

ORIGINAL ARTICLE

## Determinants of Violence Against Married Women in Selected Zones of Amhara Region, North West Ethiopia

Eyayu Kasseye Bayu <sup>1</sup>

### Abstract

**Background:** Violence against women is one of the most pervasive problems affecting women throughout the globe. This study aimed to identify the prevalence and determinants of violence against married women in five zones of Amhara Region of North-Western Ethiopia.

**Methods:** A mixed research approach with cross-sectional research design was employed. Questionnaire, interview and FGD were the instruments. The collected data were analyzed through descriptive statistics and binary logistic regression model.

**Results:** The result demonstrated that, 236 (56.9%) of the respondents have experienced violence against women, while 179 (43.1%) have not experienced VAW since 2018/2019. The binary logistic regression results showed, that educational status of married women (can read and write; AOR = 0.047, 95 % CI [0.002-0.954], p = 0.047; primary education, AOR= 0.027, 95 % CI[0.01-0.543], p= .018; secondary education, AOR = 0.047, 95 % CI[0.02-0.923], p = .044; diploma = AOR= 0.016, 95 % CI [0.001-.362], p = .009; Degree and above, AOR = 0.066, 95 % CI[0.005-.976], p = .048; private employment, AOR = 0.160, 95 % CI[. 027-0. 936], p = .042; trade, AOR = 0.234, 95 % CI [0.054-1.012], p = 0.05; child-abuse, AOR = 0.242, 95 % CI[0.128-458] , p = 0.000; money for family, AOR = 0.333, 95 % CI[0.171-647], p = 0.001; family disagreement, AOR = 0.205, 95 % CI [0.099-424], p = 0.000; limitations of money, AOR = 0.503, 95 % CI [0.249-1.016], p = 0.056; gender norms, AOR = 0.57, 95 % CI[0.275-1. 010], p = 0.053 and gender roles assignment, AOR = 0.491 , 95 % CI[0.245-0.984], p = 0.045) were variables that determined VAW in Amhara region.

**Conclusion:** Violence against women was high. The government should play a significant role in publicizing the incidence of violence against women in the region.

**Keywords:** Violence against women; Married women; Ecological model; Amhara region

---

<sup>1</sup> University of Gondar, Department of Gender and Development Studies, Ethiopia;  
Email:eyasukassa21@gmail.com;



## 1. Background and Justification

Violence against women is a well-recognized public health problem and a gross violation of human rights, which is a major obstacle to achieve the sustainable development goals worldwide (WHO, 2005). It is estimated that one in three women will be raped, beaten, coerced into sex or otherwise abused in her lifetime. Hence, reducing violence against women<sup>2</sup> requires long-term, holistic and coordinated efforts of multiple stakeholders and sectors (USAID & UNICEF, 2006).

More than 20 % of women are reported to have been abused by men with whom they live. Mostly in Asia, approximately 60 million women are killed by infanticide, selective abortion, deliberate under-nutrition or lack of access to health care. More than 130 million women in Africa, Middle-East and Asia have undergone female genital mutilation and an estimated 2 million girls are at risk for undergoing the procedure each year (UNICEF, 2003). In another hospital-based study in Nairobi shows that, the prevalence of sexual violence was 61.5 %, while the proportion of physical assault was 38.5 % (Western, 2013).

A study conducted by USAID (2006) in three African countries on intimate physical violence shows, Ethiopia is a leading country by 50 %, followed by Tanzania and Namibia, 47 % and 31 %, respectively (Andualemet et al., 2014). Similar to this, in rural Ethiopia, 49 % of married women have ever experienced physical violence by an intimate partner, while 59 % have ever experienced sexual violence. The study also reported that, the majority of the perpetrators of intimate partner violence or violence against women were married (72.3%), and alcohol was a significant contributor (Oladebo et al., 2011). Till now, in Ethiopia, VAW is an issue that disproportionately affects women and girls of all ages, from all cultures and socio-economic backgrounds. It takes many forms, including rape, domestic violence, forced marriage, child marriage, exploitation and harassment, sexual violence and female genital mutilation. It has an impact on the physical, psychological and social well-being of women and girls. Although it is acknowledged as a fundamental violation of human rights and a constraint to development, hence, it is an endemic throughout Ethiopia (USAID, 2010). A WHO study found that, of 15 sites in ten countries representing diverse cultural settings, the proportion of ever-partnered women who had experienced physical or sexual intimate partner violence in their lifetime nears 71 % in Ethiopia. At least, one in five women reporting physical abuse had never before told anyone about it (Garcia-Moreno et al., 2005).

In Ethiopia, women and girls face physical, psychological and sexual abuses that undermine their health and ability to earn livelihoods; disrupt their social systems and relationships, and particularly for girls, rob them of their childhood and education. According to the Ethiopia Demographic Health Survey (EDHS, 2011), two of every three women (68%) and one of every two men (45%) believe that, wife-beating is justified under specific circumstances. The result also revealed that 41% of Ethiopian women aged 20-24 had been married before they reached 18 years of age, while 8% of those girls aged 15-19 were married before their 15th birthday (UN Women, 2016). The prevalence of violence against women includes domestic abuse, harmful traditional practices and general negative perceptions, attitudes and beliefs about women and their abilities and roles abound throughout Ethiopia (Care Ethiopia, 2008).

---

2 Article (1) of the United Nations declaration on the elimination of violence against women adopted in 1993 provides a context for defining violence against women or gender based violence, and it can be defined as: "Any act of gender-based violence that results in: physical, sexual, psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life cited in Ms Foundation for Women, 2010.

Violence against women is not only a deep rooted but also an accepted rather than a challenged problem in Ethiopia. The highest prevalence of domestic violence in all its forms is a result of the historical and/or cultural background of the problem in the country. Critical gaps in laws addressing domestic violence, the highly prevalent forms of violence against women and absence of sufficient criminal liabilities on perpetrators were the exacerbating factors for its prevalence (Megersa, 2015). Data on the prevalence of different harmful traditional practices indicates that, female genital mutilation/ cutting, abduction for marriage and early forced and child marriage constitute the most prevalent forms of violence against women that adversely affect millions of women in the country (UNICEF, 2015). A study finding demonstrated that, all forms<sup>3</sup> of violence against women have been observed in Ethiopia, in Amhara Region as well, (Bahir Dar town, Burayu, Bako woreda (administrative unit less than sub city/zone), and Gulele sub-city of Addis Ababa) though to varying degrees. There are mounting evidences that violence against women is a serious problem in African countries in general, and in Ethiopia in particular. A lot of research findings pinpointed the prevalence, forms of violence and the perpetrators of violence except for identifying the determinants. The previous finding also concentrated on harmful traditional practices rather than showing the ecological model of different contextual factors of violence. For instance, the findings of World Health Organization in 2000 and 2003 showed that nearly half (49 %) of ever-partnered women in Ethiopia have experienced physical violence by a partner in their lives; while 59 % reported sexual violence and 71 % reported having experienced either one or both of these two types of abuse (Djamba et al., 2015). The study findings show that early marriage is mostly common in Sub-Saharan Africa, and 13% of girls in Ethiopia are married by the age of 15 years and 66% of them by the age of 18 years. Violence against women was 82 %, 79 % and 64 % in Amhara region, Tigray, and Benishangul Gumuz region respectively (Alemu, 2008). The factors of violence against women is left, where their studies is conducted in different regions. The study findings of Johnson et al., (2007); Megersa (2015); Iliyasu et al., (2011); Adinew and Hagos (2017) revealed that gender-based violence may have several forms that can affect individuals much more than sexual assault and rape; the magnitude of violence is not deeply recognized and studied.

