FULFILLING THE COMMITMENT TO CHILD PROTECTION IN GHANA
ACKNOWLEDGEMENTS
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SUGGESTED CITATION
All Ghana’s children have the right to be protected from violence, abuse, exploitation and neglect by anyone in their lives – whether parents, teachers, friends, partners or strangers. These various violations undermine children’s confidence and hinder their development.

Yet, they are often tacitly accepted – due to the familiarity of the perpetrator, the poverty of the family, tradition or social norms – or minimized as inconsequential. And the memory or reporting of these violations may be buried due to shame or fear of reprisal. The impunity of perpetrators and prolonged exposure to violence and abuse may leave victims believing this is their fate or that violence is normal. In this way, violations of children’s rights in Ghana can be hidden in plain sight, making it difficult to prevent or stop them.

The lack of reliable data only exacerbates the problem. Data collection on child protection is a complex undertaking that raises considerable ethical and methodological challenges. That said, the last several years have seen significant progress in documenting the scale and severity of various child rights violations in Ghana. This report uses the most current data to shed light on crucial child protection areas targeted for action: unregistered births, children living without parental care, violence (offline and online), child labour and harmful practices (namely, child marriage and female genital mutilation). It also examines child poverty, which can place children at higher risk of rights violations.

Ghana was the first country in the world to ratify the Convention on the Rights of the Child more than 30 years ago. Since then, it has made tremendous progress in realizing the rights of children in the areas of health (almost universal immunization), education (improved literacy rates) and child protection (improved birth registration). However, statistics reveal that progress has been too slow, uneven and fragmented to make a genuine breakthrough in the child protection field. Girls and boys continue to be married before the age of 18, forced to work on farms or on Lake Volta, targeted by sexual offenders (either online or offline), separated from their families unnecessarily or beaten as a form of discipline.

While the data presented in this report depict the serious situation and challenges faced by Ghanaian children, the commitment of the Government and all those who make children’s protection a priority offers grounds for optimism. For every child and for Ghana’s development, the cost of inaction is too great to be tolerated.

As the Sustainable Development Goals make clear, child protection is a priority and is recognized as a cross-cutting concern. The prevention and reduction of all forms of violence, abuse and exploitation should continue to be at the heart of the Government’s plans and implemented at all levels. It is critical to coordinate effectively, allocate resources to enforce legislation, implement national strategies and evidence-based programmes and increase investments at decentralized levels.

Ensuring that violence in all its forms and exploitation are documented through credible data is the first step in its elimination. We hope that the findings in this report will constitute a key reference to support our joint efforts.

For every Ghanaian child, let’s reimagine and achieve a better future!

Anne-Claire Dufay
UNICEF Representative, Ghana
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CHILD PROTECTION AND THE SUSTAINABLE DEVELOPMENT GOALS
**Goal 5**

**Achieve gender equality and empower all women and girls**

**Target 5.2: Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation**

- Indicator 5.2.1: Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age
- Indicator 5.2.2: Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence

**Target 5.3: Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation**

- Indicator 5.3.1: Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18
- Indicator 5.3.2: Proportion of girls and women aged 15-49 years who have undergone female genital mutilation/cutting, by age

**Goal 8**

**Provide sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all**

**Target 8.7: Take immediate and effective measures to eradicate forced labour, end modern slavery and human trafficking and secure the prohibition and elimination of the worst forms of child labour, including recruitment and use of child soldiers, and by 2025 end child labour in all its forms**

- Indicator 8.7.1: Proportion and number of children aged 5-17 years engaged in child labour, by sex and age

**Goal 16**

**Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels**

**Target 16.2: End abuse, exploitation, trafficking and all forms of violence against and torture of children**

- Indicator 16.2.1: Proportion of children aged 1-17 years who experienced any physical punishment and/or psychological aggression by caregivers in the past month
- Indicator 16.2.3: Proportion of young women and men aged 18-29 years who experienced sexual violence by age 18

**Target 16.9: By 2030, provide legal identity for all, including birth registration**

- Indicator 16.9.1: Proportion of children under 5 years of age whose births have been registered with a civil authority, by age
KEY FACTS ON CHILD PROTECTION IN GHANA
Of all children under age 5, over 1 in 4 (1.2 million) have not had their births registered.

Nearly 90 per cent of children are exposed to psychological aggression, while close to 1 in 5 experience severe physical punishment.

Female genital mutilation affects 1 in 50 girls and women nationally; the practice is concentrated in Upper West and Upper East regions.

Around 1 in 5 children in households do not live with a biological parent.

More than 3,500 children, a slight majority of whom are boys, live in residential homes.

More than 13,000 images and videos of child sexual abuse were reportedly accessed or uploaded from Ghana in 2020.

One in five children are involved in child labour.

One in five young women were married in childhood; child marriage is more common among those who reside in rural areas, live in poor households and have little or no education.

Nearly three quarters of children are considered multidimensionally poor, and nearly two thirds are considered deprived in terms of child protection.
1

Birth registration
Birth registration is the process of making an official and permanent record of a child’s existence under the law. In providing legal proof of a child’s identity, birth registration is a fundamental human right. It also facilitates access to other important rights, including health, education and protection from violence.

In Ghana, birth registration is compulsory under the Registration of Births and Deaths Act, 2020 (Act 1027). Children can be registered by their parents, their caregivers, a person present at their birth or the owner of the premises where they were born. Children must be registered in the district of their birth and within their first year of life. Birth registration is free, but late registration after 12 months carries a fee of 10 Ghanaian cedis (US$1.70).

In Ghana, data on birth registration are available from two primary sources: vital statistics drawn from the Births and Deaths Registry (BDR) and national household surveys. While both are valid sources, substantial differences can be found between estimates of birth registration derived from civil registration systems (such as the BDR) and those captured by household surveys. This is due primarily to the fact that estimates derived from the former typically refer to the percentage of all births that have been registered (often within a specific time frame), whereas the latter often represent the percentage of children under age 5 whose births are registered.

According to BDR records, infant birth registration in Ghana improved from 58 per cent in 2014 to 70 per cent in 2018. However, data from household surveys, which are used in the analysis presented here, indicate infant birth registration rates of 59 per cent in 2014 and 57 per cent in 2017-2018. While the overall number of births registered every year in Ghana has improved, the births of between 200,000 to 300,000 children each year are not being registered by civil registration authorities.

The systematic recording of births and the completeness of records within civil registration systems remain serious challenges in many countries, including Ghana. With a population of close to 30 million, Ghana has 260 districts and 16 regions. Meanwhile, the BDR has less than 350 staff and limited infrastructure. There are 387 registries across the country, with only 216 districts and 10 areas having regional and districts offices. Universal birth registration is thus hindered by the absence of registration offices in communities that are hard to reach and a shortage of registration staff, as well as by the lack of coordination and interoperability between the BDR and the Ghana Health Service.

The Government has introduced an automated infant birth registration system with support from UNICEF and other partners. Most recently, the European Union and the World Bank have been supporting the further strengthening of this system and the digitizing of past records. Act 1027 has provisions for decentralizing the registration of births and setting up a notification system between health service providers and the civil registration system. Additional investments will be required to implement this new Act and expand birth registration services to hard-to-reach areas.
Figure 1.1
In Ghana, over 1 in 4 children under age 5 (1.2 million) are not registered. Over the last 10 years, the levels of birth registration have remained the same, but the proportion of children with birth certificates has increased.

Percentage of children under age 5 whose births are registered, by whether or not they have a birth certificate

Note: Due to rounding, the value for 2006 does not match the number provided in Figure 1.6.
Sources: Demographic and Health Surveys (DHS) 2008 and 2014, Multiple Indicator Cluster Surveys (MICS) 2006 and 2017-2018.

