



Women's Empowerment in Ethiopia

New Solutions to Ancient Problems





Pathfinder International

Pathfinder International believes that reproductive health is a basic human right. When parents can choose the timing of pregnancies and the size of their families, women’s lives are improved and children grow up healthier.

For 50 years Pathfinder has promoted reproductive health and family planning services around the world. Projects promote maternal and child health, including providing care to women suffering from the complications of unsafe abortions. Efforts address the needs of adolescents and youth, providing them with the knowledge and tools necessary to make responsible reproductive health decisions. Others work to prevent HIV/AIDS and advocate for sound reproductive health policies in the US and abroad.

Pathfinder International in Ethiopia

Since 1993, Pathfinder has pioneered in introducing reproductive health and family planning to some of the poorest communities of Ethiopia. Our extensive network of nearly 50 nongovernmental organizations has trained and mobilized close to 10,000 Community-Based Reproductive Health Agents, who bring information and services into people’s homes and introduce them to facility-based care. Through improvements to health care facilities and introduction of equipment and contraceptives, Pathfinder programs have reached more than 40 percent of the population of the country, including specific programs targeting adolescents and people vulnerable to HIV/AIDS. In program areas, Pathfinder has significantly influenced the increasing use of contraception.

Cover: Zarha Mohamed was married at the age of 14. Fortunately, her parents accepted her back home after she left her marriage, because she wanted to go to school. Shortly after, her father died. Now at 21, Zarha has a scholarship from Pathfinder that enables her to continue going to school. She dreams of becoming the Minister of Agriculture for Ethiopia someday.

cover photo: Amel Belay, Pathfinder International/Ethiopia
photo above: Jennifer Wilder, Pathfinder International

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Executive Summary

Through 50 years of bringing quality reproductive health care and family planning services to women in developing countries, Pathfinder has continually been challenged to incorporate activities that address harmful traditional practices and social and economic structures that limit women's access to health care and well-being.

In Ethiopia, women traditionally enjoy little independent decision making on most individual and family issues, including the option to choose whether to give birth in a health facility or seek the assistance of a trained provider. Harmful traditional practices, including female genital cutting, early marriage and childbearing, gender-based violence, forced marriage, wife inheritance, and a high value for large families, all impose huge negative impacts on women's Reproductive Health (RH).

Today, Ethiopia has the second largest population in sub-Saharan Africa, and the average woman bears 5.4 children, placing an insupportable burden on families, communities, and a country facing chronic food shortages and environmental degradation. High maternal and infant mortality rates are inevitable results.

Since 2003, the David and Lucile Packard Foundation has leveraged its support to ongoing RH and Family Planning (FP) Pathfinder projects funded by USAID. Two such projects have focused specifically on the empowerment of women and girls in Ethiopia, improving the social, religious, and economic climate for females to be able to shake off damaging Harmful Traditional Practices (HTPs) and begin assuming responsibility for and control of their reproductive lives. Focusing in the regions of Tigray, Amhara, Oromia, and SNNRP, where we have worked for many years, Pathfinder has challenged traditions through trainings, workshops, public meetings, dramas, and long hours of collaboration with national, regional, and community leaders, as well as financial contributions in the form of scholarships to keep girls in school. The beliefs and behaviors of community and religious leaders, husbands and wives, adolescent girls and boys have been examined and challenged in a spirit of understanding and respect for people's traditions, as well as a comparable respect for the power of knowledge to bring about changes in ideas and behavior.

Pathfinder has trained a broad network of nearly 10,000 Community-Based Reproductive Health Agents (CBRHAs) in more than 6,000 kebeles (villages) to provide women with family planning counseling and methods (or referrals) and maternal and child health care. Women and men learn of the true harm that comes from female genital cutting, early child bearing, and many other HTPs. Hundreds of religious leaders and former circumcisers have become ardent advocates for reproductive health care and family planning. The Women Lawyers Association and legal advocates, with help from Pathfinder, were able to push through major changes in the law affirming 18 as the legal age of marriage; and explicitly outlawing female circumcision, rape, forced marriage, and other damaging practices. CBRHAs talk with parents, convincing them to keep their girls in school, delay girls' marriage until they are educated, and stop the custom of circumcision. Pathfinder scholarships keep girls in school, while a network of successful Ethiopian women visit rural schools as mentors and become inspiring role models of another possible way of life. Thousands of women have received microcredit loans and training in small-scale business management, paving the way for their economic contributions to family and community that will transform their status forever.

