

**Sexual Harassment against Women with Visual
Impairment in Addis Ababa: Types,
Extent and Consequences**

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MA Thesis Report

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LIST OF ABBREVIATIONS

AIDS	Acquired Immunodeficiency Syndrome
HIV	Human Immunodeficiency Virus
VAW	Violence against Women
STDs	Sexually Transmitted Diseases
PISD	Post Traumatic Stress Disorder
LMICs	Low and Middle Income Countries
EEOC	Equal Employment Opportunity Commission
AAUM	American Association of University Women
NCCAN	National Centre for Child Abuse and Neglect

Abstract

The primary objective of this study was to uncover the type, magnitude and consequences of sexual harassment among women with visual impairment in Addis Ababa. To this effect, a random sample of 72 women with visual impairment and a purposive sample of eight key informants provided quantitative and qualitative data through questionnaire and in-depth interview respectively. The results showed that whereas 84.7% of the women with visual impairment were of the view that blind women are vulnerable to sexual harassment, 68.1% of the women confirmed that they themselves were sexually harassed, suggesting how large the magnitude of the problem is. Regarding the causes, results indicated that Perpetrator tried to take advantage of blindness (46.9%), trust in perpetrator (34.5%) and dependence in perpetrator (16.3%) were found to be the leading causes for sexual harassment women with visual impairment. The results further indicated that the major consequences of the act were quickly angry (77.6%), sleeplessness or irregular sleep patterns (77.6%), suicide attempt (67.3%). The most frequently perpetrators were relatives (29%), neighbor (26%) and strangers (19.3%). Organization and associations such as family service and counseling centers, community legal service could be providing much needed support and services to individuals who experience sexual harassment, especially if person are reluctant or afraid to report incident, or uncertain and confused about what to do.

Chapter One

Introduction

1.1. Background

The occurrence of sexual harassment against women with disability is becoming recognized and is causing a grave concern. According to Nosek and Howland (1998), sexual harassment refers to bullying or coercion of a sexual nature, or the unwelcome sexual advances, requests for sexual favours, and other verbal or physical harassment of a sexual nature. Obviously, anyone regardless of gender, age, and race can be vulnerable for sexual harassment. Common places where people encounter sexual harassment include the home (sexual abuse of children, sexual assault by partners or relatives), outside the home (in group homes or institutions), working environment, school, in streets, and while moving from one place to another riding a bus or a taxi (Leigh Ann Davis, 2011).

Studies indicate that people with disabilities experience more violence in general when compared to those without disabilities. For example, in 2008, the National Crime Victim Survey in Nepal found that people with disabilities experience twice higher rates of violence than people without disabilities (that is, 40 victimizations per 1,000 persons with disabilities compared to about 20 per 1,000 persons without disabilities). In other words, the rate of victimization is twice as high for people with disabilities (Harrell & Rand, 2010).

Be this as it may, a number of causes can be attributed as to why women with disability are vulnerable to sexual harassment. The main reason for higher rates of victimization among women with disabilities is linked to the disability-related limitation (Hariyn, Rousso, 2005). Some (e.g., those with visual impairment or physical disability) cannot move away from perpetrators or defend themselves because of their physical limitation. Others (e.g., those with

intellectual disabilities) could not get comprehensive information and thus may not even understand the nature of perpetrators' behaviour let alone report the incident to the police (Harilyn, Rousso & Cooke, 2005).

Sexual harassment occurs in schools and the workplace, the victims being women across age groups including primary school girls. According to a European Union report, for example, 40%–50% of women encountered some form of sexual harassment or unwanted sexual behaviour in the workplace. In a study among primary schools in the Machinga district of Malawi (Kadzamira E, Moleni C, 2007), primary school girls reported experiencing various types of sexual harassment and abuse at school, including sexual comments (7.8%), sexual touch (13.5%), 'rape' (2.3%), and 'coerced or unwanted' sex (1.3%). The highest percentage of women who reported to have experienced sexual harassment are those aged 21-25 (24.2%), followed by those aged 26-30 (16.3%).

Studies further indicate that victims of sexual harassment suffer several psychological consequences ranging from fear of men to embarrassment and frustration. In one study, for example, about 55% of the women who experienced some form of sexual harassment reported feeling angry about the incident. In the same study, other women also reported that the incident affected the way they did their job (13.9%) while another small percentage of the women (8.1%) reported feeling guilty about the situation. Respondents also used words like disgusted, frustrated, embarrassed, humiliated, uncomfortable, and insecure to describe how the incident of sexual harassment made them feel (Eoc.org.uk. 2010).

In Ethiopia, little empirical evidence is available pertinent to sexual harassment of blind women. However, one would expect the rate of sexual harassment among this group to be high because they are more vulnerable to sexual harassment than their non-blind counterparts. Nevertheless,

whether this expectation holds true needs further empirical evidence. The purpose of this study is; therefore, to estimate the extent, identify the types and consequences of sexual harassment among blind women in Addis Ababa, Ethiopia using a mixed research approach.

1.2. Statement of the Problem

Sexual harassment may occur in a variety of circumstances. In fact, the perpetrators of sexual harassment vary both in terms of age and status. Often, but not always, the perpetrator is in a position of power or authority over the victim (due to differences in age, or social, political, educational or employment relationships) or expecting to receive such power or authority in the form of promotion.

With a particular focus on sexual harassment on women with disability, a meta-analysis by Puri and Misra (2015) estimated that people with disability have 50% higher chance of suffering violence compared to non-disabled people and among those with mental health problem the risks are higher. Likewise, a systematic review by Semahegn and Menggistie (2015) in Ethiopia indicated that 20% to 78% of women encountered physical violence whereas 16% to 59% of women encountered sexual violence. One can observe that sexual harassment is a serious problem among people with disabilities as reported in several studies some of which are cited above.

However, despite the severity of the problem and its prevalence among people with visual impairment specially living in Addis Ababa little has been done to document and clearly understand the dynamics of sexual harassment among women with visual impairment in Addis Ababa. Besides little is known how the problem affects the wellbeing of women with visual impairment in the short-as well as in the long-term. Hence, this study tried to examine the extent, types and consequences of sexual harassment among blind women who are supported by two

non-governmental organizations (Together Ethiopia Resident Charity Organization and Ethiopia National Association of the Blind) in Addis Ababa, Ethiopia.

Accordingly, this study aimed at answering the following research questions.

- A. How common is sexual harassment among women with visual impairment?
- B. What are the common forms of sexual harassment that women with visual impairment encounter?
- C. What are the immediate and long term (physical, social and psychological) consequences of sexual harassment among women with visual impairment?

1.3. Objectives of the Study

The major objective of this study was to explore the existing condition of sexual harassment among women with visual impairment.

1.4. Specific objectives of the Study

The specific objectives of this study include:

- A. To examine how common sexual harassment is among women with visual impairment in Addis Ababa
- B. To identify the common types or forms of sexual harassment that women with visual impairment encounter
- C. To find out the immediate and long term consequences of sexual harassment among women with visual impairment

1.4. Significance of the Study

This significance of this study is two-fold: theoretical and practical. In terms of theory, it will help to examine the relevance and applicability of the existing theories to our country. On the other hand, the practical contribution is numerous. In a country where sexuality is not a topic for open discussion, reporting sexual harassment one encountered to the police or even to one's family members is a rare phenomenon. As a result, many victims' with and without disabilities alike, are more likely to keep the problem a secret. This is the main reason why we don't know much about sexual harassment directed against women in general and against women with visual impairment in particular. Hence, identifying and documenting the existing condition of sexually harassed blind women is useful.

Be this as it may, if Ethiopia is to form an inclusive society, we need to study the problems of people with disabilities and we need to address the problems as well. To address the problem of sexual harassment directed against women with visual impairment, in turn, requires empirical data pertaining to the extent of the problem, types or forms of harassment the group often encounters, and the physical, social and psychological consequences they suffer.

Thus, the present study will be significant for several practical reasons. First, the study will shed light on the extent of the problem, the forms of sexual harassment experienced by women with visual impairment and the consequences they suffer. Second, the information obtained can be used by the non-governmental organizations that support blind women to go beyond caring for the women and to convince them to report the incident to the police. Third, the study findings will also help pertinent government bodies to be aware of the problem and to find ways of alleviating the problem.

1.5. Operational Definition

Sexual harassment: unwanted and unwelcome sexual behavior that makes a people feels uncomfortable or unsafe.

Sexual violence includes sexual assault and sexual abuse. Assault is a crime of violence, anger, power and control where sex is used as a weapon against the victim. It includes any unwanted sexual contact or attention achieved by force, threats, bribes, manipulation, pressure, tricks, or violence. It may be physical or non-physical and includes rape, attempted rape, incest and child molestation, and sexual harassment.

Sexual abuse is similar to sexual assault, but is a pattern of sexually violent behaviour that can range from inappropriate touching to rape. The difference between the two is that sexual assault constitutes a single episode whereas sexual abuse is on-going

Sexual Coercion – is the act of forcing (or attempting to force) a female blind through physical body harm, violent threats, verbal insistence, deception, cultural expectation or economic circumstance to engage in a sexual behavior against her will.

Consequence of sexual harassment– Creates on the social, physical, economical, educational, and psychological status of the victim women or girls.

Physical consequence – sexual harassment victims reported problems of pregnancy, abortion, and sexuality transmitted diseases (STDs) including HIV/AIDS with other physical injuries including patting, pinching and other physical problems.

Psychological – harassment victims reported to have symptoms including suffer of anger, shame, self-blame, powerlessness, denial, and fear followed by nightmares, phobias, sexual dysfunction and suicidal tendency.

Economic – sometimes parents are forced to take their daughter out of school because of fear of rape or girls drop out of school after being raped or abducted which results in improper education and unemployment or poverty.

Verbal sexual harassment – receiving unwelcome comments or being asked intrusive questions about appearance, body parts, sex life, menstruation, being pestered for dates or receiving unwelcome sexual suggestions or invitations, repeatedly subjected to sexually suggestive, obscene or insulting sounds, repeatedly and intentionally listen to dirty jokes, crude stories that are unwelcome and discomfoting.

Physical sexual harassment – being brushed against or touched, forcibly kissed or hugged, or being forcibly made to touch someone; stood very close to or cornered in any way that was unwelcome and discomfoting.

Bullying- a combination of an imbalance of power, an intent to cause harm, and repetition.

Visual Impairment – person usually cannot distinguish figures at 10 feet distance after the treatment. Similarly, visually impaired person cannot read the fourth line of snellen chart (JICA, 2002). These groups of peoples are most vulnerable as they can't avoid risk which can be minimized through sight.

Chapter Two

Literature Review

This chapter presents a review of the literature on such pertinent topic as the meaning of sexual harassment, type of sexual harassment, magnitude and consequence.

2.1. Sexual Harassment

Sexual harassment is a psychosocial problem which comprises violence of sexual type against the recipient. Even though sexual harassment is broadly assumed and studied as an organizational problem in work places, there are frequent incidences of sexual harassment in academic institutions. In light of organizational of view sexual harassment is defined as unwelcome sexual advances, requests for sexual favours, and other verbal or physical conducts of a sexual nature towards receiving individual, who considers it offensive, uncomfortable and intimidating. These activities and characters constitute sexual harassment when compliance of the victim to these conducts is used by the perpetrator as a precondition to achieve certain goals. Besides accepting or rejecting to such sexual nature activities interferes with the performance of the victim in the daily job activities or creates hostile, offensive and intimidating environment. Generally sexual harassment is perceived as having negative effect on the victim's psychological well-being (Gutek, 1985; Murrell, Olson, & Frieze, 1995).

Despite the known consequences of sexual harassment on workers in organizations rare data has been collected to imply the degree of its prevalence among university students. Especially in sub-Saharan Africa where policies related to students' sexual harassment are rare or non-existent. For example the Nigerian legal system provides little relief for complainants of sexual harassment and reported cases are considered jokingly, whereas the legal systems in developed countries are more effective and sexual harassment is integrated as part of the non-discrimination

of individuals in educational institutes. Sexual harassment across the sub-Saharan Africa is motivated by cultural practices which encourage subtle aggression in negotiating sexual decisions and is a situation that creates power difference between the perpetrator and the victim that implicitly depresses the victim psychologically (Gregorio, 2002).

Several studies have investigated sexual harassment and its related impacts on the target. A survey study of previous researches on female participants indicated that 19-60% of them reported experiencing some form of sexual harassment in social settings and its negative impact in their life (Fitzgerald, 1998; Murrell, 1995). A research done by Fitzgerald et al (1988) on the prevalence and consequences of sexual harassment indicated that those women persistently sexually harassed women reported psychological symptoms such as depression, anxiety and related somatic symptoms. Another prevalence study predicted that 50% of all women and 20-30% of all university females experienced sexual harassment (Gervasio & Ruckdeschel, 1992).

2.2. Types of Sexual Harassment

Generally sexual harassment is divided into two major categories: quid pro quo (something for something) and hostile environment and both categories can occur at the same time. In the first case the perpetrator has the power to decide on the victim whether he or she accepts to sexual demands while in the latter case i.e. hostile environment, the abuser could be a supervisor, co-worker or other third parties in which the perpetrator creates an intimidating or offensive environment which affects the job condition. Furthermore the Quid pro quo (Something for Something) category has two legal requirements of sexual harassments: an employee is subject to unwelcome sexual advances and then accepting the offer benefits the employee or rejecting it will be detrimental to the employee. In the hostile environment type the victim faces harassment

and it interferes with the job performance and creates hostile, intimidating and offensive work circumstances (Boland, 2005).

Within these two categories there are several sexual harassments types through which conducts of harassments are done and the most common ones are Physical, Verbal Nonverbal/Gesture, Written/graphic and Emotional harassments. Physical harassment includes kissing, patting, pinching, hugging, massaging or touching a person's clothing, hair, or body; rubbing oneself sexually around another person, touching in a sexual manner and so on. Verbal harassment means that undesirable comments about a person's appearance, private life or body, provocative sexual joking, insulting and talking about private relationships about the person...etc. are considered verbal sexual harassments. Sexually suggestive gestures such as winks, nods, gestures with hands, legs and fingers; looking up and down a person's body; blocking a person's path, following the person; hanging around a person are also considered as non-verbal or by gesture harassment. In the contrary displaying sexist or sexual calendars; writing sexist or sexual graffiti, sending pornographic pictures and prints are considered as written or graphic form of harassment. Behaviour which is discriminatory towards or excludes a person on the ground of her sex regarded as emotional harassment Sexist words which are directed specifically against women falls in this class. Sexist words comprise calling a woman "doll, babe, sweetie ...repeatedly, using sexist phrases like women cry easily or are more emotional, comments like women can't manage or some works are for women...etc are considered as emotional harassment (Malla, 2001; Boland, 2005).