Figure 1.2
Of all infants in Ghana, just under half (about 360,000) have not been registered; no progress has been made to improve the timeliness of birth registration.

Percentage of children under age 1 whose births are registered, by whether or not they have a birth certificate

Birth registration levels are highest among children who come from the wealthiest households, reside in urban areas and have mothers with at least a secondary education.

Percentage of children under age 5 whose births are registered, by background characteristics:

- **Secondary education or higher**: 76%
- **Primary education**: 65%
- **Pre-primary/no education**: 64%
- **48-59 months**: 71%
- **36-47 months**: 75%
- **24-35 months**: 75%
- **12-23 months**: 74%
- **0-11 months**: 57%
- **Richest quintile**: 86%
- **Poorest quintile**: 55%
- **Urban**: 80%
- **Rural**: 64%
- **Boys**: 72%
- **Girls**: 69%
- **Total**: 71%

Notes: Data on education refer to the education level of the mother. Secondary education or higher refers to junior secondary school/junior high school/middle school, senior secondary school/senior high school/secondary and higher education.

Figure 1.4

Birth registration levels are highest in the Upper East region and lowest in Brong Ahafo

Percentage of children under age 5 whose births are registered, by region

- **Brong Ahafo**: 58%
- **Eastern**: 60%
- **Volta**: 67%
- **Western**: 69%
- **Northern**: 71%
- **Central**: 74%
- **Upper West**: 74%
- **Ashanti**: 75%
- **Greater Accra**: 79%
- **Upper East**: 81%

Only around half of mothers of unregistered children know how to register a child’s birth

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secondary education or higher</td>
<td>68</td>
</tr>
<tr>
<td>Primary education</td>
<td>56</td>
</tr>
<tr>
<td>Pre-primary/no education</td>
<td>37</td>
</tr>
<tr>
<td>Richest quintile</td>
<td>86</td>
</tr>
<tr>
<td>Poorest quintile</td>
<td>39</td>
</tr>
<tr>
<td>Urban</td>
<td>74</td>
</tr>
<tr>
<td>Rural</td>
<td>47</td>
</tr>
<tr>
<td>Total</td>
<td>55</td>
</tr>
</tbody>
</table>

Notes: Data on education refer to the education level of the mother. Secondary education or higher refers to junior secondary school/junior high school/middle school, senior secondary school/senior high school/secondary and higher education.
**Figure 1.6**

*Birth registration levels have stagnated since 2008; even with accelerated progress, Ghana is not on track to meet the SDG target of universal birth registration by 2030*

Percentage of children under age 5 whose births are registered, observed and projected

How to read the projections

The projection scenarios build on existing trends. The scenario depicting ‘observed trends continue’ shows expected values if Ghana were to continue on its observed path. The ‘progress is accelerated’ scenario shows expected values if Ghana were to catch up to other countries in the West and Central Africa region that have made at least some progress but are not on track to achieve universal birth registration by 2030. This represents the more ambitious of the two scenarios. Both scenarios account for slowing effects that are to be expected as birth registration levels approach 100 per cent. The projections do not take into account the potential impact of events such as the COVID-19 pandemic, whose broad and likely long-lasting effects on the population are not yet fully understood. Nonetheless, it is worth noting that mitigating measures – such as the closure of non-essential services – are likely to threaten or even derail access to birth registration services for many families.
Children living without parental care
Historically, Ghana’s social welfare system has been based on positive traditional values: Care for children not living with a biological parent was the responsibility of the extended family and community members. As society modernizes, however, the traditional system has weakened, negatively affecting this alternative care approach. As a result, in the absence of a formal alternative care system established by the Government, different models have emerged, notably residential care. The number of residential care facilities has increased exponentially, from 13 in 1996 to 148 in 2006.

In response to this situation, the Government reformed its legal framework to ensure that children can live in a protective family environment and has made significant progress with support from UNICEF, the United States Agency for International Development’s Displaced Children and Orphans Fund (USAID DCOF) and other partners. The adoption of the Children’s Act, 1998 (Act 560) brought about the formal regulation of residential homes for children. This Act was amended in 2016 to incorporate the Hague Convention on inter-country adoption and also introduce other provisions related to adoption as well as to foster care. This paved the way for the Care Reform Initiative as well as additional policies and laws, such as the Child and Family Welfare and the Justice for Children policies in 2015 and the Foster Care and Adoption Regulations in 2018.

The emphasis of the Care Reform Initiative has been on preventing family separation, reintegrating separated children, strengthening the foster care system and setting up a strong adoption system with a focus on local adoptions.

A series of tools and guidelines have accompanied legal and policy changes to strengthen the social welfare workforce, including Case Management Standard Operating Principles (SOP) for children in need of care and protection, Intersectoral SOP for child protection and family welfare, the Roadmap for Deinstitutionalization of Residential Homes for Children (2017-2021), Guidelines for the Deinstitutionalization of Children, the Foster Care Operational Manual, National Standards for Foster Care and the establishment of a Social Welfare Information Management System (SWIMS). In addition, several social protection initiatives have been set up to support families and their children, including the National Health Insurance Scheme, the Livelihood Empowerment Against Poverty (LEAP) programme and the Ghana School Feeding Programme.

Despite these efforts, children in Ghana continue to be placed in residential care. Child protection-related issues, poverty, migration of parents/caregivers or even discrimination on the basis of gender or disability are some of the key drivers resulting in children’s placement in institutions. Much work lies ahead to guarantee that all Ghanaian children have a safe, supportive and loving family.

Children have the right to live and grow in a supportive family environment. In Ghana, residential care is the main form of alternative care for children for whom family or kinship care is not an option.
**Figure 2.1**

It is more common for children who are older, live in wealthier households and have functional difficulties to be living without a biological parent.

Percentage of children aged 0 to 17 years not living with a biological parent, by background characteristics

<table>
<thead>
<tr>
<th></th>
<th>0-4</th>
<th>5-9</th>
<th>10-14</th>
<th>15-17</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does not attend school</td>
<td>8</td>
<td>17</td>
<td>22</td>
<td>25</td>
<td>17</td>
</tr>
<tr>
<td>Attends school</td>
<td>21</td>
<td>19</td>
<td>22</td>
<td>22</td>
<td>18</td>
</tr>
<tr>
<td>With functional difficulties</td>
<td>22</td>
<td>19</td>
<td>22</td>
<td>25</td>
<td>22</td>
</tr>
<tr>
<td>Without functional difficulties</td>
<td>18</td>
<td>17</td>
<td>17</td>
<td>17</td>
<td>18</td>
</tr>
</tbody>
</table>

Roughly 9 per cent of children living in households have lost one or both parents, and 1 per cent have lost both parents. These figures have also remained unchanged since 2006.

The proportion of children in households who do not live with a biological parent has not changed significantly since 2006.