The impact of the Women and Girls Empowering Projects has been staggering. Pathfinder works closely with partners, key leaders, and medical providers, so there are many contributors to the remarkable progress that has taken place in recent years, including a significant drop in the numbers of young women being circumcised, as well as drops in forced marriages. A few numbers help to clarify the scope of Pathfinder's role in this impact:

The Impact of the Women and Girls Empowering Projects

Activity	Number
CBRHAs in the 4 regions	10,000
Woreda Advisory Committees created to support RH/FP	200
New users of contraception served by CBRHAs	3.64 million
Children referred by CBRHAs for emergency health care (2002-2007)	6.52 million
Community/religious leaders and others trained in RH/FP, gender advocacy, and HTPs	7.6 million
Judges, police officers, and prosecutors trained in implementation of new laws	1,200
NGO and other local staff trained in gender equality concepts	12,700
Women trained in small business management and given microcredit loans	2,400
Girls helped to evade early marriage (in two provinces in 2004 only)	12,950
Girls received scholarships to stay in school	122
Girls' clubs formed	156
Girls trained as peer educators	1,500
Community members sensitized on gender issues and HTPs	7.46 million
Adolescents receiving RH and adolescent health messages (in and out of school)	25.3 million
Women mentors and role models	48
Traditional Birth Attendants trained on HTPs and RH	350
Traditional circumcisers trained to promote RH	650
Fistula cases referred for repair	500

The impact of these many activities is cumulative, with a heightened level of awareness of the importance of improving women's status and well-being throughout society. By integrating women's reproductive health needs with economic, educational, social, and legal concerns, people are adopting gender sensitivity across society. By sensitizing all levels of society, from national, to regional, to local leaders and throughout local communities, in conjunction with the different interventions, the transformation of beliefs and behavior takes on a momentum of its own.



Above: Girls and young women walk great distances to fetch water and firewood. If alone or in small groups, they are at risk of being raped or taken captive for forced marriage. In 2005, eight percent of women reported that they had been married by abduction.

photo: Amel Belay
Pathfinder International/Ethiopia

Introduction

Located in the Horn of Africa, Ethiopia is, proudly, the only country in Africa to have escaped Western colonization. Yet today, Ethiopia remains one of the world's poorest countries. Of a population exceeding 77 million people,¹ 78 percent live on less than \$2 per day.² Ethiopia's struggle with poverty and slow development is inextricably tied to its history of conflict, recurrent drought, and environmental degradation. This situation is further complicated by deep traditional social and economic patterns that place powerful constraints on the rights of women and their opportunities to direct their own lives or participate in and contribute to community and national development.

With a largely Muslim and Christian population, Ethiopians of different religions have traditionally lived in relative harmony, sharing a predominantly rural, agrarian (85 percent³) culture, bound to the land and conservative values. The Ethiopian government, in partnership with many nongovernmental organizations, including Pathfinder, has targeted the needs of women in its efforts to meet the United Nations' Millennium Development Goals.

Pathfinder's core mission is to bring quality Reproductive Health and Family Planning (RH/FP) services to people in the poorest countries and most difficult to reach communities. In Ethiopia, as in most developing countries, this mission is made more complex by constraints on women's access to education and their rights to control major decisions in their lives, including the number and spacing of their children. Although women's rights are, today, protected by the Ethiopian Constitution, male dominance remains the order of the day in both public and private spheres.

1 UNFPA, State of the World Population, 2005.

2 Population Reference Bureau, (PRB) 2006 World Population Data Sheet (<http://www.prb.org/datafind/>).

3 PRB, 2006.

Women in Ethiopia

From her birth, an Ethiopian female in most families is of lower status and commands little respect relative to her brothers and male counterparts. As soon as she is able, she starts caring for younger siblings, helps in food preparation, and spends long hours hauling water and fetching firewood. As she grows older, she is valued for the role she will play in establishing kinship bonds through marriage to another family, thereby strengthening the community status of her family. She is taught to be subservient, as a disobedient daughter is an embarrassment to her family.

Low status characterizes virtually every aspect of girls' and women's lives. Given the heavy workload imposed on girls at an early age, early marriage without choice, and a subservient role to both husband and mother-in-law, girls and women are left with few opportunities to make and act on their own decisions.

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Harmful Traditional Practices

The National Committee for Traditional Practices in Ethiopia identified 120 Harmful Traditional Practices (HTPs), including Female Genital Cutting (FGC), early and forced marriage, rape, and wife inheritance. Pathfinder programming addresses many of these barriers to women's progress in an effort to grant them physical and social access to quality reproductive healthcare services.

