

Lesbian, Gay, Bisexual, and Transgender Populations in Ghana: Contributing to the Debate of Possible Causes Of LGBT

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ABSTRACT

Due to the inconclusive research findings on the causes of LGBT, this study sought to examine the possible causes of LGBT among LGBTs in Ghana. The study sought to examine the biological and socio-cultural and environmental causes of LGBT in Ghana. A total of 494 self-identified LGBTs, recruited via non-probability sampling technique of snow-ball participated in the study. A questionnaire was used to measure the demographic information, biological, and socio-cultural and environmental causes of LGBTs. The findings of the study revealed that both biological and socio-cultural and environmental factors are possible causes of LGBT in Ghana. The participants of the study indicated that hormonal changes during and after adolescent play a role in their becoming an LGBT. On the other hand, pressure, poverty, and poor family up-bringing were some of the socio-cultural and environmental causes of LGBT in Ghana. The results of the Chi-square test of independence showed significant difference in the sexual orientation of the responses of the participants. It is recommended that parents open the line of communication so that their children can approach them with sexual matters. Healthcare professionals are to educate the public about the possible hormonal changes they will have to expect in their children and the possible implications. Employment opportunities should be created to reduce the poverty level among the youth. There should be public awareness of the causes LGBT so that homophobic attitude towards LGBTs will be reduced. The nation should ensure that the laws of the land protect the rights of LGBTs.

Keywords: Discrimination, Socio-cultural and environmental, Hormonal, Biological, LGBTs, Ghana

INTRODUCTION

Lesbian, gay, bisexual and transgender (LGBT) persons, worldwide, are among the minority groups that experience vast amounts of discrimination, harassment and victimization. In virtually every part of the world, LGBT lives are constrained by a web of laws and social practices which deny them an equal right to life, liberty and physical security, as well as other fundamental rights such as freedom of association, freedom of expression and rights to private life, employment, education and health care. While the degree to which discrimination is institutionalized varies from country to country, almost nowhere in the world are LGBT people treated as fully equal before the law [1]. In many parts of the world, being lesbian, gay, bisexual or transgender (LGBT) is not seen as a right, but as a wrong. Homosexuality is considered a sin or an illness, a social or ideological deviation, or a betrayal of one's culture. Whereas most governments either deny practicing human rights violations or portray them as rare aberrations, the repression that LGBT people face is often openly and passionately defended in the name of culture, religion, morality or public

health, and facilitated by specific legal provisions [2]. In many African countries, LGBT individuals face significant discrimination and abuses. Culture and religion are often used to defend anti LGBT sentiments and the guise of "protecting minors" becomes a proxy to further advance an anti-LGBT agenda. Vilification and social marginalization of LGBT people is common place across the African continent, even in nations that have decriminalized homosexuality and instituted anti-discrimination measures. Few LGBT people are open about their sexual orientation or gender identity; these often find themselves the targets of violence and public shaming along with, all too often,