Note: These data refer to the population of children living in households.
Figure 2.2
The vast majority of children without a biological parent in their household are living with grandparents or other relatives

Percentage distribution of children aged 0 to 17 years not living with a biological parent, according to their relationship to the head of the household

Note: These data refer to the population of children living in households.
**Figure 2.3**

Around 4 in 10 children have at least one parent who is either living abroad or in another part of the country

Percentage of children aged 0 to 17 years, by co-residence of parents

<table>
<thead>
<tr>
<th>Both mother and father are living abroad</th>
<th>Only mother is living abroad</th>
<th>Only father is living abroad</th>
<th>At least one parent is living abroad</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.3</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

Notes: Living elsewhere includes parents living abroad as well as those living elsewhere in Ghana. These data refer to the population of children living in households. Source: MICS 2017-2018.
Figure 2.4

Over half of children from the Central region have at least one parent living elsewhere compared to 1 in 4 children in the Northern region

Percentage of children aged 0 to 17 years with at least one parent living elsewhere, by region

Northern: 25
Upper West: 29
Upper East: 34
Western: 41
Brong Ahafo: 42
Volta: 42
Greater Accra: 43
Ashanti: 45
Eastern: 45
Central: 51

Notes: Living elsewhere includes parents living abroad as well as those living elsewhere in Ghana. These data refer to the population of children living in households. Source: MICS 2017-2018.
Ghana has 139 residential homes for children, which are largely concentrated in the Greater Accra region.

Number of residential homes for children in Ghana, by region

Source: Ghana Residential Care Survey, 2019.
Figure 2.6

More than 3,500 children, a slight majority of whom are boys, live in residential homes

Number and percentage of children living in residential homes for children in Ghana, by sex and age

Note: Some figures do not add up to 100 per cent due to rounding.
Source: Ghana Residential Care Survey, 2019.
Figure 2.7

Around 2 in 3 children in residential care have at least one living biological parent

Percentage distribution of children living in residential homes for children in Ghana, by parent survival status

- 27 Both parents alive
- 36 Only one parent alive
- 15 Both parents dead
- 22 Don’t know/missing data

Source: Ghana Residential Care Survey, 2019.

Figure 2.8

Three in four children living in residential homes have been there for more than a year, with an average stay of 10 years

Percentage distribution of children living in residential homes for children in Ghana, by length of time in residential care

- 75 More than one year
- 14 Between 6 months and one year
- 8 Less than 6 months
- 3 Don’t know/missing data

Source: Ghana Residential Care Survey, 2019.
More than half of children in residential care homes are reportedly exposed to violent forms of discipline

Percentage distribution of children aged 1 to 17 years living in residential homes for children in Ghana, by type of discipline experienced in the past month

Source: Ghana Residential Care Survey, 2019.

Around 1 in 5 children in residential homes have difficulty functioning in at least one domain

Percentage of children aged 2 to 17 years living in residential homes for children in Ghana with functional difficulties in at least one domain, by age and sex

Notes: For children aged 2 to 14 years, respondents to the child functioning module were caregivers; for adolescents aged 15 to 17, respondents were the adolescents themselves. Data for children aged 2 to 4 years by sex should be interpreted with caution since they are based on 25-49 unweighted cases.

Source: Ghana Residential Care Survey, 2019.
3

Violence
The UN Convention on the Rights of the Child calls on Governments to protect children from violence in all its forms – physical, emotional, psychological and sexual, as well as neglect. Such violence can occur at home, in schools, in communities or online.

All forms of violence and abuse against children (whether perpetrated by parents, other caregivers and family members, teachers, peers, neighbours or strangers) are preventable. While violence against children has known negative effects in the short and long term, including injury, impaired development, compromised health, negative coping behaviours and mental health issues, it remains an all-too-common part of children’s everyday lives in Ghana and, indeed, in every country in the world.

Ghana has made progress in addressing violence against children since the ratification of the Convention on the Rights of the Child, especially during the last 20 years, with support from UNICEF and other partners. Up until 2012, the framework for responding to and preventing violence against children was not sufficiently coherent. Only small numbers of children were being reached through social welfare, health and law enforcement agencies due to a lack of efficiency throughout the system. In 2012, the Government committed to a systems strengthening approach and developed a more strategic vision for the protection of children from violence, abuse, neglect and exploitation. This led to a review of the legal framework for child protection.

Since the early 2000s, eight key legal and policy developments have taken place, providing a comprehensive framework for protecting children from different forms of violence. These are: the Juvenile Justice Act, 2003 (Act 653); the Anti-Human-Trafficking Act, 2005 (Act 694); the Child and Family Welfare Policy, 2015; the Justice for Children Policy, 2015; The Children’s (Amendment) Act, 2016 (Act 937) and adoption of the Hague Convention on the Protection of Children and Co-operation in Respect of Intercountry Adoption; the Registration of Births and Deaths Act, 2020 (Act 1027); the Cybersecurity Act 2020 (Act 1038); and the inclusion of child protection in the National Medium-Term Development Policy Framework 2018-2021.

These laws and policies have four main purposes: to improve the enabling environment, to strengthen systems providing services to children (social welfare and criminal justice systems), to improve services and to address behaviours that are against children’s best interests.

Legal and policy changes have been accompanied by the mainstreaming of a series of programmes and interventions to prevent and respond to violence against children in the medium term, along with annual action plans of ministries, departments, agencies and districts. There has also been considerable investment by the Government, with support from UNICEF and partners, in high-impact programmes. These include the launching of the Ghanaians Against Child Abuse (GACA) campaign, strengthening the social welfare and criminal justice system workforce, scaling up child protection case management, rolling out integrated social services and introducing a Social Welfare Information Management System (SWIMS) based on Primero™ (an open-source software platform).

Despite the progress outlined above, tackling violence against children in Ghana remains a challenge. Violent discipline at home and in schools is often tolerated and is not prohibited by law in all settings. The services for child victims of violence in criminal and social welfare systems are still not fully accessible and child-friendly. There is also an insufficient allocation of government resources for violence prevention and response services.
Definitions of terms used in this section

Had sex without consent
Had sexual intercourse or other sexual act without him/her being able to give permission.

Had sex without protection
Had sexual intercourse without protection even after he/she asked the other person to use protection.

Had sex because he/she was afraid
Had sexual intercourse or performed a sexual act with someone because of feeling that he/she did not have a choice or he/she was worried about the reaction.

Physically forced sex
Physically forced to have sexual intercourse or perform a sexual act when he/she did not want to.

Forced sex by other means
Otherwise forced to have sexual intercourse or perform a sexual act when he/she did not want to. For example, by being blackmailed, threatened or scared.

Sexual comment
Made inappropriate sexual comments that made him/her feel uncomfortable.

Sexual touching
Touched in an inappropriate and sexual way that made him/her feel uncomfortable.

Non-violent discipline
Explaining why a behaviour is wrong, taking away privileges or not allowing the child to leave the house, or giving the child something else to do.

Violent discipline
Any physical punishment and/or psychological aggression.

Physical punishment
Shaking, hitting or slapping a child on the hand/arm/leg, hitting on the bottom or elsewhere on the body with a hard object, spanking or hitting on the bottom with a bare hand, hitting or slapping on the face, head or ears, and hitting or beating hard and repeatedly.

Severe physical punishment
Hitting or slapping a child on the face, head or ears, and hitting or beating a child hard and repeatedly.

Psychological aggression
Shouting, yelling or screaming at a child, as well as calling a child offensive names such as ‘dumb’ or ‘lazy’. 
Figure 3.1

Eight in 10 Ghanaian children experience a combination of violent and non-violent forms of discipline by their caregivers at home

Percentage distribution of children aged 1 to 14 years, by type of discipline experienced in the past month

- **82** Both violent and non-violent discipline
- **12** Only violent
- **3** Only non-violent
- **3** No discipline


Figure 3.2

Nearly 90 per cent of children are exposed to psychological aggression while close to 1 in 5 experience severe physical punishment

Percentage of children aged 1 to 14 years who experienced violent discipline in the past month, by type

- **94** Violent discipline
- **89** Psychological aggression
- **59** Other
- **17** Severe

**Figure 3.3**

Children with functional difficulties are more likely to experience severe physical punishment

Percentage of children aged 1 to 14 years who experienced severe physical punishment in the past month, by background characteristics

- **Pre-primary/no education**: 18
- **Primary education**: 18
- **Secondary education or higher**: 15
- **With functional difficulties**: 24
- **Without functional difficulties**: 16
- **10-14 years**: 19
- **5-9 years**: 19
- **3-4 years**: 15
- **1-2 years**: 7
- **Poorest quintile**: 19
- **Richest quintile**: 15
- **Urban**: 17
- **Rural**: 16
- **Girls**: 17
- **Boys**: 16
- **Total**: 17

Notes: Data on education refer to the education level of the mother. Secondary education or higher refers to junior secondary school/junior high school/middle school, senior secondary school/senior high school/secondary and higher education. Data disaggregated by functional difficulties refer only to children aged 2 to 14 years. Source: MICS 2017-2018.
Figure 3.4

Exposure to severe physical punishment varies by region, with the highest levels found in Upper West.