Early Marriage

More than 85 percent of Ethiopians live in rural areas. In the Amhara Region, 48 percent⁴ of women are married before the age of 15—the highest early marriage rate in the country. The average Ethiopian woman bears 5.4 children during her lifetime;⁵ those who marry very young are likely to bear more children.

Traditional practices endure in conservative societies because they go unquestioned. In rural Ethiopia, individual status is closely linked to family strength and success. A daughter brings pride and status to her parents by being successfully married and establishing strategic kinship links with another family. Great shame is brought onto parents whose daughter never marries—she is their failure. A pregnancy out of wedlock, whether consensual or by rape, is deeply shameful to the entire family. For many families, marrying a daughter at a young age is understood as the best way to protect her from sexual advances and an unwanted pregnancy.

⁴ Pathfinder International. *Causes and Consequences of Early Marriage in the Amhara Region of Ethiopia*, 2006, p. 20.

⁵ Population Reference Bureau, available at www.prb.org/DataFind/prjprbdata/wcprbdata7.asp?DW=DR&SL=&SA=1.



Above: This woman suffered from the consequences of fistula. A Pathfinder CBRH agent helped her receive surgery to correct the problem.

photo: Margot Kane/Pathfinder International

Many development professionals consider early marriage to be the most significant harmful traditional practice for women in Ethiopia, as it harms women's physical and psychological well-being and curtails their education and future income-earning potential. Not only do women married young bear more children over time, but an adolescent mother is less prepared to care for her children and to manage a household.

The Pathfinder study in Amhara⁶ on the causes and consequences of early marriage found that more than half of young marriages in that state were arranged with a man at least a decade older than the girl, usually someone she had never met. This age difference represents a huge power imbalance and invites abuse, itself already a substantial risk because girls are raised subservient to men. Many young wives are subject to sexual violence and exposure to sexually-transmitted infections. Pregnancy is an obvious risk and dangerous for young wives: when not fully mature, a young girl's body may be unable to support a pregnancy or a successful delivery. At least one percent⁷ of Ethiopian women have experienced obstetric fistula—a perforation of the lining of the womb connecting to the bladder or rectum during extended labor that, if untreated, causes perpetual leakage of urine and/or feces. Given the ensuing dreadful odor, a woman with obstetric fistula is usually thrown out of her home by her husband and typically again rejected by her parents, forcing her to live on her own.

Once married, a girl rarely remains in school. Among girls under the age of 24 in the Pathfinder study,⁸ more than 78 percent of those never married were attending school, while only 8.9 percent of currently married girls were in school.

That same study revealed that 13 percent of marriages end in divorce or separation. Many divorced girls return to their families but, if turned away, they often migrate to a city to seek employment as housemaids. Too often, they have to resort to commercial or transactional sex work. With no income-generating skills and little knowledge of how to make positive reproductive health decisions, they are at high risk of contracting HIV/AIDS and other sexually-transmitted infections.

Female Genital Cutting

Women in Ethiopia are subject to a variety of HTPs that qualify as serious abuse. More than 74 percent⁹ of Ethiopian women of all ages have been subjected to female genital cutting (FGC or circumcision), a practice centuries old. Health risks associated with FGC are considerable. According to the United Nations, circumcised women are up to 70 percent more vulnerable to potentially fatal bleeding after delivery. According to a World Health Organization study published

6 Pathfinder Amhara Study, 2006.

7 EDHS, 2005.

8 Pathfinder Amhara Study, 2006, p.44.

9 EDHS, 2005.

in *The Lancet*, women who have undergone the procedure are also more likely to need Caesareans and the infant mortality rate among their babies is as much as 50 percent higher.¹⁰ Yet, even though circumcised women face a lifetime of pain and suffering, the practice is difficult to eradicate.

According to the 2005 DH Survey, the practice has declined today in Ethiopia, as only 62.1 percent of women age 15-19 had been cut, compared to 73 percent of those aged 20-24. The vast majority of ethnic groups perform this procedure when the girl is an infant. Fewer than a third of the women interviewed believed that the practice should be continued.

Though its true origins are not known, the reasons given today for circumcision generally remain unexamined by most Ethiopians. Usually women, more than men, fear their daughters will otherwise be unworthy of marriage and without respect in the community. An uncircumcised woman is thought to be promiscuous and a threat to the family. Many believe that it is a religious obligation, while others believe that it protects a woman's virginity and is medically beneficial. Traditionally, women perform the procedure with crude, unsterilized knives or razors, putting girls at risk of infection or contracting HIV.

