



The Lived Experiences of Women with Physical Impairment Surviving Sexual Violence: A Phenomenological Inquiry

By: - Addisu Alamrew

P.I. Code: 8105

Enrollment No: 109100826

Advisor: - Habtamu Mekonneen (Ph.D.)

`A Research Proposal Submitted to School of Social Work Presented in partial fulfillment of the Requirements of the Degree of Master of Social Work.

Indira Gandhi National Open University Maidan Garhi, New Delhi-110068

**September, 2014
Addis Ababa, Ethiopia.**

**PROFORMA FOR SUBMISSION OF MSW PROJECT PROPOSAL FOR APPROVAL
FROM ACADEMIC COUNSELLOR AT STUDY CENTER**

Enrolment No.: 109100826

Date of submission: September, 2014

Name of the Centre: St. Mary's University

Name of the Guide: **Habtamu Mekonneen (Ph.D.)**

Title of the project: The lived experience women with physical impairment surviving sexual violence: A Phenomenological Inquiry.

Signature of the Student: -----

Approval/not approval

Signature: -----

Name & Address of the student:

Name: **Habtamu Mekonneen (Ph.D.)**

Name: Addisu Alamrew

Address of Guide:

Address of Student:

Mobile: +251 911332537

Mobile: +251 910170740

E-mail: habtusocialwork@yahoo.com

E-mail: addislife1972@gmail.com

Address: Addisu Ababa, Ethiopia

Address: Dessie, Ethiopia

Date: April, 2016

Abbreviations

HTPs	Harmful Traditional Practices
IPA	Interpretative Phenomenological Analysis
KA	Kebele Administration
MSW	Master of Social Work
Ph.D.	Doctor of Philosophy
PTSD	Post Traumatic Stress Disorder
STIs	Sexual Transmitted Infections
VAWA	Violence Against Women Act
VCT	Voluntary Counseling and Testing
WHO	World Health Organization
WRC	Women's Refugee Commission

Table of Contents

PROFORMA FOR SUBMISSION OF MSW PROJECT PROPOSAL FOR APPROVAL FROM ACADEMIC COUNSELLOR AT STUDY CENTER.....	I
Abbreviations	II
Table of Contents	III
CHAPTER I: INRODUCTION	1
1.1. Background of the study	1
1.2. Prevalence of Violence against Women with Disabilities	1
1.3. Statements of the Problem:	3
1.4. Research Questions	4
1.5. Objectives.....	4
1.5.1. General Objective	4
1.5.2. Specific Objectives	4
1.6. Significance of the Study	5
1.7. Definitions of key Terms.....	5
1.8. Chapter plan.....	6
CHAPTER II: RESEARCH DESIGN AND METHODOLOGY	7
2.1. Study Design and framework.....	7
2.2. Universe of the Study.....	7
2.3. Sample.....	7
2.4. Data Collection: Tools and Procedures.....	8
2.5. Data Analysis.....	9
2.6. Ethical Considerations.....	9
References.....	10
Appendixes.....	13
Appendix A: Informed Consent.....	13
Appendix B: Interview Protocol	15
Appendix C: Work plan	18
Appendix D: Budget Plan.....	19

CHAPTER I: INTRODUCTION

1.1. Background of the study

(Suzuki, 2007) suggests that the researcher's perspective is tied to his level of experience within the community under study. I have a direct experience working with people with disabilities for the last 8 years. I have been working as a social worker in Dessie Physical Rehabilitation Center for two years; I have been also working as Project Coordinator and then Program Officer in Dessie-Kombolcha Community Based Rehabilitation for People with Disabilities Project for about 6 years. This gave me rich information and insight to understand the suffering of women with disabilities. Especially while I was a social worker I had a privilege to visit people with disabilities at their home settings. During the home visits I heard many touching stories about the abuse of women with disabilities. As a practitioner I have attempted to link them to have access to psychosocial and economical rehabilitations with development actors. However, often it came to my mind to know more about the problem and then devise the possible preventive and curative mechanisms. Hence, I have been interested in and re-searching sexual violence since my exposure of working with women with disabilities in general and women with physical impairment in particular.

