

**SCHOOL OF GRADUATE STUDIES AND RESEARCH**

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**THE PREVALENCE OF TRANSACTIONAL SEX AND ITS  
IMPLICATIONS FOR FEMALE TRADE APPRENTICES IN THE BONO  
REGION-A CASE STUDY OF THE SUNYANI METROPOLIS**

**BY**

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**A DESERTATION SUBMITTED TO THE SCHOOL OF GRADUATE STUDIES AND  
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## **CANDIDATE'S DECLARATION**

I hereby declare that this dissertation was undertaken by me, under the supervision of Dr. Collins Adu-Bempah Brobbey. Where other people's references are made, full acknowledgement has been given. I wish to state that all omissions and shortfalls in this work are entirely mine.

Therefore, I declare that this dissertation is the result of my own original work and that no part of it has been presented for another degree in this institution or elsewhere.

.....

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**PRINCE GEORGE SAGOE**

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**SUPERVISOR'S CERTIFICATION**

I hereby certify that the preparation of this dissertation was supervised by me in accordance with the guidelines of supervision of dissertation laid down by the School of Graduate Studies and Research, Ghana Institute of Journalism.

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**DR COLLINS ADU-BEMPAH BROBBEY**

**DATE**

**(SUPERVISOR)**

## **DEDICATION**

I dedicate this dissertation firstly to my family who have supported me throughout my new designation as a school boy. I single out my daughter Nana Araba Otuaa particularly for her affection and many kind words of encouragement.

Secondly, I dedicate this to the man who started me on my journey into Social and Behaviour Change Communication-the great Jake Otanka Obetsebi Lamptey, who was unstinting in his expenditure on my training, and always expected the best.

Finally I dedicate it to my mates of the MADC Class of 2021. They made me feel young and vibrant again with all their pranks and stickers.

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“Thanks to life, which has given me so much.

It gave me sound and the alphabet.

With them the words that I think and declare:

"Mother," "Friend," "Brother" and the light shining.

The route of the soul from which comes love.”

*“ Gracias a la vida”- Mercedes Sosa*

Being alive alone is an adventure, and I thank the Almighty who has given me life. No matter my circumstances, I will try and be another Job.

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## ACRONYMS

AIDS	Acquired Immunodeficiency Syndrome
AGYW	Adolescent Girls and Young Women
CDC	Centers for Disease Control and Prevention
DHS	Demographic and Health Survey
HIV	Human Immunodeficiency Virus
IG-S	Inter-generational (IG)-sex
IPV	Intimate Partner Violence
JHS	Junior High School
SHS	Senior High School
STD	Sexually Transmitted Diseases
STI	Sexually Transmitted Infection
TS	Transactional Sex
VD	Venereal Disease
WHO	World Health Organization

## ABSTRACT

This study focused on the prevalence of Transactional Sex and its implications for Female Trade Apprentices using the Sunyani Metropolis in the Bono Region as a case study. Transactional sex, is not the same as Prostitution. In prostitution, the client pays as he calls , and there is rarely any romantic entanglements. In Transactional sex however, the female provides sex to the male in exchange for gifts and financial inducements, nonetheless, it is the female's prerogative (agency) to accept the proposal of the male or not, and the relationship is long-lasting, and has a romantic inflection. The literature claims that females engaged in transactional sex, often have no power, or control of the relationship, and are abused in what is described as intimate partner violence. They are also noted to often have more than one male friend at a time, who invariably may be from five or more years older than the female (Intergenerational sex). However, the point of departure of this study, is that the females exercise some appreciable level of control and power over the relationship, they are not beaten nor excessively controlled by their male partners, and rarely date more than one man at a time. This is a departure from the usual claims one finds in the literature. Accordingly, ,this study investigates the differences in the practice of Transactional Sex and its implications for Female Trade Apprentices in the Sunyani Metropolis in the Bono Region. This study employed peer reviewed articles, newspaper reports, internet news portals, websites and a quantitative approach based on a survey questionnaire. Findings and information from existing literature do not only affirm that transactional sex is prevalent in the metropolis but also, has a pernicious effect on females - For instance, many ladies get used to the fact that several men contribute to their upkeep, so when they marry, they find it difficult to be content with the support of one man. This leads to the breakdown of many relationships. One lady said she took on a second boyfriend because she and her permanent boyfriend were facing financial challenges. This indicates that she is in a relationship with more than one man, at the same time, which could

expose her to sexually transmitted infections including HIV and AIDS, a major claim in most literature. In conclusion, though a few of such cases occur, they are not indicative of the general. It is recommended that further qualitative study be done to dig deeper into causes and drivers of transactional sex.

**Keywords:** Prevalence; Implications; Transactional Sex; Prostitution; Female Trade Apprentices; Sunyani Metropolis; Ghana; HIV and AIDS; Client; Intergenerational Sex; Agency; Prerogative; Boyfriend; Partner; Romantic Reflection; Long-lasting Relationship  
Pay as you call

## CHAPTER 1

### GENERAL OVERVIEW AND BACKGROUND TO THE STUDY

#### 1.0. Introduction

Transactional sexual relationships are non-commercial relationships in which sex is demanded mostly by men and exchanged for cash, goods, services, commodities, or privileges mostly by women for the purpose of meeting the needs of men and women involved in the relationships. Transactional sexual relationships has been widely reported across the world and linked to several adverse sexual and reproductive health outcomes such as increasing sexually transmitted infections including HIV/AIDS and intimate partner violence and several socio-economic exploitative practices (Ige, and Solanke, 2020).

A volume of literature attests to the fact that females aged 15 to 24 years in sub-Saharan Africa continue to be disproportionately affected by HIV. A growing number of studies have suggested that the practice of transactional sex all over Africa, including Ghana may largely explain females heightened risk (Wamoyi et al., 2016; Drakes et al., 2013).

Moreover, evidence shows that in sub-Saharan Africa, widespread poverty, gender-based violence, and risky sexual experimentations are some of the factors that increase the vulnerability of young women to sexually transmitted infections (Okigbo et al.,2014).

Further studies state that Transactional sex is mainly inter-generational, involving older males and young females. However it is claimed that higher education tends to mitigate this tendency as a study in Barbados for instance, has shown. The study further proved that for every year at which first sex was delayed the incidence of IG-sex reduced by half (Drakes et al., 2013).

## **1.1. Statement of Problem**

“HIV continues to disproportionately affect adolescents and young people in many countries. About a third of new HIV infections are in people aged 15-25 years. In almost all countries where HIV affects many groups, young women aged 15–24 years are three to five times more likely than their male counterparts to have HIV. In sub-Saharan Africa, 71% of new infections are in adolescents. As the world’s population of adolescents grows, particularly in East and southern Africa, high incidence among young people will equate to rises in the absolute numbers of new infections. Efforts to address this problem must tackle structural issues, such as keeping girls in school, and prevention of gender-based violence alongside greater access to sexual and reproductive health services. Listening to the voices of young women and including them in programme design and implementation is essential if services are to be acceptable and effective.”

HIV is affecting increasing numbers of women and girls. Women now make up 50% of the people currently infected. In sub-Saharan Africa, young women are three times more likely to be infected with HIV than young men. This rises to four times more likely in Zambia and in women and coercive sexual relations contribute to a more rapid spread of HIV. They also hinder poverty reduction and negatively affect the education and health outcomes for children.

Empowering women and equitable relations between men and women at national, local and household levels are urgently required to contain and reverse the AIDS epidemic. This study focused on the prevalence of Transactional Sex and its implications for Female Trade Apprentices using the Sunyani Metropolis in the Bono Region as a case study. Transactional sex, is not the same as Prostitution. In prostitution, the client pays as he calls, and there is rarely any romantic entanglements. In Transactional sex however, the female provides sex to the male in exchange for gifts and financial inducements, nonetheless, it is the female’s prerogative

(agency) to accept the proposal of the male or not, and the relationship is long-lasting, and has a romantic inflection. The literature claims that females engaged in transactional sex, often have no power, or control of the relationship, and are abused in what is described as intimate partner violence. They are also noted to often have more than one male friend at a time, who invariably may be from five or more years older than the female (Intergenerational sex). However, the point of departure of this study, is that the females exercise some appreciable level of control and power over the relationship, they are not beaten nor excessively controlled by their male partners, and rarely date more than one man at a time. This is a departure from the usual claims one finds in the literature. Accordingly, this study investigates the differences in the practice of Transactional Sex and its implications for Female Trade Apprentices in the Sunyani Metropolis in the Bono Region.

## **1.2 Research Questions**

1. Does the phenomenon of transactional sex really exist?
2. If the practice of transactional sex exist, how is it manifested, and what are the dynamics.? Is it possible to use this knowledge of transactional sex, to empowered possible young ladies that, so they are better placed to negotiate the intricacies of the relationship and prevent the worst results of the relationship - Intimate Partner Violence, and STIs and HIV and AIDS? (As claimed in the literature)
3. Do any of the respondents find the practice of transactional sex as described in the literature objectionable? How far they are willing to go not to enter such a relationship, or to break free, if they are already in such a relationship.

4. Does society at large (reference group) find the behaviours associated with transactional sex, and the phenomenon itself acceptable or not?

### **1.3. Research Objectives**

1. This research explores the existence and understanding of the phenomenon of transactional sex, so it becomes a baseline for possible future behaviour change interventions?
2. This research ascertains and examines the understanding and the dynamics of transactional sex, so that, if possible young ladies are empowered to better negotiate the intricacies of the relationship and prevent the worst results of the relationship - Intimate Partner Violence, and STIs and HIV and AIDS. (As claimed in the literature)
3. This research investigates if any of the respondents finds the practice objectionable, and ascertain how far they are willing to go not to enter such a relationship, or to break free, if they are already in such a relationship.
4. Finally, this research investigate if society at large (reference group) finds the behaviours associated with transactional sex, and the phenomenon itself acceptable or not.

### **1.4 Scope of Study**

This study focused on the prevalence of Transactional Sex and its implications for Female Trade Apprentices using the Sunyani Metropolis in the Bono Region as a case study. Transactional sex, is not the same as Prostitution. In prostitution, the client pays as he calls ,

and there is rarely any romantic entanglements. In Transactional sex however, the female provides sex to the male in exchange for gifts and financial inducements, nonetheless, it is the female's prerogative (agency) to accept the proposal of the male or not, and the relationship is long-lasting, and has a romantic inflection. The literature claims that females engaged in transactional sex, often have no power, or control of the relationship, and are abused in what is described as intimate partner violence. They are also noted to often have more than one male friend at a time, who invariably may be from five or more years older than the female (Intergenerational sex). However, the point of departure of this study, is that the females exercise some appreciable level of control and power over the relationship, they are not beaten nor excessively controlled by their male partners, and rarely date more than one man at a time. This is a departure from the usual claims one finds in the literature. Accordingly, this study investigates the differences in the practice of Transactional Sex and its implications for Female Trade Apprentices in the Sunyani Metropolis in the Bono Region.

### **1.5. Justification of the Study**

Others were actually fearful of irritating their male patrons, because they were afraid of losing their sponsorship and therefore their source of livelihood.

One can also refer reports in various newspapers of a number of females who have been murdered by their male partners recently, because the ladies had decided to end the relationship with their boyfriends, who felt because they had provided financial support, the ladies were their bona fide properties.

According to the final Domestic Violence Report 2016, "Domestic violence causes immediate devastating consequences to those affected: physical injuries, mental health problems and poor

well-being, to name but a few. But it also has long-term, far-reaching effects, including persistent inequalities between men and women, which limit women and girls' abilities to fulfil their potential. Those who experience domestic violence have longer-term poor physical and mental health, higher risk of contracting HIV and sexually transmitted diseases, and restricted choices in terms of accessing education and jobs. It is also likely that they will have lower levels of education, income and productivity. These consequences are not only life-changing for the women and men concerned, but also for their families, communities and wider societies, as gender inequalities become entrenched.”

One may ask why I chose that topic instead of one that focuses directly on communication. As per Schiavo, development communication is “a multidisciplinary and multifaceted approach to reach different audiences & share health-related information with the goal of influencing, engaging, and supporting individuals, communities, health professionals, special groups, policy-makers and the public to champion, introduce, adopt, or sustain a behaviour, practice, or policy that will ultimately improve health outcomes” (Schiavo, 2007, p.7).

This topic and research therefore will provide the basic information, that would allow one to design a programme that would address a very important or pertinent issue that is quite predominant in many societies including ours.

Reading through the literature, there is a preponderance of studies on students in tertiary institutions, and some on secondary schools. I did not see any on girls learning trades. Looking at their ages however, one would notice that they are in the same age cohorts as those in senior secondary forms as well as those in tertiary institutions. All things being equal, they would have similar needs. If their contemporaries are engaging in transactional sex to fulfil their

needs, would they be engaged in similar practices? This is a question, that I think is worth answering through this research.

### **1.6. Broad Narrative of the Study**

The First Chapter deals with the general overview and background to the study, introduction, statement of problem, research questions, research objectives, scope of the study, significance of the study and organization of the study The Second Chapter focuses on the literature review, the theoretical foundation, review of the related and relevant literature, conceptual framework and operational definition of terms, importance of the study, and the conclusion. The Third Chapter deals with the methodology, methods and research design, population, sampling technique and sample frame and scale, data collection sources and instruments, data analysis techniques, and limitations are also all covered in Chapter Three. The Fourth Chapter, the penultimate chapter provides the empirical analysis of key findings and the discussions while the Fifth Chapter summarizes the key findings, draws conclusions, and makes some recommendations for further research and praxis.

## **CHAPTER 2**

### **LITERATURE REVIEW**

#### **2.0.Introduction**

This chapter discusses some existing scholarly research on the prevalence of transactional sex and its implications for the female trade apprentices in the Sunyani Metropolis in the Brong Region of Ghana, reviews existing literature on the subject as well as various studies undertaken by other researchers. It also highlight the theories used by the researcher in this study and the exposition of the study including explanations of how they underpin the work.

## **2.1. Theoretical Foundation**

As a theoretical foundation for this study, a review of the Social Norms Theory, the Social Exchange Theory and the Social Learning Theory which, highlight the relevance of prevalence of transactional sex and its implications for female trade apprentices in Ghana. These theories are consistent with transactional sex, in that they offer better explanation of the likelihood of the transactional sex increasing the spread of HIV and AIDS among other STDs.

### **2.1.1 Social Exchange Theory (SET)**

There is a theory that describes this phenomenon. It is called the Social Exchange Theory, and goes back to 1958, when American sociologist **George Homans** published an article entitled “**Social Behavior as Exchange.**” Homans devised a framework built on a combination of behaviourism and basic economics. In the immediate years that followed, other studies expanded the parameters of Homans’ fundamental concepts.

Social exchange theory is a concept based on the notion that a relationship between two people is created through a process of cost-benefit analysis. In other words, it’s a metric designed to determine the effort poured in by an individual in a person-to-person relationship. The

measurement of the pluses and minuses of a relationship may produce data that can determine if someone is putting too much effort into a relationship.