In addition to the above listed sexual harassment types there are situations that might be combinations of these but have different way of approaching the victim. Requests for Sex are situations that involve a person at higher power negotiates with the victim by making promises

of increment of wage, position or other benefits if the person agrees for the demands of counterpart such as to spend the night together; to have an affair; to have sex or to engage in sexual conduct. Similar but different to the above is Sexual Intimidation is a kind of coercion to a person as a warning of losing a job or other benefits if the individual doesn't engage in sexual activity. The less prevalent kind of sexual harassment is sexual criminal conduct which involves threats of harm, forced sexual touching or kissing and attempted or completed sexual assault (Boland, 2005).

2.3. Magnitude of Sexual Harassment

Globally educational authorities and stakeholders have been in great worry due to the persistent incidences sexual harassment of student in secondary and post-secondary educational institutions. A survey study done in 1993 and 2001 by the American Association of University Women estimated that 80% of students in public schools are sexually harassed by their peers and staff members. Similar trends of sexual harassment are also observed in other countries including South Africa, Canada, and Norway. Several organizations and stakeholders who engage in promoting equal access of educational opportunity for female students in Ghana have been in great concern on the issue of sexual harassment in the country. These organizations including Plan Ghana, Action Aid International, USAID, and World Education Incorporated have been working on the matter in collaboration with the Ghanaian Ministry and Service of Education. Recently national survey in Barbados, Canada, the Netherlands, New Zealand, Norway and USA indicated that 27- 34% of the participants reported that they experienced childhood sexual abuse (Handwerker, 1993).

Similar cross-national surveys done in Canada, Korea, New Zealand, United Kingdom and USA to assess the prevalence of sexual assault of college aged female showed a result with high rates

of sexual violence ranging between 19 and 27.5% of the respondents either harassed or face attempted rape in their lifetime (Heise, Pitanguy & German 1994). A study of girls aged between 13 and 14 (N=450) in Jamaica for instance reported that 4% had been raped in which half of them before age 12, 13% faced attempted rape and 33% them faced unwelcomed touching and another 33% reported verbal harassment. Another survey research in Uganda on 4279 adult women currently engaged in partnership reported that 25% of the participants face forced sexual engagement and also the majority of the participants admitted that coercive sex occasionally happens (Koenig et al., 2003).

Two studies in South Africa on the incidences of sexual violence on adolescent girls; the first study in Cape Town indicated that 11% of rape and 72% forced sex and the second study in other area found a disturbing report between 28 and 30% of the participants are coerced for sexual initiation (Jewkes, 2002). Police statistics in South Africa predicts 240 women were face attempted rape or raped; however most sexual coercions are not usually reported. Another study in Uganda 49% of the primary school sexually active students experienced forced sex (Heise, Kanti & Nahid ,1995) and at same year a prospective study done in USA showed that 23% of girls reported sexually assaulted (Judith, Linda & William, 1995).

In USA, Washington state in 1997 of 3128 respondents of girl's grades 8, 10, and 12, 23% of the participants girls report sexual abuse. A study on 1992 reveal 32% of women report sexual abuse (krugman.S, Mata.L and Krugman, 1992).

2.4. Vulnerable Groups for Sexual Harassment

Sexual harassment might occur to any individual in all kinds of social settings; however in comparison to the overall population visual impairment women are more vulnerable groups that become frequently victimized. UN census reports shows 150 million underage individuals (0-18)

live with disability and most of these disabled children live in Low and Middle Income Countries (LMICs) and research evidences show that these children are most vulnerable and socially excluded. Social exclusion and vulnerability might be caused by several factors but violence is one of the core causes and conversely violence is consequence of social exclusion and vulnerability. Under the international law (Convention on the Right of the Child, and the Convention on the Rights of persons with Disabilities respectively) children and people with disability have the right to entertain life without alienation but systematic study done in high income nations indicated that children with disabilities are three to four folds more likely to face violence than their healthy counterparts. In LMICs studies regarding children with disability and incidences of violence done by UN and NGO are very limited in number and smaller in coverage therefore it is difficult to estimate the prevalence of violence besides data collected by childcare agencies or forensic system doesn't abuse of children clearly (Cooke, 2000).

Sexual abusers of children are very careful in tracking their targets and they shift their tactics from one target to another due to that main stream service providers are more vigilant they move to less cautious voluntary agencies in order to find potential victims. Another argument is that visually disability in children and those who possess communication difficulties are more vulnerable with high possibility of sexual abuse. And disabled young people with negative self-image are more at risk to be deceived and finally sexual abused (Cooke, 2000). In contrast Sobsey (1994) postulated that children with disability are in more potential risk of sexual harassment as a result of the settings they are placed (the child care settings and agencies) rather than they are targeted because of their being impaired because of their exposure to several care givers that increases the risk of facing with paedophiles. Similarly Brown's (2002) social model did comparative analysis of disabled children who are placed in social settings with poor

infrastructure designs and recruitment procedures are more vulnerable than those impaired children in safe settings. Besides those in poor settings are further disadvantaged due to these children are not heard or are less trusted when they report incidences of sexual abuse due to lack of therapeutic and rehabilitative services.

A survey in the USA by National Centre for Child Abuse and Neglect (NCCAN) claimed that children with disabilities are more susceptible for additional risks and predicted that these children are 1.7 times more at risk in all types of abuses than the children without disabilities and are 4 to 10 folds more vulnerable to sexual abuse in comparison to the healthy children (Sobsey, 1994). In 2008 similar survey by NCCAN on children indicated that children with intellectual disability face more violence in comparison to those without disability and the data indicated that 4% of violence in disabled children than those without disabilities scored 2% and this shows that the rate of victimization of children with intellectual disability two fold more vulnerable than those healthy children. Consequently the survey concluded that children with cognitive disability are the highest risk of facing violations (Harrell & Rand, 2010).

Other studies persistently show that children with intellectual disability are more likely to face sexual abuse than those without disability. For instance a study on women with intellectual disability referred for contraceptive services showed that 25% of them have reports of previous sexual violence (Furey, 1994; Sobsey, 1994). Similar study on individual with intellectual disability also predicted that 49% of them face more than 10 times incidence of sexual violence (Sobsey & Doe, 1991).

Generally all kinds of disabilities contribute more risks of violence in comparison to non-disabled individuals; however the degree and prevalence of victimization varies from one type of disability to another type. Persons with intellectual, communication and behavioural disorders

face higher levels of violence (Sullivan & Knutson, 2000). And a study on 55,000 children in Nebraska showed that children with intellectual disability are 4 times at higher risk of sexually abused than children without disability (Sullivan & Knutson, 2000).

Comparative statistical data on prevalence of sexual abuse in women and men shows that female are more abused than male- whether they are with disability or not and this shows that usually men with disability are unknowingly ignored. But research studies show that men with disabilities are two-folds more sexually abused than men without disability (The Roeher Institute, 1995).

In the previous sections we have observed that women and people with disability are under the guardianship of the UN international laws namely: Convention on the Rights of persons with Disabilities and CEDAW respectively and this shows that VAWs and disabilities are both human right issues. Therefore violence Against Women and disability can be a cause to one another and at the same time one can be a negative effect of the other inversely and directly; but this influence of VAW and Disability to each other is rarely connected. And similarly social discrimination and neglect in family against women with visual impaired is usually less researched and little focus is given to the sexual violence directed against women with disability. Though few researches address this issue a research in Nepal proposes theoretical reason on why this is so (1) asexual image of disabled women in the community; (2) blaming of the victims themselves of their physical deformity which makes them less attractive than the main stream symbol of national beauty of women; (3) failure to provide sex education to women with disability and this leave them to be indifferent to identify between normal and abusive behaviors and (4) in addition to the above factors the emotional and economic dependence of women with

disability on others makes them to remain silent in incidences of sexual violence in order to protect that artificial dignity they consider (Dawn, 2003).

Therefore risk factors of women with disability to sexual violence may start early in life and broad and complex interventions are required. Furthermore victimization of groups with mental disorders need special attention in prospective studies in order to identify the most vulnerable groups. A Previous cohort study indicated that people with moderate and severe mental disorders were at higher risk of physical and sexual assault; besides those with history of childhood abuse, substance use and social disadvantage among the severe mental illness (schizophrenia) individuals indicated at the highest risk (Chapple, Chant, Nolan, Cardy, Whiteford, et al., 2004).

2.5. Consequences of Sexual Harassment with Visually Impaired

Consequences of sexual violence are many types but can be summarized into Physical, Psychological, Behavioural and Social perspectives. Physically the victim might get pregnant; acquire sexually transmitted diseases, bruises, lacerations and related physical injuries. The usual psychological effects might include but not limited to depression, anxiety, panic attacks, low self-esteem, shame and guilt, irrational fear, loss of trust, alienation, sexual dysfunction, obsessive-compulsive disorder and PTSD; and psychosomatic symptoms such as stomach-aches, headaches, seizures and problems with sleeping occur similarly. Behaviourally the victim might display symptoms such as withdrawal, aggression, self-infliction, specific social phobias, disturbances of sleep and appetite, crying spells, seizures, regressive and sexually inappropriate behaviours, feelings of guilt, shame and panic, resists physical exam, learning difficulties, irritability, mood swings...and etcetera (Sobsey, 1994). Socially sexual violence has detrimental consequences to the larger community that directly forces expend to resources and the loss of

productivity and indirectly because of psychological fear it creates indirectly increase the costs of the society (Crowell & Burgess, 1996).

2.6. Perpetrators

Disability researchers continue to operate from varied conceptions of what sexual abuse is, but the data leave little doubt that the overwhelming majority of perpetrators are male caregivers, a significant portion of whom are paid service providers who commit their crimes in disability service settings. (Sobsey & Doe, 1991). Male family members are also the second largest perpetrators group (Sobsey, 1994) and only a miniscule percentage of abusers are stranger (Furely, 1994). Even when researchers in one study concluded, “Male strangers were the most often cited perpetrators of sexual abuse” (Young et al., 1997). Closer inspection of the published data reveals that while strangers comprised 10.5% of those that sexually abused women with disabilities, a tally of the numerous other categories of assailants (e.g., husbands 8% and dating partners 8.9% alone) reveals that the percentage of known assailants surpass those identified as strangers. The same table also shows that fathers (4.1%), brothers (6.2%) and “other family members” (6.8%) combined surpass the percentage of strangers (10.5%).

That people with disabilities are, like those without disabilities, most at risk for abuse from individuals they know and on whom they rely for personal care, typically complicates their ability to report abuse or level formal charges against those who abuse them. Some abusers may be so controlling that those they victimize have no way to disclose the abuse. Perpetrators frequently select their victims for their perceived powerlessness and vulnerability and for their seeming limitations. For instance, Bruce Allen Young, a registered nurse, found guilty of raping a sedated 15- year-old girl in a hospital recovery room (“Nurse Pleads Guilty,” 1995). He stated that he had chosen her because she was “helpless” (“Scores of Florida Women,” 1994). Sex

offenders may similarly assume that women who are deaf will not be able to call for help or report their abuse. They may also believe that women who are blind will be unable to identify them and defend themselves. These assumptions need not be accurate to be powerful.

2.7. Common Forms of Sexual Harassment in People with Visual Impairment

Sexual harassment incidences among people with visual impairment are very complex and controversial to understand. Some of the victims might not comprehend the situation what exactly is occurring or don't have someone they trust to report the assault. In fact, those who are under sexual perpetration don't have the knowledge that it is an illegal act and their right to refuse to comply. And also fear of the abuser to their wellbeing or to those loved ones they might remain silent without talking to anyone and if the perpetrator is of an authority figure whom the victim considers that his authority will be unquestionable and there will not be any possibility of information leakage. Other obstacles of not reporting sexual violence is lack of education on sexuality and assertiveness training to visually impaired persons and those who are ready to report are not viewed as credible informants due to the negative label of the society on people with disability (Keilty & Connelly, 2001).

2.8. Risk Factors that Contribute to the Occurrence of Sexual Harassment

The risk factors that contribute sexual harassment to happen are several types and also are complex to understand. To mention some of the factors might include powerlessness, limitations of communication skills, lack of assertiveness trainings and resources could be used a beginning to address the issue. Each factor might be amplified by social and environmental situation; for example individuals who live in over-controlled and in authoritarian environment might contribute to their feeling of powerlessness. Another risk factor related to limitations in communications and lack of assertiveness could be again exacerbated by lack of experiential

opportunities of impaired persons to use their intuition in order to identify situation which are safe or not safe. In addition to the personal limitations of the individual other factors that contribute to the victim's vulnerability could be caretaker's inability: (1) to learn the holistic background of the person with disability and her/his day-to-day relationship and affiliations; (1) to learn the abuse reporting procedures and attitudes of the agencies involved; and (3) making sure that there is remedial plan if abuse occurs to people with disability. Another risk factor for persistence of sexual abuse is offenders aren't caught and made accountable for the crimes they commit (Davis, 2011).

Generally the risk factors can be summarized as follows: much dependency on others; ignoring the human rights of disabled persons; perception of perpetrator less probability of arrest; not being believed of survivors on reporting abuse; less training and education about proper and improper sexuality; social isolation and physical helplessness; and stereotypic values and attitudes in the field disability without considering the persons with disability individual differences (Baladerian, Coleman and Stream, 2013).

2.9. Sexual Assault and the Disabled

Traumatic reactions as a result of sexual assault are twice demonstrated in disabled individuals than those without disability. The traumatic symptoms which result from sexual assault might include depression and difficulty of sleeping and the symptoms might persist for more than one year. Hysterical responses such as crying, confusion and agitation and numbing reactions like shock and unexpected attitudes of the abuse incidence could be the two major reactions observed as a result of sexual trauma (Brown, 1991). Individuals with developmental disability are more prone to sexual abuse due to their limitations in communication, being more dependent on others and failure to understand the definition of sexual abuse. Communication limitations don't only

equally affects individuals with developmentally disabled individuals and persons with cognitive disorder but also it makes it difficult to identify their traumatic reactions because they lack the skills to communicate. Similar analytical evidence on physical disabilities would have been more appropriate to this study but available literatures are more on developmental disabilities but on physical impairment are very rare (Peckham, 2007).

