The hidden gender-based violence and associated factors among marginalised women in Southern Ethiopia

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ABSTRACT

Background: Domestic violence is a common public health concern that violates human rights in all societies. This aimed to assess domestic violence and associated factors among housemaid night students in Hawassa city.

Methods: An institutional-based cross-sectional study was implemented from 1 February to 30 March 2019 among housemaid night students in Hawassa city. A stratified, two-stage cluster sampling technique was used. Finally, the study population was selected from the respective source population using a simple random sampling technique (computer-generated random numbers were used). Data were checked, coded and entered into Epi data version 3.1.5 and exported to SPSS version 20 for analysis. Bivariate and multivariable analyses were computed to identify the determinants of domestic violence among housemaid night students.

Result: In this study, the housemaid experienced at least one form of domestic violence was 20.9 %(95% CI: 17.9, 24.2). Whereas 16.9% (95% CI: 14.0, 20.0) experienced physical violence, 9.7% were slapping, and the current employer performed 9% of any domestic violence among housemaid night students. Besides, 11% (95% CI: 8.7, 13.5) experienced sexual violence, 4% attempted rape, and the employer's son/friends performed 5.7% of sexual violence among housemaid night students.

Conclusion: Employer family size, any habit like khat chewing and drinking alcohol, anyone who watches pornography in the employer's home, anyone who enforces the housemaid to watch pornography, and lack of knowledge of domestic violence is higher odds of domestic violence among housemaid night students. Hence, the labour and social affairs and concerned stakeholders could create awareness about domestic violence for housemaids, families, and employers.

Background

Violence against women is one of society's most pervasive human rights violations. It is presented in every country, regardless of culture, ethnicity, and socio-economic status (World health organisation.United Nations International Children's Emergency Fund (UNICEF) 2014). Violence against women is perhaps the most shameful human rights violation and maybe the most pervasive; it knows no boundaries of geography, culture or wealth (Annan, 2013). As long as it continues, we cannot claim to be making real progress towards equality, development and peace (World Health Organization 2007). It is also a profound health problem, leading to death and injuries, compromising women's well-being and eroding their dignity and self-esteem (Gill and Stewart, 2011).

One in three women victim of gender-based violence worldwide is one of the women's foremost causes of death and disability. Gender-based violence is a significant obstacle to social and economic development and achieving sustainable development goals for stakeholders (Pinheiro, 2006; Lanz et al., 2013).

Worldwide, 13% of women have experienced either physical or sexual violence by an intimate partner or non-partner violence (Sardinha et al., 2022). Across the globe, 27 % of women have experienced their lifetime either physical or sexual violence by an intimate partner or non-partner violence within one year (Sardinha et al., 2022). The global report showed that in South East Asia, 21%; Easter Mediterranean, 31%; North America, 25%; pacific Asia, 21%; and Eastern Africa, 38% of

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women had experienced lifetime physical and sexual intimate partner violence or non-partner violence (Sardinha et al., 2022).

Housemaid has one of the oldest and most essential works for millions of women worldwide. It is deep-rooted in the global history of slavery, colonialism and other forms of servitude. Housemaids are one of the most susceptible jobs globally, often targeting physical, sexual and psychological violence and experiencing discrimination and marginalisation about pay, working conditions and legal rights (Zenebe et al., 2014; Biadegilegn, 2011; Getachew, 2006). The violence that occurred on housemaids is challenging to investigate and inspect while in the employer's home because it takes place carefully by the committers of the crime (Biadegilegn, 2011; d'Souza, 2010).

Gender-based violence against housemaids goes unrecognised, unreported and masked in a culture of silence. Its consequence is at risk for unwanted pregnancy, unsafe abortion, depression, and sexually transmitted infections, including HIV/AIDS and other health problems. Most of the time, this happens to women in low-resource settings like Ethiopia, where the housemaid has low socio-economic status. Most housemaid families are from poor or divorced families or dead parents who may not get the opportunity to learn or other additional sources of income (Zenebe et al., 2014; Azanaw et al., 2019).

Different studies were conducted on gender-based violence globally, including in Ethiopia, while the paucity of studies on gender-based violence among housemaid night students in Ethiopia. Housemaids are a neglected segment of the population. Therefore, the assessment of gender-based violence on housemaids is crucial for achieving sustainable development goals (SDG) concerning the well-being of women by lessening gender-based violence. Nevertheless, evidence on d gender-based violence against housemaids in a study setting is scarce. This aimed to assess domestic violence and associated factors among housemaid night students in Hawassa city.

