

# Domestic violence against women in Kersa, Oromia region, eastern Ethiopia

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## العنف المنزلي ضد النساء في كيرسا، منطقة أروميا، شرق إثيوبيا

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**الخلاصة:** يشيع العنف ضد القرين الحميم في أرياف إثيوبيا. وتهدف هذه الدراسة إلى تقييم المعارف حول العنف المنزلي ومعدل انتشاره لدى النساء في كيرسا بمنطقة أروميا، وإلى التعرف إلى أنماطه ومقترفيه ومثريه. وقد أجرى الباحثون مسحاً مجتمعياً المُرْتَكزَ ومستعرضاً ومستنداً إلى المقابلات، شمل 858 امرأة في سن الإنجاب عام 2008؛ ووجدوا أن 39.7% فقط من النساء أبلغن عن أنهن يعتبرون العنف ضد النساء مشكلة في هذه المنطقة؛ كما أبلغت 166 امرأة (19.6%) عن تعرضها للعنف من القرين الحميم ولو لمرة واحدة في حياتها، وأن 70.3% من مقترفي العنف كانوا الأزواج. وكانت المعاناة من العنف لدى النساء ولو لمرة واحدة في حياتهن بتعلق وبمقدار يُعْتَد به إحصائياً بالانحدار من عرق الأمهارة، وبالمجموعة العمرية 30-49 عاماً. وكان 33 امرأة ممن تعرضن للعنف ولو لمرة واحدة في حياتهن (19.9%) قد أبلغن عن تعرضهن للعنف للسلطات المحلية القانونية. أما أسباب تخلف النساء عن الإبلاغ للسلطات القانونية فتعود إلى أنهن لا يردن فَضْح المشكلة، أو أنهن لا يعرفن إلى أين يتعين عليهن الذهاب للإبلاغ.

**ABSTRACT** Intimate partner violence is common in rural areas of Ethiopia. The aim of this study was to assess the knowledge and prevalence of domestic violence among women in Kersa district of Oromia region and identify the types, perpetrators and triggers for violence. A community-based cross-sectional interview-based survey was conducted in 2008 on 858 women of reproductive age. Only 39.7% of women reported that they recognized that violence against women was a problem in their area. Ever experience of violence by an intimate partner was reported by 166 women (19.6%) and 70.3% of the perpetrators were husbands. Ever experience of domestic violence among women was significantly related to Amhara ethnicity and age group 30–49 years. Only 33 (19.9%) women who ever experienced violence had reported it to the legal authorities. Women's reasons for failing to report to the legal system were not wanting to expose the issue and not knowing where to go.

## Violence domestique contre les femmes à Kersa dans la région d'Oromia (Éthiopie orientale)

**RÉSUMÉ** La violence exercée par le partenaire intime est courante dans les zones rurales d'Éthiopie. La présente étude visait à évaluer la connaissance et la prévalence de la violence domestique chez les femmes dans le district de Kersa de la région d'Oromia et à identifier les différents types de violence, les auteurs et les facteurs déclencheurs de cette violence. Une enquête transversale reposant sur des entretiens dans la communauté a été menée en 2008 auprès de 858 femmes en âge de procréer. Seules 39,7 % des femmes interrogées reconnaissaient que la violence contre les femmes était un problème dans leur district. Au total, 166 femmes (19,6 %) ont rapporté avoir déjà été victimes de violence par un partenaire intime et 70,3 % des auteurs étaient leur époux. L'expérience de la violence domestique chez les femmes était fortement associée à l'ethnie Amhara et au groupe d'âge des 30–49 ans. Seules 33 femmes (19,9 %) ayant déjà subi des violences avaient informé les autorités légales. Les femmes qui n'avaient pas informé les autorités donnaient comme raison le fait qu'elles ne souhaitaient pas révéler le problème ou ne savaient pas à qui s'adresser.

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## Introduction

In recent years, the international community has increasingly recognized violence against women as a significant human rights and global health issue. Studies have found that it occurs in all geographic regions, countries, cultures and socioeconomic classes, with some surveys showing that women in developing countries experience higher rates of violence than those in developed countries [1].

According to a World Health Organization (WHO) multi-country survey in 2000–03, 30%–54% of women in Bangladesh and provinces of Ethiopia, Peru and Tanzania reported that they had experienced violence and 55%–95% of physically abused women had never sought help from formal agencies. Instead, women reached out to family and friends. Women generally seek help only when violence is severe. According to WHO the highest current rate of violence was in rural Ethiopia where 54% of women have experienced intimate partner violence [2]. Literate rural women who were married to an illiterate spouse had the highest odds of physical harm, and community-based studies in Ethiopia indicated that 50%–60% of women experienced domestic violence in their lifetime [3,4].

