SUMMARY REPORT

DOMESTIC VIOLENCE IN GHANA:
INCIDENCE, ATTITUDES, DETERMINANTS AND CONSEQUENCES

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Background

Domestic violence – defined as abuse by one person against another in an intimate relationship including marriage, cohabitation, dating or relations within the family – is one of the most common forms of gender-based violence in the world. Addressing gender inequalities has been given a prominent focus in the UN Sustainable Development Goals (SDGs), and with the development of the SDGs there has been a pledge to “eliminate all forms of violence against all women and girls in the public and private spheres”.

Supported by several years of advocacy efforts by key civil society organisations and women’s rights organisations, the Government of Ghana enacted the Domestic Violence Act (Act 732) on 21st February, 2007. This legislation takes a progressive approach to addressing domestic violence. Notably, the Act acknowledges that perpetrators and survivors of domestic violence do not have to be married or related by blood ties. Its definition of domestic violence includes various forms of economic abuse, in addition to more conventional definitions of sexual and physical violence. The Act provides a working definition of domestic violence, and outlines a comprehensive legal framework for the prevention of and protection against domestic violence.

The Domestic Violence Act 732 was followed by the formulation of the National Policy and Plan of Action (NPPOA) developed by the former Ministry of Women and Children’s Affairs in 2008. The NPPOA lays out specific roles of key stakeholders to effectively implement the Domestic Violence Act, under the direction of the Domestic Violence Secretariat (Ministry of Gender, Children and Social Protection). This study forms part of this strategy.

Study Aims

The overarching aim of the study was to provide an in-depth understanding of the incidence, attitudes, determinants and consequences of domestic violence amongst people aged 15 to 60 years in Ghana. The following questions were addressed in the report:

1. What types and levels of violence are experienced by women, men, girls and boys in Ghana, and who perpetrates them? What proportion of this violence is domestic violence?

2. What are society, community and people’s attitudes towards domestic violence, and how do attitudes and norms influence the acceptance of different forms of domestic violence in Ghana?
3. What are the main determinants of domestic violence against women, men, girls and boys at the individual, family, community and wider societal levels?

4. What are the consequences of domestic violence in Ghana for people’s physical and mental health and their daily lives?

5. What institutional structures support victims of domestic violence, and what proportion of victims are able to effectively access available services?

6. How can policies and interventions be (re)designed to better support victims of domestic violence and prevent domestic violence in Ghana?

**Study approach**

The study adopted a mixed-methods approach, collecting primary quantitative and qualitative empirical evidence on:

- The incidence and types of domestic violence;
- Individual-, household- and community-level attitudes towards domestic violence;
- Determinants of domestic violence;
- Consequences of domestic violence;
- The use of and access to victims’ support services and institutions.

The study analysed the following forms of violence:

- **Social violence** (acts of controlling behaviour, such as preventing someone from seeing friends or family; stopping someone from leaving the house; requiring to know where someone is at all times; stalking; spreading false information, videos or photos without permission; or forcing women to have an abortion);

- **Physical violence** (slapping, pushing, shoving, hitting, kicking, dragging or throwing objects at someone; choking, strangling or burning someone; using a weapon, hazardous chemicals or substances against someone; or kicking or pulling someone’s external genitalia);

- **Sexual violence** (acts of unwanted sexual comments or physical contact; rape by physical force, or otherwise forced sex; denial of using protection during sex; a sexual partner hiding their HIV status; sexual acts and intercourse that were performed on the basis of feeling there was no option; or penetration with an object against someone’s will);
• **Psychological violence** (use of insults, belittling or humiliation in private or in front of others; threats of abandonment; being ignored or treated indifferently; intimidations and acts aimed at scaring someone; threats of using weapons against someone; or threats of hurting someone they care about);

• **Economic violence** (denial of household money for expenses even if enough financial means are available; unsolicited taking of money; control of belongings and spending decisions; damage to or destruction of someone’s property; denial of the right to work; forcing someone to work against their will; or denial of food and other basic needs).

Quantitative data were collected through a representative household-level survey of 4,995 individuals - the Ghana Family Life and Health Survey (GFLHS, 2015), conducted between April and August 2015 with men, women, boys and girls between the ages of 15 and 60 years. This produced individual level statistics and in-depth analysis of experience, lifetime and in the last 12 months, of domestic and non-domestic violence. It also looked at the determinants and consequences of domestic violence.

