Harmful Traditional Practices and Child Protection: Contested Understandings and Customs of Female Early Marriage and Genital Cutting in Ethiopia

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Introduction

This article explores local perspectives on the early marriage and genital cutting of girls in Ethiopia. It is written in the context of major concerns among policy and human rights actors internationally that these customs represent a serious threat to girls' wellbeing and rights (Mathur *et al* 2003; UNFPA 2005; UNICEF 2005; WHO 2010), as well as concerted efforts nationally to eliminate them. Apart from their shared designation as injurious, the reasons for considering early marriage and female genital cutting together are that they respond to common cultural logics and are often linked in practice.

We define 'early marriage' as any union between individuals under the age of 18 years, this being the upper limit of childhood internationally and the minimum legal age of marriage in Ethiopia. The focus on girls reflects the fact that early marriages are far more prevalent among females than males in Ethiopia. One key feature of these marriages is that they are arranged by the couple's parents, enabling them to determine who a daughter marries, when and with what benefits to the individuals and families involved. Female genital cutting denotes all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons (WHO 2010). There are three forms in Ethiopia, cliterodectomy, excision and infibulation¹, with significant variations in the severity of the procedure and its health impacts, infibulations being the most dangerous by far. There are also important regional variations in the type of procedure and age of the girls concerned, the

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¹ *Clitoridectomy:* partial or total removal of the clitoris and, very rarely, only the prepuce; *Excision or Labiadectomy:* partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora; *Infibulation:* narrowing of the vaginal opening through the creation of a covering seal. We do not have information on the specific procedures used with children in the sample.

extent to which men and women are circumcised simultaneously, whether it is a rite of passage, performed collectively and who officiates (EGLDAM 2008:95-6).

The article examines the cultural rationale underlying female genital cutting and early marriage, and whether and how the practices have been affected by eradication efforts and/or other processes of change. It finds considerable complexity in norms and values; thus, while some people vehemently oppose these practices, others regard them as beneficial economically and protecting girls and their families from a wide range of social and physical risks. It concludes that while eradication efforts have had some impact, there have been differential degrees of change, with considerable resistance and unintended deleterious consequences in some cases, suggesting that a review of policy is needed.

Study context

Research sites

The analysis draws on three rounds of qualitative research with 50 children born in 1994/95 in five out of the 20 Young Lives sites in Ethiopia, as well as with their peers, caregivers and community representatives. The same communities, children and adults were involved in all three rounds of data collection, which entailed focus group discussions, with boys and girls and adults in separate sessions and interviews with a range of community and religious leaders, elders and service providers. The five sites were selected to include one from each of the four major regions from which the wider sample of sites was drawn, plus Addis Ababa, the capital city.

Two of the sites are located in major cities. The Addis Ababa site is in the city centre, in an area due for demolition. The population is mixed in terms of ethnicity and religion, with the Amhara representing a third of the Young Lives children, Orthodox Christians forming a significant majority and Muslims making up over a third in the sample. There is a high incidence of female-headed households in the sample and many rely on petty trade and informal wage labour, including sex work. The second site is in Hawassa, the capital of the Southern Ethiopian Nationalities, Nations and Peoples Administrative Region (SNNP). There are three major ethnic groups among the Young Lives sample: a dominant minority of Wolayta people, a quarter Amhara, a smaller number of Oromo and a few others. A little over half of the sample is Orthodox Christian and a smaller number, Protestant. Over 20% of households are headed by women and most people are engaged in petty trading, daily labour and street vending. The

community is considered to be very poor and non-governmental organisations are active locally.

The rural sites are in the three largest highland regions of Ethiopia. Although close to a small town, the site in Amhara Region is rural. Land shortages and rain-fed agriculture are pervasive, resulting in youth un(der)employment and out-migration, though trade and wage labour in construction is becoming important. All respondents in this area are Orthodox Christian Amhara. The Oromia site is located near a major town and livelihoods are very diverse. The population is mixed ethnically and religiously, although the Oromo represent the vast majority (accounting for 90% of Young Lives children). Three-quarters of the sample are Orthodox Christians and one quarter, Muslims. The site in Tigray Region, is located quite close to Mekele, the capital, although is rural and fairly remote, connected by only a dry-season road. While the area is drought prone and livelihoods have been based on rain-fed agriculture and livestock rearing, irrigation was introduced recently and a private quarry and stone crushing industry provides much valued income for some. The population is composed of Orthodox Christian Tigraway.

Incidence and trends

Early marriage and genital cutting of women is prevalent throughout Ethiopia, although national data reveal significant urban-rural, regional and intergenerational differences and an overall decrease in both practices (EDHS 2001 and 2006).

