

# The Vulnerability of Women Refugees to Gender Based Violence (GBV): A Case of Addis Ababa

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**THE VULNERABILITY OF WOMEN REFUGEES TO GENDER BASED VIOLENCE  
(GBV): A CASE OF ADDIS ABABA**

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## **Declaration**

I, Hiba Mohamed, hereby declare that this thesis is my original work. It has not been presented for a degree in any other University, and all the sources of material used for the thesis have been duly acknowledged.

Hiba Mohamed

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**Signature**

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## Acronyms

ARRA	Administration of Refugees and Returnees Affairs
AU	African Union
AUC	African Union Commission
CAT	Convention Against Torture
CEDAW	Convention of Discrimination Against Women
CRRF	Comprehensive Refugee Response Framework
DRC	Danish Refugee Council
(EOC-DICAC)	Ethiopian Orthodox Church Development and Inter-Church Aid Commission
EWLA	Ethiopian Women Lawyers Association
FGD	Focus Group Discussion
FDRE	Federal Democratic Republic of Ethiopia
FGM	Female Genital Mutilation
GBV	Gender Based Violence
GBV-IMS	Gender Based Violence-Information Management System
GoE	Government of Ethiopia
GLR	Great Lakes Region
GVEI	Gender violence Effects Indicators
ICCPR	International Covenant on Civil and Political Rights
ICESCR	International Covenant on Economic, Social, Cultural Rights
ICJ	International Court of Justice
ICU	Intensive Care Unit
IDP	Internally Displaced Persons
IHRL	International Human Rights Law

IOM	International Organization of Migration
IP	Implementing Partner
IPV	Intimate Partner Violence
JRS	Jesuit Refugee Service
MCH	Maternal and Child Health
NGO	Non-Governmental Organization
NRC	Norwegian Refugee Council
PoC	Persons of Concern
ROV	Refugee Outreach Volunteer
RSD	Refugee Status Determination
SGBV	Sexual and Gender Based Violence
SOP	Standard Operating Procedures
OAU	Organization of African Unity
OCP	Out-of-Camp Policy
UDHR	Universal Declaration of Human Rights
UN	United Nations
UNHCR	United Nations High Commissioner for Refugees
ZOA	International relief and recovery Organization

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## Abstract

*Confronted with violence and persecution in their homelands poses direct threats to the personal safety, and wellbeing, of affected populations forcing them to flee in search of safe environments. Amongst these groups of people are women. This study aims to probe the vulnerabilities of women refugees from Yemen, Eritria, Somalia, South Sudan, Great Lakes Region and others to Gender Based Violence (GBV), with specific interest on refugees in urban areas -Addis Ababa. The study focuses on identifying the causes, risk factors and consequences; as well as explore the extent of protection extended by the state and non-state actors in relation to their access to services such as prevention, treatment and remedial actions in Addis Ababa.*

*The overall framework for this study will focus on a human right centered approach as well as on the international and regional conventions on refugee protection. It highlights women refugee's challenges and coping mechanisms in Addis Ababa, and the effects on the realization of their right to dignity, and other rights including right to life, right to health and well-being. To accomplish this, and with the purpose of explaining women vulnerabilities as refugees in a host country, a qualitative approach was adopted by means of in-depth interviews to extract personal stories from women refugees and officials of responsible institutions.*

*Looking at the lives of women refugees in– Addis Ababa, in relation to their rights, safety and security offers useful insights into some of the specific challenges they face. It was found that difficulties encountered include language barriers, in accessibility of government social services as a direct consequence of national authorities not being aware of their mandate to support refugees, and the high cost of living that pushes refugees to the outskirts of the city, which also open another dimension to their vulnerabilities to GBV. The study also found that most survivors would rather choose not to report GBV, due to inaction or unsatisfactory response from authorities to their specific needs/complaints. It is also useful to highlight that despite the number of service providers, the pathway and information on available services is still limited, and little is being done to support victims' access to legal aid.*

# Chapter One:

## Introduction

### 1.1 Background

The traumatic events that refugees face have become a major international concern today. Africa remains one of the most conflict prone areas in the world with human rights violations amongst the highest globally causing millions of people to flee their homes to escape the insecurities, fear of persecution, and violence in search of secure living conditions.<sup>1</sup>

Ethiopia is one of the largest refugees hosting countries in sub-Saharan Africa and has hosted refugees since the 1990's.<sup>2</sup> The geographic proximity and open-door policy have made Ethiopia a preferable destination.<sup>3</sup> Ethiopia's open-door policy creates an attractive incentive to refugees seeking safety and protection from violence, conflict and war. The geographic proximity also features strongly in ensuring they are able to accumulate less travel time. Some of them travel by foot, often through dangerous or risky territories. Today Ethiopia hosts the second largest refugee population with over 916,678 as of March 2018 of which (44.7%) are male and (55.5%) are female from over 26 different nationalities. Addis Ababa on the other hand has the largest concentration of urban refugees in the country. According to United Nations High Commissioner for Refugees (UNHCR) and Norwegian Refugee Council (NRC), the urban refugee population in Addis Ababa is 20,398. The majority originating from (Eritrea 79.1%), with other nationalities as follows, Yemen (8.4%), Somalia (4.4%), Congo (2.5%), South Sudan (2.2%) and other countries which accounts (3.5%).

Although entire displaced communities suffer the consequences, women and girl refugees in particular are the most vulnerable and affected. In the plight of search for secure living conditions, and better livelihood opportunities, many are increasingly moving to live in the city and major towns making them exposed to harsh conditions. Women refugees in Addis Ababa face considerable economic difficulties and have limited access to employment.

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<sup>1</sup> Kandoh. M. M. (2012). Forced Migration: Socio-economic Implications for Hosts Communities in Southern and Northern Ghana. *Oslo University College*, pg. 2

<sup>2</sup> <http://www.un.org/africarenewal/magazine/april-2015/refugees-turn-ethiopia-safety-and-asylum> [Accessed 15 Jan. 2018]

<sup>3</sup> Mena.W. B. (2017). Assessing the local integration of Urban Refugees: A Comparative Study of Eritrean and Somali Refugees in Addis Ababa, *Addis Ababa University*

Depending on the status of individual refugees, the option to live in Addis Ababa is based on certain conditions such as: protection, personal security and health. Movement of refugees to urban areas is increasing for different pull and push factors. Refugees move to cities in the hope of finding a sense of community, safety and economic independence. Nonetheless, women and girls are vulnerable in both refugee camps and in urban settings because of multiple complex unmet social, medical, and economic needs. Life in urban settings on the other hand is crammed with difficulties because of displacement, dislocation to unfamiliar and often overcrowded surroundings, lack of infrastructure and lack of access to basic survival needs.<sup>4</sup>

Women refugees often surrender to direct humanitarian support and find themselves trying to sustain livelihoods in places which already have challenges such as poverty, inadequate infrastructure, over-burdened public services and governance weaknesses. Moreover, humanitarian interventions designed to support refugees in overcoming challenges to sustainable livelihoods in cities are insufficient.<sup>5</sup> This highlights their vulnerability making them victims of gender based violence (GBV). The aim of this paper is therefore to highlight the plight of women refugees in Addis Ababa and their vulnerability to GBV.

According to Article (1) of the UN Declaration on the Elimination of Violence against Women, GBV is defined as an act of violence resulting in physical or mental harm of the victim. GBV as defined by DEVAW as “*any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.*”<sup>6</sup>

GBV is a gross violation of human rights and violates the right to dignity. The right to dignity is known as a fundamental human right that needs the realization of other rights such as right to life, health, and right to well-being. Given the high numbers of refugees in Ethiopia and Addis Ababa, the question that arises is what actions are being taken to address GBV related cases, and safety concerns in line with international refugee conventions. Also, the challenges and coping mechanisms available for addressing the issues will be explored as it impacts the daily living of female refugees in Addis Ababa.

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<sup>4</sup> Ali.S.(2014). The Challenges of Social and urban Livelihood for Refugee Women: A Case Study of Social Integration Process of Urban Refugee Women from the Great Lakes Region, Addis Ababa University School of Social Work, 27

<sup>5</sup> Brown.A. Mackie.P. Dickenson.K. and Gebre-Egziabher.T. (2018). Urban refugee economies: Addis Ababa, Ethiopia, IIED

<sup>6</sup> UN General Assembly, 1993, Declaration on the Elimination of Violence Against Women, (DEVAW), Art. 1

Moreover, few studies focus on the human rights violations of women refugees and their vulnerability to GBV, in particular their experience in Addis Ababa. One study by a scholar Sinenhlanhla (2014) in South Park area of South Africa, considers how urban refugees interact with the social structures set up by the state to support them in their challenges especially how they deal with GBV.<sup>7</sup>

A major constraint to this research was the researchers' nationality and origin from Northern Sudan, Khartoum when it came to obtaining information from the South Sudanese. Given the history of violence in Sudan, which has divided the country on the lines of North and South, accessing information from the refugees who are from Southern Sudan was quite difficult. The support of an assistant was utilized in this case.

## 1.2 Statement of the Problem

As violence and persecution in the Horn of Africa and the Great Lakes Region (GLR) persists, refugees are increasingly crossing borders to Ethiopia, thus making the situation in the camps inadequate for several refugees.<sup>8</sup> Despite the challenging work from the humanitarian workers, safety concerns for women and girls in particular often fall short.<sup>9</sup> GBV today has emerged as a widespread problem among women refugees and is acknowledged as a gross violation of human rights and public health issue worldwide.<sup>10</sup>

Although, GBV cannot be ascribed to a single cause but to a various set of dynamics, little is known about how vulnerable women refugees are to GBV or about their coping strategies and how they negotiate their way in an urban environment. According to Sinenhlanhla, refugee women have less human agency when they newly arrive at a destination country.<sup>11</sup> Many experience cultural and linguistic barriers in their effort to maintain sustainable social integration and establish better livelihoods during their stay as refugees in destination country.<sup>12</sup> Protection from GBV is a basic human right, in this case the preservation of human dignity.<sup>13</sup> GBV violates

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<sup>7</sup> Sinenhlanhla. M. (2014). Vulnerabilities of African Female Refugees in South Africa: A Case Study of Albert Park Area School of Agriculture. Earth and Environmental Sciences

<sup>8</sup> *Supra note 4*, pg. 2

<sup>9</sup> Hassan. W. (2017). Beyond Vulnerability: Refugee Women's Leadership in Jordan. CUNY Academic Works.

<sup>10</sup> *Supra note 7*, pg. 3

<sup>11</sup> *Supra note 7*, pg. 3

<sup>12</sup> *Supra note 4*, pg. 2

<sup>13</sup> Mwangi. C. W. (2012). Women refugees and sexual violence in Kakuma Camp, Kenya. *Human Rights Development and Social Justice*, pg. 1

various international human rights instruments that place responsibility on host governments and other players to protect the human rights of women refugees.<sup>14</sup>

Previous studies by (Mwangi, 2012; Gladden, 2012; MacTavish, 2016), make it hard to grasp the global landscape of female's vulnerability to GBV in urban areas. The study paid more attention on the integration of refugees within host communities. And considering that women are vulnerable to GBV in the camps, the study focused on analyzing the experiences and challenges of refugee women in refugee camps whereas urban refugee women's' experiences are in fact complex and varied and are usually left in vulnerable situations.

This study seeks to identify and fill the gaps in literature where few research has been conducted on the urban women refugees by looking into the lives of refugee women in Addis Ababa as they share their experiences. As stated earlier, 20,398 refugees are living in Addis Ababa based on the guidelines provided by ARRA and UNHCR in determining the status of individual refugees, which is designed to facilitate living/or resettling in Addis Ababa. It is currently applicable to refugees for reasons such as: personal security and protection, health factors, and education or Out of Camp Policy. It considers the livelihoods of refugee women in Addis Ababa and their vulnerability to Gender Based Violence (GBV). Reflection of the livelihood conditions available to refugee women, enabled the researcher to adopt a human right approach, i.e. the preservation of human dignity, in considering issues of concern of GBV as prioritized issues experienced by women refugees in Addis Ababa. It will examine coping mechanisms, prevention and remedial actions and the consequences of GBV. Understanding the nuances and complexities of urban risks is also essential to addressing GBV and bridging the protection gaps.

This research therefore intends to fill out the gaps in literature that focus on camps and integration of refugees in host communities by focusing on the vulnerability of women refugees to GBV in Addis Ababa and why their safety concerns fall short. Moreover, as this research topic is a complex and sensitive issue to engage with. The study notes with concern how for fear of reprisal attacks, victims choose to remain silent. This contributes to underreporting of GBV, minimal justice for victim's thereby emboldening perpetrator. A direct consequence is limited

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<sup>14</sup> Gebreyosus, Y. (2013). Gender-Based Violence against Female Refugees in Refugee Camps in Case of Mai Ayni Refugee Camp, Northern Ethiopia. *Addis Ababa University Center for Human rights*.

enjoyment by women of their fundamental human rights and affects their right to dignity, the right to life, the right to health and well-being

### 1.3 Research Questions

Based on the background provided above, the research seeks to answer the following questions:

- 1) Are women refugees in Addis Ababa vulnerable to Gender Based Violence (GBV)?
- 2) Are refugee women more vulnerable than other women?
- 3) What are the modalities for prevention and monitoring in keeping women refugees safe in Addis Ababa?
- 4) What are the experiences of women refugees in Addis Ababa?
- 5) What has been done by governmental and non-governmental actors to deal with GBV?

### 1.4 Operational Definitions

In order to provide an understanding of the vulnerability of women to GBV in Addis Ababa, it is necessary to provide definitions of terms provide an understanding and good basis of the research agenda.

**Refugee:** According to the United Nations 1951 convention Article (1), the term refugee shall apply to any person who: “... owing to well- founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it”.<sup>15</sup>

**Asylum seeker:** An asylum seeker is someone who has applied for asylum and is waiting for a decision as to whether or not they are a refugee.<sup>16</sup>

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<sup>15</sup>The Geneva Convention Relating to the Status of Refugees 1951

<sup>16</sup> UNHCR, <http://www.unhcr.org/asylum-in-the-uk.html> (Accessed 9 May 2018)



**Illegal Immigrant (Irregular migration):** *Movement that takes place outside the regulatory norms of the sending, transit and receiving countries. From the perspective of the sending country, the irregularity is seen in cases in which a person crosses an international boundary without a valid passport or travel document or does not fulfil the administrative requirements for leaving the country. There is, however, a tendency to restrict the use of the term "illegal migration" to cases of smuggling of migrants and trafficking in persons.*<sup>17</sup>

**Forced migration:** *A migratory movement in which an element of coercion exists, including threats to life and livelihood, whether arising from natural or man-made causes (e.g. movements of refugees and internally displaced persons as well as people displaced by natural or environmental disasters, chemical or nuclear disasters, famine, or development projects).*<sup>18</sup>

**Internally Displaced Persons (IDPs):** The UNCHR defines IDPs as “*persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of or in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognized state border*”.<sup>19</sup>

**Gender Based Violence (GBV):** *Violence directed specifically against a woman because she is a woman or affects women disproportionately. It includes, but is not limited to, physical, sexual, and psychological harm.*<sup>20</sup>

**Urban Refugee:** *An urban refugee is a refugee who decided or is obliged to settle in an urban area rather than in a refugee camp in the country or territory where the person fled to.*<sup>21</sup>

**Assistance:** *Provisions of basic needs such as legal, economic and political protection for refugees in the host country without any return or payment from refugees.*<sup>22</sup>

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<sup>17</sup> IOM. (2018). Key Migration Terms. <https://www.iom.int/key-migration-terms> (Accessed 9 May 2018)

<sup>18</sup> Ibid

<sup>19</sup> UNHCR. (2018). Emergency Handbook. IDP Definition. <https://emergency.unhcr.org/entry/67716/idp-definition> (Accessed 9 April 2018)

<sup>20</sup> *Supra note 6, p.2*

<sup>21</sup> UNHCR. (2018). Urban Refugees. <http://www.unhcr.org/urban-refugees.html> (Accessed 9 April 2018)

<sup>22</sup> Beyene.S.T. (2016). Challenges Faced by Social Workers in Refugee Program: The Case of Urban Refugees in Addis Ababa, Ethiopia, ST. Mary's University

**Implementing Partner (IP):** *Agencies receiving financial and logistical support from UNHCR or other donors and delivering services for refugee communities.*<sup>23</sup>

## 1.5 Objectives of the study

### 1.5.1 General Objective

The general objective of this study is to examine the vulnerability of women refugees to GBV in Addis Ababa. It will explore the services rendered to them such as safety; prevention, treatment and remedy and challenges and concerns these women encounter.

### 1.5.2 Specific Objectives

More specifically, the objectives of the research are:

1. To examine the vulnerability to GBV of women refugees in Addis Ababa.
2. To identify the causes, risk factors and consequences of GBV against women refugees in Addis Ababa.
3. To explore the extent of protection extended by the state and non-state actors to women refugees and their access to services such as prevention, treatment and remedy in Addis Ababa.

## 1.6 Methodology and Data Collection Tools

The purpose of this study is to understand the vulnerability of refugee women to GBV in Addis Ababa. This section therefore details the method of research used during the study. In order to obtain substantial information related to features of the research problem, as it involves a human rights issue based on the vulnerability of women refugees to GBV, their challenges and coping mechanisms, a qualitative approach was used.

The research adopted a qualitative methodology approach, aimed at revealing some of the existing concepts and highlighted some of the emerging trends, on a topic that is not only sensitive but also stems from societal constructs such as gender roles and gender relations. Qualitative research is conducting a study in a natural setting and studying a substantive area of

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<sup>23</sup> Ibid

where little is known in order to describe phenomena in detail and to explore topics that are difficult to study by other means.<sup>24</sup>The reason for selecting this approach was because the voice of the survivors, women, was an essential aspect of the phenomenon under study. This approach also supported with defining the problem, and to delve deeper into the issue through analyzing the law and identifying whether women refugees are being protected in Addis Ababa.

### **1.6.1 Research Design**

The research assessed the vulnerability of women refugees to GBV, it looked into the challenges and coping mechanisms in Addis Ababa, the effects on the realization of their right to dignity, right to life and right to health and well-being. This was carried out through analyzing the international and national laws. In order to accomplish this, the research utilized qualitative methods with the purpose of explaining the impact of women refugees being vulnerable.

### **1.6.2 Target Population and Sample Size**

This study focused primarily on women refugees residing in Addis Ababa for over one month from the following nationalities; Yemen, Eritrea, Somalia, South Sudan, Sudan, GLR and Burundi. The reason for selecting Addis Ababa is because several refugees leave the camps to access services such as healthcare, education, and in some cases in the hope of finding employment. As less research has been conducted in Addis Ababa and much focus has been given to the camps. There are 20,398 urban refugees in Addis Ababa, of which 53% are women. The sample size for this qualitative research was determined by the potential value of the selected respondents being 12 survivors, which the researcher considered more important than having a large number of interviews. The reason for selecting these nationalities is because of the budget of the researcher, and time available to find other nationalities. The research is focused more on quality and providing detailed facts on the vulnerabilities of women refugees to GBV. In view of the above, a total of 42 interviews were conducted by the researcher based on availability. Once a subject is identified, contact was initiated either through direct phone call, or community leaders and a meeting time and venue is fixed. In this way the researcher conducted 12 of the survivors' in-depth interviews. Similarly, key informant's interviews were conducted in their offices. Interviews with Reach out Volunteers (ROV's) and community leaders was used to

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<sup>24</sup> Kalof, Basic Knowledge of Qualitative Inquiry

triangulate the data. Focus group discussions were also held with women refugees from Somalia, Yemen, Burundi and another mixed group of (Sudan, Burundi, Yemen and Eritrea) women refugees.

The individuals working in humanitarian organizations and concerned bodies that were approached, including NGO's working in areas relating to Refugees were : the African Union Commission (AUC), United Nations High Commission for refugees (UNHCR), the state actor Administration for Refugees an Returnee Affairs (ARRA), Ethiopian Orthodox Church Development and Inter-Church (EOC-DICAC), Jesuit Refugee Service (JRS), Norwegian Refugee Council (NRC), Danish Refugee Council (DRC), ZOA, Plan International and Ethiopian Women Lawyers Association (EWLA). The choice of this setting provided for and facilitated the collection of reliable data.

### **1.6.3 Sampling Technique**

According to information obtained from NRC and UNHCR, protection cases are reported to UNHCR and ARRA. Since this study involved collecting cases, events and experiences that clarify the understanding of the research problem "*the vulnerability of women refugees to GBV*", this study utilized both purposive and snowball sampling technique.

Purposive technique was utilized according to certain attributes such as nationality. Snowball technique on the other hand was utilized to identify women that have experienced GBV in the various contexts, and this was facilitated through the various community leaders (Chairmen or Chairwomen of that particular nationality), men were also approached through community leaders.

### **1.6.4 Data collection Method**

In order to obtain substantial information, the researcher utilized in-depth interviews, and FGD's. Interviews were carried out using structured questions to guide the researcher. The data and information was collected through interviews with concerned bodies, targeting professionals working towards the protection of refugees. These include: government officials in ARRA and other international and non-governmental organization such as UNHCR, DICAC, JRS, NRC, DRC, ZOA, Plan International and EWLA as they are directly involved with refugees. Textual

data, has also been collected from secondary sources, including documents published by various UN organizations and NGOs working with refugees as well as state actors.

The specific technique applied in this research involved in-depth interviews with women refugees in Addis Ababa, including survivors of GBV, or those that know someone who has suffered from GBV, with the aim of giving them the opportunity to share their own lived experience. In some cases, survivors were more open to speak in the company of fellow refugees. According to Kalof: “*in-depth interviews are aimed at obtaining as much information from individuals as possible in their own words*”. Similarly, Focus Groups Discussions (FGD), with refugees were undertaken. Desk review and analysis of reports by authoritative agencies such as UNHCR, ARRA, UN Women and NRC were carried out. Key informant interviews with selected refugee counterparts and NGO’s such as: ARRA, EOC-DICAC, JRS, ZOA, Plan International, NRC, AUC (Department of Political Affairs), EWLA, were also held. Information gained from the interviews, FGDs and review of authoritative documentation was instrumental in analyzing the problem and recommendations towards finding solutions for addressing the problems.

### **In-depth Interview with Women**

In-depth interview involves the “*face to face meetings between the interviewer and the interviewee addressed to the understanding of the interviewee’s perspectives in relation with their lives, experiences or situations, according to their own words.*”<sup>25</sup> Structured questions were used by the researcher to guide the dialogue during interview sessions for both the researcher and refugee interviewee as well as with the key informants. The interviews with the women refugees were to stress the main issues of their vulnerability to GBV such as, highlight on new and emerging issues, and voice their experiences. This technique was considered important because of the potential to gather comprehensive information with the aim of understanding refugee women’s experiences and their vulnerability to GBV.

The questions addressed to the agencies which were formulated to guide the researcher (See Attached in Appendix) were divided into sections ranging from (Demography, Legal Policies Documents and Rules, Reporting GBV, Actions and Remedies). Questions for the in-depth interview consists of sections that focused on the experiences of women from their stay in in

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<sup>25</sup> Taylor. S.J. and Bodgan, R. (1992). *Introduccion a los metodos cualitativos de investigacion*. Barcelona, Paidos

Addis Ababa and Women Encountered GBV. Follow up questions were also asked during the interview in order to gain more clarity on a situation.

In total 12 women victims were interviewed for this study over the period of one month and a half (from April to May). Women not encountered GBV, Community leaders and men as well as Reach out Volunteers (ROVs) were also interviewed. The interviews with key informants were held in their offices whereas with the participants in an area where they were most comfortable such as in the UNHCR protection reception center for refugees and areas closer to their homes. The researcher also assured them that findings would be shared to the concerned agencies of ARRA and UNHCR with recommendations based on the challenges women encounter. Moreover, the researcher made use of qualified interpreters whom are trained and in the system of UNHCR for conducting interviews where language was a barrier. The interpreters were mainly women as the topic was sensitive and they were from the same nationality of the refugee women, they were also aware of the situation of the refugee as they have come across it previously.

### **Focus Group Discussions (FGD)**

It was important for the researcher to try as much as possible to extract supplementary information and learn about GBV during group discussions. Every refugee community is composed of a representative that is in charge and reaches out on behalf of their community and they assisted the researcher with facilitating FGD. The target groups for this technique included groups of women refugees and members of the refugee community. This was a mixture of both men and women. Moreover, four different focus group discussions (FGD) was undertaken; one with the Somali community, another with the Yemeni community, Burundi community, and the last with a mixed group of (Sudanese, Burundi, and Yemen and Eritrean) women refugees discussing questions posed by the researcher. These FDG's were held in JRS, as the location was conducive for purposes of understanding how each community perceives the issues of GBV. Since JRS provides open spaces for children of women refugees that includes day care, the researcher was able to approach some of the women to request for the FGD sessions.