Qualitative data collected through community-level focus group discussions, interviews with community leaders and key informants, field observations and individual in-depth interviews were also used to explain key findings. These data explored the perceptions, attitudes and beliefs of women and men, how they related to domestic violence experiences as survivors and perpetrators, and how individual experiences of domestic violence were integrated within family, community and wider social and political structures and relations.

**Results**

**Incidence of violence (domestic and non-domestic)**

This study analysed the incidence of violence across different population groups in Ghana – independently of whether or not this violence was perpetrated within domestic relations. It was found that 71.5% of women and 71.4% of men reported having experienced at least one form of violence (domestic and non-domestic) over their lifetime, and 42.9% of women and 43.6% of men experienced at least one form of violence in the 12 months prior to the survey.

In the 12 months prior to the study the most common form of violence experienced by women was psychological violence (22.5%), followed by social violence (20.8%), economic violence (14.4%), sexual violence (10.6%), and physical violence (8.9%). The most common form of violence experienced by men was also psychological violence (28%), followed by social violence (18.7%), economic violence (12.2%), physical violence (10.2%), and sexual violence (9.5%). These findings are summarised in figure 1 below.
However, over their lifetime women experience much higher levels of social violence than men (41% compared to 34.4%) and sexual violence (30% compared to 23.1%); while men experience much higher levels of physical violence than women (50.8% compared to 42.4%).

This study also analysed the likely perpetrators of the different forms of violence. The following briefly summarises these findings:

- Almost all types of **social violence** against men and women were largely perpetrated within domestic relations, with the exception of rumours, photos and videos without permission.

- All types of **physical violence** against women were mainly perpetrated by domestic relations (within and outside the immediate family), whereas all types of physical violence against men were mainly perpetrated by non-domestic relations.

- Most types of **sexual violence** against women were predominantly perpetrated by domestic relations, with the exception of sexual comments and sexual touches. In contrast, most acts of sexual violence against men – with the exception of sex without consent and sex without protection – were mainly perpetrated by non-domestic relations.

- Most **psychological violence** against women was perpetrated within domestic relations, with the exception of insults. In contrast, most psychological violence against men was perpetrated outside domestic relations, with the exception of acts of being ignored or threatened with being abandoned.

- Most acts of **economic violence** against women were perpetrated by domestic relations, with the exception of cash being taken and property damaged. A large part of economic violence against men was perpetrated outside domestic relations, with
the exceptions of being denied pocket money, having belongings controlled, and being prohibited from working.

These violence figures help frame the main remit of the study - the analysis of violence against women and men perpetrated within domestic relations (i.e. domestic violence), explored below.

**Incidence of domestic violence**

Nearly three in every ten women (28%) and two in every ten men (20%) in Ghana experienced domestic violence in the 12 months prior to the study. The most common form of domestic violence reported by women was economic violence (12.8%), followed by social violence (11.6%), psychological violence (9.3%), physical violence (6.0%) and sexual violence (2.5%). The most common form of domestic violence experienced by men was psychological violence (7.9%), followed by social violence (7.7%), economic violence (7.3%), physical violence (2.1%) and sexual violence (1.4%). These results are reflected in figure 2 below.

![Figure 2: Incidence of Domestic Violence in Ghana (Percentages)](image)

These types of domestic violence did not occur in isolation. Many respondents who reported having experienced domestic violence experienced multiple forms and types of violence: 23.3% of women and 18.9% of men who experienced domestic violence reported having experienced two types of domestic violence, while 9.4% of women and 5.7% of men reported having experienced three different types of domestic violence.

In the 12 months prior to the study, it was found that younger women and men (particularly those aged 15–19 years) were more likely than other age groups to report experiencing forms of domestic violence. However, for women the exceptions to this were for economic and sexual violence, where the age group 25-29 years reported experiencing the highest incidence of violence. For men, the only exception was sexual violence which was more prevalent among age group 30-39 years. Figures 3 and 4 highlight the incidence of different forms of domestic violence against women and men by the age groups of respondents.
The study found that the incidence of domestic violence in the 12 months prior to the study varied substantially across socio-economic groups and areas of residence:

- **Domestic physical violence** was more prevalent among non-working women and men; never-married women and men; women with primary and intermediate education and men with intermediate education; and among women with lower and intermediate levels of wealth and men with lower levels of wealth. It was slightly higher among women and men in rural areas.

