



THEMATIC BRIEF

SEXUAL VIOLENCE AGAINST GIRLS AND WOMEN



FOREWORD

Sexual violence against girls and women is not rare, distant, or abstract. The data show it is happening in homes, schools, communities, and relationships across the country. It is a violation that leaves deep physical and emotional scars, disrupts education and work, and fuels cycles of fear, silence, and inequality.

This brief uses the 2022 Ghana Demographic and Health Survey to uncover a troubling reality: even though only 2.2 percent of young women aged 18 to 29 report ever experiencing forced sex, most of those incidents, an alarming 81.9 percent, occurred before they turned 18. The highest risk age is 15, where more than 16 percent of victims experienced their first forced encounter. In other words, the girls most affected are those who should be in lower secondary school, not navigating trauma.

The patterns are equally revealing:

- Twelve regions record more than 2 percent forced sex before 18;
- Rural adolescents are at the highest risk in their childhood years, while urban young women face more incidents after age 18;
- Six in ten perpetrators are people the victims know;
- Forced sex cuts across wealth, education, religion, and household types, showing that no demographic is truly insulated; and
- Even women with secondary or higher education experience forced sex both before and after 18 in nearly equal measure.

The evidence points to one conclusion: sexual violence is a national threat that thrives in silence, stigma, and weak protection systems. While Ghana has strong laws and progressive policies, enforcement gaps, harmful norms, and limited early-detection mechanisms still leave too many girls vulnerable.

What this brief offers is not only a clearer picture of the problem but also a roadmap to change it. The data call for practical, immediate action:

1. First, strengthen prevention where vulnerability peaks including in rural communities, female-headed households, and families with adolescents;
2. Second, enforce existing laws with consistency, urgency, and survivor sensitivity;
3. Third, equip schools, health facilities, and social welfare institutions to identify early signs of abuse and act quickly;
4. Fourth, expand safe spaces, counselling services, and confidential reporting channels so survivors can seek help without fear; and
5. Finally, invest in sustained community engagement, because harmful norms cannot be legislated away; they must be replaced through conversation, leadership, and collective commitment.

Sexual violence is preventable. The data in this report provide the clarity we need to act, and a reminder that silence protects perpetrators, not children. This brief should serve as an invitation to government, communities, civil society, and every Ghanaian to build a country where every girl grows up safe, valued, and free from harm.



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EXECUTIVE SUMMARY

Sexual violence against girls and young women in Ghana remains a serious and under-acknowledged threat.

Data from the 2022 Ghana Demographic and Health Survey reveals a pattern that is both alarming and instructive:

- although only 2.2 percent of women aged 18 to 29 report experiencing forced sex, the vast majority of cases, 81.9 percent, happened before they turned 18;
- the highest-risk age is 15, where more than 16 percent of victims experienced their first forced encounter. This means the problem is hitting girls at the point where childhood and adolescence should be shaping their futures, not scarring them;
- twelve regions record more than 2 percent forced sex before age 18, demonstrating that early-age victimisation is widespread, not isolated;
- rural girls carry the heaviest burden before adulthood, while urban young women face a higher share of incidents after age 18;
- perpetrators are mostly familiar faces; six in ten victims were abused by someone they already knew;
- forced sex cuts across every demographic line - education, wealth, religion, marital status, and household type. Higher education does not offer full protection. Women from both rich and poor households experience it.
- Eight out of ten women who experienced forced sex were Christians, reflecting the broad representation of the religion in the population rather than a specific risk factor;
- daughters and wives within households show different but significant patterns of vulnerability; and
- more than half of victims live in female-headed households, showing that household structure alone does not shield girls from harm.

These findings point to one major conclusion: sexual violence is not only a legal or moral issue, but also a national development problem. It weakens the health, schooling, safety, and future labour market participation of survivors. Because most cases occur during adolescence, the consequences are long-term.

The data provide a roadmap for change. The practical and actionable path forward include the following:

1. **Strengthen early-age prevention where vulnerability peaks:** Target rural communities, female-headed households, and regions with the highest rates of forced sex before age 18 and prioritise programmes that reduce risk exposure for adolescents, especially girls aged 12 to 17;
2. **Enforce existing laws without exception:** Strengthen coordination across DOVVSU, social welfare, health services, and the justice system to ensure cases are reported, investigated, and prosecuted quickly and consistently across all districts;

3. **Equip frontline institutions to detect and respond early:** Train teachers, health workers, social welfare officers, and community volunteers to identify signs of abuse and provide timely referrals, counselling, and protection;
4. **Expand survivor-support systems:** Establish safe spaces for adolescents, confidential reporting channels, and accessible counselling and legal aid, especially in rural and underserved districts;
5. **Build community-driven behaviour change initiatives:** Partner with traditional leaders, faith communities, and youth groups to challenge norms that silence victims, normalise abuse, or blame survivors; and
6. **Strengthen gender and violence data systems:** Include richer disaggregation on age, disability, perpetrator characteristics, household factors, and circumstances of violence in future household surveys to sharpen interventions.

Sexual violence is preventable. The findings of this brief offer clarity, urgency, and direction. Ghana has the legal frameworks, the community networks, and the national commitment to protect its children and young women. What is needed now is coordinated action, guided by data, fuelled by accountability, and centred on the safety and dignity of every girl.

1. INTRODUCTION

Sexual violence against women and children is one of the most pervasive global public health and human rights concerns worldwide. According to the United Nations (1993), it is any sexual act, attempt to obtain a sexual act, or other act directed against a person's sexuality using coercion by any person, regardless of their relationship to the victim, in any setting. This includes child sexual abuse, rape, sexual assault, sex trafficking, and sexual exploitation. Similarly, UNICEF (2023) explains sexual violence against a child as any deliberate, unwanted and non-essential sexual act, either completed or attempted, that is perpetrated against a child for exploitative purposes that results in or has a high likelihood of resulting in injury, pain or psychological suffering.

Globally, the burden of sexual violence is alarming as it is estimated that 1 billion children aged 2 to 17 years encountered physical, sexual, or emotional violence or neglect over the preceding 12 months as of 2016 (Hillis et al., 2016). Additionally, in 2018, an estimated 31 percent of women aged 15 to 49 had experienced physical and or sexual violence from their partners or sexual violence from non-partners or both at least once in their lives (WHO, 2021).

In Ghana, sexual violence remains a significant concern despite policy and legal frameworks. Three out of every ten (30.0%) women aged 15 to 49 years experienced sexual violence in their lifetime, while one out of every ten (10.6%) experienced sexual violence in the 12 months prior to the Ghana Family Life and Health Survey as of 2015. The Ghana Demographic and Health Survey in 2022, further highlights that 14.1 percent of women aged 15 to 49 years had ever experienced sexual violence in their lifetime, while 6.9 percent of women aged 18 to 29 years experienced sexual violence before age 18.

The consequences of sexual violence for victims are severe, often leading to adverse health outcomes such as depression, sexually transmitted infections, unwanted pregnancy, pregnancy termination, substance abuse, injuries and subsequent perpetration of violence (Ajayi & Ezegbe, 2020; Aboagye et al., 2023; Astle et al., 2024). The risk sexual violence is heightened by factors such as lower educational levels, low income, harmful use of alcohol, weak legal sanctions against sexual violence, and social and gender norms (Aboagye et al., 2023; Astle et al., 2024). For children, risk factors include children's age and sex, parental educational level, poor parenting, child marriage, poverty, and inadequate social welfare (Tenkorang, 2019; Datulinggi et al., 2020; Turner et al., 2023).

Recognising the gravity of the problem, Ghana has implemented several laws and policies to address violence against women and children, including sexual violence. These include the National Gender Policy, the Domestic Violence Act 2007 (Act 732), the Children's Act (Act 560), the Criminal Offences Act (Amendment 2007), the Domestic Violence and Victim Support Unit (DOVVSU) Strategic Plan (2010-2015), the National Strategic Framework for Ending Child Marriage in Ghana (2017-2026), and the Five-Year Strategic Plan to Address Adolescent Pregnancy in Ghana 2018-2022. In 2024, Ghana

pledged to end all forms of violence, including sexual violence, at the first Global Ministerial Conference on Ending Violence Against Children, which took place in Bogota, Colombia (UNICEF, 2025). Also, in 2024, Ghana passed the Affirmative Action (Gender Equality) Bill, which seeks to ensure the achievement of gender equality in the political, social, economic, educational and cultural spheres of Ghanaian society.

