

**ASSESSING THE IMPACT OF GENDER-BASED VIOLENCE
INTERVENTIONS IN GHANA**

By

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**Dalhousie University is located in Mi'kma'ki, the
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DEDICATION

I dedicate this work to my wife, Abigail, for your love, care and support throughout this journey.

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ABSTRACT

This thesis explores the persistent occurrence of Gender-Based Violence (GBV) in Ghana despite the country's ratification of international legal frameworks and the establishment of national bodies and policies to combat it. Through the lenses of hegemonic masculinity and social-ecological theory, the study assesses the effectiveness of government and NGO interventions in preventing, reducing, and addressing GBV.

Using a qualitative approach, in-depth interviews were conducted with 15 participants, including human rights and gender policy analysts, government officials, and NGO advocates. The research argues that NGO interventions that promote advocacy, education, and community participation such as COMBAT, VSLA, and the Community Reconciliation Committee Model, are more effective in raising awareness and building the agency of communities to help address GBV. While few government interventions were effective, many mainstream government interventions such as arrest, counselling, and law enforcement were found ineffective in Ghana due to interference, illegal and corrupt ADR processes, and a lack of political commitment to ensure adequate finance, logistics, and shelters are available to provide the full implementation of GBV interventions. The implementation gaps that inhibit the successful implementation of GBV interventions stem from a lack of priority to the problem, underfunding by the government, and overdependence on foreign aid.

This study suggests timely and adequate government agencies and NGOs, uniform and robust reporting systems, and community engagement are essential to improving GBV interventions in Ghana. Additionally, it recommends educating men and boys on positive masculinity and reviewing cultural practices that hinder gender equality. The findings emphasize the need for alternative funding sources for NGOs in Ghana.

LIST OF ABBREVIATIONS USED

ACHPR	African Charter on Human and Peoples' Rights
ADR	Alternative Dispute Resolution
AWRWC	African Charter on the Rights and Welfare of Children
BPfA	Beijing Platform of Action
BTSP	Back to School Program
CEDAW	Convention on the Elimination of all Forms of Discrimination Against Women
CHRAJ	Commission on Human Rights and Administrative Justice
CRC	Convention on the Rights of the Child
CRCM	Community Reconciliation Committee Model
CSOs	Civil Society Organizations
DEVAW	Declaration on the Elimination of Violence Against Women
DOVVSU	The Domestic Violence and Victims Support Unit
DV	Domestic Violence
DVA	Domestic Violence Act
DVS	Domestic Violence Secretariat
FGC	Female Genital Cutting
GBV	Gender-based violence
GESI	Gender Equality and Social Inclusion
GPS	Ghana Police Service
GSS	Ghana Statistical Service
HM	Hegemonic masculinity
IASC	Inter-Agency Standing Committee
IPV	Intimate Partner Violence
LEAP	Livelihood Empowerment Against Poverty
MDGs	Millennium Development Goals
MICS	Multiple Indicator Cluster Survey
MMDAs	Metropolitan, Municipal, and District Assemblies
MoGCSP	Ministry of Gender, Children and Social Protection
NGO	Non-governmental organizations

PLC	Professional Learning Community
PTSD	Post-Traumatic Stress Disorder
SAP	Structural Adjustment Policies
SBC	Standard-based Curriculum
SDG	Sustainable Development Goal
SET	Socio-Ecological Theory
SRGBV	School Related Gender Based Violence
SSP	Safe School Policy
UN	United Nations
UNHCR	United Nations High Commission for Refugees
UNICEF	United Nations Children's Emergency Fund
VAC	Violence Against children
VAW	Violence Against Women
VSLA	Village Savings and Loans Associations
WAJU	Women and Juvenile Unit
WHO	World Health Organization

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CHAPTER 1 INTRODUCTION

1.1. Background to the Study

Gender-Based Violence (GBV) is one of the most persistent and ongoing human rights violation, life-threatening public health and human protection issues affecting women and children (UNIFEM, 2009; USAID, 2006). It is a ‘shadow pandemic’ which occurs worldwide and affects all people and societies regardless of culture, class, ethnicity, age, race, socioeconomic status, political inclination, or religion. Unfortunately, women at every stage of their lives, from infancy to old age struggle with GBV as a result of unequal power relations created and sustained by gender inequality (Chege, 2007; UN Women, 2013; UN Women, 2017). Globally and in Ghana, 1 in 3 women and girls experience sexual or physical violence in their lifetimes (MoGSCP, 2014; World Bank 2019, UNFPA, 2020). GBV takes many forms including domestic violence, female genital cutting (FGC)¹, femicide, trafficking, sexual violence, early marriage, and intimate partner violence (IPV)². It also includes emotional, physical, mental or sexual harm, threats of such acts, coercion and other deprivations of liberty (UN,1994) occurring in the domestic or public sphere. GBV may include the psychological, physical, sexual, emotional and economic violence perpetrated or condoned within the family, the community or by the state and its institutions (UN, 1993). GBV affects the self-esteem and health of victims and prevents them from realizing their full rights and potential as equal citizens.

GBV is rooted in gender inequality, the abuse of power, and harmful norms (United Nations High Commission for Refugees (UNHCR, n.d.). The United Nations Children's Emergency Fund (UNICEF) described it as “the most pervasive yet least visible human rights violation in the world” (UNICEF, 2020). A 2024 UN report showed 55% of 120 countries as of 2022 did not have non-discrimination laws explicitly prohibiting direct and indirect discrimination against women. Additionally, by the end of 2022, approximately half of these countries still did not have quotas for women in their national parliaments.

¹ FGC is a traditional practice that involves the partial or total removal of the external female genitalia or other injury to female genital organs for cultural or other non-medical reasons. FGC is common in the northern regions of Ghana, but it is not practiced among ethnic groups in the southern areas. However, people who have migrated from the north to the south continue to practice it (Adongo et al. 1998).

² IPV refers to any behavior by a current or ex-partner that causes or is likely to result in physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviors (WHO, 2021).

The United Nation (UN) (2024) notes gender balance, particularly in terms of women's involvement in public life and leadership positions, still remains a distant goal. The report also highlights that it will take 176 years to achieve a gender balance in leadership roles based on the current pace. Many women continue to lack control over their sexual and reproductive health, and violence against them persists. Likewise, violence persists against children, especially those living in rural, underdeveloping and developing countries as well as deplorable conditions. Countries, civil societies, Non governmental organizations (NGOs) and individuals have attempted to take urgent action to challenge biased social norms, eradicate harmful practices, and reform discriminatory laws.

To this end, UN designed the Declaration on the Elimination of Violence Against Women (DEVAW) which addressed three contexts of sexual abuse and GBV: firstly, within the family (including marital rape, sexual abuse, FGC, and dowry-related violence); secondly, in the community (including rape, sexual harassment, and sex trafficking); and finally, by the state (all forms of violence tolerated or perpetrated by state actors) (UN, 1993). Consequently, global political consensus on the need for action on GBV has grown. The UN launched the Millennium Development Goals (MDGs) in 2000 to provide a common language to reach global agreement on realizing gender equality and empowering all women and girls. In 2008, the United Nations Secretary-General Ban Ki-Moon issued an international call to end violence against women by launching the UNiTE to End Violence against Women campaign (Ki-Moon, B. 2010). The UN General Assembly adopted the Sustainable Development Goals (SDGs) in September 2015 to establish coherence in the global development agenda from 2015-2030. Among the 17 SGDs are targets aimed at promoting the good health and wellbeing, quality education, gender equality for all in order to “leave no one behind” (UN, 2015). SDG 5 highlights the need to achieve gender equality and empowerment of women and girls which require countries to adopt stricter and actionable measures to globally end GBV.

Ghana is a signatory to international legal frameworks that protect women and children including the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW), the Convention on the Rights of the Child, the MDGs and SDGs. By ratifying the various legal frameworks, Ghana declared its full commitment to the various goals and targets including protecting women sand children's rights and

promoting gender equality. Ghana has also developed a number of national gender frameworks (legislation and policies) to address the GBV which are implemented by governmental agencies. A 16 Days of Activism campaign was set aside every year from November 25 to December 10 to intensify sensitization and campaign against Sexual and Gender-Based Violence and their harmful consequences. The Ministry of Gender, Children and Social Protection (MoGCSP) and its agencies, along with NGOs concerned with GBV and UNFPA, participate in the campaign. Ghana's 1992 Constitution guarantees the protection of rights, dignity and equality before the law. Non-governmental organisations (NGOs) in Ghana play a key role in striving to end GBV by implementing programs and initiatives. Nonetheless, over 48 percent of Ghanaian women and girls have reported sexual abuse (MoGCSP, 2018). The experiences of the boys are often overlooked in GBV discussions and research. Therefore, this study focuses not only on women and girls but also includes the experiences of boys due to their similar vulnerability to violence.

Despite inadequate data on violence against children in Ghana, most girls under the age of 15 reported their first sexual intercourse was a result of rape (Rominski et al. 2017). This is in line with the Multiple Indicator Cluster Survey (MICS) in Ghana, indicating roughly 94% of Ghanaian children aged 2 - 14 suffer physical or psychological abuse (Mueller et al., 2016). Children in Ghana experience various forms of violence at home, including neglect, rape, and child marriage, as well as in the community, such as FGC and defilement. Maltreatment or physical abuse such as caning, verbal abuse, and denial of food as punishment are unfortunately prevalent in schools,. These harmful practices are often influenced by the socioeconomic status of the perpetrators and entrenched sociocultural norms (Tenkorang & Owusu, 2015).

Even though the laws in Ghana prohibit child violence (DVA, 2007), physical punishment like hitting and striking a child's head is a prevalent form of child abuse, often seen as a form of discipline or correction, despite some punishments being regarded as more severe (Addae & Tang, 2021; Maliackal & Maliackal Varghese, 2021; SOAR, 2018). Furthermore, Tenkorang and Owusu (2018) argue that non-physical violence such as name-calling, yelling, insults, threatening, and demonstrating aggression towards children are not considered violence or problematic due to some Ghanaian socio-cultural constructions and interpretations of what constitutes violence. While the constitution and

criminal codes of Ghana support gender equality, there are several implementation gaps. Also, there is limited knowledge regarding whether these interventions are effective. In this study I assessed the effectiveness of interventions implemented by governmental agencies and NGOs to provide a better understanding of the implementation gaps that limit the country's ability to safeguard the rights and freedoms of its citizens, especially women and children who are most vulnerable.

1.2. Research Question

This study answers the overarching research question: How effective and appropriate are the policies, strategies, and programs implemented by the Ghanaian government and NGOs? The following sub-questions support this overarching research question:

1.2.1 Sub-Research Questions

1. What GBV policies and programs have been implemented by the Ghanaian government and NGOs?
2. What effective strategies can and should be undertaken to address and prevent GBV and the impacts of hegemonic masculinity (HM) at the individual, household, community, and societal levels in Ghana to address and prevent GBV in Ghana?

1.3. The Purpose of the Research

This study examined the effectiveness of government and NGO interventions in preventing, reducing, and addressing GBV concerns. The study also explores how GBV interventions implemented by government agencies and NGOs have impacted the lives of people in Ghana. The study helps in understanding how NGOs and activists advocate for changes in government policies to address gaps in addressing GBV in Ghana. This study highlights the roles played by government and NGOs in addressing GBV and identifies areas of their operations requiring improvement.

1.4. Significance of the Study

The findings of the study when published and shared with the Ministry of Gender, Children, and Social Protection of Ghana (MoGCSP) will serve as an update on how interventions impact the well-being of Ghanaian households. The study contributes to the knowledge of GBV in several ways because the findings add to the limited existing

literature on the impact of GBV interventions. According to UN (2016), women and girls must have equal rights and opportunities and live free of violence and discrimination. Providing women and girls with equal access to education, healthcare, decent work, and representation in the political and economic decision-making process fuels sustainable economies and benefits societies and humanity. The study will also help the Ministry, governmental agencies and NGOs to make practical applications to enhance the development of policy interventions and strategies, as well as to expand the effective implementation of GBV interventions in Ghana and beyond.

1.5. Research Problem

Globally, women and children are victims of the world's most inhumane, discriminatory and oppressive practices unleashed by men and sometimes by fellow women dictated by unequal power distribution, patriarchy, societal expectations and cultural assimilation of violence as normal daily routines resulting from gender inequality. One in three women worldwide has been subjected to physical and/or sexual violence, intimate partner violence or non-partner sexual violence in their lifetime (WHO, 2021; World Bank, 2019). Also, women and girls make up 71% of human trafficking victims and children make up to one-third of the 40.2 million people trafficked worldwide (Minderoo Foundation's Walk Free, 2018; UN Children's Fund, 2018). In Africa, approximately two-thirds of trafficked individuals are children (Minderoo Foundation Walk Free 2019; UNODC 2018).

Globally, an estimated 640 million girls and women are married before they turn 18 years of age. Despite efforts that prevented 68 million child marriages so far, the UN predicts it will take another 300 years until child marriage is eliminated at the current rate, suggesting there is insufficient progress to eradicate the practice by 2030 (UN, 2024a; 2024b). Although progress has been made in reducing child marriage, statistics indicate 19% of young women are still married before the age of 18, which is a decrease from 22% in 2013 (UN, 2023).

In addition, a report by UNFPA in 2020 validates the findings of the 2019 WHO report, revealing that one-third of women have encountered intimate partner violence, non-partner sexual violence, or both (UNFPA, 2021, WHO, 2019). Recent UNFPA statistics show 1 in 5 girls worldwide is married before they turn the age of 18 (UNFPA, 2021).

This alarming statistic highlights the prevalence of child marriage and the urgent need to address this issue globally. GBV, particularly physical and sexual violence, is widespread among women and children. However, childhood violence has not received the required attention, even though it occurs on a larger scale; hence, it is poorly reflected in official statistics (Malo et al., 2019). Therefore, domestic violence (DV)³ experienced by children are not properly addressed.

Girls who are forced into child marriages face an increased risk of encountering GBV, experiencing complications and/or fatality during pregnancy and childbirth (Raj, 2010). Unsafe sexual practices can have several negative health consequences, including but not limited to unwanted pregnancies, unsafe abortions, gynecological problems, physical injuries, maternal mortality, and STIs such as HIV (Girls, 2018). Additionally, they are denied access to education and in most cases live in lifelong poverty. A high prevalence of psychological distress and mental disorders have been documented in sexual and GBV survivors (Johnson et al., 2008).

A UNFPA (2023) report found that, on average, a woman or girl is killed by a close family member every 11 minutes. Heise (1994) explains that cultural norms, stigmatization, and social and economic barriers have led to gender inequality which results in female-focused violence, making women and girls the primary victims of GBV (Violence, 1999; Carpenter, 2017). This explains how the most vulnerable groups, such as women and children, face the adverse impact of gender inequalities. In many societies, GBV is often informed and legitimized by gender-based values and patriarchal norms that discriminate against women and children and sanction violence against them. A review by the UN (2024) shows over 230 million girls and women worldwide underwent FGC between January and April of 2024, which shows an increase of 30 million compared to the previous estimate in 2016. The UN predicted more than 70 million girls will undergo FGC by 2030 (United Nations Population Fund, 2020). FGC victims may not fully comprehend the procedures and consequences, or their consent may not be obtained (WHO, 2019). Despite being recognized as a violation of human rights, FGC is a public health concern that may result in infection (including HIV), infertility, complications during

³ Domestic violence is often used to refer to IPV and child abuse in Ghanaian laws and policy documents produced or sponsored by state agencies.

childbirth, excessive bleeding, and urinary issues depending on the type (Berg & Denison, 2012; Berg et al., 2014; Ismail et al., 2017). According to Esho (2012) and Mulongo et al. (2012), these operations result in pain, short-term health hazards, and long-term physical and mental health issues. Women who have had FGC are 25 percent more likely to get STIs (Wangner, 2015); they are more than twice as likely to have serious and long lasting birthing complications, such as stillbirth, neonatal death, and postpartum hemorrhaging; and more likely to suffer from depression, anxiety, mistrust of caregivers, and marital issues related to sexual dysfunction and pain (Nzinga et al., 2021; Raheem et al., 2018; Dorkenoo, 1999). Tordrup et al. (2022) predict the global healthcare system will require US\$2.1 billion in 2047 to treat the health effects of FGC, an increase from the estimated US\$1.4 billion in 2018. Nonetheless, cultures practicing FGC believe it is necessary for social acceptance, hygiene, and controlling female sexual desire. Advocates for eliminating FGC have pushed for legal bans along with other interventions, such as informing families about the health risks of FGC, inviting families to make public declarations against the practice, and providing training for alternative livelihoods for traditional cutters. However, most interventions have not been evaluated in a rigorous causal inference framework (Novak and Bussberg, 2023) and most evaluated methods have been unsuccessful at reducing FGC's prevalence (Novak and Bussberg, 2023, Johansen et al., 2013, Berg and Denison, 2013). Despite efforts to eliminate the practice due to its criminality, human right abuses and health implications, FGC persists in Northern Ghana.

Sexually exploited women and girls often experience various violations, including, but not limited to, forced sex with pimps and customers, beatings, and forced abortions. Sexual exploitation is hugely underreported because victims are vulnerable to violence, stigma, hunger, or poverty. It is also the case that they lack faith in institutions like the police, lack access to legal services, or lack the expertise to use them (Traunmüller et al., 2019; McBride et al., 2020). In some honour-based societies, the most common methods of execution for murders include stoning, shooting, burning, and live burial (Anwar et al., 2019; Gerbaka et al., 2021). Individuals are punished for violating cultural and religious norms. Women, Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ-identified) people are disproportionately affected by this custom, as this punishment is carried out for individuals who get raped, refuse suitors, have extra-marital and sexual relations, seek a

divorce, or engage in homosexual acts. Husbands and male family members who commit these killings often escape punishment or face reduced sentences because these crimes are viewed as socially acceptable in certain areas. Finally, sexual and domestic violence simultaneously result from and reproduce low levels of education, exposure to and normalization of violence, drug and alcohol abuse, and a culture that subordinates women and girls.

Since 1992, various UN institutions have worked relentlessly in an attempt to eliminate all forms of violence directed specifically against women. For example, the 1993 Vienna Declaration and Programme of Action were geared towards the elimination of sexual harassment, exploitation, and trafficking of women and other traditional or customary practices that violate the rights of women (United Nations, 1992; 1993; 1996). Although international law expects states to uphold human rights (UNDAW, 2007), some prioritize their religious, cultural, or traditional beliefs over their legal obligations, especially in countries where religion or culture justify the state's failure to address violence stemming from these beliefs.

Ghana is a signatory to every UN convention and treaty including the United Nations' 1948 Universal Declaration of Human Rights of Freedom, marking a watershed in the long international quest to assert the supremacy of human and citizen rights to equality, life, and liberty. Ghana has made attempts to address GBV in several ways. Ghana was represented at the CEDAW in 1979, and the country is a signatory to African Union's Charter on Human and People's Rights. These two instruments guaranteed women several rights and freedoms, including freedom from customs and traditional practices that discriminate against them as well as freedom from cruel, inhumane, and degrading treatments. Governments around the world have acknowledged that GBV, including physical, intimate partner, and sexual abuse, are all violations of basic human rights and a global policy concern. In recognition of this, "eliminating all forms of violence against all women and girls in the public and private spheres" is one of the targets of the SDG 5. To highlight the significance of addressing GBV, the 60th Session of the UN Commission on the Status of Women in March 2016 selected the "elimination and prevention of all forms of violence against women and girls" as its review topic.

Ghana, in its effort to integrate some of these guidelines and standards into national legislation, has drafted and continues to draft several amendments to existing laws, including the criminal code to prohibit FGC, widowhood rites, and other traditional practices that are considered harmful to women. The Women and Juvenile Unit of the Police Service (WAJU), now the Domestic Violence Victim Support Unit, was established in 1999 to specifically address violence against women and juveniles (Criminal Act, 1992; 1996). The Criminal Code of Ghana and Ghana's 1992 Constitution protect women from various forms of abuse that violate their human rights. In Ghana, there are various pieces of legislation to safeguard the rights of marginalized groups such as women and children; however, the prevalence of GBV in Ghana is high, partially owing to underfunded law enforcement agencies (Bott et al., 2005; Ahonsi, 2010; Apusigah, 2011), fear of stigmatization or further abuse (Alvarado et al., 2018; Alo et al., 2023); lack of confidence in the judicial system, including law enforcement; and refusal to report sexual and spousal abuse (Raghavendran et al., 2022; Alvarado et al., 2018) because GBV issues are considered private family matters. Also, the high prevalence of IPV, especially physical and sexual violence in Ghana, can be attributed to the deep cultural belief that it is socially acceptable for men to discipline their wives physically or have her when he needs to because he has paid off her bride's wealth in full to her family by going through all recognized customary rites in the society. Moreover, many Ghanaian women live in a highly patriarchal society where the man or father is the head of the household and makes all major household decisions. Likewise, Amoah et al. (2021) report that sexual matters are regarded as private and forced sex in marriage is not viewed as an abuse but as a husband's marital right. Women who encounter sexual abuse within their marriage are unlikely to report it to law enforcement authorities like the police and DSW. Consequently, the perpetrator, victim, their families, and law enforcement officers may not view it an abuse. Unwillingness to report intimate partner violence may affect the effectiveness of planning and future intervention programs which could help reduce or prevent GBV issues. Lack of political commitment from government is another challenge as it hinders the justice delivery process. In a recent development, the parliament of Ghana approved the criminal amendment bill, commonly referred to as the Anti Witchcraft Bill, with the intention of explicitly outlawing accusations of witchcraft and the practice of witch

hunting by individuals known as ‘witch doctors’. Unfortunately, this bill did not come into effect as the president did not approve it into law (Graphic Online, 2023; Commission on Human Rights and Administrative Justice [CHRAJ], 2024; GNA, 2024). Additionally, GBV interventions may not address the root cause of violence and, therefore, prevention of violence may be delayed. Government institutions addressing GBV have used prosecution, legislation, advocacy, and awareness creation, while NGOs, in addition to lobbying and education, have focused on the empowerment in the form of business grants and skills training, but the situation remain unchanged.

Most cases of GBV reported in electronic and print media in Ghana show abuse of women by men, and vice versa, occurs daily. The unreliable and unresponsive nature of the police and other state agencies in addressing GBV has led to family-oriented lifestyle shows on radio and TV in Ghana becoming informal courts (court of public opinion) which settle such cases on air (personal observation, 2023). According to recent statistics, from 2015 to 2017, at least three children per day were subjected to daily abuse (Ghana Open Data, 2020; GNA, 2021). In 2016, almost one-third of women experienced domestic violence, yet only 9% reported it to the authorities due to existing patriarchal structures (Uzobo & DA Ayinmoro, 2021). GBV results in serious economic consequences with the country losing over 70 million Ghana Cedis (Ghc) (US\$18.9 million) in 2016 due to Violence Against Women (VAW) and between Ghc 900 million to US\$1.5 billion annually due to violence against children (VAC) (UNICEF, 2020).

