that she is also allowed to attend school)' and 'Parents send their 13-year-old son to work in a city in neighbouring countries (e.g. in a hotel or restaurant)'. In both cases, the majority of respondents state that children in these hypothetical situations are usually not safe or are never safe, although sending a boy to another country is seen as more unsafe than sending a girl to another community.

Approximately half of the child survey respondents live with both their biological parents, just over a quarter live with their mother only, 5% live with their father only, and about 20% are separated from both biological parents. Proportionally, more girls than boys live with 'mother only' (29.0% / 24.0%) and more boys than girls live with 'father only' (7.1% / 3.8%). There is no particular difference in the proportion of boys and girls living with either both parents or with no parents. Where only one biological parent is present, it is almost five times more likely to be the mother. See pie chart. These children are aged 14-17 and it is not possible to extrapolate results for younger children. However, see below for a comparison with findings from the adult survey households which refer to children aged 0-17. A higher percentage of child respondents from

urban areas (24.5%, n=191) state they live with neither father nor mother compared to child respondents in rural areas (15.8%, n=114).

In households where the adult survey took place: whether children aged 0-17 in these households live with their biological parents (total girls n=2404, total boys n=2469)
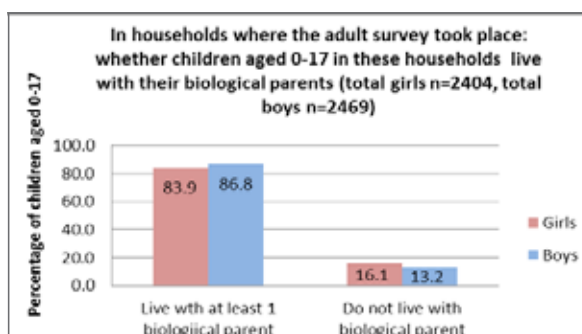
85.4% of the 4873 children aged 0-17 living in the 1500 adult survey households live with at least one biological parent whereas 14.6% do not live with a biological parent. This compares to 20.3% of children aged 14-17 from the child survey above who do not live with a biological parent. One interpretation is that older children may be more likely to live away from their biological parents. Proportionally, more girls than boys in these adult survey households do not live with a biological parent.

Furthermore, 13.5% (n=203) of all adult respondents (12.8% of women, n=118 and 14.7%, of men, n=85) have biological children of their own under the age of **18 who do not currently live with them.** The fact that, of relevant adult respondents, 55.2% (n=112) have girls living away from home whereas only 44.3% (n=90) have boys living away from home, is consistent with the findings in the previous graph showing that more girls than boys appear to be living without biological parents. This is further supported by the 2008 Ghana DHS which reveals more boys than girls under 18 live with both parents (55.5%, total n=10,378 of boys compared to 52.0%, total n=10,159 of girls).[63]   While only 2.4% of children aged under two years (total n=2,243) do not live with a biological parent, by the time the child reaches 10-14 years of age (total n=5,717) 23.4% are not living with a biological parent, indicating a change in care patterns for children (and, for a smaller percentage, parental death). [64]

Six of the ten regions (Brong Ahafo, Upper West, Volta, Greater Accra, Ashanti and Central) report above average levels of children being separated from biological parents, based on comparison against two key household survey questions. The regions reporting the lowest levels of separation were Northern followed by Upper East, Eastern and Western, all of which were reported below average levels. See chart below for details.

By region: % adult survey respondents living away from biological children under 18 and % child respondents living away from biological parents (out of approx. 755 girls, 745 boys, 921 women, 579 men)
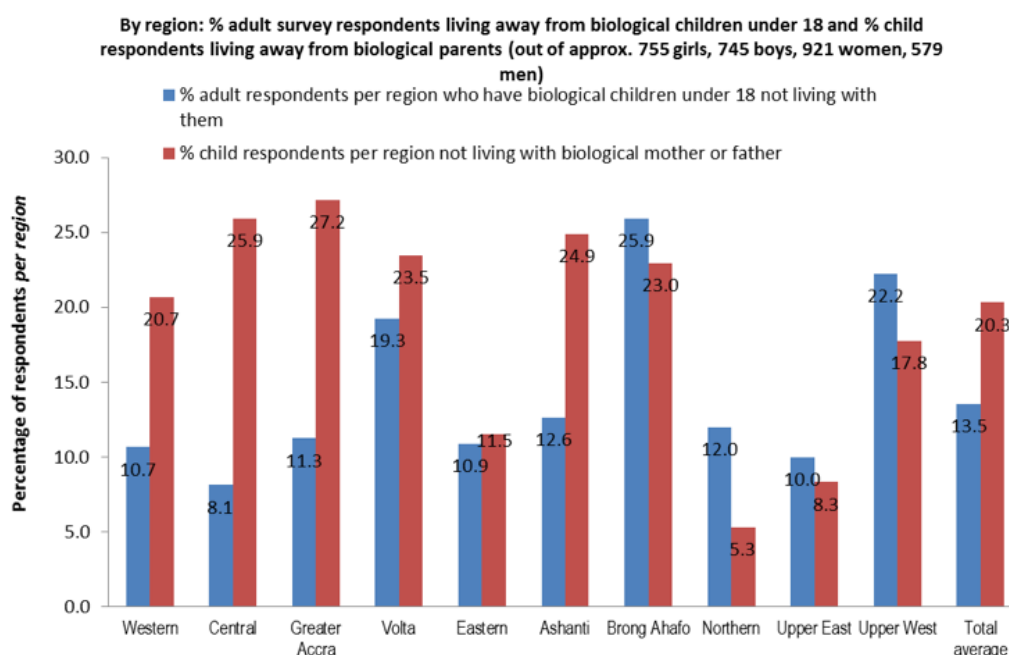
[63] GDHS, 2008, p. 14.
[64] GDHS, 2008, p. 14.

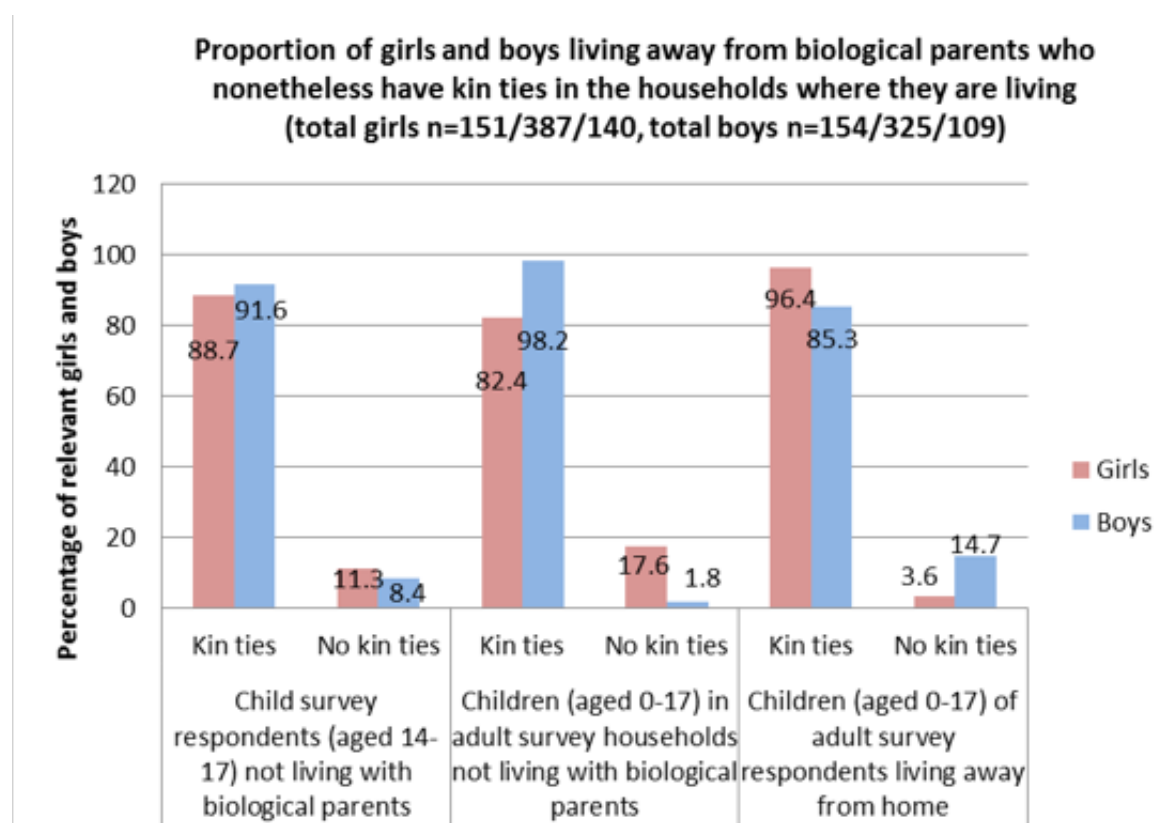The vast majority (over 90% on average) of children separated from their biological parents are nonetheless living with extended family or those with whom they have kinship ties. Only 2.0% (n=30) of all 1500 child survey respondents are not currently living with any family members whatsoever, and proportionally more of these are girls than boys: 11.3% (n=17) of the girls not living with biological parents do not have any kin ties, compared to 8.4% (n=13) of the boys not living with biological parents. This is a further finding to suggest that not only are girls in the survey areas proportionally more likely than boys to be living away from their biological parents, but girls are also proportionally more likely to be living away from any extended family or kin ties. Furthermore, only 1.5% (n=74) of all children aged 0-17 who live in households where the adult survey took place do not live with any family whatsoever and, once again, proportionally more of these are girls than boys. However, the percentage of biological children of adult household survey respondents who do not live with any relatives whatsoever is considerably higher - 10.8% (n=27) – and in this case proportionally more are boys than girls (see chart). Some of these boys are reported to be at boarding school or abroad which would explain why similar figures were not captured in the child survey (which did not take place in such settings).

Proportion of girls and boys living away from biological parents who nonetheless have kin ties in the households where they are living (total girls n=151/387/140, total boys n=154/325/109)

As already outlined in section 3.1, **reliance on extended family for caregiving is further reflected by adults in the survey who state that if a child's parents die in the community, the child is generally sent to live with relatives, both inside and outside the community** (accounting for 82.8% (n= 1933) of all responses to this question). 'Formal' arrangements account for only 4.1% of all 2336 responses ('orphanage / residential institution' and 'formal adoption within Ghana'). Formal domestic adoption is the least frequent response (0.5% of all responses). Nobody mentioned formal adoption outside Ghana. Institutionalisation accounts for 3.6% of responses. 'End up on the street' accounts for 2.3% of responses.

In terms of the age of children not living with biological parents, of the 140 girls and 109 boys who are biological children of adult survey respondents living away from home, proportionally more girls than boys are under the age of 10, but more boys than girls are aged 11-17. Proportionally more girls than boys were sent to live away between the ages of 0-5 and 11-15. More boys than girls were sent to live away between the ages of 6-10.

AHHQ respondents with biological children under 18 living away: how old were these children when they first went to live somewhere away from home? (total girls n=140, total boys n=109)

Reasons why girls and boys are living away from biological parents and other relatives (total responses: girls n=23/23/140, total boys n=15/22/109)
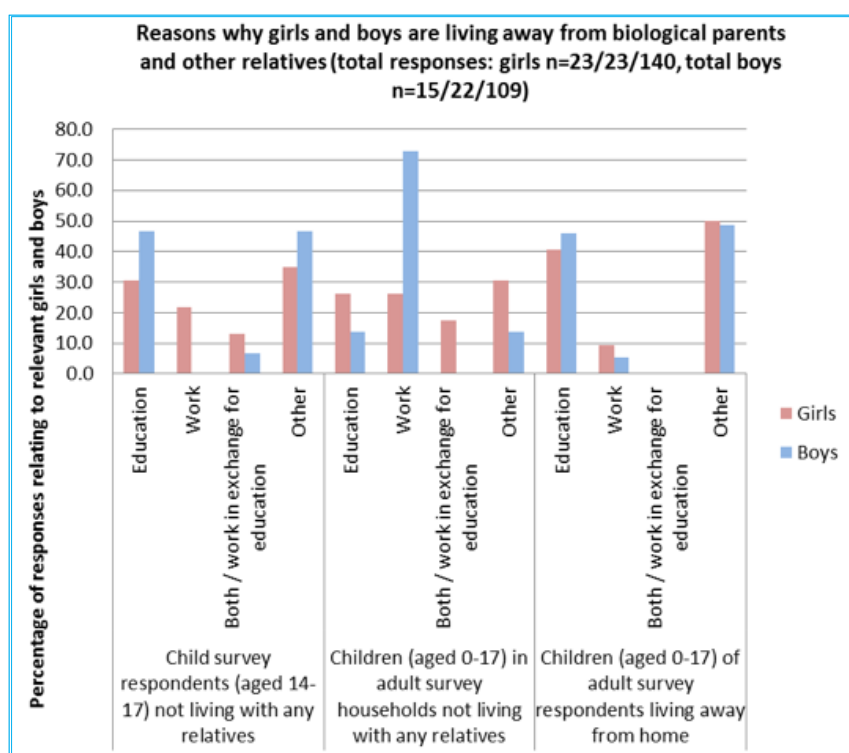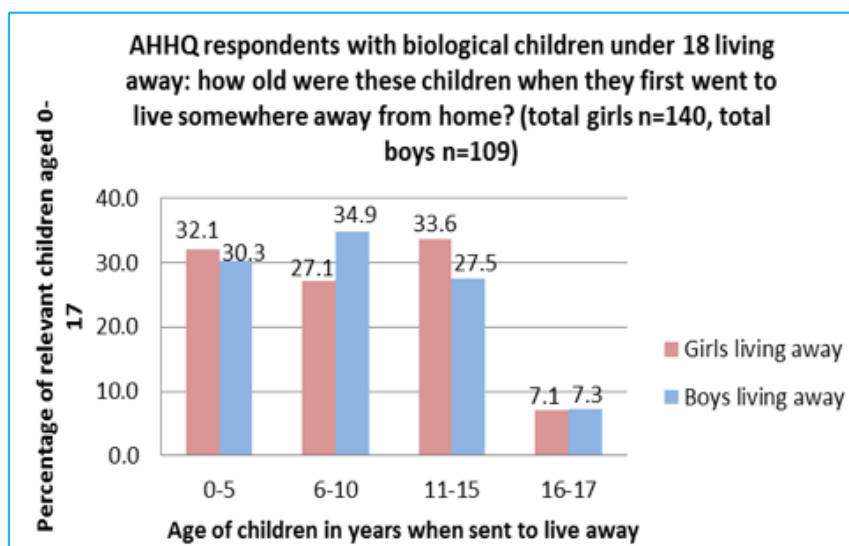
The majority of reasons given as to why children are not living with biological parents relate to work and education.

Of *child survey respondents* (aged 14-17) who are not living with any family members whatsoever, the most popular reason they give for this family separation is 'to access education'. Although the numbers here are relatively small, proportionally more boys are accessing education and more girls are

working. However, in relation to the *children aged 0-17 who live in households where the adult survey took place who do not live with any family members,* the most popular response given as to why these children are there is to 'work' with a bias towards boys; 'education' has a bias towards girls.

Finally, of the *biological children of adult survey respondents living away from home,* the highest percentage (43.0%, n=107) are away in order to attend school. Interestingly, this contrasts with the reasons given as to why unaccompanied children are residing in adult survey households, where 'work' accounts for 48.9% of all responses and 'education' accounts for only 28.9% of all responses (and even this latter includes 'work in exchange for education'). The results for these two groups of children are not directly related, but one possible interpretation is that biological parents send children away to get an education but in reality these children end up working in the household and/or working in exchange for education. All child survey respondents were asked their opinion in general about why they think some children live apart from their families. Interestingly, the majority of responses (56.5%, n=1549) are related to poverty, orphanhood and abandonment. 'Education', including 'working in exchange for education' accounts for only 16.1% (n=442) of responses. Other 'work' (paid work and domestic service) accounts for only 6.5% (n=179) of responses. Remembering that the vast majority of child survey respondents live with at least some family members (98.0%), it appears that these children in general assume that family separation occurs mainly due to poverty, orphanhood and abandonment, rather than for education or other reasons. The reality of those few children who are actually separated from family members (child survey respondents and children living in adult survey households) is that they are there mainly for education and work.

90.0% (n=180) of adult survey respondents with children under 18 living away state that their children are safe there. 41.3% (n=111) of reasons given by relevant respondents as

to why they think their children are safe relate to trust in the 'hosts' and the assumption that because the hosts are friends or part of the family the child will automatically be safe. 30.9% (n=83) of responses relate to feedback from the children themselves. It would be preferable to have a higher percentage of responses relating to the children's direct feedback rather than assumptions made by adults on their behalf.

Perceived safety of children living away from biological parents in hypothetical situations: Just over half of all adult and child respondents (55.6%, n=1667) think that 5-year-old orphans sent to live with family cousins are not safe. 47.3% (n=1417) think 9-year-olds sent by parents to a residential boarding school outside the community are not safe. 35.6% (n=1067) think 11-year-olds staying with extended family to attend school are not safe. Given that placement of orphans with extended family members is apparently the most common caregiving arrangement, and that education is one of the main reasons why children are separated from their biological parents, it is of concern that substantial proportion of respondents think children in such situations might 'usually' or 'never' be safe.

Perceived benefits and risks in general for children living away from biological parents: Child survey respondents identified some of the best things that could happen to a child who lives away from their mother or father. The single most popular answer is 'get an education' (29.2% of responses, n=673) followed by 'better care than at home' and 'more discipline that at home'. 7.8% of responses (n=179) state that there are no good things that can happen to such children. Both girls and boys in the household survey had much more to say about the worst things that could happen to a child who lives away from their mother or father: 3,066 responses related to the worst things, compared to 2,304 responses regarding the best things. Of the 'worst things' that could happen, physical and sexual harm account for 40.5% (n=1243) of responses, emotional harm 29.0% (n=890)

of responses, poor living conditions 18.0% (n=551) of responses and other issues 9.3% (n=285) of responses. Proportionally more girls than boys mention 'not enough care and supervision', 'girls getting pregnant' and 'sexual harassment / abuse and exploitation'.

Perceived benefits and risks in general for children living in orphanages or other institutions: Adult survey respondents identified some of the positive impacts, with the single most popular answer being 'get an education' (33.7% of responses, n=759) followed by 'better care than at home'. 9.0% of responses (n=202) state that there are no good things that can happen to such children. As with the child respondents, both women and men had more to say about the negative compared to the positive impacts. By far the most frequently cited negative impact was emotional harm, accounting for 50.4% (n=1278) of responses in total compared to 16.9% (n=429) of responses referring to poor living conditions. Physical and sexual harm accounts for 14.9% (n=379) and other

issues (excluding 'don't know' and 'none') for 5.3% (n=134). In relation to a different question posed to both adult and child survey respondents, 54.9% (n=1646) think 7-year-olds sent by parents to an orphanage or childcare home are not safe.

Perceived level of care of children living with extended family: In general, both adult and child survey respondents feel that children are treated better if they stay with their biological parents compared to living with other relatives. Children whose parents are still alive are presumed to be better treated than those whose parents have died. See charts below. The overall trend in the survey findings is that children are perceived to be safer staying with their biological parents compared to other environments, even extended family placements.

See sections 4.5.3 and 4.5.4 in relation to children separated from their biological parents through trafficking and migration for child labour.

4.6 Children and justice

Summary

- **Juvenile justice is highly gendered, with many more boys coming into conflict with the law than girls.** Ten times fewer adult survey respondents report serious cases by girls in the past year compared to boys, and 2.5 times fewer report minor cases by girls in the past year compared to boys. A mean average of 4.3 serious / 5.3 minor crimes per year is reported by each respondent in relation to boys, compared to 0.5 serious / 1.3 minor crimes per year reported by each respondent in relation to girls.

- **A relatively large proportion of adult respondents state they do not know** how many serious or minor cases have been committed in the past year, particularly by girls.

- Stealing / property-related offences are the most common types of crimes identified by both child and adult survey respondents (accounting for 36.4% of child and approximately 65% of adult responses) and are much more common than inter-personal offences like violence. This is consistent with global trends. Theft in particular is often linked to poverty and is also a common feature of adolescent risk-taking behaviour.

- **Girls are 'criminalised' much more than boys for sex-related 'offences'** such as 'getting pregnant', adultery, promiscuity etc. and girls cite these issues much more than boys.

- **There are issues which are 'socially unacceptable' or 'undesirable' but not necessarily 'criminal'** included the lists of both serious and minor 'crimes' identified by survey respondents.

- **The most common reasons given why girls and boys commit crimes or do things which are socially unacceptable** are bad upbringing (41.4%, n=1977 of survey responses and bad influences (26.9%, n=1295).

See section 5.2 for details regarding typical and preferred responses to children coming into conflict with the law.

4.6.1 Perceived extent and types of cases

Survey respondents were asked whether or not children commit crimes in their community, the types of crimes committed by boys and girls, and whether these crimes are considered to be 'serious' or 'minor'.

The household survey found that proportionally more children than adults state that children in their community sometimes commit crimes (defined as 'getting into trouble'): 53.5% of children (n=788) compared to 34.2% of adults (n=513). More adults than children state children do not commit crimes or that they 'don't know'.
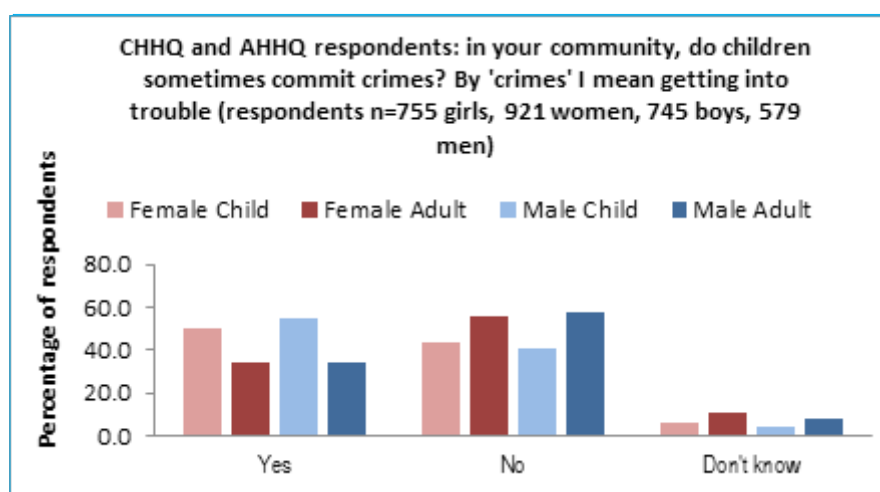
A higher percentage of both child and adult respondents in urban compared to rural areas report 'crimes' committed by children in their communities: 57.5% (n=448) / 47.2% (n=340) of urban / rural child respondents respectively and 40.7% (n=309) / 27.5% (n=204) of urban / rural adult respondents respectively. Crimes committed by children occur in all regions, according to adults as well as children.