- **Domestic psychological violence** was more prevalent among non-working women and men; never-married women and divorced, widowed or separated men; women with primary and intermediate levels of education and men with intermediate levels
of education; and among women with intermediate levels of wealth and men with higher levels of wealth. It was slightly higher among women in rural areas and men in urban areas.

- **Domestic economic violence** was more prevalent among non-working women and men; married women and never married men; women with primary education and men with intermediate levels of education; and among both women and men with lower to intermediate levels of wealth. It was higher among women and men in rural areas.

- **Domestic social violence** was more prominent among non-working women and men; never married women and divorced, widowed or separated men; women with intermediate levels of education and men with intermediate and higher levels of education; and among women with intermediate levels of wealth and men with higher levels of wealth. It was higher amongst men and women in urban areas.

- **Domestic sexual violence** was equally prominent among employed and non-working women and employed men; never married women and divorced, widowed or separated men; women with intermediate levels of education and men with higher levels of education; and among better-off women and men. It was higher amongst men and women in urban areas.

Figures 5-8 below show the incidence of different forms of domestic violence across different population groups in Ghana.

![Figure 5: Incidence of Physical Violence Over the Last 12 Months (Percentages)](image-url)
Figure 6: Incidence of Psychological Violence Over the Last 12 Months (Percentages)

- Women
- Men

Figure 7: Incidence of Economic Violence Over the Last 12 Months (Percentages)

- Women
- Men

Figure 8: Incidence of Social Violence Over the Last 12 Months (Percentages)

- Women
- Men
The analysis of the qualitative and quantitative data suggested that sexual violence was largely considered a private matter. The results above may, therefore, underestimate the true extent of this form of domestic violence.

The study sought to investigate the dominant view that domestic violence was largely perpetrated by men against women. When discussing the research with respondents, the idea of physical violence committed by women against men was often found to be ‘funny’ and sometimes ‘unimaginable’. However, 12% of physical and 37% of psychological domestic violence against males was carried out by their spouse or (former) partner. The qualitative data also found instances of domestic violence committed by women against men.

**Attitudes towards domestic violence**

Respondents overall opposed all forms of domestic violence. However, respondents saw some of the definitions of domestic violence used in the study (and in Act 732) not as violence but as accepted social norms, defence mechanisms or ways of resolving disputes. Only physical violence between partners was consistently perceived as violence. However, some acts of domestic physical violence such as wife-beating were sometimes deemed acceptable, depending on the context. Psychological violence, in particular, was generally perceived as a means of defence and a coping strategy – for women in particular – to ward off physical violence or to claim some autonomy or agency in contexts where women may not have the ability to exert much power.

The study found that women were on average more likely than men to: 1) find wife-beating acceptable (23.1% compared to 13.8%); and 2) blame women for rape if they wore revealing clothes (65.3% of women fully agree compared to 56.2% of men). These findings suggest
that some forms of domestic violence were still considered acceptable in Ghana and that domestic violence in Ghana may persist due to harmful social norms that made women more accepting of abusive relationships. Respondents pointed to the ‘expected’ submissiveness of women within conjugal relationships, women’s roles as primary caregivers (for children) and their economic dependence on men as reasons for them to accept violence.

**Figure 10: Percentage of Respondents Stating that Wife-beating is Acceptable if the Woman...**

![Percentage of respondents graph](image)

**Determinants**

Analysis of the main determinants of domestic violence in Ghana in 2015 combined insights from both quantitative and qualitative data, and included information from multivariate regression analysis.

When controlling for other factors associated with domestic violence it was found that age and intergenerational factors were strong determinants of domestic violence in Ghana. Young women and men (15–19 years old) were substantially more likely than other age groups to report experience of domestic violence. For instance, young women were between 1.3 and 4 times more likely to experience any form of domestic violence than, for instance, women aged 30–39 years.

Exposure to violence in childhood was also found to be strongly related to the likelihood of an individual being a victim of violence in adulthood. For instance women who witnessed any form of domestic violence as children were between 1.3 and 3 times more likely to report domestic violence than women who had not; while men who witnessed social, psychological or economic violence as children were between 1.2 and 2.2 times more likely than other men to have experienced these forms of violence in adulthood. These findings
suggest that Ghana may experience vicious cycles of domestic violence that need to be addressed if further progress is to be made in reducing domestic violence.

Socio-economic factors were also found to be among the most important determinants of domestic violence in Ghana when controlling for other factors, albeit in complex ways, as follows:

- Low asset levels were found to be strong determinants of psychological and economic violence among women. However, high asset levels were associated with higher levels of social and sexual violence among men.