The COVID-19 pandemic worsened the reported cases of femicide, with over 44 cases recorded in just four lockdown areas within two regions in 2020 (GNA, 2021). Between January and August 2021, more than 25 cases of femicide were reported in both rural and urban areas of Ghana (Citi News, 2021) and more than 100 cases were reported between August 2021 and 2023, all of which were committed by male partners. While these statistics are deeply concerning, these numbers may not include all unreported cases due to inadequate data management, reluctance or pressure from family members to keep violence issues private.

This study examines the successes and challenges of interventions that have been implemented and how they have impacted the lives of Ghanaian households. To the best of my knowledge, this study is one of few studies that examines the effectiveness of GBV

interventions implemented by government and NGOs to address GBV. Previous studies have focused on causes and the types of GBV, or on describing NGO programs or government programs without evaluating or documenting the effectiveness of these different interventions.⁴

1.6. Organization of the Study

The study is organized into six chapters. Chapter One lays the foundation for the study by presenting the background, research questions, the purpose of the study, the significance of the study, problem statement and how the study will be organized. Chapter Two discusses the theoretical framework and provides a conceptual review of related works. Chapter Three presents the research method, research design, sampling procedure, techniques of data collection, processing, and analysis, and the positionality of the researcher. Chapter Four reviews existing literature related to the research problem. Chapter Five presents the discussion of the findings based on the themes developed from participants' narratives. Chapter Six provides the conclusions and implications for research, practices and policy as well as limitations and recommendations for future research based on the findings of this study.

⁴ See e.g. Bawah 1999, 2009, Tenkorang 2013; 2023, Amoakohene 2004, Osei 2011

CHAPTER 2 THEORETICAL FRAMEWORK

2.1 Introduction

This chapter provides a comprehensive overview of the key concepts and theoretical frameworks that underpin this thesis. The study focuses on women, girls, and boys because of their high level of vulnerability to GBV. The theoretical framework of this study is based on HM and socio-ecological theories.

2.2 Key Concepts in Understanding Violence, Gender and Gender-Based Violence

2.2.1 Gender

The Canadian Institutes of Health Research (2023) defines gender as “the socially ascribed roles, behaviors, expressions and identities of girls, women, boys, men, and gender diverse people.” This definition reflects a more inclusive perspective on gender. Gender identity is neither confined to a binary (girl/woman, boy/man) nor static. As defined by UNESCO (2018), it is a social attribute and offers opportunities and relationships that are socially constructed and learned through socialization processes. A person’s gender identity impacts how they perceive themselves and others, how they act and interact, and the distribution of power and resources in a society. Like in many countries around the world, gendered social customs in Ghana place men/boys in superior and privileged positions of power and control over resources, relative to women/girls (Barker & Ricardo, 2005; Darmstadt et al., 2019; Sen et al., 2007). Due to the role of gender and its ability to align people within social structures, it is important to explore the link between the concept of violence and GBV as a human rights violation and public health concern.

2.2.2 Defining Violence

To better understand GBV issues, it is important to first comprehend the definitions of ‘violence’ and ‘gender-based violence.’ Legally, there is no precise definition for either term; however, a better understanding of social problems defines and sets the boundaries within which solutions are developed. Therefore, it can be argued that an unclear or ambiguous understanding of a problem could affect the visibility of the issue. For example, the meaning of violence and Ghana’s perspective of GBV can influence the country’s responsiveness to curbing it (Coker-Appiah & Cusack, 1999). It is important to have accurate definitions for surveillance, identification of causes and consequences, providing

appropriate prevention and intervention, and conducting outcome studies. In addition, developing precise definitions can facilitate a more positive and productive dialogue around the impact of legislation, understanding by the media, public discourse, and policing practices on GBV. A more informed and nuanced understanding of violence can foster a collaborative and effective approach to yield greater awareness and more comprehensive solutions.

The WHO defines violence as the “intentional use of physical force or power, threatened or actual, against oneself, another person, or a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment, or deprivation” (Krug et al., 2002, p. 5). The WHO's definition of harm is important because it includes violence that does not always result in injury or death, but still exerts a significant burden on individuals, families, communities, and healthcare systems. However, this definition does not address GBV as a significant human right issue. Moreover, these definitions consider conscious acts that lead to harm but exclude unconscious acts that may cause harm or result in death. Again, these definitions emphasize physical harm, which can easily make us lose sight of the emotional and psychological impacts of violence. This study adopts an approach that accounts for acts resulting in harm, done intentionally or influenced by patriarchy as seen in most DV cases such as parental neglect, child abuse and homicide in marriages (Abramsky et al., 2011; Grych, & Hamby, 2014; Hamby, 2017). To this end, this study views violence as any act that violates a person's rights, can lead to any harm, whether intentional or not, and perpetuated in exercise of one's power and authority over a perceived weaker subject.

2.2.3 Defining Gender-Based Violence (GBV)

Gender-based violence has existed throughout history and, involves discrimination based on gender. GBV has been described and defined differently by different organizations and scholars. The terms GBV and VAW are used interchangeably across the globe (EIGE, 2024; Dolan, 2014). However, they represent distinct perspectives and conceptualizations of the relationships between victims and perpetrators, and the types of violence vary (Bonnet 2015; Lawson (2012). VAW specifically focuses on violence directed towards women and girls while GBV allows for recognition of the often overlooked and understudied experiences of children.

The 1993 UN DEVAW was the first official definition of GBV and defines it as: "Any act of gender-based violence that causes physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion, or arbitrary deprivations of liberty, whether occurring in public or private life" (UN, 1993). This represents one of the earliest and most well-known definitions of GBV; however, it does not treat GBV as a human right infringement.

According to the Inter-Agency Standing Committee (IASC)⁵ (2015), GBV encompasses all harmful acts committed against a person's will based on socially ascribed differences between males and females. The term GBV mainly highlights how structural gender-based power imbalances leave females vulnerable to multiple forms of violence (IASC 2015). This definition considers violence associated with societal norms of masculinity and includes non-conforming individuals such as the LGBTQIA+ community. However, this definition may reinforce a binary understanding of gender and overlook non-binary individuals because of the emphasis placed on males and females.

The Council of Europe views GBV as violence directed against a person because of their gender and affects women disproportionately (Istanbul Convention, 2011). This definition stands out as one of the finest because it explicitly explains the factors that could lead to the use of violence against a person (their ascribed or perceived gender identity).

UNESCO and UN Women (2016) define GBV as any form of violence that causes or is likely to cause physical, sexual, or psychological harm or suffering to an individual based on gender discrimination, gender role expectations, and/or gender stereotypes. Their definition takes the UN CEDAW's initial definition of VAW further by acknowledging the negative impact of GBV on victims and survivors and highlights a number of factors that could hasten the occurrence of GBV. Different forms of GBV exist in different cultures, countries, and regions. Examples of such violence include forced or early marriage, trafficking, forced or abusive sexual relations, honor killings, FGC, widow inheritance, and sexual violence, including forced prostitution and sexual abuse (IASC 2015; UN Women, 2015).

⁵ IASC is a fundamental forum for humanitarian coordination established through a resolution by the United Nations. It formulates shared policies, establishes priorities, and mobilizes resources to respond effectively to crises and advance collective humanitarian aid.

Our understanding of GBV has evolved to embrace diversity and inclusion. Due to the ascribed meaning and power society attributes to gender, gender inequality is the basis for a various acts of violence since not all genders possess equal power across cultures and societies. This study adopts the definition of GBV from the Turkish office of the United Nations High Commissioner for Refugees (UNHCR) which views GBV as a violation of an individual's rights based on their gender, gender expression, gender identity, or perceived gender identity (UNHCR, n.d.; Women and Gender Equity Canada, 2019). UNHCR Turkey (n.d.) records that GBV encompasses using violence, threats, deception, cultural expectations, or economic means to coerce someone into actions against their will. A unique feature of UNHCR's perspective on GBV explicitly considers GBV as a human rights issue and recognizes the need for legislation, education, and enforcement, among other measures. From a human rights perspective, ignorance of the law or the illegality of violent acts is not an excuse. The definition provides a deeper understanding of the complex mechanisms fueling and shaping GBV such as victims' gender identity or expressions, and the unequal distribution of power between genders. This definition recognizes that GBV is not limited to physical violence but it includes other forms of coercion and manipulation that can lead to harm and highlights the importance of addressing the underlying social, cultural, and economic factors that contribute to this widespread problem. In this study, GBV is used as a more encompassing term that refers to all forms of violations of an individual's rights due to their gender, gender expression, gender identity, or perceived gender identity. GBV is a multifaceted and complex phenomenon that needs to be analyzed using a multidimensional approach. Theories of hegemonic masculinity and the socioecological systems provide a comprehensive understanding of the complex nature of GBV and help in analyzing the concepts in a holistic manner.

2.3 Hegemonic masculinity (HM)

Raewyn Connell's concept of hegemonic masculinity gained popularity in the late 1980s and has remained useful in assessing the relationship between gender, influence, power, and control (Morrell et al., 2012; Jewkes et al., 2015; Connell & Messerschmidt, 2005). It explores how gender identity is in constant dialogue, contested, and negotiated over time and space (Howson, 2006; Connell, 2016; Beasley 2008). Hegemonic masculinity was influenced by Gramsci's concept of hegemony which justifies the interests

of powerful men and creates hierarchies within masculinity itself and across other genders (Gramsci, 1971). The concept evaluates those attitudes and practices among men and within cultures that perpetuate gender inequality and does not necessarily reflect the lived identities of most men but creates idealized figures that are admired and aspired by most. Connell defines it as “the configuration of gender practice which embodies the currently accepted answer to the problem of the legitimacy of patriarchy which guarantees (or is taken to guarantee) the dominant position of men and the subordination of women over time and space” (Connell 1995, 77; 2005, 77).

Hegemonic masculinity represents culturally accepted ways of being a male in a particular cultural and social setting. This position often leads to competition from other males. In other words, HM embodies culturally and contextually valued ways of being seen as a real man. Although both men and women can exhibit characteristics of HM, men usually express such behaviors and attitude (Grieve, March, & Van Doorn, 2019). In essence, it is hegemonic because of its dominance and the subordination of the other masculinities. HM relies on the establishment of central consent and is maintained through relative agreement rather than ordinary use of force. This means that even, if underpinned by force, many men attempt to conform to and spread these ideals and behaviors in their daily lives by consenting to, uniting around, and embodying unequal gender relations through discursive legitimation (Gramsci, 1971; Messerschmidt, 2018). Hence, masculinity is neither a fixed entity embedded in individuals' bodies or personality traits, nor does it exist in absolute terms as something one has or does not have. Masculinity is not a manifestation of an inner, biological traits but a socially constructed, culturally induced, and inherited norm that becomes a collectively accepted practice (Kimmel & Ferber, 2003).

While HM does not automatically cause aggression, studies have shown men tend to commit more culturally condoned and serious crimes compared to women, highlighting how it is linked to patterns of aggression (Lane, 1998; Lynch and Stretsky, 2003; Sollund, 2008; 2012; 2019; Taylor and Fitzgerald, 2018). The construction of HM is closely linked to heterosexuality, positioning it as both "not gay" and "not female" (Jewkes et al., 2015). This framework constructs, legitimizes, and reinforces male power over women and men who do not conform to the dominant form of masculinity, establishing a benchmark for

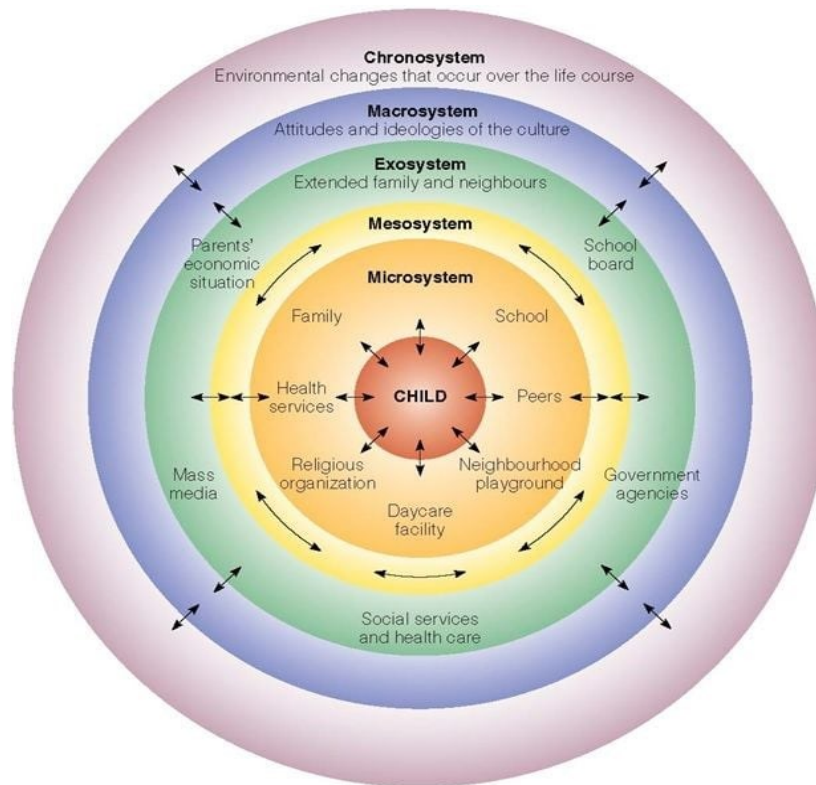
defining "real manliness" in society (Morrell, Jewkes, and Lindegger, 2012; Ratele, 2006). This construct is maintained through various social, cultural, and institutional practices.

Significant characteristics of HM include dominance, physical strength, emotional control, heterosexuality and traditional gender roles. It may involve aggression, a lack of consideration for others, an obsessive fixation on sex and the assertion of power over others, which perpetuate the subordination of women to men (Connell, 1987; Connell & Messerschmidt, 2005; Van Doorn & March 2021). Although some men actively oppose the use of violence, most of them remain comfortable with the norms of HM due to patriarchal privilege or hegemonic dividends (Connell, 2005). The emphasis of HM on the gender binary has been a subject of criticism; some scholars argue it could potentially underestimate HM effects on other genders (Moller, 2007; Demetriou, 2001). However, this framework remains useful for understanding how power imbalances between genders contribute to GBV. The interaction among gender norms, social groups, and individuals is complex, with each exerting different and varying influences on others (Jewkes et al., 2015). To address limitations of HM, this study incorporates socio-ecological theory (SET) to enhance contextuality and complement HM.

2.3 A Socio - Ecological Approach to GBV

This study draws on Urie Bronfenbrenner's ecological theory, which began as a model that explains the impact of multi-level factors on human development in different environments (Bronfenbrenner, 1979; 1989; 1992; Kilanowski, 2017; Barner, Okech & Camp, 2018). The SET examines the complex social relationships and ecosystems that influence an individual's development from birth to adulthood. It argues that an individual, particularly a child, is shaped by multiple interactions at various levels, encompassing personal relationships, community, and broader societal factors. These interactions are classified into five interrelated systems: microsystem, mesosystem, exosystem, macrosystem, and chronosystem. The overlapping model demonstrates how factors at each level influence and are interdependent with other levels (Bronfenbrenner, 1989; Glanz et al., 2008). Figure 1 below describes how different levels of the environment interact with each other to influence a person's development. The individual is represented by the innermost circle, and the various environmental factors are represented by the surrounding circles which shows multidirectional influences.

Figure 1 Diagram showing Bronfenbrenner's Ecological Framework



Source: Rhodes, Theories of child development, 2013

2.4.1 *Microsystem*

The microsystem encompasses the most immediate interactions and relationships within an individual's surroundings, comprising intrapersonal traits and interpersonal relations connections that have the greatest impact on the individual. Bronfenbrenner notes interactions in this level may be social or symbolic and could be sustained in increasingly complex ways (Bronfenbrenner, 1983). The microsystem includes an individual's personality, beliefs, temperament (1989), and people an individual encounters daily such as families or peers (Brim, 1975). It is the stage where the child builds character, behaviors and attitudes. Women's interactions in the microsphere may include their relationship with their children, spouses, other family members, neighbors, acquaintances, religious and social connections and community members. According to Bronfenbrenner, the importance of this level cannot be underestimated since it influences the psychological development and behavioral changes of the individual (Bronfenbrenner, 1979).

2.4.2 Mesosystem

The mesosystem is the next layer and involves the interactions among different structures within a person's life. According to Bronfenbrenner (1979), it is like "a system of microsystems" (p. 40). It encompasses the relationships between various actors within the microsystem, such as parents, family members, colleagues, and teachers, and the environments of the microsystem, such as school, work, and religious organizations. One essential concept in mesosystem development is synergy, which refers to the interaction of developmental features and processes that may be present in each setting (Bronfenbrenner, 1983). Therefore, the relationship between family and peer groups represents a mesosystem within an individual's life.

2.4.3 Exosystem

Expanding outward is the exosystem, which encompasses legally binding systems such as social and political institutions, the legal and law enforcement components of the criminal justice system, along with policies influencing an individual's micro- and mesosystems. The exosystem represents institutions in which an individual may not be directly involved, but is indirectly influenced or impacted. These systems impact individuals by exerting positive and negative combined influences (Bronfenbrenner & Evans, 2000). In this sense, children and women may not have direct control over the judicial system, law enforcement agencies and NGOs that promote and protect their rights; however, these institutions and their responses to issues can influence the perceptions and tolerance of individuals and communities. This is especially prominent as a result of the education these institutions give to the public, the reputations they hold, their sense of urgency to duty, and the due diligence of state agencies such as the court, police system, and social services, as well as by actors such as judges, police officers, and social workers who address GBV concerns.

2.4.4 Macrosystem

The macrosystem represents the impact of societal, religious, cultural norms, values and laws (Berk, 2000). The influence of larger principles established by the macro system has a cascading influence on the interactions of all other layers (Bronfenbrenner, 1983). The macrosystem establishes a framework for interactions between systems (Bronfenbrenner, 1979). Bronfenbrenner further explains that all of systems are influenced

by the larger society and culture (1979). A Ghanaian woman experiencing DV may not report due to societal belief that family issues should remain private and a woman's role is to endure and support her husband. Similarly, a child experiencing abuse at home may choose to tolerate it because of traditional norms that treat children as guilty in comparison to older individuals. These cultural beliefs are part of the macrosystem and discourage seeking help. The lack of strong legal protection and support services (exosystem) further compound the situation, making it difficult to escape the abuse. Interactions with schools, healthcare providers, or employers (mesosystem) might not offer the necessary intervention or support, leaving them to cope within their immediate family and social circles (microsystem) where the abuse occurs.

2.4.5 Chronosystem

Lastly, the chronosystem refers to consistencies or changes over the life of an individual. It contains both internal and external elements of time and historical content, including the influence of policies (Bronfenbrenner, 1989). The Chronosystem incorporates the concept of time (Bronfenbrenner, 1994), aging and maturation of a person as well as the time in which that person lives and grows. For instance, people who internalize violence may have different experiences and responses to GBV compared to people who have never experienced violence or received timely interventions. Although the effects of the chronosystem do not have to result from a major event, consideration is given to the time, place and situation in which the person lives. For instance, a child living in a lawless country may take for granted actions constituting violence and its consequences, or develop a very cold attitude toward reporting violence compared to those born or living in countries where such actions are handled sensitively, seriously, and diligently.

These systems interact bidirectionally, with events within each system impacting others. SET indicates an individual is a reflection of their environment or situation; therefore our responses and reactions are a result of our nurturing and the impact of our socialization. The model is also useful to show changing norms and values within homes, communities, institutions, and the state will trickle down to the individuals, which would be useful in informing solutions to address GBV.

Personal factors may include the age and education of individuals involved, as well as their religious affiliations. Interpersonal and household factors encompass income,

education, age differences, and household wealth. Community factors may include the type of area (urban or rural) and region of residence. Furthermore, larger societal factors, such as GBV related laws and policies also play a role in shaping the prevalence of GBV. The adaptability of this framework allows its application in various cultural contexts (Heise, 1998).

Although the initial framework was largely informed by studies conducted in high-income countries, its flexibility has enabled successful validation in medium and low-income contexts such as Ghana, proving its continued relevance (Go et al., 2003; Kyegombe *et al.*, 2014; Wekwete *et al.*, 2014; Paul, 2016). The SET framework is useful in identifying and addressing the root causes of GBV (Belsky, 1980; Heise, 1998; 2011). It offers a multilevel approach to effectively tackle the underlying issues, including systemic, patriarchal, cultural, and the detrimental impact of HM, leading to more comprehensive solutions. In Ghana, SET is instrumental in various forms of GBV (Takyi, 2012; Atampugre et al., 2022; Addae & Tang, 2021). Using the ecological approach, Oduro et al. (2012) emphasize a link between GBV, youth experiences, and the marginalized and deprived communities. This explains the interconnectedness among the individual, micro-, meso-, exo-, macro- and chronosystems. In essence, this model helps in understanding that GBV is influenced by various levels of society, including personal, interpersonal, community, and social factors (Heise, 1998).

2.5 Conclusion

This chapter provides a detailed exploration of the key theoretical frameworks guiding this study, focusing on the vulnerabilities of women and children to GBV. By examining the concepts of HM and the SET, the chapter highlights how these frameworks contribute to understanding the complex dynamics of GBV. It highlights the importance of accurate definitions and multidimensional approaches in addressing GBV, emphasizing the need for a comprehensive analysis that considers numerous factors. This integrative approach is crucial for developing effective strategies to combat GBV and promote gender equality in Ghana where cultural, social, and institutional influences play a key role in shaping gender relations and violence.

CHAPTER 3 RESEARCH METHOD

3.1 Introduction

A qualitative approach was employed to examine the effectiveness of GBV interventions implemented by both NGOs and governmental agencies. An open-ended interview guide was used to collect data from participants who were expected to possess considerable practical experience and knowledge of the subject matter. Purposive sampling was used in the selection of participants.

3.2 Research Approach and Design

A qualitative research design was used in this study because, it gave participants the opportunity to express their opinions on the various efforts made by their NGOs or government agencies to address GBV. The qualitative research design helped to uncover the progress made in preventing GBV and identified areas that needed improvement. Ellis et al. (2021) and Creswell (2017) suggest that qualitative research is particularly useful for investigating social or human issues, developing detailed mental models, examining language, and recording informant viewpoints. Qualitative research design is associated with the interpretive and critical paradigm schools of thought (Willis et al., 2007; Scotland 2012; Mohajan, 2018). Using this method in this context was considered important in addressing the research process of self-awareness and self-reflection and capturing the meanings, opinions, and experiences provided by respondents (Johnson, 1997; Arriaza et al., 2015; Hewitt, 2007; Blakemore & Agllias, 2019). The main advantage of using qualitative methods is that it deepens understanding of the dynamic and specific nature of social realities that are being investigated. This enables the study to capture the qualitative distinctions and other important elements unique to the study respondents (Skinner et al., 2020; Kincheloe & McLaren, 2011; Swinton & Mowat 2016).

