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APPENDICES

APPENDIX A

Inform consent form

Number

ASSESSMENT ON KNOWLEDGE, ATTITUDE AND PRACTICE RELATED TO FEMALE GENITAL MUTILATION (FGM) AND ITS TYPE IN JIJIGA TOWN OF SOMALI REGIONAL STATE OF ETHIOPIA.

My name is Habib Mohammed Yusuf, I'm doing my Master degree at the college of public health, Chulalongkorn University. I'm doing my research on Knowledge, attitude, and practice related to Female Genital Mutilation (FGM) and its type in Somali Regional State of Ethiopia.

I'm here by requesting you to participate in the study. If you agree to participate I would interview you, regarding your personal information, and what you think about FGM, the interview my last for about 20 minute, I hope the information about the study will help to plan activities As a result, perhaps, to establish potential area which need to be empowered or changed and reasonable strategies will be recommended to eradicate FGM practice from the region.

Any information that is obtained with this study will keep confidential. Your name will not be mentioned or identified in any report. You are free to have another person present with you during the interview. You are also free to withdraw at any time. If you have any questions during the interview please ask or discuss with interviewer.

Place/Date

Name of interviewer

Place/Date

Respondent

Witness

1.

2.

Appendix C

Questionnaire formats

INSTRUCTIONS

- (1) You are kindly requested to Fill in all blank spaces
- (2) Do not leave any item of information without answer.

Date of interview

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

Name of interviewer's _____

PART I - SOCIO - ECONOMIC AND DEMOGRAPHIC CHARACTER

- | | | | | |
|----|------------|---|-----------|--------------------------|
| 1. | Age _____ | | D1 | <input type="checkbox"/> |
| 2. | Ethnicity | (1) Somali (2) Oromo (3) Amahara (4) Walyta (5) Other, specify _____ | D2 | <input type="checkbox"/> |
| 3. | Religion | (1) Muslim (2) Christian (3) Other | D3 | <input type="checkbox"/> |
| 4. | Occupation | (1) House wife (2) Civil servant (3) Day laborer (4) Marchant (5) Other specify _____ | D4 | <input type="checkbox"/> |

5. Marital status

- 1) Married
- 2) Divorced
- 3) Widowed
- 4) Single

D5

6. Income in US dollar/month

- (1) _____ Dollar/ house hold

D6

7. Educational status of women

- (1) Illiterate
- (2) Read and write
- (3) Literate, Grade completed _____
- (4) Others

D7 **PART I Questions related to the knowledge of women on FGM**

1) Please define FGM?

K1

2) Do you know about any type of female circumcision?

- (1) Yes (2) No

K2

3) If yes go on, if no skip to Question number 8

K3

4) please list down the types

1. _____
2. _____
3. _____
4. _____

K4

5) Do you think FGM is harmful and should be eradicated?

- (1) Yes (2) No

K5

6) If the answer is yes Please state your reasons?

K6

7) If you believe that FGM is harmful to women and children and it should be stopped. What are some possible means to prevent FGM practice do you think or recommend?

1.

K7

2.

3.

8) Do you know any side effects of FGM?

K8

(1) Yes (2) No

9) Are you interested in the Practice of FGM ?

K9

(1) Yes (2) No

10) If the answer is yes, what is the reason?

K10

11) Do you think that men have influence on FGM practice?

(1) Yes (2) No

K11

12) If yes, In what way they influence on FGM practice ? mention

1. _____ 2. _____

K12

3. _____ 4. _____

PART III QUESTIONS RELATED TO ATITUDES OF WOMEN

- (1) Strongly agree
- (2) Agree
- (3) Disagree
- (4) Strongly disagree

| | | 1 | 2 | 3 | 4 | |
|----|--|---|---|---|---|-----------------------------|
| 1 | FGM is a traditional harmful practice that should be stopped | | | | | A1 <input type="checkbox"/> |
| 2 | The woman should actively participate in the FGM eradication programme | | | | | A1 <input type="checkbox"/> |
| 3 | FGM – preserve virginity (chastity). | | | | | A1 <input type="checkbox"/> |
| 4 | FGM – increase chance of marriage. | | | | | A1 <input type="checkbox"/> |
| 5 | FGM is social identify for women. | | | | | A1 <input type="checkbox"/> |
| 6 | FGM – maintain cleanliness. | | | | | A1 <input type="checkbox"/> |
| 7 | FGM – prevent premarital sex. | | | | | A1 <input type="checkbox"/> |
| 8 | FGM – suppress high sexual drive. | | | | | A1 <input type="checkbox"/> |
| 9 | FGM – ensure female purity. | | | | | A1 <input type="checkbox"/> |
| 10 | FGM is religious requirements that to be done. | | | | | A1 <input type="checkbox"/> |
| 11 | FGM is a tradition (custom) that should be maintained. | | | | | A1 <input type="checkbox"/> |
| 12 | Uncircumcised women are out of social norm. | | | | | A1 <input type="checkbox"/> |
| 13 | Circumcised girls are more clean than uncircumcised girls. | | | | | A1 <input type="checkbox"/> |
| 14 | People considered as if uncircumcised women have high sexual drive and discord among women & men. | | | | | A1 <input type="checkbox"/> |
| 15 | If women give birth to a female child in the future or if you have an circumcised daughter currently will you expose her to FGM? | | | | | A1 <input type="checkbox"/> |