- Women with no education were generally (between 0.5 and 2.5 times) less likely to experience domestic violence than other women. More educated men were more likely to experience economic and sexual violence than less educated men. This may be due to the fact that individuals with more education may also be more likely to report domestic violence, as emphasised in previous studies conducted internationally and in Ghana (La Mattina, 2012).

- Employment status was not found to be a particularly significant determinant of domestic violence, with some exceptions. Women who were not working were 43% more likely to have experienced economic violence than self-employed women, while men who were employed or not working were, respectively, 2 times and 2.5 times more likely to have experienced economic violence than self-employed men.

- The risks of domestic violence incidence increased when alcohol consumption was high.

- Not being married reduced the likelihood of having experienced domestic violence among women and men (e.g. divorced, separated or widowed women were twice as likely to have experienced physical violence than women who were never married, while married or divorced, separated or widowed men were, respectively, 6 times and almost 8 times more likely to have experienced sexual violence than non-married men).

- Women in polygamous relationships were almost twice as likely to experience psychological violence, 3.5 times more likely to have experienced physical violence, and 4.2 times more likely to have experienced economic violence than women who were never married.

- The qualitative analysis suggests factors such as poverty, unemployment and economic shocks and associated tensions were important determinants of domestic violence. Tensions and fights over money or property were found to be a leading cause of all forms of domestic violence.
Domestic violence was also found to be linked to specific moments, festivals, events and seasons, such as Christmas, the beginning of the school year and pay day.

Alcoholism was mentioned in every region, and almost every district, as a particularly problematic determinant of domestic violence, with men who consume excessive levels of alcohol being more likely to commit violence against their wives.

Domestic violence was also associated with non-compliance with gender norms.

Exposure to criminal forms of violence in the community was also significantly associated with higher incidence of domestic violence (e.g. men who reported violence in their communities were two to three times more likely than men in more peaceful communities to report any form of domestic violence).

Overall, the determinants of domestic violence varied considerably among types of violence, emphasising the need for domestic violence legislation in Ghana to continue to distinguish between different forms of violence. Only young age, exposure to domestic violence as a child and high levels of violence in the community were common determinants of domestic violence across all types.

Consequences of domestic violence

There are serious adverse consequences of domestic violence on physical health, including injuries (particularly resulting from physical violence) and illness. The negative effects of domestic violence on physical health were observed almost exclusively among women. For instance, 43.8% of women who had been physically assaulted declared having been ill in the 30 days prior to the survey – a rate that was one third higher than among women who had not been physically assaulted (31.2%).

The results showed a strong correlation between exposure to domestic violence and mental health, particularly among women. Regression analysis suggests that women who experienced economic violence were 94% more likely to suffer from serious mental illness as women who did not experience it. Women experiencing psychological and social violence were 2 times and 1.5 times more likely to suffer from serious mental illness than women who did not experience these forms of violence. Physical and sexual violence had no statistically significant effects on the mental health status of women. Domestic violence did not have statistically significant effects on the mental health status of men, with the exception of physical violence, where those who have experienced physical violence were 5.8 times more likely than men who did not experience physical violence to suffer from serious mental illness.

Domestic violence was found to have adverse consequences on daily life in terms of ability to work, go to school or do domestic work, ability to concentrate on daily activities, levels
of confidence and feelings of living in fear. The effects were larger for women than for men, and for physical violence than for other types of violence. The qualitative data highlighted how domestic violence experienced in the home was overwhelmingly felt to have both short- and long-term impacts on children’s health, education outcome, economic and social well-being.

Use of and access to domestic violence victims’ support services and institutions

The results showed that just over one in every three women and men who experienced domestic violence approached a person or organisation for help or support. The majority of respondents who sought help first approached family members or a friend. However, 9% of women and 14.6% of men first contacted the police for help. Individuals who experienced domestic violence appear to only resort to external help in extreme circumstances because domestic violence was still considered largely a private family matter - 81.1% of respondents believed that “family problems should only be discussed with people in the family”.

Reasons for seeking help included not being able to endure the abuse further (58.3% of women and 53.3% of men), encouragement by friends and family (24.5% of women and 28.5% of men), and the extent of injuries sustained (7.5% of women and 8.0% of men). Reasons for not seeking help included predominantly the fact that individuals considered
the violence as normal or not serious (17% of women and 22.7% of men), and not knowing who to ask (16.4% of women and 10.7% of men).