A survey carried out in 1997 suggested that early marriage was common among over half the women, rising to two-thirds among the Amhara, three-quarters among the Tigraway and higher still for southern groups such as the Gurage, Wolayta and Kambata (EGLDAM 2008). The 2005 EDHS records a median age at first marriage of 16.1 for women, compared with 23.8 for men, although among urban women it reached the legal age of 18 and in Addis Ababa, 21.9. Statistical data confirm ethnographic evidence that early marriage is more prevalent in northern Ethiopia, and that the median age at first marriage is rising in younger age groups. The EGLDAM survey indicates an increase in age of marriage between 1997 and 2007 in all regions, and among regions with Young Lives sites especially Amhara, Tigray and Addis Ababa, and to lesser extent Oromia and SNNP. The EDHS shows limited change between 2000 and 2005, with slightly more increase in urban areas and among younger ages, and in Amhara and Tigray, suggesting that there has been more change in the North.

According to the 2005 EDHS three in four women in Ethiopia have undergone genital cutting, the prevalence being lower in urban areas, at just over two-thirds, and very high in the two pastoral regions in the East of the country. Among the Regions with Young Lives sites the prevalence is highest in Oromia, followed by the Southern Region, then Amhara, and Addis Ababa. Only in Tigray is the prevalence recorded as less than a third. However, rates are much lower among girls than their mothers and decline with education. The EGLDAM surveys indicate a significant reduction in prevalence between 1997 and 2007 (from 61% to 46%), the greatest decrease being in Tigray, followed by the southern Region and Oromia. Comparison between the EDHS 2000 and 2005 surveys also suggests a significant decline overall (from 80% to 74%) and an even greater decline in the proportions who have circumcised at least one daughter (from 52% to 38%). The decline was more pronounced in urban areas for women and in rural areas for girls, and correlates with education. In regional terms the decline was most important in Amhara and Addis Ababa. However, over half the girls in Amhara are still circumcised, and the region is ranks second in the 'league' of 11 regions. Oromia still has over a third of girls circumcised and is in fourth place. Tigray made a significant improvement among mothers but much less so among daughters and is ranked fifth, whereas Addis Ababa is fourth. Genital cutting was found to be more prevalent among Muslims and changing more slowly between 1997 and 2007 than among Orthodox and other Christians (EGLDAM 2008:163-4).

Cultural and material logics

In this section we explore the cultural and potentially underlying material logics supporting early marriage and female genital cutting in the five sites. In doing this, we would highlight that the two practices are rooted in long-standing patriarchal and gerontocratic values that subordinate both women and the young in many parts of Ethiopia (Berhane_Sellassie 1991; Pankhurst 1992) and are supported by clear cultural logics which embodies three key broad elements. First, families and kin groups have a strong vested interest in the reproductive capacity of women, articulated through the arrangement of their marriage at a young age by older generations. In other words, marriage is a family affair involving whole groups of kin (Reynolds 1990: 65) and a source of social heritage for those born into it (Richmond and Hall 1925); marrying girls at puberty previously served to ensure continuity in conditions of high maternal and infant mortality (Mathur *et al* 2003). Second, young women's marriageability depends on their moral and domestic competencies, which are believed to be positively influenced by early marriage and genital cutting. Third, in safeguarding their moral and

domestic standing and thus their social integration, these practices are considered protective of females.

That said, it would be misleading to imply clear consistency in these customs in Ethiopia, for our evidence shows that there is considerable diversity across sites and social groups and much dynamism and contestation in beliefs. So, for example, in the north, particularly in Amhara, early marriage of girls is a predominant feature of the cultural repertoire, whereas genital cutting is of minor importance, while in the south genital cutting is a necessary prelude to marriage and is much celebrated, though early marriage is less common. Also, whereas there is significant cultural convergence in Amhara and Tigray, the other sites, especially the urban ones, are characterised by considerable ethnic and religious diversity and pervasive external influences, which is reflected in great variability in ideas and practices.

In general, marrying females before or at puberty is favoured because it ensures that they are already spoken for when they reach sexual maturity and hence protects them from risks associated with premarital sex. Adult respondents everywhere expressed concerns about girls engaging in premarital sex, these ranging from detriment to reproductive health, unwanted pregnancy and single parenthood, to reputational damage and exclusion from family and clan. Caregivers in Oromia for example perceived early marriage as preventing promiscuity, the spread of sexually transmitted diseases, pregnancy outside marriage and abandonment by partners, all of which would render girls unmarriageable and threaten their exclusion from family and clan. However, the justification for early marriage was not simply prevention of social or health hazards as many respondents also imputed an economic motive in the choice of spouse and age of marriage. The type of marriage and whether it accrues dowry or bridewealth affects who the main beneficiaries are; the newly-weds, or the bride or groom's parents. In the case of one 16-year old girl from Tigray, marriage clearly guaranteed both her economic security and that of her mother.

I am happy with my marriage because it was arranged by my parents. It also relieved me of the heavy wage labour which I have been suffering from. Before, I had no plan of marrying early. But when I stopped school and was engaged in a very tiresome job, I wanted to marry and take rest. During the wedding ceremony our neighbours contributed 600 *birr* and my mother some more for the feasts. My in-laws spent much money and grain because they can afford it.... Mother gave my husband on the wedding day 1,300 *birr gezmi* [dowry]. The amount was secured from my older sister who works in a factory in a town.... My husband bought me all necessary clothes. After the marriage we are sharecropping the land of my mother. We help my mother in many ways.

