

This is an electronic reprint of the original article. This reprint may differ from the original in pagination and typographic detail.

Sexual Harassment and Victimization from Four Other Types of Interpersonal Aggression in Ghana: A Cycle of Victimization

Anwar, Farida; Afari-Korkor, Jasmine ; Österman, Karin; Björkqvist, Kaj

Published in:
Journal of Educational, Health and Community Psychology

Published: 01/03/2020

Document Version
Final published version

Document License
CC BY-SA

[Link to publication](#)

Please cite the original version:
Anwar, F., Afari-Korkor, J., Österman, K., & Björkqvist, K. (2020). Sexual Harassment and Victimization from Four Other Types of Interpersonal Aggression in Ghana: A Cycle of Victimization. *Journal of Educational, Health and Community Psychology*, 9(1), 1–20. <https://urn.fi/URN:NBN:fi-fe202201147529>

General rights

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

Take down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

Sexual Harassment and Victimization from Four Other Types of Interpersonal Aggression in Ghana: A Cycle of Victimization

Farida Anwar

Developmental Psychology, Åbo Akademi University,
Finland
farida.anwar@abo.fi

Karin Österman

Developmental Psychology, Åbo Akademi University,
Finland
karin.osterman@abo.fi

Jasmine Afari-Korkor

Developmental Psychology, Åbo Akademi University,
Finland
jasmine.afari-minta@abo.fi

Kaj Björkqvist

Developmental Psychology, Åbo Akademi University,
Finland
kaj.bjorkqvist@abo.fi

Abstract

The aim of the study was to investigate victimization from sexual harassment, and level of emotional distress due to it, are associated with four other types of victimization. A questionnaire was completed by 280 female university students and lecturers in Ghana. The mean age was 26.7 years ($SD = 6.2$). The questionnaire included scales for measuring frequency of sexual harassment, emotional distress due to sexual harassment, physical punishment during childhood, victimization from peer aggression at school, and victimization from intimate partner aggression. Respondents who were more than average victimized from sexual harassment scored significantly higher on physical punishment during childhood, victimization from peer aggression at school (revictimization), and victimization from intimate partner aggression (multiple victimization). When frequency of sexual harassment was controlled for, emotional distress caused by sexual harassment correlated positively with victimization from peer aggression at school, and victimization from verbal intimate partner aggression, thus suggesting sensitization to aggression. Victimization from sexual harassment was associated with higher levels of both previous and simultaneous victimization from other types of aggression, thus corroborating the principles of both revictimization and multiple victimization. The finding does not suggest that sexual harassment in all cases is associated with other types of victimization.

Keywords: sexual harassment, revictimization, emotional distress, Ghana

Received 25 August 2019/Accepted 27 February 2020 ©JEHCP All rights reserved

Introduction

Victimization from one or multiple types of aggression has been found to be associated with a higher risk of being victimized again by the same or some other type of aggression; this reoccurrence of victimization has been termed revictimization (Finkelhor, Ormrod, & Turner, 2007;

Henriksen, Mattick, & Fisher, 2015). The term 'cycle of violence' is often used to suggest that abuse or maltreatment during childhood leads to victimization and/or perpetration of aggression later in life (Tomsich, Jennings, Richards, Gover, & Powers, 2015).

Exposure to multiple types of aggression in adults has been associated with emotional distress (Palm, Danielsson, Skalkidou, Olofsson, & Högberg, 2016) and poor mental and physical health in female victims (Campbell, Greeson, Bybee, & Raja, 2008). It has been linked to higher levels of psychological distress in other situations, thus implying sensitization to aggression (Holt, Finkelhor, & Kantor, 2007). Multiple victimization has been found to predict levels of trauma symptoms (Finkelhor et al., 2007).

The aim of this study was to investigate to what degree victimization from sexual harassment is associated with other types of victimization, thus qualifying as revictimization or multiple victimization, or both. Revictimization was, in the present study, investigated by examining whether victimization from sexual harassment as an adult is associated with previous victimization from childhood physical punishment, and victimization from peer aggression at school. Multiple victimization was studied by examining whether there was an association between victimization from sexual harassment and victimization from verbal and physical intimate partner aggression as an adult. A further aim of the study was to investigate whether a heightened emotional vulnerability to sexual harassment is associated with revictimization and/or multiple victimization.

Sexual Harassment

Sexual harassment hinders the freedom and mobility of women (Ilahi, 2009), and it impairs the psychological and physical well-being of the victims (Avina & O'Donohue, 2002). Single or unmarried females have been found to be more vulnerable to sexual harassment than others (Neupane & Chesney-Lind, 2014; Madan & Nalla, 2016; Merkin, 2012). Sexual harassment of women has in previous studies been associated with other types of victimization, such as victimization from childhood abuse (Campbell et al., 2008; Wyatt & Riederle, 1994), from peer aggression at school (Pellegrini, 2001), and from intimate partner aggression (Campbell et al., 2008).

Childhood Physical Punishment

By 2019, 56 countries have by law banned physical punishment of children in all settings (Global Initiative to End All Corporal Punishment of Children, 2019a). Physical punishment during childhood has been associated with psychological, physical, and social negative outcomes later in life. Several psychological concomitants of physical punishment have been identified including depression, mental health problems (Afifi, Mota, Dasiewicz, MacMillan, & Sareen, 2012), alcohol abuse, depression, mental health problems, and schizotypal personality (Österman, Björkqvist, & Wahlbeck, 2014). Respondents who have been victimized from physical punishment during childhood have also been found to be at a higher risk for developing physical health problems such as asthma, cancer, and cardiovascular diseases (Hyland, Alkhalaf, & Whalley, 2013). It has been suggested that childhood physical punishment might lead to the development of a victim personality (Björkqvist & Österman, 2014). It has furthermore been found that respondents who were abused or maltreated during childhood became involved in criminal activities and became offenders in adulthood more often than others (Widom & Maxfield, 2001). In Sweden, a decline in the involvement of adolescents in criminal activities has been observed 21 years after the ban on physical punishment of children (Durrant, 2000). Non-aggressive methods of childrearing have been found to be more effective than physical punishment in order to develop prosocial behaviours in children (Petrovic, Vasic, Petrovic, & Santric-Milicevic, 2016).