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murder [3]. Many in Africa view homosexuality as a “western invention” imposed upon them by the remnants of colonizing powers [4]. In Ghana, research evidence has shown the country is homophobic. LGBT individuals in Ghana dare not disclose their sexuality in public [5,6]. LGBT people in Ghana are very frequently victims of physical violence and psychological abuse, extortion and discrimination in many different aspects of daily life. The Pew Global Attitudes Project on homosexuality puts stigmatization against LGBT individuals by Ghanaians at 96 percent, depicting a high level of homophobia [7]. The legal landscape and social climate for LGBT people in Ghana have likely contributed to an environment in which LGBT people experience stigma and discrimination [8-11]. There are many recent surveys in Ghana suggesting that homophobia is still widespread and experienced by LGBT individuals in their daily lives, affecting their psychological wellbeing [12-17]. These discrimination and abuses faced by LGBTs all over the world, including Ghana has generated a debate about the possible causes of LGBT. While, the conclusion about the possible causes of LGBT is far-fetched, some researchers have attributed the causes to biological factors. For instance, although no “gay gene” has been discovered, studies of identical twins find they are more likely to have the same sexual orientation (gay or straight) than would be expected from chance alone. And because identical twins have the same DNA, researchers’ similarity suggests, sexual orientation, that is being an LGBT could be as a result of a genetic factor. Another line of research that has been explained to be a biological cause of LGBT has to do with maternal immune response [18]. Skorska, Blanchard, VanderLaan, Zucker, & Bogaert, examined the possibility that a maternal immune response might play a key role in the development of a homosexual orientation in males. This effect they said is as a result of the mother's immune system having a maladaptive reaction to the male-specific proteins associated with the Y-chromosome during pregnancy. Effectively, then, the mother's immune system would (sometimes) treat certain male proteins produced by the fetus as a foreign pathogen and attempt to attack it, resulting in outcomes that could include a homosexual orientation, but also fetal loss if the reaction was strong enough. However, the question remains as to how the researchers tested for this kind of effect. They used a simple method by examining maternal reports of fetal loss and birth weights. However, the logic here is that higher rates of fetal loss and lower birth weights both index perturbations in development. As such, they could provide indirect evidence for some kind of maternal immune response doing the causing. Another line of research concerns brain anatomy, as some studies find differences in the size and structure of the hypothalamus, which controls many bodily functions, in the brains of gays versus the brains of straights [5]. However, other studies find no such differences [19]. Complicating matters further, because sexual behavior can affect the hypothalamus [20] it is difficult to determine whether any

differences that might be found reflect the influence of the hypothalamus on sexual orientation, or instead the influence of sexual orientation on the hypothalamus [21]. Another line of biological research on the possible causes of LGBT concerns hormonal balance in the womb, with scientists speculating that the level of prenatal androgen affects which sexual orientation develops. Because prenatal androgen levels cannot be measured, studies typically measure it only indirectly in the bodies of gays and straights by comparing the lengths of certain fingers and bones that are thought to be related to prenatal androgen. Some of these studies suggest that gay men had lower levels of prenatal androgen than straight men and that lesbians had higher levels of prenatal androgen than straight women, but other studies find no evidence of this connection [22,23]. A recent review concluded that the results of the hormone studies are “often inconsistent” and that “the notion that non-heterosexual preferences may reflect [deviations from normal prenatal hormonal levels] is not supported by the available data” [24]. Meanwhile, other researchers have also attributed the causes of LGBT to social, cultural and environmental factors. In a 1988 review article, two sociologists concluded that “evidence that homosexuality is a social construction (learned from society, environment and culture) is far more powerful than the evidence for a widespread organic (biological) predisposition toward homosexual desire” [25]. Given this standard sociological position, one might think that people are gay or straight not because of their biological outfit but because they learn to be gay or straight from their society, culture, and immediate social environment. Due to the fact that there are inconclusive research findings on the possible causes of LGBT, this paper in an attempt to contribute to the debate seeks to examine the possible causes of LGBT among LGBT population in Ghana. The study specifically seeks to determine whether the causes of LGBT among the LGBT population in Ghana is as a result of biological factors or socio-cultural and environmental factors. Although a number of studies have been conducted on LGBT individuals in Ghana [5-13,26,27] none of these studies have focused on the possible causes of LGBT among the LGBT population in Ghana, creating a gap which is the focus of this study.

MATERIALS AND METHODS

Description of the Site

Ghana is one of the countries on the African continent, found on the western part of the continent. Ghana sits on the Atlantic Ocean and shares borders with Togo, Cote d'Ivoire, and Burkina Faso. Formed from the merger of the British colony of the Gold Coast and the Togoland trust territory, Ghana in 1957 became the first sub-Saharan country in colonial Africa to gain its independence. Ghana's population of approximately 30 million [28] spans a variety of ethnic, linguistic and religious groups [29,30] (Ghana Statistical Service [GSS], 2018). According to the 2010 census, 71.2%

of the population are Christians, 17.6% are Muslim, and 5.2% practice traditional faiths. Over the past twenty years, Ghana has made major strides as far democracy under a multi-party system is concerned, with its independent judiciary winning public trust. Ghana is ranked among the top three countries in Africa for freedom of speech and press freedom, with strong broadcast media [31]. However, LGBT rights in Ghana are heavily suppressed. Physical and violent homophobic attacks against LGBT people are common, often encouraged by the media and religious and political leaders. Despite the Constitution guaranteeing a right to freedom of speech, of expression and of assembly to Ghanaian citizens, these fundamental rights are actively denied to LGBT people. Same-sex relationships are a misdemeanor punishable by up to three years in prison in Ghana. According to a recent Pew survey, 98 percent of Ghanaians feel that homosexuality is “morally unacceptable,” the highest percentage of any country surveyed [17]. Anti-LGBT rhetoric is rampant from prominent Ghanaian politicians and LGBT citizens face societal discrimination and the threat of violent attack.