373 relevant adult respondents report serious[65] cases by boys in the past year whereas ten times fewer (n=37) report serious cases by girls. This indicates very clearly that either boys are much more likely to commit serious crimes than girls, or that adult respondents assume this to be the case, whether it is true or not in practice. Only one respondent states that no serious cases at all had been committed by boys, compared to 287 respondents who state that no serious cases at all had been committed

by girls in the same period. In total, 513 adult respondents reported 2215 serious crimes committed by boys in the community in the last year - a mean average of 4.3 crimes reported by each respondent, compared to a mean average of only 0.5 crimes reported by each respondent for serious cases by girls (518 adult respondents reported only 247 serious crimes by girls in the last year). It is generally acknowledged, globally, that juvenile justice is highly gendered, with many more boys coming into conflict with the law than girls. These findings are consistent with that pattern, although for a true picture actual crime statistics would need to be examined. It must be remembered that the questions in the survey relate only to respondents' perceptions of cases, not actual reported cases.

201 relevant adult respondents report minor[66] cases by boys in the past year whereas only 84 report minor cases by

[65] 'Serious' is defined as, for example, stealing something worth more than 100 cedis, seriously damaging property, violence where someone needed medical attention, threatening someone with a weapon, selling drugs, sexual assault, rape or murder. Please note slight data collection error for this question: the total number of respondents should be the same as those who stated in the previous question that children sometimes commit crimes, i.e. 313 women and 200 men.
[66] 'Minor' is defined as, for example, stealing something worth less than 100 cedis, minor damage to property that could be relatively easily repaired, violence not needing medical attention, using drugs or drinking alcohol. Please note slight data collection error: the total number of respondents should be the same as those who stated above that children sometimes commit crimes, i.e. 313 women and 200 men.

girls (2.5 times fewer). The gap is much less pronounced than in relation to serious crimes, but the gender divide is still clear. In total, 507 adult respondents reported 2682 minor crimes by boys in the last year - a mean average of 5.3 crimes reported by each respondent, compared to a mean average of only 1.3 crimes reported by each respondent for minor cases by girls (517 adult respondents reported only 670 minor cases by girls in the last year). However, 45.6% (n=236) of respondents state that no minor crimes at all were committed by girls.

A relatively large proportion of adult respondents state they do not know how many serious or minor cases have been committed in the past year, particularly by girls: 27.1% (n=139) / 36.3% (n=184) of relevant adult respondents state they don't know in relation to serious / minor crimes respectively committed by boys and 37.5% (n=194) / 38.1% (n=197) state they don't know in relation to serious / minor crimes respectively committed by girls. There appears to be more uncertainty over girls as perpetrators, possibly because it is culturally more unacceptable for girls to commit serious crimes, or that these incidents are less visible or 'common knowledge' than those committed by boys. The overall lack of certainty in relation to this question (for both boys and girls) may also be explained by respondents not wanting to give an approximate figure if they didn't know an exact number. [67]

Child survey respondents cited stealing as the singular most popular response in relation to the types of crimes committed by children in the community.

Types of crimes identified as being carried out in the community by children under 18	% of child survey responses	Number of child survey responses
Property-related offences (stealing and damaging property)	36.4	702
Drinking, smoking, taking drugs and 'being naughty'	27.2	525
Sex-related issues		
(prostitution, girls getting pregnant, rape/defilement, sexual harassment such as pestering and sexual remarks, other sexual abuse and underage sexual activity)	20.9	403
Violence (minor, serious and murder)	12.4	239
Other	2.9	56
Don't know	0.3	6
Total	100	941 responses from girls, 990 from boys

It is interesting that child respondents consider 'girls getting pregnant' as a 'crime'. This is likely to reflect the strength of societal taboo around this issue - such that it is considered to be a 'crime'. It also reveals a gendered understanding of the issue in that the phrase 'girls getting pregnant' implies that girls are the 'offenders', rather than 'boys getting girls pregnant'. All of the sexual-related issues are cited by proportionally more girls than boys. This might indicate that girls are more aware of, sensitive to and vulnerable to experiencing these issues compared to boys.

[67] In hindsight, the question should probably have read: "…approximately how many cases…"

According to relevant CHHQ respondents: What are some of the crimes that children do in this community? (responses n=941 girls, 990 boys)
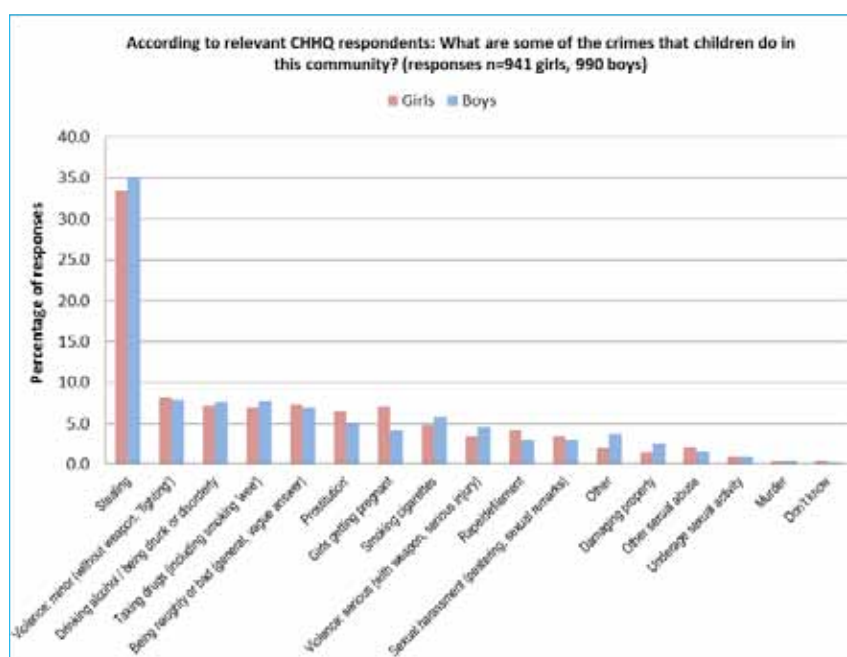
Adult survey respondents also state that the most common types of offences are property-related.

According to adult survey respondents who state that boys and/or girls have committed serious or minor crimes in the community in the past year - types of offences committed	Adult survey responses regarding serious crimes		Adult survey responses regarding minor crimes	
	% of responses	Number of responses	% of responses	Number of responses
Property-related offences	60.2	387	69.0	457
Drinking and using drugs	/	/	18.4	122
Violence	13.5	87	7.6	50
Sexual offences	8.9	57	/	/
Other	8.7	56	4.5	30
Selling drugs	8.2	53	/	/
Don't know	0.5	3	0.5	3
Total	100	332 responses from women 202 from men	100	294 responses from women 195 from men

As with the child survey responses, there is gendered dimension to the way people understand this issue. This way of seeing things is revealed in the 'other' responses regarding both serious and minor cases: in relation to serious cases girls are criminalised for prostitution, pregnancy, abortion,

'conspiring with boys' and 'sleeping with married men' (accounting for 17.4% (n=19) of responses in total). In contrast, only 0.2% (n=1) of responses criminalise boys for the same activities (prostitution). In relation to minor cases, girls are criminalised for premature sex/promiscuity, pregnancy and prostitution (accounting for 7.5% (n=13) of responses in total). In contrast, only 0.8% (n=4) of responses criminalise boys for similar activities ('sexual harassment / following women' and 'boyfriend/girlfriend relationships'). Again, the phrasing of responses places the onus of responsibility on girls (e.g. '[girls] conspiring with boys' and '[girls] sleeping with married men' - rather than the other way round). Similar views were found in the FGDs where adults in particular, but not exclusively, were quick to point out that girls are sexually abused due to them pursuing men for financial reasons.

When parents are not around or are unable to provide food, money or other needs, the girls often go to uncles or other family members who may only agree to supply such needs in exchange for sexual favours. Young girls who hawk on the streets to earn income for the family upkeep are also easily lured by older men. (Boys aged 7-10, rural, C/R)

Overall, property-related offences (which make up 60-69% of adult survey responses for both serious and minor cases) are much more common than inter-personal offences. This finding is consistent with global trends. Theft in particular is often linked to poverty. It is also a common feature of adolescent risk-taking behaviour. In the lists of both serious and minor 'crimes' by both boys and girls, there are activities which may not actually be 'crimes' according to Ghanaian legislation. Some of the issues raised are likely to be 'socially unacceptable' or 'undesirable' but not necessarily 'criminal'.

4.6.2 Causes

The survey explored the perceived reasons why girls and boys commit crimes or do things which are socially unacceptable.

Reasons why girls and boys commit crimes or do things which are socially unacceptable	% of relevant adult and child survey responses	# of relevant adult and child survey responses
Bad upbringing (not enough discipline / no good role models, violence, abuse or neglect, little or no education, lack of religious / spiritual guidance, parents addicted to drugs or alcohol)	41.4	1977
Bad influences (influence of gangs, to impress peers, bad influence of media (TV, films, internet, video games), forced or pressured by adults or older children, child is under the influence of drugs or alcohol)	26.9	1295
Economic reasons (need the money or item, no options for advancement in community)	20.7	995
Personal character (personal character, to get attention, don't understand right and wrong)	5.0	241
Risk-taking and making mistakes (normal part of growing up / risk-taking / making mistakes, girls get pregnant and take desperate measures)	2.2	108
Other	0.7	33
Don't know	3.4	165
Total	100	941 responses from girls, 990 from boys

Proportionally more child than adult respondents state 'need the money or item' and 'don't know'. The former might indicate that children are more likely to identify the immediate reasons whereas, to some degree, adults look beyond this. Proportionally more adult than child respondents state 'lack of discipline and role models' (particularly men), influence of gangs and personal character (particularly women).

The qualitative researchers heard accounts of some children being exposed to crime from an early age in 'zongo' communities. These are 'ghetto' style settlements which are common in Ghana's cities, where many residents originate from the north and from other countries including Burkina Faso, Niger and Mali. There tend to be high levels of poverty, social tension and crime in such communities.

Some children in ghetto communities, from as early as 6 years, are exposed to and become involved in alcohol and drug addiction, extreme forms of violence, prostitution, theft, armed robbery, and other serious criminal activities. (Boys aged 13-17, urban, C/R)

Elsewhere there were reports of children being involved with criminals and in gangs, engaged in activities such as pickpocketing .[68]

'Ονγɛνγɛ' are the people who fight violently. They drink akpeteshie[69] and smoke wee and cigarettes; they are a gang. They use weapons and can shoot. They can also cut off your head. They have also been stealing. If you stand near there, they will steal your phone. They beat girls when they say they want the girl and the girl refuses them. They threaten the girl with a knife and even stab her. Three boys once gang-raped one girl. [The boys also say that there are girls aged 13 and above who are part of the group]. They wear short clothes and smoke and dance. (Boys aged 13-17, urban, E/R)

Children neglected by their parents and caregivers became involved in criminal activities such as stealing and gang fighting. Some develop links with professional criminals and are trained by them as pickpockets, stealing money and mobile phones. Children in the area carry blades and knives popularly known as 'okapi', for protection. (Social workers, urban, GA/R)

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[68] For example in the Eastern and Greater Accra regions.
[69] Locally manufactured gin with a high alcohol content.

5. Preventing and responding to child protection concerns – the role of the child, family, community and State.

5. Preventing and responding to child protection concerns- the role of the child, family, community and State.

5.1 General

Summary

- **Positive child rearing is considered by child survey respondents to be the most important way to make children feel safe.** 'Positive prevention' behavioural responses account for 55.0% of the total (n=2993), compared to 20.3% for 'negative' behavioural responses.

- **Child survey respondents identify emotional issues much more than physical issues as things which make them not feel safe.** Only 7.0% of the 3164 total responses refer explicitly to physical punishment whereas 40.0% refer to emotional issues. Although rates of physical punishment are high and children react negatively, it does not appear to impact their sense of safety nearly so much as emotional harm. Violence prevention in Ghana needs to strongly address positive child rearing and emotional well-being.

- **Child survey respondents do not place much emphasis on services, systems and structures in relation to prevention.** The behaviour of adults (especially parents and teachers) and the emotional treatment of children rank much more highly.

- **A child's first port of call when hurt appears to be a family member.** If resolution is not achieved within the family then the issue is taken to Chiefs for mediation. 'Informal' actions are more popular than 'formal' actions involving government services or structures. However, responses by the family and community might not always be child-centred or appropriate. There is a strong emphasis on preserving community harmony, over and above the welfare of the child.

- **The majority of cases are not reported to government authorities.** There is distrust of institutions such as the police, District Assemblies and judiciary.

- **Lack of resources** amongst government agencies and the financial constraints of community members affect their ability to intervene.

- **The vast majority of services which exist in communities to deal child protection cases are 'general' community structures** (such as religious, educational, administrative, health and police bodies) rather than specialised services for children who have been harmed. Those most in need of such services (children, particularly girls, and women) are less likely to know of their existence.

- **Many of the most popular services (specialised in child protection) are those which are also the least available.** If the child protection system in Ghana wishes to better exploit the most prevalent existing community-level services (like churches, mosques, teachers, traditional leaders and Assembly persons etc.) then significant targeted awareness, sensitisation and capacity building work is needed to improve the confidence of community members to approach them.

- **Action will generally be taken in the case of sexual touching of children,** but the results are far from unanimous and older children appear to be less protected than younger ones.

A review of the legal and policy framework in the 2010 Mapping and Analysis Study[70] found that the approach to child and family welfare services is reactive after a violation has occurred and largely legalistic, with a focus on the rescue and removal of children. The focus has been on shelter-based rather than family-based solutions.

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[70] Child Frontiers for UNICEF Ghana, Mapping and Analysis of Ghana's Child Protection System, 2012.

The Mapping and Analysis Study highlights the constraints faced by government agencies with responsibility for child and family welfare services and emphasises the important role of families and a number of existing community structures which could be formally involved in delivering child protection services.

Understanding how these different structures relate at central, district and community level is complex. The current research focuses primarily on the views and experiences of the adults and children consulted from all regions of the country and the inputs from community-based organisations and key staff in government agencies responsible for child protection at different levels, in relation to both prevention and response.

5.1.1 Prevention in general

Key to prevention is identifying what makes children feel safe and not safe. Analysis of the child household survey shows that positive child rearing is considered the most important way to make children feel safe. Child survey respondents identified the best ways of keeping children safe as 'positive prevention'[71] behavioural responses, which make up 55.0% of the total (n=2993), compared to 'negative'[72] behavioural responses which make up only 20.3%. Responses relating to 'supervising children'[73] account for 7.8% and 'educational measures'[74] account for 6.7%. Miscellaneous responses[75] make up

6.0%, responses regarding 'structures and systems'[76] make up only 1.2%, and 3.0% of responses are 'don't know'. Overall, girls provided more responses than boys. A higher percentage of boys' responses refer to 'not hitting children' whereas a higher percentage of girls' responses referred to 'not humiliating children or calling them bad names'. This might be indicative of their respective 'gendered' experiences of discipline and punishment which were explored in Section 4.

Child survey respondents identify emotional issues much more than physical issues as things which make them not feel safe. In relation to the main things that make children not feel safe, the single most popular response for both girls and boys was 'sending children away' (20.2%, n=639 responses), followed by 'no love or care for children' (17.4%, n=549). Excluding the 20.2% of 'sending children away' responses, the remainder can be categorised as follows. Only 7.0% of the 3164 total responses refer explicitly to physical punishment (teachers hitting children - 6.4% and parents hitting children - 0.6%) whereas 40.0% refer to emotional issues[77]. Miscellaneous responses[78] account for 17.4% of the total and lack of knowledge or understanding[79] for 6.1%. 4.4% of responses refer to bad influences[80], 3.0% 'don't know' and 1.8% to lack of structures and services[81]. These findings are highly significant. Although rates of physical punishment are high, and although for child survey respondents who experience physical harm, the vast majority

[71] Love and care for children; Send them to school; Praise and encourage children; Provide for their wants and needs; Encourage children to speak out; Treat all children equally.
[72] Do not hit children; Do not humiliate children or call them bad names; Do not send children away from home.
[73] Keep under constant supervision; Keep children in the house.
[74] Educate parents on how to look after children; Teach them about our culture; People know and understand about what is acceptable and unacceptable behaviour towards children; Educate children on violence issues; People know and understand about child rights; Educate teachers on how to look after children.
[75] Make sure children behave properly; Spiritual or religious counselling; Other.
[76] Police patrols; Put in place systems and services to deal with child abuse cases; Have a child protection group / committee in community; Have child clubs / groups.
[77] No love or care for children; Parents humiliating children or calling them bad names; No time for children; Teachers humiliating children or calling them bad names; Children are not encouraged to speak out; Not treating children equally.
[78] Not sending children to school; Bullying (children hitting, humiliating or intimidating each other); Over-burdening children with household chores; Over-burdening children with other work; Fighting in the family; Other.
[79] Parents do not know how to look after children; People do not know and understand about child rights; People do not know & understand what is acceptable and unacceptable behaviour towards children; Teachers do not know how to look after children.
[80] Bad influence of other people; Alcohol is too easily available; Drugs are too easily available.
[81] No safe places for children to spend time; No child protection group / committee in community; No system or services in place to deal with child abuse cases; No child clubs / groups.

of reactions to this are negative, it does not appear to impact their sense of safety nearly so much as emotional harm. Violence prevention in Ghana, from the perspective of these boys and girls, therefore needs to strongly address positive child rearing and emotional well-being.
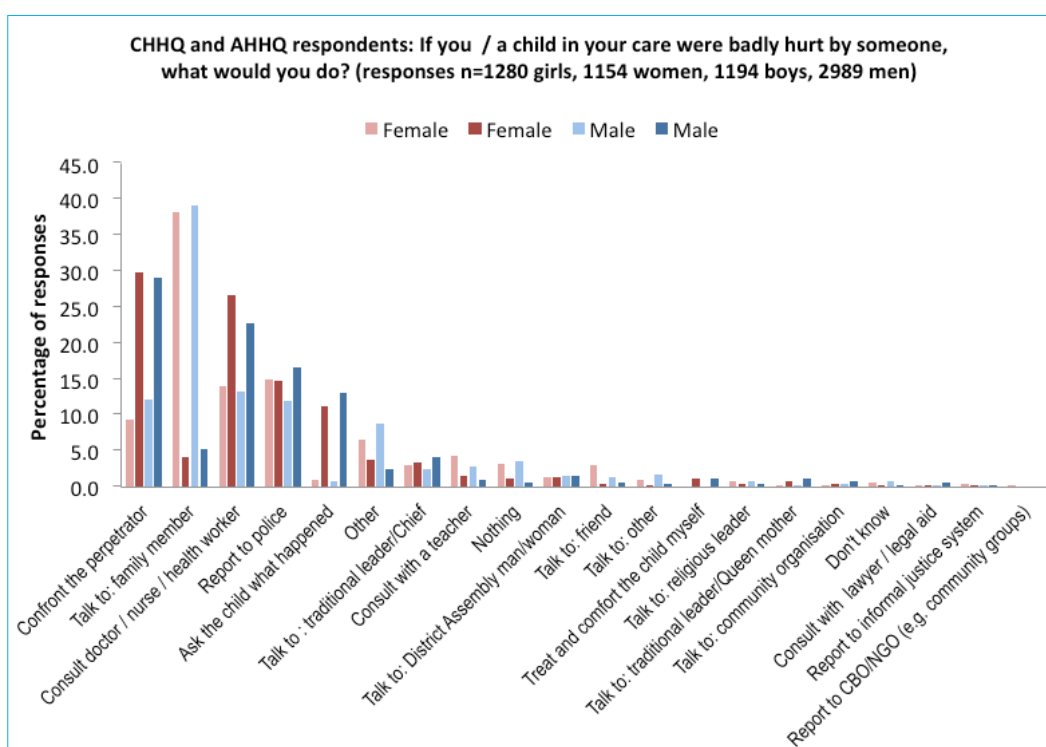
In general, in relation to child-rearing and protection, the child respondents in this survey do not appear to place much emphasis on services, systems and structures. The behaviour of adults (especially parents and teachers) and the emotional treatment of children rank much more highly. This may be because these children have had relatively little personal experience of services, systems and structures and/or because they understand that the biggest influences on child-rearing, both positive and negative, come from the adults in their immediate environments. This view is also borne out by other field research: 75% of children's FGDs (total n=75) identify 'parents' as preventing them from being harmed and 37% cite 'mothers', whereas only 1% cite 'government agencies'. For example, according to most children in the Upper West Region:

The mother provides and protects us from harm. Mothers provide food, clothes, money and other basic needs for our safety.

Most girls consulted in this region mention that the mother defends and protects them by confronting people who are harassing them and that their mothers often ensure that they sleep first before the mother sleeps, to ensure they are safe.

5.1.2 Responding in general

A child's first port of call when hurt appears to be a family member, in line with the general findings above. Children and adult survey respondents indicate that a family member would be expected to deal with the situation if they or a child in their care was badly hurt. The full responses are shown in the chart below. This places a large responsibility on family members to know what to do. In the face of this responsibility, however, adults appear to be more concerned with confronting the perpetrator than for example, getting medical help, reporting it to the police, asking the child what happened or treating or comforting the child themselves. Overall, 'informal' actions involving individuals and community structures (accounting for 54.6%, n=2985 of all responses) are more popular than 'formal' actions involving government services or structures (which only account for 38.0%, n=2077 of all responses).

CHHQ and AHHQ respondents: If you / a child in your care were badly hurt by someone, what would you do? (responses n=1280 girls, 1154 women, 1194 boys, 2989 men)

This reliance of children on family members is supported by other research findings, although teachers and Chiefs are also cited as key people who respond to or support children when they have been harmed: 48% of children's FGDs (total n=66) cite 'mother', 47% 'teachers', 41% 'parents', 23% 'father', 18% 'siblings', 15% 'self', 12% 'Chief' and 6% 'peers'. In relation to community structures, only 9% of children's FGDs cite 'police', 5% the 'Community Child Protection Committee or other community committee', 5% 'Assembly person' and 5% 'religious leaders'. In contrast, the 33 adult FGDs did not specifically highlight the role of mothers, but 39% of the adult FGDs cite 'parents' as responding to children who have been harmed, followed by 24% citing 'police', 21% 'other'[82] , 21% 'religious leaders', 18% 'community leaders', 12% 'Community Child Protection Committee' and - similar to the children's FGDs - 12% cite 'Chief'. This is not surprising given that children's first point of call is likely to be a family member or teacher and they may not be aware of who these adults then go to in order to take further action.

Usually girls who have been sexually abused may complain to their mothers who may forward complaints to the father upon which elders in the family will gather to deliberate on the next course of action. (Muslim religious leader, A/R)

Adult survey respondents generally feel that action will be taken in the case of sexual touching of children, but the results are far from unanimous and older children appear to be less protected than younger ones. The question was phrased as: 'If a child in this community under the age of 6 / between the ages of 7 and 14 / between the ages of 15 and 18 has their body or private parts touched, most often nothing will happen in response'. In relation to 15-18 year-olds, 50.7% (n=760) of adult respondents 'disagree' or 'strongly disagree' with this statement whereas a higher percentage 'disagree' or 'strongly disagree' in relation to children under 6 (66.3%, n=994) and in relation to children aged 7-14 (64.4%, n=966). 14.1% (n=211) 'agree' or 'strongly agree' that nothing will happen in the case of 15-18 year-olds. This is about twice the number of adult respondents who 'agree' or 'strongly agree' that nothing will happen in the case of both 7-14 year-olds (7.2%, n=108) and children under 6 (7.1%, n=106). In summary, attitudes towards sexual touching of older children aged 15-18 are significantly different compared to attitudes towards sexual touching of younger children. Presumably this is because older children are assumed to be sexually active and adults may lack the confidence to distinguish between consensual sexual touching and non-consensual touching (sexual abuse). An increased reluctance to intervene with older children might mean that some older children are at risk of inappropriate touching or sexual abuse going un-reported or being wrongly assumed to be consensual.