Violence and Abuse

Nearly 8 percent¹¹ of currently married women were abducted and forced into marriage—a custom, prohibited by law but not enforced until recently, that vividly illustrates the enormity of male dominance in Ethiopian tradition. Rape is common, and too often its threat drives parents to keep their girls home, out of harm's way, but also out of school. Domestic violence is so accepted that 81 percent of women interviewed believed there are justifiable reasons for a husband to beat his wife.¹² The practice of marrying one's sister-in-law (without her consent) upon the death of her husband is widespread and particularly pervasive in certain areas in the south of the country. Today, this practice is feeding the HIV/AIDS epidemic, when widows lose their husbands to the virus and carry it to the next marriage.

Empowering Girls and Women: Effective Social Change

Between April 2003 and June 2006, Pathfinder implemented the *Empowerment of Ethiopian Women* project with support from the David and Lucile Packard Foundation. This funding has also leveraged and advanced extensive Pathfinder programming supported by USAID. Focused on removing obstacles to women's basic rights—both social and economic—the project has promoted access to RH/FP services and freedom from sexual exploitation, violence, forced marriage, and other HTPs. The project was carried out in the Amhara and Oromia Regions as well as the capital city of Addis Ababa. In 2005, the Packard Foundation awarded Pathfinder a second related grant for the *Women and Girls Empowerment Project*, designed to continue the effort, but expanding the focus to adolescent girls in recognition of a need for early intervention. This second project works to increase awareness and education among girls and women about RH/FP and personal rights, as well as to emphasize education, life skills, and leadership development. It also provides educational support to poor girls and promotes female education through role models and mentoring.



Above: "Women's role has only been to bear and rear children, but we are very poor, and our area cannot develop without the involvement of women. Yes, family planning changes our lives, even though it started only recently. Look out into the community—many women have 12 or 13 children!

"We are working for the next generation and their daughters and sisters. We are not just fighting poverty—we are also fighting women's diseases. We are healthier now and equal to men."

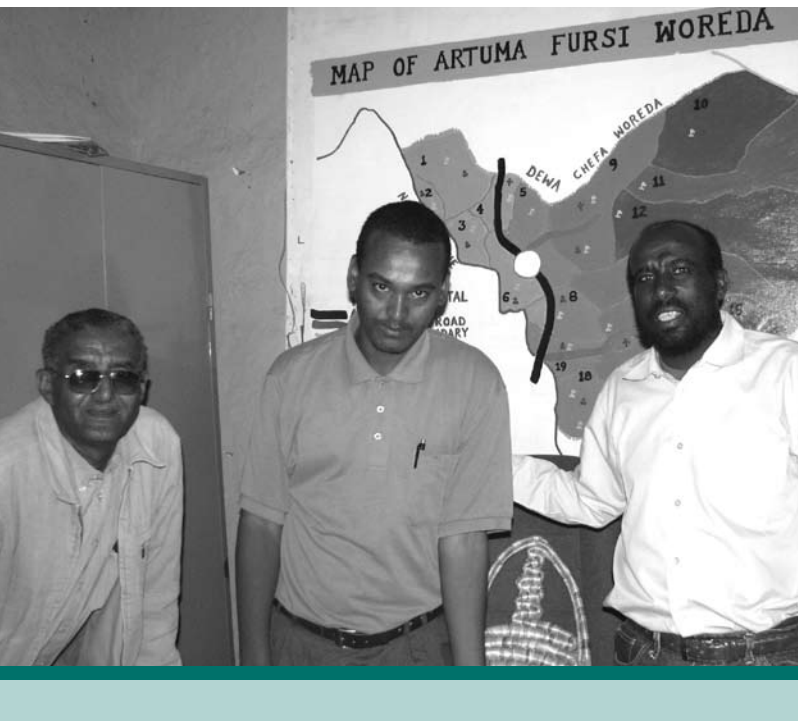
(CBRHA trainee in Oromia Region)

photo: Jennifer Wilder/Pathfinder International

¹⁰ WHO Study Group on Female Genital Mutilation and Obstetric Outcome. "Female genital mutilation and obstetric outcome: WHO collaborative prospective study in six African Countries." *The Lancet* (3), June 2006, 1835-1841.

¹¹ EDHS, 2005.

