

Sexual Violence among Female Street Adolescents in Addis Ababa, April 2000

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Abstract

Background: Violence against women is an important public health problem not only because of the physical injury that may result but also because of potentially harmful health behaviors that may be triggered in response to violence. The health consequence on women due to gender-based violence is a serious problem worldwide, which has deprived women from participating in socio-economic development. The severity of the problem and scarcity of studies in this area prompted the undertaking of this study.

Objectives: The aim of this study was to determine the magnitude and consequences of rape, (included attempted rape), to describe life skills of escaping the attempt, to assess the attitudes of male street adolescents towards rape and factors associated with sexual violence among female street adolescents.

Methods: A cross-sectional survey was conducted among 654 female street adolescents. Additionally, four focus group discussions (FGD) among male street adolescents were undertaken to assess attitudes of male street adolescents towards rape in Addis Ababa from April-July 2000. The data were analyzed using EPI6 and SPSS (Statistical Package for Social Sciences).

Results: The quantitative study revealed that the prevalence of rape among female street adolescents in the last 3 months was 15.6%, attempted rape 20.4% and unwelcome kiss 16.4%. The most popular way of escaping the attempt was yelling. Rape was significantly associated with living alone (OR=8.5, 95% CI=2.0,36.5). Unwanted pregnancy, abortion, STDs, and psychological problems were reported as consequences of rape. This study has showed that girls in the street are at a high risk of rape, therefore serious attention must be paid in order to control this problem. [*Ethiop.J.Health Dev.* 2002;16(2):119-128]

Introduction

Gender based violence is an endemic problem in most communities of the world (1). Rape and other forms of sexual assault are not recent phenomena in any society but have been part of the history of civilization (2,3,4).

The types of rape may be classified into three categories as statutory, forcible and marital types. A statutory rape is a condition in which sexual intercourse occurs with a female under the age of consent, usually 12-18 years (with

or without her consent). Forcible rape is sexual intercourse/penetration with a non-consenting victim through the use of force or threat of force or fraud. Marital rape is a situation where a husband forces his wife to have sex without her will, though this may be controversial in many cultures (5,6,7,8).

Violence against women is an important public health problem not only because of physical injury that may result but also because of potentially harmful behavioral impacts that may be triggered in response to violence. The health consequence on women due to gender-based violence is a serious problem worldwide, which has deprived women from participating in socio-economic development (9,10,11).

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Sexual violence is pervasive at every stage of women's lifecycle and adolescents have higher rate of rape victimization, compared to other age groups (12). This has become worse with the development and expansion of cities, which has created a new socio-medical problem i.e. streetism among children. There are an estimated number of 60-80 million street children in the world (13). These children are obliged to live in the street for different reasons and somehow they have found the street to be habitable than their home for different reasons. They live in the subculture of violence; the slightest disagreement may cost a life or may result in severe injury. Street adolescents though do not exhibit emotional debility like that of old street people, are nevertheless dependent upon the environment of the street for their physical well-being and emotional development (14). This problem is worse among the female street adolescents who are vulnerable to every type of violence especially sexual violence (13).

In Ethiopia, decades of war, draught, ethnic conflicts, migration from rural to urban areas, loosening family ties, and search for better life have produced over 100,000 street children nation wide, and 40,000 in Addis Ababa (14,15). As to the knowledge of the authors of this paper, no study has been carried out among female street adolescents with particular emphasis on sexual violence. This study was, therefore, undertaken with the objectives of determining the magnitude of sexual violence and its consequences among street adolescent in the last 3 months recall period, attempted rape, to describe life skills of escaping the attempt, attitudes of male street adolescents towards rape and factors associated with sexual violence among female street adolescents.

Methods

The study utilized a cross-sectional design mainly with complementary focus group discussions. It was conducted in Addis Ababa the capital city of Ethiopia. Addis Ababa is

divided into 6 zones³, 28 woredas⁴, 328 kebeles⁵ and a population of 2.6 million; this city was selected for its high concentration of street children. The study population consisted of female street adolescents of age 10-24 years, those who can speak and listen Amharic language and who were not mentally disabled at the time of the study.