[82] This category includes specific individuals or groups in the community who respond to particular incidents such as World Vision and the 'herbalist'.

5.1.3 Existence of locally available services

Children and adults in the household survey identified the different places they can go in their community or nearby to deal with a case of a child who has been badly hurt (physically or sexually).

Service	% adult and child respondents (n=approx. 753 girls, 920 women, 745 boys, 578 men)		
	Exists	Does not exist	Don't know if it exists
Church or Mosque	91.7	6.7	1.6
Teacher or other school official	89.2	9.2	1.6
District Assembly man/woman	88.5	8.5	3.0
Doctor, nurse or other health worker	79.7	18.8	1.5
Traditional leader (i.e. Chief or Queen mother)	80.6	14.1	5.3
Police (general crime investigation)	62.5	36.0	1.5
Traditional healer	49.0	40.5	10.6
DOVVSU (Domestic Violence and Victim Support Unit) of Police	23.7	58.5	17.8
Lawyer / legal aid	19.4	70.0	10.6
Department of Social Welfare	18.5	66.6	14.9
Department of Community Development	12.8	67.4	19.9
Child protection committee (community-based)	11.9	73.6	14.5
Non-governmental organisation (NGO) or community-based organization (CBO)	11.6	70.9	17.5
Counselling service for children and families	11.4	73.9	14.7
Department of children	6.4	74.7	18.9
Community-based organisation or group that specialises in helping children who have experienced violence	5.9	78.5	15.5
Telephone hotline for children and families to report abuse and receive advice	5.9	80.0	14.1
Safe house or emergency shelter for children who have experienced violence	3.2	82.1	14.7

CHHQ and AHHQ respondents: Services which exist or do not exist locally to deal with a case of a child who has been badly hurt, (physcially or sexually) (respondents n=approx. 753 girls, 920 women, 745 boys, 578 men)

■ Exist ■ Not exist ■ Don't know if exist
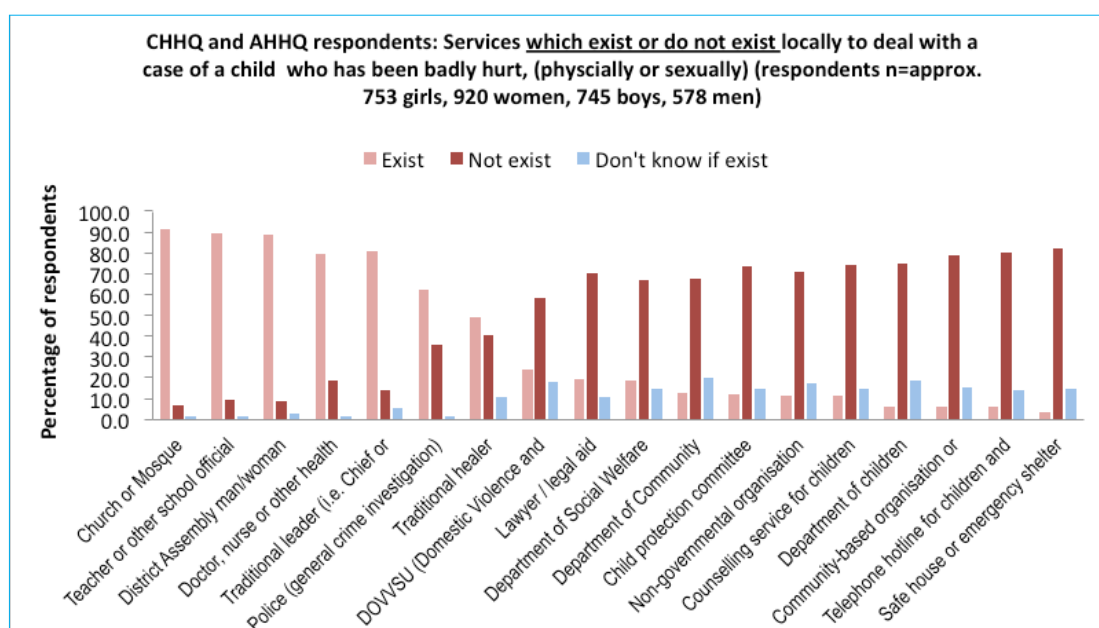
Not surprisingly, by far the majority of existing services appear to be general community structures (such as religious, educational, administrative, health and police bodies) **rather than specialised services for children who have been harmed** (such as DOVVSU, DSW, Community Child Protection Committee, specialised CBOs, hotlines and shelters). There are not huge differences between children's and adults' responses for services said to exist, but proportionally more adults than children cite: District Assembly person; traditional leader (i.e. Chief or Queen Mother); traditional healer; DOVVSU; lawyer /

legal aid; DSW; NGO or CBO. Proportionally more children than adults cite Community Child Protection Committee; safe house or emergency shelter for children who have experienced violence. See chart below. For each service - apart from 'traditional leader' - proportionally more men state that this doesn't exist compared to women, boys and girls. Proportionally more children than adults 'don't know' about services, and more girls than boys and more women than men 'don't know'. This is significant in that those most in need of service are less likely to know of their existence.

CHHQ and AHHQ respondents: Services which exist locally to deal with a case of a child who has been badly hurt, (physcially or sexually) (respondents n=approx. 753 girls, 920 women, 745 boys, 578 men)

■ Female ■ Female ■ Male ■ Male
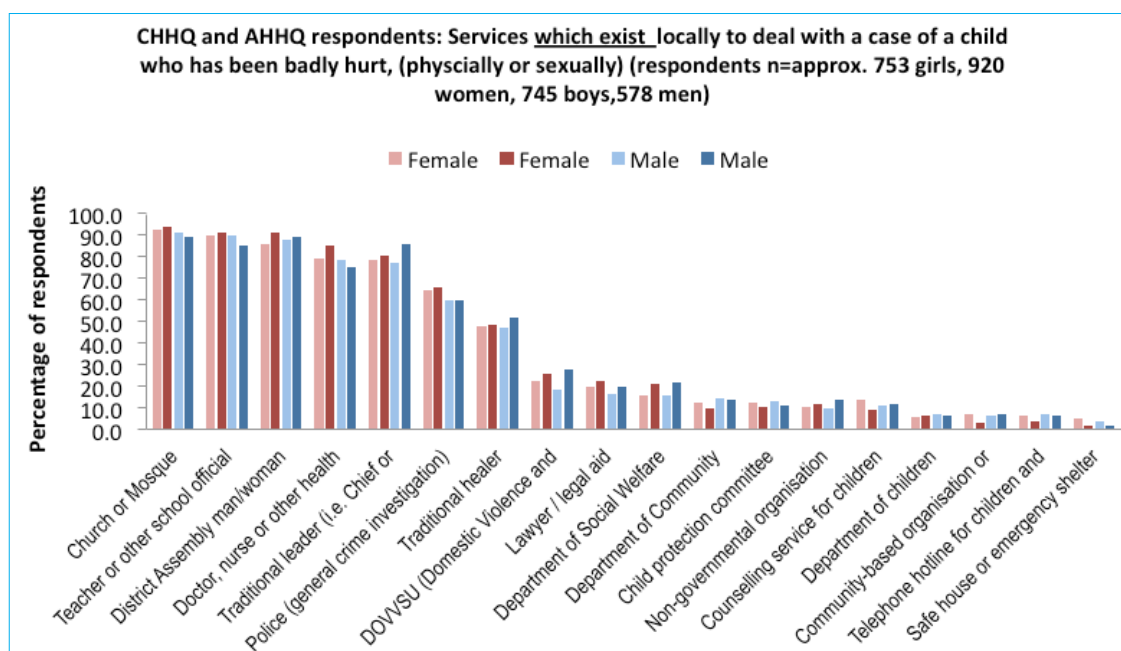
Of the services that are involved in child protection, the ones most frequently mentioned at the community level in FGDs[83] are the police, with references in 14% of adult and child FGDs (total n=99), followed by Chief (12%), religious leaders (10%), community leaders/ elders (8%) and Community Child Protection Committee (7%).

The police at the police barrier near the community protect children from harm by occasionally embarking on operations to arrest 'wee smokers'[84] by the riverside (whom children are afraid of) and at the game centres. Most often the grandmothers and mothers tip off the police to organise raids that will lead to the arrest of the 'wee smokers'. (Boys aged 10-17, urban, BA/R)

We feel safe when we know there is a police presence. We like walking near banks because we know a policeman is always stationed there who can protect us in times of trouble. The police sometimes patrol the streets and this makes children feel safe. (Girls, aged 13 -17, urban, E/R)

The DSW was mentioned by only two groups (adult women) and CHRAJ by one. The other agencies - the District Assembly, the Department of Women and the Department of Children - are only spoken about in interviews at the district level. The community level FGDs do not reflect the existence of certain child protection agencies identified in the household survey. For example, the Department for Community Development was not mentioned spontaneously in FGDs although 12.8% of the participants in the quantitative survey, when asked explicitly, said they have this Department represented in their communities.

5.1.4 Extent to which locally available services are used

Many of the most popular services are those which are also the least available: Section 5.1.2 on 'responding in general' gives an overview of the types of people and services community members spontaneously mention they are most likely to approach in response to child protection incidents. In addition, a follow-up question was asked in relation to the targeted survey questions about whether or not specific services actually exist locally: respondents were asked whether they have gone in the past - or would consider going in the future – to the services that exist in order to access help if a child were in serious trouble or badly hurt. The following results give a general overview of the services respondents feel most and least comfortable approaching. Interestingly, apart from health workers and the regular police, the most popular services are those which are more specialised in dealing with child protection issues, like DOVVSU, safe houses, Community Child Protection Committee, hotlines and specialised CBOs, even though in general these are the types of services which are the least prevalent in communities. It is positive that health workers and the regular police are popular, in spite of the gender discrimination highlighted in section 4.1.2 in relation to police response to child protection cases. However, if the child protection system in Ghana wishes to improve prevention and response to abuse by better exploiting the most prevalent existing community-level services (like churches, mosques, teachers, traditional leaders and Assembly persons etc.) then there is clearly a lot more targeted awareness, sensitisation and capacity building work needed with these services in order to improve the confidence of community members to approach them.

Of the services said to exist locally, the one which respondents feel most comfortable going to in order to seek help are doctor, nurse or other health worker (91.9% of relevant respondents[85]). **The ones which respondents feel least comfortable going to in order to seek help** are DCD (59.9% of relevant respondents would not go to this service). See the table and charts below for more detail and an overview of gender differences.

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[83] In relation to the question "who responds or provides support to children who have been harmed?"
[84] 'Wee' is the local word for marijuana. 'Wee smokers' refer to those who use marijuana frequently.
[85] i.e. respondents who stated the existence of these services in the first place.

% adult and child respondents who state existence of these services locally: those who would or would not seek help from these people if they or another child were in serious trouble or badly hurt (either physically or sexually)		
Service	Yes	No
Doctor, nurse or other health worker	91.9	8.0
Police (general crime investigation)	84.7	14.9
DOVVSU (Domestic Violence and Victim Support Unit) of Police	79.0	20.3
Safe house or emergency shelter for children who have experienced violence	74.7	25.3
Child protection committee (community-based)	72.0	26.3
Telephone hotline for children and families to report abuse and receive advice	68.9	31.1
Counselling service for children and families	66.6	32.2
Community-based organisation or group that specialises in helping children who have experienced violence	65.3	34.7
District Assembly man/woman	59.7	40.1
Teacher or other school official	59.5	40.3
Department of Social Welfare	58.7	39.2
Church or Mosque	58.3	40.5
Traditional leader (i.e. Chief or Queen mother)	57.9	41.5
Lawyer / legal aid	54.1	45.2
Department of children	51.3	47.1
Traditional healer	49.0	50.5
Non-governmental organisation (NGO) or community-based organization (CBO)	40.8	56.8
Department of Community Development	39.0	59.9

CHHQ and AHHQ respondents who state existence of these services locally: those who would or would not seek help from these people if they or another child were in serious trouble or badly hurt (either physically or sexually)

CHHQ and AHHQ respondents who state existence of these services locally: those who would seek help from these people if they or another child were in serious trouble or badly hurt (either physically or sexually)

CHHQ and AHHQ respondents who state existence of these services locally: those who would not seek help from these people if they or another child were in serious trouble or badly hurt (either physically or sexually)
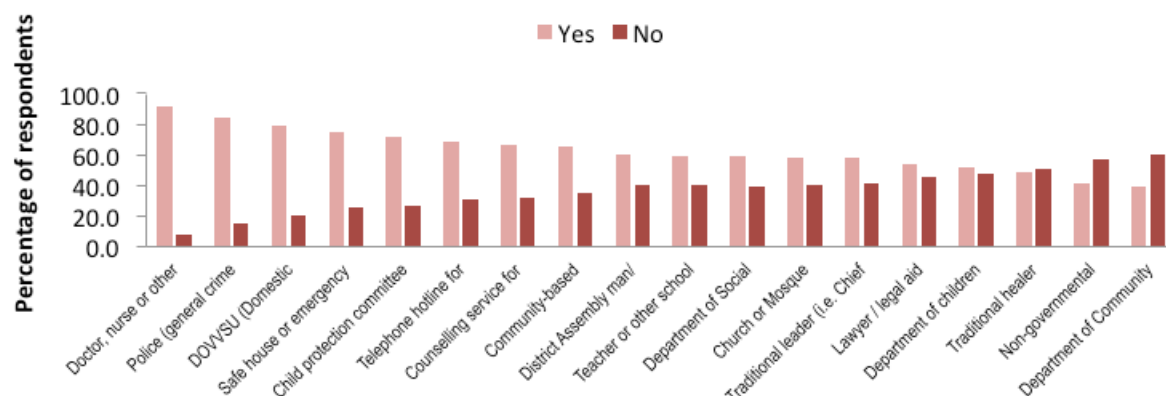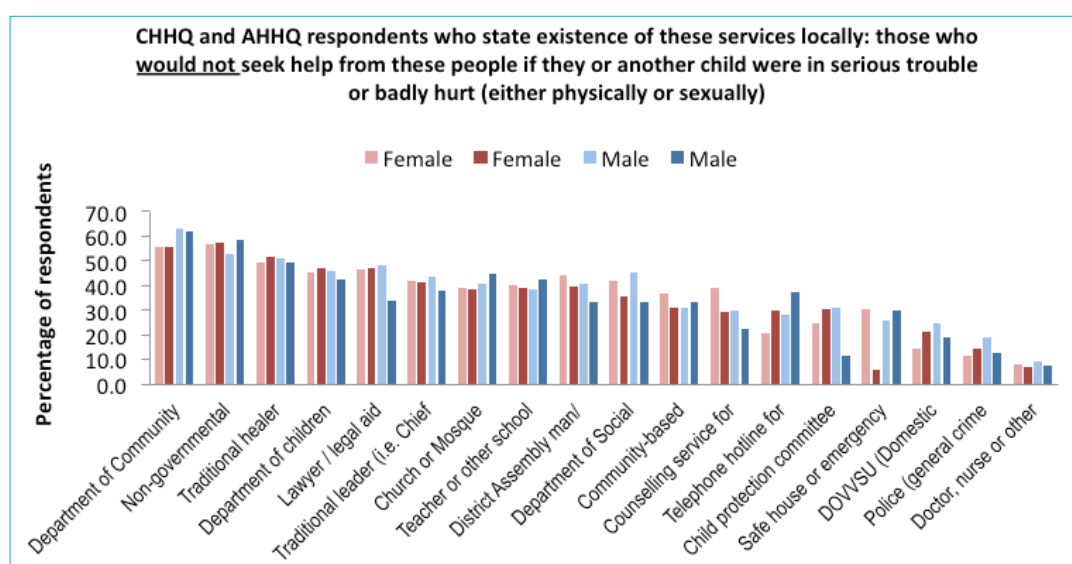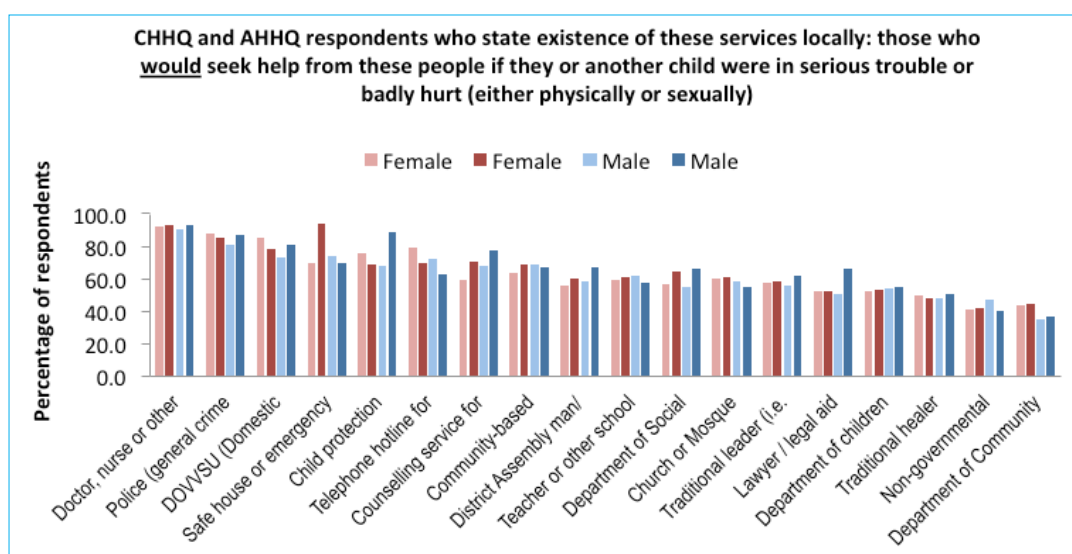
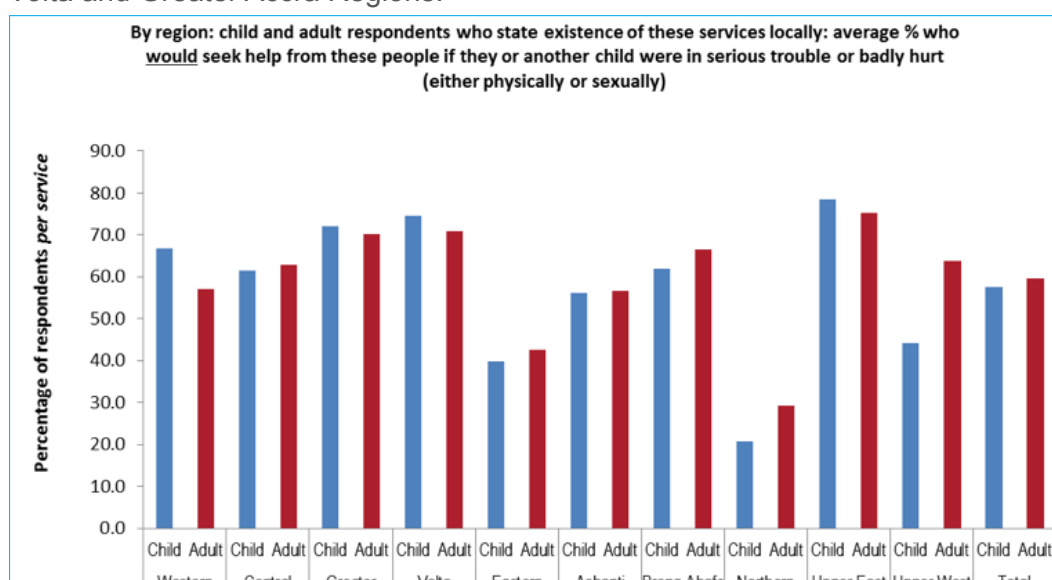**Analysis by region:** In general there appears to be less willingness to seek help from services in the Eastern, Northern and Ashanti Regions and greater willingness to seek help in the Upper East, Volta and Greater Accra Regions.

By region: child and adult respondents who state existence of these services locally: average % who would seek help from these people if they or another child were in serious trouble or badly hurt (either physically or sexually)

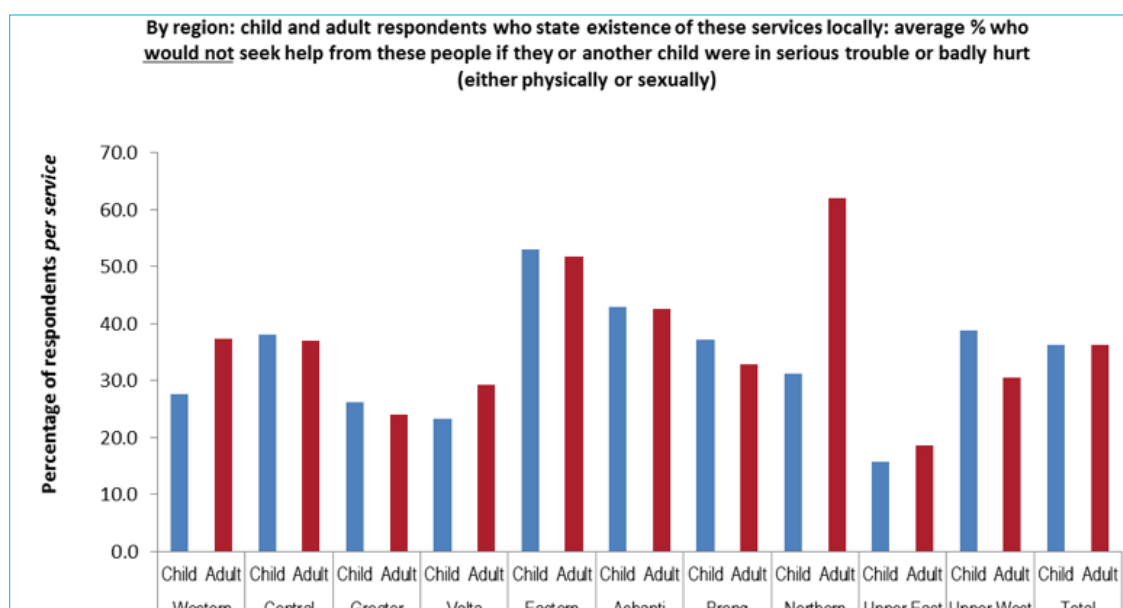By region: child and adult respondents who state existence of these services locally: average % who **would not** seek help from these people if they or another child were in serious trouble or badly hurt (either physically or sexually)

In spite of a general willingness revealed by the household surveys to seek help in theory from services where these exist (an average of 62.9% of relevant adult and child respondents state they would approach services compared to 36.3% who state they would not), **what comes through clearly from all regions in the qualitative research is that, in reality, issues related to children are often handled between families or, if resolution is not achieved, then these are taken to Chiefs for mediation.**

Hence there is likely a limited relationship between communities and government agencies in practice. There appears to be a lack of awareness of, and information relating to, the role of different services and a lack of faith in their ability to resolve issues. Most of the departments and agencies with a mandate to work for the protection of children are observed to be concentrated mostly in the urban areas and have little or no presence in the rural communities. Most FGD respondents in the rural communities are largely unaware of the existence of these services. This was also reported in the Mapping and Analysis Study which states that communities consider their own ways of resolving problems to be preferable to approaching state services, that the 'formal' system is considered unfamiliar and/or intimidating to children and

families, and that families may think of it as a community 'betrayal' to take matters to the government. The Mapping and Analysis Study found that where services do exist (usually in urban centres), officers have limited ability to respond, and service provision is costly and time-consuming.

