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Prevalence, Attitude and Factors related
to sexual violence among
high school students

A Thesis presented To
The school of Graduate Studies of
Addis Ababa University
In partial fulfilment of the requirements of
the degree of Master of Public Health

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May 1996

ADDIS ABABA UNIVERSITY
School of Graduate Studies

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Declaration

I the undersigned, declare that this is my work and that all sources of materials used for this thesis have duly acknowledged.

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This thesis has been submitted for examination with my approval as University advisor .

Mesfin Kassaye MD.

Advisor

Acknowledgements

First of all I would like to thank Swedish International Development Agency (SIDA) through the Ministry of Health for funding this study and specially W/O Hiwot Mengistu of Family health department, MOH is very much appreciated for her concern and support throughout the study.

This thesis would have been impossible had it not been for the invaluable support of my advisors, Dr Mesfin Kassaye and Dr Yemane Berhane of the department of community health who gave me the necessary guidance and support. I had also benefited very much from the comments of Dr Berhanu Demeke, Dr Fisseha Eshetu and Ato Fikre Enquesilasie who reviewed the manuscript.

I would like to thank region 4 and Region 14 Education Bureau for allowing me to conduct the study. I would also like to express my heart full gratitude to the following senior secondary schools and students: Menilik II, Ethiopia Tikdem, Kefteгна 4, Addis Ketema, Medhanealem, Entoto, General Winget, Bole, Tikur Anbesa, SOS, Ambo, Ginchi, Holeta, Sebeta, and Wolliso.

I would like to thank Supervisors, data entry clerks and Department of Community Health office and library staff whose contribution was vital to the completion of the paper. My special thanks goes to Ato Wondwossen Bekele and W/O Atsede Asfaw who gave me secretarial assistance throughout the study.

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List of abbreviations

AIDS- Acquired Immunodeficiency Syndrome

FGD-Focused Group Discussion

HIV- Human Immunodeficiency Virus

MOH- Ministry of Health

PAHO- Pan American Health Organization

STD- Sexually Transmitted Diseases

USA- United States of America

W.Shoa- Western Shoa

Abstract

Though sexual violence is increasingly being recognized as a problem in different countries there is a knowledge gap regarding this problem in Ethiopia which prompts the conduct of this study. Focused Group discussion and cross sectional school-based survey using self administered anonymous questionnaire was conducted in Addis Ababa and Western Shoa high school students from January 1 to January 15, 1996 to determine prevalence, factors related to, reported outcome and attitude of high school students towards sexual violence. A total of 2773 students were involved in the study. A prevalence rate of completed rape and attempted rape among female students was 5.2% and 10.1% respectively. Eighty nine (6.5%) of male students admitted to rape a girl while 181 (13.2%) claimed to attempt rape. Sexual harassment was reported in 74.3% of female students. Unwanted pregnancy and different forms of psychiatric disturbance were reported among rape victims which signifies the role of rape in these health problems. There was significantly higher proportion of rape among female students who were aged more than 20 (OR=6.00 95% CI, 2.75, 12.67), from divorced family (OR=2.46 95% CI:1.31, 4.5), who were living alone (OR=4.88 95% CI:2.17,10.71), who were living with a relative (OR=2.49 95% CI:1.10, 5.46) and who had a boy friend (OR=7.86 95% CI:4.56, 13.64). There was a significantly higher proportion of committing rape among males who were living in rural areas, who were living alone and who had a girl friend (OR=0.43 95% CI:0.26-0.69; OR=2.44 95% CI:1.16, 5.02; OR=4.48 95% CI:2.82,7.11 respectively). Substance use and physical force were also contributing to the offence. On attitude towards sexual violence major proportion of students believe that it is "acceptable" to force a girl to have intercourse in certain conditions. Both the survey and focus group discussion address that sexual violence is a serious problem and not a rare event among high school students. Based on these findings it is recommended that sexual violence deserves due attention and remedial action from concerned bodies and further qualitative study is recommended to have in depth knowledge.

Introduction

Information about women's health problems in the Third world countries has been relatively scarce and until recently available information tended to focus on the most negative indicators of women's health status, that is, the maternal mortality rate. The safe motherhood initiative represents a first step toward focusing more on the health of women, to include the full range of women's reproductive health needs.(1,2)

Health hazards are present at every stage of women's life cycle in developing countries which includes reproductive health problems, excess female mortality in childhood, violence against girls and women and occupational and environmental hazards (1)

One of the problem identified violence against women is any act of gender-based violence that results in, or is likely to result in, physical or psychological harm or suffering to a women. The sensitivities and stigma associated with sexual violence, considering it primarily as a legal issue, and the lack of data on the dimensions of abuse have hampered understanding and the development of appropriate interventions. (3,4,5)

The health consequence of violence against women may be a serious problem world wide which represents a hidden obstacle to economic and social development. In addition to physical and emotional trauma, rape survivors also run the risk of becoming pregnant, contracting STD including HIV/AIDS (6).

Health and social problem of young people (age 10-24) includes alcohol and drug abuse ,accidents ,unwanted pregnancy, abortion and STD including HIV/AIDS (7,8,9).This age group is also particularly vulnerable to being used by other persons sexually which is receiving increased attention nowadays (9). Among the group which are vulnerable to sexual assault and its consequences due to age and other related factors included high school students. This study therefore for a start made this group the focus of the study. Being the first of its kind it's felt it will be conducive to conduct such a study in a high school setting where conditions are more contained and controlled. Studying sexual violence in high school students had a double role of identifying problems young people face and from gender perspective it will assess the additional health burden female students face being a female.

In the context of Ethiopian situation since there is no study regarding sexual violence it is relevant to look into the problem so as to have to the basic information which will help for policy makers and organizations working with youth to design intervention measures.

The objective of the study was reviewed in terms of relevance, timeliness, political acceptability and duplication. The study since it addresses the physical, mental and social wellbeing of a women it is relevant to its purpose. It is also a timely issue because this problem is gaining prominence worldwide and documenting it will help in designing interventions. With the current consensus on the issue of female empowerment as a key to development, Its felt that the results of the study will be useful for political decision making. Duplication is not going to be a problem because no other similar study has ever been conducted in Ethiopia.

Literature review

Violence against women is perhaps the most pervasive but the least recognized human right abuse in the world. It's also a profound health problem sapping women's physical and emotional vitality (2). There are evidences of growing international concern over violence against women. In 1992 PAHO sponsored international conference on the same issue. ECA and OAU placed violence on the agenda for the meeting of African ministers. In 1993 the UN general assembly pass declaration on eradication of violence against women (5).

Magnitude of sexual violence

There are different terms used to describe sexual violence like sexual coercion, rape, sexual harassment, and sexual abuse which all signifies non consensual sexual activity(4,10,11,12).All these terms are used interchangeably in this text unless and otherwise specified on methods section.

Violence against women is a major health problem around the world. It often goes unnoticed and undocumented partly due to its taboo nature. As any issue similarly under reported and fraught with

problems of measurement, driving an accurate statistics on violence against women represents a great challenge though different studies show women are remarkably willing and eager to share their experience.(3)

Historically rape has been perpetuated during episodes of organized violence as a means of breaking the structure of communities, to demoralize the enemy and energize their troops. Mass rape was recently been documented in Liberia, Uganda, Peru, Cambodia, Somalia and Bosnia. (5)

It's documented that most violence are predominantly perpetuated by men against women (13). It's revealed that one in five to one in seven women in US will be victims of a completed rape in their life time (2). Prevalence studies in USA in 1992 shows that at least 20% of adult women, 15% of college women and 12% of adolescents have experienced sexual abuse or assault during their lifetime (10). Among teenage girls in US 21-38% are in physically and sexually abusive relationships (14). In a study of 3998 students of grade 7-12 in rural mid western community, U.S.A. in 1989 it was found out that 20% of students reported some form of physical and/or sexual abuse of which

4.3% reported sexual abuse only while 5.2% report both (15). In a similar study in Uganda, of 400 primary school students 49% of sexually active girls were reported to have had forced sex (4). Among 7500, 15-16 years old girl students surveyed in Finland 7% of girls and 3% of boys were in a sexually abusive relationships (14). In a prospective study of rape in a dating relationship in USA in 1995 it was found that 23% of girls reported being sexually assaulted.(16). Different studies in America and Korea revealed unwanted sexual activity of 36% and 17% respectively (3,17).

In Canadian study rape victims age ranged from 4 months to 92 years (18). A study in New York state crisis center reported that 42% of sexual abuse reports involved adolescents which is the evidence that adolescents are particularly vulnerable to be used by other persons (19,20). American Medical Association reported that victimization for females is highest in the age group 16-19 age group and next highest in the age group 20-24 (10) and nearly half of all rapes or sexual abuse occur before the age of 14 (21).A government estimate in Canada revealed 1 in 4 females and 1 in 10 male children will be sexually assaulted before age 17 (22).