¹² EDHS, 2005.



Above: Sayid Umar Musxafaa (center) is Chairman of the Artuma Fursi Woreda WAC. He reports, "At first, WAC members were not aware of problems related to female circumcision. Now, many are strong advocates against it. They have been able to virtually stop the practice in the city, though it is still a struggle in rural areas. But, they have been able to give alternative training to all of the women who used to do the cutting, so it has become difficult to find someone who will do it." Ato Musxafaa is meeting here with Pathfinder field officers Abadi Dagneu and Ambaye Areru.

photo: Jennifer Wilder/Pathfinder International

Focusing on Reproductive Health

Only 10 percent of Ethiopian births are attended by skilled birth attendants.¹³ Maternal mortality is 673/100,000,¹⁴ and infant mortality is 77/1,000 live births.¹⁵ Most of these deaths are preventable with knowledge that precipitates changes in personal and health-seeking behavior, as well as access to medical services.

To bring quality RH and FP services to all women in the country, Pathfinder has addressed the social and cultural barriers that prevent men and women from understanding the medical, psychological, and social consequences of strongly-held beliefs and practices. In a culture where a child's illness or mother's death in childbirth is most often attributed to God, fate, or the "evil eye," Pathfinder fosters a popular understanding that everyone can protect their own lives and those of their children with quality health care.

Over the course of ten years, Pathfinder has built and trained a corps of about 10,000 Community-Based Reproductive Health Agents (CBRHAs) in the four most populous regions of Tigray, Amhara, Oromia, and SNNRP. Every CBRHA has

been trained in basic reproductive health issues, contraception methods, and the fundamentals of maternal and child health. Visiting house-to-house, they provide contraceptive pills and condoms, make referrals for clinical procedures, and talk to their neighbors about the advantages of birth planning, the steps one can take to ensure a safe delivery, and the virtues of antenatal and post-natal care from trained providers. CBRHAs make referrals to clinics for emergencies, HIV/AIDS testing and treatment, childhood illnesses, and a myriad of other medical issues. Pathfinder CBRHAs have identified and counseled more than 600 women suffering from fistulae, and have referred them to hospitals where they can receive restorative surgery.

The curriculum Pathfinder helped develop to train CBRHAs has been adopted by the Government of Ethiopia for training all CBRHAs and Health Extension Workers across the country. Pathfinder projects have served 3.64 million new users of contraception through CBRHAs and referrals. This process is nothing short of revolutionary for women and families, who are beginning to recognize that they can have some control over their health and the welfare of their children.

Working with Leaders: Strength through Knowledge

Ethiopian society is highly structured, and great deference is paid to religious, political and civil leaders, teachers, and other prominent community members. Over many years, Pathfinder has developed trusting relationships with political and traditional leaders, from the national level down to the smallest communities. Pathfinder has developed a special civic cadre of leaders through the creation of Woreda (District) Advisory Committees (WACs), to advocate for

13 PRB, 2005. Women of Our World.

14 EDHS, 2005.

15 PRB, 2006. World Population Data Sheet.

reproductive health and other community needs at district and community levels. WAC members include government and religious leaders, members of the Women's Association, youth organizations, educators, and many others who act in concert to pave the way for public acceptance of family planning and changed traditions.

Religious leaders—both Orthodox Christian and Muslim—hold great influence over public opinion. Pathfinder has spent several years engaging religious leaders around issues of early marriage, family planning, and FGC. In workshops, the Bible and Koran are closely analyzed to prove that neither document forbids family planning or demands circumcision. Muslim leaders have gone on Pathfinder study tours to Egypt and Tunisia to confer with their counterparts in those countries. Today, a growing number of these leaders are ardent supporters of Pathfinder's work and tirelessly promote RH and FP to their congregations.

Addressing Harmful Traditional Practices in the Community

CBRHAs are the front line of social change, bringing new messages into communities through voices the people know and trust. For thousands of mothers and fathers, especially in remote areas, the CBRHAs are the first to explain the connection between health problems and early marriage, youthful childbearing, female circumcision, poor diet and hygiene, and other common practices. While introducing a woman to contraceptive options, the agent can also explain the medical dangers of having her daughter circumcised and discuss other reasons to break with tradition. She can point to a young woman who was allowed to stay in school, rather than marrying, attained a good job, and now contributes financial support to her family. Similarly, the CBRHA can be the first to reveal the causal connection between fistula and the mother's physical development.

