ADDIS ABABA UNIVERSITY
COLLEGE OF BUSINESS AND ECONOMICS
SCHOOL OF COMMERCE
DEPARTMENT OF PROJECT MANAGEMENT

THE EFFECTIVENESS OF GENDER-BASED VIOLENCE PROJECTS IN COMBATING VIOLENCE AGAINST WOMEN IN ADDIS ABABA, ETHIOPIA: THE CASE OF ENHANCING PSYCHO-SOCIAL SUPPORT AND ECONOMIC WELLBEING OF WOMEN PROJECT

BY

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JUNE, 2017

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Declaration

I hereby declare that the study entitled "*The effectiveness of Gender-based Violence Project in Combating Violence against Women in Addis Ababa, Ethiopia: The Case of Enhancing Psycho-Social Support and Economic Wellbeing of Women Project*" is the result of my research and is my original work except for the literature which sources have clearly been stated and duly acknowledged. I have conducted the study independently with the guidance and comments of my research advisor. This study has not been presented for any degree in this university or any other.

By Niat Tsegaye Signature Date

_____ _____

Letter of Certification

This is to certify that Niat Tsegave has carried this research work on the topic entitled "*The effectiveness of Gender-based Violence Project in Combating Violence against Women in Addis Ababa, Ethiopia: The Case of Enhancing Psycho-Social Support and Economic Wellbeing of Women Project*" under my supervision. The work is original in nature and suitable for submission in partial fulfillment of the requirement for the award of Master of Arts Degree in Project Management and the student has my permission to present it for assessment.

Advisor- Wubshet Bekele (PhD) Signature Date

_____ _____

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Acronyms

GBV	Gender-based Violence
FGM	Female Genital Mutilation/Cutting
WHO	World Health Organization
NGO	Non-Governmental Organizations
AWSAD	Association for Women Sanctuary and Development
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
IRC	International Rescue Committee
UNFPA	the UN Population Fund
UNHCR	the UN High Commissioner for Refugees
UN Women	the United Nations Entity for Gender Equality and the Empowerment of Women
FDRE	Federal Democratic Republic of Ethiopia
HTPs	Harmful Traditional Practices

Abstract

The aim of this research is to assess the effectiveness of GBV projects in combating violence against women in Addis Ababa, Ethiopia. In order to conduct this study, a project from AWSAD was considered. In addition, one of AWSAD's shelters was approached. The research is descriptive and mostly qualitative in nature. Four respondents from AWSAD's head office and ten women and children from the shelter were selected for semi structured interviews. In both qualitative and quantitative data analysis, the results have been presented and analyzed. It was found that combating GBV through prevention and response has been successful in reducing violence against women. It has been concluded and recommended that, even though the project has showed promising figures and feedbacks from project beneficiaries, more needs to be done to both prevent and respond to GBV.

Keywords- GBV, AWSAD Shelter, Violence against Women

I. Introduction

1.1 Background of the Study

In addition to being a human rights violation, GBV is a widespread public health issue with numerous negative health consequences. GBV is the general term used to capture violence that occurs as a result of the normative role expectations associated with each gender, along with the unequal power relationships between the two genders, within the context of a specific society (Bloom, 2008). While women, girls, men and boys can be victims of GBV, the main focus of this paper is on violence inflicted on women and girls.

It has been widely acknowledged that the majority of persons affected by gender-based violence are women and girls, as a result of unequal distribution of power in society between women and men. Further, women and girls that are victims of violence suffer specific consequences as a result of gender discrimination.

GBV can occur throughout a woman's lifecycle, and can include physical such as battering, and sexual assault at home or in the workplace, psychological such as deprivation of liberty, forced marriage and sexual harassment and economical abuse including denying ones right to work hence making her entirely dependent on the abuser for food, clothing and shelter.

Violence has a profound effect on women. Beginning before birth, it continues to affect women throughout their lives. Some females fall prey to violence before they are born, when expectant parents abort their unborn daughters, hoping for sons instead. In other societies, girls are subjected to traditional practices such as FGM, which leaves them maimed and traumatized. In others, they are compelled to marry at an early age, before they are physically, mentally or emotionally mature. Female children are more likely than their brothers to be raped or sexually assaulted by family members, by those in positions of trust or power, or by strangers. In some countries, when an unmarried woman or adolescent is raped, she may be forced to marry her attacker. Those women who become pregnant before marriage may be beaten, ostracized or murdered by family members, even if the pregnancy is the result of a rape. After marriage, the greatest risk of violence for women continues to be in their own homes where husbands and, at times, in-laws, may assault, rape or kill them.

GBV is widespread, it occurs both in developed and developing countries. According the WHO, 35% of women in the world and 45% in Africa have experienced GBV in their lifetime (Sensasi, 2014). In Ethiopia alone, 49% of ever-partnered women have experienced physical violence by an intimate partner, rising to 59% ever experiencing sexual violence (Population Council, 2008).

Although the above seen figures indicate GBV is far from getting eradicated, it should be noted that there are multiple NGOs that are fighting to change this fact. The purpose of this paper is to identify and assess the work these NGOs perform by evaluating the effectiveness of the projects they initiate and execute. For this purpose, the researcher considered one NGO, AWSAD. The former Tsotawi Tekat Tekelakay Mahiber (TTTM) is an Ethiopian resident charity association established to advance women's social and economic development and provide support for women and girls that faced physical and psychological harm (AWSAD, 2017).

1.2 Background of the Project

To combat violence against women, AWSAD employs multiple projects that create awareness and protects women that have been abused. For the purpose of this study, one of the projects from AWSAD has been taken as case study. *Enhancing psycho-social support and economic wellbeing of women* is a project initiated in Addis Ababa in July of 2016. It was launched for the betterment of society's attitude and safety of women that have gone through abuse in the past. The project mainly focuses on shining the light on GBV for residents of Yeka, Gulele and Addis Ketema sub cities. These sub cities were not chosen randomly. A survey on prevalence of GBV was conducted in hopes of figuring out which part of Addis Ababa has more cases of violence against women and these sub cities have the highest reported cases of GBV. The goal of this project is to impart knowledge to the residents of the selected sub cites so that violence against women is prevented and reduced. Community facilitators, prominent neighborhood figures, police officers and public prosecutors are targeted for the awareness creation trainings.

1.3 Statement of the Problem

In Ethiopia, the abuse women experience in their marriage life is severe and studies have shown the prevalence. Physical, sexual, economical and psychological assaults occur at alarming rate. With regard to the seriousness of domestic violence in the country, for example, WHO (2005) states that the highest prevalence of domestic violence is "beyond imagination" in the 21st

century. Ethiopia is one of the countries with the highest prevalence of both physical and sexual violence, 71% of ever-partnered Ethiopian women have experienced one or the other forms of violence, or both over their lifetime (WHO, 2005). In spite of its high prevalence rate in the country, Violence against women, especially domestic violence has been under reported and not well documented. Some critics even mention that the reported cases met the outside world only because the cases were too outrageous and downright inhuman. For example, in October 2011, an Ethiopian airlines flight attendant lost both her eye sights after her estranged husband stabbed her eyes with a sharp knife. Two months before that, another estranged husband gunned down the mother of his two kids in broad daylight in the heart of Addis Ababa; and the number of acid attacks against women has shown a disturbing increase since the first case involving Kamilat Mehdi and her ex-boyfriend was reported in 2007 (Assefa, 2016). But the most alarming of them all is when a middle aged man stabbed a 17-year-old girl on February 2017, in the busy square of Mexico because she wouldn't agree to be with him.