Recent studies suggest that majority of rapes are perpetuated by non strangers which include acquaintances, dates, husbands, long term partners and family members (22). Acquaintances represent 75% or more of all rapes which tend to cloud the issue of consent for many women and society in general (21,23). In a report from USA, Peru and Malaysia perpetrators are known in 78%, 60% and 68% of cases respectively (24). Boy friends are the most commonly reported perpetrators followed by dates, friends and acquaintances (16, 17). Children are most at risk of assault by family members and other caretakers (10). In a maternity hospital in Lima, Peru 90% of young mothers aged 12-16 have been raped by their fathers, step fathers or close relatives (24).

There are also studies whereby the assault is reported by the male. In a national sample of 2927 male college students in America, 25.1% admitted sexually aggressive acts, 7.7% rape or attempted rape, 7.2% had intercourse after menacing verbal pressure or misuse of authority (23).

Factors related to sexual violence

Individual, familial, pubertal, emotional and psychological state are conditions which predispose

to sexual abuse (16). Youth are involved in a violent behaviour because of lack of economic opportunity, inadequate training in basic social skills by family or school, lack of positive role models and profusion of violent antisocial role models. (14)

Factors which are identified to have an effect on the risk of abuse are previous history of sexual abuse, Low self esteem and Parenting style. It is documented that parents who involve their kids in decision making about important aspects of their personal lives will be less likely to experience sexual coercion compared to authoritarian homes where parents limit the adolescents involvement .It's also stated that where there is poor monitoring of parents, children are vulnerable to be victims of sexual violence (18).

Stress, alcohol abuse, social inequality between partners, living alone, low family income and poor interpersonal communication skills are also identified in abusive relationship (14,15,25). Compared to controls male subjects exposed to media of sexual violence perceive less victim trauma in viewing subsequent rape portrayal; reported greater acceptance of interpersonal violence against women; viewed rape as less debasing and degrading and viewed

the victim as worth less (23) and more likely to be involved in subsequent violent behaviour (26).

Consequences of rape

The physical and psychological consequences of domestic and sexual violence has been identified as emerging problem in public health (25). The nature of relationship as well as the degree of force and type of sexual activity holds implication for the consequence of the assault (22). The trauma the victims face is severe even many years after the incident. Victims of sexual assault are significantly more likely than non victims to be diagnosed as having mental disorders. Raped women also face additional possibility of becoming pregnant or contracting STD including HIV infection and AIDS. Where abortion in cases of rape is illegal or unavailable victims often resort to illegal abortion, greatly increasing their chance of future infertility and death (5,27).

Impact of rape on the victim can be seen in two phases the acute phase and the reorganization phase.

1. Acute phase (first few weeks) which includes the immediate effect of wide range of emotion and disbelief followed by anger, humiliation, shame, degradation, embarrassment, self blame and guilt. The behavioral reaction include emotional shock, depression, powerlessness, denial and fear.

2. The reorganizational phase will take months to years with a change in lifestyle with night mares, phobias, sexual dysfunction and a tendency to self destructive behaviour (10,18,28).

It's reported that almost 1 in 3 women who are raped developed rape related post traumatic stress disorder sometimes in their life (21). Women who had forced sexual contact had 2-4 times increased risk of subsequent depression, anxiety and substance abuse disorder and social isolation. Problem behaviour like attempting suicide and running away are documented to be strongly associated with the history of sexual abuse (15,19,24,29). Suicidal ideation and suicidal attempt reported in 33-50% and 20% of study samples respectively (10,23).

The Canadian advisory council for the status of woman estimates that pregnancy occur in about 12% of sexual

assault and in Costa Rica over 300 births per year attributed to violent relationship (14,30). Rape crisis center in Bangkok, Thailand report 10% of their clients contracted STD and 15-18% become pregnant as the result of rape (3).

Physical abuse and coercive sex lead directly to emotional and behavioral damage with drug and alcohol dependence, depression and low self esteem. The subsequently effect is high risk sexual activity, having multiple partner, unprotected sex and prostitution which all lead to unwanted pregnancy with all the complications. There is evidence for this, in the study done in the USA which revealed those who were abused were more likely to use drug and alcohol and less likely to use contraception. They started sex a year before than non-victimized ones and abused were three times more likely to become pregnant before age 18 than non abused ones (4).

In the Canadian urban victimization survey 61% of sexually assaulted women report bodily injury of which 20% required medical attention, 9% are severely beaten, 2% threatened, and 70% had verbal threats (10,18). Along with post traumatic stress, victims frequently changed residencies and restricted outside

evening activities (25).

Most victims of sexual assault don't experience the crisis in isolation, their family and friends also feel the after shock of such trauma. The effects are particularly pronounced when the victim is a child. Common emotional response that parents experience include guilt regarding failure as a parent, confused feelings towards the child and revenge feelings towards the offender (22).

Rape and domestic violence carry a substantial and roughly comparable level of disease burden per capita to women in developing and industrialized countries. which is comparable to that posed by other conditions already high in international agenda (5). A history of rape or assault is a stronger predictor of how many times a women sought care even compared to age or habit like smoking (30). In one study visits to physicians increased 18% in the year of the assault, 56% in the following year and 31% in the year after(10).

A cross sectional survey of primary care patients of health maintenance organization in USA reveal women who had been raped rated themselves as significantly less healthy visited a physician nearly twice as

often and incurred medical costs over twice as high as women who had not experienced of any criminal victimization (23).

Attitude towards rape

The idea that violence and dominance are somehow inherent to men's nature is an idea with many adherents in different parts of the world. But there is a growing consensus among experts that violence is neither an entirely biological phenomenon nor solely a product of culture. Far more important are the powerful social factors i.e. male socialization and peer pressure for violent behaviour in men(4).

People seem to believe that the primary responsibility for sexual assault lies with the women and that it's up to her responsibility to avoid the assault (31). The behaviour, appearance or character of rape victims often has been blamed for it's occurrence. Victim blaming is a key feature of such rape myths as "she asked for it". This has been referred to as "secondary victimization" and may result in a lack of support and condemnation of rape survivors. In a study in mennosota, USA, more than 50% of adults surveyed blame the women for rape and on the survey of 500 physicians 50% felt that 40% or

more of rape victims increased their likelihood of being attacked by behaviours such as wearing revealing cloths or acting in a suggestive manner (23).

In a similar study 60% of high school boys participated reported that it was acceptable for a boy to force sex in one or more of situations, such as if they had sex before, if the girl agrees to go home, if she led him on or if he became sexually exited. Approximately 35% of male college students responding to the questionnaire believed that they might rape if they could be assured of not being caught (21).

In one study only 27% of abused youth regarded themselves as having been abused. This denial of abuse makes it unlikely that they would seek help (19). In a similar study in USA 12% of the girls and 39% of boys felt that it was permissible for a boy to force sex on a girl if he had spent a lot of money on her (16).

It's common for rape survivors to look for evidence that they themselves had contributed to the assault partly because of the implication of generalized rape culture which is an environment in which traditional

assumptions and attitudes about men and women quietly nurture behaviours that leads to or support rape and domestic violence (32). Those offence which took place in a social setting and particularly those that don't involve a great deal of physical force are not always considered rape or committing an injustice against another person (16).

Ethiopian situation

Among the health and social problems of Ethiopian youth, unwanted pregnancy ,abortion, STD, including HIV/AIDS, juvenile delinquency and childhood prostitution are included (33).There is no published study regarding sexual violence in Ethiopia though there are indirect evidence for the presence of the problem. On a study conducted among high school students in Harrar and Addis Ababa, forced sexual intercourse was reported as initiation of sexual activity by 14.7 and 21.6% of sexually active adolescents respectively (34,35). According to abortion survey in Addis Ababa, 27.2% of women surveyed were girls age less than 21 and rape was reported as a cause of conception in 10% of pregnancies (36). On one qualitative study conducted on adolescents in Addis Ababa it was reported that violence is reportedly experienced by married girls, school girls and those working as maids, prostitutes and those who sell items on the street and street children (37).

Considering the problems of children and adolescents and rape relevant documents and policy issues in Ethiopia include:

1.The Ethiopian health policy among it's priorities is "addressing the special health problem related to the need of adolescents" in section 10.7 (38).

2.The government of Ethiopia ratify and endorsed the convention of the rights of the child on December 9/1991 which was adopted by the general assembly of the UN on 20 Nov 1989. In the convention in Article 34 it was stated that "parties under take to protect the child (under 18) from all forms of sexual exploitation and sexual abuse" (39).