Though the 1960 Ethiopian Penal Code explicitly prohibited removal of body parts, little effort was ever made to invoke the law as protection from circumcision. The recently adopted Ethiopian Criminal Code has made a number of harmful traditional practices, such as FGC, early marriage, widow inheritance, and forced marriage, punishable under the law. As with many other harmful traditional practices, Pathfinder has approached FGC as a problem linked to reproductive health and a woman's right to take ownership and care of her own body. Sound medical arguments against FGC, shared with women and men by respected members of their communities, have proven effective in changing attitudes and behaviors.



Above: This leader in the Orthodox Christian Church now advocates for family planning in his community, after having received training from Pathfinder.

photo: Margot Kane/Pathfinder International



Above: During the first six months he was a CBRHA, Ashebir's (above left) life was threatened many times as he visited farmers in their fields to promote family planning. People distrusted the idea, because having children denotes wealth and success.

Over time, he gained respect and people began to listen. Sani Muhammad was wary of his new bride (Birtukan) using family planning. They had only just met, and he didn't trust that she would remain faithful to him if she used contraception. But, gradually Ashebir convinced them to wait for children until they had saved some money. "At least we will have something for the child," says Sani. "I have seen my neighbors who have so many children that are dying or not growing. I should delay and space children, so we are waiting."

photos: Jennifer Wilder/Pathfinder International

As with early marriage, great success has been achieved by teaching religious leaders about the medical and psychological consequences of FGC. Accurate knowledge of the details and implications of the practice is limited among men. After learning of the enormous danger, pain, and suffering caused by FGC, religious leaders generally become outspoken opponents and carry this message to their congregations. Pathfinder also works with women who perform the cutting, training them in alternative means of earning an income, and inviting them to become community educators against FGC.

Changing the Law

Pathfinder and other civil society organizations have played leading roles in support of the Ethiopian Women Lawyer's Association, the federal Ministry of Justice, and religious and other civic groups seeking to introduce new laws to protect the rights of women. In 2001, the Ethiopian Revised Family Law and the new Ethiopian Criminal Code set the legal age of marriage at 18, although this fact remains unknown by much of the population. In addition, FGC, abduction, and rape have been explicitly criminalized.

Though law enforcement continues to lag far behind the written code, Pathfinder has trained over 1,200 judges, police officers, and prosecutors to recognize the many forms of gender-based violence and how to implement the new laws. Issues related to women's reproductive health and rights are included in the training. With new understanding of the reasoning behind women's rights, law enforcement personnel are now responding to requests for protection under the law. This strengthened enforcement not only provides assistance to individual girls and women, but indirectly promotes respect for the rule of law across the country.

With the law on their side, as well as CBRHAs, teachers, local women, and religious leaders, many Ethiopian girls are standing up for their rights. Many communities have established a requirement that the WACs must approve all marriages, which forces parents to prove a daughter's eligibility. Though some parents resist, many are now listening—moved by new insight into the high risk of fistulae or shocked by the high divorce rate among marriages between young girls and older men. Parents are also now witness to examples of girls who have completed their education, contributing to their family's income and leading very successful and satisfying lives.

Women, as well as their husbands, accept the view that under some circumstances, a man is justified in beating his wife. Refusal to have sex is a serious domestic offense and weighs heavily against women who try to negotiate condom use with a husband who might be HIV-positive. Pathfinder has again joined with the Ethiopian Women's Association and other civic groups to enhance enforcement provisions in domestic violence laws.

Women's status, including family and community roles, profoundly influences their ability to make decisions about their own health care and childbearing, which, in turn, affects their vulnerability to illness and HIV/AIDS.

Gender Equity Training

To build the capacity of Pathfinder and its partner organizations in addressing gender issues, the training and sensitization of project personnel and managers address gender, reproductive health, harmful traditional practices, and gender-based violence. IEC and BCC materials, including cue cards, radio messages, and videos, have been widely distributed throughout project communities. Community conversation sessions stimulate men and women to abandon harmful traditional practices and gender-based violence.

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Pathfinder has integrated the mainstreaming of gender equity awareness into all projects to ensure an equal distribution of resources and opportunities for both sexes. An important manual developed by Pathfinder/Ethiopia for this purpose, *Building Gender Mainstreaming into Reproductive Health, Family Planning, and HIV/AIDS Programs*, specifically focuses on the Ethiopian context, but has relevance to other countries as well.