The Chief is considered to have more authority in a community than government representatives, and matters resolved by Chiefs tend to result in more sympathy with the victim/survivor and stronger community monitoring and support.[86]

• *The Chief's palace is one of the places that ensure that children are protected. Because everyone knows that if you do something wrong against your child, you would be sent to the Chief's palace for you to answer questions. This measure has reduced the rate of abuse of children in the community. (Community Child Protection Committee, rural, N/R)*

• *In this community we see ourselves as one people, so when there are child cases we resolve them ourselves at our family levels and sometimes send it to the Chief's palace for the case to be settled. We are always satisfied with how our cases are settled at the Chief's palace. (Women aged over 50, rural, N/R)*

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[86] Child Frontiers for UNICEF Ghana, Mapping and Analysis of Ghana's Child Protection System, 2012.

In eight of the regions there were examples of Chiefs taking appropriate actions to respond to child protection concerns. In three communities some respondents were of the opinion that the Chiefs were inactive or did not necessarily prioritise the needs of the child in certain situations. Finally, as has been outlined in section 4.1.2, due to discriminatory gender norms, some respondents note that the sympathy of Chiefs and traditional leaders sometimes lies with men rather than women or girls.

5.1.5 Why services are used or not used

Most of the relevant respondents state they would use services because they think they will be of help. As shown in the table below, the single most popular answer across all groups of respondents as to why they would seek help from particular services is very general: 'know they can help', accounting for 56.7% (n=2447) of total responses. Overall, 'general'

reasons relating to trust and familiarity make up most of the responses. Only a relatively small percentage refer to specific, practical issues such as opening times, infrastructure, free services and keeping information confidential. Proportionally more children than adults state 'know they can help' whereas more adults than children state 'they are part of the community'.
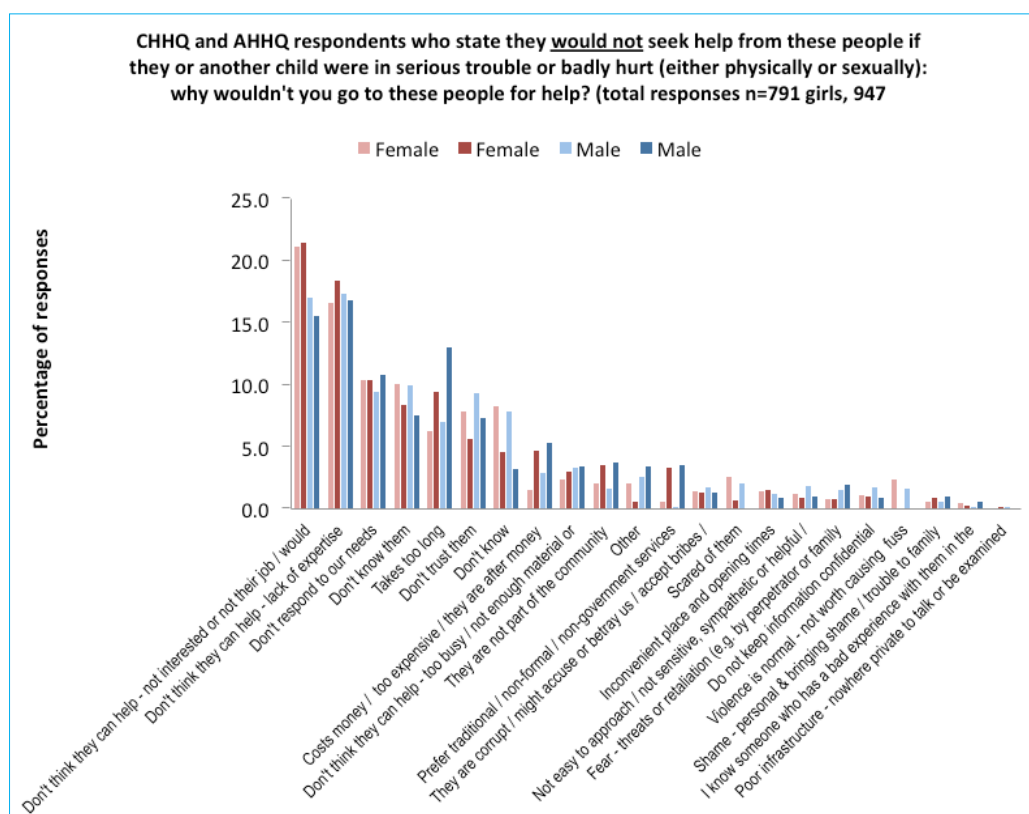
CHHQ and AHHQ respondents who state they would seek help from these people if they or another child were in serious trouble or badly hurt (either physically or sexually): why would you go to these people for help?										
	Female				Male				Total	
	Child		Adult		Child		Adult		#	%
Number (#) and percentage (%) of responses [MOP]	#	%	#	%	#	%	#	%	#	%
Know they can help	617	60.3	770	55.6	595	59.9	465	50.9	2447	56.7
Trust them	131	12.8	154	11.1	131	13.2	128	14.0	544	12.6
They are part of the community	79	7.7	158	11.4	77	7.8	124	13.6	438	10.2
Know them	88	8.6	123	8.9	87	8.8	91	10.0	389	9.0
Easy to approach / sensitive, sympathetic & helpful	26	2.5	49	3.5	29	2.9	30	3.3	134	3.1
Good infrastructure - can talk or be examined in private	12	1.2	30	2.2	15	1.5	15	1.6	72	1.7
Convenient place and opening times	12	1.2	28	2.0	11	1.1	11	1.2	62	1.4
Other [87]	15	1.5	15	1.1	15	1.5	13	1.4	58	1.3
I know someone who has already asked them for help in the past	10	1.0	22	1.6	12	1.2	11	1.2	55	1.3
They keep information confidential	14	1.4	14	1.0	7	0.7	14	1.5	49	1.1
Services are free	10	1.0	15	1.1	12	1.2	10	1.1	47	1.1
Don't know	10	1.0	6	0.4	2	0.2	1	0.1	19	0.4
TOTAL	1024	100.0	1384	100.0	993	100.0	913	100.0	4314	100.0

[87] Child survey 'other' responses: Not specified x4; everyone needs help x4; they will give me money x2; to pray x2; spiritual sickness x2; situation is serious x2; if perpetrator is in school x 2; if perpetrator is my church member x1; I was treated badly x1; can speak to parents on behalf of children x1; necessity to involve them x1; no other means x1; prevent disunity and chaos x1; protection from God x1; seek permission to stay out of class x1; to avoid punishment x1; because abuse is criminal in Ghana x1; I don't retaliate x1; not right to hurt child x1. Adult survey 'other' responses: other (unspecified) x13; so they know what is happening x2; if the perpetrator in my church or school then I will report to them x2; if it happened in the school x1; only person there x1; it is an assault case x1; they will prosecute him x1; culprit must face the law x2; can't take law into my own hands x1; to avoid trouble x1; unity x1; my choice x1; we all need God x1.

A lot more reasons are given as to why respondents would not seek help from services compared to reasons why they would. Reasons relating to lack of faith in their ability to respond appropriately account for 49.5% (n=1554) of responses in total[88]. General lack of trust or familiarity accounts for 23.1% (n=726) of responses[89]. Practical reasons account for 14.7% (n=462) of responses[90]. Other reasons account for 6.6% (n=207) of responses[91]. 6.0% (n=188) of responses are 'don't know' (proportionally more children than adults). The gender differences in responses are shown in the chart below.

CHHQ and AHHQ respondents who state they would not seek help from these people if they or another child were in serious trouble or badly hurt (either physically or sexually): why wouldn't you go to these people for help? (total responses n=791 girls, 947

The research further reveals that the way in which child protection concerns are handled by communities depends on their capacity to respond, which in turn is influenced by several interlinking factors such as awareness of response options, power structures and relationships within communities, gender dynamics, social norms and trust in government agencies etc. The research found that most cases are not reported to the authorities in order to keep the peace in the family and the community, often at the expense of the child. For example, in most regions, staff at District Social Welfare offices, magistrates, police and other government authorities state when interviewed that very few cases of child abuse, and especially sexual abuse, are officially reported in their constituencies:

• *Some cases are said to be reported to government institutions when the involved parties cannot come to a settlement. The majority are settled at home or through traditional leaders and Assembly persons as mentioned previously.*

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[88] Don't think they can help - not interested or not their job / would only advise and not take action; don't think they can help - lack of expertise; don't respond to our needs; don't think they can help - too busy / not enough material or human resources.

[89] Don't know them; don't trust them; they are not part of the community; they are corrupt / might accuse or betray us / accept bribes / team up with perpetrators; scared of them; do not keep information confidential; I know someone who has a bad experience with them in the past.

[90] Costs money / too expensive / they are after money; takes too long; inconvenient place and opening times; not easy to approach / not sensitive, sympathetic or helpful / might insult us; poor infrastructure - nowhere private to talk or be examined.

[91] 'Other' (not specified); prefer traditional / non-formal / non-government services; far - threats or retaliation (e.g. by perpetrator or family members); violence is normal - not worth causing fuss; shame - personal & bringing shame / trouble to family.

• In other cases families are said to prioritise protecting children from the stigma and shame of sexual abuse by not reporting cases.

People avoid reporting such cases in order to protect the dignity of the girl; this is to ensure that she can find someone to marry her when she is older. (KIIs from DOVVSU and DSW, E/R and V/R)

• On the other hand, these same informants say families sometimes exploit such cases to their advantage, bargaining for compensation while disregarding the need for justice or rehabilitation for the child.

  – *Girls get raped within the community and parents normally settle cases by collecting money from perpetrators. (Girls, aged 13-17, urban, N/R)*

• In yet other cases it would appear that the 'tipping point' that determines whether people report child abuse, is not the welfare of the child but the fear that other people in the community may be accused or become implicated in the case, especially in rural communities where people see themselves as a family. For this reason, communities tended to report extreme cases that are likely to result in death or a severely injured child coming to the attention of the authorities.

In all regions the research identified a lack of resources amongst relevant government agencies as seriously affecting the provision of support and follow-up to children who have experienced violence and abuse. See section 5.6.1 for more details.

Financial constraints were also identified as one of the barriers that prevent community members themselves from intervening to protect children. In the case of abuse or trafficking, when someone in the community intervenes to protect or rescue a child, the child temporarily becomes the responsibility of that individual. This poses a challenge in situations where that individual may not have enough money to offer this kind of support. The extent of the help offered by community members is limited by their resources and the length of time they are expected to accommodate a child.

The research also revealed distrust of institutions such as the police, District Assemblies and judiciary across the country. For example, although the police are amongst the most frequently mentioned agencies, and although the survey respondents indicate a relatively high level of comfort in approaching them, perceptions of the police and the judiciary at the community level are not always positive. This lack of confidence in the police is sometimes attributed to claims that they extort money, intimidate people and delay prosecution. For example, people in both rural and urban areas in the Upper West region say they are generally apprehensive about the presence of the police and, as a result, most cases involving child abuse and other criminal cases are often not reported to the police - especially in the rural areas.

If you send your matter to the police, they will chop all your money, waste your time and at the end you will see nothing. (Middle-aged man, UW/R)

The police delay prosecution of cases brought before them and often engage in 'go come, go come' tactics. (Adult FGD participants, UW/R)

Lack of information and traditional attitudes also affect community child protection capacity. It was found in the FGDs and KIIs that the majority of community members are not clear what constitutes a violation against a child. Defilement, for instance, is not usually given significant attention. There is a belief that such abuses are due to 'normal human weakness' and should be forgiven, especially when one might need to seek forgiveness, in turn, from the perpetrator or his family in relation to a possible unrelated future incident. This 'forgiving' attitude is symptomatic of the tendency for people, especially in rural communities, to prioritise community cohesion at all costs, including the welfare of individual children. It also emerged from the research[92] that obvious and visible physical injury to a

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[92] For example in the national synthesis workshop in April 2013.

child (such as large bruises and bleeding) often marks a threshold for adults to intervene to support a child. Emotional disturbance and other signs are not nearly as likely to evoke a response on the part of parents or other adults, including service providers. This is likely due to a lack of knowledge and understanding of the full range of indicators of violence, abuse and exploitation of children and how to interpret the less tangible ones relating to emotion and behaviour.

5.2. Responding to offences and crimes committed by children

Summary

- **Responses vary significantly**, depending on whether the case is serious or minor and whether it was committed by a boy or a girl.

- **In relation to the 'formal' system, the DSW, Police/DOVVSU and the judiciary** are the three main actors supposed to work together when a child is in contact or in conflict with the law. 'Formal' responses are much more common in relation to serious rather than minor offences, for both boys and girls.

- **In practice there are many obstacles in the formal system: the diversion system** functions inadequately; the police commonly avoid dealing with juvenile cases or treat children as adults; children experience corporal punishment by police and detention with adults due to lack of child-specific facilities; there is a lack of functional remand homes and the ones which exist are of poor quality; support services for the rehabilitation of children in conflict with the law are fairly weak and hampered by lack of resources.

- **Given the limitations of the formal system, most communities try to solve cases without them reaching the courts.** However, 'informal' processes may be unregulated and not respecting of human and child rights standards and principles.

- **Physical violence** (by community members or unofficially by police) is significantly more common as a response to minor cases than to serious cases and this is true for offences committed by both boys and girls – although overall boys are proportionally more likely than girls to experience corporal punishment. There is a sexual element to a few of the punishments for girls which is absent in relation to punishments for boys.

- **Girls who commit either serious or minor offences are more likely to be subject to child-specific procedures** whereas boys who commit either serious or minor offences are more likely to be subject to adult-specific procedures. This may be because boys are assumed to be more 'robust' and are therefore more likely to be treated as adults compared to girls.

- **Compared to actual responses in practice,** survey respondents would prefer for children committing both serious and minor crimes to be dealt with more through 'non-formal' and traditional procedures than through the 'formal' justice system, and more through child-specific rather than through adult-specific procedures. However, there is still a relatively significant proportion of both child and adult respondents who believe in 'punitive' rather than 'restorative' practices, even in theory, and in practices which violate child rights, such as violence and other humiliating measures. For example, some respondents believe that physical violence is an effective response to serious crime committed by children and that it should be used more in practice than it already is.

5.2.1 Overview

In relation to the 'formal' system, the DSW, Police/DOVVSU and the judiciary are the three main actors that are supposed to work together when a child is in contact or in conflict with the law. The role of the police is to bring cases to court, the DSW is there to represent the interests of the child, and the juvenile court is presided over by the Magistrate. All three have a role to play and require each other's input to resolve cases and make decisions. When non-criminal cases involving children are brought to the police, they usually refer them to the DSW. In reality, many cases of children in conflict with the law, particularly 'minor' cases, are resolved through 'informal', community-based responses.

The Mapping and Analysis Study notes that the Juvenile Justice Act (2003) calls for diversionary measures to promote reconciliation of juvenile offences without resorting to the formal justice system. As the first point of contact with the formal justice system, police have broad discretionary powers to divert children at the earliest stage by issuing an informal or formal caution, or referring the child to a Child Panel. The number of Child Panels has expanded in recent years, but they are still not fully functioning. Also, there is no clear guidance as to what stage the decision to divert should be made and there are no clear referral mechanisms between the Courts and the Child Panels. Although court-annexed mediation services are in place in most districts, these are reportedly not being used in juvenile cases. The study found concerns in all of the research sites that police sometimes hold children in police cells for one or two days as punishment and then release them without charge. This situation does not appear to have changed since the Mapping and Analysis Study was published in 2012.

In relation to the functioning of the Child Panels, the qualitative research found that although the District Assemblies have the mandate to oversee the establishment of the Child Panels and ensure their operations in collaboration with the DSW and the Department of Children, this is not being done effectively because it does not appear to be a priority for most of the assemblies. In the Ashanti Region for example, it was reported that because no dedicated funds have been made available for the operations of the Panels, their activities have been discontinued in most of the districts in the region.[93]

In the light of the inadequately functioning diversion system, the absence of child-specific facilities for the detention of children in police stations, and the poor quality or lack of functional remand homes, police are in a dilemma as to how to deal with children when they commit offences. This is common across the country. In the Ashanti Region, police admitted that given the limited resources to handle such cases, coupled with their workloads, they like to avoid children's cases as much as possible. When they cannot be avoided, however, one of the strategies police adopt - and this was reported in almost every region by different respondents - is to inflate the child's age so that they can be treated in the same way as adult offenders and presented for trial as adults. This situation is exacerbated by the lack of birth registration of many children which means that their true ages cannot readily be determined. Similar accounts came from the Central Region: when parents are unable to produce birth certificates and the child can visually pass for 18 years, the child is forced to falsify his/her age.

This combination of obstacles means that children in conflict with the law may be subject to all manner of treatment. At the regional police station in the Ashanti Region, staff said that given the lack of child-specific facilities for the unit, and given that they cannot detain children in adult cells:

- *We are sometimes compelled to take such children in to our own homes in transport*

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[93] Ministry of Local Government, Ghana (2013, not published): Report on the assessment of child panels and analysis of some key juvenile justice indicators.

arranged at our own expense. (Police, regional police station, Ashanti Region)

- *The police station is one of the places we do not like going. If you are a child and you are taken to the police station in connection with theft, the police will use the handle of the gun to beat you. We know of some teenage boys who are sometimes detained in the police cell when they are taken there in connection with theft. (Boys aged 7 to 10, urban, UE/R)*

- *Communities do not have remand homes for children who come into contact with the law and no correctional homes where they can serve terms. The police are forced to put the children in adult jails to wait for their sentences. When juvenile cases are called they are tried in the open court. We are not informed early enough to investigate the case before going to court. Child Panels have been instituted but are not working because of shortage of funds. On the days of the Court sitting, allowances were to be paid to the Panels but because the allowances were not paid the Panels did not attend. (DSW informants, V/R)*

The Mapping and Analysis Study also found that support services for the rehabilitation of children in conflict with the law are fairly weak and that the time required to meet court requirements leaves probation officers with limited capacity for interaction with children and family and they are hampered by a lack of resources for travel. Beyond mediation and

legal aid there are few NGOs working with child offenders.

Given the limitations of the 'formal' system, most communities try to solve cases without them reaching the courts. However, 'informal' processes may be unregulated and not respecting of human and child rights standards and principles. This makes children susceptible to dangers such as lynching - as was the case in some of the research communities including those in the Brong Ahafo and Western Regions. In the urban community (W/R), children in conflict with the law are said by various respondents to be beaten with canes by parents or barrier police, made to kneel down with their hands lifted up (in some cases in the sun or on small pebbles), or are put in 'counter backs'[94] at police stations for a minimum of two nights. Respondents said that these harsh methods prove ineffective because the children end up repeating the same offences. Further examples of typical responses for serious and minor offences are detailed below.

5.2.2 Typical responses in practice for serious and minor cases

The research identified a wide range of responses, both 'formal' and 'non-formal', and both child- and adult-specific. When categorised and analysed, significant differences appear depending on whether the case is serious or minor and whether it was committed by a boy or a girl.

According to child and adult survey respondents: typical responses in practice to children committing 'serious' and 'minor' offences (% of relevant child and adult responses) [95]				
Action taken	**'Serious' cases**		**'Minor' cases**	
	Boys	**Girls**	**Boys**	**Girls**
Analysis by 'formal' / 'non-formal' system procedures				
'Formal' justice system[96]	60.0% (n=1004)	48.1% (n=577)	21.7% (n=341)	10.9% (n=134)
'Non-formal' or 'traditional' processes[97]	31.0% (n=519)	28.8% (n=345)	65.4% (n=1025)	67.0% (n=821)
Either 'formal' or 'non-formal'[98]	1.6% (n=26)	1.5% (n=18)	4.0% (n=63)	4.2% (n=52)
Analysis by child- or adult-specific procedures				
Child-specific procedures	43.5% (n=108)	51.9% (n=67)	43.1% (n=25)	57.9% (n=11)
Adult-specific procedures	56.5% (n=140)	48.1% (n=62)	56.9% (n=33)	42.1% (n=8)
Single most popular response[99]				
Arrested	37.3% (n=624)	33.6% (n=403)	/	/
Corporal punishment	/	/	24.4% (n=382)	/
'Told off'	/	/	/	27.0% (n=331)
Physical violence				
Physical violence[100]	15.5% (n=259)	10.9% (n=131)	24.5% (n=384)	18.4% (n=226)

[95] Please note that the child and adult findings are not directly comparable as child respondents were asked about what happens 'in general', whereas adult respondents were asked about specific cases that have happened in the last year.

[96] Arrested / arrested and released without trial; sent to adult prison; sent to juvenile detention centre; formal warning by police or court; told off by police (informal); tried in formal adult court; case is ongoing: arrested & on remand/in pre-trial detention; case is ongoing: arrested and released on bail; tried in formal child-specialised court; community service ordered by formal court.

[97] Corporal punishment in the community; told off by parents/family/settled at home; paid reparation to victim(s); told off by traditional leader; traditional or informal justice hearing for adults; killed; informal response first; if this doesn't work then formal response; traditional or informal justice hearing specialised for children; sent away from the community to live with relatives/friends elsewhere.

[98] Counselling and rehabilitation by local group/NGO; mediation/reconciliation held with victim(s).

[99] Refers to percentage of the measures which explicitly refer to either adult-specific or child-specific procedures. However, there is no way of telling whether the other measures (which make up the majority of responses) are aimed at adults, children or both.

[100] Serious offences for boys: corporal punishment, killed, cut with knives, mob action, chained, and 'soldier put children in freezer and covered it'. Serious offences for girls: corporal punishment, 'beats her to death or burn her', 'cut of private parts/ cut with knife', 'strip the girl naked', 'hot metal is used', 'hard labour/extra work', 'put pepper in eyes', 'abortion by parents'. Minor offences for boys: corporal punishment, 'strip them naked, 'burn child with tyre'. Minor offences for girls: corporal punishment (n=224), 'insert finger into private parts' (n=1) and 'give them hard work to do' (n=1).

Unsurprisingly, 'formal' responses are much more common in relation to serious rather than minor offences. This is true for offences committed by both boys and girls. This is perhaps to be expected as 'minor' cases are often more easily resolved at family and community levels. This is supported by findings from the qualitative research which suggests that state agencies are generally only called upon when 'serious' crimes are committed or when informal settlements do not produce desired results.

Common juvenile cases that occur are petty theft, whereby children steal fruit, foodstuffs and fowls; such cases are usually resolved within the community. (FGDs with men, rural, BA/R)

Community members hardly report incidents to the police. All issues are handled by the chief. (Men aged 25-40, UW/R, urban)

The tendency to go the police as a last resort may appear to be at odds with other survey findings which reveal that 84.7% of relevant adult and child respondents who have a police unit in their communities say that they would go there if they needed help. This discrepancy may indicate that even though in theory people feel that the option of going to the police is available to them, they prefer to put off going to the police until they have no other choice.