3.The national policy on Ethiopian women keeps that "it will modify or abolish, laws, regulations, customs and practices which aggravate or discriminate against women. There is also aim of creating a situation where by society discriminating attitude towards women and woman's compliance about it are eliminated through elevated awareness" (40).

4.The Ethiopian penal code of 1957 (E.C.) article 589 stated that "Whoever compels a women to submit to sexual intercourse outside wedlock whether by use of violence or grave intimidation, or after having rendered her unconscious or incapable of resisting is punishable with rigorous imprisonment not exceeding

10 years. It should not exceed 15 years where the rape is on a child less than 15 years, or an inmate of a hospital, alms home, asylum, establishment of education and correction and who is under supervision or control of or dependent upon the accused person" (41).

In light of this background information there is a need to fill the knowledge gap regarding sexual violence in our country, which prompt the conduct of this study .

Objective of the study

General objective

To determine the magnitude, identify factors related to and document reported outcomes of sexual violence among Addis Ababa and Western Shoa high school students.

Specific objectives

1. To determine the magnitude of sexual violence among high school students.
2. To document reported outcome of sexual violence.
3. To identify factors related to sexual violence among high school students.
4. To assess the attitude of high school students towards sexual violence.

Methods

Study design

The study was a school based, cross sectional survey on sexual violence conducted in 14 high schools in Addis Ababa and western Shoa zone.

Population

The source population comprised of all high school students in Addis Ababa town and western Shoa zone, Oromia region. The study population were students of both sexes attending grade 9-12 in randomly selected high schools.

Sampling procedure

The sampling procedure employed in this study was a multi-stage sampling; *simple random sampling* was used to select schools and grades (Fig. 1). Nine schools from Addis Ababa and 5 schools from Western Shoa zone were selected out of 38 and 10 high schools respectively. Four sections from each grade were randomly selected and all students (both males and females) were included in the study. Blind students who were not able to read the questionnaire were

excluded from the study.

Sample size calculation

Considering the absence of previous data on most of the issues to be studied and to obtain the maximum sample size, this study assumed the prevalence of sexual violence to be 50%; and a maximum discrepancy of $\pm 3\%$ between the sample and underlying population was taken at 95% certainty and a sample size of 1067 was obtained after employing an appropriate sample size calculation. To compensate for the non response 10% was added and a total of 1174 students were sought for each group of male and female students separately (42).

Operational Definition

Completed rape is defined as any non consensual penetration of a girl obtained by physical or by threatening of body harm, or when the victim is incapable of giving consent (10).

Attempted rape is defined as a trial to have sexual intercourse without consent of the women but without penetration of vagina.

Sexual harassment is unwanted and repeated sexual advances which ranges from unwelcome comments and touching to coercive sexual intercourse (10).

Variables

For the purpose of meeting the objectives of the study the following variables were included.

a) Exposure variables

Students perception and attitude towards rape and some factors related to rape like alcohol, verbal threats, false promise and physical force were included as exposure variables. Socio demographic variables such as age, sex, residence, educational status, parent's marital status, students marital status, religion and ethnicity were also included as exposure variables.

b) Outcome variables

Rape and reported outcome of rape were taken as outcome variable.

Data Collection and management

Focus Group Discussion was conducted among high school students to help in the design of the questionnaire and to provide information on sensitive areas. The method for the selection of the

participants was purposive sampling. In order to establish homogeneity within the group, they were structured by sex : males and females. Eighteen girls participated in the first FGD and nineteen boys were selected to serve as participants in the second FGD divided in groups. The total number of individuals involved in the FGDs were 37. The age of the girls ranged from 16-22 and boys age ranged from 17 -25 years.

An FGD guide was developed that contained a list of questions that were supposed to be explored for the purpose of the study. The discussion was led by a moderator and assisted by a recorder who took notes. The group discussion was transcribed completely in Amharic, fully translated in English and analyzed.

A structured questionnaire for the survey was prepared first in English and translated to Amharic, and finally back translated to English to ensure its consistency. The questionnaire thus prepared was pretested in one high school which was not included in the study and appropriate modifications were made based on the findings.

Before data collection commenced, the respective Regional Education Bureau and the Zonal Education

Departments were approached and were briefed on the purpose of the study. Lists of schools and support letters were also obtained from these offices. Then school directors of all selected high schools were contacted after presenting letters of support. The school principals assigned coordinators who assisted in preparation of rooms and student selection. The selected students then made to seat separately and they were provided explanations on the purpose of the study and definition of terms. The questionnaire after being filled was returned with a sealed envelop to a collection box.

Data Analysis

Data were entered and processed using EPI-INFO version and Statistical Analysis System version 6.03 was used to perform multiple logistic regression (43,44). Frequency distribution, chi square tests and multivariate analysis with logistic regression were conducted. The results were then presented using absolute numbers and proportions, chi square tests, odds ratio and confidence interval.

Ethical consideration

Involvement into the study was on the basis of an

informed consent and confidentiality of information was assured by excluding names from identification of study subjects.

Results

I General characteristics of respondents

Socio demographic characteristics

A total of 2773 high school students were involved in the study of which 1428(51.5%) were from Addis Ababa while the remaining 1345(48.5%) were from western Shoa. Among the sampled population 1372 (49.5%) were males and 1401(50.5%) were females (table 1).

The mean age of the females was 16.4 years while for males it was 17 years. The students age range from 12-33 years. Those within the age range of 15-18 were 2054(74%). Among the total student population 32% of students were 9th grade, 21.4% were tenth grade, 29.9% were eleventh grade and 16.7% were twelfth grade. The predominant religion was Orthodox Christian (43.9%), followed by Protestant Christian (8.1%), and Muslim (7.1%). Oromo ethnic group comprised 43.9% of students followed by Amhara (34.4%) and Gurage (10%). Sixty eight (2.5%) of students were reported to be married. The students parents marital status was 72.1% were married, 13% were divorced and 9% were widowed. Eighty one percent of students were currently living with parents while only 4.9% were

living alone (table 1).

Sexual activity of students

Among the total respondents 25.3% of males and 24.8% of female students admitted they currently have a boy friend. Those who were involved in sexual activity comprises 32.5% of the males and 8.8% of females. Premarital sexual activity was supported by 39% of males and 6.8 % of females. Reason to have the first sexual intercourse was, being forced in 22.9% of sexually active female population.

Table 1. Socio demographic characteristics of male and female high school students, Addis Ababa and W. Shoa.

Characteristics	Male n=1372 #(%)	Female n=1401 #(%)	Total n=2773 #(%)
Residency			
Addis Ababa	709(51.7)		719(51.3)
Western Shoa		663(48.3)	682(48.7)
1345(48.5)			
Age			
10-14	101(7.3)	116(8.3)	217(7.8)
15-19		981(71.5)	1071(76.4)
2052(74.0)			
20-24		208(15.2)	74(5.3)
282(10.2)			
Not reported	82(6.0)	140(10.0)	222(8.0)
Educational Status			
9 grade	328(24)	560(40.0)	888(32.0)
10 grade	320(23.3)	275(19.6)	595(21.4)
11 grade	454(33.0)	374(26.7)	828(29.9)
12 grade	270(19.7)	192(13.7)	462(16.7)
Ethnicity			
Oromo	670(48.8)	524(37.4)	1194(43.1)
Amhara	416(30.3)	538(38.4)	954(34.4)
Gurage	129(9.4)	148(10.6)	277(9.9)
Tigre	111(8.1)	149(10.6)	260(9.4)
Others	46(3.4)	42(3.0)	88(3.2)
Religion			
Orthodox	1075(78.4)	1132(80.8)	2207(79.6)
Protestant	98(7.1)	126(9.0)	224(8.1)
Muslim	106(7.7)	108(7.7)	214(7.7)
Catholic	50(3.6)	25(1.8)	75(2.7)
Others	43(3.2)	10(0.7)	53(1.9)
Student's marital status			
Not married		1338(97.5)	1367(97.6)
2705(97.5)			
Married	34(2.5)	34(2.4)	68(2.5)
Family Marital status			
Married		974(71.0)	1026(73.2)
2000(72.1)			
Divorced		183(13.4)	175(12.5)
358(12.9)			
Widowed	122(8.9)	119(8.5)	241(8.7)
Others	39(2.8)	39(2.7)	78(2.8)
Not reported	54(3.9)	42(3.1)	96(3.5)
Currently living with			

parents		1058(77.1)	1196(85.4)
2254(81.3)			
Relative	64(4.7)	92(6.6)	156(5.6)
Alone	80(5.8)	56(4.0)	136(4.9)
Friends		48(3.5)	34(2.4)
82(3.0)			
Others	122(8.9)	23(1.6)	145(5.2)

2.Magnitude of completed rape, attempted rape and other sexual harassment

Among the total female high school students 72 (5.1%) reported being a victim of completed rape in their life time while the rate among those who started sexual intercourse was 58.5%. Twenty six percent of rape victims encounter rape more than one times. Unwanted sexual advances (sexual harassment) was reported by 1042 (74.4%) of female students. Attempted rape and abduction was reported by 141(10.1%) and 63(4.5%) of female high school students respectively (Table 2).Among the male respondents 89(6.5%) admitted that they raped and 181(13.2%) claimed to attempt rape. Thirty eight percent of the females reported that they knew of a girl or girls who were raped. Among the respondents 77.5% and 65.8% of female and male students respectively believed that rape was a major problem.

