

**EXPERIENCE AND PERCEIVED MEANS OF PREVENTION OF
SEXUAL ABUSE AMONG FEMALE ADOLESCENT HAWKERS IN
MARKETS IN IBADAN NORTH EAST LOCAL GOVERNMENT
AREA, IBADAN, NIGERIA**

BY

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DEDICATION

This MPH dissertation is dedicated to the Almighty God who gave the inspiration, resources and strength to attain this height in my academic pursuit.

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ABSTRACT

Involvement of a child or adolescent in a sexual activity is a major cause of reproductive health problem among female children found in vulnerable situations. Most studies on Sexual Abuse (SA) have focused on students in secondary schools, with few targeting people in work places. Having information on the experience of SA among Female Adolescent Hawkers (FAHs) in markets could be used to develop interventions for its amelioration. This study was therefore designed to determine the prevalence and document experiences of SA among FAHs in selected markets in Ibadan North-East Local Government Area (LGA), Nigeria.

A cross-sectional survey design was adopted for the study. Four hundred and ten FAHs aged 10-17 from 6 out of 10 markets in the LGA were purposively selected. Data were collected using a pretested interviewer-administered questionnaire which included questions on respondents' socio-demographic characteristics, sexual abuse, experiences of SA, help-seeking behaviour and perceived means of preventing SA. In-Depth Interviews (IDIs) were also conducted among seven consenting victims of SA. Descriptive statistics, Chi-square and logistic regression tests were used to analyse the quantitative data with level of significance set at 0.05 while the qualitative data were analysed using thematic approach.

Mean age of respondents was 14.4 ± 1.8 years. Twenty one percent of respondents have ever had sexual intercourse and of this, 5.4% experienced their first sexual intercourse by rape. Majority (69.0%) of respondents had ever experienced at least one form of SA, of which 68.3% occurred 3 months preceding the study at locations including markets (52.0%), personal home (17.6%), neighbourhood (8.3%), school (8.0%), perpetrators' residence (5.1%), roadside (4.1%), girl friends' residence (2.9%), vehicles (0.5%) and party (0.5%). Forms of SA experienced included unwanted touch (48.3%), unwanted sexual comments (30.5%), unwanted kissing (15.6%), exposure to pornographic materials (12.9%), attempted rape (12.4%), genital rubbing (8.3%), exhibitionism (7.8%), rape (5.4%) and voyeurism (3.1%). Respondents who reported an experience of sexual intercourse were less likely (OR = 0.2, 95% CI = 0.0-0.8) while those that had boyfriends were 2.8 times more likely to have ever experienced a form of SA (OR = 2.8, 95% CI = 1.4-5.8). Major perpetrators were male customers (98.6%), traders (98.2%) and peers (69.4%). Majority (67.5%) who had

experienced SA within the last 3 months preceding the study did not disclose or seek help. The IDI revealed that avoiding being blamed and perceiving disclosure of experience as unnecessary were the reasons for not seeking help. Avoiding unnecessary discussion with males, administration of appropriate punishment by government on perpetrators and hawking in groups were perceived means through which SA could be prevented.

Sexual abuse occurred among female adolescent hawkers mostly in markets. Its victims did not seek help majorly due to social challenges. To prevent sexual abuse, age-appropriate sexuality education and life building skills should be targeted at female adolescent hawkers while advocacy is needed for caregivers and market stakeholders.

Keywords: Sexual Abuse, Female Adolescent Hawkers, Help seeking behavior.

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Ezinne Onyinyechi UVERE

CERTIFICATION

I certify that this study was carried out by UVERE Ezinne Onyinyechi in the Department of Health Promotion and Education, Faculty of Public Health, College of Medicine, University of Ibadan, Nigeria.

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LIST OF ABBREVIATIONS

ARFH	Association of Reproductive and Family Health
ARSRC	Africa Regional Sexuality Resource Centre
ANPPCAN	African Network for the Prevention and Protection against Child Abuse and Neglect
CAP	Child Assault Programme
CDC	Centre for Disease Control
CGI	Clinton's Global Initiative
CHI	Children's International Helpline
CRA	Child Right Act
CRC	Convention on the Right of Children
CSA	Child Sexual Abuse
CSAP:TTWC	Child Sexual Abuse Prevention: Teacher Training Workshop Curriculum
CSO	Civil Society Organization
DEVAW	Declaration on Elimination of all forms of Violence Against Women
DHS	Demographic Health Survey
FHI	Family Health International
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Virus
IBNE LGA	Ibadan North East Local Government Area
ILO	International Labour Organization convention on the worst forms of labour
LFRN	Laws of the Federal republic of Nigeria
MEDIACON	Media Concern Nigeria
NACCRAN	National Council of Child Rights Advocates of Nigeria
NGO	Non-Governmental Organization
NURTW	National Union of Road Transport Workers
LEA	Law Enforcement Agent
PEPFAR	Presidents Emergency Plan For AIDS Relief
PTSD	Post Traumatic Stress Disorder
RTIs	Reproductive Tract Infections
SA	Sexual Abuse
SPSS	Statistical Package for Social Sciences

STIs	Sexually Transmitted Infections
UN	United Nations
UN ESCAP	United Nations Economic and Social Commission for Asia and the Pacific
UNAIDS	United Nations Agency Against AIDS
UNFPA	United Nations Population Fund
UNICEF	United Nations Children’s Fund
UNIFEM	United Nations Development Funds for Women
USAID	United States Agency for International Development
UTI	Urinary Tract Infection
UNCRC	United Nations Convention on the Rights and welfare of Children
UNVAC	United Nations Global Study on Violence Against Children
WHO	World Health Organization

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CHAPTER ONE

INTRODUCTION

Background of study

The use of children as objects of adults' sexual interests and activities has long been recognized and still attracts comments and condemnation (Erulkar, 2004). The World Health Organization (WHO) defines sexual abuse of children as the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society (WHO, 1999 and 2011). It is an act perpetrated, not as an act freely enjoyed by partners who can consent, but initiated for the satisfaction of one individual without the consent of a partner, or with a partner who by reason of age or understanding could not give consent due to their position of trust, power or responsibility over them (John, Joyce, & Chua, 2003; Priebe, 2009). The United Nations Global Study on Violence Against Children (UNVAC) defines sexual abuse of children as any kind of sexual activity to which children are subjected, especially by someone who is responsible for them, or has power or control over them, and who they should be able to trust (WHO, 2011).

Sexual abuse can be classified into three forms according to Olley (2008), namely penetration, contact and non-contact forms. According to the relationship of the perpetrator to the victim, when sexual abuse involves relatives, it may be referred to as intra-familial sexual abuse. When it involves non-relatives, it may be referred to as extra-familial sexual abuse including those perpetrated by strangers, teachers, armed men, peers, child caregivers in informal settings, family friends, religious leaders, and neighbors.

Sexual abuse of children is widespread both in the developing and developed countries (Olley, 2008; Jejeebhoy and Bott, 2003). Over 150 million female children worldwide are being sexually abused (UNFPA, 2009). The WHO (1997) estimates that at least one in five of the world's female population has been physically or sexually abused with the prevalence

rate of sexual abuse rising from 7 to 36% among girls and from 3 to 29% among boys (Finkelhor, 1994 and WHO, 2004). In South Africa, according to Ayodele (2009), every 26 seconds, a woman is raped and 1 in 4 girls are sexually abused while 55% of adolescents in Nigeria had been sexually abused (Olley, 2008).

Sexual abuse no doubt, has both and long term adverse physical, psychological, emotional and emotional consequences (Jejeebhoy, Shah, & Thapa, 2005). The physical consequences of sexual abuse results in an array of health conditions such as cuts and bruises on genitals of children due to its small size, inelasticity and lack of lubrication; unintended pregnancy, induced or forced abortion, delivery of low birth weight babies, miscarriage according to Ellsberg, Heise, Peña, Agurto and Winkvist (2001) and gynecological complications such as vaginal bleeding or infection; fibroids, decreased sexual desire, genital irritation, pain during intercourse, chronic pelvic pain, Urinary Tract Infections (UTIs) and STIs including HIV (Alexis, 2007; Olufemi-Kayode, 2004; Rosemary, 2008 and Worku, Gebremariam, & Jayalakshmi, 2006). Other social and emotional consequences include aggressiveness, suicidal tendencies according to Kenneth et al., (2000), Post Traumatic Stress Disorders (PTSD), depression, social isolation, poor academic performance and increased absenteeism from school and inability to trust and develop friendly relationships (Jejeebhoy et al., 2005; UN ESCAP, 2001; Worku et al., 2006).

Boys who have experience of sexual abuse also share the same range of negative psychological consequences as girls according to WHO (2011) and Jejeebhoy et al (2005). Other behavioral tendencies applicable to boys who have an experience of sexual abuse include increased perpetration of sexual abuse and consumption of psychoactive substance. A case study in Kenya found that young males aged 10-19 who reported an experience of sexual abuse admit that they had ever perpetrated sexual abuse in subsequent sexual encounters (Jejeebhoy et al, 2005). Similarly, of males who have an experience of sexual abuse, 44.9% have perpetrated abuse of sexual nature in a study by (Ajuwon, Fawole, & Osungbade, 2011). As is the case with female victims of sexual assault, research suggests that male victims are likely to suffer from a range of psychological consequences, both in the immediate period after the assault and over the longer term including sexual dysfunction, somatic complaints (WHO, 2002).

In most African countries, reports about incidences of sexual abuse among children and women are increasing in a disheartening manner (ARSRC, 2010). Child sexual abuse can be said to have emanated as a result of interplay of individual, interpersonal, social, political, cultural, and environmental factors (Annie, Larry & Margot, 2009). At the societal and communal levels, according to Lalor (2004), sexual abuse can be traceable to several norms and explanations.

The first is a global, rapid social change which has introduced young people to adopt modern, western lifestyle in all areas of human interaction. However, there is very little evidence for (or against) this widely held view. Another is the Sexually Transmitted Infection/HIV avoidance/curative strategy. The presumed cure of HIV infection and AIDS through having sexual relations with young girls is thought to be a major contributing factor to the increase in sexual abuse of young girls. This is because as young girls are considered to be relatively free of HIV infection by male perpetrators, perpetrators sexually abuse young girls under the guise of avoiding being infected with HIV (Agossou, 2000). Furthermore, a male-dominated social structure has created a situation where respondents consider male lust to be the most common motive for the rape of a girl, and say that some men prefer to have sex with young girls because they are 'tight' (young and fresh), naive and can easily be duped or paid off with a few coins or a small gift (Lalor, 2004). In addition, sexual abuse of children may be facilitated by a widespread belief and cultural acceptance that it is permissible for males to obtain sexual relief from any available female around them especially if they have been denied sexual relief for a long time (ARSRC, 2010).

Similarly, other damaging norms that can contribute to increased prevalence of sexual abuse include socially acceptable exhibition of power and control by men over women. Society expects exhibition of power by males and equally promotes and condones domination, exploitation and objectification of female children by males (Annie et al, 2009). Society have come to expect men to exhibit a domineering attitude when it involves obtaining and maintaining control over others especially on females when it has to do with sexual gratification. This social norm heightens the perception that controlling women is a sign of masculinity (Annie et al, 2009). Indeed, studies continuously reveal double standards and

power imbalances between male and female gender that perpetuate a sense of entitlement among young men to force sex on females while holding their female victim responsible for inviting the incident. In a Nigerian study, 57% of male students and 74% of out-of-school male apprentices agreed with the statement that a man had the right to have sex with a woman on whom he has spent a lot of money. Also complementing the above statement were 37% of female students and 43% of female apprentices in a study conducted by Ajuwon, Akin-Jimoh, Olley and Akintola (2001a). The existence of these unbalanced differences in power and gender as well as other factors negatively reduces women's access to key resources, increases their vulnerability to sexual violence and eventually inhibits women's sexual independence, sexual freedom and participation in sexuality matters (Annie et al, 2009 and WHO, 2009a).

Furthermore, there is the gender role of submissiveness and passivity expected of females by society. Society has also come to perceive females as those who should act and be treated as inferior objects at will by men. This gender role of submissiveness by girls to adults and superiority of males over females' provides a platform for men to wield double standard on females (WHO, 2009). Gender role of submissiveness prescribed for females creates a situation where females become and exhibit a high level of naivety and ignorance regarding sexual issues.

With a decline in the economy of most African countries, especially Nigeria who has the highest proportion of population (51%) living below the poverty threshold of US\$1.25 per day according to WHO (2011), millions of children work to help in ways that are either harmful or exploitative in occupations such as hawking to complement household income (Adekunle & Ladipo, 1993 and WHO, 2011). About one in six children (16%) within five to fourteen years of age, is involved in child labour in developing countries (UNICEF, 2009). In a study conducted by UNICEF, 246 million children worldwide are found to be engaged in child labour. Of these, 35% are being trafficked in West and Central Africa for domestic work and sexual exploitation, or employed as street hawkers (Umar, 2009; UNICEF, 2009). In Nigeria, according to Tinuola (2011), 62% of over 11million children of school age who roam the streets are females. These girls who might be involved in hawking are highly

vulnerable to violent misconducts from men, who operate in settings such as motor parks and bus station. According to Fawole, Ajuwon, Osungbade and Faweya (2002), these female hawkers are partially exploited sexually due to their perceived weak femininity and partly because men perceive these girls as fair game sexually (Orubuloye, Caldwell, & Caldwell, 1993; UNIFEM, 1998). Furthermore, the vulnerability of these girls has also been documented by Ajuwon et al (2001a). Their study revealed that 19% of women hawkers and girls found in bus parks and truck stations have been raped. Another study by Audu, Geidam and Jarma (2009) in Maiduguri, Nigeria revealed that 87.8% of girls working on the streets had been sexually abused.

Sexual abuse can occur at anytime of the day, in places normally considered safe including homes, worship places, schools, leisure places, boat/bus/motor parks, streets/roads/junctions, shops, offices etc through coercion, deception, intimidation, swearing to secrecy or threatening by the perpetrator (Krug, Mercy, Dahlberg, & Zwi, 2002). Although sexual abuse occurs in all age groups, among male and female, young girls are the group most affected (Ayodele, 2009; Lalor, 2004; Njue, Askew, & Chege, 2005; Ogunyemi, 2004; WHO, 2004). According to Sara (2009), observations from data in Nairobi Women's hospital indicate that 55% of those who have been sexually abused are girls aged 0-15 years. Sexual abuse is widespread among young girls because of their limited experience, lack of negotiation skills, dependent financial position and traditional gender stereotypes. Unfortunately, sexual abuse among young females is under reported because perpetrators of sexual abuse have been known to be closely related persons (Fawole et al., 2002 and Sara, 2009).

Problem statement

Research has shown that young people are disproportionately affected by sexual abuse (Heise, Pitanguy, & Germain, 1994; Jejeebhoy & Bott, 2003; Olley, 2008). However, among these young people, girls are more disproportionately affected by sexual abuse according to studies by Njue, Askew and Chege (2005), Population Reference Bureau (2000) and UNFPA (2009) although boys also are not exonerated from experiencing sexual abuse (Blum & Nelson-Mmari, 2004; Finkelhor, 1994).

The need to augment family income and have some level of financial power in an economy where majority of its citizens live on less than US\$1.25 daily, have driven most girls to take to hawking. Consequently, these females have become vulnerable to sexual abuse (Audu et al., 2009; Odeyemi, Onajole, & Ogunowo, 2009 and Orubuloye et al, 1999). While studies have focused on sexual violence among female hawkers in motor parks according to Fawole, Ajuwon, Osungbade and Faweya (2003); secondary school students in a survey conducted by Olley, (2008) and adolescents and apprentices according to Ajuwon et al (2001a), little attention have been focused on girls that hawk in the markets where the risk of sexual abuse is high. Hence, the need for this study.

Justification

There are three potential benefits from this study:

First, information from this study will help inform the adoption of advocacy strategy for the implementation of sustainable measures that will lead to the prevention and amelioration of sexual abuse among female hawkers and enforcement of Child's Right Act (2003).

Results of this study will provide evidence-based information to be used for designing interventions directed at prevention of sexual abuse among female hawkers by agencies and organizations.

Furthermore, results from this study will assist in planning realistic and strategic programmes aimed at helping female hawkers improve their knowledge and correct misconceptions about sexuality and sexual behaviors and acquire skills for preventing behaviors and recognizing risky situations that favor sexual abuse.

Research questions

This research provided answers to the following questions:

1. What behaviors do female hawkers know to be sexual abuse?
2. What is the proportion of female hawkers who had experienced sexual abuse?
3. In what context has sexual abuse occurred among female hawkers?
4. Who are the perpetrators of the reported experience of sexual abuse among female hawkers?

- 5 What are the help seeking behaviors of female hawkers who have experienced sexual abuse?
- 6 What are the female hawkers' perceived means of preventing sexual abuse?

Broad objective

The broad objective of this study was to assess the experience and perceived prevention of sexual abuse among female hawkers in selected markets in Ibadan North East Local Government Area.

Specific objectives

The specific objectives were to:

1. describe the knowledge of female hawkers on the various forms of sexual abuse
2. determine the prevalence of reported sexual abuse among female hawkers in selected markets
3. document the context in which female hawkers experience sexual abuse
4. identify the perpetrators of sexual abuse among female hawkers
5. describe the help-seeking behavior of female hawkers who have been victims of sexual abuse
6. document female hawkers' perceived means of preventing sexual abuse.

Hypotheses

The following hypotheses were tested in this study:

1. Ho1: there is no significant relationship between age of female hawkers and their experience of sexual abuse
2. Ho2: there is no significant relationship between the educational status of female hawkers and their experience of sexual abuse.
3. Ho3: there is no significant relationship between living arrangement of parents and sexual abuse experience of female hawkers
4. Ho4: there is no significant relationship between the knowledge of sexual abuse among female hawkers and their experience of sexual abuse
5. Ho4: there is no significant relationship between type of goods hawked and sexual abuse experience of female hawkers

Operational definition of terms

Sexual Abuse: Involvement in penetrative, contact or non-contact sexual activities by a child/adolescent who cannot understand and give consent to sexual matters, through the use of threats, coercion, bribery or intimidation by a person in a position of trust, authority or influence.

Female adolescent Hawker: Is a young girl less than 18 years of age who is involved in the hawking of any item of any sort.

Boy friend: An unmarried boy that somebody has as friend who may or not be in a dating relationship

Perception: the act of knowing or becoming aware of a concept

Market: An open space, with or without buildings, where buying and selling transactions takes place.

Prevention: the act or process of stopping something or an adverse situation from (re)occurring.

CHAPTER TWO

LITERATURE REVIEW

Concept of sexual abuse

The concept of sexual abuse has been defined in different ways by various authors and organizations. According to the WHO, as well as the Department of Health and Social Security, United Kingdom (UK), sexual abuse is the involvement of children in sexual activities that they do not fully comprehend, are unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society. Sexual abuse is evidenced by an intercourse that occurs between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the perpetrator (John et al., 2003; WHO, 1999 and 2011).

The United Nations Global Study on Violence Against Children (UNVAC) defines sexual abuse as any kind of sexual activity to which children are subjected, especially by someone who is responsible for them, or has power or control over them, and who they should be able to trust (WHO, 2011). Another definition of sexual abuse propounded by Save the Children-Fiji (2004) conceives sexual abuse as, the imposition of sexually inappropriate acts, or acts with sexual overtones by one or more persons, who derive authority through ongoing emotional or professional bonding with that child. It is an abuse of the unequal power relationship between a child or a young person and an older, bigger or more powerful person, which usually includes a betrayal of the child's trust. The sexual activity can either be actual, attempted or threatened.

By contrast, according to WHO, sexual violence is any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic or otherwise directed against a person's sexuality using coercion, by any person regardless of their relationship with the victim in any setting including but not limited to home and work (Krug et al., 2002). These

definitions reveal an array of behaviors ranging from threats; force, intimidation and coercion usually against a child's will especially girls, in a bid to gain their participation in sexual activities.

Sexual abuse occurs in all racial, ethnic, religious and socio-economic groups and affects children of all ages, including infants (Lalor, 2004). Sexual abuse can be classified into three forms according to Giardino and Giardino (2008); John et al (2003) and WHO (2011). These include:

Penetration forms such as vaginal or anal penetration with the perpetrator using his penis, fingers or other objects.

Contact forms such as perpetrator touching/fondling intimate parts (e.g., genitals, buttocks, breasts) of a child; a child induced to touch perpetrator's intimate parts; frottage (rubbing genitals against the victim's body or clothing, grooming).

Non-contact forms includes perpetrator making sexually suggestive comments to the child, inducing child to undress and/or masturbate self, pornography, exposure to pornographic material, exhibitionism (i.e., obtaining sexual gratification by exposing one's genitals to an unwilling party); voyeurism in which a person receives sexual gratification from seeing the genitalia of children or witnessing children involved in sexual acts with other children/adult and sexual harassment (John et al., 2003 and WHO, 2011). According to the relationship of the perpetrator to the victim, when sexual abuse involves relatives, it may be referred to as intra-familial sexual abuse. When it involves non-relatives, it may be referred to as extra-familial sexual abuse especially those perpetrated by strangers, teachers, armed men, peers, teachers, child caregivers in informal settings, family friends, religious leaders, and neighbors.

Giardino and Giardino (2008) pointed out that there are progressions and patterns observed by the potential perpetrator before sexual abuse is perpetrated. These progressions include:

Engagement: The perpetrator begins relating to the child during normal activities to gain the child's trust and confidence.

Sexual interaction: The perpetrator introduces sexual activities into the relationship with the child. Over time, it progresses to more invasive forms of sexual abuse.

Secrecy: The perpetrator attempts to maintain access to the child to avoid disclosure of the abuse by coercing/threatening the child to keep it secret.

Disclosure: Sexual abuse can become known to others either accidentally, when symptoms emanating from the child or a third party witnessing the abuse reveals it, or can be purposeful, when the child reveals the abuse that is taking place as means of seeking help.

Suppression: The emotional build up that occurs after the disclosure prompts the people in the child's care giving environment to think that they are unable to support the child. This prompts them to keep it secret or deny that the event ever occurred.

History of sexual abuse

Child sexual abuse has been in existence throughout history (Fergusson & Mullen, 1999). One of the outstanding revelations on sexual abuse of children was that of Freud, who concluded that many of his patients had been victims of sexual abuse during childhood. It was not until the mid-1970s that child sexual abuse became the focus of mental health and child welfare professionals. Scott (1995) argued that the social construction of child sexual abuse could be typified by four stages discussed below namely: discovery, diffusion, consolidation and reification.

The discovery (1970-1980): The basis for modern concerns about child sexual abuse was provided by documentations of adult women who reported personal experiences of sexual abuse. Information provided by them was compared to themes emanating from women's movement such as the politics of gender and of victimization. The primary area of concern was with father-daughter incest rather than the broader issue of child sexual abuse.

Diffusion (1980-1990): Child sexual abuse was presented to the public, policymakers, and professionals as being sufficiently prevalent, damaging, and important to be seen as a problem of major social significance. Presentations in the media increased the awareness of members of the public that a growing proportion of children were exposed to sexual abuse. The growing awareness of child sexual abuse led to greater professional and scientific involvement, with increased research in the area as researchers sought to establish claims about the prevalence of child sexual abuse; the social-cultural context of occurrence and its

consequences. Initial studies recruited small patient samples, but with the passage of time, an increasing number of large-scale studies of child sexual abuse were conducted in the general population.

Consolidation (1990-2000): The consolidation of knowledge about child sexual abuse led to the arrival of three conclusions. First, it is common for children to be exposed to unwanted sexual experience during childhood. Second, children brought up in certain social or family setting were at increased risk for being sexually abused. Third, exposure to child sexual abuse was associated with an array of problems both during childhood and in adulthood. These conclusions led to a growing awareness that child sexual abuse victims had the right to therapy, support services and systems.

Reification: The existence of sexual abuse has become solidified into a firm construct whose entire content and features has become unquestionable, with the existence of previous stages (Scott, 1995).

Sexual abuse as a gender based issue

Sexual abuse is a form of gender based violence that affects men and women, in which the female is usually the victim; and derived from existence of power differentials between men and women (USAID, 2009). As a gender based concept, sexual abuse is a gross violation of women's rights, a moral and ethical outrage and an assault on the world's conscience, as stated by Ann M. Veneman, Executive Director of UNICEF (UNICEF, 2005). Sexual abuse as a major public health concern, according to WHO (2004), is a gender based issue that affects females greatly and is the wrong use of sexuality of females (Ikechebelu, Udigwe, Ezechukwu, Ndinechi, & Joe-Ikechebelu, 2008). It has also been documented to affect males (Blum & Nelson, 2004). To reinforce the fact that sexual abuse is a gender-based issue, sexual abuse is primarily inflicted by men on women and girls. It indicates the existence of inequities between men and women which can affect the health, dignity, security and independence of its victims especially women and girls. It places females at a disadvantage in terms of access to resources, goods, decision-making, choices and opportunities in all aspects of their lives (UNFPA, 2003a).

Article 1 and 2 of the United Nations (UN) Declaration on the Elimination of Violence against Women (DEVAW), proclaimed by the UN General Assembly in its resolution, defines gender based violence to include acts such as...sexual abuse of female children...in addition to other forms of violence. Women are at risk of these forms of violence at all stages of their life, from the womb to the tomb (UNIFEM, 1998). Although gender-based violence is common to women of all ages, adolescents and youths are more greatly affected although young girls are disproportionately affected (Heise et al.,1995). Evidence shows that at least one in five of world's female population has been physically or sexually abused (Fawole et al., 2002; Population Reference Bureau, 2000 and WHO, 1999). Women and girls are greatly affected by violence because of prevailing gender imbalances that reduce their sense of independence and decision making capacity (Madu & Peltzer, 2000 and WHO, 2009). Furthermore, the gender inequality norm has come to make men prefer young girls as sexual partners because they assume they are sexually inexperienced and as such are less likely to be infected with Sexually Transmitted Infections (Lalor, 2004).

Prevalence of sexual abuse among young people

The WHO estimates that 36-62% of all sexual abuse victims are aged below 15 years. Complementary data from Nairobi Women's hospital indicate that 55% of those violated are girls aged 0-15 years (Sara, 2009). Tables 2.1a, b and c shows reviewed studies on sexual abuse according to regions. In some cases, sexual abuse has been reported on girls as young as few months old, even among very young children and babies due to misconceptions that sex with a virgin is a cure for HIV/AIDS according to Agossou (2000) and Lalor (2004); they are sexually naive and as such are less likely to be infected with sexually transmitted disease according to Madu and Peltzer (2000); that they are 'tight' (young & fresh) and can be lured easily into sexual activities even with few coins and for financial fortune, especially in Zimbabwe (Lalor, 2004). A research conducted by a Non-Governmental Organization called (Aparajeyo Bangladesh, 2005) reported that children are coerced into massaging adults and are forced to engage in sexual activities in market places, parks, railway stations, and boat and bus terminals. The WHO (1997) estimates that at least a man has physically or sexually abused one in every five of the world's female population at some time in her life (Population Reference Bureau, 2000).

Hawking and sexual abuse

Sexual abuse, a gender based issue, is increasingly prevalent among young people, with the girl child being disproportionately at risk (Njue et al., 2005; UNFPA, 2009). In Nigeria, according to a recent report by centre for constitutionalism and demilitarization, between 2011 and 2012, there were about sixty-one cases of sexual assault against women out of which fifty (50) were perpetrated against children (Guardian Newspaper, February, 19, 2013). Female children have always been faced with problems that are rooted from gender inequality in addition to other problems that accompany childhood and adolescence (Aderinto, 2010; Ikechebelu et al., 2008). Besides the various health, socio-cultural and educational problems to which female children are exposed to, the paramount and often neglected factor associated with experience of sexual abuse is child labour which manifests in the form of hawking (Ikechebelu et al., 2008).

Child labour means work that is prohibited for children of certain age groups. It is work performed by children who are under the minimum age legally specified for that kind of work, or work which, because of its detrimental nature or conditions, is considered unacceptable for children and is prohibited (ILO, 2012). In the light of the existence of child labour, one of the basic principles of the International Convention on the Right of the Child is that every child must be protected against all forms of exploitation, indecent or degrading treatment, including child labour according to part one section 32 of UNCRC (1989). However, in Nigeria, child labour does mostly occur in semi-formal and informal businesses across settings such as streets and markets where children are seen to be involved in hawking, as street vendors, beggars, shoe shiners, car washers/watchers, scavengers, feet washers and domestic service (UNICEF, 2006). A study implemented in 2006 by the International Labor Organization (ILO) found a staggering fifteen million children under the age of fourteen engaged in various forms of labor across Nigeria. These children were exposed to long hours of work in dangerous, unhealthy and competitive environments. This, according to the reports, results from the inability of parents and governments to fully take responsibility for child welfare (Tinuola, 2011). Hawking, which is common in West Africa among females of all ages, is an informal way to make money by trading food, clothing, and other households in and along open places (FHI, 2005; Umar, 2009). It is a common form of

child labour in most developing countries (Ikechebelu et al., 2008). In Nigeria this is predominantly done all the time by young children both males and females.

Beneath the adoption of hawking as alternative occupation is the issue of poverty. With a decline in the economy of most African countries, especially Nigeria who has the highest proportion of population (51%) living below the poverty threshold of US\$1.25 per day according to WHO (2011), millions of children work to help in ways that are either harmful or exploitative in occupations such as hawking to complement household income (Adekunle & Ladipo, 1993 and WHO, 2011).

About one in six children (16%) within five to fourteen years of age, is involved in child labour in developing countries (UNICEF, 2009). In a study conducted by UNICEF, 246 million children worldwide are found to be engaged in child labour. Of these, 35% are being trafficked in West and Central Africa for domestic work and sexual exploitation, or employed as street hawkers (Umar, 2009; UNICEF, 2009). In Nigeria, according to Tinuola (2011), 62% of over 11million children of school age who roam the streets are females. Hawking of goods on small trays balanced on the head is often the entry point into trading, especially among young girls who help their mothers and guardians sell goods after school or as apprentices to women shop owners (Fawole et al., 2003). The female hawkers come to the cities in groups and then go in different directions of the city to hawk their goods (Umar, 2009). Most of the hawkers remain in the city from early morning to late in the evening after the days sales (Umar, 2009). Thus, young girls are an important economic resource for the family (Fawole et al., 2003).