As a result, many of the most fundamental questions in the field of the study cannot be answered relative to this population. For example, what is the nature of sexual violence for physically impaired women? What characterizes the lived experiences of these women who have survived rape? Do perpetrator characteristics differ? How do physically impaired women face in the aftermath of surviving sexual violence? What services do these women want and need? And perhaps most importantly, who is paying attention? Given the paucity of information available on this topic, this study was exploratory in nature and used a phenomenological approach. Open-ended, unstructured interviews focused on 1) the lived experience of surviving sexual violence and 2) the impact that this experience had had on the survivors' sexual behavior.

1.2. Prevalence of Violence against Women with Disabilities

The prevalence of abuse among women in general has been fairly well documented, yet only a few North American studies (Sobeye, 19194), primarily from Canada, have examined the prevalence among women with disabilities. The Disabled Women's Network of Canada (J., 1989)) surveyed

245 women with disabilities and found that 40% had experienced abuse; 12% had been raped. Perpetrators of the abuse were primarily spouses and ex-spouses (37%) and strangers (28%), followed by parents (15%), service providers (10%), and dates (7%). Less than half these experiences were reported, due mostly to fear and dependency. Ten percent of the women had used shelters or other services, 15% reported that no services were available or they were unsuccessful in their attempts to obtain services, and 55% had not tried to get services.

(Sobey, 1994) conducted a study of 166 abuse cases handled by the University of Alberta's Sexual Abuse and Disability Project. The sample was 82% women and 70% persons with intellectual impairments, and covered a very wide age range (18 months to 57 years). In 96% of the cases, the perpetrator was known to the victim; 44% of the perpetrators were service providers. Seventy-nine percent of the individuals were victimized more than once. Treatment services were either inadequate or not offered in 73% of the cases.

The Ontario Ministry of Community and Social Services (*Toronto Star*, April 1, 1987) surveyed 62 women and found that more of the women with disabilities had been battered as adults compared to the women without disabilities (33% versus 22%), but fewer had been sexually assaulted as adults (23% versus 31%).

An extensive assessment of the sexuality of non-institutionalized women with disabilities, which included comprehensive assessment of emotional, physical, and sexual abuse, was conducted by the Center for Research on Women with Disabilities (CROWD) through a grant from the U.S. National Institutes of Health. This study also covered other areas that may be associated with abuse, such as sexual functioning, reproductive health care, dating, marriage, parenting issues, and the woman's sense of self as a sexual person. The design of the study consisted of (1) qualitative interviews with 31 women with disabilities, and (2) a national survey of 946 women, 504 of whom had physical disabilities and 442 who did not have disabilities.

Disabilities reported most frequently included spinal cord injury, cerebral palsy, muscular dystrophy, multiple sclerosis, and joint and connective tissue diseases. Abuse issues emerged as a major theme among the 31 women interviewed in the first phase of this study. An analysis of reports of abuse in those interviews was described by (Nosek M. e., 1995). Twenty-five of the 31 women reported being abused in some way. Of 55 separate abusive experiences, 15 were reported as sexual abuse, 17 were physical (nonsexual) abuse, and 23 were emotional abuse.

The findings from the qualitative study were used to develop items for the national survey. Two pages of the 51-page survey were devoted to abuse issues, encompassing more than 80 variables, including type of abuse by perpetrator and age when abuse began and ended, plus two open-ended questions. Analyses of these data (Young, 1997, December) have revealed that abuse prevalence (including emotional, physical and sexual abuse) was the same (62%) for women with and without disabilities. There were no significant differences between percentages of women with and without disabilities who reported experiencing emotional abuse (52% versus 48%), physical abuse (36% in both groups), or sexual abuse (40% versus 37%). The most common perpetrators of emotional and physical abuse for both groups were husbands, followed by mothers, then fathers.