3.3 Multiple Method and Document Review

A multiple-method design was used in this study. Semi-structured interviews were carried out with policymakers, implementors from government agencies, as well as advocates and activists within gender-related NGOs. The goal was to assess the efficiency of interventions put in place by both NGOs and the government. The interviews also aimed to gain an understanding of how NGOs advocate for changes in government policies to address gaps in GBV in Ghana. A grey literature review and analysis of policy documents of

governmental and non-governmental organizations involved in human rights advocacy in Ghana were conducted to explore how gender violence was handled. Documents reviewed included Ghana's 1992 Constitution, MoGSCP's Domestic Violence Training Manual for Gender-Based Violence Courts in Ghana, Ghana News Agency Achieves, Ministry of Justice Online Archives, the Children's Act, and Ghana's Domestic Violence Act (Act 732). This was done to help ascertain how government and NGO interventions have been implemented and how they impact people.

3.4 Recruitment of Participants

After reviewing several pieces of literature and an extensive online research, I shortlisted and contacted three organizations that undertake advocacy, support victims and address GBV in Ghana. Given the mandate and work of Ministry of Gender, Children and Social Protection, the Domestic Violence and Victims Support Unit (DOVVSU), Department of Social Welfare (DSW) and Ghana Education Service (GES) and how they provide services relating to women children, their selection was based on the valuable contribution they could bring to the study. However, attempts to recruit officers from the Ministry were unsuccessful. The participants from the remaining three government institutions comprised of policy implementors, activists as well as gender and human rights advocates. Activists and advocates within three Ghanaian based NGOs-- the Gender Studies and Human Right Documentation Center (the Gender Centre), Women in Law and Development in Africa (WILDAF Ghana) and Women Integrated Development Organization (WIDO) -- were also recruited. All six organizations had their headquarters in urban locations, but their work spans across both urban and rural communities.

A total of 15 participants across the Northern and Southern divides of Ghana were recruited for the study making the findings of the study suitable for generalization of the entire country. Participants were purposively selected because of their vast understanding and knowledge as well as practical experience working with either GBV victims or survivors, and they were referred by colleagues within their organizations. Ames et al. (2019) and Bakkalbasioglu (2020) argue that using purposive sampling enables the researcher to intentionally select specific respondents whose experiences could be central or relevant to the research topic. Furthermore, using purposive sampling ensures the appropriateness and adequacy of the target population and sample size (Rai & Thapa, 2015;

Etikan et al., 2016; Etikan & Bala, 2017). Bloor (2011) and Denscombe (2017) argue that the self-selection nature of this method saves time. Moreover, persons who choose to join are likely to be dedicated to the study and give more honest answers (Periyakoil, Neri, & Kraemer, 2016; Johnson, Adkins & Chauvin, 2020). Again, purposive sampling is relevant because it creates maximum variability based on stakeholder knowledge of the population and the intended research outcomes (Campbell et al., 2020).

The eligibility criteria required individuals to have adequate knowledge and experience on the subject matter and it did not explicitly seek out victims of GBV to participate in the study. This was done to avoid causing harm to them. Individuals who shared their personal experiences of GBV did so voluntarily. Matrix sampling was used to correlate and corroborate information from NGOs and government participants. This method involves dividing the interview questions into subsets. Those subsets of questions, possibly overlapping, were administered to participants. This method was adopted because it strengthens qualitative research by providing a well-structured study and addressing concerns related to data quality. It also reduced the number of sample questions which allowed me a level of control over the selected sample (Chipperfield & Steel, 2011; Campbell et al., 2020).

3.5 Data Collection and Analysis

Individual interviews have been seen as the best data procedure in qualitative research (Kim, 2016). Each interview lasted for roughly 50 minutes. Using Microsoft Teams, all interviews were digitally recorded with participants' permission and the transcripts were automatically transcribed and reviewed for accuracy. I designed an open-ended interview guide taking care to avoid loaded or leading questions (Appendix A & B). As a qualitative interview protocol, I formulated a conversational prompt to elicit maximal responses in a relaxed conversation and prevent any feelings of interrogation (Johnson & Christensen, 2020). I remained flexible with emerging ideas and used interview probes without necessarily going word-for-word with the interview guide. All participants voluntarily consented to participate and permitted me to audio record their session (see Appendix C).

Transcripts were transcribed, edited, and coded. The data collected was analyzed thematically because thematic analysis is a suitable technique of analysis when seeking to

understand experiences, thoughts, or actions among a data set, although scholars argue it tends to be poorly demarcated and rarely acknowledged (Braun & Clarke, 2019). Nonetheless, thematic analysis ensures that the most important connections and themes are identified and analyzed (Erlingsson & Brysiewicz, 2017). The study generated valuable and valid information for an understanding of the topic. Each organization and participant were assigned a unique code in this study for data analysis purposes. In addition to the use of the coding method, the qualitative software program, NVIVO, was used to generate key themes on interviews and grey literature reviewed. The emerging responses were then categorized into various themes to address the research questions to harmonize and develop synergies between and among themes.

3.6 Research Challenges

The main challenge that I encountered was contacting government officials due to the virtual nature of the study and associated bureaucracies. I emailed the Ghana Police Service's Public Affairs and the Ministry of Gender, Children, and Social Protection, but was unable to reach any of the national government representatives. On the other hand, recruiting participants from the regional and local levels of Ghana Education Service and DOVVSU, DSW was considerably simpler. A further obstacle was unexpected technical problems brought about by poor network connectivity.

These issues, however, did not affect the study because participants were sufficiently informed about the subject and came from a range of backgrounds, which allowed me to cover a wide range of experiences and viewpoints. Additionally, notes were taken to avoid losing information due to bad network connectivity and unclear audio sections. Accurate auto-transcriptions were supplied by Microsoft Teams, and the interview audio recordings were cross-checked. Participants were anonymized to reduce the possibility of participant re-identification. The data was permanently devoid of direct identifiers, and no code was kept, avoiding re-linking in the future (Gibson, 2015; Czechowski & Sylvestre, 2018; Czechowski et al., 2019).

3.7 My Positioning in the Study

I worked as a social development officer at the Department of Social Welfare and Community Development, where I was responsible for safeguarding the rights of children, people of all genders, people with disabilities, and marginalized groups. Due to my interest in impacting knowledge, I worked as a teacher in a remote village in the Upper West region of Ghana. There, I became more aware of the need for gender education and awareness, the nature and influence of patriarchy, and how poverty, weak legal frameworks, and institutions contribute to GBV in this village. I helped to address discrimination against girls in my school and the community by advocating for equal opportunities in leadership. I also supported schools and girls who excelled academically with teaching and learning stationary and sanitary supplies. I supported a few people living with disabilities financially. I gained valuable knowledge as a case manager, social developer, and high school teacher in underprivileged communities in Ghana. My previous research on social studies education and human rights in Ghana also informed this work.

As a Ghanaian conducting this study while living in Canada, I was mindful of all other influences of my positionality, such as potential biases; therefore, I was transparent with participants about my professional experiences and the objectives of this research. Participants with at least two to five years of experience in GBV or human rights advocacy were carefully chosen based on their expertise in order to mitigate potential biases. However, most participants had significantly more experience than the minimum requirement. On the other hand, due to my positionality, I asked detailed and precise follow-up questions. Additionally, my international exposure added new experiences to the study, as my experiences, perspectives, and exposure to varied cultures and systems guided my interpretations.

CHAPTER 4 LITERATURE REVIEW

4.1 Introduction

The UN and its agencies, along with international guidelines, policies, frameworks, and protocols such as the UN Charters on Women and People's Human Rights, CEDAW, CRC, the MDGs, and the SDGs, have played a significant role in addressing and shaping GBV on a global scale. This influence is also noticeable in Ghana, where the enactment of specific laws and policies has been affected by various international conventions and led to the development of several national frameworks. This chapter explores literature related to the global efforts to address GBV and examines the specific context of Ghana.

4.2 The Influence of International Instruments in Addressing GBV in Ghana

Ghana has ratified several important international instruments that promote human rights for all, gender equality, women's empowerment, and child protection. Ghana has also ratified the Nairobi Forward-Looking Strategies for the Advancement of Women (1985), the African Charter on Human and Peoples' Rights (ACHPR), and the Maputo Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa. Ghana is a signatory to the African Charter on the Rights and Welfare of Children (AWRWC), which recommends measures to protect children from all forms of torture and inhuman treatment. Ghana officially ratified the African Charter and the Maputo Protocol on January 24, 1989, and June 13, 2007, respectively. These documents have had a significant impact on how laws and policies are implemented in African countries. By ratifying these conventions and protocols, Ghana is expected to put in place actionable programs and adequate funding for policies and programs that promote the safeguard the freedom of vulnerable individuals. Per the African Charter and the Maputo Protocol, state parties must submit a report outlining the legislative and other measures taken to uphold women's rights every two years. This reporting plays a crucial role in monitoring the implementation of the Maputo Protocol. It helps evaluate the specific actions taken to comply with the African Charter and the Maputo Protocol, identify challenges to the full implementation of these instruments, and offer an opportunity for constructive engagement with the African Union to benefit from their recommendations. As of July 2024, Ghana has 11 state reports yet to be submitted dating back to 2007, indicating that Ghana has not

submitted any reports on the Maputo Protocol since its ratification. This implies Ghana lacks commitment to the values and principles it agreed to uphold (MOJAGD, 2021; the Center for Human Rights, 2023).

4.3 Gender-Based Violence in Ghana: Legal Remedies and Culture

The Republic of Ghana, one of the 54 African nations, is located in West Africa and is an English-speaking country that shares borders with Togo to the East, La Cote d'Ivoire to the West, Burkina Faso to the North and the Gulf of Guinea to the South. The country also lies along the Atlantic Ocean. The country is comprised of about 100 distinct ethnic groups which can be categorized into eight main ethnic groups making up over 30.8 million people according to the latest Population and Housing Census conducted in 2021 (Ghana Statistical Service [GSS], 2021). Ghana was the first sub-Saharan African country to gain independence on 6th March 1957 (Minsitry of Foreign Affairs and Regional Intergration, n.d.) and is considered a beacon of good governance and democracy in Africa.

Among Ghana's ethnically diverse populations are the Akan, Mole-Dagbani, Gonja, Ewe, and Ga-Adangbe with their subdivisions, each unique and rich culture and traditions. The country can be divided into North and South. Apart from Ewes and Ga-Adangbe, all tribes in the South, especially the Akans, practice matrilineal family and inheritance systems. The Ewes, Ga-Adangbes and all tribes in northern Ghana practice patrilineal family and inheritance systems. 52% of the population practice patrilineal inheritance, where properties are passed from fathers to sons, and women are unlikely to inherit. On the other hand, the remaining 48% practices matrilineal inheritance, which is more flexible and allows both men and women to inherit (Barker, 2022). However, with matrilineal inheritance, nephews and nieces inherit from their uncles instead of biological children which denies children access to and benefits of their parent's wealth. Unpaid domestic service performed by women is a common factor that worsens the economic disparities between men and women. Culture and one's nurturing play a vital role as it influences one's thoughts, behavior, beliefs and actions (Frimpong Kwapong, 2021). In Ghanaian societies, men are traditionally viewed as heads of family and are expected to provide for their families financially, while women are often tasked with domestic responsibilities. Unfortunately, this cultural norm has led to the subordination of women, who usually have little to no power in decision-making processes. This power imbalance

reinforces community norms of male dominance and acceptance of violence against women, which results in female suppression and violence in various aspects of life. Although there has been some progress in the last decade, with more women receiving formal education, working in formal career settings and contributing to the family's economic growth, the dominance of men tends to impact appointments into political offices, decision-making at all levels and planning in most workplaces, homes, and marital, religious, and political affairs (The Gender Centre Officer 1, IDI, July 2023). Men's enactment of violence towards intimate female partners is viewed "as a simultaneous performance of masculinity and femininity- as a means for husbands to live up to contextualized versions of manliness, while 'teaching' perceived erring wives how to successfully 'perform' or live up to an expected feminine standard of behavior in marriage" (Adjei, 2016, p. 419). Across the world, there is evidence suggesting that discursive cultural factors and ideologies about local constructions of masculinity may contribute to the normalization and acceptance of GBV (Dery et al., 2019; Sikweyiya et al., 2020).

GBV in Ghana continues to be pervasive due to gender-based role differentiation, discrimination, male domination and superiority which give prominence to patriarchal beliefs; further, gender misconceptions are entrenched and pervasive (Ofei-Aboagye, 2000; Ampofo & Boateng, 2009). The role of women in Ghana is represented by Mbiti (1991) when he says, "A woman is a flower in a garden and her husband is the fence around it" (p. 59). Furthermore, there are inequalities and disparities in the fields of economic and political patterns of the Ghanaian society (Annin, 2009). Women have less decision-making power in both the domestic and the public spheres due to patrilineal and patriarchal norms. Representing half the population, women are numerically significant in Ghana; however, they experience gender based discrimination including domestic violence, powerlessness, poverty, and social and political exclusion from active participation in the national development of the country (GSS, 2021; MoGCSP, 2015).

Additionally, the influence of patriarchy emanating from culture, often offers men extreme power over women and children, especially in a legitimate relationship which involves the payment of a bride price⁶ (Dery, 2019). Enforcing gender inequality can take

⁶ Bride price is the payment made by the groom or his family to the bride's family to legitimize a marital union as per the demand of a custom. In essence, women may be expected to return the bride price when there is a divorce hence a high bride price could be a

many forms, even subtle ones (Formanowicz & Hansen, 2022); hence, women may internalize societal expectations and impose them on themselves without even realizing it or they may decide that acting in opposition to those expectations is not worth it, even if they do not agree with them (Kabeer, 2002). They may have opposed those societal expectations in the past, resulting in a negative reaction (abuse or ridicule or censure of some sort) that causes them to not oppose again, thereby making decisions within constraints. Additionally, social norms and rules can pressure those who are perceived as weaker to accept the will of those who are perceived as stronger, perpetuating a power imbalance (Rhode, 1999; Boudet, 2013).

Studies show that some men are embracing positive forms of masculinity, and there is an increasing trend towards alternative and hybrid expressions of masculinity (Dery et al., 2022; Dery & Akurugu, 2021; Adusei et al., 2024), especially among educated individuals, professionals in the development sector, and those open to exploring diverse approaches to masculinity (Shahadu, 2023). Positive masculinity may also develop from one's early socialization, deliberate rejection of traditional norms, familial bonds, and individual characteristics (Roberts-Douglass & Curtis-Boles 2013; Franklin, 2012; Elliott, 2016). O'Neil (2010) contends that modern society often links masculinity with positive behavior. He contends that changing public perceptions to promote unbiased positive male behavior is difficult due to ongoing harmful actions by men against women and children. O'Neil empower men to embrace healthy masculinity by challenging traditional gender norms, comprehending essentialism, reclaiming their potentials and acknowledging that sexism is the true source of pain and loss of enthusiasm in ones lives.

While there is an abundance of literature that explores the leading factors of GBV, few studies have explored why interventions do not work effectively, with the majority of them focusing on NGOs. This leaves the Ghanaian government unaccountable and unchecked despite having responsibility and accountability to protect the rights, safety and interests of citizens. This study explores whether NGOs and government interventions are effective in dealing with the problems sustainably. Understanding the contributory factors of GBV is a good starting point.

challenge for girls and women who can not afford it. Additionally, Brideprice has been seen as a commercialization of wives hence they are expected to satisfy the taste and desires of the buyer (husband) regardless.

4.4 Factors Fueling GBV in Ghana

In the broader social context, understanding the reasons for GBV is both easier and more difficult as every aspect of society reinforces it (Hanmer, 1994). Globally, GBV is driven by factors such as gender inequality, male-dominated power structures (patriarchy), and cultural attitudes towards women and men (Marsh et al., 2006). Inequality and discrimination embedded in rigid gender power relations foster many social, cultural, and economic norms that are discriminatory (UN Women, n.d.). According to Allah-Mensah and Osei-Afful (2019), GBV in Ghana was intensified by events from the colonial period, with the implementation of the British hut tax system that required men to pay for each additional wife they had, in an effort to discourage polygyny⁷ (Burrill et al., 2010). The attempts by some men to assert control over their wives' labour created conflicts over wealth and income controlled by women. This domestication process under colonialism further solidified a moral authority and reshaped household dynamics within the state and among household members (Burrill et al., 2010). Some schools of thought argue that this is the genesis of, or at least a driving force behind, household violence, which subsequently became deep-rooted. Based on the abundance of existing and expanding literature, the major causes of GBV in Ghana are: cultural factors stemming from patriarchy, gender roles and socialization styles, masculinity, religion, poverty, alcoholism and drug abuse, weak social support systems.

4.4.1 Culture of Patriarchy, Gender Roles and Socialization

All cultures have a set of customs, beliefs or traditions that restrict the independence of specific groups and marginalize women in comparison to men (Risman, 2018; Bonvillain, 2020). To gain a better understanding of men's abuse of women and children in Ghana, it is essential to begin with an understanding of Ghanaian society as being deeply patriarchal. Such an understanding can serve as a starting point for research into this issue, providing important insights into the root causes and social dynamics of GBV, how these can be resolved, and why change may have been delayed. This study unequivocally underscores that such prejudices are highly concerning as they are frequently normalized,

⁷ Refers to the practice where a man is allowed to marry two or more women at the same time.

but are neither unchanging nor universally accepted. Instead, these biases are continually being re-evaluated and altered in diverse aspects of everyday life and culture.

In Ghana, certain cultural elements such as patriarchy, normalization of men's authority and its enforcement through force pose a significant threat not only to women but also children. Adomako-Ampofo and Prah (2009) note many Ghanaian societies normalize or tolerate abusive behaviors toward women and children, but consider these same acts abominable and punishable when directed at a male family member, an employee or a stranger. Consequently, male perpetrators of violence feel justified in their actions. These relations over time may reinforce some superiority in men, which could normalize their use of violence. For example, in a patriarchal society, a good woman is measured by her submission and endurance of a man or her husband's commands, even if it means harm or abuse (Asare 2019; Owusu, 2016; Yalley, 2022).

GBV in Ghana is not only caused by patriarchal values, but the cultural systems that demean and promote harm, yet are cherished by the people because they have been practiced over generations. Due to the human right or health concerns associated with FGC, Trokosi⁸, Dipo⁹, cruel widowhood rites and child marriage, Ghana has enacted laws against them; however, they continue to be practiced due to their cultural acceptance (Huseini, 2016; Costello et al., 2015; Bellemare et al., 2015; Tenkorang, 2019; Afranie et al., 2019; Ahonsi et al., 2019). The decision to undergo abusive treatment may sometimes seem out of the victim's control, as they may feel compelled to avoid public criticism, societal pressure, or consequences such as banishment, death, bad omens, or curses. In communities that practice widowhood rites, it is believed that failing to observe the rites can lead to spiritual attacks from deceased husbands (Adzovie et al., 2024; Amlor & Owusu 2016) or make it difficult for the widow to remarry (Fiasorgbor & Caroline, 2018). Additionally, some widows fear losing properties they acquired with their partner if they choose not to comply (Korang-Okrah, 2012).

In the practice of Dipo, women hold significant roles as they play a part in perpetuating these customs through internalization (Cusack and Prah, 2009). Research in

⁸ Trokosi is a traditional religious practice among the Ewe people in Ghana. It involves girls, usually virgins, being given as slaves to the gods to atone for crimes committed by their family members.

⁹ Dipo is a puberty rite and tradition signifying the transition of girls into adulthood. Krobo girls participate in Dipo to be acknowledged as a true Krobo and a sign of maturity for marriage. Among the Akans and Gas, call it "Bragoro," and "otufu" respectively.

Ghana shows that mothers and elderly women are a source of influence or are usually in charge of many of these harmful practices. For instance, elderly women are usually present during FGC to encourage young girls to be brave (Akweongo et al., 2001). After their circumcision, these girls are comforted and their wounds are cared for by two or three elderly women who impart knowledge about societal values, norms, and morals (Adongo et al., 1998; Akweongo et al., 2001). Older women may also participate in FGC due to their role in transmitting cultural practices over time, regardless of how others perceive such practices. While modernization can promote changes in attitudes toward GBV and potentially reduce the practice, older women may be less ready to embrace such changes without extensive education and awareness about the laws and the harmful consequences associated with them. Puberty rites have been condemned for how they indecently expose the breasts and other sensitive parts of girls (Abbey and Nasidi, 2023; Adjaye, 1999). These rites, intended to promote chastity, could make girls victims of rape or defilement, potentially bringing about HIV and STIs due to the inappropriate exposure of the private parts (Emefa & Selase, 2014; Poku, 2022). Nonetheless, initiates testify having a higher psychological well-being after their initiation than before and they have a positive attitude toward the practice (Abbey et al., 2021). This attitude could be associated with their desire to conform to social expectations and dictates. As a result, such practices are cherished by many as they could be considered a validation of one's chastity, moral uprightness and means of attracting a good husband. Recently, religion, particularly Christianity, and modernization have become significant influences causing individuals to abstain from the practice (Boakye, 2010; Sewu, 2023; Narh, 2023).

The Ghanaian family lineage has been found to promote GBV. While the matrilineal system is generally more favorable towards females, allowing them to inherit property and assume leadership positions in the traditional hierarchy, it can also inadvertently uphold patriarchal norms. In this system, potential beneficiaries, such as nieces and nephews, may be required to set aside their personal aspirations and dedicate their time and energy to their uncle's economic pursuits, such as farming, in anticipation of inheriting a larger share upon the uncle's passing. In rural Ghanaian communities, women and children are obligated to provide labor in the household and on the farm, and wives may even have to pay for labor on their own farms (Apusigah, 2009). This can lead to

children being exploited for labor at the expense of their education, or being involved in economic activities beyond their capabilities, resulting in serious consequences such as physical injury (Osei Bonsu, 2021).

4.4.2 Masculinity and GBV

Dery et al. (2022) conducted a qualitative study that revealed how cultural narratives of masculinity contribute to incidences of IPV. They found that a sense of threatened masculinity can lead to violent behavior in men. Participants in the study displayed a tolerance for such behavior due to the influence of past negative experiences of DV from their fathers. Understanding men's perceptions of themselves, women, and other men is crucial in addressing GBV (Graaff, 2021; Tolman et al., 2019; Storer, 2016). In many Ghanaian societies, HM restricts women's access to opportunities and resources such as land, credit, education, and training (Vellenga, 1986; Mikell, 1989). This leads to an unequal power hierarchy between men and women, legitimizing the domination and exploitation of women and increasing their vulnerability to violence (Dery et al., 2019).