Methods

An institutional-based cross-sectional study design was implemented from 1 February to 30 March 2019 among housemaid night students in Hawassa city administration in southern Ethiopia. Hawassa is the administrative city of SNNPS and Sidama region of Ethiopia, which the city is located 275 km south of Addis Ababa. The city has a total population of 359,358, and the ratio of males to females is 1.06, who reside in eight sub-cities, and 32 kebeles. In 2019 there were a total of 23 schools that provided night classes, nine public schools and 14 private schools. There were 7142-night students in the academic year 2018/19. From this, 36.4% were males, and 63.6 % were females. There were 3520 housemaid night students.

Study population and sample size determination

All-female housemaids attending night classes during the data collection period in selected schools in Hawassa city were studied. All-female housemaids older than 15 who attended night classes were included. This study excluded those housemaids who were suddenly critically ill during data collection time.

The sample size was calculated using the single population proportion formula. The prevalence (P) of sexual violence among housemaids is 28.6% (Getachew, 2015) and 5% degree of precision; the sample size is 310. We adjusted the sample size using the correction formula because the population is fewer than 10,000. We employed a stratified random sampling technique between private and public schools, a corrected sample size of 285 participants, a design effect of 2, and a non-response rate of 10%. The total sample size was 627.

Sampling technique and sampling procedures

A stratified, two-stage cluster sampling technique was used. Initially, all schools which gave night classes in the city stratified private and public schools. Then four public and seven private schools were randomly selected. The census was conducted in randomly selected schools to identify female housemaids from schools that gave night classes. The sample size was proportionally allocated for each school chosen depending on the number of female housemaid night students registered in 2018/19. Finally, the study population was selected from the respective source population using a stratified random sampling technique (computer-generated random numbers were used).

Outcome variable

At least one form of violence, either physical or sexual violence, was this study's outcome variable. Types of gender-based violence were slapping, sticking, pushing, throwing, weapon, pricking, attempted rape, rape, body contact gratification, vulgar, obscene language and a touch-sensitive sexual area. Therefore gender-based violence is experienced if and only if any of this gender-based violence experiences it. Information about this gender-based violence is secured based on the housemaids' self-report.

Data collection procedure and quality control

Before the actual data collection period, a preliminary survey/census of study participants in the selected schools was conducted for data collection and quality control. The data were collected using structured and pretested self-administered questionnaires. The questionnaires were prepared to review different literature and standard demographic and health survey (DHS) questionnaires. First, the questionnaires were written in English and then translated into a local language, Amharic, back to English to check the consistency. The questionnaire consisted of socio-demographics, causes of gender-based violence and types of gender-based violence. The questionnaires were pretested by 5% at another school having similar socio-cultural characteristics' to study participants. The questionnaires were checked for reliability during the pretest, the Alpha coefficient was calculated, and Cronbach's alpha was 0.84. A total of 10 trained data collectors with at least had diploma qualification and two supervisors with at least a degree and above qualification. Throughout the data collection, data collectors were supervised, and regular meetings were held among the data collectors, supervisors and investigators to raise, discuss and solve problematic issues. The collected data were reviewed and checked for completeness before data entry.

Data management

Data were checked, coded and entered into EPI data version 3.1.5 and exported to SPSS version 20 for analysis. Descriptive statistics, including percentages and frequencies, were used to compute the study participants. The goodness of the model fit was checked using Hosmer-Lemeshow, and the P-value is greater than 5%, and the model is a good fit for it. The 95% confidence interval of the odds ratio for gender-based violence was obtained using bivariate and multivariable analysis. It imported all explanatory variables from the bivariate analysis with a p-value of less than 0.2 into the multivariable logistic regression analysis. Finally, statistical significance was considered at a P value less than 0.05.

Result

Socio-demographic characteristics of the study participants

A total of 599 study subjects participated, with a response rate of 95.4%. The mean age of the respondents was 18.5 years, with a standard deviation of 2.39 years and the minimum and maximum ages were 15 and 34 years, respectively. The majority, 84.7% of the study subjects, were aged 15-19. More than half (57.4%) of participants' education

levels were grades 5-8. More than two-thirds of study participants have come from rural areas. Whereas 56.8% of participants had their monthly income above the poverty line, and 82.3% of participants' marital status was single (Table 1).