### **Guide used for the interviews**

The researcher adopted the guide articulated in the Gender Violence Effects Indicators (GVEI) Theoretical and Methodological Framework. The guide enabled the researcher to develop the

structured questions on specific dimensions in relation to dealing with women whom have experienced GBV. After a brief definition of the relevant information, and suggestive questions that opens the conversation, the researcher would then begin to introduce the direct questions to the discussion. In this manner, once the researcher had gained details about the general context on the interviewee's life, focus was shifted towards more substantive issues.<sup>26</sup>

By utilizing this guide, it ensured the researcher maintained the aims of the research. This guide acts as a support tool that is based on a priority listing of the general areas to be covered by researcher in the interview.<sup>27</sup> Below is a quick overview of some of the dimensions explored by using the guide:

- Health: covering both physical, psychological effects, and sexual/reproductive issues of GBV on refugee women. It also considers the immediate and long-term effects on women resulting from GBV.
- Housing: presents a mix of environmental factors, such as women who left the camps due to GBV as well as for protection issues. On the other hand, it also looks at issues on rent, challenges to finding adequate housing, or cases where women have been homeless and have no information about shelter.
- Legal Aid: explores the legal processes associated to GBV such as – reporting to police, courts, trial and justice mechanisms, follow up of cases by implementing partners, protection measures for victims, legal aid provided to victims, and how victims express their confidence in the legal system.
- Livelihood: looks at how inability to secure means of supporting their livelihoods contributes to the vulnerabilities of women refugees, including the decisions taking to engage in survival sex.
- Social relationships: captures how GBV impacts the social interactions of women refugees, with other refugees and the host community.<sup>28</sup>

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<sup>26</sup> Surt. G. A. (2004). Theoretical and methodological framework in the project Gender Indicators against Social Exclusion, Transnational Exchange Programme Phase I and Phase II. Employment and Social Affairs Commission

<sup>27</sup> Ibid

<sup>28</sup> Ibid

### **1.6.5 Data Analysis**

Data analysis is based on the findings and used qualitative data. The analysis was done using thematic analysis which involved breaking down the information into different themes and categories. It discussed the experiences of women in Addis Ababa and their vulnerability to GBV. This was also done using the guiding questions prepared by the researcher. The information was recorded and later transcribed and the researcher also took notes.

### **1.6.6 Ethical Considerations**

The design and implementation of the research was guided by ethical standards to respect and protect the rights of all respondents. All research participants were given sufficient information on the purpose, objectives and methodology of the research, the identity of the researcher carrying out the research, was expressly informed and participants were informed that they had the right not to partake in or to withdraw from the research process at any time. The researcher also made it a standard practice to initiate all data collection procedures by securing the express and informed verbal consent of respondents to participate in the research, usually before commencing interviews or at the contact initiation stage. Moreover, the design of data collection methods as well as the recording of information purposely excluded personal information such as name of the respondents to ensure anonymity and confidentiality. The researcher would always inform the survivor why the session is to be recorded and when recording would commence.

For some of the most sensitive cases the researcher got access to, contact with the respondents was undertaken through community leaders, or agencies, so as to respect the women, as they all had the option to voluntarily participate and in most cases set conditions for their participation, which included timing and venue. The researcher also made efforts aimed at ensuring chosen spaces were safe for the women, and provided them with light refreshments.

Respondents were made aware of the interview technique to be used, in this case – in-depth interview lasted from 45 minutes to 1 hour. Furthermore, the women were informed about the interview process, through the guided questions designed to facilitate the interview sessions. They were also informed the interviews will be recorded and later transcribed.



The researcher made it a point to inform the interviewee's that information gained from them would be upheld to the highest standards of anonymity and confidentiality. They were also informed that key findings from the study will be presented to the responsible agencies that requested for the result such as UNHCR, ARRA and DRC.

## 1.7 Limitations

Since this study is conducted using qualitative research, and as the topic of GBV is sensitive, it was difficult to study lived experiences of refugees as many were afraid to speak out and share their experiences. Several respondents asked the researcher how they will benefit from the research and how it will help them and others refused to speak. A few others whom were identified to have experienced GBV had the request for interview denied by their spouses.

Another major constraint to this research was the researchers' nationality and origin from Northern Sudan, Khartoum when it came to obtaining information from the South Sudanese. Given the history of violence in Sudan, which has divided the country on the lines of North and South, accessing information from the refugees who are from Southern Sudan was quite difficult. The support of an assistant was utilized in this case and disclosing the researcher's nationality was essential in order to be ethical.

Other limitations consisted of key informants not responding to phone calls or to emails. For example, the International Organization of Migration (IOM) did not respond to emails. For those that took time to respond to emails the researcher waited patiently and sent out reminders. Moreover, some of the target groups such as Somali and Yemen refugees had a strong preference for conservative values, thus getting respondents for interviews proved abortive. Other limitations include many of the refugees being scattered in several parts of the City and it was difficult to get in touch with them, due to travel distance. Also, the researcher made sure to ask to follow up questions and to ask for clarifications during interpretation to make sure the respondent and interpreter understood the researcher correctly. The constraints of finance were an issue, since the interpreters had to be paid and refugees were to be given a small stipend for their transport. Lastly, the absence of similar research in the Ethiopian, Addis Ababa context led to shortage of reference materials online.

## 1.8 Scope of the Study

Ethiopia hosts refugees from several parts of Africa. Addis Ababa on the other hand has the largest concentration of urban refugees in the country. The scope of this study is qualitative and is limited to women refugees residing in Addis Ababa of the following nationalities: Yemen, South Sudan, Sudan, Eritrea, GLR, Somalia, and Burundi, specifically those that are registered under UNHCR and ARRA, or are illegal and reside in Addis Ababa for one month and above, as they are still being familiarized to the setting. The reason for selecting these nationalities is because of the relative ease of access to these nationalities which was further reinforced using the snowball technique, and also to examine how the proximity to institutional structures impacts on their livelihoods. Also, the researcher had budgeted for interviewing a certain number of refugees. The paper will further examine the types of GBV and the consequences. The main concern for this study is based on the vulnerability, the challenges and coping mechanisms of refugee women regarding their human rights and protection.

## 1.9 Significance of the Study

This study seeks to identify and fill the gaps in literature where few researches have been conducted, exploring into the lives of urban women refugees, and in this case the vulnerability of women to GBV in Addis Ababa. Previous studies make it hard to grasp the global landscape of women's vulnerability to GBV in urban settings, particularly Addis Ababa. Most of the research reviewed during the conduct of this study were focused on the integration of refugees with host communities and others on women being vulnerable to GBV in the camps, as well as their insecurities. Women's urban refugee experiences, are however, complex and varied.

The study therefore provides useful information on the vulnerability of women refugees to GBV and the coping mechanisms provided. Thus, it will broaden the understanding and provide better information with regards to the vulnerability of women refugees to GBV in Addis Ababa. It will further give insight and inform the government and policy makers to devise women-friendly social services and livelihood strategies to address the challenges of women refugees living in urban areas. This can be useful for concerned bodies as well as for national interventions. It will assess the extent to which the legislative framework and policy environment in Ethiopia constraints refugee livelihoods.

Moreover, it will be useful for creating awareness and giving useful feedback for possible policy reinforcement of identified implementation gaps. This can be done through designing appropriate mechanisms and monitoring systems to address GBV, and for the protection of human rights of women refugees, in Addis Ababa. Finally, it could pave the way for researchers to carry out further studies and contribute to research on GBV towards women refugees in urban areas and on women refugees' vulnerability to GBV, from a human rights perspective.

## 1.10 Organization of the Study

This thesis is divided into four (4) chapters with several sub-sections underlining different important aspects, to navigate different subjects.

**Chapter One:** This chapter presents the introduction, an overview of the study and background to the study, and provides an overview of the research topic and rationale. It further describes the methodology adopted for the research, and discusses the advantage for employing qualitative research to analyze the issue.

**Chapter Two:** This chapter presents a review of relevant literature. Section one discusses some of the conceptual terms related to the research topic GBV. Section two reviews literature on refugees, focusing on refugee women in camps and refugees in urban areas and in Ethiopia, it will also highlight some of the challenges faced by women refugees in host community. Section three provides the conceptual and legal frameworks.

**Chapter Three:** This chapter captures details of the study findings from interviews and focus group discussions. The information was analyzed using a narrative approach.

**Chapter Four:** This chapter presents an evaluation of actual cases of GBV. The chapter goes on to deliver key recommendations and a conclusion to the study.

## Chapter Two

### Literature Review

In reviewing the relevant literature and in order to understand the topic and identify the gaps in existing studies; this section provides a review on the major issue under study, in this case the vulnerability of women refugees to gender based violence (GBV).

Currently Ethiopia is the largest refugee hosting nation in Africa. Most of the studies focus on the increased emphasis to local integration of refugees. However, studies by Sinenhlanhla based on the structuration theory considers how urban refugees interact with the social structures set up by the state to support them in their challenges especially how they deal with GBV. Giddens described structures as resources, rules, enabling and constraining forces, and the recurrent patterned arrangements which influence or limit the choices and opportunities available.<sup>29</sup> While noting the reference in Article 22 of the Ethiopia refugee proclamation 409/2004 highlights the state responsibility for special protection to vulnerable groups.<sup>30</sup> This study is an attempt to critically examine the problems and challenges of women refugees in urban areas and particularly in Addis Ababa.

Furthermore, this section commences by conceptualizing key terms, and delves deeper on African and women refugees in general. In addition, literature that highlights key international human rights provisions, including discussion on African as well as Ethiopian relevant instruments on refugees will be discussed under a section on legal frameworks.

## 2.1 Conceptualizing Key Terms

### 2.1.1 Theories on women GBV

Herbert defines Gender Based Violence (GBV) as violence targeted at individuals or groups on the basis of their gender (both women and men).<sup>31</sup> However, based on reviewed literature Verwimp and Maystadt, underscore that a higher percentage of GBV have been committed

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<sup>29</sup> Giddens. A. (1984). *The Constitution of Society: Introduction of the Theory of Structuration*. California: University of California Press.

<sup>30</sup> Ethiopia Refugee Proclamation 409/2004, Article 22

<sup>31</sup> Herbert. S. (2014). *Links between gender-based violence and outbreaks of violent conflict*, GSDRC Helpdesk Research Report

against women.<sup>32</sup> Looking at what Wiggett says reechoes how their status as refugees contributes to the nature of vulnerability associated with their livelihoods, and not as a factor of their gender alone.<sup>33</sup>

Estimates suggest that approximately a quarter of the world's women are exposed to or confronted by violence during their lifetime.<sup>34</sup> The US Strategy to prevent and Respond to Gender Based Violence globally, found that GBV is rooted in structural inequalities between men and women and is characterized by the use and abuse of physical, emotional or financial power and control.<sup>35</sup>

Alluding to the nature inherent in the structural inequalities, (Markovic and Cvejic 2017; and Gebreyosus 2013), in their studies highlight that GBV is based on socially constructed or assumed differences with regards to “gender” between men and women.<sup>36</sup> According to Wordofa, GBV perpetuates the stereotyping of gender roles that denies human dignity and development of the individual.<sup>37</sup> Thus, Gebreyosus defines GBV as a term that gradually encompasses all acts of violence rooted in some form of gender inequalities, and with the purpose of preserving social power.<sup>38</sup>

Notably, the DEVAW under Article (1) defines violence against women as “*any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.*”<sup>39</sup>

GBV today has emerged as a global problem against refugees. Based on several studies, several women refugees have had harrowing stories of abuse and suffering. For example, MacTavish, explains that the Syrian conflict and the SGBV committed against Syrian women is described as

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<sup>32</sup> Verwimp. and Maystadt J-F. (2015). Forced Displacement and Refugees in Sub-Saharan Africa, *World Bank*, Policy Research Working Paper 7517

<sup>33</sup> Wiggett M.T. (2013). The Forgotten Voices of female refugees: An Analysis of Gender Roles in the refugee society. *Northeastern University*, Boston, Massachusetts

<sup>34</sup> GBV Definition. (2009). Prevalence, and Global Statistics. USAID Toolkit for integrating GBV Prevention and Response into Economic Growth Project, *WHO*

<sup>35</sup> United States Strategy to prevent and respond to Gender Based Violence Globally. (2012). *USAID*. Pg.6

<sup>36</sup>Markovic. J. and Cvejic. M. (2017). Violence against women and girls among refugee and migrant population in Serbia. Atina.

<sup>37</sup> Wordofa. B. N. (2013). The Prevalence and Contributing Factors of Sexual and Gender-based Violence among Women Somali Refugees in Addis Ababa, Ethiopia. The Case of Ethiopian Orthodox Church Development and Inter Church Aid Commission Refugees and Returnees Affairs Department. *Indira Gandhi National Open University* MSW Dissertation Research Project.

<sup>38</sup> *Supra note 14*, pg.4

<sup>39</sup> *Supra note 6*, pg.2

a “*prominent and disturbing feature*”.<sup>40</sup> In a related study, it was underscored that SGBV during and after conflict, including domestic violence, can result in sexual exploitation, unwanted pregnancies, severe risks to their health and increase sexually transmitted diseases.<sup>41</sup>

Having considered the studies in review the problem is not only structural in nature, there are links to inequality and evolving nature of gender dynamics which is why Markovic and Cvejic, found that violence against women is systematic and widespread and represents a dominant form of gender based violence.<sup>42</sup> Therefore, GBV is the most pervasive and represents a gross violation of human rights experienced in the world that is prohibited by several international conventions.

### 2.1.2 Types of GBV

A review of the relevant literature on the topic provided a broader understanding of the problem, on that note, it is instructive to consider the various forms of GBV. These include: Emotional and psychological violence; such as threats, physical; which is manifested through beating, causing injury, or even killing with or without weapons<sup>43</sup>. Sexual violence; attempting to obtain a sexual act by using force regardless of their relationship to the victim. Such acts are committed or attempted without freely given consent of the victim or against someone who is unable to consent or refuse. It can also include: forced or alcohol/ drug facilitated penetration of a victim; intentional sexual touching; Sexual violence can also occur when a perpetrator forces or coerces a victim to engage in sexual acts with a third party.<sup>44</sup>

Socio-economic violence on the other hand; includes discrimination or denial of opportunities and services, social exclusion based on sexual orientation as well as obstructive legislative practices.<sup>45</sup> Accordingly, this type of GBV is a cause for other forms of GBV, Intimate Partner Violence (IPV), trafficking in women, as well as forced prostitution. Besides, in national

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<sup>40</sup> MacTavish. E. (2016). Barriers of Reporting Sexual Violence in Syrian Refugee Camps. Human Security and Peacebuilding Royal Roads University Victoria, British Columbia, Canada, pg. 9

<sup>41</sup> Tesfaye. M. (2011). Rights in Displaced Situations: Challenges and prospects for the enforcement of Reproductive Rights of Refugee Women and Girls in Ethiopia, Human Rights Law, *Addis Ababa University*

<sup>42</sup> *Supra note* 40 pg. 19

<sup>43</sup> Chikwanha. P. A. (n.d.). Delivering Justice to Victims of SGBV: How Do We Level the 'Battlefields', pg. 10

<sup>44</sup> Basile.C.K. et al (2014). Sexual Violence Surveillance: Uniform Definitions and Recommended Data Elements. *Centers for Disease Control and Prevention, National Center for Injury Prevention and Control*

<sup>45</sup> Wordofa. B. N. (2013). The Prevalence and Contributing Factors of Sexual and Gender-based Violence among Women Somali Refugees in Addis Ababa. Ethiopia. The Case of Ethiopian Orthodox Church Development and Inter Church Aid Commission Refugees and Returnees Affairs Department. *Indira Gandhi National Open University MSW Dissertation Research Project*

contexts, there still exist certain cultural practices that can be considered as violence against women, which are complex in nature and operate under the guise of tradition; for example, harmful traditional practices, like: dowry-related violence and Female Genital Mutilation (FGM).<sup>46</sup> Strathern and Mac Cormack note that the nature or culture discourse, for example, regularly figures nature as female and in need of subordination by a culture that is invariably figured as male, active, and abstract.<sup>47</sup>

In addition, community apathy towards survivors of GBV, represents another dimension to the risk level of women who have suffered GBV.<sup>48</sup> GBV is both a crime against the individual and an act of aggression against the entire community or nation. From a cultural perspective, the entire community is affected, since women are considered the symbolic bearers of caste, hence, ethnic, or national identity are systematically violated.<sup>49</sup>

### 2.1.3 Consequences of GBV

According to Bouta, Frerks and Bannon, societies tend to shift the blame to the victims and this social rejection results in emotional damage such as shame, self-hate, depression, or even stigmatization by the community.<sup>50</sup> One gets a sense of the impact or consequences of GBV to the society, when considering the account of the victims. Among other things, this cost to society ranges from psychological to sexual and reproductive rights issues of women or victims. Furthermore, and as stated by Miller, it puts women's health at an extremely high risk for both physical and psychological problems.<sup>51</sup> Gebreyosus also shares similar findings, that GBV impairs the health of females and its effects are numerous and severe ranging from pregnancy to chronic pain, sexually transmitted infections and in many cases death.<sup>52</sup> One aspect that needs to be highlighted on the consequences of GBV, is that victims who are refugees are at an even

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<sup>46</sup> Bouta, Frerks and Bannon. (2005). Gender Conflict and Development, The world Bank

<sup>47</sup> Worthman.C. M. and M. S. eds. (1980). Nature, Culture and Gender (New York: Cambridge University Press

<sup>48</sup> Centre. S. J. (2015). Societal Attitudes toward Sexual and Gender-Based Violence in Syria, pg. 27

<sup>49</sup> Bouta et al (2005). Gender Conflict and Development. The World Bank

<sup>50</sup> Ibid

<sup>51</sup> Miller, L. (nd). The Irony of Refuge: Gender-Based Violence against Female Refugees in Africa. Human Rights and Human Welfare

<sup>52</sup> *Supra note* 14, pg.4

higher risk for medical complications due to the unstable environment, unfamiliar territory, and increased exposure to violence.<sup>53</sup>

Therefore, GBV has serious effects that put the health and psychology of victims under risk. To further elaborate on the societal attitudes towards victims of GBV, it was also found that the perception towards survivors varies according to the community.<sup>54</sup> Women are more likely to be mistreated in their communities, and without proper psychological care and protection. Besides from the immediate physical effects, GBV has far reaching consequences that in the long-run tend to inhibit the capabilities of women to engage in social life.

## 2.2 Refugees

### 2.2.1 Who is a Refugee?

The state of being vulnerable can be applicable to various situations and circumstances. As this study particularly focuses on the vulnerability of women refugees to gender based violence, it is necessary to define a refugee based on literature and international conventions as we delve deeper into the study.

The most commonly used definitions of a refugee are taken from the United Nations (UN) Convention relating to the Status of Refugees and the 1969 Organization of African Unity (OAU) currently known as the African Union (AU). A refugee is defined as applying to “*every person who, owing to external aggression, occupation, foreign domination or events seriously disturbing public order in either part or the whole of his country of origin or nationality, is compelled to leave his place of habitual residence in order to seek refuge in another place outside his country of origin or nationality*”.<sup>55</sup>

This Convention further ceases to apply to any refugee if: “*(a) he has voluntarily re-availed himself of the protection of the country of his nationality, or, (b) having lost his nationality, he has voluntarily reacquired it, or, (c) he has acquired a new nationality, and enjoys the protection of the country of his new nationality, or, (d) he has voluntarily re-established himself in the country which he left or outside which he remained owing to fear of persecution, or, (e) he can*

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<sup>53</sup>Supra note 51, pg. 20

<sup>54</sup> Supra note 14,pg.4

<sup>55</sup> The 1969 Organization of African Unity (OAU)



*no longer, because the circumstances in connection with which he was recognized as a refugee have ceased to exist, continue to refuse to avail himself of the protection of the country of his nationality, or, (f) he has committed a serious non-political crime outside his country of refuge after his admission to that country as a refugee, or, (g) he has seriously infringed the purposes and objectives of this Convention.”*<sup>56</sup>

In general, a refugee is someone who has been dislocated or fled for various reasons. According to Ali, refugees are defined as “*People who are forced to flee their homes due to persecution, whether on an individual basis or as part of a mass exodus due to political, religious, military or other problems*”. Invariably, all human beings have a right to flee persecution as established in the 1951 UN Convention relating to status of a refugee.<sup>57</sup>

### **2.2.2 Refugees as victims**

The refugee crisis has become a problem in today’s society, with several factors contributing to the situation. The world refugee situation is a major issue confronting the contemporary international community.<sup>58</sup> Throughout the history of the modern world, the mass displacements of people are due to occurrences of natural disasters, conflicts, violence, acts of brutality or the fear of persecution.<sup>59</sup> Considering these on a case by case basis, as indicated by Gladde, it is well known that physical violence, sexual assaults, shelling and other forms of torture are reasons of displacement.<sup>60</sup> Ludwig also states that war, civil unrest, torture, violence and discrimination take place several parts in the world and result in millions of people being displaced from their homes each year.<sup>61</sup> Some examples include: Syrian refugee crisis, Afghanistan, Iraq and Iran refugees fleeing brutal regimes, genocide in Rwanda, and the crisis in South Sudan, Somalia, Eritrea, and Yemen. This has given rise to the large numbers of internally displaced persons (IDP’s), and refugees leading to growing humanitarian needs, and worsening the human security challenges

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<sup>56</sup> Ibid

<sup>57</sup> *Supra note 4*, pg.2

<sup>58</sup> Girma. E. (2016). Assessing the Impacts of South Sudanese Refugees on the Host Communities of Itang Woreda: A Case Study of Tierkidi Refugee Camp in Gambella Regional State by Endalkachew Girma, Addis Ababa. *Addis Ababa University College of Social Sciences, Department of Political Science and International Relations*. pg. 12

<sup>59</sup> Lubbers. R. (2003). Sexual and Gender Based Violence against Refugees, Returnees and Internally Displaced Persons. Guidelines for Prevention and Response. United Nations High Commissioner for Refugees, pg. 1

<sup>60</sup> Lyn.G. J. (2012). The Coping Strategies of Sudanese Refugee Women in Kakuma Refugee Camp, Kenya. Michigan State University

<sup>61</sup> Ludwig. N. (2016). The Life Experiences of Ten Female Refugees from Iraq and Iran: An Oral History Research Study. Geschke Center Gleeson Library, pg. 2

requiring them to cross into neighboring countries seeking protection.<sup>62</sup> Consequently, a situation that tends to impact adversely on the safety of various nation states.<sup>63</sup>

According to UNHCR, an unprecedented 65.6 million people around the world have been forced from home, among them 22.5 million are refugees, and 10 million are stateless people.<sup>64</sup> Women make up high proportions and constitute half of the global of refugee and internally displaced populations and suffer unique consequences of war and conflict.