Instruments

The study was carried out through the use of a questionnaire. The questionnaire consisted of three sections. The first section focused on the demographics of the participants - age, ethnicity, sexual orientation, region, geographical location, working status, educational level, ethnicity, religious affiliation, and educational attainment. The second section of the questionnaire elicited information on the possible biological causes of LGBT among the LGBTs in Ghana. The response format was predominantly based on a five-point Likert scale: 1= Strongly Disagree, 2 = Disagree, 3 =Neutral, 4= Agree, and 5 = Strongly Agree. The third section of the questionnaire measured the socio-cultural and environmental factors likely to be the possible causes of LGBT among the LGBTs in Ghana. The response format was also based on a based on a five-point Likert scale: 1= Strongly Disagree, 2 = Disagree, 3 =Neutral, 4= Agree, and 5 = Strongly Agree.

Procedure

The participants of the study were recruited from the LGBT community all over Ghana. Non-probability sampling of Snowball sampling technique was used to select the sample for the study. The snowball sampling technique was appropriate for the study due to the fact that the LGBT individuals are a hidden population in Ghana which makes it difficult to access them. However, because they know themselves, the individuals are closely connected. As a result, one participant is likely to know others who are LGBT that make them eligible for inclusion in the study. The only disadvantage of this sampling technique is that as the participants are not selected from a sampling frame, the sample is subject to bias. For example, an LGBT individual who have many friends who are also LGBT were more

likely to be recruited into the sample than those who do not have many friends who are LGBT. The study used a sample of 500 LGBT individuals all over the country. A total of 500 questionnaires were therefore sent out to the participants of the study. Of the total of 500 questionnaires sent to the LGBT individuals, 494 were retrieved and were considered usable for the study. In all, a response rate of 98.8% was achieved for the study. According to Fincham, response rates approximating 60% for most research should be the goal of researchers, and for survey research intended to represent all LGBT individuals in Ghana, a response rate of at least 90% is expected. This was however achieved in this study.

Statistical methods used

Statistical analysis was performed using IBM SPSS Statistics version 20.0 (IBM, Armonk, NY) with a significance level of 0.05. General descriptive statistics characteristics of the participants were expressed as the mean \pm standard deviation for continuous variables and as frequency (%) for categorical variables. Internal consistency reliability was analyzed by using Cronbach's alpha coefficient, and test-retest reliability was analyzed by using Spearman's rank correlation coefficient. Descriptive statistics - frequencies, percentages, were used to describe the participants' demographic characteristics. The inferential statistics of Chi-square test of independence was used to test whether there was a relationship among the LGBTs with respect to the possible causes of LGBTs.

Cronbach's alpha coefficient 0.801 was obtained for the possible biological causes of LGBT and 0.84 for the possible socio-cultural and environmental causes of LGBT Spearman's rank correlation coefficients, which were used to assess correlations between test-retest results, ranged from 0.72 to 0.84. In general, Cronbach's alpha coefficients of at least 0.6 are thought to be indicative of good reliability [32]. Hence, the questionnaire for the study was confirmed to exhibit internal consistency for all the items.