Additionally, Ghanaian cultural norms and practices, including proverbs, poems, songs, and stories, often portray men as superior characters and identify women as too physically and mentally weak to make informed choices. This promotes male superiority, reinforcing the expectation that women should be submissive and respect male authority and guidance (Sikweyiya et al., 2020). In addition, practices such as corporal punishment are widely accepted in Ghanaian culture as legitimate forms of discipline. It is also assumed the nurturing of children is the responsibility of the man and the entire community hence, anybody can discipline which could mean yelling, hitting or slapping. This cultural acceptance of child violence can blur the lines between discipline and abuse, perpetuating instances where violence against children is rationalized and perpetuated. Societal pressure to maintain family unity and avoid disgracing the family can lead to DV victims feeling trapped due to fear of social stigma, economic dependence, and the belief that seeking help would be futile or bring further harm (Tenkorang et al., 2013; Adjei, 2017). This perpetuates a cycle of violence due to the normalization of gender inequality and reluctance to challenge traditional gender roles and patriarchal norms, thereby reinforcing attitudes and behaviors that perpetuate GBV.

4.4.3 Religion

Ghanaian laws permit the practice of any religion provided it causes no harm to anybody. Christianity, Islam, and traditional religions are the three main religions practiced in Ghana. Religion is prominent in the everyday life of individuals, influencing their behavior and reinforcing belief systems that contribute to upholding the existing societal norms. While these major religions do not intentionally promote GBV, certain values, norms and interpretations of their teachings are used out of context to justify or perpetuate GBV. Forced and child marriage, polygamy, and honor-based violence are common among Muslim, Christian and traditional religious communities, and are usually justified based on religious teachings regarding marriage and family structure.

In this light, Adomako (2009) claims religion plays an influential role in sustaining a rigid morality alongside moral impunity, especially when interpreting the idea of female submission to male authority. For example, Ephesians 5:22-24 and 1 Peter 3:1-6 advise wives to submit to their husbands in all things, with the latter suggesting that women should endure mistreatment in the hope of influencing their husbands through their behavior.

Additionally, 1 Corinthians 14:34-35 commands women to remain silent in churches and submit, stating that it is disgraceful for a woman to speak in the church. While different religious traditions and denominations may offer varied interpretations, these verses are often used to justify GBV in Christian communities in Ghana. During marriage ceremonies and when marital issues involving DV are settled within the family, the over emphasis of wives and children's submission without equal emphasis on the legal implications and ongoing education on the rights of women and children may be considered promoting GBV or as a lack of social responsibility in churches regarding GBV.

However, the fundamental tenets of these religions promote healthy relationships and safeguard the protection of vulnerable individuals such as women and children. For instance, the Quran emphasizes the importance of mutual consent in marriage (An-Nisa 4:19) and prohibits the marriage of those who are not mentally mature (An-Nisa 4:6). Both Christianity and Islam aim to ensure that sexual activity and having children take place within the institution of marriage, often leading to the subtle promotion of early marriage (Addai, 2000). Customs rooted in tradition and religion dictate that individuals must abstain from premarital sexual activity and should only have children within marriage.

Consequently, young women who get pregnant before marriage, whether through consensual acts, ignorance, curiosity or as a result of sexual assault, are sometimes married off to the men who impregnated them. This often occurs to ensure that the women receive support (UG, 2017) or to avoid associated stigma, shame, and criticism. Because their relationship was not built on love, mutual agreement, and free will, these women or girls may face violence from their spouses with minimal provocation.

There is some disagreement among researchers regarding the role of religion in addressing GBV within the home. Research suggests that there is minimal to no acknowledgment of social responsibility within church institutions concerning intimate partner violence against women (Stiles-Ocran 2021). Some researchers argue that religion can protect families by offering social support, facilitating social integration, and mitigating issues such as alcohol and substance abuse, which are associated with physical and sexual abuse (Ellison and Anderson, 2001). Agyemang (2018) suggests that traditional religion among the Asantes protects women by making sure they are adored and cared for, but at the same time exploits women for various purposes due to the inherent ambiguity of femininity and masculinity among the traditional religion. Agyemang (2018) found that witchcraft accusations and widowhood rites were influenced by religious factors.

Women who are assertive, outspoken and wealthy are considered witches and this perception is held even by women; therefore, women who are bold and economically endowed may have to lower their standards and voices to be considered humble and marriageable (Agyemang, 2018). This may affect their self-confidence, personal development and ability to speak up for themselves in the event of violence, especially in the home. Agyemang concludes that GBV among the Asante is influenced by the ideals of masculinity and femininity, rather than solely by gender inequalities and exploitation. This implies that while religion may not directly encourage GBV, it may shape individuals' beliefs, perceptions and tolerance toward the use or reaction to violence against women, children and even men. Researchers believe that the influence of religion on GBV has not received enough attention in empirical studies (Ellison et al. 1999; Nason-Clark 2004).

4.4.4 Marriage, Bride price and GBV

Marriage is a highly cherished institution among Ghanaian societies as it unifies both families, promotes procreation, serves as a basis for sexual encounters, a source of

companionship. From the religious point of view, as well as the Ghanaian customary norms and laws, it is supposed to be based on the choice and consent of the couple who are expected to be at least 18 years old. However, arranged or forced marriages take away the choice and consent of the girl, especially when against her wishes. Forced marriage, abduction of girls and child marriage are rampant in northern Ghana. Girls Not Brides (2015) argues that due to the prevalence of child marriages, girls are more commonly affected than boys, impacting their education and life opportunities with long-term consequences for the nation. Child marriage has enormous consequences on girls, not only limited to their sexual and reproductive health, and rights but also concerning their overall health and socio-economic well-being, the survival of their children, and the prosperity of their family and community (Parsons et al., 2015; Rumble et al., 2018). Research indicates that child marriage negatively affects mental health and physical well-being throughout their lifetime (Burgess et al., 2022; John et al., 2023; Addai et al., 2015). Child brides, like other women, are culturally expected to get pregnant within a year of marriage, exposing the girls to childbirth risks and maternal mortality since they are not fully matured. Child brides often experience traumatic pregnancy and delivery, leading to psychological consequences such as depression, anxiety, and post-traumatic stress disorder (PTSD) (Howard et al., 2013). Pregnancy-related complications are a leading cause of mortality among adolescent girls (Gibbs et al., 2012; Rumble et al., 2018).

Furthermore, studies show that child brides are more prone than adults to experience preterm and underweight babies leading to a high rate of infant mortality (Manning & Cohen, 2015; Raj & Boehmer, 2013; Dahl, 2010). Additionally, children born to child brides are more likely to experience violence, perpetuating a cycle of GBV. In societies where child marriage is prevalent, legal and societal norms often do not adequately support or protect girls and women (Burriss, 2014; Brides, 2014; Anozie et al., 2018; Greene, 2014), increasing their vulnerability to violence. This lack of legal protection and societal support can further trap victims of child marriage in abusive situations, intensifying their vulnerability to GBV throughout their lifetime (Nnadi, 2014; Gausman et al., 2020; Shukla et al., 2023). Women who marry before the age of 18 are three times more likely to develop antisocial personality disorder and are at an increased risk of experiencing depression and suicidal thoughts (Le Strat et al., 2011). Child marriage has

significant socio-economic impacts on child brides. This is because they assume marital duties at the expense of pursuing education or a trade; hence, a considerable number of child brides experience intergenerational poverty because of their failed attempts at education (Dahl, 2010; Hamilton, 2012), which increases their economic dependence on their husbands (Hamilton, 2012).

In Ghana, the climax of all marital arrangements is the payment of bride price¹⁰, a practice which demands that a groom and his family pay an amount or present goods to the bride's family. An acceptance of the cash or kind legitimizes the union (Forkuor et al., 2014; Adjei & Mpiani, 2018). This practice has existed as far back as 3000 BCE when ancient Egyptians and Hebrews were all believed to have practiced the tradition of bride price (Huntingford, 1932; Anderson, 2007). In Ghana, bride price varies between the southern and northern regions. In Southern Ghana, cash and drinks are accepted as bride prices, making it relatively affordable. In the Northern regions, particularly the Upper East and West, the price is paid in the form of livestock such as cows, sheep, or goats, along with specific drinks which may be alcoholic or non-alcoholic (Forkuor et al. 2017; Bawah 2015). In the Northern region, particularly among the Dagombas where Islam dominates, bride price has been influenced by religion, with a Koran added to the traditional cash and cola nuts demanded (Mustapha, 2010). Across different cultures, the high cost of marrying a wife is a common concern, and it is debated how bride price is linked to women's vulnerability. Researchers argue that the cost a man incurs in marrying a wife can influence how he treats her, including demanding the total surrender of her rights to him. Upon marriage, the man assumes social and economic responsibility for his wife, requiring his consent for her to undertake any activity, including seeking healthcare (Maitra, 2007; Bawah et al., 1999; Kaye, 2004; Muhammad, 2001, 2002; Fuseini & Dodoo, 2012). Similarly, Corno and Voena (2016) argue that the payment of bride price has become commercialized and monetized, losing much of its traditional essence and value. Culturally, the act of paying the bride price is seen as a gesture of respect towards the bride and her family. It acknowledges the bride's value and signifies that the groom and his family are willing to meet certain societal standards to honor her. The payment of the bride price serves as formal parental approval of the marriage and unifies the bride and groom's

¹⁰ Also known as dowry or bride wealth

families, constructs society's identity and provides men with social security (Kaye 2004). The payment of bride price often involves extended family members and community elders. This creates a network of accountability where the husband's behavior is monitored. If he mistreats his wife, he risks not only his reputation but also potential sanctions from both families and the community; hence, it protect wives from potential abuse. In some cases, the practice can be abused, with families demanding exorbitant amounts, leading to financial exploitation.

The general cost involved in marriage can be overwhelming depending on the nature and size of the ceremony, the materials used (taste and styles of the couple) and the funds available to the would-be couple. The payment of bride price has been criticized in international debates and by scholars due to its associated risk to GBV against women and children (Kaye et al., 2005; Wakabi, 2002; Tamale, 2004; Hague et al., 2011; Mangena and Ndlovu, 2013). For instance, Osuma (2003) notes that the practice perpetuates gender inequalities in marriages and in the society because it commodifies women based on their education, economic and social status. For example, a more educated woman from a wealthy family will attract a higher bride price which could burden her spouse. She argues that the desire to take the bride price could also motivate parents to withdraw their girl child from school and force her into an early marriage, sometimes to an older man who can pay more. She further argues that bride price can perpetuate dangerous cultural practices such as widow inheritance or levirate¹¹ marriage as practiced by some cultures, thus taking away a woman's or girl's decision-making or negotiating power, making her vulnerable to abuse, particularly if she rejects the decision. Bawah et al. (2009) concluded that when a man pays bride price for a wife, he assumes "ownership" over her including her reproductive rights and resources. This attitude could lead to treating her as a property to be bought and sold. Bawah (2015) argues that men's use of violence is a defence response to their frustrations, and inability to financially provide for their family or pay the bride price on time, especially between cohabiting couples. Dery (2015) is consistent with others that found a direct relationship between brideprice and violence and argues that the practice misrepresents women as a commodity in the marriage market, leading to DV against once

¹¹ It is a customary practice where a man is permitted to marry his deceased brother's wife if deceased brother had no children or left behind a lot of properties. This custom serves to maintain the family line of the deceased brother, provide support to the widow or ensure retention of properties in the family.

the buyer is unsatisfied with the returns on his investment (Amoah, Tenkorang & Dold, 2021; Oduro et al., 2022; Ofei-Aboagye 1994). The practice itself is not problematic, as it is meant to be a token of appreciation for the investment and commitment of parents toward their children. However, Ansell (2001) and Muthegheki et al. (2012) argue that the amount should be minimal or flexible and agreed upon cordially between the would-be husband and the bride's family.

Aside from bride price, some young couples go further to organize extravagant celebrations and "after parties" that come with additional financial burdens, which may lead to borrowing and overspending. Since the man is expected to cover a significant portion of the marriage expenses as a sign of his financial stability and ability to support his new family, when they are unable to recover a considerable amount of money spent on the marriage ceremony from gifts and donations, young couples start their married life in significant debt, at times leading to resentment, blame, regret, and animosity toward the bride. In most ethnic groups during divorce, women and their families are expected to return the bride price to the man before the marriage is dissolved. Among the Akan, only the drinks presented are returned to the man and his family. While the cost of the drinks seems inexpensive, it can be unaffordable for economically abused women or victims of early or forced marriage who do not earn any income. Due to high poverty levels among women, it may be more difficult for unemployed or financially dependent women in abusive relationships or children forced into abusive marriages to afford to repay their bride price to leave. As a result, their family may advise or force GBV victims to endure abuse (Dery, 2015; Bawah, 2015).

4.4.5 Poverty

In Ghana, poverty is widespread due to failed neoliberal economic policies such as the Structural Adjustment Policies (SAP) that worsened the economic fortunes instead of promoting economic prosperity as anticipated (Konadu-Agyemang, 2000; Kraus, 1991) and neocolonial relations which hinder economic development and affect the economic growth of the youth (Demery & Addison, 1987). Men who are struggling financially may easily feel disappointed in themselves and frustrated as customary and legal norms require men to be breadwinners who ought to provide for the basic maintenance of their families regardless of their situation and employment status. With rising expectations, they may

resort to physical and emotional violence against their children and wives as a way to reinstate their authority and control in the home (Dery, 2019). According to the Akan proverb: “it is a man who takes the bitterest pill” and “a man does not cry”, hence they do not seek help or communicate their feelings and challenges pushing their frustration at their spouses and children. Men who may be dealing with marital problems or disagreement with their spouse or children may consider child non-maintenance as a way of ‘punishing’ their victims, which could lead to quarrels and further abuse. Poverty is a known contributory and inevitable factor in the contextual reality of GBV victims’ lives in Ghana (Cusack and Manuh, 2009; Alhassan & Doodoo, 2020; Adjei, 2015). The levels of economic hardships tend to be higher and harsher for people living in rural communities due to limited opportunities, unemployed women, and families with more children and other dependants such as aged or physically challenged. Recent studies have shown that women’s unemployment, their engagement in low-paying jobs and unpaid domestic services, as well as practices such as stay at home wives and overdependence on their husbands, increase their vulnerability to GBV and limit their ability to seek help and healthcare from state agencies (Adu, 2023; Tenkorang et al., 2013; Cofie, 2020; Owusu Adjah & Agbemafle 2016; Oduro et al., 2012). Similarly, poverty and unemployment have been found to influence young women to engage in sex work putting them at risk of HIV, violence and other vulnerabilities (Onyango et al., 2015). The MICS 2011 report indicates that girls from low socioeconomic backgrounds are four times more likely to be married compared to girls from more well-to-do socioeconomic backgrounds (GSS, 2011).

Furthermore, the report suggests that child marriage is prevalent among the poorest, uneducated population in rural areas of Ghana (Amoo, 2017; de Groot et al., 2018), revealing that 36.2% of girls in rural areas, in contrast to 19.4% of girls in urban areas, are in child marriages. Education has been identified as a protective factor against early marriage for girls (Amoo, 2017). Throughout Ghana, girls with limited or no education are twice as likely to be married during childhood compared to girls with higher education (GSS, 2011; MoGCSP, 2016).

It has been observed that poverty exacerbates gender inequalities (Badu et al., 2022). Men generally have higher levels of education, better employment opportunities, and greater control over economic resources than women. This can make it challenging for

victims to leave an abusive relationship or to report the abuse. For example, according to the recent national census report (GSS, 2022), only 9% of women, compared to 12% of men, are employed in professional, technical, or managerial positions in Ghana.

Additionally, 69% of women and 34% of men work in sales and services, with women constituting the majority in sales, often engaging in small to medium-scale trading to support their families. In terms of agricultural work, only 6% of women are employed, in contrast to 12% of men, as farming is typically capital-intensive, and many women cannot afford it. Men oppose the increasing economic independence of women, perceiving it as a threat (Ajayi, & Soyinka-Airewele, 2018). In wealthier households, while economic stress is reduced, psychological violence becomes more prevalent due to other stressors such as maintaining social status, control dynamics, and emotional manipulation, which are often more subtle and insidious. Psychological abuse is often used to control and sustain power imbalances in family relationships, as illustrated by the extensive patterns of IPV identified in Tenkorang et al. (2023) whose study found elevated levels of psychological and emotional abuse across various socioeconomic segments. Poverty is a significant contributor to GBV as economic hardship intensifies household conflicts and stress, leading to physical aggression (Barrington et al., 2021). Given the deteriorating economic conditions in Ghana, it is crucial to discuss the connection between poverty and women's vulnerability to GBV, considering the profound impact of GBV on victims, survivors, and their families.

4.4.6 Alcohol and Drug Abuse

There is an ongoing debate among scholars regarding the association between drug and alcohol use and domestic violence. Mitchell (2003) argues that while alcohol and drugs may not directly cause abuse, they often serve as excuses for abusive behavior. However, evidence from Ghana points to a strong causal link between alcohol use and domestic violence, affirming that it is a key trigger for GBV in Ghana (Adu Gyamfi, 2014; Kanlisi & Dumah, 2022; Badu et al., 2022). It is reasonable to conclude that while drug and alcohol use alone may not directly contribute to domestic violence, they can exacerbate the likelihood of abusive behavior, particularly in conjunction with other issues that drug users may be facing.

Alcohol use can instigate violent behaviors among husbands by overshadowing their critical thinking and decision-making abilities (Zimring and Hawkins, 1973; Nagin 2007; Bushman & Cooper, 1990; O’Leary, 1988; Dumais et al., 2005; Fals-Stewart, 2003). In Ghana, women frequently occupy subservient roles to men and may, at times, endure physical, emotional, and sexual abuse from their male partners. Some women and children may struggle to follow the directions of a drunkard, regardless of his position as the head of the family, fuelling conflict and violence, as he may feel that his authority is being disrespected. A global study of homicide offenders across nine countries revealed that 48 percent of murders were committed under the influence of alcohol at the time of the crime (Kuhns et al., 2014). Ghanaian men, especially during times of distress and financial hardship, may turn to alcohol and other unauthorized substances as a means of coping or escaping from their problems, leading them to knowingly or unintentionally acting violently before realizing the consequences of their actions. A lack of justice for victims may contribute to the regular occurrence of violence against wives and children, normalizing these daily occurrences.

4.4.7 Weak Social Protection Mechanisms

Under international human rights law, the Ghanaian government is obligated to prevent, investigate, and punish domestic violence (DEVAW, 1993). Though governmental and non-governmental organizations exist to ensure the realization of these goals, Cantalupo et al. (2006) found deficiencies with the Criminal Code, such as discriminatory enforcement of existing laws; the influence of traditional attitudes about domestic violence on state officials such as police, judges and other government employees; and insufficient resources in the primary agencies charged with responding to domestic violence. Marital rape is legal under the Criminal Code and other Criminal Code provisions applicable to acts of domestic violence are under-enforced or enforced in a manner that fails to adequately sanction men for domestic violence due to the poor and underfunded nature of the police. Consequently, government officials often promote mediation of criminal offences related to domestic violence cases instead of resolution through formal legal mechanisms (Cantalupo et al., 2006).

This practice can deprive domestic violence victims of the opportunity to pursue state-sanctioned punishment for the crimes committed against them and risks placing

victims in danger because most have already attempted to informally mediate their problems within families, churches, or traditional bodies and have come to the state because mediation has failed to end the violence. Bowman (2003) proposes that the significant underreporting can be attributed to the belief that the police will not intervene to help, as well as a widespread lack of trust in the police in numerous African nations, especially those that are emerging from oppressive colonial rule.

4.4.8 Stigmatization

The stigma and marginalization faced by GBV survivors in their own communities can be especially damaging, as elaborated in this study (OHCHR, 2019). Most media reports as evidenced in radio, TV shows, news and print media tend to trivialize issues of GBV and resort to joking (Alo, 2018). A number of local TV shows have been turned into marriage and family courts where various sensitive and criminal issues are settled in the court of public opinion instead of reporting to the court of law, DOVVSU, CHRAJ or DSW. Most of these shows are aired on various social media and television channels without the necessary state agency engagement and revealing the identity of victims, especially defiled¹², raped or physically assaulted children whose full names, pictures and even sometimes school performance and other private issues are displayed into the public domain.

The possible public ridicule and shame may prevent victims from accessing critical services, thereby risking the victims' physical and mental health. It may lead to further abuse; spousal, family and community abandonment or rejection (including possible separation from one's own children); retaliation; honour killings; or forced and early marriage (including with the perpetrator) (Apatinga & Tenkorang, 2022; Alo et al., 2023). Stigmatization and abandonment may lead to loss of resources and livelihoods. Stigma can turn the blame on the victims of sexual violence, who in some cases can be criminalized (e.g. for adultery, or same-sex relations). Children born out of rape often suffer stigmatization and its consequences (Adonteng-Kissi, 2018). Figure 2 shows how every aspect of society contributes to and reinforces GBV.

¹² In Ghana, defilement is a legal term that refers to the sexual abuse or exploitation of a minor (a child under 16 years). This usage emphasizes the serious nature of the crime and the harm inflicted upon the victim. According to the Criminal Offences Act, 1960 (Act 29), Section 101, defilement is defined as having carnal knowledge of any child under sixteen years of age, with or without the child's consent.

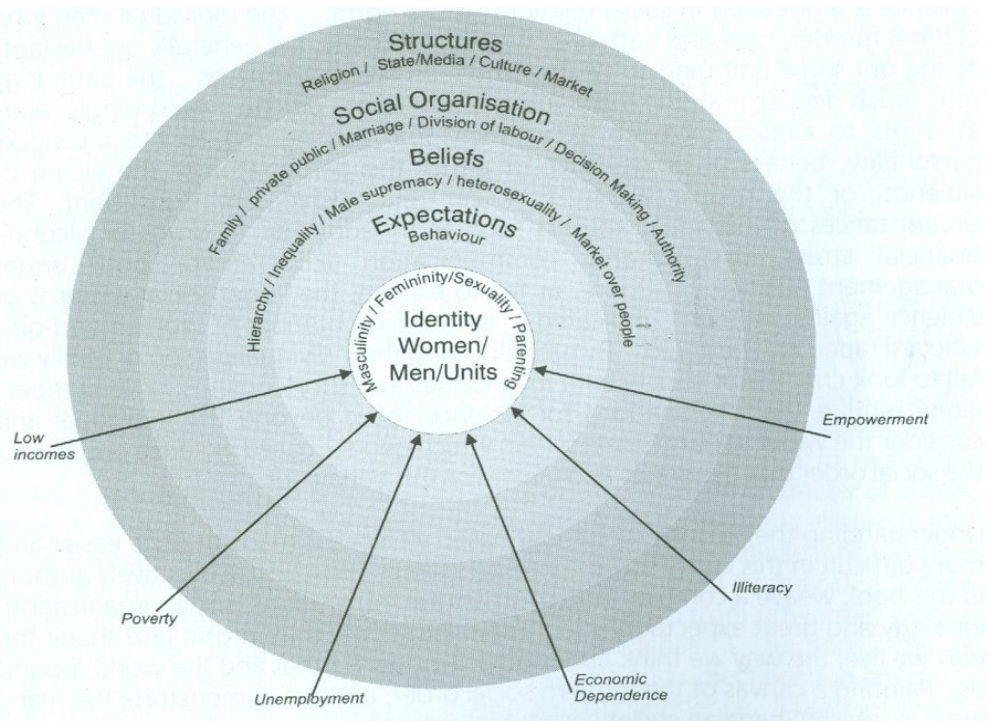


Figure 2 Ghana's Architecture of Gender-Based Violence

Source: Cusack and Manuh (2009)

Ghana has enacted several laws and provisions in its constitution which are expected to help in addressing GBV. Some of such laws and instruments are discussed below.