The aim of the current study was to assess the prevalence of domestic violence against women in Kersa district of Oromia region, Ethiopia, and the types, perpetrators and triggers of violence. Few studies have been conducted so far in rural areas of the country and no previous studies were conducted in our study site. It was hoped that the study would help to identify the scope of the problem and act as a stimulus for further research in rural areas, where access to health information and dissemination are the basic challenges due to the scarcity of health care professionals and community workers.

## Methods

### Study design and setting

A community-based, cross-sectional study design was used. An interviewer-administered questionnaire was used in a house-to-house survey conducted in Kersa district, East Harge, Oromia region on 858 women of reproductive age from January to February 2008. This study site was selected because it is part of the field research site of the Kersa Demographic Surveillance and Health Research Centre and various projects are being undertaken on different health-related topics in Kersa district.

### Sample

The study subjects were recruited from the source population in Kersa based on their age. The study was conducted in 12 rural and urban *kebeles*/localities using a sample proportion to the size of the households in each *kebele*. Study households were selected for home visits from each *kebele* by systematic random sampling from a random starting point. The subsequent households were selected based on the household interval in the *kebele*, which was determined by dividing the total number of households by the required sample size. In each household one woman aged between 15–49 years was interviewed. If there were no eligible women in the selected household, the next household was visited. If more than one eligible female was found in the household, the woman with a husband was interviewed and if more than one married woman was found in the house, a lottery method was used to determine the woman to be interviewed. If the eligible member of the household was not present during the visit, a re-visit was arranged. If the re-visit was not possible the next household was selected.

### Data collection

A questionnaire was specially designed for the study by the research team. The

validity and reliability was checked for appropriateness and consistency. The questionnaire addressed the women's knowledge about domestic violence, their ever experience of violence, the common types of violence that they considered severe, the main perpetrators as well as trigger factors for violence and reporting to the legal system when a violent incident occurs. The questionnaire was developed first in English and was then translated back into the local language (Amharic) for use in the survey. It was structured in a way that the respondents could respond easily. All the questions were closed-ended, and the woman selected 1 or more responses from the list of 4–5 choices. The questionnaire was then translated from English back into the local language (Amharic) and the translated Amharic version was administered.

To complete the questionnaire data collectors made house-to-house visits and conducted interviews with the selected women in their homes. Care was taken that the women could respond freely. The women were given assurances about the confidentiality of their responses and that no information would be shared with third parties except the investigators and verbal informed consent was obtained before administering the questionnaire. Data collectors were recruited who had completed high school education and were trained using demonstrations and role play and in a pilot test. The collected data were checked on a daily basis for completeness and appropriateness.

Ethical clearance for the study was obtained through the ethical committee of Haramaya University. An approval was secured from the local authorities and verbal consent was obtained from participants before the interview. To preserve confidentiality the respondents were not identified on the questionnaires.

## Data analysis

The collected data were analysed using SPSS, version 16.0. Proportions, chi-squared test and odds ratios and 95% confidence intervals (CI) were used to describe the data and  $P < 0.05$  was considered statistically significant.

## Results

### Demographic characteristics

The study was conducted on 858 female participants. Table 1 shows their demographic characteristics. The majority of the study participants were Muslims, illiterate and married (95.2%, 84.3% and 89.4% respectively). A total of 849 women agreed to be interviewed concerning violence and related issues.

### Women's awareness of intimate partner violence in their community

Only 337 of the 849 women (39.7%) recognized that violence against women was an issue in the area. These women were asked about their perceptions of how violence against women was expressed, regardless of their personal experience. To 83.4% of these women it meant physical harm and to 65.3% it included verbal insults (Table 2). When asked about the most common forms of violence against women being practised in their community 55.2% reported that physical harm/beatings was the most common form, followed by verbal insults (30.9%).