The brief examines the prevalence and correlates of sexual violence among women aged 18 to 29 years in Ghana, using data from the 2022 Demographic and Health Survey. This information will guide policymakers in the design of targeted policies and interventions to address forced sex among women in Ghana to enhance their health and wellbeing.

The subsequent sections of this brief present the definition of concepts, data sources, estimation, justification for the selection of correlates, key findings, conclusion, policy recommendations and appendices.

2. DEFINITION OF CONCEPTS, DATA SOURCES, AND ESTIMATION

2.1 Definitions of Concepts

2.1.1 Forced sex

This refers to the first time a woman is forced to have sexual intercourse or perform any other sexual acts by any person, regardless of their relationship to the woman, that she did not want to. In this brief, forced sex is used to measure sexual violence.

2.1.2 Perpetrator

This refers to a person who forced a woman to have sexual intercourse with him or perform any other sexual acts that she did not want to.

2.2 Data Sources

This brief draws on data from the 2022 Ghana Demographic and Health Survey (GDHS). All statistics presented are generated solely from the women's dataset of the survey, which captures detailed information on demographic and health indicators among women aged 15–49 years.

2.3 Estimation

The 2022 GDHS collected data on women aged 15 to 49 years. For this report, the dataset was restricted to women aged 18 to 29 years who had experienced forced sex in their lifetime, in order to determine the prevalence of forced sex before age 18. Percentages were used to estimate the prevalence of forced sex and other related variables. Additionally, correlates were examined to understand the differences in forced sex among various variables, which are discussed in the next section.

3. JUSTIFICATION FOR THE SELECTION OF CORRELATES

This section presents the rationale for selecting the key correlates for forced sex before age 18 among women aged 18 to 29 years presented in the report.

3.1 Education of Women

Women with lower educational levels are more likely to experience forced sex than women with higher educational levels.

3.2 Household Wealth Quintile

Poor households are more likely to marry off their daughters early, which can increase the risk of forced sex for these daughters compared to those from rich households.

3.3 Marital Status

Women who are married are more likely to experience forced sex compared to women who have never been married.

3.4 Region of Residence

Women residing in regions with limited economic opportunities and access to education are more likely to experience forced sex than those in regions with adequate economic opportunities and access to education.

3.5 Relationship to Head of Household

Daughters of household heads are generally more likely to marry off their daughters early, which can increase the risk of forced sex for these daughters compared to other female household members.

3.6 Religion of Women

Religious beliefs and practices can influence the perpetration of forced sex, especially in marriage. Women who belong to religions that have beliefs and practices more favourable towards forced marital intercourse are more likely to experience forced sex than those whose religious beliefs and practices are unfavourable to forced marital intercourse.

3.7 Sex of Head of Household

Women from male headed households are more likely to experience forced sex compared to female headed households.

3.8 Type of Locality

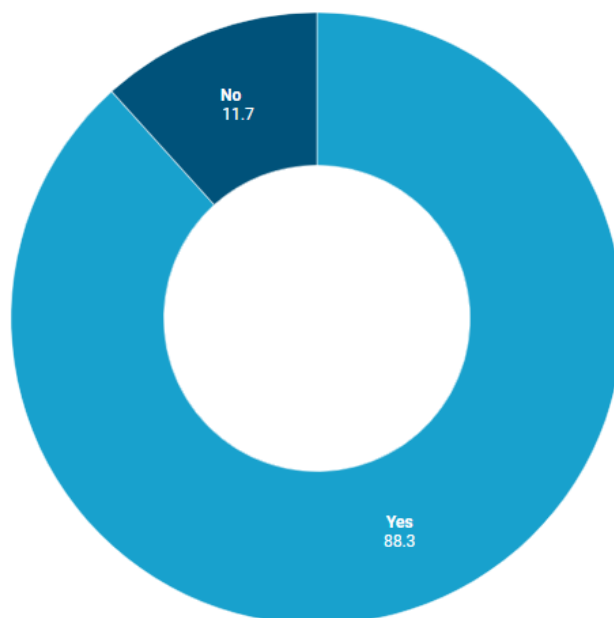
Women in rural areas are more likely to experience forced sex than women in urban areas due to traditional gender roles and norms.

4. KEY FINDINGS

4.1 Women Aged 18 to 29 Who Have Ever Had Sex

More than 80 percent of women aged 18 to 29 have ever had sexual intercourse.

FIGURE 4.1: PERCENTAGE OF WOMEN AGED 18 TO 29 WHO HAVE EVER HAD SEX

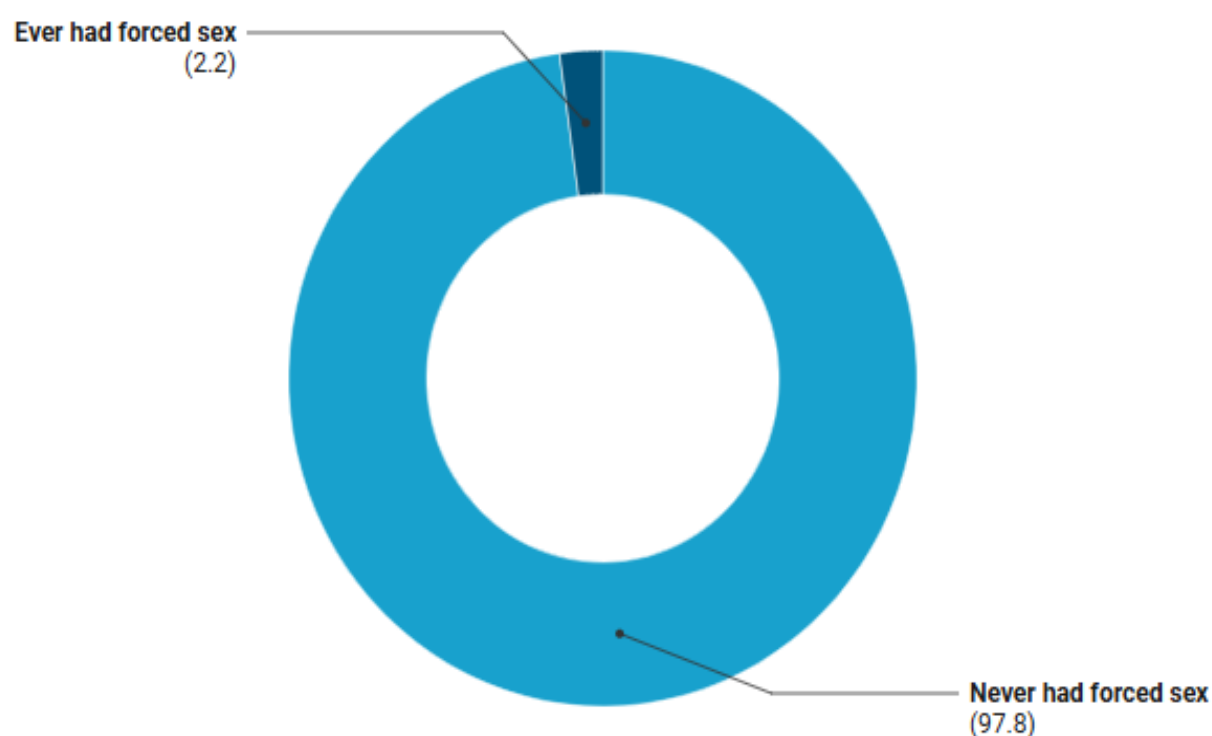


4.2 Forced Sex Among Women Who Have Ever Had Sex

This section presents the key highlights from the analysis of forced sex among women aged 18 to 29 years. It outlines the prevalence of forced sex, the age at first experience, regional patterns associated with vulnerability.