The theory is unique and relevant in this context because it doesn't necessarily measure relationships on emotional metrics. Rather, its systematic processes rely on mathematics and logic to determine balance within a relationship. While the theory can be used to measure romantic relationships, it can also be applied to determine the balance within a friendship.

### **Core Assumptions of Social Exchange Theory**

The foundation of social exchange theory rests on several core assumptions regarding human nature and the nature of relationships.

1. The first assumption is that humans tend to seek out rewards and avoid punishments.
2. Another tenet is the assumption that a person begins an interaction to gain maximum profit with minimal cost — the individual is driven by “what’s in it for me?”
3. A third assumption is that individuals tend to calculate the profit and cost before engaging. Finally, the theory assumes that people know that this “pay-off” will vary from person to person, as well as with the same person over time.

### **How This Theory Works**

The theory's core assumptions establish a fundamental foundation within social exchange theory — one size does not fit all. A person's expectations, as set by comparison levels, allow the theory to be viewed on a sliding scale, one that adjusts on an individual basis. If an

individual's personal relationship samples are set on a certain level, he or she will tend to use this level as a baseline for future relationships.

For example, if a person enters a new relationship after a succession of poor friendships or disastrous romantic relationships, that person's expectations at the start of a new relationship are going to be lower than those of a person who has a tight group of friends. Conversely, if a person's ex-girlfriend provided him with a ton of gifts and affections, he may enter into his next relationship expecting similar behaviour.

These levels of expectation can often work in conjunction with another core concept of the theory's functionality: costs vs. benefits. This is perhaps the theory's most known commodity, as it establishes a "give and take" metric that can be analysed to determine how much effort one party may be putting into the relationship.

The "costs" in this theory component are things that a person may see as a negative in a relationship. A friend who constantly borrows money or a partner who consistently doesn't do his expected chores in the house may rack up a lot of cost. "Benefits," as they pertain to this theory, are traits that an individual may see as positive attributes. The friend who's always willing to lend an ear in times of trouble or constantly extends an invitation for a Sunday afternoon beer may offer plenty of benefits.

According to the theory, a worthwhile relationship will be as far away from the cost category as possible. Even if there are a few costs involved in the relationship — and human behaviour dictates there probably will be — if enough positive traits outweigh the negative traits, then the costs hold no value.

If the costs far outweigh the benefits, it may be an indicator that it's time to move on; however, the theory's aspect of evaluating alternatives prevents this decision from being automatic.

Alternative evaluation involves analysing possible replacements for an existing relationship, a process that weighs costs and benefits against a person's comparison levels. This analysis may drive a person to the conclusion that the relationship he or she is currently in is still better than anything else that's out there, a decision that may also cause a person to reassess the cost versus benefit value of an existing relationship.

### **2.1.2 Social Norms Theory (SNT)**

#### **Social Norms Theory**

Wamoyi et al, prefer to use a "social and gender norms theory framework". Social norms are defined as informal rules that define appropriate behaviour in a given context, and vary across time, place and population. People comply with norms for various reasons including the desire to be accepted within their community, family and peer groups (referred to as "reference groups" in social norms theory) and the fear of social disapproval and rejection if they do not comply with the norm.

The Social Norms Theory was first used by Perkins and Berkowitz in 1986 to address student alcohol use patterns. As a result, the theory, and subsequently the social norms approach, is best known for its effectiveness in reducing alcohol consumption and alcohol-related injury in college students. The approach has also been used to address a wide range of public health topics including tobacco use, driving under the influence prevention, seat belt use, and more recently sexual assault prevention. The target population for social norms approaches tends to be college students, but social norms approaches has recently been used with younger student populations. Peer influence, and the role it plays in individual decision-making around behaviour, is the primary focus of Social Norms Theory.

## **The Theory**

Peer influence, and the role it plays in individual decision-making around behaviour, is the primary focus of Social Norms Theory. This theory aims to understand the environment and interpersonal influences (such as peers) in order to change behaviour. Theoretical and empirical literature on social norms exists in sociology, anthropology, social and moral psychology, economics, law, political science, and health sciences. Social norms are the informal, mostly unwritten, rules that define acceptable, appropriate, and obligatory actions in a given group or society. Current practitioners' interest in social norms theory is mostly based on the work of Cialdini and colleagues, in their work "A FOCUS THEORY OF NORMATIVE CONDUCT: A THEORETICAL REFINEMENT AND REEVALUATION OF THE ROLE OF NORMS IN HUMAN BEHAVIOR" defined social norms as one's beliefs about:

- 1) what others in one's group do (descriptive norms);
- 2) and what they approve and disapprove of (injunctive norms)

In a recent review, Young identified four main compliance mechanisms:

- 1) Coordination: people want to achieve a goal that requires coordinated action among group members; to that purpose, they follow what they believe to be common rules for that action;
- 2) Social pressure: people anticipate social rewards or social punishment for their compliance and non-compliance with a norm; trying to achieve the former and avoid the latter, they follow social norms even when they may prefer not to;
- 3) Signalling and Symbolism: people want to signal their membership in a given group to self and/or others; to do so, they follow what they think to be the rules specific to that group;

4) Benchmark and Reference points: people internalise rules of what action is considered normal in a given situation, to the point that they follow those rules automatically

### **Types of Social Norms**

**Folkways** are behaviour that are learned and shared by a social group that we often refer to as “customs” in a group that are not morally significant, but they can be important for social acceptance. **Mores** are norms of morality, or right and wrong, and if you break one it is often considered offensive to most people of a culture. A **Taboo** goes a step farther and is a very negative norm that should not get violated because people will be upset. Additionally, one may get excluded from the group or society. **Laws** are social norms that have become formally inscribed at the state or federal level and can laws can result in formal punishment for violations, such as fines, incarceration, or even death. Laws are a form of social control that outlines rules, habits, and customs a society uses to enforce conformity to its norms.

### **How This Theory Works**

Various scholars posit that the phenomenon of sugar dadaism has gained increasing acceptance in society. This acceptance may not be overt, but tacit, in that society does not vehemently condemn the phenomenon.

Because of this tacit acceptance, many more people indulge in the practice knowing that they would not be condemned. In fact, the first point of condemnation, which ought to be the girls family, often accept it happily because of the infusions of cash it could bring. Or better still the “prestige” if the man is a ‘big’ man such as a politician.

Below is an article that is culled unedited from the site College Times that openly promotes the practice.

### **9 Reasons Why Every Girl Should Date A Sugar Daddy**

The sugar daddy is a relatively new phenomenon which has sky-rocketed in popularity among young women especially in these times of financial difficulty. A certain stigma has been attached to the sugar daddy/sugar baby relationship but what's wrong with it really? A mutually beneficial relationship and an honest relationship where both parties are happy? Sounds like the perfect relationship to me!

Tired of immature boys only interested in the next lay? Sites like [sugardaddie.com](http://sugardaddie.com), [sugardaddyireland.com](http://sugardaddyireland.com) and [seekingarrangement.com](http://seekingarrangement.com) are your best bet for finding your own sugar daddy! Here's why every girl should date a sugar daddy.

### **9. The financial benefits**

The first thing that comes to mind when you think "sugar daddy" is money, but they offer so much more than that. You'll enjoy living a grandeur life that wasn't open to you with your previous boyfriends. Your eyes are opened to expensive restaurants, fine wines and exotic bars and it's great! You may also have the added bonus of your sugar daddy spoiling you with expensive gifts.

### **8. Monogamy is not required**

This doesn't apply to all sugar daddy/sugar baby relationships but it certainly does for some. Jealousy is not an issue - you can enjoy one another's company and also go out and have fun with others. Cheating is the number one reason why relationships fail but you won't have to worry about that here. No worries - hakuna matata!

### **7. Youth is always on your side**

Your sugar daddy will always be older than you - duh! You can sleep pretty knowing that he won't leave you for a younger woman. you're carefree!

#### **6. No strings attached**

Three words that are music to a young girl's ears. You're enjoying life in your 20s and nobody wants to settle down and commit to one person so young - there's plenty of time for that when you're older! The sugar daddy relationship is similar to a friends with benefits agreement, with added prize. You both leave your emotions outside the bedroom but also appreciate the other outside of sex and what they have to offer.

#### **5. It's a mutually beneficial relationship**

Ever heard the phrase "diamonds are a girl's best friend?" WRONG - a sugar daddy is a girl's best friend. What girl doesn't like to be treated? With a sugar daddy, you'll want for nothing. Both of you reap the benefits of the relationship, whether it be financial assistance, sexual gratification or sweet companionship.

#### **4. You won't need a job**

Your sugar daddy will want to take care of their partners, hence the word "daddy." You won't have to work that part-time jobs at that awful clothes store or fast-food joint anymore. He'll ensure that you're financially stable and treated to the finest of indulgences. So put up your feet, kick back and relax.

#### **3. An honest arrangement**

You both know exactly what this relationship is. The rules and guidelines are crystal clear. The majority of sugar daddy relationships are a short-term deal. There's an expiry date on the relationship so there's no need to lie to each other or hide your ulterior motives. Everything is out in the open It's an honest arrangement.

## **2. He won't worry about you while you're out with your friends**

Ever have that clingy, jealous boyfriend who embarrasses you when you're out with your friends or texts you all the time seeing WHERE you are and WHAT you're doing?! You simply won't have that with a sugar daddy - he's lived through several relationships in his time and has learned from his mistakes. He'll remember your birthday, the relationship anniversary, always buy you a Christmas present and understand that you need time alone.

## **1. You can have a Clean break**

One of the best factors about having a sugar daddy is that you can call time on your relationship without any adverse effects. He won't scream horrible slants at you while tossing your clothes out the door of his house. You'll shake hands and part ways in an honourable and civilised manner - "Ah sure, it was good while it lasted."

### **2.1.3 Social Learning Theory (SLT)**

Perhaps, affirming the influence and strength of the effect of Normative Theory, is Albert Bandura's Social learning Theory (1977).

Social Learning Theory emphasizes the importance of observing, modelling, and imitating the behaviours, attitudes, and emotional reactions of others. Social learning theory considers how both environmental and cognitive factors interact to influence human learning and behaviour.

The two well-known theories of social learning theory are classical conditioning and operant conditioning both of which Bandura subscribed to. Every student of basic psychology remembers Pavlov and his salivating dogs experiment. Hence Classical conditioning is also known as Pavlovian or respondent conditioning. It is learning through association and was discovered by Pavlov, a Russian physiologist. In simple terms, two stimuli are linked together

to produce a new learned response in a person or animal. Thus in Pavlov's experiment, even when no food was present, and the bell was rung, the dogs salivated.

Operant conditioning, also known as instrumental conditioning, is a method of learning normally attributed to B.F. Skinner, where the consequences of a response determine the probability of it being repeated. Through operant conditioning, behaviour which is reinforced, usually through reward, will most likely be repeated, and behaviour which is punished will occur less frequently.

Though he subscribed to these two, Bandura added two important ideas of his own:

1. Mediating processes occur between stimuli & responses.
2. Behaviour is learned from the environment through the process of observational learning.

Indeed some Psychologist believe in the primacy of Classical Conditioning to the extent that they believe it is the key to all human and animals behaviour. Watson for example is noted for saying "Give me a dozen healthy infants, well-formed, and my own specified world to bring them up in and I'll guarantee to take any one at random and train him to become any type of specialist I might select - doctor, lawyer, artist, merchant-chief and, yes, even beggar-man and thief, regardless of his talents, penchants, tendencies, abilities, vocations and the race of his ancestors" (Watson, 1924, p. 104).

Classical conditioning emphasizes the importance of learning from the environment, and supports nurture over nature. However, it is limiting to describe behaviour solely in terms of either nature or nurture, and attempts to do this underestimate the complexity of human behaviour. It is more likely that behaviour is due to an interaction between nature (biology) and nurture (environment).

In this instance, we can surmise that the initial stimulus would be poverty, which would drive the girls to befriend an (older) man for financial support. The financial support would help the girls achieve a relatively comfortable life. The girls would feel comfortable and get used to this lifestyle, which then would make the girls continue their relationship with the men. A man would therefore be the stimulus for the comforts of life. Because this relationship would become firmly in the psyche of the girls, it would be very difficult to get them to break the habit of transactional/intergenerational sex.

Looking at the behaviour of our young ladies from the perspective of Operant Conditioning, we could posit that they get goodies from their sexual adventures and this bolsters their resolve to continue in their activities. However, should they encounter a serious infection, a complicated abortion, or even serious intimate partner violence, which we could consider as punishment or deterrent, then there would be a cessation or reduction in their participation in transactional sex. Also should their social circles express reservation against the practice of transactional sex, then they would think twice about involvement in that practice.

#### **2.1.4 Theories of Intimate Partner Violence**

Although the focus of this study is not on intimate partner violence, because the literature harps on it, I thought it relevant to mention it, and confirm that there is a large corpus of literature and theories on on IPV.

Intimate partner violence was first widely recognized as a social problem in the 1970s after a long history of being treated as a private matter that did not warrant research or attention outside the family (Dobash & Dobash, 1979; Gelles, 1985).

The theories on IPV can be divided into two broad groups; a feminist perspective and a general family violence perspective. Feminist theorists and theories treat the problem of partner violence as an issue based on gender inequality and specifically to the male domination of men over women. Family violence theories on the other hand, regard partner violence as just an aspect of the larger issue of family violence; intimate partner violence is not seen as qualitatively different from child abuse, elder abuse, or violence between siblings. Because of this sharp divide in the claimed causes of IPV, even the names used to describe the various facets of the phenomenon differ.

Theorists from the general family posit five theories to explain IPV. These are Systems Theory, Ecological Theory, Exchange/Social Control, Resource and Subculture of Violence Theories. Feminist theorist posit Gender symmetry/asymmetry as the underlying cause of IPV.

### **2.1.5 Basic Assumptions**

The guiding hypothesis of this study is that females exercise an appreciable level of control and power (agency) over their relationship; they are neither beaten nor excessively controlled by their male partners, and rarely date more than one man at a time. This is a departure from the usual claims one finds in the literature. The money and other resources that males provide females are a normal part of the dating process, and not a dry quid pro quo, but an expression of value or love or appreciation of the female and is in harmony with traditional practice worldwide.

### **2.2.0 Review of Related and Relevant Empirical Studies**

The incidence of Transactional Sex is widely covered in the literature. Several writers in different countries in Africa, as well as other countries have covered it. Invariably all these writers consider it a pernicious practice after evaluating its effects.

Based on my reading, five themes emerge. These are:

- Transactional sex is widespread.
- Transactional sex is usually between a much older male and a young lady. The woman provides sex, while the man provides material benefits.
- Women lose their power to negotiate safe sex practices because of the very nature of the relationship. This could lead to Sexually Transmitted Infections, including HIV and Aids.
- Other researchers have countered the assertion above, saying that women are generally able to negotiate the situation to their benefit, and that the economic benefit they extract from these older men make them attractive as future wives to other (younger) men.
- Transactional sex may often lead to Intimate Partner Violence. The men protect their ‘investment’ by all means possible, including intimidation, threats and acts of violence.

My literature review would therefore follow these points.