Socio-demographic characteristics of marginalising women's family

More than half (52.1%) of mothers' occupations were housewives, and 44.9% of fathers were farmers. Nearly two-thirds (64.3%) of participants' family size was 6-12 (Table 2).

Health information and gender-based violence-related factors among marginalised **women** Of the total, 59.6% of participants were getting health-related information from mass media, 86.5% of respondents followed religious education, and 83.5% of respondents visited their relatives (Table 3). In addition, their parents pressured 33.7% of the study's participants into becoming housemaids (Fig. 1).

Types of gender-based violence and its cause among marginalise women

In this study, the housemaid night students experienced at least one form of gender-based violence in their lifetime, 20.9 % (95% CI: 17.9, 24.2). Whereas 16.9% (95% CI: 14.0, 20.0) experienced in the last 12

Table 1

Socio-demographic characteristics of marginalised women in Hawassa city, Southern Ethiopia 2019 (n=599).

Variable	frequency	Per cent (%)
Age		
15-19	507	84.6
19-24	62	10.4
24-34	30	5
Educational status		
Grade 1-4	235	49.2
Grades 5-8	344	57.4
Grade 9-10	20	3.3
Place of birth		
Urban	187	31.2
Rural	412	68.8
Marital status		
Married	101	16.9
Single	493	82.3
Other@	5	0.8
Monthly income		
No salary	247	41.2
Below poverty line	12	2
Above poverty line	340	56.8
With whom you live		
With relatives	243	40.6
With employer	159	26.5
With brother/sister	143	23.9
With husband	30	5
With cohabit	24	4
Employers husband educational status		
College /university graduate	346	57.8
Secondary school complete	123	20.5
Primary school complete	51	8.5
Non-formal education	13	2.2
No wife	66	11
Employer wife's educational status		
College /university graduate	310	51.8
Secondary school complete	110	18.4
Primary school complete	71	11.9
Non-formal education	22	3.7
No husband	86	14.4
Employer family size		
Employer family size 1-5	390	65.1
Employer family size 6-12	209	34.9
Housemaids watch TV		
Yes	536	89.5
No	63	10.5

Other@: Divorced and widowed, 1USD =29 Ethiopian birr
A monthly income of less than 1087.5 Ethiopian birrs is below the poverty line

Table 2

Socio-demographic characteristics of marginalised women's families in Hawassa city, Southern Ethiopia 2019 (n=599).

Variable	Frequency	Per cent (%)
Occupation of mother		
Housewife	312	52.1
Farmer	72	12
Government employee	71	11.9
Merchant	54	9
Private employee	41	6.8
Daily labour	4	0.7
No mother	45	7.5
Occupation of father		
Farmer	269	44.9
Government employee	101	16.9
Merchant	71	11.9
Private employee	62	10.4
Daily labour	30	5
No father	66	11
Family size		
Family size 1-5	214	35.7
Family size 6-12	385	64.3

Table 3

Health information and gender-based violence-related factors among marginalised women in Hawassa city, Southern Ethiopia, 2019 (n=599).

Variable	Frequency	Per cent (%)
Information get related to sexual health		
Yes	386	64.4
No	213	35.6
Source of information get related to sexual health		
Mass media	357	59.6
Social media	29	4.8
No information	213	35.6
Follow religious education		
Yes	518	86.5
No	81	13.5
Visit relatives		
Yes	500	83.5
No	99	16.5
A habit like khat chewing and drinking alcohol		
Yes	11	1.8
No	588	98.2
Anyone show sexual feelings in your employer's house		
Yes	60	10
No	539	90
You watch pornography		
Yes	32	5.3
No	567	94.7
Anyone enforce you to watch pornography		
Yes	16	2.7
No	583	97.3
In your employer's home, anyone gave the gift for the seek of sex		
Yes	36	6
No	563	94
You know, gender-based violence		
Yes	72	12
No	527	88
Who perform sexual violence		
Male employer	25	4.2
Employer son/friends	34	5.7
Broker	7	1.2

months; physical violence, 9.7% were slapping, and 9% were performed by their current employer (Table 4). Besides, 11% (95% CI: 8.7, 13.5) experienced sexual violence, 4% attempted rape, and 5.7% performed by employer son/friends (Fig. 2).