Although, young girls are often involved in trading to supplement family income and are also an important economic resource for the family, society perceive that hawking offer additional benefit of preparing children for adult roles (Fawole et al., 2003). However, female children involved in hawking are particularly vulnerable to all forms of violence including sexual exploitation and abuse by men (Aderinto, 2010; Fawole et al., 2003; FHI, 2005; ILO, 2012). For example, Orubuloye et al (1993) found that 15% of 467 hawkers surveyed in Ibadan lost their virginity to rape by older men, while 90% reported that drivers, passengers and other

men frequently made sexually suggestive advances at them. Similarly, according to Fawole et al (2003), in an interventional study, at baseline 30.4% hawkers had been sexually harassed by perpetrators who were drivers in almost half of the cases (44.8%). Ninety one girls (26.4%) claimed that a man had attempted to rape them, while (11.3%) had experienced forced sexual intercourse with their partner or male friend (Fawole et al., 2003). Furthermore, the vulnerability of these girls has also been documented by Ajuwon et al (2001a). Their study revealed that 19% of women hawkers and girls found in bus parks and truck stations have been raped. Another study by Audu, Geidam and Jarma (2009) in Maiduguri, Nigeria revealed that 87.8% of girls working on the streets had been sexually abused.

Female adolescent hawkers who are involved in hawking are highly vulnerable to sexual abuse from men who operate in settings such as motor parks and bus station. According to Fawole, Ajuwon, Osungbade and Faweya (2002), these female hawkers are partially exploited sexually due to their perceived weak femininity and partly because men perceive these girls as fair game sexually (Orubuloye et al., 1993; UNIFEM, 1998). In addition, men prefer young girls as sexual partners because they assume that they are sexually inexperienced and as such are less likely to be infected with sexually transmitted diseases (Fawole et al., 2003; FHI, 2005). They are greatly at risk to sexual abuse due to their exposure to extreme harsh weather conditions, hunger, weakness and huge economic demands and expectations. This hawking situation presents a great opportunity for men who possess negative moral values, have disposable income and can promise or fulfill the desires of these girls to perpetuate sexual activities with these hawkers (Anarfi, Appiaha, & Awusabo-Asareb, 1997; Fawole et al., 2003).

SUMMARY OF EVIDENCE OF SEXUAL ABUSE FROM ASIA, EUROPE AND AFRICA

Table 2.1a: Evidence of sexual abuse from selected studies from Asia, Europe and South America

Author	Study population	Setting	Major findings
Stewart, Sebastiani, Delgado, & López (1996)	Adolescent boys	Caribbean	7.5% of boys reported one form of sexual abuse by female perpetrators
Fleming, Mullen, & Bammer (1997)	Women	Australia	20% of women had experienced sexual abuse
John et al (2003)	Adolescents (12 -17 years)	Singapore	70% of sexual abuse cases were 12 and above
Aparejeyo-Bangladesh, (2005)	Children	Bangladesh	Children are forced to engage in sexual activities in market places, parks, railway, boat and bus terminals.
Alikasifoglu et al., (2006)	Females (age range 15-20 years)	Turkey	11.3% reported that someone touched their private parts in a way they did not like. 4.9% were forced to have sexual intercourse.
Karin Helweg-Larsen & Bøving Larsen (2006)	Girls 15-16 year-olds	Denmark	Females: 15.8% “unlawful sexual experiences before age 15” with “someone much older”; 9.2% reported attempted or completed intercourse”.
Lin, Li, Fan, & Fang (2011)	Adolescent boys and girls less than 16 years	China	A total of 123 (18%) respondents reported experiencing at least one kind of CSA before 16 years of age, with more boys reporting CSA than girls (21.5% vs. 14.2%).
Lynch, Saralidze, Goguadze, & Zolotor (2007)	11-17 year olds	Georgia	9% reported some form of sexual abuse happening in the home. 17.3% reported sexual abuse.
Emily, Virginia, & Mariana (2008)	Youths	Argentina	14.8% of youths have been sexually abused
Priebe & Svedin (2009)	Male and female high school seniors	Sweden	Sexual intercourse “against your will” was reported by 10.5% of females and 4.7% of males. For penetrative abuse of females, perpetrators were family members (7.4%), friends/ acquaintances (64.1%) and strangers (28.5%).
Radford et al (2011)	0-10, 11-17 and 18-24 year-olds	United Kingdom	Contact and noncontact child sexual abuse experienced by 1.2% of under-11 year-olds and 16.5% of 11-17 year-olds. Severe (contact) sexual abuse experienced by 0.5% of under-11 year-olds and 4.5% of 11-17 year-olds.

Table 2.1b: Evidence of sexual abuse from selected studies across Africa

Author	Population	Setting	Major findings
Bohmer & Kirumira (1997)	Young people (10-24 year old)	Uganda	Female victims invited the abuse incident via their dressing.
Shanler, Heise, & Stewart (1998)	In School adolescents	Zimbabwe	32% of secondary school students had been abused by female perpetrators
Hulton, Cullen, & Khalokho (2000)	Adolescents	Uganda	Girls blamed themselves for being raped as they prevent men from having sex naturally.
Jewkes, Levin, Mbananga, & Bradshaw (2002)	Females	South Africa	1.6% of females have experienced forced or coerced intercourse before the age of 15 years
Worku et al (2006)	Children	Ethiopia	68.7% was the prevalence of sexual abuse
Leach, Fiscian, Kadzamira, Lemani, & Machakanja (2003)	In-school students	Zimbabwe, Malawi, and Ghana	Sexual abuse of girls by teachers, older male pupils, and sugar daddies is largely accepted
Cambanis (2007)	Children	Cameroun	24 out of 71 sexually abused children had tested positive for HIV
Neema, Ahmed, Kibombo, & Bankole (2006)	Female adolescents (12-19 years)	Uganda	One-third of victims surveyed revealed they were kissed, fondled or touched in an unwanted way
Ayodele (2009)	Females	South Africa	Every 26 seconds, a woman is raped and 1 in 4 girls is sexually abused.
Breiding et al (2011)	Females (13-24 years)	Swaziland	43% of the girls affected have experienced not just one, but multiple incidents of sexual violence.
Sara (2009)	Adolescent girls and boys (10-18 years)	Kenya	24.6% and 29.1 % of girls and boys respectively have experienced unwanted sex

Table 2.1c: Evidence of sexual abuse from selected studies in Nigeria

Author	Population	Setting	Major findings
Ajuwon, Fawole, & Osungabde, (2000)	Female adolescent hawkers	Ibadan	Four percent of sexually active subjects were raped in the course of trading in the stations
Ajuwon et al (2001a)	Young persons (students/apprentices) 15-19 years	Ibadan	55% of subjects had been victims of one type of sexual coercion, 19% of female apprentices had been raped
Ajuwon, Akin-Jimoh, Olley, & Akintola (2001b)	Adolescents (15-19 years)	Ibadan	15.1% of females reported rape and other forms of sexual abuse
Fawole et al (2002)	Young female hawkers (10-24 years)	Osun, Ogun and Oyo states	1 in 20 of population had been raped.
Fawole et al (2003)	Young female hawkers (10-24 years)	Osun, Ogun and Oyo states	Sexual violence was the commonest type experienced (30.4% at baseline &15.7% at end line)
Nzewi (1988)	Girls below age 12	Kaduna, Enugu and Ibadan	60% of girls have experienced sexual abuse, including genital stimulation, voyeurism and genital seduction
Orubuloye, Caldwell and Caldwell (1993)	Young female hawkers	Ibadan	15% of hawkers had been raped
Okoro & Osawemen (2005)	Out of school teenagers (13-16 years)	Benin	83% of all females had experienced one form of sexual harassment. More females (83%) experienced verbal assaults, unwanted touch of various parts of the body (71%), attempted unsuccessful sexual activity (58%) and actual forced sexual intercourse (19%)
Ikechebel, et al (2008)	Female hawkers (girls below 16 years)	Anambra	69.9% had been sexually abused with 17.2% having had penetrative sexual intercourse (28.1% were forced and 56.3% submitted willingly) while hawking.
Olley (2008)	Adolescents (15-20 years)	Ibadan	Prevalence of sexual abuse among children is 55%
Aderinto (2010)	Adolescents (10-18 years)	Ibadan	75% of girls who had engaged in sex intercourse were sexually abused
Abdulkadir et al (2011)	Young (3-18 years) and adult females	Niger state	95.1% (77 cases) of girls aged 3-18 years have experienced a form of sexual abuse.

Vulnerability of young females to sexual abuse

The term vulnerability results from a range of factors that reduce the ability of individuals and communities to avoid infection such as personal, social or a combination of these (UNAIDS, 1998). With nearly half of the global population represented as less than 25 years of age (UNFPA, 2003a), this group of people has been shown to be particularly vulnerable to sexual ill-health and is at risk of sexual abuse as a result of interplay of factors. These factors are explained below:

Individual factors

Age: Young females are found to be more at risk of rape than their older counterparts (Acierno, Resnick, Kilpatrick, Saunders, & Best, 1999; Krug et al., 2002). Young females are particularly highly vulnerable as they cannot understand and interpret sexually abusive acts being perpetrated on them due to the trust they have on the perpetrator who also perceives them to be inexperienced in sexual matters. Perpetrators capitalize on their lack of understanding of the grooming process of sexual abuse to sexually abuse them.

Alcohol or drug consumption: Females who consume alcoholic substances are at risk of experiencing sexual abuse. This is due to the fact that consuming alcohol or drugs makes it more difficult for young girls to perceive a sexually abusive situation, protect themselves and interpret warning signs of sexual abuse (Crowell & Burgess, 1996; Krug et al., 2002).

Previous experience of rape: Females who have had experience of sexual abuse in childhood or adolescence are more likely to experience sexual re-victimization during adulthood (Fleming, Mullen, Sibthorpe, & Bammer, 1999; Krug et al., 2002; Tjaden & Thoennes, 2000). Female victims who consume psychoactive substances to cope with the emotional trauma that comes with experience of sexual abuse, the psychoactive substances decreases the ability of girls to disclose the experience to anyone and to avoid sexually abusive situation, thus leading to re-victimization (Norris, 2008).

Having multiple sexual partners: Females who have many sexual partners are at increased risk of sexual abuse (Krug et al, 2002). Having a steady boyfriend or girlfriend is a powerful influence on participation in sexual activity. According to Small and Luster (1994), children who are well nurtured and reside in loving and emotionally fulfilling environment are more likely to experience sexual abuse if they have a steady boyfriend or girlfriend. This is because they will be put in a situation where it is difficult to reject sexual advances from their sexual partners especially when some form of material gains is involved.

Economic and educational empowerment: Greater empowerment brings with it more resistance from females to patriarchal norms. This results to men resorting to violence in order to regain and retain their control (Jewkes et al., 2002). In Zimbabwe, women who were working were much more likely to report forced sex by a spouse than those who were not (Watts, Keogh, Ndlovu, & Kwaramba, 1998). The World Health report on violence according to Krug et al (2002) which cited South African and Zimbabwean studies showed that there was a higher correlation between higher levels of female education and increased vulnerability to sexual abuse. In contrast, women with no education were found in a national survey in South Africa to be much less likely to experience sexual abuse than those with higher levels of education (Jewkes & Abrahams, 2002).

Interpersonal factors

Lack of supportive family and peer environment: The act of parents hiding under the auspices of protecting and exhibiting restrictive attitude towards the socialization of their young girls with the opposite sex increases the likelihood that she may be exposed to sexual abuse (Jejeebhoy, Shah, & Thapa, 2005). This is because young females who do not possess and/or have the opportunity to exercise life building skills, may be unable to avoid situations of sexual abuse from intending perpetrators. In addition, lack of family support further hastens delay in obtaining recourse in cases of sexual abuse. This is heightened where there is a wide gap in mother-daughter relationship resulting in the unlikelihood for girls to turn to their parents for assistance (Jejeebhoy et al, 2005).

Lack of adequate parental supervision of children: Improper supervision of children also can be seen as a factor that increases the risk of children being exposed to sexual abuse. In a study by Breiding et al (2011), parents were criticized for their lack of parental supervision and vigilance, which often led to a false sense of trust and awareness. Some of the participants raised issues that some mothers work late at night and allow their children to be supervised by her partner or boyfriend. This, to the participants, sometimes leads to adult males sexually abusing girls, even within the home.

Dysfunctional/unstable families: Homes where parents are experiencing one form of abuse or the other, a vacuum is created among the children for an unfulfilled emotional love. As a result of the strain in the relationship between parents and in broken homes, these children with unmet emotional needs are seen craving for emotional affection from available arms outside the home (Ajuwon, Adeniyi, Faromaju, & Oladapo, 2006). Sometimes, sexual abuse by a parent or relative drives young females out of their homes and onto the streets, where the need for care and support makes them vulnerable to sexual abuse by pimps, traffickers and drug peddlers.

Residence with extended family members: Sexual abuse also often occurs when girls leave their immediate family and live with relatives (Madu, 2003). Reasons for leaving may include: lack of schools near their home, lack of employment opportunities in their village, or being adopted by a family member (to be an additional source of labour). In particular, girls who travel to urban areas for education are at high risk of sexual abuse from members of their extended family (with whom they are compelled to live with). For example, in Fiji, a survey of children who were living with their extended families while attending school revealed that there was a high rate of school dropout among these girls, with 83% dropping-out within five months of moving to live with their relatives. Of the girls who dropped out, 26% reported having been sexually abused by male relatives while living away from home (Save the Children-Fiji, 2004).

Cultural factors

Early marriage: Early marriage is most common in Africa and South Asia, though it also occurs in the Middle East and parts of Latin America and Eastern Europe and has become a platform for the legal perpetration of sexual abuse on young girls (WHO, 2002). In Ethiopia and parts of West Africa, for instance, marriage at the age of 7 or 8 years is not uncommon. The average age at first marriage in Nigeria is sixteen (Anuforo, Oyedele, & Pacquiao, 2004). Child marriage is highly practiced in the North, where the majority of girls are married between the ages of 12 and 15. Child marriage is practiced with the belief that it reduces promiscuity among young girls and because of the importance attached to virginity (Arowojolu, Ilesanmi, Roberts & Okunola, 2002). The vulnerability of young females to sexual abuse is greater on the platform of marriage since these young females involved are unable to give or withhold their consent. The majority of them know little or nothing about sex before they are married and are less likely to negotiate safer sex and use of condoms with their sexual partners. They therefore frequently fear sex and their first sexual encounters are often forced (Khan, Townsend & D'costa, 2002; WHO, 2002). High rates of child marriage have also been reported in the Democratic Republic of the Congo, Mali, Niger and Uganda (WHO, 2002).

Patriarchal norms: Patriarchal norms can be described as a set of social relations between men and women, which have a material base, and which create interdependence and solidarity among men that enables them to dominate women. It is a system of domination of men over women, which spans across different economic systems, eras, regions and class (Coetzee, 2001). According to the Asian and Pacific Islander Institute on Domestic Violence (2011), patriarchal norm is defined as a system for maintaining class, gender, racial, heterosexual privilege and the status quo of power. It relies both on crude forms of oppression, like violence; and subtle ones, like laws; to perpetuate inequality. Patriarchy is a structural force that influences power relations, whether they are abusive or not. Despite the fact that patriarchy is hierarchical and men of different classes, races or ethnic groups have different places within the patriarchal system; men are seen to be unanimous in their acceptance of maintaining dominance over women (Coetzee, 2001).

At the root of gender based violence lies the patriarchal belief of male dominance (Asian and Pacific Islander Institute of Domestic Violence, 2011). These norms justify double standard but condone premarital and extramarital sexual relations from men while stigmatizing sexually active women. The existence of patriarchal norms makes it difficult for young women to seek help in avoiding sexual abuse or communicating the incidence of sexual abuse (Wood, Maforah, & Jewkes, 1998). Other patriarchal beliefs that are antecedent to the experience of sexual abuse include inability of men to control their sexual desires according to Ajuwon, Olley, Akintola, and Akin-Jimoh (2004); perceptions that males must have and force sex on girls especially if he agrees to be his girlfriend and he spends money on her; inevitability for girls to experience sexual abuse if their dressing pattern is provocative or if she is haughty to men/boys who advance her for sexual involvement (Ajuwon et al., 2001a; Krug et al., 2002).

Another aspect of patriarchy is secrecy of perpetrator in cases of rape of females. Acts of sexual abuse is often concealed and the perpetrator often goes unpunished, irrespective of the cost to the abused child. A case in point is that by Pacific country studies commissioned by UNICEF and UN ESCAP which revealed that sexual abuse of girls is not regularly reported in the Pacific (UNICEF, 2005). This is not because it rarely occurs but rather because although these societies regard sexual contact between an adult and a child as highly immoral (UNICEF, 2005) and sexual contact with a child is illegal in all Pacific Island countries, there is much secrecy surrounding this crime. In Pacific societies, the rape of a child, particularly when perpetrated by a family member brings great shame to the family and, if made public, can tear families and communities apart. Furthermore, in small communities with little privacy, accusations of sexual abuse, despite its validity, can lead to ostracism of the victim and her family (UNICEF, 2004). In addition, in most countries, because rape leads to a girl child being perceived as de-valued, parents will often keep silent to avoid the economic devaluation of their girl children who have been abused (UNICEF, 2005).

Structural factors

Lack of support: Lack of support structures for reporting of sexual abuse send a message to girls that there is no redress for such crimes and this serves to dis-empower them to seek for

recourse. In an ideal situation, young people who experience any form of sexual abuse should have access to structural services such as legal services/law enforcement agencies, health care services, social services and health professionals for legal justice, emergency contraception, treatment for STIs, counseling and general care where friends and family members cannot provide help. Unfortunately, in various parts of developing countries, including Nigeria, these structures are not existing (Guedes, Bott, Guezmes, & Helzner, 2002). Where there are, their response to the plight of victims of sexual abuse leaves a little to be desired. From the health sector point of view, their response to the issue of sexual abuse among young people is inadequate as they are unprepared to handle and identify health consequences of sexual abuse (Jejeebhoy & Bott, 2003). Many of these health professionals have come to share the belief of the larger society that sexual abuse against females is normal or that the females are responsible for the outcome of sexual abuse that they suffer (Heise et al., 1994.). This stigmatizing attitude drives and determines the way in which they attend to young girls who are victims of sexual abuse thus creating a barrier for young girls to access help.

Similarly, the law enforcement agents in some parts of developing countries uphold the same general belief of the society about sexual abuse of females. Even when cases of sexual abuse is reported to the police, the reports may be ignored or dropped, often because police are not adequately trained to respond to these reports. This attitude makes them treat such reported cases with levity while regarding such experiences as family matters. In cases where there seem to be existing legal framework to penalize the perpetrators (Krug et al., 2002), justice is averted sometimes either via bribery from influential persons to withdraw the case or stipulated legal penalties are avoided by the perpetrators (Ajuwon et al., 2004). Where the perpetrator is a man highly revered in the society, the police may refuse to take action. For victims' who succeed in obtaining legal hearing, they are faced with humiliating rules of provision of evidence and discriminatory attitudes from court officials (ARSRC, 2010). Thus, victims quit the legal process without obtaining justice resulting in increase perpetration of sexual abuse and re-victimization of these girls in an uncontrolled trend.

Poverty: Poverty is viewed as a main factor contributing to the rise in incidences of sexual abuse. There is an agreement that poverty is a precursor to sexual abuse. It is a fact that

situations of poverty might influence parents in allowing children to be sexually abused (Breiding et al, 2010). Sometimes, mothers who have extramarital affairs permit and overlook the fact that their daughter are being abused sexually by her partners, since the survival of the entire family is dependent on economic contribution that her partner brings to the household. Poverty may force children especially girls into occupations that have a relatively high risk of sexual abuse (Audu, Geidam, & Jarma, 2009b; Omorodion & Olusanya, 1998). Poverty also creates greater pressure for children to accept or maintain jobs that render them vulnerable to sexual abuse from those who can promise and fulfill their basic needs. As these children hawk, unscrupulous men who possess excess disposable income are seen to take advantage of the hawkers' destitute, economic situations by offering money or material benefits to these children in exchange for sex. There were reports of some mothers facilitating this type of activity by allowing children to earn money for food, bridal fees and other supplies. In northern parts of Nigeria where early marriage is encouraged, most mothers according to Child, Youth and Environments (2003), carefully lubricate the vaginas of their girls who they send to hawk, peradventure they end up being sexually abused. This act by mothers is for these girls to bring back money that their mothers would use to purchase bridal items for their daughters when they are given out in marriage.

Transactional sex: transactional sex involves an exchange of material goods in return for sex (Jejeebhoy et al, 2005). According to Jejeebhoy and Bott (2003), young girls due to their financial dependent position, yield to transactional sex with older man who promise to cater for their need for continuing education or basic material needs. Also, when gifts and money are exchanged, in poverty prevalent situations, young women's bargaining power for safer sex is reduced. A review of studies in Sub-Saharan Africa notes that once gifts are accepted (and depending on the value of the gift), girls perceived that they had no right to negotiate contraceptive use with their partners (Jejeebhoy & Sarah, 2003).

Poor or inadequate sleeping arrangements: Sometimes as a result of household poverty, which is revealed by overcrowding and the sharing of beds, children are abused sexually. In situations where children share rooms with older adults, this type of sleeping arrangements predisposes children, particularly those of adolescent age, to sexual abuse, exploration and

experimentation. This is because adults who engage in sexual acts and are restricted to the space shared with children as a result of overcrowding, leaves the children with no choice than to observe and practice sexual acts when left alone, from their parents.

In addition, lack of awareness regarding child sexual abuse and child rights among children, families and communities also has shown to increase children's vulnerability to sexual abuse (UNFPA, 2003a and Wood et al., 1998).

Consequences of sexual abuse

Because adolescents are at a formative stage of social, physical and sexual development, sexual abuse at a young age can set patterns that damage their health in the long run (Jejeebhoy, 2006). Gender Based Violence, of which sexual abuse is part of, results in reproductive health problems—often with lasting physical, social, emotional, psychological, and economic consequences (Patel & Andrew, 2005; USAID, 2009). These health consequences are discussed below:

Physical consequences

The risk of physical injury to the genitals such as cuts and bruises and reproductive organs is also higher in young children, due to the small size, inelasticity and lack of lubrication of the vagina and cervix; this is exacerbated if there is exposure to frequent, unprotected or forced sexual intercourse. According to the WHO, sexual abuse can result in unintended pregnancy, induced or forced abortion, delivery of low birth weight babies, miscarriage (Ellsberg et al., 2001) and gynecological complications such as vaginal bleeding or infection, fibroids, decreased sexual desire, genital irritation, pain during intercourse, chronic pelvic pain, Urinary Tract Infections (UTIs) and STIs, including HIV (Cambanis, 2007; Olufemi-Kayode, 2004; Rosemary, 2010; Worku & Addisie, 2002). These outcomes are similar with that reported by Bannet, Walter and Diesfield (2004); Kazaura and Masatu (2009) and that confirmed in a study by Ikechebelu et al (2008) that revealed that 40. 6% of the juvenile hawkers had reported experiencing reproductive tract infections. Other consequences are pregnancy-induced hypertension, anemia, infections (including malaria and HIV), peri-natal and infant mortality, maternal mortality and obstructed and prolonged labour (common in

immature girls who bear children), which often results in Vesico-vaginal fistulae (obstetric fistula), and loss of full control of urinary or rectal functions. One study in Niger found that 88% of women suffering from fistulae were married between the ages of 10 and 15 (WHO, 2011).

In the long run, sexual abuse in childhood and adolescence are associated with risky behaviors such as starting voluntary sex earlier, little or no use of condoms; alcohol and tobacco use among adolescents, having sex with multiple partners, little or no use of contraception and transactional sex (Ajuwon et al., 2001a; Emily et al., 2008; Erulkar, 2004; Howard & Wang, 2005; Jejeebhoy & Bott, 2003; Lalor, 2004; Nuko, Chiduo, Mwaluko, & Urassa, 2001; Olley, 2008 and Rosemary, 2010). In addition to these reactions, studies of adolescent males have also found an association between suffering rape and substance abuse, violent behaviour, stealing and absenteeism from school.

Emotional and mental consequences

The mental and emotional harm caused by sexual abuse appears to undermine normal, healthy psychological development. In numerous studies, victims have reported guilt, Post Traumatic Stress Disorder (PTSD), psychiatric disorders, suicide thoughts according to Kenneth et al (2000); anxiety, and depression; sleep disturbances, feelings of worthlessness and powerlessness; inability to distinguish sexual abuse instincts from affectionate behavior resulting in their rejecting other peoples attempt to develop a loving relationship with them while others develop uncontrolled trust for others as they go all out seeking for love and care. Also, feelings of shame, self blame, fear, guilt about sex and inability to refuse unwanted sexual advances have been associated with sexual abuse (UN ESCAP, 2001; Worku & Addisie, 2002). As is the case with female victims of sexual assault, research suggests that male victims are likely to suffer from a range of above mentioned psychological consequences, both in the immediate period after the assault and over the longer term. These including, sexual dysfunction and somatic complaints (WHO, 2002)

Social consequences

Poor academic achievement and withdrawal from school: Children with experience who develop PTSD may have difficulty in concentrating in class room during teaching session. This is because of their recollection of the experience of sexual abuse in their memory. This act of having flashback episodes of the incident of sexual abuse especially rape, may lead to the students poor concentration and retention during teaching hours. In cases where girls, who were raped become pregnant, coming to school with unwanted pregnancy may stir harassment and jeering by their counterparts on their way to and from school. In event to avoid the embarrassment from peers, the female may dropout from school to savour the consequence of sexual abuse at home. In Kenya, girls' progress in the classroom was often undermined by teachers' attitudes and by teasing on the part of male classmates resulting in increase in dropout rates for girls (Mensch & Lloyd, 1998). Studies also report adverse consequences with regard to school continuation and performance (Worku & Addisie, 2002)

There is also the inability to build adult partnerships; sexual abuse is reported to be associated in adult life with insecure and disorganized attachments (Alexander, 1993), loss of marriage prospects as a result of avoiding trusting and caring relationship offers from potential life partners and increased rates of relationship breakdown (Mullen, Martin, Anderson, Romans, & Herbison, 1996). Fleming et al (1999) and her colleagues found that a history of CSA adversely affected the quality of women's relationships in adult life, and increased the likelihood of divorce and separation. There is also difficulty in trusting people and maintaining appropriate personal boundaries, The sexually abused child not only faces assault on the development of their own sexual identity but it also deals a negative blow both to their perception of the world as a safe place and of others as trustworthy (Mullen & Fleming, 1998). There are also cases of rejection by friends and family due to disclosure of the incident and honor killings in extreme cases (Corby, 2000; Jejeebhoy & Bott, 2003; Jejeebhoy et al., 2005; Trocme, Maclaurin, Barbara, & Daciuk, 2001).

Similarly, sexual abuse experiences can increase the risk of experiencing and perpetration of sexual abuse in future intimate relationships (Ajuwon et al., 2011). A case study in Kenya found that young males aged ten to nineteen who reported being victims of sexual abuse

were significantly more likely to admit that they had ever perpetrated sexual abuse in their future sexual encounters (Njue et al., 2005). Conversely, those who have been abused may be more prone to enter relationships with emotionally detached and domineering partners, either because their lowered self-esteem and reduced initiative limits their choices of a life partner.

A history of sexual abuse is associated with problems of sexual adjustment in adult life (Finkelhor, 1990). He described what he termed reduced sexual esteem in both men and women with histories of sexual abuse. Mullen et al (1996) reported that victims of CSA expressed significantly greater dissatisfaction with their sexual relationships and were nearly twice as likely to report current sexual problems. Women whose abuse involved penetration had a nearly 70% rate of sexual problems. Fleming et al (1999) also found that sexual abuse involving penetration was a significant predictor of sexual problems in adult life, even after taking the family and social backgrounds of the victims into cognizance.

Responses towards the prevention of sexual abuse among children

The sexual abuse experiences among young people cannot be addressed in isolation because being a victim is connected with a web of interrelated factors (Jejeebhoy & Sarah, 2003). According to (Collins center, 2005 and Sara, 2009), there are three levels of prevention of SA; primary prevention (establishment of curriculum based education, support groups and crisis hotlines); secondary prevention (preventive support offered to caregivers and other collaborative efforts with concerned stakeholders) and tertiary prevention which is offered after SA has occurred and can include efforts such as teaching adults how to identify and properly report abuse after a child has been victimized or teaching children how to respond in a dangerous situation; treatment or rehabilitative services and policies/plans to forestall future occurrences of SA. With this in mind, several prevention strategies have been implemented by concerned stakeholders in various geographical locations to address the increased incidence of sexual abuse. Below are some of the prevention strategies:

At the primary level

In Ohio Columbia, the Child Assault Prevention (CAP) programme of 1978 which was established by the Collins Center, for elementary school children works to ensure that

children are safe, strong and free. Its goal is to increase children's options, build their strengths, and promote their safety. In essence, CAP strives to empower children. CAP's 3-point focus include programs for teachers/staff, parents and children. CAP has been implemented by over 250 communities internationally. CAP seeks to end the victimization of children through education of children and the adults in their communities. Bearing in mind that children are vulnerable to sexual abuse, it focuses on children's problem-solving abilities to help them identify potentially dangerous situations. With the adoption of a one hour and fifteen minute workshop using role-plays and guided group discussion, children are taught the concept of assertiveness, peer support, and communication skills. The complementary adult workshop educates parents, teachers, administrators, and community members about child sexual abuse and prepares them to respond effectively to children as most parents are uncomfortable with discussing the issues concerning sexual abuse with their children. This CAP does by providing a structure, vocabulary, and a strategy for parents and children to enable them to comfortably discuss sexuality matters including sexual abuse.

Care For Kids: Early Childhood Healthy Sexuality & Abuse Prevention Program

Care For Kids is a comprehensive, community-based approach, designed by the Collins Center (USA) that provides early childhood educators, parents and other adults with information, materials, and resources to communicate positive messages about healthy sexuality to young children. In one of its programmes, it created a 6-session workshop for children ages 3 to 8 years with focus on developing self-esteem, positive attitudes toward sexuality, and safe body boundaries. The curriculum uses the following six themes: bodies, babies, feelings, touching, bedtime, secrets and surprises. Each of the themes integrates developmentally appropriate activities and messages that can easily be incorporated into the early childhood learning environment.

Establishment of child help lines

International (CHI) is a global helpline network established in 2001. As at 2008, over 160 members have reckoned with the helpline, with highest growth in membership coming from developing countries. The United Nations Global Study on Violence Against Children (UNVAC) identified these helplines as critical in providing support to children who have been sexually abused. Child helplines usually have short and easy-to-remember numbers and

provide children with a confidential space to talk about what they are experiencing and how they can seek help. According to the CHI website, 14 countries in Sub-Saharan Africa (SSA) have established helplines—Botswana, Côte d'Ivoire, Guinea, Kenya, Lesotho, Malawi, Namibia, Nigeria, Senegal, South Africa, Swaziland, Togo, Uganda and Zimbabwe (WHO-Africa, 2011). According to Sara (2009), in Kenya, a crisis hotline (Call 116) managed by Child line Kenya, in collaboration with the Department of Children's Services in the Ministry of Gender, Children's Affairs and Social Development was instituted (Childline 116, 2008). Other resources developed for easy access to help in cases of sexual abuse include Preventing Child Sexual Abuse: A National Resource Directory & Handbook and National Sexual Violence Resource Center. This directory combines many of the available resources and initiatives related to child sexual abuse prevention, providing descriptions of organizations, programs, projects and a wide range of resources. Also it features category indices, resource bibliographies, and highlights on related research from key stakeholders.