Peer Victimization at School

Victimization from peer aggression has been defined as being targeted by children of the same age other than siblings (Finkelhor & Dzuiba-Leatherman, 1994). Peer victimization is a broader concept than bullying, since it also includes single episodes of aggression whereas bullying per definition is a repeated activity. Victimization from peer aggression has been associated with serious physical and psychological health problems including anxiety, depression, and loneliness (Iyer-Eimerbrink, Scielzo, & Jensen-Campbell, 2015), social phobia and agoraphobia (Gladstone, Parker, & Malhi, 2006), and suicide (Klomek et al., 2009). Victims of peer aggression have been found to develop internalisation problems like anxiety, depression, and loneliness later in life (Iyer-Eimerbrink et al., 2015).

Correlations have been found between maltreatment during childhood and revictimization in the form of peer aggression and intimate partner aggression later in life (Baldry, 2003). In western

countries, physical punishment during childhood has been found to be a predictor of perpetration and victimization from peer aggression in school (Duong, Schwartz, Chang, Kelly, & Tom, 2009; Dussich & Maekoya, 2007; Zottis, Salum, Isolan, Manfro, & Heldt, 2014). Studies in several countries including Finland (Björkqvist, Österman, & Berg, 2011; Söderberg, Björkqvist, & Österman, 2016), the US (Afifi et al., 2012), Afghanistan (Corboz, Hemat, Siddiq, & Jewkes, 2018), and Iran (Jaghoory, Björkqvist, & Österman, 2013) have shown that children who were physically punished at home became victims of peer aggression at school more often than others.

Intimate Partner Aggression

Intimate partner aggression is one of the most common forms of aggression against women (World Health Organization, 2012). It may be a question of different types of aggression, such as psychological, physical, or sexual, perpetrated by a current or former partner or spouse (Coker et al., 2002). Aggressive intimate partner relations have been shown to give rise to poor health, physical injuries, depressive symptoms, and chronic mental illness (ibid.). A number of studies have shown that women who had been physically punished during childhood also reported subsequent victimization from domestic aggression later in life (Coid et al., 2001; Zamir, Szepsenwol, Englund, & Simpson, 2018). Exposure to multiple types of aggression has been shown to be associated with a decreased ability of escaping victimization in later abusive relationships (Auerbach Walker & Browne, 1985).

The Context of the Study

Ghana has committed to legally prohibit physical punishment of children in all settings including homes and schools (Global Initiative to End All Corporal Punishment of Children, 2019b). Still, the Children's Act 1998, article 13, and the Criminal Offences Act 1960, article 41 in Ghana support the "reasonable" correction of children (ibid.) The Ghanaian society includes many ethnic groups with various child rearing customs (MacCaskie, 2003). Physical punishment is culturally accepted and commonly used (Kyei-Gyamfi, 2011; Twum-Dansolmoh, 2013). Children in Ghana have been found to perceive physical punishment as normal and acceptable (ibid.). Studies have also found peer victimization to be prevalent among Ghanaian high school students (Antiri, 2016; Odumah, 2013).

According to Hofstede's cultural dimension theory, Ghana is a high power distance country and a collectivist society (Hofstede, Hofstede, & Minkov, 2010). In Ghana, males have an advantage over females in domestic and social matters (Mahama, 2004). Violence against women is widespread due to the socially accepted superior status of men and their right to assert power over females (Amoakohene, 2004). Cultural norms support male dominance and violence against women, this includes both intimate partner aggression and sexual harassment (Ardayfio-Schandorf, 2005; Aryeetey, 2004; Sedziafa, Tenkorang, & Owusu, 2016). Ghanaian women have reported victimization from emotional aggression (i.e. name-calling, accusations of witchcraft, stalking, husband's extramarital affairs) physical aggression (hitting, slapping, kicking, pushing, and beating), and sexual aggression (forced sexual intercourse and rape) by their husbands (Sedziafa et al., 2016). Female victims of intimate partner violence in Ghana have been found to suffer from depression, stress, fear, and loss of control (Asante & Andoh-Arthur, 2015). Still, intimate partner violence is perceived as normal and accepted by women (Doku & Asante, 2015).

Sexual harassment has been found in work places and public places in Ghana (Andoh, 2001) as well as in homes and in educational institutions (Aryeetey, 2004). According to the results of a study conducted in Ghana, females had been sexually harassed both by males known to them and by male relatives (Aniwa, 1999). This fact could be one of the reasons why sexual harassment is seldom made public in Ghana (ibid.), despite high awareness of its existence among the victims (Aryeetey, 2004). Under the Domestic Violence Act-732 (2007), sexual harassment has been declared an offensive act against females. However, no formal law against sexual harassment exists in Ghana (US Department of State, 2017) although Ghana is a signatory state to the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW, 1979). No noticeable decline has, however, been observed in aggression against women in Ghana (Civil Society Coalition, 2014). Even though the Domestic Violence Act (2007) has criminalised violence against women in Ghana, married women still report lack of information regarding the law (Sedziafa et al., 2016).