RESULTS

Table 1 presents the demographics of the participants of the study. Of the total 494 participants whose questionnaires were considered usable for the study, 73.5 % (n=363) were males, while 26.5 % (n=131) were females. On the other hand, of the total 494 participants, 14.1% (n=70) identified themselves as lesbians; 41.9% (n=208) identified themselves as gays; 43.5% (n=216) identified themselves as bisexuals; and .4% (n=2) identified themselves as transgender. The participants were from the 14 years and above, with 4.6% (n=23) between the ages of 14-19 years; 17.9% (n=89) between the ages of 20-24 years; 39.0% (n=194) between the ages of 25-29 years; 22.7% (n=113) between the ages of 30-34 years; and 15.7% were 35 years and above. Of the regional distribution of the participants, majority (19.8%) were from the Greater Accra Region; 14.3% (n=71) were

from the Volta Region; 12.7% (n=63) were from the Ashanti Region; 12.1% were from the Central Region; and 11.9% were from the Eastern Region. Less than 10.0% were from the Northern (8.1%), Upper East (2.6%), Upper West (3.0%), and Western (7.3%) Regions. Regarding geographical location, majority of the participants (89.7%) were located in the urban areas, while 10.3% were found in the rural areas. About 49% of the participants declared themselves as working full-time, 17.6% reported as working

part-time, while 19.5% of the participants declared themselves as unemployed. However, 2.4% of the declared themselves as retired workers, house-wife/house-husband, and self-employed, respectively, while 6.7% (n=33) reported as being students/pupils. Nearly 29% of the participants had completed senior high school, 31.9% had Technical/Vocational Training/Diploma, 15.9% had university undergraduate degree, and 5.5% had university post-graduate degree (Table 1).

Table 1. Demographic profiles of the participants.

Demographics	N	Frequency
Gender		
Male	363	73.5%
Female	131	26.5%
Sexual Orientation		
Lesbian	70	14.1%
Gay	208	41.9%
Bisexual	216	43.5%
Transgender	2	.4%
Age		
14-19	23	4.6%
20-24	89	17.9%
25-29	194	39.0%
30-34	113	22.7%
35-39	35	7.0%
40-44	17	3.4%
45-49	12	2.4%
50 and above	14	2.8%
Region		
Ashanti	63	12.7%
BA	41	8.3%
Central	60	12.1%
Eastern	59	11.9%
Greater Accra	98	19.8%
Northern	40	8.1%
Upper East	13	2.6%
Upper West	15	3.0%
Volta	71	14.3%
Western	36	7.3%
Geographical Location		
Urban	399	89.7%
Rural	46	10.3%
Working status		
Working full-time	241	48.9%
Working part-time	87	17.6%
Unemployed	96	19.5%
Retired	12	2.4%
House-wife/husband	12	2.4%
Student/Pupil	33	6.7%
Self Employed	12	2.4%
Educational Level		
No formal school	13	2.6%
Primary school	23	4.7%
Junior High School	46	9.3%
Senior High School	140	28.5%
Technical/Vocational/Training/Diploma	157	31.9%
University Graduate	78	15.9%
Post Graduate	27	5.5%
MSLC	8	1.6%
Ethnic group		
Akan	232	46.8%
Ga/Dangme	103	20.8%
Ewe	72	14.5%
Guan	12	2.4%
Mole-Dagbani	30	6.0%
Grusi	13	2.6%
Gruma	14	2.8%
Mande	3	.6%
Fante	17	3.4%

Meanwhile, 9.3% (n=46) had primary education, 1.6% (n=8) had middle school living certificate education, while 2.6% (n=13) had no formal education. With respect to ethnicity, 46.8 % (n= 232) considered themselves to be Akans, 20.8% (n=103) considered themselves to be Ga/Dangme, while 14.5% considered themselves to be Ewes. However, 2.4% (n=12) regarded themselves as Guans, 6.0 % (n=30) regarded themselves as Mole-Dagbani, 2.6 %(n=13) regarded themselves as Grusi, 2.8% (n=14) regarded themselves as Gruma, and 3.4% (n=17) regarded themselves as Fantès.

Biological Causes of LGBT among LGBTs in Ghana

Table 2 shows the percentage and the p-values of Chi-square about the possible biological causes of LGBT as indicated by the LGBTs in Ghana. As shown in the table, in the study, 49.1% of the participants who identified themselves as homosexuals recalled that they had sexual feelings for the same sex at the adolescent stage while 37.5% recalled of having developed the feelings for the same sex after the adolescent stage. On the other hand, 56.9% of the participants who identified themselves as bisexuals indicated that they experienced their feelings at the adolescent stage, while 33.0% recalled of having developed the feelings after adolescent stage. The results of the Chi-square test if