Over the course of the project, nearly 12,700 partner organization staff have been trained in basic gender equality concepts, including reproductive health and rights, harmful traditional practices affecting women's health, women's position in society, legal provisions that protect women's reproductive health and rights, and related issues. Pathfinder, in partnership with Progynist,



Above: Aman Buli (left center) is a CBRHA in Tuse Town, Oromia. He has counseled more than 4,500 women on contraception and has convinced a large majority of his community to give up FGC by convincing religious leaders to preach against it. His message is clear: FGC causes serious complications during labor and sometimes death, and it can inflict lifelong pain. The religious leaders have no problem condemning the practice once they learn more about the facts from Aman.

photo: Jennifer Wilder/Pathfinder International



Above: These women are attending a regional celebration for zero tolerance of FGM. They carry sticks, given to them by their mothers when they married. According to Oromo tradition, if a woman is mistreated by her husband, she leaves her home carrying this stick, and she is joined by her neighbors carrying their sticks, and they all proceed to meet with the elders of the community to appeal for justice.

photo: Mengistu Asnake
Pathfinder International/Ethiopia

has established gender advisory committees in five government institutions, which will promote gender equality within their respective organizations. These efforts demonstrate Pathfinder's commitment to community-wide saturation with workshops, conversation and debate, thought-provoking public theatre, and other behavior change communication materials. Such comprehensive public education is informed by the understanding that deeply entrenched attitudes and gender roles can only evolve after a critical percentage of people in a community engage in the discourse. These widespread messages resonate immediately with many powerful girls and women, and a great many thoughtful and responsive men also take on leadership roles in debating and popularizing these new ideas.

Microcredit Programs for Independent Income

In Amhara, Addis Ababa, and Oromia, Pathfinder has trained and provided resources to women's associations that enable members to earn an independent income and develop business skills. Through these programs, more than 2,400 women have undertaken training in small-scale business management. Participants have learned vegetable and horticultural production and marketing, animal husbandry, pottery making, restaurant and tea shop management, and garbage collection and recycling. Women form their own savings and credit groups, supporting one another as they develop business skills and repay their loans. Six hundred participants received loans of the money generated through a revolving fund in the Oromia region,

while another group of commercial sex workers started small businesses outside the sex trade, as did 500 women who collect firewood around Addis Ababa. These women also received much-needed counseling, skill-building in resisting unwanted sex, and information on HIV and STIs, in addition to information on the importance of reproductive health and family planning services.

Transformational Results

It doesn't take long for a young girl to see her future life in a whole new light when presented with the possibility that, instead of marrying an older man she has never met, she can finish high school and perhaps even continue to university. She can earn her own money, and—finally—choose her own husband.

These girls do not stand alone. Throughout the course of the Women and Girls Empowerment projects, Pathfinder has reached out to more than 3.5 million people through public rallies promoting women's reproductive health and rights. A single such rally in Oromia, against gender-based violence, was attended by more than 30,000 people, including the Ethiopian Women's Affairs Minister, the region's vice president, and numerous other civic and religious leaders. In Addis Ababa, the mayor and key policy makers have attended public rallies organized by the Addis Ababa Women's Association, where these leaders publicly emphasized their commitment to end violence against women. Regular television and radio messages reinforce and expand upon these new social ideas.



Left: Fato Jemal and Bertalu Hossein used to be circumcisers, but with Pathfinder training, they both have found alternative sources of income and have become two of the strongest voices against FGC.

Bertalu did circumcisions for ten years, but recognized that women always had painful intercourse later and serious problems with childbirth. "The area is scarred by the cutting, so it cannot stretch in childbirth and there is tearing," she says. "It causes greater danger for HIV transmission as well."

Today, they both go house-to-house talking to women and discouraging them from having their daughters cut. Their efforts are making a difference. With more and more uncircumcised young women visible and not promiscuous (contrary to stereotype), they are less often seen as a threat to the community.

photo: Jennifer Wilder/Pathfinder International

The Power of Knowledge and Example

The enduring source of energy for this social transformation in Ethiopia comes from the girls themselves. Over the course of the two projects, 156 girls' clubs have been organized in schools. Girls learn about reproductive health, become conscious of the opportunities that come with education, and support one another when a parent proposes circumcision or marriage.

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Mentoring and Role Models

In recent years, Pathfinder has initiated a powerful mentoring program introducing young girls in isolated communities to strong and successful women, who have successfully defied traditional gender roles and can inspire others to do the same. More than 30 women leaders from around the country have visited groups of girls in remote areas, speaking about their own families, education, and careers, and offering themselves as examples of what is possible. Their chief goal is to inspire girls to remain in school and develop their own dreams and life goals.