Seventy percent of the rape was perpetuated by a person known by the victim like a boy friend or an acquaintance while it's only in 11% of cases that the perpetrator was a stranger. Twenty six percent of victims of rape didn't tell any body about their problem.

Among the total rape 27(37.5%) happen in the boys house during daylight (61%). Those who reported to the legal authority were only 8(12%) of the rape victims. Among the perpetrators 1 person was imprisoned, 4 punished by fine, 4 obliged to compensate to the family, 4 released free and 3 were forced to marry the girl.

Table 2. Magnitude of completed rape, attempted rape and other sexual harassment among female high school students, Addis Ababa and W.Shoa, 1996.

Characterstics	Addis Ababa n=719 #(%)	W.Shoa # (%)	Total n=682 # (%)
Completed rape 72(5.1)		35(4.9)	37(5.4)
Attempted rape 141(10.1)		68(9.5)	73(10.7)
Abduction	18(2.5)	45(6.6)	63(4.5)
Unwelcome kiss 293(20.9)		160(22.2)	133(19.5)
Fondling 345(24.6)		191(26.6)	154(22.6)
Verbal harassment 843(60.1)		485(67.5)	358(52.5)

* Multiple response were possible, therefore percentages may not add up to hundred.

3. Reported outcome of completed rape

Among the seventy two girls who reported to be raped 17(23.6%) had vaginal discharge and 12(16.7%) become pregnant. There is a tendency to self blame and anxiety in 25(34.7%) and in 22(30.6%) of the victims respectively. Social isolation, Fear and phobia, hopelessness and suicide attempt were reported in 33.3%, 19.4%, 22.0%, 5.5% of rape victims respectively (Table 3).

Table 3. Reported outcomes of completed rape among female high school students in Addis Ababa and W.Shoa, 1996.

Reported outcome	n=72*	
	#	%
Pregnancy and STD related		
Vaginal discharge	17	23.6
Pregnancy	12	16.7
Abortion	10	13.9
Examination failure	11	13.9
Psychological problem		
Self blame	25	34.7
Social Isolation	24	33.3
Anxiety	22	30.6
Hopelessness	16	22.2
Fear and Phobia	14	19.4
Suicide ideation	6	8.3
Sexual Dysfunction**	4	5.6
Suicide attempt	4	5.6

*Totals may not add up to the total because of possibility of multiple answer by a single individual.

** Sexual dysfunction include fear of sex, loss of libido, inability to have climax.

4. Factors contributing to sexual violence

Threats of harm and false promise were predominant contributing factors for a girl to be raped, each comprising 47.1% of the reasons. Physical force was involved in 45.7% of cases (Table 4). Use of substances like alcohol, khat and others reported to prompt the action in 43.1% of students.

There was no statistically significant difference in the proportion of rape among the Addis Ababa and Western Shoa female high school students. Among female students being raped was significantly associated with age more than 20 (OR=6.00, 95% CI:1.37, 27.57), having a divorced family (OR=2.46, 95% CI:1.31, 4.57), living with a relative (OR=2.49, 95% CI:1.10, 5.46), living alone (OR=4.88, 95% CI:2.17, 10.71) and having a boy friend (OR=7.86, 95% CI:4.56-13.64) (Table 5). Stratified analysis performed to control for potential confounders showed a significant difference only for those who had a boy friend (OR=7.92, 95% CI:4.22, 14.9) after putting it in a model consisting of all variables listed on the table (Table 5).

There were significantly higher proportion of rape among male students who are living in Western Shoa

(OR=0.43 95% CI:0.26, 0.69), who are living alone (OR=2.44 95% CI:1.16, 5.02), who are having girl friend (OR=4.48 95% CI 2.82, 7.11) after putting it in the model consisting of all variables listed in the table (Table 6).

Chi square for trend show no significant difference in the proportion of rape for age and educational status among both male and female students (table 5,6)

Table 4- Factors contributing to rape among rape victims of female high school students in Addis Ababa and W.Shoa, 1996.

Factors	#	N=70* %
Threats of harm	33	47.1
False promise	33	47.1
Physical force	32	45.7
**Substance use	31	43.1
Use of authority	11	15.7
***During sleep	11	15.7

* 2 persons didn't respond

** Includes Alcohol, Hashish, Khat, etc.

*** Rape committed while the girl is asleep

++ Tables may not add up to the total because of a possibility of multiple response

Table 5 Comparison of selected factors among raped and non raped female high school students in Addis Ababa and W.Shoa, 1996.

Factors	Raped n=72	Not raped n=1329	Crude OR (95% CI)	Adjusted OR (95% CI)
Residency				
Addis Ababa	35	684	0.89(0.54-1.44)	0.81(0.41-1.59)
W. Shoa	37	645		
Age**				
<14	7	109	1.00	
15-19	52	1059	1.37(0.47-4.56)	2.11(0.75-5.98)
≥20	11	129	6.00(1.37-27.57)	1.14(0.61-2.12)
Education***				
9	33	527	1.00	
10	11	264	0.67(0.31-1.39)	1.22(0.78-1.92)
11	19	355	0.85(0.46-1.58)	0.99(0.57-1.77)
12	9	183	0.90(0.41-1.94)	0.91(0.55-1.51)
Ethnicity				
Oromo	32	492	1.00	
Amhara	26	512	0.78(0.44-1.37)	0.41(0.24-0.71)
Gurage	6	142	0.65(0.24-1.66)	0.91(0.55-1.51)
Tigre	6	143	0.64(0.24-1.65)	1.18(0.54-2.56)
Religion				
Orthodox	61	1070	1.00	
Protestant	8	118	1.17(0.57-2.61)	1.24(0.59-2.63)
Muslim	2	106	0.33(0.05-1.38)	1.01(0.19-5.15)
Catholic	1	24	0.72(0.02-4.56)	0.78(0.22-2.77)
Marital status				
Married	3	1298	1.00	
Nonmarried	69	31	1.82(0.43-6.43)	0.92(0.23-3.65)
Family marital status				
Married	43	983	1.00	
Divorced	17	158	2.46(1.31-4.57)	0.44(0.42-1.16)
Widowed	6	113	1.21(0.45-3.06)	1.29(0.69-2.45)
Currently living with				
Parents	50	1146	1.00	
Relative	9	83	2.49(1.10-5.46)	2.02(0.82-4.99)
Alone	10	46	4.88(2.17-10.71)	1.46(0.73-1.37)
Friend	2	32	1.43(0.16-5.89)	0.34(0.07-1.75)
BF+				
No	12	1031	1.00	
Yes	50	298	7.86(4.56-13.60)	7.92(4.22-14.9)

*Tables may not add up to the total because non response and "others" category of the answers not included.

** Mantel-Hansel Chi square for trend = 0.683,

p=0.408
***Mantel-Haensel Chi square for trend = 0.188,
p=0.664

+ Having a boy friend

Table 6. Comparison of selected factors among males who committed rape and those who did not in Addis Ababa and Western Shoa, 1996.