Originality of the Study

It has not previously been investigated whether victimization from sexual harassment among women in Ghana and the level of emotional distress caused by it could be associated with past

victimization from childhood physical punishment, peer aggression at school, and intimate partner aggression.

Method

Participants

A questionnaire was filled in by 280 female university students and lecturers in Ghana. The mean age was 26.7 years ($SD = 6.2$). The age span was between 17 and 64 years of age. Of the respondents 6% had high school education, 49.1% had tertiary education, 36.7% had a Bachelor's degree, and 8.2% a Master's degree.

Instrument

A questionnaire was created including scales measuring victimization from sexual harassment in public places, physical punishment during childhood, victimization from peer aggression at school, and victimization from intimate partner verbal and physical aggression. The two first ones were retrospective measures. A scale measuring emotional distress due to sexual harassment was also included. Responses were given on a four point scale (0 = never, 1 = seldom, 2 = sometimes, 3 = often, 4 = very often) for all scales.

The scale measuring frequency of victimization from sexual harassment was based on a scale by Kamal & Tariq (1997), it was shortened and slightly adapted for Ghana. Victimization from sexual harassment was measured with 15 items: Has a man done any of the following things to you? a) stared at you with dirty looks, b) told dirty jokes in your presence, c) shaken or pinched your palms, d) tried to have bodily touch with you while sitting, e) tried to stand too close to you in a crowded place, f) followed you in the street, g) offered you an unwanted lift in a vehicle, h) tried to give you an unwanted card or gift, i) tried to kiss you against your will, j) tried to rape you, k) tried to give or send you a text with sexual content, l) passed unwanted comments on your appearance, m) tried to undress himself in front of you, n) threatened to spread rumors about you if you did not fulfill his sexual demands, and o) threatened to harm you physically if you did not fulfill his immoral sexual demands. The Cronbach's alpha was .86.

Victimization from verbal and physical intimate partner aggression was measured with two scales from the Direct Indirect Aggression Scales for Adults (DIAS-Adult; Österman, & Björkqvist, 2009). Victimization from verbal intimate partner aggression was measured with the following seven items: Has your present partner, or a previous partner, done any of the following things to you? a) threatened to hurt me, b) yelled at me, c) quarreled with me, d) purposely said nasty or hurting things to me, e) called me bad names, f) interrupted me when I was talking, and g) angrily nagged at me. Victimization from physical aggression was measured with six items: a) hit me, b) locked me in, c) locked me out, d) shoved me, e) thrown objects at me, and f) damaged something that was mine. The Cronbach's alpha was .87 for the scale of verbal aggression, and .86 for the scale of physical aggression.

Victimization from aggressive behaviour by peers at school was measured in retrospect with The Mini Direct Indirect Aggression Inventory (Mini-DIA; Österman, & Björkqvist, 2010) which includes three questions: When you were a pupil at school, how often were you victimized from the following things by another pupil: a) Physical aggression: Someone has for example hit you, kicked you, or shoved you, b) Verbal aggression: Someone has for example yelled at you, called you bad names, or said hurtful things to you, and c) Indirect aggression: Someone has for example gossiped maliciously about you, spread harmful rumours about you, or tried to socially exclude you from others. The Cronbach's alpha of the scale was .79.

Victimization from physical punishment during childhood was measured with The Brief Physical Punishment Scale (BPPS; Österman, & Björkqvist, 2007) which includes four questions: When you were a child, did an adult subject you to any of the following things? a) pulled your hair, b) pulled your ear, c) hit you with the hand, and d) hit you with an object. Responses were given on a four point scale. The Cronbach's alpha was .80.

Emotional distress due to sexual harassment was measured with the Emotional Distress due to Sexual Harassment Scale (EDSH; Anwar, 2016) with the question "If any of the previously mentioned things happened to you, how did it make you feel?" for the following six items: a) angry, b) humiliated, c) embarrassed, d) scared, e) afraid of what others might think of me, and f) sad. The

Cronbach's alpha of the scale was .91. Educational level was measured on a four point scale (high school, tertiary education, Bachelor's degree, and Master's degree).

Procedure

The approval of six heads of tertiary educational institutions in Ghana was obtained. A link to an online questionnaire was sent to the institutions and were administered to female students and workers within the institutions. The link was active for three months in 2017. The electronic questionnaire generated 120 responses. Additional paper versions of the questionnaire were collected in Accra and Cape Coast in Ghana. The paper version was completed by 160 respondents.

Ethical Considerations

Data were collected with informed consent and under strict anonymity. The study adheres to the principles concerning human research ethics of the Declaration of Helsinki (World Medical Association, 2013), guidelines for the responsible conduct of research of the Finnish Advisory Board on Research Integrity (2012), as well as the general data protection regulation of the European Union (European Commission, 2016).

Results

Correlations between the Victimization Scales

All four scales measuring victimization correlated with victimization from sexual harassment, all except one correlation, at a $p < .001$ -level (Table 1). The highest correlation was found between victimization from physical and verbal intimate partner aggression ($r = .54$), and the second highest between physical punishment during childhood and victimization from peer aggression at school ($r = .50$).