### 2.2.3 African Refugees

Since the late 1950s conflicts have developed in almost all African States and produced or expelled citizens, increasing the number of refugees.<sup>65</sup> As a result, protracted conflicts experienced in some parts of Africa vary from political instability, persecution and other complex problems. There is a tendency for these conflicts to degenerate further leading to situations where people are forced to flee their communities as a result of threat to their livelihood and other forms of violence, some of which include GBV with women and girls being primary targets. Some examples of these conflicts include the ethnic hatred between the Hutus and Tutsis in Burundi and Rwanda; disintegrated states like Somalia and displacements that occur due to tribal, religious and ethnic conflicts, the conflict between the Sudan People's Liberation Army and Khartoum's Sudan Armed Forces, the M23 Rebels in the Democratic Republic of Congo that wanted to overthrow the national government and control the country.<sup>66</sup> The magnitude of refugee influx in African countries in recent years has generated concern throughout the world.<sup>67</sup> Thousands of refugees flee these war-torn areas due to conflict and end up as refugees in neighboring African countries in the hope of finding a safer place to live.<sup>68</sup>

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<sup>62</sup> Varalakshmi V. Rahul O. Rieti G. and Lee G. (2016). *Refugee Impacts on Turkana Hosts: A Social Impact Analysis for Kakuma Town and Refugee Camp Turkana County, Kenya*. Washington DC 20433, USA. The International Bank for Reconstruction and Development / The World Bank Group, pg. 1

<sup>63</sup> Girma. E. (2016). *Assessing the Impacts of South Sudanese Refugees on the Host Communities of Itang Woreda: A Case Study of Tierkidi Refugee Camp in Gambella Regional State, Addis Ababa*. *Addis Ababa University College of Social Sciences, Department of Political Science and International Relations*. pg. 12

<sup>64</sup> UNHCR. *Figures at a Glance*. (2018). <http://www.unhcr.org/figures-at-a-glance.html>, [Accessed 15 Jan. 2018]

<sup>65</sup> *Supra note 7*, pg. 3

<sup>66</sup> *Ibid*

<sup>67</sup> *Supra note 62*, pg. 23

<sup>68</sup> Maniragena. J. E. (2014). *An Evaluation of Service Effectiveness of selected refugee service providers in Urban and surrounding areas of the Cape Town Metropolitan area*. *Cape Peninsula University of Technology*, pg. 1

Today the global statistics of refugees in Sub-Saharan Africa is over 18 million people.<sup>69</sup> State failures such as government's inability to establish order and safety for its citizens, have contributed to migration of refugees.<sup>70</sup> Which is why Whitwell, alluded as follows, that forced migration on the continent is an effect of social disparities caused by civil strife, including social and economic restructuring with individual countries and between groups of African states.<sup>71</sup> Others such as Iqbal stated that Africa is grounded on unstable politics, poverty, ethnic and religious conflicts and National governments terrorizing their citizens and denying them their rights.<sup>72</sup>

## 2.2.4 Women Refugees

According to UNHCR women and girl refugees make up 48% of refugees, internally displaced or stateless population of the world and constitute to a vulnerable group<sup>73</sup>. Although entire displaced communities suffer the consequences of armed conflict, men and women are affected differently. On the other hand, women in armed conflict tend to be most affected than any other population of women in the world<sup>74</sup>.

Obradovic, highlights that in many cases during conflict men are inclined to face a threat on their home ground whereas women depart looking for shelter.<sup>75</sup> In search of a safe environment and shelter, women and girls become exposed, vulnerable and affected by conflict in different forms. Either as IDPs or as refugees in another country, as they flee to seek protection, they are exposed to the risks of sexual violence and sexual exploitation.<sup>76</sup> For example, Sinenhlanhla states several cases have been reported of children and women being subjected to sexual violence during and after their journey in South Africa.<sup>77</sup>

Sinenhlanhla posits that millions of women throughout the world are subjected to sexual torture, injury, starvation, and murder because they are female. She further makes a profound statement

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<sup>69</sup> UNHCR, (2018), Sub-Saharan Africa hosts more than 26 per cent of the world's refugee population, [online] Available at <http://www.unhcr.org/africa.html>

<sup>70</sup> *Supra note 7*, pg.3

<sup>71</sup> Whitwell, C. (2002). *New Migration in the 1990's: a retrospective*. Sussex Migration Working Paper no. 13

<sup>72</sup> Iqbal, Z. (2007). *The Geo-politics of Forced Migration in Africa 1991-2002*. New York: Sage Publications

<sup>73</sup> UNHCR, (2018), [online] Available at: <http://www.unhcr.org/women.html>

<sup>74</sup> *Supra note 14*, pg.4

<sup>75</sup> Obradovic, M. (2015). *The Protection of Female Refugees against SGBV in Camps*. United Nations University, pg. 1-2

<sup>76</sup> Refugee Council. 2009. *The Vulnerable Women's Project Refugee and Asylum Seeking Women Affected by Rape or Sexual Violence*, pg. 20

<sup>77</sup> *Supra note 7*, pg.3

on how refugees perceive themselves: “*refugees are consigned to their body, they are rendered speechless and without agency, a physical entity or rather a physical mass within which individuality is subsumed*”.<sup>78</sup> Nonetheless, the prevalence of GBV during conflict increases the spread of sexually transmitted diseases (STDs) such as HIV/AIDS, among women.<sup>79</sup> The occurrences of sexual violence towards women in conflict increases their exposure to infectious diseases, mental health and deprives them of guarantee to their personal and physical safety, leading to impregnation, abortions, sexual slavery and trafficking and in extreme cases death. In a study conducted by the Refugee Council, it was found that women whom have been victims of one form of GBV have faced emotional pressure and contemplated suicide or some form of self-harm.<sup>80</sup>

Looking at gender roles and vulnerability, (Wordofa; Bouta Frerks; and Bannon), found that women are at high risks because of their gender roles in the society as well as the prevailing oppressive gender relations, particularly in conflict situations<sup>81</sup>. Current studies reviewed during the course of this research focused more on consequences, types of GBV, in relation to African women refugees. But in considering notable studies by (Sinenhlanhla, 2014; Ali, 2014; Kandoh, 2012 and Negasse, 2013), some of their findings touched on the experiences of refugees with insights into the vulnerabilities of refugee African women.

According to Sinenhlanhla for example, African Refugee women have less human agency, when they newly-arrive to their destination country, as several most of the conditions encountered in their home countries still prevails in their destination countries. Without the ability to exert their legal rights, they are therefore rendered powerless, marginalized and their voices are rarely heard<sup>82</sup>. Culture and language in an unusual way compounds their problems, as Ali states that the experiences of female refugees in the destination country is usually limited by language, education, work experiences and child care facilities<sup>83</sup>. Language barriers can impede refugee women from access to social services and learning in the destination country<sup>84</sup>. Hence, they face difficulties in finding a job and communicating with the local people, denying them access to

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<sup>78</sup> Ibid

<sup>79</sup> *Supra note 48*, pg.20

<sup>80</sup> *Supra note 75*, pg. 24

<sup>81</sup> *Supra note 48*, pg.20

<sup>82</sup> *Supra note 60*, pg.22

<sup>83</sup> *Supra note 4* , pg.2

<sup>84</sup> Ibid

social services, including those services provided for refugees. In some cases, the traditional definitions of gender roles inhibit refugee women from engaging in productive activities or working outside of their household because they have to look after children. If the local population in the host community tend to exhibit discriminatory behavior on refugee women, it also makes it more difficult for them to settle in properly or feel safe. The absence of proper implementation of country specific refugee laws, therefore tends to exacerbate women refugees to different levels of vulnerabilities.<sup>85</sup>

## 2.3 Refugee Women in Camps

Camps are often perceived as temporary havens where people seek temporary refuge from the violence or persecution in their home countries. They are constructed while crises unfold for people fleeing for their lives.<sup>86</sup> Sinenhlanhla highlights that as part of UNHCR's principles and the host governments' strategy, a refugee camp is a temporary settlement that receives refugees in order to provide protection and assistance to keep them in one place.<sup>87</sup>

These camps are established in many different ways in the host countries. Some camps do not allow free access based on design, while others allow residents to come and go freely. A number of scholars such as (Mwangi, 2012; Gladden, 2012; Emma MacTavish, 2016), have analyzed the experiences and challenges of refugee women in some refugee camps. Despite the purpose of refugee camps being to provide safe shelter and protection for refugees; some of the camps have become unsafe places for several refugees, most of them being women. Women and girls often deal with added pressures such as being subjected to sexual abuse and violence in refugee camps.<sup>88</sup> GBV in particular, is a serious problem that pervades most camps worldwide. The female refugee experience is fraught with sexual violence whether it is perpetrated by family members, acquaintances, host community, strangers, or aid workers.<sup>89</sup>

Furthermore, the lack of gendered approach in refugee camps exposes women to the risk of violence. For instance, in situations where camps are crowded, adequate provision may not have

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<sup>85</sup>Menjivar. M. and Salcido. S. (2002). *Immigrant Women and Domestic Violence: Common Experiences in Different Countries*, Sage Publications, pg.908

<sup>86</sup><https://www.unrefugees.org/refugee-facts/camps/> (Accessed 12 March 2018)

<sup>87</sup> Supra note 7, pg.3

<sup>88</sup> Ibid

<sup>89</sup> *Supra note 14*, pg.4

been made for well-protected women's quarters or may have inappropriate sanitary facilities. Other cases include refugee women who are at risk due to taking long journeys in search of water and firewood.<sup>90</sup>

In her study, Mactavish highlights that female refugees in the Zaatari Refugee Camp, located in Jordan, are currently facing numerous types of violence and turning to prostitution as an alternative to create a stable life for themselves and their families.<sup>91</sup> So, while the idea of the refugee camp is to create a place of peace for those escaping the dangers of war and persecution, many refugees find they have escaped one form of victimization only to endure another. In retrospect, with the option of urban settlement, some refugees are more inclined to migrate or apply for permit to live in the cities. This is connected with the need for better security, social services: health and education, and escape from the camp experiences that resonates with the violence and persecution experienced in their home countries.

## 2.4 Refugee Women in Urban Areas

Several refugees settle in urban areas in the hope of finding a better life, through increased access to better education and health, employment opportunities and in many cases for reasons such as personal security or protection, if there is threat to their safety. Others settle in urban areas because there are no refugee camps in a particular country, for example in South Africa and Zimbabwe<sup>92</sup>.

According to Suleiman Ali women refugees in urban areas are often left in vulnerable situations because of the lack of legal status including work permits, language, cultural differences and discrimination they face<sup>93</sup>. Women may live in urban areas in unhealthy conditions with lack of access to services such as sanitation, health care and education. There is also the likelihood that social services in refugee camps may be concentrated in one area, while in urban areas assistance centers are spread out. As cited in Sinenhlanhla's study, Gururaja states that refugee women may have limited or no access to employment, while they are expected to feed their families<sup>94</sup>.

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<sup>90</sup> Ibid

<sup>91</sup> *Supra note 9*, pg.3

<sup>92</sup> *Supra note 7*, pg.3

<sup>93</sup> *Supra note 2*, pg.1

<sup>94</sup> *Supra note 7*, pg.3

Furthermore, unequal economic opportunities, and cultural differences often leave refugee women to the traditional gender roles of child rearing, and this lack of means to support their livelihood increases their vulnerability to GBV. Moreover, in urban areas, women experience violence, sexual attacks and harassment.<sup>95</sup> Sometimes they may be exploited by their employers, in situations where they do not have legal permission to work. Landlords also exploit women and these often come in various forms including sexual exploitation when they are unable to pay for their rents. This factor also leads women to move to the suburban areas of the city, and often fall victims to fellow refugees or the host community. This threatening situation and violence causes more fear that restricts women's mobility, weakens their confidence, restricts their activities and limits their access to public space.<sup>96</sup>

## 2.5 Refugees in Ethiopia

The Refugee influx in Ethiopia is not a recent phenomenon, the open-door policy and its geographical proximity to the refugee producing countries has made Ethiopia a preferable destination for refugees.<sup>97</sup> Ethiopia currently hosts more than 916,678 refugees from neighboring countries including Eritrea, Somalia, South Sudan, Sudan, Yemen, GLR and other nationalities, as of March 2018.<sup>98</sup> This is mainly conditioned by the fact that Ethiopia is bordered by the most volatile and conflict-ridden countries.<sup>99</sup> Such as Sudanese refugees fleeing because of fighting between the Sudan People's Liberation Movement and the Sudanese Armed Forces. Also, Somali refugees mainly settled amongst their clan members in Ethiopia, in the Somali regional states. Eritrean refugees for example continue to arrive in Ethiopia in increasing numbers, because of the countries favorable out of camp policy (OCP) for Eritrean refugees.

In addition, the Government of Ethiopia maintains an open border policy for refugees seeking protection in the country. Similarly, land has been allocated for the existing camps in the following regional states: Somalia, Tigray, Afar, Assosa and Gambella.

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<sup>95</sup> Koskela. H. (1997). Bold Walk and Breakings": Women's Spatial Confidence Versus Fear of Violence, Gender, Place and Culture. *Journal of Feminist Geography*. 4(3):301-320.

<sup>96</sup> Ibid

<sup>97</sup> *Supra note 7*, pg.3

<sup>98</sup> Ethiopia National Sexual and Gender Based Violence Strategy 2017-2019

<sup>99</sup> *Supra note 7*, pg. 3

Nonetheless, the protection of Refugees is being implemented in accordance with the provisions put in the Ethiopian refugee proclamation in 2004 and the core international human rights treaties that have been ratified by Ethiopia, as it is a guide to its operation in relation to refugees and its partners.<sup>100</sup> This clearly stipulates the encampment policy that the country has been implementing thereby ruling-out refugee settlement in the urban area with few authorized exceptions. The main objectives of refugee operations in Ethiopia are the protection and material assistance, promotion of voluntary return and recovery programs. The government agency responsible for the implementation of the refugee program is the Administration for Refugee and Returnee Affairs (ARRA). ARRA is an institution established by the Ethiopian government and part of the Ministry of Home Affairs, is the main implementing partner of United Nations High Commissioner for Refugees (UNHCR).

UNHCR continues to maintain and strengthen its relationship with the Government of Ethiopia mainly through its counterpart, ARRA, in order to ensure the preservation of a favorable protection environment that allows asylum seekers to continue to gain access to the Ethiopian territory on a prima facie basis.

### **2.5.1 Refugees in Addis Ababa**

Unfavorable camps condition, absence or limited access to services like education, health care, and security problems with protracted situation in camps are the major push factors for refugees to settle in Addis Ababa. Self-settlement mainly and assisted settlement of refugees in urban areas is increasing for different pull and push factors.

According to ARRA, specialized medical reason, protection concerns, and higher education cases and self-supporting Eritrean refugees enrolled in the OCP and Yemen refugees are the major exceptions where by the refugees get the opportunity to settle in the urban areas with monthly allowance and other assistance<sup>101</sup>.

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<sup>100</sup> Ethiopia Refugee Proclamation No.409/2005 Art.21 (2): “...the Head of Authority (the security, Immigration and Refugee Affairs Authority) may designate places and areas in Ethiopia within which recognized refugees, persons who have applied for recognition as refugees and family members thereof shall live, provided that the areas designated shall be located at reasonable distance from the border of their country of origin or of former habitual residence.”

<sup>101</sup> *Supra* note 26, pg.12



Currently, more than 2,500 refugee populations of different nationalities are getting different services from organizations, namely; UNHCR, ARRA, DICAC-EOC and JRS. For OCP refugees, the scheme allows self-sufficient individuals, mostly Eritrean nationals, to live in the area they choose to, either with relatives or proven coping capacity.

## 2.6 Conceptual Framework: Femicide Feminist theory

GBV is not a new phenomenon and manifests itself in all societies across all social classes harming countless women.<sup>102</sup> Violence against women refugees today has emerged in universal concepts including on the concept of human rights. This section will therefore discuss conceptual frameworks and will consider feminist perspectives, specifically social and cultural contexts in relation to GBV in refugee settings.

Feminists argue it is vividly evident throughout history that patriarchy through its gender ideology has resulted in the creation of a society which puts men in dominant and women in subordinate positions.<sup>103</sup> This theory believes that oppression of women solely due to their sex is the result of dominant ideas and concepts of patriarchy. This ideology was further supported by Rani where he stressed that rigid and unchanging social norms and cultural practices or at least perceptions thereof are the most important instruments of patriarchal societies that perpetuate and maintain the myths of male superiority.<sup>104</sup>

In the case of this study, both women and men are known to experience conflict differently. Feminist theory of femicide, have shown that wars are gendered in their causes and consequences and because of this, women are targeted with various forms of GBV. Accordingly, Corradi et al, identifies the femicide theory and highlights how patriarchal power structures impose masculine authority over the female embodied and social life.<sup>105</sup> Women refugees face greater burdens and need specific protection. There are however, several factors that lead women to tolerate violence and overlook reporting to the relevant authorities. Several factors as alluded

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<sup>102</sup> Ibrahim. D. (2015). Domestic Violence: Challenges for Egyptian Women. The State University of New Jersey.

<sup>103</sup> Dobash. D. R. (1979). Violence against wives. New York: Free Press. EDHR. (2016, October). Ethiopia Demographic and Health Survey. Addis Ababa,

<sup>104</sup> Rani M. B. S. S. (2004). An empirical investigation of attitudes towards wife-beating among men and women in seven Sub-Saharan African countries. African Journal of Reproductive Health, 8 (3), 116-136.

<sup>105</sup> Corradi. C. Marcuello-Servos. C. Boira. S. & Weil.S. (2016). Theories of femicide and their significance for social research

by Straus, which mentions why women tolerate GBV. He points out the *defense of male Authority* is the notion that the man is superior to the woman, which contributes to the domination and violent subjugation of women. Thus, Feminists contend that these patriarchal norms are used to justify violence and its use as a means to protect men's ability to control women. Cockburn, also argues on how perspectives on feminism provides deeper understanding of violence and its connection to patriarchal structures of power.<sup>106</sup> It is immensely important to see how clearly these issues, which intersect with gender, may have ultimately led the determination of women refugees to engage in survival sex, that not only increases their vulnerability to GBV, but also impacts on their sexual and reproductive health, and their psychosocial well-being.

Other reasons highlighted by Straus on why women tolerate violence involve the economic constraints or the fear of living in abject poverty which usually serves a deterrent in women taking action. Other factors include burdens of child care as it is a task assigned by society to the mother. In many cases, this responsibility costs the mother her ability to go out and earn money. A woman is therefore forced to stay in an abusive marriage or relationship because of fear of being a single mother and bearing the responsibility, nonetheless, there is also the stigma attached to raising a child in as a single mother. Stigmatization of divorcees is also a situation where women are often stranded in abusive relationship because of the fear of what the society would think of them if they were to become divorcees. Most women are called names shamed, blamed and stigmatized against. This makes it difficult for a woman to put an end to her suffering by way of divorce and is consequently forced to tolerate the abuse. As Straus states the negative self-image is when women are made to feel bad about themselves, leading to the feeling of guilt. There is also the belief in the society that women are child-like and need to be disciplined by the men in their lives be it fathers, brothers or husbands.

The Androcentric legal system is another important factor where the legal system is usually rigged in subtle ways that favor a male defendant over a female plaintiff. It is therefore important to consider that to transform the status of women not only legislation should be enacted, but also

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<sup>106</sup> Cockburn, C. (2004). *The Continuum of Violence: A Gender Perspective on War and Peace*

societal and community attitude change is needed. The femicide theory emphasizes the complex relationship between violence, economics, politics and gender ideology.<sup>107</sup>

Improvements therefore need to be made on the part of the government to ensure that GBV and incidences thereof are remedied effectively ensuring the safety of women refugees in the private sphere as well as its protection in the public sphere. International Human Rights Instruments serve many purposes and possess various mechanisms to ensure state compliance but the most important factor for their effective implementation, is states responsibility. The state has to make deliberate and unwavering effort towards implementing the international normative standards set forth in the various mechanisms. They should implement the obligations not for the mere act of fulfilling international responsibility but for fundamentally wanting to address the plight of women refugees in abusive situations, relationships and marriages. The state must enact laws that effectively remedy the situation in line with international standards and also take initiative to promote these rights via rigorous awareness creation and attitude altering campaigns aimed at changing societal behavior with regard to GBV.

## 2.7 International, Regional and National Legal Frameworks

### 2.7.1 Introduction

This section will be looking at global instruments in order to analyze the vulnerability of women refugees to GBV. The Universal Declaration on human rights (UDHR, 1948), grants the right to all persons to seek asylum from persecution in other countries. Similarly, the 1951 Convention Relating to the Status of Refugees, and the 1967 Protocol Relating to the Status of Refugees are the key instruments to be considered in assessing the effectiveness of measures adopted to deal with refugee issues in Ethiopia. Also, the International Covenant on Civil and Political Rights (ICCPR), and the International Covenant on Economic, Social and Cultural Rights (ICESCR), the Convention on Elimination of All Forms of Discrimination against Women (CEDAW), Declaration on the Elimination of Violence against Women (DEVAW), will be examined because of certain provisions relating to the rights of women. Notable are regional instruments, such as the 1969 Organization of African Unity (OAU) Refugee convention, the Protocol to the African Charter on Human and People's Rights of Women and the Ethiopian national refugee

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<sup>107</sup> Shaw.J. 2017, Gender and Violence: Feminist Theories, Deadly Economics and Damaging Discourse

law. As this study looks at the vulnerability of women refugees to GBV in Addis Ababa, it will look at the Federal Democratic Republic of Ethiopia (FDRE) Constitution and the refugee proclamation no. 409/2004.

### 2.7.2 The Charter of the United Nations

The UN Charter serves as the foundation of international law as it covers all aspects of the discussion and the rights of vulnerable groups in society. It sets out the framework to be utilized in achieving cooperation and coherence with all regional organization in the promotion and respect of human rights.

### 2.7.3 The International Bill of Rights

The International Bill of Rights on the other hand is classified into three fundamental parts namely: The United Nations Declaration of Human Rights (UDHR, 1948), the International Covenant on Civil and Political Rights (ICCPR), the International Covenant on Economic, Social and Cultural Rights (ICESCR), the combination of these three elements is designed to address the specific issues on human rights and vulnerable groups.

The UDHR Article 22 states: *“Everyone, as a member of society, has the right to social security and is entitled to realization, through national effort and international cooperation and in accordance with the organization and resources of each State, of the economic, social and cultural rights indispensable for his dignity and the free development of his personality.”*<sup>108</sup> This general human rights protection indicates that GBV towards women refugees marks a sharp contrast between the fundamental freedoms and human rights of individuals irrespective of the sensitivity associated with the topic.

As stated in the preamble of the ICCPR: *“Considering that, in accordance with the principles proclaimed in the Charter of the United Nations, recognition of the inherent dignity and of the equal and inalienable rights of all members of the human family is the foundation of freedom,*

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<sup>108</sup> UN General Assembly, Universal Declaration of Human Rights, 10 December 1948, 217 A (III), available at: <http://www.refworld.org/docid/3ae6b3712c.html> [accessed 20 May 2018]

*justice and peace in the world...recognizing that these rights derive from the inherent dignity of the human person...’*.<sup>109</sup>

Article (1) and (2) further state: “*all human beings are born free and equal in dignity and rights. They are endowed with reasons and conscience and should act towards one another in spirit of brotherhood*” and Article (2): “*everyone is entitled to all the rights and freedoms set forward in this declaration without distinction of any kind such as race, color, sex, language, religion, political or other opinion, national...whether it be independent, trust, non-self-governing or under any other limitation of sovereignty*”.<sup>110</sup> This charter encompasses all the rights of every individual and provides the fundamental cover from possible violations. Furthermore, on the responsibility of states, comment 3 of the ICESCR, calls upon states to take necessary steps to fulfill the obligations, this is stated in article 2 (1).

#### **2.7.4 The Convention on Elimination of All Forms of Discrimination against Women**

The Convention on the Elimination of All Forms of Discrimination against Women adopted by the General Assembly in 1981, the United Nations Declaration on the Elimination of Violence against Women, adopted by the General Assembly in 1993, and the Beijing Declaration and Platform for Action, adopted in Beijing in 1995, include all forms of discrimination of violence against women and girls and reaffirm States’ responsibility to work to eliminate them.

This convention addresses discrimination against women based on their sex. Article (1) states that: “*women should enjoy equal opportunities as men in realms such as politics, economics, society, culture, and civil rights regardless of their marital or parental status*<sup>111</sup>.” As the basis of this study focuses on a human rights dimension in analyzing the vulnerability of refugee women to GBV, thus the convention provides an overarching reference point to advocate for more to be done for refugee women, with specific emphasis on duty of States to protect and fulfill their

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<sup>109</sup> UN High Commissioner for Refugees (UNHCR), ICCPR International Covenant on Civil And Political Rights: Statelessness and Human Rights Treaties, October 2016, available at: <http://www.refworld.org/docid/58c25e3a4.html> [accessed 20 May 2018]

<sup>110</sup> Ibid

<sup>111</sup> UN General Assembly, Convention on the Elimination of All Forms of Discrimination Against Women, 18 December 1979, United Nations, Treaty Series, vol. 1249, p. 13, available at: <http://www.refworld.org/docid/3ae6b3970.html> [accessed 20 May 2018]

rights. The CEDAW should therefore extend to all women under the Ethiopian jurisdiction that includes refugee women.

The DEVAW on the other hand is universal in coverage and a strong statement of principle to the international community. According to the DEVAW among other guaranteed rights, women have the right to “*the highest standard attainable*’ of physical Health and the right not to be subjected to ‘*cruel, inhuman or degrading treatment.*”<sup>112</sup> Therefore, states have an obligation to protect women, including refugees, and enable them to enjoy the given rights. The DEVAW recognizes the need for greater measures towards women to assure their security, rights, liberty and equality.