Considering the absence of previous data on the specific study population and to obtain a conservative sample size, this study assumed the prevalence of sexual violence to be 50% with a precision of 4% and 95% confidence interval to calculate the sample size accordingly a total of 660 adolescents were required to participate as study subjects

A multistage sampling method was used to select study participants. First areas were stratified into high concentration and low concentration based on previous studies undertaken by Ministry of Labor and Social Affairs. As a result Woredas 1, 2, 3, 5, 7, 14, 15 and 21 were selected as high concentration areas and Woredas 6, 13,16 and 22 were selected as low concentration area, making up a total of 12 woredas. The subjects from each woreda were identified using key informants on the day of the survey and those adolescents, who were eligible for the study, were selected and interviewed.

A pre-tested structured questionnaire was used to collect data in the survey to avoid double interview. This questionnaire contained variables such as the basic socio-demographic, sexual behavior, occurrence of rape and attempted rate, mechanisms of defense and consequences of rape. Additionally, FGDs were held with four groups, each containing 8 street boys. Data were collected by 20 female enumerators who were trained for two days. All the interviews were conducted between

³ Equivalent to a sub-province

⁴ Equivalent to a district

⁵ The smallest level of government in Ethiopia

April 8-11, 2000. Adjacent woredas were surveyed on the same day. During subsequent days, different sets of adjacent woredas were surveyed. Information concerning the next days' survey area was kept confidential to minimize double interviewing.

A thematized discussion guide was developed for the focus group discussion that was conducted on July, 2000 in order to explore the beliefs of boys towards rape. The adolescents were selected purposively in age groups of 14-24 years based on the survey result of the female group, i.e., most of the adolescents who were victims of rape claimed the perpetrator to be older than them.

Quantitative data was processed using EPI-INFO version 6 statistical packages. Logistic regression was performed using SPSS (Statistical Package for Social Sciences) version 10. Demographic variables such as marital status, were re-categorized whereby cohabitation and having a steady boyfriend were specified as married, whereas, widowed, divorced and separated were considered as single. Odds ratios (OR) and 95% confidence intervals (CI) were calculated. P values less than 5% were considered significant. Both descriptive and analytical statistical methods were used. Bivariate as well as multivariate analyses were done wherever appropriate.

All substance users regardless of their frequency of consumption were classified as users. The focus group discussion was first transcribed into Amharic⁶, then to English; the findings were then described and presented in English.

Ethical problems were envisaged due to the sensitivity of the issue, hence appropriate training was given to the interviewers on ways of assuring the confidentiality of the information and informed consent was obtained from all participants. Ethical clearance for the study was received from Addis Ababa University, Faculty of Medicine.

⁶ The most commonly spoken language in Ethiopia - the national working language

Operational definitions:

Rape is defined as any non-consensual of penile penetration of the vagina by physical violence or by threat of harm, or when the victim is incapable of giving consent due to drug or intoxication of alcohol.

Attempted rape: Is an attempt \ trial to have non-consensual intercourse with a woman where by the woman had a chance of escaping the attempt.

Unwelcome kiss is defined as kissing perpetrated to a girl/ woman without her will or without the penile penetration of the vagina.

Self-efficacy refers to the belief that an individual holds that he or she is capable of performing a specific behavior.

Self-esteem is defined, as good opinion of ones own character and abilities as low or high character.

Adolescents "of" the street Adolescents who work and sleep on the street whereby the street is their principal home.

Adolescents "on" the street Adolescents who depends on the street for their subsistence, but usually return home at night.

Results

Among the 654 female street adolescents interviewed, 331 (50.6%) of the adolescents were "on" the street type and the remaining half were "of" the street type. Forty four percent of the respondents live alone. The median age of the participants was 16 years (Table 1).