4.4 Legislation and Judicial Application on GBV

4.4.1 Constitutional Provisions and GBV

In adherence with the various international and regional instruments, the Republic of Ghana has adopted different legal documents that protect the rights of women and children from violence and aim at addressing all forms of abuse and torture. Sections of existing Ghanaian laws address child abuse and non-maintenance, female circumcision, cruel widowhood rites and cultural practices that promote sexual assault, and physical, emotional, and economic abuse. In contrast, some laws have been found to inadequately address marital rape (Cantalupo, 2006; Stafford, 2007), child marriage (Tenkorang, 2023;

Dako-Gyeke, 2019), and revenge pornography¹³ (Addadzi-Koom, 2021) due to a lack of clarity or precision. Furthermore, article 28(1) and (2) of Ghana's constitution ensure every child gets the needed special care, assistance and maintenance. It grants all children whether or not born out of wedlock the right to fair share of inheriting parents's property and protection from harmful, excessive labour and any cruel treatment. Under the law, children are protected from engaging in any economic activities by themselves or for others that go beyond their age and ability.

Furthermore, Articles 15 and 16 of the Ghana's 1992 constitution ensure the protection of dignity of all persons by granting protection against torture, slavery or forced labour. Article 17(2) prevents GBV: "a person shall not be discriminated against on grounds of gender, race, colour, ethnic origin, religion, creed or social or economic status". By this constitutional provision, any act of abuse or discrimination and ill treatment based on an individual's gender is unacceptable and punishable by law.

Article 17 (2) also empowers the parliament of Ghana to make and review laws to strengthen implementation of policies and programs to address social, economic or educational imbalance. Article 18 gives everyone the right to own property alone or with others including women. Article 22 specifically protects the right of spouses' to their deceased partner's property whether they did or did not make a will before their death. In furtherance of this, the Interstate Succession Law 111 of 1985 [PNDC Law] was introduced and amended in 1991 to provide a law applicable throughout the country that grants inheritance rights to spouses and children of an individual who died without a will. Article 26 grants individuals the right to practice, profess, maintain and promote any legally accepted culture or religion; however, it also prohibits practices that may dehumanise and victimise a person or persons. The constitution supersedes any religious or cultural explanation in contradiction.

4.5 Gaps Affecting Implementation of GBV Policies

4.5.1 Sexual Violence: Legal discrepancies

The minimum legal age for marriage in Ghana is 18 years (Children's Act of Ghana, Act 560, 1998). The same Act explicitly prohibits child marriage, stating that a person

¹³ Non consensual exposure/ publication of sexually explicit information (audio-visuals) of people or people with the intention of punishing a ex-lover or a loved one

below the age of 18 years cannot contract a valid marriage. Section 14 (1) of Children's Act of Ghana, (Act 560, 1998) states, "No person shall force a child (a) to be betrothed; (b) to be the subject of a dowry transaction; or (c) to be married." However, the Criminal Offences Act, 1960 (Act 29), sets that the age of consent for sexual activity in Ghana at 16 years which implies that individuals aged 16 and 17 can legally consent to sex but cannot legally marry. This can lead to situations where young couples engage in consensual sexual relationships without the legal framework and protections that marriage might provide. Additionally, If a girl under 18 becomes pregnant, she cannot marry the father of the child if they are both under 18, even though they can legally consent to sex. This can lead to social and legal complications, including issues of child support and custody. Having consent at 16 years could be abused by lawyers as a justification to defend their male clients involved in sexual offenses.

4.5.2 Lack of Political Commitment

Beyond the signing of international conventions, governments are required to adhere to them, adopt and adapt them into national law, as well as provide the necessary institutions and personnel who are well trained and equipped with the information necessary for monitoring the implementation of the obligations, as defined by the Convention (IASC, 2015). States must ensure effective assistance to victims of violence, including the training of appropriate professionals to ensure victims' access to health and social services to facilitate their recovery, and establish adequate shelters and telephone support lines. Furthermore, states are obliged to incriminate persecutory acts; punish any sexual violence; and penalize child marriage, female genital mutilation, and sexual harassment (Lomazzi, 2023).

4.5.3 Deficiencies in Enforcement of Laws

The lack of stricter enforcement of GBV laws contributes to the state's negligence (Asomah, 2015). Asomah further argues that no evidence of an arrest of shrine ¹⁴priests or prosecution of those involved in the practice exist. Asomah therefore argues that the responsibility to eliminate the practice, as sanctioned by law (Article 16 of Ghana's 1992 constitution), has been left in the hands of NGOs. According to Ameh (2004), NGOs were

¹⁴ a place of worship regarded as holy because of its associations with a sacred person or object.

more capable in handling the trokosi issue, as they were more actively involved in addressing it. NGOs play a significant role in addressing various forms of GBV, despite not receiving funding from the government. The government agencies, as indicated by the minister's statement, seem to be aware that they are not doing enough to curb the issue.

Aberese & Akweongo (2009) witnessed that despite the criminalization of FGC, the political support to ensure that the law is effectively implemented is lacking. A resource shortage in the primary agencies responsible for addressing domestic violence also hinders the Ghanaian government's response (Yakubu & Chaudhuri, 2022; Cantalupo et al., 2006). Underfunding issues of women, girls and children shows the lack of commitment and respect for their development, which could reciprocate in the understanding and conduct of the police, MoGCSP, teachers, judges, health workers as they deal with victims. Government's commitment and investment in this sector could be instrumental in empowering duty bearers to be able to act as expected, as money is needed to finance all activities from training, medical supplies to investigations.

4.6 Exploring Best Practices in Evaluating GBV Interventions

Little attention has been given to assessment of interventions aimed at curbing GBV. To better understand whether progress is being made or not and in order to develop more effective solutions, it is crucial to examine the strategies employed by NGOs and government agencies responsible for protecting the citizens of Ghana.

To begin with, UN Women (n.d.) recommend the following strategic directions in evaluating GBV projects:

1. Adopting evidence-based programming and evidence generation to strengthen GBV prevention.
 - The UN suggests that evidence building should be at the core of the GBV Programme, from the design, implementation of interventions, partnership development, and the evaluation of results.
 - evidence based programs is encouraged which involves the experience and collaboration of experts, practitioners, partners such as NGOs and donors as well as the input of survivors.
 - There should be frequent monitoring and evaluation of the outcome of GBV programs.

- A combination of strategies can be chosen so that the results of these can be evaluated based on the degree to which they impact the population of the intervention sites in reducing GBV prevalence and achieving gender transformative changes (such as reduced acceptance of VAW, VAC and harmful social norms that lead to GBV, increased supportive behavior for gender equality and women's empowerment, increased bystander action to stop VAW, etc.).
 - A critical component of this strategy is the development of a clear evaluation design as part of the project's M&E framework which will provide guidance on how to measure the interventions' effects on VAW reduction outcomes.
2. Strengthening legal protections for women and girls against GBV.
- There should be advocacy for a stronger legal framework protecting victims from all forms of GBV.
 - In order to maximise the presence of this strong activism and address the gaps in primary prevention programming, a national alliance building strategy should be implemented to strengthen the involvement of victims rights activists—including those often underrepresented and who suffer from multiple and intersecting forms of discrimination—to develop and lead the advocacy for government to implement more effective VAW Prevention policies and programmes
3. Building capacities in GBV prevention strategic development.
- There should be a strategy for technical support to be given to the implementing partners in utilising the latest GBV prevention strategies and evidence to inform project implementation. This can include clarifying behavior-change and community mobilisation strategies that goes beyond community awareness-raising.
 - Strengthening capacities of local CSOs to use and generate evidence on effective VAW prevention programming should include improving process documentation and beneficiary monitoring to capture differences in implementation quality across different sites. They can also receive capacity development support in results-based management and implementing M&E mechanisms that mutually reinforce all implementing partners' role in

contributing to the evidence being generated through implementation of the CGBV Project.

4. Implementing context-specific local governance and advocacy strategies.
 - GBV interventions can be implemented through local advocacy strategies
 - GBV can be integrated in gender-responsive budgeting (GRB), trainings, and mentorship and mentorship.
5. Implementing community-mobilisation and family/ relationship-level interventions using evidence-based behavior and social norm change methodologies and curricula.
 - A key strategy can be to strengthen community members' capacities to organise themselves and implement local level actions to prevent IPV, as well as sexual harassment (SH) and other forms of non-partner sexual violence (SV) in public spaces.
 - Through partnerships with local NGOs with longstanding expertise on community mobilisation and VAW prevention, a group of trainers can be trained on locally adapted Community Mobilisation curricula and approaches and on rolling out family and relationship level GBV prevention training for communities. Having been tested in Bangladesh, a middle-income country like Ghana, this strategy provides some insights into how interventions can be planned, implemented and monitored in Ghana.

Furthermore, the United Nations High Commissioner for Refugees (UNHCR), developed a seven-layer GBV prevention programming. These guidelines were intended to focus on Sexual and Gender-Based Violence against Refugees, Returnees, and Internally Displaced Persons (IDP), nonetheless these guidelines are useful in other situations aside refugees, returnees or IDPs. The Guidelines for Prevention and Response are:

- (1) Transforming sociocultural norms, with an emphasis on empowering women and girls
- (2) Rebuilding family and community structures and support systems
- (3) Creating conditions to improve accountability systems
- (4) Designing effective services and facilities
- (5) Working with formal and traditional legal systems

- (6) Assessment, monitoring, and documentation of GBV
- (7) Engaging and working with men

Providing a broad spectrum, these guidelines are applicable in changing structural and gender imbalance as well as cultural factors that reinforce GBV in Ghana when tailored to the context specific situation.

4.6.1 Cultural Considerations and Contextualization

Riger (2001), Trickett (2009), and Kral et al. (2011) all share the view that many social interventions targeting GBV are ineffective or fail due to a lack of understanding of cultural and community contexts. This is because community members are seen as experts in their own culture and interventions that do not take cultural factors into account tend to address only the symptoms of a problem, rather than its root causes (Jeannotte & Duxbury, 2012). As argued by Rappaport (1981), intervening at the wrong level may overlook the most significant causes of the problem. Kral et al. (2011) suggest that interventions that disregard cultural differences often fail to change the underlying cultural norms and values that perpetuate a problem, leading to limited impact or failure. This is not to suggest that cultures that demean or torture people should be entertained. Building on this, this paper examines how cultural considerations can aid in addressing GBV holistically.

In a recent study, Abugabe (2022) examined how international treaties aimed at preventing violence against women are implemented in Ghana. Using a qualitative and theoretical approach with a focus on gender intersectionality, Abugabe found some international treaties ratified by Ghana are not always explicitly and fully incorporated into domestic legislation, policies, and programs nonetheless observed that some Ghanaian legislative, institutional policies and programs aligned with the objectives of these treaties, indicating some impact. The study identified several barriers that hindered effective implementation, which included limited effort by governments which involved paying lip service to the treaties, limited awareness and attitudinal change towards women's rights and poor use of treaties in legal strategies to address GBV. Gender-insensitive budgeting, traditional, religious, and cultural beliefs as well as practices posed challenges to addressing GBV. The study recommended urgent legislative reforms and constitutional amendments, the passage of the Affirmative Action Bill [AAB] (Gender Equality Bill) which has been overlooked in Ghana's parliament for decades, gender-sensitive budgeting

and policy frameworks, and participatory approaches such as grassroots mobilization and stakeholder consultations. Overall, the study suggests that Ghana's compliance with these treaties is driven by reputational protection, global communication and socialization, public criticism, resource availability, and alignment with existing national laws which may not efficiently safeguard the human rights of women and children.

Krug and colleagues (2002) argue that effective prevention programming is a key component of a comprehensive strategy to reduce gender-based violence worldwide. Some feminists have argued that any prevention or intervention programmes by state institutions or development organizations to address GBV against women and girls must include economic empowerment for women and girls through skill development or microfinance (Solotaroff et al 2019; Lamichhane, 2020). Additionally, several studies have shown that raising women's economic status enables them to add to household expenses, gives them the chance to participate in household decision-making processes, and increases their capacity to bargain for safe sex and non-violent partnerships (Arthur-Holmes & Busia, 2020). By improving their economic status, women are more likely to acquire self-esteem, assertiveness, and negotiating skills, which will reduce male violence against women, particularly in intimate partner relationships (Kim et al 2007, 2019). Several scholars¹⁵ argue that effective intervention should target a comprehensive approach to reducing gender-based violence and such interventions must include primary prevention strategies. These scholars have argued that primary prevention programme must address the underlying attitudes, norms, and behaviors that support GBV. Additionally, they believe the ultimate goals should lead to ending violence, empowering women and girls, and promoting non violent, equitable, and respectful relationships.

Studies on GBV show that community-based interventions and programs that involve education and empowerment of women and girls, as well as engagement of men and boys in addressing GBV are on the rise. Overall, these programs continue to increase awareness among Ghanaians and are sustainable in addressing GBV. Notwithstanding, there is a need to ensure the maturity and sustainability of these intervention strategies. While these interventions have helped, it is paramount that measures be put in place to

¹⁵ See Krug, Mercy, Dahlberg, & Zwi, 2002 & Crooks et al., 2019

ensure the success and sustenance of such interventions, so that the purposes for implementing these strategies will be fully achieved.

4.7 Conclusion

This chapter reviewed relevant literature on the factors that promote GBV, the obstacles that impede GBV implementation were also analysed and factors that should be considered when evaluating the effectiveness of GBV interventions were discussed. The pieces of literature revealed that multiple factors promote GBV such as: lack of commitment from government, poverty, cultural factors which stems from patriarchal and gender norms, alcoholism and drug abuse, stigmatization ec cetera. This chapter further analyzed some factors that ought to be considered when examining the effectiveness of GBV interventions.

CHAPTER 5 RESEARCH FINDINGS AND DISCUSSIONS

5.1 Introduction

This chapter presents the findings of this study as obtained from analyzing data collected from respondents and relevant documents. The primary objective of the study was to evaluate the effectiveness and appropriateness of government and NGO policies, strategies, and programs in addressing of GBV in Ghana and to determine the effective strategies that could be helpful in addressing this issue. The chapter provides an overview of the various programs and policies implemented by government and NGOs. It further discusses the successes and challenges GBV interventions in Ghana face and finally the effective strategies that can and should be adopted to address and prevent GBV and the impacts of HM at the individual, household, community, and societal levels in Ghana.

5.2 Responsiveness to GBV: a serious concern in Ghana?

GBV is widespread and impacts women and children in Ghana negatively (Amoakohene, 2004; Cantalupo et al., 2006). It is expected that it would be given the needed attention to create a culture of seriousness around GBV. However, all 15 participants in this study reported that GBV is a serious issue affecting families but has not received the needed attention from government, state agencies and the general public. Participants expressed that patriarchal and certain socio-cultural practices which impact only women and girls tend to promote male superiority and encourage the subservience of women and girls and normalize gendered violence against them. Although all participants agreed that a change in attitude and how GBV is viewed was necessary, two males participants justified that change is a slow process which takes time to manifest. However, they believed a lot needs to be done by government in strengthening the enforcement of law. Respondents who view the slow process of change as normal do not treat GBV issues as a human rights or protection concern, while those who think that government has not been proactive are intentional and proactive in approaching and addressing GBV concerns. A lack of commitment to address GBV and its justification may reinforce patriarchal norms and promote tolerance for GBV (Connel 1995, 2005; Aberese Ako & Akweongo, 2009). This may lead to its normalization of GBV (Gibbs et al., 2015). A female participant from

the Gender Centre discussed the power government has in influencing the personal and attitude culture of GBV.

We are not going to get anywhere until the government begins to see GBV issues [the implementation of GBV policies] as a priority. We [NGOs] always laugh and say when it comes to signing protocols, policies, conventions, Ghana is always among the first countries to ratify and sign fast. But when it comes to making those things work, we do not take the implementation seriously. If the government was very intolerant toward GBV and state agencies were empowered to treat such issues as serious offences, who are the chiefs, individuals or state actors to act otherwise? (The Official 1, the Gender Centre, IDI, July 2023).

The participant emphasizes that without careful commitments and investment in implementation, including adequate funding, monitoring, and regular training for personnel to translate plans into action, Ghana will not achieve significant progress. This research reveals that while political commitment is currently lacking, it is essential for strengthening state institutions and shaping individuals' perceptions of GBV, as well as the conceptualization and response of state actors to this issue.

5.3 The Ghanaian Government's Response to GBV

Ghana has ratified several international protocols such as the Universal Declaration of Human Rights in 1948, the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) on 2nd January 1986, and the UN Convention on the Rights of the Child (UN CRC) in 1990. The government has taken steps to tackle GBV by enacting laws, developing policies, programs, and frameworks, and establishing special agencies to supervise, evaluate, and implement these measures. These include the 1992 Constitution of the Republic of Ghana, the Criminal and Other Offences Act (Act 29/60), the Children's Act (Act 560/98), the Juvenile Justice Act (Act 653/2003), and the Domestic Violence Act (Act 732). There is evidence suggesting progress in Ghana's efforts to address, reduce and improve support for survivors of GBV even though this change is slow. Below are some measures as reviewed from state documents and corroborated by in-depth interviews.

5.3.1 The Establishment of the Ministry of Gender, Children and Social Protection

The Ministry of Gender, Children and Social Protection (MoGCSP) was set up in January 2013 and mandated to handle all matters relating to policy formulation, coordination, monitoring and evaluation of national gender programs, agencies and interventions including gender inclusion and GBV prevention. MoGCSP was created to replace the then Ministry of Women and Children's Affairs, which was viewed as women and children-centred. The establishment of MoGCSP set the phase for the advancement of gender equality, equity, the empowerment of women and girls, and promoting the survival and development of children, thus ensuring their rights were safeguarded through legislation and proper execution of the laws. The ministry was mandated to standardize social protection interventions to better target vulnerable groups such as women, children and persons with disability.

5.3.2 The Domestic Violence Act (DVA)

Ghana passed the DVA [Act 732] in 2007 to provide a clear and broader definition of DV, encompassing physical, sexual, economic, psychological and emotional abuse. The Act criminalises all forms of violence and provides a legal basis for filing complaints with the police and prosecution. It further established the Domestic Violence and Victims Support Unit (DOVVSU), a specialized unit within the Ghana Police Service (GPS) to speedily respond to all forms of violence whether happening in private or domestic relationships. DVA also allows the state actors such as MoGCSP, DSW, and CHRAJ to intervene and treat GBV concerns as criminal offences as a private family matter (Ghana Statistical Service, 2008; Al-Hassan & Abubakari, 2015; Atinga, 2020). This could lead to increased sensitization, enforcement and compliance. Section 15 of the Act protects victims of DV from further abuse by granting a protection order when complainants feel unsafe with their abuser who may be their guardian after filing a formal complaint to the appropriate bodies.

The DVA provides for the establishment of specialized courts, namely the Juvenile and Family Tribunal, to handle domestic violence cases involving children who require special protection. Ghana's DVA since its inception was seen as a progressive initiative when compared to similar legislation in other African countries like Botswana, Nigeria, Mauritius, Rwanda, and South Africa (Ampofo 2008; Oritz and Vives-Cases 2013). This

was because, in addition to enforcement services, the Act provides for social and material support. However, this study observed operational challenges that hamper the realization of the funds hence survivors and corresponding bodies are unable to access the necessary funds. As such, key provision and promises embedded in DVA are not fully implemented (Darkwah and Prah, 2016; Tenkorang, 2023).

5.3.3 Domestic Violence Secretariat (DVS)

The DVS is an important agency under the MoGCSP tasked to regulate social protection practices, coordinate GBV efforts at different levels, and promote networking among key stakeholders. However, it has been reported that DVS is dormant, underfunded, and dependent on unreliable foreign aid, hindering its effectiveness in implementing GBV policies. A key informant indicated that the DVS has failed drastically in ensuring effective implementation of GBV policies since it does not receive the needed assistance and financial support to implement and monitor policies and programs. Although the DVA permits DVS to provide financial and other support to victims, the DVS is financially handicapped due to irregular and insufficient financial availability which significantly affects Ghana's enforcement of laws. A key informant who has been a board member of the DVS and has 25 years of working experiencing in GBV explained some challenges associated with the administration of the DV fund.

[The] funds arrive in the later time of the year, but any unused balance is [re]claimed by the ministry of finance at the end of each year. Unfortunately, it is possible that [GBV] issues may come up which may require money and when the money is requested, you [DVS staff or board members] realize that the funds are not available. (Esther, IDI, July 2023)

The key respondent therefore recommended that measures should be put in place to make the DV fund an independent account outside the control of the Ministry of Finance or there should be no requirement to return the funds to the government if they were not utilized by December. Rather, they should be kept for an emergency.

The relationships that exist among various institutions and members within and outside may affect the individuals, institutions and their actions in the country (Bronfenbrenner, 1989; Glanz et al., 2008). In this light, the inavailability of funds to expedite investigations, undertake education, provide shelter and safety to victims, arrest offenders and prosecute offenders in court has a direct impact on how victims may report issues and how perpetrators may use violence. In the same vein, challenges including the inavailability of funds, the overall posture and position of government and of state agencies such as DVS may inform the response of state agencies which could lead to lawlessness, impunity and injustice, especially when GBV crimes go unpunished over time. DVS was seen as an ineffective and underfunded state agency that seems overwhelmed and restrained in promoting GBV implementation in Ghana.

5.3.4 Domestic Violence and Victims Support Unit (DOVVSU)

Ghana's DOVVSU was created in response to the rise in abuse and violence against women and children in Ghana in 2005. DOVVSU was established to fulfill international obligations and is a leading body responsible for providing services, safeguarding rights, establishing a crime database, offering crime prevention advice, and collaborating with other organizations to provide support services. DOVVSU targets to increase public awareness about the criminality of violence, empower victims to voice their concerns and establish support networks for survivors (DV Secretariat, 2013). The establishment of DOVVSU as a specialized unit of the Police Service expanded their geographical reach across the country, brought about greater visibility to the issue of domestic violence and improved accessibility to the justice system for survivors of GBV (Action Aid, 2019). However, the ability of DOVVSU to provide high-quality services and support victims of GBV is hindered by capacity constraints, logistical challenges, and a lack of inter-agency support and coordination (Manuh & Dwamena-Aboagye, 2013; Agbley & Dumenya, 2023; Dowuona-Hammond & Hammond, 2022). Poor structure for counseling of survivors, delays in the justice system, financial challenges experienced by state institutions and lack of government owned or operated shelters render DOVVSU ineffective (Tenkorang, 2023). The lack of institutional support and adequate training within the police service leads to unprofessionalism and revictimization which has far reaching repercussions on justice delivery which may affect the victim's interest and desire in engaging the police and other

law enforcers in the future. Dowuona-Hammond and Hammond (2022) found that DOVVSU has not received consistent staff training, resulting in low progression of cases through the courts. They also found that critical support services such as counseling, emergency shelters, legal advice, and medical services are still lacking and personnel within state agencies also lack specialized training in investigative and prosecutorial skills to offer targeted support to victims of sexual violence. This contributes to high attrition rates in sexual violence cases within the criminal justice system and low conviction rates in the courts.