Moreover, the declaration clarifies that the act of violence refers to any physical or psychological harm towards a woman, also referred to GBV. Article (4) of the declaration encourages States parties to condemn any act of violence directed towards women by creating policies, legislations and penal systems that will effectively penalize offenders of violence towards women. Law enforcement should be sensitized when it comes to the issue of violence against women.

### **2.7.5 The Geneva Convention Relating to the Status of Refugees 1951**

The United Nations (UN) Geneva Convention Relating to the Status of Refugees 1951 outlines the duties of a state toward refugees in its territory. It provides the legal status of refugees in their country of asylum, their rights and obligations of a State including protection, protection against forcible refoulment. It provides the legal status of refugees in their country of asylum, their rights and obligations of a State including protection, protection against forcible refoulment. The 1967 Protocol relating to the status of Refugees on the other hand mitigates some of the limitations under the Refugee convention as the refugee convention covers refugees of events occurring before 1951 however, due to the rise of refugee conditions and for the desirability of refugees to enjoy equal status. Section 1(A), of the Convention Relating to the Status of Refugees 1951 defines a refugee as any person who:

*“owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion is outside the country of his*

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<sup>112</sup> UN General Assembly, Declaration on the Elimination of Violence against Women, 20 December 1993, A/RES/48/104, available at: <http://www.refworld.org/docid/3b00f25d2c.html> [accessed 5 May 2018]

*nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it”.*<sup>113</sup>

According to Article (3) “*The Contracting States shall apply the provisions of this Convention to refugees without discrimination as to race, religion or country of origin*”.<sup>114</sup>

Art 24(1) UN Convention relating to the Status of Refugees 1951 states that the Contracting States shall “*accord to refugees lawfully staying in their territory the same treatment as is accorded to nationals...*”<sup>115</sup>

Article 33 (1) further makes it clear that States have a responsibility to receive and give a place of refuge to asylum seekers. “*No Contracting State shall expel or return (“refoule”) a refugee in any manner whatsoever to the frontiers of territories where his life or freedom would be threatened on account of his race, religion, nationality, membership of a particular social group or political opinion*”.<sup>116</sup> This principle is also articulated in the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT) and is arguably part of customary international law. From a wider perspective, this convention asserts refugee rights and their protection.

### **2.7.5.1 The Rights Granted Apart from this Convention**

Article 5 of the 1951 Convention affirms that nothing in this Convention shall be deemed to impair any rights and benefits granted by a Contracting State to refugees apart from this Convention. However, under the Ethiopia refugee proclamation 409/2004, Article 21 (3) the provisions of this article fall short, as refugees are still faced with the same restrictions by the relevant laws as on persons who are non-citizens. The question is if this in anyway leads women

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<sup>113</sup> UN General Assembly, Convention Relating to the Status of Refugees, 28 July 1951, United Nations, Treaty Series, vol. 189, p. 137, available at: <http://www.refworld.org/docid/3be01b964.html> [accessed 20 May 2018]

<sup>114</sup> Ibid

<sup>115</sup> Ibid

<sup>116</sup> Ibid

refugees to undertake informal jobs, including survival sex as a means to ensure their livelihoods which also increases their vulnerability to GBV and other forms of violence.

### 2.7.5.2 Access to Courts

Article 16 (1) of the 1951 Convention affirms that a refugee shall have free access to the courts of law on the territory of all contracting states. Paragraph 2, also affirms a refugee shall enjoy in the Contracting State the same treatment as a national in matters pertaining to access to the Courts, including legal assistance and exemption from *cautio judicatum solvi*. Again, the question arises as to how the State sets the minimum standards under international law. Considering the phrase “*cautio judicatum solvi*”, the study also delves into the limits of assistance provided to urban refugees considering the dual policy of OCPs and urban non-assisted refugees. As there is evidence to show that the refugee communities rely more on their own internal mechanisms to deal with issues. This can be attributed to the lack of free legal aid or assistance provided to some classes of urban refugees. This could be the result of no legal provisions in the extant national laws granting refugees legal representation.

### 2.7.6 The OAU 1969 Convention

Supplementing the 1951 convention is the regional instrument, the OAU Convention Governing the Specific Aspects of Refugee Problems in Africa (OAU Convention). The OAU convention affirms the principle that human beings shall enjoy fundamental rights and freedom without discrimination, and that all the difficulties in the African continent must be solved with the spirit of the charter of the Organization of African Unity and in the African context.

Article (4) “*Member States undertake to apply the provisions of this Convention to all refugees without discrimination as to race, religion, nationality, membership of a particular social group or political opinions*”.<sup>117</sup> This should therefore be applied in the context of women refugees.

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<sup>117</sup> Organization of African Unity (OAU), Convention Governing the Specific Aspects of Refugee Problems in Africa (“OAU Convention”), 10 September 1969, 1001 U.N.T.S. 45, available at: <http://www.refworld.org/docid/3ae6b36018.html> [accessed 5 May 2018]



## 2.7.7 The African Charter on Human and Peoples Rights

The African Charter on Human and Peoples Rights stipulates under *Article 3 (1)* “every individual shall be equal before the law”. (2) “Every individual shall be entitled to equal protection of the law”.<sup>118</sup>

Article 4 states: “Human beings are inviolable. Every human being shall be entitled to respect for his life and the integrity of his person. No one may be arbitrarily deprived of this right.”<sup>119</sup>

Article 5 “Every individual shall have the right to the respect of the dignity inherent in a human being and to the recognition of his legal status. All forms of exploitation and degradation of man, particularly slavery, slave trade, torture, cruel, inhuman or degrading punishment and treatment shall be prohibited”.<sup>120</sup>

### 2.7.7.1 The Rights and Obligations

The convention also provides that no person shall be subjected to rejection in the frontiers of member states. It also presents a non-discrimination clause which states that member states shall undertake to apply the provisions of the convention to all refugees without discrimination. Under article 18 (3) it states that “States shall ensure the elimination of every discrimination against women and also ensure the protection of the rights of the woman and the child as stipulated in international declarations and conventions”.<sup>121</sup>

## 2.7.8 Protocol to the African Charter on human and Peoples’ Rights on the rights of women in Africa (Maputo Protocol)

The regional level the Protocol to the African Charter on Human and Peoples’ Rights of Women in Africa embodies an additional protocol that is linked to the status of women refugees. The Protocol to the African Charter on human and Peoples’ Rights on the rights of women in Africa defines “Discrimination against women” as any distinction, exclusion or restriction or any

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<sup>118</sup> Organization of African Unity (OAU), African Charter on Human and Peoples' Rights ("Banjul Charter"), 27 June 1981, CAB/LEG/67/3 rev. 5, 21 I.L.M. 58 (1982), available at: <http://www.refworld.org/docid/3ae6b3630.html> [accessed 5 May 2018]

<sup>119</sup> Ibid

<sup>120</sup> Ibid

<sup>121</sup> Ibid

*differential treatment based on sex and whose objectives or effects compromise or destroy the recognition, enjoyment or the exercise by women, regardless of their marital status, of human rights and fundamental freedoms in all spheres of life”*.<sup>122</sup>

It also stipulates that States should combat all forms of discrimination against women and ensure the principle of equality between men and women through the implementing of appropriate legislative and institutional measures, including those in the national constitutions. States should also integrate a gender perspective in their policy decisions, legislation, development plans, programmes and activities and in all other spheres of life.

Article (3) further highlights that “*every woman shall have the right to dignity inherent in a human being and to the recognition and protection of her human and legal rights*” States Parties should therefore adopt appropriate measures to prohibit any exploitation or degradation of women refugees. The protection of women should be ensured and everyone has the right to respect for her dignity and protection from all forms of violence, particularly sexual and verbal violence.<sup>123</sup>

According to Art 4 (1) “*Every woman shall be entitled to respect for her life and the integrity and security of her person. All forms of exploitation, cruel, inhuman or degrading punishment and treatment shall be prohibited. Parties shall take appropriate and effective measures to: enact and enforce laws to prohibit all forms of violence against women including unwanted or forced sex whether the violence takes place in private or public...*”<sup>124</sup> Similarly, Article 4(2) continues to stipulate that; “*State parties will take appropriate and effective measures to prohibit all forms of violence against women including unwanted or forced sex whether the violence takes place in private or public; This should ensure that women refugees are accorded the full protection and benefits guaranteed under international refugee law, including their own identity*”.<sup>125</sup>

As stated under Article 4(b) States should adopt legislative, administrative, social and economic measures to ensure the prevention, punishment and eradication of all forms of violence against

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<sup>122</sup> African Union, Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa, 11 July 2003, available at: <http://www.refworld.org/docid/3f4b139d4.html> [accessed 4 May 2018]

<sup>123</sup> Ibid Art 3.

<sup>124</sup> Ibid Art 4. (1)

<sup>125</sup> Ibid Art 4. (2)

women. This should be done by identifying the causes and consequences of violence against women and through taking appropriate measures to prevent and eliminate such violence. Perpetrators should be punished and rehabilitation programmes, mechanisms and accessible services for effective information, should be implemented for the victims.

Furthermore, women and men should enjoy equal rights in access to refugee status, determination procedures and women refugees should be accorded full protection and benefits guaranteed under international refugee law. *Article 10 (b) states in the local, national, regional, continental and international decision-making structures to ensure physical, psychological, social and legal protection of asylum seekers, refugees, returnees and displaced persons, in particular women.*<sup>126</sup>

Article 16 Right to Adequate Housing states ‘*Women shall have the right to equal access to housing and to acceptable living conditions in a healthy environment. To ensure this right, States Parties shall grant to women, whatever their marital status, access to adequate housing*<sup>127</sup>.’

## 2.8 Ethiopia Refugee Laws

### 2.8.1 The Constitution of the Federal Democratic Republic of Ethiopia (FDRE)

According to the FDRE Constitution everyone is equal before the law. The FDRE constitution is the fundamental law of the country and states in Article 9 (4) that all international agreements ratified by Ethiopia are an integral part of the law of the land. This means that it is the duty of the GoE to ensure that all international legal instruments ratified by the state are domesticated and mainstreamed into the country’s legal system.

Chapter 3 of the FDRE constitution demonstrates the commitment of the GoE to guarantee and promote human rights in accordance with the provisions set out in the UDHR and other international instruments adopted by Ethiopia. Art.13 (2) provides “*the fundamental rights and*

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<sup>126</sup> Ibid Art.10 (b)

<sup>127</sup> Ibid Art.16

*freedoms specified (Chapter three) shall be interpreted in a manner conforming to the principle of Universal Declaration of human Rights (UDHR), adopted by Ethiopia”.*<sup>128</sup>

Moreover, the conventions on human Rights and international instruments adopted by Ethiopia state the constitution is the supreme law of the land and is therefore applicable to every individual. Hence, refugee women being disadvantaged as they face challenges of GBV, this provision should be interpreted in such a way that includes them.

*Article 35 (4) furthermore goes on to stipulate that the State shall enforce the right of women to eliminate the influences of harmful customs. Laws, customs and practices that oppress or cause bodily or mental harm to women are prohibited.*<sup>129</sup>

In addition to this, Article 51(18) of the FDRE Constitution states that it is the power and function of the government to determine and administer all matters relating to refugees<sup>130</sup>. The above two provisions of the Constitution of the FDRE, goes to show that national refugee laws should be interpreted according to the 1951 convention. However, the question that also needs to be answered is how the national laws relating to refugee issues has adapted and conformed to international law.

A person recognized as a refugee, is provided with international refugee protection, which entitles one to certain rights, benefits, protection and assistance. In the next section, efforts will be made to examine how much of the constitutional provisions have been incorporated to the refugee proclamation 409/2004, focusing on special protection to vulnerable groups.

## **2.8.2 The Ethiopia Refugee Proclamation 409/2004**

Ethiopia being a signatory to the 1951 Convention Relating to the status of refugees, its 1967 protocol and OAU Convention has a duty to respect the fundamental principles of refugee protection.

The Ethiopian Refugee Proclamation No.409/2004 stipulates the rights, and obligations of recognized refugees and asylum seekers as it has adopted both in the UN Refugee Convention of

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<sup>128</sup> Constitution of the Federal Democratic Republic of Ethiopia, 21 August 1995

<sup>129</sup> Ibid Art. 35(4)

<sup>130</sup> Ibid Art. 51(18)

1951 and OAU Convention of 1969. The Ethiopian Refugee Proclamation states that Ethiopia is providing asylum and protection to refugees and promoting their voluntary repatriation in safety and dignity whenever conditions permit.

According to the Ethiopian Refugee Proclamation No.409/2004 a refugee is defined under Article 4 or 19, and supplements the definition of the 1969 OAU convention. Moreover, provisions under Article 21 of the proclamation outlines the rights and obligations of refugees in Ethiopia. This section will therefore examine the measures adopted to provide special protection to vulnerable groups, especially protection to women refugees in fulfilling the provisions contained in Article 13(2) of the Geneva Convention Relating to the Status of Refugees 1951. Article (22)<sup>131</sup> of the Proclamation deals with a wide range of issues related to vulnerability of women refugees within the context of protection. This means that authorities need to take appropriate measures to protect women refugees. According to the Proclamation No.409/2004, it shall be applied without discrimination as to race, religion, nationality, membership of a particular social group, or political opinion. Women refugees should therefore not be subjected to violence but are still being vulnerable.

The 2004 National Refugee Proclamation entitles recognized refugees to the same rights and obligations with regard to wage-earning employment and education as non-citizens of Ethiopia. This means among other things that they would need to receive a work permit in order to work. In practice, refugees do not have access to the formal labour market in Addis Ababa. Refugee women however are limited to work, making them more vulnerable to GBV as they are exposed to sex work.

### **2.8.3 Criminal Code of Ethiopia 2004**

The Criminal Code (2004) of Ethiopia is the essential law for criminalizing crimes against any person at both regional and federal level. Violence against women is considered a crime and is recognized as women's human right violation under the national legislations of Ethiopia. In this case GBV is being committed against women refugees. It causes bodily assaults, integrity of the

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<sup>131</sup> National Legislative Bodies / National Authorities, Ethiopia: Proclamation No. 409/2004 of 2004, Refugee Proclamation, 19 July 2004, Art.22

female body, as well as denying autonomy. This should therefore be criminalized against the law.

While examining the Criminal Code (2004), it was found that in the context of GBV, significant gender gaps in the justice system remain, due to poor documentation and inadequate investigation. These may contribute to the lack of remedial measures relating to refugees as the existing framework fails to comprehensively address all forms and determinants of violence against women. Accordingly, by not adequately addressing the acts that may constitute GBV, but rather looking at them in more general terms. This raised some questions during the conduct of the research that reinforce some of the findings related to institutional gaps, primarily on the protection from the legal system and the police. Despite this the code however, addresses crimes that constitute violence against women in the following forms: violence and coercion (article 441), Aggravated and ordinary Homicide (article 539 and 540), Grave Willful Injury and common willful injury, bodily Assault, Blows, Wounds, Maiming, Injuries or Harm and all damage to the physical or mental of an individual, (article 555 and 560), Harmful Traditional Practices (article 561-570), rape (articles 620-628), early marriage (article 649), etc. and therefore criminalizes most forms of violence against women and girls.<sup>132</sup>

**Violence and Coercion:** SGBV is punishable under the criminal law. Article 441(3) states “*Where the assault or violence has caused physical injury or impairment of health on the victim, the relevant provision of concurrence of crimes shall apply*”.<sup>133</sup>

**Rape:** *Whoever compels a woman to submit to sexual intercourse outside wedlock, whether by the use of violence or grave intimidation, or after having rendered her unconscious or incapable of resistance, is punishable with rigorous imprisonment from five years to fifteen years.*<sup>134</sup>

**Aggravated and ordinary Homicide:** *Whoever intentionally commits homicide: a) with such premeditation, motive, weapon or means, in such conditions of commission, or in any other aggravating circumstance, whether general (Art. 84) or other circumstances duly established (Art. 86), as to show that he is exceptionally cruel, abominable or dangerous; or b) as a member of a band organized for carrying out homicide or armed robbery; or c) to further another crime*

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<sup>132</sup> Criminal Code [Ethiopia], Proclamation No. 414/2004, 9 May 2005, Art 649

<sup>133</sup> Ibid Art 441(3)

<sup>134</sup> Ibid Art.620

*or to conceal a crime already committed, is punishable with rigorous imprisonment for life, or death.*<sup>135</sup>

**Grave Willful Injury:** *Whoever intentionally: a) wounds a person so as to endanger his life or to permanently jeopardize his physical or mental health; or b) maims his body or one of his essential limbs or organs, or disables them, or gravely and conspicuously disfigures him; or c) in any other way inflicts upon another an injury or disease of a serious nature, is punishable, according to the circumstances of the case and the gravity of the injury, with rigorous imprisonment not exceeding fifteen years, or with simple imprisonment for not less than one year.*<sup>136</sup>

The relevant provision of this Code (Arts. 555 - 560) “*shall apply to a person who, by doing violence to a marriage partner or a person cohabiting in an irregular union, causes grave or common injury to his /her physical or mental health.*” But one can also see that Article 560 states “*Simple bruises, swellings or transient aches and pains are not held to be injuries to person or health.*”

**Harmful Traditional Practices:** The criminal law has criminalized Harmful Traditional Practices such as female circumcision and infuriation, including other harmful traditional practices at the degree of participation or incitement. “*Where the injury to body, mind or health was caused by negligence, the relevant provision of this Code (Art. 559) shall apply*”<sup>137</sup>. Early Marriage with a minor as stated under the criminal law is also punishable.<sup>138</sup>

Enforcement of the criminal code should therefore be taken into account and should be diligently prosecuted and the context should apply to the kind of crime applied against women refugees. This being said, the prohibition of violence against women will have a better situation for refugee women.

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<sup>135</sup> Ibid Art 539 and 540

<sup>136</sup> Ibid Article 555&560

<sup>137</sup> Ibid Art. 561-570

<sup>138</sup> Ibid Article 648-649

## 2.9 Comprehensive Refugee Response Framework (CRRF)

The CRRF is a significant commitment made by the government of Ethiopia, in order to support refugees. By this, the GoE is reviewing the rights of refugees to employment – particularly entry to the formal labor market providing opportunities for increased freedom of movement, explicit recognition of refugee’s right to work, possibilities for local integration, the enrolment of children to primary and secondary education. The CRRF was adopted in New York a day before the Pledges made by Ethiopia during the Refugees Leaders’ Summit. The Pledges made by Ethiopia are in line with the objectives pursued by the international community through the CRRF. The Pledges are:

Out of Camp Pledge: Expansion of the “Out-of-Camp” policy to benefit 10% of the current total refugee population. Education Pledge: Increase of enrolment in primary, secondary and tertiary education to all qualified refugees without discrimination and within the available resources. Work and Livelihoods Pledges: Provision of work permits to refugees and to those with permanent residence ID. Provision of work permits to refugees in the areas permitted for foreign workers. Making available irrigable land to allow 100,000 people (amongst them refugees and local communities) to engage in crop production. Building industrial parks where a percentage of jobs will be committed to refugees. Documentation Pledge: Provision of other benefits such as issuance of birth certificates to refugee children born in Ethiopia, possibility of opening bank accounts and obtaining driving licenses. Social and Basic Services Pledges: Enhance the provision of basic and essential social services. Local Integration Pledge: Allowing for local integration for those protracted refugees who have lived for 20 years or more in Ethiopia.

Senior Protection Officer UNHCR:

*“CRRF’s approach is the integration and inclusion of refugees in national system, the idea will be in terms of protection is to look at what is available for Ethiopians and how refugees can benefit. Also, to support national systems to be better to take on GBV issues in particular. Not just for refugees but to also heighten their capacities in general.”*

Ethiopia became a pilot country for the implementation of the CRRF. This means that the CRRF will provide the required guidance and framework for the GoE to implement the nine pledges at



the Refugee Leaders' Summit in 2016.<sup>139</sup> This study would undertake to examine the CRRF in view of the nine pledges made by the GoE and the National Refugee Strategy for Prevention and Response to SGBV 2017-2019. Review of the SGBV strategy 2017-2019 of the GoE alongside the CRRF is to comparatively understudy how the observed lapses and proposals to improve on its operations by the GoE as presented in the strategy document supplements the CRRF in view of the implementation of the nine pledges towards addressing the cases, and challenges revealed by the findings of this study.

According the GoE national SGBV strategy, the CRRF will provide refugees that have been victims of SGBV or vulnerable to SGBV from lack of ability to support their livelihood, an opportunity to self-reliance, towards achieving gender equality in the long term.<sup>140</sup> One of the key elements of the pledges made by the GoE is the provisions of wage earning employment for refugees. This represents a significant departure from the current reservations expressed in the refugee proclamation in the states capacity to fulfil the provisions of the 1951 refugee convention on wage-earning employment for refugee population.

The commitment of the GoE to the implementation of the CRRF has been welcomed by a wide range of stakeholders. The Institute of Security Studies alludes to the fact that social infrastructures that will be built would also benefit the local population.<sup>141</sup> However, with a population of over 100 million, high unemployment this study will further examine the CRRF implementation and the SGBV strategy that envisages this approach as a means of transforming refugees to be self-reliant and achieve gender equality.

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<sup>139</sup> Ethiopia National Strategy on Prevention of SGBV 2017-2019.

<sup>140</sup> *Ibid*

<sup>141</sup> [reliefweb.int/report/Ethiopia/mutual-benefits-ethiopia-s-refugee-policy-investing-migrants-means-investing](http://reliefweb.int/report/Ethiopia/mutual-benefits-ethiopia-s-refugee-policy-investing-migrants-means-investing) (Accessed March 20 2018)

## **Chapter Three**

### **Findings and Analysis**

This chapter will detail with the key findings from the interviews and focus groups discussions carried out by the researcher over a period of one month and a half. The researcher had to contact some of the community leaders of the different nationalities, because they have a good knowledge of some of the cases, and as they assisted with facilitating some of the sessions. As the nationalities of the respondents is varied, the researcher was supported by qualified interpreters, as some of the interviews with the victims were conducted in their local languages such as: Arabic, Swahili, Tigray, Nuer, and Somali. Some of the sessions were recorded with the consent and permission of the respondents and the researcher also took notes.

According to demographic figures from NRC, 53% of refugee population in Addis Ababa are women (Attached in Appendix). In considering the cases of GBV, the researcher took note of the experiences encountered during their journey from their homelands with their families, children or fellow refugees, as they escape the woes of war, conflict and persecution. It is important to highlight that their journey comes with considerable risks, which often exposes them to insecurities, some of which are GBV related. Consequently, on arriving their country of refuge; (destination country) in this case Ethiopia, they are provided shelter in the form of camps. However, due to inadequacies in the camps that may not be able to address some of their immediate health, personal security and education challenges, refugees would have to therefore apply for a permit in order to be relocated to Addis Ababa, through the referral system from ARRA and UNHCR.

This study is focused on Addis Ababa, with regards to the vulnerability of women refugees to GBV and reviewing the available services such as health, education, security. It considers access to these services as key to serving the reasons why they prefer urban area than the camp. In the end the study also looks at remedial actions, as well as prevention and protection mechanisms by considering the responsibility of agencies in addressing cases. Despite the experiences of women refugees, the study also sought to examine from the key findings if women refugees are more vulnerable than other women. From one of the key informant interviews with an officer of

ARRA, the researcher asked the interviewee why there are no policy guidelines to address GBV, and the officer simply responded: “*Maybe because it is a woman issue*”

In view of the above, and from the key findings all women are vulnerable and when gender discrimination occurs it is not tackled by concerned authorities. However, as refugees have specific challenges attached to their status such as limited access to employment opportunities, impact of conflict/war experienced in their countries, inadequate knowledge about their new environment, less human agency and domestic pressures, the summation of all these factors contribute to increased vulnerability of women refugees. Furthermore, the researcher also tries to find existing linkages between women who experienced GBV as they journeyed to destination country, and continued reoccurrence or exposure to GBV, taking into account that some of the women arrived Addis Ababa unaccompanied.

### **3.1 Introduction**

Migrating to another country often results from persistent push and pull factors. This is often exacerbated by the recurrence of conflict and persecution in certain regions of Africa, which has contributed to the refugee crisis on the continent. Women on the other hand are often caught up in the middle of these conflict situations, and are exposed to different forms of violence, exposing them to GBV. This study looks at the vulnerability of refugee women to GBV in urban areas, in this case Addis Ababa persons of concerns (PoC).