Emotional abuse by husbands was reported by 26% of all women in both groups; physical abuse by husbands was reported by 17% of all women with disabilities and 19% of all women without disabilities. The most common perpetrator of sexual abuse was a stranger, as reported by 11% of women with disabilities and 12% of women without disabilities. Women with disabilities were significantly more likely to experience emotional and sexual abuse by attendants and health care workers. Women with disabilities reported significantly longer durations of physical or sexual abuse compared to women without disabilities (3.9 years versus 2.5 years).

1.3. Statements of the Problem:

Women with disabilities rank issues of violence as their most important research and health priorities (Curry M. H.-P.-S., 2001). Despite an apparent consensus on the importance of and need for research on violence against women with disabilities, the issue remains an understudied social problem. A review by (Curry M. H.-P.-S., 2001) found that “there is practically no literature regarding the risk of abuse, women’s experiences of abuse, and barriers to seeking help among women with disabilities” (p. 60), and that “the absence of attention to this issue from both disability and violence researchers has contributed to the ‘invisibility’ of the victimization of women with disabilities” (p. 68).

The small body of existing research on violence against persons with disabilities has identified a wide range of prevalence rates. Based on a review of research, (Chappell, 2003) concluded that “women with disabilities face an epidemic of monumental proportions” (p. 12). Indeed, it is common in the literature to see very high estimates of violence against persons with disabilities, such as being 50% more likely to encounter abuse than the rest of the population (Hightower,

2003) or having 2 to 5 times the likelihood of abuse compared to nondisabled persons (Melcombe, 2003). Other research suggests less extreme disparities in risk between those with and without disabilities.

In an effort to gather an in depth understanding and insight on the phenomena of sexual violence through qualitative method (phenomenological technique), the student researcher will unravel the lived experiences of survivors of women with physical impairment thereby proposing recommendations for preventive and curative interventions.

1.4. Research Questions

1. What is the nature of sexual violence for physically impaired women?
2. What characterizes the lived experiences of these women who have survived rape?
3. How do physically impaired women face in the aftermath of surviving sexual violence
4. What services do these women want and need? Who is paying attention?

1.5. Objectives

1.5.1. General Objective

To understand the lived experience of survivors of sexual violence against physically impaired women in Dessie City, Ethiopia.

1.5.2. Specific Objectives

- To explore the nature of sexual violence for physically impaired women
- To understand the characteristics of women with physical impairment who survived sexual violence against
- To describe the aftermath of surviving sexual violence against women with physical impairment
- To describe services needed by women with physical impairment who survived sexual violence

1.6. Significance of the Study

The study will unveil deep insight about the lived experiences of survivors of sexual violence against physically impaired women in Dessie City, Amhara Region, Ethiopia. The outcome of the study will help to design a program to alleviate the encountered problems for survivors of sexual violence in the study area and in areas with similar settings elsewhere in the country. Since the student researcher has been working for many years with a Community Based Rehabilitation Project that aimed to provide care and support for people with disabilities, the study will unpack important findings such as the importance of preventive and rehabilitative activities related to sexual violence for policy makers and program managers. The findings from this research will complement to the existing body of knowledge on the area.

1.7. Definitions of key Terms

Physical impairment is a kind of impairment that limits a person's physical capacity to move, coordinate actions, or perform physical activities. It is also accompanied by difficulties in one or more of the following areas: physical and motor tasks, independent movement; performing daily living functions.

Sexual violence is a broad term that encompasses numerous forms of sexual abuse and exploitation, including but not limited to rape, sexual assault and child sexual abuse. ; “It is an event that occurred without the girl or woman’s consent that involved force or threat of force, and that involved sexual penetration of the victim’s vagina, mouth, or rectum” (p. 2).

Completed/performed rape: - is defined as any nonconsensual penetration of the vagina, penetration obtained by physical body harm, by threatening or deception or when the victim is incapable of giving consent.

Attempted Rape: - is defined as a trial to have sexual intercourse without consent of a woman but without penetration of the vagina

Sexual Assault by non-intimate Partner: - is defined as physically forced or otherwise coerced penetrative sex by anyone apart from a husband or a regular partner

Forced first intercourse: - experience of forced or coerced penetration at first sexual intercourse (first coitus) at and after age 15; it includes when the first sex was unwanted, unexpected, tricked.