independence showed a significant difference in the sexual orientation of the LGBTs and the possible biological causes of their sexual orientation - homosexual sexual feelings at adolescent , ($\chi^2(9)=1.37,p<.05$), homosexual - sexual feelings after adolescent ($\chi^2(9)=1.15,p<.05$), bisexual - sexual feelings at adolescent ($\chi^2(9)=1.73,p<.05$), and bisexual - sexual feelings after adolescent ($\chi^2(9)=1.64,p<.05$). In terms of the homosexual feelings at adolescent stage, more of the gays (57.6 per cent) reported to have had such feelings at adolescent stage than their lesbians (19.7 per cent), bisexual (22.3%) and transgender (.4 per cent) counterparts. With respect to the homosexual feelings after adolescent, again the results as shown in **Table 1** reveals that majority of the gays (57.1 per cent) reported more of such feelings than the lesbians (14.3 per cent), bisexual (28.0 per cent), and transgender group (.4 per cent). On the other hand, with regards to the bisexual sexual feelings at adolescent, majority of the bisexuals (53.3 per cent) indicated more of such feelings than the gay (36.6 per cent), lesbian (9.8 per cent), and transgender group (.4 per cent). Meanwhile, the results as indicated in Table revealed that majority of the gays (45.6 per cent) showed more of bisexual feelings after adolescent than their bisexual (38.8 per cent), lesbian (15.6 per cent) counterparts.

Table 2. Percentage and p-values of Chi-square test of independence of the possible biological causes of LGBT among the LGBTs in Ghana.

Biological causes of sexual orientation	Sexual Orientation				Total	P-value
	Lesbian	Gay	Bisexual	Transgender		
Homosexual - sexual feelings at adolescent	19.7	57.6	22.3	.4	49.1	0.002
Homosexual - sexual feelings after adolescent	14.3	57.1	28.0	.5	37.5	0.001
Bisexual - sexual feelings at adolescent	9.8	36.6	53.3	.4	56.9	0.005
Bisexual - sexual feelings after adolescent	15.6	45.6	38.8	-	33.0	0.004

Socio-Cultural and Environmental Causes of LGBT among LGBTs in Ghana

Table 3 shows the shows the percentage and the p-values of Chi-square about the possible socio-cultural and environmental causes of LGBT as indicated by the LGBTs who participated in the study in Ghana. As shown in the table, 24.1% of the participants indicated poverty as the main reason for being an LGBT, 6.4% reported of cultural factors, while 52.8% reported of peer pressure. Parent-child

relationship was also found by the present study to be one of the causes of sexual orientation. Although, in all less than 1.0% of the participants reported of being an LGBT as a result of family upbringing, 25.0% of the lesbians as well as gays, and 50.0% of the bisexuals indicated of being LGBT as a result of family upbringing. The results of the Chi-square test if independence showed a significant difference in the sexual orientation of the LGBTs and the possible socio-cultural and environmental causes of their sexual

orientation - poverty, ($\chi^2(9) = 1.15, p < .05$), peer pressure ($\chi^2(9) = 1.15, p < .05$), cultural factors ($\chi^2(9) = 1.37, p < .05$), and family upbringing ($\chi^2(9) = 1.15, p < .05$). With respect to poverty, majority of the gays (64.2 per cent) reported to have contributed to their being a gay, then the lesbian (15.4 per cent), bisexual (21.4 per cent) and transgender (.9 per cent) group. In terms of peer pressure, majority (47.7 per cent) of the bisexuals reported of being bisexual as a result of peer pressure than the gay (44.9 per cent), lesbian (7.0 per cent),

and transgender (.4 per cent). Meanwhile, in terms of cultural factors, majority of the bisexuals (41.9 per cent) reported of being bisexuals as a result of cultural factors than the gay (32.3 per cent), and the lesbian (25.8 per cent). Also, as shown in Table 3, majority (50.0 per cent) of the bisexuals reported of being bisexuals as a result their family upbringing than their gay (25.0 per cent) and lesbian counterparts (25.0 per cent).

Table 3. Percentage and p-values of Chi-square test of independence of the possible biological causes of LGBT among the LGBTs in Ghana.