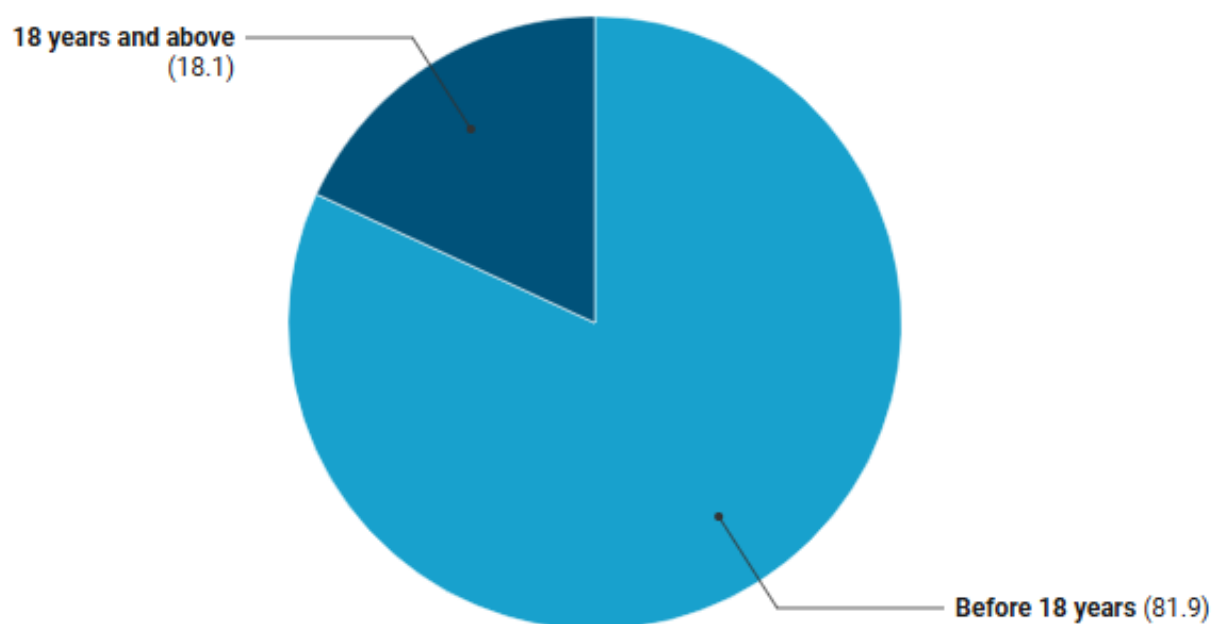
Nationally, 2.2 percent of women aged 18 to 29 who have ever had sexual intercourse reported experiencing forced sex in their lifetime.

FIGURE 4.2: PERCENTAGE OF FORCED SEX AMONG WOMEN AGED 18 TO 29 WHO HAVE EVER HAD SEX



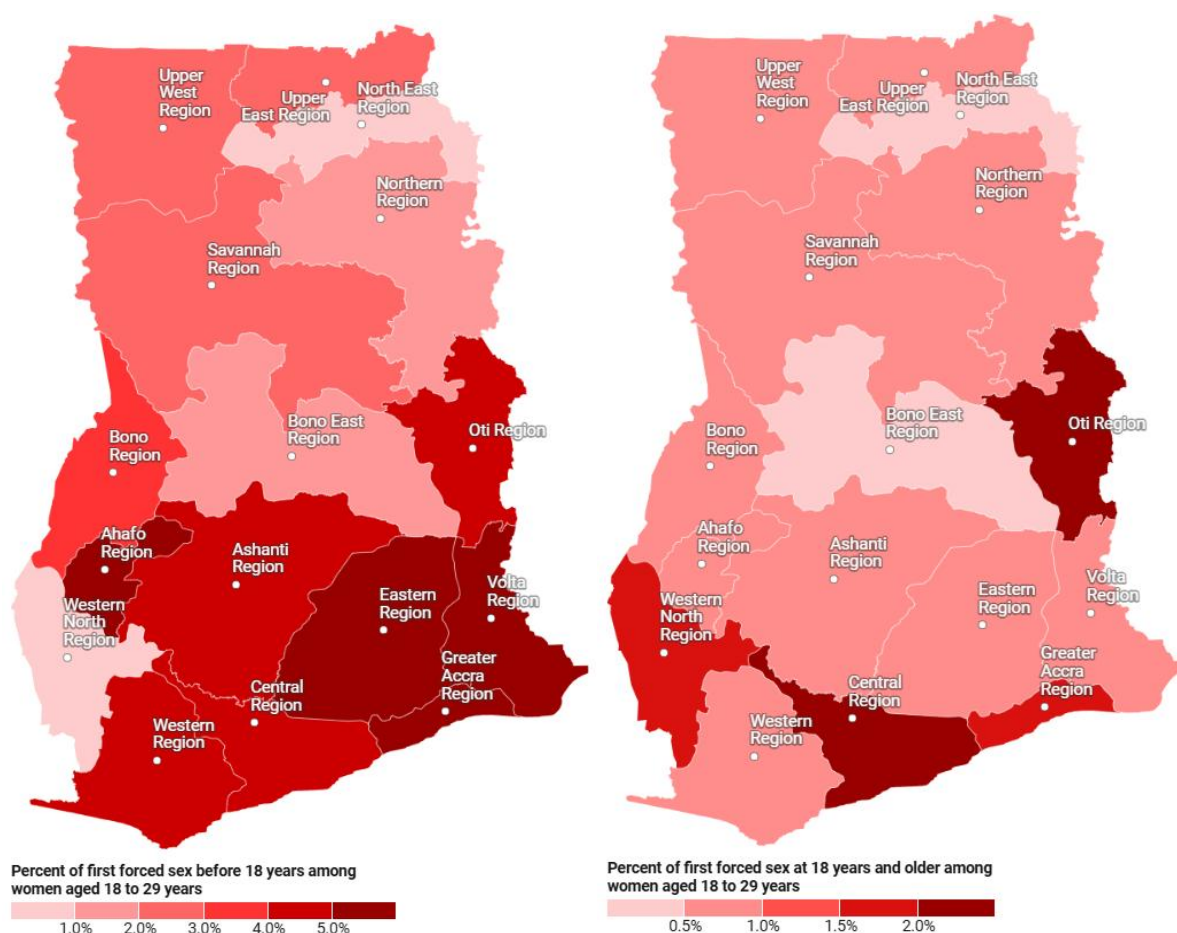
Among women aged 18 to 29 who had ever experienced forced sex, 81.9 percent experienced it before 18 years while 18.1 percent experienced it at 18 years or older.