Physical violence is significantly more common as a response to minor cases than to serious cases and this is true for offences committed by both boys and girls – although overall boys are proportionally more likely than girls to experience corporal punishment. In general it appears that serious cases are more likely to be dealt with by the 'formal system' whereas minor cases result in more corporal punishment (by both community members and unofficially by police) and other 'non-formal' responses. This is consistent with the anecdotes about corporal punishment reported in the qualitative research (see e.g. section 5.2.1) and with findings in relation to the question 'if a child steals money, harsh physical punishment is a good response' - with which 33.0% (n=989) of child and adult respondents agreed. Corporal punishment is noted particularly by child survey respondents.

Some of the FGD participants gave examples of taking children to the barrier police, to school teachers and religious leaders for them to be disciplined or caned, this was particularly apparent in the Western Region. This is usually described in relation to correcting bad behaviour rather than as a response for a minor crime, but there is likely to be some overlap. When describing different relationships between community, religious and government actors, a popular characteristic (identified by 22 child FGDs

and 32 adult FGDs) is collaboration between actors 'to control and discipline children' which accounts for 14% out of a total of 28 mentions of collaboration by child FGDs and 20% out of a total of 86 mentions by adult FGDs.

We have strong relationships with our religious leaders and we are guided by religious principles in our parenting. Parents complain and take challenging children to religious leaders for guidance, counselling and prayers. (Various adults, C/R)

According to the household survey responses, there appears to be a sexual element to a few of the punishments for girls which is absent in relation to punishments for boys. This is despite the fact that, in general, physical violence for offences committed by girls accounts for a lower percentage than for offences committed by boys.
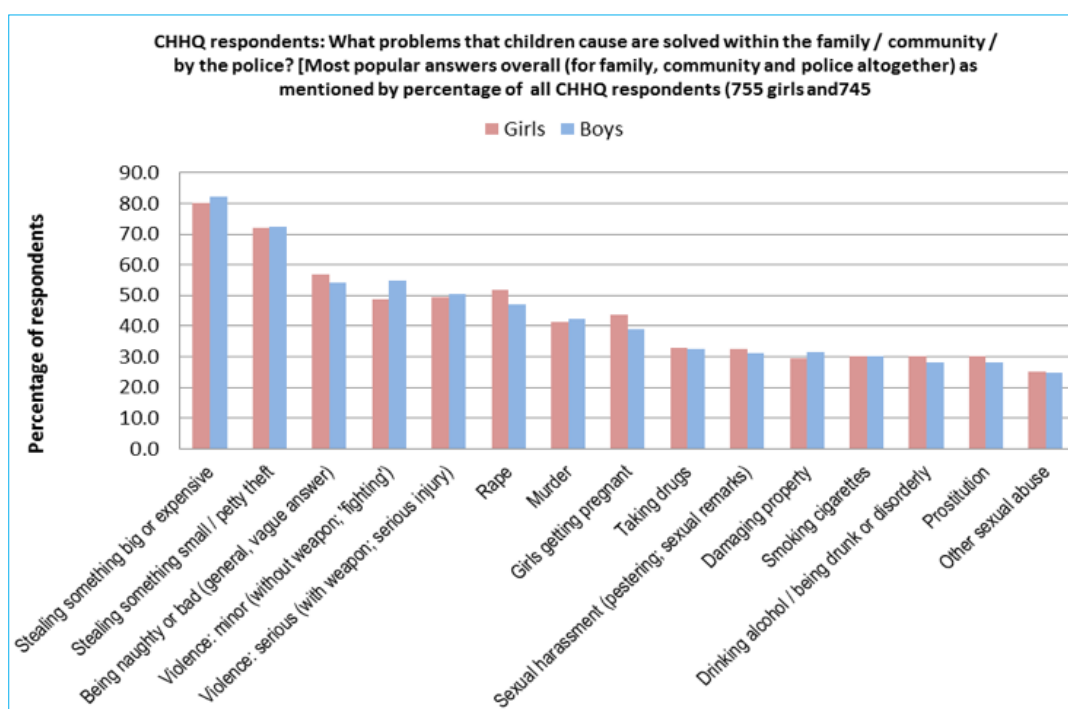
Proportionally more responses indicate that girls who commit either serious or minor offences are more likely to be subject to child-specific procedures whereas boys who commit either serious or minor offences are more likely to be subject to adult-specific procedures. This may be because boys are assumed to be more 'robust' and are therefore more likely to be treated as adults compared to girls.

Children in the household survey were asked what problems that children cause are solved within the family, community (e.g. by the Chief) or by the police. The most common 'problems' spontaneously mentioned by children in general are shown in the table and chart below.

CHHQ respondents: What problems that children cause are solved within the family / community / by the police? [Most frequently cited answers overall by percentage of respondents]				
	Girls	**Boys**	**Total**	
Number (#) and percentage (%) of respondents	%	%	#	%
Stealing something big or expensive	80.3	82.1	1218	81.2
Stealing something small / petty theft	71.9	72.3	1082	72.1
Being naughty or bad (general, vague answer)	56.8	54.2	833	55.5
Violence: minor (without weapon; 'fighting')	48.9	54.9	778	51.9
Violence: serious (with weapon; serious injury)	49.4	50.3	748	49.9
Rape	51.9	47.1	743	49.5
Murder	41.5	42.3	628	41.9
Girls getting pregnant	43.7	38.9	620	41.3
Taking drugs	32.8	32.6	491	32.7
Sexual harassment (pestering; sexual remarks)	32.5	31.1	477	31.8
Damaging property	29.5	31.7	459	30.6
Smoking cigarettes	30.2	30.1	452	30.1
Drinking alcohol / being drunk or disorderly	30.3	28.3	440	29.3
Prostitution	30.3	28.1	438	29.2
Other sexual abuse	25.2	24.8	375	25.0

CHHQ respondents: What problems that children cause are solved within the family / community / by the police? [Most popular answers overall (for family, community and police altogether) as mentioned by percentage of all CHHQ respondents (755 girls and 745

A few child survey respondents also mentioned some 'other' responses as follows: mostly dealt with at family level - family disputes, inappropriate touching; mostly dealt with at community level - cursing, incest, witchcraft, land disputes (although in two cases these were also dealt with by the police); mostly dealt with by police - children refusing to go to school, bribery, gambling, arson (although in one case this was also dealt with by the community); mixed responses - 'insulting' (dealt with by family and community equally); sexual misconduct (family or community); abortion (family, community, police); and suicide (community and police). For more detail on which types of specific cases are resolved within the family, community or by the police, see sections 5.4, 5.5 and 5.6 on families, communities and government agencies respectively.

5.2.3 Preferred responses for serious and minor cases

Adult and child survey respondents were asked what they think should happen in theory to children who commit serious and minor offences. These findings regarding the 'preferred' treatment of children are compared in the table below to the findings for what 'actually' happens in practice.

According to child and adult survey respondents: preferred responses in theory to children committing 'serious' and 'minor' offences (% of relevant child and adult responses) [101]				
Action	**'Serious' cases**		**'Minor' cases**	
	Preferred	**Actual[102]**	**Preferred**	**Actual [103]**
Analysis by 'formal' / 'non-formal' system procedures				
'Formal' justice system[104]	51.6% (n=2402)	54.1%	8.3% (n=345)	16.3%
'Non-formal' or 'traditional' processes [105]	37.1% (n=1727)	29.9%	79.6% (n=3319)	66.6%
Either 'formal' or 'non-formal' [106]	7.0% (n=324)	1.6%	8.3% (n=347)	4.1%
Analysis by child- or adult-specific procedures [107]				
Child-specific procedures	60.6% (n=340)	47.7%	83.8% (n=57)	50.5%
Adult-specific procedures	39.4% (n=221)	52.3%	16.2% (n=11)	49.5%
Single most popular response				
Arrested	36.6% (n=1702)	35.5%	/	/
'Told off'	/	/	37.5% (n=1564)	24.3%
Physical violence				
Physical violence [108]	16.3% (n=756)	13.2%	21.2% (n=884)	21.5%

[101] Please note that the child and adult findings are not directly comparable as child respondents were asked how they think children under 18 should be treated in general, whereas adults were asked if it was their own child who committed an offence, what action they would want taken and by whom.

[102] The questions in relation to preferred responses are not gender-disaggregated. Therefore, in order to compare the results here to the findings in section 5.2.2 above (typical responses in practice for serious cases), an average percentage has been taken for typical responses in serious cases committed by both boys and girls.

[103] The questions in relation to preferred responses are not gender-disaggregated. Therefore, in order to compare the results here to the findings in section 5.2.2 above (typical responses in practice for serious cases), an average percentage has been taken for typical responses in serious cases committed by both boys and girls.

[104] Arrested / arrested and released without trial; sent to adult prison; sent to juvenile detention centre; formal warning by police or court; told off by police (informal); tried in formal adult court; case is ongoing: arrested & on remand/in pre-trial detention; case is ongoing: arrested and released on bail; tried in formal child-specialised court; community service ordered by formal court.

[105] Corporal punishment in the community; told off by parents/family/settled at home; paid reparation to victim(s); told off by traditional leader; traditional or informal justice hearing for adults; killed; informal response first; if this doesn't work then formal response; traditional or informal justice hearing specialised for children; sent away from the community to live with relatives/ friends elsewhere.

[106] Counselling and rehabilitation by local group/NGO; mediation/reconciliation held with victim(s).

[107] Refers to percentage of the measures which explicitly refer to either adult-specific or child-specific procedures. However, there is no way of telling whether the other measures (which make up the majority of responses) are aimed at adults, children or both.

[108] Serious offences: corporal punishment, 'hard labour', 'kill', lynch, 'painful treatment or torture', 'hands cut off', 'beaten by fire service'. Minor offences: corporal punishment, 'subjected to physical exercise by the police', 'insert pepper in their private parts', 'beaten by fire service'.

In summary, in relation to both serious and minor crimes committed by children, in comparison with how such children are currently dealt with in practice, **there appears to be a trend that respondents would prefer for these children to be dealt with:**

- **more through 'non-formal' and traditional procedures than the 'formal' justice system; and**
- **more through child-specific rather than adult-specific procedures.**

However, it is important to note that – in relation to 'non-formal' procedures - there is still a relatively significant proportion of both child and adult respondents who believe in 'punitive' rather than 'restorative' practices, and in practices which violate child rights, such as violence and other humiliating measures.

Some respondents believe that physical violence is an effective response to serious crime committed by children and that it should be used more in practice than it **already is.** This is consistent with the findings in section 4.2.1 where 18.8% (n=1021) of child and adult respondents state that corporal punishment is amongst the best ways to discipline children. [Although it should be also be remembered that 35.5% (1660) of these same respondents state that this is the worst way to discipline children]. Physical violence for preferred responses in minor cases is similar to the average of actual responses.

It is important to note that the child and adult findings are not directly comparable as child respondents were asked about preferred responses in general whereas adult respondents were asked to imagine it was their own child. It is likely that this 'personalisation' for adults resulted in less 'harsh' responses than some of those given by children. For example, if children had been asked to imagine it was a friend, rather than a stranger, who committed the crime then it is probably less likely they would have included (e.g.) killing, lynching and cutting off hands.
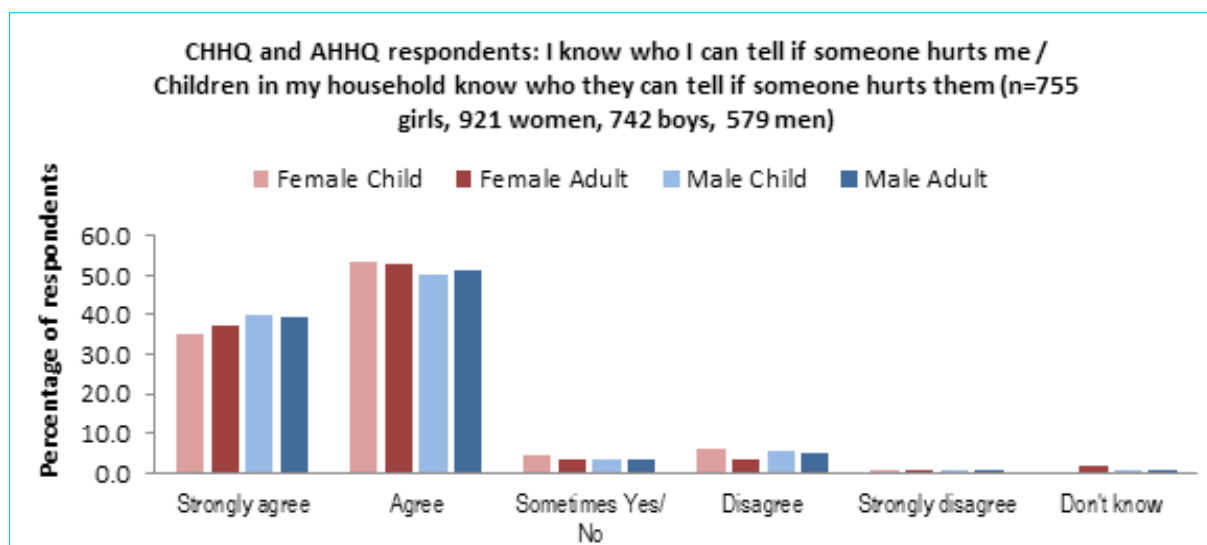
5.3   Children

Summary

- Children's confidence and knowledge when it comes to speaking out is a key component of children's empowerment in relation to child protection prevention and response. Nearly 90% of adults and children surveyed 'agree' or 'strongly agree' that children know who they can tell if someone hurts them and about 70% 'agree' or 'strongly agree' that children can discuss their worries in the family (although proportionally more adults than children state this). It may be that adults assume that children can freely discuss difficult issues in the family whereas in practice some children find this hard to do. About 75.0% 'agree' or 'strongly agree' that they understand what kind of touching is acceptable and unacceptable (child respondents) or that children in their household know what to do if someone wants to touch their body (adult respondents).

- A lot of awareness raising work is needed in the area of sexual abuse, addressing taboos and enabling greater discussion of such issues within the family. It is of concern that 32.1% of adults (n=482) are not sure if children in their households know what to do if someone wants to touch their body and that 17.9% of children (n=268) do not always understand what kind of touching is acceptable or unacceptable (this may well be higher for children younger than the 14-17 year-old survey respondents).

- Children in FGDs were more than twice as likely as adults to see a role for themselves in their own protection, particularly relating to prevention. In terms of responding to, or supporting, a child who has already been harmed, 15% of relevant children's FGDs say that they could do this for themselves, but none of the relevant adult FGDs mention children themselves as actors. This might imply that adults underestimate the capacity of children to participate in the own protection.

- When seeking help in situations of actual harm, children aged 14 to 17 still prefer to go to an adult rather than another child for help, even though peer friendships are undoubtedly hugely important for children. Only 0.5% (n=8) of all children surveyed state they would never go to an adult at all for help. In general children have a high level of trust in adults to help them. Adults, particularly family members, therefore have a correspondingly high level of responsibility to know what to do and to act appropriately to respond to violence against children.

- In spite of this, there are examples across the country of children lending each other money and offering kind words, advice and practical help to each other.

5.3.1 How children protect themselves from harm

Children and adults in the household survey were asked a serious of questions to determine children's confidence and knowledge when it comes to speaking out, which is a key component of children's empowerment in relation to child protection prevention and response.
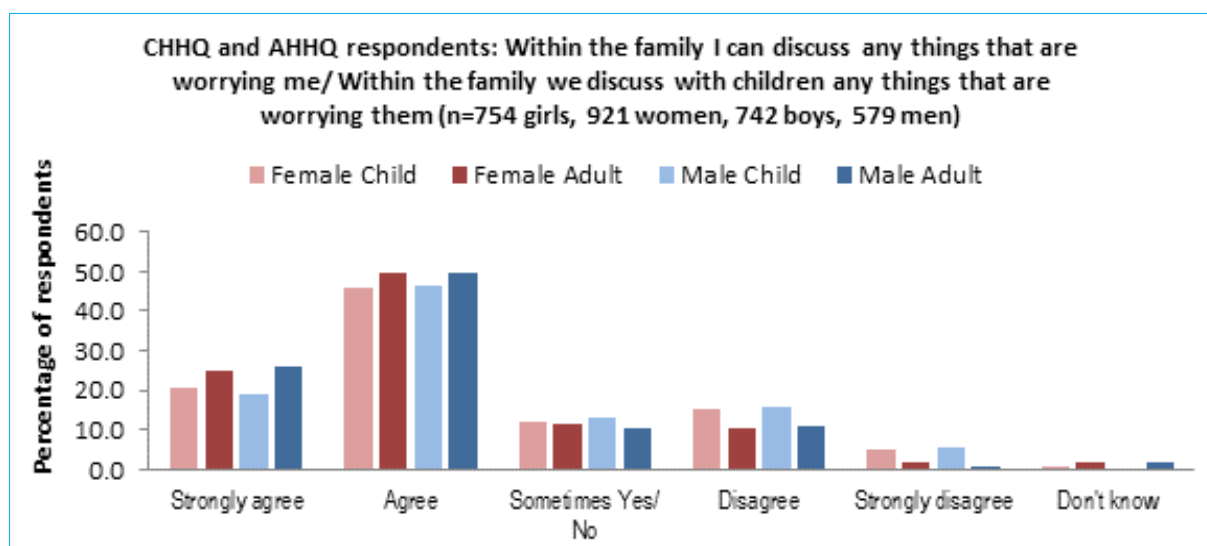
The vast majority (89.8%, n=2691) of adults and children surveyed 'agree' or 'strongly agree' that children know who they can tell if someone hurts them. There was no significant difference between child and adult responses. Only 5.6% (n=168) 'disagree' or 'strongly disagree'. 3.8% (n=115) say 'sometimes yes, sometimes no'. Proportionally slightly more boys and men compared to girls and women 'strongly agree'. Slightly more children than adults 'disagree'. Slightly more women 'don't know'. See chart below. In general, the responses are more strongly positive than for children being able to speak out in the family (compare with the findings below).

CHHQ and AHHQ respondents: I know who I can tell if someone hurts me / Children in my household know who they can tell if someone hurts them (n=755 girls, 921 women, 742 boys, 579 men)

■ Female Child   ■ Female Adult   ■ Male Child   ■ Male Adult

More than two thirds (70.6%, n=2116) of adults and children surveyed 'agree' or 'strongly agree' that children can discuss their worries in the family. Proportionally more adults than children state this. 16.5% (n=494) 'disagree' or 'strongly disagree' (proportionally more children than adults) and 11.8% (n=353) say 'sometimes yes, sometimes no'. See chart below. Although the results are not taken from the same households and are therefore not directly comparable, one interpretation is that adults assume that children can freely discuss difficult issues in the family whereas in practice some children find this hard to do. Although both children and adults stated strongly that - in theory - children know who to tell if they are hurt by someone (see above), the findings in this section slightly bring into question whether the overall atmosphere in the family always encourages such disclosures in practice.

CHHQ and AHHQ respondents: Within the family I can discuss any things that are worrying me/ Within the family we discuss with children any things that are worrying them (n=754 girls, 921 women, 742 boys, 579 men)

■ Female Child   ■ Female Adult   ■ Male Child   ■ Male Adult

82.1% (n=1227) of child survey respondents 'agree' or 'strongly agree' that they understand what kind of touching is acceptable and unacceptable and 67.9% (n=1018) of adults 'agree' or 'strongly agree' that children in their household **know what to do if someone wants to touch their body.** Taken together, 75.0% (n=2245) of both child and adult respondents 'agree' or 'strongly agree' with these respective statements. 13.6% (n=408) of all respondents 'disagree' or 'strongly disagree', proportionally

more adults than children: 16.1% (n=241) of adults compared to 11.2% (n=167) of children. 6.1% (n=182) of all respondents say 'sometimes yes, sometimes no' (proportionally more adults than children) and 5.3% (n=160) 'don't know' (again, proportionally more adults than children). See chart below. One reason for the greater uncertainty of adults compared to children may be in the phrasing of the question. Children are relatively confident that they understand what kind of touching is acceptable and unacceptable, but adults are less sure that children know what to do in practice. In general

it is of concern that 17.9% of children (n=268) do not understand what kind of touching is acceptable or unacceptable (disagree, strongly disagree, sometimes yes/no, and don't know responses together). It is also of concern that 32.1% of adults (n=482) are not sure if children in their households know what to do if someone wants to touch their body (disagree, strongly disagree, sometime yes/no, and don't know responses together). There is clearly a lot of awareness raising work needed in this area, addressing taboos and enabling greater discussion of such issues within the family.

CHHQ and AHHQ respondents: I understand what kind of touching is acceptable and unacceptable / Children in my household know what to do if someone wants to touch their body (n=754 girls, 921 women, 742 boys, 579 men)
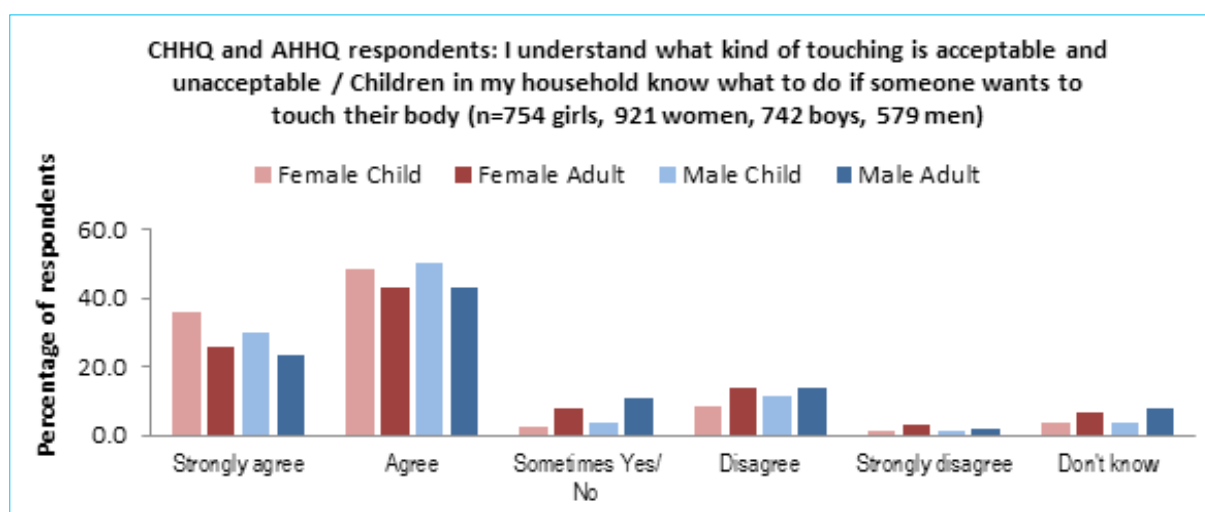
Finally, six girls and seven boys also stated in response to a different question that they 'don't know' what to do if they were badly hurt by someone. Although these numbers are very low, accounting for only 0.5% of girls' and 0.6% of boys' responses overall to this question, it is worth considering that if some 14-17 year-olds (the age of survey respondents) do not know how to protect themselves, then it is likely that this might apply even more so to younger children.