Factors	Rape committed Yes n=89	No n=1283	Crude OR (95 %CI)	Adjusted OR (95 % CI)
Residency				
Rural	60	603	1.00	1.00
Urban	29	680	0.43(0.26-0.69)	0.42(0.28-0.63)
Age**				
<14	5	96	1.00	1.00
15_19	67	1027	1.25(0.47-3.62)	2.30(0.57-9.20)
>20	11	84	2.51(0.77-8.70)	0.99(0.46-2.13)
Education***				
9	15	313	1.00	1.00
10	22	298	1.54(0.75-3.18)	1.18(0.59-2.32)
11	29	425	1.42(0.72-2.84)	1.02(0.73-1.69)
12	16	212	1.57(0.72-3.44)	0.75(0.46-1.24)
Ethnicity				
Oromo	49	621	1.00	1.00
Amhara	21	395	0.67(0.38-1.17)	1.11(0.46-1.73)
Gurage	7	122	0.73(0.29-1.72)	0.61(0.25-1.46)
Tigre	4	107	0.47(0.14-1.41)	1.89(0.61-5.81)
Religion				
Orthodox	77	998	1.00	1.00
Protestant	4	93	0.56(0.17-1.63)	0.68(0.30-1.57)
Muslim	4	102	0.51(0.15-1.48)	1.84(0.34-9.99)
Catholic	1	49	0.26(0.01-1.81)	0.92(0.24-3.40)
Marital status				
Married	2	45	1.00	1.00
Nonmarried	85	1239	1.54(0.36-9.36)	1.47(0.45-4.79)
Family marital status				
Married	67	907	1.00	1.00
Divorced	11	172	0.87(0.12-1.73)	0.53(0.24-

1.17)					
Widowed	2	120	0.23(0.04-0.95)	0.38(0.16-	
1.07)					
Currently living					
Parent	65	993	1.00	1.00	
Relative	3	61	0.75(0.18-2.75)	0.35(0.14-	
0.88)					
Alone	11	69	2.44(1.16-5.02)	1.06(0.56-	
2.08)					
Friend	8	114	1.07(0.46-2.39)	1.85(0.63-	
5.42)					
GF+					
No	38	987	1.00	1.00	
Yes	51	296	4.48(2.82-7.11)	2.11(1.54-	
2.88)					

*Totals may not add up to the total because non response and other category not included

**Mantel Hanzel chi square for trend = 3.45, p=0.06

***Mantel Hanzel chi square for trend = 1.23, p=0.27

+ Having girl friend

5. Attitude of high school students towards sexual violence

For the question asked "Among the following conditions on which one do you think it's "acceptable" to force a girl to have intercourse?" Major proportion of male and female students (40-50%) accepted that force is justified if she is a wife, if both are sexually excited and if she is willing to spend the night with him (Table 6)

The major perceived reason for sexual violence stated by the majority of males were males bad behaviour (66.8%), pornography films (67.3%) and books (61.9%), cultural influence (63%) and being immature (64.4%). Female students responded in addition to males response, male bad behaviour (57.6%) and pornography films (54%) as major perceived reasons for sexual violence (Table 7).

The major perceived consequence of rape among female high school students were unwanted pregnancy (65.7%), HIV/AIDS (64.2%) and discontinuing education (60%) (Table 8). Forty Five percent of males and 19% of females believe that women are responsible to be raped and 12.3% of females and 23.4% males believe that if a girl accept a boys invitation she should

reciprocate with sexual favours.

Table 7. Attitude of high school students towards "acceptability" of sexual violence, Addis Ababa and Western Shoa, 1996.

Violence accepted if	Male n=1372 # (%)	Female n=1401 # (%)
Both are sexually exited	745(54.3)	740(53.0)
She is his wife	682(50.0)	672(48.0)
Willing to spend the night	675(49.2)	653(47.0)
Makes him hot	640(47.0)	542(39.0)
She acts a suggestive manner	580(42.3)	582(41.5)
She is his girl friend	564(37.4)	436(31.1)
She is willing to go to Hotel/home	513(37.4)	476(34.0)
She wearing revealing cloth	508(37.0)	436(31.1)
She agrees and change her mind	479(35.0)	428(30.5)
Previous sexual relation	399(29.1)	338(24.1)
She is a Virgin	299(22.0)	187(13.3)

Table 8. Perceived reason for sexual violence among high school students in Addis Ababa and western Shoa, 1996.

	Male 1372 # (%)	Female 1401 # (%)
Pornography films	924(67.3)	757(54.0)
Males bad behaviour	916(66.8)	807(57.6)
Being immature	884(64.4)	661(47.1)
Cultural influence	865(63.0)	668(47.6)
Pornography books	849(61.9)	661(47.1)
Peer pressure	789(57.5)	585(41.7)
Females bad behaviour	757(55.2)	554(39.5)
Permissive Family	724(52.8)	526(37.5)
New tradition	717(52.3)	530(37.8)
Revenge	688(50.0)	595(42.9)
If someone is doing it	688(50.1)	554(39.5)
Being adventurer	665(48.5)	477(34.0)
No good relation with opposite sex	651(47.4)	534(38.1)
Authoritarian family	537(39.1)	540(38.5)

Table 9. Perceived consequence, of rape among female high school students, Addis Ababa and western Shoa, 1996.

Perceived Consequence	Frequency	
	#	%
Causing unwanted pregnancy	920	65.7
Exposing to HIV/AIDS	891	63.6
Discontinuing education	835	60.0
Leading to prostitution	625	44.6
Difficulty in choosing a partner	444	31.7
Exam failure	394	28.1
Leading to psychological upset	345	24.6
Leading to revenge and hostility	339	24.2
Not able to stay out at night	266	19.0

Results of FGD (Focus Group Discussions)

Four focus group discussions (FGD) were conducted among high school students. A major theme of the FGD was the magnitude and consequences of sexual violence and factors contributing to it. It was conducted to compliment to the quantitative finding and to obtain the necessary information to construct the questionnaires and to gain an insider's perspective of the boys and girls towards sexual violence. The FGD covers a range of questions related to sexual violence and sexuality.

There were a number of differences between the ways in which boy's and girl's related to, and discussed, these issues. The boy's discussions tended to be fairly brief, with easily reached straight-forward conclusions, whilst the girls approached the issue in a more exploratory way, reflecting upon the complex dilemmas and elaborating them.

Young boys tended primarily to discuss the need to satisfy one's sexual desire while the girls primarily discussed sexual feelings as being always attached with fear of pregnancy, abortion, stigma, violence and coercion.

There appeared to be a general belief or awareness on the part of the young boys that there is an increasing level of pre-marital sexual activity within courting relationships. Such developments were felt to be taking place particularly among young people with modern social trends.

Male students tended to be much worried by the inconveniences of negative responses or attitudes to the request made by a boy friend while for the girls the consequences were viewed to be more frustrating. These were seen in terms of their impact upon their own reputations, those of their families and their emotions in relationships. Many of the girls had known friends who had gone through the trauma of sexual violence and pre-marital pregnancy. Most do not hesitate to seek an abortion, largely because of the stigma and fear of discontinuing their education. It was interesting to note that most girls were surprised that in the event of pre-marital pregnancy, the blame was apportioned by families, on the young girl for "allowing" intercourse to take place, thus becoming a "bad girl". There appeared to be a strong sense that (at least) some of the young girls were open to "romantic" sexual relationships with pre-marital intercourse, provided it was taking place

within a loving and committed relationships.

There is also a problem of boarder line between "Yes" and "No". Some girls claim that when they mean "No" it means "yes" which create confusion and forced the male to commit rape. Even those rape which happens in intimate relationship were not considered as rape.

Probably the two most disturbing issues to emerge from the discussions are the inability of most parents to understand the problems of the girls and the fate of the victims of sexual abused girl with consequences of pre-marital pregnancy and HIV/AIDS. The fact the young boys are not worried about such consequences is also a serious concern.

The major findings of the FGD are highlighted in the table below.

Table 1. Summary notes on sexual violence and sexuality by gender expression

Variable	Young males	Young females
<p>Partner</p> <p>Acceptability of premarital sex</p> <p>Attitudes to sexual feelings</p>	<p>Nine out of ten are expected to have girl friend</p> <p>premarital intercourse accepted and expected for young men.</p> <p>Positive, open. Strong psychological sense of sexual drive which demands 'release' and justifies coercion often. Sex is for enjoyment. a subject discussed with humour and much slang.</p>	<p>Seven to eight out of ten are expected to have boy friend.</p> <p>Premarital intercourse unacceptable due to Fear of pregnancy; considered to be highly damaging to the reputation of the girl and her family.</p> <p>No reluctance to accept such feelings. Have positive attitude to express feelings with their partner. Kissing accepted when the sexual drive in both partners is high.</p>
<p>Actual sexual experience.</p>	<p>Accepted by all. Practically universal.</p>	<p>Generally negative attitude to sexual practice. Great reluctance to accept request for sexual intercourse even with</p>

<p>Sexual violence</p>	<p>Commonly seen and accepted in certain situations. Boys who have experience of substance abuse are more likely to practice it. Masculine type girls are less likely to be abused.</p>	<p>partners. Sometimes admission of sex taking place, justified in terms of pleasing partner and sustaining relationship.</p> <p>Commonly seen and is a serious problem. Timid and shy girls are more frequently abused. Girls who are late and are not allowed to enter in the school campus are more at risk. Boys who have "peer group" often abuse girls.</p>
<p>Family responsibility</p>	<p>Girls from well-to-do families are often easy going and often targets of boys who have strong desire to secure money for khat and cigarettes.</p>	<p>Girls from conservative families and who attended night schools are more abused. Girls from well-to-do families are also targets for financial reasons mainly.</p>
<p>Consequences of sexual violence</p>	<p>These are viewed as the girl's responsibility.</p>	<p>Are very much worried. Severe outcomes including pregnancy, abortion,</p>

Discussion

It is clear from this study that unwanted sexual activity is a significant problem among female high

school students. Starting at early age as early as 9 years female were shown to be victims of various forms of sexual violence which ranges from unwelcome remark and unwanted touch to forced intercourse.