Twenty eight percent of the study subjects came to Addis Ababa for different reasons. The majority, i.e., 77 (42.7%) came looking for work followed by displacement 23 (12.9%), and being orphaned 9 (5%). Three hundred sixty eight adolescents left their home for different reasons. The median age at leaving home was 12 years and among the reasons for leaving home, physical violence by parents or guardians was reported by 93 (25%), economic reasons by 64 (17%), bribed by an adult by 64 (17%), orphaned by 38 (10.3%), school failure by 33 (9%) of the respondents and the rest 76 (20.6%) left their home for different reasons.

Table 1: Socio-demographic characteristics of female street adolescents, in Addis Ababa, April, 2000 (n=654)

| Variable | Frequency | Percents |
|----------------------------|-----------|----------|
| Type of street life | | |
| On the street | 331 | 50.6 |
| Of the street | 323 | 49.4 |
| Age in years | | |
| 10-14 | 215 | 50.9 |
| 15-19 | 333 | 32.9 |
| 20-24 | 106 | 16.2 |
| (Median 16, Mean 16.2±3.3) | | |
| Religion | | |
| Orthodox | 542 | 82.9 |
| Muslim | 102 | 15.6 |
| Others | 10 | 1.5 |
| Marital status | | |
| Never married | 502 | 76.8 |
| Divorced | 71 | 10.9 |
| Married | 65 | 9.9 |
| Widowed | 8 | 1.2 |
| Others | 8 | 1.2 |
| Educational status | | |
| Primary (1-6) school | 324 | 49.5 |
| Secondary (7-12) school | 160 | 24.5 |
| Illiterate | 144 | 22.0 |
| Read and write | 26 | 4.0 |
| Occupation ¹¹ | | |
| Vending | 301 | 46.0 |
| Begging | 281 | 43.0 |
| Prostitution | 72 | 11.0 |
| Others | 4 | 0.6 |
| Currently living | | |
| With parents/guardian | 363 | 55.9 |
| Alone | 291 | 44.1 |

¹¹ Due to multiple occupations total have exceeded 100%

Half of the participants i.e., 328 (50.2%) have already initiated sexual activity. The median age at first intercourse was 14 years and the mean age was 15 years. The age range of sexual debut was 6-24 years; where the majority initiated at age between 10 and 14. Among the study subjects who were sexually active, 141 (43%) initiated sexual activity as a result of forcible rape (Table 2). The perpetrators used different tools to intimidate the victims such as beating up in 69 (48.9%) cases and threatening with pointing a knife in 29 (20.6%) of the cases. Verbal threat of harm was used to intimidate 27 (19%) of the victims. More than one tool was used in 11 (8%) of the respondents (Table 3). The perpetrator was a stranger for 94 (66.7%) of the victims and older than the victim in 128 (88.8%) of the respondents.

Table 2: Reasons for sexual debut of female street adolescents, in Addis Ababa, April 2000. (n=328)

| Variable | Frequency | Percent |
|------------------------------|-----------|---------|
| Reason for sexual initiation | | |
| Marriage | 55 | 16.8 |
| Personal desire | 77 | 23.5 |
| Peer influence | 21 | 6.4 |
| Promising words | 16 | 4.9 |
| For exchange of money | 15 | 4.6 |
| Coerced ¹² | 141 | 43.1 |
| Others | 3 | 0.9 |

Table 3: Mechanisms used to intimidate female street adolescents to initiate sexual intercourse forcefully in Addis Ababa, April 2000 (n=141)

| Mechanism | Frequency | Percent ¹³ |
|------------------|-----------|-----------------------|
| Beating up | 69 | 48.9 |
| Pointing a knife | 29 | 20.6 |
| Threats of harm | 27 | 19.1 |
| Make drunk | 17 | 12.1 |
| Use drugs | 5 | 3.5 |
| Pointing a gun | 3 | 2.1 |
| Others | 3 | 2.1 |

¹² Sexual initiation without the consent of the girl either by physical force or by threat of force.