FIGURE 4.3: PERCENTAGE OF WOMEN AGED 18 TO 29 WHO HAD EVER EXPERIENCED FORCED SEX BY AGE GROUP



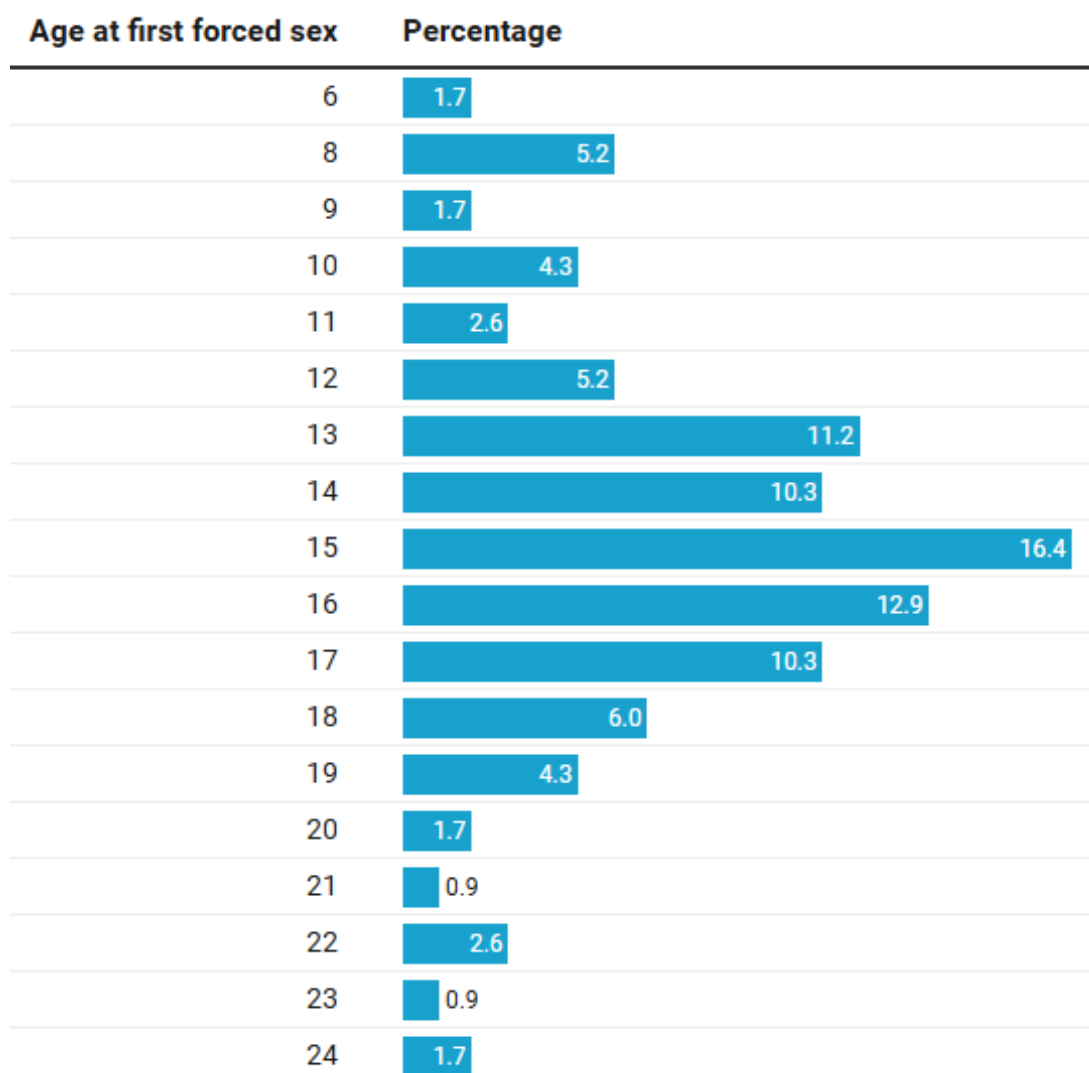
In twelve regions, the proportion women who experienced forced sex before 18 years exceeded 2.0 percent, while two regions recorded more than 2.0 percent experiencing forced sex at 18 years or older.

FIGURE 4.4: PERCENTAGE OF WOMEN AGED 18 TO 29 WHO HAD EVER EXPERIENCED FORCED SEX BEFORE 18 YEARS AND AT 18 YEARS AND OLDER BY REGION



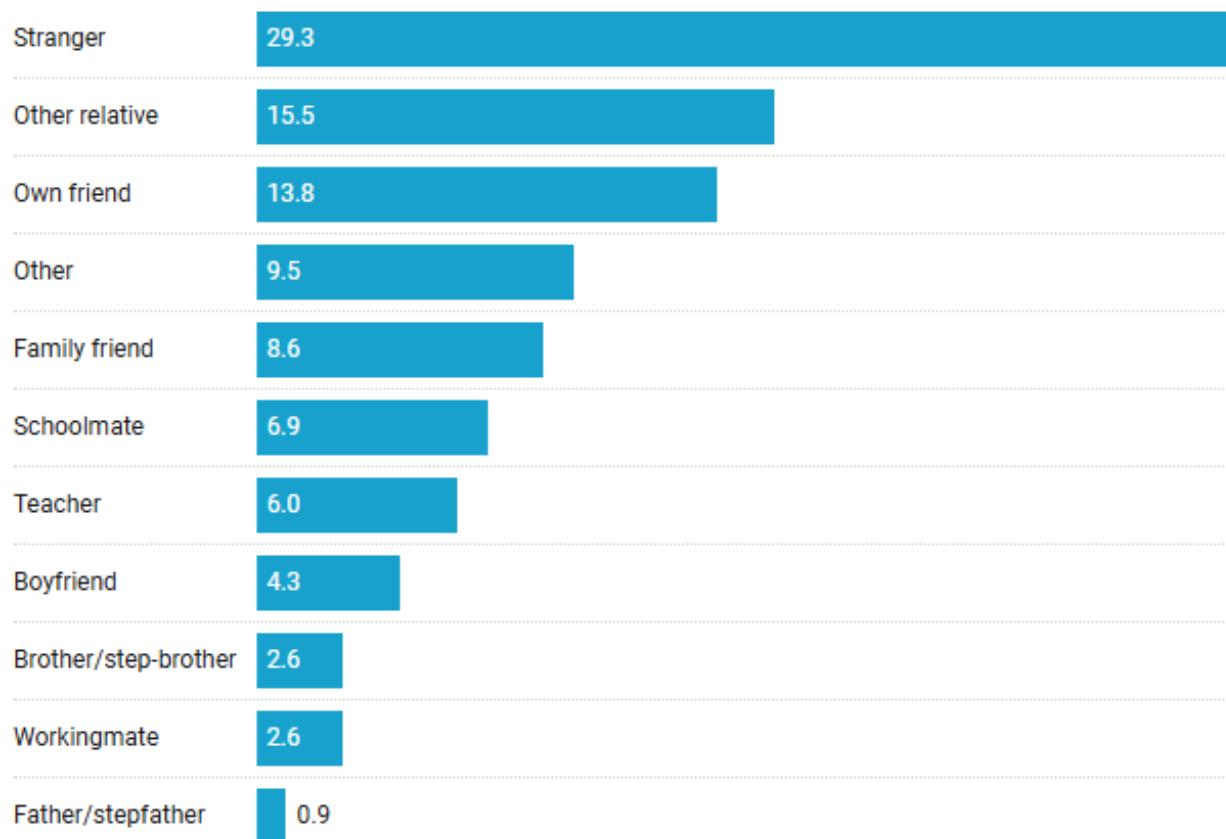
More than 16 percent of women aged 18 to 29 experienced their first forced sex at age 15, which is eighteen times higher than the 0.9 percent at ages 21 and 23.

FIGURE 4.5: AGE AT FIRST FORCED SEX AMONG WOMEN AGED 18 TO 29 YEARS



Six out of ten (61.2%) perpetrators of forced sex against women aged 18 to 29 were persons known by the victims, while about three out of ten (29.3%) were strangers.