Among the whole student population rape is believed as a major problem in 77.5 and 65.8% of male and female students respectively which shows that how much the problem is deep rooted but due to its social stigma not talked in public.

The lifetime prevalence rate of completed rape among female high school students was 5.1% which is comparable to a study in America and Finland which reported a prevalence of 6.2% and 7% respectively in similar age group (14,15). Our finding is lower compared to another study in America which report a prevalence rate of 12% (10). Attempted and completed rape reported in 19.3% of our study population is comparable to a study in Canada, Korea, New Zealand, United kingdom and United States with a prevalence rate of 17-27% (2). Among the sexually active group the prevalence rate of completed rape is 58.5% which is slightly higher compared to Ugandan study where a prevalence rate of 49% is reported (4).

There is no similar study in Ethiopia which document

the prevalence of rape but there are indirect evidences to compare to. Forced sexual intercourse was reported during initiation of sexual activity in 22.9% of female high school students which is comparable to similar study in high school students in Addis Ababa which document 21% of forced sexual intercourse(33). Our finding is a bit higher compared to 14.7% of forced intercourse among high school students in Harar (34). Similar studies in Jamaica report 40% of first sexual activity involves force(24). These finding all show using force is not rare event in sexual relation in our country.

In our study 82% of Addis Ababa and 66.3% of Western Shoa female students encounter unwanted sexual advances like unwelcome remark, fondling and kissing. The figure is inflated because of high proportion of verbal harassment among the response.

In most literature it was reported that 60-80% of perpetrator of rape are known by the victim (21,22,24) which is also supported in our study where 70% the rape is perpetuated by individual known to the victim.

The age range of rape victims in our study ranges

from 9-23 years. Forty percent of rape victims are below age 15 while 84.1 % are under age 18 which according to convention of the right of the child can be considered as a child abuse (39). Though it's not widely reported this study signifies that child sexual abuse is prevalent and comparable to other studies where child sexual abuse is reported (10,19,21).

According to this study there was a significant difference for age group above 20 among those who experience rape and others. The possible explanation are since the study assess the life time prevalence of abuse it's likely that those who were older to get more chance of reporting. Another possible explanation for older girls tends to be victim of sexual abuse is expectation of male perpetrator that this group is sexually active leading to aggressive acts. Older adolescents are also less likely to be supervised by parents and they are more likely to find themselves in the type of situation where they are most vulnerable and exposed to violence(17).

The present study has assessed several factors which are stated as contributing factors for sexual violence in the literature. One of the stronger factors stated which predisposed to sexual violence

is a history of sexual abuse whereby victims may have difficulty in setting boundaries regarding sexual limits and feel powerless to stop sexual aggression (4,16). In the present study 26.4% rape victims had been raped more than one times and though it is difficult to make associations it gives a clue that 1 in 4 girls who are abused had a 2nd chance of being victim of the assault.

Being alienated from family is taken as a risk factor for being sexually assaulted (14). Though not significant when adjusted for potentially confounding factors there was a statistically significant difference observed among those who were raped and not raped for factors living alone or with relatives and having divorced family. This finding is also consistent among male rapers where there was a significantly higher proportion of rape among those who live alone. The possible explanation is those who have a stable family and parents where by they monitor their children are less likely to find themselves in situation, where unwanted sexual activity might occur and they may also be less likely to find themselves with a peer who would perpetuate such an act (16).

This finding is also supported by the FGD whereby parents were discussed as one responsible factor for

sexual violence to happen and there is a confusion of role between modern expectation and traditional sanctions.

False promise and verbal threats contributed to 47% of rape incidents in the present study compared to another study where false promise contributed to 70% of rape incident (16). Physical force was involved in 45.7% rape incident in our study compared to 62% in USA (16). Alcohol, khat chewing and substance use involved in 43% of rape which show a role of alcohol and substance use in sexual behaviour of adolescents which alter responsible sexual decision making. There is a vicious cycle of alcohol and substance abuse on the victims whereby they want to escape the pain aftermath by alcohol and drug further disrupting their physical and psychological wellbeing (4, 11)

There is no significant association of residency area and completed rape among female students. Although not statistically significant the finding may have practical significance as the proportion of rape was higher among Western Shoa students (relatively less urban than Addis Ababa). Similarly there is a significantly lower proportion of rape committed by male students in Addis Ababa compared to Western Shoa. This might be explained by cultural barrier and

gender roles whereby girls might be expected to be shy and the boarder line between "Yes" and "No" is blurred in less urban setting like Western Shoa.

The finding also shown that there is a significant difference among those who had a boy friend or a girlfriend in the proportion of rape committed for both female victim and male perpetrator. This might be explained by exposure to environment which predispose them to such offences and this is also supported on the finding that 70 % of the perpetrators are individuals known to the victim. This finding has important implication that rape is common among those who had intimate relationships which signifies less responsible sexual decision making among partners.

This finding goes beyond the couple to the overall sexual culture whereby sexual violence among intimate partners is not considered as rape.

The study also signifies the health consequence of rape. Among the rape victims the prevalence rate of unwanted pregnancy was 16% which is also consistent with the Canadian advisory council estimates of 12% (31), the Bangkok Thailand study of 15-18% (3). In Ethiopian study of abortion survey in Addis Ababa the

reasons for the pregnancy was reported to be rape in 10% of cases (35). Though not specified about the causes a significant proportion of victims reported vaginal discharge after rape which also warrant a possible transmission of STD including HIV. This generally indicate the role of forced sex on these health hazards.

The psychological impact of rape is reported in significant proportion victims which signifies the subsequent trauma victims face after the assault. Suicide ideation, reported in 8% the victims is less compared to the American study where 20% of suicide ideation was reported (23).

Physical injury is reported only in 8% of rape victims in our study which is lower compared to other studies which report up to 61% of the victims having bodily injury (11,20).

Contrary to expected a larger proportion of female students justified unwanted intercourse in condition like: if the girl is his wife, if both are sexually excited and if she's willing to spend the night. Male students similarly justify forced intercourse in addition to women's points on conditions that if she makes him hot and acts in a suggestive manner. We can

see this finding as rape continuum whereby at one pole there are acts which society tolerates and accepted as normal whereas at the other end there are acts which society rejects (4,16,23). Our finding is consistent with other studies in which 60 % of high school boys participated said it was acceptable to force sex in one or more occasions like if they had sex before and if the girl agrees to go home (21).

In the majority of male and female students the major perceived reason for sexual violence is males bad behaviour and pornography materials. This is in line with other studies where violence showing materials predispose to subsequent acts (23). Permissive family is taken by students as more responsible than authoritarian family to expose children to violence.

Unwanted pregnancy, HIV and AIDS are the major perceived consequence for students which indirectly show how high school student population are aware of health effects of violence. This is a good point for intervention measures where by the students are aware of the hazards of irresponsible behaviour.

As it was reported there are only minimal number of girls who accused the perpetrator and even those who are accused except one were released free. This

generally shows that how lenient is the legal system and the society didn't dare to report for fear of social stigma which has a tendency to make a situation worse. The review of the penal code of Ethiopia also show some discrepancy with some literatures on issues of marital rape and rape between the same sex.

It is shown in this study that the problem of rape is sustained and aggravated because of stigma, social conformity and poor enforcement of the law.

Limitation and Validity of the study

Some of the limitation of the study are

1. As any cross sectional study cause and effect relationship was not possible to establish for the factors dealt in the study.
2. Adequate comparisons could not be made because there are no similar studies in our country.
3. Outcome is assessed only by the report of respondents.
4. Under reporting of rape was inevitable since the study deals on sensitive issues of sexuality.
5. The results of the study are not generalizable to the whole high school student population in the country.

The strength of the study are blending of different methods of data collection and involvement of male students which capture a more holistic, complete and complementary picture of the problem under study.

The study is internally valid for the following reasons.

1. Study schools and subjects were selected randomly.
- 2 The questionnaire was pretested and based on FGD (culturally appropriate)

3.The questionnaire was closed ended, anonymous and self administered.

