

**FACTORS ASSOCIATED AND IMMEDIATE CONSEQUENCE OF
PARTNER'S PHYSICAL VIOLENCE AMONG WOMEN, IN SHIMELBA
REFUGEE CAMP, WESTERN TIGRAY, NORTH ETHIOPIA**

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Abstract

Background: Violence against women is a serious human rights abuse & public health issue, owing to its substantial consequences for women's physical, mental & reproductive health which is mostly perpetuated by current or former husband. Recently it is a global problem of refugees which instilling fears in the lives of victims profoundly affected by their displacement. Because incidents are under-reported, the true scale of the problem is unknown and examined infrequently among refugee women in Ethiopia.

Objective: To assess the magnitudes, factors associated and immediate consequence of partner's physical violence among women in Shimelba Refugee camp, Tigray Region, Ethiopia.

Methods: A community-based cross-sectional study that includes both quantitative & qualitative methods of data collection was conducted among a sample of 422 women with male partner from March 26 to April 19, 2011. A simple random sampling technique was used to get study subjects proportional allocated from six zones & one new site in the camp after enumerating all household with women having male partner. A pre-tested interviewer guided structured questionnaire was employed. Data were entered, cleaned & analyzed using SPSS version 16.0 statistical package. Bivariate & multivariate logistic regression analysis was employed whenever appropriate.

Results: The prevalence of physical violence by their partners in the lifetime & within the last 12 months was 131(31.04%) & 107(25.35%) respectively. The most frequently reported act of violence includes slapping 101(61.6%) followed by throwing objects 32(19.5%). Among the abused women in their lifetime, 81(61.07%) experienced health related problems. The most common types of health problems reported include difficulty with daily activity 51(63%), pain 19(23.5%), difficult in walking 12(14.8%), fracture/dislocations 2(2.5%). Being farmer (AOR=13.1[95% C.I: 3.7, 45.6]), women know other husband to beat his wife in neighbor (AOR=1.9[95% C.I:1.002, 3.5]), history of women mother beating (AOR=6.7 [95% C.I: 3.2, 14.4]), having drinker partner (AOR=2.2[95% C.I: 1.04, 4.6]), were the risk factor for being victim of violence but having employed partner (AOR=0.07[95% C.I:0.1, 0.4]) was reduce risk of physical violence.

Conclusions and recommendation: The prevalence of partners' physical violence among refugee women was high which is contributed to multiple health problems, indicating the need for multi-faceted interventions, such as IEC, male counseling, special GBV care service to the victims and encourages women to report to legal bodies'.

Key words: factor associated, type, immediate outcome, partner's physical violence, Shimelba refugee camp, Ethiopia

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Acronyms

AOR	Adjusted Odd Ratio
ARRA	Administration for Refugees/Returnees Affairs
COR	Crude Odd Ratio
FGD	Focus Group Discussion
GBV	Gender Based Violence
IEC	Information Education Communication
IHRW	International Human Rights Watch
IMP	Intimate Male Partner
IPV	Intimate Partner Violence
IRC	International Rescue Committee
MDG	Millennium Development Goal
NGO	Non Governmental Organization
PV	Partners' Physical Violence
SGBV	Sexual and Gender Based Violence
SPSS	Statistical Package for Social Science
UNHCR	United Nation Higher Commission for Refugee
WFP	World Food Programme
WHO	World Health Organization

Chapter One: Introduction

1.1 Background

According to the United Nations Declaration, violence against women includes any act of gender based violence that results in physical, sexual, psychological harm or suffering to women, including threats or such acts, as coercion or durable deprivation of liberty, whether occurring in public or private life (1). In its various forms it is endemic in communities and countries around the world, cutting across class, race, age, religious and national boundaries (2).

Violence against women is important public health problem, owing to its substantial consequences for women's physical, mental and reproductive health (3). This recognition was strengthened globally by resolutions of various international as in the fourth World Conference on Women in 1995 in Beijing (4).

According to world health organization (WHO), violence is the result of the complex interplay of individual, relationship, social, cultural and environmental factors. The environment and social norms that may condone or help perpetuate violence, however, are examined infrequently (5).

Intimate partner violence is the most common form of violence against women and an important cause of morbidity and mortality, and factor affecting women's reproductive health more common than automobile accidents and mugging (6). In the past few years, it has been widely reported in developing countries' where patriarchal family norms are common (5).

United Nation Higher Commission for Refugee (UNHCR) and other humanitarian organizations pay particular attention to collecting demographic information in monitoring and addressing the specific situation of displaced women. Topics such as the situation of gender-based violence, equal access to services for women and men, and the participation of refugee women in decision-making bodies, have been placed at the top of the humanitarian response agenda (7).

Recently, according to Administration for Refugees/Returnees Affairs (ARRA) report Ethiopia hosts total of 149,342 refugees from Eritrea, Somalia and Sudan placed in different camp and around 26,063 refugees from Eritrea are residing in Tigray (8).

1.2 Statement of problem

At the end of 2009, around 43.3 million people worldwide were forcibly displaced due to conflict and persecution, the highest number since the mid-1990s. Of these, 15.2 million were refugees; 10.4 million of them are put under UNHCR's responsibility (9).

Developing countries were host to four-fifths of the world's refugees. And, 6 out of 10 refugees in sub-Saharan Africa resided in camps. Women and girls represented, on average, 49% and half of the population was between the ages of 18 and 59 years, they are mostly exposed to difference types of gender based violence (7).

Reports indicate that at least one out of every three women globally has been beaten, coerced into sex, or otherwise abused in their lifetime, with the abuser usually someone known to them (10) and it is hidden and ignored problem affecting women and girls. Perhaps the most pervasive human rights violation that we know today, it devastates lives, fractures communities, and stalls development (5).

Violence against women is usually targeted at women & girls due to their unequal nature in society. It takes place in the home, on the streets, in schools, the workplace, in farm fields, refugee camps, and during conflicts and is perpetrated by persons in positions of power (11, 12). The exclusion of women & girls from the public arena only increases their vulnerability to violence within the family. Domestic violence reinforces gender-based discrimination & keeps women subordinate to men (13).

Violence kills more than 1.3 million women victims of physical assault by an intimate partner each year. For every death due to violence, another 20 to 40 people require medical treatment, resulting in a huge burden on the health system. In 70-80% of intimate partner homicides, no matter which partner was killed, the man physically abused the woman before the murder. The cost exceeds \$5.8 billion each year & \$4.1 billion of which is for direct medical & mental health services. Victims lost almost 8 million days of paid work because of the violence perpetrated against them by current or former husbands & boyfriends. Approximately 10%–69% of women being physically

assaulted by an intimate male partner (IMP) at some point in their lives(14). In Sub-Saharan Africa, 13–49% of women have ever been hit or otherwise physically assaulted by an IMP (15).

More than 50 % of women in Bangladesh, Peru Tanzania and Ethiopia, reported having been subjected to physical or sexual violence by intimate partners, with figures reaching staggering 71% in rural Ethiopia (13). The prevalence of physical violence perpetuated by an intimate partner in Butajira was 48% (16).

But little attention has been given to reporting on the sensitive topics particularly sexual and physical abuse of women, in the context of face-to-face interviews (17) and domestic violence has largely been unrecognized and underreported in Ethiopia. However, recent reports indicate that it is highly prevalent (18) and

Recently gender violence against refugees is also a global problem instilling fear in the lives of victims already profoundly affected by their displacement (19). Even though activities have been made by UNHCR on responding to gender based violence; however, they have not always effectively engaged refugee communities in these activities, with potentially negative consequences for the health and protection of women (20).

Refugee women are being victimized twice, their lives were disrupted due to the conflict and then their husbands in the camps subject them to another form of violence. They have simply escaped violence in conflict to face a different type of violence in the camps (21). Intimate partner violence (IPV) has been recognized as the most common form of sexual and gender based violence in refugee camp settings (5), yet it has received little attention, as sexual and gender based violence (SGBV) policy and practice focuses on other forms of violence. Because incidents of sexual and gender-based violence are under-reported, the true scale of the problem is unknown (22).

Assessing gender based violence in a refugee camp is so particularly valuable, in that it is an arena in which all influencing factors & competing discourses are more concentrated and visible, & in turn this also has a great influence on the community around the refugee camp. As a site in which populations seek refugee from conflict in their home countries, it is often a situation in which

many different cultures must live together in a concentrated area. It is also always administered & monitored by a government, nongovernmental organizations (NGOs) & institutions, all with interests of their own (3).

It is major development concern, a human rights violation and impediment to the attainment of internationally agreed goals including the Millennium Development Goals (MDGs) and its Millennium Declaration. It is a violation of the essential basic human right to safety, security and physical integrity.

The policy environment in the area of women's health and women's right are also current efforts of the Ethiopian government and the humanitarian agency taken to address the problem. Thus in order to provide effective and appropriate interventions to be given by Ethiopian government and the humanitarian agency, more information is needed on the dimension and context of the problem. Therefore this study may help in identifying factor that contributes for physical partner's violence in refugee camp.

Chapter Two: Literature review

2.1 Literature

Prevalence of intimate partner violence (IPV) has been studied in a variety of settings in developed and developing countries. In the United States, over a lifetime, around 25% of women will experience IPV (21). In Rakai, Uganda in 2006, about 30% of women reported having ever been physically abused by their partner, and 20% were physically abused in the last year (24). Among married Palestinian refugees living in Jordan and Lebanon, 42.5 and 22%, respectively, reported having ever been beaten by their husbands (25, 26).

Magnitude and types of physical violence World wide

Of the women interviewed from cross sectional study in Albania, 37% reported at least one episode of spousal physical violence in the past year, and 26% reported three or more episodes; 7% reported one episode, 4% two, 9% three, 4% four, 10% five to nine, 3% 10 or more (27).

In a population-based surveys from around the world, between 10% and 69% of women reported physically assaulted by an intimate male partner at some point in their lives. The percentage of women who had been assaulted by a partner in the previous 12 months varied from 3% or less among women in Australia, Canada and the US to 27% of ever-partnered women in León, Nicaragua, 38% of currently married women in the Republic of Korea, and 52% of currently married Palestinian women in the West Bank and Gaza Strip. For many of these women, physical assault was not an isolated event but part of a continuing pattern of abusive behavior (28).

In the León study, 60% of women abused during the previous year had been attacked more than once, and 20% had experienced severe violence more than six times. Among women reporting physical aggression, 70% reported severe abuse (29).

Community study in India among 296 respondents, 39.4% faced some form of physical violence sometimes during their married life. Physical violence varied from slapping (56.9%), physically hurt (33.6%), and kicking (9.5%). Most of the women (63.8%) were victim of physical violence more than once in a month. Husbands were the most frequently reported perpetrators of violence

reported by 84.5% respondents. Physical violence was faced even during pregnancy by 75.9%. Neighbours were also reported to be aware of violence in 85.3% (30).

Study on physical violence in Brazil shows slaps and shoves were the most frequent acts reported with regard to physical violence at some time during their lives (31).

Demographic and health survey in 10 country reveal that 16% of women in Bangladesh in the couple were punched, compared with 14 % in Kenya, 13 % in Zimbabwe, and 12 % in Rwanda, 10% or fewer women reported being punched; 12% of women in couples in Bangladesh and 9 % in Kenya were kicked, dragged, or beaten up; 11% of women in couples in Bolivia and 7%t in Zimbabwe reported being choked, strangled, or purposely burned. The prevalence of being threatened with a weapon ranged from less than 1 % in Malawi to 6 % in Kenya (32).

Factors that perpetuate physical violence against women

Violence against women is a complex problem that cannot be attributed to a single cause but to a diverse set of factors, including demographic, socioeconomic and cultural ones (33). Different factors influence, and indicate the status of women and men in a society and so influence these processes. These factors include social and demographic characteristics of the women and men, their economic circumstances, and the characteristics of their relationship. Other factors, including alcohol consumption, depression, and experience of abuse in childhood, and the strength of family and social networks, may additionally influence responses to conflict and a perception of emotional insecurity (34).

Research on IPV has mostly focused on the individual perpetrators or victims of violence to understand the risk factors that contribute to this phenomenon. Individual level risk factors that have been associated with being a victim of intimate partner violence include young age, low or no education, financial dependence on a partner or unemployment, alcohol use, and immigration/refugee status due to the social isolation and precarious legal status often related with migration and the ensuing dependence on one's partner (35).

Using data from a population-based survey and in-depth interviews of abused women in urban and rural Bangladesh revealed that in both residential areas, dowry or other demands in marriage and a history of abuse of the husband's mother by his father increased the risk of violence. Better spousal communication and husband's education beyond the 10th grade decreased the risk of violence (36).

Study in Albania stated that the prevalence of physical violence was highest among women in households where there were more children and more household members, and in couples where the wife was the only one employed. Risk increased with increasing educational level for women, with decreasing educational level for men, and with men being of rural origin and having left rural areas at age 10 or later (37).

Research in India, the commonest reasons for violence in household were husband's short temper 27.6%, alcohol addiction 21.5% and disinterest of respondents in sexual activities (9.5%) were most frequently reported perceived reasons. The sex related consequences of physical violence were reported in the form of forced sexual act by partner 82.8%, STD among respondents/spouses 17.2%, and extra marital affair of husbands 10.3% and suspicion of extra marital affair of respondents by their husbands 18.7%. Other perceived consequences of physical violence were abortion (14.8%), sense of fear from partner (51.7%), and victimization of children (30).

Even when physical violence is not used to control a woman's behavior, the fear of violence may greatly influence her sexual and reproductive decision-making. In South Africa, for example, 57% of women living in the Eastern Cape believe that they cannot refuse sex with their partner (38).

Denial and the fear of being socially ostracized often prevent women from reaching out for help. Studies have shown that around 20–70% of abused women never told another person about the abuse until they were interviewed for the study. Those who do reach out do so mainly to family members and friends, rather than to institutions. Only a minority ever contact the police (28).

Consequences of physical violence

Physical violence is a significant risk factor for various physical health problems frequently encountered in primary care settings. The most common locations for injuries among battered women are the face, neck, upper torso, breast, or abdomen (39). These are the short-term consequences of battering that most health care professional's associate with domestic violence. Yet, studies of battered women have found that the long-term aftermath of these injuries and the fear and stress associated with having an abusive intimate partner can result in several less

obvious, and often long-term, health problems. These include pain or discomfort from recurring central nervous system (CNS) symptoms, such as headaches, back pain, fainting, or seizures (40).

Of the women who are physically abused by their intimate partners, 40% to 45% are forced into sexual activities by the partner (41).

Studies in Canada and the United States have shown that female victims of partner violence are three times more likely to suffer injury, five times more likely to receive medical attention and five times more likely to fear for their lives than are male victims(42).

International Human Rights Watch (IHRW) in their research on sexual and gender-based violence reveals domestic violence as a leading cause of female injuries around the world, and observes that men use domestic violence to diminish women's autonomy and sense of self-worth. Many women suffer in silence because they may be financially dependant on their abuser, emotionally attached to the abuser, and fear condemnation from the family and break up of their marriage if they pursue criminal charges (43).

Violence in pregnancy may pose a threat to the life and health of the mother and the fetus. Physical violence during pregnancy is associated with miscarriage, late entry into prenatal care, stillbirth, premature labor and birth, and low birth weight (5). And although data from Africa are limited, recorded partner violence was the fourth leading cause of maternal death at Maputo Central Hospital in Mozambique (44).

WHO multicounty study finding from 24 097 women found significant associations between lifetime experiences of partner violence and self-reported poor health, and with specific health problems in the previous 4 weeks: difficulty walking, difficulty with daily activities, pain, memory loss, dizziness, and vaginal discharge. Between 19% and 55% of women who had ever been physically abused by their partner were ever injured (45).

Study in India on being asked about coping mechanism against violence, most of the women reported remain to be passive by 60.3% and quitting the house temporarily (20.7%). Few women had utilized some protection by interference of family members (9.5%). In spite of physical violence respondents stayed with their husband mainly for the sake of future of the children (61.2%), sake of marital bond (35.3%) and social compulsion 15.6% (30).

Ethiopian situation

Research in among married women in rural Ethiopia indicates the lifetime prevalence of any form of intimate partner violence was 72.0%. Lifetime prevalence of physical violence by an intimate partner was 49.5%. Prevalence of depressive episode was significantly higher among women who had experienced physical violence during their last pregnancy and physical injury compared to those who had never suffered physical violence (46).

Study in south Ethiopia in Butajira found the overall prevalence of physical violence against married women to be 45% and 10% in their lifetime and last three months, respectively. 76% and 60% of the lifetime and three month's physically abused women respectively, were slapped with fist. 1% of the lifetime physically abused women have been abused using a knife or a gun. 53% reported minor and serious somatic injuries in their lifetime; 46%) of them had acquired minor lacerations or scars; 7% had reported to have fracture or dislocation; and 2% had lost their vision. It is concluded that physical violence among married women is quite high and a serious problem (16).

Other Study in Gondar by showed that the prevalence of physical violence was found to be 32.2% and physical intimidation amounted to 35.7%. Exposure to parental domestic violence as a girl was the strongest risk factor for being victim of violence later in life while alcohol consumption was the major attribute of violent partners. Answering to partners was the most important triggering factor for violence. Women prefer the educational approach to minimize violence. Domestic violence was 13 times more likely to occur among women with a family history of violence than their counterparts while it is less by 50% for women having equal say in household decisions (18).

Physical violence was about five times more likely to occur among women whose male partners consume alcohol frequently. Regarding triggering factors, 31.5% of the physically violated women mentioned disagreements and verbal exchanges 22.8% excessive alcohol consumption, 16.6% poverty, 11% jealousy, 9.8% partners engaging in love with other women, 5.3% faults by women themselves 2.8% male superiority and 2.5% male illiteracy while 3.9% did not know the reason. The perceived outcomes of violence, chronic headache were mentioned by nearly half of

the respondents (49.2%). Three others had complications of pregnancy as a result of beating and 50.6% had sought medical help (18).

Refugee situation

Study in Jordanian refugee camps shows that the prevalence rate of lifetime beating was 44.7%, as the study shows by type of physical; slapping was the most common 36.0% beating behavior, followed by pushing, grabbing or shoving 23.5%, and other unspecified acts of violence 22.9%. Lower prevalence rates were reported for kicking or hitting with the fists 12.6%, throwing harmful objects 10.8%, hitting with hurtful objects 7.0%, and choking 3.1% (47).