### **2.2.1 Transactional sex is widespread**

In “Transactional Sex: Women, Poverty and AIDS”, Daniella Choi states that “Transactional sex, sexual intercourse driven by material exchanges, is quite common in sub-Saharan Africa. A study done in Mwanza, Tanzania found that 75% of sexually active teenage girls received a gift or money at their first intercourse. The figure decreased slightly to 70% concerning the most recent sexual intercourse (Wamoyi et al. 2010).” She continues that “of course

transactional sex is not limited to low-income countries. Even in the richest parts of the world, people exchange sex for luxury goods and a sense of security. In poor regions with high HIV prevalence rates like sub-Saharan Africa, however, transactional sex poses an even higher threat to one's well being and health because the chance of HIV infection is greater. Women are especially at risk. In sub-Saharan Africa, 74% of young people aged 15-24 years living with HIV are female (UNFPA 2006). In addition to being biologically more susceptible to HIV infection than men, women's disenfranchised status in society heightens the risk of contracting HIV. When sex is directly exchanged for money or other resources, women can lose the ability to negotiate safe sex or sexual exclusivity in both committed and casual relationships.

In "Risk Factors for Transactional Sex among Young Females in Post-Conflict Liberia", the writers state that "Vulnerability to human immunodeficiency virus (HIV) infection is driven by structural, community, and individual level factors. Research has shown that young people, especially young women, are most at-risk for HIV infection<sup>1</sup>. Their vulnerability to HIV infection can be attributed to biological factors as well as socio-economic dependence driven by lack of employment and unfavourable gender/cultural norms. In sub-Saharan Africa, widespread poverty, gender-based violence, and risky sexual experimentations are some of the factors that increase the vulnerability of young women to sexually transmitted infections (STIs)"

My literature review therefore focuses on the following four key points, to explore their veracity or otherwise.

### **2.2.2 Transactional sex is usually between a much older male and a young lady.**

Duby et al, in their article “From Survival to Glamour: Motivations for Engaging in Transactional Sex and Relationships Among Adolescent Girls and Young Women in South Africa” explored transactional sex and relationships (TSR) among South African adolescent girls and young women (AGYW) using (1) survey data from 4,399 AGYW aged 15–24 years, and (2) qualitative data from 237 AGYW and 38 male peers.

They claim that AGYW who engage in transactional sex are more likely to experience poor sexual and reproductive health outcomes, including unintended pregnancies, unsafe abortions, sexually transmitted infections (including HIV), and sexual coercion. They further state that among the reasons that transactional sex is associated with greater risk of contracting HIV are compromised gendered power relations and the likelihood of having multiple partners.

They claim that motivations for engaging in TSR are situated within complex sexual economies, and go beyond basic survival or subsistence needs in circumstances of poverty. In their opinion, entrenched social norms dictate that material or financial goods received from a partner must be paid for with sex. Thus they frame the narrative around transactional sex to include both survival and acquisition of basic needs, as well as for gain in social status. Finally they claim that the very expectation of reciprocity, and the act of receiving material benefits ( from the male partner) , enhances the vulnerability of the receiver (adolescent girls and young women), thereby limiting their ability to negotiate sexual roles/relations and result in the subordination of women and their needs and interests in a manner that favours men to the detriment of women.

Daniella Choi, in “Transactional Sex: Women, Poverty and AIDS” states that “Women use the value of gifts to measure love and commitment and men use the women’s willingness to have sex to measure love. When a man gives a woman a gift, she is expected to sleep with him.” She reiterates a point made by the previous writers that “In poor regions with high HIV prevalence

rates like sub-Saharan Africa, however, transactional sex poses an even higher threat to one's well-being and health because the chance of HIV infection is greater. Women are especially at risk. In sub-Saharan Africa, 74% of young people aged 15-24 years living with HIV are female (UNFPA 2006). In addition to being biologically more susceptible to HIV infection than men, women's disenfranchised status in society heightens the risk of contracting HIV. When sex is directly exchanged for money or other resources, women can lose the ability to negotiate safe sex or sexual exclusivity in both committed and casual relationships."

Meghna Ranganathan et al in their article "Young women's perceptions of transactional sex and sexual agency: A qualitative study in the context of rural South Africa" take a slightly different approach. They suggest there is a nuanced relationship between sex, love and gifts and money only has symbolic meaning, and money transfers, when framed as gifts, serves as an index or indication of a young woman's value and shows the commitment of the man. This illustrates the complexity of transactional sex. This position differs from the way most researchers in describe the phenomenon in HIV literature. Most literature ignores that "exchanges" serve as fulcrums around which romantic relationships are organised. Finally, they say young women are not as powerless as they seem, and that they (young women) express agency in their choice of partner, even though this agency may weaken once they are in a relationship characterised by exchange, which may undermine their ability to translate perceived agency into STI and HIV risk reduction efforts. This research therefore underscores the need to recognise that transactional sex is embedded in adolescent romantic relationships, but that certain aspects make young women particularly vulnerable to HIV. This is especially true in societies where there are restricted professional choices and also few job opportunities exist.

According to the “Policy Recommendations Based on the Major Findings of the 2004-05 Uganda HIV/AIDS Sero-Behavioural Survey” Sexual violence and age disparity in sexual relations is common. A significant proportion of female youth were forced to have sex at their sexual début and a significant proportion of teenage females had their last sex with a partner who was at least 10 years older than they were. Orphans and vulnerable children age 15-17 were more likely to initiate sex before age 15 than other children.

### **2.2.3 Females lose their power to negotiate safe sex practices**

Some evidence reveals potential associations between financial decision-making and bargaining power in sexual relationships. However, this evidence is mixed, nuanced, and limited. It is posited that females who have some financial independence, and are not totally dependent on a male for their upkeep are able to maintain the agency to a large extent at the level that existed when the male was courting them. This lack of Agency on the part of females who are financial dependent on a male means the females are not in a strong position to negotiate safe sex practices such as the wearing of condoms.

### **2.2.4 Transactional sex may often lead to Intimate Partner Violence.**

Transactional sex in sub-Saharan Africa covers a wide and complex range of relationship types and sexual practices. The association between IPV and transactional sex is complex. Women’s economic dependence on their male partners may make exiting a violent or exploitative relationship more difficult (Stoebenau et al., 2016). However, in much of the world the male provider role is both normative within heterosexual sexual and romantic relationships and an expected means of enacting hegemonic masculinity — the most culturally powerful way of

being a man (Brinig, 1990; Connell, 1987; Glyde, 2016; Wentzell, 2014). Conversely, for many women, gifts and financial support are a key way in which male partners demonstrate their affection (Fielding-Miller, Dunkle, Jama-Shai, et al., 2016; Ruark et al., 2014). Moreover, families and friends may chide a young woman whose partner does not provide her with gifts, as this suggests that he does not value her or consider her to be a legitimate potential partner (Groes-Green, 2013; Wamoyi, Fenwick, Urassa, Zaba, & Stones, 2011). In a seminal study in Swaziland, the researchers concluded that, receiving more material goods from a sexual partner was not associated with higher levels of physical or sexual IPV and was protective against emotional IPV. Constrained Relationship Agency (CRA) was the single largest predictor of IPV, and more education was associated with decreased levels of constrained relationship agency. Policies and interventions that target transactional sex as a driver of IPV and HIV may be more successful if they instead target the broader social landscape that constrains women's agency and drives the harmful aspects of transactional sex (Fielding-Miller and Dunkle, 2017)

IPV may not be on the same level in all societies. A study in the Western Cape established that 85% of women engaged in transactional sex experience IPV. 86% of the young women experienced IPV in the 12 months preceding the study.. Sexual IPV was significantly correlated with sex with a man who was 5 years or older than the index female partner. Levels of IPV among young women with multiple sexual partners were much higher than what is reported among women in the general population, and shown to be associated with sexual risk taking (Zembe et al.,2013)

### **2.3.0 Conceptual Framework**

Many writers have documented a phenomenon they term transactional sex, in which women give sex to men, with the implicit expectation of money or other material resources. They claim the following as the other markers of Transactional sex; the men are always at least five years or more older than the women, the relation is often marked by violence towards the women, and the women have no rights, so to speak in the relationship, and therefore cannot even negotiate the use of safe sex practices.

Using the Social Exchange, Social Norms and Social learning theories, this study looked at how these have led to, and affected Transactional Sex, if at all.

### **2.3.1 Background and Need**

People coin new words every day. These words are based on their and their societies' experiences. Two of such words are "Blessee" and "Blesser". These two words refer to a phenomenon where a female, usually the "blessee", is supported financially or materially by a male, referred to as the "blesser". In Nigeria, the phenomenon is known as "Aristo".

Because the relationship is based on financial incentive or better still need on the part of the "blessee", the "blesser" must be well to do, a status which is usually achieved with age. So this leads to inter-generational sex. Where the blesser is young, there is often a lot of rules established by the man which the woman has to conform to. If and whenever the woman does not follow any of the imposed rubrics, she may be cut off until she falls back in line, or other punishment would be imposed, usually of a violent nature, leading to what is called Intimate Partner Violence.

The blesser, if he is older may be married. Some young blesser too may be married, or single with multiple partners. Though they may be playing the field, they often expect absolute

fidelity from the blessee. Where the blesser is an older married man, the blessee might have a preferred young man in the wings to supply her romantic ideal of a boyfriend or even fiancée.

Young girls of adolescent age, and young adults, between the ages of 16 to 25, are very often students or learning a trade. They have the desire for life's little luxuries, but no disposable income. Some may even be very economically distressed, with parents who cannot support them and with no other social support. They therefore are blessees waiting to occur, prime candidates for Transactional Sex.

### **2.3.2 Transactional Sex**

Transactional sex relationships are non-commercial, non-marital sexual relationships motivated by the implicit assumption that sex is exchanged for material goods or other benefits.

There is little disagreement here among researchers who study the topic. Anthropologists, demographers, sociologists, and economists agree: "...direct need for material support plays a role in poor women's decisions to readily accept sexual proposals from men..." (Verheijen, 2011).

Many experts claim that transactional sex, especially between adolescent girls or young women (AGYW) who have sex with men ten years or older than they are, is a major driver of HIV and AIDS infection, because the younger partners are vulnerable and have no power in the relationship. Others however disagree with this point, and claim the ladies can hold their own, and can even control the relationship to their benefit.

### **2.3.3 Trans-generational Sex**

“Inter-generational (IG)-sex is generally defined in the literature as heterosexual intercourse with a non-marital partner ten or more years older [6-8]. Also referred to as cross generational sex or the ‘sugar daddy’ syndrome, it is primarily characterised by relationships between younger women and older men. Research in Africa supports the existence of a link between IG-sex and HIV infection among adolescent females.”

Other terms used interchangeably for Inter-generational sex are Age mixing, age-disparate sex, and cross-generational sex. Some researchers have expanded the definition to an age difference of five years because the smaller gap has also been clearly associated with increased risk of HIV transmission in young women (Hope, 2007). Demographic and Health Surveys (DHS) AIDS modules further define inter-generational sexual relationships as non-marital.

According to Luke and Kurz, the main motivation for cross-generational sex is financial gain, however finding a suitable marriage partner, wanting love and affection, and upward social mobility can also play a role. Girls often have fewer opportunities than older women and less access to pocket money from parents than boys, however there is an economic value to sex (Luke, 2002). In Ethiopia for example, young women described relationships with other men as “business opportunities” (Hope, 2007).

In southern Africa, girls are encouraged to seek older men as partners and husbands because they are believed to be more stable partners than younger men. In other cases, girls are pushed into sexual relationships with older men by their families in order to earn income for the household.

Other studies indicate that the phenomenon of transactional sex has evolved. They say that no longer does the phenomenon occur between older men and poor girls, but is now vanity driven by girls who want to live a lavish life worth posting on social media. A BBC documentary,

“Sex and the Sugar Daddy” says “Older men have always used gifts, status, and influence to buy access to young women. The sugar daddy has probably been around, in every society, for as long as the prostitute. So you might ask: "Why even have a conversation about transactional sex in Africa?"

The answer is that in Kenya, and in some other African countries, "sugar" relationships seem to have become both more common and more visible: what once was hidden is now out in the open - on campuses, in bars, and all over Instagram.”

It further goes on to say that “But somehow, we have arrived at a point where having a "sponsor" or a "blesser" - the terms that millennials usually apply to their benefactors - has for many young people become an accepted, and even a glamorous lifestyle choice.

#### **2.3.4 Age-Disparate Sex**

Some literature differentiates between Inter-generational sex and Age-Disparate sex. A relationship in which the female partner is up to five years younger than the male is labelled Age disparate sex while those with a difference of up to ten years is labeled inter-generational sex.

Evans et al, claim that unequal gender, race, and economic power dynamics amplified by age differences can lead to greater risk-taking behaviour among young women with age-disparate male partners, such as unprotected sex, younger age of first sex, leading to an increased number of lifetime partners, and multiple sexual partnerships. In addition, unequal power dynamics in age-disparate relationships make it difficult for women to negotiate safer sex and condom use with older partners , and young women’s assertive behaviour in sexual relationships may result in controlling behaviour by their partners, resulting in physical or sexual violence from male partners.

### **2.3.5 Sexually Transmitted Infections**

The term sexually transmitted disease (STD) is used to refer to a condition passed from one person to another through sexual contact. A person can contract an STD by having unprotected vaginal, anal, or oral sex with someone who has the STD.

An STD may also be called a sexually transmitted infection (STI) or venereal disease (VD). There are several sexually transmitted infections (STIs,) some more serious than others. The most common are indicated below.

#### **1. Chlamydia**

It's the most commonly reported STD among Americans, notes the Centers for Disease Control and Prevention (CDC)Trusted Source.It is caused by a bacteria called Chlamydia trachomatis.Women can get chlamydia in the cervix, rectum, or throat. Men can get chlamydia in the urethra (inside the penis), rectum, or throat.

Many people with chlamydia have no noticeable symptoms. When symptoms do develop, they often include:pain or discomfort during sex or urination, green or yellow discharge from the penis or vagina, and pain in the lower abdomen.

If left untreated, chlamydia can lead to:infections of the urethra, prostate gland, or testicles, pelvic inflammatory disease and infertility.

If a pregnant woman has untreated chlamydia, she can pass it to her baby during birth. The baby may develop:pneumonia, eye infections and blindness.

#### **2. HPV (human papilloma-virus)**

Human papilloma virus (HPV) is a virus that can be passed from one person to another through intimate skin-to-skin or sexual contact. There are many different strains of the virus. Some are more dangerous than others.

The most common symptom of HPV is warts on the genitals, mouth, or throat.

Some strains of HPV infection can lead to cancer, including:oral, cervical, vulva, penile and rectal cancer

While most cases of HPV don't become cancerous, some strains of the virus are more likely to cause cancer than others. According to the National Cancer Institute Trusted Source, most cases of HPV-related cancer in the United States are caused by HPV 16 and HPV 18. These two strains of HPV account for 70 percent of all cervical cancer cases.

There's no treatment for HPV. However, HPV infections often clear up on their own. There's also a vaccine available to protect against some of the most dangerous strains, including HPV 16 and HPV 18.