Table 1

Correlations between the Scales Measuring Victimization (N = 280)

Victimization from	1.	2.	3.	4.
1. Sexual Harassment in Public Places				
2. Verbal Intimate Partner Aggression	.27 ***			
3. Physical Intimate Partner Aggression	.15 *	.54 ***		
4. Victimization from Peer Aggression at School	.34 ***	.37 ***	.24 ***	
5. Physical Punishment during Childhood	.34 ***	.34 ***	.23 ***	.50 ***

*** $p < .001$; * $p < .05$

Victimization from Sexual Harassment

The most common places where the victimization occurred were: the university ($m = 1.0$), in the street ($m = 0.8$), while waiting for a transportation ($m = 0.6$), inside a public transportation ($m = 0.6$), and in a market place or shop ($m = 0.5$) [$F_{(4, 277)} = 15.80, p < .001, \eta^2 = .186$]. The most common perpetrator was a friend ($m = 1.4$), followed by an acquaintance ($m = 0.97$), a student ($m = 0.96$), and a colleague ($m = 0.95$) ($F_{(5, 276)} = 28.15, p < .001$). The most common single behaviours, that the respondents were victimized from, were being stared at with dirty looks ($m = 2.4$), having one's hand shaken or pinched in the palm ($m = 2.3$), and being told dirty jokes ($m = 2.2$) [$F_{(16, 265)} = 49.68, p < .001, \eta^2 = .750$].

No correlation was found between the amount of sexual harassment and age of the respondents. An univariate analysis of variance, with age as covariate, showed that respondents who were single ($m = 1.7$) were significantly more often victimized from sexual harassment compared to married respondents ($m = 1.5$) [$F_{(1, 273)} = 9.61, p = .002, \eta^2 = .034$].

Levels of Victimization from Sexual Harassment and Four Other Types of Victimization

Z-scores were created for the scale measuring sexual harassment. Respondents were then divided in two groups; high vs. low sexual harassment group. A multivariate analysis of variance (MANOVA) was conducted with high/low sexual harassment group as independent variable and the four scales as dependent variables. The multivariate analysis was significant (Table 2). The univariate analyses

showed that respondents belonging to the high sexual harassment group scored significantly higher on physical punishment during childhood victimization from peer aggression at school, and victimization from verbal and physical intimate partner aggression (Fig. 1). The highest *F*-values were found for victimization from aggression at school and physical punishment during childhood.

Table 2
Results of a Multivariate Analysis of Variance (MANOVA) with Sexual Harassment Group as Independent Variable and the Four Scales Measuring Victimization as Dependent Variables (N = 280)

	<i>F</i>	<i>df</i>	<i>p</i> ≤	η^2_p
Effect of Sexual Harassment Group				
Multivariate Analysis	9.69	4, 276	.001	.123
Univariate Analyses				
Verbal Intimate Partner Aggression	9.81	1, 279	.002	.034
Physical Intimate Partner Aggression	6.30	"	.013	.022
Victimization from Peer Aggression at School	26.87	"	.001	.088
Physical Punishment during Childhood	28.56	"	.001	.093

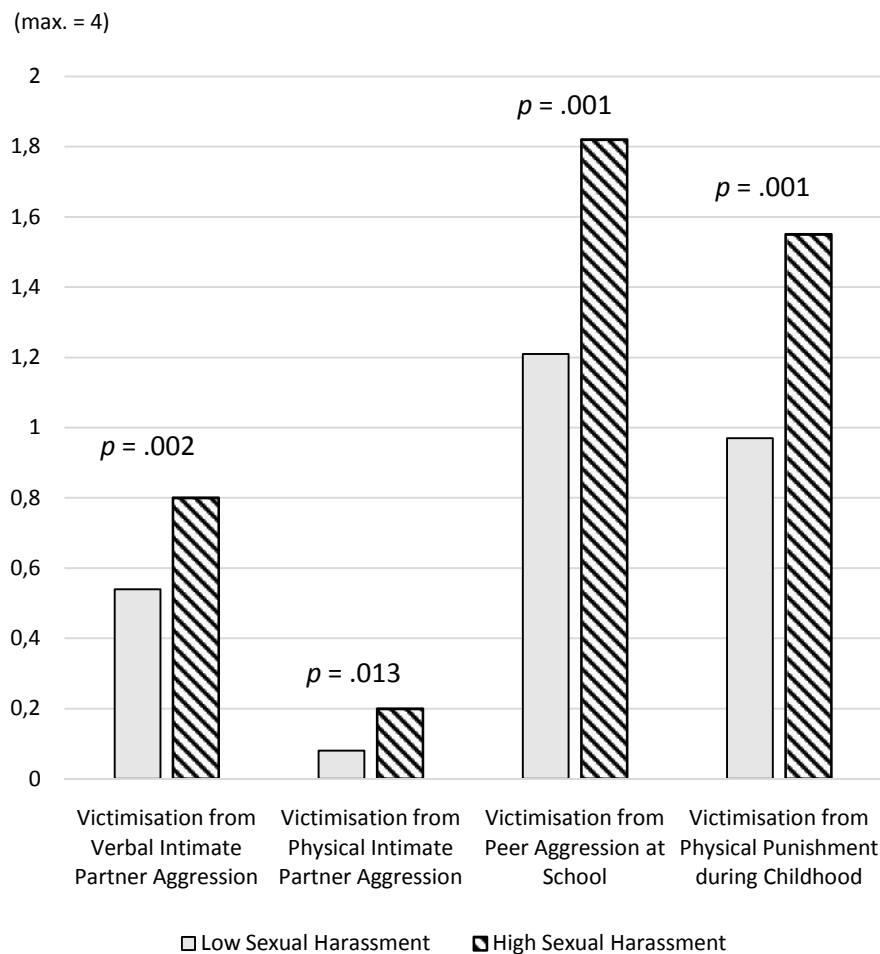


Figure 1. Means for victimization from verbal and physical intimate partner aggression, peer aggression at school, and physical punishment during childhood for respondents belonging to the high vs. low sexual harassment groups ($N = 280$).