Respondents in Amhara argued that early marriage extends a woman's reproducing years and hence expands the household labour capacity, as well as providing poor or elderly parents with a son-in-law's support. However, a local Kebele official expressed the opposite view, that early marriage has traditionally been more common among the rich than the poor because the rich would seek marriage alliances with other wealthy families so as to endow their offspring with land and cattle, this practice being well recorded in the ethnographic literature (Wodajo 1953, Hoben 1973). Nowadays, though, with the shortage of land and cattle in Amhara, this rationale for early marriage is weaker and parents have far less to bestow on newly-weds. In Oromia, though, bridewealth (*gebera*) can amount to substantial sums of money and several cattle, paid to the bride's family, and can be an important incentive for early marriage. Indeed, adults in this site considered early arranged marriages as tantamount to exchanging girls for money. However, it is worth noting that the need to accumulate bridewealth can also impede marriage, leading many young people to flout tradition by eloping, this being another cause of early marriage.

Female genital cutting is supported by logics that are broadly similar to those legitimating early marriage, in that it is thought to constrain errant sexual behaviour and ensure purity among young women, thus safeguarding their moral standing and marriageability. Purity is emphasised in all four sites (Oromia, Addis Ababa, Amhara and Hawassa) where the procedure is performed. However, this belief is particularly salient in Omotic societies in Southern Ethiopia, as a group of girls explained: 'Traditionally, uncircumcised girls are considered to be unclean which is locally called *lumbutam* - a very harassing kind of term and...If one girl insults another she can easily feel embarrassed...So, girls choose to be circumcised rather than being insulted. Circumcised girls also have a better opportunity of getting a husband...' Following intense peer pressure one girl in the Oromia site managed to persuade her mother to organise her circumcision:

I...organised the circumcision of my other daughter who is 14-years-old. It was done at her request. After she witnessed a girl insulting another who was not circumcised, my daughter came home and asked me to organize her circumcision. She told me she does not want to be insulted in the same way. I told her I cannot do that because I could not afford to provide her good food like meat to heal....But she pushed and told me...what she wanted was to get circumcised.

Unmarried women in the Hawassa site who have not been circumcised are described as 'koma qerech' ['she remains standing'], a metaphor for 'old maid' (Kane 1990:805). Some respondents

referred to a local proverb *kaltegerezech koma tikeralech*, which literally means "if she is not circumcised she will remain standing" and interpreted this as meaning an uncircumcised woman is like a man in that her clitoris will stand erect just like a penis.

Female genital cutting is thought by many to have an important influence on conduct. Muslim girls in Addis Ababa reasoned that girls who have undergone the procedure are 'cleaner', and 'calmer', whereas uncircumcised girls are prone to 'bad behaviour', such as being 'talkative' 'emotional, out of control, restless, or developing sexual need at an early age'. In Hawassa it was claimed that genital cutting prevents clumsiness in the performance of domestic chores, this notion being articulated in a cultural idiom, *Yaltegerezech lij qil tisebralech*, meaning 'a girl who is not circumcised will break the drinking gourd'. Wolayta respondents in Hawassa made a direct link between impurity and clumsiness: '...if she is not circumcised she will break objects. And if she prepares food who is going to eat it? They consider her as impure.' Not being able to cook food is a serious constraint for women given that this is a quintessentially female role.

Some proponents of female genital cutting even underscored perceived health benefits. For example, elders in Oromia maintained that; 'Circumcision is harmless. It does not bring any health problems for the circumcised girl.' and that; 'Losing blood by circumcision may even wash out some diseases. Thus it is advisable for girls who have certain diseases'. Similarly, a caregiver in Amhara recounted the case of an uncircumcised woman who was allegedly circumcised by doctors during childbirth - to ensure a safe delivery - showing a strong belief in genital cutting being a necessary and protective feature of childbirth.

There is no religious endorsement for female circumcision in Ethiopia and the procedure predates the major monotheistic religions. Nevertheless, some consider the practice to be preordained by their faith. For example, even though this does not have a basis in Islam, some of the Muslim respondents in the Addis Ababa site invoked Sharia doctrine as supporting the practice; one maintained that 'since it is *Haram* [sinful] to let the girls go uncircumcised, people still cut the genitals of the girls slightly'. Similarly, a theological rationale within Christianity was outlined by an elderly man in Oromia who recounted a myth in which circumcision is portrayed as Eve's punishment:

Satan lied to Eve saying that Adam had married another woman. She was angry and Satan offered her a herb [medicine] to give to Adam. She tasted the medicine and it went to her abdomen down to the part [the clitoris] that is circumcised now....Eve was cursed that her blood may be shed. For the lucky ones it becomes a foetus. Adam and

Eve were chased out of Eden that same day. It was because of that sin that girls get circumcised today.

