

Special Article - New and Emerging Contraceptives

# Sexual Coercion and Associated Factors among Female Private University Students in Bishoftu Town, East Shewa Ethiopia

Yemsrach KY<sup>1</sup>, Aliye K<sup>2</sup>, Bisrat ZS<sup>3\*</sup>, Robera OF<sup>4</sup>

<sup>1</sup>Department of Nursing, Adama General Hospital and Medical College, Ethiopia

<sup>2</sup>Department of Nursing, Arsi University, Ethiopia

<sup>3</sup>Department of Nursing, Wolkite University, Ethiopia

<sup>4</sup>Department of Nursing, Woliata Sodo University, Ethiopia

\*Corresponding author: Bisrat Zeleke Shiferaw, Department of Nursing, Wolkite University, College of Medicine and Health Sciences, P.Box 07, Wolkite Ethiopia; E-mail: basfendaz@gmail.com

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## Abstract

**Background:** Sexual coercion refers to any sexual act or attempt to obtain a sexual act, unwanted sexual comments or advance. Women from all age group are vulnerable. Especially, it is a widely recognized public health problem affecting students from higher educational institution. This study aimed to identify the prevalence of sexual coercion and its predictors among female private university students in Bishoftu town, East Shewa, Ethiopia.

**Methods:** A cross-sectional study design was employed in Adama and Rift valley Universities branches found in Bishoftu town from May 26 to June 12, 2016. A total of 395 students were involved in the study. Simple random sampling method was employed to select the study participants. Bivariate and multivariable logistic regression was conducted. To identify the predictor variables a P-value less than 0.05 were taken as significant association by considering 95% confidence interval.

**Result:** The study revealed that 171(43.3%) of the respondents experienced sexual coercion. Being a social science student [AOR=2.167; 95% CI=1.139,4.122], respondents father's educational status [AOR=0.406; 95% CI=0.200, 0.820], Mothers' educational status [AOR=0.377; 95% CI=0.191,0.744], respondents source of support [AOR=2.511; 95% CI=1.225, 5.147] and drinking alcohol [AOR=0.358; 95% CI=0.177, 0.723] were found to be the predictors of the sexual coercion among the students.

**Conclusion:** More than half of the respondents had experienced sexual coercion. The main experience was unwelcomed touch. Faculty in which the students enrolled, father's educational status, mother's educational status, source of support for the students and alcohol drinking habit associated significantly with the sexual coercion experience.

**Keywords:** Sexual coercion; Bishoftu; East shewa Ethiopia

## Introduction

In ancient civilization, women were considered as the properties of their fathers and of their husbands [1]. This increased the risk of sexual coercion. Sexual coercion refers to any sexual act or attempt to obtain a sexual act, unwanted sexual comments or advance. It also includes acts directed against a person's sexuality using coercion by any person and in any setting [2].

Violence against women had direct and indirect impact on the utilization level of health and legal services. This in turn increased the cost which is allocated for providing the services [3]. Currently, there is an increased emphasis to tackle the problem [4]. It is a widely recognized public health problem affecting students from higher educational institution [5,6]. They are abused physically, sexually and psychologically by intimate partners and other individuals [7].

Violence is devastating to women physical, social, psychological and spiritual well-being [8]. It also increased the risk of pregnancy which is unwanted. Furthermore, it increased exposure to sexually transmitted infections, unsafe abortion, gynecological problems,

depression, post-traumatic stress disorder, suicide and undesired prostitution [9-11]. In developing countries, social norms challenge the actions done in preventing the sexual coercion and violence against women, so women are reluctant in reporting the problem they encounter [12].

Alcohol intake behavior, families living condition, sexual experience, socio-economic and cultural factors are considered as factors influencing the experience of sexual coercion. So, there is a need to address those factors in order to decrease women susceptibility.

Awareness need to be created on the techniques of defending themselves and on the need to report the problem to the concerned body [13-15].

Sexual coercion is considered to cause psychosomatic trauma, fear, powerlessness, depression, negative sexual and reproductive health outcomes. Even the children born from those women are exposed to infection transmission and nutritional problems [16].