Level of Education

A univariate analysis of variance was conducted with educational level as independent variable and the scale for sexual harassment as dependent variable. The differences between educational levels were not significant. When different educational groups were compared it was found that respondents with higher educational levels underwent significantly stronger emotional distress due to sexual harassment [$F_{(3, 277)} = 6.57, p < .001, \eta^2 = .066$]. Scheffé's test revealed that respondents with only high school education scored significantly lower than respondents on all the other

educational levels (all $p < .010$) on emotional distress. No significant differences were found between the other three educational levels.

Emotional Distress Due to Sexual Harassment

Level of emotional distress due to sexual harassment correlated significantly positively with all the five scales measuring victimization from aggression (Table 3). When the frequency of sexual harassment was controlled for, the correlations were still significant for verbal intimate partner aggression and victimization from peer aggression at school.

Table 3
Correlations between Emotional Distress due to Sexual Harassment and Scales Measuring Victimization from Other Types of Aggression (N = 280)

	Emotional Distress due to Sexual Harassment			
	Bivariate Correlations		Partial Correlations ^{a)}	
	<i>r</i>	<i>p</i> ≤	<i>r</i>	<i>p</i> ≤
Sexual Harassment	.48	.001	-	-
Verbal Intimate Partner Aggression	.24	.001	.14	.021
Physical Intimate Partner Aggression	.15	.013	.09	<i>ns</i>
Victimization from Aggression at School	.30	.001	.17	.005
Physical Punishment during Childhood	.18	.003	.02	<i>ns</i>

^{a)} Controlled for frequency of sexual harassment

Discussion

The aim of the study was to investigate whether victimization from sexual harassment could be associated with previous victimization from physical punishment during childhood, and victimization from peer aggression at school, as well as with victimization from verbal and physical intimate partner aggression as an adult. Ghana was selected since previous studies have shown that sexual harassment of females has been found in educational institutions in Ghana (Aryeetey, 2004). Ghana is also a country with high power distance according to Hofstede's categories (Hofstede et al.,

2010) which explains the prevailing inequalities and the subordinated status of women. Social norms have been found to encourage males to openly perpetrate sexual harassment in public places against females (Aryeetey, 2004).

It was shown that the most common place where the female students were victimized from sexual harassment was the university, and the most common perpetrator was a friend. The most common behaviours were being stared at with dirty looks, and having one's palm pinched. It is hardly surprising that the university was the most common place, since this is a place where female students spend much of their time. Still, it is alarming since the victimization interferes with their studies and might in some cases even lead to the discontinuation of them. Many studies on sexual harassment in public places in different countries have identified strangers as the most common perpetrator (Ilahi, 2009; Neupane & Chesney-Lind, 2014). The results of the present study are, however, in line with previous research in Ghana where the offender was found to be a relative, a friend, or a person known to the victim (Aniwa, 1999; Aryeetey, 2004).

Single female students were significantly more sexually harassed than married ones. Similar results have been found in studies carried out in Nepal (Neupane & Chesney-Lind, 2014), India (Madan & Nalla, 2016), and Latin American countries (Merkin, 2012).

Respondents at different educational levels did not differ regarding the amount of sexual harassment they had been subjected to. Nevertheless, respondents with a higher education underwent significantly stronger emotional distress due to the sexual harassment they were exposed to. Awareness due to education could explain this result. Educated females could be expected to be more aware of their rights and recognise sexual harassment as an offensive and a discriminatory behaviour.

Re- and Multiple Victimization

Respondents who had been more than average victimized from sexual harassment scored significantly higher on victimization from physical punishment during childhood and peer aggression at school. The finding suggests that victimization from sexual harassment can be considered to be a form of revictimization. The same respondents had also been significantly more victimized from

both verbal and physical intimate partner aggression, which, in turn, could be interpreted as multiple victimization. Victims of sexual harassment in this sample had thus been subjected to both revictimization and multiple victimization. It can also be noted that the effect was slightly higher in the case of childhood adversities, physical punishment and peer aggression, as compared to intimate partner aggression occurring during adulthood.

The Sensitization Model

A previous study has shown that multiple victimizations contributed to post-traumatic symptoms, anxiety symptoms, and suicidal ideation (Palm et al., 2016). Multiple victimization increases the emotional distress among the victims, thus making them psychologically more vulnerable to further victimization.

In the present study, physical punishment and victimization at school, as well as intimate partner aggression, were all significantly associated with higher levels of emotional distress when victimized from sexual harassment as an adult. Sensitisation due to previous victimization might serve as a mediating variable for higher levels of emotional distress when victimized from sexual harassment as an adult.

After controlling for the frequency of being sexually harassed, it was shown that the emotional distress when victimized from sexual harassment still gave rise to heightened distress reactions in women who had been highly victimized from peer aggression at school, as well as from physical intimate partner aggression as adults. The finding supports the sensitisation model. Revictimization and multiple victimization might both be associated with higher vulnerability, which gives rise to higher levels of distress when confronted with sexual harassment.

When frequency of sexual harassment was controlled for, it was also shown that victimization from physical punishment during childhood was not correlated with emotional distress due to sexual harassment. This unexpected finding might be due to the fact that physical punishment of children is not illegal (Global Initiative to End All Corporal Punishment of Children, 2019b) and still socially supported in Ghana (Kyei-Gyamfi, 2011). Acceptance of aggression during childhood could thus

explain why these women did not show increased sensitisation when confronted with emotional distress due to sexual harassment in later life.