Percentage of children aged 1 to 14 years who experienced severe physical punishment in the past month, by region:

- Eastern: 12%
- Brong Ahafo: 14%
- Western: 15%
- Central: 16%
- Northern: 17%
- Ashanti: 18%
- Greater Accra: 19%
- Upper East: 19%
- Volta: 19%
- Upper West: 25%

Nearly 60 per cent of mothers believe that physical punishment is a necessary form of discipline, with no notable differences by background characteristics

Percentage of mothers who believe that physical punishment is necessary to properly raise or educate children, by background characteristics

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-primary/no education</td>
<td>60</td>
</tr>
<tr>
<td>Primary education</td>
<td>61</td>
</tr>
<tr>
<td>Secondary education or higher</td>
<td>57</td>
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<tr>
<td>&lt;25 years</td>
<td>60</td>
</tr>
<tr>
<td>25-34 years</td>
<td>59</td>
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<tr>
<td>35-49 years</td>
<td>58</td>
</tr>
<tr>
<td>50+ years</td>
<td>58</td>
</tr>
<tr>
<td>Poorest quintile</td>
<td>58</td>
</tr>
<tr>
<td>Richest quintile</td>
<td>55</td>
</tr>
<tr>
<td>Urban</td>
<td>58</td>
</tr>
<tr>
<td>Rural</td>
<td>59</td>
</tr>
<tr>
<td>Total</td>
<td>59</td>
</tr>
</tbody>
</table>

Note: Secondary education or higher refers to junior secondary school/junior high school/middle school, senior secondary school/senior high school/secondary and higher education.

Many children are subjected to physical punishment even when their mothers do not think it is a necessary form of discipline; this pattern holds across almost all regions.

Percentage of mothers who believe that physical punishment is necessary to properly raise or educate children and percentage of children aged 1 to 14 years who experienced physical punishment in the past month.

Adolescent girls in Ghana report higher levels of sexual violence than boys, although the experience is common in adolescents of both sexes.

Percentage of girls aged 15 to 19 years who experienced sexual violence in their lifetimes and in the past 12 months, by type


Percentage of boys aged 15 to 19 years who experienced sexual violence in their lifetimes and in the past 12 months, by type

Figure 3.8

Girls and women are more likely than boys and men in Ghana to think a husband is justified in beating his wife under certain circumstances

Percentage of girls and women and boys and men aged 15 to 49 years who believe a husband is justified in beating his wife under certain circumstances


Figure 3.9

Adolescent girls and boys are more likely than older women and men to justify wife-beating

Percentage of girls and women and boys and men aged 15 to 49 years who believe a husband is justified in beating his wife under certain circumstances, by age

Figure 3.10

Justification of wife-beating is more common among women and men living in rural areas and in poor households; women with little or no education are more likely to justify wife-beating

Percentage of girls and women and boys and men aged 15 to 49 years who believe a husband is justified in beating his wife under certain circumstances, by background characteristics

4

Child labour
Child labour is work that is exploitative, dangerous and interferes with or compromises children’s health, schooling and development.

Ghana has ratified both International Labour Organization (ILO) Convention No. 138 on the minimum age for employment and Convention No. 182 on the elimination of the worst forms of child labour. While the minimum age for employment in Ghana is 15 years, the 1998 Children’s Act (Act 560) permits children as young as 13 years to be involved in light work, defined as work that does not affect school attendance and is not likely to harm their health and development. The Children’s Act affords children protection from exploitative labour, night work, dangerous occupations and hazardous activities such as quarrying, mining, construction, working with chemicals, working with heavy machinery or working in bars, hotels and places of entertainment.

Despite these legal provisions, many children work in the formal and informal sectors (fishing, agriculture, services and industries), with the majority across all regions of the country working as unpaid family workers. Key factors that continue to drive child labour in Ghana include household poverty, family dissolution, gender inequalities, social norms and the difficulty of enforcing child labour laws and policies in the informal sector.

The Government has responded by developing the Free Compulsory Universal Basic Education Policy, the Early Childhood Development Policy and the National Social Protection Strategy. In 2010, it initiated the first National Plan of Action for the Elimination of the Worst Forms of Child Labour (2009-2015) and, in 2017, put in place a second National Plan of Action for 2017-2021. With these national plans, Ghana has committed to go further and faster to achieve SDG target 8.7. In addition, several social protection initiatives have been set up, as outlined earlier, as well as educational support, including the Free Senior High School programme, the Ghana School Feeding Programme and Capitation Grants (money given to every public primary school). All these measures are meant to help vulnerable families keep children healthy and in school. While Ghana has seen an increase in the number of children attending school, it has also seen an increase in the number of children mixing work with school.
Definitions of terms used in this section

Child labour
Children engaged in economic activities and/or household chores at or above age-specific hourly thresholds (general production boundary basis), defined as follows:
- Aged 5 to 11 years: children working for at least 1 hour per week in economic activities and/or involved in unpaid household services for more than 21 hours per week
- Aged 12 to 14 years: children working for at least 14 hours per week in economic activities and/or involved in unpaid household services for more than 21 hours per week
- Aged 15 to 17 years: children working for more than 43 hours per week in economic activities.

Economic activities
Paid or unpaid work for someone who is not a member of the household, work for a family farm or business.

Household chores
Domestic work for the household including shopping, cooking, cleaning, washing dishes or clothes, and caring for children or someone who is old or sick. It also includes collecting firewood or fetching water.

Hazardous work
Involvement in any activities that require working with dangerous tools such as knives; operating heavy machinery; exposure to dust, fumes or gas; exposure to extreme cold, heat or humidity; exposure to loud noises or vibrations; working at heights; working with chemicals such as pesticides, glues or explosives; and exposure to other things, processes or conditions harmful to a child’s health or safety.