FIGURE 4.6: PERCENTAGE OF PERPETRATORS OF FORCED SEX AMONG WOMEN AGED 18 TO 29 YEARS

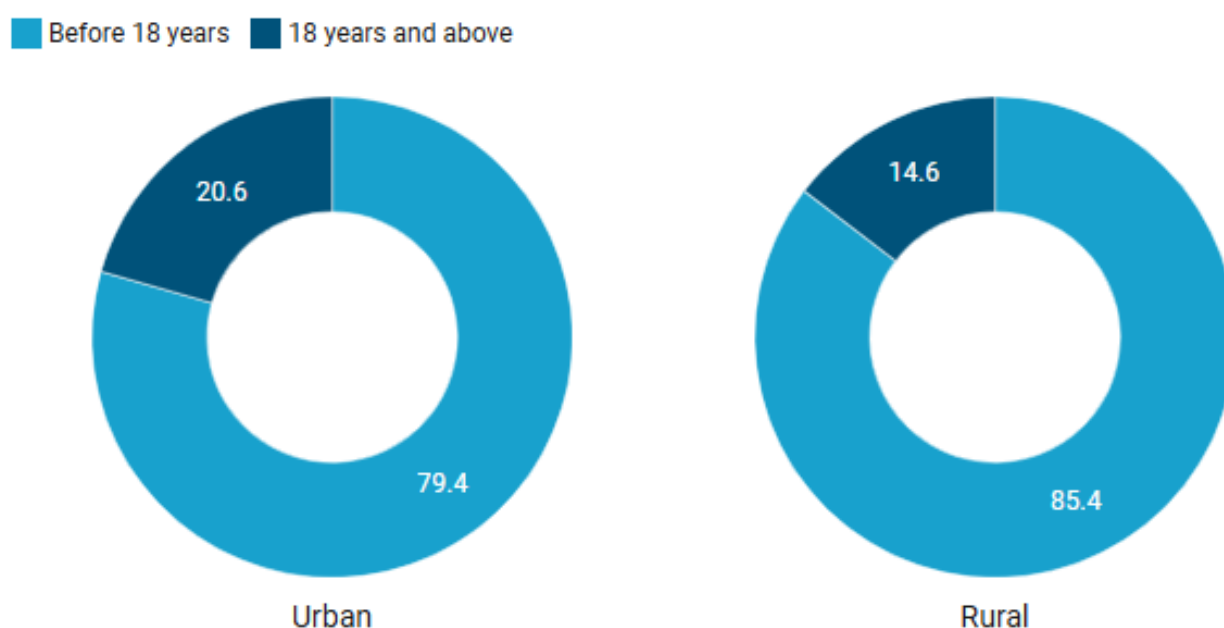


4.3 Correlates

This section examines the key correlates of forced sex before age 18 among women aged 18 to 29 years. It assesses how vulnerability varies across socio-demographic characteristics to provide a clearer understanding of the contexts in which young women are most at risk.

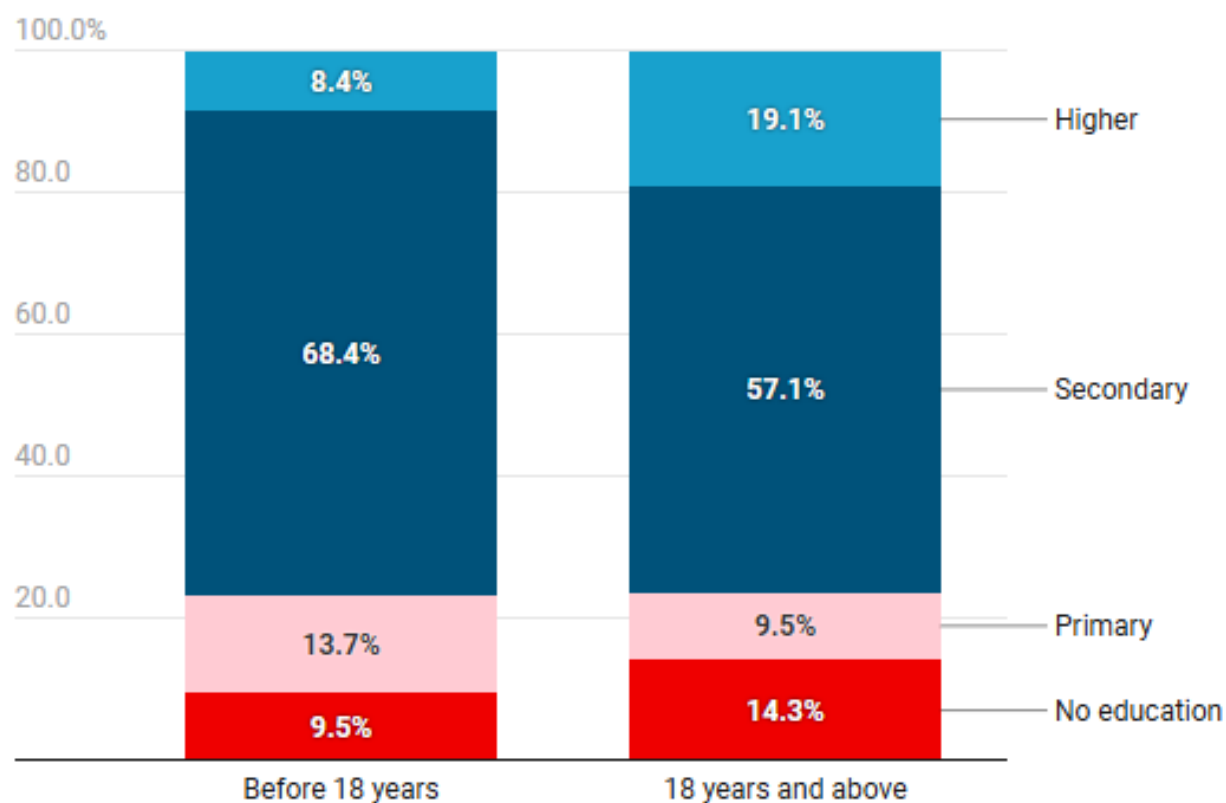
Women in rural areas have the highest proportion of forced sex before 18 years (85.4%). In contrast, women residing in urban areas had the highest share of forced sex after 18 years (20.6%) compared to those residing in rural areas (14.6%).

FIGURE 4.7: FORCED SEX BEFORE AGE 18 AND AT 18 YEARS AND OLDER BY PLACE OF RESIDENCE



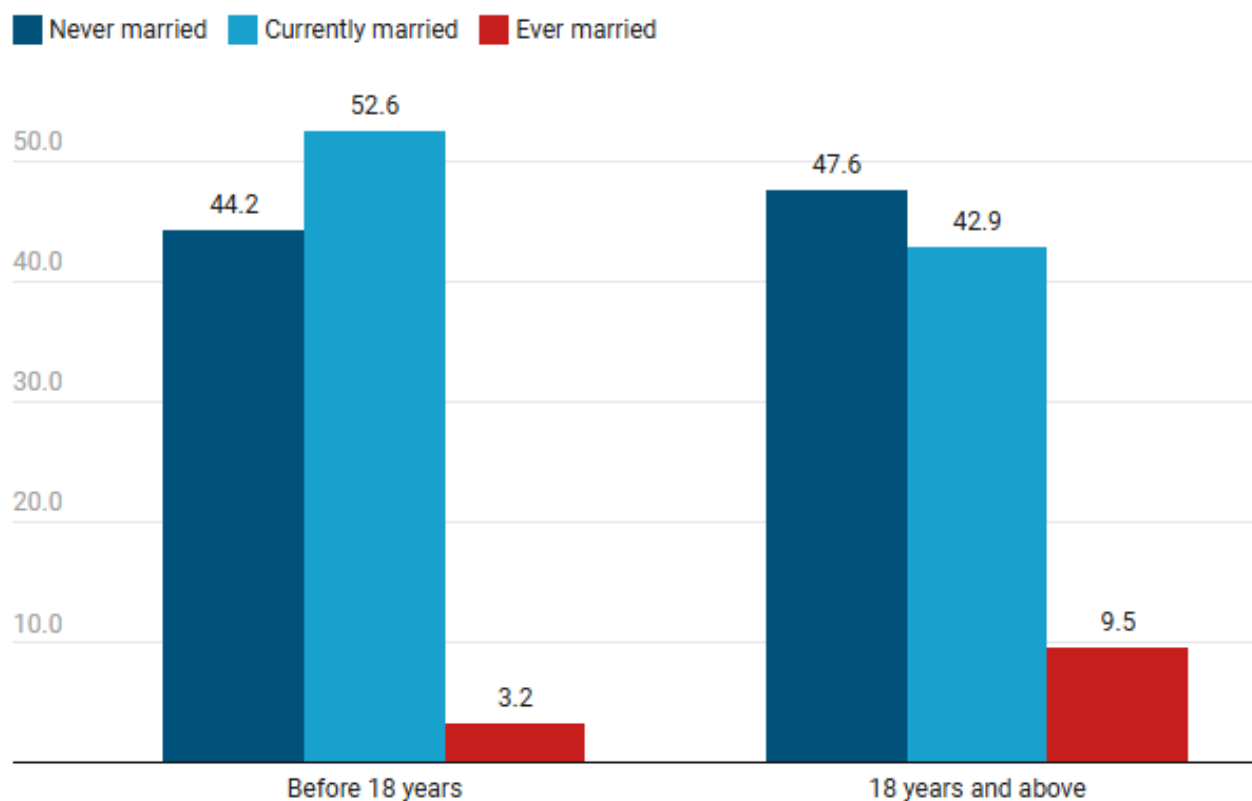
Among women aged 18 to 29 with secondary and higher education, 76.8 percent experienced forced sex before 18 years, while 76.2 percent experienced forced sex at 18 years and above.