Even though the level of sexual coercion and its factors among

**Table 1:** Socio-demographic characteristics of the respondents Bishoftu, Ethiopia June, 2016.

Variable	Frequency	Percent	
Age category	18-21 years	289	73.2
	>2>= 22 years	106	26.8
Marital status	Married	38	9.6
	Single	341	86.3
	Ever married	16	4.1
Religion	Orthodox	251	63.5
	Muslim	38	9.6
	Protestant	64	16.2
	Other	42	10.6
Ethnicity	Amhara	99	25.1
	Oromo	200	50.6
	Tigre	35	8.9
	Other	61	15.4
Faculty	Health science	81	20.5
	Social science	62	15.7
	Engineering	34	8.6
	Business	218	55.2
Current living condition	Alone	58	14.7
	With parents	250	63.3
	With relatives	47	11.9
	With husband/boyfriend	40	10.1
Parents living condition	Both of them alive	281	70.9
	Only Mother alive	69	17.5
	Only father alive	21	5.3
	Both of them not alive	24	6.1
Father's educational status	Degree & above	74	18.7
	Diploma	89	22.5
	High School	90	22.8
	Elementary School	63	15.9
	Illiterate	79	20
Mothers' educational status	Degree & above	47	11.9
	Diploma	45	11.4
	High School	88	22.3
	Elementary school	128	32.4
	Illiterate	87	22
Family income category	501-999	122	30.9
	1000-1499	179	45.3
	≥500	94	23.8
Pocket money	Yes	282	71.4
	No	113	28.6
Source of Support	Parents	257	65.1
	Relatives	53	13.4
	Husband	40	10.1
	Other	45	11.4

female students were studied in governmental Universities, the study among private universities is low. Therefore, this study aimed to assess sexual coercion and associated factors among female private University students of in Bishoftu town.

## Materials and Methods

### Study area and period

The study was conducted in Bishoftu town from May 26-June 12, 2016. Bishoftu is located in Oromia national regional state, East Shewa zone at a distance of 47 km from Addis Ababa the capital of Ethiopia. Its astronomical location is 8° 43' - 8° 45' northern latitude 38° 56-39 east longitudes. The town was founded in 1917. The 2007 national census reported a total population for Bishoftu of 99928 of whom 47860 were men and 52068 were women. In the town there are 2 governmental and 4 private colleges; and regarding number of universities there are 2 governmental and 2 private universities in the town. This study was conducted among female students of 2 private universities (i.e. Adama and Rift valley universities).

### Study design

Institution based cross-sectional was conducted.

### Population

The source population was all female students and the study population was selected female regular students of Bishoftu private universities.

### Inclusion criteria and exclusion criteria

Female students whose age was greater than 18 were included and those students who were mentally challenged and unable to respond the questionnaire were excluded from the study.

## Sample Size and Sampling Procedure

### Sample size determination

Sample size calculated using a single proportion population formula by considering 37.3% prevalence of sexual violence obtained from a previous study among private college in Bahir Dar town in 2013 [17], margin of error (d) is 0.05, confidence interval (Z α/2) of 95% and 10% non-response rate. Finally the sample size was calculated to be 395.

### Sampling procedure

The allocated sample was taken from both universities using stratification method. Proportionate allocation was made to determine the sample based on the number of students in each institution. Finally the students were selected randomly from the institution using simple random method.

## Variables of the Study

### Dependent variable

Sexual Coercion.

### Independent variable

Socio demographic (Age, Marital status, Religion, Ethnicity, Faculty, Parents living condition, Father's educational status, Mother's educational status, Family income, Pocket money, Source of support). Substance use History (Cigarette smoking, drinking Alcohol and Chewing Chat).

**Table 2:** Substance use history of respondent's Bishoftu, Ethiopia, June, 2016.

Variable		Frequency	Percent
Smoking Cigarette	Yes	4	1
	No	391	99
Drinking Alcohol	Yes	57	14.4
	No	338	85.6
Chewing Chat	Yes	20	5.1
	No	375	94.9

**Table 3:** History of sexual coercion on respondents Bishoftu, Ethiopia, June, 2016.

Variables		Frequency	Percent
Sexual coercion	Yes	171	43.3
	No	224	56.7
Unwanted sexual act	Yes	92	23.3
	No	303	76.7
Verbal Threat	Yes	159	40.3
	No	236	59.7
Unwelcomed Touch	Yes	162	41
	No	233	59
Unwelcomed Kiss	Yes	60	15.2
	No	335	84.8

## Operational Definitions

### Sexual coercion

It is the act of forcing a female student through any means to engage in a sexual behavior against her will.