PART IV QUESTION RELATED TO DECISION MAKING, TYPE,

THE PREVELLENCE AND THE PRACTICE OF FGM

1. Do FGM practice in your community? P1
 - (1) Yes
 - (2) No

2. Had you your self under gone FGM? P2
 - (1) Yes
 - (2) No

3. At what age you are exposed to the FGM P3
 - (1) During in infancy (1- 11 month)
 - (2) When I was between 1 –5 years old
 - (3) When I was between 6 –14 years old
 - (4) When I was between > 14 years old
 - (5) I don't know.

4. Who make the decision in the family FGM to be done ? P4
 - (1) Father
 - (2) Mother
 - (3) Both
 - (5) Village women
 - (5) other, specify _____

5. Who performed FGM (Female circumcision) for you ? P5
 - (1) Traditional Birth attendants (TBA)
 - (2) Village women other than TBA
 - (3) Health professional
 - (4) Other, specify _____

6. What types of instrument was used by the circumcises ? P6
 - (1) Razor
 - (2) Scissors
 - (3) Knife
 - (4) Other, specify _____

7. What form of FGM you had under gone ? P7
 - (1) Sunni type
 - (2) Pharonic type
 - (3) Clitoridectomy type
 - (4) Other, specify _____

**PART V QUESTION RELATED societal norms and social reasons,
Physical Consequence, Psychological Consequence and Psycho-sexual.**

1. Do you have any physical consequence of FGM? C1
(1) Yes (2) No

2. If the above question is yes, please which one from the list down the problem you faced?

- | | | | | | |
|-----|---------------------------------------|---------|--------|----|--------------------------|
| 2:1 | Infection | (1) Yes | (2) No | C2 | <input type="checkbox"/> |
| 2:2 | Excessive bleeding | (1) Yes | (2) No | | |
| 2:3 | severe pain during Genital mutilation | (1) Yes | (2) No | | |
| 2:4 | Double episiotomy during child birth | (1)Yes | (2) No | | |
| 2:5 | painful Menstruation | (1) Yes | (2) No | | |
| 2:6 | painful sexual intercourse | (1) Yes | (2) No | | |
| 2:7 | other, specify _____ | | | | |

3. Do you ever heard of any ill effect (bad thing) of FGM ? C3
1) Yes (2) No

4. If yes, where do you get information about ill effect of FGM ?

- | | | | | | |
|-----|--------------------------------|-----|------------------------|----|--------------------------|
| (1) | Friend /neighbour | (2) | Mass media | | <input type="checkbox"/> |
| (3) | Health personnel | (4) | Seminar given to women | C4 | |
| (5) | Other, source , specify. _____ | | | | |

5. Did you ever encounter any psychosocial and sexual problems related to FGM? C5
(1) Yes (2) No

6. If the answer is yes can you identify the psychosocial and sexual complications C6
that you encounter?

1.

2.

7. Do you believe FGM decrease high sexual drive of the women? C7
- (1) Yes (2) No
8. Do you think this practice is a way for women to realize sexual pleasure? C8
- (1) Yes (2) No
9. Is FGM related to culture? C9
- (1) Yes (2) No
10. What are some reasons given to perform (doing) FGM in your locality? C10
- a) Tradition (1) Yes (2) No
- b) Community enforcement (1) Yes (2) No
- c) Religious requirement (1) Yes (2) No
- d) To protect virginity (1) Yes (2) No
- e) To get husband (1) Yes (2) No
- f) To be admitted into women group
(1) Yes (2) No
- g) It make child birth easier and prevent infant death
(1) Yes (2) No
- h) other, specify _____

CUEEICULUM VITAE

Name : Mr. Habib Mohammed Yusuf

Date of Birth : September 27, 1977

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Education

2002-2003 post graduate diploma on Public Health Administration

1999-2002 B.Sc. on Biochemistry

Work Experience

July - October 2005 Acting Head of Planning and Programming Department

May 2003 up to now Somali Regional State Health Bureau (SRSHB)

Ethiopia Health Planning Senior Expert.

Other Activities

- State Health Bureau focal person for WHO Horn of Africa Initiative –HOAI (WHO, Ethiopia, Somali Region)
- Member of Stop team, Unicef/WHO surveillance team
- State Health Bureau focal person for Italian Government support program to Somali State

Publication

- Health Sector Overview in Somali Region, Jijiga, May 2004 (unpublished document)
- Assessment on Urban service delivery in Somali region, 2004