If a person contracts HPV, proper testing and screenings can help their doctor assess and manage the risk of complications.

### **3. Gonorrhoea**

Gonorrhoea is another common bacterial STD. It's also known as "the clap."

Many people with gonorrhoea develop no symptoms. But when present, symptoms may include:a white, yellow, beige, or green-coloured discharge from the penis or vagina, pain or discomfort during sex or urination, more frequent urination than usual, itching around the genitals and sore throat.

If left untreated, gonorrhoea can lead to:infections of the urethra, prostate gland, or testicles, pelvic inflammatory disease and infertility.

It's possible for a mother to pass gonorrhoea to a newborn during childbirth. When that happens, gonorrhoea can cause serious health problems in the baby. That's why many doctors encourage pregnant women to get tested and treated for potential STDs.

#### **4. Syphilis**

Syphilis is another bacterial infection. It often goes unnoticed in its early stages.

The first symptom to appear is a small round sore, known as a chancre. It can develop on your genitals, anus, or mouth. It's painless but very infectious.

Later symptoms of syphilis can include:rash, fatigue, fever, headaches, joint pain, weight and hair loss. If left untreated, late-stage syphilis can lead to:loss of vision , hearing, and memory, mental illness,infections of the brain or spinal cord, heart disease and finally death.

Fortunately, if caught early enough, syphilis is easily treated with antibiotics. However, syphilis infection in a newborn can be fatal. That's why it's important for all pregnant women to be screened for syphilis.

The earlier syphilis is diagnosed and treated, the less damage it does.

#### **5. HIV**

HIV can damage the immune system and raise the risk of contracting other viruses or bacteria and developing certain cancers. If left untreated, it can lead to stage 3 HIV, known as AIDS. But with today's treatment, many people living with HIV don't ever develop AIDS.

In the early or acute stages, it's easy to mistake the symptoms of HIV with those of the flu. For example, the early symptoms can include: fever, chills, aches and pains, swollen lymph nodes, sore throat, headache, nausea and rashes.

These initial symptoms typically clear within a month or so. From that point onward, a person can carry HIV without developing serious or persistent symptoms for many years. Other people may develop non-specific symptoms, such as: recurrent fatigue, fevers, headaches and stomach issues.

There's no cure for HIV yet, but treatment options are available to manage it. Early and effective treatment can help people with HIV live as long as those without HIV.

Proper treatment can also lower a person's chances of transmitting HIV to a sexual partner. In fact, treatment can potentially lower the amount of HIV in a person's body to undetectable levels. At undetectable levels, HIV can't be transmitted to other people, reports the CDC Trusted Source.

Without routine testing, many people with HIV don't realize they have it. To promote early diagnosis and treatment, the CDC Trusted Source recommends that everyone between the ages of 13 and 64 be tested at least once. People at high risk of HIV should be tested at least once a year, even if they don't have symptoms.

### **Curable STDs**

Many STDs are curable. For example, the following STDs can be cured with antibiotics or other treatments:

- chlamydia

- syphilis
- gonorrhoea
- crabs
- trichomoniasis

Others can't be cured. For example, the following STDs are currently incurable:

- HPV
- HIV
- Herpes

### **Other STDs**

Other, less common STDs include:

- chancroid
- lymphogranuloma venereum
- granuloma inguinale
- molluscum contagiosum
- scabies

Retrieved from Healthline, Everything You Need to Know About Sexually Transmitted Diseases (STDs) Medically reviewed by Suzanne Falck, M.D., FACP — Written by Heather Grey — Updated on March 12, 2021 (<https://www.healthline.com/health/sexually-transmitted-diseases>)

### **2.3.6 Intimate Partner Violence**

The World Health Organization defines violence as: **The intentional use of physical force or power, threatened or actual**, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation.

This typology distinguishes four modes in which violence may be inflicted: **physical; sexual; and psychological attack; and deprivation**. It further divides the general definition of violence into three sub-types according to the victim-perpetrator relationship. The WHO elaborates further. “IPV refers to any behaviour within an intimate relationship that causes physical, psychological or sexual harm to those in the relationship. Acts of physical violence, such as slapping, hitting, kicking and beating. Sexual violence, including forced sexual intercourse and other forms of sexual coercion. Emotional (psychological) abuse, such as insults, belittling, constant humiliation, intimidation (e.g. destroying things), threats of harm, threats to take away children. Controlling behaviours, including isolating a person from family and friends; monitoring their movements; and restricting access to financial resources, employment, education or medical care.”

The Centers for Disease Control and Prevention (CDC) identifies four types of intimate partner violence—**physical violence, sexual violence, stalking, and psychological aggression**. Information about the important revisions in definition can be found in the CDC’s Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements, Version 2.0, which was published in 2015. The CDC strongly advocates for coherent and uniform definitions to improve the collection and analysis of data and help to identify trends and make comparisons (CDC, 2015).

### **Physical Violence**

**Physical violence** is the intentional use of physical force with the potential for causing death, disability, injury, or harm. Physical violence includes, but is not limited to:

- Scratching, pushing, or shoving
- Throwing, grabbing, or biting
- Choking, shaking, aggressive hair pulling, slapping, punching, hitting or burning
- Use of a weapon
- Use of restraints or one's body, size, or strength against another person
- Physical violence also includes coercing other people to commit any of the above acts. (CDC, 2016)

Research has shown that physical violence is often accompanied by psychological abuse and, in one-third to one-half of cases, by sexual abuse (Heise & Garcia-Moreno, 2002). The violence is usually not limited to one instance. The National Violence Against Women Survey (NVAWS) found that women who were physically assaulted by an intimate partner averaged 6.9 physical assaults by the same partner, while men who were assaulted averaged 4.4 assaults.

Women experience more chronic and injurious physical assaults at the hands of intimate partners than do men. The NVAWS found that more than 40% of women who were physically assaulted by an intimate partner were injured during their most recent assault, compared with about 20% of the men. Most injuries, such as scratches, bruises, and welts, were minor. More severe physical injuries may occur depending on severity and frequency of abuse. Physical violence can lead to death (Tjaden & Thoennes, 2000).

### **Sexual Violence**

Sexual violence is divided into five categories, any of which constitute sexual violence, whether attempted or completed. Additionally, all of these acts occur without the victim's

consent, including cases in which the victim is unable to consent due to being too intoxicated (eg, incapacitation, lack of consciousness, or lack of awareness) through their voluntary or involuntary use of alcohol or drugs (CDC, 2016).

**Rape or penetration of victim.** This includes completed or attempted, forced or alcohol/drug-facilitated unwanted vaginal, oral, or anal insertion. Forced penetration occurs through the perpetrator's use of physical force against the victim or threats to physically harm the victim.

- **Victim was made to penetrate someone else.** This includes completed or attempted, forced or alcohol/drug-facilitated incidents when the victim was made to sexually penetrate a perpetrator or someone else without the victim's consent.
- **Non-physically pressured unwanted penetration.** This includes incidents in which the victim was pressured verbally or through intimidation or misuse of authority to consent or acquiesce to being penetrated.
- **Unwanted sexual contact.** This includes intentional touching of the victim or making the victim touch the perpetrator, either directly or through the clothing, on the genitalia, anus, groin, breast, inner thigh, or buttocks without the victim's consent
- **Non-contact unwanted sexual experiences.** This includes unwanted sexual events that are not of a physical nature that occur without the victim's consent. Examples include unwanted exposure to sexual situations (eg, pornography); verbal or behavioural sexual harassment; threats of sexual violence to accomplish some other end; and /or unwanted filming, taking or disseminating photographs of a sexual nature of another person (CDC, 2016).

Sexual and physical abuse is often accompanied by controlling behaviours. In a World Health Organization survey of more than 24,000 women in ten countries, the percentage of those who

had experienced one or more of the following controlling behaviours ranged from 20% in Japan to 90% in urban United Republic of Tanzania:

- Keeping her from seeing friends
- Restricting contact with her family of birth
- Insisting on knowing where she is at all times
- Ignoring or treating her indifferently
- Getting angry if she speaks with other men
- Often accusing her of being unfaithful
- Controlling her access to healthcare (WHO, 2005)

### **Stalking and Cyberstalking**

**Stalking** is a pattern of repeated, unwanted, attention and contact that causes fear or concern for one's own safety or the safety of someone else (eg, family member or friend). Some examples include repeated, unwanted phone calls, emails, or texts; leaving cards, letters, flowers, or other items when the victim does not want them; watching or following from a distance; spying; approaching or showing up in places when the victim does not want to see them; sneaking into the victim's home or car; damaging the victim's personal property; harming or threatening the victim's pet; and making threats to physically harm the victim (CDC, 2016).

In the United States 7.5 million people are stalked in one year, with 85% of the victims being stalked by someone they know. Sixty-one percent of female victims and 44% of male victims are stalked by an intimate partner. Among women who have been murdered, 76% were stalked by their intimate partner and 67% had been abused by them. Stalking victims may become

fearful and anxious, and their physical and mental health can suffer as a result (National Center for Victims of Crimes, 2012).

Today, stalkers have at their fingertips a wide array of computers and equipment including the Internet, global positioning systems, cell phones, and tiny digital cameras. In many states, general stalking statutes have not kept up with these new technologies. However, changes in the law in 2009 made **cyberstalking** a crime in Kentucky (KRS 508.130–150).

### **Psychological Aggression**

Psychological aggression is the use of verbal and non-verbal communication with the intent to harm another person mentally or emotionally, and/or to exert control over another person.

Psychological aggression can include:

- Expressive aggression (e.g, name-calling, humiliating)
- Coercive control (e.g, limiting access to transportation, money, friends, and family; excessive monitoring of whereabouts)
- Threats of physical or sexual violence; control of reproductive or sexual health (e.g, refusal to use birth control; coerced pregnancy termination)
- Exploitation of victim's vulnerability (e.g, immigration status, disability)
- Exploitation of perpetrator's vulnerability
- Presenting false information to the victim with the intent of making them doubt their own memory or perception (e.g, mind games) (CDC, 2016).

**Coercive control and intimidation** by the abusive partner is considered an underlying component of all of these types of violence. The abusive partner's ability to control relies on the abused person's belief that if she or he does not comply with the abusive partner's demands, the victim, the victim's children, or other persons or things the victim cares about will be

harmed. Often, threats are alternated with acts of kindness from the perpetrator, making it difficult for the victim to break free of the cycle of violence.

The ten-country World Health Organization survey and other research has consistently shown that emotional abuse can have a more profound and negative effect than physical violence. Between 20% and 75% of women across all the countries surveyed reported being the recipient of emotional abuse within the previous 12 months (WHO, 2005).

Below is a ‘league table’ of inter generational sex by some selected African countries. The research is a bit dated, but it gives an indication of the prevalence of the practice.

*Cross-Generational Sex*

<i>COUNTRY, YEAR OF SURVEY</i>	<i>PERCENTAGE OF SEXUALLY ACTIVE WOMEN AGES 15-17 WITH PARTNER AT LEAST 10 YEARS OLDER IN PAST YEAR</i>	<i>PERCENTAGE OF SEXUALLY ACTIVE WOMEN AGES 18-19 WITH PARTNER AT LEAST 10 YEARS OLDER IN PAST YEAR</i>
<i>Ghana, 2003</i>	<i>1.7</i>	<i>7.9</i>
<i>Nigeria, 2003</i>	<i>21.3</i>	<i>4.2</i>
<i>Malawi, 2004</i>	<i>0.9</i>	<i>2.4</i>
<i>Tanzania, 2004</i>	<i>4.9</i>	<i>7.8</i>
<i>Lesotho, 2004</i>	<i>7.5</i>	<i>7.0</i>
<i>Uganda, 2004-5</i>	<i>9.4</i>	<i>9.9</i>

*Source: Macro International Inc., country survey data.*

*Population Reference Bureau*

*1875 Connecticut Avenue, N.W. Suite 520*

*Washington, D.C. 20009*

Figures from 2011, from a series of Demographic Health Surveys in African countries revealed a range of inter-generational sex prevalence in 15–19 year olds from 3.3% in Malawi, 9.6% in Ghana, 13.7% in Tanzania, 19.3% in Uganda, and 25.5% in Nigeria, indicating that the phenomenon is flourishing and growing.

According to the “Policy Recommendations Based on the Major Findings of the 2004-05 Uganda HIV/AIDS Sero-Behavioural Survey” Sexual violence and age disparity in sexual relations is common. A significant proportion of female youth were forced to have sex at their sexual début and a significant proportion of teenage females had their last sex with a partner who was at least 10 years older than they were. Orphans and vulnerable children age 15-17 were more likely to initiate sex before age 15 than other children.

In Zimbabwe’s 2011 Demographic and Health survey, this phenomenon was underlined thus:

### **Age-mixing in Sexual Relationships**

“In many societies, young women have sexual relationships with men who are considerably older than they are. This practice can contribute to the spread of HIV and other STIs because if a younger, uninfected partner has sex with an older, infected partner, this can introduce the virus into a younger, uninfected cohort. To investigate this practice, women age 15-19 who had a sexual partner in the 12 months preceding the survey were asked the age of the partner. 15 percent of young women age 15-19 who had sexual intercourse had sex with a man 10 or more years older. Similarly, young men age 15-19 who reported that they had a sexual partner in the

past 12 months were asked the age of the partner. Less than 1 percent reported having a partner 10 or more years older.”

#### **2.4. Operational Definition of Terms**

**Prevalence;** the fact or condition of a trait or feature being common or dominant. The measure of a condition’s occurrence in a population at a given point in time. Prevalence can also be measured over a period of time (e.g. a year). In this document it refers to the occurrence of transactional sex among female trade apprentices.

**Implications;** a possible effect or result. This could be current or in the future.

**Transactional Sex;** Transactional sex relationships are non- commercial, non-marital sexual relationships motivated by the implicit assumption that sex is exchanged for material goods or other benefits. Though some writers see this as a cut and dried transaction without any romantic nuances, others see the transfers of money or gifts are “as much about the expression of love and commitment as they are about meeting the financial needs of women or the acquisition of sex for men.” So they are not necessarily a quid pro quo for sexual acts, but rather support with multiple meanings.

**Prostitution;** the practice, usually an occupation of engaging in sexual activity with someone for payment. The client is usually or in general, with someone who is neither a spouse or a friend, in exchange for immediate payment in money or other valuables. Historically most prostitutes have been women and most clients men.

**Female Trade Apprentices;** Apprenticeship is a system for training a new crop or generation of practitioners of a trade or profession with on-the-job training and often also some accompanying formal study such as classroom instruction and work. Traditionally, a master

craftsman trained young people in the craft or trade at a token cost, and got to use them as an inexpensive form of labour. Traditionally the master tradesman provided board and lodging for these apprentices. Female trade apprentices here refers to females learning a trade through this system. The system has evolved and apprentices may pay quite high fees. They are also no longer provided board and lodging, except in exceptional cases.