Other evidence in refugee communities in Lebanon showed that overall, 22% of their wives reported that wife beating occurred at least once during their married life. On the other hand when asked the participant whether they were beaten during the past year, 9.1% of wives responded in the affirmative. An estimated prevalence of 19.2% of women reported being beaten during the past year. Similar trends were shown for beating behavior during pregnancy: 16.6% of women reported such behavior. Age of women and marital duration had statistically significant association with discordant reporting. Younger men and couples with short (<5 years) marital duration were significantly more likely to report disagreement than older men and spouses of longer marital duration (17).

Qualitative study in Mile Refugee Camps (Sudan) one women participant said "Our men treat their wives like animals." "They don't consider us human." At night, they hear the slurred shouts and the high-pitched screams. They also hear the women gossip about their husbands when they are filling buckets at the well in the morning. Outreach workers in the camp say that domestic violence is deeply ingrained in some refugee men, and it's hard to stop. Anything from dinner not being ready on time to refusing sexual relations can incite abuse. Other man admits that he was violent with his wives. Like most men in these camps, he is polygamous. "I've learned a lot since I've been in the refugee camp," he says. "I used to hit [women] to keep them in line. But here, without hitting them, everything is okay with my wives." (48).

Study in Kibondo refugee camps in western Tanzania physical violence involves infliction of pain and injury on the woman's body. Out of the 13 refugee women victims of domestic violence, eight of them had experienced serious injuries resulting from their husbands' physical violence against them. Some of the women bore visible scars, bruises and cuts on their faces and bodies. Beating or battering of refugee women by their husbands or intimate partners is a cause of concern in the camps. The use of physical violence by men is perpetuated because of the notion of men's superiority and domination over women. In most of the cases, physical violence is mainly as a result of economic violence (49).

In study from Jourdan refugee camp 8.4% of women suffered from some forms or type of physical injury as result of beating. More women 10.4% reported wives' injury out of which 3.7% bruises, 3.4% cuts, scratches or burns, and 2.3% miscarriage are the common ones (47).

According the study in Dzaleka refugee camp in Malawi regarding the reasons why a husband might beat his wife. The most common reasons given for domestic violence were: The wife's actions; namely if the wife is not submitted to the husband; laziness, messy home or unprepared meals; Jealousy; Infidelity, including using prostitutes or taking lovers; alcohol, this reason was common with all communities, except for the Somali community, Boredom and a feeling of uselessness, Hunger and poverty and being a refugee were reasons for domestic violence (50).

An unequal gender relation within refugee communities is exacerbating sexual and gender-based violence. It has been used as a weapon of war and as a means of exercising power; it has been both a cause of forced displacement and terrible consequence of the breakdown of family and community structure that accompanies displacement. Domestic violence reinforces gender-based discrimination and keeps women subordinate to men (51).

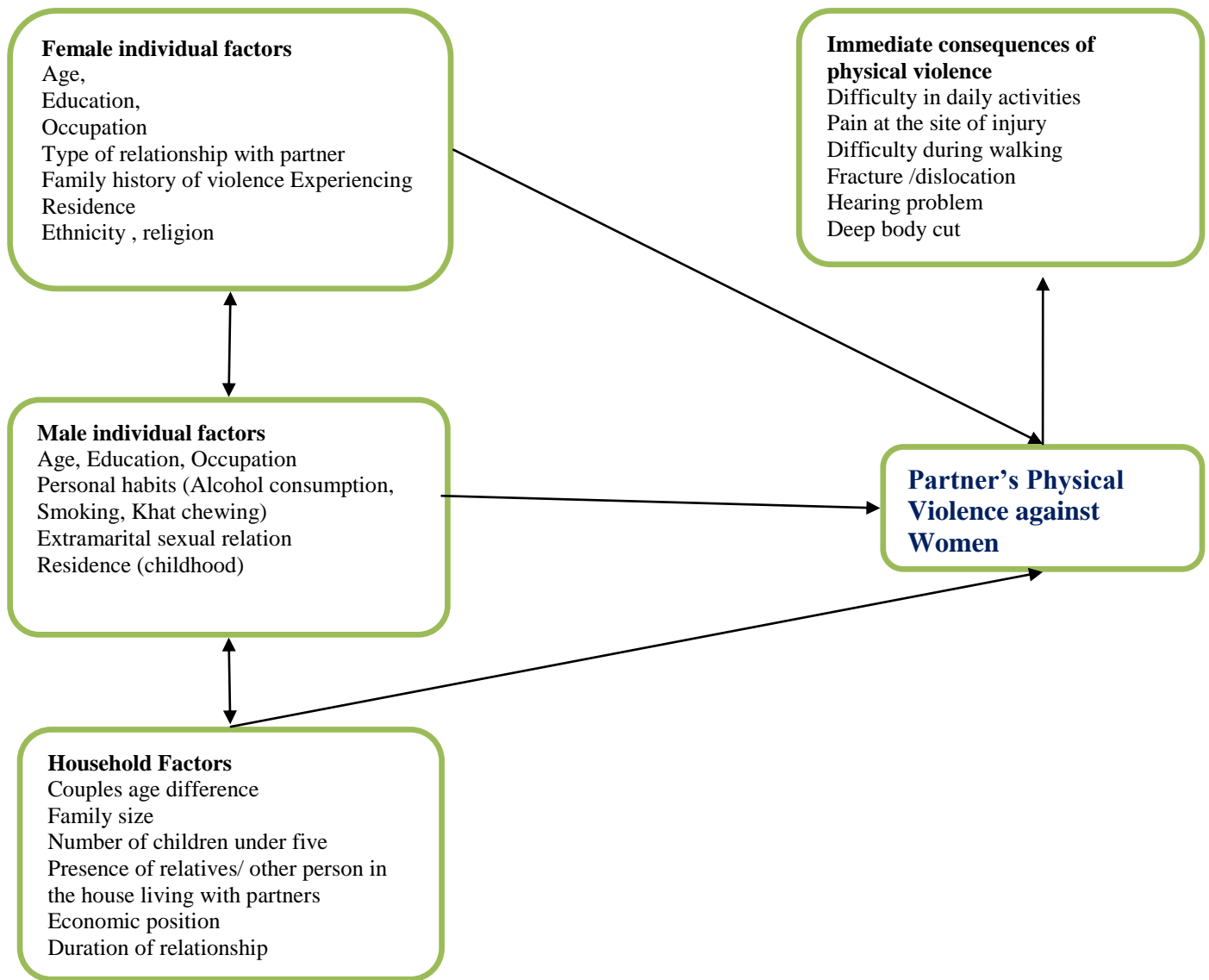


Figure 1: Conceptual Framework on factor associated to Physical Partner Violence against Women.

Source: Adapted and modified from World Health Organization (Ecological Model): World report on violence and Health, Geneva, (Jewkes, Sen, Garcia-Moreno, 2002).

2.2 Significant of the study

Physical violence in the refugee context is severely under examined. The refugee is viewed as vulnerable and traumatized, an image that ignores the effects of the camp situation in which they live.

The experience of abuse also erodes women's self-esteem and increases their vulnerability to a variety of health problems and violence is also an obstacle to the achievement of the objectives of equality, development and peace, so assessing the magnitude and other factors of physical partner violence in refugee camp before the problem is widespread is important for further intervention.

Refugee camps are not simply places where temporary protection & primary assistance is provided, but also places in which political & social production occurs. So that Preventing & responding to physical violence among refugees women is part of the overall strategy of UNHCR and Ethiopian government to protect refugees is important. Due to limited survey in refugee camp the women activists & the UNHCR currently work on the basis of reports which are the sever forms of the cases of violence. However these cases are only the visible forms of the problem, which cannot represent full magnitude of the problem & simply symbolized. Therefore in order to visualize the magnitude of the problem, studies at the household basis in the refugee camp have paramount importance. Thus this study provide base line information regarding the magnitude, root causes and consequence of physical partner's violence in camp that will help humanitarian agencies and Ethiopian government to develop effective plan and actions to prevent and understanding the consequences of physical violence that allows in developing appropriate response packages for victims/survivors and among the various reasons that necessitate of this study is also in the area of gender-based violence more importantly in the current period.

In addition, this study is first for involving refugees as study subjects in Tigray region and it added information to global and national research work in the area of intimate partner violence. In doing so the work of this paper is an attempt towards filling the existing information gap in refugee camp and help to people norm around the camp how patriarchy and the practice of intimate partner violence.

Chapter Three: Objectives of the study

3.1 General Objective

- To assess the magnitude, immediate consequence and factors associated with partner's physical violence among women, in Shimelba Refugee camp, Tigray region, Ethiopia, 2011.

3.2 Specific Objectives

- To determine the magnitude of partner's physical violence among women, in Shimelba Refugee camp, Tigray region, Ethiopia
- To assess the types of partner's physical violence among women, in Shimelba Refugee camp, Tigray region, Ethiopia
- To identify the factors associated with partner's physical violence among women, in Shimelba Refugee camp, Tigray region, Ethiopia
- To assess the immediate consequence of partner's physical violence among women, in Shimelba Refugee camp, Tigray region, Ethiopia

Chapter Four: Methods and Materials

4.1 Study Area and period

The study was conducted in Shimelba refugee camp from March 26 to April 19, 2011. Geographically located at 14⁰ 10'' & 28.7' of N latitude & 37⁰ 43'' & 23' E longitude and found in Tigray regional state Tahtay Adiabo Shiraro district. Host Eritrean refugees who fled from Eritrea during the border conflict of 1998 – 2000.

The camp is located 33 kilometers southwest of Shiraro, the district administrative center of Western Tigray. It is about 70 kilometers far from the disputed border with Eritrea and about 1300 kilometers from the Ethiopian capital, Addis Ababa and 1657 kilometers from Jimma. The camp is run by the Ethiopian government with UNHCR oversight. Refugees are not allowed to work outside the camp, and as a result, fewer than 10% are employed. There are beauty salons, restaurants, and retail shops and some refugees have been hired to work at these places. Other refugees have found employment with UNHCR's implementing partners (53). When refugees arrive in the camps, they are registered and issued with ration cards. These cards are used as their identification and also for the purpose of food distribution which is provided with the office of UNHCR in collaboration with World Food Programme (WFP).

In mid-December 2009 the camp hosts a population of 13, 943 Eritrean refugees mainly from the Tigrinya, Kunama and Saho ethnic groups and about 1917 women in a reproductive age group, 771 women with partner were found. (**Annex 7**)

4.2 Study Design

A community based cross sectional study that includes both quantitative and qualitative methods of data collection was employed.

4.3 Population

4.3.1 Source Population

All married or cohabiting women found in Shimelba refugee camp during data collection period were constituted the source population.

4.3.2 Study Population

For quantitative study

Sampled married women or women with partner residing in Shimelba refugee camp randomly selected from the source population who fully fill inclusion criteria found during data collection period were included.

For qualitative study

Married men and married women from different ethnicities and social workers in the camp were included.

4.3.2.1 Study unit

For quantitative data: All women with partnership aged 15- 49 years who were randomly selected from the household.

For qualitative data: married women & male were selected purposively from different ethnic groups in the camp which includes married men and married women and social workers.

4.3.2.2 Inclusion and exclusion criteria

Inclusion criteria

- All married women or women having a current partner or cohabiting aged between 15 and 49 years whether pregnant or not residing in Shimelba refugee camp. Women who have staying together with their partner for at least one year until the time of study period.

Exclusion criteria

- Seriously ill women during study period
- Those who do not volunteer to participate in the study

For qualitative method

Individuals for in-depth interview were married men and married women from different ethnic groups (individuals from Eritrea, Tigrinya, Kunama, Saho) and social workers living in the camp.

4.4 Sample Size and sampling procedure

4.4.1 Sample size

The sample size was estimated using single population proportion formula. Since there is no data available on the prevalence of physical violence among married women in refugee camp, this study assumed 50% prevalence of physical partner's violence in refugee camp to obtain the maximum sample size at 95 % certainty (confidence level) and a maximum discrepancy of $\pm 5\%$ between the sample and the underlying population; an additional 10 % was added to the sample size as a contingency for non response rate.

$$ni = \frac{z\left(\frac{\alpha}{2}\right)^2 p(1-q)}{d^2} = 384$$

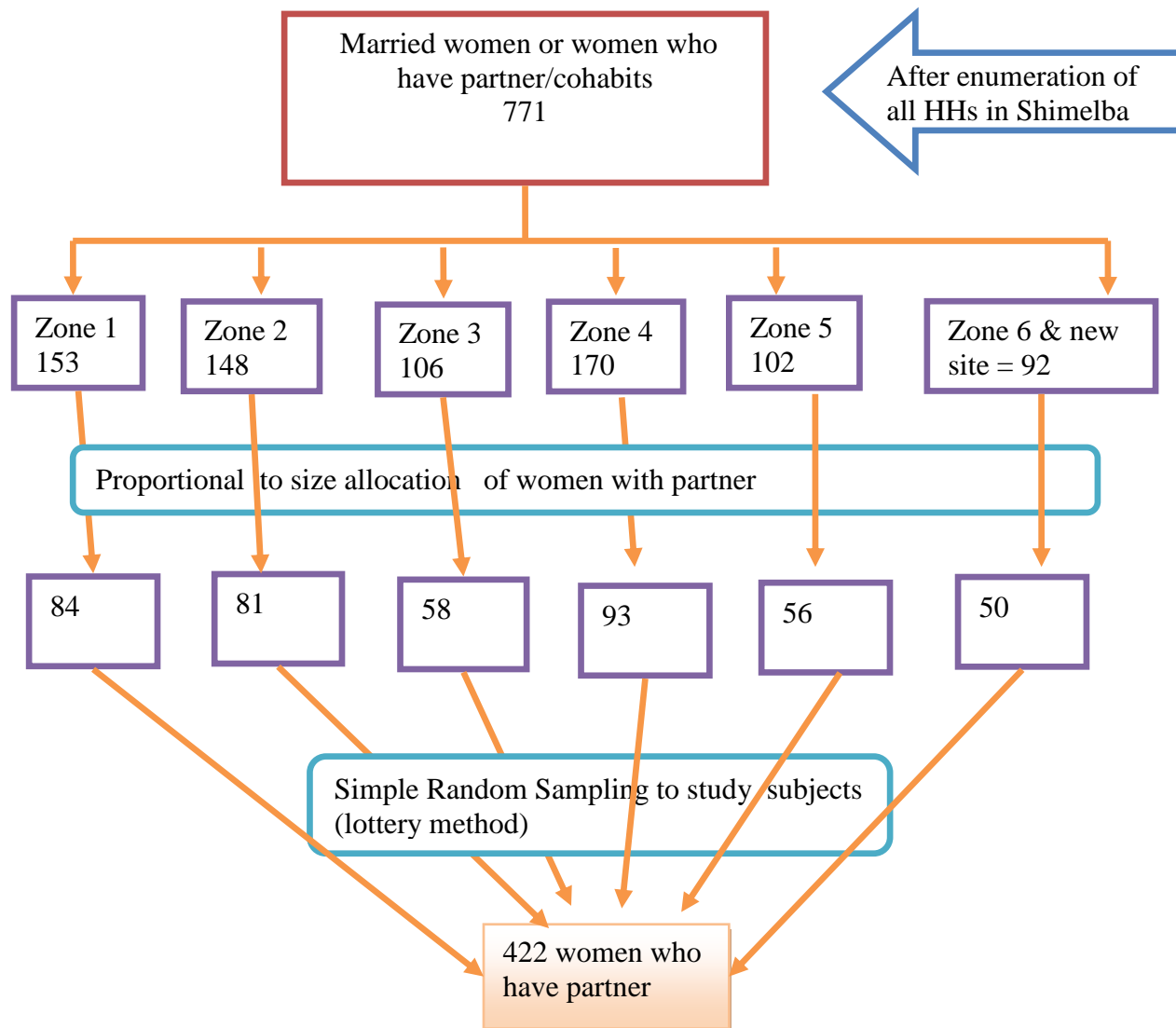
Adding 10% for non response rate the total sample size is **422 women who have partner**

For the qualitative

For the qualitative part, participant from different ethnics was interviewed until the required data is obtained. From each of the three ethnics in the camp (2 married men and 2 married women) 6 married women, 6 married men and 5 social workers were interviewed.

4.4.2 Sampling procedure

The study subjects for quantitative was selected using simple random sampling method after enumeration and coding has been carried out in all households in Shimelba refugee camp to identify households with married women or women who have partner or cohabite. Each household were given consecutive number corresponding to house having married women. For those two or three pairs of partners' but live in the same house sub number was given by taking one reference women with partner and sub number was given for the other partners' and their first letter of their name was included with sub number then sampling frame was created. The sample size was proportional allocated among the six zones and one new site in the camp and study unit was selected using simple random sampling technique by using lottery method. Three repeated visits were made in cases of unavailability of the selected subject rather than simply considering them as non-response.



**Figure 2: schematic presentation of the sampling procedure used in the study
Shimelba refugee camp, Tigray, Ethiopia 2011**

For the qualitative

Participant for qualitative study were selected purposively from different ethnics and social workers in the refugee camp.

4.5 Data collection method and instrument

4.5.1 Data collection instrument

Data was collected using pretested close ended structured questionnaire adapted by reviewing of relevant literatures and from previous similar studies in Ethiopia and refugee (16, 46, 47, 54 & 55)

that could address the objectives of the study. To keep further validity and make the findings comparable with others, measurement of severity of physical violence was also adopted from WHO questionnaire on domestic violence and IPV (54). The adapted questionnaire was modified depending on the local situation. The questionnaire contains variables on socio demographic information, the experience of physical violence, family related history; and husband related history will be included to achieve the objectives of the study.

For qualitative data: collection was carried through in-depth interview by preparing semi-structure interview guide from related literatures (50) and in relation to the objective of the study using tape recorder and note was taken to catch the discussion points.

4.5.1.1 Pretest

A pretest was conducted in another refugee camp around Shimelba (“Sheraro”) which was not selected for the survey, by considering 5% of the total sample size and appropriate modifications was made after discussing with the supervisors and data collectors before starting the actual data collection process.

4.5.2 Data Collection

For quantitative data: interviewer guided structured questionnaire was used to collect the data in private place without involving any person other than the eligible women. Collection process included ten female social workers (high school graduates) and those who could speak the local language (both Tigrigna & Kunama) for data collection, three supervisors who were two degree graduates and one diploma with field experience on household surveys who work for ARRA and lived outside the refugee camp. The questionnaire was prepared first in English, and translated to the local culture and norm (Tigrigna in which most of the refugee camp members speaks) and then back translated to English by another person to ensure validity.