Limitations of the Study

A limitation of the study is that when victimization from intimate partner aggression was measured it is not known whether it occurred before, after, or parallel with victimization from sexual harassment. It could thus be interpreted as multiple victimization or/and revictimization. Victimization from sexual harassment during adulthood preceded by victimization from physical punishment during childhood can, however, clearly be categorised as revictimization. The small sample size and the fact that the sample was not representative are also limitations. Future research with larger samples from different regions in Ghana would enable a better understanding of the association between victimization from sexual harassment and other types of aggression.

Conclusions

The findings suggests that victimization from sexual harassment can in some cases be considered to be a form of revictimization and/or multiple victimization. It can also be noted that the effect of of childhood adversities was slightly higher than the effect of victimization as an adult. It is suggested that sensitisation due to previous victimization might serve as a mediating variable for higher levels of emotional distress when victimized from sexual harassment as an adult. Even though respondents at different educational levels did not differ regarding the amount of sexual harassment they had been subjected to, respondents with a higher education underwent significantly stronger emotional distress by being sexually harassed. Due to social pressure to comply with cultural norms, education alone does not safeguard women from emotional distress caused by sexual harassment. There is a need to implement laws protecting women form sexual harassment. The findings emphasize the need to provide social support for women in Ghanain order to prevent the ongoing cycle of victimization.

References

- Afifi, T. O., Mota, N. P., Dasiewicz, P., MacMillan, H. L., & Sareen, J. (2012). Physical punishment and mental disorders: Results from a nationally representative US sample. *Pediatrics*, *130*, 184–192. doi:10.1542/peds.2011-2947.
- Amoakohene, M. I. (2004). Violence against women in Ghana: A look at women's perceptions and review of policy and social responses. *Social Science and Medicine*, *59*, 2373–2385. doi:10.1016/j.socscimed.2004.04.001.
- Andoh, A. K. (2001). *Sexual harassment in the workplace: The Ghanaian experience*. Centre for Social Policy Studies, University of Ghana.
<http://www.oocities.org/cspslibrary/sexualharassment.html>.
- Aniwa, M. (1999). Prevalence. In D. Coker-Appiah, & K. Cusack (Eds.), *Breaking the silence and challenging the myths of violence against women and children in Ghana* (pp. 50–71). Accra, Ghana: Gender Studies and Human Rights Documentation Center.
- Antiri, K. O. (2016). Types of bullying in the senior high schools in Ghana. *Journal of Education and Practice*, *7*, 131–138.
- Anwar, F. (2016). *Emotional Distress due to Sexual Harassment Scale (EDSH)*. Åbo Akademi University, Vasa, Finland.
- Ardayfio-Schandorf, E. (2005). *Violence against women: The Ghanaian case. Violence against women: A statistical overview, challenges and gaps in data collection and methodology and approaches for overcoming them*. Economic Commission for Europe (ECE) and World Health Organization (WHO) Geneva, Switzerland.
- Aryeetey, E. B. D. (2004). *Coming to terms with sexual harassment in Ghana*. Institute of Statistical, Social & Economic Research, University of Ghana, Legon.
- Asante, K. O., & Andoh-Arthur, J. (2015). Prevalence and determinants of depressive symptoms among university students in Ghana. *Journal of Affective Disorders*, *171*, 161–166. doi:10.1016/j.jad.2014.09.025.
- Auerbach-Walker, L. E., & Browne, A. (1985). Gender and victimization by intimates. *Journal of Personality*, *53*, 179–195. doi:10.1111/j.1467-6494.1985.tb00363.x .
- Avina, C., & O'Donohue, W. (2002). Sexual harassment and PTSD: Is sexual harassment diagnosable trauma? *Journal of Traumatic Stress*, *15*, 69–75.
doi:10.1023/A:1014387429057.
- Baldry, C. A. (2003). Bullying in schools and exposure to domestic violence. *Child Abuse & Neglect*, *27*, 713–732. doi:10.1016/S0145-2134(03)00114-5
- Björkqvist, K., & Österman, K. (2014). Does childhood physical punishment predispose to a “victim personality”. *Pediatrics & Therapeutics*, *4*:190. doi:10.4172/2161-0665.1000190.
- Björkqvist, K., Österman, K., & Berg, P. (2011). Higher rates of victimization to physical abuse by adults found among victims of school bullying. *Psychological Reports*, *109*, 167–168. doi:10.2466/02.07.11.16.PR0.109.4.167-168.
- Campbell, R., Greeson, M. R., Bybee, D., & Raja, S. (2008). The co-occurrence of childhood