Sexual Harassment: - is defined as any act of unwanted sexual behaviors including physical contacts, verbal comments, jocks, questions and suggestions that are intentionally done on a women. Van Manen, M. (1990).

Phenomenology may be broadly defined as the study of lived experience with an aim toward “gaining a deeper understanding of the nature or meaning of our everyday experiences” (Van Manen, 1990).

1.8. Chapter plan

This proposal consists of two chapters.

The first chapter is an introduction. This chapter comprises of background of the study, literature review on the prevalence of violence against women with disabilities, statement of the problem, research questions, Objectives, significance of the study and definition of key terms.

The Second chapter shall deal with research design and methodology. This chapter discusses research designs and framework, universe of the study, sample, data collection tools, data analysis, and ethical considerations.

CHAPTER II: RESEARCH DESIGN AND METHODOLOGY

2.1. Study Design and framework

The study will employ qualitative methods such Phenomenological inquiry with the assumption to explore the lived experiences of women who have survived sexual violence. The lived experiences and perceptions of research participants will be thoroughly narrated through story telling. By so doing core themes and subthemes will be identified through Interpretive Phenomenological Analysis (IPA). This study will uncover the lived experiences of surviving sexual violence for these women, including if and how experiencing sexual violence impacts their sexual behavior. Phenomenological psychologists describe numerous approaches to phenomenology, each rooted in a different philosophical tradition with each tradition providing guidelines rather than rules for inquiry (Hein, 2001). The current study will be grounded in a feminist framework, aligned with what some qualitative researchers may describe as a feminist constructional hermeneutical phenomenology (Schwandt, 1994) using a multidimensional lens of understanding individual's experiences (Hutchinson, 2001). This is to say that women may experience rape differently based on their positions in society.

2.2. Universe of the Study

The universe of the study will be all women with physical impairment who survived sexual violence in Dessie City, Amhara Region, Ethiopia. According to Dessie Physical Impairment Association Registration Book, there are 310 people with physical impairments (163 are female).

2.3. Sample

(Polkinghorne, 1989) recommends that researchers interview from 5 to 25 individuals who have all experienced the phenomenon. Hence, five women with physical impairment who survived sexual violence will be selected. I will use a purposive sampling of five participants since physically impaired women, particularly those who have experienced sexual violence, constitute a relatively small and hidden population. These women also experience multiple forms of stigma due to their disability and histories of victimization.

Eligibility criteria for the targeted participants in this phenomenological inquiry will be those whose age is greater than or equal to 18; survivors of sexual violence women with some kind of physical impairment and those who are willing and able to speak about their lived experiences. Once participants met all of the criteria for participation based on the phone interview an appointment for a face-to-face interview will be arranged. The interviews will be conducted in a private office with only the participants (individually) and researcher present.

2.4. Data Collection: Tools and Procedures

The method for data collection will be participant in-depth interviews. As a purposive non-random respondent-driven sampling technique, I will invite five women with physical impairment who survived sexual violence purposely and whom I believed fitting the aforementioned criteria of selection. Since I had been working with Community Based Rehabilitation Project with people with disabilities in project interventions for many years, I have a good rapport with the research participants. Hence, I will tell social workers of the project to recruit women with physical impairment who survived sexual violence.

I will briefly explain the purpose of the research project to prospective participants who are scheduled to contact me. I inform them that the interview will be expected to last for about one and a half to two hours. I will verify that interested participants will be at least 18 years old and we will schedule a time for the in-person interview, which will be occurred at a mutually agreed upon location.

After explaining the study procedures and answering respondents' questions, I will ask them for informed consent (orally) and discussed the voluntary nature of the study, including participants' option to end the interview at any time for any reason. Next, I will ask women to discuss their experience of sexual violence, their sexuality, and if experiencing sexual violence impacted their sexuality. The interview will be concluded with a brief conversation about the follow-up interview. Some of the interviewees will be engaged in the optional follow-up meetings where we will review my notes and discuss any thoughts, feelings or memories that had emerged since the initial interview.