Preventing childhood sexual abuse through school-based sexuality initiatives

Educating children about how to protect themselves from being sexually abused through school-based prevention programs have been viewed as another viable tool that should be used in the fight against child sexual abuse. The major goal of using educational initiatives is to impart skills that can help children identify potential situations that depict sexual abuse, boundary violations, unwanted forms of touching and contact, ways in which perpetrators groom victims, how to refuse approaches and invitations, how to break off interactions, and how to get help. Another, most important clause to this educational preventive initiative is that it is geared towards ameliorating negative consequences of abuse among children who may have experienced sexual abuse by helping them not to feel guilty or to nurse feelings of being at fault. Different programs have targeted children of different ages, ranging from preschoolers to elementary and middle school children. Increasingly the programs have been bundled into larger safety and health education curricula.

According to Helweg-Larsen, Anderson and Plauborg (2010), the Danish government's action plan recommended the improvement of children's knowledge and skills regarding sexual abuse prevention through school-based sex education. Important skills included were

being able to recognize pressures from other people and to resist them and being able to seek help from professionals if one is being sexually abused. Sexuality education according to Helweg-Larsen et al (2010) should consist of teaching children how to manage and enjoy relationships, make responsible choices and distinguish right from wrong. The action plan makes assurances that the government would evaluate the teaching in elementary and secondary schools in terms of whether there is a sufficient degree of awareness about the concept of sexual abuse with additional focus on dealing with all forms of abuse among children in the school system.

In 2007, the Arizona Department of Health Services/Sexual Violence Prevention and Education Program established the Sexual Violence Prevention Planning Committee which culminated in the formulation of Arizona Sexual Violence Primary Prevention and Education Eight Year Program Plan. The plan was developed as a means of achieving the vision of a culture that supports healthy, respectful relationships through primary prevention efforts and zero tolerance of sexual violence in Arizona communities. Arizona's Comprehensive Prevention Plan has three goals: Increased respect for self and others through sexual violence prevention education for Arizona children, youth, and young adults; increase in Arizonans' engagement in sexual violence prevention and increase of Arizona's resources to support sexual violence prevention and education (Arizona Department of Health Services, 2010).

One of the educational initiatives was that reported by Weatherley et al (2012). Concepts commonly discussed in this program include: children have the right to control who touches their body, there are different kinds of touches (good, bad and questionable) and the importance of telling a trusted adult about inappropriate touching. Weatherley et al (2012) recorded that there have been two meta-analyses which have examined the effectiveness of school-based sexual abuse prevention programs. Both reviews concluded that prevention programs are effective, in increasing knowledge about sexual abuse concepts and self-protection skills, when compared with control groups. Programs that involved active participation and made use of behavioral skills training such as modeling, rehearsal and reinforcement produced better changes (Davis & Gidycz, 2000). Programs that included

more than three sessions appeared to be more effective than briefer programs (Davis and Gidycz, 2000) and younger children appeared to demonstrate the largest gains in knowledge.

Another educative milestone in the prevention of sexual abuse was the development of the personal safety curriculum tagged 'The Keeping Me Safe'. This was developed and executed by Protect and Save the Children initiative. According to Weatherly et al (2012), the purpose was to provide children information about their body, safe and unsafe situations, build a support system, and to impart children with safety strategies and skills. The basic message emphasized by this curriculum was the act of saying 'No', running away, and reporting of sexual abuse situations to trusted adults. As the goal was to change behavior, the content was facilitated by Protect and Save NGO. Other school based programmes reported by Weatherly et al (2012) include *Protective Behaviours* program from the United States and *Keeping Ourselves Safe* from New Zealand; ESPACE (Canada), TRUST TOUCH (USA), KIDSCAPE (UK) and "Who do you tell" (Canada) by Topping and Barron (2009).

At the secondary level

In Indiana, USA, a coalition called Indiana Coalition Against Sexual Assault Rape Prevention and Education Community (INCASA) was constituted with the goal of providing training, technical assistance and administrative support to funded programs and communities throughout the state and also to share evidence-based strategies and existing tools for the practice of primary prevention under the framework of the ecological model of change. They collaborate with partners in international, national and statewide organizations such as schools, and communities by initiating staff development training, facilitation of workshops on healthy relationships, child sexual abuse and rape prevention with audiences ranging from young people, professionals, and the general community (INCASA, 2009).

The Child Sexual Abuse Prevention: Teacher Training Workshop Curriculum (CSAP:TTWC) is a 6-hour secondary preventive intervention training program designed to improve teacher skills in the area of child sexual abuse (Randolph & Gold, 1994). The curriculum includes training in how to recognize behavioral and physical symptoms of sexual abuse, respond appropriately to disclosures, and report sexual abuse cases. The program was

originally used by a group of teachers from one of the Atlanta district schools in 1988. The teachers were found to have significant increases, relative to controls, in knowledge and prevention opinions (i.e., opinions regarding prevention/early intervention efforts). The participants also were significantly more able to respond appropriately to situations involving child sexual abuse as demonstrated by their responses on the Teacher's Vignettes Measure. A positive feature of the CSAP:TTWC is that it covered variety of topics and activities that focused not only on increasing general awareness of the problem and recognizing the common signals often associated with the abused child, but also on a more thorough understanding of the dynamics and emotions that are often involved in child sexual abuse. Exercises were designed to help participants, including teachers, overcome their discomfort. For example, in order to develop more empathetic perception for a child who is a victim of sexual abuse, participants were asked to imagine having to describe their last sexual encounter to someone in order for them to feel what it is like to have to disclose issues such as sexual abuse.

In the state of Virginia, the Collins center, a non-governmental organization with focus on prevention of sexual abuse of children, designed a programme called "STOP IT NOW" which incorporated a help line that is toll free for individuals who have questions or concerns about child sexual abuse, and/or any inappropriate sexual behavior between an adult and a child or between two children. The Helpline receives calls from children who have sexually abused, adults who are at risk to touch a child in a sexual way, as well as friends and family members of children with sexual behavior problems. All calls are confidential and answered by a trained staff member (Collins Center, 2005).

Furthermore, the STOP IT NOW coalition in 2005 designed programmes for adults called 'Let's Talk: Adults Talking to Adults about Child Sexual Abuse'. This brochure was primarily designed for adults who are concerned about the possible presence of child sexual abuse within their community. Stop It Now believes that learning to talk about sexual abuse concerns can help protect a child. Another step was the introduction of the concept "The Four R's of Prevention: Back to School Safety: In & Out of the Classroom by Stop It Now in 2007. This article offers a review for adults on the Four R's of preventing child sexual abuse -

Rules, Reading, Respect, and Responsibility, with services offered on each one of these prevention.

Fighting sexual abuse of children on the internet

As part of the Danish Governments' action plan to check the proliferation of sexual abuse, the internet which is one of the ways through which children are exposed to pornographic scenes, had received the installation of internet filters on public library and school computers. Also, computers were placed in open spaces, so that it would be possible to monitor children's online activities. An internet filter is designed to restrict access to certain internet sites and resources according to their content and it has proved effective in intercepting violence and porn sites as children surf the internet (Helweg-Larsen et al, 2010).

Awareness creation

MEDIACON campaign for the prevention of SA of children

In Nigeria, according to Olufemi (2004), Media Concern (MEDIACON), a Nigerian based NGO for Women and Children intensified efforts to stop the menace of sexual abuse among children. This they did by creating and mobilizing concerned stakeholders such as civil society groups, students and women in a campaign to raise the awareness of sexual abuse and its link to increase of children being infected with HIV/AIDS, apart from the primary mode of Mother to Child transmission. Included in the project were journalists, who enlisted their support to increase awareness and highlight the linkage between sexual abuse of children to HIV/AIDS. Also, female traders in markets across Lagos State were trained on capacity building for the prevention of child sexual abuse (Falobi, 2010).

Follow up to the previous intervention by MEDIACON, according to Akinsanmi (2008), the rising cases of child sexual abuse resulted in a rally held in Lagos. The rally was organized by Lagos State Ministry of Women Affairs and Poverty Alleviation in partnership with Media Concern Initiative (MEDIACON). It was held in major centers across the state to create 'anti-child sexual abuse awareness' which was aimed at halting growing trend and building a society free from sexual abuse. At a recent relative forum MEDIACON organized in Lagos, participants proffered solutions to arrest the rising cases of child sexual abuse in

Nigeria. It was suggested that adequate funding should be provided for the social welfare department at the state level and includes training of staff. Other solutions proffered at the forum include the need to intensify public awareness via the media and publications on the services rendered by the social welfare department so that citizens would be aware of where to turn to when cases relating to child sexual abuse arise. Calling for better government involvement in issues of child sexual abuse, governments have been urged to create centers staffed with trained social workers and experts where victims of child sexual abuse can seek recourse. It was noted that the centre should have an effective collaborative measure with other relevant agencies such as the police and the judicial system so that holistic response would be rendered as it relates to cases of child sexual abuse in the state.

Darkness to light media campaign for the prevention of sexual abuse

Darkness To Light (DTL) is a nonprofit national organization in South Carolina, USA whose primary goal is to educate communities about sexual abuse, its consequences and preventative measures so as to reduce the prevalence of sexual abuse. They have helped several adults with educational-based products aimed to prevent, recognize and react responsibly towards sexual abuse. One of DTL's products is a multi media campaign (aired on TV and radio; educational pamphlet and an educational website). The TV and radio awareness provide basic knowledge about prevalence and impact of sexual abuse in addition to providing their contacts to viewers who would desire more information on sexual abuse. The website and educational pamphlet offer more detailed information about the sequelae of sexual abuse and preventative strategies (Rheingold, Campbell, Shannon, Micheal, Resnick & Kilpatrick, 2007).

At the tertiary level

The tertiary prevention of sexual abuse entails institutionalization of rehabilitative services (services to known perpetrators that often take the form of therapeutic intervention) for victims and perpetrators of sexual abuse and also design of policies, plans and programmes for future prevention of occurrence of sexual abuse. Below are some of the strategies implemented and adopted by various institutions and organizations:

Mental Health Treatment

As part of the recommendation made by Finkelhor (2009) to institute offender/perpetrator management as one of the means of preventing sexual abuse, researchers have advocated for perpetrators to acquire skills for behavioral self-regulation and to help resolve factors within them that increase their perpetration of sexual abuse. One of the treatments judged most effective by the meta-analytic studies was cognitive-behavioral therapy, which identifies the habits, values, and social influences that contribute to perpetration and teaches offenders self-management skills to reduce their risk. In addition, as way of rehabilitating juvenile sexual offenders, three evaluations using experimental designs have supported the use of Multi-systemic Therapy, an intensive family intervention that targets parenting skills, affiliations with delinquent peers, and school problems.

In 2009, at New York, The Centers for Disease Control and Prevention (CDC), five United Nations organizations (UNICEF, UNAIDS, UNFPA, UNIFEM, WHO) and private sector supporters partnered together via the Clinton Global Initiative (CGI) in a new approach to address the rights, violations and health impacts of sexual abuse against girls. The initiative partners collaborate together to provide funding to CDC and UNICEF to expand surveillance on sexual abuse against girls in developing and emerging countries, develop a technical package of interventions for implementation at country level to reduce the incidence of sexual abuse against girls (based on evidence and proven intervention strategies), in addition to launching a major media campaign to elevate awareness of this problem and motivate social and behavioral change (UNIFEM, 2009).

Sequel to the launching of the CGI of former President Bill Clinton, the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and the Office of Global Women's Issues, the U.S. Department of State were the newest partners to join the initiative *Together for Girls* and lend support to end sexual abuse of children. The initiative has three critical categories: conducting national surveys, using these new data to base country-specific interventions tailored to address sexual abuse, and launching public awareness campaigns to motivate changes in social norms and behaviors. Since the launch of *Together for Girls*, the partnership has been working in countries to inform and implement a coordinated approach

to policy and programs for ending sexual abuse against girls. In Swaziland, interventions to prevent and respond to sexual abuse against girls are ongoing as organized by the government and civil society partners, supported by UNICEF and other key partners such as UNAIDS. In Tanzania, a comprehensive national survey was completed in 2009 to estimate the magnitude and impact of sexual abuse against children, supported by UNICEF and CDC. In addition to PEPFAR and the U.S. State Department's Office of Global Women's Issues, the Together for Girls, employed the strategy of collaboration, in partnership with agencies such as the U.S. Centers for Disease Control and Prevention, UNICEF, UNAIDS, UNFPA, UNIFEM (part of UN Women), the CDC Foundation, the Nduna Foundation, BD (Becton, Dickinson and Company), and Group ABC of Brazil towards reducing the incidence of sexual abuse among children (UNFPA, 2009).

The Sexual Abuse Intervention Program (SAIP) was introduced in British Columbia in the 1990s through an initiative to enhance services for child victims of sexual abuse, and their families, and for children under the age of 12 with sexual behavior problems. The program was funded by the ministries of health, social services, education and attorney general. The program was aimed at reducing the suffering and restoring healthy functioning by providing a range of appropriate, timely and accessible assessment, treatment and/or support services to children who have been sexually abused and to children under the age of 12 with sexual behavior disorders. SAIP provides abused young people with access to a therapist who can assess the impact of abuse and provide treatment. The therapist works with the family to ensure the safety of the child and assists the family by providing support to the child in addition to proffering referrals to other relevant services as the need arises (SAIP, 2010)

Conduct of research and surveys on sexual abuse of children and women

The WHO report on violence and health, WHO (2002), and associated resolutions in the World Health Assembly (WHA) and a number of regional committees, has gone a long way to awaken country interest in addressing sexual abuse as a public health priority using a multi-sectoral approach. During the past 18 months, nearly 40 countries have initiated sexual abuse prevention activities in collaboration with WHO, in the form of data collection, research on financial budget regarding abuse, prevention programme evaluation, the

establishment of national prevention institutes or task forces and the improvement of victim services.

As part of the Global Campaign on Violence Prevention in the framework of the WHO (2002) report on violence and health, WHO have registered their support to countries to enable them collect data and information related to abuse against children, develop national violence prevention policies, build the capacity of health professionals to address violence, and create systems for the provision of appropriate medico-legal services and emergency trauma care. Through the WHO-led Violence Prevention Alliance and a network of Ministry of Health, they have continued to foster a strong network of governments, international agencies and private foundations committed to supporting a scientific approach to preventing sexual abuse among children.

To this effect, organizations such as Protect and Save The Children (P.S. The Children) administered a personal safety curriculum (Keeping Me Safe) to Standard Three students (mostly nine-year-olds) in five primary schools in Kuala Lumpur, Malaysia. Staff of the Malaysian NGO facilitated these six weekly one-hour sessions which featured games and role play. It was used to teach children about potentially unsafe situations and touches, and to develop appropriate safety strategies and skills to ask for help. The students (n=261) and a control group (n=184) completed a 25 item questionnaire before and after the program, and for the experimental group only, again two months later. The assessment was supplemented by observations of each session, student interviews, and parent and teacher focus groups. The experimental group students showed increased gains on about two-thirds of the questionnaire items (Weatherley et al., 2012).

As part of providing evidence based information on the issue of sexual abuse, according to Helweg-Larsen (2010), 4000 pupils (aged 15-16 years) took part in a computer-based survey regarding their wellbeing, sexual experience and experience of sexual abuse as recommended by the Danish Government educational plan. Respondents were asked if they received formal instruction on four topics of sex education at school: children's typical sexual development, how to get help after experiencing sexual abuse, how to resist pressure from other people and

how to say no to sex and avoid unwanted sexual experiences and the sexual rights of children. The impact of this teaching was that most of the teenagers reported that they were being taught about children's typical sexual development, but about 25% of male and 19% of female teenagers responded that they had not been taught this subject. More than half of pupils reported being taught how to say no to sex and avoid unwanted sexual experiences. In most classes, 50-100% of teenagers had been taught how to get help after experiencing sexual abuse, although the awareness was not evenly distributed to all schools.

Religious response to the incidence of sexual abuse among children

According to Nair (2011), in January, 1999 during the Bishops' Conference of Southern Africa, a Protocol for Church Personnel in regard to the Sexual Abuse of Children was produced. This was in response to the concerns expressed by the Southern African Council of Priests at their Annual General meeting in 1994. The committee adopted the Australian Protocol (Australian Catholic Bishop's Conference, Towards Healing, Hectorville, of 1996, as its basic document for use in the Southern African context. A revised edition was approved by the Conference in 2004. Seven guidelines were presented in response to accusation of child sexual abuse: These include prompt response administration to allegations of child sexual abuse; provision of care to the emotional and spiritual well-being of those who suffered abuse and their families; There should be immediate consideration, following a complaint, of child protection issues which arise, including whether the accused priest or religious should continue in ministry during the investigation; The rights under natural justice, civil law and canon law of an accused priest or religious should be respected; appropriate pastoral response to the parish and wider community should be provided, with due regard to the right of privacy of those directly involved, and to the administration of justice; adequate positive steps should be taken to restore the good name and reputation of a priest who has been wrongly accused of child sexual abuse.

Further revisions have been made in 2007 and most recently in 2010 to include the Norms on More Grave Delicts approved by Pope Benedict XVI on 21 May 2010 as well as references to relevant South African legislation in accordance with the Child Protection Act. This latest protocol has been renamed 'Protocol for the Preliminary Investigation of Complaints against

Clerics and Religious in regard to the Sexual Abuse of Minors and has been approved by the Conference of Bishops of the region. In addition this 2010 protocol is a detailed application of the directives of Canon 1717 as they emphasize the duty of the Church personnel to report criminal offences to State authorities.

Other policies include those documented by Helweg-Larsen (2010) on the review of the Danish Government policy on prevention of sexual abuse among children and that of Saul and Audage (2007) on policies for youth serving organizations in various areas which include:

Screening and employment of employees

The Danish National Action Plan to combat sexual abuse of children emphasized that employing the right people in institutions that deal with children is an important part of preventing child abuse and building a child-safe organization. Hence, the action plan recommends hiring procedures that aim to protect children and youths from sexual abuse in day care institutions. In 2005, the Danish Parliament passed a law about criminal records disclosures. According to the new act, it is compulsory to obtain a “children’s certificate from new employees who will have direct contact with children. Such a certificate will contain information on decisions such as convictions concerning incest, sexual intercourse or other sexual relations with children, the dissemination or possession of child pornography or indecent exposure to children. Screening for child sexual abuse prevention should be integrated into the general screening and selection process that organizations conduct as they employ best possible candidates for positions. The aim of this process is to form the basis for strengthening the fight against sexual abuse of children. However, while employee/volunteer screening and selection are important, they should not be the only efforts adopted to prevent child sexual abuse (Helweg-Larsen, 2010).

Guidelines for physical interaction between adults and children

The act of developing guidelines on interactions between adults and children is another way of preventing child sexual abuse especially for organizations that work with children and youths. For example, some day care centers have a policy to limit one-on-one interactions between children and adults (i.e., having at least two adults present at all times with

children). These guidelines are intended to protect children from situations that increase the risk for child sexual abuse and to protect employees from gossip and unfounded accusations of child abuse.

Checking applicants against internal records

This strategy involves keeping lists of applicants who are disqualified during the screening process and employees/volunteers who are dismissed because of sexual abuse related offense. During the screening and selection process, organizations during hiring process of employees should check current applicants against these lists to make sure the applicant has not been previously disqualified or dismissed on account of sexual abuse offences.

Reference checks

Reference checks provide additional information about applicants and help verify previous work and volunteer history either as verbal or written references from potential applicants. Engagement of oral conversations can elicit much more information than written responses. Match references with employment and volunteer history and important personality references such as the supervisor from the applicant's most recent job. To provide a more complete picture of the applicant, the references should come from a variety of sources and should not be limited to family members or friends.

Residency Restrictions

Since 2000, many states and localities have rushed to enact statutes and ordinances (often called Jessica's Laws) restricting where sex offenders can live and visit. Thirty states as well as many localities have such statutes, which are purported to protect children in schools, day care centers, and churches from predatory activity by sex offenders. The policies have been widely criticized by sex offender management authorities, who note that in some places it is almost impossible for offenders to find housing. Their increased instability and transiency makes it harder to keep track of offenders and raises the likelihood that re-offending may result (Finkelhor, 2009).

Community Reintegration and Supervision

In Finkelhor's proposal (2009), instead of restricting sexual offenders from residing in locations best desired by them, researchers have argued for improved ways of integrating and

supervising sex offenders when they return to the community or reside in locations to prevent re-offending. An innovative program designed and implemented in Canada called ‘Circles of Accountability and Support’ recruits and trains five community volunteers for each offender where one volunteer meets with the offender daily. Evidence has shown, during evaluation, the efficacy of the concept of over four and a half years that offenders paired with Circles’ volunteers which had a 70% lower rate of offending than those not so paired. An off-shot of the Clinton Development Initiative (CDI) in New York was the concept on design surveys which led to a series of policy and legislative interventions in Swaziland, including the establishment of the nation’s first Sexual Offenses Unit for children, and a push for finalization of legislation against domestic violence and sexual offences (UNIFEM, 2009).

Child participation

“Out of the box” is a booklet produced by young people for young people (Pearce, 2009). The need for the booklet arose from two events. Practitioners pointed out in a UK conference that there was a dearth of child friendly descriptions of what sexual abuse was, of what victims may feel and how they may challenge the abuse and remove themselves from abusive situations. Young people asked for opportunity to participate in training other young people to recognize indicators of abuse. The need for the “Out of the box” project was, therefore, shared between adults and children with a joint aim of providing a foundation for partnership on the agreed task of producing a booklet written by young people for young people aiming to prevent sexual abuse. This agreement was borne out of the explanatory memorandum of the Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse which notes that policy must of necessity be informed by children’s own views and experiences in accordance with their evolving capacity.

Ratification of international and regional Instruments

Appropriate instruments such as the United Nations Convention on the Rights and welfare of the Child (UNCRC), ILO Convention 182 concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour (ratified by all African countries except Eritrea, Guinea Bissau and Sierra Leone) and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) have been ratified and adopted by several countries as a framework for preventing sexual abuse among children. Other

instruments ratified include African Charter on the Rights and Welfare of the Child, the ASEAN Charter, the Inter-American Conventions on International Traffic in Minors and on the Prevention, Punishment and Eradication of Violence against Women and the Council of Europe. Conventions on the Protection of Children against Sexual Exploitation and Sexual Abuse and Optional Protocol to the Convention on the Rights of the Child on the Sale of Children have also been ratified by States that are non-members of the Council of Europe. As a follow up to the ratification of instruments pertaining to children, Nigeria is a signatory to the Child's Right Act of (2003) in which other states are also signatories to (Akinsanmi, 2008). Other countries in the African Region (Mauritius, Rwanda, South Africa, and Zimbabwe) have also taken significant steps to address sexual abuse of children. These steps include regulations to prevent Sexual Abuse and issuance of appropriate penalties against perpetrators. The government of Bangladesh adopted the National Plan of Action against the Sexual Abuse and Exploitation of Children including Trafficking.

In Nigeria, according to Ekpenyong and Sibiri (2011), sexual abuse has been addressed by the Nigerian legal system. First, chapter 2 section 17 (3) sub-section 6 of the Nigerian constitution (1999) provides that the state shall direct its policy towards ensuring that 'children and young persons are protected from any form of exploitation and against any moral or material neglect'. In addition to the above constitutional provisions, the Child's Right Act (2003) under sections 21-40 provides for the protection of children against discrimination, and harmful and exploitative practices including unlawful sexual intercourse and other forms of sexual abuse and exploitation prejudicial to the welfare of the child. In addition, the Sharia Penal Codes in the Zamfara, Kano, Kaduna, Kebbi and Sokoto states protect children and young persons by providing punishment for crimes including sexual abuse and exploitation of girl child.

Other laws put in place to checkmate the menace of child abuse include: the Criminal Code Act (2004: section 301), the Penal Code Act Cap 89 (2004: section 275 & 278) on protection of minor girls, and buying and selling of minors for immoral purposes respectively. They also include the Children and Young Persons Laws of the various states, several international legal instruments such as the United Nations Child Rights Convention, the African Charter

on Child Welfare and now the Child Rights Act (2003). Apart from the above, the government has established child rights implementation and monitoring committees at the national and sub-national levels with CSOs as active members, convened studies on the sexual abuse of children in collaboration with CSO and development partners, and sought functional membership in Interpol as well as massive workshop-based sensitization to the issue. In all of these activities, civil society organizations, through collaboration and networking, have provided expertise and technical know-how (Ekpenyong & Sibiri, 2011).

The Nigeria government has provided an enabling environment and support for Civil Society Organizations (CSOs) to thrive and has drawn from their work to formulate policies, programmes and interventions for child victims of sexual abuse. According to Ekpenyong and Sibiri (2011), their ability to work with and proximity to the children affected by abuse and mistreatment enhances their ability to network, capacity for advocacy, and ability to gather accurate data. Consequently, the Nigerian coalition of NGOs on the rights of children provide the expertise and technical competence necessary for policy formulation and issue assimilation into mainstream government plans. They are also able to influence legislative reforms and resource allocation. Some of the institutions, groups and non-government organizations that play active roles in addressing violence against children include: Africa Network for the Prevention and Protection against Child Abuse and Neglect (ANPPCAN), the Girls Power Initiative, the Nigerian Children's Parliament, the Galilee Foundation, Mantel Consult and Adolescent Development Initiative, National Council of Child Rights Advocates of Nigeria (NACCRAN) and a number of faith-based organizations.

On-going policies for the prevention of sexual abuse among children

The Council of Europe transversal programme “Building a Europe for and with children” was launched in 2006 in response to a mandate resulting from the Third Summit of the Heads of State and Government of the Council of Europe (Council of Europe, 2011). A new strategy on the rights of the child 2012-2015 proposes a vision for the Council of Europe, taking into account the progress achieved during the two previous policy cycles, the needs expressed by governments and the challenges identified by the international community. The strategy is the result of extensive consultations with governments, parliamentarians, key

international organizations and civil society representatives. It is also based on an analysis of surveys and consultations with children. The four strategic objectives of this new policy would build on the achievements of the programme's previous policies and respond to the needs identified by its programme's partners. It would take into account the child-rights dimension of four other transversal Council of Europe programmes. The objectives of the programme include Promotion of child-friendly services and systems, elimination of all forms of violence against children, guaranteeing the rights of children in vulnerable situations and promotion of child participation.

The goal of the programme "Building a Europe for and with children" proposed for 2012-15 will be to achieve effective implementation of existing children's rights standards. To that end, the programme will provide policy guidance and support to the member states in implementing United Nations and Council of Europe standards, promote a holistic and an integrated approach to children's rights, and identify measures that will tackle challenges such as prevention, protection, provision and participation of children. In the area of Sexual abuse prevention, they are pursuing, in co-operation with its international partners, the Parliamentary Assembly and the Congress of Local and Regional Authorities, the 'ONE in FIVE' Campaign to stop sexual abuse against children. For protecting children, they are working towards ensuring implementation of the Council of Europe Convention on the Protection of Children against Sexual Abuse and other instruments that contribute to eradicating all forms of sexual violence. In order to raise the awareness on sexual abuse of children, the Council of Europe will decide upon a European Day on the Fight against Sexual Abuse of Children by 2014.

On issues pertaining to child participation, all children have the legal right to be heard and taken seriously in all matters affecting them, whether in the family or alternative care environments; day-care; schools; local communities; health care, justice and social services; sport, culture, youth work and other recreational activities and policy-making at domestic, European and international levels (Council of Europe, 2011). The Organization will continue to mainstream child participation as a working method and an attitude into its own standard-setting. This objective will be mainstreamed, particularly in the Council of Europe sectors

working on youth, on education and on media and information. It will also promote and evaluate the implementation of the children’s right to be heard and taken seriously in line with Council of Europe standards.

Conceptual framework for the study of sexual abuse

This study was guided by a theoretical framework called ecological model.

The Ecological model

The Ecological model, developed by McLeroy, Bibeau, Steckler, and Glanz (1988) emphasizes the interaction between and interdependence of factors across all levels of a health problem. It highlights people’s interactions with their physical and socio-cultural environments. According to McLeroy et al (1988), five levels of influence, as described by Annie et al (2009) and Blum and Nelson (2004), for health related behaviors have been identified and explained in the Table 2.2 below.

Table 2.2: Concept and definitions of the constructs of ecological model

Concept	Definition
Intrapersonal factors	Individual characteristics that influence behavior such as knowledge, attitudes, beliefs and personality traits
Interpersonal factors	Family, friends and peers that provide social identity, support and role definition
Structural factors	Rules, regulations, policies and informal structures which may constrain or promote recommended behaviors
Community factors	Social networks and norms that exist as formal or informal among individuals, groups and organizations
Public policy	Local, state and federal policies and laws that regulate or support healthy actions and practices

Source: McLeroy et al (1988). An ecological perspective on health promotion programs.

Interestingly, the adoption of this model for the study is suitable as it shows the interrelatedness of factors responsible for the vulnerability and victimization of young people to sexual abuse which are similar to that depicted by the model.

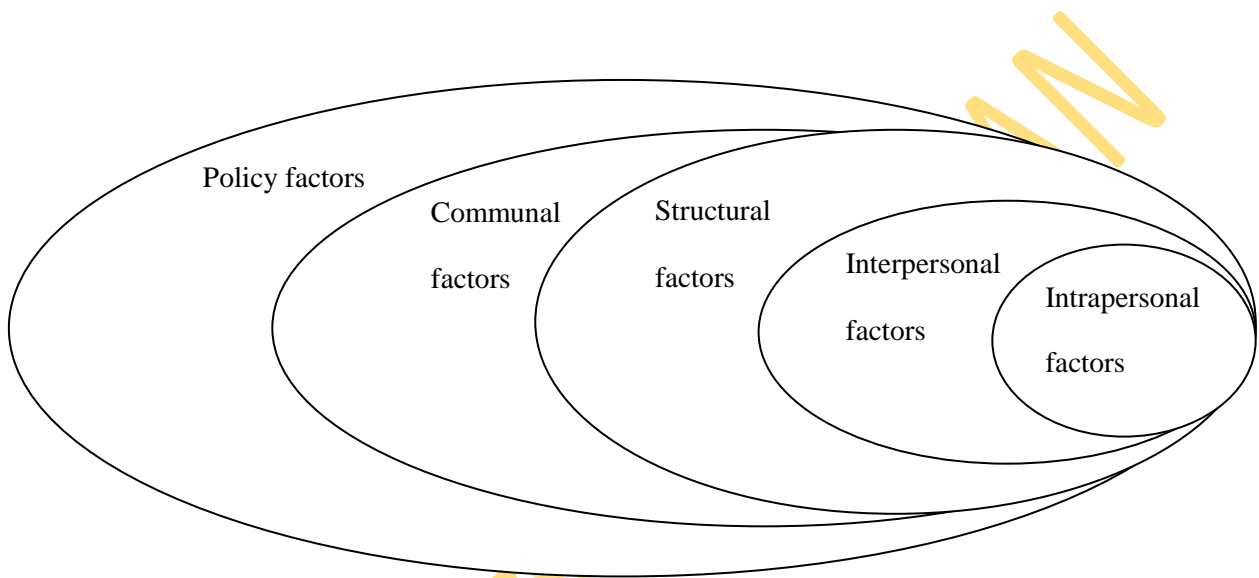


Figure 2.0

Ecological model on factors associated with experience of sexual abuse.