**Sunyani Metropolis;** Sunyani municipality used to be one of the twenty-seven districts in the Brong Ahafo region before the region was broken up into three. The municipality was established on 10th March, 1989 by a legislative instrument (LI) 1473. The Sunyani Municipal Assembly covers a total land area of 506.7 Km<sup>2</sup>. It is located at the heart of Bono Region lying between Latitudes 7° 20'N and 7° 05'N and Longitudes 2° 30'W and 2° 10'W. The Sunyani Municipal Assembly is responsible for the administration and development of the Municipality. The Assembly has three councils namely; Sunyani urban council, Abesim town council and Atronie area council.

**Ghana;** Ghana, is a Republic in West Africa. It is located on the Gulf of Guinea which is located in the Atlantic Ocean to the south, sharing borders with the Ivory Coast in the west, Burkina Faso in the north, and Togo in the east.

The Capital is Accra. Ghana has a of Population 31.07 million according to the latest (2020 ) census. The official language is English.

**HIV and AIDS;** HIV (*human immunodeficiency virus*) is a virus that attacks cells that help the body fight infection, making a person more vulnerable to other infections and diseases. It is spread by contact with certain bodily fluids of a person with HIV, most commonly during unprotected sex (sex without a condom) If HIV is not treated, it can lead to AIDS (*acquired immunodeficiency syndrome*).

**Client;** the same as customer or buyer of a service or item. It is the preferred term for patrons of prostitution in the literature.

**Intergenerational Sex;**As defined in the literature, age-disparate relationships generally refer to those in which the age gap between partners is 5 years or more. Intergenerational or cross-generation relationships usually refer to relationships with a 10-year or more age disparity between partners.

**Agency;** Women's agency is understood to mean a woman's intrinsic agency, or belief in herself and awareness of her rights; and a woman's instrumental agency, or her ability to affect her life by having power to make choices. Among feminists, the theory of agency must explain how it is possible for women in male-dominated societies to live in ways that reflect their genuine needs and concerns.

**Prerogative;**A prerogative is someone's special right or privilege Prerogative comes from the Latin root for a group having the right to vote first (prae-, "pre-" + rogare, "to ask") and thus came to mean "**privileged rank**." In current use, it refers to a right or privilege held by any person or group.

**Boyfriend;** a person's (female's) regular male companion with whom they have a romantic or sexual relationship. In reference to the female version, the term is "girlfriend".

**Partner;** in this case it refers to either member of a married couple or of an established (generally accepted and known) unmarried couple, as in boyfriend and girlfriend, or those who intend to marry; fiancé and fiancée.

**Romantic Reflection;** characterized by the expression of love, sexual love. Romance as a feeling is characterized by a thrill, excitement, and exhilaration towards a partner and relationship.

**Long-lasting Relationship;** A relationship that has lasted over a long span of time. The members trust each other and support each other in good and bad times. Usually the couple is well known to the friends and family of each other The relationship may be intimate (sexual) or not .

**Pay as you call;** Here a reference to the practice of immediately paying a prostitute for her sexual services, as opposed to the practice of gifting a female partner occasionally or as the need for support occurs, in a relationship that the literature calls transactional sex.

## **2.5. Relevance of the Study**

The study is very relevant considering that the literature states that transactional sex leads to an increase in HIV infections, and it appears there is a high prevalence of transactional sex among the population studied. It is relevant because that same literature claims that there is very little understanding of the intricacies of the practice, and even others counter the assertion that it leads to high levels of HIV and AIDS infections. It is also relevant because according to current census figures women outnumber men, and anything that affects them negatively, affects the whole of society negatively. The findings of this study would be an important resource for programme planners and implementers. It is formative research that supplies important information that can be used to plan programme interventions targeted at the populations studied in this research, and the related populations impacted by transactional sex. It provides insights that without this study would not be readily available. It forms a good platform based on which further and important research could be based

## **2.6. Chapter Summary**

This chapter reviewed various pieces of literature on transactional sex. The literature was gathered from published books, journals, peer reviewed articles, website publications, articles in the daily papers and other sources and is rightly cited. The literature examined the incidence and prevalence of transactional sex. It looked at various facets of the practice and its effects in various places in Africa and other parts of the world.

The literature establishes that TS is widespread. It confirms that TS is usually between older males and younger females, with the age difference sometimes up to ten years or even more. The literature affirms that education is an antidote to TS. The literature mentions that females lose sexual agency when they indulge in TS, and this could lead to dependence which further leads to IPV, and STIs including HIV and AIDS. A few sources however, contradict the general trend.

## **CHAPTER 3**

### **METHODOLOGY**

#### **3.0 Introduction**

This chapter discusses the research design and the methodology employed in data collection, sampling, and data analysis used in this study.

The study employed a quantitative approach to investigate the prevalence of transactional sex and its implications for female trade apprentices. This chapter discusses the methodology for the study, the source from which the data are collected, and the related topics addressed by this study. Mention is also made of the description of the population and the sampling procedures, the instrument used for data analysis, collection of data, and data analysis.

### **3.1 Research Philosophy**

All surveys were conducted with informed consent. The questionnaires were interviewer-administered. The questionnaire consisted of 55 items, all seeking to capture socio-demographic data on the target group as well as information on the respondent's sexual history, economic indicators, the practice of transactional sex if any, relationship dynamics (same-age vs inter-generational partners), and possible determinants of sex (sense of self-esteem, personal power, peer pressure, perceived financial status)

### **3.2. Methods**

As indicated in the earlier part of the study, this study used a quantitative approach (use of survey questionnaire). This study to adopted a positivist approach. It used scientifically rigorous methods to observe and measure facts, and used the numbers to make generalizations and look for causal relationships to explain the incidence of so called transactional sex and other variables, such as IPV, Female Agency, and predict the growth or decline of TS.

This study did not intend to ride a moral high horse. Whatever my personal values, they were subsumed, and I performed a value-free research. I was detached, objective and neutral.

#### **3.3.0 Research Design**

A research design is the overall strategy that the researcher chooses to integrate the different components of the study in a coherent and logical way, so that the study thereby, will

effectively address the research problem; it is the blueprint for the collection, measurement, and analysis of data.

This study is quantitative, and respondents who matched the target of the study (age, sex, occupation, geographical location) were located and interviewed, and the responses provided and the data related to the variables of the study and the study objectives were aligned and analysed to determine if they validated or countered the initial hypothesis. A quantitative cross-sectional study approach, using a 55 question instrument was used to collect data on study variables.

The questionnaire was prepared using Google forms, and was interviewer administered. The advantages of this method was that the cost of printing questionnaires was eliminated. The forms were loaded straight onto the interviewers drive even as the interview was taking place, saving time that would have been used in data entry and the concurrent mistakes. The data was easily exported into excel and SPSS for quick and easy analysis. The process was therefore economical and efficient; providing descriptive, inferential, and explanatory standardized information. A disadvantage of this design and process was technological, with frequent drops in internet service. Another disadvantage was the delicacy of the topic. The interviewer needed time to break the ice, and gain the confidence of the respondents. Some prospective respondents, after the introduction found a way to evade the interview. The relative low response rate needed a longer time on the field to make up the numbers.

### **3.3.1 Population**

The population for the study was all females within the ages of 16-26, learning a trade, in the Sunyani metropolitan area. There is no Database for this population, as the apprenticeship system has not been fully formalised. This study therefore cannot state any numbers for the

population. I have therefore included some figures for the 2020 census to give a rough idea of what we could be looking at.

Age Distribution (P 2020)		
0-9 years	32,592	Males 49.8%
10-19 years	34,113	Females 50.2%
20-29 years	41,406	0-14 years 15-64 years
30-39 years	19,703	65+ years 31.7% 64.9%
40-49 years	12,706	
50-59 years	8,102	
60-69 years	3,631	
70-79 years	2,561	
80+ years	1,372	

### 3.3.2. Sample Size

With quantitative research, larger sample sizes improve accuracy, and allows for more statistical analysis, and generalisation of findings. Usually, Slovin's formula ( $n = \frac{N}{1 + Ne^2}$ ), Where:

- $n$  = Number of samples,
- $N$  = Total population and
- $e$  = Error tolerance (level).

is used in determining sample size for best result, but Because of a lack of relevant data, or a database, we had to look for respondents where they could conveniently be found. Considering the delicacy of our subject, and the difficulty in getting true responses, we targeted 150

respondents. However, we were only able to interview about 100 respondents, and even with that, interference with the internet led to 77 fully filled questionnaires.

### **3.3.3. Research Variables**

The dependent variable was transactional sex. The independent variables are family structure, household wealth, age, age at sexual début, safe sex practices, intimate partner violence, and number of sexual partners. These independent variables, have been pointed out in the literature as having major relations to transactional sex

### **3.3.4 Confidentiality and Anonymity**

I deliberately did not record personal identifiers such as names and addresses to ensure anonymity of respondents and confidentiality of the data collected. Phone numbers were used as identifiers of the questionnaires in case we needed to get back to them for any clarifications.

Written informed consent was obtained from participants who were 18 years and above, but to forestall the delay involved in seeking approval for minors, all those who were less than 18, were not interviewed.

The participants were also informed of their right to stop the interview if they so wished, without any questions asked.

### **3.3.5 Ethical Approval**

Ethical approval for the study protocol was obtained from the ethics committee of the School of Graduate Studies and Research of the Ghana Institute of Journalism.

### **3.3.6 Setting**

The researcher administered his questionnaires in Sunyani. Before the breakup of the Brong Ahafo region into three different regions, it was the metropolis of a large hinterland extending in the west all the way to the Ivorian border, in the North to the Northern region, and in the South to the Ashanti region, and to the East, the Volta lake. Because of its location, in a predominantly rich agrarian region, it attracts a large number of migrants from the hinterland, who all come there to seek greener pastures.

According to the Encyclopaedia Britannica, it was the camping place for elephant hunters in the 19<sup>th</sup> century. The British set up a district headquarters there in 1924, and when they constructed a road to link the town with Kumasi, it became important as a hub for Cocoa, kola nuts, and the staples.

Although the town declined with the decline of the timber business due to deforestation, its popularity and population has been boosted by the presence of the multinational mining company Newmont.

Sunyani is also home to several banks and financial services companies. These include the apex bank, Bank of Ghana, and the following banks, SSB , ADB , Zenith, Barclays, Stanbic, Ecobank, National Investment, and, Ghana Commercial bank.

Other facilities that add to the stature of the town, are a regional, and district hospital, as well as several small health posts and private health providers.

### **3.3.7 Population and Nationality**

By the 2010 census, the municipality “had a population of 74, 240. About 94 percent of the population residing in the Municipality are Ghanaians by birth, with less than one percent (0.8%) being Ghanaians by naturalization. Smaller proportions of the population of the District

have dual nationality (2.4%) with two percent being ECOWAS nationals. Less than one percent each are Africans other than ECOWAS (0.4%) and from countries outside Africa (0.4%).”

### **3.3.8 Literacy Status**

The 2010 Census says “the municipality has a literate population of 81,118 (85.9%) and a non-literate population of 13,417 (14.1%). Of the literate population, 20 percent can read and write in only English, 5.7 percent in only a Ghanaian language and 72.3 percent in English and a Ghanaian language. About two percent (1.7%) can read and write English, French and a Ghanaian language and under one percent (0.3%) in English and French. The proportion of literate males is higher (55.4 %) than that of females (44.6%). The age group with the highest proportion of persons that are literate in both English and a Ghanaian (79.2%) language is 60-64. The age group 11-14 recorded the highest proportion of persons that are literate in English only (30.3%) and age group 35-39 recorded the highest proportion (11.6%) in a Ghanaian language only. Less than one percent of persons across all the age groups are literate in French and English.

### **3.3.9 Participants**

Participants were made up of females learning a trade. The trades were tailoring, hairdressing and manicure and pedicure. Their ages are between 18 and 28, although there were a few outliers. Most of them had finished Senior and Junior High School, while a few had only primary education, or had dropped out of school. Others had some level of tertiary education, while a few worked in other occupations.”

Sunyani has many suburbs. These areas are Penkwase, New Town, New Town Extension, Berlin Top, No.1. No. 2, Number 3, Estates, Area Four, Zongo, and Magazine.

Some are new settlements and have better and more modern amenities, while others are more densely settled and older, and are relatively deprived, while others too are overwhelmingly settled by a particular ethnic or religious group.

Because of these differences, we posited that it would cost a little more to train in the better appointed locations, while it could be that it would cost less in the older and less appointed locations.

However on the field, it turned out that the training areas were concentrated in a few areas. These were the Atronie Transport Station at New Town, Zongo, and Area Three. The most expensive school in our research for example was in Area three, which is a mixture of old residences and commercial property.

### **3.4 Measurement Instrument**

A 55-question questionnaire was administered to respondents. The questionnaires were written in English, but were translated into a local language - Asante Twi, to be sure the respondents understood the questions and answers.

The questionnaire was structured to reveal the following:-

- Family Structure and Background
- Family Financial Standing
- Educational Background
- Previous and Current Sexual Behaviour
- Behaviour Patterns that establish Transactional Sex

- Knowledge and Practise of Safe Sex
- Traces of Controlling Behaviour and Possibility of Intimate Partner Violence
- Age at Sexual Début

#### **3.4.1 Procedure**

1. The location for the apprenticeship was first located.
2. The researcher then introduced himself with his students identity card, and letter from the school.
3. Permission was sought from the Madam or Master.
4. The girls were told about the confidentiality and anonymity and required to fill a consent form.
5. The girls were invited individually and briefed to prevent discussions among themselves to prevent coaching, and the introduction of biases.
6. The questionnaire was subsequently administered.
7. The respondents were thanked and told that if the need arose, they would be contacted.

#### **3.4.2 Conflict of Interest**

This research was conducted in the absence of any commercial or financial relationships that could be construed as a current or potential conflict of interest, to the best of my knowledge. I did not know any of the participants before hand, and had no relationship with any of them in any way.

### **3.4.3 Data Sources**

When gathering information for research, there are two empirical alternatives. (1) Primary data; gathers relevant information for a specific purpose or study, done through interviews, surveys, experiments, or observations. (2) Secondary data; using statistics or information made by some else (Bell, 2005; Bryman & Bell, 2011).

This study used both primary and secondary data sources to provide the required responses to the research questions. The primary data was acquired by administering questionnaires, while secondary data was obtained through related literature on the research scope.

### **3.4.4 Sampling Technique**

The sampling technique adopted for this study was the purposive sampling technique, also known as judgemental, selective, or subjective sampling. In purposive sampling, a researcher has something in mind and participants that suit the purpose of the study are included. Since I knew who I wanted to interview, and the target of the research was easily identifiable, therefore I used my judgement as the situation provided, to conduct the interview. I looked for locales where the apprentices could be found, asked their permission, and proceeded to do the interviews. Thus, females within the ages of 16 and 26 who are in some form of apprenticeship were identified, and interviewed.

### **3.4.5 Data Analysis**

Data was analysed to provide descriptive, inferential, and explanatory information and provide standardized information. I used SPSS and excel as instruments of analysis. Also because I used Google Forms, some tables were generated by the application making it relatively easy to identify trends and differences. The results were displayed in tables in numerical form with accompanying explanations given. The results were then properly classified under the corresponding objectives of the study to aid in discussions, conclusions, and recommendations.