5.3.5 One-Stop Centre Initiative

Ghana's first and only One-Stop Centre for DOVVSU was launched in January 2022 at the Police Headquarters in Accra to provide security, legal, medical and counseling services, shelter and other support to GBV victims. The Centre has a District and Circuit Court, sick bay, conference room, interrogation office and a playroom for victims of assault, rape, and defilement. If this resource was decentralized and had the personnel and resources needed to effectively provide these services while strengthening preventive measures, it could result in progress in the fight against GBV.

Despite the existence of laws that criminalize slavery, torture and forced marriage, these acts of violence continue with impunity as if there are no laws (Dowuona-Hammond & Hammond, 2022). This suggests a lack of enforcement or lack of systems in place to ensure continuous awareness creation and strict compliance. According to UNICEF, 2 million girl brides exist in Ghana (UNICEF, 2020). On April 1st, 2024, the GPS intervened and rescued a 12-year-old girl who was married to a 63-year-old traditional priest in Nungua, Accra as a 'stool/customary'¹⁶ wife after she had been betrothed to him at age 6. The girl was rescued after public backlash on social media, which led to the issue gaining attention in local and international media (Graphic online, April 2024; 3 News, 2024; Citi Newsroom, 2024).

¹⁶ The wives of the chief are called "stool wives" because they are considered to be married to the lineage of the chief. (Bartle, 2013)

5.3.6 Specialized Courts

Ghana's GBV court was established in 2009, and the first child-friendly model court was set up in Accra in December 2018, with support from UNICEF. The child-friendly court sought to fill the gaps identified in the administration of justice in GBV cases (GNA, December 2022). The setting up of GBV courts aims to ensure effective and efficient administration of justice for GBV offenses. A GBV court holds the same status as a Circuit Court and has primary authority over all criminal cases, excluding treason, offenses triable on indictment, and crimes punishable by death and life imprisonment (Section 43 of the Courts Act, 1993 [Act 459]).

A unique feature of the child model is that survivors of rape and defilement do not show up in courtroom. Instead, they monitor proceedings on a screen while awaiting their turn to testify in a private separate room. Where children are survivors or witnesses, the court offers intermediaries to help them testify and understand the proceedings in age-appropriate language (GNA, December 2022). According to UNICEF, these features protect the survivors from the secondary trauma that may come from going through an often hostile and insensitive justice system. Dowuona-Hammond and Hammond (2022) found that GBV courts are not present and functional at all 16 regional capitals. DOVVSU participants expressed confidently that the court promotes privacy and confidentiality of victims; however, the participants were concerned with the challenges of effective implementation and professionalism in establishing similar systems in other regions outside Accra since much of attention regarding infrastructure, funding and training are usually focused in Accra. This suggests a non-uniform implementation of GBV policies across regions. As a result, some areas within Ghana may not receive the necessary attention needed to address GBV and residents of such areas may experience high levels of GBV without having access to the support services.

5.4 School Related GBV Interventions in Ghana's Education System

5.4.1 Safe School Policy (SSP)

GBV concerns have also existed in Ghanaian schools for many years and the government has attempted to address these concerns through the creation of the guidance and counseling units in schools which are under-resourced and underutilized. In 2004, an evaluation of the extent of school related gender-based violence (SRGBV) was

implemented by a five member multi-disciplinary team. Its examination of the ways in which it was being addressed revealed predominate types of psychological, physical and sexual violence in and around schools (USAID, 2004).

SRGBV is violence based on gendered norms for roles and relationships that can be either physical, sexual or psychological or combinations of the three and are perpetrated as a result of gender norms and stereotypes, and enforced by unequal power dynamics (UNICEF, 2023). It can take place in the school, on the school grounds, going to and from school or in school dormitories. SRGBV can be perpetrated by teachers, pupils or community members. Both girls and boys can be victims as well as perpetrators and educational outcomes may be negatively affected.

The Ghana Education Service has implemented a safe school policy which aims to prevent all forms of VAC related to school or academic work in order to provide a safe, secure and enabling environment that promotes teaching and learning (GES, n.d.). In 2018, GES updated its SSP measures to completely ban corporal punishment against students in Ghanaian schools (Graphic Online, April 2023). This study found a significant impact of the SSP, a major government intervention aimed at addressing violence and abuse in communities and schools. It was noted that the program extended beyond schools to encompass parents and communities, recognizing their role in supporting children traumatized by the aftermath of Covid-19. Social and emotional support was provided to families, along with awareness initiatives addressing issues such as violence in marriage and its impact on children and women. Importantly, the policy does not only focus on sensitization but also involved the development of manuals on ensuring safe schools and continuous engagements with all stakeholders regarding their responsibilities. A GES official involved in this study expressed that the policy has been instrumental and has had a very positive impact while acknowledging the policy may not have fully eradicated corporal punishment, but that it has significantly improved awareness and the illegality of such actions: “Despite the ban on corporal punishment in all schools, some headmasters go contrary and “lash”¹⁷ students. Some even go beyond, leading to serious injuries” (GES Official 1, IDI, September 2023).

¹⁷ To beat someone mercilessly.

The participant's response shows the ban on corporal punishment has not been without resistance from school authorities and teachers often leading to injuries of students. Resistance from school authorities may be as a result of their own experiences of childhood violence which they might have internalized as an acceptable way of transforming behaviors of others (Greydanus et al, 2003; Tauber 2007). Krug et al. (2002) and Crooks et al. (2019) have suggested that initiatives aimed at preventing GBV should address the root causes. As agents of change in society, their continuous abuse of children in school can promote violence at home, encourage the use of violence among students or by parents as an acceptable discipline measure. The policy to abolish corporal punishment remains ineffective in school as primary actors contribute to traumatizing students, particularly those from poor families or rural communities where supervision may be reduced.

5.4.2 The Back to School Program (BTSP)

The back-to-school program is the government's initiative to promote awareness among communities and parents about the importance of creating a supportive school and home environment for students after COVID-19 and also for girls who became pregnant while studying. Before this program, if a girl became pregnant while in school, she was dismissed. If she was impregnated by a fellow student, he could continue his education unless the case involved rape or defilement, in which case her family could report to the police if they wished. This national program ensures that every school-going girl who becomes pregnant under any circumstances can complete her education. The Ghana Education Service has established a protocol to allow such girls to study, return home to deliver, and then come back to continue their studies without losing their status as students in the school (whether they were day students or boarders. "The protocol specifies the school personnel responsible for her needs, such as the head of the school with whom she must keep in touch, and the school's cook who will provide her with a special diet for herself and her baby" (GES Officer 1, IDI, September 2023). The District Girl - Child Coordinator, Education Directorate at the district, and the girl's parents also play important roles in ensuring the pregnant student can continue her education. When it is time for delivery, she will have the necessary support to deliver safely. Baafi (2020) found challenges that left the implementation progress at the mercy of teachers and headteachers who often determined the success or failure of the program in each school. Although the

GES official acknowledged some resistance from school authorities, he added that greater success has been recorded with the introduction of the BTSP.

There are a lot of success stories because we have had ladies who became pregnant, gave birth, came back to school and graduated. Most of them furthered their education, graduated and are working in various capacities to develop the country. Some headmasters think that GES is spoiling the students. We [GES] are pampering the students here and there so sometimes some people can sabotage the program at the grassroots but it is the national policy so any headmaster or teacher who does not comply will face sanctions. Nonetheless, we are having some few challenges but that has not affected the success of the program (GES Official 1, IDI, September 2023).

While the BTSP concept is commendable, local dynamics could vary in the way the program is run. Since this study did not engage beneficiaries, I cannot discuss the effectiveness of the program however, based on the participant's narration, I believe the program is feasible when it comes with a thorough engagement of communities and community leaders, school authorities, funding and extensive supervision. The GES officer further noted that the best means of transforming community members is by working with other state actors within communities to sensitize parents to allow their daughters to return to school and to support the newly born baby while the mother returns to school to encourage and facilitate their return. Through sensitization, the BTSP could be fully accepted and normalized in communities which could promote its sustainability.

5.4.3 Professional Learning Community (PLC)

The Standard-based Curriculum (SBC) introduced Professional Learning Communities (PLCs) in Ghana in 2019 to enhance teaching, learning, and the overall student experience in schools (GES Officer 1, IDI, September 2023). Notably, one of the specific modules within PLC promotes gender equality and social inclusion (GESI). Despite its potential, PLC implementation remains limited in African countries like Ghana (Botha 2012). Dampson (2021) found that many schools in Ghana have never conducted a

PLC meeting since its inception in 2019, and when they do, they often deviate from the recommended methods outlined in the PLC manual. Contrary to Dampson's claims, this study found that the PLC has been an effective learning avenue for GES staff including teachers who implement the tenets in their practice.

One of our learning modules focuses on GESI so teachers discuss these modules among themselves using practical and daily occurrence in the school and community as case studies. They are taught how to implement the key lessons in their engagement and also help students to be abreast with gender issues. (GES Officer 1, IDI, September 2023).

From the above narrative and my informal communication with teachers within Ghana's educational system, PLC has become an important component of school calendar helping to develop positive masculinity (Brown & Flood, 2020). The participant's response reveals an emphasis on the statistical outcome which is usually based on the number of teachers who attend. Although attendance is important, greater responsibility, mutual collaboration and sustainability should be emphasized (Meeuwen et al., 2021). To ensure that the entire school culture promotes a safe and peaceful teaching and learning environment, timely monitoring and assessment must be conducted in schools to enable policy framers understand the success and challenges of the program. PLC can thus be seen as an intervention that has a greater potential to sustain and promote positive social change and masculinity among teachers.

5.5 NGO's Interventions and Strategies to address GBV in Ghana

5.5.1 Community-Based Action Teams (COMBAT) and Club Formations

- i) In 1998, the Gender Studies and Human Rights documentation Centre (the Gender Centre) embarked on a nationwide study on VAW and VAC in Ghana to assess whether violence was an issue. The findings indicated that GBV was widespread and, as a result, a rural response system called the Community-Based Action Teams (COMBAT), was developed in 2002 by the Gender Centre. Coker-Appiah and Cusack (1999) report that the COMBAT approach aimed to address these four major areas:

- ii) The poor response of VAW, with frequent patterns of victim blaming, referring reported cases back to family, and state agency personnel and society in general trivialising the issue;
- iii) The high degree of tolerance of VAW in Ghanaian society, perpetuated by strong perceptions that domestic violence is a private/family matter and not a serious crime;
- iv) General confusion about what constitutes violence and ignorance about the causes, consequences and mechanisms that perpetuate VAW; and finally,
- v) Isolation of rural women and women's expressed dissatisfaction with the assistance and support they received when they reported VAW cases

“COMBATs are selected by community members and trained by the Gender Centre to create awareness about GBV and provide support to victims” (The Gender Centre Officer 2, IDI, July 2023). The COMBAT approach operates on the theory that progressive change does not happen overnight. Ingrained norms and learned behaviors need sustained and cumulative interventions and time to yield results. Representatives from state agencies are also trained to aid them to respond effectively to cases that are brought before them. The overall result intended is a reduction of GBV, characterised by the improved well-being of women and men.

Hornuvo et al. (2022) examined the ethicality, self-efficacy, and intervention coherence of the Community-Based Action Teams (COMBAT) initiative employed by NGOs in Ghana. The study shows that the use of the COMBAT approach led to a decrease in GBV practices and abuse of women in selected communities in the central region of Ghana, leading to an improvement in their well-being. Addo-Lartey et al., (2019) concluded that the model was effective in enabling women to reduce their exposure to IPV and men to reduce their perpetration of IPV while also changing individual attitudes about gender inequality.

Government interventions are usually accessible in urban and areas leaving behind rural communities. This study found that NGOs use school and community-based clubs and teams in some selected schools and rural communities to promote awareness, sensitization and education on GBV prevention and case management. Similarly, WiLDAF Ghana employs the Community Reconciliation Committee model (CRCM). Both models employ a community-based teams building approach where key community members who

are honest, highly respected and can keep information confidential are appointed by the community and trained by the NGOs to empower, educate, report, assist, support anti-violence measures by serving as intermediaries between state agencies and their communities.

The CRCM builds the capacity of community members on ADR and the legal laws particularly, governing DV. We also provide them with the capacity to apply the provisions of the law in reviewing and resolving cases that come to them instead of using their traditional and patriarchal lenses. This education on the constitution and laws helps them to handle non-criminal cases while referring the criminal ones to the state (Lois, WiLDAF Ghana, IDI, July 2023).

The COMBAT members are made up of six members comprising three men and three women per community selected by the community members are taken through the laws [of Ghana]. These people then go back into their communities and based on the training they have been given, they become agents of change by raising awareness, promoting public education, sensitization and they become a link between the communities and the state agencies. (Official 2, Gender Centre, IDI, July 2023).

With our junior COMBAT (Gender Club) for schools, students are selected and trained on Sexual Reproductive Health and Right education and GBV issues. They go back and be and they become peer educators and, they sensitize their fellow students and make sure they support their fellow students to report cases to school authorities (Official 1, Gender Centre, IDI, July 2023).

“The Girls’ Empowerment Project (Girls’Club) builds the capacity of girls in schools and communities to speak up against GBV because we believe in “catch them young”. If we train them at a younger age to be

able to speak up, they will become more aware and careful about being in abusive marriages and unions. We believe that, if you build the capacity of young girls and boys from the beginning, you train the boys not to be abusive adults and you prepare to become men who don't abuse women. It also prepares the girls to identify the triggers, and they escape abuse as well as knowing the channels for reporting (Lois, WILDAF Ghana, IDI, July 2023)".

We have the Men's Club known as the Male Champions (MC) which targets men and develop their capacities in so that they can reach out to their fellow men on how they can better manage their homes without violence through experience sharing (Senior Executive member, WIDO, July 2023).

These programs engage community members and train them on laws of Ghana including ADR which is an established traditional practice but the unique feature is these NGO models build the agency of community members to approach GBV as a crime and unacceptable by the society; to identify, report or settle non criminal offenses in communities. These programs increase awareness among Ghanaians and effectively address GBV. Notwithstanding, there is a need to ensure the sustainability of these intervention strategies.

By involving men, the program educates men on all forms of GBV and Ghanaian laws against them, promoting harmony and healthy collaboration between men and women and promotes gender-equitable attitudes and behavior among men (Katz, 2014; Tolman et al., 2017). The involvement of men helps in transforming and promoting an intergenerational gendered approach to ending GBV in communities (Casey et al. 2018). This method may change negative attitudes associated with hegemonic masculinity and encourage positive co-existence between males and females in homes, communities and the country at large.

The Girls' and Gender clubs prepare the youth to become agents of change. These clubs serve as avenues for discussions of GBV and students feel obliged to report GBV

concerns to school authorities and NGOs. This builds a sense of responsibility in the youth while holding themselves accountable. NGOs acknowledge that community members have unique and complementary skills that can be shaped to positively influence change in society (Ansari et al. 2012). When GBV prevention is collective, it builds a communal attitude against unacceptable actions perpetuated by community members intentionally or unconsciously (Pret & Carter 2017). Additionally, I observed that all NGOs prioritize women in their strategies by ensuring they are the focus while allowing men to participate. This epitomizes a conscious effort by NGOs to weaken hegemonic masculine norms while promoting healthy collaboration and dialogue among men and women.

Another striking observation is that none of NGOs programs directly targeted only boys who are at risk of GBV. Although WIDO, had the MC, it targeted only men and gave them the opportunity to share ideas on positive masculine engagement. When Lois of WiLDAF was asked why they had a girls club instead of an open gender club asserted that “our focus is to empower more women and girls than men or boys.” (Lois, WiLDAF, IDI, July 2023). She added that although they enjoy working with men, they are not the focus of their work.

Studies have shown that NGOs play a crucial role in addressing GBV in Ghana through advocacy, prevention strategies, protection and shelter provision, referrals, awareness creation, counseling, medical services, legal advice (including pro bono court representation), and support groups to tackle GBV cases (Osei Bonsu, 2021; Essel & Essel 2019; Kaburi, R. M., & Kaburi, Cantalupo et al., 2006). The findings show that NGOs sensitize and promote awareness creation on GBV concerns.

5.5.2 Women Empowerment

Different NGOs adopt different strategies in empowering women for instance, the Gender Centre and WiLDAF Ghana help women become independent people who have control and can make informed choices. Both organisations have trained women and girls to occupy leadership positions and have a strong voice in politics. Participants from both agencies shared several experiences of beneficiaries of their trainings who became leaders in their communities, assembly members, and Municipal and District Chief Executives. Likewise, WIDO has assisted women to build their financial dependence through the Village Saving and Loans.

We empower community members to ensure that women have access to and can contest positions. This gives them a strong voice in local politics to engage and advocate for women (Lois, WiLDAF Ghana, IDI, July 2023).

We developed the Village Savings and Loans Associations (VSLA) which gave women the opportunity to save as little as one Cedi on a weekly basis. The money is shared by the end of a circle which is usually 10 months. Woman and all contributors are taken through a lot of education and orientations about how to start, and manage a business, money, business promotion and financial discipline. This intervention puts money in the hands of women (WIDO Officer, IDI, July 2023).

Lois's explanation and direct use of "we empower community members to ensure that women have access to..." indicates WiLDAF's strong understanding of the how underlying cultural factors can write women off. While WiLDAF is keen to give women a strong representation in leadership, they acknowledge that community leaders are gate keepers who influence members' choices and societal norms. LeRoux-Rutledge (2020) showed that community members use traditional gender stories to support women's equality and empowerment; therefore, involving community members is effective in gaining acceptance while enhancing women's agency. Additionally community members' participation, or lack thereof, affects how women put empowerment knowledge into practice (Baily, 2011).

While the Gender Centre and WiLDAF focused on soft skills, WIDO assisted women in developing a strong habit of savings which helped some women to start small businesses enabling them to be self reliant. Research in Ghana has shown that VSLA actually improve the confidence of women in the home as their agency and ability to contribute in decision making increases. Again, the credit worthiness women gain through VSLA gives them access to credit and financial facilities which they would have hitherto suffered to access (Amaning & Sarfo-Mensah, 2019; Boachie & Adu-Darko, 2022).

Women's improved financial independence promotes healthy relationships since they can offer loans to their husbands, support the family's economic needs and business, as well as contribute to improved nutritional value of food in their house (Abdulai et al., 2022, Bannor et al., 2020).

5.5.3 Advocacy, Lobbying and Collaborations

All NGO staff acknowledged that they advocate for change in GBV laws, policies and programs at the local, national and international front. "We actively engaged government to advocate for the DVA, the DV Fund, and the Affirmative Action Bill. We collaborate with various networks and coalitions to ensure that our voices are heard in shaping effective policies. At international forums, we draw attention to our pressing issues, providing valuable insights to international agencies for their discussions with the government" (Gender Centre Officer 1, IDI, July 2023).

They also indicated that they collaborate with other NGOs that share a common mission or shared values to implement particular programs or apply for funding together. Collaboration with other organizations made them stronger together due to the decreasing levels of aid since Ghana became a lower middle income country in 2010 (Arhin et al., 2018). However, an NGO staff open up to me that there does exist some competition and rivalry between NGOs. She explained that they usually saw themselves as competitors due to funding limited opportunities. She added, nonetheless, this situation does not affect the efficiency of their collaboration when in terms of victim referral and information gathering.

All NGO staff confirmed that working with government agencies at local levels was easier than with those at the top of the hierarchy such as the regional offices and headquarters. As such, NGOs like WiLDAF and Gender Centre constantly organized capacity building trainings for state agencies such as DSW, DOVVSU and CHRAJ to build close connections and connect volunteers who work daily on their projects with state agencies at the local levels and district levels.

Ghana's Affirmation Action 2024 (Gender Equity Bill) which remained under review consideration starting from 2011 was passed by Ghana's parliament on 30th July 2024 and is still awaiting presidential approval (Citi News, July 2024; Parliament of Ghana, 2024). While this is an outcome of the collective hard work of NGOs and government, years of NGO advocacy have remained instrumental in the passage of the bill. The delay

in the passage of the bill is not in keeping with international resolutions and treaties ratified by government to uphold and promote gender equality for women. Similarly, the Anti-Witchcraft Bill passed by Ghana's parliament in July 2023 was meant to criminalize witchcraft accusations and witch hunting by so-called 'witch doctors', but was never passed into a law due to the President's rejection of the bill. Such attitudes cast doubts about the effectiveness of additional laws as this thesis has shown clearly that most laws do not achieve the intended motive for their enactment. This is not on NGOs, who continue to advocate and lobby government:

We've done a lot of advocacies around the Domestic Violence Act. We've done the 'court watch' where we monitored how these laws are being applied and the lapses within implementation. You know advocacy takes a quite a long time to see the results and for that I would say we've made much noise, but we've not really seen the end goal. (Gabby, WiLDAF IDI, July 2023).

NGOs advocate for change through diverse ways including closed door meetings, radio engagements and public engagements. WiLDAF and the Gender Centre Officials explained that they worked closely with the MoGSCP to find solutions to pertinent issues. Sometimes, duty bearers tend to lose focus on the main issues perpetuating and promoting GBV, hence reminders go a long way in keeping government and its agencies focused on these key issues.

5.6 Challenges and Implementation Gaps.

Despite the progress made in addressing GBV, numerous obstacles affect effective implementation in Ghana. This section focused on the multifaceted challenges that government agencies face in addressing GBV, exploring the interplay of social, legal, and institutional factors. Evidence revealed that financial issues, lack of shelter, inadequate logistics, political or societal interference, lack of professionalism among state agencies. Illiteracy and ignorance are all barriers or challenges impeding NGOs and government agencies ability to address GBV in Ghana.

5.6.1 Financial Challenges

This section discusses the economic implications of GBV, emphasizing how the costs of healthcare, legal processes, and social services can strain public finances and discourage victims from pursuing their case further. Addressing GBV requires substantial financial resources, posing significant challenges for governments, NGOs, victims and their families (Nzinga et al., 2021; Asongu et al., 2018; Dorkenoo, 1999; Tordrup et al. 2022). A Participant indicated their organizations experience financial challenges, highlighting the critical need for adequate funding in prevention, protection, and provision of support services (WIDO Officer, IDI, July 2023). At the institutional level, both NGO and government staff expressed that funding is needed for the day to day management of their organization. Research shows that at least 70% of NGOs in Ghana's funding come from foreign grants and aid (Arhin et al. 2015). Due to shifting donor funding priorities and inconsistent support, there is considerable uncertainty regarding the availability of funds. This uncertainty prevents them from strategically and effectively implementing their programs and activities on time. The unreliable donor support is evident in the withdrawal and reduced funding for governments and NGOs (Arhin et al. 2018). NGOs indicated that it has become difficult for them to run their intended programs effective due to lack of funds. They also indicated most of their programs are capital intensive since it involved training people, transporting people which required logistics, following up on cases, motivating focal members, organizing events which required paying for accommodation for individuals if they needed to travel to other cities (Gender Centre Officer 4, IDI, July 2024) . Additionally, most NGO programs that have proven effective are shortened due to funding, raising issues of insustainability in cases where communities are unable to fund and continue the program due to lack of funding.