This myth associates female circumcision with menstrual bleeding and with bloodletting in animal sacrifice, rooting it within symbolism surrounding blood and subservience of women (Pankhurst 1992).

Forces for change

The Ethiopian government vehemently opposes female genital cutting and early marriage, designating them as Harmful Traditional Practices and proscribing them in law². All of the professionals and government officials whose views we canvassed expressed unequivocal opposition to female genital cutting and early marriage. Indeed, several respondents described intervening to prevent infractions. One Kebele Women's Association Leader in Hawassa explained that she had managed to prevent a schoolgirl from being married off: 'When I asked her why she was forced to marry against her will, she told me that her mother was dead and her aunts had asked her to marry a rich man. They told her that he would relieve their poverty and hers. I was very angry. I told her that I would take her to the Kebele and to the legal desk if they persisted...she is not a means of poverty relief.'

The government has introduced a wide range of preventative measures, largely comprising advocacy campaigns around the adverse health and social consequences in schools, in the media and among local associations. Remedial measures include pressure to disclose infringements and penalties for violations, especially fines and imprisonment (Mekonnen and Aspen 2009). The recent deployment of female health extension workers with a mandate to focus on reproductive health has had a notable effect. Several non-governmental organisations have also been actively working for reform and respondents sometimes alluded to their influence. The push for abolition has been strongest in urban communities; the location of the Young Lives qualitative research sites in or close to urban areas is likely to have led to greater exposure to campaigns than in more isolated rural communities. There have also been important regional differences in foci, depending largely on the prevalence of the practice locally. Thus, the drive against female early marriage has been stronger in the north,

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² The 1995 Federal Constitution prohibits laws, customs and practices that oppress or cause bodily or mental harm to women. The 1997 Federal Cultural policy mentions the need to abolish harmful traditional practices. The Revised Family Proclamation of 2000 Article 7 prohibits marriage under the age of 18. The Criminal Code of 2005 prescribes penalties for a range of harmful traditional practices.

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particularly in Amhara region, and against genital cutting in the south, especially in Oromia. Advocacy against genital cutting has impacted attitudes in all five regions, though the pressure for change is particularly keenly felt in Hawassa and Oromia, while earlier work on gender by the Tigray People's Liberation Front had resulted in a significant reduction the practice in Tigray and the issue was not mentioned by our respondents in that site.

In terms of impact, various groups tend to emphasise different factors and concerns. One female *Iddir* (funeral association) leader attributed the decline in genital cutting in Hawassa to effective application of fines and education in schools, whereas caregivers emphasised the role of awareness-raising activities by a local non-governmental organisation and efforts by local government officials with women's associations, youth groups and school clubs. Girls in Oromia acknowledged the effect of school programmes, advocacy by woreda officials and educational films. Girls in Addis Ababa understood the prohibition of genital cutting as motivated by concerns about the risks associated with the actual procedure, birth complications and circumcised girls not being 'active' during sexual intercourse, whereas a woman in Amhara emphasised population concerns. The most vociferous opposition to female genital cutting was in Hawassa, where even boys drew attention to the many adverse effects on women's health.

Eradication efforts have clearly affected both attitudes towards and incidence of the two practices, although it is evident that other forces have also played a crucial role, especially in raising the age of marriage for girls. For example, a Kebele official pointed to land shortages and high living costs in Amhara having eliminated the economic advantage of large families and hence of marrying girls off young. Above all, though, the evidence underlines the key part played by urbanisation, the spread of education and employment opportunities for girls (Woldehanna et al, 2011) and especially an emergent focus on children's right to self-actualisation. Views about gendered and generational roles, responsibilities and relations are changing fast, growing prominence being given to children's – particularly girls' - individual interests as opposed to their familial duties. Concerns that schooling is threatened by early marriage were voiced by many, notably in Amhara, where caregivers expressed contentment that modern marriages are based on the choice and consent of the couple and claimed that past support for early marriage was due to lack of awareness of the importance of education. In Tigray, a causal link was made between the raised age of marriage for girls, improved education outcomes, better employment prospects and higher salaries.

Personal experience has also proved instrumental in promoting change, leading some women to oppose genital cutting and seek to prevent their daughters or grand-daughters from being subjected to a similar fate. Caregivers in Oromia provided graphic detail of the physical ordeal

of genital cutting: it is 'brutal and a lot of blood is poured, so the circumcised girl may stay at home for up to two months because it will take more days to recover from the pain of the wounds... The main problem is that they lose much blood during the circumcision so that they need lots of days to rest and a balanced diet to recover.' One woman in Hawassa endured severe complications during childbirth because of a radical circumcision and so made sure that her own daughters were not circumcised. A woman from Addis Ababa admitted that she used to defend female circumcision as an important local tradition, but changed her mind after witnessing how much a young circumcised girl suffered when giving birth.