The same can be said about other types of GBV. Although the degree of occurrence has decreased as opposed to a decade ago, some reports show FGM is still practiced in some rural parts of Ethiopia. While the exact number of girls and women worldwide who have undergone FGM is unknown, at least 200 million girls and women have been subjected to the practice. UNICEF reports that in the years between 2010-2015, 24% of girls aged between 0-14 have undergone FGM in Ethiopia. 74% of Ethiopian Girls and women aged 15-49 have undergone FGM in the year 2004-2015. This shows there is still a tremendous amount of work to be done in the area of GBV but before further action could/should be taken, it is useful and logical to understand what has been done or is being done to eliminate this epidemic.

It is known that there are international and Local NGOs in Ethiopia that have taken a great role in trying to eliminate GBV. The change in figures seen when searching for GBV has come from the hard work of these prominent organization but as mentioned above, it is clear to see what is being done is not enough.

1.4 Research Questions

This research will be done to answer the following questions:

1 What changes have been brought by AWSAD by initiating a GBV project in Addis Ababa?

2 What are the challenges AWSAD experienced in the project?

3 How effective is the executed project in combating GBV in Addis Ababa?

1.5 Objective of the Study

1.5.1 General Objectives

The main objective of this thesis to understand what has been done by an international NGO stationed in Ethiopia, AWSAD, to combat GBV and to assess the effectiveness of the project launched by AWSAD.

1.5.2 Specific Objectives

The specific objectives of this study the following:

1. To access the changes brought by the initiation of a GBV project in Ethiopia,
2. To understand the challenges AWSAD experienced in the project,
3. To assess the effectiveness of the executed project in combating GBV in Addis Ababa.

1.6 Methodology

This research mainly employs qualitative research method. However, for precision purpose, it might also employ a bit of quantitative techniques. Hence, it will be a systematic triangulation of both quantitative and quantitative methods in a bid to reach at sound argument and conclusion. To this end, a semi structured interview will be used to generate data.

1.7 Significance of the Study

It is a widely known fact that NGOs acquire a substantial amount of funding to implement proposed projects. Most of these organizations tend to report on how effectively they have managed a project and at the end of the day, provided the public with a quality service using these funds. This research paper will try to measure the success of a specific project by comparing aimed and achieved project goals and objectives and also try to see the project's effectiveness from the perspective of women and girls that have directly benefited from this project. The results of this thesis will be used as additional knowledge in project execution. The findings of this research will also be an eye opener for the project executing NGO and a way of improving future projects.

In addition, this thesis will either add on or eliminate the bias that is associated with internationally funded NGOs, the unproven thought that these NGOs do not perform the activities they initially promised and that they misuse the fund for personal gain.

Lastly, the researcher aspires to enlighten the audience about the widespread epidemic that is GBV, in hopes of creating awareness and finding a way of eradicating the problem.

1.8 Limitation of the Study

Due to the pressure of time, the study will consider only one project from AWSAD. It would have been preferred if more projects from more NGOs were assessed to deeply understand the impact of GBV and what is means to combat this practice. The other expected limitation will be lack of complete data as some, if not all NGOs are neither comfortable nor willing to share information associated with the projects they are working on, successful or not. Finally, the beneficiaries of AWSAD, the women and children at the shelter, might not be able to open up about their experience as it is a traumatic and horrid ordeal hence minimizing the sample size of the thesis.

1.9 Scope of the Study

This research will assess and evaluate a project that is aimed at combating multiple types of GBV. The selected project documents will be explored to see how the monitoring and evaluation was rolled out and if possible, how it was used. It will try to understand what the executing organization foresaw as a success criterion and try to give recommendation from the information gathered from interviews from both benefactors and beneficiaries.

II. Literature Review

2.1 Gender-based Violence

2.1.1 Defining Gender-based Violence

On December 20, 1993, the UN Declaration on the Elimination of Violence against Women offered the first official definition of the term “Gender-based Violence”: Any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or in private life.

'Gender-based violence' and 'violence against women' are terms that are often used interchangeably as most gender-based violence is inflicted by men on women and girls. However, it is important to retain the 'gender-based' aspect of the concept as this highlights the fact that violence against women is an expression of power inequalities between women and men (EIGE, 2017). Recognizing that violence against women is a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of the full advancement of women, and that violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with men. (UN, 1993).

For a long time, international human rights law has been silent on the issue of GBV/VAW. This is because until the late 1980s, VAW, in particular domestic violence, was not considered a matter to be dealt with by human rights law. For instance, CEDAW convention was adopted in 1979 – the major UN women’s rights treaty – does not contain a provision on violence against women. This gap was closed in 1992, when the CEDAW Committee, the body responsible for monitoring the implementation of CEDAW, adopted General Recommendation No. 19 on VAW. In this document, the Committee clarifies that GBV against women is a form of discrimination and therefore covered by the scope of CEDAW. GBV is defined as “violence that is directed against a woman because she is a woman or that affects women disproportionately”, thereby underlining that violence against women is not something occurring to women randomly, but rather an issue affecting them because of their gender (UNFPA, 2017).

2.1.2 Forms of Gender-based Violence

In the past, many organizations used to take individual approaches to defining and classifying GBV because one country's understanding of GBV varies immensely from another. Ethiopia for example used to consider FGM as a traditional practice, a rightful passage for young girls, while western countries thought of it as a direct breach of human rights. Another reason is that most organizations did not fully understand the context of the violence types. The classification variance in return made it impossible for humanitarian communities to collect, classify and analyze GBV-related information in a way that produces comparable statistics. To address this problem, the IRC, UNFPA and UNHCR developed an incident classification system (GBVIMS, 2017).

According to the GBVIMS user guide (2017), there are six classifications of GBV:

I. Rape: non-consensual penetration (however slight) of the vagina, anus or mouth with a penis or other body part. Also includes penetration of the vagina or anus with an object. They should be used only in reference to GBV even though some may be applicable to other forms of violence which are not gender-based.

II. Sexual Assault: any form of non-consensual sexual contact that does not result in or include penetration. Examples include: attempted rape, as well as unwanted kissing, fondling, or touching of genitalia and buttocks. FGM/C is an act of violence that impacts sexual organs, and as such should be classified as sexual assault. This incident type does not include rape, i.e., where penetration has occurred.

III. Physical Assault: an act of physical violence that is not sexual in nature. Examples include: hitting, slapping, choking, cutting, shoving, burning, shooting or use of any weapons, acid attacks or any other act that results in pain, discomfort or injury. This incident type does

IV. Forced Marriage: the marriage of an individual against her or his will.

V. Denial of Resources, Opportunities or Services: denial of rightful access to economic resources/assets or livelihood opportunities, education, health or other social services. Examples include a widow prevented from receiving an inheritance, earnings forcibly taken by an intimate partner or family member, a woman prevented from using

contraceptives, a girl prevented from attending school, etc. Reports of general poverty should not be recorded.