2.5. Data Analysis

As in most phenomenological research, recruitment, interviewing, transcription, coding, theme generation and reflection shall be occurred simultaneously as iterative processes. I will transcribe interviews from the original audio recordings and de-identify them by using pseudonyms that the participants chosen. Participants will be offered the option to choose their own pseudonyms. I will conduct interpretive phenomenological analysis (IPA) guided by Shaw (2010) and Smith, Jarman and Osborn (1999) and I will analyze the common themes of the most salient aspects of the narratives.

The final analysis will be to conduct IPA across cases in order to present a synopsis of the most salient aspects of survivors' experiences, which will be mapped onto one another's narratives. This brief, across-case analysis will be presented in what is traditionally reserved as the discussion section. This section is organized by similarities of this sample's experiences of sexual violence, which align with what is commonly reflected within the sexual violence literatures.

2.6. Ethical Considerations

The purpose of the research will be explained to the participants. Full disclosure will be made during the discussion of the *Informed Consent*. Participants will be given the opportunity to ask questions and were reminded that they could stop the interview at any time. Confidentiality will be emphasized due to the personal nature of the information being discussed. In light of the sensitivity of the information being discussed. Participants will be invited to play a larger role in the research by engaging in member checking. This process not only ensures accurate data but also gave the participants an opportunity to have some level of control over their own data and to play a larger role in informing the community about sexual violence. In addition, participants will be given the opportunity to be further involved to ensure that the final product is a good representation of their unique life experiences.

References

- Anderson, M. G. (2003). "Why doesn't she just leave?". A descriptive study of victim reported impediments to her safety. *Journal of Family Violence, 18*(3), 151-155.
- Andrews, A. &. (1993). *Sexual assault and people with disabilities. Special Issue.*
- Barnett, O. M.-P. (2005). *Family violence across the lifespan: An introduction*(2nd ed.). . Thousand Oaks, CA: Sage.
- Basile, K. L.-S. (2005). Report from the CDC: Evaluability assessment of the rape prevention and education program: Summary of findings and recommendations. *Journal of Women's Health, 14*, 201-207.
- Blandhard, E. J.-A. (1996). *Psychometric propoerties of the PTSD checklist(PCL). Behaviour Research & Thearpy, 34*, 669-673.
- Bornstein, R. (2006). *The complex relationship between dependency and domestic violence: Coverging psychological factors and social forces. American Psychologist, 61*, 595-606.
- Browne, A. (1991). *The victim's experiance: Pathways to disclosure. Psychotheray, 28*, 150-156.
- Brownridge. (2006). *Partener Violence Against Women with Disabilities 821.* SAGE Publications. All Rights reserved. Not for commercial use or unauthorized distribution.
- Campbell, R. (2005). *What really happened? A validation study of rape survivors's help-seeking experiances with the legal and medical systems. Violence and Victims, 20*, 55-68.
- Campbell, R. S. (2001). *Preventing the "second rape": Rape survivors' experiances with community service providers. Journal of interpersonal Violence, 16*, 424-436.
- Campbell, R. S. (2004). *The impact of rape on women's sexual health risk behaviours. Health Psychology, 23, 1*, 67-74.
- Canada., S. (2000). *1999 General Social Servey, Cycle 13 victimization: Public use microdata file.*
- Chappell, M. (2003). *Violence against women with disabilities: A research overview of the last decade AWARE: The Newsletter of the BC Institute Against Family Violence, 10*(1),11-16.
- Chung, D. (2007). *Making meaning of relationships: Young women's experiances and understanding of dating violence. Violence Against Women, 13*,1274-1295.
- Cook, S. &. (2005). *More data have accumulated supporting date and acquaintance rape as significant problems for women. In D.R. Loseke, R.J.Gelles, & M.M. Cavanaugh[Eds.].*
- Cook, S. G. (2011). *Emerging issues in the measurement of rape victimizatio. Violence Against Women, 17*, 201-218.
- Curry, M. H.-P.-S. (2001). *Abuse of Women with disabilities: An ecological model and review Violence Against Women.*
- Elliott, D. M. (2004). *Adult sexual assualt: Prevalence symptomatology, and sex differences in the general population. Journal of Traumatic Stress,17*,3, 203-211.