Children were more than twice as likely as adults to see a role for themselves in their own protection, particularly relating to prevention. 16% of focus groups with boys and girls in (total n=75) said (in response to the question: 'Who prevents children from being harmed?'), that they would take action to protect themselves, for example through removing themselves from harmful situations,

being able to make food for themselves, working to buy food, clothes and earn money, going to hospitals alone, avoiding dangerous places, not going out at night, and confiding in parents. For example, in the Brong Ahafo urban community children said they play in the open where everyone can see them and avoid going out alone or when there is power outage. Other examples include:

I don't like going to where people fight because you can be wounded or hurt; You have to obey your parents and teachers so that you will not be beaten or caned; As a herd boy you have to look after the cattle well so that they will not go missing which would mean you would be beaten. (Boys aged 13-17, rural, N/R)

We avoid passing dark places because these are likely places to encounter 'wee smokers'. (Girls aged 7-10, urban, BA/R)

We dress down and behave calmly so that adults don't notice and target us. (Older boys, W/R)

This compares with only 7% of adult FGDs (total n= 56) that identified children as being able to prevent harm to themselves, giving examples of children fending for themselves when adults are not able to take care of them and children working to take care of their needs. The fact that so few adult FGDs mentioned this might imply that adults underestimate the capacity of children to participate in the own protection.

Some children try to avoid bad influences. Some boys in FGDs point out that they choose their friends carefully, depending on their age, class and character. They state that they try to avoid friends who may lead them into trouble, such as gambling, and friends who are older than them. Boys in the Upper West Region say they attend extra classes after school to learn more and through this activity they avoid the company of 'bad friends'. Some children also mention drawing on spiritual protection to fortify themselves. Girls in the Northern Region mention visiting a soothsayer for spiritual protection when they want to leave home to work as 'kayayee (market porters). They believe the soothsayer clears the path for them to travel and also prevents evil and misfortune from befalling them. In the Central Region, children report that they join religious youth groups in churches where they are taught 'good moral habits' and how to live a 'chaste life'. They said that this helps save many girls from teenage pregnancy and being exposed to other forms of abuse.

Moving beyond prevention, in terms of responding to, or supporting, a child who has already been harmed, 15% of a total of 66 children's FGDs say that they could do this for themselves, but none of the relevant 33 adult FGDs mention children themselves as actors. The difference in the perceptions of adults and children could be because adults do not view the kinds of actions identified by children as responding to a protection issue, or they are unaware of the extent to which children are proactively engaged in responding. The examples children give of how they respond to harm include fighting bullies, going to buy their own medicines, girls handling disputes by themselves but not reporting it, and reporting a teacher to the head teacher for beating them too hard which sometimes results in the teachers getting dismissed (mentioned by boys).
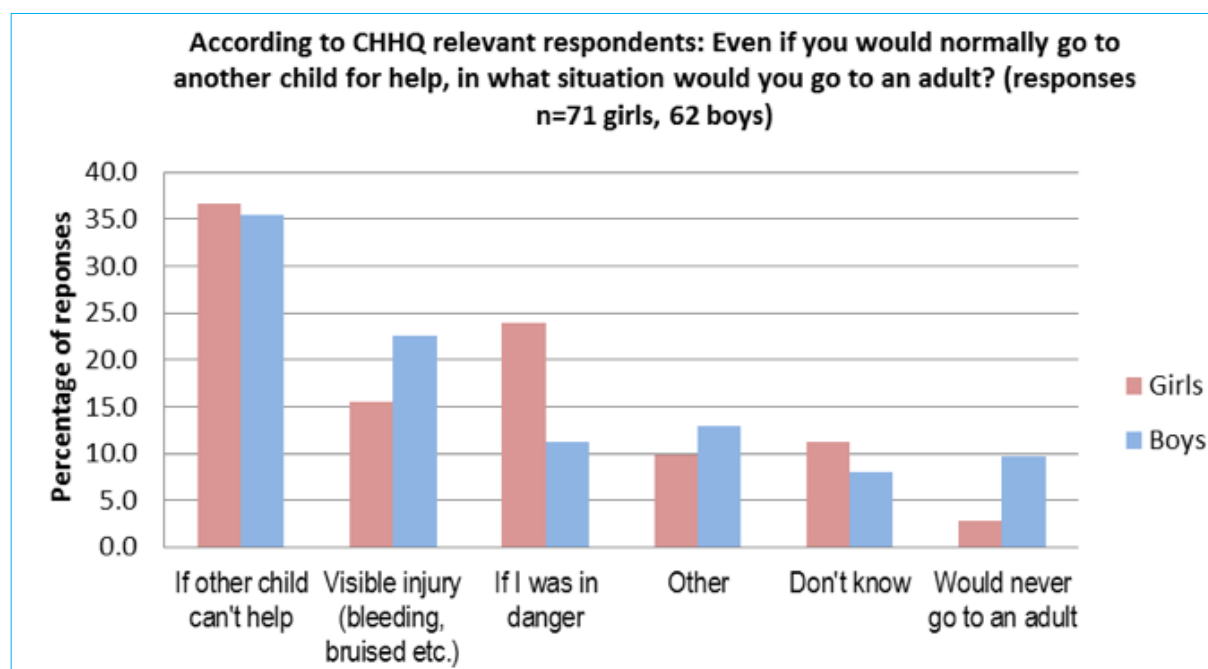
5.3.2 How children protect other children from harm

The research tried to gain some insight into how children help each other. **Although peer friendships are undoubtedly hugely important for children, it appears from the survey data that when it comes to seeking help in situations of actual harm, children aged 14 to 17 still prefer to go to an adult rather than another child for help** because adults are said to know better what to do and how to help a child. For example, only 2.9% (n=37) of girls' responses and 13.0% (n=15) of boys' responses indicate that they would 'talk to a friend' if they were badly hurt by someone, compared to 38.0% (n=487) of girls' responses and 39.0% (n=466) of boys responses which indicate they would talk to a family member – which was the most common response from children. Furthermore, when asked directly, the vast majority of child survey respondents (86.3%, n=1293) state they would be more likely to go to an adult when they are hurt or upset, rather than another child. Slightly more boys than girls stated this. Only 8.7% (n=130) would rather go to another child, with no significant difference between girls and boys. All other responses (neither, it depends, both equally, don't know) were minimal.

Of the 130 child survey respondents who state they would rather go to another child for help, only 8 state they would never go to an adult at all for help (6 boys and 2 girls). Overall, this accounts for only 0.5% of all children surveyed, suggesting that boys and girls facing protection risks and concerns rely extensively on adult support. The main reasons for a child going to an adult, even if they would

normally go to another child, are 'if the other child can't help' (36.1%, n=48 responses) or in serious cases such as rape, sexual harassment, if there were visible injuries, if an adult was beating them, or if the respondent was in danger (45.9%, n=61 responses). In addition, one child said they would go to an adult if another child was teasing them. 9.8% (n=13) of responses are 'don't know'.

According to CHHQ relevant respondents: Even if you would normally go to another child for help, in what situation would you go to an adult? (responses n=71 girls, 62 boys)

In general it appears that children (even children aged 14-17) have a high level of trust in adults to help them. Adults, particularly family members, therefore have a correspondingly high level of responsibility to know what to do and to act appropriately to respond to violence against children. Findings were similar in the FGDs with children (total n=75 groups). The highest percentage of groups identified parents (75%), followed by mothers (37%), then teachers (29%) as the most important for protecting them from harm in general, ahead of siblings (20%). Only 3% of groups said friends/peers protect them from harm. In terms of responding to actual harm, 18% of relevant FGDs cited siblings as a source of help and 6% of FGDs cited friends/peers.

In spite of this, there are examples across the country of children lending each other money and offering kind words and advice to each other. Some children explained that this is done especially for foster children or those who are going through hardships:

...because these children tend to be sad, lonely and quiet. (Girls aged 13-17, urban, BA/R)

Children also support each other with their burdens of chores and labour. For example, in the Brong Ahafo rural community, where at least six 25-litre loads of water (i.e. a total of 150 litres) are carried by children as young as eight years old per day, children divide the quantity of water to be carried between them and spread it over the entire day, fitting it in between school hours.

We help each other to stay safe by sharing food and whatever things that our friends do not have. (Children, UE/R)

We share our food, pens and books with colleagues so that they do not have to get boyfriends to provide for them in exploitative relationships. (KIIs with members of Community Child Protection Committees aged 13-17, rural, UE/R)

Children also beg adults for forgiveness on behalf of peers who have offended adults. When they are in insecure areas where civil conflict may spark off violence, some of the stronger children place themselves at the front and at the back, with the smaller ones in the middle for protection when moving around the community.

5.4 Families

Summary:

- **The family has a very important role** in creating loving, supportive and protective environment for prevention and in relation to responding to child protection concerns. Parents and other family members would greatly benefit from targeted capacity building on these issues.

- **There are some differences in perception on the part of children and adults** as to what constitutes the most important aspects of parenting and how adults show children love and care in households.

- **The role and importance of the extended family** is explored in Chapter 3. There is a common perception across the country that, due to the breakdown of the extended family system, informal family adoption of orphans is becoming more restricted and subject to abuse.

5.4.1 Parents and families in general

The importance of families in the care and protection of children has already been established in Chapter 3 on cultural practices and in section 5.1 in relation to responding to child protection issues in general. Additional data reinforce this general finding.

The provision of children's practical needs[109] was considered the most important responsibility of parents according to a significant majority (67.9%, n=6,822) of adult and child survey responses. This is compared to: social and moral aspects including discipline[110] (13.8%, n=10,046 responses in total); emotional aspects[111] (9.3%); protection[112] (6.5%); preparation for the future[113] (1.5%); miscellaneous[114] (1.0%); and don't know (0.1%). Girls and women provided more responses to this question than boys and men, particularly women compared to men. 'Send them to school', 'clothe them' and 'be there for them / provide for their needs' account for a higher percentage of responses from girls and boys, compared to women and men, possibly indicating that children value these aspects more highly than adults as parental responsibilities. Interestingly, in relation to 'love them,' male adults have the greatest percentage of responses (5.3%, n=108) and boys the least (3.3%, n=76). The responses relating to social and moral upbringing and discipline, are cited more frequently by adults, than by children.

Respondents in the household survey were also asked how adults in their household show children that they love and care for them. Once again 'practical provision'[115] aspects

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[109] Send them to school; Feed them; Clothe them; Give them shelter (somewhere to sleep); Keep them healthy / provide healthcare when sick.

[110] Teach them right and wrong / how to behave; Teach them to respect our culture / religion; Teach them to respect other people; Discipline them well (i.e. beat them).

[111] Love them; Be there for them; Make them happy; Listen to them and take their views seriously

[112] Keep them safe from harm; Keep them away from drugs / alcohol / bad influences.

[113] Teach them how to work / make money; Prepare them for the future (teach independence); Find them a good husband / wife.

[114] Provide opportunities to play and/or do sport; Provide opportunities to be creative (singing, dancing, art, drama etc.); Other.

[115] Care for their needs; Give them good / enough food; Send them to school; Give them money / presents / treats / sweets; Make sacrifices for them.

of childcare are the most popular, making up 59.6% of all responses compared to: emotional[116] (24.1%); social and moral aspects, including discipline[117] (14.9%); other (0.7%); don't know (0.4%); and protection[118] (0.3%). 'Care for their needs', 'send them to school', 'give them money / presents / treats / sweets', 'discipline them' and 'help, advise and respect them' account for a higher percentage of responses from children than adults, possibly indicating that children identify these aspects more readily than adults as ways of showing love and care. On the other hand, adults identify 'emotional' responses more readily than children, for example 'spend time with them', 'tell them that they love them', 'be friendly', 'make them happy' and 'show them love and affection'. This might indicate that children are less likely to associate verbal and physical affection with adults 'showing love and care'. Alternatively it might indicate that adults state that they show verbal and physical affection towards children more than they actually do this in practice. Given that the child respondents in this survey are aged 14-17 it is possible that adults show verbal and physical affection more readily towards younger children. Adults also had a higher percentage of responses for 'teach them what is right and wrong / good path', 'emphasise spiritual or religious values' and 'make sacrifices for them'.

In addition to creating a loving, supportive and protective environment, the family plays a key role in relation to responding to child protection concerns. As already stated in section 5.1, it appears from the research that a child's first port of call will be a family member who would then be expected to deal with the situation. Parents and other family members would therefore greatly benefit from targeted awareness-raising and capacity building interventions on how to recognise and appropriately respond to child protection concerns. Children in the

household survey were also asked what problems that children cause are solved within the family. In order of the most popular answers children mentioned: petty theft, 'being naughty' in general, minor violence and fighting, girls getting pregnant, drinking alcohol, prostitution, smoking cigarettes, and to a lesser degree, more serious theft, sexual harassment, other sexual abuse, taking drugs, rape, damaging property, serious violence and even murder, although the latter types of problems account for relatively few responses. There is very little gender difference in responses, except perhaps slightly more girls mentioning 'girls getting pregnant' and slightly more boys mentioning 'minor violence' – possibly reflecting their own concerns or experiences. It is of concern that some children mention very serious crimes being dealt with in the family rather than by the police, for example sexual abuse, rape, serious violence and murder.

Refer to Chapter 3 for discussion on the strengths and limitations of family practices and traditions.

5.4.3 Extended family members

The role of the extended family in informal fostering arrangements is explored in detail in section 3.2 and the key findings are therefore not repeated here. It is worth emphasising, however, that **although the research found that orphans are generally looked after by their relatives, there is a common perception across the country that due to the breakdown of the extended family system, this option is becoming more restricted and subject to abuse**. Participants in the qualitative research describe a trend towards more individualistic, nuclear family systems. For example, the Upper East Regional Report notes: "Respondents, especially in the urban area attribute the harm that children suffer to the change in the family system". FGD respondents state:

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[116] Spend time with them; Be friendly; Make them happy; Show them love & affection (kisses, cuddles, smiles); Treat all children equally; Tell them that they love them; Help, advise and respect them.

[117] Teach them what is right and wrong / good path; Discipline them; Emphasise spiritual or religious values; Be a good example; Punish them when they are naughty; Teach them about our culture.

[118] Keep them safe / don't maltreat them.

- Due to the shift from the extended family system towards the nuclear family system, most orphaned children who would have been taken in by their uncles and other family members are gradually being displaced. The safety net where children would have been covered by the extended family is gradually diminishing and weakening, hence children do not have a caretaker, thus exposing these children to external dangers such as joining gangs and sexual abuse. (Adult male FGD respondent)

- *In today's world, no one cares for another's children at the expense of his own. Everyone now cares for his/her own children and not those of another. (Male FGD respondent, urban, UW/R)*

Further evidence of the weakening of the extended family system:

- In the Eastern Region, respondents say the weakened extended family system has led to children not relating well with their extended relatives and in the event of a parent dying, the relatives do not consider the children as one of their own which may lead to foster parents maltreating children in their care. Similarly, in the Greater Accra Region, a chief consulted said:

In our community every adult used to be a parent, but not everybody accepts this anymore.

- In the Volta Region, there are several cases of children in rural and urban areas who have been orphaned yet abandoned by relatives who were not prepared to foster them. A GES Guidance and Counsellor said that she herself fosters three children who have been orphaned in her home.

- According to the International Cocoa Initiative 2011 study on cocoa-growing communities, the weakening of the 'safety net' of the extended family and community, as articulated above, is also due to resource disparities that are pulling people in different directions in their quest for social protection and thus weakening community cohesion, a prerequisite for the efficient functioning of traditional modes of social protection. The report notes that "economic gains from cocoa cultivation have triggered an evolution from traditional matrilineal inheritance towards formal, legal inheritance, overturning traditional referents for solidarity and social protection." [119]

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[119] Daily life, social norms and child labour in cocoa producing communities. International Cocoa Initiative (ICI), Nov. 2011; p.4.

5.5 Communities

Summary

- **The communal nature of Ghanaian society** means that, along with families, the role of communities in preventing and responding to child protection concerns is also hugely important.

- **Leaders and leadership structures:** Traditional leaders are present in the majority of communities and they play a role in responding to child protection issues. However, their handling of cases is not always satisfactory. A wide range of offences committed by children are dealt with at community level via traditional leaders and the 'informal justice system'. Some District assembly persons play a significant role in child protection, based on individual, personal commitment, but in general they are not clearly identified as key child protection actors.

- **Religious bodies:** Places of worship are the most prevalent 'service' available at the local level to potentially help in relation to child protection cases. There could be great potential to work more closely with them to develop their roles in relation to child rights-based prevention and response. To do so, however, would require better understanding of adults' and particularly children's perspectives on why they do not currently seek out support from these sources. Examples were identified where religious leaders have had both a positive and a negative impact on child protection.

- **Education and health personnel:** These are identified as potential sources of support and assistance, although in the case of teachers this is emphasised more by adults than children, possibly linked to the relatively high degree of physical and emotional harm perpetrated by teachers against children. Traditional healers are mentioned significantly less than doctors, nurses or other health workers as sources of support.

- **Civil society institutions:** In general, civil society institutions are not particular prevalent in the survey communities. Only 3-12% of respondents state they exist. Where they do exist, not surprisingly, a higher proportion (65% - 75%) of relevant respondents would seek help from the more specialised compared to the general ones (40%). The findings regarding Community Child Protection Committees/Teams were mixed: although they were not strongly identified as key actors in child protection in general, in some areas they were said to be very active.

- **The extent of collaboration and cooperation varies from community to community** depending on the range of services and relevant mechanisms which exist, the level of engagement by key actors on child protection issues and their willingness to work together.

5.5.1 Leaders and leadership structures

Traditional leaders are present in the majority of communities and they play a role in responding to child protection issues: 80.3% (n=2401) of child and adult household survey respondents stated that there was a traditional leader in their community, for example a Chief and/or Queen Mother (more adults than children). 14.3% (n=428) state this does not exist and 5.4% (n=161) don't know. Of those respondents who stated that there is a traditional leader in their community, 57.9% (n=1388) said they would seek help from this person if they / their child were in serious trouble or badly hurt (either physically or sexually) (more adults than children). 41.5% (n=996) said they would not go to them for help (more children than adults) and 0.6% (n=15) said they don't know. In addition, children and adults in the household survey were asked separately what they would do if they or a child in their care were badly hurt by someone. In relation to traditional leaders, only 3.1% (n=171) of responses indicated that they would talk to the Chief and only 0.5% (n=26) of responses indicated that they would talk to the Queen Mother (fewer children than adults in both cases). In addition, 0.2% (n=11)

of responses indicated they would report it to the 'informal justice system' which is likely to also centre on traditional leaders.

This is consistent with the findings outlined in section 5.1.4 about the majority of child protection cases being handled first and foremost within the family, only resorting to involvement of traditional leaders as a last resort (although traditional leaders are still preferred over and above formal government services). 12% out of a total of 66 child FGDs say that the Chiefs would respond to or support a child who had been harmed and 3% cited community leaders/ elders in general. However it was not clear from these discussions whether children themselves would feel comfortable seeking help from these leaders. From a total of 33 adult FGDs, 12% also cited the Chiefs, but a greater proportion of groups cite community leaders/elders in general (18%). As mentioned in section 3.5, Queen Mothers are noted to play an important role in child protection in two regions – the Upper East and the Eastern Region.

Participatory Rapid Appraisal ranking and scoring exercises to determine the efficacy of traditional leaders in child protection produced mixed results. **It was only in the Central, Upper East and Upper West Regions that satisfaction is indicated with the ways in which traditional leaders are handling child protection cases.** In the Central Region, consistent with the findings in section 5.2, it was reported that they adjudicate petty crimes committed by children in the community; major crimes involving children such as murder or rape are supposedly reported to the police although, according to the survey findings, this is not always the case in practice.

According to child survey respondents, a wide range of offences committed by children are dealt with at community level via traditional leaders and the 'informal justice system'. In order of the most popular answers children mentioned: serious theft, rape, serious violence, damaging property, minor violence, and to a lesser extent, taking

drugs, sexual harassment, murder, petty theft, other sexual abuse, drinking alcohol, smoking cigarettes, prostitution, girls getting pregnant, and generally 'being naughty'. There is very little gender difference in responses. Although it is logical that the degree of issues listed here are more serious than those dealt with within the family (section 5.4.1), it is nonetheless of concern that very serious crimes appear to be dealt with in the community rather than by the police, for example rape, serious violence, murder and sexual abuse. In other countries it has been acknowledged that gender-based violent crimes (such as rape and sexual abuse of girls and women and violence against girls and women in the home) may be taken 'less seriously' (e.g. dealt with within the family and community) compared to violent crimes perpetrated against boys and men (which may be more likely to be dealt with by the police). Although no such conclusions can be drawn from this study, care must nonetheless be taken at community level and with community leaders to balance rights-respecting and restorative juvenile justice practices for child offenders with the rights of girls and boys who are victims/survivors of crime, taking particular care to avoid gender-based discrimination.

District Assembly persons: Only 5.5% (n=165) of child and adult household survey respondents stated that there was a District Assembly person in their community (more children than adults). 78.6% (n=2359) state this does not exist (more adults than children) and 15.9% (n=476) don't know. Of those respondents who stated that there is a District Assembly person in their community, 68.9% (n=113) said they would seek help from them if they / their child were in serious trouble or badly hurt (either physically or sexually) (more children than adults). This is a higher percentage than for traditional leaders. 31.1% (n=51) said they would not go to them for help (more adults than children). In addition, children and adults in the household survey were asked separately what they would do if they or a child in their care were badly hurt by someone. In relation to the District Assembly person, only 1.2% (n=68) of responses

indicated that they would talk to him or her (compared to 3.6% for traditional leaders), with no particular difference between adult and child responses. Only 5% of children's FGDs (out of a total of 66) think that that the Assembly person supports or responds to children who have been harmed, compared to 9% of adult FGDs (out of a total of 33).

It was noted by some respondents that Assembly persons can play a significant role in child protection if they are dynamic, serving a 'bridging' role, being part of the Child Protection Committee at the district level and participating in the by-law enacting bodies at the community level. In the Ashanti, Central, Brong Ahafo and Upper East Regions there were positive reports about Assembly persons contributing towards child protection in a number of different ways.

The Assemblyman is the first point of contact for any issues or emergencies on health, education, sexual abuse etc. The Assembly member conveys children and adults (including pregnant women) from the community to the hospital in Wamfie (25 miles) on his motorbike for treatment. (Men and women aged 25-40 and over 50, rural, BA/R)

5.5.2 Religious bodies

Places of worship are the most prevalent 'service' available at the local level to potentially help in relation to child protection cases. 91.9% (n=2750) of child and adult household survey respondents stated that there is a church or mosque in their community and of these, 58.3% (n=1596) said they would seek help there if they / their child were in serious trouble or badly hurt (either physically or sexually) (slightly more girls and women than boys and men). 40.5% (n=1108) said they would not go to them for help (more boys and men than girls and women) and 1.2% (n=32) said they don't know. In addition, children and adults in the household survey were asked separately what they would do if they or a child in their care were badly hurt by someone. Only 0.5% (n=27) of responses indicated that they would

talk to a religious leader (more children than adults). In the qualitative research, where participants were asked to identify those who respond or provide support to children who have been harmed, only 21% (n=7) of adults' groups cited religious leaders and 5% (n=3) of children's groups.

Given their prevalence in communities, there could be great potential to work more closely with religious bodies and leaders to develop their roles in relation to child rights-based prevention and response in relation to child protection. To do so, however, would require better understanding of adults' and particularly children's perspectives on why they do not currently seek out support from these sources. Some Christian and Islamic institutions and their leaders already play a significant role in child protection due to the resources they are able to mobilize for humanitarian purposes and due to the trust placed in them by community members, particularly with regard to children's moral education. Religious leaders teaching children good behaviour and moral education is mentioned by respondents throughout the country. In the Ashanti, Eastern and Central

Regions, church leaders interviewed say that they provide support to children and youth through their activities and prayer groups. In the Ashanti Region the imams consulted mention how they have used the Qur'an to teach and correct children in the communities. In the Eastern Region, the pastors give advice and counselling to children who go to them with their problems and one of the churches gives educational support to poor students. In the Volta Region, pastors, imams, chief priests and mallams are mentioned to be actors in the communities who protect children in various ways.