Distrust of and poor experience with state authorities and public services contributed to not seeking help. Factors for these low levels of trust included the costs of the services, lengthy or ineffective delays in the handling of cases, and corruption. In addition, the Ghana Police Service had only limited logistical support to encourage the proper functioning of the Domestic Violence Victim Support Units (DOVVSUs).

Knowledge of local units of the DOVVSU was lower amongst women who had no education (71.9%, compared to 98.0% for those with higher education) and were in the lowest asset quintile (70.1%, compared to 95.1% for those in the top asset quintile).

**Recommendations**

The causes underlying these levels of domestic violence were complex. The study found that no single factor or process explained domestic violence victimisation – these varied considerably across the different types of domestic violence and depended on (i) personal and socio-economic characteristics of victims, (ii) specific relationship dynamics within families, (iii) norms and structures that operate at the level of the household, the community and the wider society, and (iv) poverty and economic factors that shape prevailing gender and social norms, and access to resources and opportunities by different individuals and social groups. In order to address these complex intersecting factors, policy responses must operate at several levels and sectors.

The next section briefly summarises the various levels of recommendations proposed in the research report, namely strengthening the legislative environment, improving social service support, awareness raising and sensitisation, targeted interventions and future research recommendations.

**Strengthen the legislative environment**

1. The Domestic Violence Act, 2007 (Act 732), should be amended to include social abuse as a specific dimension of domestic violence in the law, as it is the second most predominant form of domestic violence against women and men. The definition used for the study could be used or adapted.

2. Stronger coordination of the implementation of laws and policies to address economic violence, including those relating to abuse of individual property rights within domestic relations. Domestic violence support services should also be better coordinated with ongoing interventions that improve economic conditions for women, as women’s economic
dependence is central to explaining the prevalence and consequences of domestic economic violence.

3. Reinforcement of property laws. There should be a concerted effort to ensure that laws that protect the property rights of spouses upon the death of a spouse are disseminated and enforced. The Property Rights of Spouses Bill, 2013 that seeks to actualise Article 22 of Ghana’s 1992 Constitution should be passed into law as a matter of urgency.

4. Strengthen and enforce laws and practices on economic maintenance. The Domestic Violence Act has provisions against economic violence, and the Children’s Act 1998 has provisions that can be used to hold parents responsible to provide for their children. It is important to enforce these laws alongside each other. A Child Support Unit should be set up to hold non-custodial parents responsible to contribute to the maintenance of their children as set out in the Justice for Children Policy.

5. Reinforce legislation and sensitisation interventions against child marriage. The Ministry of Gender, Children and Social Protection (MoGCSP), alongside other government departments, should continue to undertake research into the issue and formulate appropriate policies to address it, including prohibiting it in the Domestic Violence Act.

6. Strengthen mental health policy in relation to domestic violence. Support should be provided to use psychologists under the Domestic Violence Act and make the cost of accessing their services affordable to victims and perpetrators.

Social services support

1. Improve support available to victims of psychological domestic violence. Awareness needs to be raised about psychological violence so that it is recognised by support services with strengthening of skills for mental health professionals. Greater cooperation is needed between mental health workers, NGOs and police units involved in prevention.

2. Strengthen the involvement of medical practitioners in identifying victims of domestic violence. Cooperation and integration of police and medical practitioners in the identification and reporting is needed. The Domestic Violence Act allows medical practitioners to lodge complaints of domestic violence on behalf of victims.

3. Increase the number, spread, awareness and effectiveness of the DOVVSUs. Only a quarter of survey respondents in rural areas and 36% in urban areas mentioned that the nearest police station had a DOVVSU. It is important that formal state institutions collaborate with more informal community actors in settling disputes, documenting settlements and referring matters where necessary.

4. Increase the capacity of service providers to ensure privacy in units and provide additional support services, such as counselling and shelters. Regulations to the Domestic Violence Act need to show the need for helpline support and information, shelter/refuge
and safe accommodation, short and long-term psychological counselling, legal advice, advocacy and outreach services.

5. Improve trust in public services that support victims of domestic violence. State institutions must engage more directly with how resources are allocated at the local level. A free-phone helpline for people to call in and report cases might also be useful. The government could also consider putting in place incentive programmes to encourage police and health workers to report cases of domestic violence and follow appropriate procedures.

6. Build the response capacity of specialised personnel. Police officer training is required to improve support for victims. The Government should make resources available to strengthen the capacity of the police to effectively respond to domestic violence cases.