For both data the collectors & supervisors training was given for three days on data collection, interviewing techniques such as when & how to terminate interview and ethical issues, emphasizing the importance of safety of the participants & interviewers. Methods that was used for the training include discussion & field practices. Special emphasis was given for some

questions which needed careful attention & on how to maintain privacy of the respondents during interviewing, on how to ask all questions in supportive & non-judgmental manner and on how to end to end in a positive manner.

The qualitative data: was used to enrich the findings of the quantitative data and looked the cultural aspects and related factors in the camp about physical violence in an intimate relationship and it includes married male and female and social workers and were interviewed separately to insure confidentiality. At the beginning of the interview, the respondent was informed about the study purpose. The selection of the eligible participants for in-depth interview was done purposively by the local camp organizers (ARRA and IRC members from GVB department) from different ethnics in the camp and it was collected after quantitative data collection. The principal investigator had carry out the in-depth interview by the use of semi-structured guiding outline sequentially on each topic. The in-depth interview was entirely tape recorded after verbal consent will be obtained and note was taken on important points. The recorded information was transcribed first to the language of the discussion and then got fully translated into English. Responses and comments were grouped according to the topics and finally write up and description was performed.

4.6 Study Variable

Dependent variable

- Physical violence

Independent variable

- Socio-demographic variable: these includes age, educational status, residence (origin from rural or urban), ethnicity, occupation, religion,
- Household variables: family size, any other person living with the household, duration of relationship,
- Husband related Variables: age, occupation, education, substance use (alcohol, Khat, cigarette by the husbands of the interviewed women).

4.7 Measurement

Lifetime and 12 months experience of physical violence until the data collection period was examined. These specific acts of physical violence include threw objects; pushed, grabbed or shoved; slapped; punching with fist or something else that can hurt; kicked, bit or hit; hit or tried to hit with something; beat up; choked; burned or scalded; threatening and/or attacking with a knife, gun, or other type of weapon. Women who report that their husbands/partners have ever perpetrated at least one of these acts were considered to have experienced physical violence.

Immediate consequence of physical violence was measured in terms of occurrence of health & health related problems such as difficulty with daily activity, difficulty in walking, pain at the site of injury, laceration, loss of teeth, fracture/dislocations, unwanted pregnancy/abortion, injury to eye, damage to ear, deep cut of body parts, school interruption & other problems reported by the victim which occurred immediately after physical violence.

4.8 Data Quality Control

The quality of the data was assured by carrying out careful design, translation & retranslation of the questionnaire. The tools were prepared after intensive reviewing of relevant literatures & similar studies. A pretest was conducted around Shimelba in “Sheiraro” by considering 5% of the total sample size & appropriate modifications was made after discussing with the supervisors & data collectors before starting the actual data collection process. Appropriate recruitment & training was taken for both data collectors & supervisors. Principal investigator & supervisors had coordinated the data collectors through regular daily supervision of data collection & the principal investigator followed throughout data entry and data collection. All completed questionnaire were examined by the principal investigator for completeness & consistency during interview. After editing & coding, the data was entered & after that 10% of the questionnaire was checked for completeness. Then the data was cleaned for missing value & finally it was prepared for analysis using SPSS version 16.0.

4.9 Data Processing and Analysis

The collected data were entered, cleaned & analyzed using SPSS software version 16.0 statistical packages. Descriptive analysis such as frequencies, percentages, tables, chart and graphs were

used. The prevalence of physical violence was estimated for two time frames: the 12 months preceding the interview and any time during the woman's life from the time she started relationship with the current partner. To assess statistical associations' bivariate logistic regression & chi square test were done between each independent variable. Multiple logistic regressions was performed to identify the most significant predictor of physical partner violence and to control for confounders. Odd ratio and confidence interval; 95% confidence limits and significance level ($P < 0.05$) was employed to see those level of significances.

For qualitative data: Data was transcribed and translated in to an English language text by the principal investigator by replaying the recorded interview. Different ideas were merged in their thematic areas manually. Then the results were triangulated with quantitative data.

4.10 Ethical Considerations

Ethical clearance was obtained from Jimma university ethical review board and ARRA in Addis Ababa. In addition, official permission was obtained was written to Shimelba refugee camp to undertake the study. The importance of the study was explained to each respondent and it was completely based on individual's verbal consent and the respondent was informed as they can refuse to answer any question in and during the interview or stop the interview at any time during data collection, & assurance was given for the respondent about the confidentiality of the response given by them, & interviewing was in private place with women only in the house and the name or address of respondent was not be taking down & the questionnaire was coded. The guideline on ethical & safety recommendations for research on domestic violence against women established by the World Health Organization was strictly followed during data collection (56).

4.11 Operational Definition

Lifetime experience of violence: The occurrence of violence by the intimate partner since they started to live together till the time of interview

Last 12-months prevalence of violence: Experience of violence in 12 months period before the date of interview.

Physical Violence: any form of violent act which can result in physical harm of a person.

Physically Abused: A person who become a victim of physical violence (got physical harm)

Presence of Parental Spousal Abuse: Presence of physical violence in the parents of the person.

Lifetime: the time interval between the dates of current marriage/relationship till the date of data collection.

Forced sex (marital rape): is the act of forcing married women through physical body harm by their husband to engage in a sexual behavior against her will.

Cohabiting women: women living with male partner with out formal marriage

Moderate violence: in case, was slapped or had something thrown at her that could hurt her; was pushed or shoved.

Severe violence: was hit with fist or something else that could hurt; kicked, dragged, or beaten up; choked or burnt on purpose and perpetrator threatened to use or actually used a gun, knife, or other weapon against her.

4.12 Dissemination plan

After accomplishing the paper of this study it will be presented and submitted to the Jimma University, College of public health & medical sciences for approval of the study by ethical review board & my advisor, subsequently. Attempts will be made to present it on scientific conferences & publish it on scientific journals. Finally the result with its valuable comment will be disseminated timely for possible use and decision to: the relevant stakeholders. Like; College of public health & medical science Jimma University; Zonal office of Shimelba refugee camp & to Administration for Refugees/Returnees Affairs (ARRA) in Addis Ababa and other concerned governmental & nongovernmental organization.

Chapter Five: Result

5.1 Socio-demographic characteristics of study subjects (women)

Data for the study was completed for all (N=422) women with partner as planned making the response rate of 100%. Two hundred seventy three (64.7 %) were from Rural origin and 86(20.4) of women had history of living in other refugee camp. Most of women 381(90.3%) have stayed in the camp for more than 1 year. Their mean age was 26.2(\pm 6.3) years.. A little more than a third 156 (37.0 %) women were in the age range of 20 and 24 years.

One hundred three (41%) women were illiterate and 256(60.7%) women were married and 118(28%) were co- habited. Three hundred seventy one (87.9%) of the women were housewives by occupation, while 9(2.1%) reported to have some form of employment in the camp.

The predominant religion was Orthodox Christian 266 (63%), and Kunama Eritrea ethnic group comprised 217(51.4%) followed by Tigrigna 187(44.3%). On the type of marital relationship 55 (13%) women their partner had other wife and about 315 (74.6%) women had no history of previous partner. Mean duration of marital life was 6.15 (\pm 5.24) years. Marriage arrangement with the current partner for most of women 241 (57.1%) was agreement of both partners and followed by family supported 171(40.5%). (**Table. 1**)

Table 1: Socio-demographic characteristics of women in Shimelba refugee camp, April 2011 (n=422)

Socio-demographic Variables	Number	%
Age		
15-19	40	9.5
20-24	156	37.0
25-29	123	29.1
30-34	54	12.8
>35	49	11.6
Religion		
Orthodox	266	63.0
Muslim	68	16.1
Catholic	54	12.8
Protestant	29	6.9
Other*	5	1.2
Ethnicity		
Tigrigna	187	44.3
kunama Eritrea	217	51.4
kunama Tigray	2	0.5
Saho	10	2.4
Others**	6	1.4
Occupation		
Housewife	371	87.9
Trading	12	2.8
Employee	9	2.1
Farmer	24	5.7
Other***	6	1.4
Educational status		
Illiterate	173	41.0
Can read and write	44	10.4
Primary school(1-8 grade)	133	31.5
High school(9-12 grade)	64	15.2
Higher education	8	1.9
Place of birth		
Urban	149	35.3
Rural	273	64.7
Duration in camp		
<6months	17	4.0
<1year	24	5.7
>1year	381	90.3
Stay in other camp		
Yes	86	20.4
No	336	79.6

Table 1.....continued

Type of current partner		
Husband	256	60.7
Co-habited	118	28.0
Boyfriend	48	11.4
Duration of relationship		
<2 years	49	11.6
2-5years	202	47.9
>6years	171	40.5
Status of current partner		
First	315	74.6
Second	98	23.2
More than second	9	2.1
Current partner have other wife		
Yes	55	13.0
No	367	87.0
Relationship arranged		
Family supported	171	40.5
Agreements of both	241	57.1
Purposely	4	0.9
Negotiated by male partner	6	1.4

Other*= Joha, Pagan

Other**= Tigre, Amhara (Ethiopian)

Other***= barberry, women who have personal ability and preparing decoration for house, different alcohol seller

5.2 Household related variables

Majority of the respondents 250(59.2%) have a family size of 3-5 persons and have a mean family size of 4.48 (\pm 2.1) persons. Most of the respondents 356 (84.4%) had given birth. Out of this about 195 (54.2%) women had 2-4 children with mean number of children of 2.47 (\pm 1.6) and had mean of 1.37 (\pm 0.7) under five children. In almost one fourth of women with partner 102 (24.2%) there was at least one additional person living with the couple. (Table. 2)

Fifty six (13.3%) women were pregnant at time of data collection. One hundred seventy seven (41.9%) women reported never to have discussed about sexuality and reproductive health issues openly with their partners. Regarding perceived economic status relative to their neighbors; most of the women 252(66.8%) consider that their economic status is similar (average) with their neighbors. (Table 2)

Table 2: Household related variables of women in Shimelba refugee camp, 2011 (n=422)

Household variables	Number	%
Family size		
<3	59	14
3-5	250	59.2
>6	113	26.8
Mean \pm SD	4.48 (\pm 2.1)	-
Give birth		
yes	356	84.4
No	66	15.6
Number of children		
<2 children	123	34.2
2-4 children	195	54.2
>5 children	42	11.7
Mean \pm SD	2.47 (\pm 1.6)	-
Number of under 5 children		
<2	219	60.8
2-3	138	38.3
>4	3	0.8
Mean \pm SD	1.37 (\pm 0.7)	-
Currently Pregnant		
Yes	56	13.3
No	366	86.7
Other person living in household		
No one live	320	75.8
At least someone	102	24.2
Open discussion about sexuality & reproductive health issues with partner		
Yes	245	58.1
No	177	41.9
Perceived economic status as compared to neighbor		
Very poor	7	1.7
Poor	114	27
Average	282	66.8
Better of than average	18	4.3
Rich	1	0.2

5.3 Women partner's related variables

Two hundred forty (56.9%) of the respondents' partners were within the age group of 25-34 years and 242(57.3%) were rural origin. One hundred seventeen (27.7%) of respondents partner were illiterate and 120(28.4%) of respondents had primary school completed partner. Most of the respondents partner 127(30.1%) were farmers and more than one fourth 121(28.7%) had no job. Respondents of this study reported that 184(43.6%) of their partners drink alcohol, 49(11.6%) partner easily angry when drink and 63 (14.9%) ever use Khat or tobacco. **(Table 3)**

Table 3: Women partner's related characteristics in Shimelba refugee camp, 2011 (n=422)

Characteristics	Number	%
Age of partner		
15-24	32	7.6
25-34	240	56.9
35-44	104	24.4
>45	46	10.9
Mean \pm SD	33.29 (\pm 7.8)	-
Educational status of partner		
Illiterate	117	27.7
Can read and write	51	12.1
Primary school(1-8 grade)	120	28.4
High school(9-12 grade)	115	27.3
Higher education	19	4.5
Occupation of partner		
Farmer	127	30.1
Merchant	46	10.9
Employee	38	9
Daily laborer	77	18.2
No job	121	28.7
Other*	13	3.1
Partner place of childhood growth		
Urban	180	42.7
Rural	242	57.3
Drink alcohol by partner		
Yes	184	43.6
No	238	56.4
Partner easily angry when drink		
Yes	49	11.6
No	373	88.4
Partner chew khat or use tobacco		
Yes	63	14.9
No	359	85.1

Other*= person who have video& show to people to get money, a person who rent bicycle, table tens, negotiator in trading, a person work in barberry

5.4 knowledge of respondents on the presence of physical violence on their place (neighbor) and the possible reasons for violence between couples

Two hundred four of the respondents (48.3%) had knowledge that other husband in their area to beat their wife. According to this, the respondents reported that the main reasons for husband to beat his wife during disobey of woman for her husband 90(44.1%), when she asked whether he has

other girl friend (she suspect him) 78(38.2%) and if she fails to complete house work 50(24.5%).
(Figure 3)

In qualitative study regarding the reasons for practice physical violence,

One participant (32 years old, female, Ortodox) express her feeling as follow:

“...most of husband background is solider so they are aggressive, in addition the higher temperature in the area and long stay in the camp sometime husband become temper and make conflict and violence to their wife...”

In addition to the above another (29 years old,female) from Tigigna ethnic explained her view as follows:

“...I together with my husband have stayed here for more than 10 years in this camp, my husband didn't have job and become hopeless in addition to this my husband is drunker and sometimes come at the midnight & make conflict with me and started shouting at me using abusive language, calling me an ugly and useless women. He twisted my fingers till one got dislocated. He slapped me several times on my face and stomach...”

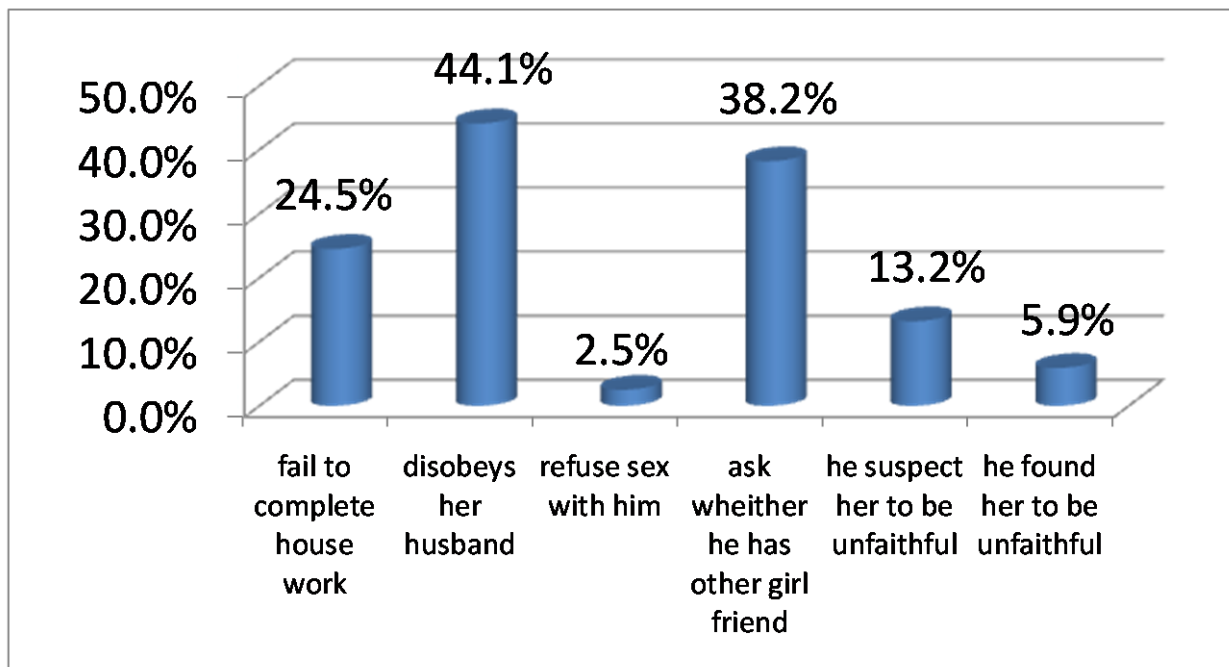


Figure 3: Reasons that result to physical violence between husbands and wife in Shimelba refugee camp, 2011

5.5 Prevalence of partners' physical violence and the severity of violence

One hundred two (24.2%) study participants reported that they had history of mothers' physical violence in their childhood time and almost two third of the respondent 168 (38.9%) had a conflict with their partner since their marriage or relationship time. Out of this, 131(78.98%) lead to physical violence which occurs for most respondents 90(54.9%) occasionally, for 64(39%) sometimes and for 10(6.1%) usually. Out of those who had history of mothers' physical violence 68(67%) were physically abused during their lifetime by their partners. Out of those women whose partner had history of drinking alcohol 60(56%) were physical abused in the last 12 months. From ethnics the life time of physical violence were 74(56.5%) among the Kunama & 52(39.7%) among Tigrigna

One participant (25 years old, male, orthodox) from Kunama ethnic witness that:

“...sometimes with my wife we made conflict at that time (when I anger) rely I don't want that my wife to be in front of me, if she I throw something or push her that may hurt her”

Out of a total of 422 women who have participated in this study, the life time prevalence of any form of physical violence was 131(31.04%) and one out of every four women (25.35%) were physically abused in the last 12 months. From the different types of physical violence slapping was the most frequently reported act of violence 101(61.6%) during lifetime and 78(47.6%) in the last 12 months followed by throwing something to hit 32(19.5%) during lifetime, while 12(7.3%) were Kicked/hit/bit in the last 12 months and only 5(3%) of women were Choked in their lifetime.

(Table 4)

In addition to the above one married women (23 years old, Muslim) from Kunama ethnic express her view as follows:

“...there are a lot of men here more than girls so this expose us for different types of violence, if I went to shop or for collection of wood somewhere many man want to talk, then my husband suspects me and he can do any violence on me (insult, slapped me)....”