- sexual abuse, adult sexual assault, intimate partner violence, and sexual harassment: A mediational model of posttraumatic stress disorder and physical health outcomes. *Journal of Consulting and Clinical Psychology*, 76, 194. doi: 10.1037/0022-006X.76.2.194
- Civil Society Coalition. (2014). *NGO shadow report to 6th & 7th periodic report of ghana on convention on the elimination of all forms of discrimination against women*. UN CEDAW Committee, Geneva, Switzerland.
- Coid, J., Petruckevitch, A., Feder, G., Chung, W. S., Richardson, J., & Moorey, S. (2001). Relation between childhood sexual and physical abuse and risk of revictimization in women: A cross-sectional survey. *The Lancet*, 358, 450–454. doi:10.1016/s0140-6736(01)05622-7.
- Coker, A. L., Davis, K. E., Arias, I., Desai, S., Sanderson, M., Brandt, H. M., & Smith, P. H. (2002). Physical and mental health effects of intimate partner violence for men and women. *American Journal of Preventive Medicine*, 23, 260–268. doi:10.1016/S0749-3797(02)00514-7
- CEDAW, Convention on the Elimination of all Forms of Discrimination against Women. (1979, December). *United Nations Treaty Series*, 1249, No.20378, p. 13. https://treaties.un.org/pages/ViewDetails.aspx?src=TREATY&mtdsg_no=IV-8&chapter=4&clang=_en
- Corboz, J., Hemat, O., Siddiq, W., & Jewkes, R. (2018). Children's peer violence perpetration and victimization: Prevalence and associated factors among school children in Afghanistan. *PLOS ONE*, 13, e0192768. doi:10.1371/journal.pone.0192768
- Doku, D. T., & Asante, K. O. (2015). Women's approval of domestic physical violence against wives: Analysis of the Ghana demographic and health survey. *BMC Women's Health*, 15, 113–120. doi:10.1186/s12905-015-0276-0.
- Domestic Violence Act-732. (2007). *An act to provide protection from domestic violence particularly for women and children and for connected purposes*. Criminal and Penal Law of Ghana. http://www.ilo.org/dyn/natlex/natlex4.detail?p_lang=en&p_isn=88525&p_classification=01.04.
- Duong, M. T., Schwartz, D., Chang, L., Kelly, B. M., & Tom, S. R. (2009). Associations between maternal physical discipline and peer victimization among Hong Kong Chinese children: The moderating role of child aggression. *Journal of Abnormal Child Psychology*, 37, 957–966. doi:10.1007/s10802-009-9322-4
- Durrant, J. E. (2000). *A generation without smacking: The impact of Sweden's ban on physical punishment*. London, UK: Save the Children.
- Dussich, J. P., & Maekoya, C. (2007). Physical child harm and bullying-related behaviors: A comparative study in Japan, South Africa, and the United States. *International Journal of Offender Therapy and Comparative Criminology*, 51, 495–509.
- European Commission. (2016). *Data protection. Rules for the protection of personal data inside and outside the EU*. Retrieved from https://ec.europa.eu/info/law/law-topic/data-protection_en

- Finkelhor, D., & Dzuiba-Leatherman, J. (1994). Victimization of children. *American Psychologist*, 49, 173–183. doi:10.1037/0003-066X.49.3.173.
- Finkelhor, D., Ormrod, R. K., & Turner, H. A. (2007). Re-victimization patterns in a national longitudinal sample of children and youth. *Child Abuse & Neglect*, 31, 479–502. doi:10.1016/j.chiabu.2006.03.012.
- Finnish Advisory Board on Research Integrity (2012). *Responsible conduct of research and procedures for handling allegations of misconduct in Finland*. Helsinki: Finnish Advisory Board on Research Integrity.
- Gladstone, G. L., Parker, G. B., & Malhi, G. S. (2006). Do bullied children become anxious and depressed adults?: A cross-sectional investigation of the correlates of bullying and anxious depression. *The Journal of Nervous and Mental Disease*, 194, 201–208. doi:10.1097/01.nmd.0000202491.99719.c3.
- Global Initiative to End All Corporal Punishment of Children. (2019a). *Global progress towards prohibiting all corporal punishment*. <http://endcorporalpunishment.org/wp-content/uploads/legality-tables/Global-progress-table-commitment.pdf>.
- Global Initiative to End All Corporal Punishment of Children. (2019b). *Corporal punishment of children in Ghana*. <http://www.endcorporalpunishment.org/>
- Henriksen, C. B., Mattick, K. L., & Fisher, B. S. (2015). Repeat victimization. *The Encyclopedia of Crime and Punishment*, 1–4. doi:10.1002/9781118519639.wbecpx036.
- Hofstede, G., Hofstede G. J., & Minkov, M. (2010). *Cultures and organizations: Software of the mind*. Revised and expanded 3rd edition. New York: McGraw-Hill Professional.
- Holt, M. K., Finkelhor, D., & Kantor, G. K. (2007). Multiple victimization experiences of urban elementary school students: Associations with psychosocial functioning and academic performance. *Child Abuse & Neglect*, 31, 503–515. doi:10.1016/j.chiabu.2006.12.006.
- Hyland, M. E., Alkhalaf, A. M., & Whalley, B. (2013). Beating and insulting children as a risk for adult cancer, cardiac disease and asthma. *Journal of Behavioral Medicine*, 36, 632–640. doi:10.1007/s10865-012-9457-6.
- Ilahi, N. (2009). Gendered contestations: An analysis of street harassment in Cairo and its implications for women's access to public spaces. *Surfacing: An Interdisciplinary Journal for Gender in the Global South*, 2, 56–69.
- Iyer-Eimerbrink, P. A., Scielzo, S. A., & Jensen-Campbell, L. A. (2015). The impact of peer victimization. *Journal of Bullying and Social Aggression*, 1, 1–22.
- Jaghoory, H., Björkqvist, K., & Österman, K. (2013). Extreme physical punishment in the home and its associations with aggression and victimization at school: A study among young adolescents in Iran. *Pediatrics & Therapeutics*, 3,5. doi:10.4172/2161-0665.1000182
- Kamal, A., & Tariq, N. (1997). Sexual harassment experience questionnaire for workplaces of Pakistan: Development and validation. *Pakistan Journal of Psychological Research*, 12, 1–20.
- Klomek, A. B., Sourander, A., Niemelä, S., Kumpulainen, K., Piha, J., Tamminen, T., Almqvist, F., & Gould, M. S. (2009). Childhood bullying behaviors as a risk for suicide attempts and completed suicides: A population-based birth cohort study. *Journal of the American*