Factors associated with gender-based violence among marginalise women

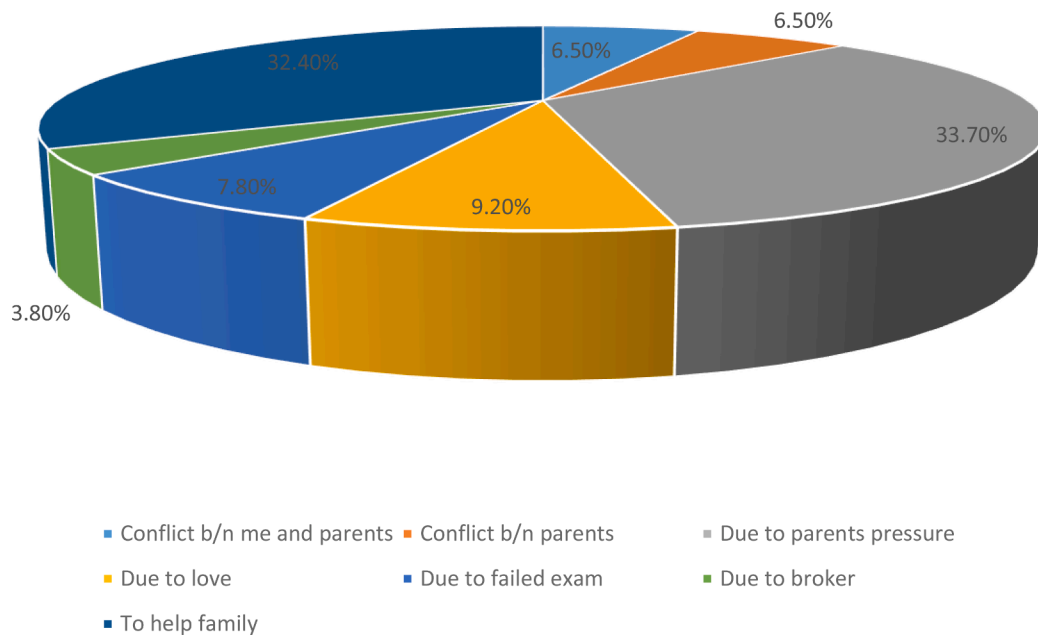In this study, the family size in the employer's house, habits like khat

Fig. 1. The reason to choose housemaid in Hawassa city, southern Ethiopia 2019 (n=599).

Table 4
Types of gender-based violence and its cause among marginalised women in Hawassa city, southern Ethiopia 2019 (n=599).

Variable	Frequency	Per cent (%)
Current physical violence		
Yes	101	16.9
No	498	83.1
Lifetime experience with physical violence		
Yes	126	21
No	473	79
How many times in your life experienced physical violence		
1-4 times	95	15.9
5-9 times	31	5.2
Who performed physical violence (N=126)		
Current employer	54	9
Previous employer	29	4.8
Father	29	4.8
Brother	14	2.3
Types of physical violence (N=126)		
Slapping	58	9.7
Sticking	43	7.2
Pushing	10	1.7
Throwing	9	1.5
Weapon	5	0.5
Pricking	1	0.2
Cause of physical violence (N=126)		
Distrust	51	8.5
Psychiatric problems	24	4
Unwanted pregnancy	17	2.8
Addiction of drugs	12	2
Low income	12	2
Alcohol intoxication	5	0.8
Had made other crime	5	0.8
Experience with sexual violence	66	11
Who performed sexual violence (N=66)		
Male employer	25	4.2
Employer son/friends	34	5.7
Broker	7	1.2
Domestic violence, at least one types		
Yes	125	20.9
No	474	79.1

chewing or drinking alcohol, watching pornography at work, the family member who is enforcing the housemaid to watch pornography, and lack of knowledge on gender-based violence in multivariable analysis, determinants of gender-based violence among night students who work as housemaids.