FIGURE 4.8: FORCED SEX BEFORE 18 YEARS AND AT 18 YEARS AND OLDER BY LEVEL OF EDUCATION



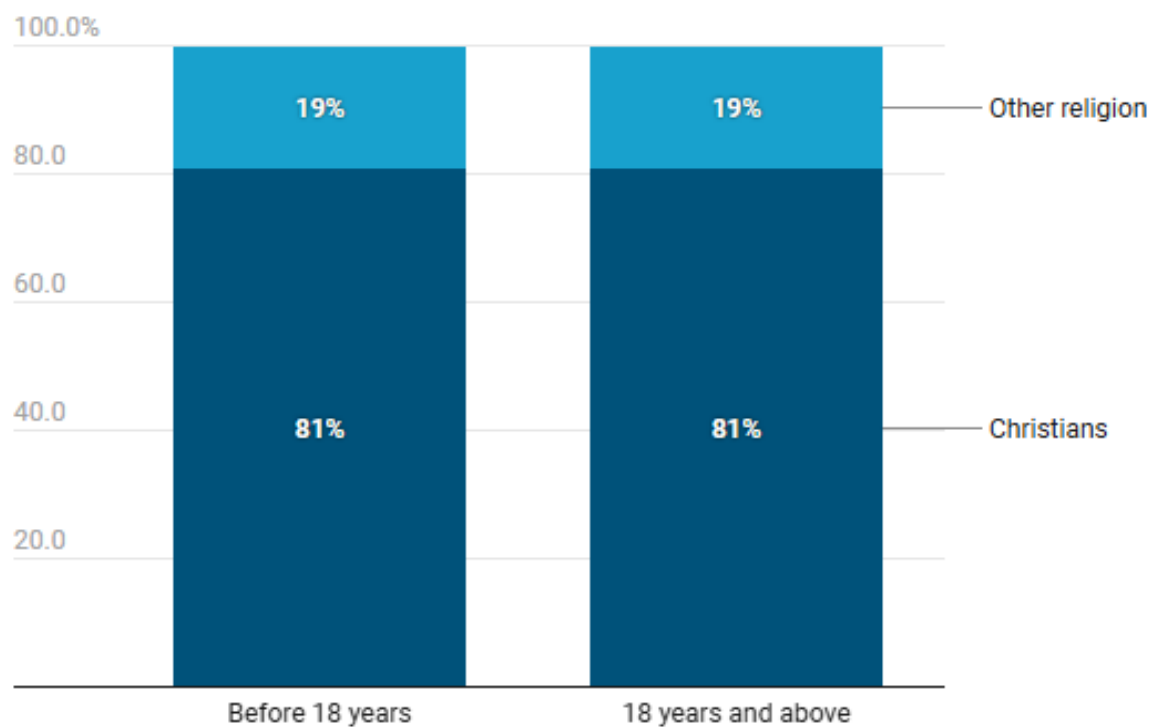
Among women aged 18 to 29 who are currently married, 52.6 percent have experienced forced sex before 18 years. In contrast, 47.6 percent of never married women experienced forced sex at 18 years and older.

FIGURE 4.9: FORCED SEX BEFORE 18 YEARS AND AT 18 YEARS AND OLDER BY MARITAL STATUS



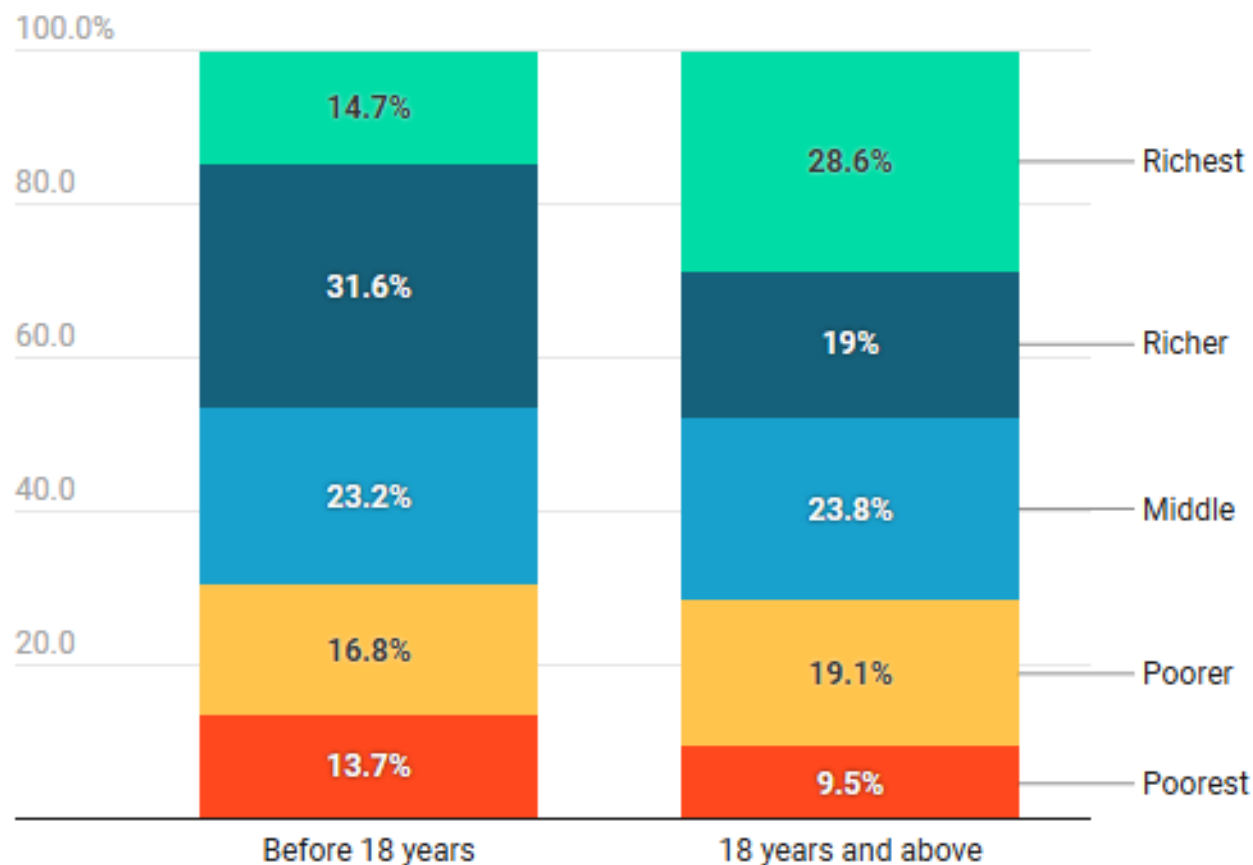
Eight out of ten women (81.0%) aged 18 to 29 who experienced forced sex before 18 years and at 18 years and older respectively are Christians.