Table 4: Life time and 12 months prevalence and types of partners' physical violence among women in Shimelba refugee camp, 2011

Type of physical violence	Life time prevalence		12month prevalence	
	No	Yes	No	Yes
Threw objects	132(80.5%)	32(19.5%)	148(90.2%)	16(9.8%)
Push, gripped/shoved	153(93.3%)	11(6.7%)	157(95.7%)	7(4.3%)
Slapped	63(38.4%)	101(61.6%)	86(52.4%)	78(47.6%)
Kicked/hit/bit	145(88.4%)	19(11.6%)	152(92.7%)	12(7.3%)
Hit with something /try to hit	154(93.3%)	10(6.1%)	160(97.6%)	4(2.4%)
Beat up	160(97.6%)	4(2.4%)	163(99.4%)	1(0.6%)
Choked	159(97%)	5(3.0%)	163(99.4%)	1(0.6%)
Threatening with knife or weapon	161(98.2%)	3(1.8%)	163(99.4%)	1(0.6%)
Used knife/weapon	162(98.8%)	2(1.2%)	-	-
Overall prevalence of physical partners violence	-	131(31.04)	-	107(25.35)

The lifetime & 12months prevalence of partner physical violence among pregnant women was 17(30.4%) & 11(19.6%) respectively. Out of all respondents that 9(28%) thrown objects to them by their husband and 4(21%) kicked/hit/bit in their life time were pregnant women. About 2(29%) of pregnant women had push, gripped/shoved in the last 12 months. **(Figure 4)**

One husband from Tigrigna ethnic stated: “.....in this camp the number of women is so small as compared to men, so I always alert my wife not to make other friendship with men unless she give birth I always suspect her, I threatening her if I saw her with boy...”

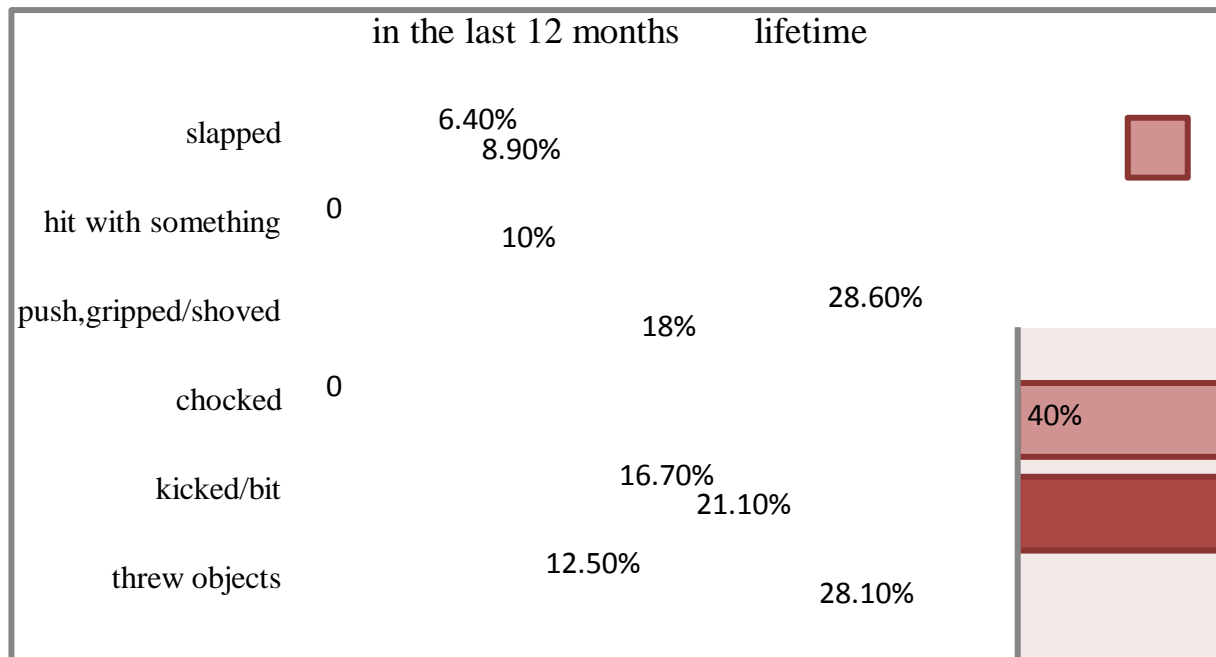


Figure 4: Life time and 12 months prevalence and type of partners’ physical violence among currently pregnant women in Shimelba refugee camp, 2011

Regarding the occurrence of different types of physical violence per single women most 98 (74.81%) women experienced only one type of physical violence during lifetime and in the last 12 months, 18(13.74%) two types and only 8(6.11%) of women experienced 4 types of physical violence during their life time. From those who experienced physical violence in their lifetime majority of women 120(91.6%) and during 12 months 94(71.75%) experienced moderate type of violence, and 32(24.23%) in their life time and 16(12.21%) during the last 12 months were experienced sever types of violence.

Forty seven (11.1%) women were beat by any man other than their husband in the refugee camp. Mostly, 25(53.2%) which was perpetrated by unknown man in and around the camp and 11(23.4) by the women relatives. The condition in which most 30(63.8%) violence occurred was at any movement in the camp and 9(19.15%) during fire wood collection.

In addition to the above finding one social worker married women from Kunama ethnic indicated:

“...many women get even abused outside their home by other men in the camp, during fire wood collection, night time and the building status of house also exposes women to different types of violence’s...”

5.6 Immediate consequence of physical Violence

Among the 131 women who reported the experience of physical violence in their lifetime, 81(61.07%) have had health related problems. The most common types of health problems were difficulty with daily activity 51(63%), pain 19(23.5%), difficulty during walk 12(14.8%) and fracture/dislocations , damage to ear & deep cut of body parts accounts for 2(2.5%) respectively which is acquired after physical violence. **(Figure 5)**

In addition to above one participant from in-depth interview (32 year old, married women) from Saho ethnic stated:

“...many wife get attacked by their husband and didn’t tell to any one; they hide the problem and after time the violence may become severe and may get exposed to different problems especially psychological problem, due to slapping their face become injured & got hearing problem ...”

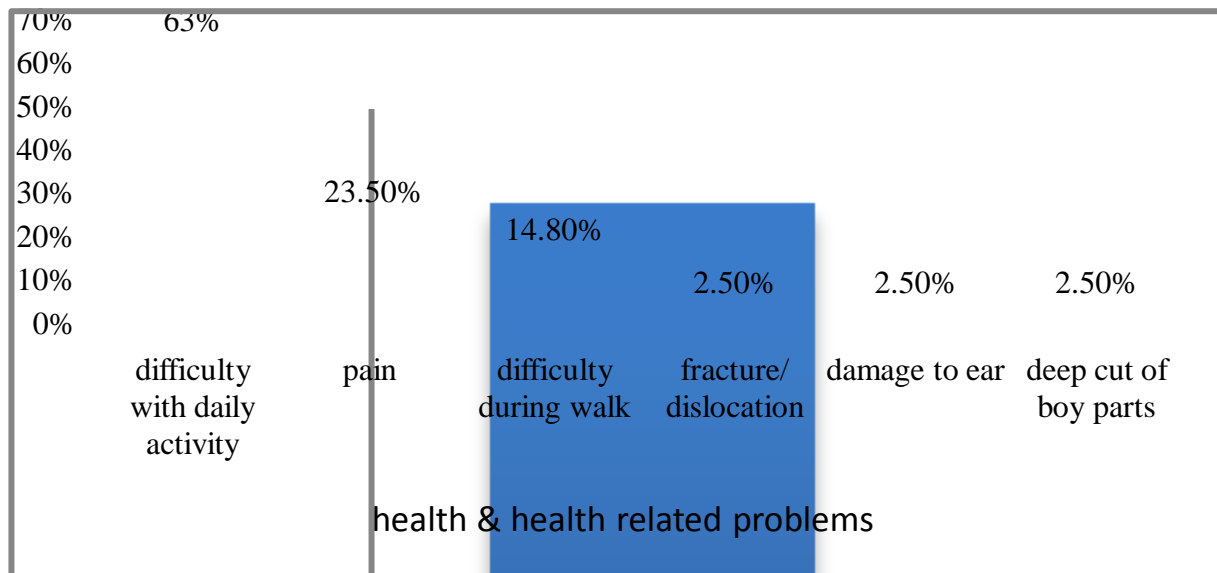


Figure 5: Different types of health related problem caused as result of partners’ physical violence among women in Shimelba refugee camp, 2011

Regarding the ever told experience of violence to someone, among 131 physically abused women in their lifetime 58(41.22%) didn’t share their experience of violence to any one and among those who shared their experience to someone only 58(75.3%) got helpful response. From those who

experience health related problem after violence 56(69.1%) women had not ever tried to treat their injury or health problems.

Married women from Tigrigna ethnic indicated: *“...what ever the women was abused she didn't told to any one because she fear if her husband hear from someone else and he may again violate her, even she didn't go outside when she abused she has nowhere to go and considers her home and her husband her only option”*

Effort method to overcome conflict or violence between partners were most of women 97(59.1) did nothing followed by quitting the house temporarily 48(29.3%) following violence (**Figure 6**)

Married women from Tigrigna ethnic stated: *“...during conflict my husband become so anger so I goes outside until he control his emotion”*

The sex related consequences of physical violence were reported in the form of forced sexual act by partner, which accounts for 9(7%) among those physical abused women.

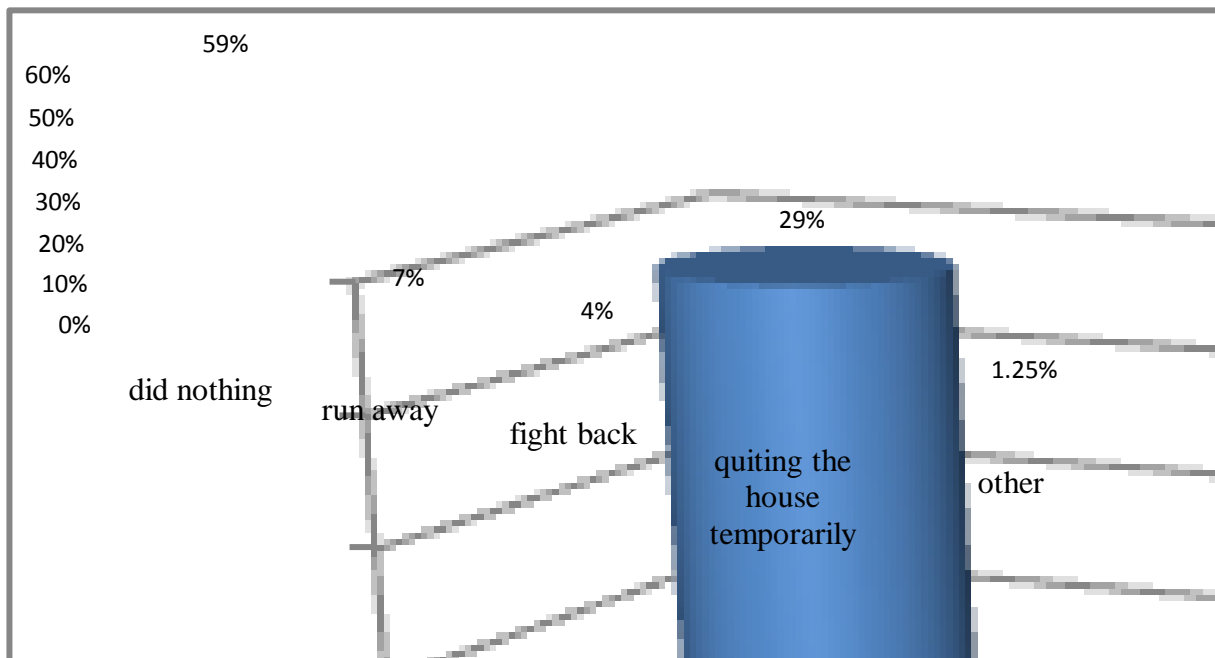


Figure 6: Frequent efforts made to overcome the act of partners' physical violence among women in Shimelba refugee camp, 2011

5.7 Factor related with the causes of physical partner violence in life time and last 12 months

The association of different background factors of the women with experience of physical violence in their lifetime and last 12 months was observed by both binary and multiple logistic regression level of analysis.

Factors of physical violence in the life time (marital life)

At bivariate analysis level the likelihood of experiencing physical violence in the lifetime was higher among Muslim and Catholic religion follower women than those Orthodox Christian followers (COR= 3.214 [95% C.I: 1.852, 5.576]) and (COR= 2.083 [95% C.I: 1.132, 3.834]) respectively, 9 times higher among farmer women by occupation than those housewife (OR= 9.627 [95% C.I: 3.504, 26,449]) and higher among women who know that their current partner has other wife than those that their current partner did not have other wife (COR= 1.881 [95% C.I: 1.055, 3.355]). And almost 2 times higher among women whose current partners 'drink alcohol and chew khat or smoke cigarette or tobacco than those women's partner don't drink alcohol and chew khat or smoke cigarette or tobacco (COR= 1.95[95% C.I: 1.285, 2.961]) and (COR= 2.203[95% C.I: 1.117, 4.345]) respectively.

The odds of experiencing physical violence in their life time was higher among women whose current partner was illiterate and can read & write compare to those women whose current partners have higher education level (COR= 5.312[95% C.I: 1.172, 24.091]) and (COR= (5.484 [95% C.I: 1.142, 26.34]) respectively, lesser by 52% times among women who have daily laborer partner by occupation than those who have farmer partner(COR= 0.482[95% C.I: 0.252, 0.922]) and less to experience physical violence in their life time among those primary (by 78% times) and (by 75% times less) secondary school women compare to those who have diploma & above (COR= 0.223[95% C.I: 0.51, 0.98) and (COR= 0.153[95% C.I: 0.032, 0.725) respectively. Women who had been beaten by any man in the camp other than their intimate partner were at an increased risk of physical partner violence in the life time compared with women who didn't beaten by any man other than their intimate partner in the camp (COR= 2.148[95% C.I: 1.161, 3.971]). **(Table 5)**

Table 5: Bivariate logistic regression model on factors associated with partners' physical violence in life time among women in Shimelba refugee camp, 2011.

Variable	Physical violence in the life time		Crude (COR)	P value
	No	Yes		
Religion of women				
Orthodox	200(75%)	66 (50%)	1	
Muslim	33(11%)	35 (27%)	3.2(1.9, 5.6)*	<0.001
Catholic	32(11%)	22 (17%)	2.1(1.1, 3.8)*	0.018
Protestant	22(8%)	7(5%)	1.0(0.4, 2.4)	
Other	4(1%)	1(1%)	0.8(.08, 6.9)	
Occupation of women				
Housewife	266(72%)	107(80%)	1	
Trading	8(3%)	4(3%)	1.3(0.4, 4.3)	
Employee	6(2%)	3(2%)	1.3(0.3, 5.2)	
Farmer	5(2%)	19(15%)	9.6(3.5, 26.4)*	<0.001
Educational status of women				
Illiterate	108(37%)	65(50%)	0.3(0.8, 1.6)	
Can read and write	32(11%)	12(9%)	0.2(0.4, 1.1)	
Primary school(1-8 grade)	97(33%)	36(27%)	0.2(0.5, 0.9)*	0.047
High school(9-12 grade)	51(18%)	13(10%)	0.1(0.03, 0.7)*	0.018
Higher education	3(1%)	5(4%)	1	
Current partner have other wife				
Yes	31(11%)	24(18%)	1.8(1.0, 3.4)*	0.032
No	260(89%)	107(82%)	1	
Educational status of partner				
Illiterate	72(25%)	45(34%)	5.3(1.2, 24.1)*	0.03
Can read and write	31(11%)	20(15%)	5.5(1.1, 26.3)*	0.034
Primary school (1-8)	85(29%)	35(27%)	3.5(0.7, 15.9)	
High school (9-12grade)	86(30%)	29(22%)	2.8(0.6, 13.2)	
Higher education	17(6%)	2(2%)	1	
Occupation of partner				
Farmer	80(27%)	47(36%)	1	
Merchant	28(10%)	18(14%)	1.1(0.5, 2.1)	
Employee	25(9%)	13(10%)	0.8(0.4, 1.9)	
Daily laborer	60(21%)	17(13%)	0.4(0.2, 0.9)*	0.027
No job	87(30%)	34(26%)	0.7(0.3, 1.1)	
Other	11(4%)	2(2%)	0.3(0.0, 1.4)	
Partner drink alcohol				
Yes	112(38%)	72(55%)	1.9(1.2, 2.9)*	0.002
No	179(62%)	59(45%)	1	

Table 5.....continued

Partner chew khat or smoke cigarette or tobacco					
Yes	25(9%)	38(29%)	4.3(2.5, 7.6)*		<0.001
No	266(91%)	93(71%)	1		
Women know other husband to beat his wife					
Yes	112(38%)	92(70%)	3.8(2.4, 5.9)*		<0.001
No	179(62%)	39(30%)	1		
History of women mother beating					
Yes	34(12%)	68(52%)	8.1(4.9, 13.4)*		<0.001
No	257(88%)	63(48%)	1		
Women Beaten by any man other than husband					
Yes	22(9%)	22(17%)	2.1(1.1, 3.9)*		0.015
No	266(91%)	102(83%)	1		

* Statistically significant variables at P<0.05

After controlling for all significant variables in the bivariate analysis in the lifetime multivariable logistic regression showed participants who were Muslim by religion were about 2 times more likely to experience physical violence in lifetime as compared to those who were Orthodox Christian followers (AOR= 2.47[95% C.I: 1.107, 5.512]), about 13 times more for those farmer women as compared to those who were housewife by occupation (AOR= 13.06 [95% C.I: 3.742, 45.578]). Women who had history of mother beating were 9 times more likely to experience physical violence compared to those women who had no history of mother bettering (AOR= 9.781[95% C.I: 5.271, 18.149) and increasing risk of physical violence among women who know other husband to beat his wife in neighbor (AOR= 1.875[95% C.I: 1.002, 3.508). (**Table 6**)

Table 6: Predictor of partners' physical violence in life time among women in Shimelba refugee camp, 2011

Variable	Physical violence in the life time		Adjusted (AOR)**	P value
	No	Yes		
Religion of women				
Orthodox	200(75%)	66 (50%)	1	0.027
Muslim	33(11%)	35 (27%)	2.4(1.1, 5.5)*	
Catholic	32(11%)	22 (17%)	1.2(0.5,3.0)	
Protestant	22(8%)	7(5%)	1.2(0.4,3.9)	
Other	4(1%)	1(1%)	0.4(0.03, 6.1)	
Occupation of women				
Housewife	266(72%)	107(80%)	1	<0.001
Trading	8(3%)	4(3%)	0.4(0.1, 2.2)	
Employee	6(2%)	3(2%)	3.2(0.4, 23.5)	
Farmer	5(2%)	19(15%)	13.1(3.7,45.6)*	
Women know other husband to beat his wife				
Yes	112(38%)	92(70%)	1.8(1.0, 3.5)*	0.049
No	179(62%)	39(30%)	1	
History of women mother beating				
Yes	34(12%)	68(52%)	9.8(5.2, 18.1)*	<0.001
No	257(88%)	63(48%)	1	

Factor association with physical partner violence in the last 12months

In bivariate analysis the likelihood of experiencing physical violence in the last 12 months was higher among Muslim and Catholic religion follower women than those Orthodox Christian followers (COR= 2.8 [95% C.I: 1.6, 5.0]) and (COR= 2.4 [95% C.I: 1.2, 4.5]) respectively, among farmer women by occupation compare to those housewife (COR= 5.6 [95% C.I: 2.3, 13.2]) and among women that the current relationship with partner was arranged by couples agreement than those family supported relation (COR= 2.04 [95% C.I: 1.2, 3.2]).