Early arranged marriage is also opposed by many women who have had difficult experiences themselves. Some of these accounts reveal a broad shift in attitudes towards marriage, disquiet being expressed about the power and age differences between men and women in traditional unions, about the asserted economic value of having a large number of offspring and about the wisdom and justice of women being married off forcibly at an early age. A woman in Oromia complained about being made to marry when very young to a drunkard who squandered most of the bridewealth. A divorced woman in Tigray who was married at 14 and had her first baby at 17 said: 'I was too young at the time to tolerate all the troubles. I often fell down, and once missed the direction of my home. I was too busy and I could not withstand all challenges and responsibilities. All this embarrassed me and forced me to divorce...At that time most females were too young for marriage and it was too difficult to withstand the challenges of life like falling from mountains, fetching water etc,. That is why most prefer to divorce....'. Comparing her granddaughter's life with her own at the same age, one woman in Tigray emphasized how empowered young women are today. '....I got married at her age of 14. I was young at that time. It was common to take the bride without thinking wisely; we didn't even think what will come in the future. We simply agreed to go home with the husband and we began to suffer from falling and punishments.' She contrasted women's past suffering with the circumstances of the current generation: '...my granddaughter is 14 years old now and if I tell her that she is going to marry, she will reply 'marry yourself!.' During our time, we were unable to decide on our life but today children have the right to decide....Children today are very much wise... Her life will definitely be good because she will be educated and may even marry someone who is educated.'

Narratives favouring reform of traditional practice point to changing ideas about what is a threat and what a benefit to girls and recognition that young people today are in certain respects more competent than the young in the past; hence the idea that allowing young people to play a part in deciding their own fate may, in itself, be protective.

Resistance to reform

Notwithstanding the growing opposition to female circumcision and early marriage and clear signs of change in practice in many quarters, resistance to eradication efforts continues; indeed, resistance has led to open disagreement between generations in some families. Thus, a Muslim girl in Addis Ababa explained that her mother had arranged for her to be circumcised at an early age, but when the circumciser arrived she managed to escape to a neighbour's house. Another Muslim girl said she was circumcised against her will at the age of five because there were too many people in her house intent on preventing her from escaping. One girl in Oromia was in grade four when her parents arranged her wedding. The girl begged her teachers to save her and they tried to change her father's mind. Her grandmother was also against the marriage, and offered her refuge in her house, where she remained some time. But, on the pretext that her mother was sick, her father convinced the teachers that she should return home and eventually forced her to marry. In a striking example of inter-generational dispute, girls in Tigray explained that they had reported their parents to officials when they tried to marry them off, some girls being beaten by their parents for this. These examples emphasize the extraordinary social power of customary values.

Many adult respondents highlighted concerns about recent developments around marriage. In Oromia it was argued that government promotion of self-determination among girls in matters of marriage violates the traditional authority of parents. Disquiet centred on young people not having the maturity to act wisely without adult guidance as well as fears about loss of protection for girls. In the Addis Ababa site, where female sex work is prevalent, the raised age of marriage was seen to pose many risks for girls, since they 'are becoming 'ready' for sex at a much earlier age'. In Addis Ababa, Tigray and Oromia, marriage based on the couple's choice (often without parental consent) was said to increase the likelihood of pre-marital sex, unwanted pregnancies and unsafe abortions, straining inter-generational relations and leaving couples without the protection and resources needed to secure their independence. A fear was also expressed that these trends might result in circumvention of bridewealth payments and an associated increase in abductions and abandonment of women, as well as divorce.

Parents in Tigray reasoned that pregnancy outside wedlock is more likely with a raised age threshold for marriage, this leading to forced unions, with the girl's parents threatening legal redress if the boy refuses. They argued that it is safer for married girls to continue their education because this prevents abduction. Additionally, using the term *ketsige'a*, they stressed the importance of ensuring that their daughters attain an independent life as young as possible. They also expressed eagerness to have grandchildren while they themselves are still fit and

well. Further, they observed that families gain status by bringing their daughters up to be chaste and obedient; a girl must be a virgin if she is to have a prestigious marriage and this is far more likely if she marries young.

Adults in Oromia are particularly vexed about the decline in arranged marriages and rise in abductions of girls in that region; having once been common, forced abductions are being replaced by 'voluntary abductions', or elopements. Respondents approved of the decline in forced abductions since these 'totally violated all the marriage rights' of girls and occasionally involved assault, but were very uneasy about elopements. They reasoned that couples who elope often lack a home or a secure income and therefore depend on their families. Yet these unions are often organised in secret by the couple without consulting their parents, with detrimental consequences for the girl's and her family's honour and the risk that her family might instigate legal action against the groom and his kin. In Oromia, teenage girls were considered too young to make such decisions without parental guidance and support, many girls having become pregnant outside wedlock or been cheated into eloping and many such unions having rapidly dissolved. Even though the groom's family is expected to compensate the bride's family for violating clan norms, elopement generally results in a lower bridewealth. Finally, elopement poses the possibility of rejection by and loss of contact with the girl's family, as one woman indicated: 'my daughter got married...She agreed with her husband and married him without our consent... She was married in a nearby town. She has not come to our home and we have not gone to hers since then. The reason is that she got married...against our interest and our tradition. We are not reconciled yet. 'The girl also confirmed this saying '... [my husband] abducted me with his friend when I was going to market....my husband paid 2200 birr to my parents as a reconciliatory payment. [However] ... The marriage is also not yet formalized because my husband has to pay the bridewealth which is five cattle.'