The author is also motivated and strongly argue that, violence against women is a serious problem in the region in addition to variability of forms and degrees. Basically, violence against women is varied across geographical areas, target groups and sociocultural context of a certain area. Hence, this study incorporates all of the gaps through taking different Woredas (an administrative unit composed of small administrative units) from five selected zones of the region, which has different sociocultural features that prevent and respond to violence against women. Additionally, this study has taken married women as the main unit of analysis, where women living with male counterparts increase the exposure to domestic violence as compared to women in others marital status group. The author also disclosed that identified contextual variables which are not proved yet in this particular region would contribute to scientific knowledge and further understanding as well as pave the way for target prioritization and intervention. Therefore, this study is aimed to identify the prevalence and its determinants of violence against married women in Amhara region.

---

3 This includes, wife-beating, sexual harassment, marital rape, threatening, scalding and multiple marriage, men denying the existence of children born out of wedlock, refusal to share family property with women after divorce, controlling women's fertility (not allowing women to use family planning), restricting women's movement and advancement in education, and neglecting women and girls as indicated in Care Ethiopia, 2008.

## 2. Literature Review

Violence against women (VAW) is a form of discrimination against women, which impairs or nullifies the enjoyment by women of human rights and fundamental freedoms. The numerous international and regional conventions as well as policy documents developed over the past four decades to protect women's human rights through the prevention of VAW (UN Women, 2015). VAW includes, but is not limited to physical violence, slapping, kicking, hitting with a fist or other object or use of weapons. Emotional violence includes systematic humiliation, controlling behavior, degrading treatment and threats of harm. In addition, sexual violence includes forcible sexual intercourse, coerced sex by intimidation or threats or being forced to take part in sexual activities that are considered degrading or humiliating. Moreover, economic violence includes offenses, such as restricting access to financial or other resources with the purpose of controlling or subjugating a person (Andrew, Mary and Sarah, 2004).

In a similar manner, violence against women is a fundamental violation of women's rights. As the World Health Organization (2013) report showed, 30 % of women worldwide have experienced either physical and/or sexual intimate partner violence. Globally, as many as 38 % of murders of women are committed by intimate partners. Women who have experienced domestic violence report higher rates of major health problems: 16 % are more likely to have a low birth-weight baby, 32 % are likely to have an abortion, 32 % are likely to experience depression and 24 % are likely to acquire HIV as compared to women who have not experienced partner violence. According to UNICEF (2014b), early one third (30 %) of all women who have been in relationships have experienced physical and/or sexual violence by their intimate partners. One in three adolescent girls aged 15-19 years worldwide have been victims of emotional, physical or sexual violence committed by their husbands or partners at some point in their lives. Globally, 7 % of women have been sexually assaulted by someone other than a partner (WHO, 2013). A report of 28 European Union countries showed that, 43 % of women experienced psychological violence by an intimate partner (European Union Agency for Fundamental Rights, 2014). Similar patterns are found when men are asked about their perpetration of VAW. A study conducted in nine sites across six countries in Asia and the Pacific showed that between 30 % and 57 % of ever partnered men reported having perpetrated physical or sexual violence in their lifetime, between 10 % and 62 % of men reported ever having perpetrated sexual violence against women and between 41 % and 83 % of men reported having ever used at least one emotionally abusive act against an intimate partner violence (Fuluet al., 2013).

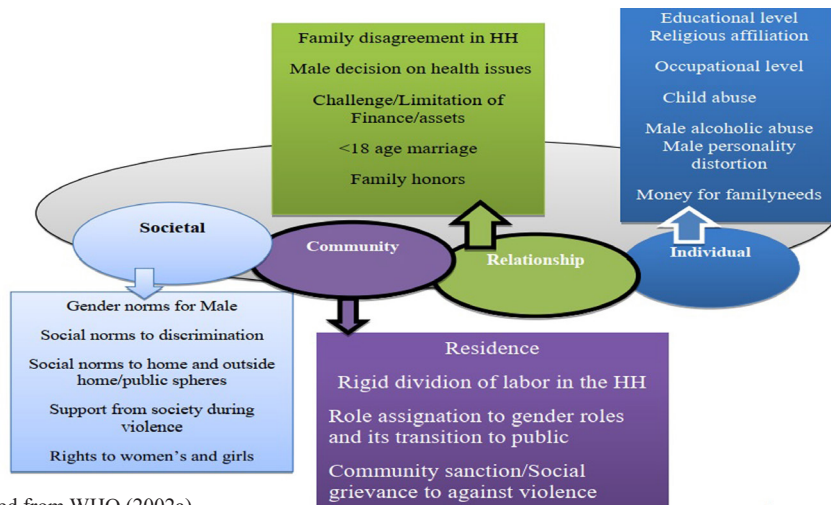
Across a sample drawn from eight low and middle-income countries, 31 % of men reported having a perpetrated physical violence against an intimate partner in their lifetime, ranging from 17 % to 45 % between countries (Fleming et al., 2015). Violence occurs across the life-course of women. It is most likely to occur among women aged 18-44, with women aged 18-24 years being particularly vulnerable (European Union Agency for Fundamental Rights, 2014; Australian Bureau of Statistics, 2013). Among girls, partner and other forms of sexual violence are most likely to take place between the ages of 15 to 19 (UNICEF, 2014b). In the aforementioned study conducted in the Asia-Pacific region, nearly half of all men reporting as they had perpetrated rape claimed to have done so for the first time before the age of 20 (Fuluet al., 2013). Hence, violence is experienced by women across the social spectrum and many factors contribute to its perpetration (United Nations, 2012a). A study conducted in Africa cited in Oladepo et al., (2011) asserted that 80% of women in Nigerian higher institutions reported sexual harassment as their greatest challenge in their attempt to successfully complete their academic goals (Wende, 2014). A number of studies indicate that gender based violence and / sexual violence is

a pervasive and serious problem at all levels of education and across all nations (Joseph, 2015). Violence or sexual violence<sup>4</sup> is the most common and socially tolerated women’s human rights violation that affects women’s without considering age, religion, race, and economic situation; it remains a serious public health and human rights issue for decades in Ethiopia (Bekele et al., 2015). From those listed forms of sexual harassment, touching or pinching breasts/buttocks/ genitals account the highest percent, which is 68%. The finding of this research on sexual harassment (78.1%) is higher than from cases reported among Bahirdar private college (37.8) and Bahirdar University female students (35%) (Shimekaw,2013) in Amhara region.

**2.1 Conceptual Framework**

Principally, violence against women can be conceptualized as a ‘relational vulnerability’, reflecting women’s subordinate status within hierarchical gender relations and the dependencies associated with it. While such violence can take many different forms; however, this study consists physical, sexual, psychological and economic violence as commonly called violence against women (Kabeer, 2014). This study argues that, violence against women was until very recently invisible in the human rights discourse and absent from concerns with human development. Yet such violence infringes on women’s fundamental human right to bodily integrity and freedom from fear, jeopardizes their basic human capabilities, and as a result undermines their ability to participate as full citizens in the socio-economic life of their community (Kabeer, 2014; WHO,2002 a). Individual level factors include biological and personal history factors among both victims and perpetrators, where as relationship level factors consist proximal social relationships, including relations with friends, peers and family. In addition, a factor at a community level is community context in which social relationships are embedded including schools, workplaces and neighborhoods.

An Integrated Ecological Model Framework analysis for VAW Moreover, at societal level,



Source: Adopted from WHO (2002a).