In Addis Ababa, Eritreans represent the largest refugee population, being (79.1%), followed by the Yemenis at (8.4%), Somalis (4.4%), Great Lakes regions (GLR): Congolese (2.5%), South Sudanese (2.2%), and (3.5%) representing other nationalities. Insights from the interviews with the Eritreans reveals persecution relating to belief, and also less political participation space. The Yemenis was predominantly as a result of war. Nationalities from GLR Sudan and South Sudan were a combination of multiple push factors such as: civil war, and persecution. Populations represented by others includes citizens from Iraq, Syria, and Cuba. Which are also driven by war and conflict related issues. In general, it was clear that these groups of people were targeted or faced different situations of threat to their personal security. As such the decision to flee has merit attached to it. The researcher found the following key factors that made them choose to

come to Ethiopia: Historical ties; Geographic proximity; Assurance of personal safety and protection; and especially their hopes for resettlement.

Narrative analysis was used to explore in detail the information obtained from interviews with women refugee's victims and non-victims, ROV's, men including Community leaders, and interviews conducted with agencies such as: AUC, UNHCR, ARRA, DICAC, NRC, DRC, JRS and EWLA. Because of the sensitive nature of the topic, and with the intent to also get as much useful information, the interviews were carried out using structured questions to guide the researcher. Another key element of the interview process was to get as much information from ARRA, the agency mandated by the Government of Ethiopia to coordinate all refugee related processes with the UNHCR. In the course of the research, some data could not be validated due to reasons such as: a respondent had a poor mental health state, another expressed lack of confidence in the agencies poor handling of her case and one had the interview cancelled by her spouse.

### **3.1.1 Exploring Cases of GBV**

#### **I. Abuse by Family Members**

##### **a. Physical Violence**

A case reveals a Yemeni refugee woman, aged 51 years who lived in Ethiopia for 13 years and experienced physical violence from her husband. She is married to an Ethiopian man, from Tigray, and together they both have four (4) children. Due to constant abuse, mostly domestic violence from her husband, which she reported to UNHCR, to which no action was taken. It was then she took the matter to the police, and the police advised her that it is a private matter and must be dealt with at home. Because she reported, she said that her husband beat her on the head. Precisely, she said to the researcher: "I left Yemen because of war. And now I am afraid of my husband."

However, her ordeal began when her husband killed their eldest son. He shot him with a gun. Both her husband and son had a fight over money, which led to the death of her son. Following this incident, she decided to leave her husband. Her husband also threatened to physically assault her if she reported the fatality of her son. For fear of her life and safety, she reported the case to

the police and her husband was prosecuted. She told the researcher he is now out and threatens her because she reported him.

## **b. Sexual Violence**

Several respondents were subject to rape and violence by host community and fellow refugees, and many at the hands of their husbands and family members.

The interviewee, a Tutsi from Congo narrates how she had lost her parents due to the war in her home country. Her parents were killed when the rebels attacked her family home and burnt the home with her parents and her sister. At the time, she was sleeping over at her sister's home, and they had to run into the forest to escape similar fate. As a result of this, she had to leave her country with her sister, husband and their six children. Their journey to Ethiopia from Kenya was mostly undertaken by foot, walking long distances, a few times by bus if they are lucky. They arrived Ethiopia in 2012, precisely in Sherkole camp, in Asossa. According to her, conditions in the camp were difficult, which was made worse because of the lingering differences between the Hutus and Tutsi that led to her and her sisters' family being relocated to Addis Ababa by ARRA and UNHCR because of the tribal differences. But while they lived in Sherkole camp, she told the researcher that she was been abused by her brother-in-law, a fifty-year-old man, who she said raped her severally. This was the same experience she suffered back in her country, at the time she was thirteen (13) years old, and was been raped and abused by the rebels.

She told the researcher her brother-in-law continues to rape her. And her sister would always dissuade her from reporting, because they will arrest her husband and her sister worries about raising her 6 children alone. He would always over power her and then threaten to kill her if she should scream. She said that he would force himself on her, by forcibly tearing her underwear. She was also denied opportunity to return back to school by her brother in law, even though her name was submitted to DICAC for education support. According to her, this is what her sister said when she reported the abuse to her<sup>142</sup>: *“My sister, you must not report to ARRA or UNHCR. You must endure it. What will happen to us if you report to ARRA or UNHCR and they take away my husband? Who will protect us and take care of me and my six children.”*

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<sup>142</sup> Congolese refugee woman. 16 April 2018, meeting at 11:00 AM in Dabi Café, near UNHCR Bole office, Addis Ababa

Having had enough, during one of the family visit to UNHCR, she recently reported the case to UNHCR, and while in the office, her sister told her to say nothing about the incident with her husband. Her brother-in-law also spoke to her separately in their local language, where he also threatened to kill her if she mentioned the matter to the UNHCR officials. She continued to live in this abusive relationship until in 2015, she came in contact with another male Congolese refugee. And as their relationship grew, the victim informed the researcher that she also narrated her experience to the man. And the man proposed to marry her and promised to change her life by taking her away from her family. That was when her brother-in-law forced her out of the house.

Even as she no longer lives with her sister, she is still fearful of her brother-in-law, especially his threat to kill her. Which was heightened after she was attacked by some men that spoke her local dialect, which raises suspicion they were sent by her brother-in-law. She also told the researcher that her brother-in-law would often beat her sister. Regarding her case, she first reported to UNHCR because she wanted to know the proper reporting channel, and then UNHCR asked her to go to NRC. The thing about her story is how her requests for help from DICAC, UNHCR and ARRA has not met her expectations regarding her case. However, since her referral to NRC, there has been no positive follow-up yet. When probed further if she may know why her case has not received official response, the interviewee claimed not to know.

In order to access the health services, she would go to DICAC only when she has enough money. Regardless, she is not fully aware of the services available to her and by which provider or implementing partner. Which was why when her brother-in-law forced her out of the house, she did not know about the safe houses provided by UNHCR. However, officers from DICAC were able to support her get access to counseling sessions as a first line of support. On the other hand, she feels more secure and safe living in Addis Ababa, and would prefer to remain here than return back to the camp, as the camp is more difficult and she cannot work. Some positive aspects include she is been treated well and hasn't faced any discriminatory attitude by the community. She also has no fear in reporting cases with the police.<sup>143</sup>

## II. Abuse by host community members

### c. Sexual Violence

Eritreans are beneficiaries of the GoE OCP programme. However, being treated slightly different than other refugees, Eritreans also encounter the same challenges as refugees from other nationalities. The researcher interviewed a twenty-two (22) year old Eritrean woman, who said she had arrived Ethiopia three years ago from Eritrea. During this interview session, the researcher took support from an interpreter who assisted in translating from Tigrigna to English and English to Tigringa. The woman's husband lives in the Netherland, he too had traveled through Ethiopia to Sudan, and made his way to Netherlands from Libya. The main reasons for both their migration was because they are both practicing Protestant religion and were subjected to state religious persecution.

According to the lady, her husband had left earlier, and had asked her to follow, travelling through Ethiopia in order to reach Netherlands. For her she did not intend to end up in Ethiopia. On arrival, she lived in Mai Ayni refugee camp in the Tigray region, from where she left for Addis Ababa. She stated that her reason for coming to Addis was because her husband was processing the necessary documentation in order for her and her daughter to travel to Netherland. For this period, she was living wither her brother-in-law. This lady told the researcher she was raped by someone she could not see but assumes he is an Ethiopian citizen. She stated her closed her mouth with a cloth and raped her.

*“When my brother-in-law was not at home, and I was in the kitchen cooking. This was around 8PM. My daughter was watching the television. A man who was wearing a black cap came into the house, around St. Gabriel area. We didn't notice him coming. He took my daughter out of the house, closed the door and then he attacked me, and covered my mouth with something so that I cannot shout. I became unconscious and when I woke up, my daughter was on the floor crying. And I realized that I had been raped by the man, because all my clothes were gone.”*

As a result, I got pregnant from the rape incident, and I told my husband. This information however, did not go down well with her husband. He said that he does not want to be with her

and doesn't want the child either. And immediately ceased processing the documentation that would allow her and her daughter to travel to the Netherlands. She told her brother-in-law and he told her he does not care and asked her to leave his house. She didn't tell anyone else or report the incident because she was confused scared and didn't know who could help her, also because she overstayed her stay in Addis Ababa but does not want to return to camp.

The researcher wanted to know her reasons for keeping the pregnancy. In response, the interviewee said she did not know what else to do. *“It is not the child's fault. The man just attacked me, he covered my mouth with his hand, put something in my mouth, and I fainted.”*

Not only does she not have anyone to help her, her husband also stopped sending money for the upkeep of her and her daughter, and she lost contact with him. Furthermore, the researcher inquired about her status, and found out she only arrived Addis with a provisional letter from ARRA that stated she is visiting relatives in the city. This information means that she doesn't adequately fit as an OCP or Urban Assisted Refugee, given her reluctance to return back to the camp where she came from. She now she lives with another lady, whom she told the researcher was an old friend while in the camp and is the only one who can help her. In return she helps with the house chores. She narrated as follows to the researcher: “Since the event of that night, I am afraid to go outside.” *The reason for this is she is afraid it will happen again.*

### **3.2 Institutions for Protection**

The Administration for Refugee and Returnee Affairs (ARRA) is the government agency empowered by the refugee proclamation enacted by the GoE in 2004. ARRA has an overall mandate to manage the refugee operations in the country. Working with UNHCR, it also oversees the asylum programme with responsibility for services rendered to refugees. These services include social services, education and protection.

The GoE and the UNHCR in 2010 jointly developed a programme called – ‘Out of Camp Policy’ or OCP, which is a strategy by the Ethiopian Government targeting Eritrean nationals which allows them to leave the camp on the understanding that they will be able to provide for their own survival. It is however, important to note that the assistance to beneficiaries of the OCP is not adequate, even as there is a tendency for them to not have their needs sufficiently covered. Refugees from other nationalities not accorded the privileges of the OCP programme from non-



African states and Yemen are also under the Urban Programme with the permission of ARRA. They include refugees in need of special medical attention that are not available in the camps, some refugees have security challenges requiring protection, or inability to stay in camps. The urban program is designed to allow the vulnerable groups to take up residency outside their camps on grounds of health, protection and for education purposes.

Besides management of refugee affairs, ARRA collaborates with the police on wider protection issues. Most notably is the role of the police in carrying out investigations on reported cases. When refugees report their cases to ARRA, it is the responsibility of the agency to notify the police for necessary follow up. However, this study will be focusing more on the existing gaps as highlighted by the women refugees on how the police fails to carry out its duties of protection to refugees.

Information obtained during the interview with key officials of agencies, estimated total population of about 20,398 including OCP refugees living in Addis Ababa. From the total population about 4,000 urban refugees non OCP, are entitled to receive various kinds of support under the urban assisted programme from the GoE and the agencies. This support includes services such as: health, education, financial and material support such as blankets, and food essentials. UNHCR for refugee operations are primarily focused on protection measures. Protection officer with UNHCR provide more information on the available services for refugees and her role in ensuring they are able to access them:

*“My major tasks include overseeing all interventions for the refugees in Addis Ababa, which basically includes access to services. Monitoring if they are able to access all services because services like education and health is administered through the national systems and then also their legal and physical safety if they are able to get access to police and the court”<sup>144</sup>*

The researcher was able to speak with a senior protection officer, gender and child protection of ARRA. The officer provided the following information on duties performed and how the agency

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<sup>144</sup> UNHCR Protection Officer, Meeting at UNHCR Bole, Monday 9th April 2018 9:00 AM

works: *“We are mandated to work on any issues regarding refugees, just with UNHCR and other agencies working on refugees<sup>145</sup>”*

In order to be eligible, refugees have to apply for a pass permit which would enable them travel to Addis Ababa. As mentioned by the senior protection officer, gender and child protection of ARRA relating to protection of refugees: *“We have referral mechanism between us and UNHCR as an implementing partner, if they refer the case to us we will refer them to the police and will follow the case with the police<sup>146</sup>”*

Both ARRA and UNHCR, play complementary roles in ensuring refugees access to services. It is important to state that these services are determined on certain conditions, e.g. health services that are unavailable in the camps and for protection reasons: when a refugee is faced by a threat to their personal security and for education purposes.

While speaking with the senior community-based protection associate, working with UNHCR, as he shares some perspectives with the researcher on procedures taken by UNHCR for refugee referrals. From his main tasks of providing basic protection, identifying cases which includes SGBV, and counseling services for victims provides useful insight on the referral system especially on the reasons and procedures for refugees: *“...refugees are supposed to come to Addis if they have referral paper from UNHCR and ARRA from the camps. And if they have that referral granted to them they either have medical or protection concerns<sup>147</sup>.”*

The ARRA, UNHCR and the police remain the essential safety nets for refugees in urban areas, most especially for women refugees. The role played by these two institutions is critical in the next steps that lead to victims of GBV getting justice and assurances of safety from wrong committed and protection from future occurrences. The next section would examine the observed gaps and how it impacts upon women refugees.

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<sup>145</sup> ARRA Gender & Child Protection Officer, Meeting at ARRA, Monday 16th April 2018 10:00 AM

<sup>146</sup> Ibid

<sup>147</sup> Senior Community-Based protection Associate, Meeting at UNHCR Bole, Friday 6th April 2018 11:00 AM

### 3.2.1 Refugee Lack of Awareness

The women interviewed by the researcher lack knowledge of existing structures of protection. Most refugee women who seek protection approach trustworthy community leaders who later refer them to UNHCR.

In Addis Ababa, according to interviews and focus group discussions carried out during the course of research, it has been established that all refugees are accorded the same rights. Therefore, in this case; Addis Ababa has the legal duty for ensuring these rights are not violated. Lack of awareness of women refugees' rights has however, increased their vulnerability. Refugees have rights to education, health care services and protection and many were unaware.

Furthermore, the police thought that women refugees who report their cases should be serviced by ARRA. The difficult position of women requires special attention of actors in the protection system. A major development challenge is to support the protection and recovery of GBV survivors. Although the UNHCR works towards ensuring refugee women have equal access to protection, material support and services, female refugees are faced with difficulties in accessing the host government' social services.<sup>148</sup> In a destination country refugees need to re-establish security by understanding the structures that act upon them and the level of agency they can achieve.<sup>149</sup>

In addition, due to the absence of material and social resources, women refugees are often severely restricted in their opportunities to develop sustainable livelihoods as well as social and individual integrity. The environment a women refugee lives, can also determine how she relies on others in ways that makes her increasingly vulnerable to violence. For example, if she is no longer able to contribute to the family income, she becomes dependent on male support, increasing the likelihood that she will endure abuse in order to meet her needs, or engage in survival sex.

Awareness is a fundamental aspect for the management of refugee services. In one of the key informant interviews, it was highlighted that due to budget constraints refugees are now been enrolled at the public health facilities. This change also was frowned at by the refugees, whom

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<sup>148</sup> *Supra note 7, pg.3*

<sup>149</sup> *Supra note 19 pg.12*

are already accustomed to the services of the private health facilities. Notwithstanding the impact of attitudes, it is essential that refugees are made aware of the full range of services available to them, especially the vulnerable groups and those in emergency conditions.

## I. Access to Health Care Services

Nonetheless, access to health services provided by DICAC was an area of concern for all nationalities. DICAC is a charity and development organization which has been providing social services for urban refugees. The type of service provisions for urban refugee by DICAC include awareness raising, counseling, youth education, medical care, social networking and vocational trainings. Services provided in ensuring the health of refugees include access to public hospitals, reproductive health services, and counseling (psychosocial assistance) and these health providers collaborate with DICAC.

The main challenges raised by refugee women are not adequately being able to access health services related to lack of information on how to access health services and communication; language barriers making it difficult for women refugees to communicate with medical staff. Delays in getting treatment arising from the long queues at national health institutions (The Black Lion Hospital, Ammanuel Hospital, Paulos Hospital and Tena Tabya), the lack of prescribed medication in Ethiopia and the use of generic rather than “brand” medications. Refugee women stated that they were discriminated by DICAC in responding to refugee health issues and neglected by officials working in public hospitals. Moreover, delays by the DICAC ambulance in reaching critically ill patients was also a major concern by the women. Pregnant refugee women also reported being denied access to ambulance services. This as explained by the respondent is because of their status as refugees, they are given less priority. *“I was giving birth and was told to arrange my own transport and will be reimbursed, when I got to the hospital they did not pay me back”*<sup>150</sup>

### 3.3 Reporting GBV

Most of the women refugees interviewed from the different nationalities acknowledged that they did not know clearly how to report cases involving GBV, or were afraid to report any incidents due to language barriers and fear of stigmatization by their communities. From the various

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<sup>150</sup> Yemen Refugee FGD, JRS 7 May 2018

discussions on this subject matter of GBV, it was apparent that many of the refugees either do not have information on how to prevent or respond to issues pertaining to GBV. This is due to being restricted by their cultural norms and practices in reporting such issues. As a result, GBV is still underreported by the Addis Ababa women refugee population. The majority of respondents stated they do not leave their home in the evenings due to the fear of GBV. Results from FGD indicated women are vulnerable to GBV, and others hear stories of women facing GBV.

Key informants stated that and based on the Participatory Assessment (PA) Exercise carried out in 2017 with Refugees Living in Addis Ababa, some communities were not willing to discuss GBV as area of concern (mainly Somalis and Yemenis). This is linked to the conservative nature of their societies.

The refugees from the GLR and Eritrea stated they are involved in informal work such as domestic work and many stated they face issues of GBV when they work in various homes as domestic help. They stated that they fail to report these issues either due to threats from the employers and due to stigmatization. In addition, refugee girls and adults from Burundi and GLR see GBV occurrence as one of the misconceptions of society to the widespread practice of survival sex and prostitution by women who are trying to meet their basic needs.

Respondents from all nationalities did acknowledge the existence of some level of domestic violence within their communities. They linked this to stress arising from the high cost of living and the need to cater for their families and some level of alcoholism in the community (mainly Great Lakes, Somali, Yemen and South Sudanese refugees). A concern raised by the Yemeni women aged between 18-40 years stated she has faced inappropriate physical contact and verbal abuse perpetrated by the staff of some of the service providers.

### **3.4 Linkages between Underreporting and Consequences of Reporting**

Stigmatization attached to GBV accounts for one of the major reasons of under reporting by women whom have experienced GBV. Other reasons include fear of retaliation especially when locals are involved or blamed by the community. Cultural barriers and threats were also of great concern to many and the risk that someone in the community could disclose their experience to others as it involved a women's honor and dignity. In some cases, police asking victims to bring

a witness and consent that should be given by the survivor to refer the case through the UNHCR when possible have contributed in low levels of reporting.

### 3.4.1 Inadequate Reporting Mechanisms

Interviews with key informants stated that GBV reported cases are comparably low. The lack of reporting was an indicative gap when it came to accountability and this is an inadequate system of protection for women.

UNHCR Community service officer while sharing a point on why it appears GBV maybe underreported had this to say: “*SGBV is underreported because of fear of discrimination issues, for the last year we have about 41 cases, we only have 25 new cases, 21 of them are female 4 are male*”.<sup>151</sup>

Findings from the interviews conducted with key informants in relation to their operations shows a linkage between lack of employment opportunities which tends to increase the domestic tension between husband and wife. There has also been reported cases of alcohol induced violence, as the husbands resort to drinking habits. In the absence of adequate support structures for women, there is the tendency that they feel less willing to report their cases to the police or agencies because of the deficit of trust in institutions. This also includes lack of trust in the reporting process or agency. Moreover, when women reported to agencies such as UNHCR, the traditional mechanisms of justice were first used. This involved bringing the community leaders and elders together to try and solve the issue. Lack of information was also reported as a major reason. Women refugees were unaware of services provided to respond to GBV. Most of the respondents were not aware which agency to report to and usually go to a wrong agency and are referred to the police or ARRA.

One unique system deployed by the GoE is the GBV-IMS system used for the identifying and collection of data on GBV. It has been successfully deployed in the regions, however, the GBV-IMS is yet to be deployed in Addis Ababa as it is a phased approach. While speaking with a Senior Protection Officer from UNHCR the following information was extracted: “*UNHCR does not manage Gender Based Violence IMS (Information management System in Addis context*

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<sup>151</sup> *Supra note 155 pg.62*

*yet). Case management is done with cases that come through and they are later addressed, with different partners''.*<sup>152</sup>

A cross-section of the men interviewed reveals that some of the men in the community are also aware of the incidents of GBV. A few acknowledged to have witnessed it in the past and voiced their concerns including expressing that they will support women in reporting GBV. The study did not actually identify any case of a victim actually being supported in the reporting process by any male member of the community. But the findings from interview with community leaders and elders highlighted there is an awareness on the issue and community members are making use of traditional means to resolve them, which includes bringing issues to the authorities and facilitating sensitization in local languages.

### **3.4.2 Lack of Faith in Assistance Providers**

Refugees are perceived to have experienced many difficulties such as language, cultural factors, as well as not enough information on the pathway to access support from service providers. The weakness in the administrative structures that provide pathways to the support mechanisms was identified as a limiting factor from this study. As a result, it contributed to several women choosing to not report their cases or experiences to the authorities. In addition, the study found the multiplicity in the process to accessing services another challenge that inhibits women. For instance, when women refugees take a case to UNHCR, they may be asked to go to ARRA. However, if they approach ARRA, there is a tendency to be redirected to another agency. Several women refugees also had decreased utilization of the health care, others for example a refugee from Burundi shared her experiences and perceptions regarding health care services and the implementing partners:

A 39-year-old refugee woman from Burundi, who has been living in Addis Ababa years told the researcher her story and the struggles she has been through in Addis Ababa. The 39-year-old came to Addis Ababa with her husband for health reasons from Sherkole Camp. Her husband suffered from heart problems and was transferred to see a heart specialist. She however lost her husband in Addis Ababa. She told the researcher that DICAC insisted to take him out of the ICU

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<sup>152</sup> UNHCR Senior Protection Officer, UNHCR Bole, Wednesday 21th March 11:00 AM

from the private hospital (Korean Hospital) because it was expensive and they moved him to a public hospital (Black Lion Hospital), during the process her husband passed.

*“DICAC are bad people, they killed my husband. One of the patient in the hospital, a woman and she is Ethiopian told me she heard the doctors speaking in Amharic. They said that my husband did not die because of his sickness, but because they moved him from ICU. DICAC also gives gave me expired medicine for my own sickness.”*

In evaluating this case, the researcher tried to consider the different scenarios that may have led to the death of the lady’s husband. Perhaps the health condition had attained a critical level, and she was grieving the loss of her husband or even the fact that there were insufficient funds from DICAC. Regardless, as a service provider, the responsibility of DICAC is to approach the woman, and explain the situation to her, as well as present available options to her.

## 3.5 Institutional Failures

### 3.5.1 Limited Investigation by the Police

As far as Article 22 of the refugee proclamation 409/2004 is concerned, the GoE has the responsibility to ensure adequate measures are taken to ensure the protection of vulnerable groups i.e. women, children, the elderly and disabled. In general, most of the interviewees reported apathy on the part of the authorities towards their case. Specifically, there is a clear misunderstanding between the authorities in dealing with cases of refugees. There is therefore an increasing lack of confidence from refugees on the capacity of the authority to provide the necessary support. At two different occasions, in interviews conducted with Somali and Yemeni refugee women, shows a sense of apathy from the authorities. In this case the police, indicative of a lack of understanding on their duties towards the protection of refugees as stipulated in the FDRE Constitution and refugee proclamation 409/2004. The respondent from Somalia narrates her experience of domestic violence, and how the police have been unable to assist her.

*“My Ethiopian husband beat me often. He says my eldest daughter is not his child, because she is from my late husband. My daughter suffers psychologically, and even tried to commit suicide after witnessing how he*



*beats me. I reported him but nothing happened. I got divorced through the court, but he still threatens me. Again, I reported the case to the police, but the police informed me that no one can help with my case because my husband's family will always bail him, because he is Ethiopian. The police told me we cannot help you, go to whoever sends you to us let them help you, because you are a refugee."*

Another Yemeni woman refugee narrates her ordeal in the Merkato area where her bag was stolen. The area is notable for such nefarious activities. However, the response from the police again demonstrates the lack of understanding in dealing with refugees. *"My bag was stolen around Merkato and when I reported to the police, he asked me and my female friend 'who told you to go out in the evening?'. The time on that day was 7:00 PM, I told him we are refugees but he didn't show concern"*

In view of the above stories, UNHCR protection officer, shared the following insights:

*"When it comes to reporting cases to police, we understand that there is gap as the police does not understand the issues of refugees. Many of them (refugees) say police tell them, we are only here for the Ethiopian nationals. They don't understand that for refugees in Ethiopia, the Government has a responsibility to protect them (refugees), e.g. if a refugee goes to report something to the police, the police directs them to ARRA. Yet it is the police that is responsible for investigation and other functions. These are some of the gaps we have noted..."*

This coming from a protection officer, corroborates the story as captured from the interview above with the Somali refugee the researcher interviewed.