### Women's experiences of intimate partner violence

Of the respondents, 166/849 (19.6%) had experienced violence from an intimate partner/close relative; the majority (70.3%) of the perpetrators were husbands and 27.2% were other relatives. Violence was statistically associated with being of Amhara ethnicity ( $P = 0.031$ ) and Muslim religion ( $P = 0.019$ ) and age group 30–49 years ( $P = 0.05$ ). Women who had a radio in the

**Table 1 Sociodemographic characteristics of the study sample of women ( $n = 858$ )**

Variable	No. <sup>a</sup>	%
<b>Age (years)</b>		
15–19	39	4.8
20–24	113	14.0
25–29	153	19.0
30–34	154	19.1
35–39	131	16.3
40–44	100	12.4
45–49	35	4.3
50+	80	9.9
<b>Religion</b>		
Muslim	811	95.2
Orthodox Christian	34	4.0
Protestant Christian	7	0.8
<b>Educational level</b>		
Cannot read/write	723	84.3
Read and write	52	6.1
Primary (grade 1–8)	49	5.7
Secondary (grade 9–12)	22	2.6
Tertiary (grade 12+)	12	1.4
<b>Marital status</b>		
Single	31	3.6
Married	761	88.7
Divorced	10	1.2
Widowed	49	5.7
<b>Occupation</b>		
Housewife	800	94.6
Government/NGO	7	0.8
Student	2	0.2
Street trader	15	1.8
Farmer	19	2.2
Other	3	0.4
<b>Ethnicity</b>		
Oromo	821	95.7
Amhara	36	4.2
Gurage	1	0.1

<sup>a</sup>Data were missing in some categories.  
NGO = nongovernmental organization.

house had a higher risk of experiencing violence than those who had no radio for information ( $P < 0.001$ ). While more women living in rural areas had ever experience of violence than those in urban areas the association was not statistically significant (Table 3).

All the 166 women (100.0%) who ever experienced violence had

encountered verbal insults, 85.5% had been physically harmed and 34.3% had suffered gestures and non-verbal insults. Given a list of triggers for violence in a closed ended question women who ever experienced violence indicated that the main triggers for violence from their husband or intimate partner were when they failed to finish assignments given to

**Table 2 Women's perceptions of types of violence ever experienced and the most common forms of violence against women in Kersa district (n = 337)**

Type of violence	Ever experienced <sup>a</sup>		Most commonly experienced	
	No.	%	No.	%
Physical harm	281	83.4	186	55.2
Verbal threats	220	65.3	104	30.9
Physical and verbal combined	152	45.1	23	7.0
Sexual harassment/violence	140	41.5	10	3.0
Gestures and non-verbal threats	124	36.8	7	2.1
Other	5	1.5		

<sup>a</sup>Several forms of violence could be reported.

them and when they went out to work without the husbands' or partners' knowledge (Table 4). Respondents were also asked about the reporting of incidents. Only 33 of these women (19.9%) had reported their case to the legal authorities. Women's reasons for not reporting violence were not wanting to expose the issue (68.7%) and not knowing where to go with the problem (22.9%) (Table 4).

## Discussion

Violence against women undermines women's right to dignity and degrades their self-esteem. It also reduces the productivity of women. In this study in a rural area with a low literacy rate in eastern Ethiopia only two-fifths of participants (39.7%) reported that they recognized the existence of violence against women in the area. Those

women willing to explain the forms of violence mentioned physical harm such as beating as the most common, followed by verbal violence and physical and verbal together.

Only one-fifth of the women interviewed (19.6%) reported ever experiencing intimate partner/close relative violence. Yet it is known that domestic violence is a common practice in Ethiopia, especially in rural settings. In rural Ethiopia a study conducted in the year 2005 revealed a higher prevalence of domestic violence in the community (54%) [2]. In another study in north-west Ethiopia the lifetime prevalence of all forms of domestic violence was 50.8% [4]. Our figure for the prevalence of ever experience of violence is also much lower than the recent study conducted in 2010 in another part of the country in which 32% of the women had experienced physical violence during the previous 12 months [3]. These differences may be due to variations in cultural

**Table 3 Women's ever experience of violence by sociodemographic variables**

Variable	Total	Ever experience of violence				P-value <sup>a</sup>
		Yes		No		
		No.	%	No.	%	
<b>Ethnicity</b>						0.031
Oromo	810	164	20.2	646	79.8	
Amhara	38	2	5.3	36	94.7	
<b>Religion</b>						0.019
Muslim	797	161	20.2	636	79.8	
Christian	45	5	11.1	40	88.9	
<b>Age (years)</b>						0.05
< 20	82	8	9.8	74	90.2	
20-29	219	49	22.4	170	77.6	
30-39	284	71	25.0	213	75.0	
40-49	130	23	17.7	107	82.3	
50+	80	15	18.8	65	81.3	
<b>Residence</b>						0.69
Urban	103	16	15.5	87	84.5	
Rural	754	150	19.9	595	78.9	
<b>Radio ownership</b>						0.001
Yes	424	107	25.2	317	74.8	
No	409	59	14.4	350	85.6	