- Ferraro, K. &. (1983). *How women experiancing battering: The process of victimization. Social Problems, 30, 325-339.*
- Fisher, B. D. (2003b). *Reporting sexula victimization to the police and others: Results from the National-Level Study of Colleague Women. Justice and Behavior, 30, 6-38.*
- Foa, E. &. (1998). *Treating the trauma of rape: Cognitive behavioral therapy for PTSD.* New York:: Guilford.
- Hein, S. A. (2001). *Empirical and hermeneutic approaches to phenomenological research in psychology: A comparison. Psychological Methods, 6, 3-17.*
- Hightower, J. &. (2003). Aging, disabilities, and abuse. . *AWARE: The Newsletter of the BC Institute Against Family Violence , 10(1), 17-18.*
- Hutchinson, D. (2001). Identity crisis: "Intersectionality," "multidimensionality," and the development of an adequate theory of subordination. . *Michigan Journal of Race and Law, 285-317.*
- J., R. (1989). *Beating the "odds": Violence and women with disabilities(Postion Paper 2).* Vancouver: Disabled Women's Network of Canada.
- Johnson, H. (2001). *Contrasting views of the role of alchol in cases of wife assault. Journal of Interpersonal Violence .*
- Kilpatrick, D. R. (2003). *Rape in Gerorgia: A report to the state. Charleston, SC: National Violence Against Women Prevention Research Center, Medical Unversity of South Carolina.*
- Lincoln, Y. &. (1985). *Naturalistic inquiry.* Beverly Hills, CA: SAGE.
- McCloskey, L. B. (2000). *The intergenerational transimission of risk for chid sexual abuse. Journal of interpersonal Violence, 15, 1019-1035..*
- Melcombe, L. (2003). Facing up to facts. *AWARE: The Newsletter of the BC Institute Against Family.*
- Milberger, S. I.-S. (2003). *Violence Against Women with physical disabilities and victims, 18, 581-591.*
- Nettelbeck, T. W. (2002). *Personal vulnerability to victimization of people with mental retardation.*
- Newman, E. C. (2000). Developmental disabilities, trauma exposure , and post-traumatic stress disorder . *Trauma, Violence , & Abuse.*
- Nosek, M. e. (1995). *Sexual Functioning among women with physical disabilities. Archives of Physical Medicine and Rehabilitation.*
- Nosek, M. H. (1998). *Abuse of women with disabilities : Policy Implications. Journal of Disability Policy Studies.*
- Ortlipp, M. (2008). *Keeping and using refelective journals in the qualitative research process. The Qualitative Report, 13, 695-705.*
- Petersilia, J. (2001). *Crime victims with developmental disabilities : A review essay. Criminal Justice.*