Therefore, employer family size (World health organisation.United Nations International Children's Emergency Fund (UNICEF) 2014; Annan, 2013; World Health Organization 2007; Gill and Stewart, 2011; Pinheiro, 2006; Lanz et al., 2013; Sardinha et al., 2022; Zenebe et al., 2014; Biadegilegn, 2011; Getachew, 2006; d'Souza, 2010) 1.64 times higher odds of gender-based violence on housemaid night students than counterpart (AOR: 1.64; 95%CI: 1.1, 2.72), housemaids night students' lack of knowledge on gender-based violence 9.14 times higher odds to victim gender-based violence than counterpart (AOR: 9.14; 95%CI: 5.15, 16.19), anyone who watches pornography in employer home 3.84 time higher odds to perform gender-based violence on housemaid (AOR: 3.84; 95%CI: 1.96, 7.50) and anyone enforces you to watch pornography 2.47 times higher odds to commit gender-based violence on housemaid (AOR:2.47;95%CI:1.05,8.66) (Table 5)

Discussion

Gender-based violence among housemaids is a hidden public health problem across the globe, violating women's fundamental rights. Housemaids are a neglected population segment of the world, especially in developing countries, including Ethiopia. This study aimed to assess gender-based violence's prevalence and associated factors among housemaid night students in Hawasssa city. In this study, the number of families in the employer's family, habits like drinking alcohol or chewing khat, anyone who forces housemaids to watch pornography while at work, and ignorance of gender-based violence are independent predictors of gender-based violence among night students working as housemaids.

In this study, at least experienced one form of gender-based violence among housemaid night students was 20.9%. This finding is lower than the study done in the world at 35.6% (World Health Organization 2013) and the study done in Debre Markos high schools at 67.7% of physical violence in a lifetime (Mullu et al., 2015). The possible explanation might be the study settings, study time, and socio-demographic differences. In this study, physical violence among female housemaid night
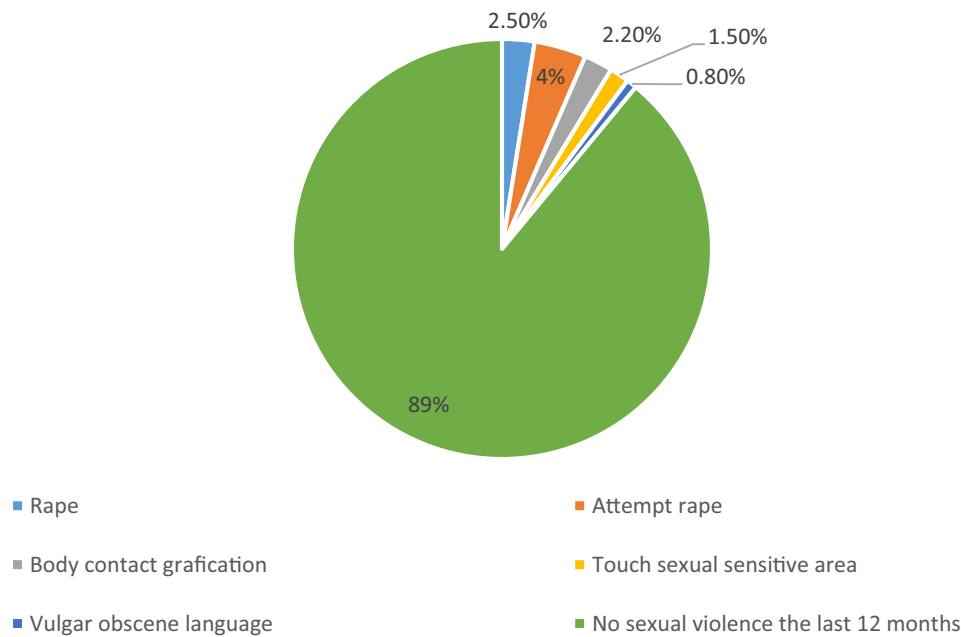
- Rape
- Attempt rape
- Body contact grafication
- Touch sexual sensitive area
- Vulgar obscene language
- No sexual violence the last 12 months

Fig. 2. Types of sexual violence among marginalized women in the last 12 months in Hawassa city, southern Ethiopia, 2019 (n=599).

Table 5
Factors associated with gender-based violence among marginalised women in Hawassa City, South Ethiopia, 2019.