4 Sexual violence is any act, attempted or threatened, that is sexual in nature and is done with force or without force and without consent of the person/survivor. This includes acts of forcing another individual, through violence, threats, deception, cultural expectations, weapons, or economic circumstances, to engage in behaviour against his or her will.



larger societal factors that “create an acceptable climate for violence, reduce inhibitions against violence create a sustain gap between segments of society (WHO, 2002:13). The author argues that the estimates of incidence suggest that it varies considerably across countries and by social groups. Hence, factors that lead to violence against women operate at individual, relational, community and societal levels, and help to explain some of this variation via using an integrated ecological model framework analysis at all.

### **3. Methods and Materials**

#### **Study Sites and Target Population**

This study was conducted in five selected zones (namely:North Gondar, East Gojjam, South Gondar, North Wollo and Awi special zone) of Amhara Region in Northern Ethiopia to identify the prevalence and determinants of violence against married women in Amhara Regional State. The target population of this study is all married women who have been living in Amhara region since 2018/2019, where all women have no similar characteristics and experience of violence.

#### **Research Method and Design**

The study employed a mixed research method in order to avoid the drawbacks that each method suffers. The data collection involved gathering both numeric information (questionnaire) as well as text information (interviews), so the final database represented both quantitative and qualitative information. In mixed research, the qualitative and quantitative parts of a study could be conducted concurrently or sequentially to address a research question or a set of related questions (Stephen and Kasim, 2015). Taking this into account and considering the nature of this study, cross-sectional explanatory research design was used to complement the quantitative results with the qualitative one.

#### **Data Collection Instruments**

Survey questionnaires, interviews, key informant interviews and FGDs were the data collection instruments used to gather primary data as shown below:

**Survey Questionnaire:** Both closed and open-ended questions were prepared from an integrated ecological model analysis framework standard to identify the prevalence and determinants of violence against married women. It was prepared in English and translated into Amharic (the respondents’ local language). Before the questionnaire was administered, the draft was evaluated and vague items were removed. A pre-test was conducted to detect any weakness in design and instruments and to provide alternative data from sample respondents as well as to ensure the items in the questionnaires bear the same meaning to all married women and to assess the average time required to fill the self administered questionnaire. To know the validity and reliability of the questionnaire, Chron-bach alpha was employed. Hence, the pilot test was carried out with randomly selected respondents and Chron-bach alpha value is 0.08, which is reliable.

**Interview:** Semi-structured interviews were employed to obtain qualitative data about the prevalence of violence against married women in the Amhara Region. The interview was also employed to collect the data about the contextual factors of VAW in Amhara region. The interviewees have been selected purposively from married women in the study area. With the consent of the participants, they were recorded through note-taking and tape recordings. The number of participants for interview was determined based on the data saturation for the required information. Hence, ten married women were interviewed

to supplement the quantitative results.

**Focus Group Discussions (FGD):** A five focus group discussion was carried out in the selected zones in Amhara region involving seven to twelve participants. The collected data about violence against married women in the focus group discussion were used for triangulation purposes with the household survey and interviews. The group discussions were conducted in Amharic since it is the medium of communication in the area, and an assistant active note-taker was given detailed orientation. The researchers mostly acted as a moderator during the discussions. Notes taken from a group discussion were summarized and any key and important issues arising in one group discussion were used for further discussion in the following group discussions.

**Key Informant Interviews:** A key informant interview is an attempt to explore facts on the grounds of a rational approach, to include key informant interviews by involving selected groups of individuals who are likely to provide needed information, ideas and insights on the proposed research. The fifteen informants were selected from Woreda (An administrative unit consisting many small administration units) based on the position they hold: health office officials, zonal health department officials, regional health bureau officials, health extension workers from selected zones, regional bureau of women and children affairs officials, zonal women and children affairs department officials, administrative unit office of women and children affairs officials were included to obtain the data on the existence, prevalence of violence against married women and its causal factors. The time and place for interview was decided by the key informants themselves and the majority of interviews were held in the place they selected.

### **Sampling Techniques, Procedures and Sample Size Determination**

As the study also targeted both quantitative and qualitative methodologies, probability and non-probability sampling techniques were employed to select the respondents and participants. The researcher employed multi-stage sampling techniques. In the first stage, random sampling was used to select five zones (North Gondar, East Gojjam, South Gondar, North Wollo and Awi special zones) out of the 13 zones of the Amhara region. In the second stage, a total of 10 Woredas (An administrative unit consisting of many Kebeles (small administrative units): two from North Gondar, three from East Gojjam, two from South Gondar, two from North Wollo and one woreda from Awi special zone were selected randomly in order to represent zones on the basis of size of woredas' in each zone. Thirdly, the systematic random sampling technique was applied to select sample respondents from each kebele among woredas based on the lists obtained from the respective Kebele's (small administrative unit) office. Then, the proportional systematic sampling procedure was employed to select married women from selected small administrative units since there are women in male-headed and female-headed households. Here, married women were selected from five zones irrespective of woredas and small administration units proportionally. The formula is most commonly used for a questionnaire survey studies for sample size determination when the population is large, indefinite and the needed representative sample is to analyze the proportion (Amugune, 2014).

$$n_0 = \frac{z^2 pq}{e^2}$$

Accordingly, the researcher would like to use 95 % confidence level ( $z = 1.96$ ), the maximum variability among the population (50 %) and a 5% margin of error/precision by looking at expected criteria. When applying the formula,

$$n = \frac{(1.96)^2 \cdot 0.5(1-0.5) + 3.8416 \cdot 0.5 \cdot 0.5}{(0.05)^2} = 384.$$

The researcher expected 10 % non-response rate to accomplish this study. So, 38 respondents were included. Therefore, the required sample size for this study was 422 married women. However, seven questionnaires were not returned for further analysis. Therefore, married women is the unit of analysis, and 415 questionnaires were used in the actual analysis.

### **Data Analysis Techniques, Model specification and Model of Goodness of Fitness (GOF)**

Both quantitative and qualitative data analysis techniques were employed. For the quantitative method, upon completion of the data collection, the data were coded, edited and entered into the SPSS (Statistical Package for Social Science) version 20, then analyzed through descriptive statistics and binary logistic regression model. The Chi-square test was also used to examine the association of the categorical variables with the dependent variable. i.e  $p < 0.05$ . The qualitative data which are collected through key informant interviews, focus group discussions and interviews were textually analyzed than thematic analysis to complement the statistical results.

The binary logistic regression model has become the preferred tool for predicting dichotomous outcomes in the social sciences because it is more flexible than any other model (Hulsizer and Woolf, 2009). Having such cases, the Omnibus test of model coefficients had a chi-square value of 152.112 with 32 degrees of freedom and highly significant at  $p < 0.05$  i.e. 0.000, denoting that the predictor variables selected had a combined effect in predicting the experience of violence against women to health problems. The predictive efficiency of the model displayed that from all samples included in the model, 84.8 % respondents were correctly predicted. The sensitivity of predicted value in the model (correctly predicted women who experienced VAW) and specificity of predicted value (correctly predicted women who were not experienced VAW) were found to be 54.7 % and 93.9 %, respectively. Therefore, the logit model is effective in describing the outcome variable. Principally, Hosmer and Lemeshow test with chi-square value of 4.170,  $df = 8$ , the value of 0.841 which is significant at  $p > 0.05$  vindicated that it has goodness-of-fit. Also, model summary disclosed that (Pseudo  $R^2 = 0.469$ ), which means the outcome variable explained by 47 % via independent variables).