In most incidences of sexual violence the perpetrators are well identified to the victim (family members, acquaintances, residential care staff, transportation providers and personal care attendants) whether the individual is a person with or without disability. A study on people with disability indicated that 97-99% of the abusers are acknowledged and trusted by the victims and further analysis showed that 33% of the abusers were family members and acquaintances while the other 44% of the abuser were recruits of service providers to disabled people. From this data one can conclude that institutions responsible for providing special needs to people with disability are major factor to the incidence of sexual abuse of the disabled persons (Baladerian, 1991).

Of the several causes leading to the physical, mental, sexual, and reproductive health problems of women is domestic violence and it is assumed as the major factor but the indifference in addressing this problem in the health system appropriately is creating additional burden which necessitates multi-sectorial responses. Internationally no woman in any country is safe from domestic violence and estimates of World Health Organization (WHO) indicate that 40–70 % female murders are committed by their inmate partners. Another multi-country study by WHO indicated that the prevalence of domestic violence ranged from 17% to 70% in Japan and Ethiopia respectively (WHO, 2014; UNIFEM, 2010; FWV, 2014). This designates that domestic violence is a grave concern on women's legal and human rights and it originates from socially

created power difference between men and women. The national statistics of USA shows that every day three women get murdered by their husbands. In 2005 a total number of 1,181 women were murdered by their inmates and around two million women get injured every year by their intimate partners. All women of all ages are at risk of domestic violence and 84% of husbands commit sexual abuse internationally (USAID, 2010).

2.10. The Legal Concept of Sexual Harassment

Sexual harassment has been an issue of legal concern in the developed countries early in the 1970 and United States of America takes the leading role in addressing the issue legally. Title VII of the 1964 Civil Rights Act prohibits employment discrimination based on sex and race and the Equal Employment Opportunity Commission (EEOC) were formed to administer the Civil Rights Act. However claims of sexual harassment were not seriously considered in the courts till mid-1970s till the term sexual harassment has been coined for the first time by American feminist in 1975 and then after legal institutions began to accept and process claims of sexual harassments and order remedies to the plaintiffs’.

In 1980 the EEOC provided a working guideline and definition of sexual harassment as follows:

Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute sexual harassment when submission to such conduct is made either explicitly or implicitly a term or condition of an individual’s employment, submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual, or such conduct has the purpose or effect of unreasonably interfering with an individual’s work performance or creating an intimidating, hostile, or offensive working environment.

When the issue of sexual harassment legal liability began in the USA most countries in the developed world followed similar instances to address laws related with gender equality, sex discrimination and finally prohibition of sexual harassment. The leading countries which followed the prohibition of sexual harassment in their legal system are Australia, Canada, Great Britain, France and few others. In 1992 a survey done by the International Labor Organization (ILO) on 23 industrialized countries regarding the working conditions and whether sexual harassment is recognized in their legal system results show that only seven nations (Australia [federal level and most states], Canada [federal level and a number of provinces], France, New Zealand, Spain, Sweden, and the United States) mention or defined sexual harassment in their legal law in federal or state level. But the rest 16 nations address sexual harassment in several different ways such as unfair dismissal, criminal law and the likes; besides in another survey in 1996 indicated that sexual harassment has attracted full attention of the law in industrialized countries except Japan which lagged behind its equivalent nations (Crouch, 2001). However the developed countries inclusion of prohibition of sexual harassment in their legal system differs contextually in that some select quid pro quo as illegal and the hostile environment as illegible others treat as illegal both categories and also others accept both as illegal but fail to practice in their courts (Crouch, 2001).

Once the recognition and inclusion of sexual harassment in the legal system of industrial societies international organizations (United Nations and IOL) have been triggering several protocols and conventions for the prohibition of sexual harassment internationally. As a result a Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) which formed in 1979 recognized sexual harassment as a type of gender based violence against women in its General Recommendation of 1989 and in similar meeting three years later pressed

member states to include gender based discrimination including sexual harassment into their legislative systems. In 1993 General Assembly Declaration the committee developed a document on the elimination of Violence Against Women (VAW) with a definition of VAW to include “sexual harassment and intimidation at work” considering as violation of women’s rights and fundamental freedoms and calls on UN member states to condemn it and include it in their legal policy. The same year the Human Rights Commission treated sexual harassment as VAW and nominated a Special Rapporteur with responsibility of researching sexual harassment on work and the measures needed for its prevention in member states (McCann, 2005).

IOL has many conventions and recommendations on discrimination in employment on a number of grounds, including sex and in 1996 formed Committee of Experts that performed surveys internationally, through which produced a working definition of sexual harassment in order to find a way how state members address discrimination in work places. In addition the IOL has several non-binding instruments addressing workplace violence in all work sectors which makes specific reference to sexual harassment and procedures of legal implementation, training and measures of prevention (McCann, 2005).

As a result of the efforts made by international organizations and influence of industrialized countries for recognition of sexual harassment in their legal system many countries around the world began to introduce or modify their existing legal systems to include sexual harassment as part of their gender equality and anti-discrimination laws in the work place. In 2005 about more 50 countries prohibit sexual harassment in legislation and 35 countries have legislated against sexual harassment since 1995 (McCann, 2005). For example Puerto Rico which become part of the USA territory since 1989 has been influenced to change its legislation of various social issues including sexual harassment is illegal based on Title VII and Title IX Civil Rights Act and

prohibits it as a form of sex discrimination in the work place, education and in other social activities. Furthermore Porto Rico introduced a new legal system known as Law Number-3 which prohibits sexual harassment in private or public educational institutions in addition to the Civil Rights Acts inherited from USA and puts the country top of most Latin nations (Silva, Munoz and Torres, 2002).

2.11. RESPONSE PATTERNS OF VICTIMIZED PEOPLE

The response patterns of people victimized by sexual harassment and of battered women are impacted by similar factors (Cleveland & McNamara, 1996). Here the similarities experience, when those people victimized by other forms of gender discrimination as well. They include (1) fear of retaliation or escalation of the situation, (2) fear of not being believed, (3) fear of revenge, (4) fear of economic or other penalties, and (5) hopes for improvement that often surpass what is realistic. Discriminatory or abusive events of a personal or intimate nature raise questions of culpability in the victimized individual. This is heightened by a cultural lack of understanding for why women remain in abusive relationships or work situations that are discriminatory. All of these factors help account for the significant underreporting of these events (Cleveland & McNamara, 1996). In recent years, empirical research on specific victim responses to sexual harassment have contributed to our clinical understanding. Unfortunately, no similar body of evidence has been accumulated to document responses to other forms of gender discrimination, but much of the sexual harassment data is compatible with case material on other forms of sex discrimination. In 1997 Knapp, Faley, Ekeberg, and Dubois developed a comprehensive typology of victim responses and described four groups occurring along two intersecting axes. These typologies are based on whether the victimized person focuses her or his efforts on managing internal cognitions and emotions (self-focus) or toward problem solving and altering

the external situation (initiator focus). The second axis is defined by whether or not the victimized individual attempts to deal with the situation alone (self-response) or via the utilization of another party, such as a superior, a mentor, a physician, a therapist, a spouse, a co-worker, a law firm, or an agency (supported response) Gutek and Koss (1996).

2.12. Preventing Sexual Harassment

Sexual harassment training programs have focused on education regarding what behaviors constitute sexual harassment and dealing with harassment once it occurs. Awareness of what constitutes sexual harassment may not be enough to change a problem situation. Furthermore, grievance procedures and discipline are reactive measures and do not address the underlying dynamics of sexual harassment. Shullman has argued that if harassment is conceptualized as a result of cultural roles and organizational hierarchy, then prevention and training should focus on sociocultural and organizational interventions. This contention also has been supported by Fitzgerald, who argued that sexual harassment prevention must be conceptualized as ecological and proactive rather than individual and reactive.... From a feminist perspective, the occurrence of sexual harassment is fostered by cultural factors that intertwine power, gender, and sexuality as described above. By changing the cultural factors (sex role socialization, media portrayals of the objectification and victimization of women, the sex-segregated nature of the work force, and the acceptance of interpersonal violence) that essentially promote and condone sexual harassment, true prevention can be achieved.... Early socialization teaches males to be aggressive and dominant and women to be submissive and passive, which contributes to the development of women's secondary social and cultural status and sexually coercive attitudes and behaviors. Because the socialization process begins early in life, alternative parenting strategies are essential in decreasing women's subordinate status and ultimately in developing equality

between men and women. Chodorow recommended that parents replace traditional messages wherein boys are encouraged to be achievement oriented and self-reliant, while girls are socialized to be nurturing and obedient by teaching children that both sexes are of value; for example, fathers and mothers can model behavior representative of such messages by sharing child care and household responsibilities. This may decrease the stereotypes of “women’s work” and “men’s work” and give children less restrictive conceptions of masculinity and femininity than they currently hold, as well as symbolizing respect for the opposite gender as a group. The educational system is another powerful gender socialization agent because formal curriculum and other activities convey values that shape students’ perceptions of themselves and the world. Researchers have found that girls are subjected to prognoses in their educational experiences by the type of attention they receive from teachers and as a consequence of segregation. In the classroom, teachers tend to give more time and more esteem-building encouragement to boys than girls. For example, boys are provided remediation and challenge to achieve the best possible academic performance, praise for the intellectual quality of work, and attention when answers are called out. Teachers, however, provided less assistance with problem solving to girls than boys, praised the neatness of girls’ work, and completed complex tasks for girls as opposed to giving more detailed instructions for independent completion, as they did with the boys. Furthermore, teachers often used various subtle forms of sex segregation, such as seating girls and boys on opposite sides of the room and by organizing tasks by gender. As Renzetti and Curran pointed out, these practices have far-reaching implications for the lives of children.

2.12.1. Creative Public Information Campaigns

Public information campaigns pertaining to sexual abuse need to show the findings of research on the sexual abuse of women with disabilities because this population face such high rates of sexual abuse. One of the best ways to offer a realistic acknowledgement of risks without overwhelming people is to emphasize proactive measures in such campaigns. Sex education can be one such component. In fact sex education classes have long been used to offer and encourage conversation and respect for people's choices around sex, such courses have tended to transpire in venues less accessible to those with disabilities (e.g., in physical education settings). Moreover, insufficient information on sexuality and women with disabilities makes such discussions more difficult. It is therefore especially important to pay close attention to what women from within the disability community want. Self-determination must be more than a rhetorical claim, it must apply in pragmatic ways and sex education is one key venue. Confrontational strategies can complement public awareness and sex education campaigns. This involves, among other things, naming abusive behavior directly and demanding that it stop. Imagine Zero Tolerance Campaigns focused on ending sexual abuse that is disability-specific. Though this may seem either a simple or a Herculean task, the point is that it is especially powerful because it is so unexpected and it provides a concrete example of cultural resistance.

2.12.2. Enforcement of Policies and Law

Policies and procedures are necessary, but not sufficient, for addressing sexual harassment. Institutions and organizations must protect the rights of students and employees, instead of protecting perpetrators, by following through with remedies and disciplinary actions for proven charges of sexual harassment. It is imperative that disciplinary or other actions do not focus on the victim (e.g., encouraging a student to leave a class or transferring a worker to another

department to avoid the situation) but on the harasser and his inappropriate behavior. Disciplinary actions must be more than a “slap on the wrist” or a letter in a personnel file and be a factor in receiving tenure, salary increases, and promotions. The use of the reasonable person legal standard, which is male-biased and fails to take into account the discrepancy between the views of men and women about appropriate sexual conduct must be replaced by the standard of reasonable woman as a means for determining a hostile work environment. Using this standard when investigating internal or legal charges of sexual harassment will guarantee victims of harassment greater protection than is often afforded them and takes into account their perception of the offensive behavior.

2.12.3. Education for Vulnerable blind women

A key tactic for empowering women with special needs to fend off unwanted sexual comments and contact is improving sex education. It is unconscionable that the women most vulnerable to exploitation are also least informed about sex and an important array of associated issues, including pregnancy and sexually transmitted diseases. Blind women should give educational awareness about relationships and sexuality. These women are as capable and deserving of reciprocal and rewarding relationships as other non-disabled women but may need additional information about how to express their feelings, how to read social cues, how to care for and interaction to others, in order to build successful relationships and avoid becoming victims, or perpetrators, of inappropriate behavior. Extra educational program should include components about self-image and self-esteem, not only because it is important for their psychological wellbeing, but because empowered and strong women are less vulnerable to abuse (Penn, 2014).

2.12.4. **Social Mainstreaming / Inclusion**

Under the strict mandates of the IDEA, schools have developed relative expertise at mainstreaming students with disabilities into general education classrooms. However, social inclusion has remained elusive. The social isolation of disabled students from the general student population is a contributing factor to the prevalence of abuse. The need for acceptance makes students with special needs vulnerable to exploitation, and the pervasive “othering” of these students may diminish the sense of respect other students feel for their bodily integrity and emotional well-being. (Penn, 2014).

Chapter Three

Methodology

3.1. Design of the Study

The study employed mixed method research to collect and analyze data that helped to answer research questions. To be more specific, both quantitative and qualitative methods were used. Whereas the quantitative method was the main approach, the qualitative method was utilized so as to get supplementary information through in-depth interviews.

3.2. Description of the Study Areas (Organizations)

Addis Ababa is the capital city of Ethiopia, the seat of the African Union (AU) and the United Nations Economic Commissions for Africa (UNECA). It has 10 Sub-cities and 28 Woreda Administrations with a population of more than 3.385 Million. The Ethiopian National Association of the Blind was established in 1960 in Addis Ababa at Arada sub-city and has 10,000 members and 5 branch offices. The association is one of the best examples of a locally run NGO. It employs the blind, produces and sells braille textbooks and audio books, and uses the profits to create support services for its adult members and fund boarding schools for blind children. In this association, there are various support branches located on the not more than three acres-sized campus. Those are “Music Branch”, “Women’s Branch” which has 1000 members and offers support to blind women pursuing college degrees, and the “Teacher Branch.” Other branches of the Association include, among others, the Youth Development Branch and the Professional Development Branch. Together Ethiopia Resident Charity Organization is an organization established by a team of Ethiopian and German professionals that have years of joint work experience in Special Needs, main streaming, Technical Vocational

Education and Training (TVET), in adaptive computer technologies, rehabilitation and job integration for people with visual impairment.

3.3. Study Population, Sample and Sampling Technique

The target population of the study were women with visual impairment who receive support from two organizations: Together Ethiopia Resident Charity organization and Ethiopian National Association of the Blind. From together Ethiopia Resident charity organization all visual impaired women (i.e. 24 participants') who are member of the organization were selected. On the other hand, only 48 out of 100 member of the Ethiopia national association of the blind were selected. The survey sample comprised of 72 women with visual impairment. The women with visual impairment who participated in the study were selected using simple random sampling technique from each organization using the list of names as a sampling frame. Because sexual harassment is a sensitive issue, the participants' willingness to provide information was major factor considered thoroughly.