¹³ Multiple responses were possible; therefore, percentages may add more than a hundred percent

The prevalence of rape in the last 3 months period prior to the survey was 102 (15.6%) and among the sexually active, it was 31%. The prevalence of unwelcome kiss was 107 (16.4%). The median age of the victims of rape was 17 years. The sexual assault was repetitive in 61 (60%) of the victims (Table 4). Of those who survived repeated attack, 41 (40.2%) were victimized two to four times, while 20 (19.6%) reported to have been victimized more than five times. Among the victims who suffered repeated attacks, the perpetrator was the same persons for 12 (19.7%) of the victims and different persons, usually in gangs for 49 (80.3%) respondents.

Among the reasons given by the victims for their re-victimization, sleeping in unsafe place (on the streets) was reported by 34 (55.4%) of the respondents while being female and physically weak were reported by 11 (21.3%). The rest 16 (26.3%) reported working and staying on the street for a longer period and living and sleeping in the same area with boys.

After victimization, only 53 (52%) informed somebody such as their friends. The majority i.e., 82 (80.4%)⁷ did not report to any legal body while 19 (18.6%) report to the police, and 1(1.0%) reported to the street chief. Among the perpetrators who were convicted, 6 (30%) were sentenced to imprisonment, no action was taken against 7 (35%) of them, 1 (5%) was penalized by fines, and 4 (20%) disappeared. Other actions were reported to have been taken on the rest two.

Of the reasons given for either not sharing their experiences to someone or reporting to legal bodies, the majority 38 (42.%) said that they did not know what to do, 20 (22.5%) stated that they were threatened by the perpetrator, and 32 (36%) claimed fear of non-acceptance by the police.

The magnitude of attempted rape was 134 (20.5%). Of those who escaped the attempt, the majority i.e., 70 (52.2%) did so, by yelling (Table 4). Among the victims of sexual violence, 67 (65.6%) reported positive self-efficacy in preventing further rape, while 35 (34.3%) reported negative self-efficacy in preventing it.

Table 4: Prevalence of sexual violence among female street adolescents in the last three months period in Addis Ababa April 2000 (n=654)

| Out come | Frequency | Percent |
|---------------------------------------|-----------|---------|
| Rape | 102 | 15.6 |
| On the streets n=(331) | 13 | 3.9 |
| Of the streets n=(323) | 89 | 27.6 |
| Un welcome kiss | 107 | 16.4 |
| On the streets n=(331) | 19 | 5.7 |
| Of the street n=(323) | 88 | 27.2 |
| Attempted rape n=(552) | 134 | 20.5 |
| Life skills used to escape the attemp | | |
| Yelling | 70 | 52.2 |
| Seeking help from others | 56 | 41.6 |
| Running away | 37 | 27.6 |
| Fighting back | 27 | 20.1 |
| Giving appointment | 27 | 20.1 |
| Forming a gang | 18 | 13.4 |
| Threatening | 6 | 4.5 |

*Multiple responses were possible; therefore percentages may be more than a hundred percent

Among the sexually victimized street girls during the last 3 months prior to the survey, 23 (22.5%) had unwanted pregnancy, 15 (14.7%) had induced abortion⁸, 26 (25%) had trauma of the genitalia, 45 (44.1%) had unusual discharge from the genitalia of which 9 (20%) had both unusual discharge and swelling on and around the genitalia, while 4 (3.9%) had only swelling on or around the genitalia.

With regard to psychological problems, 74 (72%) blamed themselves for their victimization, 71 (69%) had fear and anxiety, 68 (66.7%) had headaches more frequently, 62 (60.8%) had lost sexual interest in sexual activity, 60 (59%) had low self-esteem and 35 (34%) became drug addicts⁹.

Factors contributing to sexual violence are shown in Table 5. Among the female street adolescents, being raped was significantly associated with the of-the-street of life (OR=9.30, 95% CI: 5.0,18.5), age group of 20 - 24 years (OR=6.0, 95% CI: 2.7, 14.1), living alone (OR=10.8,95% CI: 5.2, 20.4), forced sexual initiation (2.4, 95% CI: 1.45 - 4.0) and duration of street life being more than one year (OR= 2.8, 95% CI: 1.2, 6.9) (Table 5).