- Academy of Child & Adolescent Psychiatry*, 48, 254–261.
doi:10.1097/CHI.0b013e318196b91f.
- Kyei-Gyamfi, S. (2011). Corporal punishment in Ghana. In R. Ame, D. Agbenyiga, & N. Apt,(Eds.): *Children's rights in Ghana: Reality or rhetoric?* (pp. 77–97) Lanham, MD: Lexington Books.
- MacCaskie, T., C. (2003). *State and society in pre-colonial Asante*, 79. Cambridge, UK: Cambridge University Press.
- Madan, M., & Nalla, K. M. (2016). Sexual harassment in public spaces examining gender differences in perceived seriousness and victimization. *International Criminal Justice Review*, 26, 80–97. doi:10.1177/1057567716639093
- Mahama, I. (2004). *History and traditions of Dagbon*. Tamale, Ghana: GILLBT Printing Press.
- Merkin, R. S. (2012). Sexual harassment indicators: The socio-cultural and cultural impact of marital status, age, education, race, and sex in Latin America. *Intercultural Communication Studies*, 21, 154–172.
- Neupane, G., & Chesney-Lind, M. (2014). Violence against women on public transport in Nepal: Sexual harassment and the spatial expression of male privilege. *International Journal of Comparative and Applied Criminal Justice*, 38, 23–38. doi:10.1080/01924036.2013.794556
- Odumah, L. (2013). Investigating bullying as a violation of human rights among students in Ghanaian senior high schools. *Research on Humanities and Social Science*, 3, 1–9.
- Österman, K. & Björkqvist K. (2009). *Direct Indirect Aggression Scales for Adults (DIAS-Adult)*. Vasa, Finland: Åbo Akademi University.
- Österman, K., & Björkqvist, K. (2007). *Brief Physical Punishment Scale (BPPS)*. Åbo Akademi University, Vasa, Finland.
- Österman, K., & Björkqvist, K. (2010). The Mini Direct Indirect Aggression Inventory (Mini-DIA). In K. Österman (Ed.), *Indirect and direct aggression* (pp. 103–111). Frankfurt am Main, Germany: Peter Lang.
- Österman, K., Björkqvist, K., & Wahlbeck, K. (2014). Twenty-eight years after the complete ban on the physical punishment of children in Finland: Trends and psychosocial concomitants. *Aggressive Behavior*, 40, 568–81. doi:10.1002/ab.21537.
- Palm, A., Danielsson, I., Skalkidou, A., Olofsson, N., & Högberg, U. (2016). Violence victimization: A watershed for young women's mental and physical health. *The European Journal of Public Health*, 26, 861–867. doi:10.1093/eurpub/ckv234.
- Pelligrini, A., D. (2001). A longitudinal study of heterosexual relationships, aggression, and sexual harassment during the transition from primary school through middle school. *Applied Developmental Psychology*, 22, 119–133. doi:10.1016/S0193-3973(01)00072-7.
- Petrovic, M., Vasic, V., Petrovic, O., & Santric-Milicevic, M. (2016). Positive parenting attitudes and practices in three transitional Eastern European countries: Bosnia and Herzegovina, Macedonia and Serbia. *International Journal of Public Health*, 61, 621–630. doi: 10.1007/s00038-016-0823-y.
- Sedziafa, A. P., Tenkorang, E. Y., & Owusu, A. Y. (2016). Kinship and intimate partner violence

- against married women in Ghana: A qualitative exploration. *Journal of Interpersonal Violence*, 33, 2197–2224. doi:10.1177/0886260515624213.
- Söderberg, P., Björkqvist, K., & Österman, K. (2016). Exploring the effects of physical punishment on aggressive behavior and peer victimization: A conditional process analysis. *Journal of Aggression, Conflict and Peace Research*, 8, 21–32. doi:10.1108/JACPR-09-2015-0187.
- Tomsich, E., Jennings, W. G., Richards, T. N., Gover, A. R., & Powers, R. A. (2015). Childhood physical maltreatment and young adult dating violence: A propensity matching approach. *Journal of Interpersonal Violence*, 32, 3475–3496. doi:10.1177/0886260515599657
- Twum-Dansolmoh, A. (2013) Children's perceptions of physical punishment in Ghana and the implications for children's rights. *Childhood*, 20, 472–486. doi:10.1177/0907568212471404.
- US Department of State. (2017). *Ghana 2017 human rights report*.
<https://www.state.gov/documents/organization/277535.pdf>.
- Widom, C. S., & Maxfield, M. G. (2001). *An update on the 'cycle of violence' research in brief*. Washington, D.C.: National Institute of Justice, NCJ 184894.
<https://www.ncjrs.gov/pdffiles1/nij/184894.pdf>.
- World Health Organization. (2012). *Understanding and addressing violence against women: Overview*.
http://www.who.int/reproductivehealth/topics/violence/vaw_series/en/
- World Medical Association. (2013). World Medical Association Declaration of Helsinki. Ethical principles for medical research involving human subjects. *Bulletin of the World Health Organization*, 79, 373–374.
- Wyatt, G. E., & Riederle, M. (1994). Sexual harassment and prior sexual trauma among African-American and White American women. *Violence and Victims*, 9, 233–247.
- Zamir, O., Szepsenwol, O., Englund, M. M., & Simpson, J. A. (2018). The role of dissociation in revictimization across the lifespan: A 32-year prospective study. *Child Abuse & Neglect*, 79, 144–153. doi:10.1016/j.chiabu.2018.02.001
- Zottis, G. A., Salum, G. A., Isolan, L. R., Manfro, G. G., & Heldt, E. (2014). Associations between child disciplinary practices and bullying behavior in adolescents. *Jornal de Pediatria*, 90, 408–414. doi:10.1016/j.jped.2013.12.009