Source: Croyle, (2005). *Theory at a glance: A guide for Health Promotion practice.*

Application of model to study

This model was used to explain and identify risk factors associated with exposure to sexual abuse which are as follows:

Intrapersonal factors: Owing to the fact that factors such as being young, consumption of alcohol, having many sexual partners, experience of sex previously, poor educational status, behaviors and attitudes of females etc have been associated to be antecedent to the occurrence of sexual abuse, this study identified and proved whether there is a relationship between age, previous experience of sex, economic status, type of goods hawked, consumption of psychoactive substance and access to knowledge on sexual abuse with their experience of sexual abuse.

Interpersonal factors: The interpersonal level provided a platform for the study to investigate any relationship between certain factors and the experience of sexual abuse. At this level, amidst several factors proven by Ajuwon et al (2001b) and Patel and Andrew (2005) to contribute to the experience of sexual abuse, factors such as living arrangements with parents, absence of one or both parents, respondents' communication of sexuality matters, persons with whom sexuality discussion are held and parental neglect (absence of provision of needs) were studied to examine if there was any relationship with them and the experience of sexual abuse.

Structural factors: This level in the ecological model enabled the study to understand various factors that can influence help seeking behavior of females who have experienced sexual abuse despite the fact that certain factors such as stigma, fear, shame, guilt and inability to have a marriage partner have been established by several authors (Ajuwon et al., 2004; Jejeebhoy et al., 2005; Stewart et al., 1996). For this study, factors such as lack of institutional help from police or health facilities, social norms (perception that the incident was self invoked and shame), poverty and threatening by perpetrator not to disclose were answered by this study to understand if there is any relationship between them and in the victims help seeking behavior.

CHAPTER THREE

METHODOLOGY

Research design

The study was cross-sectional in design. It explored the reported experiences of sexual abuse among female hawkers found in selected markets.

Study area

The study was carried out in Ibadan North East (IBNE) LGA which was created on the 27th of August 1991 with administrative headquarters at Iwo road. It was carved out of the defunct Ibadan municipal government and derived its name from the metropolitan nature of the area. It has an estimated projected population of 386,756 from Oyo State health directory, (2008) and covers a large expanse of land with an area of about 12.5 square kilometers. It is made up of 12 political wards with the inhabitants being mainly Yoruba although it is heterogeneous accommodating people from other tribes who engage in commercial activities or work in public service. In addition to civil service and teaching as occupation practiced in the area, the main business activity in the local government area is buying and selling of different types of food and trading in foodstuffs, clothing and many household consumer products across the ten markets found in the L.G.A.

A market is an institution that constitutes the backbone of economic and social life throughout West Africa, Nigeria and more especially in Yoruba speaking states (Brieger & Kendall, 1996). Market, in this study, depicts an authorized public concourse of buyers and sellers of commodities who meet at a place more or less strictly defined at an appointed time (Omole, 2012). The markets in this LGA are fundamental to the economic, social, cultural, religious and political life of people. According to Omole (2012), markets are classified into two which include; daily and periodic market. These type of market are further sub-classified as; morning, full-day, night, periodic, provincial and inter kingdom markets. (See Figure 3 for a typical picture of a market in IBNE LGA).

A daily market requires the existence of many full-time traders. It is a more convenient type of market in that it provides daily needs to the people on daily basis. In the LGA, the following ten markets classified as daily markets are described below:

1. *Ojee*: This market is one of the biggest markets in the LGA. It is located at the heart of the LGA and serves as a central market for residents in the LG, Ibadan North West and Ibadan North LGA respectively. As a big market, consumer products ranging from household, foodstuff, fabrics, and fashion accessories, old and used items are sold there. Also, a small segment of the market named *Ojee-ero* is noted for the sale of traditional and beaded material for cultural events. Adjacent to the markets are motor parks that transport commuters to various parts of the LGA and other neighborhood.
2. *Irefin*: This market is one of the smallest markets in the LGA that is adjacent to Ojee market. They deal majorly on black soap and other locally produced items. Though small in size with few traders and buyers, the lively activities observed in the area is due to the commodity (black soap) which is been sold there and used by a majority of the inhabitants of the LG.
3. *Araromi (Gate)*: As one of the big markets in the LGA, that is central to Ibadan North, North East and South west, they are into the sale of motor parts and auto mechanic repairs; fashion, clothing's, household accessories; food stuff, provision items and office (business) transactions. Adjacent to the market are bus stations that are into inter and intra state transport business.
4. *Oba Ogundipe*: This market is one of the markets that share boundary with Araromi market. Traders are predominantly into sale of clothing's and fashion accessories with a handful of Ibo speaking in addition to Yoruba speaking traders.
5. *Agugu*: This is one of the roadside markets that is into the sale of food stuff and household items and shares boundary with Ibadan South West LGA.
6. *Bashorun*: This market is located along the road and shares boundary with Ibadan North, Ibadan North East and Akinyele LGA. Although not small, they are involved in the trading of consumer products such as food stuffs, provisions and pharmaceutical products.
7. *Oranyan*: This is one of the largest markets in the LGA that is male dominated although located along the road. They deal mainly in livestock such as cow, goats, sheep, lamb and poultry. Traders in this market are predominantly Muslims with a mix of Hausa and Yoruba

tribe represented. Surrounding the market are those who trade in mobile phones and accessories, food stuff and pharmaceuticals.

8. *Orita Aperin*: Although a roadside market, this market is into the sale of food stuffs and household accessories with a mix of men and women as traders. It also accommodates an intra-city bus station that commutes residents to and fro within the LGA.
9. *Iwo shopping complex centre*: This market is one of the prominent stalls located in Iwo road, where the headquarters of the LGA is located. The traders there predominantly are males who deal in auto mobile equipments, building materials and electrical machines.
10. *Bere*: This a roadside market that share common boundary with Ibadan North East, Ibadan North west and Ibadan South west L.G.A

Also, periodic markets are centers where goods and services are traded. According to Brieger and Kendall (1996) they are identified based on their size (population, number and types of goods sold) and frequency of periodicity. They are scheduled in relation to the traditional week and signify that rural areas are not the most important unit in Yoruba economic organization (Brieger & Candell, 1996).

Market layout

The different markets are organized according to the different commodities sold to make for easier shopping and price comparison. Most of the markets are organized as a cluster of stores, stalls and lock up shops. Other markets have commodity arrangements that are in the form of shops arranged sequentially in a one, two or more storey building. Although there are locations basically mapped out for men who sell items peculiar to them, women also have locations where they sell different items around the market. Young children who hawk do not have restrictions to places where they carry out their hawking activities as they are seen wading through all the corners of the market in order to ensure that their wares are displayed.

Market leadership and roles

Stakeholders in the market could be categorized as leaders, sellers, buyers and transporters. With respect to leadership, each market has a Chairman and a council. The council is made up of vice-president, secretary, treasurer and representatives of traders of different items. The

leadership of each market have their meeting in the council office within the market. Part of their responsibility is to discuss market conditions, hear and settle disputes, inspect the conditions of the market and also control, oversee, enforce and regulate economic activities that go on within the market. These function are carried out alongside with Government officials whom they refer to as *Council*.

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Figure 3.0 A young girl hawking in a typical market (Ojee Market) in Ibadan North East L.G.A

Study population

The study population was female hawkers who trade in selected markets in IBNE LGA. Female adolescent hawkers are young girls who sell consumable and non-consumable items in locations such as markets, streets, bus and truck stations in urban areas (Ajuwon et al., 2001a). According to Fawole et al (2002), they can be classified into three namely:

1. Student hawkers: These hawkers are those that are currently in school but hawk from late afternoon till night after returning from school and on weekends. They hawk for their parents, guardians and instructors.
2. Apprentice hawkers: This group of girls hawk and learn some form of trade under the supervision of an instructor
3. Professional hawkers: This class of girls owns the goods that they hawk.

Generally, hawkers sell by displaying their goods in a tray placed on their head while moving from one end of the market to another for very long hours, either for themselves, caregivers or their employers. Some of them are seen standing or sitting at a location in the market selling their wares temporarily. As their goods get exhausted, they are being replaced from either their caregivers kiosks or shops where reserve of their goods are kept. As a highly mobile group, they do not have any structure that oversees their welfare (i.e. association) but are usually seen in certain clusters in the markets where they occasionally take a break.

Sample size determination

A study on child sexual abuse among socially disadvantaged adolescents in Ibadan, Nigeria, revealed that 55% of the adolescents have experienced one form of sexual abuse (Olley, 2008). Sample size was estimated using the Leslie Kish formula where,

$$n = \frac{Z_{\alpha}^2 pq}{d^2}$$

n = minimum sample size when population is greater than 10,000

$Z_{\alpha} = 1.96$ at confidence interval of 95%

P = prevalence at 55% (Olley, 2008) – previous estimate of the prevalence of sexual abuse among adolescents in Ibadan.

q = 1.0-0.55 = 0.45

d = degree of precision = 0.05.

Therefore, $n = \frac{(1.96)^2 \times 0.55 \times 0.45}{(0.05)^2}$

n = 380

Anticipating a non - response rate of 10% (380), the minimum sample size was:

38+380 = 418.

The total number of respondents intended to be interviewed was 418. However, 410 respondents agreed to participate in the study.

Inclusion criteria

Inclusion criteria for the selection of respondents was based on:

1. Age (10-17years)
2. Sex (females)
3. Marital status (unmarried),

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Table 3.0: Selection of female adolescent hawkers across markets

Markets	Days of operation	Proportion of hawkers in each market (weekly)	% of sample size for each market	Actual number of respondents selected in market
Ojee	Daily	250	160.8	160
Oranyan	Daily	50	32.2	84
Agodi/Gate/Ogundipe	Daily	300	192.9	148
Orita Aperin	Daily	50	32.2	17
Total		650	~418	410

Sampling technique

A two-stage random sampling procedure was used in selecting respondents for the study. They are described below:

Stage 1

The ten markets were stratified into three groups based on the periods in which they are opened (daily, weekly or bi weekly), size (spread) and commodities sold in common. From each group, two markets (Ojee and Araromi; Bashorun and Oranyan; Orita Aperin and Agugu) with similar characteristics were selected. However, only four markets (Ojee, Araromi, Oranyan and Orita Aperin) were sampled due to absence of hawkers' permit in Bashorun and Agugu.

Stage 2

In the second stage, purposive (total) sampling method was used to select respondents found in each market. Arriving at each market, a vantage position in each market was identified and from there, a coin was tossed. On tossing the coin, if it landed with the head, the right side of each market was followed through to its end throughout the data collection process. Thereafter, the female hawkers that met the inclusion criteria in each market and gave their consent to participate in the study were recruited.

Variables of study

Three forms of sexual abuse explored in this study are stated below:

1. Penetrative forms of abuse (rape and attempt to rape)
2. Contact forms such as unwanted touching of the breasts, buttocks; unwanted hugging; frottage (rubbing of one's genitals against someone's body/clothing)
3. Non-contact forms such as exhibitionism (the act of an adult exposing his genitals to an unwilling party), voyeurism (a child being made to witness sexual exposure of other children with an adult or between adults); exposure to pornographic pictures and unwanted sexual comments.

Other variables studied include:

1. Knowledge of types of sexual abuse
2. Context of occurrence of sexual abuse: These include time, location, procedure and reasons (risk factors) for occurrence of sexual abuse.

Risk factors for vulnerability to sexual abuse: Intrapersonal indicators include age, psychoactive substance consumption, educational status and type of goods hawked. Interpersonal factor indicators include communication on sexuality matters, peer pressure, absence of one or both parents and provision of daily needs.

3. Perpetrators of sexual abuse
4. Help seeking behaviors: personal reasons for non disclosure include shame and avoidance of stigma. Interpersonal reasons include avoidance of abuse from care givers. Structural reasons for not obtaining care include avoidance of shame from health workers and lack of information on where to obtain recourse.

Instruments of data collection

Quantitative and qualitative instruments were used for the data collection process. The instruments are stated below:

Quantitative method

A semi-structured questionnaire containing 49 questions was used for data collection (See appendix 1.3). The questionnaire was an adaptation of the instrument used by Ajuwon et al (2001a) on sexual coercion among adolescents and Olley (2008) on Child Sexual Abuse

among socially disadvantaged adolescents all in Ibadan. It was modified and administered with the assistance of research assistants in order to explore the experiences of sexual abuse among female hawkers. The questionnaire addressed each of the previously stated specific objectives such as:

1. *Socio-demographic characteristics*: This section asked questions regarding the respondents' personal and family history, hawking duration and reasons for hawking.
2. *Knowledge of types of sexually abusive behaviors*: positive or negative affirmations to questions such as being touched in an unwanted manner by males as you hawk; insults with sexual words; exposure to sexual pornographic materials; attempted/actual rape etc were asked in this section of the questionnaire.
3. *Prevalence of reported sexual abuse*: Questions such as have you ever experienced unwanted touching of your breast/buttocks, exposure to pornographic materials, sexual comments, exposure of genitals for you to see, attempt to have sex/actual sexual intercourse?
4. *Context of extreme forms of sexual abuse such as rape and attempted rape*
5. *Perpetrators of sexual abuse*
6. *Help seeking behaviors*
7. *Perceived means of preventing sexual abuse.*

In-depth Interview guide

The in depth interview guide consists of questions designed to elicit deep information from victims of sexual abuse. Questions in the in-depth interview guide were centered on:

1. Details (location, duration, procedure) of experience of sexual abuse
2. Perpetrator of sexual abuse
3. Help seeking behavior
4. Reaction by persons disclosed
5. Reasons for disclosure
6. Reasons for non-disclosure
7. Strategies (personal, civil, family) for the prevention of sexual abuse.
8. Strategies for preventing sexual abuse in open places like markets

Questionnaire administration

The administration of the questionnaire was done by the researcher with the help of four trained, female research assistants. Bearing in mind that majority of the respondents communicated and understood Yoruba language; the questionnaires were interviewer administered by research assistants who were also fluent in Yoruba language. The questionnaires were administered in corners around each market devoid of distractions as a result of hawking and transportation activities within markets. The administration began between 12 noon to 8 pm for a period of three weeks from 5th to 19th of September, 2011. The questionnaires were retrieved from the respondents after completion and cross-checked for completion and incompleteness. To avoid duplication in recruiting participants, the following measures were adopted:

1. One research assistant and a supervisor, all females, were assigned to a market at a time until the sample proportion of respondents to be recruited had been attained. This was to ensure that both persons would be able to identify those that have been sampled previously.
2. The following day, in order to forestall recall bias by the research assistants, any potential respondents, before giving consent to participate was asked if they know the purpose of the research. Observations for non-verbal cues, apart from the verbal expression of saying NO, such as conveying ignorance of the concept gave clue as to the suitability of such respondents. Afterwards, those that consented after being given details of the study were recruited.

Conduct of In-depth Interview

Next in the data collection exercise was the conduct of in-depth interviews for victims of each form of sexual abuse. The interview was conducted by two female research assistants who have obtained a university degree, using a 10 item IDI guide. The victims of sexual abuse were selected during the completion of the questionnaire and the criterion used in selecting them for the IDI was anybody who said “yes” to any of the questions pertaining to any of the sexual abuse forms in this study. Respondents who provided experiences of sexual abuse relevant to the focus of this study participated in the IDI session after giving their consent. While six respondents consented to be interviewed immediately, only one

respondent opted to be interviewed in the evening towards twilight after her caregivers had left for the day's trading at a later date with descriptions to where she can be located.

Audio tapes were used to record the experiences in addition to taking down notes. The aim was to document their experiences in full detail and the help seeking behaviors they took. Tape recorder was used in the collection of the data during the interview after their consent was obtained. Out of the 22 respondents that experienced rape, 51 that experienced attempted rape and 32 that experienced exhibitionism, 7 respondents consented to participate in the IDI (4 attempted rape, 2 actual rape and 1exhibitionism respondents). Care was taken to elicit information from victims in a conducive environment away from the hustling picture found in markets. Seven out of those who were identified during the first phase of this study (questionnaire administration) and had experienced one form of sexual abuse were engaged in an in-depth interview with their consent secured. The interview lasted an average of thirty to forty five minutes and was recorded using an audio tape.

Reliability and validity of instrument

Reliability

The reliability of the instrument was calculated using the internal consistency technique and Cron-bachs Alpha model technique reliability coefficient. The pre-testing of the instruments was done in one of the markets outside the LGA (Bodija market) and administered to 10% of the sample proposed for study. Subsequently, the coefficient reliability was determined using the SPSS software. A reliability score of 0.937 was obtained, thus showing that the instrument was reliable.

Validity

This was achieved through pre-testing the instrument at Bodija market at Ibadan North L.G.A. The purpose of pre-testing was to ensure that the questions documented were well understood and were eliciting the desired responses. Pre-testing also assisted in finding out the acceptability of the questionnaire, identification of constraints to its administration and identified relevant questions not addressed in the instrument. Experienced researchers including supervisors in this field of study contributed to the validity of the instrument by

providing up-to-date review of the instrument. In addition, extensive literature review of previous related studies was carried out as it provided current and best practices for adoption and modification of instrument. Questions that were not addressing the variables of study were replaced with questions that focused on the variables of study and were framed in a way that would not be threatening but would elicit responses from respondents.

Data management and analysis

Completed questionnaires were serially numbered for easy identification, storage, retrieval and accessibility from unauthorized persons ensured using a password. Data was sorted, edited, and coded manually using a coding guide that was developed by the researcher. The data was entered into the computer and analyzed using the software SPSS version 15. Frequency counts were run to detect missing cases and after words to enhance easy analysis. Descriptive statistics (means, ranges and standard deviations) and inferential statistics (Chi-test and Logistic regressions) were used to investigate associations between categorical variables and identify significant predictors of abuse respectively. Knowledge category of the respondents was classified based on those who had mean scores of 0-4 (poor knowledge); 4.1-7 (fair knowledge) and 7.1-10 (good knowledge) All analyses were carried out at the 5% level of significance. For the qualitative data obtained using audio tapes during the In-depth interview, respondents who communicated in Yoruba language had their responses transcribed to English, and this was thematically analyzed and presented using Microsoft word document.

Ethical considerations

This study was approved by the Oyo State Ethics Review Committee, Ministry of Health, Ibadan (See Appendix 1).

Absolute confidentiality of respondents who provided information about their experience of sexual abuse was maintained by ensuring that there were no identifiers on their questionnaires and strict protection of data with a personal password known by the investigator and no access was granted to any third party. Also, during the survey,

respondents were made to give their experience in a confidential corner of the markets and away from the interruption of buyers of commodities.

In this study, voluntary participation was observed (See Appendix 2 for informed consent paper). Female hawkers provided informed consent (assent) before they participated in the study. They were duly intimated that they had the right to withdraw from the survey at anytime during the data collection process. Any respondent providing information about their experience of sexual abuse gave informed consent before participating in the data collecting activity. As emancipated minors according to Ajuwon and Adegbite (2008) whose relatives may or not be the perpetrators of the abuse, all respondents gave verbal consent (assent), after information about the purpose of the research was made in clear and simple terms. As part of upholding the principle of beneficence, owing to investment of the respondents' productive time into the data collection exercise, each respondent was given a soap case and detergent which was endorsed as safe by the coordinator in charge of revenue collection in markets located in the L.G.A.

Due to the sensitive nature of the study, and as part of the ethical principle of reducing harm during conduct of research, care and support in form of age appropriate counseling was provided immediately to the victims of sexual abuse during the data collection process as hawkers may not be able to access facilities due to their age. Counseling was provided by one of the supervisors who possess a nursing/social work background with proven capacity to provide psychological support. Above all, the cooperation of the leadership structure in these markets (Chairmen and Ladies), L.G revenue collectors and Rate officers were sought and rightly provided.

CHAPTER FOUR

RESULTS

Socio-demographic Characteristics

The profile of the respondents is presented in Table 4.1. The ages of the respondents range from 10-17 years with a mean of 14.4 years \pm 1.76. Majority (65.6%) were between the ages of 14-17. Most of the respondents were Muslims (64.4%) with 35.4% of Christians. Predominantly, 94.4% of the respondents are Yoruba and 3.7% are of the Igbo tribe. Also, majority (67.1%) live together with their parents while 52.9% of the respondents were in their junior secondary school level. Forty one (10.0%) of the respondents have ever taken alcoholic drinks, 0.5% had taken both alcohol drink and cigarette, while 0.2% each had taken marijuana and both marijuana and alcoholic drink. In the last 3 months, among those who have ever taken psychoactive substances, 84.4% had taken alcoholic drinks, 4.4% had taken alcohol and cigarette while 2.2% had taken alcohol and marijuana

Table 4.1a Socio-demographic characteristics of the respondents (N=410)

Socio-demographic characteristics	Frequency	%
Age group		
10-13	269	65.6
14-17	141	34.4
Religion		
Christianity	264	64.4
Islam	145	35.4
Traditional	1	0.2
Ethnicity		
Yoruba	387	94.4
Igbo	15	3.7
Others ^a	8	1.9
Parents living pattern		
Living together	275	67.1
Separated	76	18.5
Divorced	30	7.3
Widowed	29	7.1
Discuss sexuality matters		
Yes	281	68.5
No	129	31.5
Sexuality is discussed with (n=281)		
Parents	139	49.5
Friends	121	43.1
Extended family relatives	15	5.3
Neighbors	6	2.1
Educational status		
Junior secondary	217	52.9
Senior secondary	110	26.9
Primary	58	14.1
Out of school	25	6.1
Substance ever consumed		
None	365	89.0
Alcoholic drink	41	10.0
Alcohol and cigarette	2	0.6
Marijuana	1	0.2
Alcohol and marijuana	1	0.2

Note: **a** include Edo, Idoma and Efik

Economic profile of the respondents

Table 4.1b shows the economic profile of the respondents. A large majority (94.4%) of the respondents were hawking part-time while 5.6% were full time hawkers. The respondents involved in hawking were found to be hawking for both parents (44.6%) and 16.1% were hawking for themselves.

On the reasons for the respondents hawking activity, 48.8% are hawking to help parents, 28.4% to help mother, 14.9% for self help and 5.9% to avoid idleness. The respondents were found hawking items such as food/snacks (48.5%), non-alcoholic drinks (22.2%), non-food items (13.9%), fruits (12.9%) and alcoholic drinks (2.4%).

The income profile of the respondents' shows that 6.1% of the respondents earn less than ₦500, 8.0% earn between ₦500-~~₦1000~~ while 52.7% earn more than ~~₦1000~~ but not up to ₦10,000 on a weekly basis during hawking. Out of the income earned by the respondents, 10.0% said they earn less than ₦100. Similarly, 78.0% of the respondents received their daily provision from family members, 18.5% by themselves and 3.5% from friends of the opposite sex.

Table 4.1b: Economic profile of respondents

Variables	Frequency(N=410)	%
Type of hawking		
Part time hawking	387	94.4
Full time hawking	23	5.6
Owner of goods		
Parents	183	44.6
Mother only	96	23.4
Self	66	16.1
Guardian	51	12.5
Family relatives	10	2.4
Employer	4	1.0
Reasons for hawking		
To help parents	200	48.8
To help mother	116	28.4
To get money for self	61	14.9
To avoid idleness	23	5.9
Items hawked		
Food/snacks	199	48.5
Non alcoholic drinks	91	22.3
Non food items	57	13.9
Fruits	53	12.9
Alcoholic drink	10	2.4
Reported income profile on weekly basis (Naira)		
Less than 500	25	6.1
500-1000	33	8.0
1001-9990	216	52.7
>10,000	133	32.5
No response	3	0.7
Amount earned by hawkers from income (Naira)		
None	49	12.0
<100	42	10.0
100-1000	202	49.4
>1000	102	24.9
No response	15	3.7
Provision of daily needs		
Family (Parents/mother/father/family relatives)	320	78.0
Self/employer	76	18.5
Friends	14	3.5

Knowledge of sexual abuse among respondents

Table 4.2a shows a list of responses to the concept of sexual abuse. A large majority (89.2%) offered a definition on sexual abuse, while 10.8% did not. Among those who offered a definition, 6.3% claimed it is sexual activity between two unmarried persons while 55.9% said it is the act of having sex with a female without her consent.

Table 4.2a: Respondents perception of the concept of Sexual Abuse

Definition of sexual abuse	Number (N=410)	%
Sex with a female without her consent	229	55.9
Other forceful unwanted sexual activities (transactional sex, abduction for sex, gang rape etc)	69	16.8
Exposure to unwanted sexual activities (sex harassment, pornography, sex while standing, singing of songs with sexual undertones)	42	10.2
Sexual activity between unmarried people	26	6.3
Do not know	44	10.8

On the knowledge of the various forms of sexual abuse, the most indicated as sexual abuse by 78.0% respondents was attempted sexual intercourse with a female without her consent while the least reported as sexual abuse is other behaviors depicting sexual abuse by 33.7% such as transactional sex, abduction for sex and gang rape. This is shown in Table 4.2b.

Table 4.2b: Percentage of respondents with correct knowledge of various forms of sexual abuse

Forms of sexual abuse	Number N=410	%
Unwanted touch	210	51.2
Genital rubbing	180	43.9
Unwanted sexual comments	218	53.2
Unwanted hugging	210	51.2
Voyeurism	202	49.3
Exhibitionism	213	52.0
Pornography	218	53.2
Attempted rape	320	78.0
Other behaviors with sexual overtone	138	33.7
Defilement	162	39.5

Note: Multiple responses included

A look at the knowledge score in Figure 4.1, it shows that 41.0% of the respondents had poor knowledge (0-4), 36.8% had fair knowledge (4.1-7) while 22.2% had good knowledge (7.1 – 10) regarding types of sexual abuse.

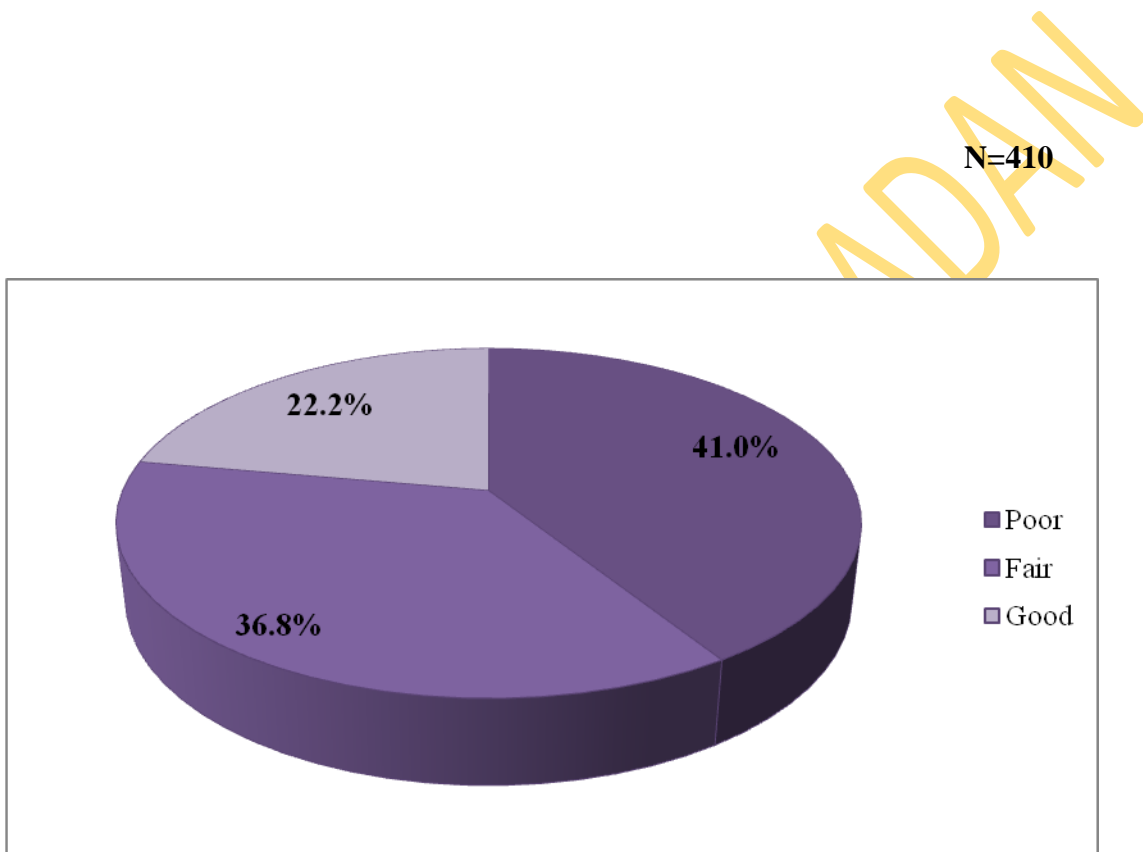


Figure 4.1: Respondents knowledge on types of sexual abuse

Relationship between knowledge of sexual abuse with selected variables

Table 4.2c shows the relationship between knowledge of sexual abuse and selected variables. There was no significant difference across all the variables. Respondents who were within the ages 14-17 (27.3%), currently in school (38.8%) and discuss sexuality issues (29.5%) were found to have poor knowledge about sexual abuse. Also, 23.6% of respondents who are within 14-17 years, are currently in school (34.6%) and discuss sexuality matters (23.4%) have fair knowledge of sexual abuse.