There was less likelihood of experiencing physical violence in the last 12 months among women that can read & read, primary school and secondary school compare with women in higher

education level, among the women whose partner was above grade 12 than women having illiterate partner (COR= 0.1[95%C.I: 0.01, 0.9) and among the women whose partner was employee(governmental or nongovernmental) and daily laborer than those women whose partner was farmer (COR= 0.318[95%C.I: 0.1, 0.8]) and (COR= 0.4[95%C.I: 0.2, 0.9]) respectively, higher among women whose current partners ‘drink alcohol and chew khat or smoke cigarette or tobacco than those women’s partner don’t drink alcohol and chew khat or smoke cigarette or tobacco (COR= 1.9[95%C.I: 1.2, 3.0]) and (COR= 3.607 [95%C.I: 2.1, 6.3]) respectively and women victims of partner violence were 28 times more likely to suffer injury (COR=28.9, [95% C.I 15.3, 54.5]) but was not significantly associated with receive medical attention. (Table 7)

Table 7: Bivariate logistic regression model on factors associated with partners’ physical violence in the last 12 months among women in Shimelba refugee camp, 2011.

Variable	Physical violence in last 12 months		Odds Ratio and 95% C.I	
	No	Yes	Crude (COR)	P value
Religion of women				
Orthodox	214(68%)	52 (49%)	1	
Muslim	40(13%)	28 (26%)	2.8(1.6, 5.09)*	<0.001
Catholic	34(11%)	20 (19%)	2.4(1.3, 4.5)*	0.006
Protestant	22(7%)	7 (7%)	1.3(0.5, 3.2)	
Occupation of women				
Housewife	286(91%)	85(79%)	1	
Trading	8(3%)	4(4%)	1.7(0.5, 5.7)	
Employee	6(2%)	3(3%)	1.7(0.4, 6.9)	
Farmer	9(3%)	15 (14%)	5.608(2.37,13.267)*	<0.001
Educational status of women				
Illiterate	124(39%)	49 (46%)	0.2(0.05, 1.03)	
Can read and write	34(11%)	10 (9%)	0.2(0.04, 0.9)*	0.033
Primary school(1-8 grade)	102(32%)	31 (29%)	0.2(0.04, 0.8)*	0.025
High school(9-12 grade)	52(17%)	12 (11%)	0.1(0.03, 0.7)*	0.013
Higher education	3(1%)	5 (5%)	1	
Relationship b/n partner arranged				
Family supported	140(44%)	31 (29%)	1	
Agreements of both	166(53%)	75 (70%)	2.04(1.3, 3.3)*	0.003
Purposely	3(1%)	1 (1%)	1.5(0.1, 15.0)	
Educational status of partner				
Illiterate	81(26%)	36 (34%)	1	
Can read and write	37(12%)	14 (13%)	0.8(0.4,1.766)	
Primary school (1-8)	88(28%)	32 (30%)	0.8(0.5, 1.4)	
High school (9-12grade)	91(29%)	24 (22%)	0.6(0.3, 1.1)	

Table 7..... continued				
	18(6%)	1 (1%)	0.1(0.01, 0.97)*	0.047
Higher education				
Occupation of partner				
Farmer	86(27%)	41 (38%)	1	
Merchant	30(10%)	16 (15%)	1.119(0.549, 2.279)	
Employee	33(10%)	5 (5%)	0.3(0.1, 0.9)*	0.026
Daily laborer	63(20%)	14 (13%)	0.466(0.2, 0.9)*	0.03
No job	92(29%)	29 (27%)	0.7(0.4, 1.1)	
Other	11(3%)	2 (2%)	0.4(0.08, 1.8)	
Partner drink alcohol				
Yes	124(39%)	60 (56%)	2(1.3, 3.1)*	0.003
No	191(61%)	47 (44%)	1	
Partner chew khat or smoke cigarette or tobacco				
Yes	32(10%)	31(29%)	3.6(2.1, 6.3)*	<0.001
No	283(90%)	76 (71%)	1	
Women know other husband to beat his wife				
Yes	129(41%)	75 (70%)	3.4(2.1, 5.4)*	<0.001
No	186(59%)	32 (30%)	1	
History of women mother bettering				
Yes	46(15%)	56 (52%)	6.4(3.9, 10.5)*	<0.001
No	269(85%)	51 (48%)	1	
Injury as result of violence				
Yes	16(5%)	65(61%)	28(15.3, 54.6)	<0.001
No	299(95%)	42(39%)	1	

After adjusted for all significant variable in the last 12 months in bivariate analysis, the multiple regression analysis showed women who had history of mother bettering were 6 times more likely to experience physical violence in the last 12 months compared to those women who had no history of mother beating) (AOR= 6.7[95% C.I: 3.1, 14.4]), 2 times higher among those women whose current partners drink alcohol than those women having partner not drink alcohol (AOR=2.2[95% C.I 1.04, 4.6) and those women whose partner was employee were 93% time less experience of physical violence compare to those women whose current partner is farmer (AOR=0.07[95% C.I 0.1, 0.4]). Women victims of partner violence were 37 times more likely to suffer injury (OR=37.49, [95% C.I 14.4, 97.5]). (**Table 8**)

Table 8: Predictors of partners' physical violence in the last 12 months among women in Shimelba refugee camp, 2011

Variable	Physical violence in last 12 months		Odds Ratio and 95% C.I	
	No	Yes	Adjusted (AOR)**	P value
Occupation of partner				
Farmer	86(27%)	41 (38%)	1	
Merchant	30(10%)	16 (15%)	0.98(0.28,3.46)	
Employee	33(10%)	5 (5%)	0.07(0.1, 0.41)	0.003
Daily laborer	63(20%)	14 (13%)	0.39(0.13,1.21)	
No job	92(29%)	29 (27%)	0.219(0.06, 0.77)	0.017
Other	11(3%)	2 (2%)	1.68(0.23, 12.54)	
Partner drink alcohol				
Yes	124(39%)	60 (56%)	2.19(1.04, 4..59)	0.038
No	191(61%)	47 (44%)	1	
History of women mother beating				
Yes	46(15%)	56 (52%)	6.74(3.15, 14.39)	<0.001
No	269(85%)	51 (48%)	1	
Injury as result of violence				
Yes	16(5%)	65(61%)	37.49(14.42, 97.47)	<0.001
No	299(95%)	42(39%)	1	

According to the report of in-depth interview most husband and some social workers in the camp stated that the factors for physical violence between partners was not learn form mistake, not becoming honest, lying, wife didn't' practice what the husband told, less respect to husband, culture view, male dominance in family relation, Jealousy, hunger and poverty and being a refugee, separating from family, poor communication between partners', condition of the camp and absence of job opportunity were some of the factors stated.

Chapter six: Discussion

The overall lifetime prevalence rate of partners' physical violence among women was 131(31.04%) which is consistent with study done in Gondar 32.2% and Uganda 30%. (18, 24). But this is lower as compared from study conducted in Butajira(45%), Palestinian refugees (42.5%), rural Ethiopia(49.5%) and Jordanian refugee (44.7%). (16, 25, 46, 47). This might be due to difference in study area, cultural difference and time gap. But higher compared to a study done Lebanon (22%) (26). this could be due to most (57.1%) of the women marital relationship is arranged by themselves without family involvement and there is positive statistical significant difference between self arranged relation and experiencing of physical violence than family supported. This finding was also supported in several aspects like women's and husband explanations on own or friends experience of violence in domestic relations, condition of the camp, jealousy, hunger and poverty, male dominance in the family relations and high number of men in the camp.

Prevalence of physical violence in the last 12 months in this study was 107 (25.35%) which is consistent with the study done in León, Nicaragua 27% of ever-partnered women had been assaulted by a partner in the previous 12 months, but it is lower when it is compared with study conducted in the Republic of Korea (38%), and 52% of currently married Palestinian women in the West Bank and Gaza Strip (28). But it is higher when compared with study in Rakai, Uganda (20%) (24). and 3% of women in Australia, Canada and the US (28). Apart from methodological issues, the difference in magnitude of physical violence among different body of literatures and in this study could be explained by socio cultural and societal perspectives and contexts of the population under study that differ between the nations and within the nations.

The prevalence of physical violence among pregnant women in the lifetime & 12months by partner was 17(30.36%) & 11(19.64%) respectively which is higher compared among refugees in Lebanon (16.6%) for beating behavior during pregnancy(17), this may be due the difference in number of population and number of pregnant women in study population and the difference in study area.

The type of physical violence most frequently event, in this study was slapping which accounted for almost two third of the abused women 101(61.6%), this was followed by throwing objects accounting 32(19.5%), 11.6% kicked/bit , 6.7% pushed, gripped/shoved, 3% choked and 1.2% partner used knife/weapon to hit them which is consistence with study conducted in Brazil shows slaps and shoves were the most frequent acts reported with regard to physical violence(31) and survey in 10 country reveal that 12% of women in couples in Bangladesh and 9 % in Kenya were kicked, dragged, or beaten up(32).

Other study in Jordanian refugee camps shows that slapping was the most common 36.0% beating behavior, followed by pushing, grabbing or shoving 23.5%, kicking or hitting with the fists 12.6%, throwing harmful objects 10.8%and choking 3.1% (47), in this case slapping was higher magnitude in this study but lower magnitude in pushing, grabbing or shoving compare to study in Jordanian refugee camps this may be due higher levels of women with moderate violence in this study.

The finding of current study was higher in specific types of physical violence when compared to study made in India among 296 respondents, Physical violence varied from slapping (56.9%), physically hurt (33.6%), and kicking (9.5%) during their married life (30), this may also be due to the observation of higher level of moderate violence in this study, but it lower in specific act of physical violence compare to study done in Butajira found 76% of the lifetime physically abused women were slapped with fist(16). This might be due to difference in study area, cultural difference and time gap.

One fourth and two third of the women had moderate and sever types of violence in the last 12 months respectively and it is higher than study done in Leo´n (20%) and Jordanian refugee camps (59.5%). (29, 47). The different may be due to different types & use of different measuring of severity of physical violence in different study.

Most (74.81%) of the women experienced one episode of physical violence which is higher compared to other evidence in refugee communities in Lebanon showed that overall, 22% of their wives reported that wife beating occurred at least once during their married life (17). The difference could be due to different in the study area, culture, duration of relationship between partners’.

In the last 12 months in this study most of the women 74.81% experienced one episode of physical violence & 25.19% more than one means 5.34% two episode, and only 0.75% of abused women had four and above episode which is higher than study in the León, 60% of women abused during the previous year had been attacked more than once(29) and other study of the women interviewed from cross sectional study in Albania, 37% reported at least one episode of spousal physical violence in the past year, 4% two, 4% (27). The difference could be due to different in the study area, culture, duration of relationship between partners’.

Regarding the immediate consequence of physical violence in this study among the 131 women who reported that they experience physical violence in their lifetime, most of them 81(61.07%) experienced health related problems which is higher when it compared with WHO multi-county study, between 19% and 55% of women who had ever been physically abused by their partner were ever injured (45). Our finding also higher than study done in Butajira found 53% reported minor and serious somatic injuries in their lifetime (16) and also higher among study conducted in Jourdan refugee camp that 10.4% of respondents reported that women suffered from any type of physical injury as a result of beating(47).

The most common types of health problems in this study were difficulty with daily activity 51(63%), pain 19(23.5%), difficulty during walk 12(14.8%) and fracture/dislocations , damage to ear & deep cut of body parts accounts for 2(2.5%) respectively acquired after physical violence which is consistence with WHO multi-county study regarding the types of injuries found the specific health problems in the previous 4 weeks: difficulty walking, difficulty with daily activities, pain, memory loss, and dizziness(45).

Comparing our study finding from study in south Ethiopia Butajira and Jourdan refugee camp related to types and magnitudes of injure 46% in Butajira had acquired minor lacerations or scars and 7.1% in Jourdan had bruise and cuts but in our study it is lower only 2%; 7% had reported to have fracture or dislocation in Butajira but in our study it is higher 14%; and 2% had lost their vision in Butajira but no one in our study loss her vision (16, 47) this all shows in different studies

there are different consequences with different in magnitude depending the type and severity of physical violence.

The chance to experience physical violence in last 12 months in this study was significantly associated with injure and multiple logistic regression showed that women victims of partner violence were 37 times more likely to suffer injury in the last 12 months (AOR=37.49, [95% C.I 14.42, 97.47], which is consistence with multi-country study on women found significant associations between lifetime experiences of partner violence and self-reported poor health (45), and also consistence with studies in Canada and the United States have shown that female victims of partner violence are three times more likely to suffer injury, five times more likely to receive medical attention (42), but in our finding receive medical care were no significantly associated with the injuries as result of physical violence.

Regarding the ever told experience of violence to someone in this study, among 131 physically abused women in their lifetime 58(41.22%) didn't share their experience of violence to any one similar report by WHO in 2002 denial and the fear of being socially ostracized often prevent women from reaching out for help. Studies have shown that around 20–70% of abused women never told another person about the abuse until they were interviewed for the study (28) but in our study higher amount of abused women didn't share their experience. This all also supported in the present qualitative data

Married women from Tigrigna ethnic indicated: *"...because of fear women didn't told their abuse to anyone, even she didn't go outside because she has nowhere to go and considers her home and her husband her only option"*

Study in India indicates the reasons for violence in household were disinterest of respondents in sexual activities (9.5%) which is most frequently reported perceived reasons and the sex related consequences of physical violence were reported in the form of forced sexual act by partner 82.8%(30). Other study by Campbell JC & Soeken K shows of the women who are physically abused by their intimate partners, 40% to 45% are forced into sexual activities by the partner (41). But in present study forced sexual act by partner was 7% among those physically abused women which is low compare to other study.

There is higher likelihood of experiencing physical violence in the lifetime among Muslim than those Orthodox Christian followers women (AOR=2.47 [95% C.I: 1.107, 5.512]) and there is significant difference among women who know other husband to beat his wife in neighbor than those who don't know (AOR= 3.77[95% C.I: 2.421, 5.87]). Which is consistency with study by Yohannes Dibaba in Arsi (2006) showed significant difference between Muslim and orthodox Christian (57) and literature from Arab state in which those who follow patriarch relation wife beating is common. In this study the difference may due the presence of Saho ethnic all were Muslim and Kunama ethnics in which most are Muslim in addition to this they were from rural origin and came from low social status which governed culturally and live together with their ethnic in some area in the camp.

After controlling for other variables being experiencing physical violence in the last 12 months was 2 times higher among women whose current partners 'drink alcohol than those women's partner don't drink alcohol (AOR= 2.19[95% C.I: 1.04, 4.59]) and a 29 years old woman from Tigrigna ethnic explained: *"...my husband is drinker & sometimes come at the midnight & makes conflict with me & started shouting at me using abusive language, calling me ugly & useless women. He twisted my fingers till one got dislocated. He kicked me several times on my face and stomach..."* this is consistency with study conducted around Gondar in Northwest Ethiopia in 2004 that physical violence was about five times more likely to occur among women whose male partners consume alcohol frequently and research in Aris zone, use of alcohol were associated with intimate partner physical violence (57).

Women who had history of mother battering in the last 12 months were 6 times more likely to experience physical violence in the last 12 months compared to those women who had no history of mother battering (AOR= 6.74 [95% C.I: 3.15, 14.39]) similarly with study around Gondar in Northwest Ethiopia in 2004 that domestic violence was 13 times more likely to occur among women with a family history of violence (18).

Those farmer women were 13 times more likely to experience physical violence in lifetime as compared housewife by occupation (AOR= 13.06 [95% C.I: 3.742, 45.578]) and those women whose partner was employee were 93% time less experience of physical violence in the last 12

months as compare to those women whose current partner is farmer (AOR=0.07[95%C.I 0.1, 0.41]). Which is consistence with study in South Africa factors include social and demographic characteristics of the men and women, their economic circumstances influence violence against women (34). Similarly study in south Asia in 2003 shown financial dependence on a partner or unemployment were the risk factors that contribute to this phenomenon (35).

Strength and Limitation of the study

Strength

- ⊕ This study has both qualitative and quantitative methodological components that help understanding of the findings.
- ⊕ The use of measurement of physical violence which is developed by WHO enabled to make the comparison of findings with other national and international literatures to be valid
- ⊕ Before conducting this study enumeration of all household is done to identify women with partners which has important to make probability sampling technique.
- ⊕ Use of female social workers (same sex) in the whole data collection process and having high response rate of 100%, one of the highest of the countries participating in the multi-country study and study in rural Ethiopia.

Limitation

- ⊕ Limited literatures at refugee make difficulty to compare with other refugee
- ⊕ Age of partner of the women is reported by women that may not be accurate.
- ⊕ Outcome is assessed only by the report of respondents.

⊕ Under reporting of physical violence was inevitable since study deals on sensitive issues and personal question.

⊕ Recall bias when lifetime experience is included.

Chapter seven: Conclusion and Recommendation

7.1 Conclusion

The prevalence of physical violence among refugee women was high in the last 12 months & lifetime as compared to other study in refugee and it ranges from moderate to severe violence, and slapping, thrown something and Kicking/hit/bit was the most common type of physical violence encountered among women by their male partner. This shows women in refugee camp are at risk of physical violence even during pregnancy time.

Partners' physical violence was contribute to difficulty with daily activity 63%, pain 23.5%, difficulty during walk 14.8% and fracture or dislocations , 2.5% damage to ear as result of slapping, 2.5% deep cut of body parts.