Accordingly, once the participants were selected at random their willingness to participate in the study was secured.

Besides the target group, eight key informants were also selected for in-depth interview using purposive sampling technique based on their position or job and knowledge about sexual harassment and its consequences in women with visual impairment. These were two from each organization leaders of women, one from each organization or association and two key informants from the NGOs who support women with visual impairment.

3.4. Instruments

In this study, two instruments were employed as data gathering tools: a questionnaire and interview protocol. The questionnaire was administered by the researcher in the form of interview; the responses provided by the participants were recorded by the researcher. The questionnaire comprised of questions about the types or forms of sexual harassment, physical, social and psychological consequences of sexual harassment and questions that help to estimate magnitude of sexual harassment in women with visual impairment as well as questions pertaining to socio-demographic data. The reliability of the measures are shown in the table below. The second instrument was key informant interview guide employed through in-depth interviews with key informants. Here also, questions that seek information that helped to understand the nature and forms of sexual harassment experienced by women with visual impairment and the short- and long-term consequences that the women suffer from the harassment were gathered.

Table _. Reliability of the measures used in the questionnaire

Scale	Number of items	conbach alpha
Harassment types	15	0.77
Perpetrators type	14	0.96
Physical consequence	8	0.46
Psychological consequence	11	0.92
Social consequence	2	0.78
Social response	7	0.95

3.5. Procedure

Before commencing the actual data collection process, the researcher first secured a letter of support from the School of Psychology. Pertaining to the instruments, first the tools were prepared in English after reviewing the literature thoroughly. Existing instruments was also examined for relevance. Using both sources (the literature and existing instruments), the instruments were developed for use. Then after the tools were translated to Amharic so as to make communication during data collection relatively easy.

In a similar fashion, the interview guide was assessed for clarity and the appropriateness of words used. Improvements were made depending on the assessment results.

3.6. Data Analysis

After data was procured via the aforementioned tools, the next task was to prepare mode of analysis. Thus, data were analyzed using quantitative and qualitative approaches. The quantitative data obtained through the questionnaire were analyzed using statistical package for social science (SPSS) version 20 data analysis software to estimate the magnitude of sexual harassment (using percentage) in women with visual impairment as well as to determine the common forms and consequences of sexual harassment in women with visual impairment. On the other hand, the qualitative data obtained through in-depth interview was processed using thematic analysis. The occurrences of each theme in the key informants' responses were ascertained to see how commonly the theme emerged across the key informants. This was then presented in the form of narrative.

3.7. Ethical Consideration

Before starting data collection, letter that asks the organizations to permit the researcher to collect data was secured from the School of Psychology, Addis Ababa University. After presenting the letter to the officials of the organizations and securing permission, data was collected. But before the actual data collection, the researcher secured the consent of participants after providing them with relevant information about the study. The participants were provided with information on the purpose of the study and what is expected. Besides, they were told that they can withdraw from the study at any time if they wish to do so. Furthermore, the participants were assured about confidentiality of the information they provided in the course of the study.

Chapter Four

Results

In this chapter, the results pertaining to estimates and magnitude of sexual harassment, forms of sexual harassment and the consequences of sexual harassment among blind women in the two organizations (namely, Together Ethiopia Resident Charity Organization and Ethiopian National Association of the Blind) are presented.

In this section data obtained through the questionnaire is presented. And it is organized in the following manner. First the demographic data of participants is elucidated. Second, the charity organizations who participated in the current study is offered. Third, the overall assessment on sexual harassment with particular emphasis on type, magnitude and consequences of sexual harassment is presented.

4.1. Demographic characteristics of Participants

Participants offered basic demographic information including educational background, marital status, age, visual status and living conditions. The participants were seventy two (72) in number and all of them were interviewed. The table presented below contains summary of the demographic features of participants.

Table1. Summary of Participants Demographic

Feature	Frequency	Percent
Educational Background		
Illiterate	6	8.3
Primary school	15	20.8
Secondary school	27	37.5
Diploma	18	25.0
Degree	6	8.3
Marital status		
Married	7	9.7
Unmarried	57	79.2
Divorced	6	8.3
Widow	2	2.8
Age group		
15-20	25	34.7
21-25	27	37.5
26-30	12	16.7
31-35	8	11.1
Visual Status		
Blind	61	84.7
Low vision	11	13.6

Note that: Those who are in above are selected but the other features if you like see it you can find in the Appendix.

One can see from the table above that almost all participants are literate and only few of the participants are illiterate. From the literate participants, majority of participants have completed their secondary education, followed by diploma holders (25.0%), and primary education (20.8%). Only few of the participants are first degree holders.

Table 1 above furthers displays the marital status of participants where majority of the participants are unmarried. The remaining participants are either married, divorced or widowed.

Regarding the age category most of participant's age range between 21-25. Of all the participants negligible (11.1%) are in the age categories between ages 31-35.

As far as participants parental and living conditions is concerned, majority of the participants (47.2%) reported that both of their parents are alive, followed by those who replied only one parent is alive (20.8%), divorced (16.7%), and both parents are not alive (15.3%). Among the respondents (40.3%) indicated that they live by themselves,(16.7%) live with their mothers, and the other (12.5%) live with their friends and some of them live with their husbands.

4.2. Characteristics of Participant Charity Organizations of the Study

Two organizations were participatory in the present study. The profile of these organizations stressing on the adequacy of their support as viewed by the participants and the type of support offering to the participants is presented in the table below.

Table 2: **Charity Organizations Supporting Participants of the Current Study**

Item	Frequency	Percent
Name of organization		
Ethiopia National Association for the Blind	48	66.7
Together Ethiopia	24	33.3

Table 2 above shows that majority of the participants are from Ethiopian National Association for the blind and followed by Together Ethiopia. Evaluating the adequacy of support participant getting from the organizations, almost all participants (87.5%) believed that the type of support they received so far from the organizations is inadequate. On the other hand, participants reported on the type of support they received from the organizations. As it can be seen from Appendix Table 2, majority of the participants (40.3%) have received either computer or life skill training. Beside this, of the total participants it is found that, (13.9%) received training and financial support for accommodation and (15.3%) got pairs of support that includes training, money for accommodation also transportation payment and the remaining twenty two (30.5%) received either learning materials, accommodation fee, or library services cumulatively.

4.3. Type, Incidence and Perpetrators of Sexual Harassment as Reported by the Participants

The major purpose of this study was to investigate the incidence, causes and consequences of sexual harassment against women with visual impairment. Hence, the findings pertinent to this purpose are analyzed below. First the incidence as reported by the participants is analyzed followed by the perpetrators, causes, type and consequences consequently.

4.3.1. Incidence of Sexual Harassment

To determine the proportion of sexual harassment against women with visual impairment and the extent to which they have encountered such an experience, participants were asked questions to get an answer to this objective. The finding is described below.

Table 3: Participants View about Sexual Harassment and Incidence

Item	Frequency		Percent	
	Yes	No	Yes	No
Do you think blind women are sexually harassed?	61	11	84.7	15.3
Have you ever faced sexual harassment?	49	23	68.1	31.9

As it is evident from Table 3 above, sixty one participants (84.7%) believed that women with visual impairment are subject to sexual harassment. Only few replied that they don't think blind women are sexually harassed. As far as the personal incidence on the issue is concerned, (68.1%) replied that they faced sexual harassment.

One of the questions that key informants were asked to reply about their belief on the vulnerability of visually impaired women to sexual harassment as compared to the non-blind ones. Results reveal that the key informants unanimously agreed that visually impaired women are most susceptible to different kinds of sexual harassment. Participants further indicated that even they can present sample of victims in their respective organizations. In line with this, one of the informants said the following:

Women particularly those with disability are more vulnerable to sexual harassment than women in the general population.

Treating the issues in a different manner and addressing how the matter is being addressed in one of the supporting organizations, one of the key informants well described the vulnerability of women with visual impairment as follows:

Like any other women in our society, visually impaired women face sexual harassment; however, blind women need day to day support from other people and this makes them more vulnerable to sexual harassment because they are taken advantage of their impairment. Besides, our society

has little knowledge on the sexual harassment incidences on visually impaired women. The purpose of our organization is to provide all kinds of supports to the victims of sexual harassment women in general and to visually impaired women in particular

Participants were also asked to evaluate the level of harassment on women with visual impaired. All informants replied that the cases of sexual harassment against women are increasing. In line with this one of the informants blatantly said:

I believe the magnitude of sexual harassment concerns me a lot.

4.3.2. Perpetrators of Sexual Harassment

In the table below, the actors of sexual harassment against women with visual impairment is given.

Table 4: Perpetrators of Sexual Harassment on Blind Women

Perpetrator	Frequency	Percent
Who was the perpetrator of sexual harassment?		
Boyfriend	2	3.5
Neighbour	15	26.3
Student	7	12.3
Relatives	17	29.8
Stranger	11	19.3
Co-worker	2	3.5

Table 4 above contains who performed the act and also the participant's was choice more than one perpetrator. As it can be observed from table 4, the perpetrators compromise from different sections of the society. More specifically, the findings revealed that relatives comprise (29.8%), followed by neighbors (26.3%). And the other groups of perpetrators are found to be strangers, students, boyfriend, and co-workers comprising respectively.

4.3.3. Type of sexual Harassment

Table 5: Categories of Sexual Harassment perpetrated on blind women

Item	Never		Sometimes		Often	
	F	%	F	%	F	%
Told you offensive dirty stories or jokes?	25	48.1	11	21.2	16	30.8
Said crude or gross sexual things to you?	27	51.9	16	30.8	9	17.4
Said offensive things about your body, or your sex life?	32	61.5	13	25.0	7	13.4
Tried to have a romantic or sexual relationship though you tried to let him know you didn't want to?	10	19.2	6	11.5	36	69.2
Kept asking you to meet or go on a date even after you said "no"?	9	17.3	6	11.5	37	71.1
Made dirty remarks about women in general (for example saying that all women are whores)?	8	15.4	9	17.3	35	67.3
Has been rating or commenting on your attractiveness or appearance in public	27	51.9	12	23.1	12	23.1
Sent messages referring to your body, sex life, Or intimate subjects (for example asking if you are on your period right now)	41	78.8	10	19.3	1	1.9
Bribed you conduct sexual acts (for example offering to give you money if you sleep with him)	8	15.4	12	23.1	32	61.6
Has been giving you inappropriate gifts e.g. female under wear?	8	15.4	12	23.1	32	61.6
Tried to get you to talk about personal or sexual things?	23	44.2	12	23.1	17	32.6
Attempted to kiss you or forced you to kiss?	13	25.0	12	23.1	27	52.0
Forces you to engage in sexual conversation?	19	36.5	14	26.9	19	36.5
Touched or grabbed you that were sexually	12	23.1	16	30.8	14	26.9
Has made attempts to rape you?	31	59.6	17	31.7	4	7.7

Table5. In this section the researcher plants the type and frequency of harassment among the participant out of 52 replied that they have experienced sexually harassment. Again the researcher tried to categorize the types into three; verbal, forceful and abduction.

As the above table shows, those who experienced verbal type contains more than half of the participants experienced (67.3%) made dirty remarks about women in general by the perpetrators. As indicted the above, those who experienced forceful type contain majority of the participants characterized by bribed to conduct sexual acts by the perpetrators, consequently,

more than two- third of participants are vulnerable to be touched or grabbed and attempted to kiss them by the perpetrators at least once. On the third category, abduction type (31.7%) of the participants has been victimized by offenders. Form qualitative data the key informant indicated that about type of sexual harassment report there is no specific reported case of sexual harassment, but even here inside the compound of our organization there were some incidences of sexual harassments that some people try to hide inside our toilets and try to commit sexual harassments in the toilets. Besides, there were also sexual harassment incidences on visually impaired male individuals.

4.3.4. Causes of Sexual Harassment

For any action people venture there are factors associated with it. As part of the current study, participants were asked about the possible causes for sexually harassment. And their responses are summarized in the following table.

Table 6: Participants response on the possible causes of sexual harassment on blind women

Item	Frequency	Percent
Due to lack of sexual education in victim	1	2.0
Perpetrator tried to take advantage of blindness	23	46.9
Due to trust in perpetrator	17	34.5
Due to dependence in perpetrator	8	16.3

From the findings, the reasons of harassment, the majority of the respondents argued that perpetrators take advantage of their impairment. The second highest list cause was trust them as good friends. Besides, except one individual who believed that lack of sexual education, other women reported that their dependence on perpetrators exposes them for sexual harassment.

The critical question that should be raised related to the vulnerability of women with visual impairment is “what are the possible causes that make these people vulnerable to sexual harassment?” To get an answer, key informants were asked to reflect on it. From their responses, a number of factors were identified. However, for the purpose of organization the results were analyzed thematically. These causes for sexual harassment of women with visual impairment are

assistance related perception towards women with visual impairment and perpetrators want to take advantage of the impairment. According to the participants' response, perpetrators of the harassment conduct their bad intention in the name of "assistance" to the visually impaired women. It is obvious that visually impaired people want the support of non-blind ones. There are many factors that lead to sexual harassment and the usually observed factor could be perpetrators might tell the blind woman reasons such as; I will accompany you to your home or I will show you the direction or place you want to visit...etc. and also usually people have false perception that they try to touch the visually impaired women on sexually sensitive areas of their body as if they do not have feeling because they do not see them when they touch them. The following verbatim that could substantiate the finding.

There are many men who approach visually impaired as a friend and as helpers, then they lead them to unwanted places and harass them sexually.

Besides assistance related factors the key informants also mentioned some factors related to the perception or attitude of perpetrators towards visual impairment. According to these informants, the perception that perpetrators hold regarding women with visual impairment could be related to health, confidence that they will not be noticed, and assuming women with visual impairment are not wanted for sexual relationships. In this case, one of the key informants stated that as follows:

They assume that disabled women are free from every disease including STDs and they want to use them for sex but they do not want to marry them or live with them together.

Similarly the other informant said that:

..... The other view on visually impaired women is that they are considered as free from STDs (e.g. HIV) and people try to take that as an advantage and sexually harass them.

Addressing the matter more comprehensively and intelligibly in describing the perception of perpetrators and their actions, the other informant replied as follows:

They assume that disabled women are clean and virgin. They try to tell them that they are doing this (the sexual harassment) because they want

to get blessing from god and they assume disabled women know nothing about life.