Above all, adults in Oromia prefer arranged marriages because they ensure mutual respect among all concerned parties. Some did concede, though, that there is a need to adjust customary practice to take account of the couple's views and felt it was wrong to force a girl to marry someone she does not know or like, or who is a lot older than her. They also argued that girls should not marry before the age of 18, should have the parents' permission and follow traditional ceremonial procedures. Interestingly, girls also disagreed with elopement, one group arguing that it is harmful, 'violates the cultural norms of the community', and should be prohibited. Their reasoning was the same as that of adults and included the adverse impacts on a girl's education, the likelihood of divorce, underage sex and parenthood, and poverty. They stressed the importance in arranged marriages of the ongoing support given to the couple by

elders who take the girl's education and future into full consideration, pointing out that the parents of the groom may even facilitate the girl's education after marriage.

As with early marriage, some respondents expressed their support for the continuance of female genital cutting; differences of opinion about this practice having similarly caused conflict within families. Significantly, in the Oromia and Addis Ababa sites it is girls — not adults - who most oppose the ban, largely because of peer pressure. Seemingly, while younger girls often do refuse to be circumcised, refusals are far less common among teenagers who are more likely to succumb to bullying from circumcised girls.

Girls in Oromia highlighted how government intervention had not only exacerbated intergenerational tension but actually lowered the age of genital cutting rather than eliminating the practice. Fear of punishment has made parents reluctant to arrange circumcision, which in that region used to be performed when girls were aged about 15, became engaged and were ready to marry. Government intercession has increased bullying of uncircumcised girls by those who have been circumcised and this has caused girls to arrange their own circumcisions sometimes without parental consent, often well before they reached the traditional age. Hence, by the third round of fieldwork in 2011, all of the girls in the sub-sample in Oromia had been circumcised. Some girls even resort to organising their own circumcisions clandestinely, whether in defiance of their parents or to protect them from prosecution. A school teacher informed us that 35 girls in the site had been circumcised recently and when reported to the police, they claimed that their parents had no knowledge of the incident.

Seemingly, resistance to change is strong even in areas where serious penalties for infractions are applied. Girls in Addis Ababa conceded that Muslims in that site are still conducting clandestine female circumcisions despite concerted official efforts. In Oromia genital cutting is performed at night to avoid punishment. In Hawassa, families use their sons' circumcision ceremonies as a decoy for circumcising daughters, as expressed in the saying: *Beklo lemakolashet, Ahiyan ankebalelut* – "to castrate the mule, they pushed the donkey to the ground".

Resistance to eradication remains strong in many areas. For adults, resistance often centres on the belief that they know best what risks their daughters confront and that tried and tested customary practice is the most effective means of protection. For girls, it often has more to do with preventing social stigma and rebuke by peers, most likely reflecting their sense of what it means to be an adult woman in their community.

Conclusion

This article has explored views surrounding female genital cutting and early marriage in five regions of Ethiopia. It argues that interventions to eliminate these practices, together with broader societal changes such as increased education and work opportunities for girls, have led to a reduced incidence overall. However, it also shows that female genital cutting and early marriage persist to varying degrees, are believed in by many and in some areas are undertaken with the active consent of girls. Moreover, the values supporting the practices are not always inconsistent with the wellbeing of young women; indeed they have traditionally ensured girls' moral standing and social integration and thereby their protection and effective transition to adulthood.

In the context of societal and policy transformation, decisions about children's protection involve considerable uncertainty and must take account of many (potentially conflicting) factors. Girls make decisions based on their assessments of their chances and parents do what they think best for their children. All must consider the trade-off between early marriage or circumcision and other risks, including risks to the family as a whole. Some even find themselves acting against their own better judgment, simply because they cannot protect girls from the stigma associated with avoidance of practices designated as harmful. The efficacy of female early marriage and genital cutting is manifested in continued resistance to reform in some areas, evident even in communities that have experienced intensive abolitionist endeavours. This resistance has caused disagreement within families, contestation of state policy and clandestine actions, themselves a potential risk to the girls involved.