- Pirog-Good, M. &. (1989). *The help-seeking behaviour of physically and sexually abused college students*. In M.A. Pirog-Good & J.E. Stets(Eds.),.
- Polkinghorne, D. (1989). *Phenomenological research methods*. In R.S. Valle & S. Halling(Eds.), *Existential-phenomenological perspective in psychology*(pp.41-60). New York: Plenum.
- Rodgers, B. C. (1993). *The qualitative reserach audit trail: A complex collection of documentation*. *Reserach in Nursing & Health*, 16, 219-226.
- Schwandt, T. (1994). *Constructivist, interpretivist approaches to human inquiry*. in N.K. Denzin & Y.S. Lincoln (Eds.), *The Handbook of Qualitative Reserach* (pp.118-137). Thousand Oakks, CA: Sage Publications.
- Sobeye, D. (19194). *Violence and abuse in the lives of people with disabilities* . Toronto, Canada: Paul II.
- Suzuki, L. A. (2007). *The pond you fish in determines the fish you catch: Exploring strategies for qualitative data collection* , *The Counseling Psychologist*.
- Teta, M. H. (2011). *Intergenerational transmission of sexual victimization vunerability as mediated via parenting*. *Child Abuse & Neglect*, 35,363-371.
- The Roeher Institute. (2004). *"As if weren't human: discrimination and violence against women with disabilities*. Ottawa, Public Health Agency of Canada.
- Tjaden, P. &. (2000). *Consequences of violence against women*. Washington, DC: National Institute of Justice and Centers for Disease Control and Prevention.
- Ullman, S. T. (2007). *Structural models of the relations of assault severity, social support , avoidance coping,, self-blame, and PTSD among sexual survivors*. *Psychology of women Quarterly*, 31, 23-37.
- Van Manen, M. (1990). *Researching lived experiance: Human science for an action senitive pedagogy*. New York: NY: SUNY Press.
- Violence., N. C. (n.d.). *Open minds, open doors: Technical assistance manual assisiting domestic violence service providers to become physically and attitudinally accessible to women with disabilities*. Denver, CO: National Coalition Against Domestic Violence. .
- Wolrd Bank. (2012). *Women with disability*. Retrieved on July 10, 2014 from [http//web.worldbank.org/WBSITE/EXT](http://web.worldbank.org/WBSITE/EXT).
- World Health Organization, T. W. (2011). *World Report on Disability* . Geneva: World Health Organization .
- Young, M. N. (1997, December). *Prevalence of abuse of women with physical disabilites*. *Archives of Physical Medicin and Rehabilitation*, 78, 834-538.
- Yuan, N. K. (2006). *The psychological consequences of sexual trauma*. *National On-line Resource Center on Violence Against Wome*. .

Appendixes

Appendix A: Informed Consent

Title: The Lived Experiences of women with physical impairment surviving sexual violence. A Phenomenological Inquiry.

Introduction:

My name is Addisu Alamirew. I am a student of Indira Ghandi National Open University doing my final year thesis as a partial fulfilment of the requirements of Masters of Social Work. The purpose of the study is to learn about the lived experiences of women with physical impairment who have experienced sexual violence. I also want to learn about if and how experiencing sexual violence impacts their sexuality.

The **purpose** of the study is to learn about the lived experiences of women with physical impairment who have experienced sexual violence. I also want to learn about if and how experiencing sexual violence impacts their sexuality. The participation took between 1.5 to 2 hours for the first part of the study.

The interview will involve asking interviewees to tell me about their experience of sexual violence. After the interview, we will discuss informally how it felt to answer these questions. The entire interview will be audio recorded. If you are willing, I will meet you again in 1 week for a follow-up interview. I will destroy recordings at the end of the research. I will conduct the interviews at the place that we both agree on.

I don't think you will have any risks than you would in discussing this topics in normal daily life. But there is the possibility that participation in this study may cause you discomfort. We can take breaks or stop the interview at the interview at any time you wish.

You don't have to talk about anything that you don't want to. If you become distressed and need support, we will stop the interview.

Regarding the benefits of this research, I will pay you ETB 50 as transport allowance.

Participation in research is voluntary. You don't have to be in the study if you are not willing to participate. If you decide to be in the study and change your mind, you have the right to drop out at any time. You may skip questions or stop participating at any time. Whatever you decide, you will not lose any benefits to which you are otherwise entitled.

I will keep your records private to the extent allowed by law. Dr. Habtamu Mekonneen, my Research Advisor will have access to the information you provide. Information may also be shared with those who make sure the study is done correctly. I will use a pseudonym (fake names) rather than your name on study records. The information you provide will be stored on a password protected computer. The audio recordings will be destroyed once the research is complete. We will not ask for your real name or other information that might point to you. When we present this study or publish its results, you will not be able to be identified personally.

VII. Contact persons: Addisu Alamirew (Mobile Number +251 910170740 or addislife1972@gmail.com). If you have questions about the study.

If you are willing to volunteer for this research and be audio recorded please check one of the boxes below.

No, I don't want to participate

Yes, I want to participate

Appendix B: Interview Protocol

I appreciate you taking the time to meet with me. As you know, I've been looking for women with physical impairment to speak to about their experiences with sexual violence. It is a matter of social justice for me and I couldn't do this without people like you willing to share their stories. So thank you. I want us to go through this consent form together and discuss anything that isn't clear.