VI. Psychological / Emotional Abuse: infliction of mental or emotional pain or injury. Examples include: threats of physical or sexual violence, intimidation, humiliation, forced isolation, stalking, verbal harassment, unwanted attention, remarks, gestures or written words of a sexual and/or menacing nature, destruction of cherished things, etc.

Earlier publications on classification of GBV are broader when compared with latest classifications. Ganley (1998) classifies the forms of GBV as domestic violence, physical violence, sexual violence and psychological violence only and that the rest types are merely sub classifications of the above four. The GBVIMS guide contradicts this by explaining the types of abuses further as follows:

Table 1: Gender-based Violence Classification Tool

Type of GBV		Accused Perpetrator		Survivor age		Case context
➢ **Rape** ➢ **Sexual assault** ➢ **Physical assault** ➢ **Denial of resource** ➢ **Psychological/emotional abuse**	+	Intimate/former partner	+	NA	=	Intimate partner violence
➢ **Rape** ➢ **Sexual assault**	+	Any	+	Under 18	=	Child sexual abuse
➢ **Forced marriage**	+	Any	+	Under 18	=	Early marriage

Source: Gender-Based Violence Information Management System: GBV Classification Tool

2.1.3 Causes of Gender-based Violence

It is widely understood that GBV, be it in the form of isolated acts or systematic patterns of violence, is not caused by any single factor. Rather, it is a combination of several factors that increase the risk of a man committing violence and the risk of a woman experiencing violence (UNFPA, Strengthening Health System Responses to Gender-based Violence in Eastern Europe and Central Asia, 2017). Heise (1998) developed *"the ecological framework"* which consists of 4 related factors that can be root causes for violence against women. These are:

- Individual/Ontogenic Factors: refers to those features of an individual's developmental experience or personality that shape his/her response to relationship/microsystem and community/exosystem factors. For husbands who are violent toward their female partners, three developmental experiences have emerged as particularly predictive of future abuse: witnessing domestic violence as a child, experiencing physical or sexual abuse as a child and having an absent or rejecting father. (Ibid)
- Relationship/Microsystem Factors: refers to those interactions in which a person directly engages with others. A Husband influenced by this factor can have an upbringing of male dominance in the family, male control of wealth in the family and marital conflict. (Ibid)
- Community/Exosystem Factors: refer to the extent of tolerance towards GBV in contexts at which social relationships are embedded, such as schools, workplace or the neighborhood. Research found that societies that had community sanctions against violence, including moral pressure for neighbors to intervene, in place and where women had access to shelter or family support had the lowest levels of intimate partner and sexual violence. Driving factors include unemployment or low socio economic status and isolation of the woman and the family. (Ibid)
- Society/Macro Factors: include the cultural and social norms that shape gender roles and the unequal distribution of power between women and men. Intimate partner violence occurs more often in societies where men have economic and decision-making powers in the household and where women do not have easy access to divorce and where adults routinely resort to violence to resolve their conflicts. Men associated with this factor have the notion of masculinity linked to dominance, toughness and honor and rigid gender roles. (Ibid)

In other words, individual-level factors are biological and personal history factors that may increase the risk of violence. Young girls with low education and of low economic status are at risk of being victims of GBV. This also applies to men with low income and education. An individual's past experience such as exposure to sexual abuse or intra parental violence during his/her childhood may increase risks of violence in future relationships.

In relationship- level factors, when a family responds to sexual violence by blaming the women and concentrate on restoring a lost family honor, rather than blaming the men may end up creating an environment in which rape can occur with impunity.

Community-level factors are to which extent of tolerance towards GBV is within social relationships, such as in schools, at the work place or neighborhood. It has been found that when a community together puts in place sanctions against violence, or pose moral pressure on the community to intervene they have the lowest level of intimate partner and sexual violence. Although SGBV manifests itself across all socio-economic groups, it is the poor and vulnerable women that are affected the most by GBV.

Society-level factors are when cultural and societal norms that shape the gender roles and the power relation between men and women. Traditional attitudes towards women around the world help perpetuate this violence. Stereotypical roles in which women are seen as subordinate to men especially constrain a woman's ability to exercise choices that would enable her end the abuse.

2.2 Prevalence of Gender-based Violence

Women across the world are subjected to physical, sexual, psychological and economic violence, regardless of their income, age or education. Such violence can lead to long-term physical, mental and emotional health problems. Defining GBV and showing its prevalence through global statistics raise vital awareness about several important issues: what it is and how to recognize it; the scope of the problem; whom it affects... etc. The measurement of the extent of violence against women is usually based on the proportion of the female population that has experienced violence in a given period of time. This is what is referred to as 'prevalence of violence against women'. Prevalence is to be calculated with reference to a given period of time which usually takes timelines like previous one year or at extreme cases a lifetime.

2.2.1 World Statistics on Gender-based Violence

In the words of the former UN Secretary-General Ban Ki moon, *"Violence against women continues to persist as one of the most heinous, systematic and prevalent human rights abuses in the world. It is a threat to all women, and an obstacle to all our efforts for development, peace, and gender equality in all societies."* (United Nation, Departement of Public Information, 2007). In fact, violence kills more women between the ages of 15 and 44 than cancer, malaria, traffic accidents and war combined (The Borgen Project, 2013).

Out of the many forms of violence, there are some violence types that have high prevalence rate than others. For example, it is estimated that 35% of women worldwide have experienced either physical and/or sexual intimate partner violence or sexual violence by a non-partner at some point in their lives. However, some national studies show that up to 70% of women have experienced physical and/or sexual violence from an intimate partner in their lifetime (WHO, 2013). Although little data is available, and great variation in how psychological violence is measured across countries and cultures, existing evidence shows high prevalence rates. 43% of women in the 28 European Union Member States have experienced some form of psychological violence by an intimate partner in their lifetime (European Union Agency for Fundamental Rights, 2014).

Worldwide, more than 700 million women alive today were married as children (below 18 years of age). Of those women, more than 1 in 3 or some 250 million were married before 15. Child brides are often unable to effectively negotiate safe sex, leaving them vulnerable to early pregnancy as well as sexually transmitted infections, including HIV (UNICEF, Ending Child Marriage, Progress and Prospect, 2014).

Although men rape cases have started to rise in recent years, it does not come close to the number of woman that have been forced to have intercourse. Estimates indicate that around 120 million girls worldwide, slightly more than 1 in 10, have experienced forced intercourse or other forced sexual acts at some point in their lives. By far the most common perpetrators of sexual violence against girls are current or former husbands, partners or boyfriends (UNICEF, 2014).