7. Improve interagency collaboration. Links should be made between medical facilities, the Police, the judiciary and other institutions mentioned in the National Policy and Plan of Action (NPPOA) on Domestic Violence Act Implementation.

8. Look more closely at the association between domestic violence and community violence. There should be a national policy to address community violence generally, and violence associated with traditional leadership in specific places, since this may result in increased incidence of domestic violence. This requires coordination between different parts of the Ghanaian police dealing with different forms of violence across communities.

**Awareness raising and sensitisation**

1. Extend gender-sensitive legislation and awareness and advocacy programmes to bring attention to non-physical forms of domestic violence. Some prohibited forms of violence were not recognised by the respondents. Awareness campaigns about the importance of non-physical forms of domestic violence should target the public, media, police, health, legislators and other decision makers and stakeholders.

2. Improve education, awareness and advocacy programmes to bring attention to domestic violence against men. The study found a substantial number of men are at risk of domestic violence. To encourage men to come forward, police and support services training on providing a more sensitive response, may be required.

3. Further attention is needed with respect to child protection. Health and education personnel who engage with children should receive awareness-training to identify the signs of domestic violence and know where to go for help.

4. Need for new sensitisation programmes that tackle harmful social norms that drive domestic violence. The study found that violence was often accepted as a social norm when it is in fact damaging. Psychological and sexual violence in particular were under-recognised.
5. Need to continue sensitisation programmes about alcoholism. Alcohol use was frequently mentioned as associated with domestic violence. It should be highlighted that the use of alcohol is not a justification for acts of domestic violence and would therefore not be an acceptable excuse for preventing prosecution for domestic violence violations committed.

6. Reinforce sensitisation programmes about the need to report all forms of domestic violence. Reasons for not reporting include viewing violence as ‘normal’, not knowing where to go, lack of trust, and feelings of shame. Education is needed to change this and people should be encouraged to report all forms of domestic violence.

7. Improve awareness of the 2007 Domestic Violence Act and available services, particularly in rural areas and the northern regions. TV and radio were found to be good means of transmission of information in urban areas (48.3% of urban people were made aware of the Act via television and 67% via radio). TV was less effective in rural areas. This should be particularly targeted to the Upper East and Upper West and Northern regions where only 10.7-12.1% of respondents knew there is a domestic violence law.

8. Need for new sensitisation programmes to reduce acceptance of domestic violence, particularly among women and girls. There should be multi-component interventions and strong cooperation between state agencies and civil society to change the prevalence of harmful gender norms that perpetuate gender inequalities and condone several forms of domestic violence. Examples of interventions include interventions reducing economic dependence and the prevalence of harmful masculinities, and increasing women and girls’ confidence and sense of worth.

9. Further awareness-raising is needed about physical violence against men and children, which is sometimes seen as ‘funny,’ ‘unimaginable’, or as a form of education. This calls for more education and awareness-raising campaigns about the fact that physical violence against anyone, including children, is unacceptable.

**Targeted interventions**

Specific targeting suggested by the results include:

- Target sensitisation programmes in economically less developed areas.
- Target interventions towards adolescents and young adults.
- Strengthen child protection policy in relation to domestic violence.

**Future research recommendations**

1. Explore further the incidence, determinants and consequences of non-domestic forms of violence in Ghana. The study found that a large percentage of women and men
experienced social, physical, sexual, psychological and economic violence in non-domestic settings, suggesting that harmful gender norms that condone the use of domestic violence may also be highly prevalent in the wider society.

2. Establish causality in the determinants and consequences of domestic violence in Ghana. The multivariate regressions produced in the study provided statistical relationships that take into account complex interactions between variables but do not allow the identification of precise causal relations, which would further improve policy action.

3. Further research on the incidence, causes and consequences of, and attitudes towards, sexual violence, particularly against men. This study found that domestic sexual violence exhibited patterns that were different from all other forms of domestic violence. It was difficult to provide a clear explanation for these results without the use of more sophisticated econometric techniques.

4. Further research on the exposure of children to domestic violence. Despite the report’s focus on people aged 15-60 years, the findings – particularly in the qualitative data – highlight the exposure of younger children to domestic violence. Adults surveyed in the GFLHS 2015 were more likely to experience domestic violence if they were exposed directly or indirectly to domestic violence when they were children, suggesting that some families and communities in Ghana may experience the transmission of norms and attitudes across time and generations that reinforce the persistence of domestic violence.