### **3.5. Ethical Issues**

This study involves sensitive issues, and as such, clearance was sought from the participants to be interviewed for their full consent. Permission was also sought from the various heads of the workplaces where the females to be interviewed work. Also, participants were assured of confidentiality and anonymity.

### **3.6. Limitations/ Delimitations**

#### **3.6.1 Limitations**

The research will add to the body of knowledge on Transactional sex within the context of females under apprenticeship within the Sunyani Municipality; however, a possible limitation is the usage of the term transactional sex. It could be mistaken for commercial sexual services. Within our context, and broadly speaking that is not so. The work also examines a purposeful sample and may not be generalizable to other sexual relations that exist among young females under apprenticeship and their male cohorts. One major delimitation of the research is that it is a case study focusing on one particular community, and the conclusions and results may not be applicable to other communities, who may have their own peculiar set of practices.

### **3.6.2 Delimitations**

Transactional sex is a broad term that can lend itself to several interpretations. This study is delimited to the sexual relations that exist between females under apprenticeship and the males who are financially responsible for them. The study does not consider legally or officially accepted marital relations. This study also did not focus on females above 26 years and so even though a few were encountered in the course of the research they were not added as they fell outside the scope of the study.

### **3.6.3 Challenges of Data Collection**

Challenges of Data collection included the following.

- Language and translation had to be grappled with in the study because most of the respondents were not fluent in English, and so the questionnaire administrator had the arduous task of translating the content of the questionnaire into Asante Twi.

Although Asante Twi is a lingua franca for most people, the cosmopolitan nature of the metropolis meant that the respondents spoke many other languages as their first languages. Some spoke Bono, others spoke Dagari, and yet others Fantara. Others spoke Nkworan and Mo while others too spoke Sisala, Gurma and many other languages, from the northern parts of the country.

All the terms used in the study had to be duly translated into the local lingua franca, Twi, to ensure full comprehension of the concepts and issues. No matter the stringency, certain nuances might have been lost.

The expression of ideas was difficult because the respondents understood certain words and expressions quite differently, and therefore very often, I had to ask them the same question in two or three different versions before they understood, and would give an understandable answer.

- In a few cases, the respondents were very recent migrants, and found it difficult to express themselves in Twi. So we had to conduct the interview in three different languages; Twi, English, and where I understood fragments of that language, like Dagari, had to insert that too.
- Access to the respondents, was a challenge. There was the need for lengthy explanations because in many cases the women were shy, and did not believe that their anonymity and confidentiality would be truly guaranteed.

Though the respondents said they were speaking the truth, sex is an especially private affair, and sensitive to discuss with a total stranger, so I believe some respondents might have coloured their responses to appear “respectable”. Sometimes I found this out after subsequent questions had been asked, and the answers appeared to contradict previous answers.

- There was a difficulty of aggregating respondents. This is because many of the ‘schools’ were small. Some madams and masters sometimes had only one or two students, therefore to get as many students as possible to be relatively representative, I had to move to many locations. This meant for every one or two prospective respondents, I had to explain the study, and this cost much effort and time. If this had been a commercial venture, I would have rated cost per interview quite high.

- Some madams and masters became a stumbling block to the study. Even though I would not give them details of the study, they insisted on a gist. Thereafter, they found reason to claim their apprentices were busy, and so could not be interviewed. In one particular case, I went four times, but was not able to get access to the students.
- Some prospective respondents were time wasters. They would initially agree to take part in the study, but after the introduction, while others were being interviewed would say they were buying water or food but then would disappear. Even though I would wait for them, and their friends would call them on phone, they would neither respond, nor return to be interviewed.
- Internet Challenges. From my signed consent forms, I interviewed 95 respondents at least. However, my final report indicates only 78 responses were recorded. This because during the interviews, I kept losing my internet connection, and had to update forms several times. It is obvious not all the updates were successful.
- Some of the spaces for the interviews were very cramped, because many people operate in some very small spaces. Getting a place to sit, a surface on which to put my laptop, and a space for the respondent that was private, was often a challenge. On one occasion, the rickety chair I was given broke and tossed me and my laptop onto the street.

## **CHAPTER 4**

### **ANALYSIS OF THE PREVALENCE OF TRANSACTIONAL SEX AND ITS IMPLICATIONS FOR FEMALE TRADE APPRENTICES IN THE SUNYANI METROPOLIS**

#### **4.0. Introduction**

This chapter focuses on the analysis of the data obtained. The discussions of the findings from the study was done under the following sub headings:

Cultural and Geographic Background

Familial Relationships

Financial Background

Educational Background

Ages of Respondents

Amorous Relationships

Background of Boyfriends

Family Awareness and approval of Relationships

Financial Support from Boyfriend

Existence of constrained behaviour, and IPV in the relationship

Agency in relationships, including Sex

Use of Condoms and Family planning methods

Age at sexual début

Incidence of Self induced and Hospital abortions

Discussion of STIs including HIV/AIDS

#### **4.1.0 Analysis of Key Findings.**

##### **Results**

In the previous chapters, i.e. chapters 1,2 and 3, this study established the research problem by providing a general overview and background to the study including statement of problem, research objectives and questions, scope of the study, justification of the study as well as the broad narrative of the study. It also examined the existing literature with the intention of establishing a baseline for future programmatic activities. This chapter looks at the results of the study.

##### **4.1.1 Demographic Data**

This section presents data on the background characteristics of respondents such as age, educational level, age at first sex, use of birth control, sexual agency, age of male partner, discussion of STIs, economic background, and migratory status affecting financial status. This section also looks at social approval of the amorous relationship of the respondents .

##### **4.1.2. Background of Respondents**

The results indicate that most of the apprentices grew up outside the Sunyani metropolis, and even the region. Indeed they come from all over Ghana. Most of them come from very rural backgrounds and the names of their villages are relatively unknown.

Out of 78 respondents, there are only four people who mentioned that they come from or grew up in regional capitals. These are Sunyani, Accra, Kumasi, and Cape Coast

A few also mentioned that they grew up in district capitals. These are Sawla, in the Savannah Region, and Bawku in the Upper East Region. Techiman in the Bono East region. Dormaa Ahenkro in the Dormaa District of the Bono Region, Wenchi (Wenchi Municipal) in the Bono Region and Jirapa in the Upper West Region, Juaben and Tapa (Ahafo Ano) in the Ashanti Region, Suhum and Somanya in the Eastern Region. Winneba (Effutu Municipal District) in Central Region. Lawra (Lawra Municipal District), Upper West Region, Even on this point, I noticed that many people were prone to adjusting their backgrounds to the nearest biggest town because they felt those locations were too remote and unknown. I often had to probe before the respondents would mention the names of the actual villages.

**Table 1- Cultural and Geographic Background of Respondents**

The following is the complete list of the towns and villages which the respondents claim they grew up in.

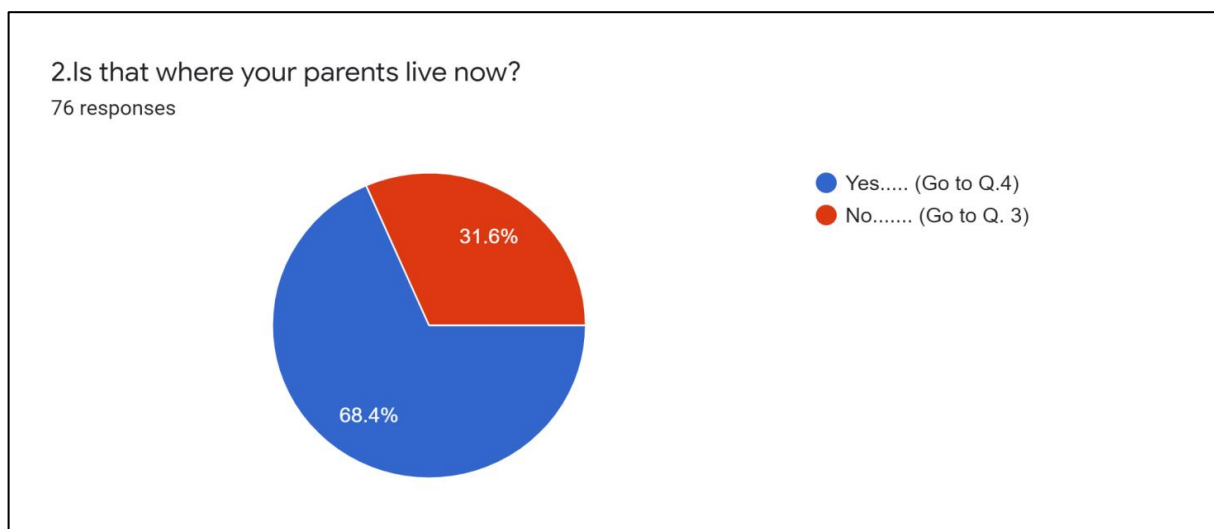
Sunyani	Seikwa	Dormaa Kyeremesu
Techiman	Nambosu (Bungkpurugu	Bawku
Kumasi	Yonyo)	Watchman via Atronie
Chiraa	Adjamesu via Bekwai	Jirapa
Drobo	Nsuatre	Dormaa Abonserekrom
Dormaa Ahenkro	Yaw Sae via Atronie	Akomadan
Accra	Dormaa Aboabo	Nkenkansa via Akomadan

Duwie via Gwolu	Dormaa Yaakrom	Babile via Lawra
Kasapen Ahafo via Mim	Dormaa Akwamu	Ahafo Gambia via Mim
Ayakomaso via Nsuatre	Wenchi	Mahiniso via Ntotroso
Suhum	New Tafo (Akim)	Cape Coast
Twenedua via Atronie	Atronie via Sunyani	Bampenase via Kumasi
Bamboi	Winneba	Kanjaga via Sandema
Tepa	Adawso	Somanya
Sawla	Lawra	Bunkpurugu
Asante Bekwai	Kpeve	Badu, via Wenchi
Atobiaso	Banda Wewa	Juaben

The origins of the respondents is very relevant and important to this study. According to a UNICEF document “Inequality in Ghana: A Fundamental National Challenge Briefing Paper - April 2014” “while rural development and urbanization have led to significant poverty reduction in the south, similar dynamics have been largely insignificant in northern Ghana. While the number of poor declined by 2.5 million between 1992 and 2006 in the south, the figure increased by 900,000 in the north. Poverty remains endemic in the northern regions of the country, with the poverty rate standing at 70.4 percent and 87.9 percent for Upper East and Upper West respectively in 2006. Of great concern are trends such as those witnessed in the Upper West, the poorest region in Ghana, where the depth of poverty actually *increased* substantially from 38.8% in 1999 to 48% in 2005/06 (GSS, 2007). This has led the World Bank to declare that Ghana’s success story in poverty reduction is the success story of its southern and urban areas only” (based on a recent NDPC and UNICEF study entitled *Inequalities in Ghana: Nature, Causes, Challenges and Prospects*, February 2013. Osei-Assibey E.)

So even if the respondent lived in a hamlet or village in the Bono and Ahafo regions, further probing revealed that they were originally from the northern regions of the country, and their parents had migrated down south to get a better life. Poverty is therefore quite entrenched in the group. The fact is confirmed by other questions such as 3 and 4 which reveal a strong incidence of fostering and guardianship. If poverty is a factor that predisposes females to transactional sex, then the main driver exists in our group of respondents.

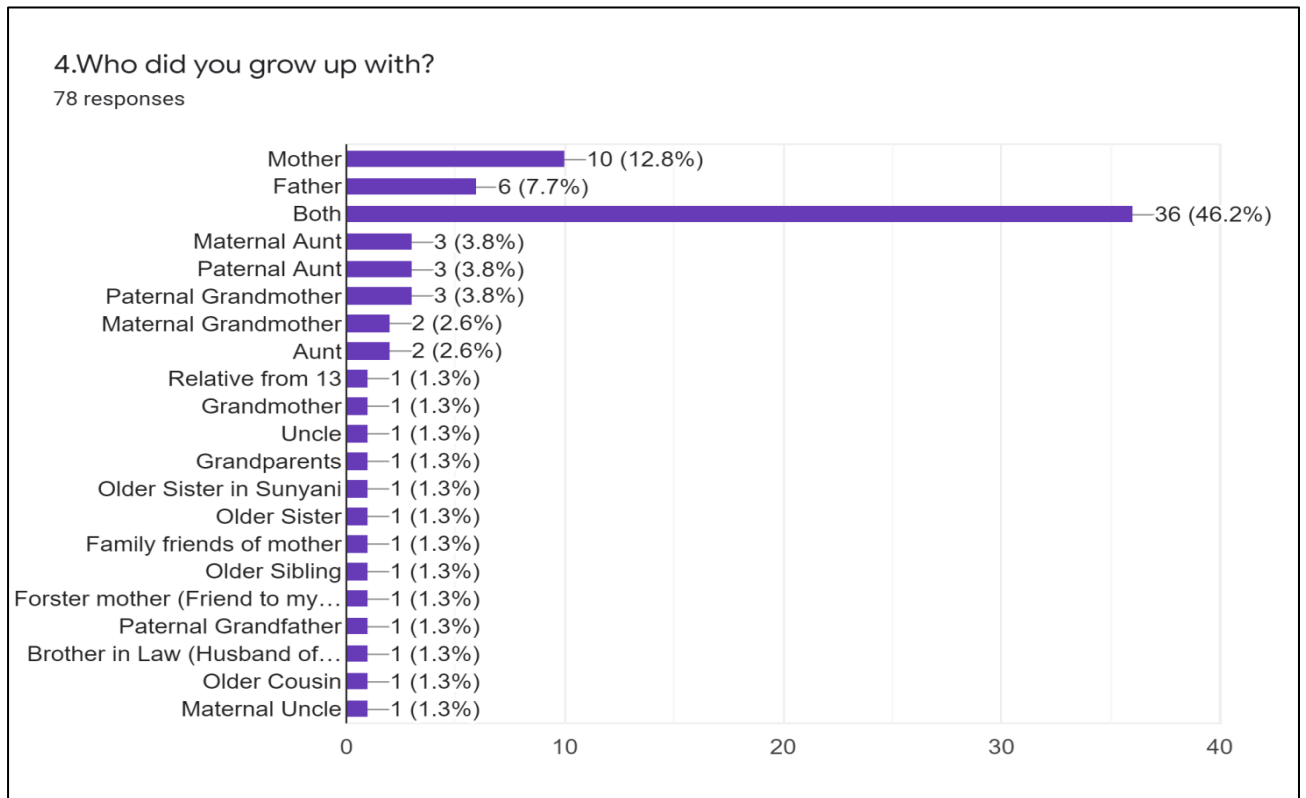
**Figure 1 - Current residence of parents**



Question 2 helps confirm this as per the next chart, which shows that about 70% of parents lived in a location other than where the respondents claimed they had grown up.

#### **4.1.3 Familial Relationships and Fostering**

**Table 2 - Familial Relations**



Of the 78 respondents, less than half, about 39 (46.2%) only had grown up with both parents. (Question 4). The rest had grown up with various relatives and foster families. This incidence of single parenthood and fostering would most probably have a major impact on the families' economic well-being. It puts pressure on older siblings, and other relatives and good Samaritans to bear the burden of the upkeep of many of the respondents. Since many of these helpers may be financially handicapped themselves, the wards would have to look at finding other sources of upkeep.