Substance use was reported as being practiced among the population. Khat was consumed by the majority 123(19%), followed by alcohol [115(18%)], cigarette smoking [109 (16.7%)], smoking Marijuana [22(3.45%)] and benzene sniffing 10(1%). The prevalence of any substance use was found to be 29%. Rape was associated with the use of many of the substances, and specifically with cigarette smoking (OR= 6.0, 95% CI: 3.75, 9.9), alcohol drinking (OR=6.4, 95% CI, 3.9,10.5), Khat chewing, (OR=6.7, 95% CI: 4.1,10.8), drug use (OR=4.89, 95% CI: 1.8, 12.7) and benzene sniffing (OR=5.3, 95% CI: 1.8,14.7), respectively. But after adjustment with logistic regression, rape was found to be significantly associated with only living alone (OR=8.5, 95% CI: 2.0, 35.5).

Percentages and absolute number may be more than a the total and 100% since those who tell to some one are also included in the legal body reporting question

⁸ The prevalence of abortion may not be from the same pregnancy

⁹ Multiple answers were possible percentages may be more than a hundred percent

Table 5: Comparison of socio-demographic factors and behavioral factors associates with sexual violence among sexually victimized and non-non victimized street adolescents in Addis Ababa, April 2000

| Factors | Raped (n=102) | Non-raped (n=552) | Crude OR (95% CI) | Adj. OR (95% CI) |
|---------------------------|---------------|-------------------|-------------------------------|------------------|
| Type of street life | | | | |
| On the street | 13 | 318 | 1.00 | |
| Of the street | 89 | 234 | 9.3 (5.0, 18.5) ¹⁴ | 1.9 (0.5, 7.4) |
| Age (years) | | | | |
| 10-14 | 11 | 204 | 1.00 | |
| 15-19 | 65 | 268 | 4.5 (2.3, 9.7) | 1.6 (0.5, 5.0) |
| 20-24 | 26 | 80 | 6.0 (2.7, 14.1) | 0.9 (0.3, 2.7) |
| Marital status | | | | |
| Married | 12 | 57 | 1.00 | |
| Single | 90 | 495 | 0.86 (0.4, 1.8) | 0.9 (0.3, 2.7) |
| Educational status | | | | |
| Secondary | 22 | 138 | 1.00 | |
| Illiterate | 21 | 123 | 1.1 (0.5, 2.2) | 1.4 (0.6, 3.3) |
| Read and write | 4 | 24 | 1.1 (0.2, 3.5) | 3.6 (0.7, 18.6) |
| Primary | 55 | 269 | 1.3 (0.7, 2.3) | 1.7 (0.8, 3.7) |
| Currently living | | | | |
| With relatives | 14 | 349 | 1.00 | |
| Alone | 88 | 203 | 10.8 (5.8, 20.4) | 8.5 (2.0, 36.5) |
| Forced initiation n=(328) | | | | |
| No | 43 | 144 | 1.00 | |
| Yes | 59 | 82 | 2.4 (1.5, 4.0) | 1.8 (1.0, 3.3) |
| Smoking | | | | |
| Never | 57 | 488 | 1.00 | |
| Yes | 45 | 64 | 6.0 (3.7, 9.9) | 1.1 (0.5, 2.2) |
| Alcohol drinking | | | | |
| Never | 54 | 485 | 1.00 | |
| Yes | 48 | 67 | 6.4 (3.9, 1.5) | 1.7 (0.9, 3.2) |
| Khat chewing | | | | |
| Never | 51 | 480 | 1.00 | |
| Yes | 51 | 72 | 6.7 (4.1, 1.8) | 1.9 (0.9, 3.9) |
| Drug use | | | | |
| Never | 92 | 540 | 1.00 | |
| Yes | 10 | 12 | 4.9 (1.8, 12.7) | 1.1 (0.4, 3.2) |
| Benzene sniffing | | | | |
| Never | 93 | 542 | 1.00 | |
| Yes | 9 | 10 | 5.3 (1.8, 14.7) | 1.5 (0.5, 4.9) |
| Duration of street life | | | | |
| Less/equal to one year | 8 | 57 | 1.00 | |
| More than one year | 84 | 217 | 2.8 (1.2, 6.9) | 1.4 (0.6, 3.4) |
| Former residence | | | | |
| Addis Ababa | 68 | 407 | 1.00 | |
| Out side of Addis Ababa | 34 | 144 | 1.4 (0.8, 2.3) | 1.1 (0.6, 2.0) |