Working children
Children who participated in any economic activities in the week preceding the survey.
Figure 4.1

In Ghana, around 3 in 10 children are working, with notable differences by rural or urban residence, age and region

Percentage of children aged 5 to 17 years who were working in the past week, by background characteristics

Source: Ghana Living Standards Survey Round 6 (GLSS6), 2012-2013.
Figure 4.2

Around 3 in 4 working children in Ghana are involved in agriculture, forestry and fishing industries

Percentage distribution of children aged 5 to 17 years who were working in the past week, by industry

Source: Ghana Living Standards Survey Round 6 (GLSS6), 2012-2013.
Figure 4.3

One in five children in Ghana are involved in child labour

Percentage of children aged 5 to 17 years involved in child labour, household chores and economic activities at or above age-specific thresholds in the past week, by background characteristics

<table>
<thead>
<tr>
<th></th>
<th>Household chores</th>
<th>Economic activities</th>
<th>Child labour</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>20</td>
<td>22</td>
<td>11</td>
</tr>
<tr>
<td>Boys</td>
<td>15</td>
<td>19</td>
<td>15</td>
</tr>
<tr>
<td>Girls</td>
<td>15</td>
<td>15</td>
<td>11</td>
</tr>
<tr>
<td>5-11 years</td>
<td>8</td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>12-14 years</td>
<td>22</td>
<td>22</td>
<td>20</td>
</tr>
<tr>
<td>15-17 years</td>
<td>26</td>
<td>26</td>
<td>25</td>
</tr>
<tr>
<td>Attending school</td>
<td>20</td>
<td>20</td>
<td>20</td>
</tr>
<tr>
<td>Not attending school</td>
<td>20</td>
<td>20</td>
<td>20</td>
</tr>
<tr>
<td>Urban</td>
<td>9</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Rural</td>
<td>15</td>
<td>15</td>
<td>15</td>
</tr>
<tr>
<td>Richest quintile</td>
<td>33</td>
<td>33</td>
<td>33</td>
</tr>
<tr>
<td>Poorest quintile</td>
<td>21</td>
<td>21</td>
<td>21</td>
</tr>
<tr>
<td>With functional difficulties</td>
<td>21</td>
<td>21</td>
<td>21</td>
</tr>
<tr>
<td>Without functional difficulties</td>
<td>20</td>
<td>20</td>
<td>20</td>
</tr>
</tbody>
</table>

Note: Data on involvement in household chores among 15- to 17-year-olds are not presented since no hourly threshold is set for household chores for children of this age. Source: MICS 2017-2018.
Figure 4.4

The highest level of child labour is found in the Northern region

Percentage of children aged 5 to 17 years involved in child labour in the past week, by region

Greater Accra: 7%
Ashanti: 12%
Western: 16%
Central: 19%
Brong Ahafo: 21%
Eastern: 21%
Volta: 21%
Upper West: 30%
Upper East: 32%
Northern: 42%

**Figure 4.5**

One in five children are working under hazardous conditions; this is more common among children not attending school and in those residing in rural areas and poor households

Percentage of children aged 5 to 17 years working under hazardous conditions in the past week, by background characteristics

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attending school</td>
<td>19</td>
</tr>
<tr>
<td>Not attending school</td>
<td>34</td>
</tr>
<tr>
<td>Richest quintile</td>
<td>7</td>
</tr>
<tr>
<td>Poorest quintile</td>
<td>31</td>
</tr>
<tr>
<td>Urban</td>
<td>10</td>
</tr>
<tr>
<td>Rural</td>
<td>28</td>
</tr>
<tr>
<td>Girls</td>
<td>20</td>
</tr>
<tr>
<td>Boys</td>
<td>22</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>21</strong></td>
</tr>
</tbody>
</table>

5

Harmful practices
Child marriage and female genital mutilation (FGM) are found throughout history and across cultures. Both are harmful practices that violate children’s rights.

Child marriage and FGM are propagated by gender norms that are harmful to girls. Child marriage often pushes girls out of school, leads to adolescent pregnancy and puts them at risk of domestic violence. FGM can lead to serious harm, including excessive bleeding, infection, infertility and even death. These practices rob girls of their childhood and cause harm to families and societies at large.

Ghana’s 1992 Constitution establishes 18 years as the minimum age for marriage, without exception. In 2014, the Government joined the African Union in its pledge to end child marriage and, in 2016, the End Child Marriage Now! campaign was launched. The National Strategic Framework on Ending Child Marriage (2017-2026) is currently guiding cross-sectoral work on this issue. Ending child marriage is a priority for the Government, as evidenced by the President’s Coordinated Programme for Economic and Social Development Policies (2017-2024) and the Medium-Term National Development Policy Framework.

The Criminal and Other Offences Act of 1960 criminalizes the performance of FGM as well as any participation or assistance in its procurement. FGM was designated as a prohibited harmful practice in a 1994 amendment to this Act, and penalties were increased in a subsequent amendment in 2007. Efforts to end both child marriage and FGM are aligned with Ghana’s commitment to reach SDG target 5.3 to eliminate harmful practices by 2030.

As a result of the Government’s commitment and increased investments in education, protection and behaviour change, child marriage and FGM are becoming less common in Ghana. Child marriage has seen a steady decline over the last several decades, from 34 per cent in 1993 to 19 per cent in 2018, though marriage before the age of 15 has declined at a much slower pace, from 8 to 5 per cent. The levels of FGM have also declined rapidly in the Upper West and Upper East regions, and the practice is almost non-existent in other regions of Ghana.

The Government is investing in strategic interventions related to the well-being of adolescent girls, including adolescent health, nutrition, changing social norms and education. These efforts are helping girls to stay in school, or re-enter school if they dropped out because of marriage or pregnancy, and building their skills, agency and support networks. The interventions are also seeking to improve and link girls to gender- and age-appropriate sexual and reproductive health, social welfare and justice services to protect them from sexual and gender-based violence. This cross-sectoral response is designed to address the complex and numerous structural factors driving harmful practices in Ghana. There is still a long way to go, but child marriage and FGM can be eradicated with sufficient political commitment, public support and targeted investments across sectors, particularly education for girls, as shown in the trends for Ghana over the last 20 years.
Figure 5.1a

One in five young women in Ghana were married in childhood; child marriage is more common among those who reside in rural areas, live in poor households and have little or no education.

Percentage of women aged 20 to 24 years who were first married or in union before age 18 (map) and before ages 15 and 18 (bar chart)


Figure 5.1b

Married before age 15  Married at or after age 15, but before age 18

<table>
<thead>
<tr>
<th>Residence</th>
<th>Total</th>
<th>Rural</th>
<th>Urban</th>
<th>Poorest</th>
<th>Second</th>
<th>Middle</th>
<th>Fourth</th>
<th>Richest</th>
<th>None</th>
<th>Primary</th>
<th>Secondary or higher</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>19</td>
<td>27</td>
<td>13</td>
<td>33</td>
<td>28</td>
<td>21</td>
<td>15</td>
<td>5</td>
<td>43</td>
<td>43</td>
<td>13</td>
</tr>
<tr>
<td>Residence</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Poorest</td>
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<td></td>
<td></td>
<td></td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Fourth</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Richest</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
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<td>Primary</td>
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<td></td>
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<td></td>
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<td>Secondary or higher</td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Figure 5.2

Child marriage often takes the form of an informal union, in which a girl lives with a partner as if married

Percentage distribution of ever-married girls aged 15 to 17 years by marital status

Currently living with a man 54

Divorced or separated 21

Widowed 1

Currently married 23

This figure illustrates the types of unions reported by adolescent girls. Data shown are limited to girls aged 15 to 17 years who are currently or were previously in a union. Since these girls are under 18, they are all considered child brides.

Note: Figures do not add up to 100 per cent due to rounding.
Figure 5.3

Most child brides have a spouse who is within 10 years of their own age, but 1 in 5 are married to a man who is at least 10 years older; patterns are similar among women who married in adulthood

Percentage distribution of currently married women aged 20 to 24 years by the age gap between the women and their partners

Note: Some figures do not add up to 100 per cent due to rounding.
**Figure 5.4**

Child marriage has declined over the last several decades in Ghana. Marriage before age 15 is uncommon, but has declined at a much slower pace

Percentage of women aged 20 to 24 years who were first married or in union before ages 15 and 18

![Graph showing trends in child marriage](image)

Notes: Trends in the prevalence of child marriage presented here relied on an age-cohort analysis taking into account data from the Ghana DHS 1988, 1993, 1998, 2003, 2008 and 2014, the Maternal Health Survey (MHS) 2017 and the MICS 2006, 2011 and 2017-2018. From each survey, data on age at marriage were used not only for the cohort aged 20 to 24 years, but for all respondents through age 49 years, which allowed for a calculation of the prevalence of child marriage up to 25 years prior to the time of data collection. Results were validated across surveys for each cohort of women, and inconsistent results were excluded from the calculation of the final trend lines.