### **Ethical Considerations**

The issue of ethics is a critical concern in research. Different ethical principles were considered throughout data collection procedures. Firstly, the investigator obtained permission letters from the University of Gondar research and community service affairs vice president's office, regional health bureau, bureau of women and children affairs, the authority of administrators in each district and health office. Secondly, consent was ensured with the participants, respondents and their parents /guardians to gain permission



in order to conduct discussions and complete or fill questionnaire ethically via describing the objective of the study and using their local language enabling every participant and respondent to understand and be aware that all collected data from them was used only for academic purpose. Additionally, ethical clearance was attached to the cover page of the questionnaire to clarify the purpose of the study and that data would be handled confidentially. Participants and respondents were also informed that the identity of the participants and respondents should not be written in the study document. Suitable places and time were chosen according to their suggestions. The researcher gave the guarantee of the right to participate voluntarily and withdraw at any time they want during discussions. Furthermore, the key informants have been contacted by showing the letter of cooperation, which was written by the authority and institution. The researcher paraphrased all literature and acknowledged properly, which have been consulted in this study.

## **4. Results**

The result and discussion part of this research deals with prevalence and determinants of violence among married women in the Amhara Region of Ethiopia in 2018/2019. It also includes the demographic, individual, relational factors, and community and societal factors of the respondents. Towards knowing the relationship between the categorical explanatory variables (demographic, individual, relationship, community and societal factors) and the dependent variable (violence against women), chi-square test was employed. The determinant variables of violence against married women were analyzed through binary logistic regression model to show the cause-effect relationship of independent variables with dependent variable in the study.

### **4.1 Demographic Characteristics of Respondents in the Study area**

Regarding the age of respondents, the minimum age was 19 years and the maximum age was 45 years, the range of the age implies 26 years with the standard deviation of 9.514. The data showed, the age of the respondents was concentrated in the middle labor force or the adult age group (32). The study also demonstrated that the respondent's age of first marriage with a mean of 20.5 years and the maximum of 40 years. In case of duration of marriage, respondents stayed in their marriage for a minimum of 1 and maximum of 40 years. The study also showed that, respondents being willing to have a maximum of 15 children and an average or mean of 7.5. Similarly, respondents' response showed their actual number of children with the mean of 6 and maximum of 12 children (See Table 1). The above study findings inferred that, respondents were above the age of 18 years with the age of first marriage at mean of 31, the actual number of children with mean of 6, but they are willing to have a large number of children in the meantime because they considered having children as an asset.

Table.1. Respondents’ response to their age, age of first marriage, duration of marriage, number of desired children and actual number of children (N = 415)

S/n	Options	Minimum	Maximum	Mean	Range	Std. Deviation(SD)
1	Age	19	45	32	26	9.51466
2	Age of First marriage	22	40	31	18	4.79544
3	Duration in marriage	1.00	40	20.5	39	10.12325
4	The number of children for future	0.00	15	7.5	15	2.27364
5	Number of children	0.00	12	6	12	2.10551

Source: Obtained from the survey data, 2019

The majority of the respondents (59 %) lived in rural areas, while the rest 41 % live in urban areas. This might influence women to experience violence. In line with this, the chi-square test showed a statistically significant association between women’s place of residence and violence against women with an alpha value of 0.006, which is significant at  $p < 0.05$ . Table 2 also shows, a significant number of respondents (89.6%) were orthodox, few (0.7) were protestant, 9.4 % and 0.2 % were muslim and catholic, respectively. The vast majority of respondents are orthodox religion followers. The chi-square test result has shown, there was no statistically significant association between women’s religious affiliations and violence against women with alpha value of 0.572, which is insignificant at  $p < 0.05$ .

Table.2 Respondents’ response to their residential site & religious affiliations (N = 415)

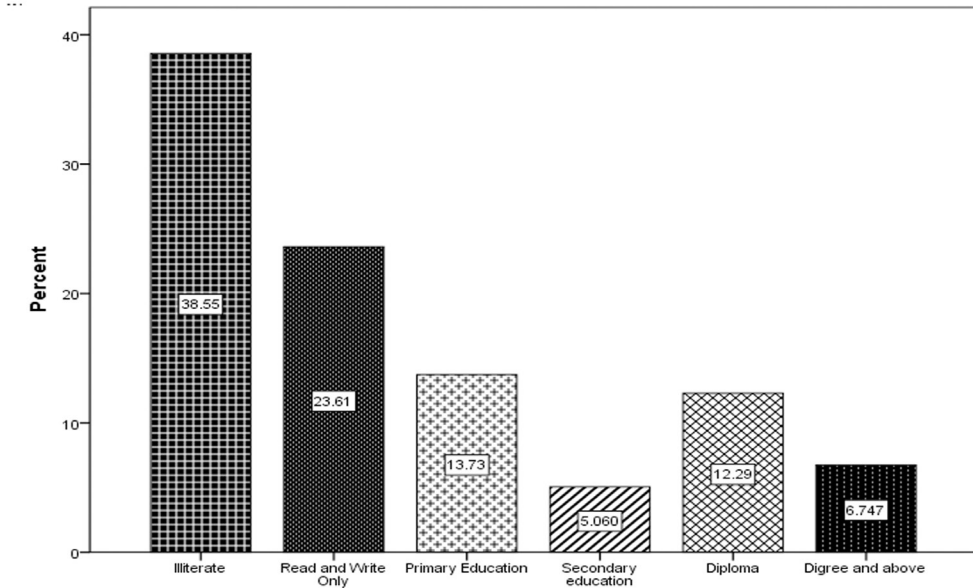
Variables	Options	Frequency	Percentage	$\chi^2$
Residence	Rural	245	59	0.006
	Urban	170	41	
Religious affiliations	Orthodox	372	89.6	.572
	Protestant	3	0.7	
	Catholic	1	0.2	
	Muslim	39	9.4	

Source: Obtained from the survey data, 2019

### Educational Status of the Respondents in the Study Area

As can be seen in Figure 1, the majority of the respondents (38.5%) were illiterate; 23.61 % of them could read and write; 17.3 % had a primary education and 5% of the respondents had secondary education. The study findings for educational status showed, 12.2 % had a diploma and 6.7 % degree & above. This shows that a significant number of respondents were not literate, which hinders the ability of preventing and responding to violence against women. Women with a diploma or degree and above are less likely victimized by violence against women than women with no formal education are. In a sense that, women who have no education are more likely victimized by VAW due to lack of awareness and knowledge to prevent and respond to VAW. Likewise, the absence of education hinders the

improvement of health (physical, sexual, mental or psychological and social-well being) of women in the study area. In order to see whether there is an association between women’s educational status and violence against women, a chi-square test was employed, and it signified that there is an association between educational status and VAW ( $\chi^2 = 13.721$ ,  $df = 5$ ,  $p = 0.017$ ,  $p < 0.05$ ).



Figure,1. Respondents’ educational status (N = 415) Source: Survey data, 2019

### Availability of Work and Current Working Conditions of Respondents in the Study Area

Regarding availability of work, the majority of the respondents (54.5 %) had their own work, while 45.5% of the respondents were unemployed. This shows that a significant number of the respondents were employed to sustain their daily life and as means of income generation for family consumption in a given period of time. The chi-square test showed that there was no statistically significant association between women’s own work availability and their victimization by VAW with alpha value of 0.163, which is insignificant at  $p < 0.05$ .

From Table 3, it can be seen that, more than half of the respondents (46.5%) were farmers, while 14 % of the respondents were concentrated in government employment. The study also showed that, 3.6 %, 3.6 % and 5.8 % were private employees, housewives and daily laborers, respectively. 10.4 % and 16.1% of the respondents were traders and employed in other tasks, respectively. From the above findings, it can be inferred that, the majority of the respondents were concentrated in farming working condition. However, a few number of respondents were employed as a housewife and a daily laborer in the study area. The chi-square test also showed that, there was a statistically significant association between current work type and VAW with alpha value of 0.041, which is significant at  $p < 0.05$ .