¹⁴ All bolded ones are statistically significant

The focus group discussions revealed that rape is being practiced on the street so commonly that eight of the boys reported their own practices while 12 reported what they witnessed. Personal practices included raping by force either by oneself and or in-groups. The perpetrators were usually transgressors from the nearby villages known by the study population as "Findata" (new and hot tempered). Rape usually occurred at night, if a girl slept on the street her chance of being

raped was very high. Even during the daytime there was high probability of being raped if they slept in a hidden place. Threats of harm and physical violence are the major mechanisms used to intimidate the girls. Among the mechanisms of violence, incising with a knife/blade on the face to create nonhealing scar or mark and slapping on the face were reported as common ways. Rape happens to girls and women of all age groups.

The attitudes of boys towards raping girls was also discussed and most of the boys said that *girls are shy and do not ask for it, so one has to force them to start it. Some mentioned that girls provoke boys to do it by being in the wrong place at the wrong time and by speaking in a sexually manner. The justification given by boys for raping girls was that "girls are inferior and helpless, they are raped for revenge, girls are drug and alcohol addicts, they are lonely and when new to the street."*

Discussion

Information about street children in general and about rape in particular is scarce in our country. The unstable lifestyle of street-children follow; lack of trust and the inconvenience of interviewing on the street and the difficulty of age classification could be stated as major reasons for the scarcity of systematic research in this area (16).

The prevalence of rape in the last 3 months recall period was 15.6%, which is comparable with that reported from the USA of 13.6% (17). Since the result in the study at hand is of only 3 months it is higher than the US study and the high school study in Addis Ababa and Western Shoa, whereby the life long experience of rape was 5.1% (18). This can be explained by the nature of the study population.

Unwanted sexual advance like kissing was reported in 107(16%) of all the participants. This finding was comparable to the Queensland studies in absolute percentages only where 17-19% of all females experienced unwanted kissing in their lifetime (19). But ours is still higher for the reasons mentioned above.

In this study, it was found that 50.2% of the study subjects have initiated sexual intercourse, 43% of the respondents initiated it as a result of rape. This prevalence lies with in the prevalence rates in the literature 7-62% (9,17). The age of the victims' ranges from 6-24 and the mean age of first sexual debut was 15 years. This is higher than the age of debut

in the Brazilian study (16). Rape as a reason of sexual initiation is similar to that of the Brazilian study, whereby the majority initiated as a result of coercion. In a South African study of adolescent sexuality, 31% of pregnant teenagers and 18% non-pregnant teenagers started sexual intercourse as a result of coercion (20).

The perpetrator was older than the victims in 88.8% of the victims in this study, which is higher than the Brazilian study i.e. those who initiated sex before the age of 12 initiated it with an older person in 53% of the cases; this can be explained by the late sexual initiation pattern of boys than girls (16).

Unlike other studies, which underline that the victims knew 60-78% of the perpetrators, this study revealed that 66% of the victims were victimized by strangers. This finding is also supported by the male focus group discussions, which showed that rape usually occurred to new girls and boys usually do it in-groups of more than 5. The other explanation as mentioned by the focus groups was that the perpetrators in the street were usually young boys who came from villages and are usually drunk. As a gang the street boys refer these types of other boys as "Findata" (*new and hot tempered*).