As noted above, the DV fund is expected to provide for victims' medical upkeep, food and shelter. However, the DV fund does not work as planned. The DV fund was described as not functioning and underfunded by government, hence victims have no option other than to pay for their medical fees of 200 and 300 cedis (approximately US\$ 13 - 19) before an initial assessment of medical assessment is done by a doctor (Gender Centre Official 3, IDI, July 2023). NGOs often helped some victims to pay for their medical examination.

NGOs collaborate with other NGOs and state agencies, as well as lobby government. They explained that the relationship has been smooth and easy especially at the local levels. They resorted to depending on people who could easily connect them to those in the higher offices to get the work done. While collaborating with government agencies, NGOs usually provided state agencies with a reliable means of transport, money for lunch and paid their own operational expenses which brought a lot of burden on them (personal communications, the Gender centre and WIDO, July 2023). While none of the NGOs saw their funding to state institutions and personnel as problematic, the situation highlights the deplorable state of government institutions who are responsible for combatting GBV in the first place. This relationship may lead to corruption in government when not properly documented since state actors may misappropriate funds from NGOs while also taking money from the state for the same reasons.

Unfortunately, government agencies expressed that government has not set aside money to cover the medical fee of victims who require a medical report from a physician before they are attended to by DOVVSU especially it is a physical or sexual assault. They lamented that sometimes, they are left with no option than to pay for the victims or assist the victim to find a way to pay for it. It appears that most government agencies do not have the needed resources to carry out their mandate. It was further revealed by a DSW staff that delays and limited funds impacted the quality of programs such that sometimes, their superiors forced them to falsify unrealized outcomes to meet regional and national expectations .

... we write quarterly and annual reports to the Regional Coordinating Council on the progress of our work, but we have no option than to 'cook'¹⁸ some for them because most of our activities and programmes are unable to be done as planned due to funds, but the assembly expect that we have at least some good reports. (DSW Officer 2, IDI, January 2024)

¹⁸ To fabricate a report/ story

The DSW officer's revelation show that reports are made for no work done due to inadequate funds which may not give policy evaluators the opportunity to understand the real impact of programs. Such attitudes can reinforce the culture of unseriousness and lack of diligence in addressing GBV which this studies has found as a concern in Ghana.

5.6.2 Lack of Shelter

All participants raised that shelters for abused victims, especially women and children, were lacking. Victims need to be accommodated for a while during investigation and prosecution. Going back to their families or where they were abused may discourage them from even reporting similar cases in the future.

Through our sensitization, we realized these two girls were being ill-treated and raped on a daily basis by their guardian's son. We reported the case to the police, but investigations could not lead to prosecution because there was no shelter to keep these abused girls and these girls were staying with their abuser's parents. At the end of the day, you can't have my son arrested and still continue staying in my house for me to take care of you; therefore, it became a family issue (Gender Center Officer 3, IDI, July 2023).

The DVA guarantees provision of shelter for victims and affected families however, according to the Ghana Statistical Service (2016), there are very few safe shelters for women and children escaping violence. This shortage forces many survivors to remain in unsafe environments due to a lack of alternative accommodation. A participant mentioned that there is only one state-run residential facility for abused women in Ghana which is often full and is situated in Accra making it inaccessible to people living far from the Accra. Orphanage residential homes or privately managed shelters such as the Ark Foundation, are used to accommodate victims, which can be located far away. This distance can discourage both law enforcement officers and victims and put financial strain on these NGOs. Strict enforcement of laws can be limited because of the absence of shelter for physical and sexual victims who need protection. Perpetrators can negotiate to provide shelter to their victims to avoid punishment. State agencies depend on NGOs to offer

shelter, counseling, and rehabilitation services to victims (Dowuona-Hammond & Hammond, 2022). Lack of knowledge about GBV, the support systems available and channels for seeking help can impact the efficiency of programs regardless of money that gets invested in shelter. Establishing a friendly relationship between schools, counsellors state agencies and the citizenry can improve visibility of GBV issues and also highlight the reporting channels available to victims. Other family members and community members can be instrumental in keeping victims safe, however, some education and engagement are needed.

5.6.3 Inadequate Logistics for Work

Data gathered in this study shows that inadequate logistics pose major challenges to NGOs and government agencies, especially in addressing GBV. There is a lack of essential logistics such as vehicles, computers, buildings (counseling rooms), and equipment needed for these organizations to operate effectively.

We need computers for accurate case documentation. We also need vehicles to transport officers to crime scenes and support investigations, but we have very few which are not also working (DOVVSU Officer 2, IDI, January 2024).

Again, sometimes when DOVVSU is called to investigate a case, the Police says we don't have fuel, our vehicles are all under maintenance bla bla bla. For Social welfare officers, we don't even have the vehicles to go to communities and when we request from the assembly, sometimes they give us swiftly, but it becomes difficult when we have to compete with other department which are considered income generating agencies of the assembly (DSW Official 1, IDI, January 2024).

You can go to some communities, and you realize that they don't even have the police station, no social welfare office, no legal aid, no CHRAJ. Among those who have these agencies, you go to these offices and you ask yourself to what extent can these state agencies follow up on cases

and settle issues because they lack a lot of things (Lois, WiLDAF Ghana, IDI, July 2023).

Mensah et al. (2020) highlight that many rural areas lack the necessary infrastructure for effective response and support services. This limits the ability of law enforcement and support agencies to reach and assist survivors in remote communities. Participants indicated that government has shown a limited commitment in providing the basic infrastructure and conditions needed for state agencies to function hence reinforcing lawlessness and corruption.

5.6.4 Unlawful Alternative Dispute Resolution (ADR) or Interference?

It was also revealed that state agencies sometimes compromise laws through the use of ADR with the intention to save space in detentions, limit pressure on amenities and reduce the cost burden. While the DVA(24)¹⁹ permits the use of ADR, a court is required to facilitate such reconciliation and mediation. The Act outlines the conditions where ADR may be utilized, which include when: violence is not severe and does not warrant a prison sentence exceeding two years, the victim is willing to resolve the case outside of court, and the court believes that peaceful resolution through ADR is feasible. However, a senior police officer indicated that Police ADR has been abused in Ghana for several unwarranted reasons as this:

After an arrest of suspects, the law insists that the suspect be arraigned before court within 48 hours or he/she may be granted a bill. What happens is that, with the present court system and structures, it is almost impossible to get a court appointment in 2 days in most places due to case load and judicial delays so the accused may end up in the community or same house with the victim or stay longer in “cells”²⁰. What happens is that traditional leaders or family of both parties try seeking an out of court settlement. Due to so much pressure already in detentions, the CID must provide all the basic necessities from food, water to medicals needs of the suspect if they

¹⁹ See Domestic Violence Act 2007, s 24 (1) (a) & (b).

²⁰ An informal name for police custody.

are in need [from their personal finance] so where do you expect them to get that money? (DOVVSU Officer 1, IDI, July 2023)

The DVA permits the use of ADR under the supervision of a court; however, the responses from the DOVVSU officer suggest that the police may grant ADR without going to court and their considerations are based on finance or space. ADR has been used within the extended family system to resolve conflicts in Ghana since the pre-colonial era which normalizes the practice of elders settling issues instead of having a court hearing (Brobbe, 2008). However, ADR has been misused in the context of GBV (Morhe and Morhe, 2013) in part due to the influence of HM. This leads to outcomes that favor male power and authority, rather than justice for victims. Elders in charge of ADR processes often embody HM, and their decisions reflect patriarchal values that perpetuate violence and inequality; potentially marginalizing female victims of GBV. Hegemonic masculinity is also evident in the pressure exerted on women to conform to traditional roles, forgive their abusers, and go back to unhealthy situations. Most ADRs based on HM prioritize the sustaining family structure and male authority over safeguarding victim's rights and independence. Some offenders may not be remorseful but merely agree to ADR to avoid court prosecution. Consequently, the misuse of ADR can result in condoning GBV. It is argued that the use of mediation in DV cases diminishes the seriousness of the offense (Dixon, 2008) which promotes a culture of silence victims.

Participants from state agencies also expressed concerns about how political, religious, societal and family interference affected prosecution and punishment.

Another major challenge is interference from those in authority especially from MPs, DCE, senior officers in the assembly, pastors, Imam, opinion leaders and chiefs. They will be pleading with you that they want to take it home. This one is a house matter that they can settle. Meanwhile, the law must take its course. We are all working in the district so if you are not dynamic and you don't know how to go about

things, then you also find yourself in trouble (DSW Officer, IDI, January 2024).

The DSW officer's statement reflects fear and threats of losing their job or being seen as a bad person due to their non compliance to illegal ADR. However upholding laws should not threaten ones job and security. This points to fallen standards which could affect influence of appointment, promotion and appraisal of officers.

Families also prevented victims from reporting abuse or advised them to discontinue cases.

Sometimes, the family threatens the victim with divorce, and they rush to withdraw or discontinue the case (DOVVSU Officer, IDI, January 2024).

The challenge is also with the unwillingness on the part of families to allow victims to report issues to NGOs because family members can decide that this is their family issue, they won't let it go to the police (An Official of the Gender Centre, IDI, July 2023).

This shows that despite ongoing sensitization, many families still do not view GBV as a serious human right abuse but as a private issue hence they may be hesitant in reporting abuse which can normalize GBV and spread its negative impacts.

5.6.5 Lack of Professional Standards

The findings revealed shortfalls in professional standards among some staff of government agencies. This was confirmed by all participants who explained that some duty bearers lack knowledge and training on the laws, standards, and guidelines to deal with or resolve GBV related issues. Also, some unprofessional behaviors (impatience, bad attitude, poor work ethics) of officers in charge of addressing GBV deter victims from reporting.

Sometimes colleagues [referring to DOVVSU and DSW] are impatient toward victims. They can see that the victim's situation is making them

act abnormal, but they will be shouting at them and blaming them for not reporting earlier. An officer in trying to investigate the root cause of a case, they can make the victim feel bad about themselves by asking questions like how can he just get up and be beating you? You must have done something wrong (DSW officer 2, IDI January 2024).

The deep rooted masculine superiority could inform how state agencies and NGOs respond to GBV concerns. A police officer or a judge or a counsellor who abuse their children or wife would not see it as a problem making mockery of victim's situation and discouraging legal remedies. The background and traits of the officers may impact the investigation of GBV hence attitudinal change is key in reforming state institutions and actors. Again, "there are no clear standards and uniform guidelines for monitoring and handling GBV issues. Therefore, the officers rely on their superiors for instructions on how to handle such matters" (DOVVSU Officer 2, IDI, January 2024).

5.6.6 Illiteracy and Ignorance

Last but not the least, ignorance among actors and the public about the laws governing GBV is another challenge. Most people lack understanding of GBV and laws governing enforcement. A top official at the Gender Centre shared how she was invited to monitor a defilement case and she realized the Police Prosecutor had left the main legal premises of the case:

I will praise the DOVVSU officers for their professionalism and commitment to duty because they went above and beyond. However, I realized he missed the criminal aspect of the case. In court, we realized the charge sheets did not meet what the law says so the judge rejected the charge sheet and said that the Domestic Violence Act says ABCD, but you have written CDFG go back and change the charge sheet and what you say the accused has done is not located under this act but under this one (Gender Center Official 3, IDI, July 2023).

The respondent explained that the case involved defilement of the a girl; however, the police prosecutor focused on maintenance and compensation instead of the sexual offence. The Criminal Offences Act 1960 [Act 29] stipulates that whoever defiles a child may be subjected to a prison sentence of at least 7 years and a maximum of 25 years. Having laws alone are not enough, ignorance on the part of law enforcers could undermine the full implementation of laws such as the DVA, making efforts to combat GBV ineffective. Researchers have proposed that instead of relying on police officers, prosecutors should be trained lawyers. While this proposal could significantly enhance victims' legal knowledge and streamline the prosecution process, it does not fully address the root causes such as ignorance and the hegemonic masculine attitude of law enforcers. Increased education on reporting, prosecution, and legal education for police officers who may handle prosecutions is essential. The government should be willing to invest in providing its agencies with comprehensive legal expertise.

5.7 What Works: Progress in Addressing GBV.

Despite the challenges faced by the government and NGOs in addressing GBV in Ghana, numerous successes by government agencies included the LEAP program, training of staff and officers. NGO successes included strong advocacy, education, awareness creation and sensitization, formation of clubs and COMBAT as well as capacity building and women empowerment programmes and community participation. All NGO participants indicated that they conduct a baseline survey before their intervention, and they also do an end-of-project evaluation to know the impact of such interventions. Government agencies were of the view that the impact of their initiatives was measured by the satisfaction of the victims, the ability to meet expected outcomes or expectations of their leaders. In addition, a few participants indicated that the outcome of the interventions speak for itself citing some instances of success recorded.

5.7.1 Livelihood Empowerment Against Poverty (LEAP) Program

Livelihood Empowerment Against Poverty is a government programme which was implemented in 2008 and targeted poor households with aged, orphaned and vulnerable children and also people with severe disabilities who are unable to work. This programme offers cash, depending on the household size, number of persons with disabilities in a household on a quarterly basis. Data gathered revealed this programme was successful.

The LEAP has been a proactive and efficient measure adopted by the government to economically empower women and to tackle poverty (DSW Officer 2, IDI, January 2024).

While the focus of the funds is not on GBV victims, Barrington et al. (2021) found that cash transfers to struggling families could significantly reduce the risk of poverty, which contributes to physical and sexual abuse and could discourage seeking help (Debrah, 2013; Adjei et al., 2020; Okoree et al., 2020). Although bureaucratic delays and questions of sustainability has been found with the program (Karakara & Ortsin 2022), research has confirmed its efficiency in eradicating poverty and providing some economic stability for women to escape GBV (Oduro et al., 2020; Alatinga et al., 2020) and support their children's needs, such as education (Mabe et al., 2022). I argue that LEAP provides women with minimum support to maintain some economic freedom. Economic empowerment of women does not only benefit them, but their children and partner if they are in a committed and cherished relationship or union.

5.7.2 Knowledge and Awareness Creation

14 out of the 15 participants reported an increased awareness of GBV due to increasing trainings and sensitizations held by both government agencies and NGOs in communities. DSW, GES and DOVVSU staff applauded NGOs for their work in this area among state agencies and the general public. All government agencies admitted that awareness raising is crucial in reducing GBV and is supposed to take place routinely, but money was an issue. Studies show that there is increased awareness of GBV in Ghana and state agencies can be credited for their contribution.

5.7.3 Capacity Building and Women Empowerment

Capacity building and women empowerment programs have also yielded positive results. Programs that provide vocational training (Hartl, 2009), microfinance (Cheston & Kuhn, 2002; Addai, 2017; Salia et al., 2018) and educational opportunities for women have empowered them economically and socially (Duflo, 2012). Research show that women with access to these programs are less likely to experience GBV and more likely to participate in community decision-making processes (Ameyaw et al., 2017; Amugsi et al.,

2016; Boateng et al., 2014). An official from WiLDAF confirmed that the capacity building and empowerment program are proactive:

We can also attest to the fact that some of the people we have trained as legal literacy volunteers have used this prior knowledge of the law as stepping stone to become court arbitrators at the Family Tribunal level. They [the legal literacy volunteers] have taken the opportunity to develop their personal goals and some have also taken the opportunity to even become a part of the judicial service of the traditional system council whenever they needed some form of a legal advice. The Chiefs recognized that these people have adequate knowledge, so they have absorbed them into their traditional court system (Gabby, WiLDAF, IDI, July 2023).

5.7.4 Increase in Community Participation

A key component of most NGO GBV interventions is community engagement. Community members are considered experts in their own culture and interventions that do not take their needs, expertise and cultural factors into consideration tend to address only the symptoms of a problem, rather than the root causes (Jeannotte & Duxbury, 2012; Jeannotte & Duxbury, 2015). Engaging community leaders, men, and boys in the fight against GBV has fostered a supportive environment for change. Community involvement ensures that GBV prevention and response efforts are culturally relevant and sustainable

Community based activities have a high rate of transforming social norms, changing attitudes and building the agency of victims (Riger, 2001, Trickett, 2009; Glass et al. 2018; 2019). Community mobilization and education initiatives have been successful in altering community norms and reducing GBV rates (Jewkes et al., 2008). Awareness creation at the community level can influence policies and cultural narratives. Broad societal changes in attitudes towards gender and violence often follow sustained public awareness which can create a sense of ownership of interventions for community members when the program objectives resonate well with them (Flood & Pease, 2009). A women's right activist and GES staff explained that:

More young girls got married to old men before they were fully matured or completed their basic education like class 5 or Class 6. By God's grace, because of the good work of these NGOs in our communities, the cases have reduced drastically now. Our girls are either in skills training learning a trade or colleges studying. I think gradually we are getting there (SHEP Coordinator, GES and Human Right Advocate, IDI, September 2023).

In sum, addressing GBV in Ghana involves challenges and successes. As shown above, these challenges include financial constraints, lack of shelter, inadequate logistics, interference, issues with law enforcement, unprofessionalism, illiteracy, and ignorance. Many of these challenges can be addressed through adequate funding, by prioritizing GBV prevention especially by government institutions, and empowering state institutions to carry out their duty without fear. Underfunding leads to gaps in critical services, such as legal aid, healthcare, and psychosocial support (Kaburi & Kaburi, 2023; Ofori-Atta, et al., 2014).

Inadequate logistics, such as insufficient counselling rooms, offices, vehicles and communication tools also impede GBV interventions. Mensah et al. (2020) highlight that many rural areas lack the necessary infrastructure for effective response and support services which limits law enforcement and support agencies in these remote areas.

Political and societal interference poses additional challenges, including unlawful and irresponsible ADR, which tend to decriminalize GBV. Political influence can sometimes result in unfair handling of GBV cases, with perpetrators enjoying protection due to their connections (Ampofo, 2019). Societal norms and stigma associated with GBV further discourage survivors from reporting incidents or seeking help, perpetuating a culture of silence and impunity. Law enforcement issues and unresolved cases are significant obstacles. The Ghana Police Service (2018) acknowledges that many GBV cases remain unresolved due to inadequate investigative capacity and resources. This lack of resolution erodes public trust in the justice system and discourages survivors from coming forward (Cantalupo et al., 2006; Anyemedu, 2016). Furthermore, unprofessionalism among the law enforcers exacerbates the problem. Reports of insensitivity and mishandling of cases by police officers deter survivors from seeking

justice (Dery, 2019; Kaburi, & Kaburi, 2023). Despite the significant challenges faced by the government and NGOs in addressing GBV, several notable successes have been achieved. These successes highlight the effectiveness of various initiatives and programs aimed at combating GBV and supporting survivors.

5.8 Effective Strategies to Address the Impacts of Hegemonic Masculinity at the Individual, Household, Community, and Societal Levels In Ghana.

Addressing GBV in Ghana requires a holistic and multifaceted approach. This study has drawn on a socio-ecological approach to exploring and tackling GBV and has required us to examine the complex social relationships and ecosystems into which a person is born and develops. These relationships and systems have vital impacts on acceptable notions of masculinity. In turn, HM has far-reaching effects on individuals, their family and community and nations at large. At the individual level, it influences how men perceive themselves and act, often promoting aggression and suppressing emotional expression. Within families, it perpetuates gender inequalities, leading to imbalanced power dynamics and the marginalization of women. At the community level, HM normalizes and underreports gender-based violence and discrimination. At the societal level, it hinders efforts toward social justice and gender equality, perpetuating structural disparities. Some effective measures proposed by key informants to address predominant notions of masculinity in Ghana and assist in tackling GBV are discussed below.

5.8.1 Individual Level

Socialization and Sensitization

Staff of NGO and government agencies indicated that redefining masculinity through early socialization is very essential. They added that parents and teachers must teach boys how to express emotions healthily, value equality, and reject violence as a means of asserting power can undermine the foundations of HM. Additionally, an officer of the Gender Centre added that :

From a very young age, children must be trained to understand that cooking, washing or sweeping are not a duty of only girls or women, so they are not expected to beat their wives in future because of such expectations (Gender Centre Official 1, IDI, January 2024) .

Educating children about the harmful effects of HM can promote critical self-reflection and change. Providing comprehensive education on gender equality and non-violence within schools and communities. Educational programs that challenge traditional masculine roles and promote alternative, non-violent forms of masculinity reduces aggressive behaviors (Connell & Messerschmidt, 2005).

5.8.2 Household Level

Healthy Family and Interpersonal Relationships

All Participants believed that children are a reflection and a product of the homes they come from or where they were brought up in suggesting that families- including the family unit- plays an important role in modeling the behavior of their children. Hence parents should endeavour to portray positive attitudes towards each other. Additionally, establishing and strengthening family bonds and improving communication within households and among people can reduce GBV incidents (Heise, 1998).

Families must be intentional about the way they relate to each other and act during distress, the kids are watching and learning. If the father always beat the wife or if the wife always insult her husband, the kids are watching they may see it as normal to beat your wife or insult your husband so they will grow with that and start families with similar habits (GES Officer 2, IDI, January 2024)

The family has a significant role of training its members acceptable ways of behaving and reacting to situations. Children are influenced by their experience from childhood hence the home has a power to steer them in the right step.

5.8.3 Community Level

Community Mobilization and, Education and Engagement of Men and Boys.

All Participants indicated that educating and involving men in programs that prevent or address GBV has the potential to weaken any patriarchal and oppressive mindset that promotes GBV or retards gender equality and limits women and children from fully enjoying their fundamental human rights.

We empower women to fight for themselves and work to elevate themselves against all odds however bringing men to support and advocate fastens the process and make the work easier. Men hold a lot of influence in society so until we get women to the level where they are firm enough to stand alone, we are working with men help ease the burden since men are part of the problem and should help solve it (Gabby, WiLDAF Ghana, IDI, July 2023)

Involving men in GBV prevention positions them to serve as agents of change, socializing their children and other community members to appreciate and practice positive values and norms. This suggests that the participation of men can alter community views and how other men feel about preventing against GBV because men and boys are more inclined to support anti-GBV programs when approached by allies (Scheel et al., 2002). Engaging men should not be a substitute in the investment and development of women and girls, but both should occur concurrently. Initiatives like COMBAT, MC and the legal literacy volunteers which involve men in advocacy against GBV, demonstrate the effectiveness of engaging men as allies in gender equality (Barker et al., 2011).