According to estimates published on the United Nations' International Day of Zero Tolerance for FGM in 2016, at least 200 million women and girls alive today have undergone FGM in 30

countries. In most of these countries, the majority of girls were cut before age 5 (UNICEF, 2016). Out of the above estimates, more than 125 million girls and women alive today have been subjected to FGM across countries in Africa and the Middle East where this specific form of violence against women is concentrated. Prevalence tends to be lower among younger women, indicating a decline in this harmful practice. However, it remains commonplace in a number of these countries, with overall prevalence rates of over 80% (United Nations Statics Division, 2015).

Adult women account for almost half of all human trafficking victims detected globally. Women and girls together account for about 70%, with girls representing two out of every three child trafficking victims (UNODC, 2014).

An estimated 246 million girls and boys experience school-related violence every year and one in four girls say that they never feel comfortable using school latrines. The extent and forms of school-related violence that girls and boys experience differ, but evidence suggests that girls are at greater risk of sexual violence, harassment and exploitation. In addition to the resulting adverse psychological, sexual and reproductive health consequences, school-related gender-based violence is a major obstacle to universal schooling and the right to education for girls (United Nations Girls' Education Initiative, 2015).

Globally, rates of GBV are highest in developing countries, with some of the most extreme rates in African countries. Worldwide, approximately 100 to 140 million girls and women have experienced female genital mutilation/cutting, with more than 3 million girls in Africa annually at risk. In Sub-Saharan Africa, 14.1 million girls are child brides, married before the age of 18 (UN Women, Human Trafficking, 2012). In a 2007 survey across eight countries (Botswana, Lesotho, Malawi, Mozambique, Namibia, Swaziland, Zambia and Zimbabwe) 18% of women aged 16-60 years had experienced intimate partner violence in the past 12 months; one in every five youths aged 12-17 years said they had been forced or coerced to have sex, and one in 10 said they had forced sex on someone else (Baldasare, 2012).

Although systematic data is not available in all African countries, UN Women maintains a current inventory of systematically collected data on violence against women. Table 2 is a summary of the most recent prevalence data from countries in each of the African regions.

Table 2: Violence against Women Prevalence Data, Surveys by Country

Region	Country	Lifetime experience of physical and/or sexual violence from an intimate partner	Survey
Northern Africa			
	Egypt	34%	DHS 2005, National
	Morocco	63%	Other 2010, National
Western Africa			
	Cape Verde	16%	DHS 2005, National
	Ivory Coast	12%	DHS 2005, National
	Ghana	23%	DHS 2008, National
	Liberia	39%	DHS 2007, National
	Nigeria	18%	DHS 2008, National
Central Africa			
	Cameroon	42%	DHS 2004, National
	Democratic	64%	DHS 2007, National
	Republic of		
	Congo		
East Africa			
	Ethiopia	71%	WHO 2002, National
	Kenya	41%	DHS 2003, National
	Malawi	28%	DHS 2004, National
	Mozambique	40%	IVAWS 2004, National
	Rwanda	34%	DHS 2005, National
	Uganda	59%	DHS 2006, National
	Tanzania	41% City, 56% Province	WHO 2002, City and Province
	Zambia	50%	DHS 2007, National
	Zimbabwe	38%	DHS 2006, National
South Africa			
	Namibia	36%	WHO 2002, City of Windhoek
	South Africa	14% physical, 4% sexual	DHS 1998, National

Source: UN Women, March 2011. Violence against Women Prevalence Data: Surveys by Country.

2.2.2 Ethiopia's Statistics on Gender-based Violence

Ethiopia is a country particularly affected by the issue of violence against women and girls. According to the WHO, in their lifetime, 55.9% of women suffer of physical and/or sexual intimate partner violence and/or non-partner violence. This represents more than half of women in Ethiopia. With the help of international funding organizations like UN Women, progress has been realized in Ethiopia to reduce violence against women and girls and provide support to the victims but some studies undertaken at the national level indicate that violence against women in Ethiopia is still pervasive and that there is a need for due attention (Population Council and UNFPA, 2010).

Women in different parts of Ethiopia experience violence in various forms. For example, a large proportion, 25 % of Ethiopian women experienced their first sexual experiences under coercion as indicated in a study conducted in 2010 in seven regions of Ethiopia. (UNFPA and Population Council, 2010) The study further indicated that 92% of the perpetrators in these cases were spouses, while 6% were boyfriends or fiancés, and 2% were acquaintances or classmates. The study also showed a high level of acceptance of violence against women, where 35% of the women said that domestic violence was justified if the woman argued with her husband; 32% said it was acceptable if the woman refused to have sex; and 31% said it was justified if the woman neglected a child. Overall, 69% of the respondents in this national survey agreed that any one of these reasons could be enough to justify beating a woman. Similarly, men have a high acceptance for wife beating with highest acceptance rates among men in Somali (58%) and SNNP (56%). (CSA Ethiopia and ICF International, 2011) In a study undertaken by Population Council and UNFPA in 2010 on young adults aged 15 to 24 years, it was found that physical domestic violence was experienced by 10% of married women in the study group. In 2010, a national Gender Survey also showed that 7% of ever-married women had experienced psychological abuse and insults. Though there is some statistics on early marriage, FGM and to some extent on reported cases of civil and crime cases, it is also worth noting that other forms of violence such as economic and psychological violence may be underreported or even not recognized.

Recent survey undertaken by CSA Ethiopia in 2016 shows that more than one-third of ever-married women reported that they have experienced physical, emotional, or sexual violence from

their husband or partner at some point in time. 24% of women report that they experienced emotional violence, 25% experienced physical violence, and 11% experienced sexual violence. Experience of physical, emotional, or sexual violence from a husband or partner is higher among older women 40-49 (3%), formerly married women (45%), those living in rural areas (36%), and women in Oromia (39%), Harari (38%), and Amhara (37%). The survey also shows that experience of spousal violence decreases with increasing educational level and household wealth.

2.3 Ethiopia's Law on Gender-based Violence

The Government of the FDRE has formulated several laws and policies to promote gender equality. Particularly Article 35 of the Constitution of the Federal Democratic Republic of Ethiopia clearly stipulates the rights of women. The government has also been promoting the mainstreaming of gender in all its development policies and strategies to address gender inequality. Women's National Policy was formulated and adopted in 1993 in order to address gender inequality. National institutional machineries were established at federal, regional and Woreda (district) levels to implement the policy. The Women's Affairs Office has been reestablished as a full-fledged Ministry in October 2005 with the duties and responsibilities of ensuring participation and empowerment of women in political, economic, social and cultural matters (FDRE, 2006).

The constitution has provisions that protect victims of HTPs, for all its citizens and particularly for Women. Article 35(4) stipulates that the State shall enforce the rights of women and that laws, customs and practices that oppress or cause bodily or mental harm to women are prohibited. Rape, abduction, female genital mutilation and early marriage are some of the main gender based violence perpetrated against women in our society(ibid).