[Review consent form]

Do you want to pick a name for you that we can use during the interview? I will also use this name when I write about the research project. That way you will stay anonymous.

[Choose pseudonym]

Ok, and before we get started, if I ask you anything that you would rather not answer just let me know and we will move on. I am going to try and interject as little as possible. I'm more interested in hearing you speak about your experiences, like telling me your story, rather than a traditional interview. If I don't react much, it isn't in reference to anything you share but more about me trying to step back and just let you talk.

One last thing: If you want to stop at any point that is ok too. The information that you can share with me is really important but it is even more important to me that you're comfortable with our conversation ok? Any questions before we start?

First, just tell me a bit about yourself, like how old you are, where you are from, what is your ethnicity, religious background— stuff like that.

Consistent with phenomenological interviewing, the focus of the interview will be on hearing participants' narratives. Therefore, the interview will be as open-ended, with me providing very little input. Two primary questions will be asked:

1. Will you tell me about your experience(s) of sexual violence?
2. Has this/these experience(s) impacted your sexual behavior? If so, can you tell me about that?

Prompts will be used as little as possible during this interview. However, if participants need prompting in order to 'tell their story', some of the prompts identified below may be used.

Although they will be used sparingly, and this list of potential prompts is lengthy, prompts will not be limited to those outlined below.

[If necessary to prompt the interviewee, I may use the following]

How old are you?

Where are you from?

How long have you lived in Dessie?

What is your ethnicity?

What is your religious background?

I would like for you to tell me about your experiences of sexual violence.

Was this the only time?

[If no] How many other times did this happen?

What were those other times like?

Where you /what were was going on?

Who did it?

Did you/how did you know them?

What happened afterwards?

Did you need any type of care right afterwards?

Did you tell anyone?

How were you treated?

How were you doing/how did you cope?

How/does the rape effect you today?

Does it affect your daily life?

Can you/do you talk about it?

Is it important to talk about?

There has been *very little* research on how rape effects women's sexuality. Can you talk about how or if your experiences impacted your sexuality or future sexual experiences with men?

[If necessary, prompts may include the following.]

After your assault, is there anything that you looked for or anything you needed but didn't find or get?

After your assault, what was most helpful to get you through?

Is there anything else you would like to share or you think is important that I should know?

How did you feel talking about this with me today?

Ok, we are almost done. If you would be interested, it would be great to meet back up in about a week. We can go through my notes and make sure that I recorded everything how you intended.

I'd like to make sure that I've captured *your* experience as best I can. I expect that to take no more than an hour.

Is that ok?

Do you have any questions for me?

Ok, then I will be in touch tomorrow. Thank you so much for meeting with me today. !

Appendix C: Work plan

No	Activities	Responsibility									
			Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov
1	Prepare draft proposal	Principal Investigator									
2	Submission of Draft proposal	Principal Investigator									
3	Submission of Final proposal & obtain Approval from the guide to go ahead	Principal Investigator and Advisor									
4	Pre-testing of the Topic guide	Principal Investigator									
5	Data collocation	Principal Investigator									
6	Data transcribing	Principal Investigator									
7	Data analysis and write up	Principal Investigator									
8	Submission of first draft to the advisor	Principal Investigator									
9	Submission of final draft to the advisor	Principal Investigator									
10	Proposal commented and corrected.	Principal investigator									
11	Final submission of the complete thesis	Principal Investigator									

Appendix D: Budget Plan

S.N	Budget Category	Unit Cost in Ethiopian Birr	Multiplying factor	Total Cost
I	Personnel	Daily Wage (including per diem)	Number of staff days (Number of staff x Number of working days)	
1.	Social Worker	150 birr	1p x 1days	150.00
2.	Research participants transport incentive	50 birr	5p x 1days	250.00
3.	Transportation and accommodation for PI	500 birr	1p x 3 days	1500.00
4.	Stationary			1000.00
			Total	2,900.00