FIGURE 4.10: FORCED SEX BEFORE 18 YEARS AND AT 18 YEARS AND OLDER BY RELIGION



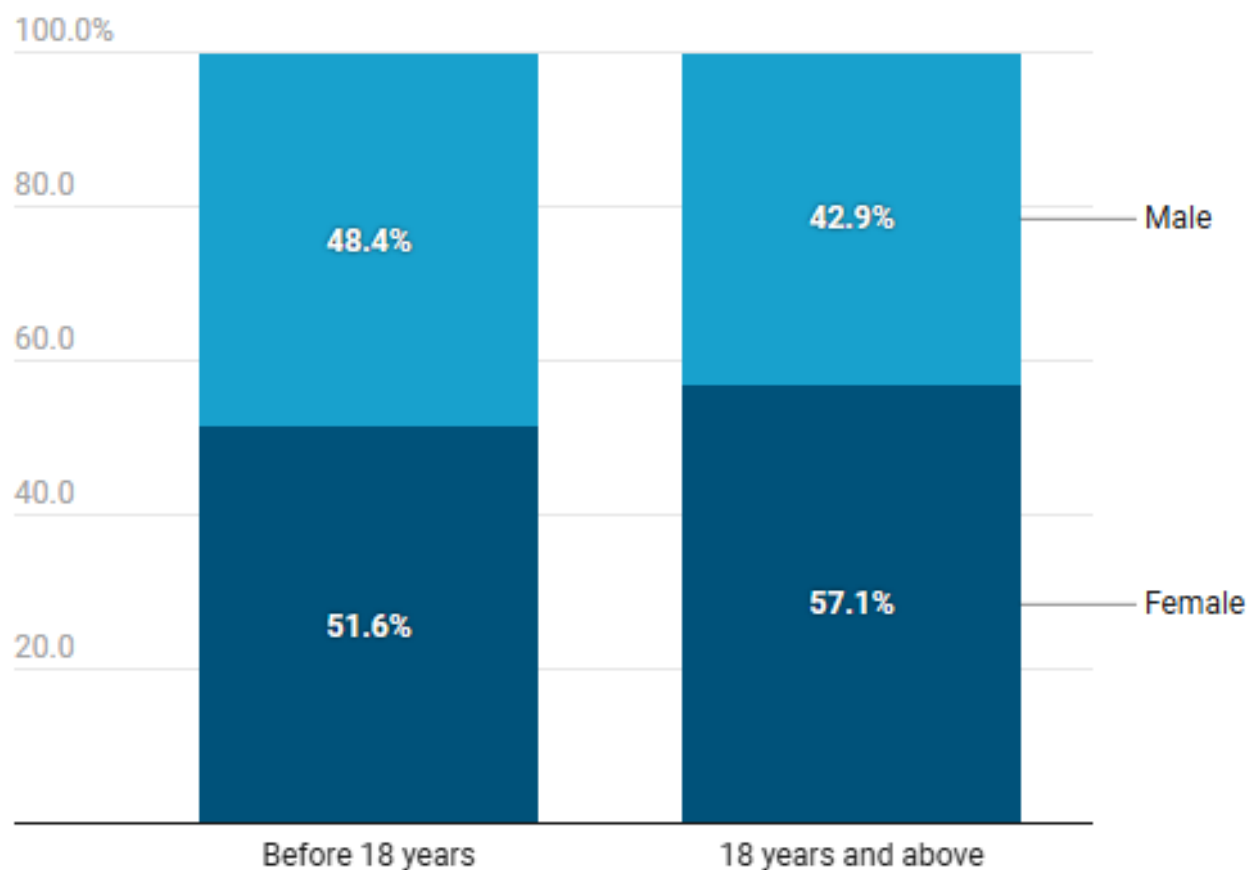
Among women aged 18 to 29 from rich households, 46.3 percent experienced forced sex before 18 years and 47.6 percent experienced forced sex at 18 years and older.

FIGURE 4.11: FORCED SEX BEFORE 18 YEARS AND AT 18 YEARS AND OLDER BY HOUSEHOLD WEALTH QUINTILE



Over 50 percent of women aged 18 to 29 who experienced forced sex before 18 years and at 18 years and older respectively, live in female-headed households.

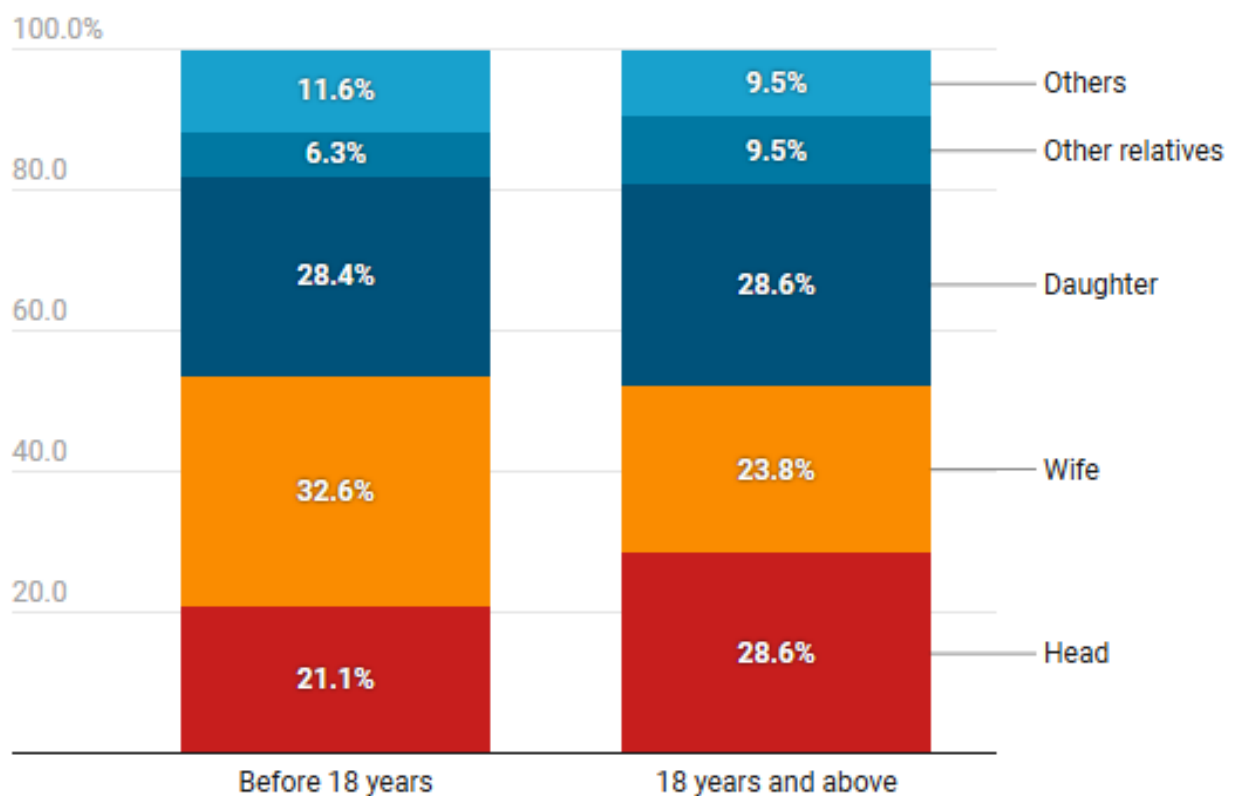
FIGURE 4.12: FORCED SEX BEFORE 18 YEARS AND AT 18 YEARS AND OLDER BY HOUSEHOLD HEAD



Among women aged 18 to 29 who are daughters to household heads, 28.4 percent experienced forced sex before 18 years, and 28.6 percent experienced forced sex at 18 years and older.

Also, among women aged 18 to 29 who are wives to household heads, 32.6 percent experienced forced sex before 18 years, and 23.8 percent experienced forced sex at 18 years and older.

FIGURE 4.13: FORCED SEX BEFORE 18 YEARS AND AT 18 YEARS AND OLDER BY RELATIONSHIP TO HOUSEHOLD HEAD



5. CONCLUSION AND POLICY RECOMMENDATIONS

5.1. Conclusion

The evidence from the 2021 Population and Housing Census and the 2022 Ghana Demographic and Health Survey show a stark reality: sexual violence against girls and young women in Ghana is both underreported and deeply rooted.

Although 2.2 percent of women aged 18 to 29 have experienced forced sex, most incidents occur long before adulthood. An overwhelming 81.9 percent happened before age 18, with age 15 emerging as the highest-risk year. This means girls are being harmed at the point when education, safety, and emotional stability should be shaping their future, not derailing it.

The patterns reveal how vulnerability is shaped by where a girl lives, who she lives with, and the social norms surrounding her. Rural girls face the highest levels of forced sex before adulthood, while urban young women experience more incidents after age 18. Six in ten perpetrators are people the victims know including family members, partners, neighbours, or trusted adults. This reality makes detection harder and silence more likely.