In the contested and competing repertoires, agents of the state and community leaders unanimously oppose both practices, as do some caregivers, and some girls and boys. This seemingly reveals an emergent stance that concurs with the individuated, child-focused framework of the UN Convention on the Rights of the Child. In particular, there is a growing sense that girls should be informed about the hazards of traditional practices, involved in decisions affecting them and have the possibility of staying on at school and getting a good job rather than marrying young. Paradoxically, though, this outlook has in turn triggered apprehension about 'new' childhood risks, such as pre-marital sex, pregnancy outside wedlock and reproductive health problems associated with raising the minimum age for marriage to 18. In some contexts the realisation of children's right to decide for themselves has led to elopements under the guise of abduction and genital cutting carried out against the wishes of adults, indicating a transformation in, rather than disappearance of, the practices.

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Substantial resources have been expended in Ethiopia in informing people about the 'harmfulness' of female genital cutting and early marriage and a significant proportion of our respondents largely agree with this position. However, reform falls short of expectations and prohibition has generated a number of new problems for both girls and families. This suggests that official policy has paid insufficient regard to the socio-cultural and economic context. In particular, the appropriateness and effectiveness of measures that focus on specific practices affecting girls in isolation from wider social processes is questionable and far greater attention is needed to the rationale underlying these practices. In reviewing obstacles to effective implementation it is important to consider what families and girls stand to lose through reform, who is designating the harm and the best form of protection, since it is not always evident that the girls and women most affected are as eager for change as outsiders, or that they agree with policy makers about which practices require most urgent elimination (Gruenbaum 2001). In all of this, policy actors need to be wary of the oppositions 'modern' and 'backward', 'rational' and 'ignorant', which permeate the discourse on harmful traditional practices, for such judgments belie the complex moral and practical dilemmas involved in protecting children. The main message is that interventions to promote changes in practice that do not consider the underlying logics and all the potential effects for those involved are unlikely to achieve their aims and may bring about resistance and unintended adverse consequences.

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Annex 1: Tables

Table 1: Median age of marriage of women and men by Region³

Region	Women 20-24	Women 20-49	Women 25-49	Men 25-59
Amhara	15.2	14.4	14.2	22.3
Tigray	16.9	15.7	16.6	24.7
Oromia	18.7	17.1	16.7	24.4
Southern	19.5	17.6	17.2	23.2
Addis Ababa	n.a	na	21.9	n.a
All women	18.1	16.5	16.1	-
All men	23.8	-	-	23.8
Urban	n.a	19.4	18.2	Na
Rural	17.3	16.1	15.9	23.4

Source: Demographic and Health Survey; 2005:83.

Table 2: Prevalence of FEM and FGC by Ethnic Group 1997 (NCTPE survey)

Ethnic group	FEM	FGC
Amhara	67.3	88.4
Tigraway	75.4	80.1
Oromo	48.1	97.7
Gurage (Sebat Bet)	92.9	52.2
Gurage (Sodo)	100	28.0
Wolayta	98.7	37.1
Kambata	99.0	33.0
National level	54.6	72.7

Source: EGLDAM 2008: 389-390 table 1.5a

³Only Regions in which Young Lives has sites have been included in the table.

Table 3: Percentage of women married by age of 15 and median by date

Current age	% married by 15		% married by 25		Median age at first marriage	
DHS date	2000	2005	2000	2005	2000	2005
15-19	14.4	12.7	n.a	n.a	n.a	n.a
20-24	19.1	23.9	n.a	n.a	18.1	18.1
24-29	24.5	31.9	88.3	89.1	17.2	16.6
30-34	30.6	31.9	94.9	92.6	15.8	16.2
35-39	35.1	33.3	96.0	93.3	15.8	16.0
40-44	33.4	36.7	98.6	94.5	15.7	15.8
45-49	34.2	38.0	98.8	94.8	15.7	15.8
20-49	27.8	31.4	n.a	n.a	16.4	16.5
25-49	30.6	33.7	94.3	92.2	16.0	16.1

Table 4: Proportion of women and daughters married by abduction.

Region	Women married by abduction	At least one daughter married by
		abduction
Oromia	10.8	2.0
SNNP	12.9	2.3
Amhara	2.4	0.3
Addis Ababa	4.3	1.9
Tigray	1.4	0.2
Overal total	7.8	1.4
Urban	4.7	1.5
Rural	8.5	1.4
No education	9.0	1.7
Primary	7.1	0.2
Secondary +	2.5	0.5

Table 5: Percentage of women circumcised

Region	Woman circumcised (15-49)	Women with at least one
		daughter circumcised
Somali	97.3	28.1
Affar	91.6	85.1
Oromia	87.2	34.9
Harari	85.1	27.1
SNNP	71.0	23.5
Amhara	68.5	56.8
Benishangul-Gumuz	67.6	49.3
Addis Ababa	65.7	25.1
Tigray	29.3	30.2
Gambella	27.1	11.0
Urban	68.5	37.7
Rural	75.5	30.0
No education	77.3	38.7
Primary	70.8	41.3
Secondary +	64.0	24.7

Source: EDHS 2005

Table 6: Proportion of types of FGM by Region

Region	No FGM	Cliterodectomy	Excision	Infibulation
Addis Ababa	2	98	0	0
Afar	0	34	8	58
Amhara Region	13	42	45	0
Amhara people	10	45	45	0
BeniShangul-Gumuz	28	69	0	3
Gambella	100	0	0	0
Harari	0	90	5	5
Oromia*	1	86	12	1
SNNP*	65	19	16	0
Somali	0	4	6	90
Tigray	50	24	26	0
Tigraway people	40	30	30	0

^{*}no breakdown provided for Oromo within Oromia and for groups within SNNP

Source: EGLDAM 2008: 408 table 4.4 based on estimates by focus group discussants in 1997.