While it is often the case that girls and women's empowerment are the focus of most GBV program, boys are also at risk of experiencing GBV. One participant suggested that prioritizing boys is important and prudent.

It is crucial to address the issue of gender equality, as abuse and gender-based discrimination can impact both males and females. While females are often the more vulnerable group, we must also consider the education and rights of boys. True equality means ensuring that both genders have access to the same opportunities without favoritism. By considering both perspectives, we can garner the support necessary to bring about genuine change in policies, interventions, and social values. (GES Officer, IDI, July 2023).

Initiatives that specifically target men and boys, encourage them to become allies in the fight against GBV and advocates for gender equality. Since boys would become men someday, it is important to educate and also protect them from male oppression as well as

situations that may breed hatred in them against girls and women. Such training must begin in their formative years so that they may grow with positive attitudes.

5.8.4 Societal Level

Reviewing Cultural Practices and Stricter Law Enforcement

Participants emphasized the importance of eradicating cultural practices that perpetuate male dominance, shielding offenders from prosecution and suppressing women, such as patriarchal gender roles that designate women as solely responsible for domestic and unpaid care work.

If the government puts its foot down and says this traditional practice, we must put an end to it. Do you think that traditional chiefs can say no? There must be national engagements and campaigns as well as media engagements that challenge traditional gender roles and promote positive forms of masculinity. All I'm saying is that if culture climbs from the bottom, it must change the same way. The non serious approach to laws has been carried on to GBV crimes so the harsher the punishment, the lesser they will occur.

Throughout this study, I observed that staff of NGOs and government agencies have a good will to duty; however, the existing challenges highlighted in the study limits their success. Part of the problem emanates from cultural and traditional precedence that dehumanizes women, legitimises HM and promotes gender based violence. NGOs encourage the state to engage communities in an open dialogue on the adverse impact of harmful cultural practices and the need to address them. Additionally, the state must take a tougher approach to laws regarding GBV, treating it as a national security concern that needs more attention and strict compliance (Flood, 2011). Ghana has a number of good laws on paper but they must be applied. Violators of the laws must be brought to book regardless of their status and influence. This could send down a strong signal to potential offenders about the importance of the women and children.

Prioritizing Funding and Logistics

Timely and Adequate provision of financial resources was identified by all participants as a vital measure that government should implement to curb GBV. As noted

by respondents, addressing GBV requires substantial financial resources to be invested by the governments and NGOs in Ghana.

If we could get funding to go to more communities and more regions it would help. Perhaps we could increase the duration of some of the projects, if not all of them. Due to limited funding, some of our programs are very short so we are not really able to see the impact of these projects. For instance, we had a project in the central region for about 6 to 7 months. It was difficult to measure the impact of the project, so if we could, if we have a way of ensuring that all the projects last for at least three years, I think that will really help (Gender Centre Official, IDI, July 2023)

Adequate and timely funding of the DV fund, DSW, DOVVSU and GES would be helpful in assisting victims in accessing medical, psychological, and counselling services as well as shelter. Additionally, those who may need temporary shelter where they do not have any family to support them. An active and well-resourced DV fund could improve to reduce the challenges state agencies addressing GBV face with logistics at the community, regional and national levels. Extending funding to include NGOs could help them to improve and expand their services.

5.9 Conclusion

The study focused on interventions by government and NGOs in addressing GBV in Ghana. It highlights successes and challenges, such as financial obstacles faced by government agencies and NGOs. Major barriers to enforcing GBV interventions include patriarchal norms, interferences, and lack of political commitment and financial resources. The study argues that government interventions are largely ineffective in eradicating GBV due to the deeply entrenched patriarchal values and government's lack of priority and commitments to GBV. Although NGO interventions have proven effective, adequate and alternative funding and government support is needed. The study emphasizes the importance of timely government funding, stricter enforcement of GBV laws, and comprehensive strategies challenging societal norms.

CHAPTER 6 CONCLUSIONS AND RECOMMENDATIONS

6.1 Conclusions

This study utilized a semi-structured interview to examine the impact of GBV interventions in Ghana. The main objective of the study was to examine the effectiveness of government and NGO interventions in preventing, reducing, and addressing GBV concerns in Ghana. The study was guided by the following sub-questions:

1. What GBV policies and programs have been implemented by the Ghanaian government and NGOs?
2. What effective strategies can and should be undertaken to address and prevent GBV and the impacts of hegemonic masculinity at the individual, household, community, and societal levels in Ghana?

Hegemonic masculinity and the socio-ecological theories guided this study and showed that GBV is informed by highly entrenched patriarchal values of society that are passed on and rooted in an individual by family, and community and reinforced by government, in part due to the inadequacies of comprehensive measures to deal with GBV as a serious human right and public safety concern against women and children.

My findings indicate that despite the existence of numerous laws, policies, and institutions to address GBV in Ghana, government policies are largely ineffective in safeguarding the rights of survivors and this is predominately as a result of existing patriarchal values, the unseriousness/ insensitive approach of government toward GBV and the lack of commitment and investment in GBV prevention. NGOs make many differences despite support from the government but are constrained due to their over-dependence on donor funds. Most NGO interventions are community-based and effectively deal with entrenched socio-cultural practices and attitudes that reinforce GBV by engaging men.

Despite the presence of laws, institutions, and policies aimed at addressing GBV government policies are largely ineffective in safeguarding the rights of survivors. While these regulations signify an essential milestone in Ghana, the deeply entrenched patriarchal mindset within families, government, and institutional settings poses a significant challenge for organizations advocating for women's rights and seeking justice for survivors. Additionally, inadequate governmental planning, limited financial investment,

absence of structures and systems to facilitate reporting, lack of coverage for mandatory medical examination fees, and weak enforcement of the law, compounded by a poorly trained, inadequately supervised, underfunded, and mismanaged system heavily reliant on foreign donations, have all further contributed to the inefficacy of government policies and programs. Although NGO interventions have been proven effective, they require adequate funding.

6.2 Summary of Results

The first and overarching question this study sought to answer was “How effective and appropriate are the policies, strategies, and programs implemented by the Ghanaian government and NGOs?”

The study explored the successes and challenges of governmental and non-governmental organizations' programs in addressing GBV. The findings revealed that the Livelihood Empowerment Against Poverty (LEAP) program has been a significantly successful government policy in addressing GBV in Ghana due to its ability to decrease women's risk of GBV by reducing poverty among them. However, the program is heavily dependent on foreign aid which raises some questions about its sustainability and government's agency. Arrest and prosecution of GBV perpetrators in Ghana have been less effective due to political, family, and societal interferences which are often justified through legally unrecognized ADR. The findings highlight that the government's general approach and response to GBV is appalling and retroactive and lacks commitment to protect and prevent society's vulnerable groups from GBV.

In addition, the study revealed that NGO interventions captured under the following themes: training of staff and officers; advocacy, education, and awareness creation; formations of Clubs and COMBATS; Community participation; capacity building and women empowerment were effective and instrumental in addressing GBV.

Despite such successes, this study found that financial challenges, which result from delays and inadequate financial provisions, hinder government and NGOs. NGOs are heavily dependent on unpredictable donor funds, while government funds are not disbursed on time and are inadequate to fulfill the planned activities of state agencies. Financial challenges, especially those related to medical fees and police extortion, deter people's ability to seek help. It was also discovered that some district assemblies undervalue the

work of DSW, viewing them as non-commercial and less beneficial to the assembly financially. Lack of logistics in the form of vehicles, stationery, and computers was reported as a concern affecting implementation. Limited shelter for victims makes it difficult to protect and support victims from further abuse, and it depletes the gains made as survivors have no temporary accommodation and resort to residing with their abuser after reporting or during investigations. This situation makes it easy for interference from family and friends. Political, religious and traditional leaders may also interfere with the investigation and call for illegal ADR which may not be approved by a competent court.

The study aimed to discover what policies and programs have been implemented by the Ghanaian government and NGOs? It was found that the government's response to GBV has included policy frameworks, programs, and the establishment of institutions. Through document review and qualitative in-depth interviews, it was discovered that several laws and policy frameworks were implemented to combat gender-based violence, including the 1992 Constitution of the Republic of Ghana, the Domestic Violence Act (Act 732), the Ministry of Gender, Children and Social Protection (MoGCSP) the Domestic Violence Secretariat (DVS), the Domestic Violence and Victims Support Unit (DOVVSU), the ONE-STOP Centre for Victims of Domestic Violence, Specialized Courts, the Safe School Policy (SSP), the Back to School Program, Professional Learning Communities (PLC) and a ban on Corporal Punishment in Schools.

The study found that NGOs advocate and lobby the government for new policies and changes in existing GBV laws and policies. and provide social services to underserved and rural areas NGOs adopt different strategies for empowering women. For instance, the Gender Centre and WiLDAF Ghana assist women to become independent and have control and informed choices. Both organizations have trained women and girls who became leaders in their communities. Likewise, WIDO has assisted women in building their financial dependence through the Village Savings and Loans program.

NGOs have involved community members to approach GBV through Community-Based Action Teams (COMBAT) and clubs. The involvement of men in COMBAT helps in promoting an intergenerational gendered approach to ending GBV and challenging hegemonic masculine attitudes in communities (Casey et al. 2018). WiLDAF and The Gender Centre have clubs that are effective tools for preparing youth to become agents of

change. WIDO promotes women's economic empowerment by assisting them in developing a strong habit of saving, helping some women start small businesses, and enabling them to be self-reliant and self-supported. Research in Ghana has shown that VSLA actually improves the confidence of women in the home as their agency and ability to contribute to decision-making increase.

The study also explored what effective strategies can and should be undertaken to address and prevent GBV and the impacts of hegemonic masculinity in Ghana? At the individual level, staff of NGOs and government agencies indicated that masculinity should be redefined through early socialization and sensitization. Educational programs that challenge traditional masculine roles and promote alternative, non-violent forms of masculinity and reduce aggressive behaviors should be promoted (Connell & Messerschmidt, 2005). At the household level, participants indicated that families should promote healthy family and interpersonal relationships by establishing and strengthening familial bonds and improving communication within households and among people can reduce GBV incidents (Heise, 1998). Furthermore, community mobilization, education and engagement of men and boys were recommended by participants at the community level. Participants indicated that educating and involving men in programs that prevent or address GBV has the potential to weaken any patriarchal and oppressive mindset that promotes GBV or retards gender equality and limits women and children from fully enjoying their fundamental human rights.

At the societal level, participants emphasized that reviewing and eradicating cultural practices that perpetuate male dominance, shielding offenders from prosecution and suppress women, such as patriarchal gender roles that designate women as solely responsible for domestic and unpaid care work. Additionally, the state must take a tougher approach to laws regarding GBV, treating it as a national security concern which needs more attention and strict compliance (Flood, 2011). Lastly and most importantly, government must prioritise funding for programs and plans that promote the rights and freedoms of women and children which means providing adequate and timely funding as well as empowering institutions to be independent and act without fear or favor. NGOs by virtue of their essential services should be well regulated and financially supported.

6.3 Significance and Limitations of the Study

This study contributes to the knowledge of GBV by offering a comprehensive understanding of how government and NGO policies and initiatives have tackled GBV throughout Ghana. It also serves as an update on how interventions impact the well-being of Ghanaian households. The study can help the MoGCSP, governmental agencies and NGOs enhance and expand the effective development and implementation of interventions and strategies in Ghana and beyond

A limitation was that the study was carried out virtually. Future research could benefit from on-site observation and interaction with government senior officials, as their input and attention to such research could offer them a real-time assessment of the effectiveness of their efforts.

The government of Ghana has ratified several international and regional treaties and conventions, passed national laws, and created policies and legislative bodies; it still has much work to do to show true dedication to tackling GBV in Ghana. This includes, but is not limited to, adequate and timely funding and supporting NGOs working to combat GBV and empower women. This thesis concludes with several recommendations.

6.4 Recommendations

The following recommendations are based on the findings of this thesis and a corresponding scholarly literature review. These recommendations include policy, practice and research areas that could benefit foster effective implementation of GBV interventions.

6.4.1 Implications for Policy

- Government must consider GBV as a national security issue and adopt a more proactive approach to funding its prevention accordingly, especially in rural communities. The response to Covid 19 is an example of how this can be done.
- The MoGCSP, as the primary government institution responsible for GBV, should expedite the process of finding a lasting solution to the fees charged for medical examinations of individuals who experience abuse.
- Programmes that allow young women to return to school after giving birth should be monitored and reviewed.

6.4.2 Implications for Practice

- DSW, DOVVSU, GES, and other government agencies should collaborate with Metropolitan, Municipal, and District Assemblies as well as relevant NGOs, and Community-Based Organizations to conduct awareness and advocacy initiatives geared towards promoting social change, particularly with regard to GBV in communities.
- NGOs should raise funds by partnering with private financial institutions in Ghana and in the Ghanaian diasporan population to widen their scope and focus.
- MOCSCP and affiliated agencies should arrange nationwide forums to educate and engage influential community leaders to highlight the impact of GBV on its victims and underscore the importance of forming a united front in combating it.
- MoGSCP should set up and strengthen Community Based Action Teams (COMBAT) to mitigate GBV to amplify awareness of GBV at all social levels, and implement effective measures to prevent impunity for perpetrators.
- The state should train more criminal justice professionals to improve understanding of GBV and legal professionals should be employed to serve as prosecutors in court instead of police who may not have a strong legal understanding of Ghanaian laws.

6.4.3 Implications for Further Research

- A future study should explore the status of medical fees paid by victims, the impact this financial burden poses on victims and the effectiveness of measures to rectify this situation.
- Ghana's Affirmative Action Bill, passed in July 2024 to promote the progressive increase and active participation of women in public and active life to a minimum of 30 per cent by 2030, under the requirements of the Sustainable Development Goals (SDGs) should be examined to determine the effectiveness of its implementation.

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Appendix A: Interview Guide for NGOs

This appendix contains sample questions for semi-structured interviews with people who have experience implementing or advocating for any GBV intervention and/or worked with survivors, victims, or perpetrators. Most of the questions will follow an open-ended structure. For instance, the interviewer will ask questions like "What interventions and how effective does these policies, strategies and programs implemented by the government and NGOs reduce and prevent gender-based violence in Ghana? What are the strengths and shortcomings? Since the interviews are semi-structured, the exact wording and specificity of the questions will vary from participant to participant. The order of topics is also flexible and depends on the flow and direction of each conversation.

Basic Information

- A. Do you identify as Male/Female/ Non-binary or prefer to self- identify?
- B. What is your role / current positions in your organisation?
- C. How old are you?
- D. What is your highest level of education?
- E. Have you participated in implementing any gender-based violence intervention or worked with victims, survivors, or perpetrators?
- F. Can you describe what brought you to work in the gender-based violence field?
- G. How long have you been working in this field? Stipulate in years if possible.
- H. Which regions have you been working? Urban or rural?

Question Guide for Key Informants – NGOs actors

1. How do you understand/define gender-based violence?
2. How does your organisation define GBV?
3. How common is gender-based violence?
4. Would you say GBV issues are given the needed attention in Ghana?
5. What do you see as the major factors contributing to gender-based violence?
6. What aspects of the Ghanaian culture, cultural practices and norms contribute to gender-based violence?
7. How can these be changed?
8. What official strategies are in place in your own organisation to deal with GBV within the organisation if it was an issue?
9. Which of these strategies do you think are proactive and which ones are reactive?
10. Which strategies does the organisation prioritise? and why?
11. What has been successful? Why?
12. What strategies have not been effective? Why not?
13. How do you measure the impact of strategies?
14. What do you think should be done to improve your projects?
15. How are these strategies linked to the empowerment of women?
16. How does your organisation define women's empowerment?
17. Do you think it is necessary to work with men in addressing GBV?
18. How are these strategies linked to educating and engaging men?
19. How do you lobby government or engage communities to try and promote specific objectives in achieving gender-based violence interventions in Ghana?

20. How successful has this been?
21. Describe any success your organisation has made with the implementation of gender-based violence interventions? What made it successful?
22. Describe any challenges your organisation faces with the of implementation of gender-based violence interventions.
23. What strategies has your organization put in place to address the factors you have recognized as contributing to gender-based violence?

Appendix B: Interview Guide for State Actors

Basic information

- A. Do you identify as Male/ Female/ Others?
- B. What is your role / current positions in your organisation?
- C. How old are you?
- D. What is your highest level of education?
- E. Have you participated in implementing any gender-based violence intervention or worked with victims, survivors, or perpetrators?
- F. Can you describe what brought you to work in the gender-based violence field?
- G. How long have you been working in this field? Stipulate in years if possible.
- H. Which regions of Ghana have you been working? Urban or Rural?

Question Guide for Key Informants - Government Agencies

- 1. How do you understand/define gender-based violence?
- 2. How does your organisation define GBV?
- 3. How common is gender-based violence?
- 4. Would you say GBV issues are given the needed attention in Ghana?
- 5. What do you see as the major factors contributing to gender-based violence?
- 6. What aspects of the Ghanaian culture, cultural practices and norms contribute to gender-based violence?
- 7. How can these be changed?
- 8. What official strategies are in place in your own organisation to deal with GBV within the organisation if it was an issue?
- 9. Which of these strategies do you think are proactive and which ones are reactive?
- 10. Which strategies does the organisation prioritise? and why?
- 11. What has been successful? Why?
- 12. What strategies have not been effective? Why not?
- 13. How do you measure the impact of strategies?
- 14. What do you think should be done to improve your projects?
- 15. How are these strategies linked to the empowerment of women?
- 16. How does your organisation define women's empowerment?
- 17. Do you think it is necessary to work with men in addressing GBV?
- 18. How are these strategies linked to educating and engaging men?
- 19. How do you cooperate with NGOs, CSOs, communities and other state agencies or the government to address specific gender-based violence issues in Ghana?
- 20. how successful has this been?
- 21. Describe any success your organisation has made with the of implementation of gender-based violence interventions? What made it successful?
- 22. Describe any challenges your organisation faces with the of implementation of gender-based violence interventions.
- 23. What strategies has your organization put in place to address the factors you have recognized as contributing to gender-based violence?

Appendix C: Consent Scripts

Introduction

You are most welcome to participate in this study being conducted by myself, Philemon Opoku Tontoh, a master's student at Dalhousie University studying MA International Development Studies.

This research is being conducted for an MA thesis through Dalhousie University in Canada. Although my graduate education including this research is funded by Dalhousie University, this study is independent of the Ghanaian and Canadian government. Your participation in this study is voluntary, you are not required to answer any question you feel uncomfortable about and you may withdraw from the study at any time. There is no direct benefit to participants in this study. I would like to give you detail about the purpose, nature of the interview, risks or inconveniences you might experience in participating in this research. You should discuss any questions you have about this study with me, or Dalhousie University's research ethics office.

Purpose and Outline of the Research Study

The purpose of this study is to examine whether government and NGO interventions effectively prevent, reduce, and address GBV concerns in Ghana. This study seeks to contribute to a deeper understanding of how issues of GBV have been dealt with and how policies can better work to address it. The main source of data for this project will be semi-structured (one-on-one interviews) conducted via through this video conferencing technology. You are about to participate in this study because you have experience working with GBV victims, survivors, and perpetrators. Every effort will be made to keep your identity confidential. The researcher will provide an alias for you. Only the researcher and my supervisor will know your real identity as well as your alias. Your anonymity will be preserved throughout the entire research project, including in the final report. Any parts of your interview used for publication purposes will be anonymized unless you prefer otherwise.

Lead Researcher

I, Philemon Opoku Tontoh, will be responsible for conducting interviews and handling analysis of the data collected from this study.

What you will be asked to do?

If you agree, you will be asked to participate in an interview, the length of which can be flexible, but will most likely be around 50 minutes. Your participation is voluntary, and you may withdraw at any time. During the interview, which will be conducted via, MS Teams, a video conferencing software, you will be asked questions about your experiences with working GBV cases, victims, survivors, and perpetrators and implementing GBV

interventions. These questions will ask you to recount events that may be unpleasant, or which have caused you or others discomfort. You are under no obligation to share details to which you are not personally comfortable with. You may as well withdraw from the interview at any time for any reason.

With your permission, your responses will be audio recorded, so that your comments can be maintained in a transcript for analysis. With your permission, your responses will be anonymized, and your comments will be maintained in the research reports without revealing your identity.

If you agree to it, your responses, including the possibility of anonymized large quotations from your discussion, may be used in the final write up of this study. However, your identity will remain private in the final document and quotations will only be attributed to aliases.

Possible Risks and Discomforts

There are minimal risks associated with participating in this study. It is possible that sensitive, or uncomfortable subject matter may be discussed in the interview. You are under no obligation to answer any question that you feel is too sensitive. I will make every effort to keep your identity and personal information secured and not disclosed it without your consent. Additionally, this study will be anonymized to ensure your personal data cannot or will be extremely difficult to be traced however you may choose to be identified. Kindly let me know if you prefer to be identified. Please remember that there are no right or wrong answers to the questions that are asked of you. Feel free to say what you want in response to the questions asked. You do not have to talk about anything you do not want to, you may end the interview at any time. You have up to the 31st of August 2023 to withdraw information from this study. You may also ask that the recorder be turned off at any time.

Confidentiality

Every effort will be made to keep your identity confidential. The researcher will provide an alias for you. Only the researcher and my supervisor (serving as my advisor) will know your real identity as well as your alias. Your anonymity will be preserved throughout the entire research project, including in the final report. All data will be stored on a password-protected computer/OneDrive (a safe online storage). Any remaining data, such as notebooks, will be stored in a locked case that only the researcher will have access. Audio recordings will be erased upon completion of transcription. Also note that I will use my Dalhousie University credentials for the Microsoft Teams meeting, which will ensure that the Teams meeting recordings are securely stored in Canada. During the live Teams meeting, audio and video content is routed through the United States, and therefore may be subject to monitoring without notice, under the provisions of the US Patriot Act while the meeting is in progress. After the meeting is complete, meeting recordings made by Dalhousie are stored in Canada and are inaccessible to US authorities.

After the interview, participants have till the 31st of August 2023 to request that your data be removed from the research.

Possible Benefits?

By participating in this study, you are contributing to the growth of knowledge about GBV interventions in Ghana and this can inform legislation, policy formulation and evaluation.

Permission to Quote and Record

I may wish to quote your words directly in reports and publications resulting from this interview. With regards to being quoted, please respond yes or no to each of the following statements:

Do you agree this interview be audio recorded?

Do you agree that direct quotes from this interview be used without identifying you?

Do you agree that your data be included in a public research database?

If you have any questions about your participation in the study, please contact me:

Philemon Opoku Tontoh

Department of International Development Studies,

Dalhousie University

ph295111@dal.ca

Any new information that arises which affects your decision to participate in this study will be communicated to you. If you have problems or concerns or any difficulties with, or wish to voice concern about, any aspect of your participation in this study, you may contact: Director of Dalhousie University's Office of Human Research Ethics Administration, at ethics@dal.ca (902-494-3423)