4.The study was completed in a single day to avoid contamination of information .

5. Large number of students were involved to increase precision.

6. Logistic regression was performed to minimize confounding.

Conclusion and recommendation

The present study should be considered as a first step in exploring the problems of unwanted sexual activity.

This study showed that prevalence of sexual violence among high school students is a serious problem and concern.

Sexual violence was shown to contribute for health problems of adolescents face nowadays including unwanted pregnancy, STD and psychiatric disturbance.

Threats of harm, false promise and physical force and substance use were contributing factor among raped students. Beside this parental factors, communication gap between opposite sex and poor law enforcement were shown to contribute to the problem.

There is a belief among students that it is acceptable to rape in certain conditions that shows the social conformity which sustains the problem of rape.

Based on these finding it is recommended that

1.Awareness creation to adolescents that sexual violence is a serious problem and can be damaging to the future life of the victim.

2.Awareness creation to the family that children need appropriate parenting which should go in line with emerging sexuality of adolescents and children also need comforting parents when they face problems.

3.Schools should also devise appropriate sex education regarding damaging effect of rape and educate youth regarding dating, sexuality and responsible sexual decision making.

4.Policy makers and those organizations working with youth need to pay attention and consider finding remedial solution to sexual violence.

5.Law enforcement must be strong in regard to sexual violence.

6.Victim support programme should be started to deal with the physical and psychological trauma victims

face and to rehabilitate further.

7. Further study is recommended using qualitative methods especially on cultural factors which sustains the problems of rape on different social groups on different geographic areas.

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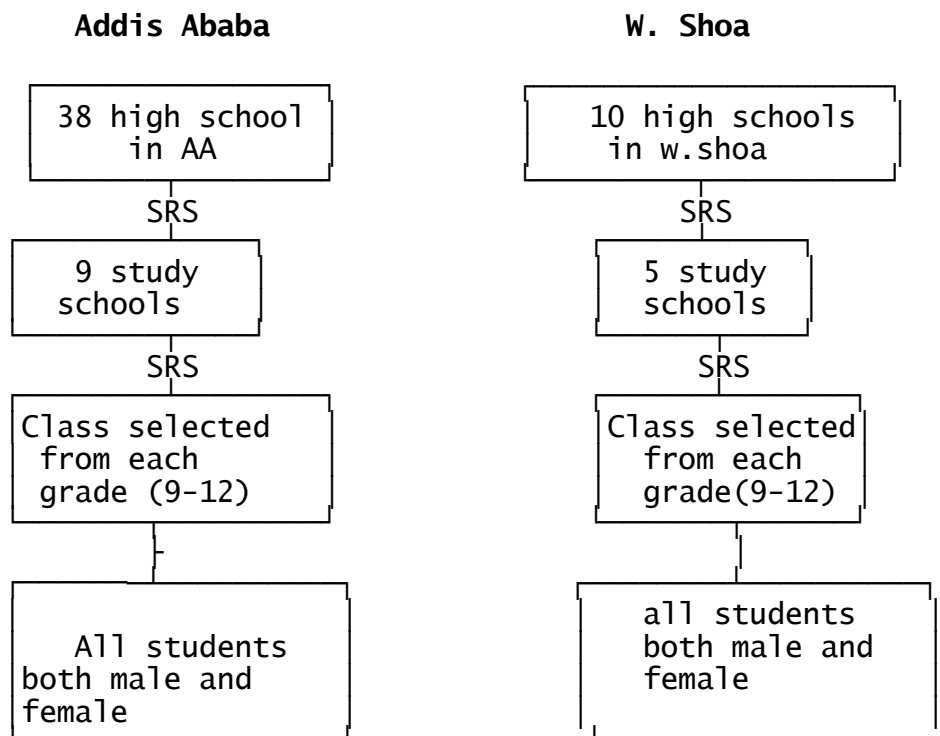
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Annex

Fig 1

Schematic presentation of procedure used to select student



ANNEX 1 Self administered questionnaire on Rape for secondary school students.

INTRODUCTION

The purpose of this study is to assess the situation of rape in our country. A lot of personal areas will be probed by the questionnaire. To assure confidentiality you are not expected to write your name or your address in any of the questionnaire pages. You are asked to return filled questionnaire sealed in the envelop provided. We would like to ask every body to give us genuine and personal response to the questionnaire since the outcome of the study will be helpful to the school population.

Thank you

<p>After reading the introduction indicate your commitment to participate in the study by marking (x) on the appropriate place.</p> <p>I Have read the introduction and I'm willing to participate 1. Yes _____ 2. No _____</p>
--

INSTRUCTION

- 1 . According to the questions it is allowed to have more than one answer.
2. If you are not willing to answer a specific question you can proceed to the next.
3. If you want to stop filling the questionnaire you can stop at any time.

PART I General information

1. Age _____ years
2. Sex 1 Male 2 Female.

3. Educational status _____ grade

4. Ethnicity

1. Oromo

4. Amhara

2. Gurage

5. Other

specify

3. Tigre

5. Religion

1. Orthodox Christian

4.

Protestant

2. Catholic

5. Other

specify _____

3. Muslim

6. Parents marital status

1. Married

3. Widowed

2. Divorced

4. Others

Specify _____

7. Have you ever been married

1. Yes 2. No

8. Are you presently married

1. Yes 2. No

9. With whom are you living

1. Alone

4. With relatives

2. With parents

5. Other specify _____

3. With friends

10. If you are living alone, the reason is

1. Parents are living out of this town

2. Parents not alive

3. Parents separated

4. Other specify _____

11. Educational status of parents

Father 1. illiterate 2. Read and write 3. Grade completed____

Mother 1. illiterate 2. Read and write 3. Grade completed---

12. Family size, indicate their number in the space provided

_____ Brothers _____ Others.
 _____ Sisters

13. Your order of birth in the family _____

14. _____ Mother's _____ income

15. _____ Father's (male guardian) _____ income

16. _____ Total _____ family _____ income

PART II SEXUAL HISTORY

17. Do you presently had a regular boy friend?

1. Yes 2. No

18. Have you ever had sexual intercourse?

1. Yes 2. No

If your answer to question number 18 is Yes answer question number 19-22. If your answer is No go directly to question number 24.

19. At what age did you have your first sexual intercourse?

_____ years.

20. What was the approximate age of your sexual encounter ?

_____ years.

21. Who was your sexual encounter?

- 1. Husband/wife 2. Boy friend
- 3. Student 4. Unknown individuals
- 5. Teacher 6. Family members Specify ---

-

- 7. Neighbour 8. Others specify -----

22. What was your main motive during the first sexual intercourse?

- | | |
|-------------------------------|--------------------|
| 1. I got married | 5. To get money |
| 2. Love affair | 6. I don't know |
| 3. To experience the pleasure | 7. Other specify__ |
| 4. I was forced | |

Question number 23 is to be answered by those who never had sexual intercourse

23. What was the main reason that you never had sexual intercourse?

- | | |
|----------------------|-------------------------------|
| 1. Religious reason | 5. Want to wait until married |
| 2. Fear of pregnancy | 6. No desire |
| 3. Fear of parents | 7. No opportunity |
| 4. Fear of STD\AIDS | 8. Others Specify _____ |

24. From where did you get information on sexual matters? (More than one answer allowed)

- | | |
|---------------|-------------------------|
| 1. School | 5. health professionals |
| 2. Parents | 6. Video\books\magazine |
| 3. Friends | 7. Family member |
| 4. Mass Media | 8. Other specify _____ |

25. Who do you think should be responsible to convey messages on sexual matters ? (more than one answer allowed)

- | | |
|----------------------|-------------------------|
| 1. Teachers (school) | 6. Health Professional |
| 2. Parents | 7. Video / Books |
| 3. Family Member | 8. No one |
| 4. Friend | 9. I don't know |
| 5. Mass Media | 10. Others Specify_____ |

26. Do you think a girl\boy should have sex before they get married?

1. I Agree 2. I Disagree 3. I don't know

FEMALE ONLY

27. Have you ever come across unwanted sexual advances including attempt rape?

1. Occasionally 2. Always
3. frequently 4. Never

If the answer to question number 28 is Yes answer question number 28_30.

28. Which one of the following did you encounter most?

1. never encounter 5. attempted rape
2. kidnapping (Telefa) 6. fondling
3. Unwelcome remark 7. Unwelcome touch
4. Kissing 8. Other

Specify_____

29. Starting what age did you encounter this?

_____ years

30. Who is the perpetrator mostly ? More than one answer allowed.

1. Never encountered 6. Family member
2. School mate 7. Group of individual
3. Teacher 8 Unknown individuals
4. Boy friend 9. Other

specify_____ 5. Neighbour

31. Do you know of girls who are raped ?

- 1 . Yes
- 2. No

32. If yes how many_____

33. If you know of girls who are raped who was the perpetrator mostly_____

34. Have you ever experienced unwanted sexual intercourse (rape)?

- 1 Yes
- 2 No

If the answer to question number 34 is Yes proceed to question number 35-47.If your answer is No go directly to question number 48.