Table 7: Prevalence of FGM by Religion 1997 and 2007.

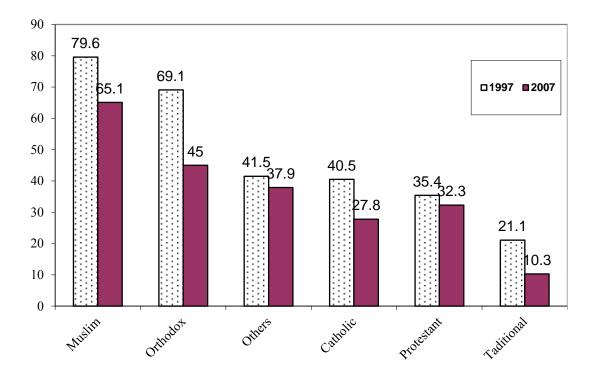


Table 8: Median age at first marriage of women of different age categories by date and region

Region	Womer	n 20-24	Women 20-49		Women 25-49		Men 25-59	
DHS date	2000	2005	2000	2005	2000	2005	2000	2005
Amhara	15.0	15.2	14.5	14.4	14.3	14.2	20.8	22.3
Tigray	16.4	16.9	15.7	15.7	15.6	16.6	n.a	24.7
Oromia	18.7	18.7	16.9	17.1	16.4	16.7	23.6	24.4
Southern	19.9	19.5	18.2	17.6	17.7	17.2	24.5	23.2
Addis Ababa	n.a.	n.a	n.a	na	19.3	21.9	n.a	n.a
All women	18.1	18.1	16.4	16.5	16.0	16.1	n.a	-
All men	n.a	23.8	n.a	-	n.a	-	23.3	23.8
Urban	n.a	n.a	17.8	19.4	16.9	18.2	n.a	Na
Rural	17.6	17.3	16.2	16.1	15.9	15.9	23.0	23.4
No education	17.4	16.5	16.4	15.9	15.8	15.8	22.7	23.5
Primary	18.9	20.0	18.2	17.4	17.3	16.5	23.3	23.3
Secondary +	n.a	6.4?	21.9	n.a	21.2	21.2	n.a	n.a

Table 9: Percent decrease in prevalence of FGM 1997 to 2007

Region	Baseline 1997	Follow up 2007	% decrease	1997 Rank	2007 rank
Afar	94.5	87.4	7.5	1	1
Harari	81.2	67.2	17.2	2	3
Amhara Region	81.1	62.9	22.4	3	4
Oromia	79.8	58.5	26.7	4	5
Addis Ababa	70.2	52.2	25.6	5	5
Somali	69.7	70.7	-1.4	6	2
BeniShangulGumuz	52.9	43.3	18.7	7	7
Tigray	48.1	21.2	53.4	8	9
SNNP	46.3	30.8	33.5	9	8
Gambella	0	0	-	10	10
All	60.6	45.8	24.4		

Source: EGLDAM 2008: 409 table 4.5

Table 10: Percentage of women and daughters circumcised

Region	Woman circumcised		% point	At least one	daughter	% point	Rank
	(15-4	19)	difference	circumcised		difference	daughters
Date	2000	2005		2000	2005		
Somali	99.7	97.3	2.4	57.7	28.1	29.6	6
Affar	98.6	91.6	7	96.6	85.1	11.5	1
Oromia	89.8	87.2	2.6	43.2	34.9	8.3	4
Harari	94.3	85.1	9.2	43.3	27.1	16.2	7
SNNP	73.5	71.0	2.5	37.0	23.5	13.5	9
Amhara	79.7	68.5	11.2	78.5	56.8	21.7	2
Benishangul-Gumuz	73.5	67.6	5.9	63.8	49.3	14.5	3
Addis Ababa	79.8	65.7	14.1	39.9	25.1	14.8	8
Tigray	35.7	29.3	6.4	39.0	30.2	8.8	5
Gambella	42.9	27.1	15.8	43.4	11.0	32.4	10
Overal total	79.9	74.3	5.6	51.9	37.7	14.2	
Urban	79.8	68.5	11.3	43.8	30.0	13.8	
Rural	79.9	<i>75.5</i>	4.4	53.2	38.7	14.5	
No education	80.4	77.3	3.1	55.8	41.3	14.5	
Primary	78.4	70.8	7.6	35.7	24.7	11	
Secondary +	78.2	64.0	14.2	25.9	18.7	7.2	

Source: EDHS 2005:253-4.