Table 4.2c: Relationship between knowledge of sexual abuse and selected variables

Variables	Knowledge of sexual abuse				X ²	P-value
	Poor	Fair	Good	Total		
Educational status						
Currently in school	159(41.3)	142(36.9)	84(21.8)	385(100.0)	0.570	0.752
Out of school	9(36.0)	9(36.0)	7(28.0)	25(100.0)		
Age (years)						
10-13	56(39.7)	54(38.3)	31(22.0)	141(100.0)	0.213	0.899
14-17	112(41.6)	97(36.1)	60(22.3)	269(100.0)		
Have boyfriend						
Yes	92(43.4)	80(37.7)	40(18.9)	212(100.0)	2.915	0.233
No	76(38.4)	71(35.9)	51(25.8)	198(100.0)		
Discuss sexuality matters						
Yes	121(43.1)	96(34.2)	64(22.8)	281(100.0)	2.806	0.246
No	47(36.4)	55(42.6)	27(20.9)	129(100.0)		
Sexuality is discussed with (n=281)						
Caregivers	103(36.7)	70(24.9)	51(18.2)	224(79.7)	4.933	0.085
Acquaintances	18(6.4)	26(9.3)	13(4.6)	57(20.3)		
Religion						
Christians	64(44.1)	54(37.2)	27(18.6)	145(100.0)	1.849	0.397
Muslims	104(39.2)	97(36.6)	64(24.2)	265(100.0)		
Parents living status						
Live together	119(43.0)	96(34.7)	62(22.4)	277(100.0)	1.928	0.381
Separated	49(36.8)	55(41.4)	29(21.8)	133(100.0)		
Total	168(41.0)	151(36.8)	91(22.2)	410(100.0)		

Sexual behavior of respondents

Table 4.3 presents the sexual behavior of respondents. About 48.3% of the respondents have ever had boyfriends. On the sexual debut of the respondents, 21.2% of the respondents have ever had sexual intercourse with a mean age of first sexual intercourse been (14.7 ± 1.7 years). Out of those who have had sex, 65.5% reported that they and their partners were both willing during their first sexual intercourse while 29.9% said the male partner forced it on them.

Table 4.3 Sexual behavior of respondents

Behavior	Frequency (N=410)	Percentage
Ever had a boyfriend		
No	211	51.5
yes	198	48.3
No response	1	0.2
Ever had sex (First sex)		
No	323	78.8
Yes	87	21.2
Reasons for initiating sex*		
Verbal insistence	36	41.4
Curious to experiment the act	21	24.1
Transactional sex	21	24.1
Can't remember	9	10.4
Age at first sexual initiation in years*		
13-17	71	81.6
8-12	5	5.8
Can't remember	11	12.6
Context of first sexual intercourse*		
Both persons willingly agreed	57	65.5
It was forced on the female	26	29.9
The female forced it on a male	2	2.3
Can't remember	2	2.3

Note: * Number of respondents (N=87)

Experience of sexual abuse

Table 4.4a shows the prevalence of each form of sexual abuse; ever happened and happened in the last three months preceding the study respectively. The most prevalent form of sexual abuse ever experienced is unwanted touch (49.8%) while the least prevalent is rape (6.6%). In the last 3 months preceding the study, out of those that ever experienced a form of unwanted touch, the most reported form of sexual abuse is unwanted touch (97.1%) while the least prevalent is rape (81.5%).

Table 4.4a Experience of various forms of sexual abuse

Forms of Sexual Abuse	Experience of sexual abuse			
	Ever		Current (3 months)	
	Yes	No	Yes	No
Unwanted touch	204(49.8)	206(50.2)	198(97.1)	6(2.9)
Genital rubbing	35 (8.5)	375(91.5)	34(99.9)	1(0.1)
Unwanted sexual comments	127(31.0)	283(69.0)	125(98.4)	2(1.6)
Unwanted kissing	66(16.1)	344(83.8)	64(97.0)	2(3.0)
Voyeurism	17(4.1)	393(95.9)	16(94.1)	1(5.9)
Exhibitionism	32(7.8)	378(92.2)	32(100.0)	-
Pornography	56(13.7)	354(86.3)	53(94.6)	3(5.4)
Attempted rape	53(12.9)	357(87.1)	51(96.2)	2(3.8)
Rape	27(6.6)	383(93.4)	22(81.5)	5(18.5)
Experience of at least a form of sexual abuse	283(69.0)	127(31.0)	280(68.3)	130(31.7)

Note: % is in bracket

Table 4.4b compares ever experience of one form of sexual abuse with demographic characteristics of respondents. Two hundred and eighty three (69.0%) ever reported an experience of at least one form of sexual abuse. There was a significant relationship between the experience of sexual abuse and the age of the respondents ($P < 0.001$). Similarly, those who have relationship with the opposite sex (boyfriend, $p < 0.001$) and who discuss sexuality issues with caregivers and friends (acquaintances) significantly reported experience of sexual abuse ($p < 0.002$).

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Table 4.4b Reported prevalence of ever experience of a form of sexual abuse by socio-demographic variables (N=410)

Variables	Ever experienced a form of sexual abuse			X ²	P value
	Yes	No	Total		
Market					
Araromi	116(78.4)	32(21.6)	148(100.0)	25.682	0.001
Oje	115(71.4)	46(28.6)	161(100.0)		
Oranyan	47(56.0)	37(44.0)	84(100.0)		
Orita Aperin	5(29.4)	12(70.6)	17(100.0)		
Religion					
Christians	104(71.7)	41(28.3)	145(100.0)	0.765	0.382
Non-Christians	179(67.5)	86(32.5)	265(100.0)		
Age (Years)					
10-13	72(51.1)	69(48.9)	141(100.0)	32.424	0.001
14-17	211(78.4)	58(21.6)	269(100.0)		
Ever had sex					
Yes	78(89.7)	9(10.3)	87(100.0)	21.984	0.001
No	205(63.5)	118(36.5)	323(100.0)		
Discuss sexuality matters					
Yes	210(74.7)	71(25.3)	281(100.0)	13.613	0.001
No	73(56.6)	56(43.4)	129(100.0)		
Sexuality is discussed with (n=281)					
Caregivers	104(67.5)	50(32.5)	154(100.0)	9.356	0.002
Acquaintances/friends	106(83.5)	21(16.5)	127(100.0)		
Educational level					
Currently In school	263(68.0)	124(32.0)	387(100.0)	3.665	0.056
Out of school	20(87.0)	3(13.0)	23(100.0)		
Parents living status					
Live together	180(65.5)	95(34.5)	275(100.0)	4.978	0.026
Separated	103(76.3)	32(23.7)	135(100.0)		
Ever have boyfriend					
Yes	169(85.4)	29(14.6)	198(100.0)	47.755	0.001
No	114(53.8)	98(46.2)	212(100.0)		

Two hundred and eighty (68.3%) respondents reported an experience of a form of sexual abuse in the last three months preceding the study. From table 4.4c, it can be seen that there was no significant relationship between religion and knowledge of respondents with their experience of a form of sexual abuse in the last three months preceding the study. However, those who ever have boyfriend, discuss sexuality matters, have ever had sexual intercourse and age of group of 14-17 years reported an experience of a form of sexual abuse ($p < 0.001$).

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Table 4.4c Experience of a form of sexual abuse in the three months preceding the study by selected socio-demographic variables (N = 410)

Variables	Experience of sexual abuse 3 months preceding the study			X ²	P value
	Yes	No	Total		
Religion					
Christians	103(71.0)	42(29.0)	145(100.0)	0.779	0.377
Non-Christians	177(66.8)	88(33.2)	265(100.0)		
Age (Years)					
10-13	71(50.4)	70(49.6)	141(100.0)	31.935	0.001
14-17	209(77.7)	60(22.3)	269(100.0)		
Discuss sexuality matters					
Yes	209(74.4)	72(25.6)	281(100.0)	15.269	0.001
No	71(55.0)	58(45.0)	129(100.0)		
Sexuality is discussed with (n=281)					
Caregivers	104(67.5)	50(32.5)	154(100.0)	8.377	0.004
Acquaintances	105(82.7)	22(17.3)	127(100.0)		
Ever had boyfriend					
Yes	167(84.3)	31(15.7)	198(100.0)	45.559	0.001
No	113(53.3)	99(46.7)	212(100.0)		
Parents living status					
Live together	179(65.1)	96(34.9)	275(100.0)	3.954	0.047
Separated	101(74.8)	34(25.2)	135(100.0)		
Educational level					
Currently In school	260(67.2)	127(32.8)	387(100.0)	3.920	0.048
Out of school	20(87.0)	3(13.0)	23(100.0)		
Provision of needs					
Friends	13(92.0)	1(7.1)	14(100.0)	6.532	0.038
Family members	210(65.6)	110(34.4)	320(100.0)		
Employers/self	57(75.0)	19(25.0)	76(100.0)		
Ever had sex					
Yes	77(88.5)	10(11.5)	87(100.0)	20.837	0.001
No	203(62.8)	120(37.2)	323(100.0)		
Type of goods hawked					
Consumables	174(42.4)	73(17.8)	247(60.2)	1.330	0.249
Non-consumables	106(25.9)	57(13.9)	163(39.8)		
Knowledge of sexual abuse					
Poor	116(69.0)	52(31.0)	168(100.0)	0.517	0.772
Moderate	100(66.2)	51(33.8)	151(100.0)		
Good	64(70.3)	27(29.7)	91(100.0)		

Logistic regression analysis

Table 4.5a shows result from the logistic analysis. Those who ever have a boyfriend (OR = 2.8. P = 0.005) are more likely to experience sexual abuse than those who do not have boyfriends. Also, respondents who have ever had sex are more likely (OR = 0.169; P=0.027) to experience sexual abuse.

Table 4.5a Logistic regression of socio-demographic characteristics on ever experience of sexual abuse

Variable	P value	OR	95%CI	
			Upper	Lower
Age group				
10-13	0.134	1.64	0.86	3.14
14-17 (reference)				
Ever had boyfriend				
Yes	0.005	2.817	1.359	5.841
No (reference)				
First sex				
Yes (reference)				
No	0.027	0.169	0.035	0.815
Educational level				
Currently in school	0.726	1.487	0.162	13.671
Out of school (reference)				
Provision of needs				
Self/employer (reference)				
Friends	0.546	0.457	0.036	5.819
Caregivers	0.605	1.247	0.540	2.880
Parents living status				
Living together	0.261	0.65	0.307	1.378
Separated (reference)				
Sexuality is discussed with				
Caregivers (reference)				
Acquaintances	0.392	1.346	0.682	2.657

In the last 3 months preceding the study, results from the logistic analysis revealed that those who ever have boyfriends were significantly 2.5 times (OR = 2.5, P = 0.008) more likely to experience a form of sexual abuse than those who do not have boyfriends. Other variables such as age, first sex and persons who provide their needs were not significant when related with the experience of sexual abuse last 3 months.

Table 4.5b: Logistic regression of socio-demographic characteristics on experience of sexual abuse (last 3 months).

Variable	P value	OR	95%CI	
			Upper	Lower
Age				
10-13	0.094	1.68	0.92	3.09
14-17(reference)				
Ever have a boyfriend				
Yes	0.008	2.446	1.27	4.72
No (reference)				
Ever had sex				
Yes	0.198	0.559	0.231	1.36
No (reference)				
Provision of needs				
Self/employer (reference)				
Friends	0.818	1.305	0.135	12.612
Caregivers	0.641	1.195	0.566	2.520
Sexuality is discussed with				
Caregivers (reference)				
Acquaintance	0.25	1.44	0.773	2.689

Experience of different forms of sexual abuse

Certain socio demographic variables were compared with the different forms of sexual abuse experienced by the respondents during the last three months of the study. A large proportion (98.1%, 98.6%, 94.1%) has experienced a form of contact, non-contact and penetrative abuse in the last 3 months of study. Out of those that had experience of contact abuse last 3 months, 99.4% Of the respondents discussed sexuality matters and this was found significant at $P < 0.05$.

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Table 4.6a: Experience of at least a different form of sexual abuse by socio-demographic variables (last 3 months)

Variables	Contact abuse	Non contact abuse	Penetrative abuse
Name of market			
Araromi	95(99.0)	52(100.0)	24(96.0)
Ojee	87(97.8)	60(96.8)	29(90.6)
Oranyan	37(97.4)	29(100.0)	11(100.0)
Orita Aperin	3(100.0)	2(100.0)	-
Ever had sex			
Yes	67(100.0)	47(100.0)	35(89.7)
No	155(97.5)	96(98.0)	29(100.0)
Age group (Years)			
10-13	51(96.2)	33(100.0)	11(91.7)
14-17	171(98.8)	110(98.2)	53(94.6)
Discuss sexuality matters			
Yes	168(99.4)*	110(98.2)	53(94.6)
No	54(94.7)	33(100.0)	11(91.7)
Sexuality is discussed with**			
Caregivers	76(98.7)	52(98.1)	21(100.0)
Acquaintances	92(100.0)	58(98.3)	32(91.4)
Educational status			
Currently in school	205(98.1)	133(98.5)	55(93.2)
Out of school	17(100.0)	10(100.0)	9(100.0)
Items hawked			
Consumables	197(98.5)	122(98.4)	58(95.1)
Non consumables	25(96.2)	21(100.0)	6(85.7)
Provision of needs			
Self/employer	45(100.0)	31(100.0)	21(91.3)
Friends	10(100.0)	9(100.0)	8(100.0)
Family members	167(97.7)	103(98.1)	35(94.6)
Parents living pattern			
Living together	144(99.3)	88(97.8)	33(94.3)
Separated	78(96.3)	55(100.0)	31(93.9)
Have boyfriend			
Yes	140(99.3)	98(98.0)	51(92.7)
No	82(96.5)	45(100.0)	13(100.0)
Total	222(98.1)	143(98.6)	64(94.1)

Note: * P<0.05; ** Number of respondents (168, 110 and 53 respectively)

Location of occurrence of sexual abuse in the last 3 months

Table 4.7 shows the various locations where experiences of one form of sexual abuse occurred among respondents. Over half of the respondents (76.1%) reported their experience to have taken place across the markets in the Local Government while the least reported location for the occurrence of sexual abuse was at party centres. Other locations where other forms of sexual abuse took place were personal home, neighbourhood, street road, girl friends place, motor park and school.

Table 4.7: Locations of sexual abuse experience in the last 3 months preceding the study

Location of sexual abuse experience last 3 months	Number	%
Market	213	76.1
Respondents personal home	72	25.7
Neighbourhood	34	12.1
School	33	11.8
Perpetrators home	21	7.5
Street road	17	6.1
Friends place	12	4.3
Motor park	2	0.7
Party	2	0.7
No response	2	0.7

Note: Multiple responses included

Different types of sexual abuse across location of occurrence in the last three months

Observations across the various types of sexual abuse shows that unwanted touch had an appreciable percentage of occurrence at markets (81.3%) with voyeurism occurring least in markets. At other other locations of occurrence, there was a predominant experience of pornography (85.5%).

Table 4.8: Other location of occurrence of a type of sexual abuse (3 months)

Types of sexual abuse	Location of occurrence of a type of sexual abuse		Total
	Market	Outside markets	
Unwanted touch	161(81.3)	37(18.7)	198(100.0)
Genital rubbing	16(47.1)	18(52.9)	34(100.0)
Sexual comments	87(69.6)	38(80.4)	125(100.0)
Unwanted hugging	20(31.3)	44(68.7)	64(100.0)
Voyeurism	0(0.0)	16(100.0)	16(100.0)
Exhibitionism	15(46.9)	17(63.1)	32(100.0)
Pornography	13(24.5)	40(85.5)	53(100.0)
Attempted rape	17(33.3)	34(66.7)	51(100.0)
Rape	1(4.5)	21(95.5)	22(100.0)

Note: Multiple response included

Frequency of experience of various forms of sexual abuse

The most reported form of sexual abuse that occurred once is unwanted touch (35.1%) while voyeurism was the least reported form of sexual abuse by 50% of respondents. Rape was least reported by 9.1% while 16.8% was the highest reported form of sexual abuse twice during the last 3 months preceding the study. Certain forms of sexual abuse were not reported to have taken place thrice. However, genital rubbing was the least reported (3.1%) while voyeurism (12.5%) was the most reported form of sexual abuse thrice during the last 3 months of study. Unwanted touch was reported to be occurring many times (36.6%) while exhibitionism was the least occurring many times during the last 3 months preceding the study.

Table 4.9: Frequency of experience of various forms of sexual abuse in the last 3 months

Abuse/duration	Once	Twice	Thrice	At least four times
Unwanted touch	67(35.1)	32(16.8)	22(11.5)	70(36.6)
Genital rubbing	17(53.1)	11(34.4)	1(3.1)	3(9.4)
Unwanted sexual comments	25(20.5)	19(15.6)	7(5.7)	71(58.2)
Unwanted hugging	38(61.3)	9(14.5)	7(11.3)	8(12.9)
Voyeurism	8(50.0)	4(25.0)	2(12.5)	2(12.5)
Exhibitionism	23(71.9)	7(21.9)	0(0.0)	2(6.3)
Pornography	35(68.6)	5(6.1)	3(5.9)	8(15.7)
Attempted rape	46(93.9)	3(6.1)	0(0.0)	0(0.0)
Rape	20(90.9)	2(9.1)	0(0.0)	0(0.0)

Experience of unwanted touch last 3 months

Figure 4.2 shows the part of the body of respondents who experienced unwanted touch. Of the 48.3% respondents that experienced unwanted touch last 3 months, 41.5% reported that they experienced unwanted touch in more than one part of their bodies. Unwanted touch was least reported to occur on the face by 5.5% of the respondents while 23.5% reported unwanted touch of the buttocks in the last 3 months preceding the study.

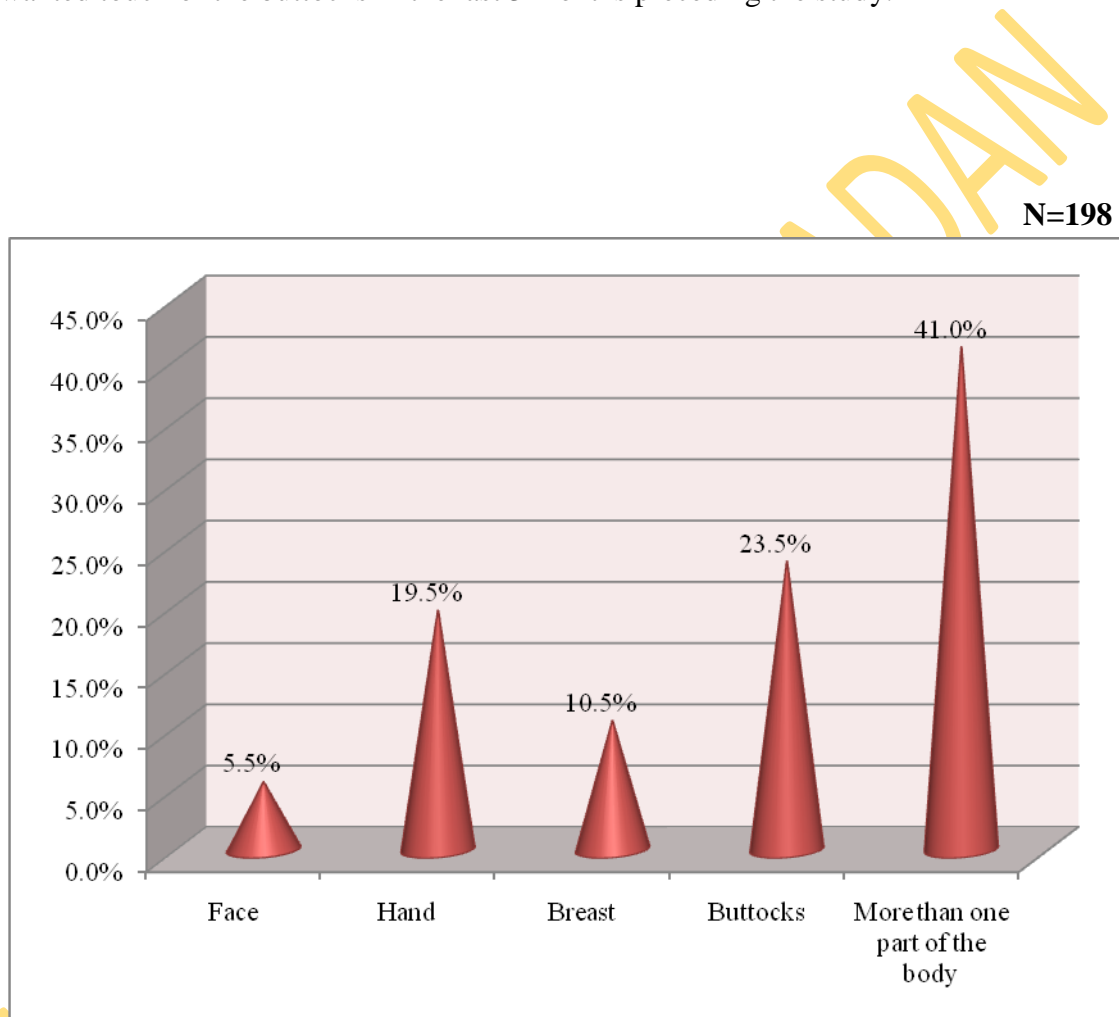


Figure 4.2: Bar chart showing experience of unwanted touch in different parts of the body

Test of hypotheses

The following variables such as age, educational status, parents living arrangement, type of items hawked were compared with the ever experience of sexual abuse of respondents (See table 4.4b for details).

There was a significant relationship between the experience of sexual abuse and the age of the respondents ($p < 0.001$). The null hypothesis is therefore rejected. Concerning their educational status, there was a significant relationship between the experience of sexual abuse and the educational status of the respondents ($p < 0.05$). Therefore, the null hypothesis is rejected. Also, there was a significant relationship between the respondents parents living arrangement and the experience of sexual abuse among respondents ($p < 0.05$). Therefore, the null hypothesis is rejected. In addition, there is no significant relationship between items hawked by female hawkers and their experience of sexual abuse. The null hypothesis is not rejected.

Test of hypotheses (last 3 months)

In the last 3 months preceding the study, age, respondents' parents living structure, educational status, items hawked and knowledge of sexual abuse were compared with their experience of sexual abuse (See Table 4.4c for details).

There is a significant relationship between the age of respondents and their experience of sexual abuse in the last 3 months preceding the study at $P < 0.001$. Therefore, the null hypothesis is rejected. Regarding the respondents educational status, there is a significant relationship between the educational status of respondents and their experience of sexual abuse in the last 3 months preceding the study at $P < 0.05$. The null hypothesis is rejected. Also, there is a significant relationship between parents living arrangement and the sexual abuse experiences of respondents last 3 months at $P < 0.05$. The null hypothesis is rejected. However, there is no significant relationship between the types of goods hawked by the hawkers and their experience of sexual abuse at $P > 0.05$. The null hypothesis is not rejected. On the knowledge of the respondents on the various forms of sexual abuse, there is no significant relationship between their knowledge and experience of sexual abuse. The null hypothesis is not rejected.

Context of sexual abuse

Attempt to rape

Table 4.10 shows the context in which an attempt to rape occurred among the victims. Fifty nine percent of the attempts to rape occurred in the evening and was greatest (80.4%) among respondents who are 11 years of age (mean age 14.72 ± 1.65). A greater proportion of the respondents (45.1%) explained that they were locked in a corner as a mode adopted by the perpetrator in an attempt to rape them while the least reported mode of attempt to rape was drugging with psychoactive substance (7.8%). The context of the experience of sexual abuse occurred majorly due to the trust (37.3%) the respondents had bequeathed on the perpetrators which was seen in activities performed by the respondents such as running errands and selling wares for perpetrators and sleeping around the vicinity of perpetrators. The respondents said this attempt to rape took place because they were found in an unsecured situation (42.1%) such as hawking or sleeping within the vicinity of perpetrators as they were alone by themselves.

Table 4.10: Context of Attempted rape

Variable	Number (N=51)	%
Time of occurrence		
Evening	30	59.0
Afternoon	11	21.6
Morning	5	9.8
Night	3	5.9
No response	2	3.9
Age of occurrence (Years)		
12-14	22	43.1
15-17	28	54.9
No response	1	2.0
Mode of occurrence		
Deceived by locking in a corner	23	45.1
Put on his laps	10	19.6
Pulled off or down clothes	10	19.6
Drugged with psychoactive substance	4	7.9
Double crossed by a gang of boys	3	5.8
No response	1	2.0
Context of occurrence		
Victim had so much trust for perpetrator	19	37.3
Victim was under unsecured situation	18	35.3
Victim undertook personal risky attempts	10	19.6
No response	4	7.8
Reason for occurrence of abuse		
Because she was hawking alone	22	42.1
Perpetrator had greater influence over victim	14	37.4
Parental neglect	6	11.8
Victim had no idea about perpetrators intention	6	11.8
No response	3	5.9

Relationship between socio-demographic variables and ever experience of attempted rape

Table 4.11 shows the relationship between certain socio-demographic variables and ever occurrence of attempted rape. There was no significant relationship between items hawked by respondents, their educational status and persons they discuss sexuality matters with their ever experience of rape. Moreover, there was a significant relationship between their age, who provides their daily needs, their discussion of sexuality matters, having a boyfriend at $p < 0.001$

Table 4.11: Experience of attempted rape and certain socio-demographic variables (N-410)

Variable	Ever experience of attempted rape			X ²	P value
	Yes	No	Total		
Age (Years)					
10-13	10(7.1)	131(92.9)	141(100.0)	6.500	0.011
14-17	43(16.0)	226(84.0)	269(100.0)		
Ever had boyfriend				18.006	0.001
Yes	13(6.1)	199(93.9)	212(100.0)		
No	40(20.2)	158(79.8)	198(100.0)		
Discuss sexuality matters				4.478	0.034
Yes	43(7.8)	238(92.2)	281(100.0)		
No	10(15.3)	119(84.7)	129(100.0)		
Sexuality is discussed with (n=281)				0.277	0.599
Caregivers	33(14.7)	191(85.3)	224(100.0)		
Acquaintances	10(15.3)	47(82.5)	57(100.0)		
Educational status				1.183	0.277
Currently in school	48(12.5)	337(87.5)	385(100.0)		
Out of school	5(20.0)	20(80.0)	25(100.0)		
Provision of needs				17.859	0.001
Friends	5(35.7)	9(64.3)	14(100.0)		
Family	30(9.4)	290(90.6)	320(100.0)		
Self/employer	18(23.7)	58(76.3)	76(100.0)		
Items hawked				0.000	0.983
Consumables	32(13.0)	215(87.0)	247(100.0)		
Non-consumables	21(12.9)	142(87.1)	163(100.0)		

Experience of attempted rape and certain socio-demographic variable last 3 months

Table 4.12 shows relationship between certain socio-demographic variables and the experience of attempted rape among respondents in the last 3 months. There is no significant relationship between the variables and experience of attempted rape last 3 months at $p > 0.05$.

Table 4.12: Relationship between experience of attempted rape and certain socio-demographic variables last 3 months (N=51)

Variables	Experience of attempted rape last 3 months			X ²	P value
	Yes	No	Total		
Age (years)					
10-13	9(100.0)	0(0.0)	9(100.0)	0.425	0.514
14-17	42(95.5)	2(4.5)	44(100.0)		
Ever had boyfriend					
Yes	13(100.0)	0(0.0)	13(100.0)	0.675	0.411
No	38(95.0)	2(5.0)	40(100.0)		
Discuss sexuality matters					
Yes	41(97.6)	1(2.4)	42(100.0)	1.081	0.299
No	10(90.9)	1(9.1)	11(100.0)		
Sexuality is discussed with (n=42)					
Caregiver	31(96.9)	1(3.1)	31(100.0)	0.320	0.572
Acquaintance	10(100.0)	1(4.5)	22(100.0)		
Parents living status					
Live together	30(96.8)	1(3.2)	31(100.0)	0.062	0.804
Separated	21(95.5)	1(4.5)	22(100.0)		
Educational status					
Currently in school	46(95.8)	2(4.2)	48(100.0)	0.217	0.642
Out of school	5(100.0)	0(0.0)	5(100.0)		
Provision of needs					
Friends	5(100.0)	0(0.0)	5(100.0)	1.593	0.451
Family	28(93.3)	2(6.7)	30(100.0)		
Employers/self	18(100.0)	0(0.0)	18(100.0)		
Items hawked					
Consumables	31(96.9)	1(3.1)	32(100.0)	0.094	0.760
Non-consumables	20(95.2)	1(4.8)	21(100.0)		

Rape

Table 4.13 shows the context of the occurrence of rape among victims. Of the respondents who experienced rape, 40.9% of the respondents explained that their experience of rape occurred majorly in the evening among those aged 14-17 years of age (86.4%) at a mean age of 15.24±1.70. Also, Majority of the respondents (90.8%) said their experience of sexual abuse occurred forcefully due to parental neglect (54.5%) under unsecured situation such as being forced to sleep away from home as a result of being chased out of their homes by their caregivers (50.0%).

Table 4.13: Context of rape

Variable	Number (N=22)	%
Time of occurrence		
Evening	9	40.9
Morning	3	13.6
Afternoon	7	31.8
Night	1	4.5
No response	2	9.2
Age of occurrence (Years)		
14-17	19	86.4
10-13	3	13.6
Location of occurrence		
Perpetrators home/home/neighborhood	17	77.3
Market/school/party	4	18.2
No response	1	4.5
Mode of occurrence		
Forcefully	20	90.8
Continuous verbal insistence	1	4.6
With the aid of drugs	1	4.6
Context of occurrence		
Due to lack of parental care	12	54.5
Personal risky involvement (being alone with perpetrator)	5	22.7
Under unsecured situation	3	13.6
No response	2	9.2
Reason for occurrence		
Under unsecured conditions	11	50.0
Parental neglect	9	40.9
No response	2	9.1

Profile of rape victims

More than half (85.2%) of FAHs with experience of rape are 14-17 years of age, have boyfriends (88.9%) and are in school (74.1%). About 63.0% have their parents separated. Of those they discuss sexuality matters with, friends/acquaintance (75.0%) were persons they discuss sexuality with. This is shown in table 4.14a below.

Table 4.14a: Profile of victims of rape

Variables	Frequency N=27	Percentage
Age (Years)		
10-13	4	14.8
14-17	23	85.2
Religion		
Christians	15	55.6
Non-Christians	12	44.4
Discuss sexuality		
Yes	24	88.9
No	3	11.1
Sexuality is discussed with (n=24)		
Caregivers	6	25.0
Friends/acquaintance	18	75.0
Educational status		
Currently in school	20	74.1
Out of school	7	25.9
Parents living status		
Living together	10	37.0
Separated	17	63.0
Have boyfriends		
Yes	24	88.9
No	3	11.1
Items hawked		
Consumables	22	81.5
Non-consumables	5	18.5
Provision of needs		
Self/employer	9	33.3
Friends	6	22.2
Family	12	44.4
Substance consumed		
Alcoholic beverage	12	44.4
None	14	51.9
Alcohol plus cigarette	1	3.7
Substance taken last 3 months		
Alcoholic beverage	12	92.3
Alcohol plus cigarette	1	7.7
Not applicable	14	

Ever experience of rape and selected socio-demographics

Certain socio-demographic variables were cross-tabulated with the ever experience of rape to ascertain their relationship. There was no significant relationship with items hawked and ever experience of rape among respondents. Although, there was a significant relationship for all other variables and the respondents ever experience of sexual abuse at $p < 0.001$ as shown in Table 4.14.