The Refugee Proclamation No. 409/2004 of Ethiopia; guarantees the right to freedom, safety and security. *"Every recognized refugee shall: be entitled to other rights and be subject to the duties contained in the Refugee Convention and the OAU Refugee Convention"*. Article (22) states the: *"Authority shall take measures to ensure the protection of women refugees, refugee children elderly refugees and handicap who needs special protection"*. In this case however, this has resulted in female refugees being denied their rights; the right to security which makes them

vulnerable to GBV. This includes the right to be free from different types of violence performed by private or public actors and not to be punished or treated in a degrading and inhuman way.

## 3.6 Allegations and Other Forms of Abuse

### 3.6.1 Allegation of Abuse Leveled on Officials of ARRA

War was the main reason that forced this woman to leave Yemen, her country. She arrived Addis Ababa with her son, in May 2015. Getting this woman to speak with the researcher was very difficult. Eventually, when the interview was conducted, the first words from her are as follows: *“Life in Addis Ababa is very difficult for me.”*

The woman further confirmed her status as a refugee since she has carried out necessary registration with ARRA and then UNHCR. In addition to leaving her country because of the violence, she told the researcher that she also converted from Islam to Christianity. This act on her part, exposed her to persecution. She said that: *“I cannot go to the church or practice Christianity because it is not allowed. I lost all my friends. Even my husband used to beat me.”*

According to her, the full knowledge of her bitter experiences was made known to her when during a workshop that was held in Addis Ababa, one of the facilitators showed a video, depicting how women are abused, this included rape, then she related it to what had happened to her. She further recalled, how in Yemen she was abused in her work place. Desperate for help, she approached a Houthi man, who lives near her, in company of her friend to assist her in dealing her issue. But the Houthi man ended up having sex with both her and her friend. At this point, she was helpless, because the man is a famous Houthi and could also kill her and her friend. She and her son were also threatened, and that they would give her son a gun and make him fight. *“I came to Addis Ababa to start a new beginning.”*

The interviewee opened up at the end of the interview, and explained how on arrival to Addis, not knowing where to get help, she approached officials at ARRA, seeking resettlement. But the officers promised to consider her for resettlement if she would offer her body in return. Thus, according to her, she was abused by an official of ARRA.

## **3.7 Emerging Challenges to Living in Urban Areas**

The experiences of women refugees in Addis Ababa raises issues of concern, that shows how some of the government structures have also failed in guaranteeing the rights and protection of urban refugees in both categories of OCP and urban assisted. Some of these women refugees, rely on the closeness to the agencies and service providers for increased access, and response to their cases. Information from interviews shows evidence of vulnerability of women refugees to GBV. Even the GoE National Refugee Strategy for Prevention and Response to Sexual and Gender based Violence (SGBV) recognizes that meaningful participation in programs of women and girls is limited in the country operation.

### **3.7.1 Living in the City Outskirts with no police protection**

The limited prospects of self-reliance opportunities in view of the rising cost of living in Addis Ababa makes it more difficult for refugees, especially women to support themselves and their children. Again, considering the high number of women refugees who arrived Addis Ababa unaccompanied, which increases the burden on them. All of the interviewees raised this issue of high cost of living in Addis Ababa as a major challenge. In addition, high cost of living, high rents has also made it more difficult for refugees to access necessary support.

For the men, they are mostly involved in informal work. Women refugees need to stay home and bear the children, and tend to the needs of their family. However, in a situation where the roles is not just reversed but the woman has to at the same time engage in informal work and tend to care giving increases the pressure and expenses within the available resources

Findings from the participatory assessment conducted in August 2017 carried out by the UNHCR with the refugees reveals the lack of self-reliance opportunities as the major root cause of their protection challenges. The aim of this activity is to understand the opportunities and challenges refugees living in Addis Ababa experience and to encourage periodic feedback with the agency.

Living in the City Outskirts presents emerging challenges to refugees, women in particular. This has also widened their vulnerability to GBV, as some of the interviewees also stated they have been victims of attacks from the local community. For example, is an incident of a woman that

was raped while going to an early morning church activity. Women refugees, whom are also in Addis Ababa with their children face different constraints as they live far from the city. As most of the services are also scattered across Addis Ababa, accessing health, education, and in worse cases reaching appropriate authority for protection issues has been a challenge. Moreover, refugees find accommodation facilities by themselves with no support from the agencies, over the years, refugees are unable to access affordable housing within the metropolis. This has led them to seek accommodation in the outskirts of the city.

In one of the interviews, the respondent shared her experiences to access support from the agency:

*“My home is in Arafat (after Summit). However, I intend to leave the place, because schools are far for the children and expensive to move to the DICAC office.”*

*“I have to pay double price at the market including the house rent, it is increased because I am a foreigner. The process of registration at UNHCR protection reception is lengthy, and also the officials have no concern for the distance where I come from, and the cost. UNHCR, ARRA and implementing partners are very far from where I live.”*

Given that the respondent also has a family of 3 to support. As a refugee under the urban assisted programme, she narrates how she still faces considerable challenges in given the amount she receives from DICAC, currently at 2,700 birr, out of which she has to pay her rent of 1,800 birr. Furthermore, the interviewee stated she has limited knowledge on the full range of services available to her, and insists the bureaucracy in ARRA as a factor to her lack of information.

### **3.7.1 Livelihoods**

As indicated in the refugee proclamation 409/2004, refugees are not entitled to engage in any formal employment. Most refugees could not afford rent since many are not working and housing in Addis Ababa is expensive, nonetheless the assistance allowance received from UNHCR/DICAC is very little. Due to this some refugees co-share with other refugees in order to be able to cover other expenses. It is pertinent to note at this point how some of the women interviewed stated that their allowances are very meagre in contrast to the increasing cost of living. So those who are able to co-share still needed additional source of income and some are

considering relocating to the outskirts of the city, which introduces another dimension to them being vulnerable to GBV. Other live in cheaper areas that are unsafe and in some cases both women and men live together. In the extreme cases, some women refugees and their families were commonly evicted by their landlords because the landlord wanted higher rent on the premise that they are foreigners, or simply because the refugee could not pay the house rent on time due to the delay in payment of allowances from UNHCR and DICAC. Most refugees get allowance based on the number of family members and this ranges from 2000- 4000 birr for a family. A few others explained they are subject to exploitation, such as landlords demanding sexual favors in return.

A refugee from South Sudan was evicted by her landlord because she could not afford to pay the rent: *“I live here by myself in Goro (Megananga area) because my daughter has to go to school. My assistance from UNHCR is 3000 birr and I pay 2000 for rent only. I do not have enough for other expenses<sup>153</sup>.”*

This further indicated the large presence of single female headed households among different communities which is one of the main reasons for feeling insecure in Addis Ababa. The significance of this situation goes to highlight a major issue of concern. Which is that most of the women refugees arrived Addis Ababa without a male companion and this in itself is a ground for the women’s exposure and vulnerability to GBV, from the community or fellow refugees. A good number of these women are from the GLR and South Sudan, regions that have witnessed some of the most devastating violence and war, with men and boys either killed or conscripted into the army.

### 3.8 Cultural Issues

Concern for the health of women who have suffered from GBV is a major issue. Some of the reasons why women refugees fail to report is due to fear of stigmatization from their community, and cultural barriers. Culturally, communities that tend to be more closed due to religious and traditional values, have seen less reporting from the women refugees, while enabling the perpetrators of these abusive practices to continue to perpetuate gender-based violence, causing their actions to constitute gross violations of human rights, as well as violations of the laws of

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<sup>153</sup> South Sudanese Refugee, JRS office, Addis Ababa 11.00 AM

Ethiopia. Some of the women also have high dependency on their husbands. Some of the victims consider reporting as bringing dishonor to their family. Therefore, the most appropriate way these issues are dealt with is traditionally with the involvement of the community.

On the other hand, language barriers represent another challenge that inhibits the ability of women refugees to report and seek redress to their issues. Oftentimes, the entire process of reporting breaks down because the victim is unable to communicate to the authorities, and the authorities on their part lack the support of qualified translators to understand the challenges of the women. Thus, this ineptitude pervades across board, and usually translated as a hopeless and helpless situation by the women refugees, hence their growing frustration and lack of confidence on the part of the authorities, especially the police to intervene in their issues.

While speaking with one of the key informant, a protection officer with UNHCR, the officer had the following to share with the researcher:

*“...also language barriers for some of the communities, other than the regions hosting refugees for culture and some linguistic ties, the other refugees report a lot of challenges due to language as many of them don't speak or understand Amharic so when it comes to reporting an issue there is no translator provided by the authorities that can understand or speak their language and if they cannot then get someone to speak their local language they feel that they cannot then present their issues.”*

However, the recognition of an existing problem cannot be seen as a substitute for durable solution. Tackling the gaps as a result of culture and language holds wide reaching benefits for the refugee operations and administration in Ethiopia. Therefore, this study recognizes the opportunities for improving the preventive approaches been deployed, enhancing the response from the authorities and adjusting the behaviors and attitudes of refugees that can be gained from dealing with the gaps that result from culture and language challenges.

### **3.8.1 Community Acceptance and Integration**

Cases from women refugees reveal their vulnerability to GBV. The interviewees spoke of their experiences, particularly relating to GBV in Addis Ababa. The women expressed struggles

ranging from high living expenses, to the carelessness of authorities, and oftentimes challenges to being accepted by the community because of physical attacks such as beaten, verbal abuse from refugees, local people either at public spaces such as the market or in public transportation. Most of the refugees from GLR and Burundi spoke of discrimination by Ethiopians in form of name calling. However, there is a remarkable contrast in how refugees from Eritrea are being treated. The women that were interviewed did not report any case of discrimination. This study however attributes this disparity in reception to the seeming resemblance between Eritreans and Ethiopians which makes their integration relatively easy.

A 39-year-old refugee woman from Burundi, who has been living in Addis Ababa for fourteen (14) years told the researcher struggles. She states that in the taxis she usually gets discriminated, and is told to pay more because she is African and usually gets called names in Amharic and being told to go back to their country. She once had an argument with a Bajaj driver because he tried to take more money from the above the actual fare. When she protested the unfair treatment, he beat her in the street. She wanted to pick a stone and hit him back but people in the street stopped her. She did not report to UNHCR because according to her, they will do nothing.<sup>154</sup>

The interviewee from Eritrea told the researcher that life in Addis Ababa is so hard for living but it is better than the camp. She explained her experience with her neighbor and his wife both Ethiopian nationals. She narrated how both the man and his wife physically attacked her by holding her and beating her down for spilling water outside her home. When she reported the case to ARRA they told her they can't do anything because she fought back and the police only gave him a warning.<sup>155</sup>

She also told the researcher there were times when the owner of where she stayed tried to open her room door while she slept, noting how this had happened for three consecutive days. Going by their awareness that she works in a bar. They would always follow her and demand for sex. According to her, being a refugee woman and faced with limited economic opportunities often exposes one to take certain decisions for survival and many take advantage of it. This scenario

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<sup>154</sup> *Supra note* 149 pg.60

<sup>155</sup> The Eritrean Refugee left her country because she was in jail for being a protestant. She got out of jail because of health issues, and went to Sudan with her boyfriend. Her boyfriend died in Sudan and she went back to camp in Ethiopia where she fell sick because the climate was not good. She came to Addis Ababa with her friends from the camp.

however makes it a difficult task to determine if the decision when translated to consent leads to vulnerability or the perception going by the respondent's engagement in survival sex.

Another refugee from Somalia told researcher that the camp was better for them because they had food rations and other services and did not face any kind of abuse. This family came to Addis Ababa because of their father's health. According to her, being part of the Mitgan tribe, is a constant struggle for acceptance among the Somali community because of their tribe<sup>156</sup>. *“Even after we arrived in Addis Ababa, Somalis in our neighborhood fight with us because of our tribe. We talked to ARRA about it but they didn't do anything they just told us to move and live somewhere else.”*

The family allowance from UNHCR is 4000 birr per month, and the house rent is paid at 3000 birr per month. DICAC pays 200 per month birr to her younger siblings to attend the schools, however, the family has to pay the 1000 birr per year for their school fees. To support their livelihood, her mother secured a loan of 5000 birr from DICAC. Her mother now makes homemade perfumes, which she sells in the streets to the host community and Somalia refugees. As a repayment plan, DICAC deducts 300 birr every month from the family allowance. This is expected to run until January 2019. Even though refugees are entitled to apply for loan, due to the sample size of women refugees interviewed, it would not be representative enough of the population to determine the number of loan applicants, vis-à-vis loans granted and those declined.

Her first experience to GBV was from the host community. While she was helping her mother sell perfumes in the street, a stranger physically abused her by beating her in broad daylight for selling in an area that she is not supposed to be because it is for only other sellers. Ever since that incident occurred, she and her sisters are all scared to go out. She reported the case to the police and they asked her to bring a witness, which the family was unable to do, because no one would want to be a witness. Nothing was done by the police about her case. However, after examining

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<sup>156</sup> The refugee woman told the researcher she is the first born of her four sisters. She moved with her family to Addis Ababa 8 years ago because of lingering tribal differences. In Somalia, her tribe, the Metgan is been persecuted by the rest of the tribes in Somalia. The war has cost the lives of her family members. She narrated how in 2015, the UNCHR rejected their case because they were told they do not look like they are from Metgan. They came to Addis Ababa because of their father's health. Since moving to Addis Ababa, she told the researcher that they only get assistance from the agencies like DICAC whenever their father got sick, DICAC would send an ambulance.



this incident further, the researcher was able to come up with the following assumptions: the general apprehension of the local population to police cases, or the low awareness on issues of refugees and how community should offer assistance when possible.

Refugee women avoid walking at night alone: *“We avoid walking at night alone... if we had to walk at night we need a male to accompany us... we are scared”*<sup>157</sup>.

### **3.8.2 Dealing with Abuse by other Refugees**

In most cases, male refugees abused female refugees. A refugee from Burundi told the researcher her story which after her husband passed away, she was exposed to abuse, sexual harassment and threats from some of the refugees from Congo. This was linked to possible resettlement of some of them in America, they promised to take her with also if she does what they demanded from her.<sup>158</sup>

Another case involves a Yemeni refugee who got abused by a male Yemeni refugee. She explained it happened as she was waiting for her turn in DICAC after she waited for hours. The Yemeni male refugees were bribing others and allowing other refugees to cut through the queue.

*“It was my turn and I told them it was my turn. He lifted his hand to hit me. He told me I am not allowed to enter and blocked my way. He tripped me and I fell. I was pregnant and he kicked me. I lost my baby because of him. It was because I am a woman, which is why he treated me that way.*

She reported her case to UNHCR protection but according to her nothing happened.

### **3.9 Exploitation and Survival Sex**

A major problem was sexual exploitation of refugee women either by house owners or by fellow refugees. As a result, several women had to resort to prostitution as a means of living.

While interviewing a Congolese woman refugee, the researcher got to know about her entitlement from DICAC. According to her, she is paid a total of 463 birr monthly. Which is not enough for her house rent. Because of this, she is living with another refugee woman, whom she

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<sup>157</sup> Somali refugee woman. 21 April 2018, meeting at 10.00 AM, Nati Hotel, Bole Michael, Addis Ababa

<sup>158</sup> Supra note 149 pg.60

pays contribution to for the accommodation. She is now engaged in survival sex as a means to take care of herself, here in Addis and has not revealed the nature of her job to the authorities, her husband or the woman accommodating her. Unfortunately, in addition to been exposed to risky sexual behavior, due to the nature of the job she is doing, she once lost a pregnancy, and has engaged in unsafe abortion. But she told the researcher the abortion was because the baby was for her brother-from her brother in-law. *“I suffer from abdominal pains for no reason. I am unable to sleep properly at night. And many times, I urinate in bed without control.”*

She is still not sure why her status has not been elevated by the authorities to refugee, as her ID still places her as an asylum seeker. Having spent four (4) years in Addis Ababa, her major concern is for a better life, first by discontinuing the survival sex job. Which she finds very disturbing, since she does so without the awareness of her husband. She even suspects the prolonged itching she is experiencing to be from her engagement in survival sex. *“I want to have a better life. I suffer much because of this survival sex I am doing. I sleep with men to get money. Sometimes I have itching. And I have a lot of sickness which I don’t understand. I want UNHCR to help me stop this job”.*<sup>159</sup>

Also, one of the refugee women that was interviewed, a Burundi national, lives with her three daughters and twin sister. The eldest daughter got pregnant after she was raped here in Addis. The family decided to abort the pregnancy, during which her daughter lost a lot of blood. What worries her the most is that her two daughters are now into active sex work, as a result of the high cost of living. She reported this to UNHCR and nothing was done to support her family. She says: *“The girls do not listen to their mother and I cannot control them. I want UNHCR to help me stop them. It is during the day when they go out to do these bad things because they want to collect money. They don’t go to school.”* <sup>160</sup>

As narrated above by the interviewee, the story makes a case for adequate support to refugee families to some minimum standards that also enables the parent(s) to practice good parenting and provide good morals for their children.

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<sup>159</sup> Congolese refugee woman. 16 April 2018, meeting at 1100 AM in Dabi Café, near UNHCR Bole office, Addis Ababa

<sup>160</sup> Burundi refugee woman. 3 April 2018, meeting at 1100 AM in JRS, Addis Ababa

### 3.10 Exposure to Other Forms of Disease and Health Challenges

War was also the main reason for the 18-year-old lady from the Nuba tribe in Sudan that was also interviewed by the researcher. She lost her family during the civil war. At the time of the interview, it could not be ascertained how the impact of war has affected the life of the young refugee woman. It was also not apparent as to her state of mental health. Information from this session reveals that the refugee woman is currently living in the street, perhaps this account to why she has been raped by individuals from the host community. She stated that she doesn't collect her allowances. Because of what happened to her she now drinks and does drugs and lives on the street. She recalls having lived in a UNHCR shelter home several times but at some point, was asked to leave as there is no use for her.

Another case reveals how a victim was depressed after informing the researcher she was raped. The Somali refugee from Hargessa to the researcher stated: *“The life I am living in Ethiopia, even the poorest person in Somalia does not live it”*.<sup>161</sup>

The victim showed the researcher a photograph of how her ex-husband had permanently bruised her by repeatedly punching her on the face with his hand. She stated this had happened in broad daylight and even people in the street saw him do that. She mentioned he repeatedly beat her that at one point when they went to bed at night he attempted to choke her, and tried to kill her.

The Somali refugee told the researcher that her eldest daughter tried to commit suicide several times after seeing how her step father beats her mother. Her daughter now has psychological problems. He also used to beat her daughter by kicking her on her kidneys, when the mother was away.

The Somali refugee woman also narrated to the researcher how she was at a wedding function, but recalls waking up to find herself naked in a hotel. Maintaining she was drugged, and certain it was perpetuated by her ex-husband whom she suspects hired people to rape her. She became pregnant as a result of the incident. The researcher tried to find out why she kept the pregnancy and she stated she is a Muslim and it is haram to have an abortion and it is not the child's fault.

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<sup>161</sup> After escaping from war since 2008, she explained the struggles and challenges she faced in Addis Ababa. The Somali refugee lives in Addis Ababa with her three daughters, and is currently separated from her Ethiopian husband due to abuse. She has been married since 2013 and divorced in 2016. She explained the reason her husband was beating her is because her first daughter is from her first husband who passed away.

She didn't even know she was pregnant until her belly started showing. The shocking part is her unwillingness to follow up with a hospital on her pregnancy because of shock and not wanting the baby. She only reported to a female protection officer at UNHCR and still nothing was done about her case but was told not to abort her baby. She now wears the Niqaab (Burka) not because of religion but because she is afraid of everything she has been through including stigmatization and her husband who threatens her as well as her family, and community. She told the researcher she is not safe. *"I am only telling you about it because you are a woman like me. It is a taboo to talk about such things. It is not halal."*

She explained to the researcher that she does not want to go to counseling because she does not want to remember what had happened to her. As a result of her experiences and the constant fear of her ex-husband, her state of mental health has been affected. She confessed to the researcher that sometimes she contemplates about ending her life.

### **3.11 Impact of Non-response from Police on Judicial Procedures**

According to Article 9 of the Criminal Procedure Code of Ethiopia 1961, the duties of the police are as follows:

- preserving the peace and preventing crime;
- discovering the commission of offences;
- apprehending offenders; and
- Prosecuting offences when members of the police are appointed as public prosecutors.

By the provisions of the Code, the role of police in maintaining law and order, investigation, carrying out arrests and prosecution is vital. Therefore, refugees are entitled to the full protection and services of the police authorities in all matters related to their stay and residence in accordance to Article 16 (2) of the 1951 Convention. The Constitution of the FDRE remains the fundamental law of the country and Article 9 (4) declares all international agreements ratified by Ethiopia are an integral part of the law of the land.

In this regard, the police authorities in Addis Ababa should perform their duties by providing women refugees with security and policing services, including following up with their cases. During the course of this research, the researcher found that none of the women refugees recalled

any special intervention by women police officers to their case. Based on the findings, the Police state that ARRA is responsible to the refugees. However, it was also found the women refugees felt the police authorities are not paying attention to their security challenges, which has resulted in lack of confidence in the system or unwillingness to report.

As a result of this, ARRA, the UNHCR or the NGOs has remained the point of contact by women refugees for security issues. At best, some of them do not even report. Contributing to some of the reasons why abuses persist. This lack of understanding by the police authorities on the needs of female refugees is a major setback in implementing the provisions of Article 22 of the refugee proclamation 409/2004.

## Security

The women refugees can only resort to the police only if protection is guaranteed. Nonetheless, there are several accountability issues that deter the reporting of cases. All nationalities indicated that due to racial and linguistic barriers, they were unable to report effectively whenever they had protection concerns or incidents within their communities. They raised the fact that all service providers were located far from the areas where majority of refugees live, thereby impeding their ability to quickly and effectively report on security or safety issues. In addition, the refugees indicated that the national police are not willing to report cases that involve refugees, for those who are unable to meet the costs of pursuing cases within the national legal system. The poor state of police stations in Addis and lack of capacity through qualified gender and child protections trained officers which stands as a measure of protection coverage police officer can provide seem to burden the women refugees. In this sense human rights have been associated with the poor security structures especially police who assume the role of duty-bearers in absence of the State.

### 3.12 Non-State Actors and Social Protection

This section looks at how GBV is being addressed by approached NGO's with the support of government in Addis Ababa. Although ARRA coordinates refugee matters with the UNHCR, there are quite a number of implementing partners' i.e. international non-governmental organizations (INGOs) such as DRC, NRC, JRS, DICAC, Plan International and ZOA, that were

approached by the researcher during the conduct of this study. The operations of these INGOs are guided by the MOUs and SOPs between ARRA and UNHCR.

### 3.13 Overview of their Mandates

Following this brief overview on the mandates of the INGOs, the next section will be providing narrative summary on their roles, responsibility as well as methodology in supporting refugees and collaborating with ARRA and UNHCR.

#### a) Support Activities and planned programme

**JRS:** The JRS, has been working with refugees in Ethiopia since the 1980s, catering for the need of the most vulnerable groups of people. JRS focuses on providing vocational training, counseling, and community services. The emergency coordinator Azaala Gulelat had this to say on some of the activities he coordinates while also providing an overview of the activities of JRS in whole.

*Emergency financial support, food assistance, medical referral and group counselling are the core services rendered by JRS. JRS in general takes referrals from ARRA and UNHCR as well as other partner organization especially DICAC. Two areas of impact for JRS are: provision of vocational support services such as music training, library, computer maintenance and ICT skills training, and community services targeting nursing refugee mothers who may have other activities, like following on their cases with ARRA or counselling services, so they can keep their children in the JRS day care center.*

**DICAC:** DICAC provides psycho-social support, financial assistance and education support to refugees. Through the existing partnership with ARRA, DICAC refers refugees to ARRA for legal support. As the oldest faith base organization in Ethiopia, DICAC has a mission to assist disadvantaged communities in the country aimed at enhancing the self-reliance to overcome poverty, drought, conflict, gender inequality and HIV/AIDS towards building resilient and sustainable communities<sup>162</sup>. The GBV protection officer Asresash Dessiebelew

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<sup>162</sup> <http://actalliance.org/about/members/Ethiopian-orthodox-church-development-and-inter-church-aid-commission-eoc-dicac/>  
[Accessed May 1 2018]

and Psycho-Social coordinator Tawfiq Kadeer Noor at DICAC shared informative details on DICACs engagement and the roles they play when it comes to GBV and the vulnerability of women refugees.