In a baseline survey conducted in 1998 by the National Committee on Harmful Traditional Practices on ethnic groups in the country, it was reported that there are some 88 forms of HTPs, 90% of which are found to have negative consequences on the physical and mental health of Women and Children. 8 recommendations were made by this and other related studies to formulate a specific law or revise the existing laws to mitigate HTPs against women. Accordingly, different measures have been undertaken in order to amend discriminatory

legislations. For instance, the revisions made in the family code, among others, include the following major amendments (ibid):

- Whereas the minimum age for marriage which used to be 15 and 18 for female and male, respectively, has been revised to be 18 years for both sexes.
- The revised code came up with a provision that common property shall be administered jointly by the spouses unless there is an agreement, which empowers one of them to administer all or part of the common property.
- It permits divorce by mutual consent of the spouses and it is not classified in serious and other cases unlike the previous provisions, which was considered to be discriminatory against the woman.
- It limited the role of family arbitrators who used to refer divorce cases to be entertained by courts.
- It also states that marriage should be based only on the consent of the spouses.

The criminal code is also revised taking into account the issue of gender. It has the following punishable provisions, which did not feature in the previous code(ibid).

- Endangering the lives of pregnant women and children through Harmful Traditional Practices.
- Causing bodily injury to pregnant women and children through Harmful Traditional Practices.
- Violence against a marriage partner or a person cohabiting in an irregular union. Female circumcision and FGM are also punishable. Whoever circumcises a woman of any age and infibulates the genitals of women will be punished.

2.4 Combating Gender-based Violence

Combating GBV involves both preventing the attack from happening and responding to the attack but some argue preventing GBV, to stop it from happening in the first place, should be a key priority. Given that GBV is based on gender norms and gender-based power inequalities, GBV prevention strategies are intrinsically linked to efforts to increase gender equality more generally. Hence, rather than disconnecting and treating GBV as a separate and isolated problem, it has to be situated in the context of gender inequalities (Sida, 2015).

The international community has tried devising a way for preventing and responding to GBV, almost all agree the battle of combating GBV starts with changing the attitudes societies. Below are rounded up steps into preventing GBV.

- Shift in focus from seeing women as victims to seeing them as survivors, actors and agents of change with a strong focus on women and girls' empowerment and agency (ibid).
- Efforts to increase women's political participation and influence in contexts of peace, conflicts and other humanitarian crisis. Women have rights to participate on equal terms with men in political bodies at all levels of the society, including in peace processes. In many countries women's political representation is very low, and women are often excluded from formal peace negotiations. This has devastating consequences for the possibility to reach a sustainable development, peace and human security (Knoth, 2013).
- Efforts to increase women's economic empowerment that enhance women's bargaining power and ability to leave abusive relationships. This includes strengthening women's entrepreneurship and employment opportunities, improving women's access to land and property rights, promoting equal sharing of unpaid care work between women and men and encouraging universal access to quality education. While such efforts can contribute to increased violence against women in the short term due to gender ideals linking masculinity to the provider role, increasing women's economic empowerment is still crucial for longer term prevention of GBV. Women's economic empowerment interventions which also address gender norms and reach couples and communities can reduce such risks (ibid).
- Efforts to increase sexual and reproductive health and rights are crucial for preventing GBV given the close relationship between the two. Such efforts include promotion and protection of women's right to have control and decide freely over matters related to their sexuality, including sexual and reproductive health, family-planning possibilities and HIV/Aids prevention (UNHCR, 2011).
- Incorporate men and boys as perpetrators, as victims/survivors and as agents of change. Men and boys are often neglected as survivors of GBV. Hence, there is a need to recognize and address men's and boys' particular vulnerabilities and needs in relation to GBV, especially in the context of armed conflict. Rather than simply 'bringing men in' to

work against violence against women, there is a need to work towards transformed norms around gender relations and masculinity. Such an approach acknowledges that men and boys are also restricted by expectations linked to masculinity and can also be victims of violence. A failure to recognize and address this can contribute to the perpetuation of cycles of GBV. When successful, though, such an approach enables men and boys to become agents of change (ibid).

- Transformation of norms and behavior that underpin GBV. The logic of GBV 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. Prevention efforts should start early in life and be directed at girls and boys. Both non-formal education and formal education are important sites for normative change and have the potential to address gender inequalities and prevent GBV (ibid).

Response to GBV is as important as preventing the attack before it takes place, both activities are intertwined. Respond only and you'll be responding forever. Prevent only, and you ignore the survivor in front of you (USAID, 2016). Taking action against GBV after the attack involves providing the abused with medical and psychological support, legal aid, providing a rehabilitation center for them to have a safe environment. As one of the response mechanisms for GBV, rehabilitation and reintegration centers or shelters have a great role to play in the provision of secure accommodation for women and girls who are at risk of or have been subjected to violence. Shelters are basic elements in providing protection services and resources which enable women and girls who have experienced violence, sexual abuse, etc., to recover from the traumatic violence experiences, rebuild their self-esteem, and take steps to regain a self-determined and independent life (Gierman, 2013).

III. Research Design and Methodology

3.1 Research Design

The main aim of this research is to assess the effectiveness of projects initiated to combat GBV in Ethiopia hence it will answer that the what, when and how aspects of the activities performed in the project taken as a case study. In order to achieve this, the researcher employed descriptive type of research since descriptive research is used to obtain information concerning the current status of a phenomenon and to gain insight into operations associated with certain processes.

3.2 Data Source

To gather relevant and applicable data that was suitable for this research, both primary and secondary sources were used. Primary data were collected through semi structured interviews with the employees of AWSAD and women and children that have taken refuge in two shelters stationed in Addis Ababa. In addition, secondary sources like organization's internal documents, websites, books and published articles were used.

3.3 Sampling and Sampling Technique

This research was done on one project named Enhancing Psycho-Social Support and Economic Wellbeing of Women. Purposive type of sample selection was used for all interviewees, employees from the project organization and women and children from two shelters. The reason this technique was chosen is that respondents from all groups have had to have some association with the project under assessment and also the beneficiaries at the shelter had to be willing to share their stories and experience. The employees selected have worked directly on the project and the women and children chosen have gotten most of the services provided by the shelter.

3.4 Data Collection

Data for analysis was collected from both primary and secondary sources. As the primary data, semi-structured interviews were conducted. Four employees from the project organization were chosen based on their post in the organization and their role in the project. The interview was semi-structured in nature in order to enable further discussion on the topic. To corroborate the data gathered from the organization, another interview was conducted. Women and children from the shelter were approached through the organization and those willing to share their opinion and experience were questioned. Since the researcher was informed of the language

barrier that might exist, all interview questions composed for the project beneficiaries were converted to the local language Amharic with the help of a language expert.

The response given by the interviewees was recorded through a mobile phone and further notes were taken by the researcher.

3.5 Data Analysis and Presentation

After the data was collected from primary and secondary sources, the researcher analyzed and compiled the data using both qualitative and quantitative methods. The data gathered from the semi structured interviews with the employees and project beneficiaries were analyzed using qualitative technique as the questions were intended to get a subjective grasp about the project and its success factor. Further, collected figures from the project document were analyzed from the point of aimed and achieved project plans.

On the other hand, data gathered from the interview intended for those that took gender mainstream trainings was analyzed and presented using simple statistic percentage. The questions were designed in a way that could indicate the respondents understanding of certain topics hence aiding the researcher in summarizing the assessment of the project.