Table 4.14b: Relationship between socio-demographics and ever experience of rape

Variable	Ever experienced rape (N=410)			X ²	P value
	Yes	No	Total		
Educational status					
Currently in school	21(5.4)	366(94.6)	387(100.0)	15.064	0.001
Out of school	6(26.1)	17(73.9)	23(100.0)		
Parents living status					
Live together	9(3.3)	268(96.7)	277(100.0)	14.898	0.001
Separated	18(13.3)	115(86.7)	133(100.0)		
Discuss sexuality matters					
Yes	24(8.5)	257(91.5)	281(100.0)	5.552	0.018
No	3(2.3)	126(97.7)	129(100.0)		
Sexuality is discussed with (n=281)					
Caregivers	5(3.2)	149(96.8)	154(100.0)	12.226	0.001
Acquaintance	19(15.0)	108(85.0)	212(100.0)		
Ever had boyfriend					
Yes	25(12.6)	173(87.4)	198(100.0)	22.715	0.001
No	2(0.9)	210(99.1)	212(100.0)		
Provision of needs					
Friends	6(42.9)	8(57.1)	14(100.0)	35.171	0.001
Family	13(4.1)	307(95.9)	320(100.0)		
Employers/self	8(10.5)	8(89.5)	76(100.0)		
Items hawked					
Consumables	23(6.5)	330(93.5)	353(100.0)	0.020	0.887
Non consumables	4(7.0)	53(93.0)	57(100.0)		
Age					
10-13	4(2.8)	137(97.2)	141(100.0)	4.909	0.027
14-17	23(8.6)	246(91.4)	269(100.0)		

Experience of rape and certain socio demographic variables in the last 3 months

Exploration of the experience of rape and certain socio-demographics shows that there is no significant relationship between these variables at $p>0.05$. In addition, there was no significant relationship between having a boy friend and the type of goods hawked by the respondents with their experience of rape last 3 months as shown in Table 4.15

Table 4.15: Relationship between socio-demographic variable and experience of rape last 3 months.

Variables	Experience of rape last 3 months (N=27)			X ²	P value
	Yes	No	Total		
Educational level					
Currently in school	16(76.2)	5(23.8)	21(100.0)	1.753	0.185
Out of school	6(100.0)	0(0.0)	6(100.0)		
Provision of needs					
Friends	6(75.0)	2(25.0)	8(100.0)	1.765	0.414
Family	10(76.9)	3(23.1)	13(100.0)		
Employers/self	6(100.0)	0(0.0)	6(100.0)		
Parents living status					
Live together	6(66.7)	3(33.3)	9(100.0)	1.964	0.161
Separated	16(88.9)	2(11.1)	18(100.0)		
Discuss sexuality matters					
Yes	20(83.3)	4(16.7)	24(100.0)	0.491	0.484
No	2(66.7)	1(33.3)	3(100.0)		
Sexuality is discussed with (n-24)					
Caregivers	5(100.0)	0(0.0)	5(100.0)	1.263	0.261
Acquaintance	15(78.9)	4(21.1)	19(100.0)		
Ever had boyfriend					
Yes	21(84.0)	4(16.0)	25(100.0)	1.419	0.234
No	1(50.0)	1(50.0)	2(100.0)		
Items hawked					
Consumables	19(82.6)	4(17.4)	23(100.0)	0.131	0.718
Non consumable	3(75.0)	1(25.0)	4(100.0)		
Age (years)					
10-13	3(75.0)	1(25.0)	4(100.0)	0.131	0.718
14-17	19(82.6)	4(17.4)	23(100.0)		

Perpetrators of sexual abuse

The different bar charts below shows the perpetrators of the various forms of sexual abuse among the respondents. Findings from figure 4.3 below show that 66.7% of male customers, peers and traders were major perpetrators of unwanted touch among female adolescent hawkers while family relatives were least perpetrators (3.0%).

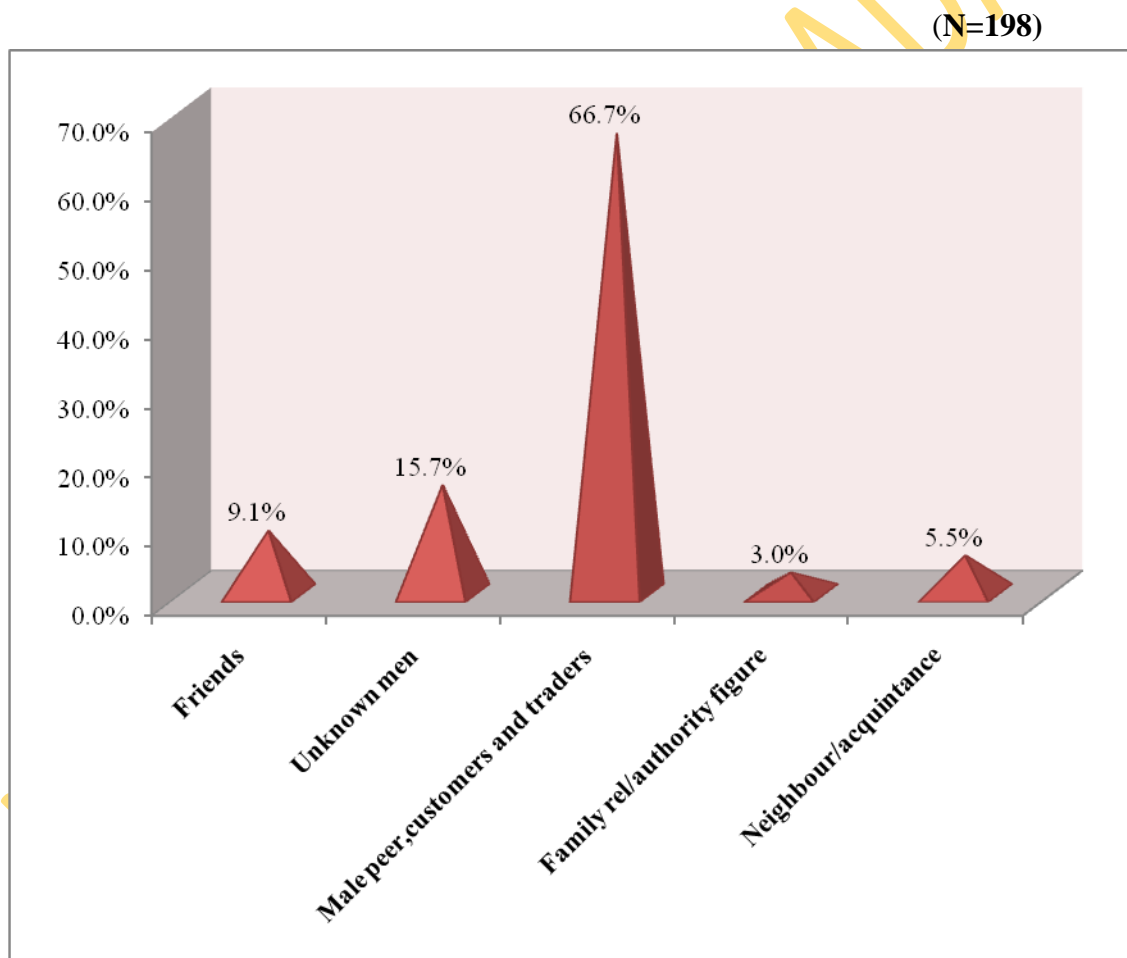


Figure 4.3: The perpetrators of unwanted touch

Figure 4.4 shows the perpetrators of genital rubbing. About 35.3% of unknown men were perpetrators of genital rubbing while authority figures (2.9%) were the least perpetrators of genital rubbing.

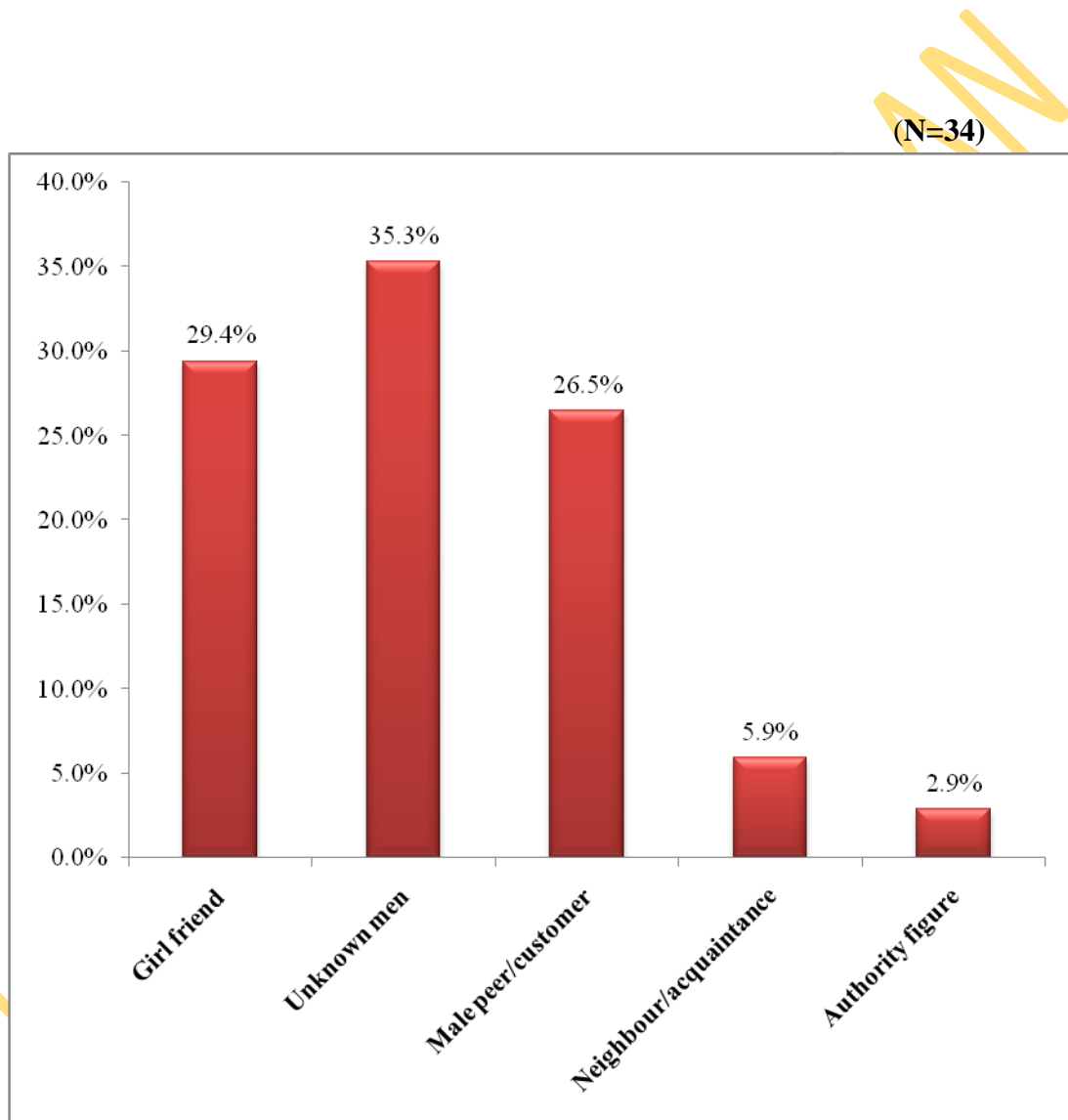


Figure 4.4: The perpetrators of genital rubbing

Observation from figure 4.5 below shows that perpetrators of unwanted sexual comments were predominantly (67.2%) male traders, male customers and male peers of female adolescent hawkers. Others were unknown men (10.0%) with least perpetrators being family relatives (6.6%).

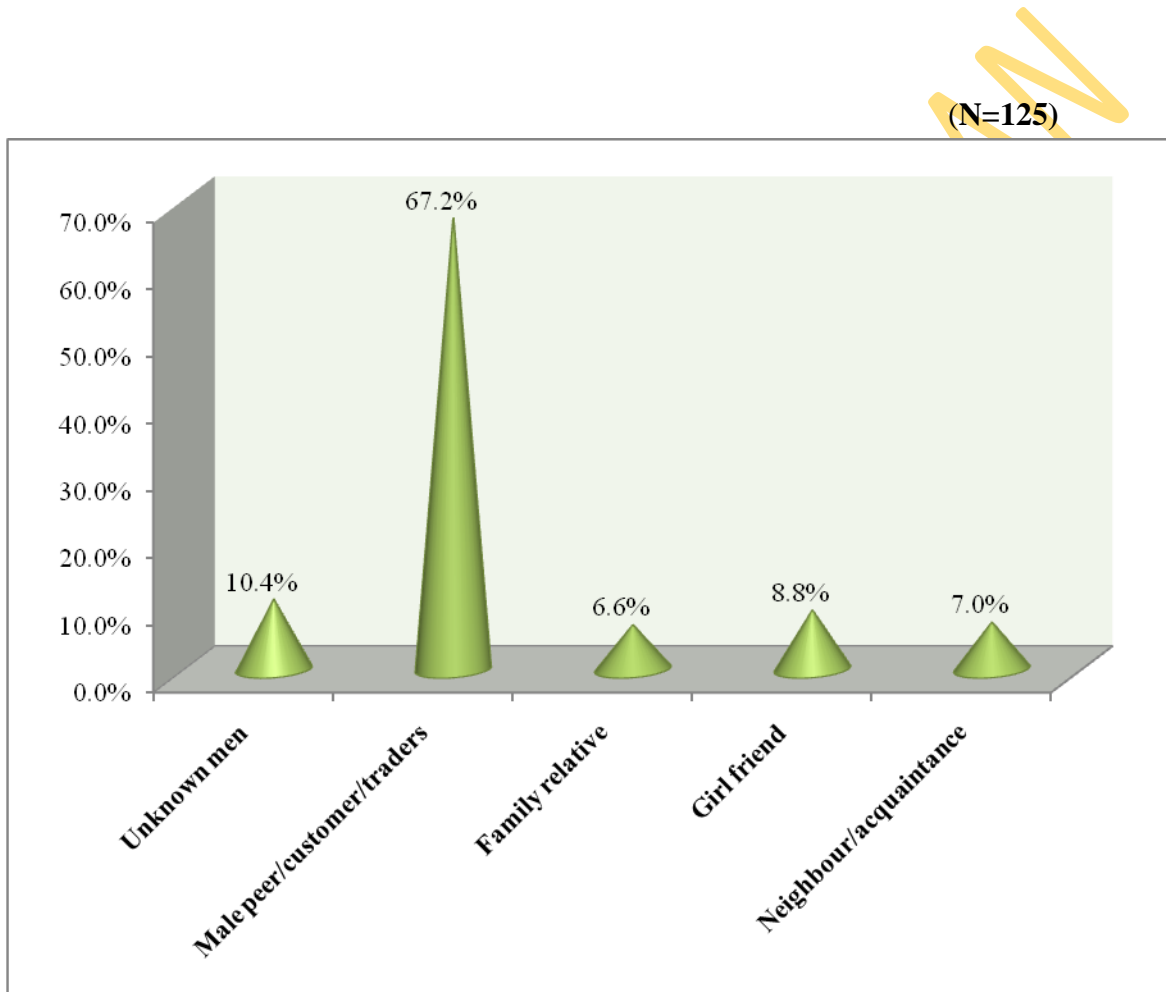


Figure 4.5: The perpetrators of Unwanted sexual comments

Figure 4.6 below shows the perpetrators of unwanted hugging. About 43.8% of boyfriends of the female hawkers; 31.3% of male traders, customers and male peers and 14.1% of neighbour/acquaintance were perpetrators of unwanted hugging. The least perpetrators were family relatives (4.7%).

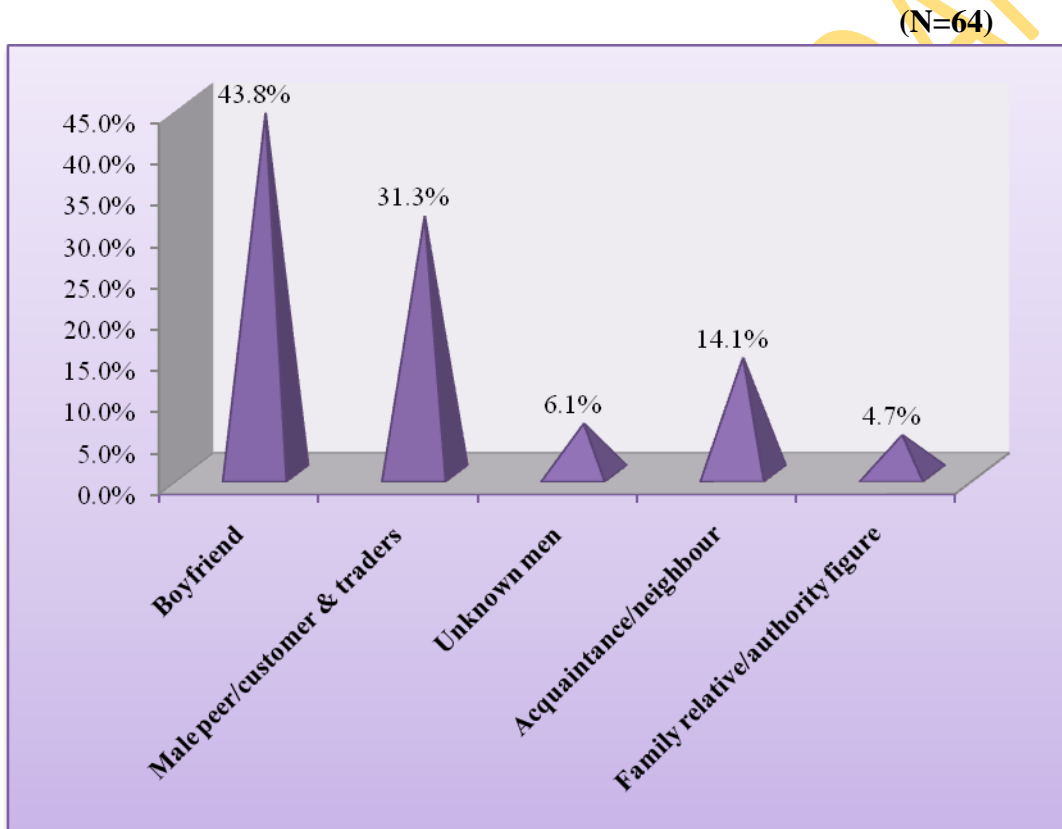


Figure 4.6: The perpetrators of Unwanted hugging

Figure 4.7 shows the perpetrators of voyeurism among female adolescent hawkers. About 43.8% of perpetrators of voyeurism were neighbours, girl friends (25.0%) and male peer 12.5%.

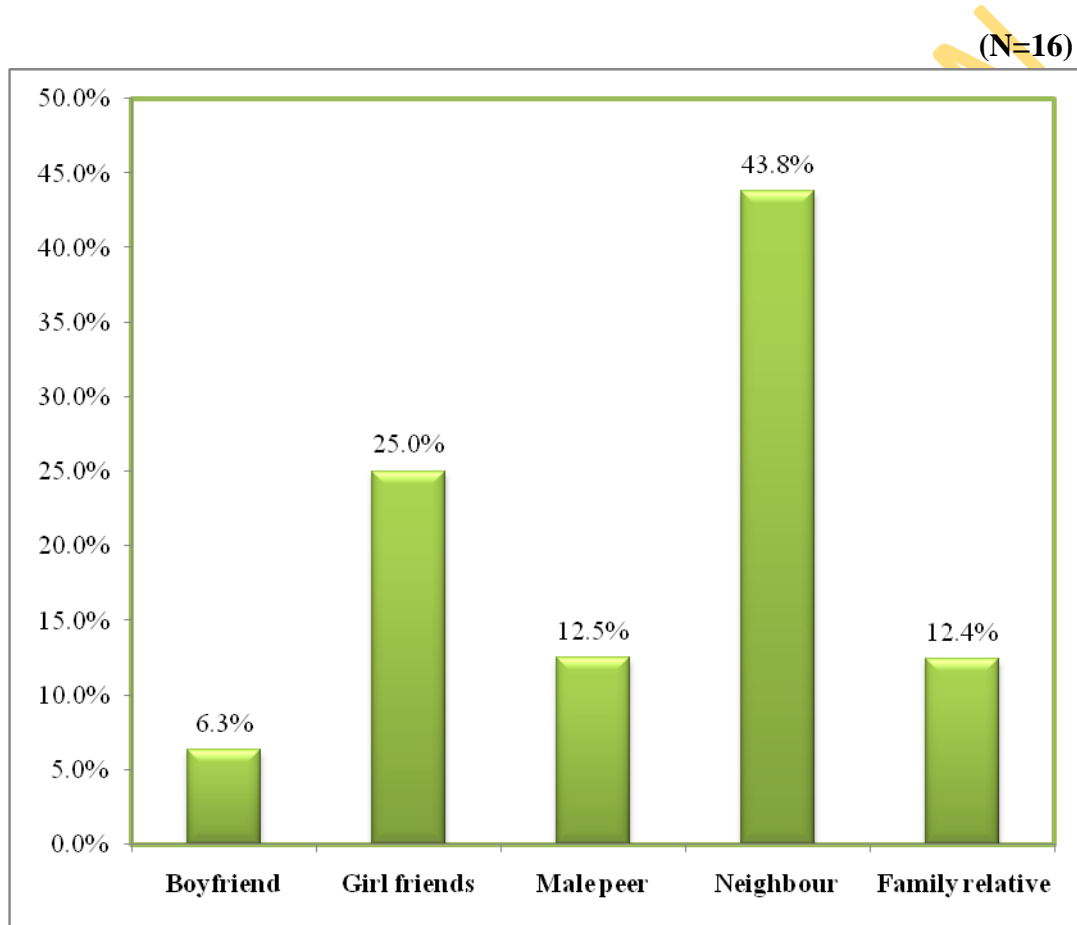


Figure 4.7: The perpetrators of voyeurism

Over half of respondents (62.5%) indicated that perpetrators of exhibitionism were unknown men with least perpetrators being neighbours (3.1%). This is shown in figure 4.8 below.

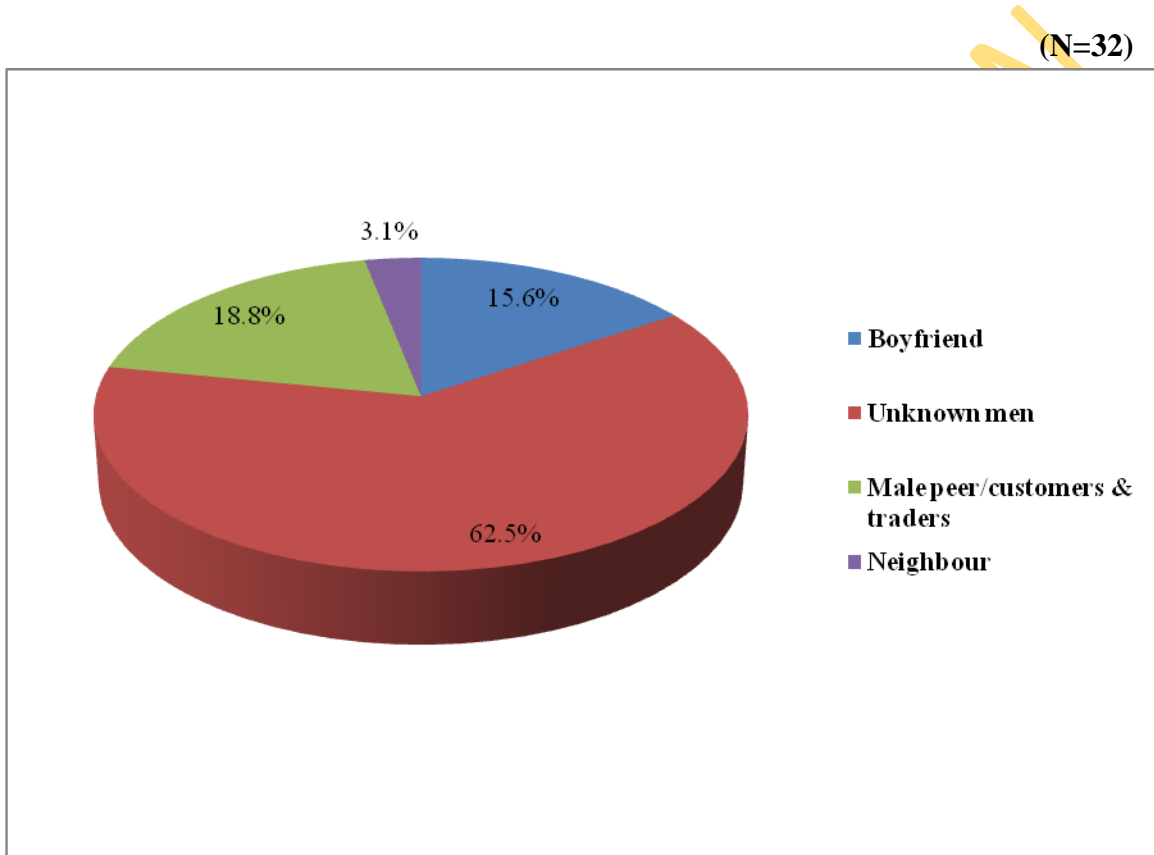


Figure 4.8: The perpetrators of exhibitionism

The perpetrators of pornography among female adolescent hawkers is shown in figure 4.9 below. About 28.3% of male such as traders, customers and unknown men; neighbours (26.4%) and girl friends (13.3%) were perpetrators of pornography.

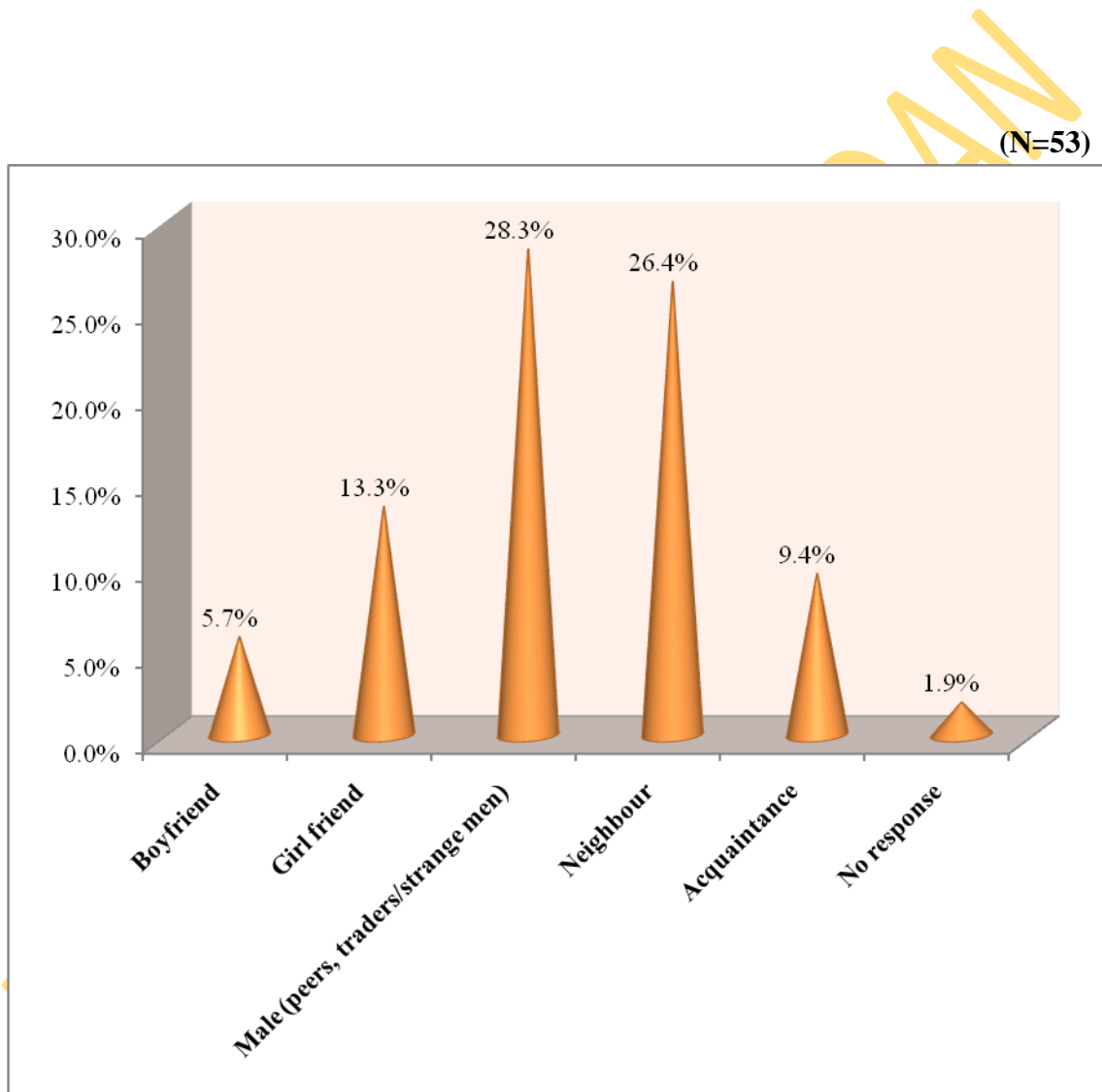


Figure 4.9: The perpetrators of pornography

Perpetrators of attempted rape is shown in figure 4.10 below. About 49.0% of males such traders, customers and peers; neighbour and boyfreinds (15.7%) respectively were perpetrators of attempted rape among female adolescent hawkers.