*DICACs work on gender is focused around the activities performed by the following units: the maternal and child health (MCH) unit, disability and unaccompanied minors unit, HIV unit, psycho-social unit, and GBV unit. When cases are referred from the camps, such as rape, the GBV officer assesses these cases and firstly refers the victims for psycho-social support, depending on the follow up required, they are also referred for medical and counseling support.*

*DICAC has a mandate to take GBV victims to hospital and provide psycho-social support. DICAC also refers the victims to ARRA for legal support. As a standard procedure, DICAC provides victims of GBV with a consent form seeking their permission to refer them to either UNHCR or ARRA for service. DICAC also has a 24hr hotline, through which victims of GBV can always reach DICAC, for emergency services.*

*Furthermore, DICAC has a standard operating procedure (SOP) jointly developed by ARRA, UNHCR and all implementing partners. UNHCR also has a legal professional that is in contact with Ethiopian women lawyers association (EWLA) seeking for funds to support refugees with legal aid services. But in general, DICAC refers legal cases to ARRA.*

**DRC:** DRC works with displaced persons, especially refugees and migrants. Ensuring that refugees' protection (like legal assistance to migrants in detention) and rights are guaranteed is the core mandate of DRC. During the interview between the researcher and one of the program officers, the below narrative provides an overview of the current support services provided by DRC and future programme being planned.

*Protection like legal assistance to migrants in detention is another area DRC collaborates with UNHCR and ARRA. For this programme, DRC will work*

*with all implementing partners so as to provide accurate information about the services each implementing partner offers to refugees.*

**NRC:** NRC works only with supporting Eritrean refugees, and its core mandates are to information, legal aid, and house and property rights.

*Because of the OCP policy of the government of Ethiopia NRC works only with supporting Eritrea refugees.*

*NRC also focuses on provision of information on services, counselling and livelihood (training, business skills and financial management) support to refugees.*

*NRC has six thematic areas based on its operational core competencies, these are: ICLA (Information Counselling and Legal Assistance), Food Security and Livelihood, Education, Camp Management, Shelter and Wash. NRC supports refugees on the OCP program so that they understand their rights and their obligations, and necessary conditions to fulfil in order to apply for the OCP scheme. Other areas of support include provision of information on housing, rights and property.*

**Plan International:** According to the Programme Director Zeru Fantaw; Plan International is currently in the planning phase of rolling out their activities focused on vocational training and life skills.

*At the moment, Plan International is working towards regularizing its operations with the government through the signing of MoUs with the city administration. Because of the presence of the legal system (courts), ease of reporting, and the increased number of follow-up institutions, such as ARRA and UNHCR in Addis Ababa, Plan International is convinced that refugees living in the city are more protected than in the camps.*

**ZOA:** ZOA are currently in the planning phase of rolling out their activities focused on vocational training and life skills.

*ZOA is currently setting up its first program in Addis Ababa. The program has a mainly vocational focus to it i.e. livelihoods, and creating new opportunities*



*for refugees in the city both through training and coaching, including life skills. The Second element is more on the psycho social side, targeting female refugees, teenagers between the ages 14-20. The psycho social program is called life kit project which focuses on issues of identity and confidence building and how to deal with past experiences.*

## **Legal Aid**

The lack of legal assistance support to women refugees is a serious gap in their ability to legally pursue GBV incidents within their communities. Discrimination by the national police who refuse to listen to any cases involving refugees, and especially when a case involves an Ethiopian national are of concern. Although ARRA has been instituted as a governing body this has not translated into sufficient presence of government in refugee affairs. The involvement of ARRA in refugee problems and security does not sufficiently protect the rights of women refugees.

That said, the study identified the existence of Ethiopian Women Lawyers Association (EWLA). According to the executive director of EWLA, Ms. Meron Aragaw spoke to the researcher on how her organization partners with UNHCR, its mandate and its activities in all refugee operations in Ethiopia, including advocating for women refugees to be treated according to the laws of the country, she stated:

*“The Ethiopian Women Lawyers Association (EWLA) headquartered in Addis Ababa is a non-profit women's advocacy group founded by Ethiopian women lawyers. It was legally registered since 1995 and began its operation in 1996. EWLA is and has six branches in Bahir Dar, Assosa, Hawassa, Adama/Nazareth, Diredawa and Gambella. EWLA is dedicated to raise awareness of women's legal rights in Ethiopia, ensure that gender is taken into account in the government agenda and to put in place practical measures, promote the economic, political, social and legal rights of women and to secure full protection of their rights under the FDRE constitution and international human rights conventions and to put in place practical measures to help economically incapable women access legal services and with the*

*ultimate goal of eliminating all forms of legally and traditionally sanctioned discrimination against women states.”*

EWLA's is mandated to work in the following areas: Legal Aid Program, Public Education and Capacity Building, and providing Public Education and Capacity Building Program.

- Legal Aid Program EWLA assists women, particularly disadvantaged women, who are victims of GBV free of charge. The service includes legal advice as well as counseling, writing court briefs (court charges and affidavits) as well as representing clients in courts.
- Public Education and Capacity Building Program works on raising awareness on women's rights. This program conducts training and advocacy workshops on the legal, social and political rights of women for students, government, and civil society organization (CSO) employees.
- Research and Law Reform Advocacy, EWLA conducts various researches on women's rights issues and findings are used as a major resource for law reform advocacy and public education.

EWLA continues their engagement with refugees through providing UNHCR with advice in studies, as well as through providing technical views. UNHCR on the other hand provides EWLA with resource mobilization. According to Meron Aragaw: *“When it comes to cases of refugee women should be treated just like cases of national women by law”*.

In the past, cases are referred to EWLA by UNHCR or ARRA, acting on its mandate EWLA would follow up on the cases as through the provision of legal advice to the victim and orienting them on their rights, making them assertive about the legal procedures, such as: how to collect evidence on what was committed by the perpetrator and on providing a witness. EWLA also accompanies the victims to the police. At present, there are fewer cases of GBV, which is largely because of under reporting. In addition, since 2016 funding from UNHCR has decreased, which affects the capacity of the organization to hire lawyers for the victims. *“The police are very discouraging, we have to be there with them, the victims are very confused and they don't know what to do ”*

EWLA works with the police in terms of guiding them and providing them with information based on the case, including evidence and on legal aspects of being gender sensitive. The procedure is then to transfer the case to a public persecutor, and cases are then transferred to the

court. Court sessions are also attended by EWLA, to provide further guidance and collaborate with the court officials as well.

*“We have to make sure the correct articles in the criminal code are considered and referred to. Because sometimes they refer to the wrong articles. The men are sometimes biased on the cases of women. The final verdict given by the judge should fit what has been committed against the women”.*

If the judgment from the court is not enough, EWLA appeals in order to help the women get justice. Furthermore, EWLA conducts capacity building trainings and has been engaged in training police from different stations on different aspects of GBV, in order to be able to handle cases through a gender sensitive approach when it comes to the law enforcement. These trainings are designed to clarify confusions in the law and narrowing the gap between law and practice. By conducting peer review sessions with the police authorities, EWLA monitors and evaluates these process, through periodic follow up meetings to measure progress and discuss challenges. Research is always carried out depending on the problems identified in terms of law enforcement. Based on the findings from the research, EWLA submits to the government a set of recommendations to enhance protection of women and lead to improved response by the authorities.

In many cases there are gaps in follow up of cases and lack of full facility. It takes longer years to resolve a case, sometimes up to three years. Compensations are only given in cases of accidents in work place, or general accidents. Compensation paid for GBV which is currently pegged at 1000 birr, which is very minimal. This amount has been fixed in the criminal code since the time of Haile Selassie. In cases of life threatening cases the victims are referred to a shelter house and centers where they are provided therapy.

In terms of capacity building EWLA further raises awareness on how to be aware of one's rights and this is done through using different strategies such as social media, electronic media on reaching out to women, on how to report, on mind change of the society.

Security which includes protection and legal aid represents the most vital areas in which women refugees living in Addis Ababa can be assured of their basic human rights. The SGBV strategy 2017-2019 of GoE like most other studies pays high attention to the encampment policy,

especially in deploying its proposed preventive approaches. In focusing on refugees in camps, the strategy misses an important element of the CRRF which proposes to expand the OCP policy to cover other nationalities. This means that more refugees would be able to live in urban area. One of the structures upon which the CRRF would be supported is the proposed industrial park and GoE promise to allocate 30% employment opportunities for the refugee community. Again, the SGBV 2017-2019 strategy views this as an opportunity to mitigate SGBV as a result of lack of livelihood opportunities and lead to gender equality in the long term.

## Chapter Four

### Conclusion and Recommendations

Despite the challenges of female refugees, this chapter will also provide an overview of the various coping mechanisms they adapt to survive, as well as highlight the personal intervention to support women refugees by the staff of the various implementing partner organizations.

Considering that violence in Africa is the major cause that motivates refugees to migrate from their countries. This study also tried to understand other factors that may motivate refugees in their choice destination country. After pulling all the facts together, especially from some of the women refugees that were interviewed, the researcher found the following key factors that made them choose to come to Ethiopia: Historical ties; Geographic proximity; Assurance of personal safety and protection; and hopes for resettlement.

However, the expectations of refugees, women in particular on arrival is met with the stark realities as a result of the procedures to gaining the status of a refugee. This on its own is due to the bureaucracy of the implementing agency. Stemming from the refugee proclamation 409/2004, the provisions in the FDRE Constitution contained in Article 9(4) and Articles 51(18) demonstrating the commitment of GoE to international norms and instruments, and the management of refugee matters. However, Article 21(3) of the refugee proclamation, imposes some restrictions on the ability of refugees to engage in any form of employment. On a closer look, women refugees are the ones most affected by this specific provision, because the restriction increases their dependency, which also makes them more vulnerable to GBV. Thus, some women refugees engage in survival sex, including those whom have to take care of their families.

This study finds it also important to mention some positive steps that GoE, working through ARRA and the implementing partners are doing to improve the status of refugees, especially women in line with the Article 22 of the refugee proclamation. The Ethiopia National SGBV strategy 2017 – 2019 – which is a comprehensive GoE response to SGBV and includes actions to be implemented in the following areas: legal and policy framework; knowledge and data; coordination; human and financial capacity; prevention and response; as well as advocacy and awareness raising. ARRA and UNHCR are stepping up their engagements with the

implementing partners i.e. DRC, NRC in the roll out of some programme. On a positive note, the study took cognizance of the Leaders' Summit on Refugees, held on September 2016 in New York. At that conference the GoE made nine (9) landmark pledges in designed to provide refugees with more opportunities in the country. These 9 pledges followed the adoption of the New York Declaration and the Comprehensive Refugee Response Framework (CRRF). At the conference, Ethiopia was adopted as a pilot country for the implementation of the CRRF, and is currently implementing the pledges<sup>163</sup>.

GBV against women is a universally prevalent reality in the contemporary world. The research viewed the question of GBV against women refugees, through a human rights approach. The research shows that some of the women were victims of GBV while in their countries, but this vulnerability continued even after arrival to Ethiopia, Addis Ababa. The question arises of what actions are being taken to promote implementation of the International Refugee Convention in line with formal international legal provisions. As the Constitution of the FDRE recognizes "all international agreements ratified by Ethiopia are an integral part of the law of the land". On further examination, the question arises as to how the GoE has domesticated relevant international legal instruments. Through this research the gap in human rights realization was identified, as intersecting with protracted protection and lack of government oversight in refugee matters. Though the refugee proclamation 2004 is the GoE main instrument on refugee matters, it is necessary for this doctrine to be reviewed or subject to clear interpretation against the Constitution of the FDRE in view of the implementation of the CRRF.

This paper therefore sought to study the vulnerability of GBV to women refugees in Addis Ababa. This study has shown that the legal obligations of the State to protect the rights of women refugees that have been undermined and how the government in Addis Ababa lacks capability to enforce the restrictive law for the issue of urban refugees.

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163 Alison B., et al (2018). Urban refugee economies: Addis Ababa, Ethiopia, pg. 9

## Recommendations

The recommendations to this study are important though they have their own challenges. Security concerns for refugees in any country where they are hosted is of paramount importance. However, in addition to security, with women refugees, there is the need to pay attention to their specific needs which is also applicable to the women populations on a global scale. According to the results of the study, women refugees are indeed an extremely vulnerable group that needs special attention to be paid towards meeting their specific needs and addressing some of the challenges they encounter.

The host government of Ethiopia can in fact play a critical role in protecting the rights of women refugees and by ensuring that these refugees receive adequate protection. However, the refugee legal instruments in Ethiopia, in line with those at international level have failed to protect refugee women. But with the coming of the CRRF and implementation of the nine pledges by the GoE, policy makers in partnership with UNHCR need to prioritize the implementation of the provisions of the CRRF, including undertake a review of the relevant provisions of the Constitution of the FDRE and Refugee Proclamation 409/2004. The reasons for this is to ensure that the implementation of the CRRF is backed by laws of the land and enshrined in the Constitution of the FDRE as well as relevant national instruments on governance of refugees in Ethiopia. This is also in view of the Ethiopia National Strategy on Prevention of SGBV 2017-2019.

However, this study recognizes the role of the GoE as a determining factor in providing the space for the UNHCR and other implementing partners to step up their refugee assistance operations in Ethiopia. Similarly, the role of the GoE in promoting the inter-agency action towards a comprehensive network of line ministries including the police, and justice system towards providing effective and timely prevention and response to challenges faced by refugees are instrumental to the overall implementation of the CRRF and improved welfare for refugees. The overall objective being to mitigate, and where possible eliminate all occurrences of GBV to refugee women in urban areas, these recommendations will be useful for policy makers and implementing partners in addressing observed gaps in the enhancement of refugee management

especially the vulnerability of women refugees to GBV. Based on the findings outlined above, the study makes the following recommendations:

### ARRA

- Increase education and capacity building support to refugee women by the state to ensure that they are able to qualify for the employment opportunities that would be made available.
- Addressing the key issues of security and access to the justice system, the effectiveness of the SGBV strategy would complement efforts at implementing the CRRF. A major impact of this would be a heightened responsibility by the duty bearers (police and courts), and increased awareness on the community and refugees as well that violations of the laws of the GoE as stipulated in the Constitution of the FDRE contravenes the provision of the refugee proclamation 409/2004 contained in Article 22 and would be met with adequate remedial actions.
- Language and culture are critical components in the various aspects of refugee management. As the nationalities are varied within the refugee population, as part of means towards implementation of the CRRF, the ARRA can undertake to recruit from among the refugee populations persons to be trained as interpreters towards assisting with the reporting of cases. Similarly, refugee communities need to be educated on their responsibility to abide by the laws of the host nation, as contained in Article 2 of the 1951 convention, this applies to elimination of all forms of harmful traditional practices which constitute GBV and are prohibited according the Constitution of the FDRE and the revised Family Code Proclamation 213/200 of the GoE prohibiting underage marriage.

### ARRA and UNHCR

- Improving the protection of undocumented new-arrivals in urban areas should be considered by conducting outreach to local government agencies and law enforcement and sensitizing the refugee community on need to be properly documented;
- Recognizing the rights of urban women refugees to work should be a priority and safety concerns should be considered within the context of jobs to be allocated to refugees;
- Focusing on protection on the right to housing and adequate shelter in urban areas;



- Direct assistance should be targeted at new arrivals and vulnerable women refugees, so that they can access resources and services needed to become self-reliant.
- All relevant line ministries, including the police and judiciary should be part of the participatory assessment program between the refugees, ARRA, UNHCR and implementing partners;

#### IPs and CSO

- NGOs are also well placed to foster direct links between refugee and local communities therefore, they should develop more locally institutionalized forms of community support for women refugees, such as support to refugee women communities, involving refugee women in local support structures focused on women empowerment etc.

#### GoE/ARRA and UNHCR

- As part of prevention and response mechanisms, relevant authorities need to be proactive and treat every reported case with maximum priority and provide necessary protection for the victim pending conclusion of investigations to determine the nature and validity of the case.
- The ARRA and police should work together jointly by establishing official liaison officers trained on to be gender sensitive as well as familiar with all national instruments on responsibility of duty bearers to investigate, arrest and prosecute perpetrators all issues brought by refugees. They also need to be educated properly to discourage and eliminate discrimination against foreigners.
- The UNHCR and ARRA should engage the Ministry of Interior and other line ministries towards increasing the number of female police officers to attend to cases of GBV as a means of encouraging reporting. Therefore, all cases of abuse by taxi drivers against women should be subject to be revisited and reviewed. Also for refugee women who have spouses that are Ethiopian nationals, the men need to be properly reoriented on the Constitution of the FDRE that accords citizenship rights by marriage and be made aware of consequences for domestic violence, GBV in accordance to existing laws of the country.

## Bibliography

- Ali, S. (2014). *The Challenges of Social and Urban Livelihood for Refugee Women: A Case Study of Social Integration Process of Urban Refugee Women from the Great Lakes Region*. Addis Ababa University School of Social Work, 27.
- Bott, S., Morrison, A. and Ellsberg, M. (2005). Preventing and responding to gender-based violence in middle and low income countries: a global review and analysis. World Bank Policy Research Working Paper. [Online] World Bank, p.3. Available at: <http://documents.worldbank.org/curated/en/852691468140377416/pdf/wps3618.pdf> [Accessed 11 Jan. 2018].
- Bouta, Frerks and Bannon. (2005). *Gender Conflict and Development*, The World Bank
- Bunch, C. (1990). *Womens Rights as Human Rights: Towards a Revision of Human Rights*. *Right Quarterly* 12 486-498., 486.
- Center, S. J. (2015). *Societal Attitude toward Sexual and Gender-Based Violence in Syria*.
- Chikwanha, P. A. (n.d.). *Delivering Justice to Victims of SGBV: How Do We Level the 'Battlefields'?* (p. 10).
- Cvejic, J. M. (2017). *Violence against women and girls among refugee and migrant population in serbia*. Belgrade: Atina.
- Girma, E. (2016). *Assessing the impacts of south sudanese refugees on the host communities of itang woreda: a case study of tierkidi refugee camp in gambella regional state by endalkachew girma addis ababa*. Addis Ababa University College of Social Sciences Department of Political Science and International Relations, 12.
- Gebreiyosus, Y. (2013). *Gender-Based Violence against Female Refugees in Refugee Camps in Case of Mai Ayni Refugee Camp, Northern Ethiopia*. Addis Ababa University Center for Human rights.
- Iqbal, Z. (2007). *The Geo-politics of Forced Migration in Africa 1991-2002*. New York: Sage
- G, K. (2002). *Violence against women: a global public health issue*.
- Gladden, J. L. (2012). *The Coping strategies of Sudanese Refugee Women in Kakuma Refugee Camp, Kenya*. Michigan: Michigan State University.
- Publications.
- Ho, C. P. (2009). *Pathway to Social Justice: Research on Human Rights and Gender-Based Violence in a Rwandan Refugee Camp*.

- Kalof. (n.d.). Basic Logic of Qualitative Inquiry. Logic of Qualitative Research.
- Kandoh, M. M. (2012). Forced Migration: Socio-economic Implications for Hosts Communities in Southern and Northern Ghana. Oslo University College, 2.
- Ludwig, N. (2016). The Life Experiences of Ten Female Refugees from Iraq and Iran: An Oral History Research Study. Geschke Center Gleeson Library, 2.
- Lyn Gladde, J. (2012). The Coping Strategies of Sudanese Refugee Women in Kakuma Refugee Camp, Kenya. Michigan State University.
- Maniragena, J. E. (2014). An Evaluation of Service Effectiveness of selected refugee service providers in Urban and surrounding areas of the Cape Town Metropolitan area. Cape Peninsula University of Technology, 1.
- Markovic, J. and Cvejic, M. (2017). Violence against women and girls among refugee and migrant population in Serbia. Atina.
- Sinenhlanhla, M. (2014). Vulnerabilities of African Female Refugees in South Africa: A Case Study of Albert Park Area. School of Agriculture, Earth and Environmental Sciences, 1.
- Miller, L. (nd). The Irony of Refuge: Gender-Based Violence against Female Refugees in Africa. Human Rights and Human Welfare, 77.
- Mwangi, C. W. (2012). Women refugees and sexual violence in Kakuma Camp, Kenya. Human Rights Development and Social Justice, 1.
- Nikodimos, N. (2016). Gender Based Violence against Women with Disabilities in Addis Ababa: The Case of Ethiopian National Associations for the Blind and Ethiopian Women with Disabilities. Addis Ababa: Center for Human Rights, Addis Ababa University.
- Obradovic, M. (2015). The Protection of Female Refugees against SGBV in Camps. United Nations University, 1-2.
- Okot A, I. A. (2006). Suffering in silence: a study of sexual and gender based violence in Pabbo Camp, Gulu District, Northern Uganda.
- Organization of African Unity (OAU), Convention Governing the Specific Aspects of Refugee Problems in Africa ("OAU Convention"), 10 September 1969, 1001 U.N.T.S. 45, available at: <http://www.refworld.org/docid/3ae6b36018.html> [accessed 3 January 2018]

- Orthodox Church Development and Inter Church Aid Commission Refugees and Returnees Affairs Department. Indira Gandhi National Open University MSW Dissertation Research Project. Refugees,
- ReliefWeb. (2018). UNHCR Ethiopia Factsheet - November 2017. [Online] Available at: <https://reliefweb.int/report/ethiopia/unhcr-ethiopia-factsheet-november-2017> [Accessed 15 Jan. 2018].
- Ruud Lubbers (2003). Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons. Guidelines for Prevention and Response. United Nations High Commissioner for Refugees, p.1.
- U. (2018). Figures at a Glance. [Online] UNHCR. Available at: <http://www.unhcr.org/figures-at-a-glance.html> [Accessed 3 Jan. 2018].
- UN Committee on the Elimination of Discrimination against Women (CEDAW), CEDAW General Recommendation No. 19: Violence against women, 1992, available at: <http://www.refworld.org/docid/52d920c54.html> [accessed 11 January 2018]
- UN General Assembly, Convention Relating to the Status of Refugees, 28 July 1951, United Nations, Treaty Series, vol. 189, p. 152, available at: <http://www.refworld.org/docid/3be01b964.html> [accessed 3 January 2018]
- UN General Assembly, Declaration on the Elimination of Violence against Women, 20 December 1993, A/RES/48/104, available at: <http://www.refworld.org/docid/3b00f25d2c.html> [accessed 11 January 2018]
- Un.org. (2018). Refugees turn to Ethiopia for safety and asylum | Africa Renewal Online. [Online] Available at: <http://www.un.org/africarenewal/magazine/april-2015/refugees-turn-ethiopia-safety-and-asylum> [Accessed 15 Jan. 2018].
- UNHCR. (2013). Global Trends 2013. UNHCR.
- UNHCR. (2018). Women. Available at: <http://www.unhcr.org/women.html> [Accessed 3 Jan.2018]
- UNESCO. (2013). Addressing the links between Gender Based-Violence and HIV in the Great lakes region. Dar-es-salaam, Tanzania: Division of Gender Equality.
- Varalakshmi Vemuru, Rahul Oka, Rieti Gengo, and Lee Gettler.(2016). Refugee Impacts on Turkana Hosts, A Social Impact Analysis for Kakuma Town and Refugee Camp Turkana County, Kenya, Washington, DC 20433, USA: The International Bank for Reconstruction and Development/ The World Bank Group, p.1.

- Verwimp, P. and Maystadt, J. (2015). Forced Displacement and Refugees in Sub-Saharan Africa. An Economic Inquiry. Bruxelles: World Bank.
- Whitwell, C. (2002). New Migration in the 1990's: a retrospective. Sussex Migration Working Paper no. 13.
- Wordofa, B. N. (2013). The Prevalence and Contributing Factors of Sexual and Gender-based Violence among Women Somali Refugees in Addis Ababa, Ethiopia. The Case of Ethiopian
- Yohannes, Y. G. (2007). Prevalence and Factors Related to Gender Based Violence Among Female Students of Higher Learning Institutions in Mekelle Town, Tigray, Northern Ethiopia. Addis Ababa University Public Health.