As far as the third category is concerned (i.e., taking advantage of the impairment), key informants tried to touch up on different issues. One of the informants stated that:

.....they are vulnerable due to their weaknesses. For example, if the visually impaired woman has economic problem or needs in her academic process, someone can take advantage of this weakness and try to approach the woman as supporter and end up as perpetrator.

4.3.5. Consequences of Sexual Harassment

In this table below, the impact of sexual harassment of against women with visual impaired is given.

Table 7: Consequences of sexual harassment reported by participants

Consequence	Frequency		Percent	
	Yes	No	Yes	No
Physiological				
Ulcer in the genitalia	5	44	10.2	89.8
Often Have Headache	22	27	44.9	55.1
Poor appetite	10	39	20.4	79.6
Bad sleep	24	25	48.9	51.0
Psychological				
Easily Frightened	29	20	59.2	40.8
Feel unhappy	29	20	59.2	40.8
Get angry very quickly	38	11	77.6	22.4
Afraid in small matters	32	17	65.3	34.7
Disturbed sleep	38	11	77.6	22.4
Attempt of suicide	33	16	67.3	32.7
Lost in own thoughts	28	21	57.1	42.9
Social				
Dislike talking with others	27	22	55.7	44.9
Forced to leave home/society after the incident	43	6	59.7	8.3
No one want to marry her	7	42	12.2	85.7
Other men have low attitude about her	18	31	36.7	63.3

Note that: Those who are in above are selected but the other features if you like see it you can find in the Appendix.

This section comprises the consequences of sexual harassment which includes the physical and psychological harms and legal reporting issues related to the victims of sexual harassment. As it can be seen from Appendix table7, considering the sexually abused women, more than half of the victims (69.4%) have chosen to remain silent rather than informing to somebody or anybody about their harassment and the rest have informed one or more of the following parties: friends (42%), sister (12.2%), brother (6.1%) and none of the victims reported to their fathers. Only 10 individuals reported to the police after harassment and eight of the perpetrators were penalized either by money or sentenced. Most of the visually impaired survivors including those who sued the perpetrators, have been suffering from not knowing what to do, afraid of parents, public reaction and perpetrator, while those who did not inform the police had the believe that the legal body is not helpful or other related reasons. From the foregoing discussion one can infer that there are a multifaceted and complex factors contributing for the occurrence of sexual harassment against women with visual impairment. However, the informants noted that despite their believe and practical instances of harassment on women with visual impairment most of the cases are not reported to the concerned bodies. There are various reasons why this so. The major challenges why females failed to report are attributed to fear of revenge from the perpetrators, inability to distinguish the perpetrator, and lack of cooperation among some of the community members the victim is living in. the following verbatim could substantiate this finding:

Usually in our society when women are sexually harassed they do not report to the police or other legal institutions. And if we consider the case of blind women, no one assumes that there is a probability of somebody committing sexual harassment on women with visually impairment. As a result, if a visually impaired woman face harassment and report it to the legal institutions no one believes her and they usually do not report their cases and this resulted from the society's degraded perception on women generally and women with impairment in particular.

The physiological consequences of sexual harassment the majority of responded are affected by bad sleep (48.9%) other headache (44.9%) and poor appetite (20.4%) are followed.

The psychological consequences of sexual harassment observed on the respondents are several types in nature and magnitude. The most prevalent psychological symptoms that are reported by more than half of visually impaired women majority of them are quickly angry (77.6%), lack sleep or irregular sleep patterns (77.6%) two-third of them suicide attempt (67.3%) and afraid in

small matters (65.3%). The social consequence most of them have negative thinking (24.5%), feeling of no one marry them (14.3%) and forced to leave home/ society after the incident (12.2%).

One of the objectives of the current study was to explore the consequences of sexual harassment on the victims. In doing so, key informants were asked to report the kind of consequences they know about victims of sexual harassment. Data gleaned from the interview indicates that victims face physical, social and psychological problems due to harassment. The following verbatim is suffice to support this finding

They are very exposed to physical and psychological inflictions. Physically they might get exposed to STDs and other related diseases and the psychological harm is as twice as the physical harm because they could not manage themselves.

In any case, in an attempt to answer the question “Is there any awareness education given to blind women victims of sexual harassment?” one of the interviewee said that:

Of course, yes. We give awareness education to all women inside the organization, but participation is very low. And we do not give this awareness raising education particularly to women with disability instead the education is prepared to the general population of women.

Another interviewee also replied to the same question but in a different manner. That is, the key informant tried to emphasize both on the protection and intervention practices in helping women with visual impairment. The informant said that:

The primary objective of our organization is to protect the incidences of sexual harassment by maximizing the awareness of the overall society and to train women on self-protection and capacity developments. In incidences of sexual harassment the organization supports the victims by providing counselling service, access to legal services, material and other supports

In general, the consequences of sexual harassments observed in the visually impaired women respondents is a grave concern in its type, magnitude and nature of the physiological and psychological symptoms that need urgent response from concerned bodies. However, particularly those individuals that show suicidal thoughts and attempts need automatic treatment plan and therapeutic intervention as soon as possible.

Chapter 5

Discussion

The purpose of this study was to investigate sexual harassment (type, magnitude of the problem and consequence) among women with visual impairment in Addis Ababa. The results of the study are discussed in this chapter and attempts are made to answer the research questions initially raised.

5.1. How common is sexual harassment among women with visual impairment?

The findings of this study showed that 84.7 percent of the women with visual impairment who participated in this study believed that women with visual impairment are vulnerable to sexual harassment. Besides, slightly above two-thirds (that is, 68.1%) of the women have confirmed that they themselves were sexually harassed. Both percentages, which reflect the women's beliefs and actual experience respectively, show that there is a very high incidence rate of sexual harassment among women with visual impairment. Taken together, the findings suggest that the problem of sexual harassment among women with visual impairment is of high magnitude. One can thus say, in response to the research question, that sexual harassment among women with visual impairment is very common even when one considers the proportion of the women who actually have experienced sexual harassment.

Other studies have also reported various levels of incidence of sexual harassment among people with disabilities. According to one study (Sobsey & Doe, 1991), for example, 49 percent of people with disabilities experience 10 or more sexually abusive incidents. Another study which investigated violence against women in Nepal (Saathi, 1997) revealed that nearly half of the respondents (that is, 48%) had faced sexual harassment in public and work places. Both of these studies generally show that sexual harassment is very common among people with disabilities and women in particular. When compared to the percentages of the two studies, the present study has revealed even greater proportion of women with visual impairment who actually went through the experiences of sexual harassment.

In terms of age, the current study showed that there is actually age difference in terms of vulnerability. That is, among those who are aged between 21 and 25 were more harassed than other age groups. However, compared to other study in Nepal the age group 15-19 is found the most likely victims of sexual abuse (Deuba & Rana, 2001). Moreover, a difference was observed in terms of living status. Findings from the current study indicated that those who were harassed for factors living with their single parents and who were living alone were more prone than blind women who were living with both parents.

Present study suggests that two-third of women are unmarried because of that single women are targets on sexual harassment. It is hard for blind women to get married because of that if they are harshly abused they force to keep silent as they don't want to ruin their chance of marriage. On

the same thing past study survey conducted by Nepal Against Blind among 300 blind women from both rural and urban areas found that more than 64% blind girls and women were unmarried(NAB, 2004).

The current study further showed that most of the participants 37.5percent of them completed their secondary education and only few participants have received their first degree. Of course, education is not only mean knowledge but also a step towards self-dependence. It makes them empower and gain confidence as well as dignity to lead a normal life. However, past study reported that 56% of the rape victims were illiterate. Based on their findings they concluded that since education empowers a person the individual become less vulnerable to sexual violence (Deuba and Rana, 2001).

5.2. What are the common forms of sexual harassment that women with visual impairment encounter?

The current study shows that there are different kinds (types) of harassment. These were, among others; physical assault, inappropriate language use, and abduction. Approximately majority of blind women experienced verbal and forceful 84% and 84.6% experienced in sexual harassment respectively. In addition to this finding, a key informant stated that most of women with visual impairment face all kinds of sexual harassments; though they do not have studied data in their organization, from what they hear women have experienced rape and other have been forced sexual intercourse. Also there is no specific reported case of sexual harassment, but even inside the compound of their organization there were some incidences of sexual harassments that some people try to hide inside their toilets and try to commit sexual harassments in the toilets. Besides, there were also sexual harassment incidences on visually impaired male individuals. The finding suggest that most of perpetrators approach as friend and as helpers they try to touch visual impaired women on sexually sensitive area of their body, using inappropriate language like sexual joking, talking about private relationship and taking unknown place try to commit rape. Most of the perpetrators believe that visually impaired women know nothing, incapable and they will tell no one if they sexually attack because of that women with visual impaired can be easily face more sexual harassment than the normal women.

In line with this, the findings of Cafo et al. (2014) in their study that assess the sexual violence and associated factors among high school students in Harar Town, Ethiopia discovered that 108 victims, 63.9% reported that offensive sexual language or comments and 22.3% of them said they faced inappropriate touch which confirms the finding of the current study. Also compare to other study 13% faced attempted rape and 33% of have faced unwelcomed touching and another 33% reported verbal harassment (Koenig et al., 2003). As far as the major factors contributing factors for sexual harassment against blind women, it has been found that taking advantage of blindness, negative attitude towards blind women and perceiving that blind women are free not vulnerable to sexually transmitted infections. According to Waddel (2012), justification for abuse is sometimes appropriated on the grounds that people with disabilities are fortunate to

receive such attention or that people with disabilities do not feel pain. Moreover, general stereotyping some perceptions specifically about the sexuality of people with disabilities increase their susceptibility to sexual abuse.

The other purpose of this study was to identify the villains. Findings from the current study revealed that the perpetrators include: strangers, relatives, and friends. To be more specific, the current study indicated that most of women vulnerable to abuse by their relatives than strangers. Comparable to our study it's higher to study conduct USA, Peru and Malaysia perpetrators are known in 78%, 60% and 68% of caste respectively (Hesie, 1992). In line with this, Waddel (2012) argue that while strangers or unrelated members of the community may be abusers, often the perpetrators are parents, carers or teachers, individuals taking advantage of positions of trust, and some are repeat offenders. Individuals may even seek employment in schools or institutions because of the easy access it gives to potential victims. Moreover, even children with disabilities in special schools have admitted to being abusers (Maart and Jelsma, as cited in Waddel, 2012).

Current study show time of the incidence, the respondents reported that indicated that most sexual harassment occurred during the day time 61.2% rather than during the night time 38.8%. However, past study show that 66% of the sexual violence had happen in night time where as 61% of the incident had happened in day time (Deuba and Rana, 2001).

Present study show on reporting the perpetrators' general situation during the sexual harassment, the respondents reported that some of the offenders 24.5% and 8.2% have been intoxicated with substances such as alcohol, chewing Chat and majority of respondents that reported 67.3% of the offenders didn't use substances. However, other past study show that alcohol and substance use involved in Addis Ababa high school study contribute 43% of rape incidents, which show a role of alcohol and substance use in sexual behavior of adolescents which alter responsible sexual decision making (Mulugeta E, Kassaye M, and Berhane Y.1995).

The other purpose of the study was to assess the causes of sexual harassment among blind women. Results show that 46.9% of the participants replied that perpetrators take advantage of their impairment because of need in their academic process, in their mobility and in most cases are poverty and hence they are easily vulnerable to violence. Consistent with the present study, past study suggested that two-third of women feel that they were sexually abused due to their blindness (Neetiaryal, 2004). The perpetrator took advantage of their dependency and helplessness of being blind (Neetiaryal, 2004). This cause was given mostly by the blind women who were sexually abused by sighted perpetrators.

5.3. What are the immediate and long term (physical, social and psychological) consequences of sexual harassment among women with visual impairment?

Obviously, sexual harassment carries a number of dire consequences upon the victim. In fact, the damaging physiological, psychological and social consequences of abuse may stay with victims for years, whether they are children or adults, male or female. From the current study different sexual violence consequences were reported by victims. These were: physiological, psychological, social and physical in nature. As results reveal, physiological consequences of sexual harassment of survivors include pregnancy 4.1%, ulcer in the genitalia 10.2%, Swelling around the genitalia 4.1%, and related infections 18.4%. In line with this, other studies show sexual violence victims had history of abortion, vaginal discharge, genital trauma as a result of forced sexual intercourse and approximately one out of every seven victims of sexual violence had unwanted pregnancy (Masha, 2005).

With particular focus on the psychological consequences of sexual harassment, previous findings indicated that high rates of depression, anxiety disorders (especially PTSD), protracted disabling sleep disorders, phobias and panic disorder, psychosomatic disorders, and suicidal behavior and self-harm are common among victims of sexual harassment (WHO, 2005; Jordan et al., 2010). Also social consequences of sexual harassment most of women feel negative thinking 24.5% and feeling of not being able to marry them 14.3%. The effect of sexual harassment upon blind women was seen profound. According to Waddell (2012), in the immediate aftermath a victim is likely to endure pain from injuries such as tearing of genital tissues or pelvic dislocation. It is widely believed that victims may then carry longer term physical and mental consequences such as pregnancy, sexually transmitted disease including HIV, genitourinary dysfunction and depression.

However, despite the fatal consequences of sexual harassment against women, most of them didn't like to go out social activities or communicating with other people. Form key informant stated that visually impaired women do not report incidences of sexual harassment because they assume that if they report their cases no one will believe them. Furthermore, culture has also big influence on matters related to sexual harassment on women and the society's lower perception of women and women with visual impairment is also additional influence for not reporting incidences of harassment on women.

In present study show that sexually harassed women, more than half of the victims 69.4% have chosen to remain silent rather than informing to somebody or anybody about their harassment. Most of the visually impaired survivors including those who sued the perpetrators, have been suffering from not knowing what to do, afraid of parents, public reaction and perpetrator, while those who did not inform the police had the belief that the legal body is not helpful or other related reasons. comparable to our study a bit lower 42.1% of the incidents, victims did not report the incident because they were not sure a crime or harm was attended, and in 30% of the

incidents, victims believed the police would not think the incident was serious enough (Fisher, Daigle, Cullen, & Turner, 2003).

Form in-depth information key informant stated that usually in our society when women are sexually harassed they do not report to the courts or other legal institutions. And if we consider to the case of blind women, no one assumes that there is a probability of somebody commit sexual harassment on women with visually impairment. As a result, if a visually impaired woman face harassment and report it to the legal institutions no one believes her and they usually do not report their cases and this is resulted from the society's degraded perception generally on women and in particular women with impairment. Of course, victims sometimes suffer long-term social consequences because of the moral judgments made about them within their communities. A girl who has been a victim of rape may never be considered acceptable to marry and women victims may be blamed not only for the attack but for the moral failing of the community (Maxwell, Belser & David, as cited in Waddel, 2012) or they may simply be rejected by the community.