#### 4.1.4 Ages of Respondents

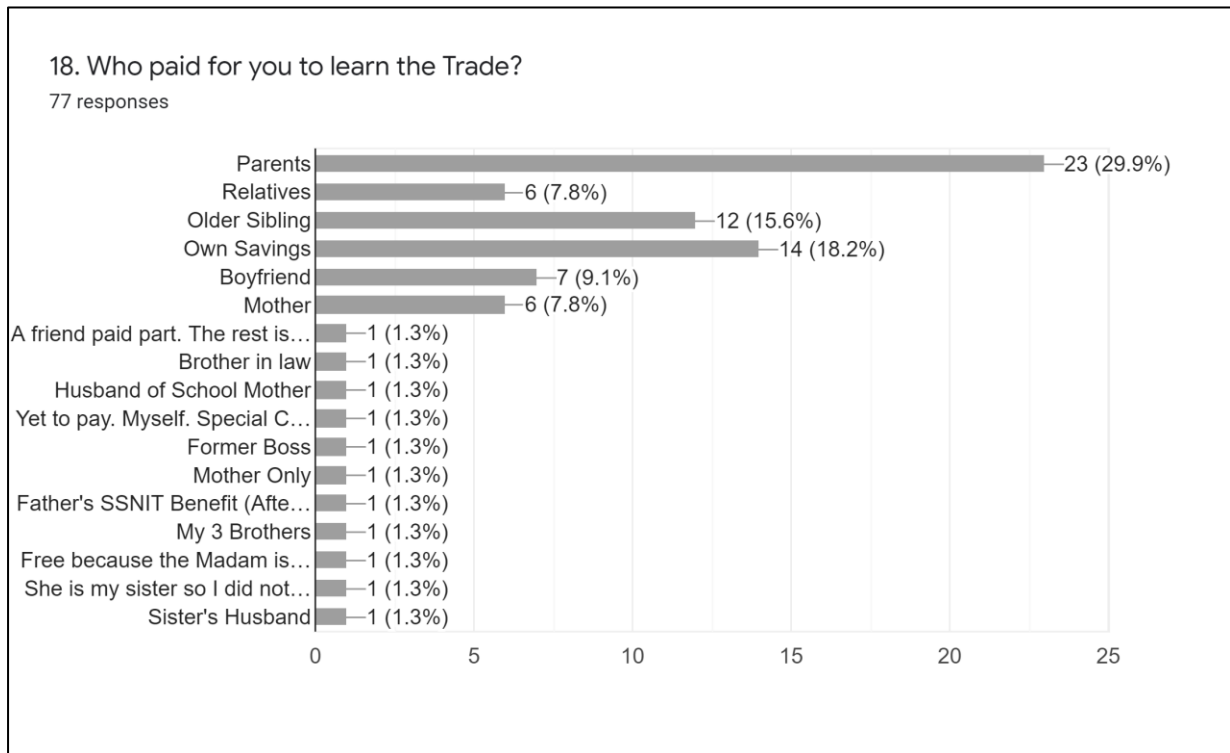
The majority of the apprentices were within the age brackets of 19-22, and 23-26 and 27. Making up 35%, 21% and 8% respectively. This seems to reflect the transition from secondary to tertiary institutions. As some within their cohorts transition from senior high school to tertiary institutions, these undertake an apprenticeship as many of them would not be able to

afford the cost of tertiary education, and some and would not have attended the first and second grade schools that would have prepared them adequately to gain entrance into a tertiary institution. Surprisingly, there some much older who were also learning a trade, but because they were not the targets of our scrutiny, they were not interviewed.

#### **4.1.5 Financial Background Indicators**

Judging from the responses to the various questions posed to judge the respondents financial standing, it was obvious that most of the respondents were financially stretched. In most cases, it was not the parents of the respondents who paid for them to learn the trade. It was an agglomeration of family members and others who paid the fees and supported the students with money for their upkeep. Although the ownership of smart phones is widespread, the marque is neither Samsung nor I-Phone, the two premier marques but more the Infinix and Techno type. Although the question was not posed as to how they got the phones, in the latter part of the questionnaire, (Question 33) there is confirmation to the fact that phones are one of the items often gifted by boyfriends.

#### **Table 3 - Source of payment for apprenticeship**



For most of the females, smart phones appear to be the only possession of worth, possession of the basic amenities of life were missing. The item most owned is the table-top cooker. Upon enquiry, it was clarified that this is not the two burner type, but actually the mini cylinder with a burner on top. Apart from that, the next item most owned, is the pressing iron, followed by the blender. The low level of possession of living amenities confirm the low economic level of respondents.

**Table 4 - Ownership of Smart Phones/Conveniences of Life**

	q10. Do you own a Smart Phone?					
	Yes		No		Total	
	Count	Column N %	Count	Column N %	Count	Column N %

9. Which of the following items (of your own) do you have in your house/room	Blender	23	36.5%	2	14.3%	25	32.5%
	Table-Top Gas Cooker	33	52.4%	6	42.9%	39	50.6%
	Fridge	13	20.6%	3	21.4%	16	20.8%
	Fan	32	50.8%	3	21.4%	35	45.5%
	Pressing Iron	33	52.4%	4	28.6%	37	48.1%
	Flat Screen Television	20	31.7%	3	21.4%	23	29.9%
	None	17	27.0%	6	42.9%	23	29.9%

This is further confirmed by the fact that 68 out of the 77 people interviewed confirmed they survive on allowances from various people to live.

Interestingly the sources of the allowance, as per the table below, is very varied. The three highest sources are parents, older siblings and boyfriends . Since many of the confirmed that the allowance from kin and kith were not regular, It stands to reason to surmise, that the absence of any of the other sources would spell hardship for the respondents

Since there was no question on the quantum of the allowance, one cannot make emphatic statements about it, but It appears that although family supports the females, the support from boyfriends is the surest and largest.

**Table 5 - Source of Allowances for upkeep**

21. Who gives you the allowance?	Parents	25	36.8%
	Relatives	3	4.4%
	Older Sibling	24	35.3%
	Own Savings	2	2.9%

Boyfriend	24	35.3%
Grandmother	1	1.5%
Mother	5	7.4%
My Madam	1	1.5%
Father	3	4.4%
Brother in Law	1	1.5%
Former Boss	1	1.5%
Husband of School Mother	1	1.5%
Friends	2	2.9%
Total	68	100.0%

#### 4.1.6 Educational Background

The majority of the apprentices 32 had finished Senior High School. This was followed by 20 who had finished Junior High School. Interestingly a combined figure of 9 people, made up of 5 in the university, and 4 in nursing training (includes those who have completed) were also learning a trade. The next biggest number,15, is made up of one person who had finished Primary 6 only, and 8, and 4, who had dropped out of JHS and Primary school.

Does this information reveal that people still have the opinion that trades are the preserve of those who did not do well academically or for school drop-outs? What about the contradictory fact that nine people with tertiary credentials are also learning trades? This would be a task for another study to discover.

**Table 6 - Educational Background of Respondents**

**q11. How far did you go in school?**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Finished Primary Six	1	1.3	1.3	1.3
Finished JHS	20	26.0	26.0	27.3
Dropped Out of JHS	8	10.4	10.4	37.7
Finished SHS	32	41.6	41.6	79.2
Dropped Out of SHS	3	3.9	3.9	83.1
Dropped out of Primary school	4	5.2	5.2	88.3
Tertiary	5	6.5	6.5	94.8
Nursing/Teacher Training	4	5.2	5.2	100.0
Total	77	100.0	100.0	

**4.2 Amorous Relationships**

Of the 77 respondents, 45 had a boyfriend at the time of the study, and 15 claimed they did not have one. Out of those who did not have a boyfriend, a subsequent question asked if they had had one in the past two years. Those who answered “yes” were grouped with those who had one for subsequent relevant questions. The two groups made up 75 people out of the 77 who had had boyfriends within two years. This means that the majority of respondents had boyfriends.

**Table 7 -Respondents who currently have Boyfriends**

**q24. Do you currently have a boyfriend?**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	45	58.4	75.0	75.0
No	15	19.5	25.0	100.0
Total	60	77.9	100.0	
Missing System	17	22.1		
Total	77	100.0		

**Table 8 -Respondents who have had a boyfriend in the past Two Years**

**q25. Have you had a boyfriend in the past two years?**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	26	33.8	89.7	89.7
No	3	3.9	10.3	100.0
Total	29	37.7	100.0	
Missing System	48	62.3		
Total	77	100.0		

Interestingly, for a group that one could claim are having transactional sexual relationships, the respondents do not appear to be promiscuous. Very few of them have ever had more than one boyfriend at a time, as the table below shows.

**Table 9-Incidence of multiple boyfriends.**

		q5. How old are you?											
		15 - 18		19 - 22		23 - 26		27 - 30		30+		Total	
		Count		Count		Count		Count		Count		Count	
29. Have you had, or do you have another boyfriend at the same time? (Do not answer if you responded NO to Qs. 24 & 25)	Ever	0		4		0		1		0		5	
	Never	2		25		17		14		1		59	
	Sometimes	0		3		2		0		0		5	
	Total	2		32		19		15		1		69	

**Table 10- Age of Respondents/Age of Boyfriends**

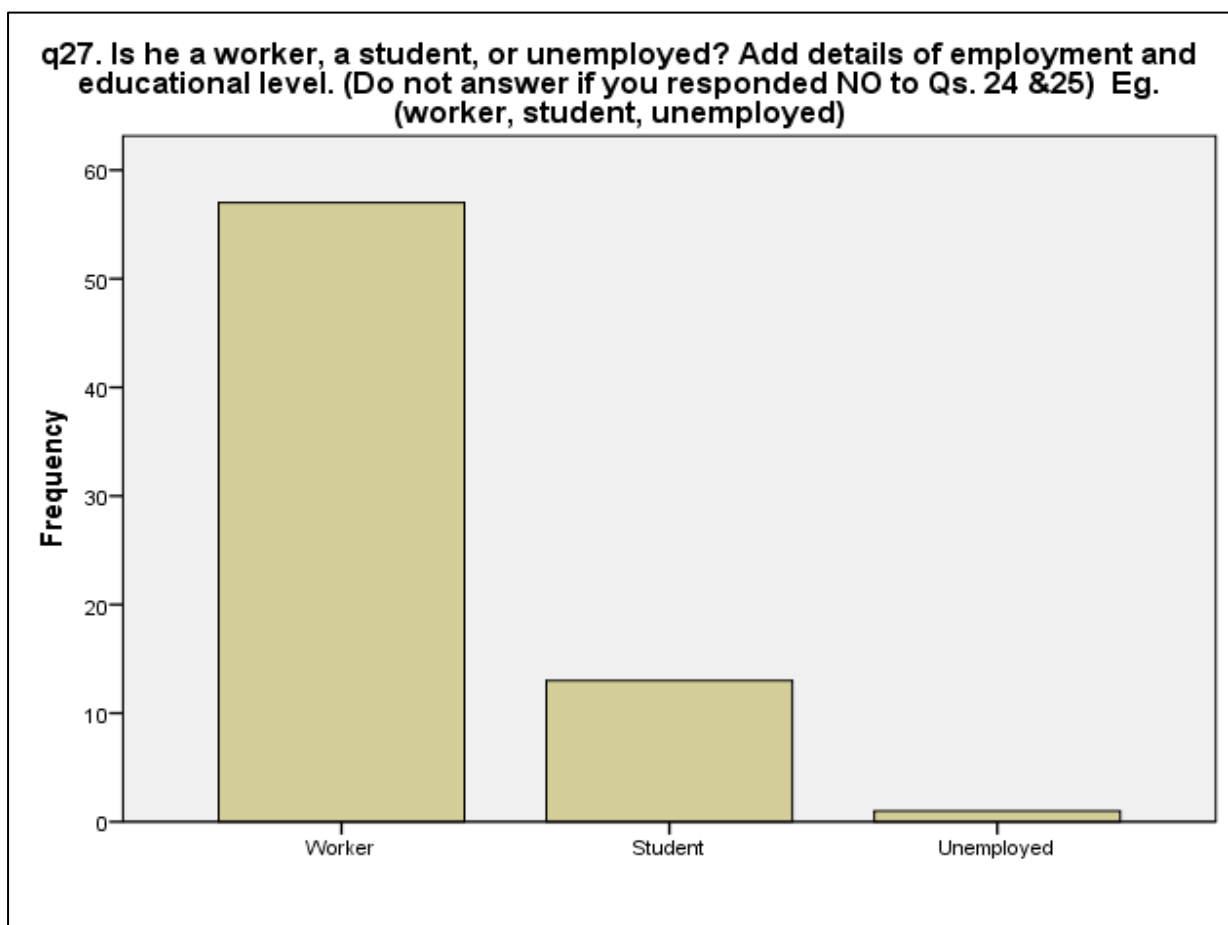
		q5. How old are you?											
		15 - 18		19 - 22		23 - 26		27 - 30		30+		Total	
		Count		Count		Count		Count		Count		Count	
q26. How old is your boyfriend? (Do not answer if you responded NO to Qs. 24 & 25)	18 - 21 yrs	1		2		0		0		0		3	
	22 - 25 yrs	1		15		5		0		0		21	
	26 - 29 yrs	0		9		6		6		0		21	
	30 yrs +	0		6		9		10		1		26	
	Total	2		32		20		16		1		71	

#### 4.2.1 Background of Boyfriends

The responses indicate that most of the boyfriends are older than the females. Because the ages are in ranges, we cannot always specify the exact difference, but looking at the ranges surmise that the difference is just about five years.

### Figure 2- Economic Status of Boyfriends

Most of the males are in paid employment



### 4.3 Condom Use (Also an indicator of female Agency)

Condom use is non-prevalent among the respondents. Only 15 use a condom every time they have sex, while 34 never use a condom. 25 use condoms sometimes. Those who use condoms sometimes said they used condoms when they were in their unsafe period. Those who claimed they never used a condom claimed they did not like it, rather than their boyfriends not liking condoms.

**Table 11-Incidence of Condom use among respondents**

**44. Do you use a condom? (Do not answer if you responded NO to Qs. 25 &26)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	15	19.2	19.2	19.2
Always (Go to Q.52)	4	5.1	5.1	24.4
Never (Go to Q.50)	34	43.6	43.6	67.9
Sometimes	25	32.1	32.1	100.0
Total	78	100.0	100.0	

This is a confirmation that the females were not without the power to negotiate within the relationship. This is further confirmed in Question 43, where the women claim they often initiate sex themselves, and do not wait for their boyfriends.