Being farmer, different in religion, having drinker partner & history of women mother bettering were found independent predictors of experiencing physical violence (increase risk), and having employee partner is reduce risk of physical violence

7.2 Recommendations

Based on these findings it is recommended for both ARRA and UNHCR (IRC)

There is a need to mobilize the community in camp and create awareness about the many adverse consequences of wife beating on women and their children through gender advocacy and formal/informal education through IEC especially to Kunama and Saho ethnics.

Providing education regarding taking excessive alcohol, smoking and substance use for men and shortening duration of stay in camp is paramount.

Male counseling and Special GBV care service should be needed.

For ARRA

Advocating difference religions to include education about effect of conflict in family relation and encourage women equality through giving supportive training to religious leaders in the camp.

The supporting structures such as health care services and counseling to alleviate psychological problems for those victims, legal authority's police and the traditional community leaders dealing with the conflicts in family relation should be strengthened through training and other possible ways of capacity building.

Encouraging the victims to report to legal bodies through different awareness created methods.

For local administration (police)

Specify the areas in which most violence occurs (abusive environment) & provide security and implementing the existing legal punishment by raising the awareness of responsible bodies about the prevalence & consequent of intimate partner violence on the women and their children.

For Researcher

Further research is needed to explore the relationship b/n violence & different religions, knowing women that other husband to beat his wife & experiencing physical violence, attitude of men in violation of their wife & on other types of violence against women.

Chapter Eight: Reference

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Chapter Nine: Annex

Annex 1. Questionnaire for Enumeration of HHs having women with partners

I. Informed Consent

Hello. My name is Mr./Mrs. _____ and I am part of a team of people who are carrying out a enumeration on the objective to assess the marital status of the Shimelba refugees. The importance of this study is used as a source of information for the second study on the objective to assess the magnitude and factors associated with partner physical violence among women with partners. So I would very much appreciate your participation in this enumeration. Your participation is voluntary and there is no penalty for refusing to take part. You may refuse to answer the question in the interview or stop it will be kept confidential. Thus, we hope that you will participate in this enumeration since your views are important. The interview will take about 5 minutes. Do you have anything to ask me about the enumeration? May I begin the interview now?
 Yes No

II. Socio-demographic characteristics

no	Question	Coded choice	Skip
101	Marital status	1. Never Married (single) 2. Having boy friend 3. Cohabit 4. Currently Married 5. Separated 6. Divorced 7. Widowed	

Annex 2. (Tigrigna) ናይ ጠቅላላ ህዝቢ ሓፈሻዊ ኩነታት መፍለጢ ቅጥዒ

ተቁ	ሕቶታት	ኮድ መግረፅታት	ዝለል
101	ናይ ሓዳር ኩነታት	1. ዘይተመረዐ/ት 2. ዓረኪ ዘለዎ/ቶ 3. ከይተመረዓው ብሓንሳብ ዝነበሩ 4. ዝተመረዐ/ት 5. ተፋላልዮም ዝነበሩ 6. ዝተፋተሉ/ት 7. ስብኣይ ዝሞታ	

Annex-3: Guideline Questions for in-depth interview ⁵⁰

I. Introduction and Consent

Hello, my name is Girmatsion Fisssha. I am a postgraduate student in public health at Jimma University and am instructor at the Mekelle University. As part of my graduate thesis, I am going to interview married men and women at the Shimelba refugee camp. The purpose of this study is to assess the magnitude and factor associated with partner's physical violence among the married women or women with partner at the Shimelba refugee camp. The findings of this study will inform policy-and decision-makers and consequently help the laws, policies and programs to be based on the reality on the ground, and hence any of your responses, positive or negative, are welcomed and highly appreciated. The interview might include some questions on private matters and may take 30 to 40 minutes. So your participation is voluntary and there is no penalty for refusing to take part. You may refuse to answer any question in the interview or stop the interview at any time. In order not to miss any points of the interview I will use a tape recorder if you voluntary. Any of your opinions and responses is confidential and will not be disclosed to any other party.

Are you willing to participate in this study?

[] Yes

[] No

I thank you in advance for your kindest cooperation.

Direction:

Please read the questions slowly and give time for the respondent to list her/his thoughts. Repeat the questions, if the respondent does not understand the question at all and try to clarify.

Date of Interview: ____/____/____. Time Interview started: ____:____

Time Interview Ended: ____:____ Interviewer Name: _____

II. Question for married women

A. Questions in relation to camp safety and outside of their home are:

1. When do you feel safe at the camp and when do you feel unsafe?
2. What makes you feel unsafe?
3. What do you do in these circumstances? To whom do you go?
4. If a woman is attacked, what are her options after the attack?
 - A. What happens if the woman reports the attack?
 - B. To whom would she report the attack?

B. Questions in relation to physical violence

1. What is your own view and experience of wife battering?
2. What are the main reasons that husband may hit his wife?
3. Are there any cultural traditions useful to safeguard the women from being battered in this camp? How do these traditions function if any?
4. Are these traditions functional at the present period?
5. Do you think it is fine for a husband to hit his wife? Why or why not?
6. Is it common for a husband to hit his wife?
7. Where does a woman go after she is beaten?
8. How does a woman heal physically?
9. How does a woman heal emotionally?
10. What do neighbors do if they witness a husband beating his wife
 - a. What do you think neighbors should do?

III. Question for married men

1. Tell me about your married life.
 - When and how did you meet your wife?
 - How was your married life?
 - Do you quarrel with your wife?
 - What do you do when you quarrel with your wife?
 - What is the cause for the conflict?
2. What do you understand by the term partner's physical violence?
 - Could you tell me all the acts that you regard as physical violence?
3. How common is physical partner's violence in this community?
4. Do you think physical partner's violence is a problem in the community?
 - Do you think the things you mentioned above happen to many women?
5. Why do you think physical partner's violence happens?
 - What do you think some of the causes are?
 - What predisposes women to partner's physical violence?
 - What triggers male partners to be violent to their spouses?
 - What is the role of cultural values and belief systems in the occurrence of partner's physical violence? Are there specific cultural elements which promote partner's physical violence/predispose women? Please tell me more about these.
6. Can you explain it by taking example from real life of couples you know?
 - Can you explain or describe their relationship

Annex 4. (Tigrigna)

መምርሒ ንናይ ውልቀ ዝግበር ጥልቅ ዝበለ ቃለመሕተት

መእተዊ ምስ ናይ ቃል ስምምዕነት ገፅ

ከመይ ትውዕሊ/ል ስመይ ግርማዕዮን ፍስሃ ብሕብረተሰብ ጥዕና ናይ ማስተር ተምሃሪ እንትኸውን ብተወሳኺ ውን ናይ መቐለ ዩንቨርሲቲ መምህር እዮ። እዚ ፅንዓት መመሪቂ ፀሐፊይ እዩ። ናይ ዚ ፅንዓት ዚ ዓላማ ዘተኩሮ ኣብ ሰብ ሓዳር ደቂ ኣንስትዮ ዝበፀሕ ናይ ሓይለ/ኣካል ጥቅዓት ንምህዳስ ተሓሲቡ ኣብ ሽመልባ ንዘለዎ ሰብ ሓዳር ወይ ዓርኪ ዘለወን ደቂ ኣንስትዮ ዝምልከት እዩ። ካልእ ናይ ዚ ፅንዓት ዚ ውዲኢት ንሕጊ መርቀቅቲ፣ ወሰንቲ ንናይ ደቂ ኣንስትዮ ወፅዓ ኣትኩሮት ንክህብ ዝገብር እዩ። ስለዚ ናተኪ/ካ ተሳትፎ ኣድላዩ እዩ። ኣብዚ መሕትት ዝለዓሉ ሓደ ሓደ ሕቶታት ምናልባት ንናይ ውልቃዊ ሂወትካ/ኪ ዝድህሱሱ/ዝትንኩፉ ክኮኑ ይክእሉ እዮም። መሕተቱ ንምዝላም ዝወስድ ጊዜ ካብ 30-40 ደቂቃ እዩ። ንምስታፍ ናይ ባዕልኪ/ካ ደሌት/ተበግሶ ጥራሕ እዩ ዘድሊ። ብዘይ ምስታፍኩም ዝበፀሐኩም ምንም ነገር የለይ። ኣብ ዝኾነ ይኩን እዋን እንተዘይ ተስማሚዑኪ/ካ ምቁራፅ ይክኣል እዩ። ብፍቃድኩም መሰረት እውን ድምፂ ክቀድሕ ይክእል እዩ። እትህብዎ መልሲ ወይ ሓሳብ ምስጢሩ ዝተሓለወ እዩ።

ንምስታፍ ፍቓደኛ ዲኺ/ኻ

[] እወ

[] ኣይፋል

ንትሕብብርካ/ኪ ብጣዕሚ እየ ዘመስግን።

ኣንፈት ሓባሪ ንሓታቲ

ብዝተክኣለካ/ኪ መጠን ድምፅካ/ኪ ከምዝስማዕ ጌርካ/ኪ ጊዜ ብምሃብ ንክምልሱ ግበር/ሪ። ተሓታቲ እንተዘይ ተረዲእዎ ደጋጊምካ/ኪ ኣብራህ/ሂ።

ዝተሓተተሉ መዓልቲ/ዕለት-----

መሕተቱ ዝጀመረሉ ግዜ ----- ዝወደአሉ ግዜ-----

ስም ሓታቲ-----

ንዝተመርዐዎት ሰበይቲ ዝተዳለዎ ሕቶታት

ሕቶታት ብዛዕባ ናይ ካምፕ ፀጥታን ካብ ገዛ ወፃኢ ዘሎ ኩነታት ዝምልከት

1. ኣብ ካምፕ እንትነብሪ መዓስ ኢኺ ድሕንነትኪ ዝተሓለዎ ኮይኑ ዝስመዐኪ ወይ መዓስ ኢኺ ድሕንነትኪ ኣስጋኢ ኮይኑ ዝስመዐኪ?
2. ድሕንነትኪ ኣስጋኢ ክኮን ዝገብሩ ነገራት እንታይ እዮም?::
3. ኣብ ኣስጋኢ ጊዜ/ኩነታት እትገብረዮ ነገር ኣንታይ እዩ ወይ ናብ መን ኢኺ ትኸዲ?
4. ሓንቲ ጋል ኣንስተይቲ ኣብ ካምፕ ብዝኮነ ሰብ ናይ ሓይሊ/አካል ጉድኣት እንተተበዒሎ እንታይ ክትገብር ኣለዎ አልኪ ትሃስቢ?
 - ናብ ዝምልከቶ እንተጠሪዓ ዝስዕብ ነገር/መልሱ ኣንታይ ይመስለኪ?
 - ናብዮናይ ኣካል እያ ጥርዓን እተቅርበሉ?

ብዛዕባ ናይ ሰብ ሓዳር ናይ ሓይሊ/አካል ጥቅዓት ዝኸውን ሕቶታት

1. ብናትኪ ኣረኣእያ ወይ ልምዲ ኣብ ሰብ ሓዳር ደቂ ኣንስትዮ ዝበፅሕ ናይ ሓይሊ/አካል/ማህረምቲ ወይ ጥቅዓት ከመይ ትሪኢዮ?
2. ምክንያቱስ እንታይ ይኸውን ትብሊ?
3. ሰብ ሓዳር ደቂ ኣንስትዮ ካብ ናይ ሓይሊ/አካል/ማህረምቲ ጥቅዓት ዝከላከል ባህላዊ ልምድታት ኣብ ካምፕ ኣለዉ ዶ? እንተሃልዮም ከመይ ኢሎም እዮም ዝትግበሩ?
4. ኣብዚ ጊዜ እዚ ንሰብ ሓዳር ደቂ ኣንስትዮ ካብ ናይ ሓይሊ/አካል/ማህረምቲ ጥቅዓት ዝከላከል ባህላዊ ልምድታት ኣለዉ ዶ?
5. ስብኣይ ንሰበይቱ ናይ ሓይሊ/አካል/ማህረምቲ ከብፀሐላ ፅቡቅ እዩ ዶ ትብሊ?
6. ስብኣይ ንሰበይቱ ናይ ሓይሊ/አካል/ማህረምቲ ከብፅሕ ዝተለመደ ኩነታት እዩ ዶ ትብሊ ኣብ ካምፕ?
7. ሰበይቲ ብሰብኣይ ናይ ሓይሊ/አካል/ማህረምቲ ምስ በፅሓ እንታይ እያ ትገብር ወይ ናበይ እያ ትኸይድ?
8. ሰበይቲ ብሰብኣይ ናይ ሓይሊ/አካል/ማህረምቲ ምስ በፅሓ ከመይ ኢላ እያ ኣአምሮኣ አተረጋግዐ?
9. ሰበይቲ ብሰብኣይ ናይ ሓይሊ/አካል/ማህረምቲ ምስ በፅሓ ከመይ ኢላ እያ ናብ ፅቡቅ ዝተረጋገፀ መንፈስ እትምለስ?

10. ሰበይቲ ብሰብኣያ ናይ ሓይሊ/አካል/ማህረምቲ ምስ በፅሓ ጎረቤት እንታይ ይገብር ወይ ጎረቤት እንታይ ክገብር ኣለዎ ትብሊ።

ንዝተመርዐዎት ሰብኣይ ዝኸውን ሕቶታት

1. ብዛዕባ ሓዳርካ ዘሎ ሓቤሬታ ዶ ክትነግረኒ?
 - ማለት መዓስ፣ከመይ ምስ በዓልቲ ሓዳርካ ከምዝተራኸብኩም?
 - ናይ መርዓኻ ኩነታት ከመይ ከምዝኾነ?
 - ምስ ሰበይትኻ ተጋጭኹም ወይ ኣኸሪኻያ ዶ ትፈልጥ?
 - ምስ ሰበይትኻ እንትኻረ እንታይ ትገብር?
 - ምክንያት ናይ ግጭት እንታይ እዩ ትብል?
2. ኣብ ሰብ ሓዳር ደቂ ኣንስትዮ ዘሎ ናይ ሓይሊ/አካል ጥቅዓት እንታይ ዓይነት ኣረኣኢያ ኣለዎካ?
 - ብናትካ ኣረኣኢያ ናይ ሓይሊ/አካል ጥቅዓት እዮም እትብሎም ክትነግረኒ ዶ ትክእል?
3. ኣብ ከባቢኩም ኣብ ሰብ ሓዳር ደቂ ኣንስትዮ ዝበፅሕ ናይ ሓይሊ/አካል/ማህረምቲ ወይ ጥቅዓት ዝተለመደ እዩ ዶ ትብል?
4. ኣብ ቡዙሓት ደቂ ኣንስትዮ ዶ ይፍፀም?
5. ምክንያት ኣብ ሰብ ሓዳር ደቂ ኣንስትዮ ዝበፅሕ ናይ ሓይሊ/አካል/ማህረምቲ ወይ ጥቅዓት እንታይ እዩ ትብል?
 - ማለት መልዕሊ ግጭት እዮም ትብሎም
 - ወይ መበኣኣስቲ እዮም ትብሎም
 - ባህላዊ ልምድታት ወይ እምነታት ኣብ ሰብ ሓዳር ደቂ ኣንስትዮ ዝበፅሕ ናይ ሓይሊ/አካል/ማህረምቲ ወይ ጥቅዓት እንታይ ኣስተዋፅኦ ይገብሩ። ንናይ ደቂ ኣንስትዮ ወፅዓ ዘባራታትዎ ልምድታት እትብሎም እንተሃልዩም
6. ንኣብነት እትፈልጦም ዝጋጩዉ ሰብ ሓዳር እንተሃልዩም ከመይ ከም ዝኾነ ዶ ትነግረኒ ማለት ብዛዕባ ርክቦም እና ካልእ እትፈልጦ ነገር እንተሃልዩ?

Annex-5: Household questionnaire (16, 46, 47 and 55)

Questionnaire ID Number _____

**Jimma university, faculty of public health, department of Population and Family
Health**

Block Name _____ House number _____

INTRODUCTION

This questionnaire is prepared for collecting information on factors associated with partner's physical violence among women, in Shimelba refugee camp, western Tigray, north Ethiopia

INFORMED CONSENT:

Greeting

Hello. My name is Mr./Mrs. _____ & I am part of a team of people who are carrying out a survey on objective assessing the magnitude and factors associated with partners' physical violence among women (Show a letter of approval). The findings of this study will inform policy-and decision-makers and consequently help the laws, policies and programs to be based on the reality on the ground, and hence any of your responses, positive or negative, are welcomed and highly appreciated. I would like to ask you some questions and it will take about 30 minutes. You can refuse to answer any question in & during the interview or stop the interview at any time. Your answers will be kept confidential, and we will not be taking down your name or address & the questionnaire will be coded, so your answers will be anonymous. Participation in this survey is voluntary and you can choose not to answer any individual question or all of the questions. However, we hope that you will participate in this survey since your views are important. There are no "correct" answers; each of your answers will depend on your views and your situation. At this time, do you have anything to ask me about the survey?

May I begin the interview now?

Start time ____: ____ End time ____: ____ Date ____/____/____

Respondent is Volunteer to be interviewed _____ Respondent is not volunteer to be interviewed _____

We would greatly appreciate your help in responding to this survey.