35. If you experience unwanted sexual intercourse, how many times

did it happen? _____

36. At what age did you encounter this? _____

37. Who was the perpetrator mostly?

- 1. Boyfriend
- 2. School mate
- 3. Teacher
- 4. Neighbour
- 5. Family member specify
- 6. Group of individuals
- 7. unknown individuals
- 8. Others specify

38. How long did you know the perpetrator?

39. Where did you have your sexual relation ?

- 1. My home
- 2. At my partner home
- 3. in the hotel
- 4. in the school
- 5. in the park
- 6. in the car
- 7. other

40 At what time of the day did it happen ?

- 1. Morning
- 3. Early evening

2. Afternoon 4. late night

41. Which one of the following conditions contribute for force you to have sexual intercourse?

<u>No</u>	<u>Yes</u>
41.1. Alcohol	— —
41.2. Verbal threats	— —
41.3. False promise	— —
—	
41.4. Use of authority (ex being a teacher)	—
—	
41.5. During sleep	—
—	
41.6. During or after khat chewing	—
—	
41.7. After using Hashish or other drug	—
—	
41.8. Using physical force	—
—	
41.9 Other Specify	—
—	

42. Whom did you tell the problem?

- | | |
|------------------------|------------------------|
| 1. Priest | 5. Parents. |
| 2. Police | 6. Brother\Sister |
| 3. Health professional | 7. No one |
| 4. Friends | 8. Other specify _____ |

43. Have you ever applied to the legal system

- | | |
|--------|-------|
| 1. Yes | 2. No |
|--------|-------|

44. Where did you apply ?

- | | |
|-----------|----------------------|
| 1. Kebele | 4. Community leaders |
| 2. Police | 5. Others Specify |

3 Court

45. What measures taken on the one who committed rape?

- 1. imprisoned
- 2. Compensation paid
- 3. Compromise
- 4. Released free
- 5. forced to marry
- 6. Others specify

46. Is there any history of the following listed consequences due to the assault

- 46.1. Vaginal discharge
- 46.2. genital ulcer
- 46.3. genital trauma
- 46.4. pregnancy
- 46.5. Abortion
- 46.6. other specify

47. Have you ever experienced some of the following after the assault ? (indicate your answer by writing X on the appropriate place.)

- 47.1 Self blame_____
- 47.2. Fear_____
- 47.3. Anxiety_____
- 47.4. Depression_____
- 47.5. Sexual dysfunction_____
- 47.6. Alcohol or drug dependence_____
- 47.7. School failure_____
- 47.8. Non specific physical complaints_____
- 47.9. Suicidal ideation_____
- 47.10. Suicidal attempt_____
- 47.11. Others specify_____

48. Do you see sexual violence as a serious problem?

- 1 Yes
- 2 No
- 3 I don't know

49. In what way do think that sexual

violence/Harassment affect girls day to day life ?

1. Being a school dropout
2. By failing grades
3. Not able to stay out at night (like attending night school)
4. Not able to dress the way they like
5. Not able to walk the route they choose
6. By affecting in choosing partner
7. Being pregnant
8. Contracting STD/AIDS
9. Being prostitute
10. By having psychological influence
11. Having hostility and revenge feeling
- 12 No influence
13. Other

specify_____

50. Among the following conditions rate your agreement or disagreement on the space provided.

Agree Disagree Not sure

- 50.1. It's not really Possible to rape a non-consenting woman.
- 50.2. Women who are raped asks for it
- 50.3. Women commonly report rape that has not occurred.
- 50.4. Women derive pleasure from rape
- 50.5. Only loose women get raped, nice girls don't get raped.
- 50.6. If a girl accept a boys invitation she should reciprocate with sexual favours
- 50.7. It's a women's responsibility to avoid sexual violence because men had uncontrolled sexual urges.
- 50.8. If a girl agrees to go to the boy's house or a hotel implies she is willing to have sex.

51. In which of the following conditions do you think it's acceptable for a boy to make intercourse with a girl without her consent? Answer by making "X" among the choices.

	Not acceptable	occasionally acceptable	Always acceptable
51.1 If they had sex before			
51.2 If she is his wife			
51.3 If she is his girl friend			

<p>51.4 If she is willing to go to home or hotel</p>			
<p>51.5 If she led him</p>			
<p>51.6 If she wears revealing cloths</p>			
<p>51.7 If she acts in a suggestive manner</p>			
<p>51.8 If both are sexually exited</p>			

55. Do you know what the Ethiopian regulation says about rape?

56. In the space provided you can write your opinion about sexual violence.
FINALLY WE WOULD LIKE TO THANK YOU FOR YOUR INVALUABLE CONTRIBUTION OF FILLING
OUT THE QUESTIONNAIRE

For male only

27. Do you know of your friends neighbours etc who had sexually assaulted a girl?

1. Yes 2. No 3. Don't know

28. If yes how many ? _____

29. If you know those who assaulted a girl what was their relation with the girl? she was _____

1. Family member 4. Neighbour
 2. School friend 5. Unknown
 3 . Girl friend 6. Other specify _____

30. What measure taken on those who committed rape? _____

31. Have you ever attempted to assault or rape a girl ?

1. Yes 2. No

32. If yes, Have you made intercourse?

1. Yes 2. No 3. I don't know

If your answer to question number 32 is Yes answer question number 33-37. If the answer is "No" proceed to question number 38.

33. Have you ever used one of the following before you force a girl or a women to have sexual intercourse?

- 33.1. Alcohol
 33.2. False promise
 33.3. Verbal threats
 33.4. Use of authority
 33.5. Making her to sleep
 33.6. Use of drug like Hashish
 33.7. Use of physical force
 33.8. Other specify _____

34. Who was the girl assaulted

1. School mate 2. Prostitute
 3. Girl friend 4. Neighbour
 5. Family member specify _____ 6. Unknown girl
 7. Other specify _____

35. Are groups involved during rape? _____

1. Yes 2. No

36. How long did you know the girl you assaulted

37. have you been taken to the court for your crime?

1. Yes

2. No

38. Among the following conditions rate your agreement or disagreement on the space provided.

Agree Disagree Not sure

- 38.1. It's not really Possible to rape a non-consenting woman.
- 38.2. Women who are raped asks for it
- 38.3. Women commonly report rape that has not occurred.
- 38.4. Women derive pleasure from rape
- 38.5. Only loose women get raped, nice girls don't get raped.
- 38.6. If a girl accept a boys invitation she should reciprocate with sexual favours
- 38.7. It's a women's responsibility to avoid sexual violence because men had uncontrolled sexual urges.
- 38.8. If a girl agrees to go to the boy's house or a hotel implies she is willing to have sex.

39. In which of the following conditions do you think it's acceptable for a boy to make intercourse with a girl without her consent? Answer by making "X" among the choices.

	N o t a c c e p t a b l e	o c c a s i o n a l l y a c c e p t a b l e	A l w a y s a c c e p t a b l e	
39.1 If they had sex before				
39.2 If she is his wife				

39.3 If she is his girl friend				
39.4 If she is willing to go to home or hotel				
39.5 If she led him				
39.6 If she wears revealing cloths				
39.7 If she acts in a suggestive manner				

39.8 If both are sexually exited				
39.9 If she's willing to spend the night				
39.10 If she change her mind				
39.11 If she is a virgin				

40. What do you think is responsible for sexual violence?

- 1. Poor family control Yes No 8. No good relation with opposite sex Yes No
- 2. Strong family control Yes No 9. Peer pressure Yes No
- 3. Losing cultural value Yes No 10. Being adventure Yes No
- 4. Girls bad behaviour Yes No 11. Being immature Yes No
- 5. Boys bad behaviour Yes No 12.Revenge Yes No
- 6. Viewing pornographic films Yes No 13. If other people are doing it Yes No
- 7. Reading pornographic material Yes No 14.Other Specify_____ Yes No

41. Do you think sexual violence is common among high school students

1. Yes 2. No 3. I don't know

42. Have you ever encounter forced sexual intercourse.

1. Yes 2. No

43. If Yes by whom_____

44. In the space provided you can write your opinion about sexual violence.

FINALLY WE WOULD LIKE TO THANK YOU FOR INVALUABLE CONTRIBUTION BY FILLING OUT THE QUESTIONNAIRE