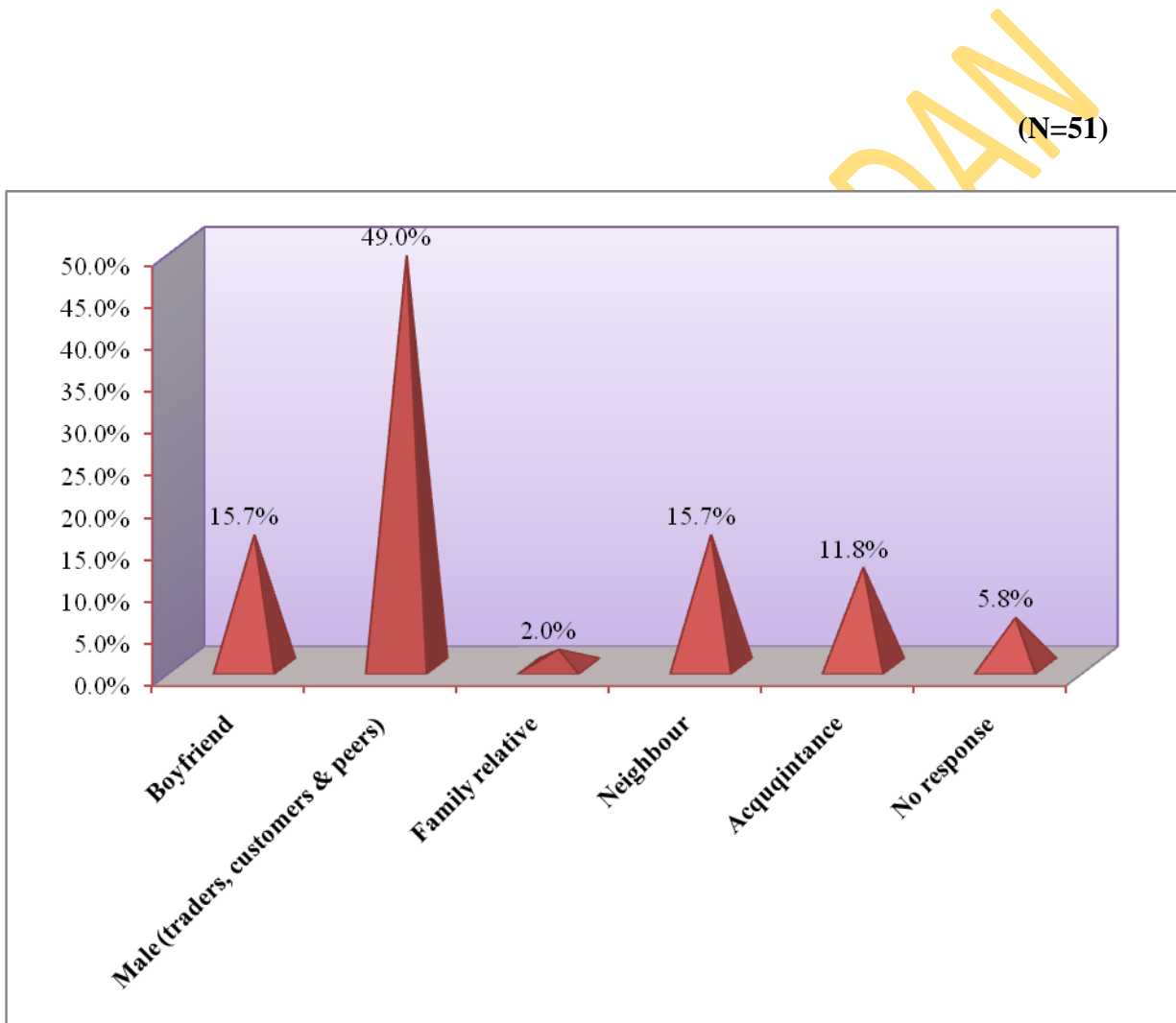


Figure 4.10: The perpetrators of attempted rape

Figure 4.11 shows the perpetrators of rape among female adolescent hawkers. Over half of the respondents who have an experience of rape (77.3%) identified their boyfriends as perpetrators of rape followed by acquaintance (9.2%).

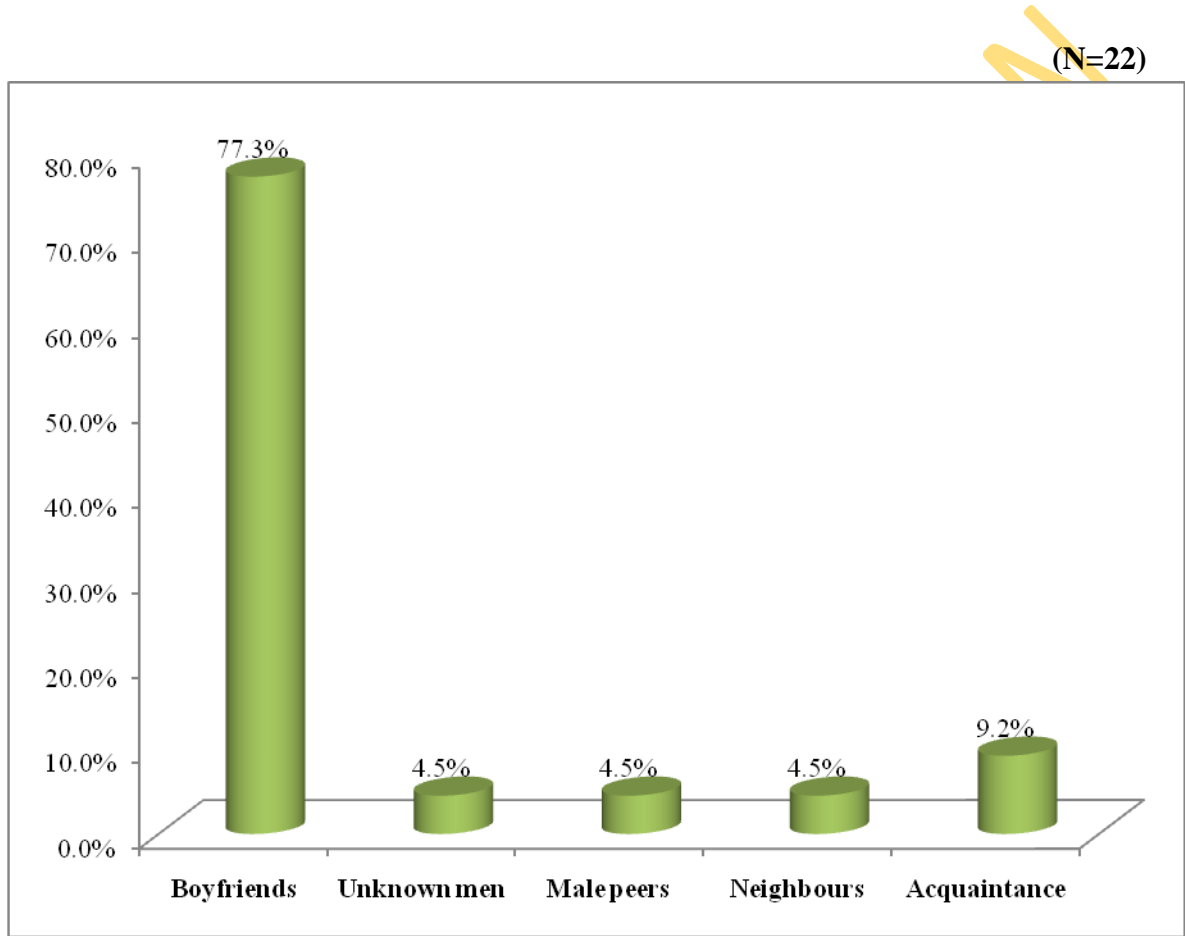


Figure 4.11: The perpetrators of rape

Perpetrators of one form of sexual abuse and location of occurrence

Respondents who have experienced one form of sexual abuse last 3 months highlighted different perpetrators of the abuse. Out of those that had experienced one form of sexual abuse last 3 months, male customers (98.6%) were reported to be the highest perpetrators across the selected markets. At other locations outside the markets, family relatives were reported to be the perpetrators of a form of sexual abuse.

Table 4.16: Perpetrators of one form of sexual abuse last 3 months preceding the study

Perpetrators of sexual abuse	Markets	Outside markets	Total
Male customers	72(98.6)	1(1.4)	73(100.0)
Male traders	54(98.2)	1(1.8)	55(100.0)
Strange men	56(86.2)	9(13.8)	65(100.0)
Girl friend	19(79.2)	5(20.8)	24(100.0)
Male peer	43(69.4)	19(30.6)	62(100.0)
Boyfriend	37(68.5)	17(31.5)	54(100.0)
Acquaintance	12(70.6)	5(29.4)	17(100.0)
Neighbour	28(62.2)	17(37.8)	17(100.0)
Family relative	13(59.1)	9(40.9)	22(100.0)

Note: Multiple response included

Help seeking behavior of female hawkers on sexual abuse experiences (last 3 months)

Table 4. 17 shows the various help seeking steps of respondents that experienced a form of sexual abuse. Out of the 68.3% that experienced a form of sexual abuse last 3 months, only 32.5% disclosed their experiences while 67.5% did not disclose their experiences.

Out of those with at least a form of sexual abuse in the last 3 months, 7.7% of respondents with experience of exhibitionism were the least to disclose while a large proportion (74.7%) with an experience of unwanted touch disclosed their experience of sexual abuse.

Table 4.17: Table showing help seeking behavior of victims with experience of sexual abuse

Help seeking behavior	Frequency	Percentage of victims that disclosed
Disclosure*		
Yes	91	32.5
No	189	67.5
Respondents with at least a form of sexual abuse **		
Unwanted touch	198	74.7
Genital rubbing	34	12.1
Unwanted sexual comments	125	33.0
Unwanted hugging	64	22.0
Voyeurism	16	8.8
Exhibition	32	7.7
Pornography	53	19.8
Attempted rape	51	28.6
Rape	22	13.2

Note: * Total number of respondents (N=280)

**Includes multiple response

Persons to whom victims of one form of sexual abuse disclosed to

Out of those who disclosed to their family members, those with unwanted touch had the highest disclosure to parents (71.0%) while those with an experience of voyerism had the least disclosure (8.1%). Among those who disclosed to non-family members, majority (86.7%) who experienced unwanted touch and those with experience of voyerism (10.0%) disclosed their experience. A look at those who experienced rape, 50.0% of the respondents made a visit to the hospital and bought drugs from a drugstore respectively.

Table 4.18: Disclosure of experiences of sexual abuse of victims (last 3 months)

Forms of sexual abuse	Disclosure to family	Disclosure to non-family	Disclosure to authority figure	Disclosure to health worker	Type of care received	
					Visited hospital	Bought drugs by self
Unwanted touch	44(71.0)	26(86.7)	3(60.0)	0(0.0)	0(0.0)	0(0.0)
Genital rubbing	6(9.7)	4(13.3)	0(0.0)	0(0.0)	0(0.0)	0(0.0)
Unwanted sexual comments	19(30.6)	10(33.3)	1(20.0)	0(0.0)	0(0.0)	0(0.0)
Unwanted hugging	11(17.7)	7(23.3)	2(40.0)	0(0.0)	0(0.0)	0(0.0)
Voyerism	5(8.1)	3(10.0)	0(0.0)	0(0.0)	0(0.0)	0(0.0)
Exhibitionism	6(9.7)	0(0.0)	0(0.0)	0(0.0)	0(0.0)	0(0.0)
Pornography	14(22.6)	4(13.3)	0(0.0)	0(0.0)	0(0.0)	0(0.0)
Attempted rape	19(30.6)	10(33.3)	0(0.0)	0(0.0)	0(0.0)	0(0.0)
Rape	6(9.7)	4(13.3)	1(20.0)	11(91.7)	6(50.0)	6(50.0)

Note: Multiple response included with % in bracket

Reasons for and reactions to disclosure of sexual abuse

Table 4.19 shows that 54.9% of the respondents who reported their experience of sexual abuse said that their caregivers adopted physical protective strategies such as threatening, warning and reporting the perpetrator while 17.6% revealed that their gate keepers adopted a lackadaisical attitude (were not concerned). Enquiry into the motivation for their disclosure, 41.8% of the respondents said that it was very abnormal for them to have such an experience.

Of those who did not seek care with respect to rape, 40.0% articulated it was not necessary to seek care as they believed that their partners would end up marrying them and had been providing for their necessary needs while 20.0% assumed that their partners were on contraceptive.

Table 4.19: Reasons for disclosure and reactions of caregivers

Variables	Frequency	%
Motivation for disclosure (n=91)		
To prevent its re-occurrence	23	25.2
Very abnormal to experience sexual abuse	38	41.8
Trust that she will receive help	28	30.8
No response	2	2.2
Reason for non-disclosure (n=189)		
To avoid inciting problem	31	16.4
It is shameful to articulate	21	11.1
To avoid abuse from caregivers	39	20.6
It is not necessary	71	37.6
Cant remember	27	14.3
Reaction of caregivers (n=91)		
Not concerned	16	17.6
Adopted physical protective strategies	50	54.9
Showed care to victims	25	27.5
Reasons for not obtaining care (n=10)		
It is unnecessary	4	40.0
Trust his partner is on contraceptive	2	20.0
No idea of where to obtain recourse	1	10.0
To avoid mockery	1	10.0
No response	2	20.0

Perceived means of preventing sexual abuse among female hawkers

Table 4.20 shows suggestions of respondents on perceived ways of preventing sexual abuse. On personal steps to be adopted by the female hawkers, adoption of decent behavior by avoiding idle discussion with males (53.4%), use of protective strategies such as shouting or screaming for help (24.4%) and avoidance of hawking in unsecure situations (10.2%) were personal ways suggested by the hawkers towards preventing the re-currence of sexual abuse.

Structural measures suggested by the hawkers that should be implemented by government towards the prevention of sexual abuse female hawkers include the strict improvement and adherence to legal/economic measures (55.4%) and that National Union of Road Transport Workers (NURTW) and Law Enforcement Agents (13.4%) should work together towards educating men and instituting security measures for girls in markets. The family was not left out as 7.5% of the respondents said parents should still intensify their responsibility towards their wards in daily provision and supervision.

In open places such as markets, 43.2% of the respondents said girls should hawk in group, caregivers should live up to their responsibilities by looking to the welfare of their wards (33.9%) were some of the ways that sexual abuse of girls in market can be prevented.

Table 4.20: Respondents perceived means of preventing sexual abuse

Means of preventing sexual abuse	Frequency (410)	%
Personal steps		
Girls should portray decent behavior by avoiding idle discussion with males	219	53.4
Girls should put up protective strategies	100	24.4
Girls should avoid hawking in unsecure situation	42	10.2
Do not know what to do	49	12.0
Civil measures		
Improvement and strict adherence to legal and economic measures	227	55.4
NURTW and LEA should educate men and institute security for children in market	55	13.4
Hawking and sale of pornography in markets should be banned	13	3.2
Don't know what to say	69	16.8
Avoidance of industrial action, free sexuality and public education on implication of sexual abuse should be in place	46	11.2
Family measures		
Parents should ensure adequate provision of needs and supervision for their wards	31	7.5
Don't know what to say	379	92.5
Market places		
Girls should hawk in groups	177	43.2
Caregivers should look to the welfare of their wards	139	33.9
Don't know what should be done	44	10.7
A centre in market where complaints of sexual abuse can be lodged should be put up	37	9.0
Nothing can be done	13	3.2

Findings from In-depth Interview (IDI)

The findings

Summary of data on experience of 7 victims of sexual abuse are shown in Table 4.21. Out of those who experienced a form of sexual abuse, none of the victims who experienced rape disclosed and obtained appropriate care from a health worker. Rather, one of them disclosed to her boyfriend and bought drugs on her own from a patent medicine dealer while the other practiced self medication by taking local herbs sold by Hausa men. This, they reiterated, was due to their avoidance of shame and being blamed for the experience. On the other hand, three victims of attempted rape did not disclose to anyone and said it was not necessary as some persons witnessed and intercepted prior to the time the experience was about to take place. In addition, one of the victims of a non-contact form of sexual abuse (exhibitionism) was courageous to disclose her experience to the chairman of the market where the experience took place. Out of those that disclosed and sought some form of care, it was observed that their disclosure was borne out of the fact that they needed help in order to forestall the future occurrence of sexual abuse and avoid extreme physical consequences respectively.

Enquiry into the reason why the sexual abuse experience took place, two of the victims with experience of rape said it happened because of interpersonal reason (refusal of friendship) and strain in relationship with caregivers respectively. Of those with attempted rape experience, interpersonal reasons such as having trust in this customer as been harmless, being alone with a perpetrator who is a divorcee and intrapersonal reasons such as wearing of suggestive clothing during hawking were reasons for the occurrence of sexual abuse.

On personal steps for avoiding sexual abuse, four of the victims mentioned wearing of decent clothes, screaming for help and restriction in discussing carelessly with men as strategies they will uptake while three of the victims expressed blatant ignorance of what they can do when sexual abuse is imminent. The role of government in preventing sexual abuse as suggested by the respondents was that perpetrators should be warned, arrested, jailed and sentenced to death while education should be made free in order for their parents to have enough money to cater for their children. In open places, victims said they will hawk in

groups, avoid discussion with males and girls should learn to scream for help. In contrast, one of the victims said despite the fact that she knows experience of sexual abuse should be reported, she will not report, especially to market leaders that are males because they are also perpetrators of sexual abuse in markets.

Table 4.21: Summary of data on seven victims of sexual abuse in IBNE LGA

Names*	Age (Years)	Sexual abuse experienced	Sex/relationship with perpetrator	Setting where it occurred	Help seeking behavior
Adesuwa	17	Rape	Male/gang boys	Friends home	No disclosure; took local herbs
Funmi	17	Attempted rape	Male/known customer	Market	Reported to mother
Bukola	16	Attempted rape	Male/acquaintance	Perpetrators home	No disclosure
Betty	16	Exhibitionism	Male/stranger	Market	Reported to market chairman
Faith	15	Attempted rape	Male/married tenant	Her home	No disclosure as mother intercepted
Bose	14	Attempted rape	Male/customer	Market	No disclosure as traders intervened
Deola	14	Rape	Male/senior student in school	Lonely path	Disclosed to boyfriend; She bought drugs

*These are not real names

Context of occurrence of Sexual abuse

The narratives of respondents suggest common themes: first experience of sexual abuse is not an isolated event but in many cases follows series of application of physical force, deception, fighting and intimidation. Second, sexual abuse occurred as a result of being unaccompanied. Third, parental negligence contributed to experience of sexual abuse as highlighted by the respondents. Evidence of each of these themes is presented below.

Sexual abuse follows a series of abusive behaviors

Several girls reported that their experience of sexual abuse was preceded by abusive behaviors including force, fighting, deception and verbal insistence. This is illustrated, for instance, in the story narrated by Deola, a 14 year old girl who was raped by a senior student from her school along a lonely path:

One of the senior students in my school has been proposing to me for me to be his girl friend and I refused totally. He promised to punish me for this refusal. Usually, when school closes I go home in the company of my friends. But on one of these days, I was given punishment to serve by my teacher and I didn't finish on time and it was extended beyond school closing hours. Every student had gone home and I had to go home alone. On my way home, I did not know someone was following me behind. When I got to the footpath that led to my house, someone grabbed me and pushed me into the bush. This was Kunle the senior that said he would punish me for refusing his proposal. I tried to scream but he was fast as he had gagged my mouth with a cloth and did what he wanted to do (raped me).

Another similar occurrence was shared by Funmi, a 17 year old girl who was shocked to discover that her usual customer who she trusted so much and who gives him advice could attempt to rape her.

Mr Bolaji is my usual customer who sells phone accessories along Oranyan market where I carry out my hawking activities. Because I sell banana, he always beckons on me to sell for him that evening because that is when I come

out to sell after school. He used to give me good advice even in the midst of his friends and I had come to trust him as a good man but what I don't like about him is that he used to sell phone that are second hand as he gets them through stealing from peoples bag. Everybody here knows him for that. On that fateful day, as I passed through his shop, he called out to me from his office and said I should sell banana for him. He gave me #1000 and I had no change so I said let me go and look for change. He said I should not worry but I insisted in giving him his change. At that point, he hurriedly stood up and grabbed me and forcefully hugged me and held me close to his chest as I was busty(have big breasts). He held me tight that I was forced to scream so he will let me go. He refused and carried a bottle which he broke and threatened to wound me with it. At that point of release, I mustered courage and picked some of the broken bottle to fight him too. As he noticed that someone's movement towards his shop, he threw the broken bottle away and hit me at my back and was calling me names with sexual undertones as I had carried my wares away. I was highly embarrassed as I did not expect such behavior from Mr Bolaji who used to advice me. I don't know what came over him.

Another similar experience was narrated by Bose, a 14 year old girl who experienced an attempt to rape as she was on her daily routine in the market by a customer who pretended to purchase her wares.

On afternoon, I and my friend were hawking because we sell yams along some part of this market (over there) where there are houses where people live. As we passed by one of the houses that were uncompleted, a man called out on us to sell yams for him. So we followed him as he said his house was over there (uncompleted house). As we approached the house and entered, we realized, that there was no soul in that building so we began to draw away from the man who already was in front of us leading the way. Immediately he noticed that we were about turning away from him, he grabbed my friend as she was closer to him. Our yams had already scattered on the floor as I was screaming for help. This attracted the marketers that were around there who came to our

rescue. The man was arrested and beaten by the angry people and on interrogation into his act, he revealed that there was no intention of buying yams from the girls. That he has always called out on other girls. So he decided to do the same thing because he taugh of whom to use for his ritual practices as he was told to bring the vaginal discharge of a female.”

Loneliness with potential perpetrator

Several narratives suggested that young girls’ experience of sexual abuse was as a result of being alone with the perpetrator. The narrative of Faith, a 15 year old girl who in her own home witnessed an attempt to rape by a married but divorced man who was accommodated by the mother, highlights this:

Day before yesterday, I was in my house watching film with some of my friends who later left leaving I, my sister and Mr Dotun who is a married man but a divorcee in the house. He called on my sister to help him go deliver a message to a friend of his that lives a few meters away from our house which she did as she was told not be long. As he came in he closed the door but it was not locked with the key. At the end of the film, he entered his room and as I was about going to do my home chores, he beckoned on me to help him buy gala as he was hungry. I did as he requested. As I went to his room to give him the snack, he opened the door and dragged me into his room. I can’t recall what else that followed but all I knew was that I was stack naked and on the laps of Mr Dotun. At the point of him throwing me on his bed, there was a throwing open of his door and there was my mother who had returned from her business venture earlier than usual. She screamed and reported the matter to the policemen. On arrival to the house with the policemen, Mr Dotun had fled and his belongings were confiscated by police men.

The narrative of Bukola, a 16 year old girl explains this.

One afternoon, I went to check on my friend Bisi in her house. As I got there, a male opened the door for me and told me that Bisi was inside her room. Instead of him to tell me that she was not around, i moved closer to her room.

I knocked and there was no response so I went back to the male there to confront him that there was nobody in that room. As I entered the sitting room to get out of the house, I found out that the door had been locked by the male who jumped out of his room to grab me but I screamed aloud such that the other neighbours in the compound heard me and came to my rescue.

Parental neglect as antecedent to experience of sexual abuse

Caregivers contributed to the experience of sexual abuse of Adesuwa, a 17 year old girl who was sent out from her home by her guardian and was forced to take shelter in her girl friends home where she was raped by a gang of boys. This theme is highlighted below:

I offended my guardian and she sent me away from the house that evening around 5 pm. In order to sleep and take shelter as it was getting late, i went to my girlfriends place Kemi where I slept off as I was very tired that day. In the middle of the night, I woke up feeling hungry, drowsy and tired. In that state, there was nobody to tell me it was that late so I went to buy something to eat and stepped out of the house. I met a group of boys around her house discussing and chatting around that time and they asked where I was going. I did not reply them and they pushed me into the house and raped me there.

Help seeking behavior of victims of sexual abuse

In-depth interview explored the extent to which victims of the sexual abuse sought help and the type of help sought and to whom the incident was communicated. Findings again suggested trends that are common. First, fears of being stigmatized or blamed restricted the victims from sharing their experience. Two of the girls put it:

I did not tell anyone because I don't want anyone to blame me.

I don't want to tell anybody as I don't know who to because they might blame me for going to her house which I did out of my innocence

Second, there were instances were some of the victims did not disclose as a result of interception and witness of the experience by a close relation as in the case of Adesuwa and Faith. This is highlighted below:

I did not disclose to any one because I felt that the people had fought for us and the women that were on their way home now accompanied us home.

At the point of him throwing me on his bed, there was a throwing open of his door and there was my mother who had returned from her business venture earlier than usual.

Third, disclosure of the experience of sexual abuse was founded by a need to obtain help in form of advice. The help they sought range from screaming for help and reporting of perpetrators to authorities. Evidence to these claims are shown below:

I reported this event to my boyfriend who was angry and left after the disclosure. I had confidence that he will help me by keeping the experience secret and show me the way out.

I also told my mother this is because I tell her anything that happens and in this case, I want her to tell me what to do next time. I felt what that man was doing to us was not good so I reported him

On returning home, I told my mother, who advised me never to enter a person's shop to sell for them and that once it is getting dark that I should stop selling and not go further the market to sell again

"... i went to the chairman's office and reported to him. As he was coming with me, he mobilized some men who gathered and beat the man and warned him never to come around that area. I felt what that man was doing to us was not good so I reported him. I also told my mother this because I tell her anything that happens and in this case, I want her to tell me what to do next time it happens."

Those who sought help stated that they selected modes and providers they perceived to guarantee confidentiality either from patent drug dealers. Evidence of these claims is stated below:

Afterwards, I took drugs which I got from a drugstore.

“...so I had to take local herbs sold by hausa people to prevent me from being pregnant.”

However, one of the victims expressed her inability to disclose to leaders as a result of her perception that leaders of market have been implicated to be perpetrators of sexual abuse. This is explained below:

I can't report to Iyalojas as they don't know me. Even, I can't disclose to the male leaders because some of them have been noticed to be perpetrators of sexual abuse among females.

Preventive measures for sexual abuse

The narratives highlighted several suggestions that young girls should personally adopt in the face of impending sexual abuse. Some of the girls suggested physical protective strategies for example, will shout at the man and call people around for help; I have decided not to be that careless again; I have decided not to walk carelessly at night times again.

However, three of the victims expressed their incapacity to personally prevent any impending sexual abuse for instance: I don't know what to do or what to say; I don't know what to do to prevent this kind of act from happening. In fact I don't know anything else.

In addition, government was not left out of the prevention of sexual abuse policy. The themes reveal that perpetrators of sexual abuse should be arrested, jailed and put to death. Also, free education was highlighted by the girls. For example, Government should try to punish those who rape girls by jailing them for life, arrest any man that does any of these things as it is not good for girls; punish those who rape girls by death Government should make education free for children whether public or private school so that their parents can have enough money to take care of us without we hawking.

In open places such as markets, victims suggested that the act of group hawking and reporting of perpetrators should be adopted. This is illustrated as

“... girls who hawk should hawk in groups as it helped in our previous sexual abuse experience.”

I will call all those police men around the market so that the man can be beaten thoroughly

Hawkers especially females should be careful to avoid being deceived by these useless boys around the market

Hawkers should be protected

Hawkers should keep themselves by avoiding too much discussion with men and face their hawking business in the market.

UNIVERSITY OF IBADAN

CHAPTER FIVE

DISCUSSION, CONCLUSION AND RECOMMENDATIONS

Socio-demographic characteristics

The age of the respondents shows that mid adolescents aged 14-17 years were predominantly involved in the hawking activity. This reflects a slight difference in studies in other countries where it occurred mainly in prepubescent girls as stated by Fleming et al (1997). The difference can be explained to be that older adolescent girls in Nigeria are seen to be 'matured' enough to withstand the rigors of hawking, and to contribute to the supplementation of family income due to the poor economic of the country. The mean age of the respondents was 14.4 years. This is similar with the study conducted among juvenile hawkers in Anambra State in which the mean age was 13 years as very young and out of school children were involved in the hawking activity (Ikechebelu et al, 2008). This trend reveals that child labour is still on the increase despite the various strategies implemented towards reducing the existence of child labour in Nigeria. A similar pattern was observed in the marital status of respondents who were all single. They were identified with specific religion and tribe which is a marker for a guided upbringing and social identity. A greater proportion of the hawkers are in school which is in contrast to the report by Ikechebelu et al (2008) which stated that half of the respondents were out of school with no formal education. This shows the existence of an increased importance that is being attached to education among South western individuals in Nigeria.

Similarly, observation in the hawkers' parents living pattern shows that majority (57.8%) have their parents living together and (94.4%) hawk after school hours. Explanation to the hawking after school hours could be that caregivers are becoming unable to meet up with the increasing economic demands that come with educating their children. Their premise for hawking showed that they were involved in the supplementation of income of their families so as to help their parents meet basic needs. This explanation was supported by Fawole et al

(2002) and Anarfi et al (1997). A look at the consumption of psychoactive substance by female hawkers shows that 10.0% of the hawkers had ever taken alcoholic substances. This is in line with findings from Ajuwon et al (2001a) which showed that 13% of adolescents reported alcohol consumption. This observation reveals the free circulation and how accessible it is, especially by adolescents, to obtain psychoactive substances despite the existence of Minimum Legal Drinking Age (MLDA) that prohibits adolescents less than 18 years from purchasing and consuming psychoactive substances (International Centre for Alcohol Policies, 2010).

Evidence from the sexual behavior of respondents' shows that 48.2% of the respondents have a boyfriend. This is consistent with the findings reported by Ajuwon et al (2001a) but is in contrast with that reported by Ikechebelu et al (2008) as all the hawkers had no boyfriends. This observation reveals the existence of poor monitoring and unguided upbringing that exists between parents and their children. It also shows the extent to which parents are closely related and how friendly and loving the home environment is that increases the capacity of children to discuss matters that concern them. Similarly, sexual initiation among these adolescents shows that 21.2% have had sex at a mean age of 14.7 years. This is similar to findings by Ajuwon et al (2001b) and simply reveals the existence of early sexual initiation despite efforts to reverse this trend among adolescents.

Knowledge of sexual abuse among hawkers

The most reported form of sexual abuse which is unwanted sexual activity between a man and any female against her wish was reported by 65.1% of the respondents. This is not surprising as rape is well recognized in the minds of people as the only existing form of sexual abuse. It can be inferred that the respondents' knowledge about contact and non-contact forms of sexual abuse has been obscured and may not have been clearly understood. Second, the lack of adequate age-appropriate sex education prevention programs in schools as a result of cultural conservatism and lack of knowledgeable, qualified teachers and appropriate teaching methods may contribute to a lack of awareness of other forms of sexual abuse. This lack of knowledge of other types of sexual abuse, according to Tang and Yan

(2004) may put many young females at increased risk of being sexually abused or even being abused continuously by the same perpetrator.

Observation from the relationship between age and knowledge score of respondents revealed an interesting trend. Although Woolley and Gabriels (1999) showed that adolescents knowledge of sexual abuse increases with age, in this study, those that were within the age range of 14-17 years of age had poor knowledge of what constitute sexual abuse. This is in sharp contrast with findings from a study by Davis and Gidycz (2000). He stated that during a sexual abuse prevention program, younger children appeared to demonstrate greatest gains in knowledge. This difference could be that other developed countries are taking the lead to incorporate the policy of teaching sexuality education to younger children compared to developing countries who perceive the introduction of sexuality education as capable of increasing promiscuity among adolescents. Thus, young adolescents, who in the process of growth, become deficient in the concept of sexual abuse. Another explanation to this trend could be the methodology of information dissemination. Merging both young and older adolescents and using same training methods for both categories of adolescents could result in poor grasp of concept of sexual abuse among older adolescents but may favor the young adolescents.