As one can observe from the discussion above related to consequences of sexual harassment against women with visual impairment, victims are subject to different forms of consequences that affect their lives negatively. Hence, it would be unfair to leave treating the hazards only. Consequently, the researcher attempted to explore the kind of support that charity organizations provide to women with visual impairment as a preventive or interventions. From the interview sessions with the key informants it was generally grasped that the charity organization are engaged both in preventing the occurrence of sexual harassment and provision of psychosocial support when the problem happens. In fact, the key informant clearly indicated that a lot is remained in creating awareness among the society as well as the visually impaired women who are getting every available support from the charity organizations.

Chapter 6

Summary and Conclusion

6.1. Summary

The primary objective of this study was to uncover the type, magnitude and consequences of sexual harassment among women with visual impairment in Addis Ababa. To this effect, a random sample of 72 women with visual impairment and a purposive sample of eight key informants provided quantitative and qualitative data through questionnaire and in-depth interview respectively.

The research result show that blind women are at a high risk of sexual harassment. It revealed that 84.7 percent of the women with visual impaired were of the view that blind women are vulnerable to sexual harassment. In addition, 68.1 percent of the women with visual impairment clearly indicated that they themselves have encountered sexual harassment at least once in their life. This shows that the problem of sexual harassment among women with visual impairment is large and of concern.

Analyzing the type of sexual harassment the women faced, the findings show that 84 percent had faced verbal harassment, 84.4 percent had faced forceful harassment and 40.4 percent had faced abduction. On the other hand, the major cause of sexual harassment among blind women is their blindness itself. Similarly, trust and dependence upon the perpetrator and lack of education were found to be major causes of sexual harassment as felt by the blind respondents.

The research identifies the age group of 21-25 as the most vulnerable age group of sexual harassment. But all age group can be equally susceptible to sexual harassment. The findings show that 29 percent of the perpetrators were relatives to the victims. Similarly, 26 percent of the perpetrators were neighbours whereas 19.3 percent were complete strangers. In addition to this finding, a key informant stated that blind women are equally vulnerable to sexual harassment from blind men. The results further indicated that the major consequences of the act were quick anger (77.6%), sleeplessness or irregular sleep patterns (77.6%) and suicide attempt (67.3%). With regard to social consequences, most of the women were forced to leave home/society after the incident and dislike talking with others.

6.2. Conclusion

Based on the findings of the study, one may draw the following conclusion.

Sexual harassment among women with visual impairment is very common directly affecting slightly more than two-thirds of women with visual impairment. Sexual harassment was shown to contribute to health consequences (such as unwanted pregnancy and STDs), psychological disturbances (e.g., irregular sleep patterns, suicidal attempt) and social impacts (e.g., dislike

talking with others). Several factors including taking advantage of their dependency and helplessness and false promise to help them and get them jobs contributed to the sexual harassment. Also poor law enforcement was shown to contribute to the problem.

6.3. Recommendations

The research shows that sexual harassment against blind women can't be ignored anymore. Based on these findings, the following recommendations are provided.

- Concerned organizations working in field of blindness and violence Against Women should work together. They should provide financial and mental support to the victims. Victims should be provided trainings and should be helped to be financially independent. These organizations should also provide legal support to punish the perpetrator.
- Organization and associations such as family service and counselling centers, community legal service could be instrument in providing much needed support and services to individuals who experience sexual harassment, especially if person are reluctant or afraid to report incident, or uncertain and confused about what to do.
- The government can lead the way by implementing policies and program that define the problem and enforce clear guidelines on preventative and remedial measures.

References

- Acierno R et al. (1999). Risk factors for rape, physical assault, and post-traumatic stress disorder in women: examination of differential multivariate relationships. *Journal of Anxiety Disorders*.
- Boland , Mary L. 2005. *Sexual harassment in the workplace*. USA: Sphinx Publishing.
- Brown, H. (2000). Safeguarding adults and children with disabilities against abuse. Strasbourg: Council of Europe Publishing.
- Brown, H. (2002). Vulnerability and protection Unit 23 K202 Community Care School of Health and Social Welfare. Milton Keynes, U.K.: Open University
- Brown, H., & Craft, A. (Eds.) (1989). Thinking the “unthinkable”: Papers on sexual abuse and people with learning difficulties. London: FPA
- Chapple B, Chant D, Nolan P, Cardy S, Whiteford H, et al. (2004) Correlates of victimisation amongst people with psychosis. *Social Psychiatry and Psychiatric Epidemiology* 39: 836–840.
- Cleveland, J and K McNamara (1996) ‘Understanding sexual harassment: contributions from research on domestic violence and organizational change’, in M Stockdale (Ed) *Sexual Harassment in the Workplace*. Thousand Oaks: Sage: 217-240.
- Crouch, M. A. (2001). *Thinking about sexual harassment: A guide for the perplexed*. New York: Oxford University Press.
- Crowell, N. A., & Burgess, A. W. (1996). *Understanding violence against women*. Washington, DC: National Academies Press.
- Cooke, P. (2000). Summary of final report on disabled children and abuse. Ann Craft Trust, University of Nottingham
- Deuba Arzu R. and Pinky S. Rana 2001 A Study on the Psycho-Social Impacts of Violence Against Women and Girls with Special Focus on Rape, Incest and Polygamy. Kathmandu, Saathi and SNV Nepal.
- Davis, K. C. (2011). Sexual assault by strangers and nonintimate associates. In T. Bryant- Davis (Ed). *Surviving Sexual Violence: A Guide to Recovery and Empowerment* (pp. 37-47). Rowman & Littlefield: Maryland.
- Fiske, S. T., & Glick, P. (1995). Ambivalence and stereotype cause sexual harassment: A theory with implication for organizational change. *Journal of Social Issues*, 51, 97-116.
- Fitzgerald, L. F., Shullman, S. L., Bailey, N., Richards, M., Swecker, J., Gold, Y., & Weitzman, L. (1988). The incidence and dimensions of sexual harassment in academia and the workplace. *Journal of Vocational Behavior*, 32, 152-175.
- Fitzgerald, L.F., & Ormerod, A. J. (1991). Perceptions of sexual harassment: The influence of gender and context. *Psychology of Women Quarterly*, 15, 281-294.
- Fitzgerald, L.F., Swan, S., & Fischer, K.(1995). Why didn't she just report him? The psychological and legal implications of women's responses to sexual harassment. *Journal of Social Issues*, 51, 117-138.

- Furey, E. (1994). Sexual abuse of adults with mental retardation: Who and where. *Mental Retardation*, 32, 3, p. 173-180.
- Genovich-Richards, J. (1992). A poignant absence: Sexual harassment in the health care literature. *Medical Care Review*, 49(2), 133–159.
- Global forum for health research. Eliminating sexual violence against women: The University of Melbourne, 2000.
- Gutek, B. A., & Koss, M. P. (1996). How women deal with sexual harassment and how organizations respond to reporting. In D. Schrier (Ed.), *Sexual harassment in the workplace and academia*. Washington, DC: American Psychiatric Press.
- Handwerker, W. (1993). Gender power differences between parents and high-risk sexual behaviors by their children. *Journal of Women's Health*, 2, 310-316.
- Heise L, Pitanguy J, Germain A. (1994). *Violence against women: the hidden health*. Washington, DC, World Bank,.
- Heise, L, Kanti, M, & Nahid, T. (1995). *Sexual coercion and women's reproductive health: A focus on research*. New York: Population Council.
- Heise, L, Lori et al. (1994). Violence against women: A neglected public health issue in less developed countries. *Social Science and Medicine*, 39(1), 1165-1179.
- Heise, L, Pitanguy, J., & German, A. (1994). Violence against women: The hidden health burden. *Social Science and Medicine*, 39, 233-245.
- Jewkes R, Abrahams N. The epidemiology of rape and sexual coercion in South Africa: an overview. *Social Science and* (in press).
- Jewkes R. Intimate partner violence: causes and prevention. *Lancet*, 2002, 359:1423–1429.
- Jewkes. R. Overview of sexual Violence against women in South Africa: Paper presented at consultation on sexual violence against women, 18-20 May, 2002.
- Judith, R. V., Linda, R. K., & William, L. H. (1995). Risk factors associated with date rape and sexual assault of adolescent girls. *Journal of Adolescence*, 18, 289-306.
- Jump up ^ "Sexual Harassment: Myths and Realities". Uoregon.edu. Retrieved 2012-10-07.[dead link]
- Jump up ^ "Sexual Harassment: what the law says". Eoc.org.uk. 2010-08-10. Retrieved 2012-10-07.
- Jump up ^ Becklund Philips, Laurie Chuck (November 3, 1991). "Sexual Harassment Claims Confront Music Industry: Bias: Three record companies and a law firm have had to cope with allegations of misconduct by executives". *LA Times*. Retrieved 22 July 2012.
- Jump up ^ Common Effects of Sexual Harassment Archived January 4, 2006 at the Wayback Machine
- Jump up ^ Philips, Chuck (April 18, 1993). ""You've Still Got a Long Way to Go, Baby," April 18". *LA Times*. Retrieved 10 September 2013.
- Jump up ^ Philips, Chuck (March 5, 1992). "'Anita Hill of Music Industry' Talks : * Pop music: Penny Muck, a secretary whose lawsuit against Geffen Records sparked a debate about

- sexual harassment in the music business, speaks out in her first extended interview". LA Times. Retrieved 22 July 2012.
- Kadzamira, E., & Moleni, C. (2007). *The safe school program: A qualitative study to examine school- related gender- based violence in Malawi*. Zomba: CERT University of Malawi and USAID.
- Keilty, J & Connelly, G. (2001). Making a statement: *An exploratory study of barriers facing women with an intellectual disability when making a statement about sexual assault to police*. *Disability & Society*, 16 (2), 273-291.
- Knapp, D. E., Faley, R. H., Ekeberg, W. C., & Dubois, C. H. (1997). Determinants of target responses to sexual harassment: A conceptual framework. *Academy of Management Review*
- Koenig, MA., Ahmed, S., Hossain, MA. et al. *Demography*(2003). Women's Status & domestic violence.
- Malla, Sapana Pradhan 2001 *Sexual Harassment in the workplace in Nepal*. Kathmandu, ILO
- Mulugeta E, Kassaye M, and Berhane Y. Prevalence and outcome of sexual violence among high school students in Addis Ababa and western Showa: *Eth. Me.* 167-173.
- McCann, D. (2005). Conditions of work and employment programme No.2. *Sexual harassment at work: National and international responses*.
- Nurse pleads guilty in rape of patients. (1995, February 5). *New York Times*, p. 25.
- Omorodion, F. I. & Olusanya, O. (1998). The social context of reported rape in Benin City, Nigeria. *African Journal of reproductive health*, 2:37-43.
- Pechkam, S.(2007). The vulnerability and sexual abuse of people with learning disabilities. *British Journal of Learning Disabilities*, 35, 131-137.
- Richard AO. International trafficking in women to the United States: a contemporary manifestation of slavery and organized crime. Washington, DC, Center for the Study of Intelligence, 1999.
- Rouso H: Education for All: A gender and disability perspective. Background paper prepared for the Education for Global Monitoring Report, 2013.
- Saathi and The Asia Foundation 1997 *A Situational Analysis of Violence Against Women and Girls in Nepal*. Kathmandu, Saathi.
- Seblework, T., Ahmed, A. and Negussie, D. (2004) Assessments of sexual coercion among Addis Ababa University female students. Addis Ababa University, Addis Ababa.
- Silva-Bonilla, R., Munoz- Vazquez, M., & Torres- Hernandez, N.I. (2002). violent manifestation against women
- Sobsey, D. & Doe, T. (1991). Patterns of sexual abuse and assault. *Sexuality and Disability*, 9 (3), 243-259.
- Sobsey, R. (1994). *Violence and abuse in the lives of people with disabilities*. Baltimore: Paul H. Brookes.243-259

- Sullivan, P.M. & Knutson, J.F. (1994). The relationship between child abuse and neglect and disabilities: Implications for research and practice. Omaha, NE: Boys Town National Research Hospital.
- The Roeher Institute (1995). Harm's way: The many faces of violence and abuse against persons with disabilities in Canada.
- USAID, Interagency Gender Working Group (LGWG). Gender-Based Violence: Impediment to Reproductive Health. Population Reference Bureau. 2010.
- Young, M. E., Nosek, M. A., Howland, C. A., Chanpong, G., & Rintala, D. H. (1997). Prevalence of abuse of women with physical disabilities. *Archives of Physical Medicine and Rehabilitation*, 78(12) Supplement 5, S34-S38.

Appendix A

Table 1. Summary of Participants Demographic Data

Feature	Frequency	Percent
Resident		
Out	8	11.1
In	64	88.9
Year of stay with charity organization		
New arrival-5	51	70.8
11-15	16	22.2
16-20	1	1.4
Parental status of participants		
Both parents are alive	34	47.2
Only one parent is alive	15	20.8
Both of them are not alive	11	15.3
Divorced	12	16.7
Participants living condition		
Living with both parents	11	15.3
Living with mother	12	16.7
Living with father	1	1.4
Living with relatives	4	5.6
Living with husband	6	8.3
Living alone	29	40.3
Other	9	12.5
Father educational status		
Primary school	10	13.9
Secondary school	11	15.3
Diploma	6	8.3
Degree	2	2.8
Illiterate	43	59.7
Mother educational status		
Primary school	13	18.1
Secondary school	8	11.1
Diploma	3	4.2
Degree	0	0
Illiterate	48	66.7

Table 2: Charity Organizations Supporting Participants of the Current Study

Item	Frequency	Percent
Participants rate on adequacy of support given so far		
Adequate	9	12.5
In adequate	63	87.5
Whether parents of the participants also received support from the organizations		
Yes	16	22.2
No	56	77.8
Types of support given from the organizations		
Training (Computer, life skill)	29	40.3
Accommodation fee	3	4.2
Transportation fee	1	1.4
Library service	3	4.2
Learning materials	2	2.8
Full expenses for all monthly expenses	1	1.4
Full educational fee for my child	1	1.4
Training and financial support for accommodation	10	13.9
Training and transportation fee	6	8.3
Pairs of support but not same as the aforementioned types	11	15.3
Three or more types of support	5	6.9

Table 7: Report the Case, Time of Incident and Consequence

Report to	Frequency	Percent
No one	34	69.4
Friend	21	42.9
Sister	6	12.2
Brother	3	6.1
Mother	2	4.1
Father	0	0
Health profession	4	8.1
Other	0	0
Time incident		
Day	30	41.7
Night	19	26.4
Situation of the perpetrator at the time of incident		
Was drinking	12	24.5
Was using drugs	4	8.2
Playing cards	0	0
Normal condition	33	67.3

Consequence	Frequency		Percent	
	Yes	No	Yes	No
Physiological				
Pregnancy	2	49	4.1	95.9
Abortion	-	49	-	100
Ulcer in genitalia	5	44	10.2	89.8
Swelling around the genitalia	2	47	4.1	95.9
Psychological				
Hate others for what has happened on you	17	32	34.7	65.3
Feel that you are a worthless person	14	35	28.6	71.4
Thought of ending of your life	9	40	18.4	81.6
Thought better to die	5	44	12.2	87.8
Didn't want to talk	14	35	28.6	71.4
Cry very often	19	30	38.7	61.2
Don't want to go outside home	9	40	18.4	81.6
Hate going to social functions	18	31	36.3	63.6
Social				
Neglect of family member	4	45	8.2	91.8
Neglect of friends	4	45	8.2	91.8
Blamed by family for being victimized	1	48	2.0	98.0
No one wants to marry her	7	42	12.2	87.8
Family member don't want to accompany her in public	3	46	6.1	93.9

Appendix B

Addis Ababa University
College of Education and Behavioral Studies
School of Psychology
Clinical Psychology MA program

Sexual Harassment Experiences Questionnaire

The following questions ask about your experiences on the sexual harassment. Some of the questions may seem very personal. We ask them because people are not always treated with respect to women's. Such behaviour can take many different forms. To understand what is happening on the sexual harassment, we have asked some very frank questions. It is important for you to take your time and to answer as honestly as possible. Remember that you can skip any questions that you do not want to answer and that your answers are completely confidential.