Name of interviewer _____ Signature _____ Date _____

Checked by supervisor: Name _____ signature _____ Date _____

**ENGLISH VERSION QUESTIONNAIRE FOR THE SURVEY OF
WOMEN'S ON PHYSICAL PARTNER'S VIOLENCE**

Part-one: Socio demographic characteristics		
No.	Questions	Alternative Choices for Responses
Q101	What is your age in Years?	_____years
Q102	What is your current religion?	1. Orthodox Christian 2. Muslim 3. Others (specify_____)
Q103	To which ethnic group do you belong?	1. Eritrea(Tigrigna speaker) 2. kunama Eritrea 3. kunama Tigray 4. saho 5. Others (specify_____)
Q104	Occupation	1. Housewife 2. Trading 3. Employee 4. Farmer 5. Other_____
Q105	Educational level	1. Illiterate 2. Can read and write 3. Primary school(1-8 grade) 4. High school(9-12 grade) 5. Higher education (above grade 12)
Q106	what is your place of birth (childhood growth)	1. urban 2. rural
Q107	How long have you been at the camp?	1. <6month 2. <1year 3. >1year
Q108	Have you been to any other camps?	1. Yes 2. No 3. Don't know
Q109	Type of current partner	1. Husband (using formal marriage) 2. Cohabiting partner 3. Boyfriend
Q110	How long have you stayed with your current partner?	_____year
Q111	Status of your current partner or husband.	1. First 2. Second 3. More than second

Q112	Does your partner has other wife	1. Yes 2. No 88. Don't know 99. No response
Q113	How was the marriage/relationship between you and your current partner arranged?	1. Family supported 2. Agreements of both 3. Purposely 4. Negotiated by male partner 88. Don't know 99. No response

Part-two: Household variables

No.	Questions	Alternative Choices for Responses
Q201	How many persons live in your household?	_____
Q202	Do you give birth?	1. Yes 2. No (if Skip to Q205)
Q203	If "Yes" to Q202 to how many children did you give birth	_____
Q204	How many children under five do you have?	_____
Q205	Are you currently pregnant	1. Yes 2. No
Q206	Which of the following individuals live with you?	1. No one lives 2. Mother /father of you 3. Mother /father of your partner 4. Your sister/ brother 5. Your partner's sister/ brother 6. other _____
Q207	Do you openly discuss about sexuality and reproductive health issues with your partner?	1. Yes (Skip to Q209) 2. No 88. Don't know 99. No response
Q208	If you answered "No" to Q 207, what is your main reason/	1. Cultural reason 2. You don't want 3. Your partner doesn't want 4. Lack of time 88. Don't know 99. No response

Q209	Relative to your neighbors how do you rate your economic position?	1. Very poor 2. Poor 3. Average 4. Better of than average 5. Rich 88. Don't know
Part –three: Husband related variables		
Q301	What is the age of your Partner in years?	_____years
Q302	What is your partner educational level	1. Illiterate 2. can read and write 3. Primary education (Grade 1-8) 4. Secondary education(grade 9-12) 5. Higher education (Above grade12)
Q303	What is the occupation of your husband?	1. Farmer 2. Merchant 3. Employee 4. Day laborer 5. Other(specify_____)
Q304	Does your partner drinks alcoholic beverages like beer, Tela and arake?	1. Yes 2. No 88. Don't know 99. No response
Q305	Does your partner become more easily angry if he drinks?	1. Yes 2. No 88. Don't know 99. No response
Q306	Does your partner chew khat or use tobacco?	1. Yes 2. No 88. Don't know 99. No response
Q307	what is your partner place of birth (childhood growth)	1. urban 2. rural 88. Don't know 99. No response

Part-four: Opinions about gender roles and family relations

In this community or else where people have different ideas about family and what is acceptable behavior for men and women. I would like to ask you some questions on this issue. I will read the statements one by one and you will tell me your response. There is no wrong or right.

No.	Questions	Alternative Choices for Responses
Q401	Do you know for a husband to beat his wife?	1. Yes 2. No 88. Don't know 99. No response

Q402	if “Yes” to Q401, according to your opinion good reason for a husband to beat his wife is;	<p style="text-align: right;"><u>Yes</u> <u>No</u></p> 1. Fails to complete house work 2. Disobeys her husband 3. Refuse sex with him 4. Asks whether he has other girl friend 5. He suspects her to be unfaithful. 6. He founds her to be unfaithful 7. Other _____
------	--	---

Part-five: The respondent and about her Partner

When two persons married each other or live together they will share bad or good things. Even though they pass much of their lives, some times they may be in different mood, and may disagree with each other. This is common in many families. I would like to ask you some questions about this point. Some of the questions may be personal any way I would ask you to answer honestly. If some one interrupts us I will change our topic of discussion.

Would I continue? *If no thank the respondent and terminate the interview*
If Yes

No.	Questions	Alternative Choices for Responses
Q501	During your childhood, have you seen your mother battered?	1. Yes 2. No 88. Don’t know 99. No response
Q502	Have you experienced a conflict between you and your husband, since your marriage?	1. Yes 2. No..... (skip to Q504)
Q503	If the answer to Q502 is yes; How frequent was the conflict?	1. Usually (Daily-2x/week) 2. Sometimes(1x/day-1x/three month) 3. Occasionally (less than the above) 4. Other (Specify) _____
Q504	The following acts happened to many women. Did your partner made the following to you in your life time?	<p style="text-align: right;"><u>Yes</u> <u>No</u></p> 1. Threw some thing 2. Push, gripped/shoved 3. Slapped 4. Kicked/hit/bit 5. Hit with something /try to hit 6. Beat up 7. Choked 8. Burn/Scalded 9. Threatening with knife or weapon 10. Used knife/weapon
Q505	In last 12 months which one following acts happened to you	<p style="text-align: right;"><u>Yes</u> <u>No</u></p> 1. Threw some thing 2. Push, gripped/shoved 3. Slapped 4. Kicked/hit/bit

		<ul style="list-style-type: none"> 5. Hit with something /try to hit 6. Beat up 7. Choked 8. Burn/Scalded 9. Threatening with knife or weapon 10. Used knife/weapon
Q506	Had you ever been beaten by any man other than your husband?	<ul style="list-style-type: none"> 1. Yes 2. No if skip to Q509 88. Don't know if skip to Q509 99. No response if skip to Q509
Q507	If "Yes" to Q507 who was the perpetrator?	<ul style="list-style-type: none"> 1. Some one in the family 2. Friend 3. Unknown man 88. Don't know 99. No response
Q508	If "Yes" to Q507 in which condition is the most violence occur	<ul style="list-style-type: none"> 1. During fire wood collection 2. During collection of water 3. At any movement in the camp 4. Other (specify_____)
Q509	Did your husband ever force you to sex when you don't want?	<ul style="list-style-type: none"> 1. Yes 2. No 88. Don't know 99. No response
Q510	Did any man other than you husband forced to sex when you didn't want?	<ul style="list-style-type: none"> 1. Yes 2. No (skip to 601) 88. Don't know (skip to 601) 99. No response (skip to 601)
Q511	If "yes" to Q511 who forced you?	<ul style="list-style-type: none"> 1. Someone in family 2. Known person in the camp 3. unknown person in/out side the camp 88. Don't know 99. No response

Part-six: Immediate consequence of physical violence

I would now like to learn more about the injuries that you experienced from (any of) your partner's acts that we have talked about (MAY NEED TO REFER TO SPECIFIC ACTS RESPONDENT MENTIONED IN PART 5). By injury, I mean any form of physical harm, including cuts, sprains, burns, broken bones or broken teeth, or other things like this.

No.	Questions	Alternative Choices for Responses
Q601	Have you ever been injured as a result of these acts by (any of) your husband / partner(s). Please think of the acts that we talked about before.	<ul style="list-style-type: none"> 1. Yes 2. No 88. Do not know 99. No response

Q602	Have you ever told your experience of violence to someone?	1. Yes 2. No (skip to 604) 88. Do not know (skip to 604) 99. No response(skip to 604)
Q603	If “Yes” to Q 602 what was the response	1. Nothing 2. Helpful 88. Do not know 99. No response
Q604	What efforts did you made to overcome the act of violence you experienced?	1. Did nothing 2. Run away 3. Fight back 4. Quitting the house temporarily 5. other_____
Q605	After experiencing physical violence which of the following health problem happen to you	<p style="text-align: right;"><u>Yes (circle)</u> <u>No</u></p> 1. Difficulty with daily activity 2. Difficulty walking 3. Pain 4. Injury/laceration 5. Loss of teeth 6. Fracture/dislocations 7. Abortion 8. Injury to eye 9. Damage to ear 10. Deep cut of body parts 11. School interruption 12. Other specify_____
Q606	If “Yes” to any from Q605; Have you ever had to treat any injury with first aid from his violence?	1. Yes 2. No 88. Don’t know 99. No response
Q607	How did the conflicts between you and you partner usually resolve?	1. By our selves 2. Old men 3. Through legal affairs 4. Friend Initiated 5. Neighbours 6. Other (specify_____)
		88. Do not know 99. No response

Thanks !!

Annex 6. (Tigrigna version)

ትርጉም ትግሪኛ

ናይ ሓታቲ መፍለይ ቁፅሪ _____

ብሎክ ሽም ወይ ቁፅሪ _____ ቁፅሪ መንበሪ/ገዛ _____

ሕድሕድ በዓልቲ ሓዳር ወይ ዓርኪ ዘለዎ ሰበይቲ ዝስዕባ ናይ ሓይሊ ጥቅዓትን በደልን መረዳኢታ ንምእካብ ተሓሲቡ ዝተዳለወ መሕትት

ሽመይ _____ ይበሃል። ብትሕብብር ጅማ ዩንቨርሲቲ ጥዕና ፋካሊቲይ ዝግበር ዳህሳስ መረዳዕታ ኣብምካብ ዝተዋፈርኩ እንትኸውን እዚ ቃለመሕተት ኣብ ክልል ትግራይ ኣብ ሽመልባ መዕቆቢ ስደተኛታት ዘለዎ ደቂ ኣንስትዮ ብ ሰብኣዮን ወይ ብዓርክን(መሓዛ) ዝበዕሐን ናይ ሓይሊ/ጉልበት ጥቅዓት ንምፍላጥ ኣብ ዝግበር ፅንዓት መረዳኢታ ንምእካብ ተሓሲቡ ዝተዳለወ እዩ። ካልእ ናይ ዚ ፅንዓት ዚ ወፃኢት ንሕጊ መርቀቅቲ፣ ወሰንቲ ንናይ ደቂ ኣንስትዮ ወፅዓ ኣትኩሮት ንክህብ ዝገብር እዩ። ስለዚ ናትኪ ተሳትፎ ኣድላዩ እዩ። እትህብዮ ምላሽ ነፃን ግልፅን ኮይንኪ ብዘይ ምንም ስክፍታ ክትምልሲ እንዳተላበኹ እትህብዮ መልሲ ሚስጥራዊነቱ ዝዕቀብ ኾይኑ ስምክን ኣድራሻክን እውን ኣይፀሓፍን። ምላሽ ዝሃብኩሉ መሕተት እውን ኮድ ጥራሕ እዩ ዝፀሓፎ። ኣብ ዝኾነ ይኩን እዎን እንተዘይ ተስማሚዑኪ ምቁራፅ ይክኣል እዩ። ንስኪ እትህብዮ ምላሽ ኣብዚ መዕቆቢ ስደተኛታት ዘሎ ናይ ደቂ ኣንስትዮ ናይ ሓይሊ ጥቅዓት ንምቅናስ ኣብ ዝግበር ለውጢ ውን ክሕግዝ ዝክእል ምኻኑ ክሕብር ይፈትው።

ብዛእባ እዚ ፅንዓት እትሓትኒ ሕቶ እንተሃለወኪ ምሕታት ትክእሊ ኢኻ።
ናብ ሕቶይ ዶ ክቅፅል ፍቓደኛ እንተኾይንኪ?

- [] እወ
- [] ኣይፋል

ብጣዕሚ እየ ዘመስግን!

ናይ ሓታቲ ሽም _____ ፊርማ _____ ዕለት _____

ናይ ተቆፃፃሪ ሽም _____ ፊርማ _____ ዕለት _____

ክፍሊ.1: ሓፈሻዊ ገፅታ ናይታ ሰበይቲ ዝሓትት

ተ.ቁፅ ሪ	ሕቶ	መልሲ
ሕ101	ዕድመኺ ክንደይ እዩ?	_____ ዓመት
ሕ102	ሃይማኖትኪ.	1. ኦርቶዶክስ ክርስትያን 3. ካልእ ይገለፅ _____ 2. ሙስሊም
ሕ103	ብሄር	1. ኤርትራዊ ትግሪኛ ተዛራቢ 4. ሳሆ 2. ኩናማ ኤርትራ 5. ካልእ ይገለፅ _____ 3. ኩናማ ትግራይ
ሕ 104	ስራሕ	1. ናይ ገዛ ሰራሕተኛ 3. ተቆጣሪ ኣብ ካልእ እትሰርሕ 2. ነጋዴ 4. ሓረሰታይ 5. ካልእ _____
ሕ105	ትምህርቲ ደረጃ	1. ዘይተምሃረት 4. 9-12 ክፍሊ ዝወደአት 2. ምንባብ ምፅሓፍ እትክእል 5. ልዕሊ 12 ክፍሊ ዝተምሃረት 3. 1-8 ክፍሊ ዝወደአት
ሕ106	ዝዓበክሉ/ትውልዱ ቦታ	1. ከተማ 2. ገጠር
ሕ107	ኣብ ዚ መዐቐቢ ስፍራ ዚ ንክንደይ ዘኣክል ጊዜ ፀኒሒኪ.	1. ትሕቲ 6 ወርሒ 3. ልዕሊ 1 ዓመት 2. ትሕቲ 1 ዓመት (6_12 ወርሒ)
ሕ108	ኣብ ካልእ መዐቐቢ ስፍራ ነይርኪ ዶ?	1. እወ 2. ኣይነበረኩን
ሕ109	ኩነታት ሓዳር ወይ ዓርኪ ?	1. ተመራጺዮም ብሓንሳብ ዝነበሩ 2. እንተይተመረዓው ብሓንሳብ ዝነበሩ 3. ሓዳር ዘይብላ ግን መሓዛ ወይ ዓርኪ ዘለዎ
ሕ110	ምስ በዓል ሓዳርኪ ወይ ዓርክኪ ንክንደይ ጊዜ ዝኣክል ብሓንሳብ ፀኒሕኩም?	_____ ዓመት
ሕ111	በዓል ሓዳርኪ ወይ ዓርክኪ መበል ክንደይ ሰብኣይኪ እዩ?	1. ናይ መጀመርያይ 3. ልዕሊ ካልኣይ ይገለፅ _____ 2. ካልኣይ
ሕ112	በዓል ሓዳርኪ ወይ ዓርክኪ ካልእ ሰበይቲ ኣላቶ ዶ?	1. እወ 88. ኣይፈልጥን 2. ኣይብሉን
ሕ113	ብከመይ ኢኺ ምስ በዓል ሓዳርኪ ወይ ዓርክኪ ተራኪብኩም ወይ ሓዳር ገይርኩም?	1. ብቤተሰብ 2. ብስምምዕነት ክልቲኣና 3. ብጥቅሚ ሪክ 4. ብስብኣይ ምክንያት

	88. ካይፈልጥን
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ክፍለ-2: ኣብ መንበሪ ገዛ ዘሎ ገዕታን ናይ በዓል ሓዳርኪ ወይ ዓርክኪ ኩነታት ዝምልከት ሕቶታት

ተ.ቁ	ሕቶ	መልሲ
ሕ201	ክንደይ ሰባት ኣብ ሓንቲ ገዛ ብሓንስብ ትነብሩ?	_____
ሕ202	ቆልዓ ወሊድኪ ዶ?	1. እወ 2. ካይወለዱኩን ...(መልሲ እንተኮይኑ ናብ ሕቶ 205 ይኪዱ)
ሕ203	ን ተ.ቁፅሪ 202 መልሲ” እወ” እንተኮይኑ ክንደይ ቆልዑ ወሊድኪ?	_____
ሕ204	ክንደይ ትሕቲ 5 ዓመት ቆልዑ ኣለውኹ?	_____
ሕ205	ኣብዚ ሓዚ እዋን ጥንስቲ ዲኹ?	1.እወ 2. ካይጠነስኩን
ሕ206	ካብዎም ዝስዕቡ ብዘይ ሰብኣይኪ መን ምሳኪ ይነብር?	1. ብዘይ ክልቲአና ካልእ ሰብ የለን 2. ኣዶ ወይ ኣቦ ናይ ሰበይቲ 3. ኣዶ ወይ ኣቦ ናይ ሰብኣይ 4. ሓፍቲ ወይ ሓው ናይ ሰበይቲ 5. ሓፍቲ ወይ ሓው ናይ ሰብኣይ 6. ካልእ ይገለፅ_____
ሕ207	ምስ በዓል ሓዳርኪ ወይ ዓርክኪ ብዛዕባ ጾታዊ ርክብ ዝምልከት ወይ ብትልሚ ናይ ምውላድ ዝመሳሰሉ ነገራት ብግልፂ ዶ ትነጋገሩ?	1. እወ(መልሲ እንተኮይኑ ናብ ሕቶ 209 ይኪዱ) 2. ካይንጎጋገርን 88. ካይፈልጥን
ሕ208	ን ተ.ቁፅሪ 207 መልሲ” ካይፋል” እንተኮይኑ ብግልፂ ዘይምንግጋርኩም ምክንያት እንታይ ኣዩ?	1. ስለዘይለመድና 2. ኣነ ብዛዕብኩ ምንግጋር ስለ ዘይፈቱ 3. በዓል ሓዳርኪ ወይ ዓርክኪ ስለ ዘይደለ 4. ጊዜ ስለ ዘይብልና 5. ክልቲአና ብዛዕብኩ ምንግጋር ስለ ዘይንፈቱ 99. መልሲ ዘይምሃብ
ሕ209	ምስ ጎራቤትኪ ኣነፃፃርኪ ናይ ገዛኩም እቶት ከመይ ትሪኢዮ?	1. ብጣዕሚ ድኻ 4. ካብ ማእኸላይ ንላዕሊ 2. ድኻ 5. ሃፍታም 3. ማእኸላይ

ክፍል 3: ብዛዕባ በዓል ሓዳርኪ ወይ ዓርክኪ ዝምልከት ሕቶታት ዝሓትት		
ሕ301	ናይ በዓል ሓዳርኪ ወይ ዓርክኪ ዕድመ	_____ ዓመት
ሕ302	ትምህርቲ ደረጃ	1. ዘይተምሃረ 2. ምንባብ ምዕሓፍ ዝክእል 3. 1-8 ክፍሊ ዝወደኦ 4. 9-12 ክፍሊ ዝወደኦ 5. ልዕሊ 12 ክፍሊ ዝተምሃረ
ሕ303	ስራሕ	1. ሓረሰታይ 2. ነጋዴ 3. ተቆጻሩ ኣብ ካልእ ዝሰርሕ 4. መዓልታዊ ሰራሕተኛ 5. ካልእ ይገለፅ _____
ሕ304	መስተ (ስዋ፣ቢራ፣ኣረቂ) ይሰቲ ዶ?	1. እወ 2. ኣይፋል 88. ኣይፈልጥን
ሕ305	መስተ ክሰቲ እንተሎ ብቀሊሎ ዶ ይቁጣዕ/ይኹሪ?	1. እወ 2. ኣይፋል 88. ኣይፈልጥን
ሕ306	ጫት ምቅሓም ወይ ትንባኽ ምስሓብ የዘውትር ዶ?	1. እወ 2. ኣይፋል 88. ኣይፈልጥን
ሕ307	ዝዓበየሎ ዓዲ ኣበይ እዩ?	1. ከተማ 2. ገበር 88. ኣይፈልጥን