Socio-cultural and environmental causes of sexual orientation	Sexual Orientation				Total	p-value
	Lesbian	Gay	Bisexual	Transgender		
Poverty	15.4	62.4	21.4	.9	24.1	0.001
Peer pressure	7.0	44.9	47.7	.4	52.8	0.001
Cultural	25.8	32.3	41.9	-	6.4	0.002
Family upbringing	25.0	25.0	50.0	-	.8	0.001

DISCUSSION

The aim of the study was to determine the possible causes of LGBT among the LGBT population in Ghana. The study was to determine whether the causes of LGBT among the LGBT population in Ghana is as a result of their biological factors or their socio-cultural and environmental factors. The findings of the study revealed that hormonal changes could be attributable to the causes of LGBT among the LGBT population in Ghana. In particular majority of the gays were found to have been gays as a result of the hormonal changes they experienced before and after adolescent. This finding seems to support the proponents of biological factors as the causes of LGBT. The idea that hormonal differences may lead to sexual orientation differences has been especially influential [33]. Studies have shown that subjects recall first having feelings of sexual attraction at age 10, on average [34]. Male and female subjects report similar ages. Importantly, so do homosexual and heterosexual subjects. Age 10 is several years before the typical age of onset of sexual activity [35]. Bell, Weinberg and Hammersmith (1981) as cited in Bailey [36] found in their study that homosexual men and women recalled their first homosexual feelings as preceding their first homosexual experiences by 3 years. The results of this research finding seems to support previous findings that hormonal changes are a significant factor in the causes of being an LGBT. In fact, in this study more than almost 57 per cent of the participants who

identified themselves as bisexuals indicated that they experienced their feelings at the adolescent stage, while 33 per cent recalled of having developed the feelings after adolescent stage. On the other hand, more than 49 per cent of the participants who identified themselves as homosexuals recalled that they had sexual feelings for the same sex at the adolescent stage while about 38 per cent of them recalled of having developed the feelings for the same sex after the adolescent stage. According to the American Psychological Association, current scientific and professional understanding shows that the core attractions that form the basis for adult sexual orientation typically emerge between middle childhood and early adolescence. This finding therefore indicate that hormonal changes may be one of the causes of LGBT. The findings of this study also revealed that social, cultural and environmental factors play a crucial role of an individual becoming an LGBT in Ghana. Majority of the LGBTs who participated in the study reported of becoming an LGBT as a result of poverty, and peer pressure. Although not significantly higher as poverty and pressure, almost 7 per cent of the LGBTs reported of being an LGBT as a result of cultural factors. This finding is consistent with literature. Sabri, Owoyemi and Mangsor [37] in their study of the causes and cure or transformation from sexual orientation to normal sexual orientation found that environmental factors, such as, spending time with wrong one, is one of the main causes of LGBT orientation and practice in the individual and society. This finding also

supports the idea that heterosexual people may be enticed by homosexual people into being homosexual [38-40] concluded that homosexuality is a social construction - learned from society and culture, and this is far more powerful than the evidence for a widespread organic or biological predisposition toward homosexual desire. Meanwhile, the findings of the study revealed that parent-child relationship is one of the causes of sexual orientation among the LGBTs in Ghana. The study revealed that at least 25 per cent of the bisexuals, lesbians and gays in Ghana are as a result of the dysfunctional parent-child relationship. This finding is consistent with the findings of Bailey. Bailey explained that the idea that homosexuality could result from parent-child relationship is as a result of psychoanalysis theory. In general, psychoanalytic theorists blame dysfunctional relationship between children and their parents for children's homosexuality, which they see as a pathological outcome. Culprits included emotionally distant fathers and overbearing mothers, which could be as result of separation or divorce of the parents.