**Figure 5.5**

If progress is accelerated, the prevalence of child marriage could drop to 12 per cent by 2030

Percentage of women aged 20 to 24 years who were first married or in union before age 18, observed and projected

![Graph showing projections](image)

How to read the projections

The figures on this page show how the prevalence of child marriage has changed since around 1980, and possible future scenarios. Figure 5.5 shows how the percentage of young women married in childhood has changed and could continue to change through 2050.

The projection scenarios build on existing trends. They show expected values if progress over the past 25 years were to continue (in dark green). Another scenario (in orange) illustrates what is likely to happen if the rate of progress is doubled.

The projections do not take into account the potential impact of events such as the COVID-19 pandemic, whose broad and likely long-lasting effects on the population are not yet fully understood. Nonetheless, it is worth noting that through economic uncertainty, interruption to schooling, disruption of services and other avenues, the pandemic has the potential to threaten progress made thus far against child marriage.

Source: UNICEF analysis based on DHS, MICS and the MHS in Ghana.
Figure 5.6

Regions that have made the greatest progress in reducing child marriage include Brong Ahafo, Upper West, Greater Accra and Ashanti, while Eastern and Northern have made little progress

Percentage of women aged 20 to 24 years who were first married or in union before age 18

Source: UNICEF analysis based on DHS, MICS and MHS.
Figure 5.7

FGM affects 1 in 50 girls and women nationally; the practice is concentrated in the Upper West and Upper East regions

Percentage of girls and women aged 15 to 49 years who have undergone female genital mutilation


Notes: Trends in the prevalence of FGM relied on an age-cohort analysis taking into account data from the Ghana DHS 2003 and MICS 2006, 2011 and 2017-2018. From each survey, data on the experience of FGM were used not only for the cohort aged 15 to 19 years, but for all respondents through age 49 years, which allowed for a calculation of the prevalence of FGM up to 30 years prior to the time of data collection. Results were validated across surveys for each cohort of women, and inconsistent results were excluded from the calculation of final trend lines.

Figure 5.8

Over the past several decades, levels of FGM have declined rapidly in the Upper West and Upper East regions; in other regions, FGM is almost non-existent

Percentage of girls aged 15 to 19 who have undergone female genital mutilation

Notes: Trends in the prevalence of FGM relied on an age-cohort analysis taking into account data from the Ghana DHS 2003 and MICS 2006, 2011 and 2017-2018. From each survey, data on the experience of FGM were used not only for the cohort aged 15 to 19 years, but for all respondents through age 49 years, which allowed for a calculation of the prevalence of FGM up to 30 years prior to the time of data collection. Results were validated across surveys for each cohort of women, and inconsistent results were excluded from the calculation of final trend lines.
Data on FGM among girls under age 15 suggest declines in the practice have continued

Percentage of girls and women aged 0 to 49 years who have undergone female genital mutilation

Information collected on FGM among girls under age 15 reflects their current but not final FGM status. Some girls who have not been cut may still be at risk once they reach the customary age for cutting. Therefore, the prevalence for girls under age 15 is an underestimation of the true extent of the practice.

Since age at cutting varies among settings, the amount of underestimation also varies. In the Upper West region, 90 per cent of cutting occurs before age 5, while in the Upper East, 60 per cent of cutting traditionally occurs after age 10, including nearly 30 per cent that occurs after age 15 (see Figure 5.10). This should be kept in mind when interpreting all FGM prevalence data for this age group.

**Figure 5.10**

FGM is typically performed at younger ages in the Upper West region, while in Upper East it occurs through adolescence

Percentage distribution of girls and women aged 15 to 49 years who have undergone female genital mutilation, by age at which cutting occurred

Note: Some figures do not add up to 100 per cent due to rounding.


<table>
<thead>
<tr>
<th>Age 0–4 years</th>
<th>Age 5–9 years</th>
<th>Age 10–14 years</th>
<th>Age 15+ years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upper West</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>90</td>
<td>8</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Upper East</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>20</td>
<td>33</td>
<td>28</td>
</tr>
</tbody>
</table>

**Figure 5.11**

The vast majority of girls and women in Upper East and Upper West believe FGM should stop; opposition is strong across age groups, and includes both those who have experienced FGM and those who have not

Percentage of girls and women aged 15 to 49 years who have heard of female genital mutilation and say it should be discontinued

Figure 5.12
In most of Ghana, the majority of women have experienced neither child marriage nor FGM; in Upper East and Upper West, some women have experienced both practices

Percentage distribution of women aged 18 to 49 years according to their experiences of child marriage and female genital mutilation


Figure 5.13
In the regions affected by both child marriage and FGM, the proportion of women who have experienced both practices is declining

Percentage of women who experienced both child marriage and FGM

Digital technology offers unprecedented opportunities for education, socialization, civic participation and play. However, new technologies can also expose children to harmful content or practices. Children and adolescents are at risk of cyberbullying, exposure to inappropriate content and online sexual exploitation.

Expansion and adoption of digital technologies have contributed to the promotion, protection and fulfilment of children’s rights. However, the misuse of technology by sexual offenders is enabling unprecedented access to children. Ghana has seen a steady rise in the cases of online child sexual exploitation and abuse (OCSEA) or abuse that is assisted by technology.

In response to the need for evidence to inform advocacy, policy and interventions and to address the knowledge gap, Ghana conducted a survey on children’s online experiences in 2017. The survey found that one in three children in the country use the Internet at least every week, either at home or through inexpensive, easily available smartphones. On average, children in Ghana start using the Internet at age 12. While the majority (about 7 in 10) use the global web to learn, connect with friends and create online content, many are also at risk of being exposed to harmful and abusive content. Such findings have informed interventions and programming to prevent and respond to online child abuse and exploitation.

Since the launch of the survey, the Government has taken steps to prevent and protect children’s online experiences including through a National Cybersecurity Awareness Programme dubbed ‘A Safer Digital Ghana’. The different interventions aim to ensure that digital technologies are not misused to facilitate sexual exploitation and abuse of children. Some of them aim to empower children to use digital technologies in a way that is free from bullying and harassment.

Since 2018, Ghana has been working to strengthen the legal and policy regime to address OCSEA. The recently passed Cybersecurity Act, 2020 (Act 1038) has provisions that criminalize online grooming of children, online enticement of children for sexual abuse, sextortion and the production, viewing and distribution of child sexual abuse material. In addition, the Government has also introduced a National Child Online Protection Framework.

The National Cybersecurity Centre has established an incident-reporting portal that allows victims to report online abuse. Ghana has also launched the Internet Watch Foundation Reporting Portal for the removal and reporting of child sexual abuse material being accessed from Ghana but hosted outside the country. To address the general lack of sufficient resources dedicated to preventing and addressing online child exploitation, a Child Protection Digital Forensic Lab has been established within the Criminal Investigation Department of the Ghana Police Service to facilitate investigations, provide solid evidence to prosecute criminals and combat OCSEA.