Organizations Name _____

Part I: Socio-Demographic Data

1.1. How old are you _____

1.2. Blind/ Low vision

1.3. What is your religion affiliation?

(A). Orthodox (B). Catholic (C). Protestant (D). Muslim (E). No affiliation

(F). Others specify -----

1.4. Where do you live?

(A). In resident (B). Outside resident

1.5. Have you ever married?

(A). Yes (B). No (C) Divorce (D) Widow

If your answer to question 1.5 above is no, go to question 1.7

1.6. Are you presently married?

(A). Yes (B). No

1.7. How long have you been a member of the charity? ____year

1.8. What is your ethnicity?

(A). Amhara (B). Oromo (C). Gurage (D). Tigre (E). Others

1.9. What is your educational status level?

A. Primary school B. Secondary school C. Diploma E. Degree F. illiterate

1.10. Where is your original of residence?

Region ----- District city -----

Q12. Have you ever used substance? Please provide your response by rating your use of substance for the following.

substance	Usually	Sometimes	Rarely	Not at all
Alcohol				
Chat				
Drug like cannabis				
Cigarettes				
Other, please add below and rate				

Part II Family History

2.1. What is the highest educational attainment of your father? -----

2.2. What is the highest educational attainment of your mother? -----

2.3. What is the size of your family ?

Number of brothers ____

Number of sisters ____

2.4. What is your birth order in the family? ____

2.5. Do your father and mother live together?

A. Yes B. no, they are divorced C. Only one of them is alive D. Both of them not alive

2.6. With whom are you living now?

A. with both parents B. with mother only C. with father only D. Relatives
E. with my husband F. I living alone G. Others, please specify -----

2.7. How was your family income supported?

A. Supported by your father only B. Supported by your mother only

C. Supported by both your mother and father D. Supported by your other relatives

E. Other, please specify -----

2.8. How much is your family monthly income in Birr? |_____|

2.9. What kind of support did you get form the organization?-----

2.10. Did the organization support your family too? A. Yes B. No

2.11. Do you think you are getting enough? A. Yes B. No

Part III: Experiences of Sexual Harassment

3.1. Do you think blind women are sexually harassed? A. Yes B. No

3.2. If the answer to the above question is yes, can you tell me how?

3.3. Have you ever experienced in sexual harassment? A. Yes B. No

3.4. Who was the perpetrator?

perpetuator	Yes
A. your husband	
B. your boyfriend	
C. your father	
D. your brother	
E. your brother friend	
F. your mother friend	
G. your sisters friend	

H. your fathers friend	
I. Neighbour's	
J. Teacher	
K. Student	
L. Relatives	
M. stranger	

3.5. The sexual harassment occurred at day time or during night time?

- A. Day B. Night

3.6. The frequently did the harassment occur?

- A. Every day B. Weekly C. Monthly D. Only once E. Other, please specify

3.7. What is the situation of the perpetrator at the time of incident.

- A. Was drinking B. Was using drugs C. was playing cards
D. In normal condition

3.8. In your opinion, what was the cause of sexual harassment?

- A) Due to lack of sexual education in victim
B) Perpetrator tried to take advantage of blindness
C) Due to trust in perpetrator
D) Due to dependence in perpetrator for ()
E) others , please specify-----

Part IV Response to sexual harassment

During the past six months, has anyone harassed you in any of the following ways? If so, how frequently did you experience this?

No	Item	Never	Once or Twice	Sometime	Often	Most of the times
1.	Told you offensive dirty					

	stories or jokes					
2.	Tried to get you to talk about personal or sexual things?					
3.	Said crude or gross sexual things to you?					
4.	Said offense things about how you look your body, or your sex life					
5.	Tried to have a romantic or sexual relationship even though you tried to let him know you didn't want to?					
6.	Kept asking you to meet or go on a date even after you said "no"?					
7.	Made dirty remarks about women in general (for example saying that all women are whores)?					
8.	Someone has been rating or commenting on your attractiveness or appearance in public					
9.	Sent messages that refer to or ask about your body, sex life, or intimate subjects (for example asking if you are on your period right now)					
10.	Bribed you conduct sexual acts (for example offering to give you money if you sleep with him)?					
11.	Someone has been giving you inappropriate gifts e.g. female under wear					
12.	Someone attempted to kiss you or forced you to kiss					
13.	Someone engages you in sexual conversation most					

	the time					
14.	Someone touched or grabbed you that were sexually offensive to you					
15.	Someone has made attempts to rape you					

Part V: Consequence of Sexual Harassment

5.1. With whom did you share your experience after you had sexual harassed?

(More than one more than one answer).

Reported the case to--	Yes	No
A. No one		
B. A friend		
C. Sister		
D. Brother		
E. mother		
F. father		
G. Health Professionals		
H. Other / Specify ---- -----		

5.2. If you encountered sexual harassment, did you report the event to the legal body after the event? A. Yes B. Not reported

5.3. If your answer to the above question is yes, to whom did you report the harassment?

A. To police B. To kebele C. To court

D. Other, please specify -----

5.4. Was there any action taken against the perpetrator? A) Yes B) No

5.5 If your response to question 5.4 is yes, then what was the measure taken?

A. Sentenced B. Financial penalty C. Forced to marry

D. Other, please Specify-----

5.6. If you did not reported the harassment to anybody, why you kept the secret?

Reason	Yes	No
(A)Do not know What to do		
(B) Afraid of parents		
(C) Afraid the public Reaction		
(D)Afraid of the Perpetuator		
(E)Afraid of the Perpetuator		
(F)The legal body is not helpful		
(G) Other, please specify		

5.7. Did you have any of the following problems after the sexual harassment?

	Yes	No
A)Pregnancy		
B)Abortion		
C)Ulcer in the genitalia		
D)Unusual discharge from genitalia		
E)Swelling around the genitalia		
F)Others, please specify		

5.8. Which of the following did you experience after forced sexual harassment in your lifetime?

Problem	Yes	No
1) Often have headaches		
2) Poor appetite		
3) Bad sleep		
4) Easily frightened		
5) Blame yourself for what happened		
6) Hate others for what has happened on you		

7) Feel unhappy		
8) Feel that you are a worthless person		
9) Thought of ending of your life		
10) Thought better to die		
11) Other specify		

5.9. What kind of psychological effect was seen after the sexual harassment?

Psychological consequence	Yes	No
A) Get angry very quickly		
B) Afraid in small matters		
C) Is in tension most of the time		
D) Disturbed sleep		
E) Didn't want to talk		
F) Attempt of suicide		
G) Negative thinking		
H) Revengeful attitude towards the perpetrator		
I) Lost in own thoughts		
J) Cry very often		
K) Don't want to go outside home		
L) Other, please specify		

5.10. What kind of social impacts did you experience after the sexual harassment?

Social Impacts	Yes	No
A) Victim towards Society		
1) Hate going to social functions		
2) Dislike talking with others		
3) Any other		
B) Social Reaction		
1) Neglect of family member		
2) Neglect of friends		
3) Blamed by family for being victimized		
4) Forced to leave home/ society after the incident		
5) No one wants to marry her		
6) Other men have low attitude about her		
7) Family member don't want to accompany her in public		

Appendix C

Key Informant Interviews

Leader of Blind Women

- 1) Do you think that blind women are more vulnerable to sexual harassment?
- 2) Why do you think are blind women being victims of sexually harassment?
- 3) What are the factors that make blind women vulnerable to sexual harassment?
- 4) Why is the issue of sexual harassment against blind women silent?
- 5) What types of sexual harassments that women with visual impairment do usually face?

President of VAW related NGO

1. How do you view the problem of sexual harassment against blind women?
2. What kind of sexual harassment is reported?
3. What are psychological and physiological effects of sexual harassment?
4. Why do you think that victims of sexual harassment mostly abstain from reporting?
5. How your organization does plan to address this problem?

President of NGOs Working in Field of Blindness

1. How your organizations view the problem of sexual harassment against blind women?
2. Do you have any programmes to address this kind of problem?
3. Is there any awareness education given to blind women victims of sexual harassment?
4. What are your organization strategies to solve this problem in future?
5. Did your organization plan to work to the community?

Appendix D

የሚከተሉት ጥያቄዎች በጾታዊ ትንኮሳ ዙሪያ ያለቱን ተሞክሮ የተመለከተ ሲሆን አንዳንድ ጥያቄዎች የግል ጉዳዮችን የተመለከተ ሲሆን ይችላል እነዚህን ጥያቄዎች መጠየቅ ያስፈልገበት ምክንያት ማህበረሰቡ ሴቶችን የሚገባቸውን ክብር እየሰጠ ስላልሆነና የጾታዊ ትንኮሳ አይነትና ብዛቱ የተለያየ በመሆኑ ጉዳዩን ለማሰብና ለመረዳት ነው። ስለሆነም አንዳንድ ጥያቄዎች ባልተለመደ መልኩ በጣም ግልፅ ናቸው። ስለዚህ ጊዜዎችን በመሰዋት ጥያቄዎቹን በተቻለ መጠን በታማኝነት እንዲመለሱ እንጠይቃለን የሚሰጡት መልስ ምስጢሩ የተጠበቀ ሲሆን መመለስ ያልፈለጉትን ጥያቄዎች ማለፍ ይችላሉ።

ክፍል 1.

1.1. እድሜሽ ስንት ነው?-----

1.2. የማየት ሁኔታ?

ሀ/ በከፊል አያለው ለ/ ሙሉ በሙሉ አላይም

1.3. ሀይማኖት?

ሀ. ኦርቶዶክስ ለ. ካቶሊክ ሐ. ፕሮቴስታንት
 መ. ሙስሊም ሠ. ሀይማኖት የለኝም ረ. ሌላ ካለ ይግለፅ -----

1.4. የምትኖረው የት ነው?

ሀ. ከድርጅቱ ውጪ ለ. ድርጅት ውስጥ

1.5. አግብተሽ ታውቂያለሽ?

ሀ. አቃለሁ ለ. አላውቅም
 ሐ. አግብቼ ፈትቻለሁ መ. አግብቼ ባለቤቴ በሞት ተለይቶኛል

የጥያቄ ቁጥር 1.5 መልስ አላውቅም ከሆነ ወደ ጥያቄ ቁጥር 1.8 ይግቡ

1.6. በአሁን ሰዓት ባለትዳር ነሽ?

ሀ.አዎ ለ. አይደለሁም

1.7. በማህበሩ ውስጥ ምን ያህል ጊዜ ቆይተዋል-----ዓመት

1.8. ብሔርሽ ምንድን ነው?

ሀ. አማራ ለ. ኦሮሞ

ሐ.ጉራጌ መ. ትግሪ ሠ. ሌላ ከሆነ ይገለጽ-----

1.9. የትምህርት ደረጃ?

ሀ. አንደኛ ደረጃ

ለ. ሁለተኛ ደረጃ

ሐ. ዲፕሎማ

መ. ዲግሪ

ሠ. ከዛ በላይ ካለ ይግለጹ-----

1.10. የትውልድ አድራሻ

ሀ. ክልል-----

ለ. ከተማ/የገጠር ቀበሌ.....

ክፍል 2. የቤተሰብ ሁኔታ

2.1. የአባት የትምህርት ደረጃ?.....

2.2. የእናት የትምህርት ደረጃ?.....

2.3. የቤተሰብ ብዛት? -----

- የወንድም ብዛት-----

- የእህት ብዛት-----

2.4. በቤተሰብ ውስጥ ስንተኛ ልጅ ነሽ-----

2.5. እናትና አባትሽ አሁን አንድ ላይ ነው የሚኖሩት?

ሀ. አንድ ላይ ናቸው

ለ. ተለያይተዋል

ሐ. አንደኛው ብቻ ነው በህይወት ያለው

መ. ሁለቱም በህይወት የሉም

2.6. ከማን ጋር ነው የምትኖረው?

ሀ. ከሁለቱም ወላጆች ጋር

ለ. ከእናቴ ጋር ብቻ

ሐ. ከአባቴ ጋር ብቻ

መ. ከዘመድ ጋር

ሠ. ከባለቤቴ ጋር

ሸ. ብቻዬን

ቀ. ሌላ ካለ ይጥቀሱልን-----

2.7. ቤተሰብሽን የሚያስተዳድረው ማነው?

ሀ. አባት ብቻ

ለ. እናት ብቻ

ሐ. ሁለቱም ወላጆች

መ. ዘመድ

ሠ. ሌላ ካለ ይገለጹ-----

2.8. የቤተሰብ የወር ገቢ ምን ያህል ነው?-----

2.9. ከድርጅቱ የምታገኘው ጥቅም ምንድን ነው?-----

2.10. የቤተሰብሽ አባል በሙሉ ከድርጅቱ የሚያገኘው ጥቅም አለ?

ሀ. አለ ለ. የለም

2.11. ከድርጅቱ የምታገኘው እርዳታ በቂ ነው ብለሽ ታስቢያለሽ?