Naturally if a woman is raped repeatedly, the attack is deemed to be by a family member or by an intimate partner as found in other studies (18,20). However in this study different individual, usually in gangs perpetrated 83% of the victims of repeated rape. This can be explained by the nature of the study population.

In this study, 80% of the victims did not report to the police after the assault. This proportion is higher than the results found in other studies whereby, up to 50% of women might not tell to anyone (21). This might be explained by the reports of the victims themselves as fear of un-acceptance by the police.

There is a significant association between living alone and rape. This fact is supported by

the reasons given in the survey of the female group whereby being helpless was mentioned as a major cause for their victimization. The male FGD also mentioned that loneliness and being new was the predictor factors for girls to be raped. The findings of this study are consistent with the previous study undertaken in Addis Ababa and Western Showa among high school students (18).

The prevalence of any substance use in contrast to their living status is relatively small. This may be as a result of underreporting due to the fact that substance use is a taboo among females and especially drug use is illegal in Ethiopia. However substance use like alcohol, smoking, khat chewing benzene sniffing and drug were significantly associated with rape, while after adjustment with logistic regression none of these factors were significantly associated with rape in the last 3 months.

The prevalence of attempted rape was 20.4%, which is higher than the (10%) prevalence of the high school study in Addis Ababa and Western Showa. This implies that there is high risk of rape on the streets, and the life skills that girls used in escaping the attempt is found to be useful. In violent situations, effective self-defense was reported by 123 (66%) of Nicaraguan women against domestic violence (21). The same can be used on the street as reported by the respondents yelling for help, fighting back, getting home early and sleeping on a safe place were the life skills that helped them to escape the assault. This was also supported by the focus group discussion that girls who are quite during an attempt were reported to be vulnerable to completed rape, and those who did not shout are considered to like it.

As a consequence of rape, the prevalence of unwanted pregnancy was reported in 23% and induced abortion in 15%. This is comparable with the Bombay study whereby 20% of abortion seekers got pregnant as a result of rape (22). This result was higher than the high school study undertaken previously in Ethiopia whereby 16% of the rape victims were

pregnant (18). Forty-five percent had unusual vaginal discharge and 13% had swelling around the groin; this can be stated as having STDs, this is comparable with the US study of rape related pregnancy whereby up to 40% of the victims had STDs (17). Genital trauma was reported by 26% of the victims, which was higher than the US study of 19-22% and that of the Ethiopian study; this might be due to the gang rape occurring in this population (17, 18).

The attitude of boys towards raping girls was similar to other studies, in which the boys groups blame the girls for their victimization. The notion of penalty was consistent with the Brazilian street youth "ronda" which was described as a way of making girls available sexually to the group as well as to punish transgressors (16). The practice of raping girls was supported by the male focus groups discussion where by, some of the participants reported they have individually or in-groups raped girls. This is comparable to the study conducted by Kilpatrick among male college students (23).

In the Los Angeles study, the acceptance of rape was described by the following phrases: "when the girl gets a guy sexually excited", "When she changes her mind after agreeing to have sex" and "when she led him on". In that study 56% of the girls, and 76% of the boys believed that force was acceptable (23). The other reason reported by the male group, in our study for the victimization of girls was their sex; they described it, as they are female and weak. The female group in the survey also supported this and also the use of force by male. This is comparable with the Brazilian study of street youth (16).

In conclusion, findings of this study indicated that the street adolescents are at high risk of sexual violence (rape). History of childhood sexual abuse and living alone, low self-esteem of girls and the dominant nature of boys are the major contributing factors of rape in this population.

By way of recommendations, alleviating this problem requires a major socio-economic change, but points that can be implemented in the short run in order of priority include the following: Introduce a rape crisis center in the health institutions and prepare a standardized treatment for STDs including anti-retroviral prophylaxis and emergency contraception and counseling; wide spread public education and efforts to protect girls and women; law enforcement to protect girls and women against rape and training of girls on life skills of preventing sexual assaults.

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