Some of the areas that will require additional focus moving forward include capacity strengthening of the social welfare workforce and law enforcement to tackle OCSEA and improving the implementation of policies and laws. Further, Ghana will need to strengthen the systems to prevent, detect, block and remove child sexual abuse material from the Internet.
**Figure 6.1**

More than 13,000 images and videos of child sexual abuse were reportedly accessed or uploaded from Ghana in 2020

Number of reported child sexual abuse-related materials uploaded from Ghana, by year

<table>
<thead>
<tr>
<th>Year</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td>750</td>
</tr>
<tr>
<td>2017</td>
<td>1,300</td>
</tr>
<tr>
<td>2018</td>
<td>4,500</td>
</tr>
<tr>
<td>2019</td>
<td>12,707</td>
</tr>
<tr>
<td>2020</td>
<td>13,178</td>
</tr>
</tbody>
</table>

Notes: Child sexual abuse-related materials include photos, videos and other materials. These figures could be affected by the use of proxies or anonymizers that mask the true location from which the content was uploaded.


**Figure 6.2**

The most common risky online practice reported by children between the ages of 9 and 17 was looking for new friends or contacts on the Internet

Percentage of children aged 9 to 17 years who engaged in risky online practices at least every week, by sex

<table>
<thead>
<tr>
<th>Practice</th>
<th>Total</th>
<th>Boys</th>
<th>Girls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pretended to be a different kind of person online from who I really am</td>
<td>14</td>
<td>15</td>
<td>11</td>
</tr>
<tr>
<td>Sent a video or photo of myself to someone I have never met face-to-face</td>
<td>18</td>
<td>21</td>
<td>16</td>
</tr>
<tr>
<td>Sent my personal information to someone I have never met face-to-face</td>
<td>22</td>
<td>25</td>
<td>19</td>
</tr>
<tr>
<td>Added people I have never met face-to-face to my friends or contacts</td>
<td>32</td>
<td>36</td>
<td>27</td>
</tr>
<tr>
<td>Looked for new friends or contacts on the Internet</td>
<td>40</td>
<td>46</td>
<td>35</td>
</tr>
</tbody>
</table>

Figure 6.3

Certain types of risky online practices, such as searching for and adding new friends or contacts, are more commonly reported by older children

Percentage of children aged 9 to 17 years who engaged in risky online practices at least every week, by age

Figure 6.4

Around 1 in 3 children said they had contact on the Internet with people they had not met in person, while 1 in 5 admitted to having met someone in person whom they had first got to know on the Internet

Percentage of children aged 9 to 17 years who have ever had contact on the Internet with someone they had not met face-to-face and the percentage of children aged 9 to 17 years who have ever met anyone face-to-face whom they first got to know on the Internet, by sex and age

Figure 6.5

One in six children were reportedly treated in a harmful way online within the past year

Percentage of children aged 9 to 17 years who said they had been treated online in a harmful way or in a way they did not like within the past year, by sex and age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Boys</th>
<th>Girls</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-17 years</td>
<td>20</td>
<td>14</td>
<td>16</td>
</tr>
<tr>
<td>12-14 years</td>
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<tr>
<td>9-11 years</td>
<td>12</td>
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<td>12</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>16</strong></td>
<td><strong>14</strong></td>
<td><strong>15</strong></td>
</tr>
</tbody>
</table>

Child poverty
Child poverty is not only an extremely serious issue because it affects children’s current living standards; it also has negative consequences over the medium and long term. Children who live in extreme poverty are twice as likely as wealthier children to die before reaching adulthood and are more likely to lack skills and earn lower wages over their lifetimes. Approximately three in four children in Ghana are identified as multidimensionally poor, facing at least three deprivations at the same time, and nearly two thirds of children under age 5 are considered deprived in terms of child protection.8

Ghana aims to reduce the multidimensional poverty rate by at least half by 2030.9 In recent years, it has made significant inroads to reduce the monetary poverty of children and adults. In 1991, 53 per cent of the national population was considered monetarily poor, but by 2017 that percentage had dropped to 23 per cent. Extreme poverty also declined from 38 per cent to 8 per cent over the same period. Ghana was the first sub-Saharan African country to reach the Millennium Development Goal of cutting extreme poverty in half. Still, progress stalled between 2013 and 2017, and monetary poverty increased in the regions of Brong Ahafo, Northern, Upper East, Upper West and Volta. Beyond monetary support, children require access to certain goods and services if they are to develop fully and realize their rights.

The Government, with support from partners, has started a number of groundbreaking initiatives to support families and their children, including the National Health Insurance Scheme, Free Senior High School programme, LEAP programme, Labour-Intensive Public Works Programme, Ghana School Feeding Programme and Capitation Grants. All these interventions address one or more dimensions of child poverty. However, more work needs to be done to improve the condition of families and children.

Data on multidimensional poverty provide a clearer picture of children’s actual experiences. They enable the Government to develop more effective programming and policy responses that target the three quarters of children in Ghana who are considered multidimensionally poor.10

Over 300 million children around the globe survive on less than $1.90 a day, and almost 1 billion children are considered ‘multidimensionally poor’ – that is, deprived in terms of nutrition, health, learning and development, water, sanitation, housing, information and child protection.7
**Figure 7.1**

*One in four children in Ghana live in monetary poverty*

Percentage of population and percentage of children aged 0 to 17 years who are monetarily poor.

![Bar chart showing poverty levels among children and overall population.](chart)

Note: A child is considered monetarily poor if he/she lives in a household where consumption is less than 1,314 Ghanaian cedis per person per year (less than $234).


**Figure 7.2**

*Poverty levels are highest in the Upper West region, with rural residents most affected*

Percentage of children aged 0 to 17 years who are monetarily poor, by place of residence and by region.

<table>
<thead>
<tr>
<th>Region</th>
<th>Rural</th>
<th>Urban</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upper West</td>
<td>78</td>
<td>10</td>
<td>28</td>
</tr>
<tr>
<td>Northern</td>
<td>67</td>
<td></td>
<td>28</td>
</tr>
<tr>
<td>Upper East</td>
<td>58</td>
<td></td>
<td>28</td>
</tr>
<tr>
<td>Volta</td>
<td>41</td>
<td></td>
<td>28</td>
</tr>
<tr>
<td>Brong Ahafo</td>
<td>33</td>
<td></td>
<td>28</td>
</tr>
<tr>
<td>Western</td>
<td>25</td>
<td></td>
<td>28</td>
</tr>
<tr>
<td>Central</td>
<td>17</td>
<td></td>
<td>28</td>
</tr>
<tr>
<td>Eastern</td>
<td>15</td>
<td></td>
<td>28</td>
</tr>
<tr>
<td>Ashanti</td>
<td>15</td>
<td></td>
<td>28</td>
</tr>
<tr>
<td>Greater Accra</td>
<td>4</td>
<td></td>
<td>28</td>
</tr>
</tbody>
</table>

CHILD POVERTY

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Figure 7.3

Monetary poverty is more common among children living in larger households

Percentage of children aged 0 to 17 who are monetarily poor, by household size

Note: A child is considered monetarily poor if he/she lives in a household where consumption is less than 1,314 Ghanaian cedis per person per year (less than $234).
**Figure 7.4**

Male-headed households are more likely to be monetarily poor than households headed by women

Percentage of children aged 0 to 17 years who are monetarily poor, by the sex of the household head and by the education level of the household head

![Bar chart showing percentage of children aged 0 to 17 years who are monetarily poor, by the sex of the household head and by the education level of the household head.](chart)


**Figure 7.5**

Three out of four children in Ghana are multidimensionally poor

Percentage of children aged 0 to 17 years who experience deprivation, by number of deprivations

- Deprived in at least 1 dimension: 98
- Deprived in at least 2 dimensions: 89
- Deprived in at least 3 dimensions: 73
- Deprived in at least 4 dimensions: 49
- Deprived in at least 5 dimensions: 26
- Deprived in at least 6 dimensions: 10
- Deprived in at least 7 dimensions: 3
- Deprived in all 8 dimensions: 1

Notes: Children can be deprived in terms of nutrition (only among children aged 0 to 4 years), health, learning and development, water, sanitation, housing, information and child protection (only among children aged 0 to 14). A child is considered multidimensionally poor if he/she is deprived in at least three dimensions.