## Appendix

### Question Guide for Researcher

My name is Hiba Mohamed, I am a student at Addis Ababa University. Currently, I am writing my research paper for my master's degree in Human rights. In my current and past experiences, I have a passion for highlighting issues that affect refugees, especially women and children, in urban areas. As I am currently engaged with UN Women, I consider this an opportunity for me to gain access to valuable information through the support of my organization to enrich my research with the aim of adding to the body of knowledge in this area which has been little researched. In this regard, my topic will focus on the “vulnerability of women refugees to Gender Based Violence (GBV): A case of Addis Ababa”. Looking more closely on the peculiarities and challenges experienced by women from the following countries: South Sudan, Somalia, Eritrea, Yemen, Burundi, Congo and others.

The main aim of my research is to examine the vulnerability to GBV of female refugees Addis Ababa; identify the causes, risk factors and consequences of GBV against women refugees in Addis Ababa; as well as explore the extent of protection extended by the state and non-state actors to women refugees and their access to services such as prevention, treatment and remedial actions in Addis Ababa.

The methodology to this research will be qualitative in nature, adopting in-depth interviews as the major tool to drive the process. Conscious effort will be made to take into account the sensibilities of my subjects, to guide the communication and exchange of information at every stage of the interview. My subjects will have the liberty to choose either to answer or discuss the topic, in a bid to guarantee their comfort and assurances of confidentiality. If required, I am willing to have a designated officer accompany me in the course of my interview sessions. Regarding the interpreters I would be grateful if I can request and receive this support which I consider essential for my research to prevent loss of information and save time.

**Organizations interviewed are:**

1. Ethiopian Orthodox Church Development and Inter-Church (EOC-DICAC)
2. Jesuit Refugee Service (JRS)
3. Administration for Refugees and Returnees Affairs (ARRA)
4. Norwegian Refugee Council (NRC)
5. Danish Refugee Council (DRC)
6. United Nations High Commissioner for Refugees (UNHCR)
7. Political Affairs Department of the African Union Commission.
8. ZOA, Dutch NGO
9. Plan International Ethiopia
10. Ethiopian Women Lawyers Association (EWLA)
11. Leaders of Refugee Communities;
12. Refugee Outreach Volunteers (ROV) – a programme established by UNHCR, they are tasked to identify and report protection risks in their communities.
13. Men Refugees

**Definition:** Gender Based Violence is violence that is directed against a woman because she is a woman or that affects women disproportionately. This includes physical, sexual, psychological or even economic harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.

## **Section 1: UNHCR- Protection officer**

I. What tasks does a protection officer at UNHCR undertake?

### **A. Demography**

- How many refugees live in Addis Ababa and what countries are they from?
- What is the number of male and female?
- Are there refugees living in other towns in Ethiopia? Where?
- Do you know why they would choose to live in those towns?
- Have there been any reported cases of illegal and unregistered refugees? What are the reasons they are not registered?

### **B. Legal and Policy Documents and Rules**

- What kind of document or international agreements allows refugees to live in Addis Ababa?
- Does your agency and the government have any MOU?
- Could you provide me with policy statements, letters regarding urban refugees in Addis Ababa?
- What are the rights of refugee women? What type of rights are refugees entitled to? And Are there any differences between status and rights of men and women refugees in Addis Ababa?

### **C. Reporting of GBV**

- Are there GBV cases you are aware of? From your professional experience what would you consider root causes of GBV against women refugees?
- Are GBV cases reported to your office? If yes, how many cases of GBV have been reported? Do you have statistics on GBV against women refugees?
- Do your organizations have systems/mechanisms that encourage and protect victims of GBV to report cases?
- How often is GBV reported? If it is not reported what do you think are the main reasons? Do you think they report to other agencies, or the police? Why?
- Which forms of GBV are highly reported?



- Are the perpetrators fellow refugees, from the host communities, or family members? Are you aware of what drives offenders to commit GBV against women refugees? Does it occur that women (victims) from certain countries report more than those from other countries? Why?
- Would women be willing to share their experiences with GBV? Why do you think they are or they are not?

#### **D. Actions, Remedies, towards cases of GBV**

- If cases are reported, what process do you use to deal with cases? Can you tell me more about preventive methods adopted by your organization?
- How do you work with other stake holders? Agencies, like police, court, and hospitals?
- Are there professional/counselling/medical services available to support victims from you or other organizations you are aware of? Do you have documents you can provide me with?
- Are there any recommended preventive measures that the refugees could take themselves? What are they expected to do after GBV? Are there guidelines as to measures they have to take before or immediately after GBV?
- Do you partner with other NGO's, humanitarian agencies, government towards women refugees faced with GBV?
- What do you suggest as effective to control/minimize the prevalence of GBV? How about remedial action and if it can be an effective tool to discourage offenders?

## Section 2: ARRA- Protection officer

II. What role does an ARRA protection officer play in the fight against GBV?

### A. Legal and Policy Documents and Rules

- Is there any criteria for ARRA to determine refugee status? Under what circumstances are refugees allowed to live in Addis Ababa? Is there any document that allows refugees to live in Addis Ababa?
- Does ARRA work alone, or does it have MOU that allows it work with other agencies? Why?
- Could you provide me with MOU/policy statements, letters regarding urban refugees?
- What type of rights are refugees entitled to? And Are there any differences between status and rights of men and women refugees?

### B. Reporting of GBV

- Are GBV cases reported to you? If yes, how many cases of GBV have been reported? Do you have statistics on GBV against women refugees?
- How often is GBV reported? If it is not reported what do you think are the main reasons? Do you think they report to other agencies, or the police? Why?
- How do you explain the prevalence of GBV towards refugees in Addis Ababa? Are there GBV cases you are aware of? What are the root causes of GBV against women refugees?
- Who are the perpetrators mostly reported against? Are they fellow refugees, host communities, or family? Are you aware of the reasons and root causes why these individuals or groups commit GBV against women refugees?
- Are there any mechanisms for reporting and encouraging women to report cases of GBV generally and reporting to ARRA in particular? What do you suggest to effectively control or minimize the prevalence of gender based violence?
- Does reporting differ depending on nationality? Which nationality reports GBV most? Why

- What are the different kinds of gender based violence's reported from urban women refugees? Do you think that refugee women are eager to share their experiences?

### **C. Actions, Remedies, towards cases of GBV**

- If cases are reported, how do you deal with such cases of GBV? What are the existing services rendered to prevent GBV?
- Is there any framework of cooperation between different organizations that provide different psychosocial supports to refugees? How does ARRA provide support in maintaining the physical safety of refugees?
- How does ARRA Provide and coordinate basic and social service delivery to refugees?
- Are there professional/counselling/medical services available to support victims from you or other organizations you are aware of? Do you have documents you can provide me with?
- Are there any recommended preventive measures that the refugees could take themselves? What are they expected to do after GBV? Are there guidelines as to measures they have to take before or immediately after GBV?
- Do you partner with other NGO's, humanitarian agencies, government towards women refugees faced with GBV? Do you have documents to provide?

## **Section 3: DICAC- Protection officer**

### **III. Legal and Policy Documents and Rules**

#### **A. What are your main roles as a psycho-social coordinator/GBV Officer?**

- What kind of services are provided to refugees and why?
- What kind of MOU has been signed between your agency and the government? Why?
- Could you provide me with policy statements, letters regarding urban refugees?
- What type of rights are refugees entitled to? And Are there any differences between status and rights of men and women refugees?

## **B. Reporting of GBV**

- Are there GBV cases you are aware of? What are the root causes of GBV against women refugees?
- How often is GBV reported? If it is not reported what do you think are the main reasons? Do you think they report to other agencies, or the police? Why?
- Are GBV cases reported to you? If yes, how many cases of GBV have been reported? Do you have statistics on GBV against women refugees? Do you currently have any caseloads on GBV?
- Are there any mechanisms for reporting and encouraging women to report cases of GBV generally and reporting to your organization in particular?
- Which forms of GBV are highly reported?
- Who are the perpetrators mostly reported against? Are they fellow refugees, host communities, or family? Are you aware of the reasons and root causes why these individuals or groups commit GBV against women refugees?
- Does reporting differ depending on nationality? Which nationality reports GBV most? Why?
- Do you think women are eager to share their experiences with GBV? Why do think they are or they are not?

## **C. Actions, Remedies, towards cases of GBV**

- If cases are reported, how do you deal with such cases of GBV? What are the existing services rendered to prevent GBV?
- How do you work with other stake holders? Agencies, like police, court, and hospitals?
- Are there professional/counselling/medical services available to support victims from you or other organizations you are aware of? Do you have documents you can provide me with?

- Are there any recommended preventive measures that the refugees could take themselves? What are they expected to do after GBV? Are there guidelines as to measures they have to take before or immediately after GBV?
- Do you partner with other NGO's, humanitarian agencies, government towards women refugees faced with GBV? Do you have documents to provide?

#### **Section 4: JRS- Emergency Coordinator**

#### **IV. Legal and Policy Documents and Rules**

##### **A. What are your main roles as an Emergency Coordinator?**

- What kind of services are provided to refugees and why?
- What kind of MOU has been signed between your agency and the government? Why?
- Could you provide me with policy statements, letters regarding urban refugees?
- What type of rights are refugees entitled to? And Are there any differences between status and rights of men and women refugees?

##### **B. Reporting of GBV**

- Are there GBV cases you are aware of? What are the root causes of GBV against women refugees?
- How often is GBV reported? If it is not reported what do you think are the main reasons? Do you think they report to other agencies, or the police? Why?
- Are GBV cases reported to you? If yes, how many cases of GBV have been reported? Do you have statistics on GBV against women refugees? Do you currently have any caseloads on GBV?
- Are there any mechanisms for reporting and encouraging women to report cases of GBV generally and reporting to your organization in particular?
- Which forms of GBV are highly reported?

- Who are the perpetrators mostly reported against? Are they fellow refugees, host communities, or family? Are you aware of the reasons and root causes why these individuals or groups commit GBV against women refugees?
- Does reporting differ depending on nationality? Which nationality reports GBV most? Why?
- Do you think women are eager to share their experiences with GBV? Why do think they are or they are not?

### **C. Actions, Remedies, towards cases of GBV**

- If cases are reported, how do you deal with such cases of GBV? What are the existing services rendered to prevent GBV?
- How do you work with other stake holders? Agencies, like police, court, and hospitals?
- Are there professional/counselling/medical services available to support victims from you or other organizations you are aware of? Do you have documents you can provide me with?
- Are there any recommended preventive measures that the refugees could take themselves? What are they expected to do after GBV? Are there guidelines as to measures they have to take before or immediately after GBV?
- Do you partner with other NGO's, humanitarian agencies, government towards women refugees faced with GBV? Do you have documents to provide?

## **Section 5: Ethiopian Women Lawyers Association**

- What are your main tasks? Mandate of EWLA?
- How do you deal with cases of GBV?
- How do you deal with cases that involve providing evidence and a witness?
- What is the procedure undertaken to gain justice?
- How long does a case take to be resolved?
- Do women refugees report themselves or are they referred through the agencies? Do the agencies follow up the case after?
- Are there any cases where victim were given compensation?
- How many cases of refugee women are reported?
- Which nationality of refugees reports the most? Why?
- Are there any instances where the cases cannot be resolved?
- Do the lawyers accompany the victims?
- Which cases are reported the most?

## **Women Refugees**

### **Section A**

- Can you tell me your name and the country you are from?
- How old are you?
- Why did you leave your country as a refugee in Addis Ababa?
- What is your marital status?
- What is your Religion?
- How long have you been living in Addis Ababa? Are there any problems you face as refugee?
- As a female refugee what challenges do you face?

## **Section B**

- Where do you live?
- What was your Occupation in your country? Are you currently working?
- Do you live alone or with members of your family or you share quarters with other refugees?
- Have you lived in a refugee camp? If yes, did you face any problems?
- Where would you prefer to live in: refugee camp or Addis? Why?
- Are there any specific services available to you as a refugee and do you know about it?
- Does these services include health care/education/social security and are able to register with ease for these services in Addis Ababa?
- In the event of any challenges or denial/delayed services whom do you report to?
- Have you ever experienced discrimination in any way? Would you list the kinds of discrimination you have faced?

## **Section C**

- Do you know what GBV is?
- Do you know anyone who has experienced and suffered/suffers from consequences of GBV?
- Are you aware on how to report GBV, Do you feel free to report GBV? Why or why not?

## **Women Who Encountered GBV**

- Do you feel safe to report on GBV? Why or why not?
- Have you faced GBV? If yes, did you ever report your case to the police? Aside police, did you report to any other organization? Why to the Police and not to the others? How did the police handle the case your reported? Do you feel safer after reporting the case?
- If you have faced GBV is it from, fellow refugees, intimate partner /family members, or other people? Do you feel confident to share with me details about the person who attacked you, and how this attack took place and the form?



- Do you go out alone while living in Addis Ababa? Do you generally avoid going out alone because of fear?
- Has anyone ever forced themselves on you or touched you against without your permission?
- Would you ever talk to anyone if you personally face GBV or witnessed it?
- Would you describe your experience facing GBV?
- How has UNHCR/DICAC/ARRA or any other Agency assisted with your case? Explain.

### **Community Leaders For each society**

- What are the main tasks of a community leader
- How many refugees do you have? How many Male and Female?
- Are you aware of GBV?
- Have any cases of GBV been reported to you as a leader? If yes what has been done about it?

### **ROV Volunteers**

- How many volunteers are there?
- What are the main tasks of refugee volunteers?
- How many cases of GBV have been reported? How do you handle such cases?
- Are you aware of what has been done after reporting cases of GBV?
- Are you willing to report cases of GBV?

### **Male Refugees**

- Are you aware of GBV?
- Can you prevent/defend/support GBV victims?
- Are you aware on how to report a GBV case?
- Are you encouraged to report GBV cases?
- Do you know anyone that has encountered GBV?

## CONSENT FOR RELEASE OF INFORMATION

*To the staff member or volunteer completing this form:*

*Read the entire form to the client, explaining that s/he can choose any (or none) of the items listed. Obtain signature or thumb print with witness signature.*

I \_\_\_\_\_ (print victim/survivor name), give my permission for the following organisations to share information about the incident I have reported in this form, and about my current needs. I understand this permission is needed so that I can receive the best possible care and assistance. I understand that the information will be treated with confidentiality and respect, and shared only as needed to provide the assistance I need and request.

(Mark with an X all that apply)

DICAC( psychosocial support+ counselling)

Health Centre (name of organisation)  
\_\_\_\_\_

UNHCR (Protection Officer, others)  
\_\_\_\_\_

Police \_\_\_\_\_

ARRA \_\_\_\_\_

Others, specify:  
\_\_\_\_\_

**Signature or thumb print**  
\_\_\_\_\_

**Witness (signature or thumb print)**  
\_\_\_\_\_

**Name of officer** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

Session Report for counseling

Client identification: \_\_\_\_\_

Age: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Session No. \_\_\_\_\_ Venue: \_\_\_\_\_

Presentation of the problem:

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Assessment of information, Hypothesis (summary of the case):

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Establishment of Goal(s) :

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Treatment plan:

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Outcome and counselor comments:

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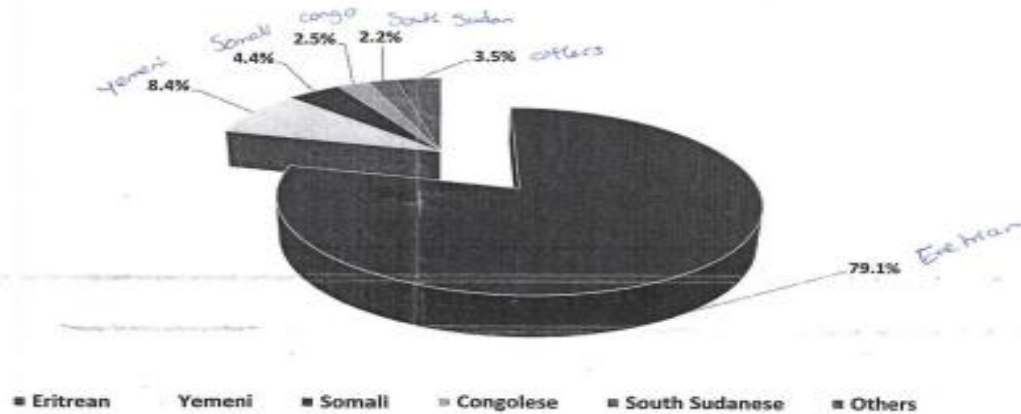
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Nb: should fill this form every session

## Refugee Context/Population (20,398 individuals)

### Urban Refugee Population (%)



■ Eritrean ■ Yemeni ■ Somali ■ Congolese ■ South Sudanese ■ Others

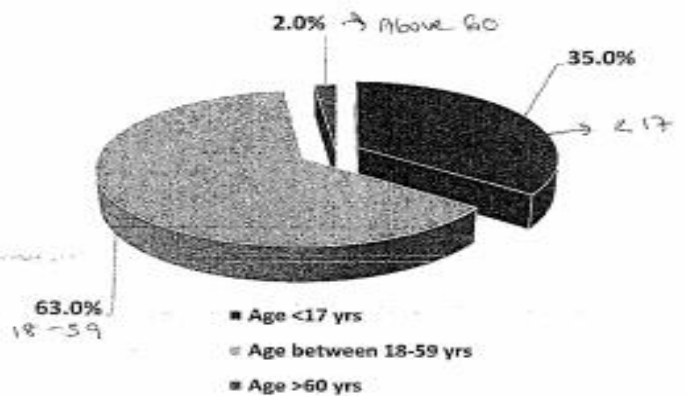
## Refugee Context/Demographic

Urban Refugee /demographic  
Context-Gender (53%F; 47%M)



■ Male ■ Female

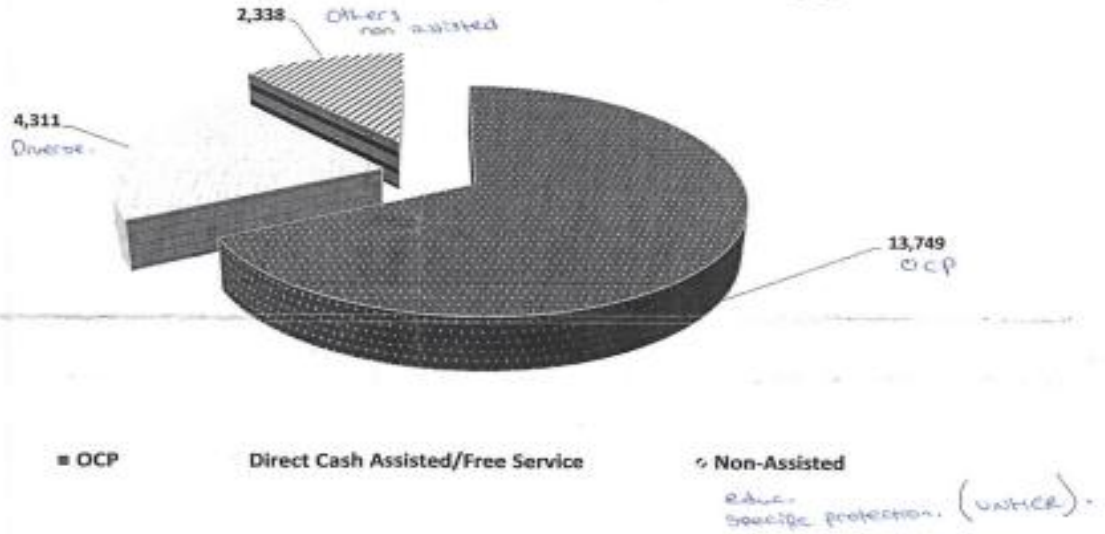
Urban Refugee /demographic  
Context-age group



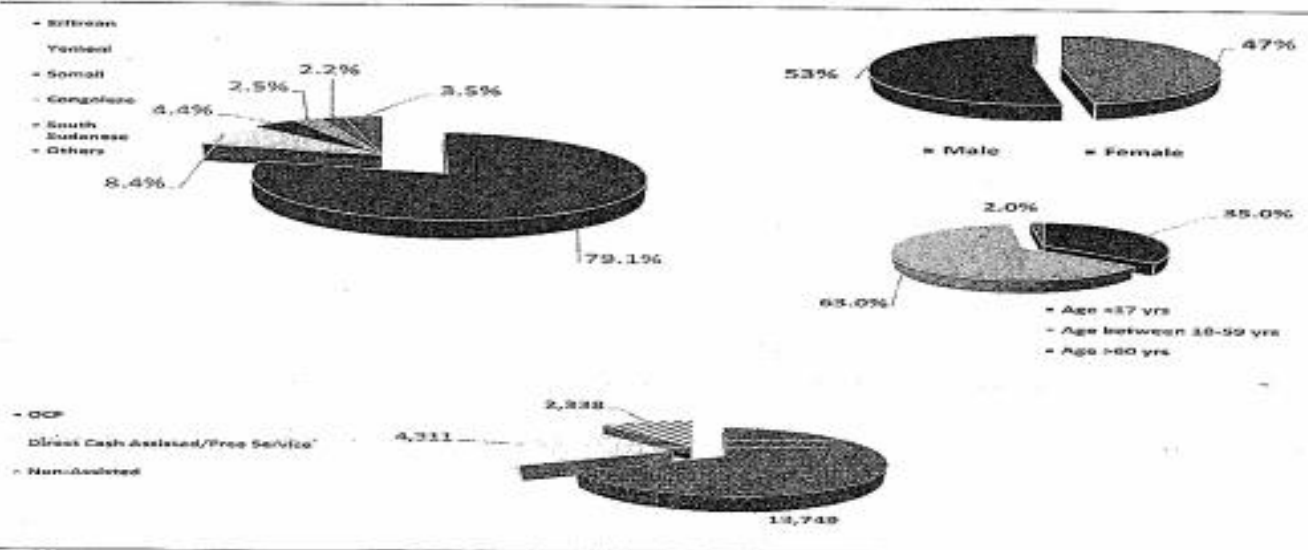
■ Age <17 yrs  
■ Age between 18-59 yrs  
■ Age >60 yrs

# Refugee Context/By Services and/or Support

## Urban Refugee /By Services and/or Support



## Bringing All Together



## Table of Appointments

Agencies	Position	Schedule	Status	Pending
1. UNHCR	Senior Protection Associate	Friday 6 <sup>th</sup> April 2018 12:00 PM	Done	
	Protection officer Community based and GBV	Friday 6 <sup>th</sup> April 2018 April 9:00AM	Done	
	Protection Officer	Monday 9 <sup>th</sup> April 2018 9:00 AM	Done	
	Senior Community based protection Associate	Friday 6 <sup>th</sup> April 2018 11:00 AM	Done	
	Senior Protection Officer	Wednesday 21 <sup>th</sup> March 11:00 AM	Done	
2. ARRA	GBV Protection Officer	Monday 16 <sup>th</sup> April 2018 10:00 AM	Done	
3. DICAC	Psyco-Social Coordinator	Tuesday 17 <sup>th</sup> April 2018 9:00 AM	Done	
	GBV Protection Officer	Thursday 19 <sup>th</sup> April 2018 10:00 AM	Done	
4. NRC			Done	

Agencies	Position	Schedule	Status	Pending
5. DRC	Migration and Solutions Coordinator	Monday 7 May 2018 4:00PM	Done	
6. IOM			Waiting for Appointment	No Response
7. PLAN INTERNATIONAL	Country Program Lead	Thursday (10 May 8:30 A.M)		
	Humanitarian Director		Out of Town	
8. AUC	Humanitarian Officer	Friday 13 <sup>th</sup> April 2018 3:00PM	Done	
	Political Affairs Head of Division		Unavailable	
9. JRS	Emergency Coordinator	Friday 11 <sup>th</sup> April 2018 10:00 AM	Done	
10. IRC			Work with Camp	
11. IMC			Work with Camp	
12. UN Women	Strategic Partnerships, Gender and Humanitarian Specialist		received reports	
13. EWLA	Executive Director/Lawyer	Friday 25 May 2018 3:00PM	Done	
	Focus Group Discussion (FGD)			
	UNHCR			

Agencies	Position	Schedule	Status	Pending
14. Somali Refugees			Conducted one session	
15. Yemeni Refugees			Conducted one session	
Burundi Refugees			Conducted one session	
16.				
17. Community leaders	Congo Yemeni Eritrea Burundi		Done	
18. Men groups	Congo Somali Eritrea		Done	
19. Reach out volunteers (ROV)	Yemeni Somali Sudan Congo	Saturday (Eritrean)	Done	