3.6 Validation and Reliability

It is obvious that no single method can grasp the subtle variations in an ongoing human experience. As a result, this study has deployed different interconnected approaches and methods as all of the data collection techniques describe above have strengths and weaknesses. One way to emphasis the strength and minimize the weakness' is to use more than one method in a study. By selecting complement methods, a researcher can cover the weakness of one method with the strength of another. Therefore, good research will often include multiple method of data collection technique, which is known as triangulation. Triangulation of the data permits the verification of data.

3.7 Ethical Consideration

Since GBV is a sensitive topic, the researcher approached all group of respondents with caution. Above all, consent was asked and the objective of the study was thoroughly explained, especially to those that went through the abuse. Only those that were willing to get their response captured through a mobile phone were recorded, the wishes of those that were not willing were well

respected. All respondents were assured whatever information they disclosed would be kept strictly confidential and will not be used for any other purpose than that of the study.

IV. Data Analysis and Presentation

This chapter includes the presentation, analysis and interpretation of the collected data following the research questions. The data is presented according to the order of the research questions. In addition, the findings from the secondary data will be discussed in detail.

AWSAD is an Ethiopian resident charity association established to advance women's social and economic development and provide support for women and girls that faced physical and psychological harm. AWSAD has established five shelters in Ethiopia, two in Addis Ababa, two in Oromia region and one in SNNPR.

The project under assessment, Enhancing Psycho-Social and Economic Wellbeing of Women, was initiated in 2016 and is still ongoing. It was started to both prevent and respond to GBV in Addis Ababa through helping and improving the lives of women and children that have gone through abuse in the past and change the attitude of residents living in three sub cities in Addis Ababa, namely Yeka, Gulele and Addis Ketema sub cities. Out of the five AWSAD shelters, this project is focused on the shelters located in Addis Ababa.

The following results were obtained from four employees of AWSAD and ten beneficiaries of the project. The employees consist of three officers and one coordinator that directly work on the project. For the purpose of data presentation, they will be referred to as respondent 1, 2,3and 4 respectively. Out of eighteen young girls living in one of AWSAD's shelters, 10 were willing to share their stories and opinion.

4.1 Enhancing Psycho-Social and Economic Wellbeing of Women: Changes brought by the Project

Since combating GBV involves not only preventing attacks from happening but also responding to the attacks, the researcher realized the employees roles in the project were separated based on this classification. From the prevention side, respondent 1 and 2 are responsible. The rest two respondents are working on responding to attacks against women. Respondent 1 is responsible for the outreach trainings given to the residents of Yeka, Gulele and Addis Ketema sub cities and responded by mentioning the trainings given to community facilitators and community leaders. Community leaders include prominent neighborhood figures and religious leaders of the given sub cities. Respondent 2 is responsible for trainings given to public prosecutors and police

officers. Respondent 3 and 4 are responsible for the activities given to the women and children at the shelter. They all mentioned responsibility for the trainings does not necessarily mean they give the trainings themselves; sometimes the trainings are given by trained advisors and facilitators.

4.1.1 Prevention of GBV

Respondents 1 and 2 were asked to further discuss the activities associated with their roles. Respondents 1 said that the organization collaborates with prominent community elders and religious leaders to reach the communities in three sub cities. According to a survey done in the organization, out of the ten sub cities in Addis Ababa, it was found that these three sub cities have high number of cases of abuse against women hence the reason the areas were chosen. In response to why they train community facilitators, Respondent 1 said that the organization does not directly give training to the residents in the mentioned sub cities but through the community facilitators. The religious leaders and community elders take part in the trainings so they open an informal dialogue with the community and change the attitudes of people about women's rights.

Respondent 2 went on to discuss about the trainings given to public prosecutors and police officers and mentioned how this particular training is essential to preventing GBV. Respondent 2 said that to this day, not all police forces and public prosecutors have clear understanding of GBV and how to respond to it if they came across a victim. Most of them do not know they can stop an attack from ever happening again. Respondent 2 gave an example and said in the past, if a women came to the police and explained that her husband is abusing her, the chances of her being told to go back and fix her marriage are very high since the police used to believe this is a family affair and not a human right violation. So by educating the police and public prosecutors about women's rights, respondent 2 believes the response to GBV will reduce the chances of women getting violated. Further, respondent 2 explained that a proper conviction and sentencing of a perpetrator will minimize the probability of that kind of attack from happening again.

Both respondents said they have achieved 100% of what was plan at the beginning of the project year. They had specific number of people to reach and both said they have managed to train and change the attitude of the appointed trainees to the point where they believe they were successful. When asked how they measure their effectiveness, both respondents said they used the organization's standard to get feedback from the trainees. It has a pre/post test follow up

system that measures the change in attitude in the trainees. According to the project documents provided by AWSAD, all trainees have a better understanding about GBV and women's rights.

The table below shows the number of people that received training on GBV. All trainees provide services to the residents of Yeka, Gulele and Addis Ketema sub cities.

Table 3: Number of people educated about GBV: Planned VS Achieved Results

Category	Planned	Achieved
Community facilitators	12	12
Community leaders	120	120
Public prosecutors	50	50
Police officers	163	163

Source: Project Report

4.1.2 Response to GBV

As mentioned in the literature review, response to violence against women is another part of combating GBV. Respondents 3 and 4 where asked about what their role is in the project and both had more or less the same answer. Both explained that they are responsible for the admission of abused women in to the shelter. When asked where they find these women, respondent 3 answered by saying it differs from time to time. In most cases though, they are referred by police officers and Ethiopian women affairs. For the purpose of getting a detail description, both respondent 3 and 4 were asked to explain the steps involving the admission of a victim in to the shelter. Respondent 3 started by saying registration is the first thing they do. That involves asking the girl's/woman's full information like name, age, place of birth, former place of residence…etc. Even though the project is based in Addis Ababa, it does not mean AWSAD does not accept women from other cities. Then questions about the abuse are brought up. After all that's done, she's taken to a medical doctor for a full physical check up. Based on her medical needs, she'll get the proper treatment. The final step is finding a place for her to stay and that is determined by her age. If she is under 18 and she will automatically be placed in the shelter established for children. Respondent 4 added there are special cases where the girl/woman might be placed in the children's shelter even if she is above eighteen. If the girl/woman was in school before the horrid attack met her fate, she'll be placed in the children's shelter so she can be with

girls that have more things in common with her. According to both respondent 3 and 4, they have not encountered a girl/woman that did not need medical attention. This indicates the severity of the abuse these women and children have experienced.

Moving on to the services the women and children get at the shelter, respondent 3 mentioned a list of services. These include counseling, empowerment sessions, self defense classes, legal follow up if there is the need for it, basic literacy, cooking, Hair dressing, cloth sowing and a chance for them to have an education outside of the shelter fully sponsored by the organization. The shelter also provides breakfast, lunch and dinner meals for all residents. In addition to the first check up they get, they are also provided with free medical service. Respondent 4 added that the women have a choice on participating on some of the activities. For example, an elderly woman might not want to get self defense classes.