Right: Abeth (center) is a CBRHA and traditional birth attendant. Sadia (left) and Kadija (right) were both engaged to older men when they were 12 and 13. Abeth persuaded Sadia's parents to leave her in school by pointing to the success of her own daughter, who has finished school and is now marrying a young man of her choice from the university. Sadia is now 15 and intent on finishing high school and going on to higher education.

Kadija's parents wanted her to marry a 30-year-old man she had never met. She is a good student and strongly wanted to stay in school. Abeth engaged the help of the director of the school, the local WAC, and eventually, the police, forcing Kadija's parents to back down. Now, at 16, she definitely plans to finish school.

Many members of the community leadership are coming together to protect the rights of these girls, as they themselves have become convinced about the importance of delaying marriage and educating women.

photo: Jennifer Wilder/Pathfinder International



More than 1,500 girls have completed another training program that prepares them as peer educators able to support, inform, and encourage their friends to pursue a future of their choosing. Gaining leadership and negotiation skills and learning about their rights and reproductive health needs, many peer leaders are deeply inspired to seek advanced education.

Throughout Pathfinder project regions, girls have started refusing to marry, despite parental demands. In Amhara and Tirgray alone, 12,950 marriages were canceled in 2004.

Based on the experience of girls in project communities, Pathfinder realized that staying in school involves more than avoiding marriage: education is also a financial challenge. To date, Pathfinder has funded scholarships for 122 girls, removing all financial barriers to completing high school. Many of these students were chosen for scholarship support because of their commitment to education and their personal struggles to escape engagement or marriage. These funds backed up their dreams, and through the awards, Pathfinder sent a strong message to parents and village members that these girls' dreams are both valid and attainable, and that educated daughters just might end up bringing new financial resources back to their parents.

Throughout Pathfinder project regions, girls have started refusing to marry, despite parental demands. In Amhara and Tirgray alone, 12,950 marriages were canceled in 2004. Some CBRHAs and peer educators act as village marriage monitors, using friends and other contacts to learn of

planned marriages or circumcisions. Girls now know that they can go to teachers, village elders, members of the Women's Association, or even the police for support. To have leaders within the village who will protect their personal rights is totally revolutionary for Ethiopian girls.

Conclusions and Recommendations

The roles played by men and women in a society, the rights of women to make decisions and act independently, and their treatment by the males around them all have an immediate influence on the quality of reproductive health care available to them. Demand for quality care must and will come from women, but resources are only as good as women's rights to use them. Gender responsive programs should recognize that practices such as FGC, early marriage, abduction, rape, lack of access to and control over resources, and the absence of decision-making and negotiation power all negatively affect women's reproductive health and rights. Because many women have limited control over their sexual lives and contraceptive use, integrating gender issues into reproductive health and HIV/AIDS program interventions becomes critical. Active male involvement in reproductive and family care-giving enhances responsible parenthood and reduces gender-based violence that affects women's reproductive health and rights.

To accelerate the process and realize Pathfinder's goal of gender equality, more work has to be done to provide women and girls with access to education and information. Women and girls continue to need economic support, as poverty exacerbates their isolation, and earning power enhances their community and family status. Progress also demands that entire communities take individual and collective measures against gender-based violence and harmful traditional practices.

By undertaking research on gender-specific reproductive health and rights, Pathfinder has been able to develop and implement effective evidence-based interventions. Developing widespread communications and harnessing innovative media techniques, when linked to scaling up these interventions, will enable us to reach even more women and girls across the country.



Above: Hawa Hassan is the proud owner of a new house that she paid for herself from the profits she made raising animals. She borrowed 2,000 Birr (about \$235) with which she bought a camel. By renting the camel out to carry heavy loads, she has been able to buy two cows, an ox, five goats, and build the new house. So far, she has also paid back 500 Birr.

This newfound independence in earning has also transformed Hawa's status in both her family and the community.

photo: Jennifer Wilder/Pathfinder International

Right: Scholarship beneficiaries who were victims of early marriage from Awabel Woreda in the Amhara region.

photo: Pathfinder International



Acronyms and Abbreviations

CBRHA	Community-Based Reproductive Health Agent
FGC	Female Genital Cutting
FP	Family Planning
HTP	Harmful Traditional Practice
RH	Reproductive Health
SNNPR	Southern Nation, Nationalities, and People's Region
WAC	Woreda Advisory Committee



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