CONCLUSION

The various discrimination and abuses faced by LGBTs all over the world, which have had and continues to have a detrimental effect on their lives has prompted many research scientists and academicians to find out the possible causes of LGBT. As a result of inconclusive research findings on the possible factors contributing to a person being an LGBT, this study sought to add to the debate by examining the possible factors contributing to a person or an individual being an LGBT in Ghana. This was to assist policy makers, stakeholders, parents, healthcare professionals, the media and the general public, especially in Ghana, to get to know the possible causes of LGBT so that informed decisions geared towards social change can be made. Recruiting the participants of the study through a non-probability sampling technique of Snow-ball, the results of the study corroborate with some of the findings of previous studies. The results of the present study reveal that, biological factors play a significant role in the causes of LGBTs in Ghana. The results of the present study reveal that hormonal changes before and after adolescent plays a crucial in a person becoming an LGBT in Ghana. This finding is therefore a very important information to parents and healthcare practitioners. Parents and encourage to spend enough time with their children, talk with them about the changes they should expect as they grow up, and at every stage of their lives. Parents should open the line communication with their children so that their children will feel free to discuss their sexual feelings with them. It is not surprising that this biological factor plays a role in a person becoming an LGBT in Ghana. The culture atmosphere in Ghana generally frowns on sexual discussions or education between children and parents. Majority of the children learn at sexual matters from their peers. Little wonder then that when these children experience sexual feelings toward the same sex, they are not

able to discuss with their parents for help. This research finding also serves an implication to healthcare professionals in Ghana. Healthcare professionals in Ghana are encouraged to educate the general public through various media, especially parents about the possible hormonal changes they will have to expect in their children and the possible feelings they are to expect, and how likely it could change the sexual feelings of their children. They can do this education through television programmed, sexual and reproductive programmed at schools, and open days with health care professionals. They can also help the parents with this information through a hotline, where parents could discuss changes, they see in their young ones with healthcare professionals. This will furnish the parents with the necessary information that will be helpful to their children sexuality or sexual orientation, and offer the immediate needed assistance in situations where the feelings are toward the same-sex. The findings of the study have also revealed that poverty and peer pressure play a significant role of a person becoming an LGBT in Ghana. Again, this result of the study is very helpful to parents, and families. Parents and families should pay very particular attention to their children, helping their children to find good friends, friends with good manners and good up-bringing, other than that as the Good Book say, "their bad association will spoil their useful habits". On the other hand, this finding is very helpful to policy makers and stakeholders. Employment opportunities should be created by the government or the state to help reduce the poverty level among the youth. If the youth have work to do, it will help to improve their economic well-being. This will help them to have focus in life and also help them to buy the things they need for themselves out of their honorable work or job and not out of engaging or selling themselves in same-sex for money because of poverty. This finding also suggests that the state or the nation is also to be blamed for the LGBT situation in the country. The nation should not put the blame on only the LGBT individuals. They should accept that they are part of the problem, and immediately come out with policies and programmed that will help to address the situation. The nation should ensure that the laws of the land protect the rights, legal benefits and privileges of LGBTs in Ghana. There should also be increased awareness of the causes of the problem to the general public so that the homophobic attitude towards LGBTs in Ghana by the general public will be reduced if not eliminated. The results of the study also indicate that family up-bringing, that is, parent - child relationship has a role to play in a person becoming an LGBT in Ghana. This finding is very useful to the family. Parents should accept that they play a major role of whatever their children will become in the future. The good and bad of the children depends to a large extent on the family up-bringing. As a result, parents should not focus on themselves when there are problems in marriage. They should focus on their children and if possible, stay in the marriage and do their best to let the marriage work, since dysfunctional

family is seen in this finding as the probable cause of the poor parent-child relationship or the poor family upbringing. Meanwhile, parents should not distant themselves from their children for economic gains, since the children are their future. They should as much as possible get close to their children and provide them with the emotional care and support they need, especially before and during the adolescent stage where the children begin to form their own thoughts on sex matters. Parents should not leave the emotional needs and training of their children in the hands of school teachers and maid servants. They should be the main source of emotional needs, training and support of their children, as stated by the Good Books. In the event where there is divorce, the state should support the single parent to take care of the children. There should be programmed that support single parents by the government to cater for the needs of the children. The laws of the country should be strengthened to ensure that child support is provided by the men in a divorced marriage to help the children. The laws of the country should also take into consideration the emotional needs of the children in divorced marriage. Focus should not be placed on only the physical and economic needs of the children when deciding the custody of children in divorce cases. Prominent attention should also be given to the emotional needs of the children in cases of divorce, so that the children will not suffer emotionally and as a result engage in deviant behaviors such as LGBT.

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