### Data Collection Tools

A structured self-administered questionnaire was adapted after a review of different literatures. The questionnaire assesses the respondent's socio-demographic status, history of substance use and sexual coercion.

### Data collection procedure

Six nurses working in Bishoftu Hospital were recruited as a data collector. Two supervisors were supervising the study. Training was provided for the data collectors and supervisors.

### Data quality assurance

The quality of data was ensured through training of data collectors, close supervision and prompt feedback, reviewing each of completed questionnaires daily. Before the actual data collection was started the prepared questionnaire was pretested in Adama Rift Valley University students and appropriate modifications were made based on the inputs. After completion of the pretest, the selected students were given explanation about the purpose of the study and the actual data collection had taken place under the supervision of the researcher. Finally, data consistency and completeness were checked all the way during data collection, data entry and analysis.

### Data processing and analysis

Data were first checked manually for completeness and then coded and entered using EpiData version 3.1. The generated data

was exported to SPSS version 20. Frequencies and proportions were computed. Statistical association was done for categorical variables. To assess the association between dependent variables and independent variables, bivariate and multiple logistic regressions analysis was employed to identify different predictors. To determine significant association, p value less than 0.05 at 95% confidence interval were taken.

## Result

### Socio-demographic characteristics

From the respondents 289 (73.2%) were in the age group [18-21]. Majority of the respondents 341 (86.3%) were single. About 251(63.5%) were orthodox religion followers. Concerning the educational status of respondent parents, 90(22.8%) of the fathers attended High school education and 128 (32.4%) of mothers attended elementary school. Regarding to the participants family monthly income, 178 (45.1%) of the respondents family monthly income was between 2000 and 4000 Ethiopian birr. Majority of the respondents 282 (71.4%) had constant pocket money (Table 1).

### Substance use

According to the response of participants, 4(1%) smoke cigarette, 57 (14.4%) of the students were drinking alcohol and 20 (5.1%) were chewing Chat (Table 2).

### Sexual Coercion

Among the total respondents 171 (43.3%) had faced sexual coercion. 92 (23.3%), 159 (40.3%), 162 (41%) and 60 (15.2%) had faced unwanted sexual act, verbal threats, unwelcomed touch and unwelcomed kiss respectively (Table 3).

### Factors associated with sexual coercion

As shown in table below those factors with significant association in bivariate analysis was entered into multiple logistic regression models to identify independent predictors of sexual coercion experience. Accordingly, faculty in which the students enrolled, father's educational status, mother's educational status, source of support for the students and alcohol drinking habit associated significantly with the sexual coercion experience.

Students from Social science faculty were 2 times more likely to experience sexual coercion than students from Business faculty (AOR=2.167; 95% CI=1.139-4.122).

Students whose father attended High school were 59.4% less likely to experience sexual coercion than students whose father was illiterate (AOR=0.406; 95% CI=0.200, 0.820).

Regarding mother's educational status, students whose mother attended High school were 62.3% less likely to experience sexual coercion than students whose mother was illiterate (AOR=0.377; 95% CI=0.191-0.744).

Source of support was also found as one of the predictors. Students whose source of support was their parents were 2.5 more likely to experience sexual coercion than students who had other source of support (AOR=2.511; 95% CI=1.225, 5.147).

Students drinking habit also showed significant association with sexual coercion experience. Students who don't drink alcohol were

**Table 4:** Summary of logistic regression for sexual coercion and socio demographic factors of respondent's, May26-June12, 2016.