**Table 12 -Reasons for not using condoms**

**45. Why don't you use a Condom? (Do not answer if you responded NO to Qs. 25 &26)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	30	38.5	38.5	38.5
I prefer it natural/raw	31	39.7	39.7	78.2
My boyfriend does not like to wear one	9	11.5	11.5	89.7
We forget	1	1.3	1.3	91.0
We trust each other	7	9.0	9.0	100.0
Total	78	100.0	100.0	

**4.4 Intimate Partner Violence**

There was no evidence of intimate partner violence. Only three out of the 77 respondents reported ever being beaten by their boyfriends. That is only about 3.8 percent. This compares favourably to the national figures. According to Owusu Adjah and Agbemafle (2016) the prevalence of domestic violence remains unacceptably high with numerous consequences ranging from psychological to maternal and neonatal mortality and morbidity outcomes in pregnant women. Of the 1524 ever married women in their study, 33.6 % had ever experienced domestic violence. The risk of ever experiencing domestic violence was 35 % for women who reside in urban areas.

**Table 13- Existence of IPV**

**37. Has your boyfriend ever beaten you? (Do not answer if you responded NO to Qs. 24 &25)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	7	9.0	9.0	9.0
No	68	87.2	87.2	96.2
Yes	3	3.8	3.8	100.0
Total	78	100.0	100.0	

#### **4.5 Age at Sexual Début**

The information indicates that only eight (8) people had sex by the age of fifteen (15) which is below the current national figure of 18. The majority had sex first, between the ages of 16 and 19. Seventeen respondents had sex first, after the age of twenty (20) Interestingly, ten (10) females had never had sex. Considering that the literature seems to suggest that the practitioners of transactional sex live off sex, these people seem to defy the fact. If as many as 10 were virgins, and the majority started sex relatively late, then they may not be practising transactional sex. Unfortunately the ages are in ranges because people are sensitive about giving out that information, so we cannot pinpoint precise ages.

**Table 14 - Age at Sexual Début**

**50. When was your first time of having sex (Age)**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	3	3.8	3.8	3.8
12-15 yrs	8	10.3	10.3	14.1
16-19 yrs	40	51.3	51.3	65.4
20 yrs+	17	21.8	21.8	87.2
Never	10	12.8	12.8	100.0
Total	78	100.0	100.0	

**4.4 Use of Emergency Contraception and Abortifacients**

If as the literature states, these people are having transactional sex, with multiple partners and were being careless, it stands to reason they would be having abortions of all kinds. Therefore in question 53, I camouflaged two abortion methods. Medabon is a pseudonym for hospital abortions, and Cytotec an abortifacient usually purchased from pharmacies. The figures to not suggest high levels of any kind. The trend however seems to indicate older respondents preferred hospital abortions, perhaps an indication of caution, and maybe being more financially secure.

The use of emergency contraception is obvious from the data. The respondents used them as insurance during the periods when there not sure of their safe periods. Hospital abortions (Medabon) and also use of abortifacients were few.

**Table 15- Use of Contraception and Abortifacients**

		q11. How far did you go in school?								
		Finishe d Primary Six	Finishe d JHS	Droppe d Out of JHS	Finishe d SHS	Droppe d Out of SHS	Droppe d out of Primar y school	Tertiar y	Nursin g/ Teac her Trainin g	Total
		Count	Count	Count	Count	Count	Count	Count	Count	Count
53.	Lydia	0	8	0	9	0	2	1	2	22
Which of	Postinor-2	1	10	4	13	0	2	1	0	31
the	Levron	0	4	0	6	0	3	2	1	16
following	Medabon	1	1	0	4	0	2	0	0	8
birth	Secure	0	2	1	1	0	1	1	0	6
control	Cytotec	0	4	1	1	0	0	1	0	7
medicatio	Total	1	15	5	16	0	4	4	2	47
ns have										
you ever										
taken?										

A total of twenty two 69 people had used an emergency contraceptive. Eight had had a hospital abortion, and seven had use an over the counter abortifacient. Six had used a regular hormonal birth control pill. The table above gives deeper insight.

**Discussion of STIs including HIV and AIDS**

**55. Have you ever discussed Sexually Transmitted Infections, including HIV and AIDS with your partner/partners**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	4	5.1	5.1	5.1
No	43	55.1	55.1	60.3
Yes	31	39.7	39.7	100.0
Total	78	100.0	100.0	

The literature states that people involved in transactional sex are at higher risks of contracting HIV /AIDS. I therefore asked if respondents ever discussed STIs including HIV /AIDS. The results show clearly that fewer people discuss the issue than those who do not.

#### **4.5 Discussions of Key Findings**

In the previous chapters, i.e. chapters 1,2 and 3, this study diagnosed the research problem by providing the general overview and background to the study including statement of problem, research objectives and questions, scope of the study, justification of the study as well as the broad narrative of the study. It also examined the existing empirical literatures with the intention of establishing the knowledge gaps. It provided methodological rigour, setting out the research design including methods, population and sample size and sampling techniques.

Here it is right to do some prognosis in the light of the objectives and the guiding assumption of this study as follows. This study has two-fold objectives namely, broad and specific. Broadly speaking, the study sought to find out if female trade apprentices in the Sunyani metropolis practise transactional sex. Furthermore the study tried to find out if there were drivers for transactional sex, such as real need/poverty, or the adoption of lifestyles that forced the apprentices to practise transactional sex to fund that lifestyle.

The literature reveals three ideal-type paradigms of the determinants and nature of women's practice of TS: sex for basic needs; sex for improved social status; and sex and material expressions of love. (Stoebenau et al 2016) Based on this typology, as many of the females rely on their boyfriends for their basic needs, then they are practising transactional sex. Practise. Of the second type, sex for improved social status, I found no evidence to bear this out. Of the

third type, I found no evidence that it did not exist, and I did not discover where it was discrete from the first type.

Looking at other markers of T.S. may help us understand the phenomenon better. There was no evidence of constrained behaviour and intimate partner violence, The females have relatively long- lasting relationships instead of indulging in serial relationships with several males. We can say though the relationships seem to be transactional, we need to research more to confirm or confound it.

#### **4.6 Conclusions**

- The majority of the families of the respondents are migrants from outside the region.
- Most of the respondents grew up with people other than their birth parents.
- The families of the respondents are generally not wealthy.
- The ages of the respondents in the main correspond with their counterparts in the universities and other tertiary institutions.
- The majority of the respondents have finished SHS. Interestingly, some had even finished tertiary institutions.
- Most of the respondents have boyfriends, and the boyfriends are generally up to five years older than the females.
- The boyfriends are workers, in the majority and support the respondents financially.
- The respondents mostly have monogamous relationships.
- The respondents are able to negotiate their roles in the relationship, including sex.
- The age of sexual début of most respondents fits the national figure of 18.
- Few respondents have had an abortion.
- STIs, including HIV and AIDS is mostly not discussed by respondents

## **CHAPTER 5**

### **SUMMARY OF KEY FINDINGS, CONCLUSIONS AND RECOMMENDATIONS**

#### **5.0. Introduction**

In chapters 1,2,3 and 4, this study diagnosed the research problem and provided some predictions in chapter 4 in order to suggest appropriate suggestions to address the research problem here in chapter 5.

This research hypothesises that the majority of relationships between female trade apprentices in the Sunyani Metropolitan area and males is marked by age discrepancies. This study further asserts that this feature is explained by the fact that traditionally, males are expected to support females, and only older males in steady employment would have the wherewithal to do so. Furthermore, the provision of resources to females, is an expression of the value males place on the relationship, and is not buying the sexual favours of the female. This study further hypothesises that despite this apparent reliance on males for most of their material needs, females are able to negotiate the roles in the relationship to a large extent, and could even be dominant in the relationship.

#### **5.1. Summary of Key Findings**

Contrary to what most of the literature states, Intimate partner violence is almost non-existent in the relationships between these apprentices and their boyfriends. It is rare to find a girl dating more than one man at a time contrary to what is implied in the literature. Contrary to the literature, the girls in general are able to negotiate the dynamics of the sexual act. For example, among those females who did not use condoms with their boyfriends, most of them claimed THEY did not like a condom, not their boyfriends. In conformity with what the literature

states, most of the boyfriends of the apprentices were five years or more older than the girls, qualifying the relationships as intergenerational. The relationships may qualify as transactional, because in the majority of cases, the boyfriends are responsible for almost all the material needs of the respondents while they provide sex in return. However, this ignores the fact that culturally, males are expected to take care of female partners and the exchange of gifts is part of the complex courting ritual preceding marriage. However, the exigencies of modern life may have accentuated the practice, because the needs of the females have ballooned and morphed into new requirements. The girls therefore gravitate towards working men, in their relationships. The findings of this study indicate clearly that Condom use is generally reserved for when the ladies are in their unsafe periods. Otherwise they have unprotected sex. Where the ladies are not sure of their status they use emergency contraceptives. If a partner is unfaithful, he/she exposes the other partners to the threat of STIs including HIV and AIDS.

## **5.2. Conclusions**

This study was limited by the fact that because of the delicate nature of questions, self-administration of questionnaires were not possible. If any two respondents had had the chance to discuss the questions, the possibility is quite high that they would have influenced each other. I could have maybe gotten more respondents, but their answers may not have been valid because of influence from other people. I therefore had to balance the two and choose the method that would give a true representation of the facts. If I had to do the data collection again, I still would do it the same way. To support this further, I was able to glean little nuggets of information, that I had not anticipated.

This study could have discovered a lot more if some other pertinent questions had been asked. On the issue of condom use, it turned out that some people looked at it in a religious light, but

the direct question was not posed. Another respondent stated that she had an allergy for rubber, and so reacted to it when she used it.

On question 55, about discussions on STIs, including HIV and AIDS, I could have added a question on the person who who initiated the discussion. That question was not asked, but the impression I got was that mostly it was the male partners who used it to try to get or enforce exclusivity from their female partners.

This study anticipated that some of the questions were too personal, and would not be comfortably answered. To cater for this, I posed the question as it related to their friends. Most respondents answered the questions, so those five or so questions were not needed, and could have been replaced by other relevant questions, or could have led to a reduction in the number of questions. It is also assumed (wrongly) that the firm or preferred boyfriend would in all cases be younger than the second boyfriend who would be the blesser/sugar daddy. However it turned out that primary boyfriends could be much older than the “30 +” upper limit that I fixed as against “60+” for the secondary boyfriend.

There was also no question about the regularity of allowances that came from parents, and or older siblings and relatives, but some respondents let it drop that the allowance was not regular at all. One respondent for example, said their hamlet was so poorly served by the mobile networks that, even sending money from there to her was an impossibility.

I have enjoyed doing this exercise so thoroughly, that I would love to replicate the exercise. Since Accra and Kumasi are more urban, it would be interesting to study apprentices in those two locations and compare the findings.

Most importantly, I think this quantitative basis would be enhanced by a qualitative study based on its findings.

## Recommendations

The term Transactional Sex sounds too close to prostitution. Many people would look at TS and those involved in it the same way as prostitutes, a name that carries with it so much stigma and labours under so much social opprobrium. Maybe it would be useful to coin a new term that would be less condemnatory. For those who seek to reduce or moderate the incidence of T.S. and are planning intervention programmes, they should know that to stigmatise the behaviour means that it would be very difficult to effect change. As Brewis and Wutich (2019) summarise in their article “Why we should never do it: stigma as a behaviour change tool in global health”, the following are the effects of stigmatisation;

- ▶ Stigma is used as a tool for motivating health behaviour change, often effective at budging otherwise hard-to-shift behaviour.
- ▶ Shame-induced stigma most damages those already vulnerable, reinforcing health disparities.
- ▶ Global health use of shaming tactics can inadvertently worsen health-damaging stigma, especially for those with the least power.
- ▶ These effects, that drive additional health disparities and suffering, are difficult to prevent.
- ▶ Ethically and practically, stigma should never be deployed as a global health tool because the effects are often both unavoidable and invisible to outsiders

One should not forget that one of the pillars of the Health Belief Model, is Self Efficacy. Self Efficacy refers to a person’s belief that he is capable of changing his current inimical behaviour to a proposed or advocated beneficial one. Without a belief in self to accomplish the change, the person may only get to Stage four of the Stages of Change Model; This is the stage when people mostly depend on their own willpower. They make overt efforts to quit or change a

behaviour and are at greatest risk for relapse if the willpower is not strong enough. Lack of willpower means the person or persons, cannot advance to the Maintenance stage where the proposed behaviour has been adopted and is maintained.

Another recommendation that the findings of this study lead me to make is that all phenomena should be looked at from the cultural milieu from which they emanate. In Ghana, it is not the practice that males and females of the same age partner. Indeed if the findings of this research confirm any fact, it is that the practice is males are usually about five years older than females in most relationships. Anecdotal evidence suggests that in our parents generation, it was not unusual for our fathers to be ten years older than our mothers. Therefore to label the fact as Intergenerational Sex, and condemn it as an indicator of transactional sex goes against the grain of accepted fact.

On the programmatic side, I would recommend the setting up of scholarships to support female trade apprentices, so they are not dependent on their boyfriends for their upkeep and maintenance. Similar schemes exist for girls in deprived areas.

In Ghana for example, UNICEF partnered with Swedish bicycle brand Vélosophy to donate bicycles to the girls so that they can ride to school safely. Vélosophy pledged to donate a top-of-the-range aluminium bicycle to a Ghanaian schoolgirl for every one of its bicycles sold.

Camfed, another NGO, focuses on girls and young women in rural areas of sub-Saharan Africa. That is where girls face acute disadvantage, and where their empowerment is has a major impact.

The Girls Education Initiative of Ghana provides academic and financial support for girls and applicants with special needs so that they can access higher education and professional opportunities.

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**APPENDIX**  
**CONSENT FORM**

**Title - The Prevalence and Implications of Transactional Sex among Female Trade Apprentices In the Sunyani Municipality**

**Researcher - Prince George Sagoe**

**Institution- School of Graduate Studies & Research, GIJ**

**PARTICIPATION IN THIS RESEARCH STUDY IS VOLUNTARY**

I have read and understood the study information dated 10/2021, or it has been read to me. I have been able to ask questions about the study and my questions have been answered to my satisfaction.	YES / NO
I consent voluntarily to be a participant in this study and understand that I can refuse to answer questions and that I can withdraw from the study at any time up until Report Writing, without having to give a reason.	YES / NO
I agree to the filling of a questionnaire as my participation.	YES / NO
I agree to maintain the confidentiality of the research by not discussing it with anyone.	YES/NO
I agree to participate in this study for no financial consideration	YES/ NO
I understand that the information I provide will be used for the dissertation of the researcher - Prince George Sagoe . My information will not have my name or address.	YES / NO
I agree that answers and information I provide can be quoted in research outputs.	YES / NO
I understand that any personal information that can identify me – such as my name, address, will not be taken.	YES / NO
I understand that only my phone number may be taken in case the researcher wants to clarify any information.	YES / NO
I give permission for the (anonymised) information I provide to be deposited in a data archive so that it may be used for future research.	YES / NO

**Please keep a copy of this consent form.**

Participant Phone No.

Signature/Thumbprint: \_\_\_\_\_ Date \_\_\_\_\_

Interviewer name: Prince George Sagoe

Signature: \_\_\_\_\_ Date \_\_\_\_\_

For information please contact: Prince George Sagoe. nanasegu10@gmail.com