Variables		Domestic violence		COR(95% CI)	AOR(95% CI)
		Yes	No		
Family size	Family size 1-5	38	176	1	
	Family size 6-12	87	298	0.74 (0.48,1.13)	0.64 (0.39,1.06)
Employer family size	Employer family size 1-5	92	298	1	
	Employer family size 6-12	33	176	1.65 (1.06,2.55)*	1.64 (1.01,2.72)*
Lack of knowledge of gender-based violence	Yes	45	27	1	
	No	80	447	9.31 (4.56,15.87)*	9.14 (5.15,16.19)*
Have any habits like khat chewing and drinking alcohol	Yes	6	5	4.73 (1.42,15.76)*	2.41 (0.57,10.01)
	No	119	469	1	
Anyone who watches pornography in an employer's home	Yes	30	30	4.67 (2.69,8.12)*	3.84 (1.96,7.50)*
	No	95	444	1	
Anyone who imposes the housemaid to watch pornography	Yes	7	9	3.07 (1.12,8.40)*	2.47 (1.05,8.66)*
	No	118	465	1	
You see pornography	Yes	11	21	2.08 (0.98,4.44)	0.58 (0.22,1.58)
	No	114	453	1	
Anyone who gave a gift for the seek of sex in an employer's home	Yes	13	23	2.27 (1.12,4.62)*	0.93 (0.38,2.89)
	No	112	450		

* P<0.05

students was 16.9%. This finding is consistent with a study done in Mekelle, 16.3%(8), while lower than a study done in Debre Tabor town, 37.1% in their lifetime (Azanaw et al., 2019), and in the Shimelba refugee, 25.5% (Feseha and Gerbaba, 2012).

The difference might be the study population, setting, time, and socio-demographic difference.

In this study, sexual violence among housemaid night students was 11%. This finding is similar to a study done in Dilla high schools, 13.2% (Desalegn et al., 2017), whereas it is inconsistent with a study done in Harar, 25% (Cafo et al., 2014) and a systematic review in Ethiopia, 51.7 % (Semahegn and Mengistie, 2015). In this study, habits like khat chewing and drinking alcohol were predictors of gender-based violence among housemaid night students. This finding coincided with a study done by Mekelle city (Zenebe et al., 2014), Debre tabor town (Azanaw et al., 2019), Debre Markos city (Mullu et al., 2015) and East Hararghe Zone (Beyene et al., 2022). This might be the habits like khat chewing and drinking alcohol trigger gender-based violence (Beyene et al., 2022; Iyanda et al., 2021; Sharma et al., 2020). Similarly, in this study, watching pornography also predicted gender-based violence among housemaid night students. The finding is consistent with a study conducted in East Hararghe Zone (Beyene et al., 2022). This might be watching pornography intrigued family members to engage in gender-based violence.

The possible strength of this study is adding new variables like anyone who see pornography in the employer's home and anyone who enforces you to see pornography. The study's limitations are the issue of sensitivity, under- or non-reporting by the victims, social desirability bias, and lack of parental or employer engagement in this study.

Conclusion

Gender-based violence is a common problem for a female housemaid, and its prevalence was higher than in other findings. Employer family size, habits like khat chewing and drinking alcohol, watching pornography in the employer's home, enforcing to watch pornography, and lack of knowledge on domestic violence are higher odds of gender-based violence among housemaids night students.

Hence, the labour and social affairs and concerned stakeholders could create awareness about gender-based violence for housemaids, their families and employers.

Declarations

Ethical approval and consent to participate

Ethical clearance was obtained from the Institutional Review Board (IRB) of the College of Medicine and Health Sciences, Hawassa University, with IRB Ref No: IRB 023//11. The ethical clearance paper was then presented to the Hawassa city administration education office to grant official permission to undertake research activities in the selected schools. After a detailed explanation of the purpose and the study's complete course, verbal consent was obtained from each participant just before the actual data collection. There was no harm to participation in this study. Participation was based on the participants' willingness. Confidentiality was assured by making the questionnaire anonymous.

Consent for publication

Not applicable.

Availability of data and materials

All data on which this article is based are included in the article.

Author contributions

NH and ZY originated the idea and planned the study, participating during data collection, analysing the data, and writing the manuscript. DH reviewed the study procedure, participated in data acquisition and analysis and reviewed the manuscript. All authors read and approved the final manuscript.

Declaration of Competing Interest

The authors declared that there is no conflict of interest

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