The researchers also came across some examples of where religious leaders have a negative impact on child protection, for example as facilitators of child marriages, which is necessary in their view to 'safeguard family integrity'. Examples were also found in different regions of religious leaders meting out harsh punishment to children. In the Central Region, some traditional or church leaders have negatively intervened in cases of children who are at risk of or are suffering abuse, neglect or exploitation, which may result in preventing the case from being reported to the authorities. In such instances, the problems are said by respondents to be resolved in a way to protect the abuser from persecution, to the disadvantage of the child.

5.5.3 Education and health personnel

Teachers and other school officials appear to be potential sources of support and assistance at the community level, although more adults than children felt this way: 88.7% (n=2656) of child and adult household survey respondents stated that there was a teacher or other school official in their community (more adults than children). Of these, 59.5% (n=1587) say they would seek help from them if they / their child were in serious trouble or badly hurt (either physically or sexually). 40.3% (n=1075) said they would not go to them for help. In addition, children and adults in the household survey

were asked separately what they would do if they or a child in their care were badly hurt by someone. Only 2.2% (n=121) of responses indicated that they would consult with a teacher (more children than adults, and more girls than boys). This apparent reluctance on the part of children to approach teachers might possibly be linked to the relatively high degree of corporal punishment and other types of physical and emotional harm perpetrated by teachers against children. In general, it is interesting to note that for this age group of children (14-17) 'teachers hitting children' (6.4%, n=204 responses) features ten times more prominently than 'parents hitting children' (0.6%, n=19 responses) as things which make children feel unsafe. Interestingly, the qualitative research found that 47% of child FGDs (total n=66) said that teachers respond to or support a child who has been harmed, whereas only 15% of adult FGDs (total n=33) said the same. It is worth noting, also, however, that 28% of children's FGDs (total n=68) mention corporal punishment in schools as a cause of harm to children.

Doctors, nurses or other health workers were understood by the vast majority of children and adults to be potential sources of support and assistance: 80.2% (n=2404) of child and adult household survey respondents state that there is a doctor, nurse or other health worker in their community. Of those respondents who state that there is a doctor, nurse or other health worker in their community, 91.9% (n=2210) said they would seek help from them if they / their child were in serious trouble or badly hurt (either physically or sexually). Only 8.0% (n=192) say they would not go to them for help (more children than adults). In addition, children and adults in the household survey were asked separately what they would do if they or a child in their care were badly hurt by someone. 19.8% (n=1084) of responses indicate that they would consult with a doctor, nurse or other health worker. Adults are approximately twice as likely as children to consult a healthcare worker, possibly because children either feel uncomfortable to do this themselves or they may be reliant on adults to cover medical costs.

Traditional healers were potential sources of support according to almost half of those adults and children who had access to their services at the community level: 48.6% (n=1454) of child and adult household survey respondents state that there is a traditional healer in their community (more adults than children). Of those respondents who state that there is a traditional healer in their community, 49.0% (n=711) said they would seek help from them if they / their child were in serious trouble or badly hurt (either physically or sexually). 50.5% (n=732) say they would not go to them for help. In relation to the survey question on what children and adults would do if they or a child in their care were badly hurt by someone, traditional healers did not feature as a response.

5.5.4 Civil society institutions

In general, civil society institutions are not particular prevalent in the survey communities. Only 3-12% of respondents state they exist. Where they do exist, not surprisingly, a higher proportion (65% - 75%) of relevant respondents would seek help from the more specialised compared to the general ones (40%).

Civil society institutions	% and # of relevant adult and child survey responses					
	All survey respondents			Survey respondents who state service exists		
	Exists	Not exist	Don't know if exists	Would seek help from them	Would not seek help from them	Don't know (seek help)
NGO or CBO in general	11.2% (n=336)	70.0% (n=2099)	18.8% (n=563)	40.8% (n=137)	56.8% (n=191)	2.4% (n=8)
CBO or group that specialises in helping children who have experienced violence	5.7% (n=170)	78.5% (n=2320)	15.8% (n=467)	65.3% (n=111)	34.7% (n=59)	0.0% (n=0)
Counselling services for children and families	11.3% (n=333)	73.7% (n=2179)	15.0% (n=444)	66.6% (n=221)	32.2% (n=107)	1.2% (n=4)
Safe house or emergency shelter for children who have experienced violence	3.1% (n=92)	80.6% (n=2418)	16.3% (n=489)	74.7% (n=68)	25.3% (n=23)	0.0% (n=0)
Community Child Protection Committees / Teams	11.7% (n=350)	73.6% (n=2184)	14.5% (n=466)	72.0% (n=252)	26.3% (n=92)	0.7% (n=6)

A variety of different community child protection models have been established over the years to address the gap in government social welfare structures at community level. This has been supported by UNICEF, the National Programme for the Elimination of the Worst Forms of Child Labour in Cocoa and international NGOs. These models consist of informal structures that rely on the involvement of community volunteers. Some, such as the Community Child Protection Committees/Teams supported by UNICEF in previous years, have a broad mandate for monitoring the rights of children in the community, promoting positive childcare practices, preventing violence, abuse and exploitation and referring serious cases of abuse to the local authorities. However, an assessment by UNICEF in 2006 noted weakened interagency linkages and a slowing down of activities due to waning enthusiasm and volunteer fatigue.[120]

These findings were further substantiated in this study, where only 5% (n=3) of FGDs with children said that Community Child Protection Committees/Teams respond to, or support, children who have been harmed, a view shared by participants in 12% (n=4) of adult FGDs. It is not clear how many of the groups say they have Community Child Protection Committees/Teams in their community. Active Committees/Teams were talked about in four regions in the qualitative research (Northern, Central, Greater Accra and Upper West) and appear to be more effective at the rural level. Some of their activities involve encouraging children to go to school, protecting children from child labour, raising community awareness about child labour and children's rights, and monitoring and protecting children against abuse such as defilement, rape and assault. In the Northern Region, the Community Child Protection Committee/Team was reported to confront child abusers and take up serious cases with the authorities, whilst working with the local leadership to resolve minor cases with the perpetrator and affected family.

5.5.5 Community cohesion and dynamics between child protection actors

The FGDs reveal various forms of community cooperation and collaboration, particularly regarding children's health needs. The most commonly cited form of collaboration, mentioned by one third of a total of 21 relevant children's FGDs, is parents relating to health workers (for example parents taking their children to hospitals or clinics), followed by parents relating to teachers and then to community members. It can be seen from the examples included below that there are a range of relationships and types of collaboration:

- *The sub-chiefs (Kontihene) work with community volunteers. They go round to ensure that children are safe and indoors at night. (Girls aged 13-17, urban, A/R)*

- *Teachers relate with parents by ensuring that children brought to school are looked after and protected from any harm. (Girls aged 13-17, rural, BA/R)*

- *The Assembly person forwards the complaints about poor child-related infrastructure to the Assembly. When another adult hits a child, the parents report this to the Chief who then takes the necessary action. (Boys aged 13-17, rural, UW/R)*

- *The Unit Committee set a curfew for children to be indoors and parents give their consent. They also go to schools to speak with teachers about the need to be considerate in their caning. (Boys aged 13-17, rural, W/R)*

Feedback from the adult FGDs is different: Nearly two thirds of a total of 36 relevant adult FGDs say parents relate to teachers, followed by Community Child Protection Committees/Teams, religious leaders, the police and only 8% of groups mention parents relating to health workers. Some of the types of collaboration mentioned by adults include:

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[120] Apugisah, A., Child Protection Project in Northern and Upper East Regions: Assessment, DSW, Department of Community Development and UNICEF, 2007.

- *Teachers work with parents in keeping children safe from harm when they are at school. Also the Unit Committee relates with parents to ensure that children are safe in the community. (Women aged 25-40, rural, A/R)*

- *The Unit Committee sends cases involving children to the Chief for resolution. (Men aged 25-40, A/R)*

- *Parents and religious leaders work together because when there are problems with the children, say they are sick, they are taken to the pastor for prayers. They then work together for the good of the child. The Community Child Protection Committee also works with some government agencies like DSW by referring cases to them. (Women aged 25-40, rural, C/R)*

- *DSW and DCD organize programmes that educate children and adults on how to stay safe. The DSW and DCD helped to form the Community Child Protection Committee which follows up on cases of child abuse that are being handled by the Social Welfare or the police and the Community Child Protection Committee educates parents and community members on how to protect children from harm. Teachers collaborate with the Community Child Protection Committee to protect girls from sexual harassment or early marriage and sometimes report cases to the DSW. (Men aged 25-40, UE/R, rural)*

- *he Assemblyman causes the arrest of parents who abuse their children physically. (Older men and women, C/R, urban)*

- *Parents / elders/ opinion leaders / community members have occasional community meetings and discuss issues of child welfare. (Older men and women, UE urban)*

- *The Association reports abuse cases to the DSW. The Queen Mothers make home visits on behalf of the DSW. DSW allows certain cases to be handled by the Queen Mothers. Queen Mothers report cases of sexual abuse to the police. (Older men and women, E/R, rural)*

5.6 State

Summary:

- **Department of Social Welfare:** DSW has primary responsibility for child and family welfare services but its ability to function is severely limited by resource constraints and structural transition. At district level the main involvement is with child maintenance and paternity cases. Other issues handled by the DSW are adoption, cases of abandonment of children, children in conflict with the law and child abuse.

- **Police:** The police are one of the main formal entry points for children and families to access child and family welfare services, in particular DOVVSU. Despite significant resource and logistical constraints, in many communities DOVVSU was credited with addressing child protection cases brought to them. In all regions, however, relations between the police and people in the communities can be strained by inefficiency, abuse of power and corruption.

- **Courts and the justice system:** This includes court procedures, alternative dispute resolution, traditional arbitration and a mix of these. How children are handled in court depends on the discretion of individual magistrates. Not much contact is reported between community members and the courts because so few cases get that far, sometimes because key actors intervene, even beyond their mandate, to deliberately prevent this, not always in the best interests of the child. In the majority of cases, children appear in the Juvenile Court without legal representation.

- **CHRAJ:** Is both a public service commission charged with educating the public on human rights and a quasi-judicial institution with mediation functions. There is some overlap with DSW, especially in the handling of child maintenance cases. Although CHRAJ appears to be relatively better resourced compared with its civil service counterparts, it still faces obstacles to its work.

- **Department of Community Development:** DCD is responsible for promoting and developing deprived rural and urban communities. There are mixed accounts about the DCD from different research areas and generally their mandate seems to overlap significantly with that of other bodies.

- **Department of Children:** This received very few mentions in the research and is hampered by severely inadequate financial and human resources.

- Department of Women: This has a mandate to mobilize, coordinate and harmonize the activities for women. Is fairly well resourced compared to other departments and seems to have relative visibility among women in rural areas. It does not have a specific mandate on children but generally raises awareness of relevant issues through its outreach to women.

- **Collaboration:** Examples of good inter-agency collaboration were reported throughout the country. However, challenges to this include duplicated roles, competition between individual agencies over their mandates, competition for scarce resources from development partners, lack of trust, individualistic rather than collaborative efforts, no clear guidelines for collaboration, and problematic reporting mechanisms. District Assemblies collaborate with line ministries. A range of development partners and CSOs also collaborate with government agencies. Relations between government agencies and communities are relatively limited. Experience of government collaboration with traditional leaders is mixed.

Families and communities are clearly of paramount importance for preventing and responding to child protection concerns, and discussions revealed some of the ways in which they collaborate with state actors. As already stated, according to survey respondents, if they or a child in their care were badly hurt by someone, 'formal' actions (involving state actors) account for only 38.0% (n=2077) of all responses compared

to 'informal' actions [121] which account for 54.6% (n=2985) of all responses. This section explores the mandate and functioning of the agencies involved in these 'formal' actions.[122]

5.6.1 Government agencies in child protection

• The Department of Social Welfare (DSW)

The Department of Social Welfare has primary responsibility for child and family welfare services. Its mission is "to work in partnership with people in their communities to improve their social well-being through promoting development with equity for the disadvantaged, vulnerable and excluded."

The Mapping and Analysis Study highlights that the DSW is in a process of transition in relation to the provision of district level social welfare, meaning that not all districts yet have the full complement of social workers needed. Furthermore, there are no formal government social welfare structures at the community level and Social Welfare Officers have limited capacity for outreach within their districts.

The report highlights that support services for children who have experienced violence, abuse and exploitation are quite limited and tend to be concentrated in urban areas[123]. Due to limited staff resources and means of transportation

According to a 2012 Ministry of Employment and Social Welfare (MESW) report on social welfare delivery, the underfunding of social welfare in Ghana is characteristic of sub-Saharan Africa, highlighting that social protection systems have been historically weak and under-resourced in most of sub-Saharan Africa. Total spending has been around 0.1% of GDP, which is significantly below expenditure on social protection in other parts of the world.[124]   With reference to Ghana, the report reveals that, "Between 2006 and 2010, MESW's share of total discretionary expenditure ranged between 0.42% and 0.56%, averaging approximately 0.49%." [125] It is therefore unsurprising that the current research, found the funding of the DSW in all regions to be inadequate. Decentralization and the supposed merging of the DSW with the Department of Community Development have made lines of funding for the sector unclear. Budgetary allocations appear to be at the whim of the District Assembly. Moreover, the DWSO has no earmarked funds specifically for child protection.

Some DSW offices in some regions/ districts have received no funding for several years and have to manage with furniture and equipment donated by NGOs and stretch funding from NGO projects or from government programmes such as LEAP to cover their running costs. In the Central Region, the DSWO said they work closely with other governmental and non-governmental agencies to protect children. In the Volta Region, flawed and inadequate child protection services and systems are said to hamper the administration of many issues, including juvenile justice. In spite of these constraints, in several districts, researchers encountered committed DWSOs who were doing the best they could with meagre resources.

In most regions, it is reported that the main business of DSW offices in the districts is the settlement of child maintenance and paternity cases. In both urban and rural areas, cases relating to neglect and child

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[121] Consult doctor / nurse / health worker; report to police; consult with a teacher, lawyer/legal aid; talk to: District Assembly person.
[122] Confront the perpetrator; talk to: family member, traditional leader/Chief/ Queen Mother, friend, religious leader, community organisation, other; ask the child what happened; treat and comfort the child myself; report to informal justice system; report to CBO/NGO (e.g. community groups).
[123] Available services in urban areas include: family tracing; financial assistance (LEAP, micro-credit etc.); counselling and psycho-social support from DOVVSU, DSW and NGOs; NGO-run shelters, drop-in and outreach services for street-involved children and head porters in some urban areas; rehabilitation and reintegration packages available for some children rescued from child labour and trafficking (supported by UNICEF, IOM and ILO/IPEC); residential care – DSW operates three children's homes, one shelter for victims/survivors of abuse and one for victims/survivors of trafficking, there are a further 110 private orphanages in the country.
[124] MESW/UNICEF, Enhancing Social Welfare Service Delivery in Ghana: An Investment Case, May 2012, p.52.
[125] Ibid. p. 4

support are brought to the department, usually by mothers. The DSW interacts with both parents to find a resolution in the best interests of the child and the DSWO in many instances provides advice and guidance on good parenting. In the Ashanti urban site, however, women in FGDs cited the unreliability of the interventions of the DSW in matters of child maintenance. They said the maintenance awards from fathers are only a pittance and are not regularly paid. It was noted in some districts that DSWOs sometimes settle child custody cases, which, strictly speaking, are not within their mandate.

Other issues handled by the DSW are adoption, cases of abandonment of children, children in conflict with the law and child abuse. The Social Welfare Officer in Volta Region said that when a case of child abuse is reported to them, they invite the victim/survivor and perpetrator over to resolve the case.

We will listen and try to counsel them and let them know the mistakes they have committed and if we have a case then we invite both parties to come and then settle the issue.

In the Volta urban site, the Social Welfare Officer said that they only received a few child abuse cases because most people prefer to refer cases to Chiefs and family heads.

Only 6.3% (n=188) of child and adult household survey respondents stated that the DSW is present in their community. 73.6% (n=2207) state they are not present (more adults than children) and 20.2% (n=605) don't know (more children than adults). Of those respondents who stated that the DSW is present in their community, 51.3% (n=96) said they would seek help from them if they / their child were in serious trouble or badly hurt (either physically or sexually) (similar responses from both adults and children). 47.1% (n=88) said they would not go to them for help.

It is part of the work of the DWSO to go to family and tribunal courts once a week. Cases tried at these courts are usually those of child neglect, child maintenance, child custody, child access, paternal parentage or denial of pregnancy (when an alleged father of a child denies having impregnated the child's mother). In the Brong Ahafo urban area, the DSWO said that his office prepares social enquiry reports and he sits on Child Panels when a child comes into contact or conflict with the law. Similarly, it is reported in the Upper West Region that the DSW plays a critical role in the juvenile justice probation panels/courts that sit to resolve cases involving children that come into conflict with the law. They conduct background checks on children accused of coming into conflict with the law to assist in the effective resolution of cases, considering the best interests of the child.

• **Police and the Domestic Violence and Victims Support Unit (DOVVSU)**

The police constitutes one of the main formal entry points for children and families to access child and family welfare services, in particular the DOVVSU, established by the Ghana Police Service. This means that protection cases that are dealt with tend to be for children who have already experienced serious harm such as criminal forms of abuse or exploitation. While its main focus is investigation and criminal prosecution, it also has staff social workers and/or psychologists who provide counselling and advice to victims/survivors throughout the investigation. DOVVSU receives many complaints directly from families and also gets referrals from NGOs and health care professionals. In some areas, DOVVSU also has an informal network of government services and NGOs that it can make referrals to for counselling, temporary shelter, medical treatment and legal aid. The focus is predominantly on the perpetrator, however, and support services for children who have experienced violence and abuse are limited in terms of coverage and are concentrated mainly in urban centres.

According to the Mapping and Analysis Study, since the DOVVSU was established, the number of cases of child maltreatment

reported to the police has grown from approximately 1100 per year in 2007 to over 1600 in 2009. The DOVVSU also deals with children in conflict with the law, although in practice these cases are usually handled by the regular police. There are also Family Tribunals and Juvenile Courts but again these are mainly located in urban areas with limited reach outside the district capitals.

Despite significant resource and logistical constraints, the research found that in many communities, DOVVSU was credited with addressing child protection cases brought to them. A DOVVSU detective in the Volta Region explained that most cases brought to the station involve defilement. He also mentioned that as part of their duties in protecting children from harm, they go around communities to talk to parents about domestic violence and child abuse, educating them on how to report such cases to the DOVVSU. However, their presence is experienced differently depending on location. For example, in the Central Region, while some children's FGDs in the urban area indicate that the police protect them from abusive

adults, FGDs in the rural area did not identify anything significant the police do to protect them, because the police station is located far away. In general, 23.5% (n=701) of household survey respondents stated that there is the DOVVSU in their community (more adults than children). Of those respondents who stated that DOVVSU exists in their community, 79.0% (n=553) said they would seek help from them if they / their child were in serious trouble or badly hurt (either physically or sexually). 20.3% (n=142) said they would not go to them for help and 0.7% (n=5) said they don't know.

Police (general crime investigation): 62.7% (n=1871) of survey respondents stated that there are police in their community. Of those respondents who stated that there are police in their community, 84.7% (n=1580) said they would seek help from them if they / their child were in serious trouble or badly hurt (either physically or sexually). 14.9% (n=277) said they would not go to them for help. In addition, children and adults in the household survey were asked separately what they would do if they or a child in their care were badly hurt by someone. 14.5% (n=791) of responses indicated that they would report to the police. Interestingly, children themselves cited 'reporting to the police' almost as frequently as adults. This is not consistent with the adult-child disparities seen regarding seeking healthcare which may be because reporting to the police does not incur any costs whereas healthcare does. Children in the household survey were also asked what problems that children cause are solved by the police. In order of the most popular answers children mentioned: serious theft, murder, serious violence, rape, and to a lesser extent, damaging property, sexual harassment, minor violence, other sexual abuse, petty theft, smoking cigarettes, prostitution, drinking alcohol, girls getting pregnant and generally 'being naughty'. As is to be expected, the majority relate to serious crimes although a few also mention minor issues like smoking cigarettes and private matters like 'girls getting pregnant' (assuming that this is not linked to rape).

In all regions, it is clear that relations between the police and people in the communities can be strained by inefficiency, abuse of power and corruption. Reports of good relations with the police are perhaps overshadowed by complaints and testimonies of experiences, from all regions, that have led to mistrust and resentment. Researchers personally observed police officers under the influence of alcohol while on duty in more than one research site and also observed them harassing civilians for no apparent reason. In one area, for example, it was reported that communities are not in favour of the DOVVSU and do not want to have anything to do with them if the issue is not criminal. According to them:

The DOVVSU are not doing their work. When you go there they will ask if you have money. If you say no, they will not mind you.

In the Upper East Region, the research team noticed a lack of confidence in the police in the urban community. This is attributed to claims that the police engage in arbitrary arrests of children during 'swoops' and extort money from their parents in order to release them.

See also section 5.2 regarding the role of the police in relation to children in conflict with the law.

- **Courts and the justice system**

The Children's Act calls for the creation of Child Panels in all districts to mediate civil and criminal cases involving children, consisting of representatives from both Government and traditional institutions. However, very few Child Panels have been established to date. The Judicial Service has also taken steps to promote child justice specialisation at the District Court level through appointing Family Tribunal and Juvenile Court Panels which should sit at least once a week (except in Accra where a full time Juvenile Court has been established). Serious crimes against children, such as rape and defilement, are dealt with by the Circuit and High Courts. The Judicial Service has also established

an alternative dispute resolution programme aimed at reducing court backlog and promoting mediated settlements of civil and minor criminal matters. Teams of mediators have been trained through this programme and appointed to each district court.[126] There are therefore a range of systems for solving child cases: court procedures, alternative dispute resolution, traditional arbitration and processes that combine more than one of these.

There are mixed reports from FGD and KII respondents about how children are handled in court and this seems to a large extent to depend on the discretion of individual magistrates. Like other government agencies dealing with child protection, the court system also suffers from a lack of resourcing, weak oversight and corruption. As with the police, rules and regulations regarding children's cases are not necessarily adhered to.

Generally speaking, not much contact is reported between community members and the courts, because so few cases concerning children get that far in the state justice system. From various KIIs it is clear that different child protection players sometimes take the law into their own hands and perform the duty of the courts without due authorization, or exert influence to ensure that the case never reaches the courts. This is done for a variety of reasons, some of which favour children, particularly in cases of children in conflict with the law where withdrawal of cases from the formal system acts as an informal 'diversion' process. For example, in the Northern Regional report it is noted that Chiefs mediate cases between children and their parents and they also withdraw cases from the police station before they are forwarded to the courts. In the Central Region, in the rural research community, traditional leaders help resolve conflicts that involve children, without going to the law courts. Depending on the child rights safeguards in place this type of intervention may or may not be positive for the child offender, the victim and/or the community.