ሀ. በቂ ነው ለ. በቂ አይደለም

2.12. ከዚህ በታች ያሉትን ሱስ አስያዥ ንጥረ ነገሮች ተጠቅመው ያውቃሉ? እባኩትን ለምን ያህል ጊዜ እንደተጠቀሙት ይግለጹ

ንጥረ ነገር	አብዛኛውን ጊዜ	አልፍ አልፎ	ትንሽ ትንሽ	በጭራሽ ተጠቅሜ አላውቅም
አልኮል				
ጫት				
ካናቢስ				
ሲጋራ				
ያልተጠቀሰ ካለ ይጥቀሱልን				

ክፍል 3. የጾታ ትንኮሳ

3.1. ማየት የተሳናቸው ሴቶች ጾታዊ ትንኮሳ ይደርስባቸዋል ብለው ያስባሉ?

ሀ. አዎ ለ. አይደርስባቸውም ሐ. ሌላ ካለ ይገለጹ-----

3.2. መልሶት አዎ ከሆነ እንዴት ሊደርስባቸው እንደሚችል ልትገልጧልን ትጅያለሽ?

3.3. ጾታዊ ትንኮሳ ደርሶብሽ ያውቃል?

ሀ. ያውቃል ለ. አያውቅም

የጥያቄ ቁጥር 3.3 መልስ አያውቅም ከሆነ ጥያቄውን ጨርሰሻል

3.4. የጾታ ትንኮሳ የደረሰብኝ ማነው? ከአንድ በላይ መልስ መስጠት ይቻላል።

ተንኳሽ	አዎ
ሀ. ባለቤትሽ	
ለ. ፍቅረኛሽ	
ሐ. አባትሽ	
መ. ወንድምሽ	
ሠ. የወንድምሽ ጓደኛ	
ሠ. የናትሽ ጓደኛ	
ሰ. የእህትሽ ጓደኛ	
ሸ. የባትሽ ጓደኛ	
ቀ. ጎረቤትሽ	
በ. አስተማሪሽ	
ተ. ተማሪ	
ቸ. ዘመድ	
ነ. የማያውቁት ሰው	
ኘ. እንግዳ ሰው	

3.5. ጾታዊ ጥቃት የደረሰብኝ በቀን ነው በማታ ሰዓት?

- ሀ. በቀን ለ. በማታ

3.6. ብዙ ጊዜ በምን ያህልጊዜ ውስጥ ጾታዊ ትንኮሳ ደርሶብኛል?

- ሀ. ሁል ጊዜ ለ. በሳምንት ውስጥ ሐ. በወር ውስጥ

መ. አንዴ ብቻ ሠ. ሌላ ካለ ግለጫ-----

3.7. ጥቃት አድራሹ በወቅቱ የነበረው ሁኔታ?

- ሀ. ጠጥቶ ነበር ለ. እፅ ወስዶ ነበር

ሐ. ቁማር እየተጫወተ ነበር መ. ከማንኛው አነቃቂ ነገር ነፃ ነበር-----

3.8. ባንቺ አስተሳሰብ ጾታዊ ትንኮሳ መነሻው ምንድነው ብለኝ ታስቢያለኝ?

ሀ. የስነ-ተዋልዶ እውቀት ማነስ

ለ. ጥቃት አድራሾች ማየት በተሳናቸው ላይ ለመጠቀም ማሰብ

ሐ. ጥቃት አድራሾች ታማኝ መምሰላቸው

መ. ጥቃት አድራሾች ላይ ጥገኛ መሆን

ክፍል 4. የጾታ ትንኮሳ አጋላጭ መንገዶች

ከዚህ በታች በተገለፁ መንገዶች ውስጥ ባለፉት 6ወራት በስፋት ጾታዊ ትንኮሳ ደርሶብሻል? ደርሶብሽ ከሆነ ምን ያህል ጊዜ?

ቁጥር	ላለፉት 6ወራት ያጋጠመሽ	በጭራሽ	አንዴ ወይም ሁለቱ	አንዳድ ጊዜ	አልፎ አልፎ	ብዙ ጊዜ
1.	የሚያናድድ ጥሩ ያልሆኑ ታሪክ ወይም ቀልዶች ተናግሮታል					
2.	ስለ ግል ጉዳዩ ወይም ወሲባዊ ጉዳዮችን እንድታወራ ተገደሻል					
3.	አፀያፊ ስድቦች ተነግሮሻል					
4.	ስለተክለ ሰውነትሽ ወይም ስለ ወሲብ ህይወትሽ አፀያፊ ቃል ተነግሮሻል					
5.	እንደማትፍልገ እየተናገርሽ የፍቅር ግንኙነት ወይም ወሲባዊ ግንኙነት እንድትጀምራ የገፋፋሽ አለ					
6.	ደጋግሞ እንድትገናኙ (ሻይ ቡና እንድትሉ) የሞከረ አለ እምቢ እያልሽው ጭምር					
7.	ባጠቃላይ ስለ ሴቶች መጥፎ ድምዳሜ የተናገረሽ (ለምሳሌ ሴቶች ሁሉ መጥፎ ናቸው)					
8.	ስለ ውበትሽ ወይም ስለ ተክለሰውነትሽ በሰዎች ፊት ደጋግሞ ይነግሮሻል ወይ					

9.	ስለ ሰውነት ክፍልሽ ወሲብ ህይወትሽ ወይም በተያያዥ ጉዳዮች ላይ እርሱን ለመጠየቅ መልክት ደርሶት ያውቃል ለምሳሌ (አሁን የወር አበባሽ ላይ ነሽ)					
10.	በገንዘብ ሊያታልሉሽ ሞክረው ያውቃሉ ለምሳሌ (ሊረዳሽ መስሎ)					
11.	ያልተገባ ስጦታዎች ተሰጥቶት ያውቃል ለምሳሌ የሴቶች የውስጥ ልብስ					
12.	ሊስምሽ የሞከረ ወይም ያስገደደሽ አለ					
13.	ተደጋግሞ ወሲብ ነክ ወሪዎችን እንድታወራለት የገፋፋሽ አለ					
14.	የወሲብ ስሜት እንዲነሳሱ የሚያደርጉ የሰውነት ክፍልሽን የነካ ወይም የያዘ አለ					
15.	ሊደፍሮት የሞከረ አለ					

ክፍል 5. የታዊ ትንኮሳ የሚያመጣው ጉዳት

5.1. የታዊ ትንኮሳ ሲደርስቦት ለማን ተናገሩ (ከአንድ በላይ መመለስ ይቻላል)

ጉዳዩን የተናገርኩት	አዎ	አይ
ሀ. ለማንም		
ለ. ለንጹህ		
ሐ. ለእህት		
መ. ለወንድም		
ሠ. ለናት		
ሰ. ለአባት		
ሸ. ለጤና ባለሙያ		
ቀ. ያልተጠቀሱ ካለ ይጥቀሱልን		

5.2. የታዊ ትንኮሳ ከደረሰብኸኝ በሁዋላ ጉዳዩን በወቅቱ ለህግ አቀረብኸው?

ሀ. አዎ

ለ. አላመለከትኩም

5.3. ከላይ ለተጠየቀው ጥያቄ አዎ ከሆነ ሁኔታውን ለየትኛው የህግ ክፍል አመለከትኸ?

ሀ. ለፖሊስ

ለ. ለቀበሌ

ሐ. ለፍርድ ቤት

መ. ሌላ ካለ ይጥቀሱ-----

5.4. ጥቃት አድራሹ ላይ ተገቢውን እርምጃ ተወሰደበት?

ሀ. አዎ

ለ. አልተወሰደበትም

5.5. ከላይ ለተጠየቀው ጥያቄ 5.4. መልስሽ አዎ ከሆነ ምን ዓይነት እርምጃ ተወሰደበት?

ሀ. ማስጠንቀቂያ

ለ. የገንዘብ ቅጣት

ሐ. እንዲያገባዎት ተደረገ

መ. ሌላ ካለ ይጥቀሱልን-----

5.6. የታዊ ትንኮሳውን ለሚመለከተው አካል እንዳያመለክቱ ያደረገሽ ምክንያት ምንድን ነው?

ምክንያት	አዎ	አይ
ሀ. ምን ማረግ እንዳለብኸኝ ስላላወቅኸኝ ነው		
ለ. ቤተሰቦቻችን ፈርተኸኝ ነው		
ሐ. የማህበረሰቡን ምላሽ ፈርተኸኝ		
መ. ጉዳቱን ያደረሰብኸኝ ሰው		

በመፍራት		
ሠ. ወደ ህግ ቦታዎች መሄድ መፍትሄ የለውም		
ሰ. ሌላ ካሉት ይጥቀሱልን		

5.7. ከጾታዊ ትንኮሳ በኋላ ከዚህ በታች ከተዘረዘሩት ያጋጠመሽ አለ?

ችግሮች	አዎ	አላጋጠመኝም
ሀ. እርግዝና		
ለ. ማሰረድ		
ሐ. በማህፀን አካባቢ ህመም መሰማት		
መ. ያልተልመደ ፈሳሽ በማህፀን አካባቢ መፈሰስ		
ሠ. ማህፀን አካባቢ ማበጥ		
ሰ. ሌላ ካለ		

5.8. ከዚህ በታች ከተዘረዘሩት ውስጥ ጾታዊ ትንኮሳ ከደረሰብሽ በኋላ ምን አይነት ችግር ደረሰብሽ?

ችግሮች	አዎ	አይ
1. አልፎ አልፎ እራስሽን ታት		
2. የምግብ ፍላጎት መቀነስ		
3. የእቅልፍ ችግር		
4. በቀላሉ መፍራት		
5. ለተፈጠረው ችግር እራስን መውቀስ		
6. ባንቺ ላይ የተፈጠረውን ችግር ሌሎችን መውቀስ		
7. ደስተኛ አለመሆን		
8. እራስን ጥቅም አልባ አድርጎ ማሰብ		
9. የህይወት መጨረሻ አድርጎ ማሰብ		
10. መሞት እንደሚሻል ማሰብ		
11. ሌላ ካለ ይጥቀሱ		

5.9. ከጾታዊ ትንኮሳ በኋላ ምን አይነት የስነ-ልቦና ችግር ደረሰብሽ?

የስነ-ልቦና ምላሾች	አዎ	አልተፈጠረብኝም
ሀ. ቶሎ ቶሎ መናደድ		

ለ. ትንሽ ነገር መፍራት		
ሐ. የቅልፍ መዛባት		
መ. ማውራት አለመፈለግ		
ሠ. እራስን ለማጥፋት መሞከር		
ሰ. የተዛባ አመለካከት		
ሸ. ጎዳት አድራሹን ለመበቀል ማሰብ		
ቀ. በሀሳብ መዋኘት		
በ. ብዙ ጊዜ ማልቀስ		
ተ. ከቤት አለመውጣት		
ቸ. ሌላ ካለ		

5.10. ከዎታዊ ትንኮሳ በኋላ ምን ዓይነት የማህበረሰብ ጫና ደረሰብሽ

ማህበረሰብ ጫና	አዎ	አይ
ማህበረሰቡ ተጠቂ		
1. ማህበራዊ ጉዳዮች ላይ መሳተፍ መጥላት		
2. ከሌሎች ሰዎች ጋር ማውራት አለመፈለግ		
3. ሌላ ካለ		
የማህበረሰቡ ምላሽ		
1. በቤተሰብ አባላት መገለል		
2. በጓደኛ መገለል		
3. ቤተሰቡ ጥፋተኛ እንደሆኑ አድርጎ ያምናል		
4. ከጥቃቶች በኋላ ቤቱን / አካባቢያውን እንዲለቁ መገደድ		
5. ማንም እንዲያገባው አይፈለግም		
6. በወንዶች ዘንድ የትዳርም ሆነ የጓደኝነት ፍላጎት አለመኖር		
7. የቤተሰብ አባላት ከማህበረሰቡ ጋር እንዲቀላቀሉ አለመፈለግ		

Appendix E

በጾታዊ ትንኮሳ በተመለከተ በቂ መረጃ ያላቸው ባለሙያዎች የተዘጋጀ ጥያቄ

ማየት የተሳናቸው ሴቶች ያመራር አካላት

1. ማየት የተሳናቸው ሴቶች ለጾታዊ ትንኮሳ በይበልጥ ተጠቂናቸው ብለው ያስባሉ?
2. ለምን ይመስሉታል ማየት የተሳናቸው ሴቶች ለጾታዊ ትንኮሳ ተጋላጭ የሆኑት?
3. ማየት የተሳናቸው ሴቶች ለጾታዊ ትንኮሳ ይበልጥ ተጋላጭ እንዲሆኑ የሚያረጋቸው ነገሮች ምን ምን ናቸው?
4. ማየት በተሳናቸው ሴቶች ላይ ሚፈፀመው ጾታዊ ትንኮሳ ጉዳይ ለምን ድብቅ ሆነ?
5. ምን ምን አይነት ትንኮሳዎች ሪፖርት ተደርጎሎት ያውቃል?

በሴቶች ጥቃት ላይ የሚሰራ ድርጅት ሀላፊ

1. የጾታዊ ትንኮሳ ማየት በተሳናቸው ሴቶች ላይ ይፈፀማል ብለው ያምናሉ?
2. ምን ምን አይነት ትንኮሳዎች ሪፖርት ተደርጎሎት ያውቃል?
3. ተጎጂዎችን የሚደርስባቸው የስነ ልቦና እና አካላዊ ጉዳቶች ምን ያህል ነው ብለው ያስባሉ?
4. ተጠቂዎችን ጥቃቱን በግልፅ የማይናገሩት ለምንድን ነው ብለው ያስባሉ?
5. ይህን ችግር በተመለከተ ድርጅታችሁ ምን አቅዷል?

ማየት በተሳናቸው ላይ የሚሰራ የግል ድርጅት ሀላፊ

1. ድርጅታቸው ማየት በተሳናቸው ሴቶች ላይ የሚደርስባቸው ጾታዊ ትንኮሳዎች እንዴት ይመለከታሉ?
2. ድርጅቱ ማየት ለተሳናቸው ሴቶች በጾታዊ ትንኮሳ ዙሪያ የሚስጠው ትምህርት አለ?
3. ይህን ጉዳይ በተመለከተ ድርጅቱ ምን ያህል ተዘጋጅቷል?
4. ይህን ችግር ለማሰገድ ለወደፊቱ ምን አቅደዋል?
5. በዚህ ጉዳይ ላይ ድርጅቱ ከማህበረሰቡ ጋር በመቀናጀት ምን ያህል ሰርቷል?