<sup>a</sup>Chi-squared test

**Table 4 Women's' experiences of type of violence, their views of triggers to violence and the reasons for not reporting the incidents to the legal authorities (n = 166)**

Variable	No.	%
<b>Type of violence ever experienced</b>		
Verbal threats	166	100.0
Physical harm	142	85.5
Both physical and verbal	59	35.5
Gestures and non-verbal threats	57	34.3
Sexual harassment	25	15.1
Other type	4	2.4
<b>Triggers for violence</b>		
Went out of home without his knowledge	166	100.0
Failed to finish duties he gave me	166	100.0
Accused of neglecting care of children	157	94.6
Accused of not feeding him properly	104	62.7
Raised the issue of divorce	78	47.0
Sexual incompatibility	67	40.4
Suspected of being unfaithful	51	30.7
Raised the issue of family planning	48	28.9
Other reason	18	10.8
<b>Reasons for not reporting violence to legal authorities</b>		
Fear of exposing the issue	114	68.7
Fear of additional violence	90	54.2
Didn't know where to go	38	22.9
Fear of divorce	36	21.7
Cultural tradition to accept it	30	18.1
Other reason	96	57.8

norms, illiteracy and fear of disclosing cases in different areas. Local policies, including the local women's affairs office, might also vary in the extent to which they promote women's rights and how they handle and treat victims, so that women may be prevented from reporting if they are not getting adequate information.

The majority of the perpetrators of violence in our study (70.3%) were husbands, which is in line with other studies [3,5]. The low prevalence of violence in the study location might be associated with male dominance and sociocultural norms that seek to hide family matters or that view domestic violence as normal practice. This is supported by data from Egypt, in 2005 which show that 95% of women believed that it was acceptable

to be beaten by a husband or intimate partner [6].

In this study, verbal threats (100.0%) and physical assault (85.5%) were the leading forms of violence against women. Findings in a study conducted in Brazilian towns and in rural Ethiopia have shown that physical and psychological violence can cause psychiatric problems (such as depression) and trauma [2,7,8]. Psychological violence was not addressed in this study. In the previous study in north-west Ethiopia, in which the lifetime prevalence of domestic violence was higher than ours, the prevalence of physical violence was only 32.2% [4]. This is very low compared with our study. This might be due to victims' fear of exposing the issue and reporting incidents.

According to the women the most common triggers for violence were when they were blamed by their husband/partner for failing to complete their duties (100.0%), of going outside the home without his knowledge (100.0%) or neglecting to take care of their children (94.6%), although 28.9% of women reported that violence occurred when the perpetrator thought he was not being fed properly. These justifications for violence clearly reflect the views of husbands in this area as being the leaders of the household who do not allow their wives to do anything without their consent. In Peru the main reason for intimate partner violence was reported to be drinking alcohol. The prevalence of domestic violence was 76.8% for partners who were drinking alcohol and 25.0% for partners who were not drinking [9]. In similar studies, living in a rural area in a violent family as well as alcoholism have been found to be triggering factors for intimate partner violence in Ethiopia [4]. In Kersa, alcohol is rarely consumed, which might be related to religion, as 95.2% of respondents were Muslims. In Egypt a low educational level of the partner was associated with wife beating and the prevalence was reduced when both partners had secondary or higher education [10]. In our study the skewed distribution of educational level, with most women being illiterate (84.3%), did not allow us to study the association between education and ever experience of violence in our study area.

Seeking help and support from the legal system after the occurrence of violence was not actively used as a solution by women in this study, as barely 20% of women had reported violence to the legal authorities. Women who did not report violence said that they did not have knowledge about where to go or they did not want to expose the incident. In similar studies in Peru, Tanzania and Ethiopia between 55% and 95% of physically abused women had

never sought help from formal agencies [2,6]. According to the WHO 2000–03 report on violence against women, incidents were often not reported to the authorities, even in cases where women had suffered from major complications such as bleeding and abortion from physical violence or even attempted suicide [2]. Some legal provisions are in place in Ethiopia to protect women. However, women need to be encouraged and facilitated to report violent incidents to the legal system [11].

## Conclusions

Only one-fifth of the women in this survey reported ever experience of domestic violence, most commonly verbal insults and physical violence from their husband when they were blamed for leaving the house without permission or neglecting their duties. Women who experienced violence kept it to themselves, and the great majority did not appeal to the courts. All the concerned bodies should work together with the

local and regional women's affairs offices in Ethiopia to protect women against future harm.

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