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[126] Mapping and analysis of Ghana's Child Protection System, Child Frontiers, UNICEF Ghana, 2012

Some DSWOs, by their own admission, rule on child custody cases and officials of DOVVSU in certain areas say that DSWOs sometimes even handle criminal cases such as defilement and child trafficking, which are strictly beyond their mandate, without referring them to the courts.

Lawyers / legal aid: Only 19.5% (n=579) of child and adult household survey respondents stated that there was a lawyer or legal aid in their community (more adults than children). Of those respondents who stated that there is a lawyer or legal aid in their community, 54.1% (n=312) said they would seek help from them if they / their child were in serious trouble or badly hurt (either physically or sexually) (more adults than children). 45.2% (n=261) said they would not go to them for help. In addition, children and adults in the household survey were asked separately what they would do if they or a child in their care were badly hurt by someone. Only 0.2% (n=13) of responses indicated that they would consult with a lawyer or legal aid. This reflects findings in the Mapping and Analysis Study which noted that in the majority of cases, children appear in the Juvenile Court without legal representation.

- **The Commission on Human Rights and Administrative Justice (CHRAJ)**

CHRAJ is a public service commission charged with educating the public on human rights. It is also a quasi-judicial institution that has the right to mediate in alternative dispute resolution. It functions differently from the other government agencies because it is not part of the civil service. It reports to parliament, not to any ministry. Its funding comes from the Ministry of Finance and it also receives support and equipment from international development partners.

CHRAJ appears to be relatively better resourced compared with its civil service counterparts such as DSW and the Department of Children. Although they appear to relate well to these government agencies, there does not appear to be any

attempt to integrate or collate data from (e.g.) child maintenance cases between institutions in the same districts.

The areas in which CHRAJ works overlap to some extent with those of the DSW, especially in the handling of child maintenance cases.

With regard to children, we deal mainly with maintenance issues. We do not have the mandate to deal with custody issues or with criminal cases although people do bring them to us. However, we have a family tribunal, normally held in chambers, and hearing panels to provide a more formal way of handling cases without going to court. (CHRAJ principal investigator, urban, UW/R)

The CHRAJ officer in the Greater Accra rural site also said that as far as children are concerned, the most frequent cases they handle are child maintenance cases: On the average we handle about 100 cases a year, at times more. According to the officer, some cases involving the criminal aspects of child maintenance are not pursued to their conclusion because the victim has no money to pay the filing fees at the court. CHRAJ is expecting a directive from the Chief Justice to the courts to make filing costs free to help children. Officials at CHRAJ in more than one region indicate that reported child maintenance cases are frequently withdrawn for two main reasons. One is that many complainants report cases simply to frighten the people they are seeking settlements with. The second is that they lose courage when fully informed of all the official procedures, put off by bureaucratic complexities and delays as well as by the implications of the damage this will cause to family or community relations.

In the Greater Accra Region, CHRAJ also handles cases of child trafficking. In the rural area, CHRAJ organizes annual monitoring exercises in selected communities to get updates on child labour (fishing and cattle herding), child trafficking and children's cases they have resolved through mediation. They also visit schools and health institutions to interact with children.

In the Greater Accra rural and urban areas, CHRAJ faces frustrations including broken promises on the part of the people whose cases they are handling and recalcitrance knowing that they cannot be subpoenaed, arrested or punished like through the courts. At times, people give wrong phone numbers, change them or refuse to answer calls from CHRAJ when CHRAJ is working to protect children.

- ### The Department of Community Development (DCD)

The DCD is responsible for promoting and developing deprived rural and urban communities. It should perform the statutory activities as follows: community animation/public education; promotion of community participation through group dynamics and formation; adult functional literacy and education through the organization of literacy groups; training of facilitators; family life education; and technical services which involve the mobilization of community resources and provision of technical advice for self-help constructional works such as school buildings.

There are mixed accounts about the DCD from different research areas and generally their mandate seems to overlap significantly with that of other bodies, especially the DSW and the Development Planning Unit of the District Assembly. In all regions, the researchers heard about the work of the DSW but there was virtually no feedback about the DCD. Even in the one

community that the DCD was mentioned, the function that it performs with regards to child protection was not specified. In the Central Region, it was noted that the Development Planning Unit has overshadowed the DCD as District Assemblies project these units as the agent of development in the district. It is interesting to note that both in the urban and rural districts, this department seems to be well staffed but has little or no work to do. The Regional Director of CHRAJ explained that there is very little collaboration between CHRAJ and the DCD. He was of the perception that DCD's function is that of the entire Assembly:

The Department's mandate seems to be carried out by several departments and public institutions. Their priorities seem to be misplaced and their work is really not understood within the setting of the public sector.

Other examples of DCD work include the following: In the Upper West Region, it was reported that the DCD has no direct or specific mandate to work for the protection of children. However, as a community development agency, it has shared responsibility to work for the protection of children in the rural communities. The DCD is said to have established Community Child Protection Committees/Teams with support from UNICEF. Through these teams the DCD sensitizes local communities on child protection issues and monitors indicators of child protection in communities. According to

the Community Development Officer in the Northern urban site, they work in collaboration with other partners in the district to rescue children being trafficked from rural to urban areas for work:

We collaborated with social welfare, CHRAJ, the police and the communities and those children were returned to their parents. Follow-ups were made to ensure children were not sent back again. The community elders and members became watchdogs over each other's children. One thing that worked was the awareness and the education we gave to the people…We involve the chiefs and elders and it works for us. I would want the Chiefs to be more involved in dealing with children's cases and their protection.

18.1% (n=543) of child and adult household survey respondents stated that the Department of Community Development is present in their community (more adults than children). 65.7% (n=1971) state they are not present and 16.2% (n=485) don't know (more children than adults). Of those respondents who stated that the Department of Community Development is present in their community, 58.7% (n=319) said they would seek help from them if they / their child were in serious trouble or badly hurt (either physically or sexually) (more adults than children). 39.2% (n=213) said they would not go to them for help and 2.0% (n=11) said they don't know.

• The Department of Children

The Department of Children is one of five implementing agencies within the Ministry of Gender, Children and Social Protection. The Department deals with all issues pertaining to children including education, employment, health, anti-trafficking and nutrition. The mission of the Department of Children is to enhance the survival, development, protection and increased participation of children in the development process, through the formulation of child-specific development policy framework, guidelines, advocacy strategies and plans for implementation by Ministries, Departments and Agencies, District Assemblies, private sector agencies, NGOs and other development partners.

Only 6.3% (n=188) of child and adult household survey respondents stated that the Department of Children is present in their community. 73.6% (n=2207) state they are not present and 20.2% (n=605) don't know (more children than adults). Of those respondents who stated that the Department of Children is present in their community, 51.3% (n=96) said they would seek help from them if they / their child were in serious trouble or badly hurt (either physically or sexually). 47.1% (n=88) said they would not go to them for help and 1.6% (n=3) said they don't know.

There was little mention of the Department of Children at the district level and no mention at the community level in the qualitative research. In the Central Region, it is reportedly headed by a passionate man who works with his team to protect children in the region. However, the department has limited financial and logistical resources to carry out its mandate. The most immediate challenge they face is the need for proper staffing at the district level. They depend on staff who are fulfilling their national service obligations who do not have the relevant skills. Most of these national service people, after being trained by the Department, leave after the period of national service is over. In the Upper West Region, the department is said to have established Community Child Protection Committees/Teams with support from UNICEF. Observations of the research team however suggest that the department is poorly resourced in terms of funding and human capital. There is only one staff member for the whole region that doubles as the acting Regional Director of the Department. According to this official, for the whole of 2012, the department did not receive any funding for its activities.

• The Department of Women

The department has a mandate to mobilize, coordinate and harmonize the activities of women in the region. It was formerly known

as the Department of Women and Children. It currently does not have a specific mandate on children. However, it mobilizes and sensitizes women on child maintenance and protection issues through outreach workshops, fora and durbars[127]. The department also monitors issues of child abuse and provides support to women through capacity-building, to empower them to take adequate care of their children. Observations by the researchers indicate that the department is fairly well resourced compared to others and seems to have relative visibility among women in rural areas.

5.6.2 Government agency collaboration

In terms of inter-agency collaboration, the DSW, Police/DOVVSU and the judiciary are said to relate well to each other in the discharge of their duties in child protection, particularly the DOVVSU and the DSW who work together both on prosecutions and to provide responses to children in conflict with the law, securing shelter or places in remand homes. A DSWO sits on the Family Tribunal and Social Welfare Officers prepare the Social Enquiry Report that the courts require. In the Central Region it was reported that workshops and conferences are useful platforms for bringing them together. In the Eastern Region, discussions with the DSWO revealed that the department has good relations with the police/DOVVSU, CHRAJ and NGOs such as World Vision. These actors pool resources to help each other in child protection activities. The Ghana Health Service also plays a role and networks with other government agencies in child protection cases. Medical staff refer relevant children to the DSW and vice versa as necessary. In cases of defilement, rape and violent abuse, the police refer the victim/survivor to health centres to obtain medical reports which are later used as evidence, conferring to see if there is enough evidence for prosecution. The police in some areas complained that medical reports are sometimes inadmissible in court as examinations may not be thorough enough, and that in some instances medical officers

are reluctant to testify in court, making it difficult to prosecute offenders. The slowness and complexity of the justice system deters medical officers from appearing in court.

Observations from the Upper West Region serve as a good summary of challenges to inter-agency collaboration found in all the regions. These include:

- Duplicated roles between the DSW, Department of Children, Department of Women and DCD;

- Competition between individual agencies over their mandates;

- Competition for scarce resources from development partners;

- Individualistic rather than collaborative efforts;

- No clear guidelines for collaboration.

A number of examples from across the country relate to duplication of activities and lack of inter-agency collaboration. Reporting mechanisms within government agencies are also problematic. In the Northern Region, it is reported that some agencies appear to work in isolation instead of involving others in the handling of child cases reported to them. It was similarly observed in the Ashanti Region that at both rural and urban sites, the child protection actors are many but are mostly disconnected in their work, making them less effective or sometimes invisible. In the Upper East Region, the research team found that all the governmental agencies and departments that have a mandate to protect children maintain separate data, sometimes about the same children in the same communities. The same was noted in the Upper West Region where a CHRAJ official explained:

Part of the problem is poor record-keeping. We keep our statistics but we don't normally have anything much to do with DSW. When there is a forum and both of us are there, we share ideas but with day-to-day cases, there is not that sort of relationship because each

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[127]A gathering of chiefs, elders and community members held within festival periods to discuss issues.

person is strictly accountable to their own channel. The challenge comes because of our poor record-keeping. And if there was a way of harmonizing, at what point do we harmonize?

A DOVVSU official pointed out that t**he overlap between the roles of the DSW and the DCD stems in part from the Children's Act** which stipulates that 'The Social Welfare and Community Development Department of a District Assembly […] shall investigate cases of contravention of children's rights.'[128] This provision anticipates the fusion of the two departments but has led to confusion between their current roles as they are not yet joined.

In some cases a lack of trust or collaboration was reported, often due to a lack of resources and competition for donor support. In the Central urban community the relationship between DSW and DOVVSU was said not to be a trusting one:

If there is an increase in crime, it is due to the actions or inactions of the Police. (DSW official)

An example was given of the case of an 11-year old girl in the district who was being forced into marriage in 2011. The case was brought to the attention of the DSW and the police were brought in. The case was followed by the DSW for months but without the DSW being informed, the girl was taken out of the community and married. In theory, there should be a probation officer in post in every police station to ensure that child-related cases brought in are communicated to the DSW office and appropriate procedures followed. However, in the research sites in the Western Region, these officers were not in post and, as a result, DWSOs take on their responsibilities alongside their own work. They highlighted that in situations where they are unavailable because of being engaged in other duties, child-related issues are seldom reported and the police end up using their own discretion to solve cases without any input from the DSW office.

There are examples of collaboration between local government and line agencies from different regions.

District Assembly collaboration with DSW: According to the Deputy Coordinating Director of the District Assembly in the Northern urban site, it is the DSWO who is the point of first contact when cases are brought to the District Assembly. The DSWO then involves the Gender Desk Officer and the Assembly person of the electoral area as well as the Chief and opinion leaders, to use alternative dispute resolution for the settlement of civil cases - such as a parent or teacher caning a child. In criminal cases such as defilement, they involve the police to process the perpetrator through the court. District Assemblies also collaborate with DSWOs through their Social Services Committees, which was noted in particular in the Central Region. In the Western Region, DSWOs in both districts reported they relate well with the District Assembly and are able to rely on them for the funds and logistical support (such as borrowed vehicles) needed for the effective discharge of their duties. The District Assemblies, despite not always receiving the money they need to distribute to the various departments, still manage to

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[128] Children's Act, Sub-Part II: Care and Protection; District Assembly to protect children; 16(2)

find some money - from internally generated funds like road tolls and parking fines - to help the DSW carry out its activities. In the Volta Region, in contrast, the DSWOs believe that the District Assemblies are not working hard enough in protecting children in the district, noting the funds are inadequate to enable them to operate effectively. For their part, the District Assemblies believe they are doing their best given the constraints.

District Assembly collaboration with CHRAJ: In the Eastern Region, Assembly persons said that they relate well with the police, the DSW and CHRAJ, and forward cases they receive to these institutions for appropriate action. Effective collaboration between District Assemblies and CHRAJ was also reported in the Central and Northern Regions. For example, in the Central Region, CHRAJ serves as a technical support to the District Assembly and is represented on their Social Services, Justice and Security Committees. CHRAJ is also represented at District Assembly meetings in the urban community to fulfil their oversight role which includes checking on the budget and work of the District Assembly. They also have the power to investigate the District Assembly,

which they sometimes do. In the rural district of the Northern Region, CHRAJ officials said: We have a good relationship with the District Assembly. We work as collaborators.

Problems exist in some regions, however. For example, one Community Development Director alluded to the fact that some Assembly persons feel that once people have brought cases to them to be settled, these cases do not need to then be forwarded to the courts.

There are also times when relations between Assembly persons and the police become strained. According to a former Assembly person in the Eastern Region, when he would go to bail someone out of jail, the arresting officers expected bribes and when he refused they would not respond the next time he called them to help solve a problem.

Collaboration also exists between a range of development partners, CSOs and government agencies, in addition to inter-agency collaboration and collaboration between local government and line ministries. For example, in the Northern Region, the Community Development Officer in the rural district mentioned that they receive support from development partners such as UNICEF,

World Vision and Baptist Child for their child protection activities. In the urban district, the NGO Somgtaba works closely with CHRAJ and DOVVSU through its community advocacy teams and school mentors. In the Central Region, the majority of child-centred projects and programmes being implemented by government and/or civil society (e.g. NPECLC and World Vision community projects) feature roles and responsibilities for the DSW. CSOs respect the knowledge and experience of the DSW and believes their involvement is essential. CHRAJ also collaborates with CSOs as and when the need arises. CSOs involved in human rights issues collaborate with CHRAJ for advice or referrals.

In terms of relations between government agencies and communities, for the reasons previously outlined, child protection issues are most frequently resolved within and between families and only if this approach fails will the Chief or others – possibly government agencies - become involved. Relationships between traditional leaders and government agencies was found to differ from community to community and from agency to agency. In the Eastern Region, traditional leaders report cases such as defilement to DSW, DOVVSU and CHRAJ when they are not able to resolve them themselves, and especially when the culprits do not pay the fines imposed. In the rural district of the Northern Region, CHRAJ officials reported:

We collaborate with the traditional authorities in the district in resolving cases. The Chief directs people to our office and the law equally recognises the powers of the Chief and so when a case is before a Chief we do not interfere. We only interfere when the Chief is not able to resolve the problem and refers it to us. The Chiefs in the community are doing mediation and we are equally doing that. We do not have many child-related cases because of the tradition of the people.

Other examples of collaboration with traditional leaders: In the Volta Region, the DWSO reported they are trying to incorporate traditional leaders into solving their cases. In the Upper East Region, traditional leaders help DSWOs with regards to mobilization and information in solving child protection cases. This works mainly through their close collaboration with the Community Child Protection Committees/Teams. In the rural community in the Western Region, the DSWO also works closely with the Community Child Protection Committee. In the Eastern Region, the Queen Mothers collaborate with the police and the DSW, as they are privy to many abuse cases that happen within the community. They intervene and report cases to these bodies for the appropriate actions to be taken. According to one of the Queen Mothers, their collaboration with the police has helped to reduce the number of sexual abuse cases in the community. In the same region, the courts also collaborate with traditional leaders to resolve some cases out of court. As part of 'Court Connected Alternative Dispute Resolution' the magistrate may pass a case on to the Chiefs and Assembly persons to adjudicate. In these instances, the magistrate ensures the Chiefs and Assembly persons are aware of their limitations and of the forms of punishment or sanctions they can impose.

There are some challenges in working with traditional leaders. For example, the magistrate and the court registrar in the Eastern Region revealed that the Traditional Leaders and the Assembly persons sometimes interfere in the judicial process by withdrawing cases from the courts in an attempt to settle them at home, including criminal cases such as rape, especially when their relatives or employees are involved. In the Western Region the police also reported that they are hindered in their duties because opinion leaders and elders go to the police station to withdraw cases involving children in order to settle them at home. In the Brong Ahafo Region it was indicated that there is no relationship between any government agency and traditional leaders in either of the two communities, mainly due to the distance between the communities and the district capital where the government offices are located.

Conclusions and recommendations

6. Conclusions and recommendations

The research reveals that various types of emotional, physical and sexual violence, abuse, exploitation, and neglect of children are present all over the country. Specific child protection concerns identified include child marriage, female genital mutilation/cutting (FGM/C), trafficking for the purposes of child labour and sexual exploitation, child labour in general and separation of children from biological parents.

Particularly vulnerable groups identified are girls, children in puberty, children in single parent and re-constructed families, children living in conflict zones, children who have been orphaned, children with disabilities, affected by HIV, or from minority groups.

In the Ghanaian cultural context, there is a natural dedication of most caregivers and community members to protect children – a great strength and opportunity regarding child protection. However, awareness of child development and protection is generally limited and the impact of violence, abuse, exploitation and neglect on children is often not recognized. Children are socialized to be submissive and sometimes to take on the responsibilities of adults. Discipline is regarded as an important part of child-rearing. Neglect and lack of parental supervision, often linked to poverty, is mentioned as a cause of harm to children in all regions of the country.

Physical harm of children is the most perpetrated form of discipline and occurs widely at home and at school. On the other hand, children consider emotional harm to have a greater negative impact on their sense of safety.

Regarding sexual abuse, transactional sex (children having sex in exchange for food, shelter, clothes and other items) and children watching pornographic images were identified as the most prevalent and concerning forms of sexual abuse in their communities. Sexual abuse by teachers was noted as a particular concern affecting girls.

As for crimes committed by children, DSW, Police/DOVVSU and the Judiciary are confronted with many obstacles that hinder their well-functioning, such as lack of remand homes or the poor quality of the ones that exist. The police commonly avoid dealing with juvenile cases or treat children as adults. Juvenile justice is highly gendered, with many more boys coming into conflict with the law than girls. On the other hand, girls are 'criminalised' much more than boys for sex-related 'offences' such as 'getting pregnant', adultery, promiscuity etc.

State actors in general are limited in their ability and efficiency to prevent and respond to child protection concerns, due to resource constraints among other factors. Challenges in collaboration between stakeholders were also identified. They include duplication of roles, competition between individual agencies over their mandates and for scarce resources, lack of trust, lack of clear guidelines for collaboration, problematic reporting systems. The extent of collaboration and cooperation varies from community to community.

The family and communities play an important role in preventing and responding to child protection concerns in Ghana. In fact, 'informal' actions for child protection are more popular than 'formal' actions involving government services or structures. Also, the first port of call when a child appears to be hurt is a family member and subsequently to the chief for mediation if parties failed to reach resolution at home. At present, however, 'informal' responses might not always be child-centred or appropriate, as there is a strong emphasis on preserving community harmony over and above the welfare of the child. 'Informal' community structures are key resources to be strengthened in their roles for child protection.

Based on the findings of the study, the following recommendations are presented for consideration:

Advocacy, social change and support to families

1. In addressing child protection issues, the family and community as the base units of child protection are pivotal. There is a need to develop approaches and systems that build up family and community capacity to protect children rather than those that rely primarily on the intervention of external players.

2. Promote behavioural and social normative change through engagement, public discourse and advocacy engaging broad levels of constituencies.

3. Behaviour and practices conducted under the auspices of religion or tradition that are in clear violation of the law and of children's rights (such as abuse of children in prayer camps, child marriage, ritual servitude, ritual infanticide etc.) must be urgently addressed in close partnership with religious and traditional leaders.

4. Advocacy and awareness-raising on child protection, using the findings and data presented in this report, is encouraged. Such advocacy should be undertaken in conjunction with national leaders and opinion leaders within communities.

5. Families, in particular young parents and foster parents, should also be supported with parenting/caregiving skills to better care for their children in a positive, child-friendly, rights-respecting and non-violent fashion. Awareness raising is needed in the area of sexual abuse, addressing taboos and enabling greater discussion of such issues within the family.

6. More research is needed to understand if and how income levels and poverty impacts on child protection. While no strong correlation was found in this research between income level and types and prevalence of child protection abuses, it is known that poverty often presents limited choices of families and children which can in turn impact negatively on protection issues (children engaged in harmful child labour for example).

Child protection service delivery

7. Numerous respondents taking part in the research expressed recommendations to better resource child protection as a sector. At national and regional levels, sector Ministries and Agencies working in child protection and, above all, the Department of Social Welfare, need to be far better resourced (in terms of both funding and staffing) for activities related to child protection and these resources need to be managed more efficiently and accountably.

8. The mandate and roles of all government agencies and departments working in child protection need to be clearly defined to avoid duplication of functions and rivalry. This will contribute to improved collaboration, coordination and good governance of child protection actors at all levels, from central government to community level, including traditional leaders and other non-state partners.

9. A comprehensive system for regular data collection and information sharing between agencies working in child protection needs to be put in place. Such system needs to be designed being mindful of issues of confidentiality and manage who has access to details about vulnerable children and their families.

10. In relation to assisting children and their families, there needs to be more recognition of the fact that children suffer not only physical but also psychological and emotional harm though harsh treatment, abuse and neglect. Thus, psychosocial support of victims/survivors needs to be as much

of apriority in child abuse cases as bringing the perpetrators to justice.

11. The government should ensure that families of victims/survivors do not have to pay any costs towards the processing of child abuse cases. These include medical fees for examination of abuse victims/survivors, police filing fees, transportation costs for police and other officers following up on child abuse cases and other operational costs for handling cases involving children.

12. When state agencies take temporary custody of children in crisis situations, they must handle the cases appropriately and process them promptly and efficiently so that children can be reunited with their families – or placed in a different family environment – within the shortest possible time.

13. There should be an NGO forum or other means for NGOs working in child protection to collaborate, streamline their work and avoid duplication and rivalry over resources.

14. The Ministry of Education (MoE) and Ghana Education Service (GES) need to involve themselves more in child protection issues and collaborate more closely with other stakeholders in the sector. The Guidance and Counselling Unit of GES in particular should be more active and effective in addressing child protection. The GES should provide training and orientation to teachers to promote positive, non-violent and rights-respecting forms of behavior towards children, classroom management and discipline of children in the classroom.

Child Protection Baseline Research Report