Variable		Sexual coercion		COR(95% CI)	AOR(95% CI)
		yes	no		
Faculty	Health science	30	42	1.560(0.929,2.620)	1.741(0.985,3.044)
	Social Science	17	41	2.305(1.263,4.207)*	2.167(1.139,4.122)*
	Engineering	11	24	2.444(1.116,5.354)*	1.984(0.863,4.562)
	Business†	112	117	1	1
Father's educational status	Degree & above	26	36	0.805(0.419,1.549)	0.614(0.280,1.346)
	Diploma	44	68	0.932(0.496,1.750)	0.854(0.411,1.774)
	High school	57	59	0.439(0.236,0.817)	0.406(0.200,0.820)*
	Elementary school	15	11	0.604(0.307,1.187)*	0.612(0.289,1.296)
	Illiterate†	28	50	1	1
Mother's educational status	Degree & above	19	34	0.969(0.458,2.051)	0.834(0.367,1.895)
	Diploma	17	20	0.571(0.274,1.193)	0.528(0.233,1.198)
	High school	40	35	0.380(0.206,0.702)*	0.377(0.191,0.744)*
	Elementary	60	82	0.664(0.377,1.170)	0.720(0.386,1.341)
	Illiterate†	34	52	1	1
Source of Support	Parents	105	127	1.725(0.911,3.264)	2.511(1.225,5.147)*
	Relatives	22	37	1.500(0.630,3.109)	1.389(0.586,3.288)
	Husband	11	26	2.596(1.071,6.291)	2.602(0.984,6.886)
	Other†	32	34	1	1
Pocket Money	No	125	143	0.599(0.381,0.942)*	0.804(0.469,1.376)
	Yes†	46	80	1	1
Drinking alcohol	No	157	181	0.375(0.198,0.712)*	0.358(0.177,0.723)*
	Yes†	14	42	1	1

†: Reference category \* : Significant association

64.2% less likely to experience sexual coercion than students drink alcohol (AOR=0.358; 95% CI=0.177-0.723).

## Discussion

In this study 43.3% of the students had ever experienced sexual coercion. This is lower as compared to a finding from a study conducted in Ambo university of Ethiopia in which 76.4% of the students had previous lifetime experience of sexual coercion [18]. This difference might be due to a difference in the socio-economic status between the study participants. This discrepancy is related with the fact that most of the study participants in this study lives with their parents. So, increased control from the families and lesser exposure to situations which causes sexual coercion decreased the students' experience of the problem.

In this study from the respondents 41% experienced unwelcomed touch. This finding is higher than a report from a study done in North Eastern Nigeria (31%) [19] and in Medawelabu University of Ethiopia (22.3%) [20]. Of female students experienced unwelcomed touch. The differences might be associated with the fact that in the study area any form of harassment is considered as an action against religious doctrine. This difference might be associated with the difference in time when the studies were conducted. Students' knowledge on the violation based on gender difference might become greater as time passes.

23.3% of the students experienced unwanted sexual act. On the other hand, according to a study conducted in Medawelabu University of Ethiopia (66%) [20], in Uganda (28%) [16] had experienced unwanted sexual act in the lifetime. The difference might be associated with the socio-cultural difference. Some students might under-report the case for fear.

Students whose father attended High school were 59.4% less likely to experience sexual coercion than students whose father was illiterate. This is similar to a finding from a study conducted in Ambo university of Ethiopia in which students having literate father were 83% less likely to experience sexual coercion than those students having illiterate father [18]. This is due to the fact that fathers who attended any level of education could discuss and share experience to the students about techniques of tackling sexual coercion.

In this study, students who don't drink alcohol were (64.2%) less likely to experience sexual coercion than students drink alcohol. This is consistent with a finding from a study conducted in Ethiopia which showed that consuming alcohol was significantly associated with the sexual coercion experience [21]. The possible explanation could be alcohol drinking is a risky behavior in which alcohol drinking students are highly exposed to sexual coercion. So, the chance of reporting this act might be higher because of the high prevalence of sexual coercion in those students who engage in risky behaviors.



## Conclusion

More than half of the respondents had experienced sexual coercion. The main experience was unwelcomed touch. Faculty in which the students enrolled, father's educational status, mother's educational status, source of support for the students and alcohol drinking habit associated significantly with the sexual coercion experience.

## Ethical Consideration

The ethical approval and clearance was obtained from the Ethical Clearance Committee of Adama general hospital and medical college. Verbal informed consent was obtained from the participants. Confidentiality was maintained by omitting their names and addresses on the questionnaires. Students were informed of their full right to skip or ignore any questions or terminate their participation at any stage and the participants were assured that their participation recorded anonymously. All the data obtained in due course were confidentially kept.

## Availability of Data Materials

The spread sheet data supporting the finding of this thesis is available at the hands of the corresponding author and it can be delivered to the journal based on request at any time.

## Funding

Adama Hospital and Medical College has covered the required fund for the research project.

## Author's Contribution

YemsrachKebede conceptualized and designed the study. AliyeKediro, Bisrat Zeleke and RoberaOlana analyzed and interpreted the data, drafted the manuscript and critically reviewed the manuscript. All the authors read and approved the manuscript.

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