Variables	Options	Frequency	Percentage (%)	$\chi^2$
Do you have your own work at this time?	Yes	226	54.5	0.163
	No	189	45.5	
	Farmer	193	46.5	
	Government employment	58	14.0	
Current working status	Private employment	15	3.6	.041
	House wife	15	3.6	
	Daily laborer	24	5.8	
	Trade	43	10.4	
	Others	67	16.1	

Source: Obtained from survey data, 2019

## 4.2 The Prevalence of Violence against married Women in Amhara Region of Ethiopia

Still, violence against women has an impact on the overall reproductive health and human rights of women in Amhara region. In the world, because of violence against women, many women face reproductive health problem and gross violation of human rights at an alarming rate. As demonstrated in Table 4, 179 (43.1%) respondents argued that they have not experienced VAW, while 236 (56.9%) have experienced violence against women in the last 12 months since 2018/2019. From the result, it can be understood that, the number of women who experienced VAW in the last 12 months is greater than those who didn't experience violence against women. One of the interviewees whose age was 30 explains her experience as follows:

Violence is worse for me. Now it is difficult to think over it. Nothing is changing without the permission of God! I was experiencing physical injury ever since I was kicked by my husband after 6-month of marriage engagement. It has a long period of time when my injury is occurring. This poses both physical and psychological problems. Now, my husband is in jail, but the community leader has arranged a discussion to make an agreement between us. I said it was impossible!

One of the key informants affirmed that:

Due to the absence of strong social sanction, norms and legally binding procedures, the occurrence of violence against women is increasing from time to time. Now in our community (North Wollo), it is a communal phenomenon. For example, early marriage, marital rape (unreported mostly, but investigated through forensic matter), and economic exploitation on women's side is increasing consistently. It needs a strong bondage between the community and the sectors such as women and children affairs, courts and police officers.

Therefore, the number of those women who experienced violence against women is high and increasing at an alarming rate in the Amhara region of Ethiopia. This notifies that, collaborative efforts are needed to reduce the prevalence of VAW and its impacts in the region.

Table .4. Respondents' response to their experience of VAW in the last 12 months (N=415)

Options	Frequency	Percent (%)
Yes	236	56.9
No	179	43.1

Source: Obtained from survey data, 2019

### 4.3 Determinants of Violence against Married Women in Amhara Regional State: Logistic Regression Model analysis

The Binary Logistic Regression Model [BLRM] demonstrated that, eight independent variables ( educational level, status of occupation, child abuse, sufficient money for family basic needs, having a family disagreement, having a challenge/ limitation of money, gender norms for male and the role assignment to gender roles) were determinant factors that influenced the dependent variable (See Table 5).

Accordingly,as binary logistic regression model results showed, an educational level of a degree and above, diploma, secondary and primary education decreased their experience of violence against women (VAW), and it has been influenced less by the odds ratio of 0.066, 0.016, 0.047, 0.027 and 0.047, respectively when compared with being illiterate. That is, other variables being constant, those women who have a degree, diploma and secondary education are less likely to be influenced by violence against women. As the educational level increased, the likelihood of existence of violence against women decreased. The findings showed that there was a negative relationship between the status of education with violence among women. Hence, the net effect of educational status has a significant and negative relationship with violence against women at  $p < 0.05$ , which is  $p = 0.047; 0.018; 0.044; 0.009$  and  $0.048$  in all cases.

The logistic regression model also demonstrated that, when other variables remain constant, the status of occupation influences the existence of violence against women negatively. Women engaged in trading and private employment are less likely influenced by violence against women when compared with women whose occupations are farm orientated by the odds ratio of 0.234 and 0.160, respectively. This shows that, women who are occupied in farming are more likely exposed to violence against women by 2.3 and 1.6 times than women engaging in trading and private employment, respectively. Hence, the occupational status of trading and private employment decreased the likelihood of the existence of VAW when compared with others occupational status. It has a statistically significant and negative relationship with VAW at the value of  $p = 0.038; p < 0.05$  in all cases(see Table 5).

The model analysis showed that, experience of child abuse influence the probability of violence against women. That is, other variables remaining constant, women who have no

experience of child abuse were less likely to be victimized violence against women as compared to women who have experienced child abuse by the odds ratio of 0.242. This implies that women who have experienced child abuse increased the likelihood of violence by 2.4 times when compared with women who have not been victims of child abuse. Therefore, the experience of child abuse is statistically significant and has a negative relationship to violence against women in the study area-Amhara region.

When other variables remain constant, the binary logistic regression model also revealed that having sufficient money for providing basic needs negatively influenced the experience of violence against women. Women having insufficient income for providing basic needs are less likely to experience violence against women (VAW) when compared with women having sufficient income by the odds ratio of 0.333. This implies that women having sufficient income are influenced by violence by 3.3 times less than those with insufficient income. Hence, having an income has a statistically significant and a negative relationship to VAW in the study area.

As the findings of the study indicate, having no family disagreements has less likely an influence on violence against women when compared with having family disagreements by the odds ratio of 0.205. The binary logistic regression revealed [ $\beta = -1.587$ ; [AOR = 0.205];  $p = 0.000$ ;  $p < 0.05$ ], that there is a negative relationship between family disagreement and VAW. It can be inferred that, the non-existence of family disagreement decreased the likelihood to be victimized by violence against women by 2 times as compared to having a family disagreement within the household in the study area. One of the respondents, a 41 years old woman, disclosed that:

After marriage my parents and his parents told us to buy an additional farming land. But my husband said no because he assumed that all of the land that we have is for him only, and then he directed me to receive extra money from my parents for buying land. I said to him that I would not receive money from them rather we shall arrange all of our land with land book equally. Then, conflict arose about whether I can receive money for land or not. I say it repeatedly because any resource including land was registered in his land book. He exploits me as I had no power to control over and decide on the resource we have! So, there is a violence in economic ways, especially after marriage is concluded and obtaining additional income, particularly in most of the rural areas of Amhara region!

A 28 years old interviewee also revealed that:

“As I observed and based on my experience, mostly, the violence on women happened due to the absence of social grievance to violence and worsen due to the lack of social support to victims. May praise be to Allah! Now that I am fine, but for the last 2 years ago, I am deeply saddened for I was sexually harassed, physically and mentally victimized horribly with a complex scenario. All of these cases occurred due to the ignorance of the community to the problem; they think that VAW is a common phenomenon. It is taken as a silly case here!”

One of the focus group participants also pointed out that:

“Not only the idea of violence but the practices as well are strengthening rapidly in both urban and rural areas. Last week, I heard about sexual abuse in the nearest market place, which occurred between two spouses with no agreement. And he would have happened to forced marriage. I have asked at a police station as to why these kinds of problems exist, and their response is negligence to respond to VAW. This makes alarm me what is caused in our society? I told before and now, there should be a strong personal development of women, family and social network/



affiliation, and the government's hard work on the problem be raised!"