Figure 7.6a

The most common form of deprivation among children of all ages is the lack of improved sanitation facilities

Percentage of children aged 0 to 4 years who are multidimensionally poor, by dimension


Figure 7.6b

Percentage of children aged 5 to 11 years who are multidimensionally poor, by dimension

**Figure 7.6c**

Percentage of children aged 12 to 14 years who are multidimensionally poor, by dimension

- **At least 3 dimensions**: 70
- **Sanitation**: 82
- **Housing**: 55
- **Water**: 51
- **Protection**: 51
- **Learning and development**: 46
- **Health**: 39
- **Information**: 16


**Figure 7.6d**

Percentage of children aged 15 to 17 years who are multidimensionally poor, by dimension

- **At least 3 dimensions**: 70
- **Learning and development**: 83
- **Sanitation**: 82
- **Housing**: 52
- **Water**: 47
- **Health**: 40
- **Information**: 14

Conclusion

A sustained commitment to children’s rights

Ghana was the first country to ratify the Convention on the Rights of the Child in 1990. It is also party to many other international instruments relating to child protection, including the African Charter on the Rights and Welfare of the Child, the Convention on the Elimination of All Forms of Discrimination against Women, the Convention against Transnational Organized Crime and ILO Convention No. 182 on the Worst Forms of Child Labour. Ghana is also a signatory to the 2030 Agenda for Sustainable Development.

The 2014-2018 Shared Growth and Development Agenda identified the establishment of a comprehensive National Child Protection Policy as a crucial step. The process commenced in 2013 and is a clear indication of the Government’s commitment. This new policy framework is based on the Child and Family Welfare Policy and the Justice for Children Policy.

In October 2017, the President of Ghana presented the Coordinated Programme of Economic and Social Development Policies (2017-2024) to Parliament. This pivotal initiative includes numerous planned interventions related to child and family welfare issues, such as preventing harmful practices (including child marriage and FGM); improving the inclusion of children with disabilities; increasing access to education and educational materials for children without parental care and other vulnerable children and for those with special needs; introducing a decentralized Integrated Social Services Programme for children, families and vulnerable adults; promoting justice for children; and improving the birth registration system.

As the data in this document indicate, significant progress has been achieved over the last couple of decades, especially in reducing the prevalence of child marriage and FGM, and increasing under-5 birth registration. However, some challenges remain that affect children’s development and well-being. Girls (especially adolescent girls) clearly emerge as the most vulnerable group due to sociocultural attitudes and gender discrimination.

The broad acceptance of physical and corporal punishment remains a challenge, and in many protection areas – such as adolescent pregnancies and child labour – indicators have not seen improvements in the well-being of children at the expected rate.

Traditional kinship and extended family care practices offer valuable support systems for vulnerable children. Such care arrangements need to be formalized to better protect children. These traditional values could also be used to set up a robust formal foster care system. Residential care of children as an alternative care option must always be considered a last resort.

Pathways to change

As indicated above, the Government of Ghana has demonstrated its commitment by strengthening the legal and policy environment to protect children. It has also made groundbreaking investments in addressing different dimensions of vulnerability. A review of the existing policies and plans indicates three pathways to change that will improve the protective environment for children in Ghana:

- Increase budget allocations to metropolitan, municipal and district assemblies to improve birth registration and strengthen the prevention of and response to sexual violence, child labour and adolescent pregnancies
- Enhance the capacity of the social welfare, justice and birth registration workforce to provide accessible and responsive services to children and families
Facilitate a better understanding of violence against and abuse of children within families, especially sexual violence and sexual violence online, and encourage communities and businesses to prevent and address child rights risks.

The COVID-19 pandemic has brought economic uncertainty, interruptions to schooling and disruptions to essential health, social welfare and justice services. These factors threaten to derail progress made thus far. Nevertheless, there is no denying the fact that support for strengthening the child protection system in Ghana has gained momentum. Continued focus and investment will help fulfil the promises made to every girl and boy by the Government in signing the Convention on the Rights of the Child, and build a robust child protection system capable of withstanding inevitable future challenges.

Role of UNICEF

UNICEF works with the Government and partners (other development partners, businesses and civil society and non-governmental organizations) to strengthen Ghana’s child protection system and support girls, boys and their families to reach their full potential. These efforts are linked to the United Nations Sustainable Development Framework and the SDGs as well as to the UNICEF-Government of Ghana Country Programme (based on the SDGs, the Convention on the Rights of the Child and other international commitments). These efforts also contribute to the UNICEF West and Central Africa regional office’s Key Results for Children related to increased infant birth registration and ending sexual violence and child marriage.
Technical notes and data sources

This publication is based primarily on data from the Multiple Indicator Cluster Survey (MICS) 2017-2018. Demographic data are from the United Nations, Department of Economic and Social Affairs, Population Division, World Population Prospects 2019, online edition, revision 1.

Confidence intervals are not shown in this publication. Caution is therefore warranted in interpreting the results since apparent differences among groups may not be significant. Key messages were developed taking confidence intervals into account; in cases where the title indicates a difference among various population groups or regions, it has been confirmed as statistically significant.

The data source on working children is the Ghana Living Standards Survey Round 6 (GLSS6), 2012-2013.

The data source used to report on adolescents’ experiences of sexual violence is the Ghana Family Life and Health Survey, implemented by the UK’s Institute of Development Studies, the Ghana Statistical Service and Associates in 2015. The survey was administered to a representative sample of women and men between the ages of 15 and 60 years. It included both a household questionnaire and individual questionnaires for women and men. The questionnaires were based on a number of existing surveys and studies, namely the World Health Organization’s 2005 Multi-Country Study on Women’s Health and Domestic Violence against Women, the Demographic and Health Survey, the MICS attitudes towards domestic violence module, the 1998 study on violence against women and children in Ghana, and modules used in surveys implemented by research team members elsewhere. The survey achieved an overall response rate of 98.5 per cent.

The primary data source used in the section on child online protection is a national survey implemented in 2017 by the Ministry of Communications, Global Kids Online and UNICEF Ghana. The representative sample for the quantitative survey consisted of 2,000 children aged 9 to 17 years. The questionnaire was adapted from the Global Kids Online research toolkit.

The data source on monetary poverty for the section on child poverty is the Ghana Living Standards Survey Round 7 (GLSS7), 2016-2017, while estimates on multidimensional poverty are based on an analysis of data from MICS 2017-2018 conducted by the National Development Planning Commission and the Ghana Statistical Service, in collaboration with UNICEF Ghana.

Endnotes

4 ‘Sextortion’ takes different forms, but at its core it is the threat to expose sexual images in order to make a person do something. These threats come from both strangers met online and from once-intimate romantic partners attempting to harass, embarrass and control victims.
5 Child sexual abuse material (legally known as child pornography) refers to any content that depicts sexually explicit activities involving a child. Visual depictions include photographs, videos, digital or computer-generated images indistinguishable from an actual minor. These images and videos that involve the documentation of an actual crime scene are then circulated for personal consumption.
8 For children under 5 years of age, a child is said to be deprived in the child protection dimension if he/she has been in the care of another child younger than 10 years of age for more than one hour at least once in the last week; or has no birth certificate (including registration with the Births and Deaths Registry); or has been physically abused as a form of punishment.
10 Ibid.