Experience of sexual abuse

The prevalence of those who have ever experienced at least a form of sexual abuse was 69.0% while 68.3% have experienced at least one form of sexual abuse in the last 3 months preceding the study. This finding is a frightening situation despite the fact that Nigeria is signatory to the UNCRC of 1989 (Part 1 section 34) and Child Right Act of 2003 (Part 1 section 2 sub-section 1) both of which condemns sexual abuse for a child. This situation is also supported by the report of journalist in Nigeria in the past four years on incidence of rape among female children (Akinsanmi, 2008). This finding is comparable to that by Abdulkadir et al (2011) which states that 95.1% of girls between 3-18 years have experienced sexual abuse. The differences in the study methodology, inclusion of younger children and socio-cultural differences could have contributed to the difference between this study and that by Abdulkadir et al (2011). The retrospective review by Abdulkadir et al

(2011) of hospital data could have enabled the researcher to identify cases of sexual abuse that needed medical attention while this study would have identified more of contact and non-contact forms of sexual abuse. These findings reflect a decline in the prevention of sexual abuse among young people despite the existence of legal instruments such as part one section 11 sub-section 1 of Child's Right Act (2003) and part 1 section 34 of UNCRC (1989) that prohibits the exposure of children to experience of sexual abuse that Nigeria is signatory to. Despite the fact that life imprisonment (part 3 section 31 sub-section 2) and fourteen year jail term (part 3 section 32 sub-section 2) have been prescribed by Child Right Act (2003) for perpetrators of rape and other acts typical of sexual abuse, this study still reveals an increasing trend in the incidence of sexual abuse. This increase in incidence could be due to the existence of gender stereotypes, unequal power distribution between the sexes and cultural perception of sexual entitlement conferred to men by society (ARSRC, 2010, Lalor, 2004, Jejeebhoy et al, 2005 and Annie et al, 2009).

Further reason contributing to the rise in incidence of sexual abuse among female hawkers could be seen from the unequal economic and financial status of most families (Celik & Baybuga, 2009). With over half of Nigerian (64%) living in less than US\$1.25 daily according to Population Reference Bureau (2009), most homes are forced to engage in extra income earning activities in order to supplement the income of their families (Tinuola, 2011; UNICEF, 2006). Everybody including the girl child is involved in this income generating activities. In the process of hawking, men employ various procedures including deception to sexually abuse female hawkers. This they do by luring female hawkers and promising to buy up their wares and giving them money in addition. Most of these girls may be shown pornographic pictures and videos. Since these girls are pressure-driven through poverty to sell wares and to submit complete proceeds of their wares to their caregivers, their caregivers are happy to receive money which is vital to the family's sustenance without enquiry about the means of such financial returns.

About 78.4% and 71.4% of respondents found at Araromi and Ojee markets have experienced at least a form of sexual abuse, according to findings from this study. Observation in the design and structure of these markets reveals the existence of inter and intra

city transport commuters, who and which have been proven to increase the vulnerability of female hawkers (Ajuwon et al., 2001b; Fawole et al., 2002; Okoro & Osawemen, 2005; Orubuloye et al., 1993). Due to the proximity of motor parks (bus and truck stations) within and around these markets, experience of sexual abuse is inevitable as it is composed of populations that are seen travelling, buying and selling. Part of the population in these markets is men with violent or questionable character (Okoro & Osawemen, 2005). With their possession of disposable income and may be being denied of sexual attention, female children who hawk among these markets may be lured or deceived into participating in sexual activities because of female adolescent hawkers huge financial expectations by their caregivers.

Context of occurrence of sexual abuse

Findings from this study reveal that experience of sexual abuse (attempt to rape and actual rape) took place majorly in the evening (58.8% and 40.9% respectively) and in markets (76.1%). This is comparable to the study conducted by Audu et al (2009) which revealed that 87.8% of girls working on the streets in Maiduguri (Nigeria) had been exposed to sexual abuse. Certain locations such as motor parks, according to Fawole et al (2002) increase the vulnerability of females to sexual abuse. So do markets. This is because certain markets with motor parks, in the evening times, seem to harbor more males. Most men who are notorious for perpetration of sexual abuse and could not do so in broad daylight, may see it conducive to do in the dark. This dark setting, in addition to curiosity of female hawkers to exhaust their wares creates an inevitable situation for the experience of sexual abuse to occur. Although, a form of sexual abuse experience occurred in markets, this does not negate the fact that market is the only location. Moreover, perpetrators home was widely reported by victims of rape.

A greater proportion of respondents (86.4%) within ages 14-17 reported increased experience of sexual abuse especially rape. This is higher compared to the findings by Ajuwon et al (2001b) which revealed that 9.0% of female students had experienced rape. This increased incidence of rape could be that, in this decade where the occurrence of HIV infection is more among adult females, males find it easier and safer to rape young females who they perceive to be less likely to be infected with any STIs than older adults. In addition, this trend could be

explained from cultural import in the fashion and dressing most females are seen to adore themselves with. Most of these clothings could be sexually suggestive and may not cover the sensitive parts of the female body. Appearance of such clothings in settings where the male folk are predominant, some of the males, who perhaps may be under influence of psychoactive substances or may have been denied sexual satisfaction may capitalize that opportunity to sexually abuse these girls. Also, female hawkers' lack of contentment of their present financial status may contribute to their experience of rape.

Although confirmed by Ajuwon et al (2001b) and other authors, experience of sexual abuse especially rape and attempted rape occurred majorly through the application of force (90.8%) and deception (45.1%) via being locked in a corner respectively. This is expected as the power differentials that exist between the perpetrator who is stronger physically and victim, who does not want the experience and gives no consent to it, leaves the perpetrator with no other option than to apply force in perpetrating the act on the victim.

Perpetrators of sexual abuse among female hawkers

Findings from this study revealed that greater proportion of respondents identified males in school, neighborhood and markets; traders and customers as the major perpetrators of sexual abuse. This is also consistent with related studies (Abdulkadir et al., 2011; Ajuwon et al., 2001a; Ikechebelu et al., 2008; Okoro & Osawemen, 2005; Patel & Andrew, 2005; Sara, 2009 and WHO, 2004). This is expected as this location where females hawk is a beehive of activities for all sort of men known for immoral acts and behaviors (Fawole et al., 2002). Explanation to this could be that when these hawkers dress in a suggestive way, they indirectly attract the attention of men who would want to sexually abuse by luring them in the quest to purchase an item from them. Even their male customers could be seen touching these hawkers in a sexually suggestive manner. Where this form of touch is acceptable by these hawkers, though nonverbally communicated, the perpetrator may see such touch as welcome by the female who may look forward to it. Continuation of this touch and introduction of other grooming process could in the long run lead to experience of other invasive forms of sexual abuse by the female hawker.

Another interesting trend in the experience of rape shows that about 77.3% of reported intimate partners (boyfriends) were perpetrators of rape. This is in line with findings by Jejeebhoy et al (2005) which states that about 51% of boyfriends were perpetrators of rape among girls aged 10-24 years. This behavior is expected if the context of the experience of rape by the victim is non-consensual. This is because being in a relationship with a male who spends on her girl friend materially and financially creates a platform for sexual abuse to be inevitable (Ajuwon et al., 2001a). Where the female partner does not consent to the sexual demands of her male partner, he is left with no option than to resort to forcefully obtaining sexual gratification from the female partner.

Factors contributing to the experience of sexual abuse

Result of the logistic regression showed that the major predictors of experience of sexual abuse, which were both intrapersonal and interpersonal factors, were having a boyfriend and first sexual intercourse. This is expected as having a boyfriend puts a girl at risk most especially when some form of material benefits is involved. When material benefits are introduced in the relationship, the girl would be put in a position where it would be difficult for her to refuse sexual advances from her boyfriend. This is in line with findings from Ajuwon et al (2001b). In addition, having a steady boyfriend could be a strong influence on sexual activity even when no other risk factors are present. This is because, as adolescents are in the process of sporadic sexual development that is facilitated by the sex hormones, they could be at risk of sexual abuse when they have a male partner. Their sexually active stage increases their curiosity to experiment sex despite the fact that they come from strong families with commendable upbringing, aware of behaviors depicting sexual abuse and live in a supportive neighborhood (Small & Luster, 1994). Early sexual initiation was implicated as a predictor of experience of sexual abuse. This is because early sexual initiation increases the likelihood that the victim would be at risk of experiencing sexual abuse as she advances in age. Also, where the female hawker is not equipped with life building and resistance skills, the female hawker may be unable to avoid any potential sexually abusive situation and perpetrator.

One of the interpersonal factors that contributed to the experience of sexual abuse in this study was neglect by caregivers. Based on the fact that most parents work hard to make ends meet for their family, they may delegate the responsibility of monitoring and supervision of their wards to teachers in schools or neighbors at same work place. This attitude results in poor parental monitoring, increased parent-child conflict and may put children at risk of sexual abuse. this finding is similar to that given by (Breiding et al., 2011). Children of parents who reported leaving their children at home without adequate supervision were more likely to experience sexual violence than those whose parents did not report this. The risk of experiencing sexual violence in childhood was significantly higher among respondents who reported having had no relationship with their biological mothers as children or who reported having had a somewhat close or not very close relationship with her, in comparison with those who described the relationship with their biological mothers as close (Breiding et al., 2011).

Help seeking practices of female hawkers

Findings from this study show that 67.5% did not disclose their experiences. This behavior is highly consistent with related findings (Ajuwon et al., 2001a; Ajuwon et al., 2001b; Jejeebhoy et al., 2005; Patel & Andrew, 2005). From this study, a number of reasons for this position were primarily to avoid inciting problem in the family. In a situation where the experience of sexual abuse is from the father of the family to the girl child, she may not want to disclose in order to avoid creating strain in the relationship between her parents. This would result in her concealment of the experience and reduced chance of obtaining help. Furthermore, were there is urgent need to obtain help in the face of health consequences, most health workers have been observed to accuse and blame victims for their experience of sexual abuse. In order to avoid being exposed to shame, victims prefer not to seek help and leave themselves to fate. In extreme case, they may resort to inappropriate settings where they are guaranteed of confidentiality-patent drug dealers and traditional herbalist. In single parent homes, in event of sexual abuse especially rape, most girls are exposed to physical abuse from their mothers in cases where the perpetrator contributes majorly to the economy of the family. Subsequently, silence is maintained to the incident in order to have the economic gains from the perpetrator on course (Breiding et al., 2011).

In addition, help was not obtained because the victims did not consider the experience as sexually abusive. The perception of treating contact and non-contact forms of sexual abuse as unnecessary should be expected in a society where only rape is considered and known as sexual abuse. This attitude if not checked may increase sexual fantasies and glamour for sex among young children, its registration in their sub-conscious as a permissive act at their age and which in the long term may increase their involvement in sexually abusive behaviors. This continuum of reduced help seeking behavior, reflected in the shrouded secrecy in discussion of sexuality issues fuels the cycle of re-victimization and perpetration of sexual abuse as these adolescents develop to adults.

Although some victims of rape sought help, results from the IDI showed that others did not or received inappropriate help as some took local herbs from unsanitary sources. Obtaining recourse from inappropriate sources has been explained by Ajuwon et al (2001a); Jejeebhoy et al (2005) as a way of avoiding shame and blame for inciting the incident of sexual abuse by health workers. Underneath this blame-shifting attitude by health workers lies their inability to provide help for victims of sexual abuse. This was explained by Abdulkadir et al (2011) and Ige and Fawole (2012) who stated that there were inadequate protocol for the evaluation, management and follow-up of sexual abuse victims in hospitals.

Perceived prevention of sexual abuse among female hawkers

Children have the right to express their view and take part in formulating policies and making contributions to issues that affect them (Council of Europe, 2007; Schenk & Williamson, 2005; UNCRC, 1989). There is also a growing understanding that prevention strategies and services for children must be based upon children's experiences as well as their recommendations (The International Save the Children Alliance, 2005). This was the basis for enquiry of female hawkers on perceived ways in which sexual abuse can be prevented. Sequel to this, 53.4% of the respondents suggested that they can avoid sexually abusive situations by focusing on their hawking activities solely without involving in idle discussions with males. This is because most girls put themselves at risk of sexual abuse when they are seen idling and chatting with males during hawking activities especially males who may have

perceived them to be sexually naïve, assisted in relieving their financial needs or shown them care. In the process, they might be exposed to sexually abusive situations and scenes which in most cases these girls may perceive as harmless.

Structural measures that should be adopted by government towards prevention of sexual abuse were that the economic sector should be improved. Although Section 1 Article 19 of the Convention on the Right of The Child, UNCRC (1989) mandates members to provide conducive environment for children, girls are still predisposed to experience various forms of abuse including sexual abuse. This is because due to the harsh economic environment that most families in Nigeria and the attendant poverty they are faced with, most girls are forced to, on a daily basis, to hawk in search of income to assist their families and for their up keep. This situation makes them vulnerable to any source that can provide these needs and this thus increases the risk of female hawkers to experience sexual abuse. This structural response is in line with that given by children during a UN study on violence against children conducted by the International Save the Children Alliance (2005). Children from Uganda, in the study, stated that government should teach perpetrators about the rights of children. This may help to reduce the number of sexual abuse cases. Perpetrators should also be counseled and rehabilitated so that when they are released, the cycle of perpetration of sexual abuse would be aborted.

In addition, legal strategies such as punishing the perpetrators by jailing them for life and strict compliance to jail terms should be sustained without having sacred cows for exemption. This was the position of 55.4% of the respondents. This suggestion shows that young girls are aware of the inconsistent position of the judicial system which does not encourage victims to obtain legal help in event of sexual abuse. This is in line with recommendations from the discussion with children in the International Save the Alliance project (2005) which stated that perpetrators of SA on children should be mercilessly punished because they take the happiness of a pure human being, who had no fault in the experience of sexual abuse.

Furthermore, 16.8% of the respondents suggested that the educational sector should be scaled up. Although, the curriculum of schools has been revised to accommodate sexuality programmes, most of the content of the curriculum may not contain courses that increase the

knowledge of girls in identifying sexually abusive behaviors and prevention of sexual abuse. This necessitates the need for the introduction of sexual abuse prevention education in to the curriculum. Findings from this study is comparable with that by EKOS research associates (2009) as suggested by grade 7-12 students of Cornwall, Ontario during a sexual abuse prevention based FGD. Majority of the students (86%) suggested that sexual abuse prevention courses should be introduced in their curriculum and presented in an age appropriate manner. Its introduction would increase the awareness of sexual abuse and equip children with skills necessary to avoid sexually abusive situations and thus introduce the concept of gender equality at early age. This finding is also consistent with a study conducted in Bauchi, Gombe and Yobe states of Nigeria by Ajuwon (2005) where the risk of experiencing sexual abuse is high as a result of absence of sexuality programmes in the curriculum of schools.

Parental responsibility which means provision of daily needs, supervision and creation of friendly environment between parents and their children should be in place as suggested by 7.5% of respondents. This is in line with several related studies (Breiding et al., 2011; Lalor, 2004; The International Save the Children Alliance, 2005). As a result of the economic situation in the country, caregivers have to keep busy fending for the family. For caregivers who spend the whole of the day in fending for the family, they create a strain in the level of interaction between them and their children. Coincidentally were these children are involved in income generating activities like hawking, they may not have opportunity to discuss any experience of sexual abuse with their caregivers. This results in their inability to access correct information on how to avoid sexually abusive situation. Most of the time, female hawkers who might be engaged in hawking are unaccompanied by their care givers. They are sometimes not given food or money for snack in case they feel hungry. Under that situation, as they are not obliged to use money from their proceeds to eat, they end up succumbing to people especially males who perceive them to be hungry. Most times, the conditions of providing food by these unscrupulous men could be accompanied with sexual abuse. This situation increases the risk of female hawkers experiencing sexual abuse.

In markets, respondents suggested that girls should hawk in groups (43.2%) and caregivers should see to the welfare of their wards (33.9%) by meeting their financial needs. Hawking in groups could help in reducing sexual abuse experience, however, most girls would prefer to hawk alone under the guise to avoid being monitored by their fellow girls and to be free to mingle with men who provide the needed attention they desire. Being alone with these men is likely to increase the experience of sexual abuse among female hawkers. Also, the inability of caregivers to provide the needs of their wards could increase the vulnerability of hawkers to sexual abuse. This is because most of the hawkers who are in financial need and are not contented with their present financial status may become gullible to unscrupulous men who have disposable income to spend. As a result of the affection and attention given to the hawkers by these men, female hawkers are put in a situation where their experience of sexual abuse is inevitable. This finding is comparable with suggestions made by children from Nepal during the UN prevention based FGD on sexual abuse. They reiterated that parents shouldn't leave their children alone at home while children also should not go out alone without adult accompaniment for any other odd activity. Every family must give children enough care, attention and affection so that they do not seek attention and affection from others, which thus increases the vulnerability of female to sexual abuse (The International Save the Children Alliance, 2005).

Conclusion

The findings of this study demonstrate that sexual abuse is common among female hawkers found in Ibadan North East L.G.A. A large proportion of female hawkers experienced different type of sexual abuse at the time of study. It also shows that their knowledge about sexual abuse is poor. In addition, a greater proportion did not seek help, even the few that did so did not get appropriate help. To that effect, this study underscores the need to develop holistic interventional programmes that will enable female hawkers to avoid and prevent the experience of sexual abuse from further occurring.

Recommendations

1. An interventional study need to be implemented among female hawkers found in markets to improve their knowledge and abstinence skills with respect to the concept of sexual abuse.

2. There is need to empower female adolescent hawkers, found in markets on the importance of disclosure when they are faced with sexually abusive situations
3. There is need for age appropriate, sexuality and sexual abuse prevention messages to be introduced into the curriculum of schools to enable female hawkers who from this study are in school, have better understanding of sexual abuse.
4. Awareness programmes should be designed and implemented across the various markets in Ibadan North East LGA targeting stakeholders and gate keepers of the markets on the health implications of sexual abuse among female adolescent hawkers.
5. Policies that discourage people from perpetrating sexual abuse among female adolescent hawkers should be designed and implemented across markets, which is implicated for sexual abuse.
6. Sustained evidenced based awareness programmes geared towards prevention of sexual abuse among females should be designed and disseminated to the general public to highlight the dangers of sexual abuse among this target population.

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UNIVERSITY OF IBADAN

APPENDIX 1

ETHICAL APPROVAL FOR CONDUCT OF RESEARCH STUDY

TELEGRAMS.....

TELEPHONE.....



MINISTRY OF HEALTH

DEPARTMENT OF PLANNING, RESEARCH & STATISTICS DIVISION
PRIVATE MAIL BAG NO. 5027, OYO STATE OF NIGERIA

Your Ref. No.

All communications should be addressed to

the Honourable Commissioner quoting

Our Ref. No: AD 13/479/138

Date: 23rd August, 2011

The Principal Investigator,
Department of Health Promotion & Education,
Faculty of Public Health,
University of Ibadan,
Ibadan.

Attention: Uvere Ezinne Onyinyechi.

Ethical Approval for the Implementation of Your Research Proposal in Oyo State.

This acknowledges the receipt of the corrected version of your Research Proposal titled "A Research Proposal on Sexual Abuse among Female Hawkers in Selected Markets in Ibadan North East Local Government Area, Ibadan".

The Committee has noted your compliance with all the ethical concerns raised in the initial review of the proposal. In the light of this, I am pleased to convey, to you, the approval of the committee for the implementation of the Research Proposal in Oyo State, Nigeria.

Please, note that the committee will monitor, closely, and follow up the implementation of the research study. However, the Ministry of Health would like to have a copy of the results and conclusions of the findings as this will help in policy making in the health sector.

Wishing you all the best

A handwritten signature in black ink, appearing to read 'V.A. Adepoju'.

Mrs V.A. Adepoju
Director, Planning, Research & Statistics
Secretary, Oyo State, Research Ethical Review Committee.

APPENDIX 2

INFORMED CONSENT FORM

My name is UVERE Ezinne Onyinyechi, a student of the Department of Health Promotion and Education, University of Ibadan. I am carrying out a self sponsored research titled 'Experience of and perceived prevention of sexual abuse among female adolescent hawkers found in selected markets in Ibadan North East Local Government Area, Ibadan. The broad objective of this study is to access the experience of sexual abuse among female hawkers found in markets in IBNE Local Government Area and information that you will provide will enable concerned stakeholders to provide solution to this problem and reduce sexual abuse among young people.

During this exercise, you will be required to complete a set of questions in a questionnaire regarding your sexual experiences in and around this market. Please, note that your responses will be kept confidential. Your names will not be written on your questionnaire. Where necessary, you will be required to give consent for an in-depth interview of your experiences. For you to have a clear understanding of the concepts documented on questionnaire, it shall be translated to Yoruba language. A soap case and detergent will be given to you, as it will require you spending some time away from your hawking activities for you to complete this questionnaire. In the course of this study, you are free to refuse to take part in this study and to withdraw at any time if you choose to. I will greatly appreciate your cooperation towards responding to the survey and taking part in it.

Consent by participant: Now that the study has been well explained to me and i fully understand the content of the study process, I will be writing to take part in this study.

Signature/thumbprint of participant/date

Signature of interview/date

Signature/thumb print of witness/date

APPENDIX 3

**QUESTIONNAIRE ON SEXUAL ABUSE AMONG FEMALE HAWKERS
FOUND IN SELECTED MARKETS IN IBADAN NORTH EAST L.G.A, IBADAN.**

Dear respondent,

I am a student of the University of Ibadan, Faculty of Public Health (Department of Health Promotion and Education). This questionnaire is designed to survey the sexual abuse experiences among female hawkers found in markets in Ibadan North East Local Government Area, Ibadan. I would want to assure you that all the responses stated in this questionnaire shall be confidential and your name is not required. Please, give honest and sincere answers to the questions on this questionnaire. Thank you.

Date-----

Name of Supervisor-----

Serial number -----

Name of Market-----

Section A: Socio-demographic information

Please fill or circle as appropriate.	Options
Age in years	-----
Date of birth	-----
Religion	Christianity Islam Traditional Others-----
Marital status	Single Married Others-----
Ethnicity	Igbo Hausa Yoruba Others-----
Who are you living with now?	Alone Girl Friend Both parents Mother only Father only Family relatives Guardian Others-----

What is the occupation of the person with whom you are living with now?	----- -----
Which of these represents your parent's living arrangement?	Living together Separated Divorced Widowed Others (specify)-----
What educational level have you attained?	None (go to Q 10, if yes) Primary Junior secondary Senior secondary Technical Arabic Others(specify)-----
If None, what other jobs do you do to earn a living?	-----
Who are you hawking for?	Parents Guardian Self Employer Family relatives Others(specify)-----
What are your reasons for hawking?	-----
Which of these do you sell?	Fruits Drinks Alcoholic drinks Foodstuff Clothes & bags Building materials Provision Others (specify) -----
On the average, how much do you make from your sales weekly?	-----
On the average, how much is your share from your sales?	-----
Who provides money most of the time for your daily needs?	Self Boyfriend Man friend Parents family relatives Others (specify)-----

Which of these substances have you ever taken? (if None , skip to Q19)	Alcoholic beverages Marijuana Cannabis Cigarette Cocaine None Others -----	Yes	No
In the last 3 months, have you taken any of these?	Alcoholic beverages Marijuana Cannabis Cigarette Cocaine None Others-----	Yes	No
Do you currently have a Man friend Boyfriend?	Yes 2 No 2 Yes 2 No		
Do you discuss sexuality matters?	Yes No		
With whom do you discuss sexuality matters?	Parents Health worker Guardian Boyfriend Girlfriend Others -----		
Have you ever had sex?	Yes No		
What was the reason for having sexual intercourse?	----- -----		
How did the sexual intercourse take place?	Both of you willingly agreed It was forced on you You forced it on him Others----- -----		
At what age did it occur?	-----		

Section B: Prevalence of sexual abuse

26 Please answer the following questions.

No	A: Which of the following has ever happened to you?	Yes	No	B: If yes, did it happen in the last 3 months?		How many times if yes?*	Where did it occur?
				Yes	No		
1	Someone touched some parts of your body when you did not want. (if Yes, go to Q27)						
	Someone rubbed his genitals against your body or clothes against your wish						
	Someone made comments about your body using sexual words						
4	Someone kissed or hugged you when you did not want.						
	Someone made you to see other people having sex against your wish						
	Someone exposed his genitals for you to see when you did not want.						
7	Someone made you see pornographic materials against your wish.						
	Someone attempted to have sexual intercourse with you against your wish (if Yes, go to Q28)						
	Someone forcefully had sexual intercourse with you against your wish (if yes, go to section D)						

Note: *shows once, twice, thrice, others (If No to all the options, skip to Q45)

27 If yes to Q26.1, which part of your body was touched?

1. Face 2) hand 3) Breast 4) Buttocks 5) Others-----

28 If yes to Q26.8, how did the perpetrator get you to be sexually abused?

- 1) Perpetrator forcefully put you on his couch/laps 2) pulled off or down your clothes
 3) drugged you with psychoactive substance 4) through deception by locking you inside his room/car/office 5) gagged you with a cloth to prevent you from screaming 6) Others specify-----

Section C: Knowledge on various forms of sexual abuse

29 What do you understand by the word “Sexual abuse”? -----

30 For the following statements, respond by ticking True or False.

No	Statements	True	False
1	Sexual abuse of young girls’ does not consist of touching a girl’s breast and buttocks against her wish.		
2	The act of rubbing a male genital against a girls’ body or clothing (frottage) cannot be referred to as sexual abuse.		
3	A girl whose body was insulted using sexual words cannot be said to have been sexually abused		
4	When a girl is hugged and kissed against her wish, she has been sexually abused.		
5	Exposing young girls to see other girls in sexual act with older boys/men (voyeurism) is not sexual abuse.		
6	When a man exposes his genital(s) (Exhibitionism) for a girl to see against her wish, such act cannot be referred to as sexual abuse.		
7	The exposure of young girls to materials that contain sexual images is not considered sexual abuse.		
8	Attempt to have sexual intercourse with a young girl against her wish can be referred to as sexual abuse.		
9	Sexual abuse consists of other behaviors other than sexual intercourse		
10	Sex with a girl below 13 years (defilement) is not sexual abuse.		
	NB: True-----1 False-----0		

Section D: Context of sexual abuse

No		Forced sexual intercourse	Attempted forced intercourse
31	At what time of the day did the last sexual abuse occur?		
32	How old were you when you had the experience?		
33	How did the sexual intercourse occur?		
34	What led to the occurrence of the abuse?		
35	Why did the abuse take place?		

Section E: Perpetrator of sexual abuse

36 For the experience mentioned in Q26, fill in the person that perpetrated the abuse

No	Abusive behavior	Perpetrator
1	Someone touched your body when you did not want.	
	Someone rubbed his genitals against your body or clothes against your wish	
	Someone made comments about your body using sexual words	
4	Someone kissed or hugged your body when you did not want.	
	Someone exposed you to see other people having sex with adults against your wish	
	Someone exposed his genitals for you to see when you did not want.	
7	Someone showed you pornographic materials against your wish.	
	Someone attempted to have sexual intercourse with you against your wish.	
	Someone forcefully had sexual intercourse with you against your wish	

Section F: Help seeking behaviors towards sexual abuse

Please tick or circle the appropriate options.

37. Did you tell anyone about your sexual abuse experience? 1) Yes 2) No (if **No, skip to Q44**)

38. To whom did you disclose your experience of sexual abuse?

1. Family member -----
2. Non-family member -----
3. Authority figure -----
4. Health worker (if yes to any of the **options 1,2 & 3, mention the relationship**)

39. How did they react when you told them your experience? -----

40. What were the motivators to your disclosure? -----

41. Did you take steps to receive care?

- 1 Yes 2) No (If **No, go to Q43**)

42. What type of care did you receive if experienced
1. Forceful sexual intercourse? -----

43. If No to Q41, state reasons for not obtaining care? -----

44. If No to Q37, what were your reasons for not telling anyone your experience? -----

45. Are you facing any of the above-mentioned abuses now? 1) Yes 2) No
(If No, skip to Q47)
46. Do you need help from any of the above-mentioned abuses? 1) Yes 2) No

Section G: Perceived means of preventing sexual abuse

Please, fill the following questions.

47. To prevent the (re)occurrence of sexual abuse in future, what steps would you take? ----

48. What measures should structures (Government, family, law enforcement agencies and NGOs) institute to prevent young girls from being sexually abused? -----

49. In your own words, state how sexual abuse of female hawkers can be prevented in open places especially markets-----

Thank you for providing answers to these questions.

APPENDIX 4

In-depth interview guide on sexual abuse among female hawkers in selected markets in Ibadan North East Local Government Area.

Dear respondent,

I am **UVERE Ezinne Onyinyechi**, a second year postgraduate student of the Department of Health Promotion and Education, Faculty of Public Health, University of Ibadan. I am carrying out a survey on the above mentioned research which has the broad objective of assessing sexual abuse among female hawkers in selected market places in I.B.N.E LGA. The information obtained from this study would assist in designing innovative procedures for reaching and meeting sexuality and life planning needs of this peculiar target population. This interview would last for 20 minutes while confidentiality and sole use of the information received for research purposes would strictly be adhered to. Due to the importance of this study, I would like to seek your permission to participate in this interview and to tape record this discussion.

Yes----- No-----

Thank you for the responses you gave in the survey. However, this section requires that you describe as much as you can, in detail, what your experience had been.

1. Let's hear you talk about your sexual abusive experiences.
2. Based on the sexual experiences you have earlier discussed,
 - a. Who perpetrated it?
 - b. What is (was) your relationship with the perpetrator?
 - c. Where did it take place?
 - d. When did it take place?
 - e. How often did it occur?
 - f. Why did the abuse take place?
3. Did you disclose to anyone?
 - a. If yes, who are those?
 - b. How did they react to your disclosure?
4. What motivated you to disclose your sexual abuse experiences?

5. If No to Q3, what were your reasons for not disclosing your sexual abuse experiences?
(probe for personal, interpersonal and structural reasons)
6. What kind of care did you receive when the abuse occurred?
7. What measures would you take to personally prevent this experience from re-occurring?
8. What measures should structures such as Government, NGOs, law enforcement agents and families, put in place in order to prevent young girls from being sexually abused?
9. What ways do you think sexual abuse of female hawkers can be prevented in market places? Thank you for your response.

Thank you for your response.

UNIVERSITY OF IBADAN