Women having a limitation of money have decreased experience of violence against women as compared to women having a limitation of money have. The model analysis result revealed [ $\beta = -0.687$ ; [AOR=0.503];  $p = 0.05$ ;  $p < 0.05$ ] a statistically significant association between limitation of money and probability of experiencing violence against women. Those women who have no limitation of money are less likely influenced by violence against women and decreased their probability by 5 times when compared women having limited money. Hence, it can be deduced that there was a statistically significant and negative relationship between the variables in the study area

The result of this study also revealed that gender norms for males negatively influenced the existence of violence against women. As the binary logistic regression model analysis showed, the odds ratio of non-existence of gender norms given for male decreased their probability of being victimized by violence against women by odds of 0.527 as compared to the availability of gender norms given for males within the households. This implies that women with non-availability of gender norms for males are less likely influenced by violence against women by 5.2 % as compared to the availability of gender norms for men. Hence, there was a statistically significant and negative relationship between variables at  $p < 0.05$ , with the value of  $p = 0.053$ .

Focus group discussants elaborate their experience in the following manner:

"We have not only heard, but also experienced violence and violence against women so many times. Mostly, we are worried about violence against women, but it is worsening for women, especially for married women since there is an intimate partner violence /violence committed by husbands and intimate ones; there is an increased aggressiveness. It can be either of sexual, physical, economic or cultural violence. This is due to the social phenomena; for example, the patriarchal system hinders the public mobility and protection of women's rights in well manner as compared to their male counterpart. There may be an institutional representation, especially in the implementation of legal procedures and customary laws that treat violence against women".

A key informant also affirmed that:

"Violence is a practice which is visible and non-visible in some ways. Most of the cases that I investigate are very complex. They can be whether physical, psychological, sexual and economical or both or all of them at a time. Women suffered a lot with this problem...still there is no strong social network among families, communities and society as a whole. An absence of family agreements and an inability of women deciding on basic economic issues leads to an increment of VAW rapidly".

One of the key informants also disclosed that:

"Policies/procedures and legal response that prevent violence against women are less applicable especially in marital rape and marital conflict/ violence. In addition, a care for social affiliation and awareness transference about each aspect of violence against women and girls is the best point that I forward!"

Last but not least, when other variables remain constant, no role assignment to gender roles decreased the probability of exposure for violence against women when compared with a role assignment and transition from home to public spheres. The logit model result also demonstrated that, women having no role assignment or division of gender roles are less likely influenced by violence against women and decreased their probability by the

odds ratio of 0.49. In other words, women having an assignation of gender roles increased their probability of experiencing violence against women by 5 % when compared with non-assignation of gender roles within the household. It has a statistically significant and negative relationship at  $p < 0.05$ ; i.e,  $p = 0.045$ .

Table.5. Determinants of Violence against Women in the Study Area (N = 415)

Variables	Categories	$\beta$	S.E	Wald	Sig	Adjusted Odds ratio
Residence	Yes					
	No (RC)	-.686	.536	1.639	.200ns	.504
Religious affiliation	Orthodox (RC)			2.509	.474 ns	
	Protestant	-1.026	.655	2.454	.117 ns	.358
	Catholic	-1.573	3.772	.174	.677 ns	.207
	Muslim	17.258	40192.970	.011	.994 ns	312690.814
Educational level	Illiterate (RC)			9.383	.095**	
	can read and write	-3.056	1.535	3.963	.047*	.047
	Primary education	-3.611	1.531	5.561	.018*	.027
	Secondary education	-3.066	1.524	4.049	.044*	.047
	Diploma	-4.113	1.580	6.779	.009*	.016
Degree and above	-2.711	1.371	3.911	.048*	.066	
Occupational Status	Farmer (RC)			13.323	.038*	
	Gov't employment	.208	.608	.117	.732 ns	1.231
	Private	-1.835	.902	4.137	.042*	.160
	House wife	-1.327	.985	1.814	.178 ns	.265
	Daily laborer	.661	.824	.644	.422 ns	1.937
	Trade	-1.450	.746	3.780	.052*	.234
	Others	.607	.715	.720	.396 ns	.834
Child abuse	Yes (RC)					
	No	-1.417	.325	19.000	.000 *	.242
Male-alcohol use	Yes (RC)					
	No	-.383	.440	.757	.384 ns	.682
Male personality distortion	Yes (RC)					
	No	.094	.380	.061	.805ns	1.099
Money for family basic needs	Yes (RC)					
	No	-1.101	.339	10.530	.001*	.333
Family disagreement in HH	Yes(RC)					
	No	-1.587	.371	18.265	.000*	.205
Male decision on health issues and other services	Yes(RC)					
	No	.324	.374	.749	.387 ns	1.382
Challenge/Limitations of money for social services	Yes (RC)					
	No	-.355	.350	1.030	.310ns	.701
<18 age marriage	Yes (RC)					
	No	-.355	.350	.030	.310ns	.701

Family honor while violence	Yes(RC) No	.007	.330	.000	982ns	1.007
Rigid division of labor in the HH	Yes(RC) No	-.290	.340	.726	.394ns	.748
Gender norms for male	Yes(RC) No	-.641	.332	3.729	.053*	.527
Social norms to discrimination	Yes(RC) No	.293	.330	.787	.375ns	1.340
Social norms to home and outside home/public	Yes(RC) No	-.246	.328	.563	.453ns	.782
Rights to women	Yes(RC) No	.277	.322	.743	.389ns	1.320
Community sanction /social grievance to violence	Yes(RC) No	.033	.327	.010	.920ns	1.033
Social support during violence	Yes(RC) No	.055	.342	.026	.873ns	1.056
Role assignation to gender roles and its transition	Yes(RC) No	-.712	.355	4.021	.045*	.491
Constant		9.066	1.867	23.590	.000	8652.477

N. B: \*Significant at 0.01 and 0.05, \*\*, significant at 0.1; ns = not significant; RC = Reference category Source: Obtained from survey data, 2019.

## 5. Discussions

The discussion is clearly articulated based on the objectives and findings of the study, and the variables adopted from the conceptual framework (integrated ecological model framework). It is principally noted in different studies that GBV or violence against women is a serious social problem that exists in varying degrees in almost all societies (Johnson et al., 2007; Andualem, 2014; Djamba et al., 2015), and highly prevalent still. As pinpointed in mounting evidences, an increasing of education lowers the risk of reporting violence against women, and women with more than 8 years of education were significantly less likely to report mistreatment than uneducated women did. The relationship between women's educational status and experiencing violence against women poses different challenges (Nakray, 2012). In Uganda and South Africa, women with higher levels of education-secondary school or higher- appear to be at lower risk of violence than less educated women are (USAID, 2006; Koenig et al., 2003; Ministry of Gender and Family promotion in the Republic of Rwanda, 2004; Jewkes et al., 2002). Though, the study from Uganda found the relationship to be curvilinear with violence against women lowest for women with no education and for women with eight or more years of education. In Kenya, however, women with secondary school education reported more violence compared with women with no education or those with only primary education (USAID, 2006).

Similarly, in Kenya, Rwanda and Zimbabwe, women who were in professional occupations, who had paid employment status and husbands with lesser education than themselves and those with their own income were at greater risk of violence against women by their partners. The findings from South Africa show that, liberal ideas about women's gender roles also increase the risk for violence against women. In South Africa, men who receive frequent beatings and who witness their mother being abused during childhood are significantly more likely to be sexually violent toward their partners (USAID, 2006).

Women's experience of violence as a child, either being beaten or their mothers being beaten is also positively associated with women's experience of violence against women (Jewkes et al., 2002).