ክፍል 4: የታዊ ሚና (ኣስተዋፅኦ)ን ናይ ቤተሰብ ርክብ ዝምልከት ኣብ ዝተፈላለዩ ሕብረተሰብ ዝተፈላለዩ ሓሳባት ወይ ኣረኣእያታት ኣለው። ብፍላይ ብዛዕባ ተቀባልነት ዘለዎ ወይ ሙሩፅ ፀባይ ደቂ ኣንስትዮን ደቂ ተባዕትዮ እንታይ ምኻኑ ኣብ ዝምልከት ዝብል። ብምቅጻል ሲዒቡ ዝሓተኪ ሕቶታት ነዚ ዝምልከት ኣዮም።

ተ.ቁ	ሕቶ	መልሲ
ሕ 401	ሪኢኪ ወይ ሰሚዕኪ ትፈልጥጢ ዶ ሰብኣይ ንሰበይቱ ክሃርማ/ክወቅዓ	1. እወ 2. ኣይፋል 88. ኣይፈልጥን

ሕ402	ን ተቁፅሪ 401 መልሱ" እው" እንተኮይኑ ምክንያቱ እንታይ እዩ ትብሊ (ካብ ሓደ ንላዕሊ መልሱ ይክኣል ስለዝኾነ ነንሕድሕድ መማረቂታት እወ ወይ ኣይኮነን ብምባል መልስ/ኣክብብ)	<ol style="list-style-type: none"> 1. ናይ ገዛ ስራሕ ብኣግባብ ብዘይ ትፍፅም ጊዜ 2. ንሰብኣያ ዘይምእዛዝ 3. የታዊ ርክብ ብዘይ ምፍፃም ምክንያት 4. ሰብኣይ ንሰበይቱ ብምጥርጣር 5. ሰብኣይ ንሰበይቱ ተኣማኒት ኮይና እንተዘይ ረኪብዎ 6. ካልእ-----
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ክፍሊ 5፡ ፅማድ በዓል ሓዳር ሰባት ብሓንሳብ እንትነበሩ ቡዙሕ ፅቡቁን ሕማቅን ጊዜ ብሓባር የሕልፉ። ዋላውን ቡዙሕ ጊዜ ብሓንሳብ እንተነበሩ ሓደ ሓደ ጊዜ ዝተፈለየ ባህሪ ከራሱ ወይ ዘይክስማምዑ ይክእሉ እዮም። ስለዚ ካብዙይ ቀዲሶ ዝሓተኪ ሕቶታት ነዚ ዝመስሉ ሕቶታት ዝሓትት እዮም። ሓደ ሓደ ሕቶታት ናይ ግሊኺ ዝሓትት ክኾን ይክእል እዮ። ኾይኑ ግን ብዝተክኣለኪ መጠን እትህበዮም መልስታት ካብ ሓቂ ተመርኪሶም ዝወፁ ክኾኑ ኣለዎም። ሕቶይ ምቅፃል ይክእል ዶ? 1. እወ 2. ኣይፋል ፤ እወ እንተይላ ቀፅል

ተ.ቁ.	ሕቶ	መልሱ
ሕ501	ብንእሽተይኪ/ብቆልዓኺ እንተሰኺ ኣሶኺ ን ኣዶኺ ክሃርመን/ክወቅዑን ሪኢኺ ዶ ትፈልጢ ?	<ol style="list-style-type: none"> 1. እወ 2. ኣይፋል 88. ኣይፈልጥን
ሕ502	ምስ በዓል ሓዳርኪ ወይ ዓርክኪ ካብ ትማራዓው/ትፋለጡ ጀመሩ ተጋጨኹም/ተፃለኢኩም ትፈልጡ ዶ?	<ol style="list-style-type: none"> 1. እወ 2. ኣይፋልመልሱ እንኮይኑ ናብ ሕ504 ይዝለሉ 88. ኣይፈልጥን
ሕ503	ን ተቁፅሪ 502 መልሱ" እው" እንተኮይኑ መዓዝ መዓዝ ኢኹም ትፃልኩ/ትጋጨዩ	<ol style="list-style-type: none"> 1. ኩሉ ጊዜ 2. ሓደ ሓደ ጊዜ 3. ሓለ ሓሊፉ 4. ካልእ ይገለፅ _____
ሕ504	እዞም ዝስዕቡ ኩነታት ኣብ እዋን ግጨት/ጎንፃ ኣብ ብዙሓት ደቂ ኣንስትዮ ዝፍፀሙ እዮም። ሰብኣይኪ ወይ ዓርክኪ ካብዚኦም መኪኦም ኣባኪ ፈፃምዎም ካብ ሓዳር ወይ ዕርክነት ዝጀመርክሉ እዋን ጀመሩ? (ንኩሎም መማረቂታት በቢ ሓደ ብምሕታት እወ ወይ ኣይኮነን ብምባል(ብምክባብ) መልስ ይሃብሉም)	<ol style="list-style-type: none"> 1. ብዝሓዞ ነገር ክወቅዕ/ክሃርም ምሙካር 2. ኣብ እዋን ግጨት/ጎንፃ ምግፍታር/ምድፋእ፣ ኣጥቢቁ ምሓዝ 3. ገዕ ምፅፋዕ 4. ኣብ እዋን ግጨት/ጎንፃ ብርግጫ/ብእግሪ ምውቃዕ 5. ኣብ እዋን ግጨት/ጎንፃ ብዝኾነ ነገር ጌሩ ምግራፍ ወይ ክወቅዕ ምሙካር 6. ብሰንኪ ውቂዒቱ ሓሚመ ወይ ጠበሳ ኣብ ሰው ነተይ ፈጠሩ፤ ንቡዙሕ ጊዜ ዝፀንሕ ጉድኣት ኣብዚሉላይ 7. ኣብ እዋን ግጨት/ጎንፃ ክሳድ ክሓንቅ ምሙካር ወይ

		<p>ሓኒቁ ምሓዘ</p> <p>8. ብሓዊ ከቃዕል ምመካር ወይ ብካልእ ቱኩስ ነገር</p> <p>9. ብበላሕቲ ነገራት ወይ ብጦር መሳርያ ከፋራርሕ ምመካር</p> <p>10. ብበላሕቲ ነገራት ወይ ብጦር መሳርያ ጉድኣት ኣብዚሒሉይ</p>
ሕ505	ካብ ዞም ዝስዕብ ኣብ ውሽጢ 12 ወርሒ ዝበዕሐኪ ናይ ሓይሊ ጥቅዓት ዓይነት (ንኩሎም መማረቂታት በቢ ሓደ ብምሕታት እወ ወይ ኣይኮነን ብምባል(ብምክባብ) መልስ ይሃብሎም)	<p>1. ብዝሓዞ ነገር ክወቅዕ/ክሃርም ምመካር</p> <p>2. ኣብ እዋን ግጨት/ጎንዒ ምግፍታር/ምድፋእ፣ ኣጥቢቁ ምሓዘ</p> <p>3. ገዕ ምፅፋዕ</p> <p>4. ኣብ እዋን ግጨት/ጎንዒ ብርግጫ ምውቃዕ</p> <p>5. ኣብ እዋን ግጨት/ጎንዒ ብዝኾነ ነገር ጌሩ ምግራፍ ወይ ክወቅዕ ምመካር</p> <p>6. ብሰንኪ ውቂዒቱ ሓሚመ ወይ ጠበሳ ኣብ ሰው ነተይ ፈጠሩ፣ ንቡዙሕ ጊዜ ዝፀንሕ ጉድኣት ኣብዚሒሉይ</p> <p>7. ኣብ እዋን ግጨት/ጎንዒ ክሓንቅ ምመካር ወይ ክሓንቅ ምግባር</p> <p>8. ብሓዊ ከቃዕል ምመካር ወይ ብካልእ ነገር</p> <p>9. ብበላሕቲ ነገራት ወይ ብጦር መሳርያ ከፋራርሕ ምመካር</p> <p>10. ብበላሕቲ ነገራት ወይ ብጦር መሳርያ ጉድኣት ኣብዚሒሉይ</p>
ሕ506	ካልእ ካብ ስብኣይኪ ወጻኢ ምስ ካልእ ወዲ ተባዕታይ ተጋጨኹ ወይ ተወቅዒኪ ዶ ትፈልጢ?	<p>1. እወ</p> <p>2. ኣይፋል</p> <p>3. 88. ኣይፈልጥን</p>
ሕ507	ን ተቁፅሪ 506 መልሲ” እወ” እንተኮይኑ ምስ መን እዩ?	<p>1. ካብ ቤተሰብ ውሽጢ</p> <p>2. መሓዛይ ወዲ ተባዕታይ</p> <p>3. ዘይፈልጦ ወዲ 88. ኣይፈልጥን</p>
ሕ508	ኣብ ምንታይ ኩነታት ኢኹ ብካልእ ወዲ ተባዕታይ ናይ ሓይሊ ጥቅዓት ክበዕሐኪ ዝክእል	<p>1. ዕንፀይቲ እንተኣሪ</p> <p>2. ዝስተ ማይ እንተምፅእ</p> <p>3. ኣብ ዝኮነ ኣጋጣሚ ኣብ ካምፕ</p> <p>4. ካልእ ይገለፅ_____</p>

ሕ509	በዓል ሓዳርኪ ወይ ዓርክኪ ብግዲ ብዘይድሌትኪ ምታዊ ርክብ ክትገብሪ የገደደኪ ዶ?	1. እወ 2. ኣይፋል 88. ኣይፈልጥን
ሕ510	ኣብ ሂወትኪ ካልእ ኣብ ብዓል ሓዳርኪ ወይ ዓርክኪ ወፃኢ ብግዲ ብዘይ ድልየትኪ ምታዊ ርክብ ንክትገብሪ ዘገደደኪ ኣሎ ዶ?	1. እወ 2. ኣይፋል 88. ኣይፈልጥን
ሕ511	ን ተ.ቁፅሪ 510 መልሲ” እወ” እንተኮይኑ መን እዩ ክገደደኪ ዝሞክረ?	1. ኣብ ቤተሰብ ውሽጢ 2. ፍሉጥ ሰብ ኣብ ካምፕ 3. ዘይፈልጦ 88. ኣይፈልጥን

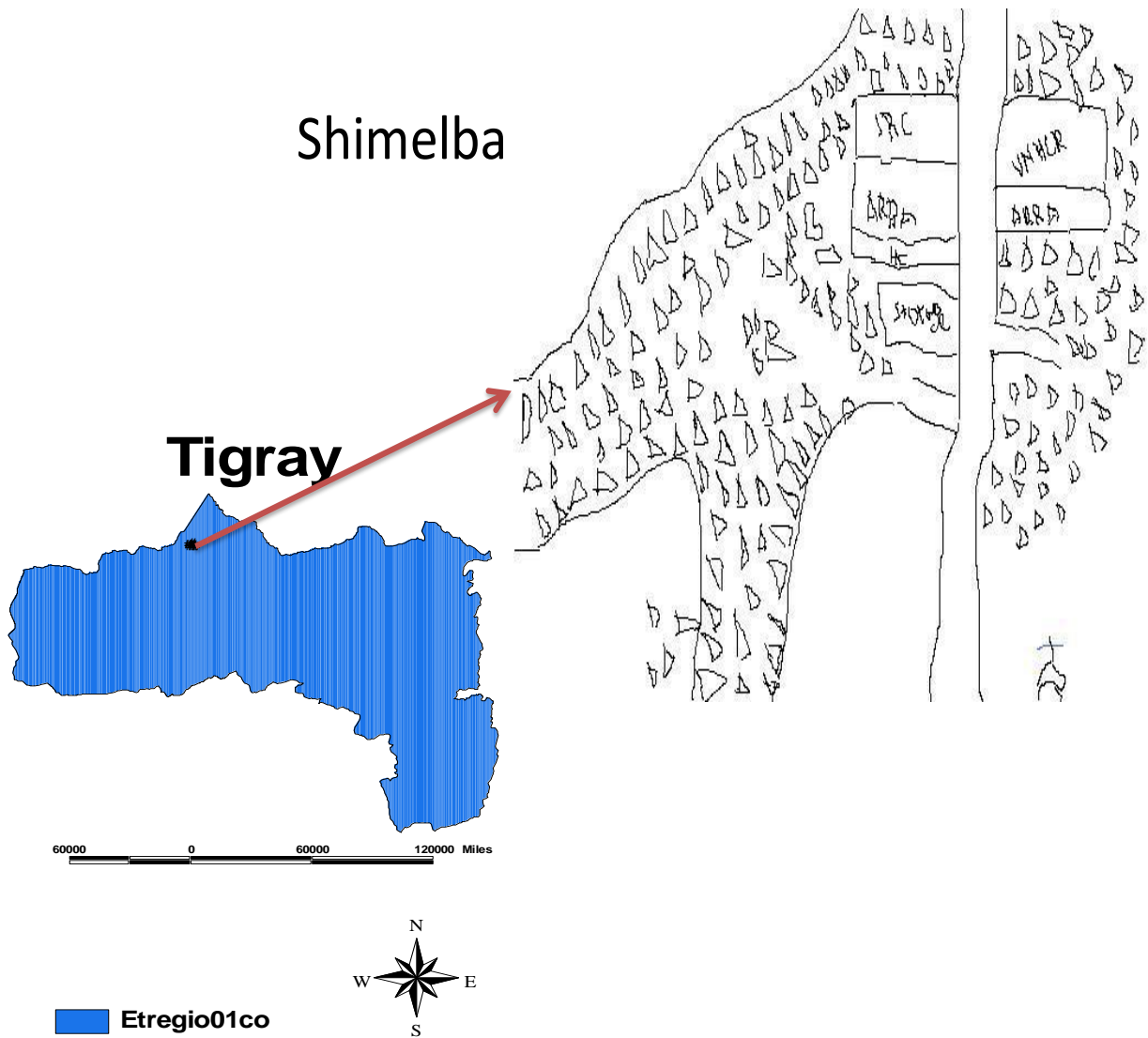
ክፍሊ 6:እዞም ዝስዕቡ ሕቶታት ብዓል ሓዳርኪ ወይ ዓርክኪ ማህረምቲ ወይ ናይ ሓይሊ ጥቅዓት ምክንያት ዝበፀሕ ፀገም/ጉድኣት ዝሓትት እዮም::

ተ.ቁ	ሕቶ	መልሲ
ሕ601	ብበዓል ሓዳርኪ ወይ ዓርክኪ ናይ ሓይሊ ጥቅዓት ምክንያት ናይ ኣካል ጉድኣት በዪሑኪ ዶ ይፈልጥ?	1. እወ 2. ኣይፋል 88.ኣይፈልጥን
ሕ602	ድሕሪ ግጨት/ጎንፂ ምስ ሰብኣይኪ ወይ ምስ ካልእ ምስተባኣስኪ ምስጥርኪ እተካፍልዮ ሰብ ኣሎ ዶ?	3. እወ 4. ኣይፋል 88.ኣይፈልጥን
ሕ603	ን ተ.ቁፅሪ 602 መልሲ” እወ” እንተኮይኑ ምስጥርኪ እተካፍልዮ ሰብ እንታይ ሓጊዙኪ ይፈልጥ?	1. ምንም ኣይሕግዘንን 2. ብጣዕሚ ይሕግዘኒ 88. ኣይፈልጥን
ሕ604	ኣብ እዋን ግጨት/ጎንፂ ምስ ሰብኣይኪ ወይ ዓርክኪ እንታይ ዓይነት መፍትሒ ትወስዱ?	1. ምንም ነገር ኣይገብርን 2. እንትወቅዑኒ ይሃድም 3. ይበኣሶ ወይ ይከላከሎ 4. ንዝተወሰነ ጊዜ ምስጎራቤት ወይ ምስ ካልእ ምፅናሕ/ምቅናይ 5. ካልእ ይገለፅ _____ 88. ኣይፈልጥን
ሕ605	ኣብዞም ዝስዕቡ ኣብ እዋን ግጨት/ጎንፂ ብሰብኣይኪ ወይ ዓርክኪ ማህረምቲ ምክንያት እንታይ ዓይነት ጉድኣት በዪሑኪ (ንኩሎም መማረቂታት በቢ ሓደ ብምሕታት እወ ወይ	1. ዕለታዊ ስራሕቲ ብኣግባቡ ዘይምፍፃም 2. ናይ ምንቅስቃስ/ምኻድ ፀገም 3. ናይ ሕማም ስሚዒት 4. ኣብ ሰውነት ምቁሳል

	ኣይኮነን ብምባል(ብምክባብ) መልስ ይሃብሉም)	5. ሰኒ ምስባር ሓደጋ 6. ናይ ዓዕሚ ስብራት ወይ ምዝባዕ 7. ጥንሲ ምስዳድ ፀገም 8. ናይ ዓይኒ ሓደጋ 9. ናይ ምስማዕ/እዝኒ ፀገም 10. ኣካል ሙጉዳል 11. ትምህርቲ ምብካር/ምትራፍ 12. ካልእ ይገለፅ _____
ሕ606	ካብ ተቁፅሪ 605 ብምርኣይ ዝበፀሐ ጉድኣት እንተሃልዩ ፤ ዝበፀሐኪ ጉድኣት ንምሕካም ፈተነ ጌርኪ ትፈልጢ ዶ?	1. እወ 2. ኣይፋል 88. ኣይፈልጥን
ሕ607	ምስ ሰብኣይኪ ወይ ዓርክኪ ጎንዒ እንተሃልዩ ከመይ ገይርኩም ኢኹም ትፈትሑዎ?	1. ባዕልትና 2. ብዓበይቲ ዓዲ ሽማግለ 3. ብሕገ መሰረት 4. ብመሓዘትና 5. ብጎራቤት 6. ካልእ ይገለፅ _____

ንዝሃብኩኒ መልሲና ንትሕብብርኪ ብጣዕሚ እየ ዘመስግን።

Annex 7: Photos of Shimelba



This above figure is the map of Tigray the black dot inside where the study area (Shimelba refugee camp) found which is drawn by GIS (ARCveiw software) and internal structure of Shimelba refugee camp which is drawn manually painted in computer.