According to both respondents, the next question is the most asked by almost every researcher, which is if there are cases where boys are allowed to stay in the shelter. Respondent 4 answered they would have to be below the age of seven. If they are above that age, they together with their mother will get referred to another shelter established by another NGO.

Respondent 4 was asked the last question and it was how they monitor and control this part of the project. Respondent 4 said they frequently monitor the wellbeing of women and children through the counselors and also they ask them, one quarterly bases, if there are some essential desires they want fulfilled. They keep a close eye on them to make sure they reach the desired physical and mental state which will enable them to leave the shelter ready. When a woman from the shelter feels like she is ready to leave, she will be given some economic support. AWSAD will find a place for her to stay at with few months rent paid off and also she will be given start up money for the business venture she wants to pursue to make a living.

4.2 Challenges Experienced in the Project

Every project is laced with multiple challenges. A project with no challenge means no work has been done. For a project like the one under assessment, challenge is a normal phenomenon since it involves understanding people's behavior and leading that behavior to a positive and productive path. Respondent 1 and 2 experienced the same problems since they are responsible of changing attitudes of society. Respondent 1 mentioned the difficulty of shifting the minds of

people that have been taught that men are superior and women have to follow their lead especially when they think culture and religion are on their side. Respondent 2 mentioned difficult does not mean impossible, just that one needs to dedicate more time and effort. Respondent 1 added the challenges faced are those that can be mitigated with the proper approach.

Respondent 3 and 4 on the other hand face problems that are much harder. When asked about them, respondent 3 said the most recurring problem is that they don't have enough space to house all the women that come to the shelter. Even though the women's shelter is suitable for fifty residents, it usually has more than that number. When the researcher asked how many residents there are currently, respondent 3 said seventy, which means twenty women are living in conditions that are not comfortable. The other challenge mentioned by respondent 4 is that it is still difficult to convict rapists. The gap in the justice system of Ethiopia is one reason but that not all. The women do not know their rights. In addition, there is usually no proof of rape since the women report the case few days after the incident in which case there is no DNA to identify the perpetrator with.

Finally, respondent 4 said a new problem has been encountered these past couple of months which is an increased number of gang rape cases. Rape cases are normal in Ethiopia since there are some cultures that still radiate the thought that it is a rightful passage for a young girl to be abducted by a man much older than she is and to be taken for a wife. The perpetrator in this case is one man and it is easy to convict the rapist if the case is brought to justice on time. But gang rapes are not common in Ethiopia since there is no culture that encourages multiple men to take part in forcing a young girl to have intercourse. It is also hard to convict multiple men for one incident.

When asked what they have done to fix the problems, respondent 3 and 4 had their own answers. Respondent 4 said that the outreach programs have been restructured to involve more girls and women of Addis Ababa so they know their rights and also they know how to defend themselves. Further, a guide on what to do after an attack happens has been included in the training module. When asked to elaborate more, respondent 4 said almost every woman thinks the right thing to do is to report the case immediately. But that is partially right. As mentioned earlier, the reason most rapists are hard to convict is because there is no DNA evidence. As disturbing as it sounds,

a woman should do her best to not take a shower after the rape has occurred, that way the DNA is preserved.

The problem of the overcrowded shelter can only be fixed by acquiring more funding. That is according to respondent 3 but that is all that was said. Neither respondent 3 not 4 wanted to discuss more on that topic.

4.3 Effectiveness of the Project in Combating GBV in Addis Ababa

As mentioned multiple times, the effectiveness of combating GBV projects resides both in preventing and responding to attacks. Unfortunately, measuring the effectiveness of this specific project in relation to prevention of GBV is difficult. The researcher in this case checked the project's documents to analyze planned and achieved values. As seen earlier, the project team has been successful in reaching their goals. To further aid the research, the organization was asked to kindly submit the contact information of the public prosecutors, police officers, community facilitators and community leaders it trained but AWSAD was not willing to cooperate.

The researcher on the other hand was allowed to interview women and children taking refuge in the shelter which made assessing the response aspect of the project relatively easier. But again a problem was encountered as the researcher was only able to interview the women from one shelter only.

Currently, there are eighteen young girls ranging from 10 to 24 years of age living one of AWSAD's shelters. Out those eighteen, ten girls aged 15-24 were willing to share their story and experience. They were not directly asked about their past, the researcher did not see the significance of making them go through their horrid past. Instead the gap was filled by information gathered from their personal file. The questions were inviting in nature so through the responses of the girls, the researcher could corroborate the data gathered from the employees of AWSAD and in the end, gather additional data. Since most of the girls were under age, the questions had to first get vetted in case they were inappropriate. For this reason, the ten year old girl was excluded from taking part in the interview.

Below is a table providing information about the young girls' history. The classification was made based on the format mentioned in the literature review. The age of the survivors references the age they were when they were assaulted.

Table 4: Summary of the victims' past history using GBVIMS classification tool

Type of GBV		Accused Perpetrator		Survivor age		Case context
➢ **Physical Assault**	+	Uncle	+	19	=	Domestic violence
➢ **Rape**	+	Any	+	15	=	Child sexual abuse
➢ **Rape**	+	Father	+	14	=	Child Sexual Abuse
➢ **Forced Marriage**	+	"Husband"	+	13	=	Early marriage
➢ **Rape**	+	Step brother	+	14	=	Child Sexual Abuse
➢ **Rape**	+	Family friend	+	17	=	Child Sexual Abuse
➢ **Rape** ➢ **Denial of resources** ➢ **Physical assault**	+	Intimate partner	+	18	=	Intimate partner Violence
➢ **Rape**	+	Unknown	+	18	=	Rape
➢ **Rape**	+	Unknown	+	17	=	Child Sexual Abuse
➢ **Rape**	+	Unknown	+	17	=	Child Sexual Abuse

Source: AWSAD profiling document

Additional information gathered from the organizations profiling document includes the girls' place of residence before the incident and they current educational level. The researcher gathered seven of them are from Addis Ababa, two are from Oromia and one is from SNNPR. They are all currently in school, two girls are in government universities, two are in 12th grade, one 11th grader, one 10 grader, two nine graders, one 8th grader and one 4th grader. After their past history was gathered from the organization's profiling document, the girls were asked about the services they were provided with when they first came to the shelter. The respondents listed the same services, in corroboration with the first interview conducted with the employees of AWSAD. As mentioned by the employees, there were those who could not get legal representation because there was no legal way to convict the perpetrators. There were even those that didn't want the service because they didn't want their family members and former partners to go to jail. They just want that part of their life to be forgotten. Below is a summarized presentation of the services the girls got and also those who did not want or could not get the services provided by the shelter.

Table 5: services provided in the shelter

Service provided	Accepted service	Didn't want legal follow up	Couldn't get legal follow up	Didn't want literacy lessons
Medical care	100%	-	-	-
Counseling	100%	-	-	-
Empowerment session	100%	-	-	-
Self defense classes	100%	-	-	-
Legal follow up	40%	40%	20%	-
Basic literacy lessons	80%	-	-	20%
Cooking	100%	-	-	-
Hair dressing	100%	-	-	-
Education	100%			

Source: Survey data

Moving on to how the services provided helped them cope with their past, almost all had the same answer. The girls all said they were physically and mentally damaged when they were first

admitted in to the shelter but through counseling, they all said they found a way to live with what happened to them. The other services also helped them move on, each choosing what they liked most to concentrate and remove the pain. One respondent mentioned the cooking lessons were therapeutic for her. One respondent said even though the services helped all of them, for her what meant more is the fact that she had a place to stay and have friends that understand her. She believes one opens up more when conversing with people that have gone through the same kind of ordeal.