Most studies in ECSA, however, show that it is likely and more relevant to discuss poverty or absence of sufficient income for basic needs as an individual risk factor. On the one hand, some evidence suggests household poverty does not seem to be a risk factor for violence against women. In fact, studies in Rwanda and South Africa found that, women in some of the poorest households, particularly those supported by someone other than the woman or her partner are protected from intimate partner violence at home (USAID, 2006; Ministry of Gender and Family Promotion, Republic of Rwanda, 2004); Jewkes et al., 2002). Closely related to friction over women's empowerment is economic stress resulting from a lack of productive work. In ECSA, evidence suggests that economic stress may be a risk factor in violence against women. In Zimbabwe, financial problems were measured as a risk factor for domestic violence (USAID, 2006). Likewise, studies outside Africa have found that, women's empowerment or financial independence can protect women from violence by their partners, namely in settings, where women have a better status in the community (Koenig et al., 2003).

From relationship factors, it is also confirmed that, marital conflict or family disagreement, which again can be related to male dominance in the family, is a major risk factor for violence against women (USAID, 2006). In South Africa, women with frequent general conflict in their relationships were nearly 17 times as likely to experience violence in the past year (Jewkes et al., 2002). Poverty and socio-economic insecurity are also among the factors contributing to VAW, particularly trafficking, early marriage and sexual violence in displacement. Violence against women also tends to increase in contexts of poverty, partly reflecting the ideals and expectations linking masculinity to the provider role and subsequent sentiments of 'failed masculinity'. The number of years a person spends in school has a positive correlation with a decrease in both future victimization and perpetration of physical and sexual violence. The empowerment of women through increased income opportunities as a result of education reduces the unequal power relationship (SIDA, 2015). While abuse occurs in all socio-economic settings, stress associated with poverty contributes to violence against women (UNFPA, 2010).

The USAID studies pointed out the social norms, including traditional gender norms as root causes or risk factors for the occurrence of VAW. Emerging literature has discussed violence against women perpetrated by men not only against women but also against men as a way to assert their masculinity, which is defined largely by being strong and aggressive (USAID, 2006). The study findings showed that the transformation of gender norms and behavior that underpin violence against women, especially in married women, the logic of VAW, is based on gender stereotypes such as ideals linking masculinity to the provider role, macho-behavior and violence as well as ideals linking femininity to chastity, submission and victimhood (SIDA, 2015).

Violence against women occurs in every country among all social, cultural, economic and religious groups. At the societal level, violence against women is most common within cultures where gender roles are strictly defined and enforced; where masculinity is closely associated with toughness, male honor or dominance; where the punishment of women and children is accepted (UNFPA, 2010), and where violence is a standard way to resolve conflicts. Violence against women is already highly stigmatized as a result of which women, girls and sometimes their families fear reporting or seeking services or justice. The stigma combines with an overall lack of trust in the ability or motivation of providers and justice systems to provide redress and further discourages women (Jennifer and Rohini,

2014). Any response based intervention must address women's trust of and access to the service providers and be sensitive to the possibility that reporting may induce further violence on women.

## **6. Conclusion**

Violence against women in Africa, as elsewhere in the world is a complex issue that results from and is perpetuated by various facets of life, community and society. As such, the ways to respond to and prevent violence against women must be just as multi-faceted, involving all sectors and members of the community and society. Hence, violence against women and its effects on health and rights need an attention. Evidence has shown that, globally, at least 60% of women are exposed to reproductive health problems related to gender based violence than their male counterparts. There is widespread VAW in the world in the form of physical abuse, rape and forced marriages. These forms of violence have a negative impact on women's reproductive health, yet a culture of silence (largely precipitated by socio-cultural, economic, religious and policy implementation) encases the subject of VAW. As the findings revealed, 179 (43.1%) of the respondents responded that, they have not experienced VAW, while 236 (56.9%) have experienced violence against women in the last 12 months since 2018/2019. From the result, it can be concluded that, the number of women who experienced any of VAW in the last 12 months was higher. The binary logistic regression model showed that, an educational level, status of occupation, child abuse, sufficient money for family basic needs, having a family disagreement, having a limitation of money, gender norms for male and the role assigned to gender roles were determinant factors of violence against women in Amhara region. The other variables which are not significant might be because of small sampling unit and the interdependence of variables on one another. The findings of this study imply that further studies should be done on these variables for the future. This study might contribute- to social workers, gender specialists and health practitioners for further investigation, target prioritization and policy intervention.

## **7. Recommendations**

The following points are forwarded as basic elements to address violence against women in the study area for all concerned bodies.

- The healthcare sector should have a significant impact in terms of publicizing and addressing violence against women and on reducing the RH problems related to abuse.
- Training and education should be expanded to the communities about the VAW and its consequences on married women in particular and women in general.
- Community health care workers and other influential health providers shall take the lead in introducing awareness and behavioral change in the community. Enabling married women to receive necessary services will help break the life cycle of violence and promote the rights of women.

## **Acknowledgments**

First of all, I would like to express my deepest gratitude to the study participants for being willing to participate in this study. Without them, this research would have not been realized. Secondly, I would like to acknowledge the University of Gondar for providing financial support to conduct this research. Thirdly, I would like to thank the data collectors and supervisors for their unreserved work and contribution for the quality of the data. I also duly acknowledge the research team members for their assistance and giving their permission for publication. Lastly, I would like to give the deepest thanks to Ms. Judy

Price for helping in editing of the manuscript.

### **Funding**

The study was done through provided funds from University of Gondar Research and Community service affairs Vice President Office in 2018/2019. The University also funded the activities related to proposal and tool development, data collection and report writing.

### **Competing of interests**

The author declared that there is no conflict of interests regarding the ownership, concepts and methodological parts of the study.



## References

- Adinew, Y. M., & Hagos, M. A. (2017). Sexual violence against female university students in Ethiopia. *BMC international health and human rights*, 17(1), 19.
- Alemu, B. (2008). Early marriage in Ethiopia: causes and health consequences. *Exchange on HIV/AIDS. Sexuality and Gender*, 1, 4-6.
- Amugune, B. K.(2014). *Sample size Determination and Sampling Techniques*, Mental Health Workshop , Maanzoni,15 October,2014.
- Andrew, Morrison., Mary, Ellsberg., Sarah ,Bott.(2004). *Addressing Gender-Based Violence in the Latin American and Caribbean Region: A Critical Review of Interventions;World Bank Policy Research Working Paper 3438*, October 2004.
- Andualem, M., Tiruneh, G., Gizachew, A., &Jara, D. (2014). The prevalence of intimate partner physical violence against women and associated factors in Gozaman Woreda, Northwest Ethiopia 2013. *Global Journal of Sex Education*, 2, 26-35.
- Australian Bureau of Statistics.(2013). Personal Safety Australia 2012, cat. No, 4906.0. Canberra. Available from [www .abs .gov.au /ausstats/abs@.nsf/mf/4906.0](http://www.abs.gov.au/ausstats/abs@.nsf/mf/4906.0).
- Bekele,T., Kaso, M., Gebremariam, A., and Deressa, W.(2015). *Sexual violence and associated factors among female students of Madawalabu University in Ethiopia*.
- Care Ethiopia. (2008). *The Status of Gender Based Violence and Related Services in Four Woredas (Woredas surrounding Bahir Dar town, Burayu woreda, Bako woreda and Gulele Sub-city of Addis Ababa), Ethiopia*.
- Djamba, Y. K., Kimuna, S. R., & Aga, M. G. (2015). *Socio-demographic factors associated with men's attitudes toward wife beating in Ethiopia*. In *Gender-Based Violence* (pp. 3-16). Springer, Cham.
- European Union Agency for Fundamental Rights (2014). *Violence against Women. An EU Wide Survey, Main Results*. Available from [http://fra.europa.eu/sites/default/files/fra-2014-vaw-survey-main-results\\_en.pdf](http://fra.europa.eu/sites/default/files/fra-2014-vaw-survey-main-results_en.pdf). Accessed 14 June 2015.
- Fleming, PJ, McCleary-Sills, J, Morton, M, Levtov, R, Heilman, B and Barker, G.(2015). *Risk factors for men's lifetime perpetration of physical violence against intimate partners: Results from the International Men and Gender Equality Survey (IMAGES)* in eight countries. *Plos One*, Vol. 10, No. 3, pp. 1-18.
- Fulu, E., Warner, X., Miedema, S., Jewkes, R., Roselli, T., and Lang, J. (2013). *Why Do Some Men Use Violence Against Women and How Can We Prevent It? Quantitative Findings from the United Nations Multi-Country Study on Men and Violence in Asia and the Pacific*. Bangkok: UNDP, UNFPA, UN Women and UNV.
- Garcia-Moreno Claudia, Henrica AFM Jansen, Mary Ellsberg, Lori Heise, Charlotte H Watts. (2005). *On behalf of the WHO Multi-country Study on Women's Health and Domestic Violence against Women Study Team: Prevalence of intimate partner violence: findings from the WHO multi-country study on women's health and do-*