Forced sex cuts across every demographic line. Higher education does not guarantee protection. Wealth does not guarantee protection. Religion does not guarantee protection. Even girls in female-headed households, who ordinarily might be assumed safer, account for more than half of all cases. Marital status adds another layer: married young women are more likely to have experienced forced sex before 18, while never-married women face higher rates after 18.

These findings show that sexual violence is not simply a criminal act, it is a development challenge. It directly affects mental health, educational attainment, school completion, self-esteem, relationships, workforce participation, and long-term wellbeing. Most importantly, it shapes the lives of girls long before they have the power or resources to protect themselves.

Addressing this challenge requires recognising it for what it is: a national problem that hides in households, communities, and relationships. The data provide the clarity needed to act. The next step is coordinated, sustained, and district-specific action that protects girls early, supports survivors, and prevents the cycles of harm from repeating.

5.2. Policy Recommendations

The findings call for practical, urgent, and implementable actions from government, civil society, development partners, communities, families, and data-producing institutions.

Government:

1. **Enforce existing laws with consistency and urgency:** Strengthen implementation of the Children's Act, Domestic Violence Act, and Criminal Offences Act. Ensure coordinated, timely prosecution across districts and eliminate bottlenecks in reporting, investigation, and case management;
2. **Scale up early prevention in high-risk districts:** Prioritise rural communities and regions where forced sex before 18 is highest and expand programmes that reduce girls' exposure to unsafe relationships, child marriage, and neglect;
3. **Strengthen institutional detection and first response:** Equip schools, health facilities, police units, social welfare offices, and community protection committees with training to identify early signs of abuse, provide confidential support, and make swift referrals; and
4. **Expand accessible survivor-support services:** Increase availability of safe spaces, counselling, legal aid, and emergency shelters, especially in rural and underserved districts. Make reporting channels confidential, youth-friendly, and widely publicised.

Civil Society and Development Partners:

1. **Drive community-level behaviour change:** Work with traditional leaders, religious institutions, parents, and youth groups to challenge norms that silence victims or normalise abuse;
2. **Build capacity for local prevention systems:** Support training for teachers, health workers, social welfare officers, and community volunteers to detect, respond, and document cases effectively; and
3. **Strengthen long-term survivor support:** Invest in trauma-informed counselling, reintegration support for adolescent survivors, and programmes that rebuild confidence, safety, and economic independence.

Households, Families, and Community Leaders:

1. **Create safe and nurturing environments for children:** Monitor children's relationships, protect them from early marriage and unsafe adults, and ensure supervision that reduces exposure to risk;
2. **Encourage open family communication:** Promote safe conversations that reduce stigma around reporting violence and allow children to share concerns early; and
3. **Strengthen parenting skills and awareness:** Educate parents and guardians on risk factors including on neglect, poor supervision, child marriage, harmful norms, as well as on the importance of early intervention.

Statistical and Research Institutions:

1. **Expand the scope and detail of violence data:** Include more disaggregated variables on perpetrators, circumstances, disability status, migration status, and concurrent forms of violence in national surveys;
2. **Align future surveys with global standards:** Ensure Ghana's household surveys reflect the International Classification of Violence Against Children so that all forms, whether sexual, psychological, physical, neglect, are consistently measured; and
3. **Strengthen district-level data for targeted action:** Produce more granular, district-specific statistics that allow policymakers to identify hotspots and design interventions that match local realities.

Ghana can end sexual violence. The data are clear, the pathways are known, and the responsibility is shared. Protecting girls and young women is not just a legal obligation, it is a national investment in safety, dignity, and future human capital. Through decisive, coordinated action, Ghana can build a society where no child's life is defined by harm, silence, or fear.

APPENDIX

TABLE 6. 1: PERCENT OF FORCED SEX AMONG WOMEN AGED 18 TO 29 YEARS BY REGION

Region	Percent of Forced Sex Before 18 Years	Percent of Forced Sex At 18 Years and Older
Ahafo	5.7	0.7
Ashanti	4.8	0.5
Bono East	1.2	0.0
Bono	3.4	0.9
Central	4.1	2.3
Eastern	5.6	0.8
Greater Accra	5.0	1.5
North East	0.9	0.0
Northern	1.8	0.9
Oti	4.2	2.2
Savannah	2.4	0.6
Upper East	2.4	0.5
Upper West	2.6	0.5
Volta	5.4	0.8
Western North	0.6	1.6
Western	4.3	0.8

REFERENCES

- Aboagye, R. G., Seidu, A. A., Ahinkorah, B. O., Frimpong, J. B., & Yaya, S. (2023). Sexual violence and self-reported sexually transmitted infections among women in sub-Saharan Africa. *Journal of Biosocial Science*, 55(2), 292-305.
- Ajayi, A. I., & Ezegbe, H. C. (2020). Association between sexual violence and unintended pregnancy among adolescent girls and young women in South Africa. *BMC Public Health*, 20(1), 1370.
- Astle, S., McAllister, P., Spencer, C., Rivas-Koehl, M., Toews, M., & Anders, K. (2024). Mental health and substance use factors associated with sexual violence victimization and perpetration in university samples: A meta-analysis. *Sexuality Research and Social Policy*, 21(1), 388-399.
- Datulinggi, M., Thaha, R. M., Zulkifli, A., & Mallongi, A. (2020). Risk factor sexual violence in children in Palopo city. *Enfermería Clínica*, 30 (Suppl. 4), 323-327.
- Ghana Demographic and Health Survey and ICF. (2024). Ghana Demographic and Health Survey 2022. Ghana Demographic and Health Survey and ICF.
- Hillis, S., Mercy, J., Amobi, A., & Kress, H. (2016). Global prevalence of past-year violence against children: a systematic review and minimum estimates. *Pediatrics*, 137(3).
- Institute of Development Studies, Ghana Statistical Service and Associates. (2016). Summary of report: Domestic violence in Ghana: Incidence, attitudes, determinants and consequences. Institute of Development Studies. https://assets.publishing.service.gov.uk/media/5804c6fee5274a67e8000006/DV_Ghana_Summary_Report_August.pdf
- Ministry of Gender, Children and Social Protection, & UNFPA Ghana (2017). Five-Year Strategic Plan to Address Adolescent Pregnancy in Ghana 2018-2022. Ministry of Gender, Children and Social Protection, & UNFPA Ghana.
- Ministry of Gender, Children and Social Protection. (2016). The National Strategic Framework for Ending Child Marriage in Ghana (2017-2026). Ministry of Gender, Children and Social Protection.
- Republic of Ghana (2007). Ghana Domestic Violence Act, 2007, ACT 732. Republic of Ghana. <https://genderapp.statsghana.gov.gh/pdf/violenceact.pdf>
- Republic of Ghana. (2024). Affirmative Action (Gender Equality) Bill, 2024. Republic of Ghana. <https://www.purc.com.gh/attachment/735270-20241129071158.pdf>
- Tenkorang, E. Y. (2019). Explaining the links between child marriage and intimate partner violence: Evidence from Ghana. *Child Abuse & Neglect*, 89, 48-57.
- Turner, H. A., Finkelhor, D., & Colburn, D. (2023). Predictors of Online Child Sexual Abuse in a U.S. National Sample. *Journal of Interpersonal Violence*, 38(11-12), 7780-7803.
- UNICEF. (2023). International Classification of Violence against Children. UNICEF.

UNICEF. (2025, July 23). Ghana's Commitment to End Violence Against Children: A Path Toward Protective Reform. <https://www.unicef.org/ghana/stories/ghanas-commitment-end-violence-against-children-path-toward-protective-reform>

United Nations. (1993). Declaration on the elimination of violence against women. United Nations.

WHO. (2021). Violence against women prevalence estimates, 2018: global, regional and national prevalence estimates for intimate partner violence against women and global and regional prevalence estimates for non-partner sexual violence against women. WHO. <https://iris.who.int/bitstream/handle/10665/341338/9789240026681-eng.pdf>

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