The next question involved the researcher asking the respondents if there is an area for improvement about the shelter and its services. All but one said they are satisfied and grateful for everything they have gotten through the shelter. That one respondent didn't exactly dispute what the others said, instead added that there are areas in her studies she would like to get tutored on.

After those three questions were answered, the researcher moved on to the next part of the interview which was constructed with the hopes of acquiring data that surmises the result of the counseling and empowerment sessions the girls have been subjected too. Even though the answers do not exactly match, the ideas behind the responses were identical. Each and every one was asked their opinions about equal right for both sexes and they all had the same response saying that everyone deserves to have equal human rights and that neither men nor women should get favored since neither are superior to the other. The researcher then asked if a woman should aspire to become a wife and mother only and all of them instantly rejected that notion. One respondent mentioned that a woman should aspire to become a wife, mother and a leader of some sort. She mentioned she aspires to become like AWSAD's director.

The respondents were then asked if a woman should earn more than her husband and they all said they don't see a problem with that arrangement. One girl even mentioned that the settings should have been like that since a woman with any amount of salary thinks about improving the life of her husband and the children, contrary to a man thinks about.

The next question hit close to home to all of the respondents since it was about abuse. They all said there should no circumstance in the world that allows a man to inflict any kind of abuse on woman. The woman may be nagging or unfaithful. They all agreed men should take a legal stand against women that make them unhappy instead of saying nasty things or raising their fists.

Out of the ten interviewees, only six where asked the next question since the rest are not of age. They were asked if a woman should be able to refuse sex from her partner and all six said that was well within her right. The eldest of them all said it should be written in Ethiopia's constitution and should even refer to couples that are married.

The last question was asked to all of the respondents. Most of them didn't start by saying yes or no like the pervious answers but said they are clear indications that a woman can move on and live a normal life after an attack. And if another attack was to happen to her, her past experience wouldn't hold her back. Instead it will help her stand up for herself.

V. Conclusion and Recommendation

5.1 Conclusion

As seen from the collected and presented data, AWSAD has done an impeccable job of preventing and responding to GBV in Addis Ababa. Changes brought by the initiation of the project are clear to see. From the prevention aspect, the organization has taken a step forward in educating and imparting knowledge to some residents of Addis Ababa in return stopping an attack before it happens. The measures taken to facilitate this process are commendable; the planning team has taken an advantage of the fact that Ethiopian communities have great respect for prominent figures and religious leaders in their society. AWSAD has managed to change the minds of many through few respected figures. In addition, they have managed to organize and train police officers and public prosecutors. This too will stop further attacks from happening with the lawful conviction of perpetrators.

From the aspect of combating GBV through responding to victims attacked, it is safe to say AWSAD is an organization worth learning from. The length this organization has gone to protecting abused woman is astonishing. It shows that the bias associated with NGOs in general does not apply to this organization as it is doing more than it is capable to take care of victims of GBV. The fact that almost all of the women and children living in the shelters have nothing to say on how to improve their living situation indicates the success of the organization and associated project.

In conclusion, the assessment on effectiveness of this project can be surmised as successful from the data gathered and presented above. If more projects like the one under assessment were initiated, it is the researcher's belief that GBV will be eradicated.

5.2 Recommendation

To summarize the study, the findings of this research appear to be promising in combating GBV. As a recommendation, the researcher strongly believes more could be done on the prevention front. Additional awareness creation trainings should be organized to involve more people from different parts of Addis Ababa with different cultural and religious backgrounds. AWSAD should also seriously consider collaborating with gender offices based in universities. Educating the youth about gender equality and GBV can be advantageous in combating violence against

women for future generations. If possible, more funding should be acquired to establish more shelters in Addis Ababa and other parts of Ethiopia since there is still a lot to be done on responding to violence against women. AWSAD should publicize its projects and shelters through local radios, TV shows, and most importantly social media to gain international and local donors. Finally, noting the difficulty of satisfying the need of multiple individuals, the researcher recommends the organization does more to fulfill the desires of the woman and children at the shelter, with respect to the gap mentioned in the data analysis section. To eliminate the problem, one on one and group interviews should be conduct with shelter refugees.

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Appendix A

Addis Ababa University

College of Business and Economics

School of Commerce

Department of Project Management

Interview questions for employees of AWSAD

Hello, my name is Niat Tsegaye and I am a student in Addis Ababa University, School of Commerce. I am doing my thesis for the partial fulfillment for the Master's Degree in Project Management and I need your help in acquiring data that is essential for the research I am conducting. This study is being conducted to gather data and information on the effectiveness of Gender-based Violence projects in combating violence against women in Ethiopia. The information you provide will be kept strictly confidential and will only be used for research purposes.

Thank you very much for participating.

1. What are the activities incorporated in the project?
2. Where do the abused woman and children come from?
3. What are the services provided in the shelter?
4. How does the organization monitor and control project activities?
5. Are boys/men allowed to stay in the shelters?
6. What are the challenges faced in the project?
7. What are steps taken to mitigate the challenges?

Appendix B

Addis Ababa University

College of Business and Economics

School of Commerce

Department of Project Management

Interview questions for women and children living in the one of the shelters

Hello, my name is Niat Tsegaye and I am a student in Addis Ababa University, School of Commerce. I am doing my thesis for the partial fulfillment for the Master's Degree in Project Management and I need your help in acquiring data that is essential for the research I am conducting. This study is being conducted to gather data and information on the effectiveness of Gender-based Violence projects in combating violence against women in Ethiopia. The information you provide will be kept strictly confidential and will only be used for research purposes.

Thank you very much for participating.

1. Has the shelter provided any training for you to take part in? If yes, please list them.
2. How have the trainings provided by the shelter helped you in coping with what happened to you?
3. If it was up to you, what would you improve about the shelter and the services AWSAD provides?

The next part of the interview is done to compile data on what you think about some issues related to boys/men. Anyone of you can voice out your opinion without prejudice. Please keep in mind there is no right or wrong answer, this discuss will only add to the data gathering process. Just like before, the information you provide will be kept strictly confidential and will only be used for research purposes.

1. Women should not have equal rights as men.
2. Men are superior to women.
3. A young girl should only aspire to become a wife and mother.
4. A mother's responsibility is taking care of the house and children only.

5. Women should not earn more than their husbands, boyfriends or brothers.
6. A husband, boyfriend or brother should abuse his wife, girlfriend or sister if she disagrees with him.
7. A husband/boyfriend should abuse his wife/girlfriend if she is unfaithful to him.
8. A wife/girlfriend should not be able to refuse sex from her husband/boyfriend.
9. A woman that has been abused in the past cannot defend herself against abuse in the future.