- mestic violence*;the Lancet; Vol. 368 October 7, 2006.
- Hulsizer, M. R., and Woolf, L. M. (2009). *A Guide to Teaching Statistics: Innovations and Best Practices*. Chichester, West Sussex, UK: Wiley- Blackwell
- Iliyasu, Z., Abubakar, I. S., Aliyu, M. H., Galadanci, H. S., & Salihu, H. M. (2011). Prevalence and correlates of gender-based violence among female university students in Northern Nigeria. *African journal of reproductive health*, 15(3), 123-133.
- Jennifer, L. Solotaroff., and Rohini, Prabha. P.(2014).*Violence against Women and Girls: Lessons from South Asia; South Asia Development Forum*; International Bank for Reconstruction and Development / The World Bank
- Jewkes, R., Levin J., Penn-Kekana, L. (2002). Risk factors for domestic violence: Findings from a South African cross-sectional study. *Social Science & Medicine*, 55, 1603-1617
- Johnson, H., Ollus, N., &Nevala, S. (2007). *Violence against women: An international perspective*. Springer Science & Business Media.
- Joseph, J. ( 2015). *Sexual Harassment in Tertiary Institutions*:.Ostaleteme , 27.
- Kabeer, Naila. (2014). *Violence against Women as 'Relational' Vulnerability: Engendering the Sustainable Human Development Agenda*; 2014 Human Development Report Office.
- Koenig , Michael A.,Tom, Lutalo.,Feng, Zhao., Fred, Nalugoda.,Fred, Wabwire-Mangen., Noah, Kiwanuka., Jennifer, Wagman.,David, Serwadda.,Maria Wawer.,& Ron, Gray. (2003).*Domestic violence in rural Uganda: evidence from a community-based study*;Bulletin of the World Health Organization,WHO.
- Megersa,Tsegaye (2015). *Gender Based Violence in the Rural Setting of Arsi: Causes and Consequence Analysis In Hetosa District*, AAU, MA Unpublished Thesis.
- Ministry of Gender and Family Promotion Republic of Rwanda.(2004).*The role of women in reconciliation and peace building in Rwanda: Ten years after genocide 1994-2004: Contributions, Challenges and Way Forward*.
- Ms. Foundation for Women. (2010). *Ms. Foundation for Women: efforts to address gender-based violence: a look at foundation funding: Gender-Based Violence Funding by U.S. Foundations*
- Nakray, Keerty. (2012(eds.) *Gender-based violence and public health: international perspectives on budgets and policies*; New York, NY: Rutledge, 2012.
- Oladebo, O., Yusuf, O. B., &Arulogun, O. S. (2011). Factors influencing gender-based violence among men and women in selected states in Nigeria. *African journal of reproductive health*, 15(4), 78-86.
- Shimekaw, B. (2013). Prevalence and associated factors of sexual violence among private college female students in Bahir Dar city, *North Western Ethiopia. Health* , Vol. 15.
- SIDA. (2015). *The Gender Tool Box gathers knowledge material and method support on gender equality in the form of Tools, Briefs and Thematic Overviews*. Published by SIDA, 2015 Department: International Organizations and Policy Support.
- Stephen, Kwadwo Antwi., and Kasim, Hamza. (2015). Qualitative and Quantitative Research Paradigms in Business Research: A Philosophical Reflection. *European*

- U.S. Agency for International Development (USAID).(2006). *U.S. Agency for International Development: Linking Gender-Based Violence Research to Practice in East, Central and Southern Africa: A Review of Risk Factors and Promising Interventions*, USAID.
- UN Women. (2015). *A Framework to underpin action to prevent violence against women*: UN.
- UN Women. (2016). *Handbook for National Action Plans on Violence against Women*. New York: UN Women.
- UNFPA. (2010). *Outlook: Violence Against Women: Effects On Reproductive Health*, Volume 10, Number,1. Program for Appropriate Technology in Health (Path), 2002).
- UNICEF. (2003). *Sexual and Gender-Based Violence against Refugees, Returnees and Internally displaced Persons-Guidelines for Prevention and Response*.
- UNICEF. (2014b). *Hidden in Plain Sight: A Statistical Analysis of Violence against Children*. Available from [http://files.unicef.org/publications/files/Hidden\\_in\\_plain\\_sight\\_statistical\\_analysis\\_EN\\_3\\_Sept\\_2014.pdf](http://files.unicef.org/publications/files/Hidden_in_plain_sight_statistical_analysis_EN_3_Sept_2014.pdf). Accessed 14 June 2015.
- UNICEF.(2015).*UN Child Protection Issues Brief: Gender-based Violence in Emergencies*:[http://www.unicefemergencies.com/downloads/eresource/docs/2.6%20Child%20Protection/GBVi%20issue%20brief%20clean%20june%202015%20\(final\).pdf](http://www.unicefemergencies.com/downloads/eresource/docs/2.6%20Child%20Protection/GBVi%20issue%20brief%20clean%20june%202015%20(final).pdf)
- United Nations [General Assembly] (2012a). *Report of the special rapporteur on Violence against Women, its causes and consequences: Report on Violence Against Women with disabilities*, General Assembly, Sixty-Seventh session, August 2012.Available from [http://www.un.org/women\\_watch/daw/documents/ga66/RAP-PORT\\_on\\_VAW](http://www.un.org/women_watch/daw/documents/ga66/RAP-PORT_on_VAW). PDF. Accessed 6 January 2014.
- USAID & UNICEF (2006). *Strategic Framework for the Prevention of and Response to Gender Based Violence in Eastern, Southern and Central Africa*. Arlington,VA:USAID.
- USAID. (2010). *Amhara National Regional State Food Security Research Assessment Report*, USAID, May 2000.
- Wende, M. (2014). *Sexual Harassment against Female Students in Higher Institution: Proceedings of the 8th Multi-Disciplinary Seminar* (p. 6). Addis Ababa: Research and Knowledge Management of St. Mary's University.
- Western, D. (2013). *A Conceptual and Contextual Background for Gender-based Violence and Depression in Women*. In *Gender-based Violence and Depression in Women* (pp. 13-22). Springer, New York, NY.
- WHO (2002a). *World report on Violence and Health*. Geneva.
- WHO. (2002b). *“Infrastructure & Gender Equality: Gender and Development BriefingNotes.”* The World Bank, Gender and Development Group: Washington DC.

WHO.(2005). *WHO Multi-country Study on Women's Health and Domestic Violence against Women*, Geneva, World Health Organization

WHO.(2013). *Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence*. Switzerland, Geneva.